



5 March 2024

Wyndham Health Plan Forum



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Wyndham Health Plan Forum

Background

In 2022, it was agreed with our organisational and community health sector partners to work through the Domains of the Wyndham Municipal Public Health and Wellbeing Plan 2021-2025 (The Health Plan) over the life of the plan. While this approach still makes sense, it is equally important to be flexible in order to address any emerging issues.

In 2021, ongoing pandemic impacts, mental health, access to health care and health equity emerged as public health priorities. This included the following agreed priority directions.

- **Connectivity** within the community health service system was identified as an issue impacting negatively on services accessibility and inclusion due to the geographic spread of the municipality and the diversity of the community.
- **Services innovation** that emerged during the health crisis and the importance of maintaining these gains post-pandemic, i.e., Telehealth.
- **Mental health**, especially in early adolescents and young people, especially the time lapse from presentation to service delivery; an ongoing issue in 2024.
- **Health equity** and the need for more targeted intervention.

The Table below illustrates the priorities in the first two years of the Health Plan and those that emerged in the course of Health Forum.

Agreed Health Plan Priorities Focus		
2021-2022	2022-2023	2024-2025
<p>Priorities as the health crisis eased.</p> <ul style="list-style-type: none"> • Chronic Conditions • Mental Health • Physical Health • Dental Health 	<p>Services began to open up once more.</p> <p>Face-to-face services gradually phased in.</p> <p>Wait lists following lockdowns was an issue.</p> <ul style="list-style-type: none"> • On-going priorities: <ul style="list-style-type: none"> ♦ accessibility ♦ mental wellbeing 	<p>Health Forum emerging issues.</p> <ul style="list-style-type: none"> • Accessible services • Joined-up service provision/coordination • Social isolation • Social connection/connected community • Mobile/outreach services • Hearing the ‘felt need’ and the ‘hidden voice’.

Other activities

In 2023, the Western Public Health Unit (WPHU) was established to support Victoria’s public health strategy within the central and western suburbs of Melbourne, with a particular focus on disease prevention and population health. Wyndham City contributed to the WPHU Population Health Catchment Plan, outlining the approach to tackle some of central and western Melbourne’s biggest health challenges.

WPHU priorities compliment the Wyndham Health Plan priorities as follows.

1. Healthier eating and food systems
2. Vaping and tobacco action
3. Tackling climate change and its impact on health

Council partners with the WPHU through the Population and Preventive Health Reference Committee, established in October 2023 to focus on these priorities across the region.

Introduction

On 5 March 2024, 37 people participated in the Wyndham Health Plan Forum (15 health sector professionals and 22 council staff from a broad cross-section of the organisation). The event was an opportunity to bring together the Health Plan Committee (external partners) and the internal Health Plan Stakeholder Group for the

first time. These groups met separately throughout 2021-2023 helping to drive the work of The Health Plan.

Health Plan Forum objectives were to:

- reflect on achievements at the mid-point of the Plan
- consider Health Plan 'outcomes' and identify outstanding priorities
- identify current actions working towards 'outcomes'
- think ahead to the next Health Plan (2025-2029)
- share organisational work (internal and external partners) towards 'outcomes'
- network to hear from one another and explore a range of perspectives
- identify key organisational points of contact

Health Plan Forum Activities

In two forum activity sessions participants were asked to consider the Health Plan Priorities and Outcomes, and how their work is contributing towards these. In small groups participants were asked to:

1. Choose a scenario to depict current work that is addressing progress towards a Health Plan 'outcome'
2. Think about:
 - what is being done in working towards these outcomes and how
 - what is working or not working
 - what can be done better and with whom (identify partners)

Participants chose the Priorities and Outcomes that they felt needed most attention going into the final two years of the current plan, and suggested implementation strategies.





Priority 1 - Opportunity, equity & inclusion

Outcome 1: We have equal opportunity to contribute to our community, including through strong employment opportunities

The Health Plan promotes the right of equality before the law and equal opportunity to enjoy all areas of life. This involves social inclusion to improve personal wellbeing and building connected communities with strong social networks.

Forum participants responded to Priority 1 by focusing on what could be done better. Suggestions included methods for going to the community rather than expecting them to come to us.

A pop-up van for example, could provide opportunities to better coordinate services by partnering with allied health and community health sector partners, improve social connection and social inclusion.

Participants felt this could work well in new and emerging communities where community infrastructure is not yet well established and, in some cases, still in the planning.

The advantages of this approach include:

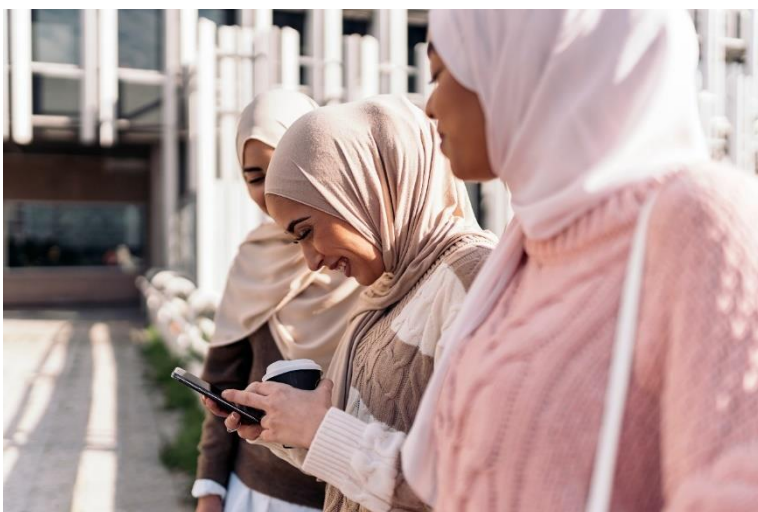
- **Utility and community capacity building:** taking the time to engage with residents builds connections.
- **Consistency:** builds trust through consistent service provision, encourages a sense of belonging and contributes to social cohesion.
- **Funding sources:** allows for flexibility in service provision and time for meaningful engagement and support.

Outcome 2. We can access formal or informal learning Opportunities

One forum group concentrated on the needs of new and emerging communities including Humanitarian Entrants.

Opportunity, equity and inclusion is especially important for Wyndham's language and religious minorities. Gaps exist in service provision including limited resources, translated materials and interpreters for new and emerging groups such as Burmese, Karen, some Arabic speaking groups, Dari and Pashto (Afghanistan).

Generally, humanitarian entrants have the youngest age structure of all migrants groups and the largest proportion of dependent-age children. Unemployment rates for refugees are exceeded only by unemployment rates for Indigenous Australians.¹



However, many have run small businesses in their country of origin. They are highly entrepreneurial, with a higher than average proportion engaging in small and medium business enterprises.²

Interpreters are needed to improve access to services for these groups. Forum participants advised that,

while language translation Apps are available, they are often inadequate for translating important information and prone to misinterpretation.

Suggestions to improve the situation included:

- Support for communities through advocacy, including
 - funding requirements to meet community need
 - seeking advice from community leaders (confidentiality can be an issue in smaller language communities)
 - seeking influential partners and building those relationships.
- Community capacity building
 - partner with the community and community based services

¹ Collins, Jock (2016) From Refugee to Entrepreneur in Sydney in Less Than Three Years, UTS Business School, Sydney. Available at:

https://www.ssi.org.au/images/stories/documents/Ignite/SSI_Ignite_evaluation_report_2017.pdf

² Spinks, Harriet (22 June 2011) What do refugees and humanitarian entrants contribute to Australia? Parliament of Australia, Flagpost. Available at:

https://www.aph.gov.au/About_Parliament/Parliamentary_departments/Parliamentary_Library/FlagPost/2011/June/What_do_refugees_and_humanitarian_entrants_contribute_to_Australia

- Health needs data is important to inform service need and delivery
- Business start-up
 - provide local information sessions at libraries and community centres including help with digital capacity, resumes, permit application, etc.
 - consult with business units - Social & Economic Inclusion, Wyndham Libraries and Community Hubs.

Priority 2 – Mental Wellbeing

Outcome 3. We are a cohesive and inclusive society socially connected and able to ask for help when we need it

The health crisis created challenges to daily life. In 2021, Wyndham residents identified mental wellbeing, isolation and disconnection at home and in the workplace as immediate concerns when the Health Plan was developed.

At the Health Forum participants identified social isolation and a lack of social connectedness as issues impacting new residents. It is recognised that social isolation can result in loneliness which is harmful to both mental and physical health. They are considered substantial health and wellbeing issues in Australia because of the impact they have on peoples' lives.³



- Loneliness has been recognised as a potential health crisis in Australia affecting up to one in four Australians. Moreover, it has been exacerbated by the recent pandemic, and is a health priority almost overlooked by health regulators and service providers.⁴
- Chronic health conditions also impact mental wellbeing including back pain, Asthma and Cerebral Vascular Diseases. Post pandemic loneliness and mental wellbeing remain ongoing issues across our community.
- Measures implemented in response to the pandemic, such as physical isolation and lockdowns, may have exacerbated pre-existing risk factors for social isolation and loneliness, such as living alone.

³ Australian Institute of Health & Welfare (7 Sept 2023), While social isolation and a lack of social connectedness can be an issue for new residents. Available at: <https://www.aihw.gov.au/reports/australias-welfare/social-isolation-and-loneliness>

⁴ KPMG (7 Nov 2022). 5 million Australians impacted by loneliness. Available at: <https://kpmg.com/au/en/home/media/press-releases/2022/11/connections-matter-australians-impacted-by-loneliness-7-november-2022.html>

Forum participants who focused on this priority suggested going to the community with information to better support help seeking. Such as, information on services available MensLine⁵, Beyond Blue, and the Head to Health National Digital Mental Health Gateway.

Suggestions included:

- Community or place-based services to demystify help-seeking and promote better access to mental wellbeing health services, including the many Telehealth options.
- Promote services through existing avenues, such as the Wyndham Libraries pop-up library van open.



Priority 3 – Gender Equality

Outcome 4: We enjoy formal and substantive equality

Women are a priority group under the Health plan. Gender equality in health is about ensuring that women and men have equal conditions to realise their full rights and potential to be healthy, contribute to health development and benefit from the results.⁶

⁵ The free national telephone and online support, information and referral service for men with family and relationship concerns. For further information go to: <https://mensline.org.au/>

⁶ World Health Organization, 2011.

Achieving gender equality requires specific measures, recognising that women and men have different needs, preferences and interests. The *Gender Equality Act 2020* promotes gender equality in policies, programs and services in Victoria.

Under the Act, Council must assess any new or revised policy, program or service that has a direct impact on the community, demonstrating fair and equal consideration to the needs of women, men, and gender diverse people.

This priority did not generate specific activity at the Health Forum. Forum participants touched on the issue of gender equality in relation to family violence (covered at Priority 7 - Community Safety).

Gender inequality sets the underlying context for violence against women. There are 4 factors, all related to gender inequality, that consistently predict or 'drive' violence against women.⁷

1. Condoning of violence against women
2. Men's control of decision-making and limits to women's independence in public and private life
3. Rigid gender stereotyping and dominant forms of masculinity
4. Male peer relations and cultures of masculinity that emphasise aggression, dominance and control

Priority 4 – Accessible Services

Outcome 5. We can access safe and culturally appropriate services

There are service gaps across Wyndham in terms of access to specialists, allied health services and private health services with waiting lists for these. Making services accessible and available in Wyndham was a topic that received a lot of attention at the Health Forum. Participant suggestions included:

- Improved referral pathways to provide joined-up streamlined services.
- Hearing the voices of people experiencing vulnerability to bring lived experience and client voice to council policies, programs and responses.

Services Coordination

One forum group demonstrated the benefits of collaboration across council departments in helping residents to access services.

⁷ Our Watch, 2024. The link between gender inequality and violence against women. Further information available at: <https://action.ourwatch.org.au/what-is-prevention/the-link-between-gender-inequality-and-violence-against-women/>

- A newly arrived resident attended at a community library hub, asking for help for herself and her family including her 8 year child with a disability.
- She was matched quickly with an interpreter on library staff, a bilingual worker who linked her in with the Community Connector service.
- Community connector staff linked the resident on to other services she might need for her child.

Good practice

The activity demonstrated good practice in customer service as well as the benefits of having onsite bilingual staff and culturally inclusive programs.



Interpreters

Another forum group identified the issue of health sector and multicultural communities needing to be better informed of the free Translating and Interpreting Service (TIS National).

TIS provide immediate and pre-booked phone interpreting.

- Eligible groups include, GPs, pharmacies, NGOs, LGAs, Real Estate agents, Trade Unions, allied health professionals, and parliamentarians and their staff.
- Promotional materials are available online.

Attending at a medical appointment is often problematic for people from non-English speaking backgrounds. One group highlighted this access issue.

- General Practitioners and medical clinics are generally not well versed in accessing timely interpreters for consultations with patients from non-English speaking backgrounds.
- At the same time, patients often do not know that the TIS service is available to them. They may take a relative along to interpret which can impede on confidentiality and full disclosure. If the relative is a child, it is quite inappropriate to use a child in adult circumstances.

Outcome 6. We are a resilient community and adapt to changing conditions.

Wyndham is a growth municipality, forecast to grow to a population of 501,634 by 2041. In order to provide for future services, planning and forecasts informed by the data are vital. One forum group demonstrated the need for data including:

- Partnering and collaborative working, sharing administrative data to assist local health sector services in Wyndham (joined-up services).
- Data analysis to inform and improve services and programs.
- Hidden voice:
 - The North Western Melbourne Primary Health Network (NWMPHN) gather comparative data from across the region but were lacking the ‘felt need’ in the community and the ‘hidden voice’.
 - They identified an element within the community whose voice was not being heard and whose data was difficult to capture. This means that some community members were not having their needs considered.

Good practice

Council has been able to assist the PHN with data on a variety of measures including pre-primary attendances and families. A local community health centre was also able to help in providing administration data from another agency which they used to inform their own service planning.

Working in cooperation with others helps to build a more comprehensive picture of health needs analysis in Wyndham. This data will assist community health sector and council services as well as inform the next Wyndham Health Plan (2025-2029).



Priority 5 – Climate Change Health Impacts

7. We are a zero carbon community consuming locally and responsibly

Council has primary responsibilities to mitigate and adapt in relation to the public health impacts of climate change, including to:

- prioritise achieving the best outcomes for the community, including future generations
- promote the economic, social and environmental sustainability of the municipality, including mitigation and planning for climate change risks.⁸

Forum participants considered what council could do, working with partners, to improve preparedness for future weather events including storm and heat wave.

Suggestions included:

- Targeted educational programs to address climate resilience.
 - Review what is currently done to establish starting point.

⁸ Climate Change Act 2017 and the Local Government Act 2020 (s.8 & 9).

- Continuous improvement of information and services, including translated materials.
- Seek to influence the residential building design standards for climate resilience.

Priority 6 - Housing & Built Environment

Outcomes 8. We can meet our housing needs, and 9. We enjoy our neighbourhoods

The Health Plan seeks to ensure everyone is provided with an environment in which they can achieve the best possible personal health and wellbeing.

Forum participants identified transport as a barrier to services access and social connection due to the geographic spread of the municipality. However, council has policies and plans to increase housing density (Wyndham’s ‘missing middle’) near activity centres.⁹ Centrally locating medium density housing at activity centres would improve connectivity by facilitating people living closer to amenity and increasing services accessibility.

Thus, participants identified housing diversity with options for different cohorts, i.e., single people, families, young people as important in meeting these outcomes. They also raised the issue of the lack of crisis and temporary accommodation, with the need for more supported options with community connections.

Homelessness and Sleeping Out

Homelessness is an aspect of housing pathways, including couch surfing, crisis, and transition accommodation. Wyndham has very little crisis accommodation which means that people often have to leave the municipality to find accommodation.

Scenario 1

This group activity demonstrated both bad and good practice. Firstly, an officious local laws officer approached a man who had been reported as sleeping in his car by a concerned resident.

- The officer approached the man, noting initially that the car was unregistered. The man replied, “I’m only sleeping. I’m not bothering anyone or doing anything illegal.”
- The local laws officer explained that he could have the car removed under section x of legislation, and asked him to “move along”.

⁹ The Wyndham Plan 2023, Wyndham Housing & Neighbourhood Character Strategy 2023, Wyndham Affordable Housing Strategy 2022-2025.

- The man explained that he had nowhere to move along to, and would no doubt see the officer again “at another park.”

Bad practice

In this scenario the officer did nothing to find out the reasons why this man was sleeping in his car. Any solution depends on the person’s circumstances. Moving him on meant his situation would remain as it was.



Scenario 2

This time the local laws officer adopted a more humane approach. A concerned resident complained that a man was sleeping in his car which was parked outside a primary school.

- The officer simply asked the man why he was sleeping in his car. He explained, “I have lost my job and have nowhere to stay”. Rubbish had accumulated near the car that the officer offered to clear up.
- Thoughtfully considering the situation, the officer advised, “I have a sense of what’s going on here. Let’s work together on this.” He then left to arrange for the rubbish to be cleared by council refuse collectors and to “make some calls”.
- Through an established support chain, the officer made contact with a support worker who knew the man and who had “wondered what happened to him”. Homeless people often give up and drop out of sight feeling disempowered within their situation.

- As a result of this approach the support worker was able to make contact and organise emergency accommodation and support for the man.

Good practice

Scenario 2 demonstrated a constructive and helpful approach in dealing with someone in a homeless situation. It takes a collaborative effort to find solutions that work for everyone. People with chronic health issues and in poor mental health need coordinated service supports and specialist responses.

Collaborative service provision like this also strengthens partnerships between Council, health services, and homelessness providers.

Priority 7 – Community Safety

Outcome 10. Our neighbourhoods are safe and inclusive

Council partnered with Monash University in the Safe Spaces project. The project aimed to enhance council's capability to engage women from diverse backgrounds to better understand why some public spaces and places are viewed as 'unsafe'. The project produced a series of three Toolkits, available online at the Monash Safe Spaces project page.

Forum participants suggested that:

- Council's Community Grants play a big part in building community connection and community safety by enabling community led initiatives, giving greater agency at the local community level.
- Community centres and libraries also play an important role in promoting community safety.
- Promoting pride of place was also suggested as a means to enhance community safety.

Outcome 11. Local spaces are age-friendly and promote independence

Participant's also raised the needs of older people, people with a disability and multicultural community needs. This relates to age-friendly spaces and how council plans for those taking account of diverse community needs.

Outcome 12. We are safe at home

This outcome links very closely with Priority 3 – Gender Equality.

There is also a link with social connection – households who are more isolated can be at greater risk of family violence. Wyndham is a growth area, covering a large 542km² area with 17 suburbs. Housing is predominantly low density large family homes of 3+ bedrooms. New neighbourhoods are emerging as house and land packages are sold.

The Orange Door opened in Werribee in 2023 – an accessible service entry point for women, children and young people who are experiencing family violence. It is also the entry point into family services, for families who need assistance with the care and wellbeing of children to access the services they need to be safe and supported.

Forum participants considered:

- The role of developers when new developments where housing and infrastructure is rolled out in stages. Housing is usually first before other community infrastructure. People need to drive to supermarkets and other retail stores. Public transport may not yet be established.
- Frasers Property at Mambourin for example, have dedicated community development teams. They assert that their “place-making and community development experience” means they “create homes and communities that are connected, diverse, sustainable and beautiful, enhancing the way people live life together”.¹⁰

We will continue to work with The Orange Door and Genwest¹¹ to develop further strategies that work towards Outcome 12.



¹⁰ Further information available at <https://www.frasersproperty.com.au/VIC/Mambourin>

¹¹ Genwest work toward gender equity in Melbourne's west, helping people who are experiencing family violence. <https://genwest.org.au/about-us/>

Priority 8 – Healthy Living

Outcome 13. We can make healthy food choices and have food security.

Forum participants considered healthy food choices and food security through the lens of a community garden and food relief. Food insecurity has been an issue in Wyndham since the health crisis. It has been exacerbated by the housing crisis and cost of living increases impacting on household budgets.

There are many Food Banks across Wyndham at community centres, kindergartens, and local churches. People can donate food or take it home.



Community Garden

One forum group chose to demonstrate how market gardens can not only help people to make healthy food choice, but address social connection by meeting others with similar interests.

- A local resident, unsure where to start, arrived at a community garden wishing to know more. She wanted to join if possible and was looking for help in growing her own vegetables.
- She was offered a tour of the garden and later asked for some seeds to plant in her garden. These were provided on the proviso that she in turn brings seeds back once her plants were established to share with others.

- Another resident approached community garden volunteers for food relief. She was referred on to the many food banks across Wyndham and directed to the one closest for her home.

Good practice

This activity captured cross Council collaboration in helping residents' needs. Officers local knowledge was valuable in being able to immediately assist residents.

Food Relief

This activity also responds to Priority 1 Opportunity, equity and inclusion.

- An elderly resident approached staff at a local community centre looking for food relief. She was also feeling socially isolated and wanted to be able to "connect with people".
- She was introduced to someone connected with the food relief service who explained the days that food was available. He also explained that this included fresh fruit and vegetables grown locally and was able to give her some from stores on hand.
- Community centre staff then introduced the woman to a group of women meeting regularly at the centre. The women put the newcomer at ease by explaining that they were all just "getting to know one another".
- It turned out that one of the women also ran a local walking group, providing another social opportunity for the woman as well as an active living opportunity.

Good practice

This scenario demonstrated how linking a resident in to one service or activity can lead to another to improve mental wellbeing and address social connectivity.

15. We support smokers and e-cigarette users who want to quit

Council's Public and Environmental Health team presented on vaping at the Health Forum. The Westgate Proactive Policing Unit identified that the sale of vapes to minors was an issue in Wyndham. This was consistent with the information the Council was receiving.

Emerging issues include:

- Increase in tobacco/vape related complaints from community
- Decrease in compliance at pro-active education visits at tobacco retailers
- Increase in media reports regarding the sale of e-cigarettes to minors

Vaping and tobacco controls

Have your say



Council officers provide retailer information in accordance with the Tobacco Act in respect to sales to minors, display of e-cigarettes and tobacco products. However, Council is not able to test purchase e-cigarettes in the same way as traditional tobacco products. Victoria Police officers gave strong verbal warnings to proprietors in response to the underage sales reports.

Working together, Council and Police, found the response from retailers was taken more seriously than when Council officers conducted inspections alone. Following the visits additional education materials were sent out to all tobacco retailers in

Wyndham, confirming requirements.

The Victorian Government is conducting an inquiry into state tobacco and e-cigarette controls. The Committee conducting the inquiry is expected to report its findings no later than 30 November 2024. Council is formulating a submission to this inquiry.

