

BEING WELL AND STAYING WELL IN THE HEART OF TASMANIA



A Plan for the Health and Wellbeing of
Central Highlands Residents 2020-2025

February 2020

THE CENTRAL HIGHLANDS

MANY COMMUNITIES WITH BIG HEARTS

The most beautiful and important area of Tasmania is the Central Highlands

The Central Highlands provides us with an abundance of beautiful areas for enjoyment and celebrations. Our Central Highlands area contains the highest altitude of Tasmania, as well as Australia's second largest freshwater lake, yingina/Great Lake and Australia's deepest freshwater lake, Lake St Clair.

Our Council area covers 798,241 hectares of land, including national parks and world-recognised wilderness heritage areas.

We are committed and dedicated to working together to improve the health and wellbeing of our Central Highlands residents. As Mayor, I have negotiated and signed a Memorandum of Understanding (MoU) with the Health Action Team Central Highlands (HATCH).

This MoU is a formalised agreement to work together to improve the health and wellbeing of Central Highlands residents. It acknowledges our current health services and the importance of networking with organisations to meet the needs of our community.

It is well known that the shortage of permanent health care professionals means that communities, particularly those which are small or non-metropolitan, like the Central Highlands wider community, are facing greater challenges in attracting and retaining health care professionals and services. I continue working toward addressing issues such as this.

There is an ongoing commitment from council, to contribute to our community health services groups, clubs, not-for-profit organisations and other programs.

My priority is the health and safety of our people across our Central Highlands community, and to continue to identify, support and implement programs and services to meet recognised needs.

The Central Highlands community have the opportunity to be part of the implementation of the Health and Wellbeing Plan 2020-2025.

Council and HATCH always welcomes fresh ideas and input from the community to make the Central Highlands a great place to live.

Loueen Triffitt, Mayor Central Highlands Council



OUR FIRST NATIENS PEOPLE

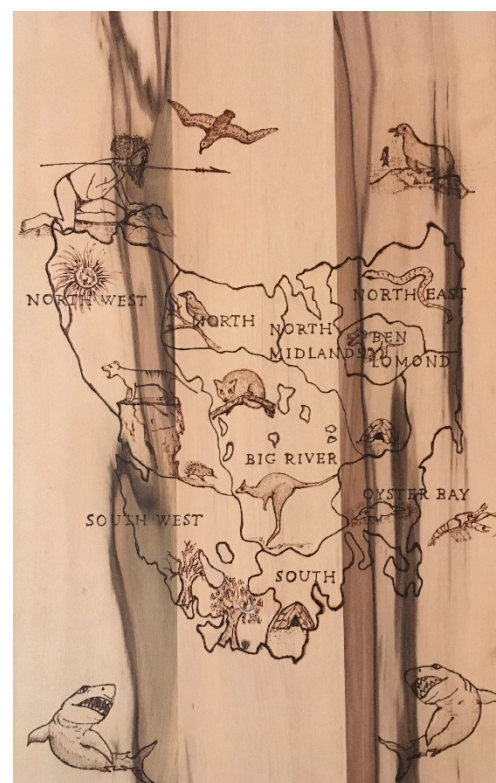
We acknowledge the Traditional Owners of this land, the Tasmanian Aboriginal people past, present and future.

The Central Highlands is the traditional land of the Big River tribe and their many bands who lived a tranquil life hunting and gathering. The Big River tribe was one of nine main tribes of Aboriginal people throughout Tasmania.

Nature provided an abundance of healthy foods, including medicines, which contributed to a healthy, disease-free lifestyle. Aboriginal people only kept and used what was necessary for life and were seen as a happy, content people.

British invasion forced a change in their diet, with processed foods including corned meats, flour and sugar contributing to a decline in Aboriginal people's health and wellbeing. Colonisation also drastically changed the hunter and gatherer lifestyle.

Many Aboriginal families still live in the Central Highlands and they continue to practice their culture, gathering traditional foods and medicines locally and across Tasmania.



ABOUT CENTRAL HIGHLANDERS - THE STATISTICS¹

The 2016 Census statistics provide vital information about Central Highlanders. Compared to other Tasmanians and Australians people living in the Central Highlands on average:

- ▶ Are older
- ▶ Often live alone or as a couple
- ▶ Earn quite a lot less
- ▶ Have lower educational attainment
- ▶ Are slightly less likely to be employed
- ▶ Are slightly more likely to volunteer.

This combination of factors is summarised in what's known as SEIFA – Socio Economic Indexes for Areas. It ranks all 574 Local Government areas in Australia according to their relative socio-economic advantage and disadvantage.

The Central Highlands SEIFA is 883. It ranks 57 among LGAs in Australia which means it experiences relatively higher levels of socio-economic disadvantage.

Communities that experience relative socio-economic disadvantage generally experience poorer health. In addition, rural and remote communities are also more likely to experience poorer health and lower life expectancy.

Central Highlanders are older and are more likely to live alone compared to Tasmania & Australia

- ▶ 2 in 5 (42%) are over 55 (TAS 34%, AUS 28%)
- ▶ 1 in 5 (20%) are under 19 (TAS 24%, AUS 25%)
- ▶ 1 in 20 (5%) are Aboriginal & Torres Strait Islander (ATSI) People (TAS 4.6%, AUS 2.8%)
- ▶ Median age is 50 (TAS 42, AUS 38); median age of ATSI People is 27
- ▶ Over half (55%) are couples without children & almost a third (31%) are couples with children (TAS 43/38%, AUS 38/45%)

Central Highlanders have considerably lower median weekly incomes compared to Tasmania & Australia

- ▶ \$467 personal – nearly 20% lower than Tasmania & 30% lower than Australia (TAS \$573, AUS \$662)
- ▶ \$1074 family – nearly 25% lower than Tasmania & nearly 40% lower than Australia (TAS \$1399; AUS \$1734)

¹ Australian Bureau of Statistics, 2017, *2016 Census QuickStats*, Australian Government

Fewer Central Highlanders have reached Year 12 and beyond compared to Tasmania & Australia

- ▶ Less than 1 in 10 (9%) have attained Year 12 (TAS 12%, AUS 16%)
- ▶ About 1 in 10 (9.5%) have a Bachelor degree or above (TAS 16%, AUS 22%)
- ▶ Just over 1 in 5 (22%) have a Diploma or Certificate III or IV (TAS 25%, AUS 25%)

Central Highlanders are slightly less likely to be employed full or part time & slightly more likely to be unemployed

- ▶ 85% are employed full or part time (TAS 87%, AUS 88%)
- ▶ 8% unemployed (TAS 7%, AUS 7%)
- ▶ Almost 1 in 3 (30%) parents with children are not working (TAS 25%, AUS 20%)
- ▶ The most common occupations are managers (24%), labourers (21%), & technicians (15%)
- ▶ Top industries of employment are specialised sheep farming, sheep-beef cattle farming, local government administration, specialised beef cattle farming, accommodation

Primary Health Tasmania analyses multiple data sources to produce a Community Health Profile for all LGAs in Tasmania. The Central Highlands Community Health Profile finds:

- ▶ Nearly 1 in 5 assess their health as fair or poor
- ▶ Just over 1 in 10 report high or very high psychological distress
- ▶ About 16% of people smoke
- ▶ About 15% of people don't engage in enough moderate or vigorous activity
- ▶ Over 9 in 10 don't eat enough vegetables
- ▶ 3 in 5 don't eat enough fruit
- ▶ About a quarter of people are rated as obese
- ▶ Nearly 2 in 5 consume alcohol at levels that cause lifetime harm.

Councils are well placed to promote public health by creating supportive environments to:

- ▶ reduce **S**moking
- ▶ improve **N**utrition
- ▶ reduce harmful **A**lcohol use
- ▶ promote **P**hysical activity
- ▶ reduce **S**tress.

Together these five factors are known as **SNAPS** risk factors. They impact wellbeing but improvements can be achieved through community-led, Council-supported action.

By reducing smoking, alcohol and stress, and increasing healthy eating and physical activity, the Central Highlands community will enjoy better health, fewer hospital admissions and longer lives.

ABOUT CENTRAL HIGHLANDERS - WHAT YOU TOLD US

While statistics are important, understanding the lived experience of Central Highlanders is essential. To help develop this Plan, a series of community conversations were held across the Central Highlands in 2019.

Several themes emerged from these conversations. This is what people told us.

Communication

Communities acknowledged there are already several communication channels in use across the Central Highlands. But Central Highlanders also told us:

- ▶ Often there are activities happening that people don't know about – getting the word out is an important part of ensuring people are engaged in their community
- ▶ Communication is very 'town-specific' with not a lot between towns and villages where there may be interesting activities going on
- ▶ Many don't have a computer and people need to be internet savvy to use Facebook
- ▶ Mobile coverage is problematic, for locals and tourists.

People and community

There is a strong community spirit in most communities across the Central Highlands. Central Highlanders told us:

- ▶ In a crisis there is support – people pulled together during the bushfires in 2019
- ▶ Various 'hubs' are the heart of community interaction – you can step into a community and choose how to participate, but some villages don't have a hub
- ▶ The community comes together around food
- ▶ Sometimes it's a struggle to get involved especially if you have kids at home
- ▶ There is some fracturing in some communities and newcomers are not always welcomed into communities.



Transport

Lack of transport was identified as one of the most important things affecting individual health and wellbeing. Road quality was also seen as a barrier to getting around safely. Central Highlanders told us:

- ▶ There are no or poor bus services and connections between towns across the Central Highlands and with Hobart
- ▶ They need easier access to transport for medical appointments – reliance on volunteer drivers and community transport can be problematic
- ▶ Some experience difficulties navigating transport services, especially parents with young children and older people.

Community support

In many conversations, people expressed concern about changes to the Rural Primary Health Service. Central Highlanders told us:

- ▶ They would like Council to appoint a community development officer to drive change
- ▶ A community development officer, even part-time, could support communities to

develop ideas and connect people to healthy activities

- ▶ A community development officer could tap the commitment of communities to their own health and wellbeing.

Volunteering

Volunteers were recognised as crucial to many activities and services across the Central Highlands. However, there was grave concern about the ageing volunteers and volunteer work falling to just a few – a new approach to attracting and retaining volunteers was needed. Central Highlanders told us:

- ▶ There has been a decline in volunteers over the last 20 years
- ▶ One person is often volunteering across several groups
- ▶ There is a need to mentor and bring younger volunteers through
- ▶ You should never stop asking and engaging to grow the volunteer base
- ▶ It's important to access opportunities like Work for the Dole
- ▶ Volunteers are vital to ambulance and fire services.

Footpaths and walking tracks

Central Highlanders want to be active, but they need some improved walkability in their towns and villages to help them. They told us:

- ▶ Wider, flat, gravel footpaths would promote a culture of walking
- ▶ Footpaths that encourage walking can help bring communities together
- ▶ Walking tracks and paths protect against heavy traffic passing through towns.

School/industry connections

Central Highlanders want to see their high schools better embedded in their communities, with more connections between local employment opportunities and education pathways. They told us:

- ▶ Higher skilled school graduates are needed, with technical skills and digital literacy
- ▶ School-based apprenticeships offer a promising pathway for local young people to get local jobs
- ▶ TAFE is important, and there needs to be more respect for practical, skills-based jobs
- ▶ There is a cultural disconnect between local employers and local job seekers – it's important to get locals and give them a go
- ▶ A wide range of opportunities are available for young people including hospitality, guiding (fishing and bushwalking), tourism, agriculture and horticulture
- ▶ Young people need to finish Year 12 wherever possible
- ▶ Lack of transport can be a barrier to employment and further education.

Young people

Young people are seen as the future of the Central Highlands, particularly given its declining population. It was said, *'Youth is what will keep our community going'*. Central Highlanders told us young people:

- ▶ Will provide us with fresh ideas
- ▶ Need to be encouraged to volunteer
- ▶ Need exposure to a youth leadership program
- ▶ Need to feel wanted
- ▶ A Youth Policy would be a good place to start.



Facilities

Central Highlanders recognise they have a range of quality facilities that are underutilised by communities. They considered this a 'lost opportunity' to contribute to health and wellbeing. They told us:

- ▶ Schools were a valuable resource in some towns
- ▶ The pool at Bothwell would be used more often if it was covered
- ▶ There are opportunities to 'ramp up' the Men's Shed in Hamilton and the Women's Shed in Bothwell
- ▶ The new community and football centre in Bothwell could be better used during the week
- ▶ There are some fantastic parks and playgrounds that have been developed for communities.

Social isolation

The dispersed nature of people across the Central Highlands makes social isolation a risk – while some come to get away from it all, social isolation is a major contributor to poor health and wellbeing. Central Highlanders told us:

- ▶ Older single people, particularly women are at risk
- ▶ Lack of easy transport contributes to social isolation
- ▶ Young parents are a risk group for social isolation
- ▶ A buddy system can support individuals in a way that is comfortable for them.



Health services

There was a united voice across all the conversations that health and aged care services were not meeting the needs of the community. Central Highlanders told us:

- ▶ They want better access to reliable health services, including allied health care, as a fundamental human right
- ▶ The withdrawal of the Rural Primary Health Service had a big impact on communities
- ▶ The new pharmacy in Bothwell has made a real difference
- ▶ Resources are needed to improve health literacy – a place-based approach, such as The Right Place, could help improve service knowledge and access
- ▶ It would be advantageous to map current services and provide a directory to local GPs
- ▶ A wellness practitioner could help support communities to stay healthy and well
- ▶ There is a shortage of aged care packages, and limits to service delivery, particularly in more remote parts of the Central Highlands
- ▶ The Health Action Team Central Highlands (HATCH) plays an important role in planning and facilitating health and wellness across the Central Highlands
- ▶ Service rules set by Governments don't always apply appropriately to rural and remote areas.



ADVANCING WELLNESS

The Central Highlands Health and Wellbeing Plan: *Being Well and Staying Well in the Heart of Tasmania* aims to prevent ill-health and build better health. It builds on strengths and provides ways for Central Highlanders and Central Highlands communities to connect with their own health and wellbeing, the services they need, and a healthy and well future.

The Plan builds better health and wellbeing across three domains:

1. Healthy Communities
2. Better Health
3. Future Wellbeing

Healthy Communities

Aim

To increase community leadership and continue Council support for community-led actions that build social support and address the SNAPS factors (smoking, nutrition, alcohol, physical activity and stress).

Central Highlanders care about each other. In the many diverse and distinctive towns and villages across the landscape, small groups of Highlanders get together to deliver practical action and build the social ties needed for good health. These small community-led actions advance wellness and help prevent physical and mental ill-health.

Measures of success

- ▶ Reduced smoking
- ▶ Improved nutrition
- ▶ Reduced harmful alcohol use
- ▶ Increased physical activity
- ▶ Reduced stress
- ▶ Increased volunteer participation.

Better Health

Aim

To increase knowledge of, and access to, services that are responsive, caring and supportive of good health.

Better services support people to get well and stay well – like transport connections to local primary health care, and in-home services for aged and chronic care. Better health also results from improved service system networks and service knowledge. Council has a leading role in advocating for, and supporting primary health services, access to specialist and aged care services, appropriate transport connections, and emergency response.

Measures of success

- ▶ Continuous GP practices at Ouse and Bothwell
- ▶ Increased in-home care services
- ▶ Current comprehensive service directory

Future Wellbeing

Aim

To ensure children and young people are invested in life in the Central Highlands and are connected to education and employment opportunities that capitalise on our natural assets.

By addressing the needs of infants, children and young people, and supporting education and employment across the Council area, there'll be a better future for everyone.

Measures of success

- ▶ Reduced youth unemployment rate
- ▶ Increased school retention to Year 12
- ▶ Increased activities for young children and parents

ACHIEVING OUR AIMS

This Plan forges an ambitious future for the health and wellbeing of Central Highlanders. It places communities at the centre and enables Central Highlanders to be well, get well and stay well.

The Plan will be implemented across the three domains – Healthy Communities, Better Health and Future Wellbeing. The Aim of each domain sets out what needs to be achieved overall, while the Actions support achievement of the Aims.

A low, medium, or high priority is assigned to each Action to recognise the limited resources of Council, the vastness and diversity of the Central Highlands, and the need to genuinely engage with communities. It is acknowledged that all the Actions in the Plan are important, but some will take longer to achieve than others.

The priority ratings are:

- ▶ HIGH – within one to two years
- ▶ MEDIUM – within two to three years
- ▶ LOW – within three to five years

The Central Highlands Council, in collaboration with specialist organisations and the community, will lead implementation of the Plan. Council's Health and Wellbeing Plan Working Group, led by the Mayor, in partnership with the Health Action Team Central Highlands (HATCH), will drive the Actions and report on achievements. Priorities will be implemented in a spirit of collaboration and cooperation with key organisations, including the Tasmanian Health Service, Department of Health and Human Services, Primary Health Tasmania, Corumbene, GP Practices and other health professionals active across the Central Highlands.



HEALTHY COMMUNITIES

AIM

To increase community leadership and Council support for community-led actions that build social support and address the SNAPS factors (smoking, nutrition, alcohol, physical activity and stress).

ACTION	ORGANISATION	PRIORITY
<ol style="list-style-type: none"> Engage a community development officer to build community leadership and facilitate tailored, community-specific programs that: <ul style="list-style-type: none"> ▶ Reduce smoking ▶ Increase healthy eating especially fruit and vegetables ▶ Reduce alcohol use ▶ Increase physical activity ▶ Reduce stress ▶ Increase use of local facilities 	Council	High
<ol style="list-style-type: none"> Implement Highlands Healthy Connect Project targeting healthy eating and physical activity 	HATCH THS	High
<ol style="list-style-type: none"> Connect older people with community activities to decrease social isolation and increase general wellbeing 	Council Community Service Providers	High
<ol style="list-style-type: none"> Prioritise supportive infrastructure that increases walkability and liveability of towns and villages in consultation with local communities 	Council	Medium
<ol style="list-style-type: none"> Examine ways to better publicise and increase knowledge of activities taking place in towns and villages across the Central Highlands 	Council HATCH	Medium
<ol style="list-style-type: none"> Partner with Volunteering Tasmania to increase volunteer participation in communities 	THS Volunteering Tasmania	High
<ol style="list-style-type: none"> Build bushfire resilience in local communities that recognises the unique location, risks, hazards and resources of each community 	Council Community Tasmanian Fire Service	High

BETTER HEALTH

AIM

To increase knowledge of, and access to, services that are responsive, caring and supportive of good health.

ACTION	ORGANISATION	PRIORITY
1. Implement the Community Education of Available Health Services Project to increase community knowledge and understanding of available health services	Council THS HATCH	High
2. Collaborate with Primary Health Tasmania and Corumbene Care to maintain and expand in-home care for chronic conditions	Council Corumbene PHT	High
3. Advocate for increased in-home care services that meet the needs of older Central Highlanders	Council	High
4. Continue to support, and where needed, subsidise general practice and allied health services at Ouse and Bothwell to ensure Central Highlanders get clinic- and home-based care based on need	Council	High
5. Advocate for increased bus services between Central Highlands' towns and between these towns and major centres (Hobart, Launceston) <ul style="list-style-type: none"> ▶ Continue and where possible, expand Council and community-based transport services 	Council	High
6. Identify and collaborate with an aged care training provider to deliver certified training locally to increase trained aged care support workers in the Central Highlands	Council PHT	Low
7. Lead development of a strategic services plan that maps health services and quantifies service type and demand as the basis for future service planning	Council	Low
8. Collaborate with Ambulance Tasmania, the Tasmanian Fire Service and Volunteering Tasmania to increase the number of trained volunteers to respond in emergencies	Council THS Volunteering Tasmania	High

FUTURE WELLBEING

AIM

To ensure children and young people are invested in life in the Central Highlands and are connected to education and employment opportunities that capitalise on our natural assets.

ACTION	ORGANISATION	PRIORITY
1. Engage with young people to develop a Youth Policy that increases their participation in, and commitment to, the Central Highlands	Council	High
2. Develop an information resource, together with a visiting employer and work experience program, to engage upper primary and secondary school students in local employment options and opportunities	Council Local business Department of Education	Medium
3. Develop and seek funding for an innovative collective impact project that engages young people in new ways in the life of the Central Highlands	Council	Low
4. Develop a whole-of-Central Highlands program for children and their parents that creates strong community connections between towns, drawing on previously successful programs and community-led activities	Council	Medium
5. Report on and renew the <i>Central Highlands Destination Action Plan 2016-2019</i>	Council Implementation Leadership Group	High
6. Support tourism infrastructure and development that align with the qualities, strengths and values of the Central Highlands	Council	High

BEING WELL AND STAYING WELL IN THE HEART OF TASMANIA



IMPLEMENTATION PLAN 2020-2022

for the Health and Wellbeing of
Central Highlands Residents 2020-2025

HEALTHY COMMUNITIES

AIM

To increase community leadership and Council support for community-led actions that build social support and address the SNAPS factors (smoking, nutrition, alcohol, physical activity and stress).

Action 1: Engage a community development officer to build community leadership and facilitate tailored, community-specific programs that: <ul style="list-style-type: none"> ▶ Reduce smoking ▶ Increase healthy eating especially fruit and vegetables ▶ Reduce alcohol use ▶ Increase physical activity ▶ Reduce stress ▶ Increase use of local facilities 			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Appoint a Community Relations Officer as part of existing role in council	Community Relations Officer appointed – Katrina Brazendale Recommend this position continue with the aim of a full-time position in the future	Council	Completed
2. Investigate and establish a Breakfast Club at Bothwell School	Spoke with Bothwell & Ouse Schools to understand how best to implement. Council to supply fruit & other food as required. Breakfast Club established in 2021 one day a week at each school	Council Schools HATCH	Completed & ongoing

3. Investigate options to implement Free2b Girls Program	Spoke with St Helens program founders to understand options for implementation and explored options for funding Decided this program was not the right fit for the Central Highlands. Will continue to look for other options for a girl's program	Council Schools HATCH	Completed Will look for other options
4. Plan and deliver Golf Day for young people in collaboration with older experienced golfers	Implemented Youth Golf Program in 2021 in partnership with Bothwell School Plan to start program again during warmer months. There is a new principal at the Bothwell School	Council Golf Club Bothwell School HATCH / HHC	Completed & ongoing
5. Develop Quit Smoking Program	Quit Smoking Workshop conducted in Ouse in June 2022 with Quit Tasmania Looking at strategies for a smoking cessation program in the Central Highlands	Council HHC	

Action 2: Implement Highlands Healthy Connect Project (HHC) targeting healthy eating and physical activity			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Continue to support Bothwell Wellness Group (BWG)	Partnered with BWS to implement the Live Well Live Long (LWLL) Program in Bothwell in 2021 & 2022	HATCH BWG	Aug 2021 Aug 2023
2. Implement the Highlands Healthy Connect (HHC) Project Plan	HHC Project includes a variety of activities and programs supporting increased physical activity, healthy eating and better mental health Refer HHC evaluation report	HATCH	2019 - 2022

Action 3: Connect older people with community activities to decrease social isolation and increase general wellbeing			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Engage with CHATS to investigate bringing program to the Central Highlands	CHATS is a Commonwealth funded program that does not include the Central Highlands No action to date. Follow up in 2022	HPC (THS)	
2. Provide social activities for older people in the area	Provided through HHC. Programs include the Connect Coffee Club, Ladies Connect, Men's Eating with Friends, Yoga Program & Connect Walking Group	HHC	Completed & ongoing
3. Support the Social Hub at the Central Highlands Community Health Centre	Meet with coordinator of Social Hub to support their new program/s	Katrina THS - Tracey	Aug 2022

Action 4: Prioritise supportive infrastructure that increases walkability and liveability of towns and villages in consultation with local communities			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Identify walkability project for consideration in the 2021-22 Council budget	Not progressed Refer UTAS Walkability Report (Ouse) 2021		

Action 5: Examine ways to better publicise and increase knowledge of activities taking place in towns and villages across the Central Highlands

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Continue to improve communication across the Central Highlands for residents	Investigate process, add to and regularly update "What's On" on Council website & Facebook page Highlands Digest, email, word of mouth, council newsletter, notice boards	Council HATCH	Ongoing

Action 6: Partner with Volunteering Tasmania to increase volunteer participation in communities

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. HATCH Volunteer Program developed with Volunteering Tasmania as part of the Highlands Healthy Connect Program	6-month Volunteer Program in partnership with Volunteering Tasmania completed in 2021 Volunteers inducted and volunteering for roles for HATCH	HATCH	Completed 2021
2. Volunteers inducted and trained	Completed – volunteer positions filled for meal delivery program, driving, op shop, playgroup & general volunteering	HATCH	Ongoing

Action 7: Build bushfire resilience in local communities that recognises the unique location, risks, hazards and resources of each community

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Meet with Emergency Management Coordinator to explore options	Council continues to work with Tas Fire Service & other relevant organisations Working on improving mobile phone coverage and internet services for the Central Highlands	Council	Ongoing

BETTER HEALTH

AIM

To increase knowledge of, and access to, services that are responsive, caring and supportive of good health.

Action 1: Implement the Community Education of Available Health Services Project to increase community knowledge and understanding of available health services			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Conduct audit of defibrillators in the Central Highlands	Conduct audit of defibrillators in the Central Highlands Defibrillators have been placed at council offices in Ouse & Bothwell	Council	2022
2. Provide First Aid Training	Courses conducted in Bothwell & Hamilton 2021 Council contributed funds through community grant	THS HATCH	Completed & ongoing
3. Conduct Mini Health Expos	On hold due to COVID Live Well Live Long Program (10 weeks) held in Bothwell in 2021. Another program planned for June 2022 (postponed due to difficulty engaging service providers)	THS HATCH	LWLL Completed
4. Support Meal Delivery Program	Provided financial support to assist in reimbursement of volunteers	HATCH	Ongoing

Action 2: Collaborate with Primary Health Tasmania and Corumbene Care to maintain and expand in-home care for chronic conditions

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Provide support to Corumbene in their delivery of in-home care	Regular discussion with Corumbene through the HHC program Corumbene provided presentations at LWLL Programs Corumbene have commenced a monthly physiotherapy clinic in Ouse	THS Corumbene	Ongoing
2. Explore options with Primary Health Tasmania to provide appropriate care to Central Highlands residents needing care	Ongoing	PHT Council	Ongoing

Action 3: Advocate for increased in-home care services that meet the needs of older Central Highlanders

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Map aged care providers operating across the Central Highlands	Not achieved to date		

Action 4: Continue to support, and where needed, subsidise general practice and allied health services at Ouse and Bothwell to ensure Central Highlanders get clinical and home-based care based on need

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Engage with and support the Bothwell General Practice	Ongoing	Council HATCH	Ongoing
2. Engage with and support the Central Highlands General Practice in Ouse	Dr Swart finished at CHGP in October 2021 due to State Government Vaccination Mandate. Moreton Group took over practice in late 2021 and provided GPs until April 2022. No GP as of June 2022. New committee recently established to investigate options for GP service in Ouse with council representation	Council HATCH	

Action 5: Advocate for increased bus services between Central Highlands' towns and between these towns and major centres (Hobart, Launceston)

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Advocate for improved transport services across the Central Highlands		Council	
2. Continue and where possible, expand Council and community-based transport services		Council	

Action 6: Identify and collaborate with an aged care training providers to deliver certified training locally to increase trained aged care support workers in the Central Highlands

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Liaise with the South-Central Workforce Coordinator to identify and develop aged care support worker training	Not achieved to date	Council	

Action 7: Lead development of a strategic services plan to map health services and quantifies service type and demand as the basis for future service planning

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1.	Not achieved to date	Council	

Action 8: Collaborate with Ambulance Tasmania, the Tasmanian Fire Service and Volunteering Tasmania to increase the number of trained volunteers to respond in emergencies

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Partner with Emergency Management Coordinator and the Emergency Management Committee to understand barriers to new volunteer recruitment and identify solutions to address them	New ambulance paramedics & ambulance based in Ouse 2021	Council	

FUTURE WELLBEING

AIM

To ensure children and young people are invested in life in the Central Highlands and are connected to education and employment opportunities that capitalise on our natural assets.

Action 1: Engage with young people to develop a Youth Policy that increases their participation in, and commitment to, the Central Highlands			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Review youth policies from other organisations and distil key messages	Commenced review of youth policies	Council	
2. Explore options with HATCH to undertake consultation with young people in the Central Highlands	Has not commenced to date Council successful in application to the Premiers Fund for Children & Young People to develop the Ouse Recreation Ground. This will include Basketball area, remote car track and shaded area with seating	Council HATCH	
3. Draft Policy framework based on policy review and consultation outcomes	Has not commenced		

Action 2: Develop an information resource, together with a visiting employer and work experience program, to engage upper primary and secondary school students in local employment options and opportunities

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Consult with South-Central Workforce Coordinator and Bothwell High School to identify and develop desired resource	Not commenced	Council	

Action 3: Develop and seek funding for an innovative collective impact project that engages young people in new ways in the life of the Central Highlands

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1.			

Action 4: Develop a whole-of-Central Highlands program for children and their parents that creates strong community connections between towns, drawing on previously successful programs and community-led activities

ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Map activities across the Central Highlands	Include full listing in next rates mail-out to residents and in What's On section of website / Highland Digest		

Action 5: Report on and renew the <i>Central Highlands Destination Action Plan 2016-2019</i>			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Consult with Destination Southern Tasmania regarding development of a new Action Plan	No longer relevant	Council	Completed

Action 6: Support tourism infrastructure and development that align with the qualities, strengths and values of the Central Highlands			
ACTIVITIES	PROGRESS	BY WHOM	BY WHEN
1. Encourage and consider tourism development that aligns with the values of the Central Highlands	Council undertook advertising campaign in Mercury	Council	Completed & ongoing
2. Promote the Central Highlands to tourists	Ongoing		

HATCH – Health Action Team Central Highlands

HHC – Highlands Healthy Connect Project

THS – Tasmania Health Service



HIGHLANDS HEALTHY CONNECT EVALUATION

Evaluation of a targeted healthy eating and physical
activity program funded under the Healthy Tasmania
Fund Large Grants 2019

Central Highlands, Tasmania





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EXECUTIVE SUMMARY

1. Highlands Healthy Connect (HHC) is a state Government-funded program that delivers activities across the Central Highlands focused on physical activity, healthy eating and building social connections. It received \$178,000 under the Healthy Tasmania Funding Grants in 2019.
2. Consultation with community, partners and stakeholders identified the following priority activities for investment under the HHC funding:
 - Shared meals
 - Cooking classes
 - Innovative exercise opportunities (pop-up classes)
 - Community walks building friendships
 - Supporting community gardens
 - Volunteer recruitment and support
 - Training locals (e.g. Fitness Leaders)
 - End of project event (e.g. fun run)
3. The Project Application identified five Outcomes as measures of success:
 1. **Outcome 1:** Increased opportunities to make healthy food choices
 2. **Outcome 2:** Increased physical activity
 3. **Outcome 3:** Increased social connections and community interactions
 4. **Outcome 4:** Increased community participation through volunteering
 5. **Outcome 5:** Skill development and training provided to community members.

The evaluation assessed achievement of each of the Outcomes using the three evaluation questions described in the Application:

1. How much did we do?
2. How well did we do it?
3. Is anyone better off?
4. Thirteen programs (13) were delivered towards achievement of Outcome 1: *Increased opportunities to make healthy food choices*. Surveys of participants found high levels of satisfaction; evaluator interviews found effective program delivery and tangible healthy eating-related behaviour change.
5. Fourteen programs (14) were delivered towards achievement of Outcome 2: *Increased physical activity*. Surveys of participants found high levels of satisfaction; evaluator interviews found effective program delivery and tangible physical and mental health benefits experienced by participants.
6. Eleven programs (11) were delivered towards achievement of Outcome 3: *Increased social connections and community interactions*. Surveys of participants found high levels of satisfaction; evaluator interviews found not only these specific social programs but also



the healthy eating and physical activity programs made a significant contribution to, and impact on, social connections and community interactions.

7. Progress towards Outcome 4: *Increased community participation through volunteering* was achieved through a volunteer program delivered in partnership with Volunteering Tasmania. The program of activities resulted in better understanding of best practice engagement and management of existing volunteers, and recruitment of new volunteers.
8. Some progress was made towards achievement of Outcome 5: *Skill development and training provided to community members*, however there is potential to expand community capacity with further investment in training local people.
9. The evaluator identified seven HHC Strengths:
 - Affordable, accessible programs delivering tangible outcomes
 - Leadership
 - Building on community and institutional strengths
 - Partnerships and people
 - Significant social interaction
 - Increased health literacy
 - Local employment
10. The evaluation found that HHC is an effective program delivering most outcomes to a high standard. Participants expressed high levels of satisfaction – their main concern was its continuation. In planning future programs of this nature, consideration could be given to:
 - Long-term funding
 - Increased promotion
 - Partnerships with Local GPs
 - Succession plan for Tracey Turale (Health Promotion Coordinator)
 - Development of Ash Cottage as a Neighbourhood House
 - Mobilising hard-to-engage cohorts.
11. HHC has met all the criteria set out in the original Funding Application, all but one to a high standard. There is further work to be done on sustainability of the activities over the long-term. Key contributors to sustainability are the continuing role of the Health Promotions Coordinator and development of Ash Cottage as a Neighbourhood House.



BACKGROUND TO THE PROJECT

Health Action Team Central Highlands (HATCH) applied for and was granted \$178,000 funding for *Highlands Healthy Connect Project* under the Healthy Tasmania Fund Large Grants 2019. HATCH was one of 11 groups funded in the first round of the Grants which ranged in value from \$65,526 to the full eligible amount of \$200,000.

HATCH is a volunteer community-led organisation which supports community participation in the development, delivery and review of health services to meet current and future health and wellbeing needs of the Central Highlands community. HATCH's specific purpose in applying for Highlands Healthy Connect (HHC) funding is to 'create a healthier community that is more active, makes better food choices, participates in community life, and has developed new skills and positive social connections.'¹

The Central Highlands Council sponsored the project as HATCH is a non-incorporated entity. As Sponsor, Council holds, and is responsible for, acquittal of funds.

HHC builds and expands on the success of projects previously delivered in the Central Highlands including Highlands Food Connect, Eating with Friends and Community Walk Program. It targets people of all ages and addresses barriers to participation by delivering realistic local solutions.

Consultation with community, partners and stakeholders identified the following priority activities under the HHC funding:

- Shared meals
- Cooking classes
- Innovative exercise opportunities (pop-up classes)
- Community walks building friendships
- Supporting community gardens
- Volunteer recruitment and support
- Training locals (e.g. Fitness Leaders)
- End of project event (e.g. fun run)

Other important project components identified during consultation included a volunteer program, training local people, creating activities suited to the communities, reaching people that are hard to engage, and creating social connections.

About health and wellbeing in the Central Highlands

Overall health and wellbeing

The 2016 Census revealed that, compared to other Tasmanians and Australians, people living in the Central Highlands on average:

- Are older

¹ Healthy Tasmania Fund Large Grants 2019, *Healthy Tasmania Fund Large Grants Application HTF2019L00010 From Tracey Turale - DRAFT*



- Often live alone or as a couple
- Earn quite a lot less
- Have lower educational attainment
- Are slightly less likely to be employed
- Are slightly more likely to volunteer.

The Central Highlands' SEIFA² of 958 ranks it the 57th lowest out of 566 LGAs in Australia. This means the municipality experiences relatively higher levels of socio-economic disadvantage. Communities that experience relative socio-economic disadvantage generally experience poorer health. In addition, rural and remote communities are generally more likely to experience poorer health and lower life expectancy.

Primary Health Tasmania analyses multiple data sources to produce a Community Health Profile for all LGAs in Tasmania. The Central Highlands Community Health Profile finds:

- Nearly 1 in 5 assess their health as fair or poor
- Just over 1 in 10 report high or very high psychological distress
- About 16% of people smoke
- About 15% of people don't engage in enough moderate or vigorous activity
- Over 9 in 10 don't eat enough vegetables
- 3 in 5 don't eat enough fruit
- About a quarter of people are rated as obese
- Nearly 2 in 5 consume alcohol at levels that cause lifetime harm.

Central Highlands Health and Wellbeing Plan

In February 2020, the Central Highlands Council published its first health and wellbeing plan – *Being Well and Staying Well in the Heart of Tasmania*. The plan aims to prevent ill-health and achieve better health by building on strengths and providing ways for Central Highlands communities to connect with their own health and wellbeing, the services they need, and a healthy and well future. The Plan identifies three domains to achieve better health and wellbeing:

1. Healthy Communities aims to increase community leadership and Council support for community-led actions that build social support and address smoking, nutrition, alcohol, physical activity and stress.
2. Better Health aims to increase knowledge of, and access to, services that are responsive, caring and supportive of good health.
3. Future Wellbeing aims to ensure children and young people are invested in life in the Central Highlands and are connected to education and employment opportunities that capitalise on our natural assets.

HHC is critical to achieving the ambitions of the health and wellbeing plan. It addresses healthy eating and physical activity through a wide variety of activities aimed at a range of

² Socio Economic Indexes for Areas 2016



ages and ability, and seeks to increase social interaction, inclusion and participation in volunteering, and higher levels of health literacy. It is highly decentralised, delivered to a small population (about 2200 people scattered across more than 8000 square kilometres) in the five main towns of Ouse, Hamilton, Bothwell, Miena, and Ellendale.

EVALUATION METHODOLOGY

The Project Application identifies five Outcomes as measures of success:

Outcome 1: Increased opportunities to make healthy food choices

Outcome 2: Increased physical activity

Outcome 3: Increased social connections and community interactions

Outcome 4: Increased community participation through volunteering

Outcome 5: Skill development and training provided to community members.

This evaluation assesses progress toward achieving the Outcomes between January 2020 and December 2021 against three evaluation questions:

1. *How much did we do?*

This question records the number of activities and number of participants against each of the five Outcomes.

2. *How well did we do it?*

This question explores how well activities were delivered (process evaluation) and how they were received by participants. It is based on participant satisfaction gathered through post-activity surveys, interviews and focus groups with facilitators and participants of selected activities.

3. *Is anyone better off?*

This question reports the results achieved by participating in the activity. It was mainly assessed through interviews and focus groups with facilitators and participants of selected activities under each Outcome, with some input from project reports.

To understand progress towards the Outcomes, and to assess Strengths and Future Considerations, the evaluator:

- Reviewed and analysed project development documents, the Funding Agreement, and Project Reports.
- Met with HATCH and the Central Highlands Council.
- Conducted mainly in-person, and some virtual/telephone conversations with key stakeholders and participants in project activities.
- Drafted a report for review by HATCH and the Project Coordinator.
- Finalised the report based on feedback and submitted it to HATCH (this report).

It is important to note the evaluation considers data and lived experiences from January 2020 to December 2021. Some activities were impacted by COVID19 restrictions; funds not spent as originally planned due to the pandemic are contributing to some continuation of activities to December 2022.



OUTCOME 1: INCREASED OPPORTUNITIES TO MAKE HEALTHY FOOD CHOICES

How much did we do?

HHC funded a wide range of healthy-eating-related activities in a variety of locations for a variety of ages between January 2020 and December 2021. A summary of the activities and participation in them is presented at Figure 1.

ACTIVITY	TOTAL SESSIONS	TOTAL PARTICIPANTS	LOCATION
GLCC Cooking Workshops	10	138	Miena
Fermentation Workshop	1	9	Ouse
Pear Preserving Workshop	1	6	Ouse
Dietitian Presentation	2	45	Bothwell & Ouse
Leap Health Dietitian Clinics	3	19	Ouse
Diabetes Workshop	3	11	Bothwell
Live Well Live Long	10	80	Bothwell
Ouse School Fruit Project	Daily during school term	Available to 100% of students	Ouse
Ouse School Garden	8 days	85% students	Ouse
Cooking at Ouse School	5	68	Ouse
School Breakfast Club	Daily during school term	Available to 100% of students	Bothwell & Ouse
School Health Day	1	70	Bothwell
School Health Day	1	60	Westerway
Other Community Nutrition Food Safe Magnets		Distributed to 20 clients	

Figure 1: Summary of Healthy Eating-related Activities and Participant Numbers

How well did we do it?

Post Participation Surveys

The Project Coordinator distributed surveys to participants of selected activities to gauge levels of satisfaction. The following results were reported:



- 80% who attended the Dietitian Presentation reported 10/10 satisfaction and 20% 9/10 satisfaction with presenter Ngaire Hobbins.
- Three participants at the Great Lake Community Centre (GLCC) Cooking Workshops at Miena reported 10/10 satisfaction; one participant 9/10; and one 7/10.

Evaluator Interviews

The facilitator and participants in the GLCC Cooking Workshops, and the Principal and Business Manager at Ouse District School were interviewed by the evaluator.

Great Lake Community Centre Cooking Workshops

The GLCC Cooking Workshops were very popular and demand for spaces outstripped supply. About 75% of participants were men living permanently in Miena; a handful attended from other towns in the Central Highlands. The program facilitator, Jocelyn Tatnell, organised a series of classes based on an international theme; these classes were supplemented by specialist workshops run by volunteers including two game sausage-making workshops.

The facilitator adopted a flexible and practical approach by:

- Shifting the classes out of the kitchen when COVID19 arose and setting up single and double cooking stations – some cooking with cupboard basics, and others a more advanced class. Each participant brought their own gas burner and fry pan.
- Allowing people to follow recipes in a flexible way, showing how things can be done ‘with a little bit of cheating’ and how they can be varied to individual tastes.
- Going back to first principles, providing a meal that could be repeated at home.
- Using available ingredients, recognising that fresh ingredients can be hard to source in the Central Highlands.
- Showing how easy it is to cook for one with appropriate portion sizes.

The Community Centre was an important contributor to the success of the classes. It is required to have food for 100 people on hand at any time, and participants were able to source ingredients from this resource as long as it was replaced.

Ouse District School

Staff at Ouse District School know that the contents of kids lunch boxes matter – what kids eat impacts their learning, and when they eat sugary food, their sugar levels spike, hunger returns and they’re no longer able to concentrate on school work. They also understand that a lot of households don’t eat fruit or cook vegetables – they are expensive and hard to get in good condition. It was remarked: ‘fruit and vegetables are expensive here; it’s easier to get a 12-pack of chips from the Reject Shop’.

HHC supported the school to establish healthier eating habits using a multi-pronged, intergenerational approach:

- The breakfast club was supported by volunteers.
- Fruit was provided to encourage awareness and enjoyment of healthy eating options.



- A nutritionist was engaged to deliver cooking lessons and build skills with both parents and children.
- Healthy food was incorporated into lessons to increase understanding of where food comes from.

Both students and parents were exposed to new and different food experiences – zucchini was hidden in spaghetti bolognaise, tacos included salad vegetables, and beetroot and pumpkin cakes provided a different vegetable experience. One parent brought a grandparent to teach some cooking fundamentals. One of the teachers remarked: ‘we try to give our kids as much experience as we can – real food, real life’.

Hard-to-engage participants

The GLCC Cooking Class participants did not know each other prior to the classes and noted:

- The community connections were especially important to new arrivals – ‘people are generally new and it’s a fabulous focus point for us’.
- A young man with a disability was welcomed into the class and provided with support by the GLCC Coordinator.
- One gentleman quietly joined the class – ‘he doesn’t cook and doesn’t want to cook but he quietly joins for the friendship’.

Some families with children attending Ouse District School live a long way from the town, for example, Waddamana (50 kms), Bronte Park (66 kms), and Tarraleah (38 kms). These often hard-to-engage parents were encouraged to arrive at school earlier and share breakfast or stay on for cooking classes.

Is anyone better off?

The GLCC Cooking Class participants reported meaningful behaviour change. These included:

- Being taught to buy a variety of vegetables that will last longer, for example, cabbage, beans and legumes.
- Being able to replicate healthy meals on their own at home.
- Using fresh vegetables rather than cans, for example, tomatoes.
- Changes in mindset about using fresh ingredients.
- More effective shopping by looking at different products in the supermarket and understanding how to cook with them.

Participants also emphasised the importance of the social interaction: ‘This cooking thing... it’s all about mental health, friendship and getting people together’. (See Outcome 3).

The Ouse District School’s healthy eating activities have increased:

- The ability of children to concentrate in school.
- Knowledge of healthy food and where it comes from.
- Parents’ skills in cooking with vegetables.
- Children, parents and grandparents working together with a focus on healthy eating.

OUTCOME 2: INCREASED PHYSICAL ACTIVITY

How much did we do?

HHC funded a wide range of physical activity-related options in a variety of locations for a variety of ages between January 2020 and December 2021. A summary of activities and participation is presented at Figure 2.

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ACTIVITY	TOTAL SESSIONS	TOTAL PARTICIPANTS	LOCATION
Community Walking Group	16	292	Various
Freedom Health & Wellness Gym Group	34	166	New Norfolk
Freedom Health & Wellness Online Group	10 per week during COVID lockdown (= 440+ sessions)	17 registered completing 2–6 sessions per week then 10+ weekly	Virtual
Freedom Health & Wellness Exercise Classes Mondays	41+ (weekly Jul–Dec 2021)	658	Bothwell
Freedom Health & Wellness Exercise Classes Wednesdays	45+ (weekly Jul–Dec 2021)	628	Bothwell
Exercise Strength & Balance	30	157	Ouse & Hamilton
Exercise in the Park	10	48	Ouse
Come & Try Exercise	1	8	Ouse
Come & Try Exercise	1	7	Hamilton
Great Lake Health Expo Exercise Class	1	30	Miena
Great Lake Exercise Class	1	3	Miena
Yoga	32	239	Ouse & Hamilton
Kid Fit	2	8	Bothwell
Other			
Exercise Bike Hire		1	
Aerobic Stepper Hire		3	

Figure 2: Summary of Physical Activity-related Activities and Participant Numbers

How well did we do it?

Post Participation Surveys

The Project Coordinator distributed surveys to participants of selected activities to gauge levels of satisfaction. The following results were predominantly reported across two reporting periods – July–December 2020 (Period 1) and January–June 2021 (Period 2). Reporting of survey results changed in the period July–December 2021 and are difficult to compare:

- 100% of the Community Walking Group participants reported 10/10 satisfaction with the program (Period 1) and 56% reported 10/10, 11% 9/10, 11% 8/10 and 22% 7/10 overall satisfaction (Period 2). All participants found the program useful and reported exercise, walking and getting out and meeting new and old friends was most important to them.
- 100% of the Freedom Health and Wellness Gym Group participants reported 10/10 satisfaction with the program (Periods 1 & 2). They reported an increase in cardio fitness, strength and flexibility.
- 86% of the Freedom Health and Wellness Online Exercise class participants reported 10/10 satisfaction and 14% reported 8/10 overall satisfaction with the program. Participants reported the online platform helped them to stay fit and healthy during COVID19 restrictions. They reported they enjoyed the variety of classes, the flexibility to do them anytime, and the ease of access for people who worked or didn't have transport.
- 74% of the Freedom Health and Wellness Bothwell class participants reported 10/10 satisfaction, 13% 9/10 and 13% 7/10 overall satisfaction with the program (Period 1) and 77% 10/10 and 23% 9/10 overall satisfaction (Period 2). All participants found the program useful and reported increased fitness, improved general health, feeling better mentally and the variety of the exercises were valuable. Being connected to their community, and improvements in confidence, were also reported in Period 2. Participants reported they would use these skills in everyday life (work and home) and continue to improve and maintain their fitness levels.
- 85% of the Exercise in the Park participants reported 10/10 satisfaction and 15% reported 9/10 overall satisfaction with the program (Period 1) and 86% 10/10, 16% 9/10 and 16% 8/10 overall satisfaction (Period 2). All participants found the program useful and reported improvements in their fitness, especially balance and flexibility; some reported they now found it easier to put on socks and shoes and do the gardening; older participants reported improvement in balance and lower body strength; others reported exercising more and enjoying the friendship.
- 100% of students enrolled in the Bothwell School Golf Program attended 100% of the time, and all attended the final competition. Five students continue to play out-of-school hours on a regular basis.
- 67% of Yoga participants reported 10/10, and 33% 9/10 overall satisfaction (Period 2). Participants reported decreased stress and anxiety, improved balance, and ability to relax. In the July–December 2021 period, overall satisfaction improved.

Evaluator Interviews

The evaluator interviewed the instructor and participants in the Freedom Health & Wellness Exercise Classes held in Bothwell on Mondays, and the instructor and participants in the Yoga classes held at Hamilton and Ouse.

Freedom Health & Wellness Exercise Classes – Bothwell Mondays

Freedom Health & Wellness is a small business that runs a gym in New Norfolk. It describes itself as having ‘a professional and highly skilled team of health and wellness specialists who have the common goal of helping you make sustainable changes to your health and fitness and educating you about the benefits of choosing to lead a healthy lifestyle.’³

The Freedom Health & Wellness Classes held in Bothwell each Monday morning are led by a locally trained instructor whose training was funded by another exercise group active in Bothwell (Bothwell Wellness Group). Classes are also run by the same instructor on Wednesday evenings.

There is no gym in Bothwell so HHC funded basic equipment to support delivery of a circuit class for the 10-15 regular participants and Central Highlands Council funded new mats. Participants are encouraged to work to their own capability and there is a children’s corner that allows parents of young children to participate. Participants enjoyed the group nature of the classes and described them as fun. Ages range from 30- to 60-year-olds, and with HHC support, a ten-class pass costs \$50; without that support, the cost would be \$110.

The availability of a local instructor and the subsidised classes have been game changers for the Bothwell community. New Norfolk, where Freedom is based, to Bothwell is a costly three hour round trip for an instructor, and driving in winter can be hazardous.

Yoga Classes

Women’s Health Tasmania (WHT) was engaged to deliver yoga classes in Ouse and Hamilton. It has proved a mutually beneficial arrangement – WHT has a statewide brief but has had difficulty getting out into the regions. The organisation reported that the Central Highlands engagement ‘keeps us connected to women across the State’ and means WHT reaches a demographic that forms part of their funding.

In the period of this evaluation, three 10-week programs have been delivered with classes in both Ouse and Hamilton including at the Ouse District School; the school welcomed the use of their facilities. The program is continuing in 2022.

The majority of attendees are women, with three men attending; they are mostly aged 50+, with a handful of ‘younger ones’. WHT is only able to deliver classes during office hours which prevents those with Monday to Friday, regular hours jobs from attending. It was also noted as being ‘tricky’ for parents of young children to attend. The program is run on a week-day morning and averaged eight participants at the classes.

A 10-week program costs \$1500 to deliver and involves the WHT instructor travelling from Hobart. Participants pay \$5 per week which is collected by the instructor, with the balance

³ <https://www.freedomhealthandwellness.com/>, accessed 25 April 2022



paid by HHC. To keep the program running into 2022, WHT reduced their cost by \$500 – the instructor prepares classes in her own time and some administrative costs are absorbed.

Participants reported that the yoga instructor, Jen Van-Achteren, was an important part of the yoga experience. She was described as encouraging, observant, a very good teacher – ‘she’s very switched on, very mindful, very careful’... ‘It doesn’t matter how good or bad you are’. The group expressed great appreciation for the classes – ‘it is a privilege to have the classes’; ‘we are lucky to have the classes’

Online classes at Ouse District School were considered during the school’s summer recess but the arrival of the Omicron variant and new COVID19 restrictions prevented it being implemented.

Hard-to-engage participants

The scheduling of the exercise classes in Bothwell at two different times – Monday morning and Wednesday evening – allowed more people to attend, including local farming families who experience some isolation. It was suggested that the classes were ‘good for women on farms... it bridges them with the town people... a chance to reconnect.’ Some participants were new to Bothwell and appreciated the opportunity to meet people in the town.

Similarly, the yoga classes attracted people new to the area experiencing social isolation and word of mouth was an important factor in attracting participants. One attendee was an individual who ‘struggles to get out of bed but sings all the way home (from the class)’; another was an individual with mental health issues who has benefitted from the classes. Women experiencing social isolation were described as ‘a lot happier and more connected’... ‘it’s important for me to meet people I wouldn’t normally meet – there are a lot of interesting people in the area... there are actually like-minded people around you’.

Is anyone better off?

Freedom Health & Wellness Exercise Classes - Bothwell Mondays

The Bothwell exercise class participants reported they noticed a difference in their wellbeing each month they attended and generally everyone was improving. Benefits reported include:

- Improved fitness, endurance, flexibility, strength and mobility
- Weight loss
- Reduction in back pain
- Improved mental health
- Social connections, especially for new arrivals – the group has coffee after classes.

Yoga Classes

Yoga participants reported a range of physical and mental health benefits. They noted that it ‘suits older people who aren’t fit’. Benefits included:

- Improved neck rotation (improving driving safety), balance, muscular strength, flexibility



- Increased confidence
- Improvements to physical health conditions
- Improvements to mental health
- Better sleep
- Making new friends.

Participants were effusive in their praise of the classes. They shared: 'It's the social aspect. I've met some lovely people and we go and have a coffee afterwards and a walk'... 'We have a lots of laughs (that) I wouldn't have got anywhere else'... 'It's about connections to country'...'My only other social outing is going to the tip'.

The instructor also made a practice of staying behind after classes to chat: 'I hung around after and provided the opportunity to chat. If an issue comes up, I engage in active listening and suggest referrals.' This resulted in support for individual participants to address a range of personal issues including family violence. The local doctor and practice manager also referred individuals to the classes.

OUTCOME 3: INCREASED SOCIAL CONNECTIONS AND COMMUNITY INTERACTIONS

How much did we do?

The HHC activities presented under this Outcome have been identified as having a more specific social focus, but the social value of all activities was a critical component to their success. A summary of activities and participation between January 2020 to December 2021 is presented at Figure 3.

ACTIVITY	TOTAL SESSIONS	TOTAL PARTICIPANTS	LOCATION
Connect Coffee Club	14	147	Ouse
Men's Eating with Friends	8	71 men	Various
Bothwell Women's Group Shared Lunch	1	10 women	Bothwell
Ladies Day	12	122 women	Ouse
Community Walking Group including a Shared Lunch	16	292	Various
Pop-Up Playgroup	1	35 parents & children	Ouse
Pop-Up Playgroup	1	100 parents, children & teachers	Westerway
Pop-Up Playgroup	1	9 parents & 10 children	Bothwell
Playgroup	22	26 adults & 32 children (Period 1) 15 adults & 12 children (Period 2)	Ouse <i>*Note: Numbers are individuals, not total attendances across sessions.</i>
Playgroup	12	17 individual adults & 13 children (Period 2)	Bothwell <i>Note: See above</i>
Girls Connect	6	18	Ouse

Figure 3: Summary of Social Connections and Community Interactions – Activities and Participant Numbers

How well did we do it?

Post Participation Surveys

The Project Coordinator distributed surveys to participants of selected activities to gauge levels of satisfaction. The following results were predominantly reported across two reporting periods – July–December 2020 (Period 1) and January–June 2021 (Period 2). Reporting of survey results changed in the period July–December 2021 and are difficult to compare:

- 70% of participants in social activities reported 10/10 satisfaction, 23% 9/10 and 7% 8/10.
- 100% of Eating with Friends participants reported satisfaction with the outings, and that social contact and friendship were the most important elements.
- Six participants in the Bothwell and Ouse Playgroups rated their satisfaction at 10/10, one 9/10, two 8/10 and one 7/10 (% satisfaction is not available).

Evaluator Interviews

The Playgroup coordinator for Southern Tasmania and one parent participant were interviewed by the evaluator. Five women were interviewed at Ladies Day at Ash Cottage, Ouse (no survey results are available).

Playgroup

Playgroup Tasmania had been looking to establish playgroups in the Southern Midlands and Central Highlands since 2019 and it was the connections with HHC Project Coordinator and the school at Bothwell that helped make them a reality. The collaborative process started with pop-up playgroups in Ouse, Bothwell and Westerway, with contributions from other service providers including Communities for Children and Family Food Patch.

Communities for Children also funded a Playgroup Pack, and families were booked into Ash Cottage for 20-30 minute sessions to come and pick up a Pack. It was noted that 'a lot of families came out of the woodwork... Tracey (Project Coordinator) didn't know about them either'. These sessions also provided an opportunity for people to share quite personal stories and experiences – some very challenging stories emerged.

Collaboration has continued to be a feature of Playgroup delivery – it has included support from the HHC Administrative and Project Assistant (Catherine), Central Highlands Council, Bothwell District School and Playgroup Tasmania which reported that 'Catherine and Tracey were big pushers... without them it wouldn't have happened'.

Bothwell seems to have particularly benefitted from the introduction of the Playgroup – the District School 'was very supportive... they were excited and proactive'. Ouse District School was less enthusiastic; families were less willing to engage and the School felt the Playgroup was a competitor to their Launch into Learning program.

However, Playgroups at both Bothwell and Ouse are regular features during school terms and include active play and healthy snacks; parents also cook new things to share with the group. They are supported by the HCC Administrative and Project Assistant.



Ladies Days and Connect Coffee Club – Ash Cottage

Ash Cottage is an important institution in the Central Highlands – it is a combination of the building, activities that happen there, and the warmth and welcome from the people that staff it – Tracey Turale and Catherine Watson.

Ladies Days and Connect Coffee Club at Ash Cottage are opportunities for women in particular to get together, but men may also attend the coffee mornings. The Ladies Days generally have a craft focus, with activities ranging from making spoons, cards, soap and candles, to macrame, preserving fruit and making sauerkraut. Coffee is skilfully made by a local volunteer. The costs are covered by HHC and some attendees bring food to share. It is a combination of healthy food and some treats.

During COVID19 Ash Cottage was closed and greatly missed by the participants of Ladies Days and Connect Coffee Club: 'I noticed when COVID hit, it felt dead... I felt isolated. I hadn't seen people for ages and it wasn't good'...'You really feel cut off – what's the point of living here? It has been awful.'

Hard-to-engage participants

As reported above, the advent of Playgroups across the Central Highlands brought people 'out of the woodwork' and stimulated important conversations that otherwise may not have eventuated. Playgroup was seen as an important connector for families – 'Playgroup is more about parents... they stay for themselves.'

'Just to get out of the house' was reported as important for participants. Playgroup Tasmania noted one participant who was experiencing 'a real sense of isolation; her husband was out and she was stuck at home with children... she was so desperate to talk to someone.'

Similar experiences were shared by Ladies Day participants: 'It gave me something to do after my husband passed away... it's given me input to the general community.'... 'I could get to know people around the district'... 'If we didn't have it, the community would fall apart.'

Is anyone better off?

Playgroup

One interview was conducted with a Playgroup participant who reported:

- The importance of socialisation for her shy child
- Encouraged her child to play with different things at home
- She enjoyed the variety of activities offered.
- As a new arrival it gave her social connections.

The Project Coordinator also reported that 'the establishment of Playgroup in Ouse was an unexpected positive outcome for the project. The Playgroup is well supported and attended



by families that had not previously been identified in the area. It also resulted in a partnership and ongoing support in the area by Playgroup Tasmania.⁴

Ladies Day and Connect Coffee Club

Participants emphasised the importance of these events to their wellbeing. They described:

- Meeting and making new friends
- Sharing knowledge
- Chatting, relaxing, sharing personal concerns
- Companionship – ‘a reason to get spruced up’; ‘I would probably go silly – what would we do?’
- Being appreciated

A point of note is that participants in all the programs evaluated emphasised the importance of the social interaction. Examples include:

- The cooking sessions at the Great Lake: ‘This cooking thing... it’s all about mental health, friendship and getting people together’.
- Exercise class in Bothwell: ‘It’s brought people together... great for people new to town’.
- Yoga in Ouse and Hamilton: ‘It’s important for me because you meet people you wouldn’t normally meet’.
- Playgroup Bothwell: ‘Being local is important – it’s about socialising with others’.

⁴ Healthy Tasmania Fund Round 1 – Large Grants Program, *Six Month Service Delivery Report 1 July to 31 December 2020*

OUTCOME 4: INCREASED COMMUNITY PARTICIPATION THROUGH VOLUNTEERING

How much did we do?

HHC partnered with Volunteering Tasmania (VT) to develop a sustainable Volunteer Program. VT reviewed HATCH's volunteer management practices and provided customised advice and support on recruitment, induction, training, and retention of volunteers. The Volunteer Program was fully operational in the first half of 2021 with dedicated volunteers trained and checked under the new policies and procedures.

While work commenced early in the project, COVID19 impacted implementation of the Program in the first half of 2020; further development resumed in the second half of 2020 and included:

- Coordinated in-person and online recruitment and information sessions for current and potential community volunteers
- A Volunteer Strategic Plan and Vision Statement
- Volunteer position descriptions
- Policies and procedures
- Volunteer, and Volunteer Manager, Manuals
- Volunteer insurance for HATCH.

A summary of activities and participation is present at Figure 4.

ACTIVITY	TOTAL SESSIONS	TOTAL PARTICIPANTS	LOCATION
Volunteer Manager Coaching Sessions	5	10	Zoom
Volunteer Appreciation Lunch	1	20	Hamilton
Volunteer Recruitment and Information Session	2	18	Zoom/Ouse
Volunteer Training	1	9	Ouse

Figure 4: Summary of Increased Community Participation through Volunteering

How well did we do it?

HHC funding enabled engagement of a dedicated VT project officer one day a week for six months, membership of VT for a year, access to their Volunteer Management System (VERA), and various resources. The project was co-designed with HHC and resources tailored to HHC/HATCH needs.



VT sought feedback from their involvement in the project; VT reported that their project officer and HHC Project Coordinator, Tracey Turale connected regularly online for meetings and coaching sessions to identify the needs of the project, and to work through the Action Plan designed to improve HATCH's volunteer management practices. VT reported that Tracey was always very well prepared for these meetings and coaching sessions, and information and input sought from the HHC team was readily available to the VT project officer.⁵

The VT project officer developed a number of customised resources for HHC including a Volunteer Handbook and Volunteer Managers Handbook with a suite of policies, procedures and templates.

Workshops, including out-of-hours workshops, were co-delivered to existing and potential volunteers which resulted in better understanding of best practice engagement and management of existing volunteers and recruitment of new volunteers.

VT reported the partnership with the HHC team worked well.

Is anyone better off?

In its January to June 2021 Report, the HHC Coordinator reported that the Volunteer Program is fully operational with a core group of dedicated volunteers. One volunteer has taken responsibility for helping with yoga and strength and balance programs; others assist with Playgroup, the community walking group, social activities, and cooking workshops.

Two women from Hamilton have become dedicated volunteers for HATCH – one has a background in cooking and she facilitated preserving and fermentation workshops; the other has taken over responsibility for the Op Shop and Little Pantry.

It is noted that there are still some challenges in getting volunteer parent engagement for Playgroups.

Volunteers' Case Studies

Yvonne

After retiring from work, Yvonne said it took her six months to get out of work mode and slow down. She connected with HHC when she started participating in a lot of the activities like yoga, strength and balance programs, the community walking group, dietitian clinics, cooking workshops and social activities. She soon realised her driving skills would add value to the project and she started to volunteer for HHC. 'I realised I could drive the bus – I absolutely love it.'

Yvonne reports feeling fitter, doing everyday activities better, making great friends, learning new skills, and sleeping better. She loves to volunteer and help others.

⁵ Volunteering Tasmania July 2021, *Highlands Healthy Connect: Feedback from Partners/Stakeholders*

Catherine

Volunteering to employment - Catherine Watson's story⁶

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"I'm not really sure how it all started in the beginning or how it came about, but I know that I'm grateful it did.

In about 2016 I attended a mindful eating program in Ouse where we shared a meal at the end of the program and I thought it was nice to connect with people in the community that I wouldn't normally socialise with (I'd recently left my job to become a mum again and missed the social interaction). I think that's how the idea of Ladies Day was started.

I started helping as a volunteer but was never actually given a title, I was just there to help. Monthly Ladies Day started getting busier which meant more organisation such as catering and entertainment (craft or specific topics the Ladies were interested in). Examples were 'Driving to the Road Conditions' or Macramé.

I also started volunteering with the Food Connect Program and cleaning Ash Cottage. Ash Cottage was doing well, and we were engaging with a lot of people in the Central Highlands.

We were then successful to receive a grant which meant we needed admin and assistance with programs. The position became available so I applied and lucky for me, I was successful. After I started working as part of the HATCH team other programs were started such as Yoga, Exercise in the Park, Freedom Exercise Group and two Playgroups. I was asked if I would like to coordinate Playgroup, obviously I couldn't turn down the opportunity and am delighted to say we have two very successful playgroups. We were able to find an additional 20 families in the area that we hadn't known about before. Not all the families attend at one time, but we have some regulars that come fortnightly, and families will attend when they are not busy. We find that is nice when we have around five families at a time, because as you could imagine the kids get very excited when there are other children to play with and new toys and activities."

⁶ This is an excerpt from a case study supplied by Highlands Healthy Connect Project Coordinator



OUTCOME 5: SKILL DEVELOPMENT AND TRAINING PROVIDED TO COMMUNITY MEMBERS

How much did we do?

HHC funded a local woman, Vanessa Cooper, to undertake Certificate III in Fitness under the auspices of Freedom Health & Wellness. The owner of the business indicated that it would not have been possible for her to fund the training at the cost of \$3000.

How well did we do it?

The funding from HHC and the partnership with Freedom Health & Wellness enabled the training and support to proceed. Vanessa trains at Freedom three times a week and is mentored by the owner. She is reported to be 'enthusiastic and growing in confidence and keen to conduct exercise classes in the local area'.

Is anyone better off?

Freedom Health & Wellness has indicated there will be employment opportunities available when Vanessa is qualified, allowing local delivery of fitness programs. 'For us it means we've got a trainer in a new location,' the owner said.

Local Fitness – Vanessa Cooper's Story

"I live in Hamilton with my young son. Last year I was interested in doing my Certificate 3 in Fitness and was approached by Tracey Turale from the Health Action Team Central Highlands (HATCH). I was asked if I would be interested in doing the course and that they would be willing to fund it and help support me.

This is a great opportunity for me to learn new skills and get some more active programs running in the Central Highlands as we don't have easy access to gyms. Some of us have to travel 45 minutes plus to the nearest gym.

Getting exercise classes started up will not only be great for improving health but also a chance for people to get together and have a chat and do something fun.

Completing this course will help me gain employment within the local community and gaining employment means I can provide for my young son."

PROJECT STRENGTHS

The evaluator identified seven HHC Strengths:

1. Affordable, accessible programs delivering tangible outcomes

A key characteristic of HHC is the number and variety of programs offered in a range of locations across the Central Highlands. More than 40 activities or programs were offered across the five main towns serving all parts of the community.

Both subsidised and free programs were devised to encourage increased healthy eating, physical activity, and social interaction; they were tailored to different ages and to the characteristics of different communities. A few examples include:

- Two different exercise classes were offered in Bothwell each week to cater for different capabilities and availability – one morning and one evening.
- Pop-up Playgroups tested interest in Ouse, Bothwell and Westerway before regular Playgroups were established in Ouse and Bothwell.
- Golf for Bothwell District School students proved popular, with programs running over several terms. The program has added new younger blood to the Golf Club, got students out doing exercise, and achieved more consistent school attendance.
- Many of the participants in the yoga class agreed that more demanding physical exercise was too difficult and saw yoga as a good option for strength and flexibility.
- Parents were engaged at the Ouse District School, learning how to cook vegetables in new and creative ways with the help of a nutritionist.
- Men are often a hard to reach demographic – both Men's Eating with Friends and the cooking classes at Miena, which attracted a majority of men, helped to address healthy eating and social connections.

Many residents of the Central Highlands experience relatively higher levels of socio-economic disadvantage which is associated with poorer health. Rural and remote communities are also more likely to experience poorer health and lower life expectancy. Making the HHC programs affordable or free allowed wider participation over longer periods leading to more sustainable behaviour change.

As the review of HHC against the five Outcomes shows, there were significant improvements in health and wellbeing reported by participants in the program. These included weight loss, more flexibility, strength, and balance, better mental health and knowledge of key contributors to good health. Some expressed more confidence in having meaningful conversations with their GP, and reported less reliance on pain relief. There was also some social prescribing by local GPs.



By far the most common reflection was the importance of connections with people and the making of new friendships – ‘socialising and enjoying’. Social interaction is explored later in this section.

2. Leadership

HATCH is an important leader in community health and wellbeing in the Central Highlands. The organisation has been operating for 13 years, is connected to community and their issues and concerns, and has been successful in achieving grant funding including HHC. It is led by a Central Highlands Councillor, Anita Campbell, who also sits on the Primary Health Tasmania Advisory Board.

HATCH is recognised by the Central Highlands Council as an important conduit to the community: ‘People won’t tell us but will tell HATCH what their issues are’, a senior manager commented.

Tracey Turale, HHC Project Coordinator, who is employed by the Tasmanian Health Service as Health Promotion Coordinator and is a committee member of HATCH, is the linchpin of HHC. It was suggested: ‘It is not a job for her (Tracey), it is a way of life’.

Without exception, Tracey’s leadership was identified as pivotal to the program’s success. Her contribution to HHC was variously described as:

- Having the contacts
- Having knowledge of grant processes
- Easy to work with
- Good at communicating
- A great connector – good at getting other people in her network to help out
- Creative, open to opportunities
- Devoted, giving her all, responsive and clear
- Trusted.

Tracey Turale is a resident of the Central Highlands and understands the differences between the communities – the communities were described as ‘unique and often insular where it takes a long time to break in and build trust’. Tracey has achieved widespread community trust, built connections with key influencers in the various communities, and brought in appropriate health practitioners and providers who deliver services tailored to community need.

Tracey’s strong leadership also ensured an effective response to COVID19 restrictions; she was agile and dynamic in redeploying funds, renegotiating services, and stretching funding so that community needs were met for as long as possible.

While Tracey is a strength to the program, building succession will be important to avoid sole person dependency. This issue is taken up under Future Considerations.



3. Building on Community and Institutional Strengths

The project would not have achieved what it has achieved without the support of institutions and community leaders. The list below is representative and not exhaustive:

- Council provided important support by:
 - Auspicing the Healthy Tasmania grant (HATCH is not an incorporated body), providing administrative support and ensuring compliance.
 - Employing the Administrative and Project Assistant funded by HHC.
 - Allowing free use of some Council buildings and bus, and providing some staff time.
- Ouse District School provided a room for yoga classes, storage for equipment, and offered use of videoconferencing facilities if needed.
- Bothwell District School provided support and facilities for the Bothwell Playgroup, and partnered in the delivery of the Bothwell School Golf Program.
- The Bothwell Golf Club brought volunteers and support to Golf Program.
- Ash Cottage is an essential part of the Central Highlands community and provided the venue for coffee clubs and ladies days.
- Bothwell Wellness Group were key partners in the delivery of the Live Well Live Long program and their support to training a fitness instructor provided the ability for exercise classes to be delivered locally.
- The Great Lake Community Centre Coordinator supported the delivery of the cooking classes and provided access to ingredients.

4. Partnerships and People

Service providers have played a key part in providing appropriate and tailored services to communities. They all valued the opportunity to be part of HHC:

- Central Highlands Council is the sponsor of HHC and provides important support to the program as described above.
- Corumbene Care is the provider of the Rural Primary Health program, which was formerly delivered by the THS. A previously informal partnership between Corumbene and HATCH was formalised through the project and the organisation became involved with shaping HHC from the start. They participated in the first workshop where the fundamentals of the program were considered and attended all the formation meetings across the Central Highlands. It was a meeting of minds: Corumbene commented that it is 'rare to find two different funded programs with the same aims and direction'.

The goal alignment set the foundation for mutually beneficial program delivery, with Corumbene providing complementary funding for Exercise in the Park, a 10-week strength and balance program, three diabetes workshops in Bothwell in



partnership with Diabetes Tasmania, and a dietitian from Leap Health to conduct consultations with clients.

- Volunteering Tasmania (VT) played a critical role in building the volunteer capability in the Central Highlands. The role and effectiveness of VT is described at Outcome 4.
- Playgroup Tasmania had been working to establish groups in the Southern Midlands and Central Highlands before COVID19 hit. The connection with HHC led to pop-up Playgroups, the establishment of regular Playgroups at Bothwell and Ouse, and collaboration with Communities for Children who funded resource packs for parents. Central Highlands Council also provided free facilities. Playgroup Tasmania commented: 'we wouldn't achieve what we are achieving without collaboration.'
- Women's Health Tasmania (WHT) provided the yoga instructor as a gentler exercise option. WHT committed to traveling to Ouse and Hamilton weekly to deliver the classes, and reduced their costs to enable continuation of the program. The program is now in its fourth iteration. Working with the Project Coordinator, the instructor has also provided information about, and connections to, other services, for example, a physiotherapist to address incontinence and pelvic floor issues.
- Freedom Health & Wellness has a long-standing relationship with Tracey and shares similar values – a commitment to improving physical and mental health through affordable services.

Earlier attempts at outreach exercise classes from New Norfolk proved expensive; now Freedom employs a Bothwell-based instructor and will employ a new Ouse-based instructor once her HHC-funded training is complete. This arrangement ensures both continuity of classes and quality assurance. HHC, Central Highlands Council and Freedom Health & Wellness have co-funded equipment and HHC provides a subsidy to support the cost of the program.

The evaluator found strong alignment of organisational and personal values across the spectrum of instructors and partner organisations. The quality and commitment of people delivering programs was exceptional, from those delivering programs described above to the facilitators of cooking and other classes ,and information sessions. Other local individuals have also played an important part.

It is notable that a wide range of organisations have participated in, and/or collaborated on projects with HHC. These include the Royal Flying Doctor Service, Communities for Children, Rural Alive and Well, Pulse Youth Health, Oral Health Services, Salvation Army, School Canteen Association, and Family Food Patch.

5. Significant Social Interaction

Research shows a clear link between social relationships and health outcomes; the quality and quantity of social relationships affect mental and physical health, health behaviour, and mortality risk.

The degree to which the HHC physical activity and healthy eating programs resulted in positive social outcomes was unexpected and significant – the increased social interaction and development of highly valued new friendships was reported by many program participants interviewed for the evaluation.

Beyond the personal relationships established through the program, two other important aspects emerged – one was some softening of boundaries between towns with some participants travelling to classes outside their town of residence; and the other was bringing people new to the area into local networks. HHC 'got people talking who were not talking before'.

6. Increased Health Literacy

Improving health literacy was a strong theme running through HHC. Key initiatives included:

- Nutritionist-led cooking classes at Ouse District School
- One-on-one appointments with a dietitian leading to improved quality of diets
- Facilitated cooking classes at the GLCC which increased skills in cooking healthy meals to the right portion size, as well as better shopping choices
- Delivery of information by Diabetes Tasmania
- Delivery of Live Well Live Long program with the Bothwell Wellness Group – a 10-week program with different speakers on different aspects of health including diet, bowel health, home care and aged care.

7. Local employment

HHC has supported the local employment of an Administrative and Project Assistant and fitness instructor in Bothwell. Another instructor will gain local employment once she has completed her training.

In addition, the facilitator of the cooking classes at GLCC has secured local employment with Communities for Children and will be based at Ash Cottage.



FUTURE CONSIDERATIONS

Overwhelmingly, HHC is an effective program delivering most outcomes to a high standard. People expressed high levels of satisfaction with the program, even feeling lucky to have it. Their main concern was its continuation.

In planning future programs of this nature, consideration could be given to:

1. Long-term funding

Funders generally now recognise that it is important to have longer term funding to achieve the behaviour changes needed for better health. Providing funding over a sustained period will not only achieve behaviour change, it will also provide opportunities for greater awareness of the project and more security for service providers.

The Central Highlands Council also recognises that its revenue base doesn't allow it to fund and manage programs like HHC. While it has published a health and wellbeing plan, the officer responsible for delivery of the plan has other full-time duties. HHC is also a core component of the plan and its demise will weaken the ability of Council to deliver the plan's outcomes.

2. Increased promotion

The Project Coordinator and Administrative and Project Officer worked hard to spread the word about the programs. They engaged with local influencers, used text messaging, the Highlands Digest and word-of-mouth to get the message out.

There is scope to increase participation in many of the activities – some participants expressed disappointment that more people weren't taking up the opportunities offered.

While acknowledging getting the word out is a challenge, it is worth considering other options to mobilise more individuals in the community, which would deliver even greater benefits. One of those options might be by investing in a social media campaign.

3. Partnerships with Local GPs

More collaboration with General Practitioners was seen as a potential area to strengthen the project. A service provider lunch afforded allied health and other professionals to share experiences and provide insights into each other's skills and expertise. Adding GPs to this mix with mutually reinforcing referrals would add value to the project. Some progress was made on this front with the social prescribing of yoga classes.

It is recognised that stability of GP services is currently problematic in many parts of rural Tasmania.



4. Succession Plan for Tracey Turale

Concern was expressed that the THS may not fill the health promotion role currently filled by Tracey Turale should she ever move to another position. The health promotion role in the community is vitally important and the role has been pivotal in gaining funding, delivering HHC, and growing the engagement of people in their own health and wellbeing.

5. Development of Ash Cottage into a Neighbourhood House

Communities Tasmania describes Neighbourhood Houses as 'organisations offering accessible, locally-driven programs which respond to community needs and provide a soft-entry point to community and service systems.'⁷

Ash Cottage is a central hub that is an important meeting place for the Central Highlands community and would be the ideal location for a Neighbourhood House. Repurposing Ash Cottage to a Neighbourhood House would provide a more sustainable approach to the gains made by HHC and would leave the community less exposed to short-term funding.

6. Mobilising Hard-to-Engage Cohorts

The variety of programs, and reach of HHC into the five Central Highlands communities, provided accessible, affordable programs for residents. It was noticeable, however, that despite the smorgasbord of activities, few people aged 18-30 and 31-49 engaged. While there is no silver bullet to attracting participation from these cohorts, investing in understanding their barriers to participation and ways to address those barriers would be useful for future project development.

⁷ https://www.communities.tas.gov.au/disability/neighbourhood_houses_program, accessed 26 April 2022

CONCLUSION

In its application for funding, HATCH responded to a range of specified criteria. The criteria were:

- Rationale
- Reach
- Access
- Collaboration and support
- Sustainability
- Effectiveness
- Community champion
- Outcomes and evaluation
- Value for money.

HHC has met all these criteria, all but one to a high standard. There is still work to be done on sustainability, but the project has started to lay genuine foundations for the future.

The rationale for HHC is clear and based on a good understanding of the dispersed and distinctive nature of communities experiencing comparatively high levels of socioeconomic disadvantage – the Central Highlands is one of the top five most disadvantaged communities in Tasmania.⁸ It recognises access to fresh and affordable food is limited, there are barriers for people to participate in physical activity, and many experience social isolation.

The project reached into the five main towns of the Central Highlands providing flexible options and achieved its targeted levels of participation. The project recognised that what works in one area may not be successful in another. For example, it was difficult to get traction for an exercise class in Miena, but the cooking classes at GLCC were very popular and effective.

The project provided a wide range of options for people with different capabilities – in cooking expertise, levels of fitness, interests, motivations, age, and so on. The local knowledge of the Project Coordinator and the HATCH committee contributed to ensuring access to activities for both individual communities and 'communities of interest', for example Men's Eating with Friends, Ladies Days, and the community walking group. Providing affordable transport with the support of Council and volunteers, also allowed more people to participate.

One of the strengths identified in this evaluation are the ways in which collaboration and support have been provided by service providers and community partners. Shared values and commitment to community health and wellbeing characterise the success of relationships in the delivery of the project.

Some sustainability is likely to be achieved through the commitment of volunteers, training of local fitness instructors, and the networks that have formed around specific activities, for example, practicing yoga, playing golf, and continuing fitness classes. Further sustainability

⁸ Quoted in Healthy Tasmania Fund Large Grants 2019, Application HTF2019L00010 From Tracey Turale from <http://dote.org.au>, *Dropping Off the Edge Report: Persistent and Multilayered Disadvantage in Australia*, Jesuit Social Services: Melbourne



may be achieved with increased local training of instructors. Ash Cottage also plays a continuing role in sustaining community interest in health and wellbeing.

The project has been effective in delivering the Outcomes it set out to achieve, almost all to a high standard. It has increased knowledge and skills around healthy eating and achieved some behaviour change; resulted in improved physical and mental health for some; reduced social isolation; and increased the number of volunteers. There is an opportunity to explore how more can be done to train locals.

HHC has a committee of community champions in HATCH, as well as the leadership and support of THS Health Promotion Coordinator Tracey Turale. Both HATCH and Tracey have demonstrated unwavering commitment to the project. Resources have been managed with care, and the program extended for a further year with the reallocation of funds saved during COVID19 restrictions. Programs that were originally free have also been extended with a small co-contribution from participants.

In summary, HHC has served the Central Highlands well. Its continuation will provide increased levels of health and wellness, and its demise will be felt by a wide variety of individuals.

APPENDIX

Interviewees

Project Coordinator, Tracey Turale

Administrative and Project Assistant, Catherine Watson

General Manager, Central Highlands Council, Lyn Eyles

Deputy General Manager, Central Highlands Council, Adam Wilson

Community Relations Officer, Central Highlands Council, Katrina Brazendale

Project Officer, Volunteering Tasmania, Kate Crawford

Primary Health Coordinator, Corumbene Care, Ellie O'Brien

Community Services Manager, Corumbene Care, Michelle Garland

Business Owner, Freedom Health & Wellness, Stacy Dolliver

Fitness Instructor, Freedom Health & Wellness Bothwell, Karen Beasant

Health Worker, Women's Health Tasmania, Jen Van-Achteren

Southern Coordinator, Playgroup Tasmania, Nicki Kastner

Dietitian, Leap Health, Emma Wuestner

Business Manager, Ouse District School, Tash Farrow

Senior Teacher, Ouse District School, Wendy Holdsworth

Councillor, Central Highlands Council & Bothwell Golf Club volunteer, Jim Poore

Cooking Facilitator, Jocelyn Tatnell

Participant Groups

Ladies Day, Ash Cottage, Ouse

GLCC Cooking Class, Miena

Exercise Group, Mondays, Bothwell

Bothwell Wellness Group

Playgroup, Bothwell

Yoga Group, Ouse and Hamilton