

# ACT Population Health Bulletin

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## Upcoming Events

- 12 March 2015 – Launch of the Nutrition Support Service, Nutrition Australia – Lyn Brown, 6162 2583 <http://www.nutritionaustralia.org/act>

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Editorial committee:

Dr Paul Kelly (Editor), Dr Ranil Appuhamy, Kristy Breugelmans, Adam Duffy  
Lindy Fritsche, Ros Garrity, Emily Harper, Chris Kelly, Lesley Paton,  
Brett Purdue, Rebecca Stones

Please address any correspondence to:

The Editor, ACT Population Health Bulletin

Population Health Division

GPO Box 825, Canberra City. ACT 2601

[populationhealthbulletin@act.gov.au](mailto:populationhealthbulletin@act.gov.au)

[www.health.act.gov.au](http://www.health.act.gov.au)

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## Introduction

**A message from the Chief Health Officer,  
Dr Paul Kelly**

This Issue of the Bulletin examines the ACT Government Health Promotion Grant Program (the Program) and celebrates 20 years of health promotion grant funding in the ACT. The Program is an important component of the preventive health effort in the ACT. It funds non-government organisations to contribute their innovative ideas and to implement programs to address significant public health issues. When well targeted, this method of funding can increase the effectiveness and scale of population health interventions in an efficient manner.

Like many similar programs in other jurisdictions the Program, under its original name of Healthpact, emerged from tobacco taxes as a way of displacing tobacco sponsorship of sports with healthy messaging. Over the years, the Program has moved from a disease prevention model to a broader health promotion agenda which utilises the internationally recognised Ottawa Charter (1986) and Jakarta Declaration (1997) as guiding principles. More recently, the Program has changed its strategic intent to prioritise funding applications which address one of the major population health issues identified in successive Chief Health Officer's Reports, namely obesity. The Program is also closely aligned with the ACT Government Towards Zero Growth Healthy Weight Initiative. The ACT Government sets direction and provides funding, with innovative methods and implementation coming from the wider community sector, thus expanding both the scale and the diversity of initiatives to prevent obesity.

This Issue contains several case studies of grant funded initiatives. Some are examples of the Program "kick starting" projects which have, after initial funding as a grant, grown and been sustained through other means. Others describe currently funded, larger scale, obesity-related grants including a social media campaign and others aimed specifically at improving the physical activity profile of children. Demonstrating both effectiveness as well as sustainability are important criteria for funding, and robust evaluation is a key component of the work of all grant holders. Capacity building for health promotion was previously delivered in house but is now run as an accredited certificate course through a partnership with the Canberra Institute of Technology.

The celebration of achievements in health promotion has been important aspect of the Program. This Issue introduces a new section which is a summary of the last 3 months of activities related to the Healthy Weight Initiative from the Healthy Happenings newsletter.

Thanks to the editorial committee and in particular to guest editor Ros Garrity, as well as all who have contributed articles to this Issue.

**Dr Paul Kelly**  
**ACT Chief Health Officer**  
**February 2015**

# Breaking News

## Launch of the Air Quality Monitoring website

On 8 December 2014 ACT Health Director-General, Dr Peggy Brown, launched the ACT Government Air Quality Monitoring website at the Health Protection Service.



Photograph: ACT Health file photograph

The Air Quality Monitoring website provides real-time air quality data from three air quality monitoring stations operated by ACT Health. The three air quality stations are located at Monash, Civic and Florey.

The website also provides an Air Quality Index (AQI) value for each station to indicate how clean the air is. The AQI expresses the pollutant levels as a percentage value in comparison to the air quality standard for that pollutant. For example, an AQI value of 50 indicates the pollutant is at 50 per cent of the standard; and an AQI over 100 indicates the pollutant is at a level higher than the standard. Using a predefined categorisation scheme, the air can be classified as very good, good, fair, poor, very poor or hazardous, depending on the AQI value.

Air quality monitoring in the ACT is carried out by ACT Health in accordance with the Ambient Air Quality (AAQ) National Environment Protection Measure (NEPM).

The AAQ NEPM sets air quality standards for common pollutants. The ACT monitors five pollutants: carbon monoxide, nitrogen dioxide, ozone, particulate matter less than 10 microns (PM10) and particulate matter less than 2.5 microns (PM2.5), and reports on their levels in relation to the standards.



Photograph: VisitCanberra

## Healthier Work Breakfast

Over 160 ACT business representatives attended a Healthier Work networking breakfast on Thursday 12 February to discuss “the business benefits of a healthier workplace”.

Minister for Workplace Safety and Industrial Relations Mick Gentleman, MLA, launched a booklet of case studies showcasing the achievements of thirty seven ACT businesses – mostly small businesses – who were officially ‘Healthier Work Recognised’ in 2014 for their commitment to their staff. He encouraged businesses to use the case studies as inspiration to sign up for the Healthier Work Recognition Scheme and become an employer of choice.



Photograph: Justice and Community Safety

*“It is pleasing to see so many local businesses taking an active approach in creating a healthy workplace culture by investing in health and wellbeing programs and practices, and seeing a real world difference in their workplace as a result,”* Mr Gentleman said.

Representatives from some of the workplaces showcased in the booklet spoke of how it was easy to become involved and how helpful the Healthier Work team had been:

*“Some changes can be small and as simple as having a weekly fruit basket delivered, arranging discounts at the local gym, having a walking meeting or just reminding staff to stand up from their desks and stretch regularly.”*

During the breakfast a panel discussed a wide range of benefits to business from investing in health and wellbeing such as reduced worker sick leave and worker turnover, increased productivity, staff retention and an improved corporate image. The panel included Mark McCabe, ACT Work Safety Commissioner, Dr Paul Kelly, Chief Health Officer, Chris Faulks, CEO Canberra Business Chamber and Jason Heddle, Healthier Work Champion at Sportsman's Warehouse.

Healthier Work is a free ACT Government service available to assist workplaces to implement workplace health and wellbeing programs by providing face-to-face advice, practical tools and resources.

For more information about Healthier Work email [healthierwork@act.gov.au](mailto:healthierwork@act.gov.au) or phone 6207 3000 or go to [www.healthierwork.act.gov.au](http://www.healthierwork.act.gov.au).



## ACT Asbestos Health Study

The Australian National University's National Centre for Epidemiology and Population Health (NCEPH) will conduct an ACT Asbestos Health Study over the next two years to gain additional understanding regarding the risk of developing mesothelioma from living in a house containing loose fill amosite asbestos (a 'Mr Fluffy' house).

Mr Fluffy was an insulation contractor who used loose-fill amosite asbestos in homes in the ACT and southern NSW from the late 1960s until 1979. During 1988–1993, approximately 65,000 houses built before 1980 in the ACT were visually checked for the presence of loose-fill asbestos insulation. Consequently, more than 1,000 houses were remediated through a Commonwealth loose-fill asbestos insulation removal program. However, there have recently been concerns about possible health effects after asbestos fibre counts were identified in previously remediated houses.

While the mesothelioma rate is low in the ACT, at around 10 cases per year, current and past residents are concerned about the potential health impacts associated with living and in some cases, self renovating, Mr Fluffy homes. During one of the multiple health forums for concerned Mr Fluffy residents held in 2014, residents asked the Acting Chief Health Officer about ACT specific research into the health impacts associated with loose-fill asbestos.

In response to this, independent researchers from NCEPH have been contracted by the ACT Government to undertake an ACT Asbestos Health Study.

There are four parts to the study:

1. A review of mesothelioma rates and distribution in the ACT.
2. Focus groups held with current and recent residents of affected houses to discuss their health-related concerns (participation will be voluntary).
3. A study looking at the likely exposure levels of current and recent residents in terms of years lived in an affected house and activities such as renovating.
4. A study linking a number of data sets to estimate the risk of developing mesothelioma in current and former residents of affected houses compared with the general population.

Each part of the study will feed information into the next part so the whole picture will not become apparent until the end of the study. It is anticipated that general results from part 1 will be available within 12 months; results from parts 2 and 3 will be available within 18 months and part 4 after 2 years.

It is envisaged that detailed results will be published in peer-reviewed medical journals.

The project will be overseen by the ACT Asbestos Health Study Steering Committee which includes members from NCEPH, ACT Health, the Asbestos Response Taskforce and the NSW Chief Health Officer. Other experts, including staff from Population Health Division's Epidemiology Section, will be co-opted as required.

## Acronyms

AAQ	Ambient Air Quality
ACT	Australian Capital Territory
AIGM	Australian Institute of Grants Management
AQI	Air Quality Index
ATODA	Alcohol, Tobacco and Other Drugs Association ACT
CDC	Centre for Disease Control and Prevention (USA)
CDNet	Community Development Network
CIT	Canberra Institute of Technology
CU4K	Connect Up 4 Kids
EOI	Expression of Interest
ETD	Education and Training Directorate
FARE	Foundation for Alcohol Research and Education
FASD	Fetal Alcohol Spectrum Disorder
HPIF	Health Promotion Innovation Fund
MACH	Maternal and Child Health
NEPM	National Environment Protection Measure
NGOs	Non-Government Organisations
PAF	Physical Activity Foundation
RWTS	Ride or Walk to School
TARPs	Target Audience Rating Points
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNESCO	United Nations Organization for Education, Science and Culture
WA	Western Australia
WHO	World Health Organization

## Resources

- ACT Health Promotion Grants Program - <http://health.act.gov.au/hpgrants>
- ACT Medicare Local - <http://www.actml.com.au/>
- ACT Population Health Division - <http://www.health.act.gov.au/health-services/population-health/>
- Canberra Institute of Technology - <http://cit.edu.au/>
- Connect Up 4 Kids - <http://www.actml.com.au/programs/connect-up-4-kids>
- Constable Kenny Koala - <http://www.police.act.gov.au/community/programs/constable-kenny-koala.aspx>
- Deathcap Mushrooms - <http://www.health.act.gov.au/publications/fact-sheets/death-cap-mushrooms>
- Heart Foundation ACT - <http://www.heartfoundation.org.au/>
- High Visibility Kids - <http://www.constablekenny.org.au/about/high-vis/>
- LiveLighter ACT - <https://livelighter.com.au/>
- Physical Activity Foundation - <http://paf.org.au/>
- Pregnant Pause - <http://pregnantpause.com.au/>
- Ride or Walk to School - <http://paf.org.au/programs/ride-or-walk-to-school/>

## 20 years of Health Promotion Grants in the ACT

Ros Garrity, ACT Health Promotion Grants Section, Population Health Division

As the ACT Health Promotion Grants Program enters its 20th year, there is an opportunity to reflect on the achievements of the Program, and its contribution to improving the health and wellbeing of Canberrans.

The ACT Government first established a Health Promotion Fund, **Healthpact**, as a statutory authority through the *Health Promotion Act 1995*. With its integration into the ACT Government in 2006 and a subsequent name change, the ACT Health Promotion Grants Program continues to play a vital role in building community capacity to promote health.

The Program continues to support community-based organisations to develop personal skills, create supportive environments, build healthy organisational policies, and strengthen community action to promote health across the ACT, in line with the strategic objectives of ACT Health.

### The Healthpact Era

The ACT's Health Promotion Fund, **Healthpact**, was the fourth health promotion foundation or board in Australia, and was established by the ACT Government in 1995. **Healthpact** was funded using tobacco tax as part of the buy-out of sports sponsorships of tobacco companies, replacing these sponsorships with the Smoke-Free health message. In time, a number of other health promotion campaigns were added, including sun protection, healthy eating and physical activity campaigns.<sup>1</sup>

In its early years, funded health promotion activities were carried out by a wide range of community agencies, including sporting, arts, cultural and health associations, schools and clubs. **Healthpact** worked closely with a range of key organisations, including ACT Health and Community Care (as ACT Health was then known), the National Heart Foundation ACT Division, the ACT Cancer Society, and Diabetes ACT to build their capacity to promote health in their priority areas.

**Healthpact** introduced its Health Promotion Seminar Series in 1996-97, which delivered training opportunities for health promotion professionals. There was a slow change in focus within **Healthpact** from a disease prevention model to behaviour change models. This was seen as better practice health promotion, as it was more closely aligned with the principles of the Ottawa Charter for Health Promotion 1986<sup>2</sup> and the Jakarta Declaration 1997.<sup>3</sup>

In 1998-99 the first triennial strategic plan was implemented which outlined **Healthpact**'s vision as a funding and policy organisation working in partnership with health promotion practitioners to achieve a healthy, vital ACT. **Healthpact**'s role was further defined as supporting the development of healthy people and a healthy social environment. Priority areas funded in these years included SmokeFree, SunSmart, Nutrition, Physical Activity, Injury Prevention, and Mental Health.

In 2002-2005 the second triennial strategic plan was implemented, strengthening the focus on the social determinants of health and solidifying a commitment to working to minimise risk behaviours likely to have a negative impact on wellbeing. The focus remained on a setting-based approach, principally health promoting schools and healthy workplaces. These allowed **Healthpact** to support more sustainable community outcomes not entirely dependent on ongoing funding.

During this time **Healthpact** established the ACT Health Promotion Awards, in partnership with the ACT Health Promotion Unit, ACT Health's Alcohol and Drug Program, and Mental Health ACT. Other significant **Healthpact**-funded projects included the Heart Foundation's Canberra Community Walks, the ACTION Vitality Bus, the **Healthpact** Research Centre for Health Promotion and Wellbeing at the University of Canberra, and SmokeFree Manuka Oval.



Photograph: Population Health Division file photograph

### ACT Health Promotion Grants Program

In August 2006 **Healthpact** was integrated into ACT Health and the role of managing the ACT Health Promotion Grants Program (the Grants Program) was moved into the then Health Promotion Branch within the Population Health Division of ACT Health. ACT Health continued the overall format and function of **Healthpact**'s funding program. Small changes to the focus of some of the funding rounds were made based on national and local health priorities. In July 2007, the Grants Program undertook a community consultation process with major stakeholders in order to establish directions for the Grants Program during 2008/09. That consultation provided an opportunity for community organisations to comment on the strategic direction and overall administration of the program. A 'Statement of Strategic Intent for 2008/09' and details of stakeholder feedback were released as part of that process.

The Grants Program continued to provide \$2.1 million in funding annually through various funding rounds, including the Community Funding Round, the Health Promoting Schools Funding Round, and the Health Promotion Sponsorship Funding Round, between 2007 and 2012.<sup>4,5,6</sup> During this time the program funded activities related to the promotion of health across the population, founded on consistent health messages about healthy lifestyle choices and behaviours, particularly in relation to physical activity and nutrition. The aim was to increase the capacity of individuals and the community to have control over the factors that determine health. Funded projects were expected to adopt the principles and practices of health promotion using a mix of health promotion interventions and capacity-building strategies, to address health and wellbeing issues identified by the target groups.

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## Case Study

### Blast from the Past: Heart Foundation Community Walks

Diane Percy, Heart Foundation ACT

The Canberra Community Walks Project commenced in 2001, aiming to provide the infrastructure, facilities and supportive environments for the community to participate in regular physical activity. The Heart Foundation ACT received funding from the ACT Government through Healthpact, the statutory authority that provided ACT health promotion grants funding prior to 2007, to develop and launch several signposted self-guided community walks around Canberra, to encourage people to walk for physical activity and social interaction.



Accessible and flat paths were selected near sites of local interest to encourage people to re-engage with walking, and to make them achievable for people with limited mobility. The walks were signposted, measured for distance and safety, and were established in the areas of Tuggeranong, Gordon, Chapman, Holder, the Inner North, Weston Creek, Gungahlin and Belconnen.

The first Community Walk path was opened in July 2001 in Tuggeranong and was supported with a walking map and local media campaigns that promoted the benefits of walking. To help support the walks, the Heart Foundation partnered with other organisations that had a wider and more intimate reach with people who were sedentary and/or elderly. By promoting the walks to staff and community workers, walking became the physical activity of choice within these groups.



Photograph: Heart Foundation ACT

The Community Walks continue to be popular with individual walkers, as well as Heart Foundation walking groups such as the Holder Walkers. The Holder Walkers have been walking as a group weekly since 2011. They have used the local Community Walks routes as a foundation for their local walks in Holder, Weston Creek and Chapman. The walk organiser has been leading this group for over three years.

The group regularly has 12 to 15 people walking each week, and takes a different route each time. They still use the Community Walks as a part of their walking routes, and always enjoy a coffee and a chat at the end. The Community Walks brochures that provide information on the paths continue to be popular, especially at the Council Of The Ageing Seniors Expo held annually in March.

These Community Walks are still an excellent option for people who are interested in walking, and don't necessarily want to join a group, or for those who want to walk on different days and times to the local walking group.



Photograph: Heart Foundation ACT

## International Health Promotion Funding

Michael Sparks, President, International Union for Health Promotion and Education, A/Professor Public Health, University of Canberra.

Funding for health promotion activities in other countries is distributed in a number of ways by an array of funding bodies. This article will briefly explore some of the different types of funding arrangements for getting health promotion grants into the hands of community members across a range of international settings. The article sets out some of the common features of many grants programs and provides advice for those seeking to access international grants. Included in the discussion is funding provided by health promotion foundations, philanthropic organisations, Non-Government Organisations (NGOs), and industry-funded organisations and foundations. Brief mention is also made of the increasing trend toward crowd-funding of activities, including health promotion.

### Health Promotion Grants

Health promotion is an integral part of public health and is implemented through various means across a range of settings and populations. A key element in ensuring that health promotion activity takes place at the community level is the provision of funds for health promotion. Governments, acknowledging that they cannot, and perhaps should not, do everything themselves, often distribute health promotion funding through grants programs. There are probably as many different ways of managing and delivering grant schemes as there are granting agencies. This article will briefly explore some of the different types of funding arrangements for getting health promotion grants into the hands of community members across a range of international settings.

The main types of health promotion grants are research grants, program grants, special project funding and funding to support specific campaigns or messages. Health departments, ministries and health promotion foundations are the usual providers of funding, though philanthropic foundations and some inter-governmental agencies like World Health Organization (WHO), Joint United Nations Programme on HIV/AIDS (UNAIDS) and United Nations Organization for Education, Science and Culture (UNESCO) also provide funding for activities that address organisational priorities. Each has its own set of unique priorities and its own ways of managing the grant-giving process.

### The Health Promotion Foundation Model

A common, and growing, model of funding for health promotion comes through what is often called the health promotion foundations model.<sup>1,2</sup> In this model, a national government uses earmarked tax income to fund national health promotion foundations. Frequently the tax income is from products considered harmful to health such as tobacco and alcohol. This is a feature of countries such as Thailand, Switzerland, Austria, Korea, Poland, Malaysia, Hungary, Tonga and others. WHO and the International Network of Health Promotion Foundations both advocate for proliferation of the model and a number of countries are in the process of considering or adopting the model.<sup>3,4,5</sup>

In Australia, a State-based health promotion foundation model has been developed in Western Australia (Healthway) and Victoria (VicHealth). Foundations previously existed in the ACT (HealthPact), and South Australia (South Australian Health Promotion Foundation) but were disbanded. The short-lived Australian National Preventive Health Agency (2011-2014), while not fulfilling the same breadth of activities as many other national health promotion foundations globally, was the closest Australia has come to establishing a national health promotion foundation.

### Common Features of International Grants

A common feature of grants programs is a geographical or jurisdictional limit. It is rare for granting agencies to provide funding for activities that take place outside of the area or jurisdiction in which the agency is established. Thus, local governments often provide grants for local activities; state governments for activities within the state; national governments for activities within the country; and regional governance organisations (such as the European Union or the Association of South East Asian Nations) fund activities within their respective multi-nation geographical regions. Some notable exceptions are grants that are provided specifically for international aid activities, such as those provided by some of the UN-based agencies or national aid agencies that prioritise development funding of activities in a limited range of countries. Sometimes philanthropic organisations will prioritise work within a specified range of countries such as the Bloomberg Foundation has since 2007, investing millions in tobacco control activities in low and middle income countries ([www.bloomberg.org](http://www.bloomberg.org)).

Curiously, some government agencies and philanthropic foundations determine their own priorities, explore the field for 'best-fit' partners, and fund projects and programs that originate internally. Examples include the US-based Centre for Disease Control and Prevention (CDC) Foundation and some activities of the French National Institute for Health Promotion and Education.

Philanthropic foundations often provide funding for activities that address specific need areas or diseases such as the Bill and Melinda Gates Foundation's focus on enteric and diarrheal diseases, malaria and pneumonia in their current funding round ([www.gatesfoundation.org](http://www.gatesfoundation.org)).

Most funding schemes only provide funding to an organisation, not to individuals. Exceptions to this sometimes include research grants and grants tied to professional development of individuals.



Photograph: David Castillo Dominici. FreeDigitalPhotos

# International Health Promotion Funding (continued)

## Advice for Grant Seekers

For those seeking grants, it is important to understand three key things: a) how health promotion is interpreted by the funder; b) funding priorities and exceptions; and c) the process required to apply for and acquit the grant.

Health promotion is not universally well defined and may have different meanings and interpretations in different contexts. Some places like Hong Kong include health promotion within broad health care funding,<sup>6</sup> while others, like Singapore, may associate specific focal areas with health promotion, such as workplaces, schools or other settings.<sup>7,8</sup> In much of the United States, health promotion is called health education or community development.<sup>4</sup> To better understand how health promotion is given meaning in a context, it is best to read through the available literature on previously funded projects and priority funding areas.

It is also critical to understand the funding priorities and limits of grants bodies. Most grants bodies have guidelines on what they have prioritised for funding within a funding round or within a short number of years. Some will only provide grants for activities while others provide funds for campaign and resource development, staffing or even, in very rare cases, infrastructure. Details of what is, and what is not funded are usually provided on websites or in grant application packages.

Grant application processes are unique to each granting body. The timelines will be different for each as will be the documentation process, application process and accountability requirements. Most grant bodies now produce guidelines for applicants on their websites and many even offer workshops or training for aspiring applicants. Knowing when grant rounds open and close requires a good awareness of websites and familiarity with funding cycles. While there are no universal health promotion funding clearinghouses, there are some clearinghouses that seek to provide information on funding available within a country, a state or even a specific profession. Learning about these clearinghouses can save vital time and help to focus the search for potential funding sources. There are sites like [www.grantsalert.com](http://www.grantsalert.com), a US-based site that tries to provide information and links to grant opportunities that would appeal to school teachers, the Tasmanian site [www.dhhs.tas.gov.au/healthpromotion/funding\\_opportunities](http://www.dhhs.tas.gov.au/healthpromotion/funding_opportunities), and the Nova Scotia Canada Health Promotion Funding Clearinghouse <http://hpclearinghouse.ca/opportunities/funding/>

When applying to funding bodies for grants, it is also important to understand the nature of the organisation providing the funding and to consider any implications that may arise from taking the grant. Organisations such as the Nestle Foundation ([www.nestlefoundation.org](http://www.nestlefoundation.org)), the De Beers Fund ([www.tshikululu.org.za/funds/entry/de-beers-fund](http://www.tshikululu.org.za/funds/entry/de-beers-fund)), and the Coca-Cola Foundation ([www.coca-colacompany.com/our-company/the-coca-cola-foundation](http://www.coca-colacompany.com/our-company/the-coca-cola-foundation)) provide grants that some argue are good corporate citizenship, while others insist represent ethical dilemmas when the source of funding is juxtaposed with public health and health promotion outcomes. Likewise, groups such as Drinkwise Australia ([www.drinkwise.org.au](http://www.drinkwise.org.au)), an alcohol industry body, and the Altria Group ([www.altria.com](http://www.altria.com)), an American tobacco industry group, provide money for community-based activities including health promotion. It is always advisable for grant seekers to undertake sufficient research on the funding body to ensure that taking money from the organisation will not present a moral or ethical problem for them, their organisations, or the community in which they are working. Grant seekers should be forewarned that many organisations will not provide funding to applicants if they have ever accepted money from the tobacco industry or any of its associated foundations or charities.

Increasingly social media is also being used to crowd-source funding for projects through sites such as propeller ([www.propellerproject.com.au](http://www.propellerproject.com.au)), unityaid ([www.unityaid.com](http://www.unityaid.com)), gofundme ([www.gofundme.com](http://www.gofundme.com)), indiegogo ([www.life.indiegogo.com](http://www.life.indiegogo.com)) and kickstarter ([www.kickstarter.com](http://www.kickstarter.com)). There is even a website to tell you the top 10 crowdfunding websites: [www.crowdfunding.com](http://www.crowdfunding.com). Those seeking to fund projects or activities through such sites should also be advised to read the contractual agreements associated with the websites as many of them charge a percentage, some up to 10 per cent, of the funds raised just to include your fundraising on their site.

Funding for health promotion activities is being made available through a range of sources, each requiring its own background research, investigation of priorities and processes, and ethical implications. Grant seekers are advised to take the necessary time to fully understand exactly where the money they are seeking is coming from, what the organisation expects to be done with it, and how the organisation requires the grant to be acquitted.

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## Partnerships at Work

Emma Spicer, ACT Health Promotion Grants Section, Population Health Division

### Partnerships and Health Promotion

A key component of the operating framework of the ACT Health Promotion Grants Program (the Grants Program) is the encouragement of positive partnerships within a health promotion project. Successful partnerships enable not only individual change but also action directed towards changing social, environmental and economic conditions for health. Partnerships take a variety of forms and operate in many different ways, which enhances their value. At the heart of a successful partnership is a shared objective: everyone working towards a common goal for a common good. This is particularly important in partnerships that hold a health promotion objective as their focus, aiming to improve the health and wellbeing of the community.

### What makes a good health promotion partnership?

Successful health promotion partnerships commence with a clear goal and set of objectives to enable all partners to be aware of the common direction. The roles and responsibilities of each partner need to be outlined at the beginning of the partnership, to develop a common level of commitment from all. Positive partnerships acknowledge and value each partner's contribution and celebrate achievements along the way. They also have a champion to drive the collaboration and maintain the momentum.

A strong sense of social capital is also present in effective partnerships that continue to nurture and develop the glue that holds the partnership together. Social capital is enhanced through the cohesiveness of the relationships amongst the partners. This in turn improves the effectiveness and sustainability of a project by building the community's capacity to work together to address their common needs.



Photograph: VisitCanberra

### What are the challenges?

The success of productive partnerships is certainly challenged by their membership which can often be a difficult thing to get right the first time. Bringing together a diverse group of skills, knowledge and expertise to work towards a common goal can be extremely difficult. The inclusion of a range of diverse personalities from varied social or cultural backgrounds adds to the challenge and to the opportunity. This is why maintaining a clear project goal and objectives is critical. It is also imperative that there is a clear "champion" of the project who maintains this focus and understands the dynamics amongst the group and how this affects productivity. Although these challenges can be significant, the positive impacts of positive partnerships can outweigh the negatives and should be considered in health promotion projects.

### Why are partnerships important to the Grants Program?

Effective partnerships have the ability to effect change in more significant ways than through individual attempts alone, which is critical to the long term outcomes of a health promotion project. They bring together a valuable set of skills and varied expertise that could not be achieved by an individual person or organisation. They may be a more cost effective approach to achieving better health outcomes for the community through the pooling of resources and ideas for a greater impact. As an ACT Government grants program, the ACTHPGP works within a fair, equitable and economically viable framework and places significant value on the efficient and effective use of government funds. Partnerships are therefore a key component of the strategic intent of the ACT Health Promotion Grants Program, which is embedded in sound health promotion and community development theory. They also provide a platform for increased accountability and transparency amongst those involved in the partnership.

Through the funding of projects with a strong partnership approach, the ACT Government is aiming to contribute to more sustainable, long term change, therefore building a healthier, more productive ACT community. This model of health promotion strengthens community ownership of the project which in turn leads to community based action, critical to its long term success. Social capital is being enhanced at the same time by building the social ties amongst the partners, developing relationships and sharing knowledge and skills.

Funding from the ACTHPGP enables health promotion projects to utilise an integrated approach to change, facilitating collaborations across sectors and drawing together the community of need. The program also offers projects a sound strategic direction and actively promotes the significance of partnerships as part of this. Partnerships are a key focus of numerous key policy documents within the program, most notably included as a separate assessment criteria within the funding guidelines available from [www.health.act.gov.au/hpgrants](http://www.health.act.gov.au/hpgrants). As government funding is finite, partnerships enable the development of organisational change strategies during the course of the funding period, leading to a greater potential for the ongoing development of health outcomes after the funding has ceased. As the community of need has been involved in the direction of the project from the start, they maintain ownership thus enabling collective community action to continue in a much more valuable way.

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# Redesigning the ACT Health Promotion Grants Program - a new model for a 'wicked' problem of overweight and obesity

Tony Blattman, ACT Health Promotion Grants Section, Population Health Division

A range of evidence supports the effectiveness of a grants model as a link between government priorities around overweight and obesity, and delivery of relevant programs at a community level.<sup>1,2,3</sup>

The ACT Government has provided a health promotion grants program since 1995, funding up to 100 projects annually, across a range of issues including smoking prevention, reducing harmful alcohol consumption, healthy eating and physical activity and mental well-being. During the same period, a large population level shift into overweight and obesity has taken place.<sup>4</sup>

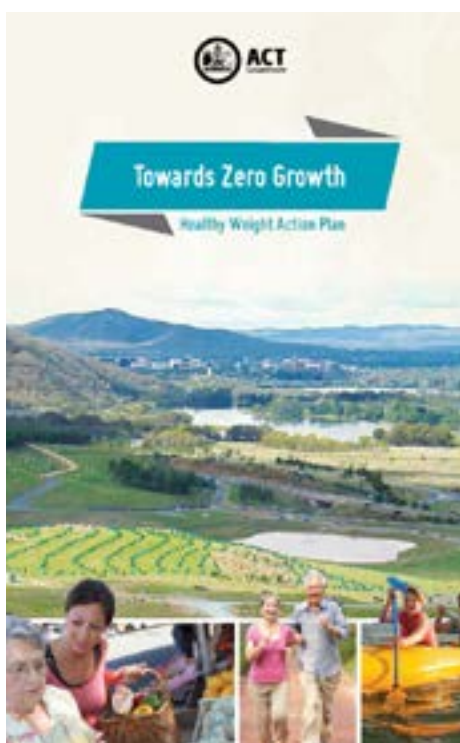
The ACT Minister for Health stated in 2012 that the focus of the ACT Health Promotion Grants Program (the Grants Program) should be sharpened to reflect current priorities, especially overweight and obesity. This approach became ACT Labor Party policy before the 2012 ACT Legislative Assembly election.<sup>5</sup> Following Labor's re-election the Grants Program was tasked with funding initiatives to help achieve the 'zero growth' target (that is, making current recorded rates of obesity and overweight in the ACT the peak in recorded rates).

This new policy setting led to an extensive community consultation process and the eventual restructuring of the Grants Program. The 'new look' Grants Program came into operation in August 2013, and judging by demand, appears to have resonated with the needs of the community sector.

## Introduction

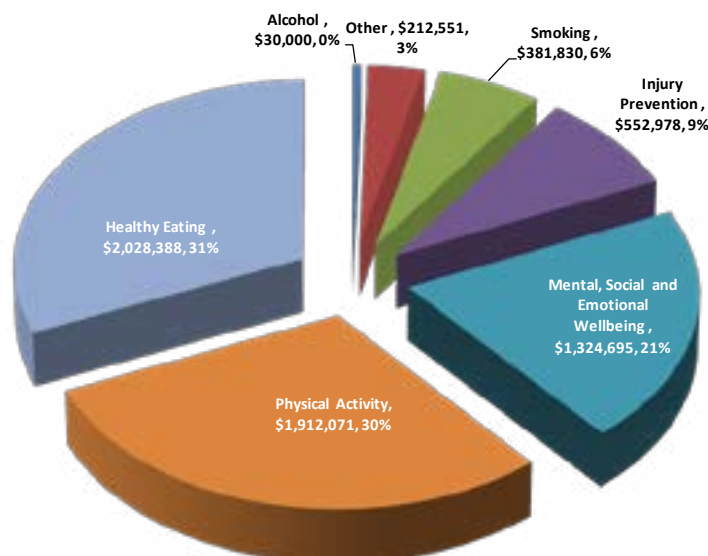
The 2014 ACT Chief Health Officer's Report notes that 63 per cent of ACT adults are either overweight or obese, as are one in four school children by the age of 12.<sup>6</sup> Nationally, the large population shift into overweight and obesity that has occurred since 1995<sup>4</sup> is now responsible for 7.5 per cent of the total burden of disease and injury. This is comparable to the burden caused by smoking and by high blood pressure.<sup>7</sup> Responding to these pressures, the ACT Government has made 'zero growth' in rates of overweight and obesity a policy priority.

In 2012, a whole of Government working group was established to explore and determine the best possible mechanisms by which the ACT Government could halt the rising rates of overweight and obesity in the ACT. The working group had commissioned a study which suggested that a wide range of interventions are required to tackle the issue including community based and partnership approaches.<sup>8</sup> In October 2014, the ACT Government launched the Towards Zero Growth Healthy Weight Action Plan. The Action Plan has a strong focus on community engagement and partnership.



## 'Business as usual' - an analysis

In the three years prior to the restructuring of the Grants Program, the program was awarding an average of 97 grants each year with a total value of around \$2.1 million per annum. The breakdown of strategic focus areas for this funding in 2010-12 is provided below:



2012-13 Grants Program Funding by primary strategic focus area

To assist the consultation process, a discussion paper was developed to scope existing activities and proposed changes. The paper analysed existing Grants Program funding, and revealed a dispersed funding focus and a resultant lack of funding 'narrative' and measurable outcomes. This was compounded by a predominance of relatively small value, short term grants, which led to a large administrative burden for both the Grants Program and the grant recipients, relative to the overall funding provided by the Grants Program.

## The consultation process

A six-week public consultation opened in February 2013 accompanied by circulation of a discussion paper which proposed a raft of changes to the Grants Program, as a starting point for a community consultation process. The possible changes included provision of larger, longer-term grants; a more streamlined grant application process for larger grants; refocusing grant priorities to reflect overweight and obesity issues; and cessation of opportunities that no longer reflected the strategic intent of the program.

The consultation process provided a range of opportunities for community input including a public meeting and a call for written submissions. Input was thematically analysed and fed into the policy development process. There was general community support for the proposed changes but consultation heard particular concerns from the mental health promotion sector. A detailed discussion of the consultation process is the subject of a separate article in this bulletin.

# Redesigning the ACT Health Promotion Grants Program - a new model for a 'wicked' problem (continued)

## Policy outcomes

The community consultation process was used to validate or modify the broad brush policy objectives that had been set by government. Several distinct new directions emerged as a result of the consultation and in subsequent policy settings:

- 'Healthy Canberra Grants' and the 'Health Promotion Innovation Fund' replaced the existing structure of four separate grant and sponsorship rounds.
- Funding Priority was focused on programs to improve population outcomes around overweight and obesity, including improving eating habits and increased physical activity.
- Multi-year funding arrangements of up to three years would become the preferred norm for 'Healthy Canberra Grants', rather than the exception.
- The 'Health Promotion Innovation Fund' would offer smaller value grants (up to \$15,000) for innovative projects against the same priorities as the 'Healthy Canberra Grants'.
- A streamlined two stage application process was introduced for the 'Healthy Canberra Grants' and a simplified application, reporting and evaluation processes was instituted for the 'Health Promotion Innovation Fund'.
- A new statement of strategic intent and new funding and evaluation guidelines were developed to outline the targets and expected outcomes of the Grants Program, and how it would align with larger government policies and objectives.

## Implementation

The Minister for Health announced changes to the Grants Program in July 2013. The two new grants funding opportunities, 'Healthy Canberra Grants' (offering about \$2m per annum) and the Health Promotion Innovation Fund (offering about \$0.2m per annum), opened for applications on 24 August 2013. These openings were accompanied by a range of public information opportunities for potential applicants.

It was clear from the outset that there was a lot of community interest, and the first round of Healthy Canberra Grants attracted an unprecedented 67 applications, for a value of \$12.5 million.

## Outcomes

In the 12 month period following the announcement of the re-designed Grants Program, 206 applications for the total value of \$25.82 million were received and assessed. This reflects a ratio of demand for funding and available allocation in the order of 6:1. This is more than double any previous demand and suggests that the new funding opportunities are resonating with community need. The much higher number of applications received may also reflect an increase in accessibility via simplified grant application processes, combined with the operation of the 'Smartygrants' on-line grants management system.

## Discussion and learnings

The ACT Health Promotion Grants Section made a deliberate decision from the outset not to engage external consultants to perform the program review and provide recommendations to government. It took the view that it had the best operational insight into the business processes that were under review. The ACT Health Promotion Grants Section also felt it important to be intimately involved in the community consultation process, to have the best possible understanding of the feedback received and concerns raised. Such knowledge would be valuable far beyond the announcement of new policy directions as it would inform understandings in future dealings with grant applicants and stakeholders.

Being involved in the community consultation process meant that we had to take direct feedback from the small proportion of stakeholders who saw themselves as losing out under the new arrangements. This provided an opportunity for follow-up and solution-brokering in a manner that was much more valuable than might have been the case had we simply responded to a consultant's report and recommendations.

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# Redesigning the ACT Health Promoting Grants Program - consultation process

Tony Blattman, ACT Health Promotion Grants Section, Population Health Division

In 2012 the ACT Government decided to refocus the ACT Health Promotion Grants Program (the Grants Program) to provide an emphasis on dealing with overweight and obesity. Although the Government had already set the broad brush policy directions for the Grants Program, it was keen that there be a robust public consultation to further inform the process.

In accordance with *Engaging Canberrans: A guide to community engagement*, the consultation process that was carried out was in the category of 'Consult (Check direction)'. It was considered to be of moderate complexity. The Grants Program has been in operation since 1995 and had a number of long entrenched stakeholders, and it was important that their views were considered in this process, and it was important that the process was not, and was seen not to be, a 'rubber stamping' exercise.

To assist the consultation, a discussion paper was developed which scoped existing activities and articulated proposed changes in general terms. The paper analysed existing Grants Program funding, and revealed a dispersed funding focus and a resultant lack of funding 'narrative' and measurable outcomes. This was compounded by a predominance of relatively small value grants, which led to a large administrative burden relative to the overall funding provided by the Grants Program.



Time to talk



A six-week public consultation commenced in February 2013. As a starting point, a discussion paper was released, proposing a raft of changes to the Grants Program. The possible changes included provision of larger, longer term grants; a more streamlined grant application process for larger grants; refocusing grant priorities to reflect overweight and obesity issues; and cessation of opportunities that no longer reflect the strategic intention of the program.

The consultation included a public meeting attended by 70 people from 38 different organisations. The proceedings of the meeting were summarised and published on the Grants Program website and fed into the policy development process.

The consultation also received nearly 200 pages of written submissions. A wide range of community groups responded and it was clear that many hours of considered thought were invested in the submissions provided. Not surprisingly, views received were wide ranging and demonstrated some divergence of opinions. It was encouraging to note that there was general, if sometimes qualified, agreement with several of the proposed changes to the Grants Program.

The feedback received was tabulated against the questions raised in the discussion paper and was thematically analysed as part of the policy development process. It was clear that the final policy direction for the new grants program had been considerably enhanced as a result of community input. The new direction of the program was announced in July 2013, and as reported elsewhere in this bulletin, demand has been considerable.



Photograph: VisitCanberra

## Healthy Canberra Grants

Emma Spicer, ACT Health Promotion Grants Section, Population Health Division

Healthy Canberra Grants is the major funding activity of the ACT Health Promotion Grants Program. In total, it provides approximately \$2.1 million of funding every year to suitable programs. The main aim of Healthy Canberra Grants is to fund programs that will support the ACT Government to achieve a healthier weight profile across the ACT population (particularly children). Examples include programs that aim to improve eating habits and/or increase physical activity.

Applications are therefore encouraged for programs that support healthy eating consistent with the Australian Guide to Healthy Eating and the Australian Dietary Guidelines. Programs that support the aims of ACT Health's Physical Activity Strategic Framework 2012-2015 and the Towards Zero Growth Healthy Weight Action Plan are also encouraged.

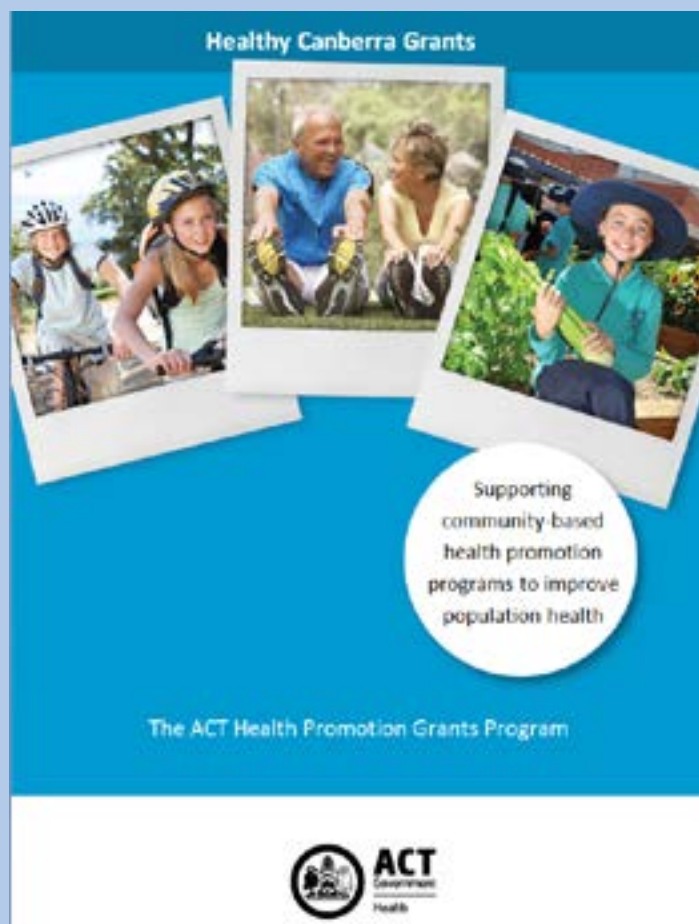
Applications are also considered for programs that focus on other key population health issues in the ACT:

- smoking prevention, reduction and cessation;
- activities that reduce the harmful and hazardous consumption of alcohol; and
- healthy active ageing through appropriate physical activity opportunities.

Healthy Canberra Grants uses a two-stage application process involving an initial Expression of Interest. Shortlisted applications from the initial stage are then invited to submit a more detailed application in line with their initial Expression of Interest.

To date, 13 programs have been funded through two rounds of Healthy Canberra Grants to a total value of \$4,161,088 over three years. Funding has been provided for programs that:

- increase physical activity in children;
- provide nutrition advice to families;
- raise public awareness about the challenge of obesity;
- create partnerships linking the primary care sector to the community sector;
- facilitate community action against alcohol-related harm;
- encourage healthy eating in sporting clubs;
- provide a nutrition advisory service to the ACT community;
- enable culturally and linguistically diverse communities to eat well, stay active and strengthen community connections;
- encourage children to grow and eat healthy food;
- provide smoking cessation opportunities through community pharmacies; and
- encourage healthy lifestyle choices for school aged children, particularly Aboriginal and Torres Strait Islander children.





## Healthy Canberra Grants (continued)

### Healthy Canberra Grants – Funded programs\*

Organisation	Project Name	Amount Funded *
Gordon Primary School	Lanyon Cluster of Primary Schools Every Chance to Dance	\$27,000
Heart Foundation ACT	LiveLighter	\$591,200
ACT Medicare Local	Connect Up for Kids	\$571,188
Physical Activity Foundation Ltd	Ride or Walk to School	\$572,433
YMCA of Canberra	Take Off! with the Y and Bluearth	\$438,000
Alcohol, Tobacco and Other Drugs Association ACT(ATODA)	Community Action Against Alcohol	\$159,000
Canberra Environment Centre	Grow Together	\$88,765
Nutrition Australia ACT	ACT Nutrition Support Service	\$419,000
Pharmacy Guild of Australia - ACT Branch	Community Pharmacy Smoking Cessation Program	\$138,000
Australian Drug Foundation	Good Sports ACT	\$429,120
Companion House	Healthy Futures: Gardens, Healthy Eating and Getting Active	\$158,531
Wirrpanda Foundation	Wirra Club	\$464,453
Jervis Bay School	Jervis Bay School Gardens Project	\$134,398

\*Amount funded is over three years except for Pharmacy Guild of Australia – ACT Branch which is funded over two years.

The programs funded within Healthy Canberra Grants represent a comprehensive approach to obesity prevention through collaboration with government and the community sectors. They are key components of the ACT Government's commitment to supporting a healthy, active and productive ACT community.



Photograph: VisitCanberra

## LiveLighter ACT: a public healthy weight education campaign

Jennifer Ramsay, Heart Foundation ACT

The Heart Foundation ACT launched LiveLighter ACT in 2014, using funding from the ACT Health Promotion Grants Program Healthy Canberra Grants 2014-16. This social marketing campaign, based on the campaign developed by the Heart Foundation Western Australia and the Cancer Council of Western Australia, aims to use commercial marketing techniques to capture people's attention about the serious health consequences of being overweight or obese. Specifically, the campaign increases awareness about the link between being overweight with chronic disease, and supports the maintenance of physical activity, healthy eating, and healthy weight. It also encourages public debate about obesity and the need for changes in the environment to support healthy eating and physical activity.

The prevalence of overweight and obesity is steadily increasing globally and is one of the leading causes of disease burden in Australia. Compared to 1995, the proportion of Australians that are now obese has increased by 47 per cent with more than one in four adults being obese.<sup>1</sup>

Similarly, overweight and obesity is one of the Australian Capital Territory's (ACT's) most pressing health issues. Some 63 per cent of the ACT adult population are overweight or obese, with 25 per cent being obese.<sup>2</sup>

A number of factors are known to contribute to obesity, including poor nutrition and a sedentary lifestyle. Only 11 per cent of ACT adults consume sufficient vegetables on a daily basis and less than half eat a sufficient quantity of fruit.<sup>2</sup> Close to a quarter of the ACT population aged 15 and over do very little or no exercise at all.<sup>2</sup> This is well below the national average of 36 per cent.<sup>3</sup>

Being obese has the potential to reduce a person's life expectancy by up to eight years and diminishes their number of healthy life years by up to 19.<sup>4</sup> Excessive waist circumference contributes to a number of chronic (or non-communicable) diseases, including:

- type 2 diabetes;
- cardiovascular disease (hypertension, coronary artery disease, congestive heart failure, pulmonary embolism and stroke); and
- some cancers (oesophageal, pancreatic, bowel, breast (post-menopause), endometrial and renal).<sup>5</sup>

The Heart Foundation Western Australia (WA) in partnership with the Cancer Council of WA, was contracted in 2011 by the WA Department of Health to develop a public health education program in WA to encourage people to eat well, be active and maintain a healthy weight. The resultant campaign, LiveLighter®, commenced in June 2012.

LiveLighter® is a social marketing campaign. It uses commercial marketing techniques to positively influence behaviour change in the target audience. The campaign is based on formative research including a national and international literature review of previous campaigns, including Go for 2&5® and Measure Up®. Focus groups were conducted to test the campaign ads with both an overweight and healthy weight sample of adults in Australia. The advertisements tested extremely well in terms of capturing people's attention and delivering the important messages about the serious health consequences of being an unhealthy weight.<sup>6</sup>



On Monday 20 October 2014, the Heart Foundation ACT launched LiveLighter ACT with funding from the ACT Government. The campaign aligns strategically with the ACT Government's Healthy Weight Initiative, which aims to support the community to be healthy, active and productive.

LiveLighter ACT targets adults aged 25 – 64 years, living in the ACT with a Body Mass Index (BMI) greater than 25. The objectives of the campaign are to:

- increase awareness of the link between being overweight and chronic disease;
- increase understanding of the risks associated with poor lifestyle choices;
- support the trial, adoption and maintenance of healthy eating, physical activity and healthy weight; and
- encourage public debate about obesity and the need for changes in the environment to support healthy eating and physical activity.

The main LiveLighter® messages are:

1. Being overweight increases your risk of heart disease, type 2 diabetes and some cancers.
2. It is important to reach and maintain a healthy weight, make healthy choices about what to eat and drink, and lead a physically active lifestyle.
3. Top tips to LiveLighter®:
  - Watch your portion size
  - Avoid sugary drinks
  - Sit less
  - Cut back on salt
  - Cut back on alcohol
  - Watch the fats you eat
  - Go for 2 fruit and 5 veg daily
  - Cut back on sugar
  - Choose healthy snacks
  - Be active every day

LiveLighter® advertisements feature confronting images of 'grabable' guts and toxic fat. This is a deliberate approach designed to raise awareness and stimulate public debate. LiveLighter® also offers a healthy alternative, providing access to a website with a wealth of information, resources and tools to support people in making and maintaining positive lifestyle changes.

In line with recommended best practice for social marketing campaigns, LiveLighter ACT uses a comprehensive approach for campaign delivery. Paid mass media advertising directing viewers to the LiveLighter® website spearheads the campaign on commercial TV, outdoor bus shelters, digital and social media.



## LiveLighter ACT: a public healthy weight education campaign (continued)

The advertisements are supported by a geo-targeted website featuring ACT relevant information and a suite of support tools including a free meal and activity planner, recipes and factsheets, and social media. LiveLighter ACT has aligned with a number of local organisations including Cancer Council ACT, ACT Medicare Local, YMCA Canberra and the Dietitians Association of Australia.



Reduce your risk of heart disease, diabetes and cancer by eating less and moving more every day.

**LIVELIGHTER**



livelighter.com.au



LiveLighter ACT is being evaluated by the Centre for Behavioural Research in Cancer, Cancer Council Victoria using a cross sectional survey. The results of the campaign impact and outcomes will be available in March 2015.

Analysis of the LiveLighter ACT process metrics in December 2014 reveals the following:

Paid media	<ul style="list-style-type: none"> <li>Commercial TV – 1113 Target Audience Rating Points (TARPs)</li> <li>Outdoor bus shelter advertisements – 40 placements</li> <li>Digital execution – achieved highest ever click through rate for a Canberra Times home page buyout</li> </ul>
Unpaid media	<ul style="list-style-type: none"> <li>19 items</li> <li>Cumulative audience reached - 281,404</li> </ul>
LiveLighter website	<ul style="list-style-type: none"> <li>7,157 hits</li> <li>4,185 unique users</li> </ul>
Meal and activity planner	<ul style="list-style-type: none"> <li>600 new registrations</li> </ul>
Social media	<ul style="list-style-type: none"> <li>Facebook – 115 new likes (5,329 national total)</li> <li>Twitter – 100 new followers (1,155 national total)</li> </ul>
Stakeholder engagement	<ul style="list-style-type: none"> <li>11 brand supporters</li> <li>10 expert advisors</li> </ul>

### Testimonial

Julie Priestley, an Australian Practising Dietitian based in Canberra shares the importance of taking small achievable steps to improve health.

*"Most of the clients seen in the Nutrition and Dietetic Clinic are prompted to seek advice because they have health concerns or they've been referred by a GP," Ms Priestley said.*

*They've often tried lots of diets where they've changed everything in their life and then felt overwhelmed, and then guilty because they've failed.*

*The LiveLighter website is fantastic and I'm recommending it to some clients. I've shown some clients the LiveLighter Christmas factsheet because it provides manageable tips on how to eat well and be active at Christmas. They don't have to pile their plate so high – after all it's not their last meal, there is a day after Christmas. We talk about how they can enjoy their main Christmas meal but to watch the snacks – to cut back on the lollies and chips."*

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## Ride or Walk to School

Emma Tattam, Project Manager, Physical Activity Foundation

The objective of the Ride or Walk to School program (RWTS) is to increase the number of students using active travel to journey to and from school, with the longer term goal being to influence life-long attitudes and behaviour in relation to active travel. The program is funded by the ACT Health Promotion Grants Program, and aligns with the ACT Government's Healthy Weight Initiative.



Since its inception in 2012 the program has been rolled out in 50 ACT schools. The expansion from 11 pilot schools to the current 50 schools was enabled by a Healthy Canberra Grant to the Physical Activity Foundation (PAF), with ongoing support and collaboration with ACT Health and the ACT Education and Training Directorate (ETD). The program design and its continuing evolution have been heavily influenced by the views of students, teachers and parents from existing schools as well as feedback and consultation with program partners and providers.

The growth from 11 to 50 schools has required a refinement of the program delivery method and school support structure. This has included the streamlining of communication techniques to schools, improvements to reporting and survey requirements, improved marketing materials for use by schools and the review of program costs and identification of potential cost-saving measures.

The PAF continues to work collaboratively with the ACT Government and acknowledges the crucial role ACT Health plays, particularly in relation to teacher resource development and training, and its key liaison role with government stakeholders responsible for the road safety environment and infrastructure in and around schools. The close collaboration with key government, local business and community organisations is critical to the success of the program. Such an extensive program could not be delivered without the generosity and expertise of individuals across a range of sectors.

RWTS asks for a three-year commitment from the schools involved in order to drive a cultural change within the school community around the use of active travel. A holistic approach has been taken to ensure schools are well supported throughout their three years on the program, and feel confident to convey not only the health and fitness elements of the program, but the important road and personal safety messages.

Schools are provided with bikes, helmets and bike maintenance equipment, and are expected to deliver the Safe Cycle program to year 5 and/or 6 students. This program has been developed by Canberra teachers in close collaboration with ACT Health and ETD. The program combines theoretical and practical lessons with an emphasis on safe cycling techniques, and is linked to the Australian Curriculum. The Safe Cycle program is supported by other classroom activities such as Constable Kenny Koala (an ACT Policing child safety program), student workshops in personal safety (delivered by Lee's Taekwondo) and BMX skills workshops (delivered by Freestyle ACT BMX Club). RWTS also provides personal development opportunities to each school's teaching staff, by allowing them to grow their skills and confidence in the use of school bikes with students.

As the momentum around RWTS builds, the program is also focusing on building the community of schools to share their knowledge and experiences. To date, this has been done through planning forums with all schools, peer-led teacher training sessions, and an event to thank schools for their participation and recognise their key achievements. Future sessions are being planned with a view to encouraging more student involvement and feedback. Efforts also continue to engage the parents and the wider school community to address any concerns or objections they have in relation to the use of active travel around their school.

While RWTS has the potential to have a big impact on the wider ACT population, it is also important to reflect on the positive impact the program has on individuals. A recent email from a parent of a student at UC Kaleen said:

*I arrived at the school yesterday afternoon and was told that my son had a project that he wanted me to see and could I come and have a look. They took me out onto the school grounds and I saw my son, who until now couldn't even balance a bike, riding towards me on a bike without training wheels. Apparently he has been riding a bike for a couple of weeks and they have been taking him on to the bike paths to practice before showing me. This may not seem like a great achievement to any other family but any achievements for a child with autism are remarkable and it brought tears to my eye.*

Two years after the launch of the program, it is prudent to reflect on some key program achievements, including:

- having 50 schools committed to RWTS, reaching over 20,000 students;
- being on track to deliver more than 810 bikes, scooters and helmets by early 2015;
- seeing over 800 students participate in BMX workshops;
- 50 self-defence workshops delivered in schools; and
- over 70 teachers trained in Safe Cycle.

While key program partners remain committed to delivering the key objectives identified in the three-year funding agreement there is also the long-term view to expand the program and make it available to even more ACT schools.



Photograph: Physical Activity Foundation



## Connect Up 4 Kids

Glentin Yin and Andrea Gledhill, ACT Medicare Local

### Introduction

ACT Medicare Local's Connect Up 4 Kids (CU4K) project is funded through the 2014-2016 ACT Health Promotion Grants Program Healthy Canberra Grants. CU4K is one of several territory-wide initiatives aimed at halting the growth of childhood overweight and obesity rates in the ACT. The 3 year project targets the prevention of childhood obesity through the development of pathways and health promotion messages for primary care providers to use for families with children aged 3–7 years. The project will reach families through child health assessments, primary health care services and community based programs. The objectives of CU4K focus on four key areas:



1. **Systems:** Improved pathways for obesity prevention for all families in the ACT with children aged 3–7 years, guiding families through health promotion advice, child health assessments, and primary health care services and by connecting families with community based programs;
2. **Health promotion and health literacy:** Messages, information and resources targeting healthy weight in childhood in place and accessible to all ACT families with children in the target group age range;
3. **Capacity building and workforce:** The capacity of the ACT workforce is enhanced, delivering evidence-based and consistent health promotion and prevention strategies about obesity prevention, improving the health literacy of families with children in the target group age range; and
4. **Community-based support:** An up-to-date map of evidence-based community programs is in place, focussing on community programs in the ACT offering advice, activities and support for the maintenance of healthy weight in children.

Governance structures for the CU4K project have been established, including the formation of a Steering Group comprised of representatives from ACT Health, Child and Family Centres, Nutrition Australia, Physical Activity Foundation and local General Practices. The Steering Group provides input and advice to ensure the project achieves its goal and objectives.

### Connecting the dots for healthy kids

Initial background research and needs assessment was undertaken to identify gaps in the current system and existing services in the ACT. Identified issues include:

- the lack of a clearly defined referral pathway for children identified as being overweight or obese in General Practice;
- the need for improved education for health professionals on various topics related to the prevention and management of childhood obesity, such as identifying overweight and obesity in children and raising the issue with parents and families; and
- the absence of accessible community programs that assist families with children outside of their healthy weight range to learn skills and strategies for healthy weight management in children. This type of program is available in other Australian jurisdictions, but not in the ACT.



Photograph: VisitCanberra

To address these needs, the CU4K approach was designed to:

- improve obesity prevention pathways in the ACT primary health care sector; and
- build capacity in the prevention and management of childhood obesity.

The pathway begins with highlighting the need for basic assessments of height and weight in children at regular intervals throughout their growth trajectory. The importance of developing a culture of height and weight measurement and monitoring is widely noted in prevention literature as being a significant step in recognising when a child might be at risk of becoming overweight or obese. While there is a large emphasis on measuring height/length and weight in infants and very young children, this practice tends to drop off as they approach pre-school age. Population-based health assessment points, such as the 3.5–4 year old Healthy Kids Check and Kindergarten Health Screen, provide an opportunity to continue to take these measurements as the child gets older.

Further along the pathway, and depending on the child's weight status and overall health, the child may then require a clinical assessment by their General Practitioner (GP), or be referred on to an allied health professional, or to a program such as the School Kids Intervention Program (SKIP) currently in development (a 10 week multidisciplinary, family-centred, community-based service for children aged 4-12 years who are diagnosed as overweight or obese). CU4K's aim is that all families participating in a population-based health assessment will have the opportunity to access primary prevention messages and resources about healthy weight management.



## Connect Up 4 Kids (continued)

The CU4K Healthy Weight Pathway will be supported by tools, resources and key messages to assist health professionals in delivering a prevention message to families. A suite of resources targeted at families with information about how to incorporate healthy eating and physical activity into their lifestyle will be collated and offered to health professionals to use. The CU4K Healthy Weight Pathway will be accompanied by seven key health promotion messages aimed at families with children in the target age range:

1. Be healthy together every day: Make healthy choices as a family;
2. Move your body: Aim for 60 minutes or more of physical activity every day;
3. Switch off screens: Limit screen time to less than 2 hours each day;
4. Munch on veg: Aim for at least 2-4 serves every day;
5. Choose to drink water: Limit sweet drinks (such as juice, cordial and soft drink);
6. Enjoy some fruit: Aim to eat 1-2 serves every day; and
7. Goodnight, sleep tight: Aim for a minimum 10 hours sleep per night.



**Photograph:** ACT Medicare Local



To complement the pathway and build capacity in the ACT primary health care workforce, education and skill development opportunities will be offered to GPs, practice nurses and Maternal and Child Health (MACH) nurses. Topics of interest include how to communicate effectively with families about a child's weight, identification and assessment of weight and the key strategies around healthy eating and physical activity. A variety of modalities including webinars, face-to-face presentations, eLearning modules that can be completed online, as well as one-on-one sessions with a member of the CU4K team will be available to maximise reach.

Following consultation and input from the Steering Group and other key stakeholders, the CU4K Healthy Weight Pathway will be widely available within the ACT from early 2015.

For more information about the CU4K project please contact a member of the CU4K team at ACT Medicare Local on 02 6287 8099.

## Health Promotion Innovation Fund

Rosemary Urquhart, ACT Health Promotion Grants Section, Population Health Division

The Health Promotion Innovation Fund (HPIF) provides an opportunity for smaller, innovative projects which support the strategic aims of the ACT Health Promotion Grants Program (the Grants Program) to apply for funding. Projects must align with the strategic funding priorities of the Grants Program, the main one being to support the ACT Government's goal of achieving a healthier weight profile in the ACT population. The HPIF has a particular focus on achieving this outcome in children. In addition, projects which support smoking prevention, reduction in hazardous alcohol consumption and healthy active ageing will be considered.

Prevention of overweight and obesity is the major priority of the HPIF. Project proposals may include (but are not limited to):

- programs that support improved healthy food and drink choices for the ACT population and improved eating habits. These include programs that support positive changes in the food environment, including encouraging people to choose tap water as the drink of choice; and
- programs that help improve physical activity outcomes at a population level.

Applications for programs that enable children and their families in the ACT to adopt and maintain healthy lifestyles through increased physical activity and healthy eating habits are encouraged. This includes programs that improve healthy eating habits via school canteens and food education.

With a budget of approximately \$210,000 per annum or 10 per cent of the total grants budget, the HPIF provides three funding opportunities each year for projects which will be completed within 12 months with a budget of no more than \$15,000.

The priority areas are the same as for the Healthy Canberra Grants, but because the funding for each project is smaller, it reduces the risk involved and allows for innovative projects that seek to test new ways of working and new initiatives to be trialled. The structure of three assessment opportunities each year also allows for greater flexibility for community organisations regarding the timing of their projects.

By the end of 2014, 118 eligible applications had been submitted to the Health Promotion Innovation Fund requesting \$1,334,896. Of these applications, 33 have been funded.

Projects that have received funding include: Fraser Primary school – 'From Paddock to Plate', Youth Coalition of the ACT 'Youth work – it's more than just pizza', Gungahlin Jets Australian Football Club for the 'Jets 'Top Guns' project', YWCA for 'Nutrilicious', and YMCA for 'Arthritis Action'.



# Case Study

## High-visibility kids – a road safety strategy

### ACT Policing

For ACT Policing, traffic operations and road safety is not just about enforcing the road rules and giving directions, it's also about education and awareness to prevent injuries and deaths.

In a Canberra first, ACT Policing teamed up with the ACT Government's Ride or Walk to School program to deliver a high-visibility vest pilot program to primary school students in the Belconnen area in 2014, funded by the ACT Health Promotion Grants Program.

The Constable Kenny Koala high-visibility vest program aims to promote positive road safety behaviours in students. As part of the pilot, students received a high-visibility vest following Constable Kenny's Stay OK on the Road presentation and were encouraged to wear their vests on their way to and from school.

The Chief Police Officer for the ACT, Rudi Lammers, launched the program at Mount Rogers Primary in Melba in Term Two 2014. At the launch, Constable Kenny spoke to the children about the importance of the high-visibility vests and quizzed the students on road safety.

The vests, which include a call to action for drivers to 'Slow down – 40km/h in school zones' on the back, not only helped to increase the visibility of students, but also help raise awareness of 40km school zones, and the responsibility of drivers to slow down in these areas.

Officer in Charge of Traffic Operations Station, Sergeant Rod Anderson, said that the implementation of the high-visibility vest program benefits both children and motorists.

*"ACT Policing is committed to improving road safety and that includes making our roads and pathways safer for vulnerable road users, such as pedestrians, and especially children. High-visibility vests will be another valuable tool to assist children when travelling to and from school. We know that children can be curious and keen to explore their surroundings, however their limited understanding of safety and tendency to focus on what is important to them can be dangerous. These factors coupled with their developing understanding of sound, distance and speed puts them at risk around traffic",* Sergeant Anderson said.

Over 1100 vests were handed out to 54 classes at four Belconnen primary schools during the pilot. Teachers and parents alike welcomed the new program. Many parents provided positive feedback:

*"It's a fantastic idea. We make sure that our child wears it to and from school, even if we go in the car, as visibility is also important in the school car park."*



*"I love the vest it has made my son more aware of road safety. He has special needs and quite frequently runs off on me. He never gets too far but knowing that he is now visible to cars has made walking to school a more frequented event."*

At the conclusion of the pilot parents and teachers were surveyed to find out about how the program had impact on road safety at their school. The results showed that 95 per cent of parents surveyed felt the initiative improved the safety of children who rode or walked to school and 65 per cent of teachers felt it had a positive impact on road safety at their school.

The pilot also assisted in increasing parents' confidence in letting their child walk to and from school by providing practical strategies to ensure safe behaviours on our roads. This was demonstrated through 66 per cent of parents surveyed agreeing that the initiative encouraged them to consider allowing their children to ride or walk to school.



Photographs: ACT Policing



## Pregnant Pause – supporting pregnant women to achieve an alcohol free pregnancy

Kumara Buchanan, Foundation for Alcohol Research and Education

Each year over 5,000 babies are born in the ACT.<sup>1</sup> Some babies have a more difficult start to life than others as they are born with a Fetal Alcohol Spectrum Disorder (FASD) after being exposed to alcohol *in-utero*.

With funding from the ACT Health Promotion Grants Program a new campaign, Pregnant Pause, commenced in August 2014. The campaign aimed to challenge those people close to the pregnant woman (dads, partners, friends, colleagues and family members) to 'swap the pub for your bub' and increase public awareness of the risks of alcohol consumption during pregnancy.

Alcohol consumption during pregnancy is associated with several adverse consequences, including miscarriage, low birth weight, stillbirth and premature birth. Alcohol exposure *in-utero* can also result in the baby being born with Fetal Alcohol Spectrum Disorder (FASD) and is the leading preventable cause of non-genetic, developmental disability in Australia.<sup>2</sup> FASD is a lifelong condition characterised by a range of problems including: physical, cognitive, intellectual, learning, behavioural and social problems; as well as difficulty with sleeping, executive functions (complex cognitive processing requiring the co-ordination of several subprocesses to achieve a particular goal), communication, motor skills, attention and memory. Individuals may also have physical impairments including sight and hearing issues, facial anomalies and organ damage.<sup>3</sup>

However, awareness of the effects of alcohol consumption during pregnancy and awareness of recommendations to not consume alcohol during pregnancy remain low.<sup>4</sup> Data from the 2010 National Drug Strategy Household Survey shows 47 per cent of women drank alcohol before being aware of their pregnancy, but that one in five women continue to drink after knowledge of their pregnancy.<sup>5</sup>

Pregnant Pause aims to address this situation by raising awareness about the risks of alcohol consumption during pregnancy. Research by Health Technology Analysts show that public education campaigns can prevent between one and three per cent (lower and upper estimates of effectiveness) of cases of FASD each year.<sup>6</sup>

Pregnant Pause targets those around the woman as these people can influence her behaviour. Partners in particular have significant influence on women, with 77 per cent of women who drink during pregnancy saying that they did so with their partner.<sup>7</sup> Research from Canada has found that women are most likely to lower their alcohol consumption during pregnancy if their spouse or partner encouraged them to stop or cut back.<sup>8</sup> Therefore, Pregnant Pause aims to strengthen the support network of a mother-to-be to help support her to be alcohol free throughout her pregnancy.

Pregnant Pause is an initiative of the Foundation for Alcohol Research and Education (FARE), a leading not-for-profit organisation working to stop the harm from alcohol. FARE received funding from the Health Promotion Innovation Fund of the ACT Health Promotion Grants Program to promote the campaign.

Using the funding from this grant, FARE was able to promote Pregnant Pause leading up to International FASD Awareness Day on 9 September 2014. The grant provided the opportunity to institute a number of events and initiatives (including advertising and a targeted social media campaign) throughout August and September 2014.

The campaign was officially launched by Ms Yvette Berry MLA at the George Gregan Foundation Playground at the Centenary Hospital for Women and Children in August 2014. The launch also included presentations from Dr Steven Adair, Clinical Director of Obstetrics and Gynaecology for Canberra Hospital, and Mr Michael Thorn, Chief Executive of FARE. The launch promoted the campaign to local media to help achieve the campaign's goal to reduce the number of expectant mothers who drink alcohol.



Photograph: Foundation for Alcohol Research and Education

Kristen Henry and Rod Cuddihy, presenters for the local radio station MIX106.3, became celebrity ambassadors for the campaign and promoted Pregnant Pause throughout August and September 2014 on their popular morning radio breakfast show with interviews and promotional activities.

To further embed the campaign an information video was launched on International FASD Day, targeted at pregnant women and their partners. The video features Professor Elizabeth Elliott AM, Professor in Paediatrics and Child Health at The University of Sydney, Consultant Paediatrician at The Children's Hospital at Westmead, Sydney and enthusiastic supporter of Pregnant Pause. This video is a resource for health professionals and those in contact with women in the early stages of their pregnancy to give accurate information on the risks of alcohol during pregnancy. This video has been used in the prenatal and information classes at all the major maternity hospitals in Canberra.



## Pregnant Pause – supporting pregnant women to achieve an alcohol free pregnancy (continued)

Since the launch, Pregnant Pause has successfully raised awareness about the risks of alcohol consumption during pregnancy. Media coverage of the Pregnant Pause launch reached over 400,000 people,<sup>9-13</sup> and an additional 2,000 people are now following Pregnant Pause on social media since the start of the ACT Health funding.<sup>14,15</sup> Importantly, the Pregnant Pause website during the months of August and September 2014 saw a 66 per cent increase with ACT residents accessing the website to gain further information and register for a Pregnant Pause.<sup>16</sup>

Those people who wish to participate in Pregnant Pause can do so by making a public pledge via the campaign's website [www.pregnantpause.com.au](http://www.pregnantpause.com.au). Health professionals or organisations who wish to receive resources to display or distribute can contact Pregnant Pause Project Officer, Kamara Buchanan at [kamara.buchanan@pregnantpause.com.au](mailto:kamara.buchanan@pregnantpause.com.au) or 6122 8600.



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## SmartyGrants Application Process to the ACT Health Promotion Grants Program

Deborah Reynolds , ACT Health Promotion Grants Section, Population Health Division

The ACT Health Promotion Grants Program (the Grants Program) was the first grants program in an ACT Government Directorate to use the SmartyGrants online grants management system. SmartyGrants, developed by the Australian Institute of Grants Management (AIGM), is Australia's most widely used online grants management system, and enables management of the entire grants cycle from application to evaluation.

SmartyGrants was initially adopted before the Grants Program went through a review process in early 2013, and has led to streamlining and improving the format of funding opportunities. SmartyGrants provides data reports on a range of application and funding features. For example, reports can be run on any aspect of applications or funding opportunities. Organisation profiles and proposed project descriptions are easily retrieved. The Grants Program team frequently receives requests for data which SmartyGrants can quickly provide.



The application process has been significantly streamlined. Applicants are able to submit applications online right up to closure time of each funding opportunity, with technical issues addressed and resolved quickly by the SmartyGrants help desk.

Administrative processing of applications has also been streamlined, with eligibility issues and/or missing documents easily and quickly identified. Grants Program administration staff can commence processing applications immediately the funding opportunity closes. Another advantage for administrative staff in the application stage is document control. Mandatory documents required for eligibility assessment such as public liability cover can be efficiently checked and requested if not provided.

Technical support and ongoing training for Grants Program staff using SmartyGrants is regularly provided. Other government grants programs in the ACT have now adopted the system.





## The assessment process – ACT Health Promotion Grants Program

Deborah Reynolds , ACT Health Promotion Grants Section, Population Health Division

The ACT Health Promotion Grants Programs (the Grants Program) aims to follow the better practice grants administration guidelines outlined by the Australian National Audit Office to ensure 'efficient, economical and ethical grants administration'.<sup>1</sup> This is illustrated by the comprehensive and transparent assessment process used to assess all applications to the Grants Program which ensures that all funding decisions are:

- open and transparent;
- based upon explicit assessment criteria;
- taking place in the context of a quality assurance and risk assessment framework;
- defensible and credible;
- reflecting the views of a cross section of the community regarding the funding of projects; and
- based upon expert knowledge.

### Healthy Canberra Grants

Healthy Canberra Grants applications are assessed through a two stage process. Applicants submit an Expression of Interest (EOI) which is reviewed and short listed by an assessment panel comprised of senior managers from ACT Health and community representatives. The panel seeks expert technical advice about aspects of the EOI if necessary. As well as short listing, this panel may provide recommendations for possible collaboration and partnerships.

Applicants short listed from the EOI stage are then invited to submit a more detailed application, in line with their initial EOI, which is assessed by a panel comprising senior ACT Government staff and relevant community representation.

### Health Promotion Innovation Fund

The Health Promotion Innovation Fund has a one stage application process with the assessment panel drawn from the same pool of experts as above.

The role of the assessment panel is to reflect the views of a cross section of the community regarding the funding of projects in its recommendations for funding, contribute expert knowledge, and provide impartial advice.

The panels that assess the Stage Two Healthy Canberra Grants and the Health Promotion Innovation Fund agree to a list of applications that are recommended for funding. These recommendations are provided to the Chief Health Officer for approval. Once approved, the list of recommended applications is forwarded to the Minister for Health for endorsement before applicants are notified of the outcome of the assessment process.

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## Evaluation of the ACT Health Promotion Grants Program

Joon-Li Choo, ACT Health Promotion Grants Section, Population Health Division

Helen Lilley, Research and Evaluation Section, Population Health Division

Evaluation is a key component of the ACT Health Promotion Grants Program (the Grants Program) for individually funded programs and the Grants Program as a whole. It is currently guided by the ACT Health Promotion Grants Monitoring and Evaluation Framework (the Evaluation Framework) which is consistent with the ACT Government Evaluation Policy and Guidelines.

### Background

In 2009, an external review of the Grants Program was conducted by “Healthcare Management Advisors”. One recommendation of the review was to develop an evaluation framework, which was subsequently prepared by “Simply Strategic” in June 2010. This framework provided detailed theoretical underpinnings and practical tools for evaluating the Grants Program. This framework was singled out for commendation in the Auditor-General’s Report No. 8 of 2013: Management of Funding for Community Services.

In 2013, ACT Health Grants Promotion Section staff collaborated with the newly formed Research and Evaluation Section of the Health Improvement Branch to review and develop the current, condensed version of the Evaluation Framework. This occurred after the major Grants Program review in 2013 (see article on page 9).

The purpose of the current Evaluation Framework is to:

- provide an outline of how the Grants Program as a whole will be evaluated; and
- provide guidance to organisations funded through the Grants Program on how to evaluate their programs or projects.

The Evaluation Framework will help answer key questions about:

- how the Grants Program has contributed to improving health outcomes and minimising the risk of developing chronic disease in the ACT population;
- how the individual grants programs and projects are performing and if they can be improved;
- whether the Grants Program achieved what it set out to do; and
- how the Grants Program can be improved.

### The level of evaluation required by funded organisations

Organisations receiving grants from the Grants Program are required to produce an evaluation report on their project or program. The level of evaluation depends on the size of the grant.

Recipients of grants under \$50,000 in total are required, as a minimum, to do a process evaluation. Process evaluation measures the activities of a program, the program quality and who it is reaching. It assesses how effectively the project or program was delivered and the extent to which it was implemented as planned.

Recipients of grants of \$50,000 or more are required to complete a process and impact evaluation. Impact evaluation measures the immediate and longer term effect of the program. This evaluates if objectives and longer term goals are met.

### Evaluation support

Funded organisations are supported by ACT Health Grants Promotion Section staff to develop their program and evaluation plans. Recipients of the single year Health Promotion Innovation Fund have a project planning template and a Project Plan Supporting Information resource to guide their evaluation planning. Grants Program staff also provide advice and feedback on draft plans.

Population Health Division Research and Evaluation Section staff offer a free half-day evaluation workshop for organisations funded for larger multi-year programs under Healthy Canberra Grants. The workshop includes an overview of evaluation planning, and the opportunity to work one-on-one with evaluation staff to develop or refine evaluation plans. Grant recipients are provided with a project planning and evaluation template, an Evaluation Planning Guide and a list of evaluation resources. This workshop has been delivered twice and has been positively evaluated by participants. Follow-up meetings with evaluation staff are available if required.

### Using the evaluation findings

The ACT Health Grants Promotion Section will use the results of project and program evaluations to provide feedback to funded organisations and the ACT community on the two components of the evaluation: the evaluation of the Grants Program as a whole, and the evaluation of funded programs and projects. Evaluation findings can inform improvements in the delivery of the Grants Program and will monitor whether it is achieving stated aims; using funds efficiently and effectively; and contributing to the health of the ACT population.

These findings will also be used to:

- report to the ACT Government on how the Grants Program contributes to its health and wellbeing goals;
- improve the program as a whole; and
- better understand how the Grants Program can improve the health of the population.

When available, the summary of these key findings will be made available to the public on the Grants Program website at [www.health.act.gov.au/hpgrants](http://www.health.act.gov.au/hpgrants).

## Building Health Promotion Capacity in the ACT

Rosemary Urquhart, ACT Health Promotion Grants Section, Population Health Division

The ACT Health Promotion Grants Section (the Grants Section) has a role in building the capacity of organisations and individuals to undertake good health promotion initiatives within the ACT. The aim is to develop sustainable skills within the ACT workforce and the main target group is workers in community organisations within Canberra, as well as ACT Health and other ACT Government staff.

From 2009 – 2012, introductory training in health promotion was provided through a five day Health Promotion Short Course. Originally developed by the Victorian Department of Human Services, this course provided a practical introduction to the principles and practice of health promotion for those without any formal qualifications in health promotion. In this format, training was provided to over 100 community and government workers. A review of the training in 2012 identified some difficulties with the format, particularly the requirement for five days of face to face delivery. Options to overcome this were explored, and in 2013 the Grants Program partnered with the Canberra Institute of Technology (CIT) to support a newly developed course, the Certificate III in Population Health.

The Certificate III in Population Health can be delivered in a much more flexible fashion using online technology. Those who complete the CIT course also achieve a recognised qualification. The content covers the basic principles of population health including needs analysis, planning, implementing and evaluating a population health project, as well as developing media content, understanding behaviour change and working with groups. For the last two years the Grants Section has provided scholarship assistance to staff from community organisations and ACT Government workers to undertake the course.



Targeted courses designed to assist organisations to be successful in grant applications have included workshops on writing grant applications, training in project planning and evaluation, and questionnaire design. In addition, the Grants Section has held forums to showcase the health promotion work that has been carried out by grant recipients.

The Grants Section has also supported Health Coaching workshops for ACT Health staff. These courses, presented by Health Change Australia, aimed to provide health practitioners with a framework for integrating client-centred communication and behaviour change principles and processes into clinical consultations and programs. Participants were introduced to tools and protocols to assist clients to adhere to medical and lifestyle recommendations, by motivating them toward readiness to change, assisting them to change unhelpful thinking patterns and promoting behaviour change thus achieving better health outcomes.

Sponsorship support has been provided for community organisations to attend Health Promotion conferences. These sponsorships provide ACT-based health promotion workers and funded organisations with opportunities to strengthen their health promotion understanding and skills, and to identify networks and partnerships. Recipients are required to provide reports of their learnings and to present to relevant fora.

Another important aspect of the Grants Section's capacity building role is providing funding for the Community Development Network's (CDNet) list serve ([www.CDNet.org.au](http://www.CDNet.org.au)). This list serve is an important communication tool for community organisations to promote their activities and for the Grants Program to advertise and promote funding opportunities and capacity building programs.



Photographs: VisitCanberra



## Sponsorships for Canberra Institute of Technology population health qualifications

Margot Jensen, Health Science Department, Canberra Institute of Technology

The Canberra Institute of Technology (CIT) is the premier provider of technical and further education in the ACT. Its diverse range of courses now includes the Certificate III and Certificate IV in Population Health. These qualifications reflect the local and national drive to tackle rising levels of lifestyle-related chronic disease. The courses:

- provide skills to improve the health of groups of people in workplaces and other communities using a project-based approach;
- move the focus from individual health behaviour to the wide range of factors that determine the health of whole populations;
- give an introduction to health promotion and population health theory; and
- equip students to win grants for projects aimed at improving health and wellbeing.

### Creating healthy communities

CIT provides training in a range of health-related areas such as nursing, massage, and sport and fitness. CIT recognises that the most intractable health problems in Australia cannot be solved by simply providing excellent health care and advice to individuals. Our qualifications in population health shift the focus from the health of the individual to the health of whole communities, such as workplaces, schools, childcare centres, and community organisations. The Certificate III in Population Health contributes to the ACT Government's commitment to support a healthy and productive community by providing students with the skills to implement project-based initiatives to improve the health of groups of people.

### Developing the course

The Certificate III course in Population Health commenced in 2013 and has been designed to give students the skills to contribute to a population health project. They learn about:

- principles of health promotion and population health;
- how to consult with a community to determine its health needs;
- what helps individuals and groups of people change their unhealthy behaviours;
- how to share information about health;
- elements of project plans including goals, objectives and strategies;
- project management and evaluation;
- nicotine dependence and smoking cessation; and
- working with groups to encourage healthy eating.

The course content includes easy-to-read notes aimed at people with no prior study in the health promotion area. It also includes links to websites, online resources, animations, and videos.

Our students come from community organisations, government departments, and private businesses. CIT recognises that they are busy with work and personal commitments so there is no need to come to classes or attend at a campus. Students do all of their study online from their office or home. Assessments include online quizzes, short written answers, and audio-visual creations and recordings. Students are encouraged to use examples from their work or areas of interest for their assessable work.

### Evaluating the course

Feedback from students about their experience of the course is requested regularly. Students say the skills they have learnt are interesting, helpful and relevant to their work. They have been inspired to come up with innovative ways of improving health and wellbeing in their organisations and communities. They have appreciated the high level of feedback and support from teaching staff. Other feedback comments on the course praise the "excellent current information" the "exploration of new ideas and concepts" and the "knowledgeable and passionate teachers". Teachers have strong ties with the Health Improvement Branch of ACT Health. The ACT Health Promotion Grants Program (the Grants Program) sponsors students from community organisations to complete the CIT Certificate III in Population Health as a capacity building measure. ACT Health Grants Promotion Section staff also assist in validating the course content and assessment to ensure the course delivers valued and relevant industry skills. Students have used their newly acquired knowledge to organise community health projects and get jobs in the health promotion industry.



Photographs: VisitCanberra



## Sponsorships for Canberra Institute of Technology population health qualifications (*continued*)

### Writing grant applications

Applicants for health promotion grants improve the quality of their application when they:

- provide a clear description of their project;
- demonstrate an understanding of project objectives and strategies;
- provide evidence of community consultation about health needs;
- give details of how they will comprehensively evaluate their project; and
- show that the project uses a population health approach and incorporates health promotion principles.

CIT teachers are familiar with the grants approval process. They have seen great ideas and professional organisations fail to win grants because of a lack of these skills. The Certificate III in Population Health is based on this knowledge; and it is delivered in a way that suits people who have never studied before.

### Progressing to the Certificate IV in Population Health

After completing the Certificate III, students can use their skills to plan and carry out a population health project and earn their Certificate IV in Population Health. The Certificate IV qualification is based on a real-life population health project. Project workers think and write about:

- the population health context of their work;
- the collaboration and partnerships involved;
- efforts to build community capacity;
- consultation to identify health needs;
- advocacy on behalf of the community;
- planning and implementing the project; and
- evaluating the project.

Their final written report showcases their work and creates a dynamic and detailed record of the project.

### Studying population health at CIT

At CIT you can ***Dream it. Learn it. Be it.***

Bring your inspiration and dreams for a healthier community to the Certificate III in Population Health. Learn how to make it all happen and be a qualified population health project worker.

For more information on CIT's qualifications in population health, please phone 61 2 6207 3188 or email [info@cit.edu.au](mailto:info@cit.edu.au) and ask for the population health course coordinator. There are regular intakes throughout the year.



Photograph: VisitCanberra



Canberra Institute of Technology  
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## Area Highlight

### ACT Health Promotion Grants Section

The ACT Health Promotion Grants Section (Grants Section) is a section of the Health Improvement Branch responsible for coordinating health promotion grants opportunities for Healthy Canberra Grants and the Health Promotion Innovation Fund. Projects funded through the Grants Program support the ACT Government's Healthy Weight Initiative which targets overweight and obesity, with funding also available for projects which target smoking prevention, reduction and cessation; reducing alcohol related harm; and healthy active ageing.

Staff in the Grants Section advise community-based organisations on applications, and coordinate and manage successful grants. The Section also oversees the assessment process, and links funded organisations with other ACT Government programs which strategically align with the funded program. Another key role is to build capacity to promote health in community organisations. Team members have experience and qualifications in health promotion, psychology, community development, nutrition, and business administration.



From Left to Right: Rosemary Urquhart, Deborah Reynolds, Ros Garrity, Joon Li Choo, Emma Spicer



## Healthy Happenings Summary Oct 2014 – Jan 2015

### How we are working together to progress the Healthy Weight Initiative (HWI).

Commencing in 2014-15, funding of \$3.6m over four years has been allocated to progress the Healthy Weight Initiative. To co-ordinate planned actions for the HWI, a Steering Committee has been established. Members of the Steering Committee are:

- Bronwen Overton-Clarke: Acting Steering Committee Chairperson
- Leanne Wright: Chairperson, Schools Implementation Group
- Melanie Saballa: Chairperson, Social Inclusion Implementation Group
- Joanne Greenfield: Chairperson, Food Environment Implementation Group
- Andrew Pengilly: Chairperson, Evaluation Implementation Group
- Michael Young: Chairperson, Workplaces Implementation Group
- Tony Carmichael: Chairperson, Urban Planning Implementation Group
- Kim Smith: Urban Planning Implementation Group
- Gary Rake: Economic Development representative
- Paul Kelly: Chief Health Officer
- Anita Perkins: Director, Communications, Engagement & Protocol

Co-ordination support for the Steering Committee is provided by CMTEDD, who are also helping to communicate the Healthy Weight Initiative across Government. The Steering Committee feeds into the Strategic Board (all Directors-General) and reports quarterly to the Chief Minister.

If you're involved in, or aware of, any projects that can be linked to the Healthy Weight Initiative, please notify your directorate's Implementation Group or contact Angela Lee on 6205 4736.



### Learning Healthy Habits: Macgregor Primary

Macgregor Primary School is a keen participant in the Ride or Walk to School program. As part of the program, Macgregor Primary incorporates cycling into daily physical activity sessions, operates cycling clubs during school lunch times and uses bikes as the preferred means of transport when visiting cluster schools.

Macgregor Primary also participates in ACT Health's Fresh Tastes programs. As part of the program, the school has recently held workshops for parents aimed at educating them about healthy foods and its importance for student learning, body growth and development. The parents learnt how to prepare and package healthy nutritious foods for their children's lunchboxes in a quick and easy way.

### Drinking fountains installed in the ACT

One of the biggest incentives for people to make water their drink of choice is to make it easily accessible.

Work has started on installing 30 drinking fountains in public places across Canberra in an effort to reduce the use of disposable bottles and increase water consumption.

Locations include City Walk, Mount Ainslie lookout, the Eastern Valley Way cycle path in Belconnen, and Tuggeranong Town Park.

Making it easier for people to fill up their water bottle in popular public places like shopping centres, parks, sports fields and public places with high pedestrian traffic will also help to further reduce the consumption of sugar-sweetened beverages and reduce waste.

The locations of the drinking fountains are the result of a consultation with over 600 Canberrans who provided feedback on the project and input into the locations of the fountains. Over 80 per cent of people said more drinking fountains would encourage them to carry a reusable water bottle, reducing plastic bottle waste caused by purchased drinks. For a full list of the locations please visit [www.tams.act.gov.au](http://www.tams.act.gov.au)

In addition to the 30 drinking fountains, ACT Health has portable water refill stations available free to hire for public events. Contact 02 6269 1000 during business hours to arrange bookings.



# Healthy Happenings



## Outdoor fitness stations

Staying active is a key factor of a healthy lifestyle and to facilitate physical activity among the ACT community three new outdoor fitness stations will be installed at Tuggeranong Town Park, John Knight Memorial Park in Belconnen and Theodore Neighbourhood Oval.

The new fitness stations will make it easier for people to find their 30 minutes of exercise each day by providing free cardio, strength and core-based equipment that is easily accessible.

A community consultation was undertaken for people to provide feedback on the types of equipment the stations will feature and preferences on proposed fitness station sites at each of the three locations. Responses to the consultation were received from 488 people.

## Meals take off in Chifley

The YMCA of Canberra has been successful in obtaining a 2014-15 Participation (Seniors) Grant to provide an optional, affordable, healthy “take home” meal service for older adults attending the YMCA Health and Fitness Centre, located in the ACT’s Health and Wellness Hub in Chifley.

Take home meals for one or two will provide a healthy alternative to commercial fast food for people living alone, particularly men, or in households of only two people. It will also support home meal preparation through a number of measures.

The project is an extension of the ‘Take Off!’ ACT Government funded three year project for young families, which includes a ‘take home’ meal service for parents with children attending YMCA Early Learning Centres.



The initial target group will be older adults and people with disability attending programs at the YMCA Chifley facility, with an expansion of the service possible to other older people living in the Chifley area. There are currently 1323 people aged 55 and over attending programs at Chifley, with a range of cultural backgrounds and physical abilities. Many experience a sense of isolation or depression as they suffer loss of status and income following retirement from paid work.

In the next five months the YMCA, with the help of Nutrition Australia, will research the nutritional needs of older people participating in YMCA programs and prepare menus for take home meals, sourced from seasonal and local foods. Meals will be prepared by professional chefs in the YMCA’s commercial kitchen at the Bush Capital Lodge, the YMCA group accommodation centre in O’Connor, and will be offered on a cost recovery basis.

The project will be rolled out from May 2015, initially two days a week and it is expected that in the first six months, a quarter of people over the age of 55 will avail themselves of this service, and that demand will steadily grow.

## The importance of evaluation

The success of the Healthy Weight Initiative will not only be measured by the levels of overweight and obesity in our community but also through how well the Government worked together on this issue and how a range of activities and interventions were implemented.

Evaluating the Healthy Weight Initiative (HWI) is extremely important as the ACT Government has set an ambitious target of zero growth for obesity in Canberra. The overarching evaluation is outlined in the Healthy Weight Initiative Evaluation Framework and was endorsed by the HWI Steering Committee on 5 June 2014. The aims of the HWI Evaluation are to:

- Determine the effectiveness of using a Whole-of-Government approach to implement the HWI
- Assess the effectiveness of the HWI in stabilising the proportion of overweight and obesity and increasing physical activity and healthy eating practices in the ACT population.

The HWI Evaluation covers evaluation of the success of a Whole of Government approach to dealing with a complex problem, secondly, the actions of the individual Implementation Groups leading to changes in the environment such as the availability of healthy food and drink choices and the availability of services such as active travel infrastructure. Finally the impact of the HWI on the community’s levels of healthy weight, physical activity and healthy food and drink consumption will be measured.

Parts of the evaluation are underway including a Partnership Assessment Survey and Key Informant Interviews.



## Healthy lifestyle promoted at Weston Group Centre

The Weston Group Centre Master Plan, released in late December 2014, puts healthy lifestyles at the forefront of planning for Weston. The master plan proposes ways to make it easier and safer to walk and cycle to and around the centre, to make better use of open spaces and public realm, and to improve access to the public transport network.

The focus on healthy lifestyles responds to community concerns about safe pedestrian pathways, good cycling connections and the quality of the public domain, coupled with the broader ACT Government commitment to promote a healthy and sustainable city.

To encourage pedestrians to make the most of the public realm and enjoy the fresh air in Weston, the master plan proposes connecting shared paths in the centre, creating meeting places in central locations, improving tree cover along main streets and public places and expanding Trenerry Square into a pedestrian-friendly meeting place. Proposed installation of bike and ride facilities on Parkinson Street will make it easier for people to use public transport and promote active travel.

The master plan also proposes revitalising the recreation area to the north of the centre by enhancing the landscape, possibly reinstating the oval for sporting and recreation use or considering other uses such as a wetland with a kickabout area and community garden. Better links from the centre along the green spine would make it easier to access this area, which already has a skate park and tennis courts.

The capital works proposals required to implement these proposals will be subject to future ACT Government funding consideration.

See the master plan here: [www.act.gov.au/weston](http://www.act.gov.au/weston).



## Health benefits of light rail

The health benefits of leaving the car at home and taking public transport are not always obvious; however research in the American Journal of Preventative Medicine found that a light rail user was 81 per cent less likely to become obese over time. Canberra's obesity rates have increased significantly in recent years, raising concerns around the continued health and wellbeing of our city. Almost two thirds of ACT adults are overweight and one in four is obese. For children, 25% fall into the overweight or obese category. The ACT Government has made it a priority to address this challenge through the Healthy Weight Initiative.

Action needs to be taken now to address the growing rate of obesity and reduce the cost it is having on our community's health and economy. Direct and indirect costs of obesity and obesity-related illnesses in 2008/09 were estimated to be \$37.7 billion. By getting people out of cars and onto public transport, this challenge can be reduced.

Anthony Burton, Active Living Coordinator at the Heart Foundation ACT, believes that light rail is a key piece in an active transport puzzle.

"There is strong evidence that the way we build our cities and our transport networks effects our travel behaviour," Mr Burton said.

"This means that we need to prioritise integrated walking, cycling and public transport infrastructure, which makes these forms of active transport the first and obvious choice. An integrated light rail system is the key piece of infrastructure that changes the way we view transport in Canberra," Mr Burton added.

Research has shown that people are willing to walk up to 1km for light rail, a much higher distance than for buses where people are only willing to walk an average 400m. A study in Salt Lake City, Utah, found that light rail commuters use their cars less and have healthier walking habits as well as lower rates of obesity.

The Capital Metro project will support a more active lifestyle, reducing the amount of time that people spend sitting in cars. As outlined in the Business Case, there are an estimated \$5 million of walking and cycling health benefits relating to the light rail project.

For more information on the health benefits of light rail visit the Capital Metro website <http://www.capitalmetro.act.gov.au/>.





# Notifiable Disease Report

Number of notifications of selected notifiable diseases received in the Australian Capital Territory between 1 January and 31 December 2014

	2014 total	1st QTR 2014	2nd QTR 2014	3rd QTR 2014	4th QTR 2014	2013 total	5 year average 2009- 2013
<b>VACCINE PREVENTABLE CONDITIONS</b>							
INFLUENZA A	1158	45	63	972	78	336	485.2
INFLUENZA B	96	6	4	53	33	214	84.4
PERTUSSIS*	232	45	46	86	55	234	510.8
PNEUMOCOCCAL DISEASE (INVASIVE)	15	3	4	5	3	14	24.2
<b>GASTROINTESTINAL DISEASES</b>							
CAMPYLOBACTERIOSIS	506	143	135	104	124	375	474.4
CRYPTOSPORIDIOSIS	30	22	4	2	2	39	37.8
GIARDIA	141	39	40	29	33	122	108.4
LISTERIOSIS	1	0	0	0	1	1	1.2
SALMONELLOSIS	222	58	71	36	57	279	223.4
TYPHOID	1	0	0	0	1	5	2.4
YERSINIOSIS	11	1	2	3	5	2	3.4
<b>SEXUALLY TRANSMITTED INFECTIONS</b>							
CHLAMYDIA	1195	299	306	307	283	1269	1185.0
GONOCOCCAL INFECTION	119	49	28	14	28	114	89.0
SYPHILIS <2 YEARS DURATION	18	5	5	5	3	10	11.8
<b>VECTORBORNE &amp; ARBOVIRUS</b>							
BARMAH FOREST VIRUS	1	0	0	0	1	6	3.4
DENGUE FEVER	16	6	8	1	1	12	16.4
ROSS RIVER VIRUS	4	0	2	0	2	4	9.8
<b>RESPIRATORY CONDITIONS</b>							
TUBERCULOSIS #	31	8	5	8	10	18	17.6
# All Diseases except Tuberculosis are reported by onset date or closest known test date. Tuberculosis is reported by notification date.							
* This condition includes cases that meet the probable and confirmed case definitions. Both probable and confirmed cases are nationally notifiable.							
For the relevant year, Q1 refers to 1 January to 31 March, Q2 refers to 1 April to 30 June, Q3 refers to 1 July to 30 September, Q4 refers to 1 October to 31 December.							
N.B. Data reported are the number of notifications received by ACT Health. Data are provisional and subject to change.							
The number of notifications received for all notifiable diseases in the ACT is available at <a href="http://www9.health.gov.au/cda/source/cda-index.cfm">http://www9.health.gov.au/cda/source/cda-index.cfm</a>							

# Notifiable Disease Report

## Number of notifications of selected notifiable diseases received in the Australian Capital Territory between 1 January and 31 December 2014

### Notes on notifications

Cases of interest and diseases with higher case numbers than expected between October and December 2014 compared to previous years.

### Salmonellosis

Salmonella infection results in gastrointestinal symptoms such as diarrhoea, abdominal cramps, fever, vomiting and lethargy. Salmonella notifications generally increase during the 4th and 1st quarters as these are the warmer months of the year.

In the fourth quarter, there were 57 notifications of Salmonella in the ACT. There was a single outbreak of suspected foodborne disease investigated during the quarter. This involved a small outbreak of Salmonella Typhimurium Phage type 135 (STm 135) identified in the setting of a private residence. In total, three cases were identified. The cases reportedly became ill after consuming a raw egg nog drink at a Christmas luncheon.

### Arboviral infections

Arbovirus infections are transmitted by mosquitoes. As the weather becomes warmer and wetter, more infections are observed, usually in the 4th and 1st quarters.

A small number of mosquito-borne infections was reported in the fourth quarter of 2014 in the ACT. One Barmah Forest Virus infection and one Ross River Virus infection were acquired interstate. It is possible a second Ross River Virus infection was acquired in the ACT. One Dengue infection was acquired in Central America.

### Tuberculosis

There were 31 cases of tuberculosis notified in the ACT between 1 January and 31 December 2014. On average, 17.6 cases have been notified annually in the ACT between 2009 and 2013. The cases notified in the ACT during 2014 are all sporadic, none of the cases were linked and there is no current outbreak of tuberculosis in the ACT. In the Australia and the ACT, most cases acquire their infections overseas.

The epidemiology of tuberculosis is unpredictable as people can become infected with the tuberculosis bacteria many years before they develop active disease. Screening programs in Australia concentrate on contacts of notified cases and others at increased risk of tuberculosis infection, including migrants, refugees and healthcare workers. Tuberculosis infections are treated with antibiotics and complete recovery is expected.

# Hot Issue

## Death Cap Mushrooms

Death Cap mushrooms are a deadly poisonous fungus, which often grow near established oak trees, and are found when there is mild, moist weather. In Canberra this usually occurs in late summer and autumn.

It can be extremely difficult for even experienced collectors to distinguish Death Cap mushrooms from an edible mushroom. Therefore, people should not pick or eat any wild mushrooms, and should talk to their families, friends and neighbours about the dangers of Death Cap mushrooms.

Anyone who suspects that they might have eaten Death Cap mushrooms should seek urgent medical attention at a hospital emergency department. Symptoms of Death Cap mushroom poisoning generally occurs 6-24 hours or more after ingestion of mushrooms and include stomach pains, nausea, vomiting and diarrhoea. Liver failure and death may occur.

In the past 15 years, ACT Health is aware of four fatalities associated with Death Cap mushrooms in the ACT.

Information on Death Cap Mushrooms is available on the ACT Health Website, including the Media Release, Information Sheet, Posters and Flyers. Posters and flyers are available in multiple languages. <http://www.health.act.gov.au/publications/fact-sheets/death-cap-mushrooms>.

Wild mushrooms growing in public areas can be reported to Canberra Connect on 13 22 81.

