



ATTACHMENT C

**ORDINARY MEETING
OF COUNCIL**

**AGENDA
OPEN MEETING
18 MARCH 2019**

**Item 10.1
Supporting Documents**

**Community Health & Well Being Plan
Age Friendly Community Plan
Youth Plan
Community Feedback Summary**



COMMUNITY HEALTH & WELLBEING PLAN 2019-2024



CIRCULAR HEAD COUNCIL
WARATAH-WYNYARD COUNCIL

MARCH 2019

This Community Health and Wellbeing Plan was produced by The Social Yield Pty Ltd for Circular Head and Waratah-Wynyard Councils in 2018-19.



The Social Yield Pty Ltd
PO Box 390 / Suite 1.03, 44 Formby Rd, Devonport TAS 7310
Level 17, 31 Queen St, Melbourne VIC 3000
www.thesocialyield.com.au
ABN 57 619 856 610 | ACN 619 856 610

This Plan has been prepared for Circular Head and Waratah-Wynyard Councils on the basis of Council-supplied documentation and additional data obtained from other government and non-government sources. The Social Yield Pty Ltd has taken all due care in the preparation of this Plan. However, The Social Yield Pty Ltd is not liable to any person or entity for any loss or damage which has occurred, or which may occur, in relation to that person or entity taking or not taking action in respect of any representation, statement, opinion or advice referred to herein. Cover image licensed from Alamy.

For questions relating to this Community Health and Wellbeing Plan, please contact:

Tracey Bradley
Director Corporate and Community Services, Waratah-Wynyard Council
Director Community Services, Circular Head Council
21 Saunders Street
Wynyard TAS 7325
Phone (03) 6443 8333

CONTENTS

INTRODUCTION	1
LEGISLATIVE REQUIREMENTS	1
MAYORAL MESSAGE.....	2
ABOUT THIS PLAN	3
VISION	5
GUIDING PRINCIPLES.....	5
COMMUNITY ASPIRATIONS.....	6
DEFINING HEALTH AND WELLBEING.....	7
A SOCIAL-ECOLOGICAL MODEL OF HEALTH.....	7
PRIORITY ISSUES	8
1. Reducing isolation	9
2. Enhancing mental health	11
3. Valuing diversity.....	12
4. Reducing socio-economic disadvantage	15
5. Improving access to the basics	18
6. Supporting those living with illness.....	21
7. Reducing harms from alcohol, tobacco and other drugs.....	23
8. Building resilience	25
COMMUNITY HEALTH AND WELLBEING PLAN 2019-2024.....	29
APPENDIX—POLICY AND PLANNING CONTEXT.....	37
REFERENCES	39

INTRODUCTION

It is with great pleasure that we present Circular Head and Waratah-Wynyard Councils' inaugural Community Health and Wellbeing Plan.

This Community Health and Wellbeing Plan is a five-year roadmap for promoting and improving the physical, mental and social wellbeing of our citizens. It is based on the following eight identified priorities:

1. Reducing isolation
2. Supporting mental wellness
3. Valuing difference
4. Reducing socio-economic disadvantage
5. Improving access to the basics
6. Supporting those living with illness
7. Reducing harms from alcohol, tobacco and other drugs
8. Building resilience

The integrated nature of the Plan reflects the ongoing close working relationship between Circular Head and Waratah-Wynyard Councils and the way in which we set our strategic goals in tandem. While the Plan is a joint strategy, we will target our actions to meet the individual needs of our communities.

LEGISLATIVE REQUIREMENTS

In addition to existing community aspirations and identified areas of community need, this Community Health and Wellbeing Plan responds to the following legislative imperatives:

- Tasmania's *Local Government Act 1993* requires local governments to provide for the health, safety and welfare of the community (Section 20). The *Act* also states that a Council's major strategies for supporting its public health goals and objectives must be summarised in its annual plan and annual report (Sections 71, 72)¹; and
- Tasmania's *Public Health Act 1997* requires local government authorities to develop and implement strategies to promote and improve public health (Section 27)².

MAYORAL MESSAGE

Local governments play an essential role in providing for the health and wellbeing of Tasmanian communities. Circular Head and Waratah-Wynyard Councils are working to support healthier communities by implementing the joint CHC & WWC Community Health and Wellbeing Plan 2019-2024.

The Plan is a first for our councils. It is informed by community aspirations, health and wellbeing research data and the wisdom of our local community organisations and service providers.

Our vision is that Circular Head and Waratah-Wynyard will be places in which all people—regardless of their age, ability, ethnicity, sexuality, family structure or socio-economic status—are supported to improve their health and to enjoy enhanced wellbeing.

Over the coming years, the Plan will guide our two Councils and our many local partners in delivering on this vision. The Plan will be implemented through annual action plans, and we will use a framework of indicators to track our community's gains in health and wellbeing.

We would like to thank all who contributed to the Community Health and Wellbeing Plan, and we look forward to working to make Circular Head and Waratah-Wynyard places where everyone can lead a healthy life.



D. H. Quilliam

Cr Daryl Quilliam

Mayor Circular Head Council



R. H. W. Walsh

Cr Robby Walsh

Mayor Waratah-Wynyard Council

ABOUT THIS PLAN

This Community Health and Wellbeing Plan is intended to support everyone living in Circular Head and Waratah-Wynyard to improve their health and enjoy enhanced wellbeing.

We see this Plan as a living document, and we look forward to tracking progress towards our goals, learning from experience, and strengthening this Plan over time.

Developing the Plan

Development of this Plan began with a review of the policy and planning context, including each Council's *Corporate Strategic Plan 2017-2027* and key Tasmanian Government documents. We built a picture of our community via a rapid review of the available health and wellbeing literature to identify evidence of known issues and areas of concern.

A program of broad public engagement was beyond the scope of this project. However, we drew on what we know about community experiences and aspirations from a range of sources, including:

- Outcomes from a Health and Wellbeing Planning workshop held in May 2018 with 32 participants drawn from Council staff, community leaders, and local and regional service providers.

During the workshop, participants identified issues of concern and named potential enablers and barriers to achieving positive change. Workshop participants also identified what they saw as being the most pressing priorities for both Circular Head and Waratah-Wynyard local government areas.

- Findings from each Council's Annual Community Survey as well additional community consultation outcomes from internal research.

- Community input into *Sustainable Murchison 2040*, a joint strategic planning framework for Circular Head, Waratah-Wynyard, West Coast, King Island and Burnie.

Community input into *Sustainable Murchison 2040* was comprised of more than 1,900 responses gathered in 2016 through a series of community consultation sessions, an online survey, a school program, council workshops and community leaders' forums. Maintaining health and wellbeing was named as a key future direction for *Sustainable Murchison 2040*.

Feedback on the Plan

The draft version of this Community Health and Wellbeing Plan was exhibited for community feedback between 26 September and 24 October, 2018.

Consultation on the draft Community Health and Wellbeing Plan was undertaken alongside consultation on the Councils' draft YPlan (Youth Plan) and draft Age-Friendly Communities Plan. The drafts and the invitation to provide feedback were disseminated through the following channels:

Print media

- The draft plans and the call for community feedback were featured in *The Advocate* newspaper on 29 September and in the *Circular Head Chronicle* on 4 October.

Council website

- A media release about the draft plans and the call for community feedback were posted to both Council websites in the 'Latest News' and 'Have Your Say' sections on 26 September.

Social media

- A notice about the drafts and invitation to provide feedback was posted to the Circular Head Council Facebook page on 1 October, with an additional reminder posted on 22 October.

Hardcopies

- Hardcopies of the draft plans were placed in the Council foyer from 26 September and remained there throughout the feedback period.
- Hardcopies of the draft plans were distributed to the committees of the Service Providers Access Network (SPAN), Circular Head Education and Training Consultative Committee (CHETCC) and the Sport and Recreation Network.
- Hardcopies were also distributed to older adults at the Seniors Week Afternoon Tea and at the Senior Citizens/Emmertons Park Clubhouse.

Email

- The plans were circulated via email to all participants of the original Health and Wellbeing Planning Workshop convened during the plans' development; as well as to the Service providers Access Network (SPAN) and the Sport and Recreation Network. A reminder email was sent to

these recipients 22 October with links to the plans.

LGAT

- In addition to the above activities, the Local Government Association of Tasmania (LGAT) promoted and disseminated the draft CHC & WWC Community Health and Wellbeing Plan throughout the sector as part of its Local Government Community Health and Wellbeing Project.

Community members and other stakeholders were invited to provide feedback to Council on the draft plans via letter, telephone, the 'Have Your Say' online facility or email. Circular Head Council Facebook posts about the drafts made on the 1st and 22nd October reached 1,412 and 451 people respectively; and generated 66 and 7 engagements respectively. By close of the consultation period, Council had received seven written submissions on the drafts.

The resultant Community Health and Wellbeing Plan is a five-year framework for action informed by community priorities. It is a shared plan across both Circular Head and Waratah-Wynyard Councils. Annual delivery plans derived from the Community Health and Wellbeing Plan will be comprised of actions targeted to the needs and characteristics of individual communities.

VISION

Circular Head and Waratah-Wynyard will be places in which all people—regardless of their age, ability, ethnicity, gender, sexuality, family structure or socio-economic status—are supported to improve their health and to enjoy enhanced wellbeing.

GUIDING PRINCIPLES

Inclusivity

Circular Head and Waratah-Wynyard Councils take an inclusive view of health and wellbeing. We recognise that not everyone in our community shares the same advantages. Our collective wellbeing will be measured by how our most vulnerable community members are faring.

Place-based planning

Our local government areas are comprised of diverse communities, each with particular needs. We recognise that a one-size-fits-all approach to health and wellbeing is unlikely to succeed. We aim to take actions that are targeted and responsive to local needs.

Collective impact

While we recognise the importance of local government in community health and wellbeing, we cannot—and should not—try to solve complex social problems on our own. Instead, we see this Plan as a platform to help us coordinate our efforts with others in pursuit of shared goals.

Understanding dynamics

We recognise that community health and wellbeing is a web of interrelated factors. Something that may seem like a cause may have its roots elsewhere. We are committed to gaining insight into complex community health and wellbeing issues so that we can better tackle problems at their source.

Measuring success

As our first Community Health and Wellbeing Plan, we see this as a work in progress. We look forward to measuring our progress towards our goals, learning from experience, and strengthening this Plan over time.

COMMUNITY ASPIRATIONS

Community consultation was conducted in 2016 across the local government areas of Circular Head, Waratah-Wynyard, King Island, West Coast and Burnie for the *Sustainable Murchison 2040 Community Vision*. Participants named health and wellbeing as a key theme, and defined this as: 'Healthy communities, people taking responsibility for their wellness, convenient access to medical services and facilities'.

Desired strategic outcomes for health and wellbeing were³:

- Healthy and active lifestyles;
- Healthy eating habits and access to fresh fruit and vegetables;
- Regular and convenient access to medical services;
- Potable water for all residents;
- Education and awareness programs to improve health levels; and
- Consumer-directed aged-care services.

Community respondents outlined the following preferred future for health and wellness in the year 2040⁴:

The Region's health statistics are not so challenging. Trends around chronic disease, alcohol and drugs and mental health have all turned around.

People are aware of the need for exercise and healthy living. Linking communities with shared pathways has increased cycling and walking across all age groups.

Health education begins with early childhood and families and continues throughout schooling.

Locally grown produce is the preferred source of fresh healthy food. Smoking rates and obesity levels are down. The recent 'slow down on sugar' campaign has reduced consumption of soft drinks.

There is more awareness about mental health and how to access support services.

A range of health care and emergency services in the main towns supports health and wellbeing through timely access to doctors and dentists. E-health technologies increase access to medical specialists, and services are more affordable.

Technology is helping deliver home-based aged care, and older people are ageing independently at home in their communities. The emphasis in aged care is on strength and wellbeing.

Increased volunteering has improved ambulance response times. Burnie and Smithton are key health service centres. Many residents on King Island still look to Melbourne for care they cannot access at Currie.

The emphasis has changed from cure to prevention as the core principle for achieving healthy, happy and strong communities. 'Wellness-making' is a focus for all.

DEFINING HEALTH AND WELLBEING

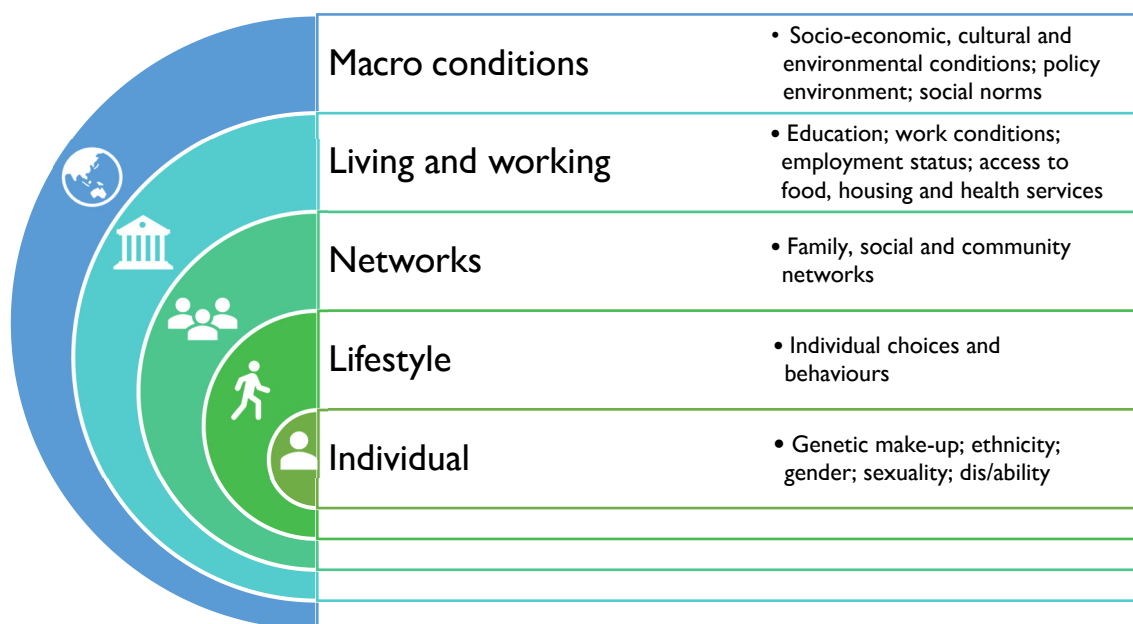
The World Health Organisation (WHO) states that enjoyment of the highest attainable standard of health is a fundamental human right. It defines health as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’⁵. While we applaud this multi-dimensional definition of health, we also acknowledge that the ideal state of ‘complete’ wellbeing is elusive for many.

An alternative emphasis—and one embraced in this Community Health and Wellbeing Plan—is set out in the WHO’s Ottawa Charter for Health Promotion, which defines health not as the objective of living, but as a ‘resource’ for everyday life. It notes that to achieve complete wellbeing, people must be able to identify and to realise their aspirations, satisfy their needs, and change or cope with the environment⁶.

As for the concept of ‘wellbeing’, there is no single agreed definition, but we concur with the Centers for Disease Control and Prevention, who suggest that a working definition of wellbeing should include the presence of positive emotions and moods, the absence of negative emotions, satisfaction with life, fulfillment and positive functioning⁷.

A SOCIAL-ECOLOGICAL MODEL OF HEALTH

This Community Health and Wellbeing Plan embraces a social-ecological model⁸ of health, which views a person’s health and wellbeing as being affected by many layers of influence, from their own genetic characteristics, to their life choices, to relationships with family and community, to working and living environments, to the broader social context. These influences combine in different ways to produce diverse health and wellbeing outcomes.



PRIORITY ISSUES

This Community Health and Wellbeing Plan identifies the following issues as being most critical to health and wellbeing in Circular Head and Waratah-Wynyard. Each priority and the rationale for its inclusion is discussed in the following section.

1. *Reducing isolation*

2. *Supporting mental wellness*

3. *Valuing difference*

4. *Reducing socio-economic disadvantage*

5. *Improving access to the basics*

6. *Supporting those living with illness*

7. *Reducing harms from alcohol, tobacco and other drugs*

8. *Building resilience*

1. Reducing isolation

Being socially connected has a positive influence on emotional, psychological and physical health. Conversely, experiencing social isolation—through living alone, having few social ties or little social engagement—is associated with poorer health outcomes, including a higher rate of mortality⁹.

Stakeholder consultation revealed this to be a critical issue for both local government areas. For Waratah-Wynyard, entrenched social isolation/loneliness and the difficulties of connecting with disengaged individuals were identified as key challenges. These challenges were associated with a lack of transport options and few options for social activities (particularly for youth).

The relevance of social isolation and the importance of connecting with the disengaged was also underscored in the case of Circular Head. The role played by the lack of public transport (particularly in rural areas) was flagged as the utmost importance for addressing isolation in this local government area.

Transport disadvantage

The Tasmanian Council of Social Services defines transport disadvantaged people as those who cannot own or operate a vehicle due to age, disability, ill health or financial constraints¹⁰. In 2016, 371 (6.5%) private dwellings in Waratah-Wynyard had no motor vehicle, with a further 134 (4.3%) dwellings in Circular Head with no motor vehicle. While the proportion of dwellings without motor vehicles was lower than both the Tasmanian and Australia average, these data should be viewed in the context of the availability and viability of other modes of transport, such as walking, biking, public transport and taxis.

When surveyed by Council in 2016, only a minority of residents (35%) in Circular Head agreed that public transport was adequate to meet their needs¹¹. This number was higher in Waratah-Wynyard, where a majority (62%) agreed public transport was adequate to meet their needs¹².

As an indicator of demand for transport assistance, Community Transport Services Tasmania (CTST) has reported a Statewide increase in demand for its services, with an 8.5% increase in demand for State Home and Community Care-funded trips in 2016-17, including growth in both medical and social trips. Under the Commonwealth Home Support Program, CTST reported continued growth in non-emergency medical transport to people aged 65 and older¹³. Volunteer recruitment has been identified as a barrier to expanding community transport services to meet demand.

Internet access

Internet use can provide opportunities for enhanced social connectivity and access to health and wellbeing information. Consultation with service providers and community leaders within both Council areas highlighted the importance of community digital literacy and access to the digital world for community wellbeing.

In 2016, the proportion of Circular Head and Waratah-Wynyard households with an internet connection was lower than the Tasmanian and Australian average. 701 households in Circular Head and 1,275 households in Waratah-Wynyard reported having no internet connection¹⁴. Lower rates of internet access are associated with disadvantage and may be related to socio-economic factors, older age or geographical isolation¹⁵.

Social capital

Social capital is defined as the features of social organisation that facilitate cooperation for mutual benefit, such as civic participation, norms of reciprocity and trust in others. Social capital is both the connections enjoyed within a community and the resources generated from these connections. In 2009, levels of social capital were surveyed across each of Tasmania's three regions. Compared with Tasmania as a whole, people in the north west reported¹⁶:

- slightly high rates of social contact;
- slightly less support from friends or family in the event of an emergency;
- about the same level of confidence that friends or relatives could help them find employment if necessary;
- lower participation in professional groups and other community groups;
- less active involvement in school activities;
- higher attendance at community events;
- higher levels of participation in sports groups and church groups; and
- the highest levels of volunteering.

More than eight in ten people in the north west felt that 'most people can be trusted' definitely or sometimes. When asked if they felt valued by society, nearly one in eight people in the north west reported 'No, not at all' or 'not often'¹⁷.

Community asset research conducted in Circular Head in 2011 indicated a range of strengths in the area. These were associated with: individual capacity; strong networks and connections; supportive public institutions; faith in the region's potential; a commitment to educating and training and supporting young people; and an active Council¹⁸.

Lone person households

Australian household size has declined over recent decades. The number of lone person households in Australia is projected to increase by between 61%-65% from 2011 to 2036¹⁹. In 2016, 28% of households in Circular Head and 30% of households in Waratah-Wynyard were lone person households, closely equivalent to the State average but higher than the national average²⁰.

Living alone is associated with older age and is slightly more common amongst women than men. However, the profile is different for men and women. Women who live alone tend to be better educated, be professionals, and earn more than women living with others. Men who live alone have lower levels of education, are lower income earners and are more likely to be in less prestigious jobs than those living with others. For middle-aged adults, separation is a significant driving factor²¹.

It is important to note that living alone in itself has not been identified as a causative factor for experiencing social isolation, as lone household status does not indicate the strength of a person's networks outside the household.

Connectedness

Amongst respondents to the WWC and CHC Councils community survey in 2016, 56% of Circular Head residents and 52% of Waratah-Wynyard residents reported being a member of a community group. 79% of Circular Head residents and 81% of Waratah-Wynyard residents said they felt they were a part of their local community.

In 2016, people living in rural Tasmania were asked to rate on a 7-point scale how often they made time to keep in touch with friends, chat with their neighbours, or do things with family members who live separately. The average score for people living in rural and regional Australia was 4.6, and the average for rural and regional Tasmania was 4.5. People living in the north west (excl. Burnie and Waratah-Wynyard LGAs) scored higher than the State and national average with 4.7, and people living in Burnie and Waratah-Wynyard scored lower than the State and national average with 4.2²².

When asked to rate on a 7-point scale how often they took part in a range of activities such as arts/culture, community events, clubs/groups, sports or teams; the average score for rural and regional Australia was 3.8 and for rural and regional Tasmania was 3.4. People living in the north west (excl. Burnie and Waratah-Wynyard LGAs) scored lower than the national and higher than the State average with 3.7. People living in Burnie and Waratah-Wynyard scored lower than the national average and on par with the State average with 3.4²³.

Risk and protective factors

Factors that protect against social isolation include strong relationships with friends and families and having someone to confide in. Risks for isolation include widowhood, never being married, having no children or no living children, being from a migrant and refugee population, identifying as LGBTI (Lesbian, Gay, Bisexual, Transgendered or Intersex), or living in rural and remote areas. Older people living in a rural or remote locality have a higher risk of social isolation due to limited access to services, the changing roles the experience within their community and the potential for a greater disconnect with family²⁴.

2. Enhancing mental health

Stakeholder consultation placed mental health—the prevalence of anxiety and depression, as well as trauma responses—very high on the list of community priorities. This was particularly so for Circular Head, where it was noted that mental illness comprises 44% of presentations to Rural Primary Health Services. Workshop participants observed that mental health could be both a cause and a result of other social determinants of health.

Anxiety and depression

The prevalence of most chronic diseases in Tasmania increased between 2009 and 2016, with the increase in depression and anxiety one of the most significant. The north west region saw a significant increase in depression/anxiety during this period, from 20.0% in 2009 to 29.4% in 2016.²⁵

Self-reported mental health

Significantly more Tasmanians sought professional help for mental health related problems in 2016, up from 10.3% in 2009 to 17.6% in 2016. Much of this increase related to an increase in the proportion of females seeking help, up from 12.0% in 2009 to 21.9% in 2016²⁶.

The Kessler 10 Psychological Distress Scale (K10) measures levels of psychosocial distress based on questions about people's level of nervousness, agitation, psychological fatigue and depression in the past four weeks. Scores are grouped into low, moderate, high and very high psychological distress. Tasmania-wide, there was an increase between 2009-2016 in people reporting high/very high levels

of psychological distress, up from 10.9% to 13.7%. In 2016, just over one in ten (11.7%) of people in the north west reported high/very high psychological distress in the past four weeks²⁷.

In 2016, people living in rural Tasmania were surveyed on the extent to which 'you feel the things you do in your life are worthwhile', rated on a scale from 0 = 'Not at all worthwhile' to 100 = 'completely worthwhile'. The average for rural and regional Australia was 76.5 and for rural and regional Tasmania was 72.9. People living in north west Tasmania (excl. Burnie and Waratah-Wynyard) scored the same as the national average and above the State average with 76.5. People living in Burnie and Waratah-Wynyard scored below both the national and State averages with 68.8²⁸.

Suicide and self-harm

Tasmania's suicide rate is higher than the Australian national average. In 2014, Tasmania's five-year age-standardised suicide rate for 2010-2014 was 13.5 per 100 000, and Tasmania's age-standardised suicide rate for 2014 was 12.7 per 100 000.

Those at higher relative risk of suicide include Aboriginal and Torres Strait Islanders, LGBTI people, CALD (culturally and linguistically diverse) people, and men²⁹. Suicide and self-inflicted injury were together listed in the top ten causes of death for males in both Circular Head and Waratah-Wynyard for the years 2010-2014³⁰.

3. Valuing diversity

The impact of diversity emerged from the literature review, and its importance was also highlighted during the workshop with service providers and community leaders. These stakeholders considered diversity important for two reasons: (i) different people require different supports from the health system and the wider community to enjoy enhanced health and wellbeing; and (ii) true 'community' wellbeing is achievable only if every member of the community is included.

Diversity was also seen as contributing to the challenges of connecting with hard-to-reach or disengaged individuals. Racism, stigma and prejudice were named as key issues impacting on health and wellbeing, both in terms of accessing suitable health care and in terms of the mental health impacts they created.

Workshop participants noted that the contributions of young people and older (retired) people were often undervalued and underutilised. The workshop participants also flagged that public spaces in both Circular Head and Waratah-Wynyard were not always accessible to those with mobility issues.

Disability

Disability is part of the health and wellbeing picture, although having a disability is not the same as ill-health or a lack of wellbeing. Due to its older age structure, Tasmania has the nation's highest disability rate, at 25.2%³¹.

Disability can result from accidents, illness or genetic disorders, and may affect a wide range of dimensions of a person's life, including mobility, communication, learning and education, income, social activities and workforce participation. The Australian Bureau of Statistics defines a person as having a disability if they report a limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities.

18.3% of Australians reported a disability in 2015, and this rate has remained stable over time. The majority (78.5%) of people with disability reported a physical condition, such as back problems, as their main long-term health condition. The other 21.5% reported mental and behavioural disorders.

The Australian Census counts the number of people with a profound or severe disability, defined as those people needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication, because of a disability, long-term health condition (lasting six months or more) or old age³².

In 2016, a total of 364 people in Circular Head reported a need for assistance, comprised of 192 males and 176 females. Of the total, 47.3% were aged 65 or older. In Waratah-Wynyard, 1,118 people reported a need for assistance, comprising 566 males and 554 females. Of the total, 48.3% were aged 65 or older³³.

Women and violence

In 2016, 4.7% of Tasmanian women reported experiencing violence in the previous 12 months, the same proportion as reported nationally for women, and lower than the 6.0% reported nationally for men (data on male experiences of violence in Tasmania were not available). 2.2% of Tasmanian women had experienced violence by a partner, and 4.7% had experienced emotional abuse from a partner. In addition, 16.7% of Tasmanian women in 2016 had experienced sexual harassment in the previous 12 months³⁴.

In the year prior to February 2018, Tasmania Police recorded 589 family violence incidents in the Western district of the State (which includes Circular Head and Waratah-Wynyard), exceeding both the previous year (556) and the three-year average (442). In the year prior to February 2018, Tasmania Police issued 346 family violence orders in the Western district of the State, up from 281 in the previous year. There were 79 court applications for family violence orders, up from 73 in the previous year³⁵.

Gender and sexual diversity

Lesbian, Gay, Bisexual, Transgendered and Intersex Australians tend to experience poorer mental health outcomes than their peers. Compared to the general population, LGBTI people are more likely to experience depression, anxiety and psychological distress; and they are more likely to have thoughts of, or attempt, self-harm or suicide in their lifetime. Poor health outcomes are associated with experiences of stigma, prejudice, discrimination and abuse, as well as a lack of specialised and accepting health services³⁶. Trans and gender diverse people tend to have a worse health status than the general population as well as others in the LGBTI cohort³⁷.

The total LGBTI population of Circular Head and Waratah-Wynyard is unknown due to a lack of data. However, it is estimated that people of diverse sexual orientation, sex or gender identity may account for up to 11% of the general population³⁸. Based upon 2016 Census data, this would indicate the LGBTI population of Circular Head could be around 871, and for Waratah-Wynyard around 1,493.

Aboriginal and Torres Strait Islander people

Both Circular Head and Waratah-Wynyard are home to a relatively high proportion of people who identify as Indigenous. In the 2016 Census, there were 1,244 Aboriginal and/or Torres Strait Islander people living in Circular Head, making up 15.7% of the population, and in Waratah-Wynyard this

number was 1,033, 7.6% of the population. By comparison, the percentage of Aboriginal and/or Torres Strait Islander people was 4.6% in Tasmania and 2.85% in Australia³⁹.

Consistent with the Australian average, the Aboriginal and/or Torres Strait Islander population has a younger age profile. The median age of Aboriginal and/or Torres Strait Islander people in Circular Head was 22 years, and in Waratah-Wynyard it was 24 years.

The legacy of colonisation and dispossession in Australia means that Aboriginal and Torres Strait Islander people tend to be worse-off than non-Indigenous people in relation to the social determinants of health. In 2016, there were no statistical differences in the self-reported health status of Aboriginal and Torres Strait Islander people and the wider Tasmanian population. Nearly one in three (29.5%) of Aboriginal and Torres Strait Islander people in Tasmania reported their health as 'fair/poor', up from 21.2% in 2009. However, Aboriginal and Torres Strait Islander people in Tasmania reported much higher levels of psychological distress than the Tasmanian population. In 2016, over one in five Aboriginal and Torres Strait Islander Tasmanians (22.8%) reported high/very high levels of psychological distress, compared to 13.7 per cent of the general population⁴⁰.

Aboriginal and Torres Strait Islander people are more likely to die from cardiovascular disease at younger ages than non-Indigenous people. Aboriginal and Torres Strait Islander people also tend to develop Type 2 diabetes earlier and die from it at a younger age than non-Indigenous people. Aboriginal and Torres Strait Islander people in 2014-15 were almost twice as likely as other Australians to be admitted to hospital for injuries⁴¹.

While Aboriginal and Torres Strait Islander people had a lower cancer incidence rate in 2006-2010, they were around one-and-a-half times more likely than non-Indigenous people to die from cancer, due to differences in cancer type, the degree of advancement upon diagnosis, and the lower likelihood of receiving adequate treatment⁴².

Notably, Aboriginal and Torres Strait Islander health is adversely affected when health and support services are not accessible, not culturally appropriate or too expensive⁴³.

Smoking prevalence amongst Tasmanian Aboriginal people is higher than amongst the overall Tasmanian population⁴⁴, although smoking prevalence has declined from 32.9% in 2009 to 26.3% in 2016. The proportion of Tasmanian Aboriginal and Torres Strait Islander people at risk of harm from alcohol consumption on a single occasion (53.1%) was not statistically significantly different from the total population at risk of harm on a single occasion (45.0%). Similarly, 20.5% of Aboriginal and Torres Strait Islander Tasmanians were at risk of lifetime harm from alcohol compared with 20.8% of all Tasmanians⁴⁵.

The impact of housing disproportionately affects Indigenous community members. In 2016, Aboriginal and Torres Strait Islander people accounted for 20% of the homeless population nationwide, despite making up less than 3% of the general population⁴⁶.

Immigrants and refugees

The health status of recent migrants to Australia is generally higher than the receiving population due to immigration eligibility requirements. Known as the 'healthy migrant effect', this profile tends to be lost over time, as the health status of migrants tends to converge with that of the general population.

Many migrants and refugees in Australia experience barriers to accessing health services and information due to language or culture or being on a temporary visa. This is particularly the case for

mental health services⁴⁷. Many refugees in Australia have experienced conflict, displacement family separation and human rights violations. As a result, widely variable rates of mental health issues are reported in refugee children and adults⁴⁸.

In 2016, Circular Head was home to 622 overseas-born residents. The most common countries of birth (in descending order) were New Zealand, England, Netherlands, Philippines and South Korea. Waratah-Wynyard was home to 1,173 overseas-born residents in 2016. The most common countries were England, New Zealand, Scotland, the Netherlands and South Africa. A non-English language was spoken in a total of 98 (3.1%) Circular Head households and 155 (2.7%) Waratah-Wynyard households in 2016, compared with 22.2% for all Australian households⁴⁹.

While these proportions of CALD (culturally and linguistically diverse) populations are small in Circular Head and Waratah-Wynyard, the potential for isolation and poor health outcomes of very small minority immigrant groups can indicate a higher need for culturally appropriate services and responses.

4. Reducing socio-economic disadvantage

Participants in the stakeholder consultation emphasised that socio-economic status plays a central role in community health and wellbeing. In both local government areas, poverty and social inequity were associated with intergenerational patterns of under- or unemployment, and with low capacity for employment due to low levels of literacy, numeracy, digital literacy and access to the digital word. In other words, socio-economic disadvantage is due not just to a lack of opportunity in the labour market, but barriers to taking up those opportunities.

Socio-economic disadvantage

The SEIFA index of disadvantage is derived from attributes that reflect disadvantage such as low income, low educational attainment, high unemployment, and jobs in relatively unskilled occupations. A lower score on the index indicates a higher level of disadvantage. The average Australian SEIFA score is set at 1000.

In 2016, Circular Head local government area had a SEIFA score of 940, while Waratah-Wynyard had a score of 925, indicating both had higher levels of disadvantage compared to the national average⁵⁰. While these scores do not point to exceptional levels of disadvantage, they also do not account for varying pockets of high socio-economic disadvantage within local government areas.

As indicated in the table below, in 2016 the median weekly personal income for people aged 15 years and over in Circular Head was \$581, lower than the Australian average but higher than the average for Tasmania as a whole. The median weekly personal income for Waratah-Wynyard was lower than both the Tasmanian and national average, at \$498.

TABLE 1: Median weekly incomes in dollars, people aged 15 years and over, 2016⁵¹

	CHC	WWC	Tas.	Aust.
Personal	581	498	573	662
Family	1,385	1,247	1,399	1,734
Household	1,083	942	1,100	1,438

Between 2009-2016, financial insecurity has increased significantly in all regions of Tasmania. One indicator of financial stress is the lack of ability to raise \$2,000 within two days to cope with an emergency. In the north west, 17.9% of people in 2016 reported that they would be unable to raise \$2,000 in an emergency, up from 11.7% in 2009⁵².

Education

The table below shows that both Circular Head and Waratah-Wynyard have a lower educational profile than Tasmania and Australia, with significantly fewer people attaining a bachelor-level degree or higher. Nearly one quarter of people in CHC, and over one fifth of people in WWC, reported Year 10 as their highest level of education.

TABLE 2: Education level attained in Circular Head and Waratah-Wynyard, 2016⁵³

	CHC %	WWC %	Tas. %	Aust. %
Bachelor Degree level and above	6.0	9.7	16.2	16.2
Advanced Diploma and Diploma level	5.6	7.1	7.5	7.5
Certificate level IV	2.7	2.6	2.9	2.9
Certificate level III	16.6	17.4	14.8	14.8
Year 12	9.0	8.7	12.0	12.0
Year 11	5.7	5.1	4.7	4.7
Year 10	24.1	20.4	17.4	17.4
Certificate level II	0.1	0.1	0.1	0.1
Certificate level I	0.0	0.0	0.0	0.0
Year 9 or below	14.7	13.8	10.3	10.3
No educational attainment	0.2	0.3	0.4	0.4
Not stated	13.5	12.0	11.0	11.0

Literacy

In the 2006, the literacy skills of Tasmanians aged 15-74 years were below the national average. Only around half of all Tasmanians had sufficient literacy skills to enable them to understand and use information from various kinds of texts, including newspapers, magazines and brochures; and sufficient document literacy skills to locate and use information contained in formats such as job applications and transportation schedules⁵⁴.

Less than half of Tasmanians had adequate numeracy skills, and around one third were assessed as having sufficient health literacy skills to understand and use information relating to health issues such as drugs and alcohol, disease prevention and treatment, safety and accident prevention, first aid, emergencies, and staying healthy. Only about a quarter were assessed as having sufficient problem-solving skills to meet the complex demands of everyday life and work⁵⁵.

Employment

When surveyed by Council in 2016, only a small minority of residents (14%) agreed there were enough jobs available in Circular Head ⁵⁶. In Waratah-Wynyard, this proportion was even smaller, with only 10% agreeing there were enough jobs available⁵⁷.

At the time of the 2016 Census, 3,780 people in Circular Head reported being in the labour force. Of these, 56.8% were employed full time, 31.5% were employed part-time and 4.9% were unemployed.

In Waratah-Wynyard, 51.9% of those in the labour force were employed full time, 34.8% were employed part-time and 7.5% were unemployed.

Of employed people in Circular Head, 11.3% worked 1 to 15 hours each week, 10.6% worked 16 to 24 hours and 43.2% worked 40 hours or more. In Waratah-Wynyard, 13.5% worked 1 to 15 hours, 11.7% worked 16 to 24 hours and 38.3% worked 40 hours or more⁵⁸.

TABLE 3: People who reported being in the labour force, aged 15 years and over, 2016⁵⁹

	CHC %	WWC %	Tas. %	Aust. %
Worked full-time	56.8	51.9	52.3	57.7
Worked part-time	31.5	34.8	35.0	30.4
Away from work	6.8	5.7	5.7	5.0
Unemployed	4.9	7.5	7.0	6.9

Problem gambling

Gambling is a significant public health issue. Around two per cent of the adult Tasmanian population has serious issues with gambling, being either 'moderate risk gamblers' or 'problem gamblers'. Lower socio-economic communities have a higher prevalence rate at 3.9%. Adverse effects of problem gambling include damaged finances and the loss of others' trust. These harms can occur before the threshold of 'problem gambling' is met and can endure after the gambling activity has ceased. The partners, family, friends, fellow-workers and employers of problem gamblers are also affected. Electronic gaming machines (EGMs) are the major form of problematic gambling in Tasmania⁶⁰.

The health impacts of socio-economic disadvantage

Socio-economic disadvantage is associated with several indicators of lower health and wellbeing status:

Self-assessed health status

People facing higher levels of socio-economic disadvantage tend to report lower levels of health. Among Tasmanians in the most disadvantaged quintile, only 26.8% reported having 'excellent/very good' health compared to 48.1% in the least disadvantaged quintile⁶¹.

Oral/dental health

Fair and poor oral health in Tasmania is also strongly associated with socio-economic disadvantage. Those in the most disadvantaged quintile are most likely to defer dental visits (with cost cited as the main reason) and are significantly less likely to brush their teeth twice a day. Compared with other regions and Statewide, in the north west region had the highest proportion of 'fair/poor' oral health in 2016 (28.3%), and a significantly higher prevalence of complete tooth loss (10.2%)⁶². Diminished oral health—such as tooth decay and gum disease—is associated with a range of poor health outcomes.

Body mass index

A high Body Mass Index (BMI) is associated with risk of cardiovascular disease, type 2 diabetes, some cancers, and other chronic conditions. BMI, although not definitive, is a score calculated from an individual's weight and height. Scores are assigned to the following categories:

TABLE 4: Body Mass Index categories

Category	BMI score
Underweight	<18.5
Normal	18.5-24.9
Overweight	25.0-29.9
Obese	>30.0

Females in Tasmania showed a significant increase in combined overweight/obesity between 2009-2016, while the figures for males were relatively stable. Obese BMI in Tasmania continued to be more common in people experiencing socio-economic disadvantage, but the gap has narrowed in recent years, with obesity becoming more prevalent in less disadvantaged populations⁶³.

Six in every ten (59.9%) of Waratah-Wynyard residents had a BMI of either overweight or obese in 2016, including 18.4% who rated as obese. In Circular Head, more than half (54.2%) of people had BMI scores in the categories of overweight/obese, including 20.4% categorised as obese⁶⁴.

Health literacy

‘Health literacy’ refers to an individual’s capacity to make decisions and to manage their health and health care. Lower levels of health literacy are associated with increased hospitalisation, lower use of preventive health services and poorer knowledge about chronic diseases and self-management.

In 2016, Tasmanians were surveyed on their self-assessed ability to understand written health information well enough to know what to do. The north west score for health literacy was slightly lower than for other regions in Tasmania. Females had a higher level of health literacy than males, and the least socio-economically disadvantaged quintiles also showed the highest level of health literacy⁶⁵.

5. Improving access to the basics

Linked to the above concern with socio-economic disadvantage, the data and stakeholder consultation also highlighted importance of the basics—good quality housing, food security and a healthy environment—in supporting community health and wellbeing. Food security and healthy air quality were viewed as priorities for Waratah-Wynyard, while housing quality and security of tenure was highlighted as priorities for Circular Head.

Housing

Housing can affect health in multiple ways. At the individual/household level, factors include the impact of physical effects (damp, cold, mould, heat, homelessness) as well as social effects (the effects of poor housing, insecurity and debt on mental health; and the importance of feeling a sense of ‘home’ and belonging). Housing can indicate and form part of someone’s socio-economic status. It can put them in proximity to services and facilities and embed them in a community⁶⁶.

When surveyed by Council in 2016, 70% of residents in Circular Head⁶⁷ and 74% of residents in Waratah-Wynyard⁶⁸ agreed there was good housing choice and availability in their local government area.

As can be seen in the table below, weekly median rents for one- and two-bedroom dwellings in Circular Head, and one- and three-bedroom dwellings in Waratah-Wynyard, saw strong increases over the 2017 calendar year, more than the Tasmanian average (The datasets for one-bedroom dwellings were small and should be used with caution).

TABLE 5: Weekly rents for new bonds, calendar year 2017⁶⁹

	1 bedroom		2 bedroom		3 bedroom		4 bedroom	
	Median	Yr change	Median	Yr change	Median	Yr change	Median	Yr change
Circular Head	\$150	+15.4%	\$190	+10.1%	\$225	0.0%	\$255	-1.9%
Waratah-Wynyard	\$190	+8.6%	\$220	-2.2%	\$270	+5.9%	\$320	-3.8%
Tasmanian average	\$200	+5.3%	\$260	+4.0%	\$300	3.4%	\$360	0.0%

The rental vacancy rate has declined in the north west and across Tasmania since 2017, indicating more competition to secure a lease. Falling vacancy rates typically put upward pressure on rents, which has a disproportionate effect on people on low or fixed incomes.

Anglicare's rental 'Snapshot' study found a 45% drop in advertised rental properties in the north west between 2017 and 2018, with no available properties advertised on the 2018 Snapshot weekend that would be affordable for a single person on Newstart or Youth Allowance. Only 5% of properties in the north west were affordable for single parents on Newstart, down 2 percentage points from 2014. 17% of rental homes in the north west were affordable to single parents on Parenting Payments and couples on Newstart⁷⁰.

Rent or mortgage stress occurs when payments are equal to or greater than 30% of household income. The table below shows that compared to the Tasmanian and Australian average, both Circular Head and Waratah-Wynyard in 2016 had fewer households experiencing rent or mortgage stress. However, this still leaves about one in twenty households in both local government areas in mortgage stress. About one in twenty Circular Head households was in rental stress; and almost one in ten Waratah-Wynyard households in rental stress.

TABLE 6: Households experiencing rent or mortgage stress, 2016⁷¹

	CHC %	WWC %	Tas. %	Aust. %
Households with rent payments greater than or equal to 30% of household income	5.4	9.4	10.2	11.5
Households with mortgage repayments greater than or equal to 30% of household income	5.1	4.9	5.1	7.2

Nutrition

Insufficient healthy food is responsible for several chronic conditions and diseases, including obesity, heart disease, diabetes and some cancers. Insufficient healthy food can also impede development and learning in children, and lead to social avoidance and isolation.

Fruit and vegetables

The 2013 Australian Dietary Guidelines recommend that individuals consume the following quantities of fruit and vegetables per day:

TABLE 7: Australian Dietary Guidelines, Recommended servings

Age	Veg. serves per day – Males	Veg. serves per day – Females	Fruit serves per day – Males	Fruit serves per day - Females
14-18	5.5	5	2	2
19-50	6	5	2	2
51-70	5.5	5	2	2
71+	5	5	2	2

In 2016, Tasmanians consumed less vegetables and significantly less fruit than they did in 2013. The decline occurred in both males and females, although more females than males met the guidelines.

In 2016, 71.2% of Circular Head residents did not meet the guidelines for fruit consumption, and 93.9% did not meet the guidelines for vegetable consumption. In Waratah-Wynyard, 67.2% of residents did not meet the guidelines for fruit consumption, and 90.6% did not meet the guidelines for vegetable consumption⁷².

Compared to the Tasmanian average, in 2014 Circular Head residents and Waratah-Wynyard residents paid more for a standard basket of healthy foods when utilising a minor supermarket or general/convenience shop⁷³.

Folate/Folic acid

Folate is a B group vitamin necessary for good health. It is particularly important during pregnancy to prevent neural tube defects. Folate is contained in green leafy vegetables and is added in the form of folic acid to bread, breakfast cereals and supplements.

Bread and other wheat products are a primary source of folic acid due to supplementation in flour. 40.2% of Tasmanian females and 28.7% of Tasmanian males reported not eating bread in 2016, potentially missing out on this source of folate. There has also been a decrease in the rates of Tasmanians taking a folic acid supplement. In 2016, fewer than half of Tasmanian females aged 18 to 50 years understood the reasons behind the advice to take folic acid⁷⁴.

Sugar-sweetened beverages

Consumption of sugar-sweetened drinks is associated with weight gain, tooth decay and type 2 diabetes. Sweetened drinks include soft drinks, cordial, sports drinks and caffeinated drinks but do not include fruit juice or flavoured milks.

In 2016, one in four Tasmanians drank up to 1.5 litres of sugar sweetened drinks weekly, and almost one in eight drank 1.5 litres or more of these drinks per week. However, in 2016 Tasmanians were drinking more water and less soft drinks and fruit/vegetable drinks overall⁷⁵.

Food access

Food insecurity describes inadequate access or supply of food or inappropriate food, and can result from a lack of money, transport or knowledge. Those who find it harder to access fresh food include people on low incomes, single-parent families, people with chronic illness or disability,

people experiencing transport disadvantage, people experiencing housing stress and people not located near shops⁷⁶.

The prevalence of running out of food and being unable to purchase more increased across all socio-economic quintiles in Tasmania between 2009-2016. In the north west region in 2016, more than one in twenty (6.4%) of people reported that sometime in the past 12 months they had run out of food and been unable to afford to buy more⁷⁷.

In addition, nearly one in four (39.7%) Tasmanians in 2016 was dissatisfied with the food available to them for one or more reasons, up slightly since 2013. When asked about the reasons for their dissatisfaction, 26.8% nominated the cost of food, 22.2% named a lack of quality, 11.0% named a lack of variety, 5.9% cited inadequate/unreliable public transport, and 3.7% named a lack of culturally appropriate food⁷⁸.

Clean Air

Despite Tasmania having some of the cleanest air in the world, airborne pollutants are a factor in serious health issues. Wood burning is the main source of population exposure to known airborne pollutants in Tasmania⁷⁹. Sources of smoke in Tasmania include home wood heaters, unplanned bushfires and planned reduction burns.

Emissions from home woodheaters have been linked with increased mortality. People with a chronic disease—particularly a heart problem or a lung condition, such as asthma, chronic bronchitis and emphysema—are more likely to be susceptible to the health effects of smoke⁸⁰. For example, after the City of Launceston incentivised the wood heaters from homes (reducing the woodheater prevalence from 66% to 30% of households) corresponding reductions were recorded in all cause, cardiovascular, and respiratory mortality⁸¹.

In the north west region in 2016, just over one third (34.2%) of people reported using wood as their main source of home heating. This was similar to the North (35.3%) but higher than the South (25.6%). Wood heating use is most common amongst 35 to 44-year-olds, with less frequency amongst younger adults and those aged 65 and older. The use of wood as the primary source of home heating in Tasmania is not associated with socio-economic disadvantage⁸².

6. Supporting those living with illness

While service providers and community leaders in the stakeholder workshop recognised the importance of prevention and health promotion, they were also keen to acknowledge that many people in the community live with a chronic disease, and that measures can be taken to better support these community members. This included addressing quality-of-life issues, ensuring coordination of and access to specialist supports, and providing support to carers.

Experiences of health and wellness

Self-reported health status is considered a reliable predictor of disease and health service use. In 2016, people living in rural and regional Australia were asked to rate their satisfaction with their personal wellbeing, defined as satisfaction with a range of issues including standard of living; health; current achievements in life; personal relationships; feeling safe; feeling part of the community, and

future security. The average score for people in rural and regional Australia was 72.3 out of 100, while for people in rural and regional Tasmania the average was 69.3. People in the north west (excl. Burnie and Waratah-Wynyard) rated their personal wellbeing at 73.4, higher than both the national and State average. People living in Burnie and Waratah-Wynyard rated their personal wellbeing at 66.9, which was lower than the national and State average⁸³.

The Tasmanian Population Health Survey asks individuals to assess their own health as being either excellent, very good, good, fair or poor. In the north west region of Tasmania, one in four people (25.3%) reported their health as 'fair/poor', 39.2% reported 'good' health, and 34.9% of people in assessed their health as being 'excellent/very good'⁸⁴. Self-assessed health status is strongly linked to socio-economic disadvantage. Among Tasmanians in the most disadvantaged quintile, only 26.8% reported 'excellent/very good health' compared to 48.1% in the least disadvantaged quintile⁸⁵.

When surveyed by Council in 2016, 59% of Circular Head residents agreed that Circular Head was a healthy community⁸⁶. Compared to Circular Head, a larger proportion (74%) of Waratah-Wynyard residents agreed Waratah-Wynyard was a healthy community⁸⁷.

Hospitalisations

In 2007-11, Circular Head's rate of potentially preventable hospitalisations (29.1 per 1,000) was higher than the state average, making it the third highest ranking LGA in the State. In the same timeframe, Waratah-Wynyard's rate was 23.4 per 1,000, slightly above the State average⁸⁸.

TABLE 8: Top ten causes of potentially preventable hospitalisations, Circular Head and Waratah-Wynyard, 2016^{89,90}

Rank	Circular Head	Waratah-Wynyard
1	Congestive cardiac failure	Chronic obstructive pulmonary disease
2	Dental conditions	Urinary tract infections
3	Chronic obstructive pulmonary disease	Congestive cardiac failure
4	Urinary tract infections	Dental conditions
5	Diabetes complications	Angina
6	Convulsions and epilepsy	Convulsions and epilepsy
7	Pneumonia and influenza (vaccine preventable)	Iron deficiency anaemia
8	Iron deficiency anaemia	Ear, nose and throat infections
9	Angina	Diabetes complications
10	Ear, nose and throat infections	Asthma

Mortality

Compared to the State average, in 2013 Circular Head had a higher rate of potentially avoidable deaths (238.2 per 100,000), making it the tenth highest ranking LGA in the State. Waratah-Wynyard's rate of potentially avoidable deaths was 198.9 per 100,000, slightly above the average⁹¹.

TABLE 9: Top 10 causes of death for females and males, Circular Head 2010-2014⁹²

Rank	Females	Males
1	Ischaemic heart disease	Ischaemic heart disease
2	All other cancers	All other cancers
3	Cerebrovascular disease	Lung cancer
4	Other forms of heart disease	Diabetes
5	Organic psychotic conditions	Other forms of heart disease

Rank	Females	Males
6	Hypertensive disease	Organic psychotic conditions
7	Diabetes	Colorectal cancer
8	Breast cancer	Cerebrovascular disease
9	Lung cancer	Suicide and self-inflicted injury
10	Ill-defined and unknown causes	Other disease of respiratory system

TABLE 10: Top 10 causes of death for females and males, Waratah-Wynyard 2010-2014⁹³

Rank	Females	Males
1	All other cancers	All other cancers
2	Organic psychotic conditions	Ischaemic heart disease
3	Ischaemic heart disease	Lung cancer
4	Other forms of heart disease	Chronic obstr. pulmonary disease and allied conditions
5	Cerebrovascular disease	Other forms of heart disease
6	Lung cancer	Cerebrovascular disease
7	Chronic obstr. pulmonary disease and allied conditions	Other hereditary and degen. diseases of the CNS
8	Diabetes	Suicide and self-inflicted injury
9	Breast cancer	Organic psychotic conditions
10	Colorectal cancer	Transport related accidents

Caring

A carer is someone who provides any informal help or supervision to older people (aged 65 years and over) or those with disability. An individual's carer commitments can diminish that person's ability to socialise, work and stay healthy.

Nationwide, in 2015 the average age of a primary carer was 55 years, with females making up the majority of carers. Over one third of primary carers in Australia (37.8%) lived with a disability themselves⁹⁴.

At the time of the 2016 Census, 647 (10.3%) of people in Circular Head and 1,420 (12.6%) of people in Waratah-Wynyard reported providing unpaid assistance to a person with a disability, long-term illness or person aged 65 or older in the previous two weeks, compared to 11.3% of people in Australia⁹⁵.

The National Regional Wellbeing Survey 2016 survey found that carers on average have poorer health and wellbeing than non-carers, have lower access to financial resources, and many have little to no access to support, which compounds carer difficulties. The study also found an urgent need to better support 'younger' carers (i.e. those under 50), who suffer a higher incidence of psychological and financial distress, social isolation, poor wellbeing and a lack of support when compared to older carers⁹⁶.

7. Reducing harms from alcohol, tobacco and other drugs

Participants in the stakeholder workshop named substance addiction as a high priority in Waratah-Wynyard, inclusive of drug and alcohol dependence and smoking; while smoking was highlighted as a key issue for Circular Head. For both local government areas, smoking was identified as a risk factor for multiple health and wellbeing factors. Where alcohol is concerned, there was awareness

that alcohol consumption was not just an individual choice but ought to be understood within a broader culture of drinking.

Smoking

Smoking is one of the leading preventable causes of death and disease in Australia. It is responsible for more than 1 in every 10 deaths, and it causes more disease and injury in Australia than any other single risk factor. In 2004-05, smoking caused 14 times as many deaths as alcohol, and 17 times the number of deaths due to illicit drug use⁹⁷.

Smoking prevalence in Tasmania has significantly declined since 2009. Since 2013, the proportion of Tasmanian smokers has remained stable at 15.7%.

However, smoking prevalence is comparatively high in the Circular Head local government area. In 2016, nearly one third (29.3%) of Circular Head residents were current smokers (daily and occasional combined), with nearly one quarter (24.2%) estimated to be daily smokers. Smoking rates in Waratah-Wynyard were lower, with an estimated 9.0% current smokers (daily and occasional combined) and 8.1% daily smokers⁹⁸.

Wastewater monitoring has found nicotine intake to be significantly higher in regional areas than for capital cities. Nicotine consumption in Tasmanian regions during 2017 was higher than the regional average⁹⁹. Smoking prevalence is also higher in lower socio-economic areas. In 2017, nearly one in four (24.5%) current smokers in Tasmania were in the most socio-economically disadvantaged quintile, while only one in ten (9.8%) current smokers were in the least disadvantaged quintile¹⁰⁰.

Alcohol

Alcohol consumption can cause harms to individuals, families and communities. For the individual, alcohol causes several short- and long-term diseases and conditions, with alcohol-attributable cancer, liver cirrhosis and injury comprising most of the burden of alcohol-attributable mortality¹⁰¹.

There is no 'safe' level of alcohol consumption. However, the lifetime risk guideline for alcohol consumption by healthy adults specifies no more than two drinks on any given day. In 2014-15 Tasmania had the second highest proportion of adults (19.1%) exceeding the lifetime risk guideline, higher than the Australian average (17.3%). Males were more likely than females to experience lifetime risk from alcohol consumption¹⁰².

The risk guideline for single occasion harm is no more than four drinks. Close to half (49.2%) of Tasmanian adults in 2014-15 drank alcohol on at least one occasion to risky levels for acute harms, the highest of any State. Men are significantly more likely than women to drink alcohol exceeding the single occasion guideline, both at the national and Tasmanian level. Males were significantly more likely than females to drink alcohol exceeding the single occasion guideline¹⁰³.

In 2016, an estimated 18.2% of Waratah-Wynyard residents drank alcohol to risk levels for lifetime harm, with 33.3% drinking to risk levels for single occasion harm. In Circular Head, 29.2% of residents drank alcohol to risk levels for lifetime harm, with 48.7% drinking to risk levels for single occasion harm¹⁰⁴.

Between 2005-06 and 2014-15, Tasmania saw an increase in closed treatment episodes for alcohol and alcohol-related emergency department presentations. Alcohol-related hospitalisations for men remained stable while for women it increased. Alcohol-related deaths did not change significantly.

Road fatalities and serious injuries involving alcohol and family violence incidents where the offender was affected by alcohol decreased during this timeframe¹⁰⁵.

Illicit drugs

Illicit drug use is associated with a range of short- and long-term physical and psychological harms to the user, as well as a range of social and relational harms. Drug dependency can also cause severe financial distress.

National wastewater monitoring data from 2017 names methylamphetamine (one form of which is known as 'ice') as the most commonly used illicit drug in regional Tasmania.¹⁰⁶ However, data collection limitations mean these findings should be treated with caution. Research from the Illicit Drug Reporting System (IDRS) found cannabis was the most frequently used illicit substance across regional Tasmania in the same time period¹⁰⁷.

8. Building resilience

In terms of resilience, participants in the stakeholder workshop emphasised the need to ensure that every child and adult has at least one positive and responsive adult in their lives. This recognises the critical role of the social networks in which we live, and that no individual can thrive without the care and affirmation of another.

Other aspects of resilience noted by service providers and community leaders included the role of emergency services in disaster response and recovery, and the potential effects of extreme weather events on health, local industry and food security.

Participants in the stakeholder workshop also named health literacy, intergenerational health concerns and meaning-making as priorities across both local government areas. They noted that families tend to share/pass on health issues, but they also shared understandings and beliefs that shaped the degree to which they accessed to education, health services and support networks.

The early years

A child's early years are fundamental to their future cognitive, social, emotional and physical development. A positive early childhood experience is associated with a range of short- and long-term individual, social and economic benefits.

In 2016, Circular Head and Waratah-Wynyard were home to the following numbers of children:

TABLE 11: Population of children by age group, CHC and WWC 2016¹⁰⁸.

	0-4 years	5-9 years	10-14 years	15-19 years	Total 0-19 years
Circular Head	493	597	526	491	2,117
Waratah-Wynyard	727	835	782	790	3,131

Compared to the national average, a higher percentage of Tasmanian children grow up in single-parent and blended families and experience higher levels of socio-economic disadvantage. A larger proportion (8%) of children identify as Aboriginal or Torres Strait Islander, and a larger proportion of

children have disabilities¹⁰⁹. High quality data on Tasmania's children with regard to mental health, disability, certain health indicators, family violence, children's perceptions of school, and children's experiences is limited.

The Australian Early Development Census (AEDC) measures early childhood development at the time children commence their first year of full-time school. The AEDC measures children's physical health and wellbeing, social competence, emotional maturity, language and cognitive skills (school-based), and communication skills and general knowledge. These domains have been shown to predict later health, wellbeing and academic success.

The following table shows the percentages of children deemed to be developmentally vulnerable for each domain in 2015. Children who score in the lowest 10 per cent of the national AEDC population are classified as 'developmentally vulnerable'. These children demonstrate a much lower than average ability in the developmental competencies in that domain.

TABLE 12: Percentage of children developmentally vulnerable, 2015¹¹⁰.

Geography	Physical	Social	Emotional	Language	Communication	Vulnerable on 1 or more domains	Vulnerable on 2 or more domains
Australia	9.7	9.9	8.4	6.5	8.5	22.0	11.1
Tasmania	10.0	8.6	8.9	7.5	6.4	21.0	10.7
Circular Head	10.3	8.5	7.7	8.5	3.4	18.8	7.7
Waratah-Wynyard	8.8	4.1	5.4	4.1	3.4	15.5	5.4

Overall, Circular Head had a higher proportion of developmentally vulnerable children than Waratah-Wynyard. The highest rates of vulnerability for children in both local government areas was in the physical domain, defined as the 'Child is ready each day, healthy and independent, and has excellent gross and fine motor skills'. Circular Head children were more developmentally vulnerable than the national and State average with regard to language, defined as the 'Child is interested in reading and writing, can count and recognise numbers and shapes¹¹¹.

Health literacy and self-management

'Health literacy' refers to an individual's capacity to make decisions and to manage their health and health care. Lower levels of health literacy are associated with increased hospitalisation, lower utilisation rates of preventive health services, and poorer knowledge about chronic diseases and self-management.

As noted elsewhere in this report, in 2006 only around one third of Tasmanians had sufficient health literacy skills to understand and use information relating to health issues such as drugs and alcohol, disease prevention and treatment, safety and accident prevention, first aid, emergencies and staying healthy¹¹².

In 2016, Tasmanians were surveyed on their self-assessed ability to understand written health information well enough to know what to do. The north west score for health literacy was slightly lower than for other regions in Tasmania. Females had a higher level of health literacy than males, and the least socio-economically disadvantaged quintiles also showed the highest level of health literacy¹¹³.

Accessing services

While most Tasmanians reported in 2016 that they found it easy to discuss health issues with their health care providers, 2.3% said they found it difficult, with a further 11.0% saying they found it difficult at times. More females than males found it easy to discuss issues with health care providers, and older males found it easier than younger males.¹¹⁴

In 2016, use of a Tasmanian public hospital during the preceding 12 months was highest for the north west region (59.7%). The majority of hospital users in the north west (77.0%) reported being 'very satisfied/satisfied' with public hospital services. More than one in five north west residents (22.8%) reported using a community health centre in the preceding 12 months, with 87.9% of users reporting they were 'very satisfied/satisfied' with community health centre services¹¹⁵.

There was an overall decline in the use of child health and parenting services Statewide between 2009 and 2016. 13.0% of north west residents reported accessing child health and parenting services in 2016, with 85.1% of users saying they were 'very satisfied/satisfied'.

Self-management of health

Statewide screening rates for blood pressure, cholesterol and diabetes have remained relatively stable since 2009, but bowel cancer screening has increased significantly in 2009-2016. In the north west, the proportion of people participating in bowel cancer screening rose from one quarter (25.4%) to one third (34.0%) of the population. north west residents were also more likely to screen for cholesterol than other parts of the State in 2016¹¹⁶.

TABLE 13: Participation rates, preventative health screening, NW Tasmania, 2009 and 2016¹¹⁷

	2009	2016
Blood pressure	82.5%	83.9%
Cholesterol	56.5%	59.5%
Diabetes/hyperglycaemia	51.4%	53.4%
Bowel cancer	25.4%	34.0%

Since 2009, a greater proportion of Tasmanians with hypertension have engaged in disease management strategies such as modifying their diet, losing weight, taking medication or other actions. However, a smaller proportion of Tasmanians with hypertension have used stress management or exercise¹¹⁸.

Where diabetes is concerned, most Tasmanians took action to manage their disease in 2016, with the most common actions being diet, medication, exercise and weight loss¹¹⁹. There was an overall increase in the proportion of Tasmanians with asthma who received asthma plans. The north west region had the highest proportion (81.4%) of asthma action plans in 2016, representing a statistically significant increase from 2009¹²⁰.

Sustainability

Research suggests that changes to our climate may affect human health and wellbeing on many levels. Effects may include the impacts from increased extreme weather events, wildfire and decreased air quality (higher pollution and allergens); threats to mental health (e.g. anxiety and post-traumatic stress disorder following weather events); and illnesses transmitted by food, water, and disease-carriers¹²¹.

Food production and food prices, quality and distribution systems (including crops, livestock and fish production), as well as infrastructure and social systems are also at risk from extreme weather events. Research suggests that multiple climate stressors are more likely to impact people living in cities, floodplains and coastal areas; as well as on specific populations such as people experiencing high socio-economic disadvantage, children, older adults, and people living with a chronic disease¹²².

Over the 21st century, rainfall in Waratah-Wynyard is projected to decrease in summer and autumn, and to increase in winter and spring. Rainfall in Circular Head is projected to decrease in summer and autumn, but increase in winter, with little change in spring. Both areas will see fewer rain days with >1mm rain, but heavier rain on these days. Sea level rise is projected to lead to more frequent coastal inundation events^{123,124}.

Both Circular Head and Waratah-Wynyard local government areas are projected to experience a rise in average temperatures between 1.3 to 2.0 degrees Celsius over the 21st century under a lower emissions scenario, and between 2.6 to 3.3 degrees under a higher emissions scenario. These rises are consistent with Tasmania as a whole but lower than the global average. By the end of this century, research suggests that both local government areas will experience an increase in summer days over 25 degrees, an increase in the temperature of very hot days, fewer days of frost risk, and longer warm spells^{125,126}.

Extreme heat and heatwaves present serious health risks for older adults, babies, young children, pregnant women and people with a chronic health condition. Compared with other regions and Tasmania in 2016, residents in the north west region were significantly less likely to use air conditioning at home (36.5%) and significantly more likely not to use any cooling method. There was no relationship evident between ownership of air cooling appliances and socio-economic status in Tasmania¹²⁷.

COMMUNITY HEALTH AND WELLBEING PLAN 2019-2024

Potential partners for co-delivering these actions will be identified as annual implementation plans are developed.

Goal	Objectives	Actions	Indicator	Baseline
1. Reducing isolation	Widen the availability of transport options	Help raise the profile of existing community transport services and options.	% residents who report that public transport is adequate to meet their needs (Council survey)	35% CHC in 2016 62% WWC in 2016
		Advocate to the Tasmanian Government for enhanced public transport options.		
		Assist local community transport providers with their volunteer recruitment needs		
		Investigate options for coordinating a local carpool or volunteer rideshare network.		
	Encourage wider internet adoption.	Promote and support (through volunteer recruitment) the digital literacy program at Libraries Tasmania.	% households connected to the internet (ABS Census)	69.1% in 2016 71.2% in 2016 238 in Smithton; 26 in Wynyard in 2018.
		Facilitate a local IT exchange to facilitate community donations of used computers and modems for those who cannot afford to purchase their own.		
		Implement a donation policy for Council's used and unwanted but fit-for-purpose IT equipment.		
	Create opportunities for social connection	Explore options for supporting the operations of community groups and neighbourhood houses by subsidising their overhead costs (e.g. utilities, insurance)	Evidence of co-location principles in Council land-use policy (Council data).	CHC and WWC interim planning schemes 2018: 'require all new use or development has access to adequate utilities and community services'
		Within strategic land-use planning, prioritise the creation of accessible public spaces and green spaces where people can meet and gather informally and at no cost.		
		Within strategic land-use planning, prioritise the development of higher density, pedestrian-friendly settlements where services, shops and community facilities are co-located.		
	Support people at risk of social isolation	Map community assets for building and sustaining social networks.	Scores for 'making time to keep in contact with others' (National Regional Wellbeing Survey)	4.7 NW excl. Burnie and WWC in 2016; 4.2 Burnie and WWC in 2016
		Raise community awareness about who might be at risk of social isolation, and promote ways in which local business, community and service organisations could provide support.		

Goal	Objectives	Actions	Indicator	Baseline
2. Enhancing mental health	Increase the number of people receiving mental health supports	Publicise and promote existing mental health supports, including remote/online support services.	% residents with anxiety/depression (DHHS Pop. Health Survey)	29.4% NW region in 2016
		In partnership with existing organisations, support mental health campaigns that de-stigmatise mental illness and raise awareness.	% residents reporting high/very high psychological distress (DHHS Pop. Health Survey)	11.7% NW region in 2016
		Host community event/s on World Mental Health Day (Oct 10).		
		Become a model employer by publicising and promoting mental health supports for Council employees.		
		Encourage local businesses to implement Employee Assistance Programs.		
	Enable more men aged 65+ to engage with informal social and emotional supports	Investigate best and promising practices in supporting older men's mental health at the local government level.	Ranking of suicide and self-inflicted injury in men's mortality data (DHHS).	Rank 9 CHC in 2016 Rank 8 WWC in 2016
		Continue/expand financial and in-kind support for existing community initiatives that support men's mental wellness and social connectedness.		
	Enhance the emotional intelligence of the community	Encourage schools to implement emotional intelligence teaching.	No. schools in which teachers have completed RULER training (RULER Health Tasmania data).	3 in CHC; 2 in WWC in 2018
		Support programs outside the school system that assist adults and young people to build emotional intelligence and active engagement.		
	Reduce risk of mental illness	Work with local service providers to promote and facilitate access to preventative and early intervention mental health initiatives.	No. mental health services located in or visiting CHC and WWC areas (Council data).	3 in CHC; 5 in WWC in 2018

Goal	Objectives	Actions	Indicator	Baseline
3. Valuing diversity	Improve disability inclusivity and accessibility	Ensure Council events, festivals, programs and facilities are accessible to people with physical, psychological, intellectual and sensory disabilities.	No. mobility maps produced (Council data)	None in 2018
		Assist local businesses to achieve high standards of disability accessibility through advocacy and information provision.		
		Seek funding to produce a mobility map for each major township.		
	Ensure women and children can live free from family violence	Encourage collaborative and awareness-raising initiatives that prevent or reduce family violence.	No. family violence incidents reported (Tasmania Police)	589 family violence incidents 12 months prior to Feb 2018 in Western district
		Explore opportunities for increasing the availability of emergency housing for people affected by family violence.		
	Continue to provide range of culturally appropriate health supports for Indigenous and CALD community members	Host a biennial service providers workshop to provide specialist training in responding to Aboriginal and CALD health and psychological needs.	No. people/organisations served through Council-hosted ATSI and CALD training (Council data).	None in 2018
		Promote the local government area to attract a culturally diverse healthcare workforce.		
		Continue to encourage Aboriginal and CALD community members to participate in Council consultation and decision-making around health and wellbeing.		
	Improve the range of LGBTI-positive health supports in the community	Host a biennial service providers workshop with specialist training in responding to LGBTI needs.	No. LGBTI social groups operating in CHC and WWC (Council data).	None in 2018
		Support and/or facilitate the creation of LGBTI social groups.		
	Encourage community inclusion and cohesion	Celebrate Aboriginal heritage by formally recognising Aboriginal custodianship within Council documents, by flying the Aboriginal flag on Council buildings, and by making an acknowledgement of country at all official events.	Presence of Aboriginal flag outside Council buildings (Council data).	Flag flown only during NAIDOC week, both Councils as of 2018
		Promote Council as a diversity-positive employer.		
		Normalise diversity through profiling the contributions of diverse community members to the local community and business sectors.		
		Provide access to diversity workshops for Councillors, staff and local community organisations.		

Goal	Objectives	Actions	Indicator	Baseline
4. Reducing socio-economic disadvantage	Support full local employment	Seek opportunities to attract new businesses and investment in the local economy.	SEIFA index of disadvantage (ABS Census)	CHC 940 in 2016 WWC 925 in 2016
		Collaborate with regional stakeholders in economic development opportunities.	Unemployment rate, people aged 15 years and over (ABS Census)	4.9% in CHC in 2016 7.5% in WWC in 2016.
		Support programs already working to improve the capacity of people facing multiple barriers to employment.		
		Establish a buddy/mentor register for job-seekers needing extra support from community volunteers (e.g. resume-writing, interview skills, encouragement)		
		Facilitate donations/loans of good quality workwear to enable people to present themselves well at job interviews.		
		In tandem with regional stakeholders, identify potential job growth areas and advocate for local training to help people become job-ready for these industries.		
	Improve community literacy and numeracy	Boost volunteer recruitment for the Libraries Tas/26TEN literacy program.	No. adults (post-school-age) receiving regular one-to-one literacy support at Smithton and Wynyard libraries (Libraries Tasmania data)	42 in Smithton; 9 in Wynyard in 2018
		Extend <i>Learn for Life: Circular Head Community Literacy Plan 2014-19</i> to cover Waratah-Wynyard.		
		Support and promote existing literacy and numeracy programs, and work in partnership to identify and develop additional programs as needed.		
	Make healthy activities more accessible to those on a low income	Investigate options to subsidise access to Council-run leisure facilities for health-care card holders.	Total no. low- or no-cost open space and recreation facilities maintained by Council (Council data)	CHC: 3 recreation facilities which include ovals, 9 playgrounds, 8 Open Space areas; WWC: multiple facilities, exact number not established.
		Within strategic land-use planning, prioritise the development of urban and open space environments that encourage healthy and affordable lifestyle choices.		
		Implement the Waratah-Wynyard and Circular Head Councils Open Space, Sport and Recreation Plan		
		Support public education campaigns working to combat problem gambling via education and awareness-raising.		

Goal	Objectives	Actions	Indicator	Baseline
5. Improving access to the basics	Ensure everyone enjoys security of tenure and high-quality housing.	Work with the property management sector (e.g. local real estate agencies) to ensure landlords are aware of, and complying with, guidelines for rental property amenity.	% households with rent payments greater than or equal to 30% of income (ABS Census)	5.4% CHC in 2016 9.4% WWC in 2016
		Promote community awareness of renters' rights and tenancy law.		
		Assist owners and renters to 'winterise' their homes by sharing information on low-cost modifications.	% households with mortgage payments greater than or equal to 30% of income (ABS Census)	5.1% CHC in 2016 4.9% WWC in 2016
		Improve Council's understanding of local housing needs and shortfalls so it can respond to projected changes in demand.		
		Where appropriate, work with developers of multi-unit developments to negotiate developer contributions in the form of low-income housing.		
		Support and encourage a diverse range of social housing providers.		
		Advocate for the retention/expansion of local public housing stock.		
	Ensure everyone enjoys high levels of nutrition and access to healthy, fresh food.	Share appropriate information about nutrition.	% people not consuming the recommended quantity of vegetables (DHHS Pop. Health Survey)	93.9% CHC in 2016 90.6% WWC in 2016
		Establish community garden plots on available Council land to enable people to grow food and to produce surplus food that others can access at low- or no-cost.		
		Ensure all Council-run events are catered for with healthy foods, including minimal sugars and trans fats, e.g. by implementing a Healthy Catering Policy	% people not consuming the recommended quantity of fruit (DHHS Pop. Health Survey)	71.2% CHC in 2016 67.2% WWC in 2016
		Actively contribute to existing regional healthy eating initiatives and awareness-raising activities.		
		Encourage businesses in the hospitality and tourism sector to provide healthy food options to their customers.		
	Ensure cleaner air in wintertime	Build community awareness of cleaner air practices during winter by sharing the EPA 'Burn Brighter this Winter' community education campaign.	Mean particulate matter (PM _{2.5}) concentrations during winter (May-Aug) in major settlements (EPA data)	Smithton 6.9 µg m ⁻³ ; Wynyard 8.2 µg m ⁻³ in 2018 (Note: measurement stations are on town boundaries; local concentrations may be higher)

Goal	Objectives	Actions	Indicator	Baseline
6. Supporting those living with illness	Reduce the burden of disease and the rate of potentially preventable hospitalisations.	Help raise local immunisation rates to protect vulnerable community members (e.g. older adults, younger adults, people living with illness) from exposure to infectious diseases.	% people reporting 'good' or 'excellent/ very good' health (DHHS Pop. Health Survey)	74.1% NW region in 2016
		Actively promote initiatives to increase awareness of disease-prevention behaviours (e.g. exercise, oral health, coughing into elbow, etc).	% people agreeing that each local government area is a 'healthy community' (Council survey)	59% CHC in 2016 74% WWC in 2016
	Enhance the health and wellbeing of carers	Work in partnership to ensure carers have good quality access to information about the services available to them and the person/people they care for.	No. carer-focused activities undertaken by Council, including research, information provision or community recognition	None in 2018
		Conduct an audit of the needs of carers in the community.		
		Host an annual carer-recognition event to raise awareness of the contributions of carers in the community, and to provide carers with an informal 'expo' of available support services.		
		Explore opportunities for enhancing the available carer respite options in the local area through existing or new volunteer networks, and through the activities of existing or new service providers and community organisations.		
		Investigate best and promising practices in supporting younger carers (aged 50 or younger) at the local government level.		

Goal	Objectives	Actions	Indicator	Baseline
7. Reducing harms from alcohol, tobacco and other drugs	Reduce the prevalence of smoking in the community	Encourage local service providers to offer access to Quit Tasmania resources and materials.	% current smokers (daily and occasional combined) (DHHS Pop. Health Survey)	29.3% CHC in 2016 9.0% WWC in 2016
		Encourage secondary schools to implement measures to dissuade young people from taking up smoking and to help them to quit.		
	Reduce risky levels of drinking	Promote and share information on the harms of drinking over the recommended levels.	% people drinking to lifetime harm (DHHS Pop. Health Survey)	29.2% CHC in 2016 18.2% WWC in 2016
		Trial and encourage 'dry' social events held by Council and others.	% people drinking to single occasion harm (DHHS Pop. Health Survey)	48.7% CHC in 2016 33.3% WWC in 2016
		Provide men and young people with alcohol-free alternatives for socialising.		
		Encourage local facilities to adopt voluntary harm minimisation codes around alcohol and drugs, e.g. the Good Sports program.		
		Promote alcohol harm reduction programs hosted by service providers and other third parties.		
	Reduce the harms from, and prevalence of drug-taking	Advocate for increased drug and alcohol addiction rehabilitation options in the region.	No. alcohol rehabilitation places/beds in the NW	17 Total in 2018 – 5 at Serenity House, Burnie – 12 at Salvation Army, Ulverstone At time of writing, Serenity House had been funded to increase the total beds by another 5.
		In partnership with schools and other youth organisations, facilitate and encourage harm minimisation information sharing and education.		
		Investigate opportunities to support local Designated Driver programs.		

Goal	Objectives	Actions	Indicator	Baseline
8. Building resilience	Improve outcomes for early years (pre-school) children	Embed awareness of the importance of early years across the local community and social services sector.	Rate of use of child health and parenting services (DHHS Pop. Health Survey)	13% NW region 2016
		Support parents and other carers in effective child-rearing strategies through education and support programs.	Satisfaction with child health and parenting services (DHHS Pop. Health Survey)	85.1% of users NW region 2016
		Develop a cross-sectoral Early Years Strategy to improve local service coordination and the quality of early years services.		
	Build health literacy and self-management capacity	Use multiple Council channels (online, Council building foyer, print media, etc) to support communication of consumer health information to increase health literacy.	Score for understanding health information (DHHS Pop. Health Survey)	4.24 NW region in 2016
			% people participating in screening (DHHS Pop. Health Survey)	Blood pressure 83.9%; Cholesterol 59.5%; Diabetes/hyperglycaemia 53.4%; Bowel cancer 34.0% NW region in 2016
	Enhance the community's ability to respond to, and recover from, emergency events.	Continue to support the Emergency Management leadership group.	Evidence of emergency response planning (Council data)	Emergency recovery plans in place for major settlements as at 2018.
		Continue to advocate for emergency management funding.		
		Review and update recovery management plans for each major settlement.		
	Enhance sustainability and community self-sufficiency	Assist communities to understand the potential impacts of extreme weather events, including potential effects on food security.	Evidence of sustainability-themed policy (Council data).	None publicly listed in CHC; Environmental Policy publicly listed WWC in 2018.
		Ensure Council disaster management, natural resource management and other plans account for the importance of sustainability on health and wellbeing.		
		Support local arts initiatives that enable groups and individuals to participate in arts and culture as makers/producers and as audiences.		

APPENDIX—POLICY AND PLANNING CONTEXT

Local government

The local government policy and planning context is set by each Council's 10-year Corporate Strategic Plan, which is actioned through each Council's four-year delivery program and annual operating plans. Each corporate plan is intended to be a 'living' document, adaptable to changing social, economic, environmental and regulatory circumstances.

Circular Head Corporate Strategic Plan 2017-2027

The *Circular Head Council Corporate Strategic Plan 2017-2027*¹²⁸ is founded on Council's mission, vision and values. The vision of Circular Head Council is 'to provide leadership excellence focused on strategic objectives through local and regional engagement to deliver value for money and services to meet community needs'.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- 'Circular Head community will be inclusive and resilient with a strong sense of belonging. People will be connected to one other and the world around them. The Circular Head community will be connected to its past and engaged in its present, creating a vibrant shared future.'
- 'Circular Head will be a place where services, facilities and open space provide opportunities for individuals and groups of all ages and abilities to participate in recreational activities that encourage health and wellbeing.'

Waratah-Wynyard Corporate Strategic Plan

The *Waratah-Wynyard Council Corporate Strategic Plan 2017-2027*¹²⁹ is founded on Council's mission, vision and values. The vision of Waratah-Wynyard Council is 'to deliver innovative, sustainable services to our community through strong leadership, clear direction and collaborative relationships'.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- 'Waratah-Wynyard community members will feel a sense of inclusion, belonging and value within a thriving, innovative and diverse population. They will be actively engaged in developing Council facilities, services and programs, and will be encouraged to provide input to planning for community needs.'
- 'Waratah-Wynyard will be a healthy community with access to more recreational choices in safe and welcoming environments. It will enjoy programs and recreational spaces that are inclusive, thriving and energetic, and will have access to high quality facilities, services and equipment.'

State government

A Healthy Tasmania

The Tasmanian Government's overarching health plan is *A Healthy Tasmania*, a five-year (2016-2021) strategy intended to provide people with the information and support they need to make positive and healthy changes in

their lives. The strategy identifies four priority areas for action:

1. Increasing smoking control, education and targeted intervention;
2. Supporting and incentivising healthy eating and physical activity
3. Enhancing community connections and supporting community-based partnership approaches to health; and
4. Supporting people who are at risk of, or live with, chronic conditions to remain healthier at home and in their communities.

Working in Health Promoting Ways

The Tasmanian government's approach to health promotion is set out in its resource, *Working in Health Promoting Ways*¹³⁰. It names eight principles of practice for working in health promoting ways and ensuring the effectiveness of interventions for health promotion. These principles are:

- Evidence-informed practice
- Determinants of health
- Equity
- Partnerships
- Action across the continuum
- Cultural change
- Supportive environments
- Community participation

Together these principles are aimed at producing a holistic approach to health promotion. By applying these principles, health promotion in Tasmania will address the following seven priorities for action:

1. Promoting physical activity and active communities
2. Improving access to nutritious, safe and affordable food
3. Promoting mental health and wellbeing

4. Reducing use and minimising harm from tobacco, alcohol and other drugs
5. Reducing environmental health risks and preventing injury
6. Promoting sexual health and wellbeing
7. Improving the prevention and management of chronic conditions

Tasmania's Plan for Physical Activity

*Tasmania's Plan for Physical Activity*¹³¹ is an initiative of the Premier's Physical Activity Council. It recognises that Tasmania currently has a low participation rate of physical activity, and it sets two targets for achievement by 2021: (i) to gain a 10% increase in physical activity levels Statewide; and (ii) to collect 1,000 success stories from Tasmanians about the positive difference regular physical activity is making to their lives.

The Plan sets four goals:

1. Become a community that values and supports physical activity;
2. Create built and natural environments that enable and encourage physical activity;
3. Develop partnerships that build and share knowledge and resources; and
4. Increase opportunities for all Tasmanians to be physical active where they live, work and play.

The Plan embraces a social ecology model of health and recognises that promoting physical activity will require input from people in diverse sectors such as transport, land-use planning, the arts, health, community development, education, sport and recreation and economic development; and will require coordinated effort by communities, academic institutions, professional associations and governments.

REFERENCES

- ¹ Government of Tasmania, Local Government Act 1993.
- ² Government of Tasmania, Public Health Act 1997.
- ³ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ⁴ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ⁵ World Health Organisation, 1946, preamble to the Constitution, accessed online <http://www.who.int/about/mission/en/>
- ⁶ International Conference on Health Promotion. 1986. Ottawa Charter for Health Promotion.
- ⁷ National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, 2016, Well-being concepts, accessed online <https://www.cdc.gov/hrqol/wellbeing.htm>
- ⁸ Adapted from Dahlgren, Göran and Whitehead, Margaret. 2007. European strategies for tackling social inequities in health: Levelling up part 2. Copenhagen: World Health Organisation.
- ⁹ Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D., 2015, Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10, 227-237.
- ¹⁰ Tasmanian Council of Social Services (TASCOSS), 2014, Transport in the Community.
- ¹¹ Insync, 2016, Circular Head Council Community Survey Report.
- ¹² Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ¹³ Community Transport Services Tasmania, 2017, Annual Report 2016-17.
- ¹⁴ Australian Bureau of Statistics, 2016, Census of Population and Housing
- ¹⁵ i.d. consulting, 2018, Cradle Coast Region Community Profile, accessed online <https://profile.id.com.au/cradle-coast/internet-connection?BMID=50&WebID=120>
- ¹⁶ Department of Health and Human Services, Population Health Branch, 2009, Social Capital in Tasmania: Results from the 2009 Population Health Survey.
- ¹⁷ Department of Health and Human Services, Population Health Branch, 2009, Social Capital in Tasmania: Results from the 2009 Population Health Survey.
- ¹⁸ Relationships Australia, 2011, Local Voices: Enquiry into Community Assets in Circular Head, Tasmania.
- ¹⁹ Australian Bureau of Statistics, 2015, Household and family projections, Australia, 2011 to 2036, accessed online <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3236.0Main%20Features42011%20to%202036>
- ²⁰ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ²¹ de Vaus, D., & Qu, L., 2015, Demographics of living alone (Australian Family Trends No. 6). Melbourne: Australian Institute of Family Studies.
- ²² University of Canberra, 2017, 2016 Regional Wellbeing Survey
- ²³ University of Canberra, 2017, 2016 Regional Wellbeing Survey
- ²⁴ Aged & Community Services Australia, 2015, Social isolation and loneliness among older Australians, Issues Paper No. 1, October 2015.
- ²⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ²⁶ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ²⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ²⁸ University of Canberra, 2017, 2016 Regional Wellbeing Survey
- ²⁹ Department of Health and Human Services Tasmania, 2016, Tasmanian Suicide Prevention Strategy 2016-2020, Hobart.
- ³⁰ Department of Health and Human Services, Population Health, 2018, Top fifteen causes of mortality for Circular Head (M) LGA and Waratah-Wynyard (M) LGA residents.
- ³¹ Australian Bureau of Statistics, 2015, Survey of Disability, Ageing and Carers.
- ³² Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³³ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³⁴ Australian Bureau of Statistics, 2016, Personal Safety Survey 2016.
- ³⁵ Tasmania Police, 2018, Corporate Performance Report: February 2018, Department of Police, Fire and Emergency Management.
- ³⁶ Morris, S., 2016, Snapshot of Mental Health and Suicide Prevention Statistics for LGBTI People and Communities, National LGBTI Health Alliance, Newtown NSW. Sydney. National LGBTI Health Alliance
- ³⁷ LGBTI Health and Wellbeing Ministerial Advisory Committee, 2014, Transgender and Gender Diverse Health and Wellbeing, Victorian Department of Health, Melbourne.
- ³⁸ Australian Human Rights Commission, 2014, Face the Facts: Lesbian, Gay, Bisexual, Trans and Intersex People.
- ³⁹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁴⁰ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.

-
- ⁴¹ Australian Indigenous HealthInfoNet, 2017, Summary of Aboriginal and Torres Strait Islander health, 2016. Available online at <http://www.healthinfonet.ecu.edu.au/health-facts/summary>.
- ⁴² Australian Indigenous HealthInfoNet, 2017, Summary of Aboriginal and Torres Strait Islander health, 2016. Available online at <http://www.healthinfonet.ecu.edu.au/health-facts/summary>.
- ⁴³ Australian Indigenous HealthInfoNet, 2017, Summary of Aboriginal and Torres Strait Islander health, 2016. Available online at <http://www.healthinfonet.ecu.edu.au/health-facts/summary>.
- ⁴⁴ Scollo, MM and Winstanley, MH. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2018. Available from www.TobaccoInAustralia.org.au
- ⁴⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁴⁶ Australian Bureau of Statistics, 2016, Estimating homelessness 2016.
- ⁴⁷ Smith, L. 2015. The Health Outcomes of Migrants: A Literature Review. Migration Council of Australia, Canberra.
- ⁴⁸ Royal Australian College of Physicians, 2015, Policy on Refugee and Asylum Seeker Health May 2015, Sydney.
- ⁴⁹ Scollo, MM and Winstanley, MH. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2018. Available from www.TobaccoInAustralia.org.au
- ⁵⁰ Australian Bureau of Statistics, 2016, Socio-Economic Indexes for Areas (SEIFA)
- ⁵¹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁵² Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁵³ Australian Bureau of Statistics, 2016, Census of Population and Housing
- ⁵⁴ Australian Bureau of Statistics, 2008, Tasmanian State and Regional Indicators, accessed online <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1307.6Feature+Article1Jun+2008>
- ⁵⁵ Australian Bureau of Statistics, 2008, Tasmanian State and Regional Indicators, accessed online <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1307.6Feature+Article1Jun+2008>
- ⁵⁶ Insync, 2016, Circular Head Council Community Survey Report.
- ⁵⁷ Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ⁵⁸ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁵⁹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁶⁰ ACIL Allen Consulting, Deakin University, Central Queensland University and The Social Research Centre, 2017, Fourth Social and Economic Impact Study of Gambling in Tasmania: Report 1, Tasmanian Dept of Treasury and Finance, Hobart.
- ⁶¹ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶² Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶³ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁴ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁶ Robinson, E. & Adams, R. 2008. Housing stress and the mental health and wellbeing of families. AFRC Briefing Paper No. 12, June. Australian Institute of Family Studies.
- ⁶⁷ Insync, 2016, Circular Head Council Community Survey Report.
- ⁶⁸ Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ⁶⁹ Tenants' Union of Tasmania, 2017, Tasmania Rents: December Quarter 2017.
- ⁷⁰ Social Action Research Centre, 2018, Rental Affordability Snapshot, Anglicare Tasmania, Hobart.
- ⁷¹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁷² Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁷³ Healthy Food Access Tasmania and the Heart Foundation, 2016, Circular Head Council Area: Community Food/Household Access Profile.
- ⁷⁴ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁷⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁷⁶ Heart Foundation, date unknown, Waratah-Wynyard Council Community Food Access Profile.
- ⁷⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁷⁸ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁷⁹ EPA Tasmania website, 2016, accessed online <http://epa.tas.gov.au/epa/air/woodheater-smoke/woodheater-and-open-fire-census-2011>

-
- ⁸⁰ Department of Health and Human Services website, 2016, accessed online http://www.dhhs.tas.gov.au/publichealth/alerts/air/my_health.
- ⁸¹ Johnston, F.H., Hanigan, I.C., Henderson, F.B. & Morgan, G.G., 2013, 'Evaluation of interventions to reduce air pollution from biomass smoke on mortality in Launceston, Australia: retrospective analysis of daily mortality, 1994-2007', *BMJ*, 346.
- ⁸² Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁸³ University of Canberra, 2017, 2016 Regional Wellbeing Survey
- ⁸⁴ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁸⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁸⁶ Insync, 2016, Circular Head Council Community Survey Report.
- ⁸⁷ Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ⁸⁸ Tasmanian Dept of Health and Human Services, Population Health Branch, 2013, Health Indicators Tasmania, Hobart.
- ⁸⁹ Primary Health Tasmania, summary population health data, Circular Head local government area.
- ⁹⁰ Primary Health Tasmania, summary population health data, Waratah-Wynyard local government area.
- ⁹¹ Tasmanian Dept of Health and Human Services, Population Health Branch, 2013, Health Indicators Tasmania, Hobart.
- ⁹² Department of Health and Human Services, Population Health, 2018, Top fifteen causes of mortality for Circular Head (M) LGA and Waratah-Wynyard (M) LGA residents.
- ⁹³ Department of Health and Human Services, Population Health, 2018, Top fifteen causes of mortality for Circular Head (M) LGA and Waratah-Wynyard (M) LGA residents.
- ⁹⁴ Australian Bureau of Statistics, 2015, Survey of Disability, Ageing and Carers.
- ⁹⁵ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁹⁶ Schirmer, J., 2017, Carers in Regional Australia: 2016 Regional Wellbeing Survey Report, Health Research Institute & Institute for Applied Ecology, University of Canberra.
- ⁹⁷ Scollo, MM and Winstanley, MH. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2018. Available from www.TobaccoInAustralia.org.au
- ⁹⁸ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁹⁹ Australian Criminal Intelligence Commission, 2018, National Wastewater Drug Monitoring Program—Report 4, March 2018.
- ¹⁰⁰ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹⁰¹ Tasmanian Department of Health and Human Services, 2016, Tasmanian Alcohol Data and Trends Report 2016, Hobart.
- ¹⁰² Tasmanian Department of Health and Human Services, 2016, Tasmanian Alcohol Data and Trends Report 2016, Hobart.
- ¹⁰³ Tasmanian Department of Health and Human Services, 2016, Tasmanian Alcohol Data and Trends Report 2016, Hobart.
- ¹⁰⁴ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹⁰⁵ Tasmanian Department of Health and Human Services, 2016, Tasmanian Alcohol Data and Trends Report 2016, Hobart.
- ¹⁰⁶ Australian Criminal Intelligence Commission, 2018, National Wastewater Drug Monitoring Program—Report 4, March 2018.
- ¹⁰⁷ Lusk, B., Ney, L., Peacock, A. & Bruno, R., 2017, Tasmanian Drug Trends 2017. Findings from the Illicit Drug Reporting System (IDRS). *Australian Drug Trends Series No. 149*. Sydney, National Drug and Alcohol Research Centre, University of New South Wales.
- ¹⁰⁸ Commissioner for Children and Young People, 2017, Health and Wellbeing of Tasmania's Children, Young People and their Families Report.
- ¹⁰⁹ Commissioner for Children and Young People, 2017, Health and Wellbeing of Tasmania's Children, Young People and their Families Report.
- ¹¹⁰ Australian Early Development Census, 2015, accessed online <https://www.aedc.gov.au/data/data-explorer>
- ¹¹¹ Australian Early Development Census, 2015, accessed online <https://www.aedc.gov.au/data/data-explorer>
- ¹¹² Australian Bureau of Statistics, 2008, Tasmanian State and Regional Indicators, accessed online <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/1307.6Feature+Article1Jun+2008>
- ¹¹³ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹¹⁴ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹¹⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹¹⁶ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹¹⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.

-
- ¹¹⁸ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹¹⁹ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹²⁰ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹²¹ Luber, G., Knowlton, K., Balbus, J., Frumkin, H., Hayden, M., Hess, J., McGeehin, M., Sheets, N., Backer, L., Beard, C.B., Ebi, K.L., Maibach, E., Ostfeld, S., Wiedinmyer, C., Zielinski-Gutierrez, E., & Ziska, L., 2014, Chapter 9: Human Health. Climate Change Impacts in the United States: The Third National Climate Assessment. Melillo, J.M., Richmond, T. & Yohe, G.W. (Eds), U.S. Global Change Research Program, 220-256.
- ¹²² Luber, G., Knowlton, K., Balbus, J., Frumkin, H., Hayden, M., Hess, J., McGeehin, M., Sheets, N., Backer, L., Beard, C.B., Ebi, K.L., Maibach, E., Ostfeld, S., Wiedinmyer, C., Zielinski-Gutierrez, E., & Ziska, L., 2014, Chapter 9: Human Health. Climate Change Impacts in the United States: The Third National Climate Assessment. Melillo, J.M., Richmond, T. & Yohe, G.W. (Eds), U.S. Global Change Research Program, 220-256.
- ¹²³ Grose, M., date unknown, Local climate profile: Circular Head Municipality, Antarctic Climate and Ecosystems Cooperative Research Project.
- ¹²⁴ Grose, M., date unknown, Local climate profile: Circular Head Municipality, Antarctic Climate and Ecosystems Cooperative Research Project.
- ¹²⁵ Grose, M., date unknown, Local climate profile: Circular Head Municipality, Antarctic Climate and Ecosystems Cooperative Research Project.
- ¹²⁶ Grose, M., date unknown, Local climate profile: Circular Head Municipality, Antarctic Climate and Ecosystems Cooperative Research Project.
- ¹²⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ¹²⁸ Circular Head Council, 2017, Circular Head Council Corporate Strategic Plan 2017-2027.
- ¹²⁹ Waratah-Wynyard Council, 2017, Waratah-Wynyard Corporate Strategic Plan 2017-2027.
- ¹³⁰ Department of Health and Human Services, date unknown, Working in Health Promoting Ways: A framework for health and community services, accessed online <http://www.dhhs.tas.gov.au/wihpw>
- ¹³¹ Premier's Physical Activity Council, 2011, Tasmania's Plan for Physical Activity 2011-2021.



AGE-FRIENDLY COMMUNITIES PLAN 2019-2024



CIRCULAR HEAD COUNCIL
WARATAH-WYNYARD COUNCIL

MARCH 2019

[This page intentionally left blank]

This Age-Friendly Communities Plan was produced by The Social Yield Pty Ltd for Circular Head and Waratah-Wynyard Councils in 2018-19.



The Social Yield Pty Ltd
PO Box 390 / Suite 1.03, 44 Formby Rd, Devonport TAS 7310
Level 17, 31 Queen St, Melbourne VIC 3000
www.thesocialyield.com.au
ABN 57 619 856 610 | ACN 619 856 610

This Plan has been prepared for Circular Head and Waratah-Wynyard Councils on the basis of Council-supplied documentation and additional data obtained from other government and non-government sources. The Social Yield Pty Ltd has taken all due care in the preparation of this Plan. However, The Social Yield Pty Ltd is not liable to any person or entity for any loss or damage which has occurred, or which may occur, in relation to that person or entity taking or not taking action in respect of any representation, statement, opinion or advice referred to herein. Cover image licensed from Alamy.

For questions relating to this Age-Friendly Communities Plan, please contact:

Tracey Bradley
Director Corporate and Community Services, Waratah-Wynyard Council
Director Community Services, Circular Head Council
21 Saunders Street, Wynyard TAS 7325
33 Goldie Street, Smithton TAS 7330
Phone (03) 6443 8333

CONTENTS

INTRODUCTION	1
MAYORAL MESSAGE.....	2
ABOUT THIS PLAN	3
VISION	5
GUIDING PRINCIPLES.....	5
DEFINING AGE-FRIENDLY COMMUNITIES.....	6
OUR PRIORITIES.....	7
1. Outdoor spaces and buildings	8
2. Transportation	10
3. Housing.....	12
4. Social Participation	14
5. Respect and Social Inclusion.....	16
6. Civic Participation and Employment.....	18
7. Communication and Information	20
8. Community and Health Services.....	22
AGE-FRIENDLY COMMUNITIES PLAN 2019-2024.....	24
APPENDIX—POLICY AND PLANNING CONTEXT.....	32
REFERENCES	34

INTRODUCTION

It is with great pleasure that we present Circular Head and Waratah-Wynyard Councils' inaugural Age-Friendly Communities Plan.

There has never been a better time to plan for age-friendly communities. Tasmania currently has the oldest population profile in Australia, and our population is ageing faster than the national average.

In Circular Head, 17% of our population was aged 65 or older in 2016, and in Waratah-Wynyard, this number was 22%. These proportions are growing. By 2037, the population of older adults in Circular Head is projected to reach 2,017, or more than one-quarter (27%) of the total population. In Waratah-Wynyard the population aged 65 and older is forecast to reach 4,703 by the year 2037, making up nearly one-third (32%) of the total population¹.

Ensuring that older people feel valued and can enjoy safe, welcoming and accessible communities will be essential to our collective wellbeing.

The integrated nature of this Age-Friendly Communities Plan reflects the ongoing close working relationship between the two Councils and the way in which our strategic goals are set in tandem. While the Plan is a joint strategy, we will target our actions to the needs of our individual communities.

MAYORAL MESSAGE

Within the context of an ageing population, local governments have an important role to play in ensuring that older people feel valued and can enjoy safe, welcoming and accessible communities. Circular Head and Waratah-Wynyard Councils are working to support their older people by implementing this joint CHC & WWC Age-Friendly Communities Plan 2019-2024.

The Plan is a first for our councils. It is informed by World Health Organisation guidelines, community aspirations (including those of older adults), research data and the wisdom of our local community organisations and service providers.

Our vision is that Circular Head and Waratah-Wynyard will be places in which older people are supported to be socially connected, to enjoy enhanced wellbeing and independence, to access the services and supports they need, and to remain valued and contributing members of the community.

Over the coming years, the Plan will guide our two Councils and our many local partners and providers in delivering on this vision. The Plan will be implemented through annual action plans, and we will use a framework of indicators to track progress towards our objectives.

We would like to thank all who contributed to the Age-Friendly Communities Plan, and we look forward to working to make Circular Head and Waratah-Wynyard places where people can flourish as they age.



D. H. Quilliam

Cr Daryl Quilliam

Mayor Circular Head Council



R. H. W. Walsh

Cr Robby Walsh

Mayor Waratah-Wynyard Council

ABOUT THIS PLAN

This Age-Friendly Communities Plan is intended to help ensure that Circular Head and Waratah-Wynyard local government areas are places where people can flourish as they age.

This is our first Age-Friendly Communities Plan, and we see it as a living document. We look forward to tracking our progress towards our goals, learning from experience, and strengthening this plan over time.

Developing the Plan

Development began with a review of the planning and policy context, including the World Health Organisation (WHO) parameters for Age-Friendly Communities as well as local and State government strategies and policies. Evidence from the Census and other research has helped us to understand community characteristics and needs.

We also drew on what we know about community priorities. A dedicated community engagement process with older people was beyond the scope of this project (although it is something we aspire to in the coming years). Instead, we derived information about community experiences and aspirations from existing sources, including:

- A Health and Wellbeing Planning Workshop held in May 2018 with 32 participants drawn from Council staff, community leaders and local and regional service providers.

While working through several health and wellbeing issues, participants identified a range of issues relating to age-friendly communities. This included naming potential enablers and barriers to achieving positive change.

- Findings from each Council's Annual Community Survey as well additional community consultation outcomes from internal research.
- Qualitative research and consultation findings relating to older adults and their experiences and aspirations compiled by other Tasmanian and Australian organisations, most notably the Council on the Ageing (COTA) Tasmania.
- Community input into *Sustainable Murchison 2040*, a joint strategic planning framework for Circular Head, Waratah-Wynyard, West Coast, King Island and Burnie.

Actions for this plan have been informed by this community evidence base, and they are also shaped by recommendations set out within the publications of COTA Tasmania, the Australian Local Government Association (ALGA), the WHO and other relevant agencies. There are also strong synergies between the actions of this Plan and those of the Circular Head and Waratah-Wynyard Community Health and Wellbeing Plan 2019-2024.

Feedback on the Plan

The draft version of this Age-Friendly Communities Plan was exhibited for community feedback between 26 September and 24 October, 2018.

Consultation on the draft Age-Friendly Communities Plan was undertaken alongside consultation on the Councils' draft Community Health and Wellbeing Plan and YPlan (Youth Plan). The drafts and the invitation to provide feedback were disseminated through the following channels:

Print media

- The draft plans and the call for community feedback were featured in *The Advocate* newspaper on 29 September and in the *Circular Head Chronicle* on 4 October.

Council website

- A media release about the draft plans and the call for community feedback were posted to both Council websites in the 'Latest News' and 'Have Your Say' sections on 26 September.

Social media

- A notice about the drafts and invitation to provide feedback was posted to the Circular Head Council Facebook page on 1 October, with an additional reminder posted on 22 October.

Hardcopies

- Hardcopies of the draft plans were placed in the Council foyer from 26 September and remained there throughout the feedback period.
- Hardcopies of the draft plans were distributed to the committees of the Service Providers Access Network (SPAN), Circular Head Education and Training Consultative Committee (CHETCC) and the Sport and Recreation Network.

- Hardcopies were also distributed to older adults at the Seniors Week Afternoon Tea and the Senior Citizens/Emmertons Park Clubhouse.

Email

- The plans were circulated by email to all participants of the original Health and Wellbeing Planning Workshop convened during the plans' development; as well as to the Service providers Access Network (SPAN) and the Sport and Recreation Network. A reminder email was sent to these recipients 22 October with links to the plans.

Community members and other stakeholders were invited to provide feedback on the draft plans via letter, telephone, the 'Have Your Say' online facility or email. Circular Head Council Facebook posts about the drafts made on the 1st and 22nd October reached 1,412 and 451 people respectively; and generated 66 and 7 engagements respectively. By close of the consultation period, Council had received seven written submissions on the drafts.

The resultant Age-Friendly Communities Plan is a five-year framework for action informed by community priorities. It is a shared plan across both Circular Head and Waratah-Wynyard Councils. Annual implementation plans derived from the Age-Friendly Communities Plan will be comprised of actions targeted to the needs and characteristics of individual communities.

VISION

Our Vision and Principles are informed by the WHO approach to Age-Friendly Communities.

Circular Head and Waratah-Wynyard will be places in which older people are supported to be socially connected, to enjoy enhanced wellbeing and independence, to access the services and supports they need, and to remain valued and contributing members of the community.

GUIDING PRINCIPLES

Respecting diversity

We recognise that older people are a heterogeneous group, and we respect their diverse capabilities, resources, lifestyles and preferences.

Fostering equity

We are committed to identifying and addressing inequities between groups, including but not limited to age, gender, disability, sexual orientation, socio-economic status, ethnicity, religion and location.

Valuing participation

We value and welcome the contributions of older people and their participation in all spheres of life.

Upholding rights

We respect the rights of older people to live with dignity.

Encouraging co-design and co-creation

Older people are not only the beneficiaries, but also crucial agents of change. We acknowledge that creating an age-friendly community requires collaboration and coordination across sectors and with diverse stakeholders.

Ensuring a two-way approach

We acknowledge that a bottom-up participatory approach should be combined with top-down political commitment and resources.

Ensuring a life course approach

We acknowledge that a life-course approach—that encourages intergenerational relations, solidarity and mutual support—should be central to efforts to create age-friendly towns and communities.

DEFINING AGE-FRIENDLY COMMUNITIES

Built and natural environments play a critical role in enabling people to flourish as they get older.

The following definition of age-friendly environments is from the World Health Organisation (WHO), whose Age-Friendly Cities and Communities program provides a framework for ensuring local environments help people to remain healthy, independent and autonomous as they age.

Age-friendly environments foster health and well-being and the participation of people as they age. They are accessible, equitable, inclusive, safe and secure, and supportive. They promote health and prevent or delay the onset of disease and functional decline. They provide people-centred services and support to enable recovery or to compensate for the loss of function so that people can continue to do the things that are important to them.

Without age-friendly environments, health for all cannot be achieved. Everyone should have the opportunity to achieve the highest possible level of health and wellbeing, regardless of age, sex or gender, cultural or ethnic background, wealth or health status.

Older people may experience negative attitudes and discrimination based on their age. Creating age-friendly environments acknowledges diversity, fights ageism and ensures that everyone has the opportunity to fully participate.

Creating barrier-free and affordable housing, accessible public spaces, and transportation enable people to stay independent and participate in community life. An age-friendly environment reduces the risk of falls and prevents the neglect and abuse of vulnerable older people by increasing the safety of the natural and built environments and the security and protection of older people in the community.

Older people play a crucial role in their communities – they engage in paid or volunteering work, transmit experience and knowledge, and help their families with caring responsibilities. These contributions can only be ensured if societies foster their health and participation.

Source: WHO (2018) Age-Friendly Cities and Communities

OUR PRIORITIES

Consistent with best practice in creating age-friendly communities, our plan is framed around eight priority areas. While these eight areas are common feature of most age-friendly community plans, our nominated actions and commitments respond to what we know about the older people of Circular Head and Waratah-Wynyard local government areas.

1. *Outdoor space and buildings*

2. *Transportation*

3. *Housing*

4. *Social Participation*

5. *Respect and Social Inclusion*

6. *Civic Participation and Employment*

7. *Communication and Information*

8. *Community and Health Services*

1. Outdoor spaces and buildings

Our goal

Our environments—including green and natural spaces, buildings, streetscapes, public facilities and pathways—are safe, accessible and have a high level of amenity.

Why it matters

Barrier-free and accessible public spaces enable people to enjoy opportunities for exercise and to participate in civic, social and community life.

What we know

In consultation with older Tasmanians, ‘mobility and keeping physically active’ was the seventh-most commonly named issue affecting people as they age².

Circular Head and Waratah-Wynyard adults report that public spaces—when functioning well—enable people to visit friends and families on foot; provide a ‘stage’ for special local events where the whole community can gather; provide access to recreational and sporting facilities; create spaces where walkers, cyclists and other users can exercise; and enable people to reach the shops, facilities and services they require³.

In 2016, residents of Circular Head rated the appearance of their neighbourhood/district as having high importance. At the same time, respondents felt that Council was not meeting their expectations for appearance and there was opportunity for improvement. Urban and rural land use planning was also ranked third-lowest in terms of performance. Residents named public toilets/amenities in their top-5 most important Council facilities and services, and ranked physical access to Council buildings (ramps, stairs, handrails) as the fourth-highest performing area of Council⁴.

In the same year, residents of Waratah-Wynyard residents similarly rated the appearance of their neighbourhood/district as having high importance. However, respondents felt the appearance of Wynyard CBD and Somerset CBD were areas in which Council was performing strongly. Urban and rural land use planning, however, ranked lowest for Council performance, and was named as a key area in which Council could improve. Among Council facilities and services, public toilets and amenities were rated as being most important to residents. Physical access to Council buildings (ramp, stairs, handrails) ranked second-highest in performance⁵.

Local service providers and community leaders report that public spaces in both Circular Head and Waratah-Wynyard are not always accessible to those with mobility issues⁶. This issue has also been emphasised by adults living in Waratah-Wynyard who point to the need to both manage the infrastructure itself (i.e. the physical condition of surfaces and kerbs) and build awareness around correct usage (i.e. accommodating the conflicting needs of pedestrians, wheelchairs and motorised scooters)⁷.

What we will do



2. Transportation

Our goal

Our public and community transport networks are reliable, accessible and affordable. They enable people to move around easily and safely.

Why it matters

Diverse transport options help people to retain their independence, access the services and supports they need, and stay connected to their social and family networks.

What we know

In consultation with older Tasmanians, ‘transport’ was the fifth-most commonly named issue affecting people as they age⁸. Local service providers and community leaders report that a lack of transport creates barriers for older people, both in terms of service access and in connecting with others⁹. Consultation with older Tasmanians has shown that limited transportation is the most commonly reported factor preventing people from feeling connected to their local community¹⁰.

In 2016, 371 (6.5%) private dwellings in Waratah-Wynyard had no motor vehicle, and 134 (4.3%) dwellings in Circular Head had no motor vehicle. While the proportion of dwellings without motor vehicles was lower than both the Tasmanian and Australia average, this should be viewed in the context of the availability and viability of other modes of transport, such as walking, biking, public transport and taxis. When surveyed by Council in 2016, only a minority of residents (35%) in Circular Head agreed that public transport was adequate to meet their needs¹¹. This number was higher in Waratah-Wynyard, where a majority (62%) agreed public transport was adequate to meet their needs¹².

Research into the transport needs of older adults in Tasmania has found that inadequate coordination is preventing the State from making best use of existing transport resources for older people. It found that older people are generally not well-informed about their transport issues, and they can hold negative perceptions of some forms of transport (e.g. perceived risks of taking taxis). The research also found that some elements of public transport operations worked as a barrier for older people and made public transport less age-friendly. For example, public bus stops often have low amenity due to a lack of seating, weather protection, signage and lighting¹³.

As an indicator of growing demand for transport assistance, Community Transport Services Tasmania (CTST) has reported a Statewide increase in demand for its services, with a year-on-year increase in demand of 8.5% for State Home and Community Care-funded trips recorded in 2016-17, including growth in both medical and social trips. Under the Commonwealth Home Support Program, CTST reported continued growth in non-emergency medical transport to people aged 65 and older¹⁴. Volunteer recruitment is named a barrier to expanding services to meet demand.

What we will do



3. Housing

Our goal

Our housing stock is diverse and provides people with affordable, accessible, high-quality options for people to rent and purchase.

Why it matters

Good quality housing enhances physical and mental wellbeing and supports people to ‘age in place’ in their communities, where they can maintain important social connections.

What we know

In consultation with older Tasmanians, ‘housing and home maintenance’ was the sixth-most commonly named issue affecting people as they age¹⁵. Local service providers and community leaders report a lack of independent living options for older people in the community¹⁶.

Australian household size has declined over recent decades. Living alone is associated with older age and is slightly more common amongst women than men¹⁷. In 2016, 28% of households in Circular Head and 30% of households in Waratah-Wynyard were lone person households, closely equivalent to the State average but higher than the national average. However, in the same year, the majority of dwellings in both local government areas had three bedrooms. Only 3% of Circular Head’s housing stock and 4.3% of Waratah-Wynyard’s housing was comprised of 1-bedroom dwellings in 2016, lower than both the State and national average¹⁸. Anecdotal evidence from Council suggests that some older people living alone would prefer a two-bedroom dwelling to accommodate guests/visiting family.

Older people are at higher risk of homelessness when they rent in the private market and do not own their own home. Consultation with older Tasmanians renting in the private market has found that renting is most successful in situations where both the accommodation and the location facilitate healthy ageing. Supportive factors include accessible streetscapes and nearby facilities, affordable heating options, the ability to access home help services, and opportunities to modify their homes to enable them to remain in their homes safely. These alterations require the permission of the owner and regularly incur costs for the tenants, their families or the DHHS¹⁹.

The Murchison community’s vision for the future includes, ‘Aged care is delivered to people’s homes, enabling them to stay in their communities as long as they can’²⁰.

What we will do



4. Social Participation

Our goal

People are supported to be active and engaged with their communities, maintaining important existing connections and exploring new opportunities for social, community and civic participation.

Why it's important

Social participation is a key predictor of a person's health and wellbeing. Reducing isolation and enabling connectedness are priorities for our communities.

What we know

Being socially connected has a positive influence on emotional, psychological and physical health. Conversely, experiencing social isolation—through living alone, having few social ties or little social engagement—is associated with poorer health outcomes, including a higher rate of mortality²¹.

For people of all ages, factors that protect against social isolation include strong relationships with friends and families and having someone to confide in. Risks for isolation include widowhood, never being married, having no children or no living children, being from a migrant and refugee population, identifying as LGBTI, or living in rural and remote areas. Older people living in a rural or remote locality have a higher risk of social isolation due to limited access to services, the changing roles they experience within their community, and the potential for a greater disconnect with family²².

In consultation with older Tasmanians, 'social connections, family and friendships' was the third-most commonly named issue affecting people as they age. Most responses associated with this issue highlighted the need to feel part of something, feel part of the community or make connections with others. A substantial number of respondents cited 'loneliness' as a key issue for them²³. When asked in 2016, 'Do you feel that you are part of your local community?', 21% of Circular Head residents and 19% of Waratah-Wynyard residents responded 'No', both higher than in 2014^{24, 25}.

Consultation with older Tasmanians has shown that limited transportation is the most commonly reported factor preventing people from feeling connected to their local community. Other significant factors were a lack of interaction with others, a lack of information and communication, and health and wellbeing²⁶.

Service providers and community leaders confirm that isolation is a key issue amongst older adults in Circular Head and Waratah-Wynyard, particularly for older people living alone. They point to high levels of anxiety and depression amongst older people²⁷.

What we will do



5. Respect and Social Inclusion

Our goal

All people in our community—regardless of their age, ability, ethnicity, gender, sexuality, family structure or socio-economic status—are valued and experience a sense of belonging.

Why this matters

Social exclusion hurts individuals and damages the social, civic and economic fabric of the community. Embracing diversity helps ensure that everyone can flourish as they age.

What we know

In consultation with older Tasmanians, ‘respect and identity’ was the fourteenth-most commonly named issue affecting people as they age. Those who contributed additional comments around this issue were concerned about societal attitudes towards ageing and older people. Some reported feeling patronised, undervalued or had concerns about age discrimination²⁸.

Discrimination and social exclusion is not just age related, but can also occur around factors such as ability, gender, sexuality, ethnicity and socio-economic disadvantage.

Where disability is concerned, in 2016 a total of 364 people in Circular Head reported a need for assistance. 47.3% of these people were aged 65 or older. In Waratah-Wynyard, 1,118 people reported a need for assistance. 48.3% of these were aged 65 or older²⁹.

The total LGBTI (Lesbian, Gay, Bisexual, Transsexual or Intersex) population of Circular Head and Waratah-Wynyard is unknown due to a lack of data. However, it is estimated that people of diverse sexual orientation, sex or gender identity may account for up to 11% of the general population³⁰.

Both Circular Head and Waratah-Wynyard are home to a relatively high proportion of people who identify as Indigenous. In the 2016 Census, there were 1,244 Aboriginal and/or Torres Strait Islander people living in Circular Head, making up 15.7% of the population, and in Waratah-Wynyard this number was 1,033, or 7.6% of the population³¹. Local service providers and community leaders report that racism, stigma and prejudice can impact health and wellbeing, both in terms of access to suitable health care and in terms of mental health impacts³².

The SEIFA index of disadvantage is derived from attributes that reflect disadvantage such as low income, low educational attainment, high unemployment, and jobs in relatively unskilled occupations. In 2016, Circular Head local government area had a SEIFA score of 940, while Waratah-Wynyard had a score of 925, indicating both had higher levels of disadvantage compared to the national average³³.

Local service providers and community leaders note that different people require different supports to enjoy enhanced health and wellbeing, and that true ‘community’ wellbeing is achievable only if every member of the community is included³⁴.

What we will do



6. Civic Participation and Employment

Our goal

Our community values the contributions of all people. Older people enjoy opportunities to participate in employment and volunteering, lifelong learning, and civic decision-making.

Why this matters

Civic and economic participation are personally rewarding and confer a sense of worth and purpose. The rich experiences, contributions and voices of older people contribute to community strength and resilience.

What we know

Local service providers and community leaders report that the contributions of older people can be undervalued and underutilised in Circular Head and Waratah-Wynyard³⁵. Australian research reveals that ageist attitudes are prevalent in the workplace, characterised by erroneous beliefs that older employees provide less return out of training, should be given a reduced role, or should be given less employment priority than younger people³⁶.

Yet work remains important to older people for many reasons. Staying in the workforce for longer has been noted as the most effective way for older Australians to improve their standard of living³⁷. The participation of older workers is also expected to have significant benefits for the wider economy, to help maintain social inclusion and improve health outcomes³⁸. The raising of the Australian age pension qualification age adds to the imperative for older people to remain in the workforce longer.



The Murchison community has emphasised the importance of lifelong learning and training. The community's vision for the future includes having access to the University of the Third Age (U3A) and additional educational opportunities via online platforms³⁹. There is currently a U3A in Wynyard with approximately 150 members⁴⁰.

Volunteering is associated with improved mental and physical health. In Tasmania, older people choose to volunteer in order to improve or maintain their health, but they also value the opportunities for social connection that volunteering provides⁴¹. Australian volunteers aged 65 and older report building several skills through volunteering. The most commonly named skill was patience, closely followed by teamwork, friendliness, cooperation and confidence⁴². In 2016, 23.6% of Circular Head residents and 20.1% of Waratah-Wynyard residents reported doing some form of voluntary work⁴³.

Residents in both local government areas are seeking more opportunities to participate in civic decision-making. In 2016, residents of Circular Head ranked 'opportunities for the community to participate in decision-making' as the lowest-performing area of Council and felt there was room for improvement⁴⁴. In 2016, Waratah-Wynyard also rated 'opportunities for the community to participate in decision-making' poorly, ranking it as the fourth-lowest performing area of Council⁴⁵.

'Being connected to each other and engaging with the world' has been named as one of the four key aspirations of the Murchison community⁴⁶.

What we will do

-  Enhance opportunities to contribute to Council decision-making
-  Support opportunities to participate in employment, volunteering and lifelong learning

7. Communication and Information

Our goal

People in our community can easily access the communications and information they need in a range of formats and styles to suit their diverse needs and preferences.

Why this matters

Being able to easily access suitable, timely and age-friendly information enables people to stay connected with friends and family, keep up with current events, access the services and supports they need, make important decisions, and engage in the activities they enjoy.

What we know

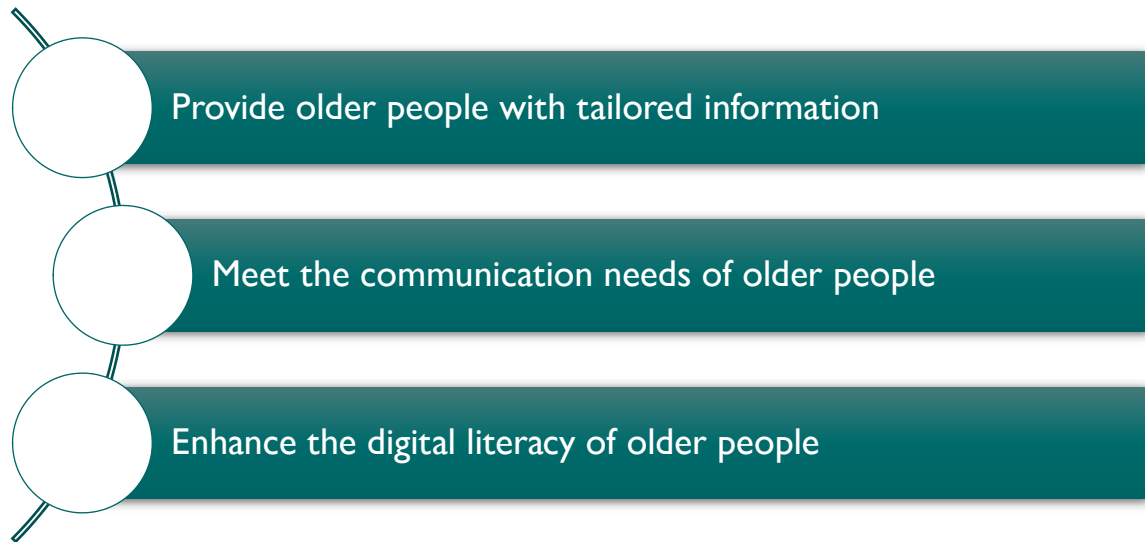
In consultation with older Tasmanians, ‘communication’ and ‘information’ were the eighteenth- and nineteenth-most commonly named issues affecting people as they age⁴⁷. Older Tasmanians report seeking information to help them to identify ways to live independently, healthily and socially; to meet their needs around managing income and finance; and to meet their telecommunication and computer needs. Information about home help services was the most commonly sought information type, followed by health, transport and social activities⁴⁸.

When older Tasmanians were asked what difficulties they experienced in finding the information they needed, more than three-quarters reported ‘communication’ (including over the phone and written communication), with the remainder nominating physical access, technology (computer and internet, mobile phones), ‘cost’, and ‘confidence and connectedness’ (social isolation and ageist attitudes)⁴⁹.

The internet can provide opportunities for enhanced social connectivity as well as access to supports, services and information. In 2016, the proportion of households in Circular Head and Waratah-Wynyard with an internet connection was lower than both the Tasmanian and Australian average⁵⁰. Older adults are less likely to use the internet and to enjoy high levels of digital literacy. In 2016-17, Australians aged 65 and older had the lowest proportion of internet use: 55% compared to 87% of the total population⁵¹. Tasmanians over 65 have one of the poorest digital literacy scores in Australia, and older people unable to access the internet experience greater disadvantage than their online peers⁵².

A non-English language was spoken in a total of 98 (3.1%) Circular Head households, and 155 (2.7%) Waratah-Wynyard households, compared with 22.2% for all Australian households⁵³. While these proportions are small, the potential for isolation and poor information access for these groups can indicate a higher need for information in more than one community language.

What we will do



8. Community and Health Services

Our goal

People in our community are supported by high quality, accessible and timely community and health services that reflect their diverse needs and backgrounds.

Why this matters

High quality services enable people to maintain health, wellbeing and independence as they age. Services that respond appropriately to diverse needs help ensure that everyone in the community is assisted to 'age well'.

What we know

In consultation with older Tasmanians, 'health and wellbeing' was the issue most often named as affecting people as they age, and 'access to facilities and services' was second-most commonly named issue. In terms of access to facilities and services, many comments cited geographic barriers⁵⁴.

Local service providers and community leaders note that people find difficulties and need support with My Aged Care. They report an overall lack of knowledge about what's available for at-home care within Commonwealth Home Support Program services⁵⁵. Local service providers and community leaders also report a need for improved access to approved training for workers in aged care and disability, and that there were issues with the timeliness of services being approved and delivered⁵⁶.

Mental health is a key issue for our region. The prevalence of depression and anxiety rose in the north west region between 2009 and 2016, from 20.0% to 29.4% of the general population⁵⁷. In 2016, just over one in ten (11.7%) of people in the north west reported experiencing high/very high levels of psychological distress⁵⁸.

Local service providers and community leaders report that families face difficulties accepting the loss of a loved one's independence and their transition into aged care services. Home environments where someone has dementia can become especially challenging. They also report there is currently not enough support at home for the carers of people with health issues, and for people who are dying. This is compounded by a limited palliative care services in the region⁵⁹.

Being a carer can diminish a person's ability to socialise, work and stay healthy. Nationwide, in 2015 the average age of a primary carer was 55 years, with females making up the majority of carers. Over one third of primary carers in Australia (37.8%) lived with a disability themselves⁶⁰. In 2016, 647 people (10.3%) in Circular Head and 1,420 people (12.6%) in Waratah-Wynyard reported providing unpaid assistance to a person with a disability, long-term illness or person aged 65 or older in the previous two weeks, compared to 11.3% of people in Australia⁶¹. Carers in Tasmania report experiencing impacts on their own health and wellbeing, which can result in poor mental health⁶².

The Murchison community has described a future in which technology is helping deliver home-based aged care and older people are ageing independently at home in their communities. In this future scenario, the emphasis in aged care is on strength and wellbeing⁶³.

What we will do



AGE-FRIENDLY COMMUNITIES PLAN 2019-2024

Note: Potential partners for co-delivering these actions will be identified as annual implementation plans are developed.

Goal: 'Our environments—including green and natural spaces, buildings, streetscapes, public facilities and pathways—are safe, accessible and have a high level of amenity.'

1. Outdoor spaces and buildings	Objectives	Actions	Indicator	Baseline
	Enhance the accessibility of built and natural environments	Develop a policy to ensure that Council's open spaces and facilities are accessible to people of all abilities and ages.	Proportion of Council-owned facilities that are fully accessible by wheelchair and to people who have limitations in mobility, hearing and vision (Council data).	Data not collected 2018.
		Provide Council employees and partner organisations with information about the benefits and characteristics of age-friendly environments.		
		Encourage local businesses to achieve high standards of disability accessibility through advocacy and information provision.		
		Seek funding to produce a mobility map for each major township.		
		Incorporate age-friendly principles (including walkability, safety and visual appeal) into strategic and statutory land-use planning and development approval decisions.		
		Provide meaningful opportunities for older adults to contribute to Council decision-making in regard to rural and urban design.		
		Advocate for the inclusion of age-friendly principles in regional and State planning land-use planning and policy initiatives.		
	Enhance community safety	Continue to manage Council's open spaces, facilities, and road and footpath infrastructure to support community safety.	% residents who report their local government area is a safe place to live and work (Council Community Survey)	89% in Circular Head; 94% in Waratah-Wynyard in 2016.
		Provide and/or facilitate workshops, events and information to community members on personal safety awareness.		
	Foster connected townships	Explore opportunities to improve the amenity and accessibility (e.g. providing seating, lighting, toilets) of public spaces to support informal everyday access as well as community events and activities.	% town streets that have pedestrian paths that meet locally accepted standards (Council data).	N/A CHC; 75% WWC streets have acceptable footpaths and crossovers in 2019.
		Through Council's strategic land-use activities, prioritise walkable town centres where shops, services, facilities and parks are located together.		
		Build and maintain accessible pathways through townships to connect homes with destinations.	Completion of Coastal Pathway between Wynyard & Burnie (Council data).	Not complete in 2018.

Goal: 'Our public and community transport networks are reliable, accessible and affordable. They enable people to move around easily and safely.'

2. Transportation	Objectives	Actions	Indicator	Baseline
	Enhance the diversity of transport options available to older people	Investigate options for promoting a local carpool or volunteer rideshare network.	No. aged-focused Council initiatives to promote active transportation such as walking and cycling annually (Council data).	N/A CHC and 2 for WWC current in 2019.
		Encourage active transportation through continued development of walking and cycle pathways and signage.		
	Enable older people to utilise a range of transport services and options	Assist older adults to know more and feel confident about using the transport services and options available to them, including active transport (e.g. walking and cycling).	No. Council-led initiatives to improve the safe sharing of roads and footpaths while using diverse transportation methods (e.g. walking, wheelchairs, motorised scooters).	None recorded in 2018.
		Regularly evaluate the condition and appropriateness of visual cues associated with Council-managed carparks, streets and roads, such as signage and edge lines.		
		Support older drivers by facilitating access to resources such as the Tasmanian Older Drivers' Handbook and promoting relevant RACT programs.		
		Assist community members to safely share roads and footpaths while using diverse transportation methods (e.g. walking, wheelchairs, motorised scooters).		
	Foster a strong local transport network	Advocate to the Tasmanian government for enhanced public transport options, including the amenity of associated infrastructure.	% residents who report that public transport is adequate to meet their needs (Council Community Survey)	35% CHC in 2016 62% WWC in 2016
		Explore opportunities to partner with community transport providers.		
		Assist local community transport providers to promote their volunteer recruitment needs.		

Goal: 'Our housing stock is diverse and provides people with affordable, accessible, high-quality options for people to rent and purchase.'

3. Housing	Objectives	Actions	Indicator	Baseline
	Enhance the accessibility of new and existing homes	Through Council's building and development services, educate developers and builders about the principles and importance of universal design.	Advice on universal design provided to developers and builders (Council data).	No publicly available guidance on CHC or WWC websites as of 2018.
		Provide information tailored to renters and homeowners on how to achieve the home modifications they require, including assistance programs available.		
	Foster compact towns and neighbourhoods	Within Council's strategic land-use planning activities, prioritise the location of residential development close to shops, services and facilities.	Evidence of co-location principles in Council land-use policy (Council data).	CHC and WWC interim planning schemes 2018: 'require all new use or development has access to adequate utilities and community services'
	Increase the diversity and availability of high-quality accommodation options	Encourage an increase in the availability of one- and two-bedroom dwellings by sharing demand information with potential developers and housing providers.	% one-bedroom dwellings (defined in the Census as '0 or 1 bedrooms') and two-bedroom dwellings in total housing stock (ABS data).	3.4% one-bed, 15.2% two-bed in Circular Head; 4.6% one-bed, 19.1% two bed in Waratah-Wynyard in 2016.
		Support and promote existing initiatives that seek to ensure the amenity and appropriateness of rental properties.		
		Assist older people to 'winterise' their homes by sharing information on low-cost modifications that can increase heat retention and minimise issues with damp and cold.	% residents who report that there is good choice and availability of housing options (Council survey).	70% in Circular Head; 73% in Waratah-Wynyard in 2016.
		Enhance the availability of supported accommodation options by continuing to advocate for high-quality accommodation services and by attracting new providers to the area.	No. local providers of aged-specific housing (Council data).	CHC: Emmerton Park Inc Independent Living Units, Housing Connect; WWC: Spencer Park Inc. Myrtle Park Inc., DHHS, Housing Choices, Yaraandoo and the Wynyard Care Centre
		Explore options to educate older adults about their options to downsize their housing.		

Goal: 'People are supported to be active and engaged with their communities, maintaining important existing connections and exploring new opportunities for social, community and civic participation.'

4. Social Participation	Objectives	Actions	Indicator	Baseline
	Increase opportunities for informal and formal social interaction	Within Council's strategic land-use planning activities, support urban design and development that facilitates more opportunities for interaction.	No. Council-owned facilities available to community groups for sustaining social networks (Council data)	6 in CHC and 7 in WWC in 2019.
		Audit existing Council and community assets suitable for building and sustaining social networks.		
		Provide information in electronic and hardcopy versions—in readable formats—to older adults about the social activities, events, groups and programs that are available in their local area.		
		Ensure Council events and activities that include older people, or that utilise volunteers, are accessible for older people.		
	Support participation in social interaction	Work in partnership with local organisations to help ensure that social activities and events are accessible to people of all ages.	% residents who report being a member of a community group (Council survey data)	56% in Circular Head; 52% in Waratah-Wynyard in 2016.
		Explore opportunities to support organisations already providing age-friendly social activities.		
		In partnership with local residents and service providers, investigate local interest in, and potential funding opportunities for, creating an initiative modelled on the Waverton Hub model, NSW.		
	Encourage the wider community to address social isolation	Raise community awareness about social isolation amongst older people.	% residents who report they feel a part of their local community.	79% in Circular Head; 81% in Waratah-Wynyard in 2016.
		Promote ways in which local business, community and service organisations can help alleviate social isolation amongst older people.		
		Promote provisions for older people to include their pets on outings, e.g. dog water stations outside of cafes, shops and community facilities.		
		Encourage service providers to incorporate animal therapy for older adults, e.g. Delta Dogs.		
		Explore opportunities to partner with outreach organisations in disseminating information to isolated older people.		

Goal: 'All people in our community—regardless of their age, ability, ethnicity, gender, sexuality, family structure or socio-economic status—are valued and experience a sense of belonging.'

5. Respect and Social Inclusion	Objectives	Actions	Indicator	Baseline
	Reduce discrimination and barriers to participation	Work within Council and in partnership with local businesses and community organisations to raise awareness about the impacts of ageism.	No. participants reached by biennial service provider workshops.	Approx. 19 people in 2014.
		Host biennial service provider workshop to provide specialist training in responding to the specific health and social needs of older adults.		
		Work to ensure that Council events, festivals, programs and facilities are accessible to older adults.		
		Facilitate awareness amongst businesses about the needs of older people in the delivery of products and services.		
		Provide information to support local service providers to understand and address the particular service needs of CALD, LGBTI and Aboriginal and Torres Strait Islander older people.		
	Foster a sense of community inclusion	Deliver and promote Seniors Week activities and events to raise awareness of the contributions of older people—including those of Aboriginal Elders—in such fields as arts and culture, education, business, sports, etc.	% residents who report feeling a part of their local community (Council Community Survey)	79% in Circular Head; 81% in Waratah-Wynyard in 2016.
		Regularly utilise positive and diverse images of older people across a range of Council print and digital publications.		
	Encourage intergenerational connectedness	In partnership with community organisations and education providers, investigate and support existing opportunities to integrate youth and older adults' programs and initiatives.	No. locally available programs or initiatives for intergenerational interactivity.	CHC: Emmerton Park Inc., Library, Circular Head Christian School; WWC: Library, Live Well Tasmania, Rural Health Tasmania, Chat n' Choose (Baptist Church), Wynyard Community Garden, Man2Man (Baptist Church), Somerset Wynyard and Waratah Men's Sheds

Goal: 'Older people enjoy opportunities to participate in employment and volunteering, lifelong learning, and civic decision-making.'

6. Civic Participation and Engagement	Objectives	Actions	Indicator	Baseline
	Enhance opportunities to contribute to Council decision-making	<p>Within Council's community engagement activities, provide meaningful opportunities for older adults to contribute to Council decision-making across a range of service areas and issues.</p> <p>Explore interest in, and feasibility of, establishing a Seniors Reference Group in CH and WW to advise Council on a range of matters.</p>	% submissions to Council made by older persons' interest groups and/or Seniors Reference Group annually (Council data).	No data collected in 2018.
	Support opportunities to participate in employment, volunteering and lifelong learning	<p>Work with other local providers to help ensure that older adults can access supports to find employment and to remain in the workforce for as long as they wish.</p> <p>Work in partnership to run a promotional campaign about the value of older employees to the local business community.</p> <p>In partnership with Volunteering Tasmania and other community organisations, assist older people in the community to know about, and access, the range of volunteer opportunities available to them.</p> <p>Promote and deliver National Volunteers Week events to celebrate the contributions of local volunteers, and to enhance awareness of the community and personal benefits of volunteering.</p> <p>Provide information to community groups on available grants/funding to cover the costs associated with engaging volunteers</p> <p>Via grants, in-kind support and promotion, support local opportunities for lifelong learning, such as Universities of the Third Age and programs delivered by other organisations and providers.</p>	% people aged 65 years and over who are fully or partially engaged in employment and education (ABS data).	16.3% in Circular Head; 8.5% in Waratah-Wynyard in 2016.

Goal: 'People in our community can easily access the communications and information they need in a range of formats and styles to suit their diverse needs and preferences.'

7. Communication and Information	Objectives	Actions	Indicator	Baseline
	Provide older people with tailored information	Expand the range of information resources currently provided by Council, including information about local programs and services.	Availability of a senior's directory for each of CHC and WWC (Council data).	Only social/recreational information provided as of 2018.
		Leverage libraries, neighbourhood houses and community facilities as places for distribution of information to older people.		
	Meet the communication needs of older people	Seek opportunities to provide dementia communication training to all Council staff with face-to-face service provision roles.	Requirements for accessible information provision evidenced within Council communications policy.	None evident in 2018.
		Ensure that Council communications—including face-to-face, telephone, print and web formats—are accessible to older people and people with disabilities.		
		Assess the need to produce Council information in simplified language, including plain English, to improve accessibility.		
		Produce this Age-Friendly Communities Plan in a black-and-white version to facilitate easier reading and explore options for reproducing the Plan in a range of other accessible formats.		
	Enhance the digital literacy of older people	Support and promote older people's participation in digital literacy training initiatives delivered through Libraries Tasmania and others in the community.	<p>% households connected to the internet (ABS Census)</p> <p>No. of Digital Inclusion individual sessions run at Smithton and Wynyard libraries (Libraries Tasmania data)</p>	<p>69.1% in 2016 71.2% in 2016</p> <p>238 in Smithton; 26 in Wynyard in 2018.</p>

Goal: 'People in our community are supported by high quality, accessible and timely community and health services that reflect their diverse needs and backgrounds.'

8. Community and Health Services	Objectives	Actions	Indicator	Baseline
	Support community health and wellbeing	Deliver a range of associated actions under the Circular Head and Waratah-Wynyard Community Health and Wellbeing Plan 2019-2024.	No. of annual plans associated with the CHWP implemented (Council data).	N/A as of March 2019
	Enhance the availability and accessibility of services	Explore options to support older people to understand and navigate the My Aged Care portal.	No. of local service providers with an aged-care focus (Council data).	CHC: Emmerton Park Inc. Senior Citizens Club, Rural Health TAS, Wyndarra Centre, CHAC, Libraries TAS; WWC: Wynyard Senior Citizens' Club, Men and Women's Proboscis Clubs in Wynyard, Cam Retirees, Wynyard Adult Day Care Centre.
		Encourage new community and/or private providers to update Council about their service offerings, so that Council may inform community members.		
		Provide older people with targeted information provision and informal referrals to connect them to support services.		
		Provide older Aboriginal and Torres Strait Islander people with targeted information provision and informal referrals to connect them to culturally appropriate support services.		
		Investigate demand amongst service providers for regular information exchange and collaborative planning around on the needs of older people.		
	Enhance the wellbeing of carers	Within regional and local government partnerships, advocate for improved health and aged-care service provision.	No. of locally available respite services (Council data).	CHC: Rural Heath Respite House, Emmerton Park Inc; WWC: Wynyard Care Centre, Yaraandoo Homes.
		Investigate opportunities to boost respite options for carers.		
		In partnership with community and government organisations, ensure carers are aware of the services available to them and the person/people in their care.		
		Celebrate the contributions of carers to the community.		
		Explore opportunities to enable carers to meet informally for the purposes of peer mutual support and information-sharing.		

APPENDIX—POLICY AND PLANNING CONTEXT

State policy and planning context

Strong, Liveable Communities: Tasmania's Active Ageing Plan 2017-2022

*Strong, Liveable Communities: Tasmania's Active Ageing Plan 2017-2022*⁶⁴ is a Tasmanian Government plan designed to support individuals aged 50 and older to make informed choices about their health and wellbeing, education, participation and security. The plan is supported by annual implementation strategies.

The plan acknowledges that older Tasmanians—as active participants in the workforce, volunteers, carers, parents and grandparents—contribute significantly to Tasmania's future. The plan also acknowledges that not all Tasmanians enjoy the same life circumstances and there is a need to support the most vulnerable.

The plan sets out commitments against four key action areas:

- **Health**—*Tasmanians can access information and services to be active participants in managing their own health and wellbeing as they age.*
 1. Support people to be active in managing their own health.
 2. Facilitate access to physical activity to improve strength, resilience and participation.
 3. Provide information and programs about affordable healthy eating.
 4. Improve access to mental and physical health care in rural communities.
- **Lifelong Learning**—*Learning is accessible and inclusive of older Tasmanians so that they feel valued, accepted and able to cope with change.*
 5. Work collaboratively to increase confidence and skills to use digital technology.
 6. Provide opportunities for diverse groups to share skills and knowledge.
 7. Work to lift literacy and numeracy levels of older adults.
 8. Provide targeted information about education, training and learning opportunities.
- **Participation**—*Older Tasmanians are able to fully participate in family, community and civic life.*
 9. Strengthen the liveability of local communities.
 10. Maximise opportunities for older workers to re-enter, reskill or remain in the workforce.
 11. Work with local businesses to respond to the needs of an ageing community.
 12. Implement whole of community strategies to overcome transport barriers.
 13. Support a skilled, sustainable volunteering sector.
 14. Address ageism and combat age-related stereotypes.
- **Security**—*Older Tasmanians are supported to be safe and secure in their own home and in their community.*
 15. Support awareness and improve our response to elder abuse.
 16. Assist people to access appropriate cost of living support.
 17. Strengthen our efforts to provide appropriate and affordable housing.
 18. Facilitate education and support for older people to be safe online.
 19. Support older people to maintain independence as they age.

Legislative context

Section 20 of Tasmania's *Local Government Act 1993* requires local governments to provide for the health, safety and welfare of its community.

Local policy and planning context

The policy and planning context at the local level is set by each Council's 10-year Corporate Strategic Plan, which is actioned through each Council's four-year delivery program and annual operating plans. Each corporate plan is intended to be a 'living' document, adaptable to changing social, economic, environmental and regulatory circumstances.

Circular Head Corporate Strategic Plan 2017-2027

The *Circular Head Council Corporate Strategic Plan 2017-2027*⁶⁵ is founded on Council's mission, vision and values. The vision of Circular Head Council is 'to provide leadership excellence focused on strategic objectives through local and regional engagement to deliver value for money and services to meet community needs'.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- The Circular Head community will be inclusive and resilient with a strong sense of belonging. People will be connected to one other and the world around them. The Circular Head community will be connected to its past and engaged in its present, creating a vibrant shared future.

Waratah-Wynyard Corporate Strategic Plan

The *Waratah-Wynyard Council Corporate Strategic Plan 2017-2027*⁶⁶ is founded on Council's mission, vision and values. The vision of Waratah-Wynyard Council is 'to deliver innovative, sustainable services to our community through strong leadership, clear direction and collaborative relationships'.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- Waratah-Wynyard community members will feel a sense of inclusion, belonging and value within a thriving, innovative and diverse population. They will be actively engaged in developing Council facilities, services and programs, and will be encouraged to provide input to planning for community needs.

REFERENCES

- ¹ Dept Treasury and Finance, 2014, Population projections for Tasmania and its Local Government Areas.
- ² COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ³ The Social Yield, 2018, Public Value: Roads and Footpaths, Devonport.
- ⁴ Insync, 2016, Circular Head Council Community Survey Report, Melbourne and Sydney.
- ⁵ Insync, 2016, Waratah-Wynyard Council Community Survey Report, Melbourne and Sydney.
- ⁶ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ⁷ The Social Yield, 2018, Public Value: Roads and Footpaths, Devonport.
- ⁸ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ⁹ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ¹⁰ COTA Tasmania, 2011, A Sense of Belonging: Social Inclusion Issues for Older People in Tasmania, Consultation Report, Hobart.
- ¹¹ Insync, 2016, Circular Head Council Community Survey Report.
- ¹² Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ¹³ COTA Tasmania, 2013, Addressing Transport Issues for Older People, Position Paper, May 2013, Hobart.
- ¹⁴ Community Transport Services Tasmania, 2017, Annual Report 2016-17.
- ¹⁵ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ¹⁶ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ¹⁷ de Vaus, D., & Qu, L., 2015, Demographics of living alone (Australian Family Trends No. 6). Melbourne: Australian Institute of Family Studies.
- ¹⁸ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ¹⁹ COTA Tasmania, 2015, Ageing in Whose Place? Older Tasmanians' Experiences in Private Rental, Project Report, Hobart.
- ²⁰ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ²¹ Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D., 2015, Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10, 227-237.
- ²² Aged & Community Services Australia, 2015, Social isolation and loneliness among older Australians, Issues Paper No. 1, October 2015.
- ²³ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ²⁴ Insync, 2016, Circular Head Council Community Survey Report, Melbourne and Sydney.
- ²⁵ Insync, 2016, Waratah-Wynyard Council Community Survey Report, Melbourne and Sydney.
- ²⁶ COTA Tasmania, 2011, A Sense of Belonging: Social Inclusion Issues for Older People in Tasmania, Consultation Report, Hobart.
- ²⁷ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ²⁸ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ²⁹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³⁰ Australian Human Rights Commission, 2014, Face the Facts: Lesbian, Gay, Bisexual, Trans and Intersex People.
- ³¹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³² Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ³³ Australian Bureau of Statistics, 2016, Socio-Economic Indexes for Areas (SEIFA)
- ³⁴ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ³⁵ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ³⁶ The Benevolent Society, 2017, The Drivers of Ageism, Sydney.
- ³⁷ Australian Human Rights Commission, 2012, Working Past our 60s: Reforming Laws and Policies for the Older Worker, Canberra.
- ³⁸ Deloitte Access Economics, 2012, Increasing Participation Among Older Workers: The Grey Army Advances, Report prepared for the Australian Human Rights Commission, Kingston.

-
- ³⁹ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ⁴⁰ U3A Wynyard, 2017, President's Report, AGM 17 March 2017.
- ⁴¹ Shannon, E., Pearson, S. & Girkin, F., 2017, Community Volunteering: Understanding Motivation, Sustaining Participation, Capturing Benefits, University of Tasmania, Hobart.
- ⁴² Price Waterhouse Coopers, 2016, State of Volunteering in Australia: Help Create Happiness, Volunteering Australia, April 2016.
- ⁴³ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁴⁴ Insync, 2016, Circular Head Council Community Survey Report, Melbourne and Sydney.
- ⁴⁵ Insync, 2016, Waratah-Wynyard Council Community Survey Report, Melbourne and Sydney.
- ⁴⁶ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ⁴⁷ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ⁴⁸ COTA Tasmania, 2012-14, Finding Out: Supporting Older People to Access the Right Information at the Right Time. Hobart.
- ⁴⁹ COTA Tasmania, 2012-14, Finding Out: Supporting Older People to Access the Right Information at the Right Time. Hobart.
- ⁵⁰ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁵¹ Australian Bureau of Statistics, 2018, Household Use of Information Technology, Australia, 2016-17.
- ⁵² COTA Tasmania, 2017, 'Digital technology and older Tasmanians', Liveable Communities Toolkit, Hobart.
- ⁵³ Scollo, MM and Winstanley, MH. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2018. Available from www.TobaccoInAustralia.org.au
- ⁵⁴ COTA Tasmania, 2013, Key Issues for Older Tasmanians: Summary Report, Hobart.
- ⁵⁵ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ⁵⁶ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ⁵⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁵⁸ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁵⁹ Circular Head and Waratah-Wynayrd Councils, 2018, Community Health and Wellbeing workshop, Rocky Cape, 8 May.
- ⁶⁰ Australian Bureau of Statistics, 2015, Survey of Disability, Ageing and Carers.
- ⁶¹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ⁶² COTA Tasmania, 2011, Older Tasmanians Mental Health and Wellbeing Forum, Hobart.
- ⁶³ Campbell & Jones, 2016, Sustainable Murchison 2040 Community Vision.
- ⁶⁴ Dept Premier and Cabinet, 2018, Strang, Liveable Communities: Tasmania's Active Ageing Plan 2017-2022, Hobart.
- ⁶⁵ Circular Head Council, 2017, Circular Head Council Corporate Strategic Plan 2017-2027.
- ⁶⁶ Waratah-Wynyard Council, 2017, Waratah-Wynyard Corporate Strategic Plan 2017-2027.



YPLAN (YOUTH PLAN) 2019-2024



CIRCULAR HEAD COUNCIL
WARATAH-WYNYARD COUNCIL

MARCH 2019

This YPlan (Youth Plan) was produced by The Social Yield Pty Ltd for Circular Head and Waratah-Wynyard Councils in 2018-19.



The Social Yield Pty Ltd
PO Box 390 / Suite 1.03, 44 Formby Rd, Devonport TAS 7310
Level 17, 31 Queen St, Melbourne VIC 3000
www.thesocialyield.com.au
ABN 57 619 856 610 | ACN 619 856 610

This Plan has been prepared for Circular Head and Waratah-Wynyard Councils on the basis of Council-supplied documentation and additional data obtained from other government and non-government sources. The Social Yield Pty Ltd has taken all due care in the preparation of this Plan. However, The Social Yield Pty Ltd is not liable to any person or entity for any loss or damage which has occurred, or which may occur, in relation to that person or entity taking or not taking action in respect of any representation, statement, opinion or advice referred to herein. Cover image licensed from iStock.

For questions relating to this Youth Plan, please contact:

Tracey Bradley
Director Corporate and Community Services, Waratah-Wynyard Council
Director Community Services, Circular Head Council
21 Saunders Street, Wynyard TAS 7325
33 Goldie Street, Smithton TAS 7330
Phone (03) 6443 8333

CONTENTS

INTRODUCTION	4
MAYORAL MESSAGE.....	5
ABOUT THE YPLAN	6
VISION	8
GUIDING PRINCIPLES.....	8
OUR PRIORITIES.....	9
1. Reducing isolation	10
2. Supporting wellness	12
3. Valuing difference	14
4. Reducing socio-economic disadvantage	16
5. Improving access to the basics	18
6. Reducing harms from alcohol, tobacco and other drugs.....	20
7. Building resilience	22
8. Empowering young people	24
YPLAN 2019-2024.....	26
APPENDIX—POLICY AND PLANNING CONTEXT.....	34
REFERENCES	38

INTRODUCTION

Welcome to the 'YPlan', Circular Head and Waratah-Wynyard Councils' Youth Plan 2019-2024.

This plan adopts many of the goals and strategies of the previous Circular Head YPlan 2016-2019, as well as those of the former Waratah-Wynyard Young Persons' Strategy 2011-2013, and it maps them onto the priorities identified in our recently developed joint Community Health and Wellbeing Plan 2019-2024. By aligning the YPlan in this way, we hope to foster even stronger wellbeing for our young people aged between 12 and 24.

The YPlan is five-year roadmap for promoting and improving the physical, mental and social wellbeing of our young people. It is based on the following eight priorities:

1. Reducing isolation
2. Supporting wellness
3. Valuing difference
4. Reducing socio-economic disadvantage
5. Improving access to the basics
6. Reducing harms from alcohol, tobacco and other drugs
7. Building resilience
8. Empowering young people

The integrated nature of the YPlan reflects the ongoing close working relationship between Circular Head and Waratah-Wynyard Councils, and the way in which we set our strategic goals in tandem. While the YPlan is a joint strategy, we will target our actions to meet the needs of our individual communities.

MAYORAL MESSAGE

Local governments play an important role in enabling young people to enjoy good health and wellbeing and to realise their dreams and ambitions. Circular Head and Waratah-Wynyard Councils are working to support our young people by implementing this joint YPlan (Youth Plan) 2019-2024.

This YPlan is a first for Waratah-Wynyard, and it expands upon the original Circular Head YPlan 2016-2019. It is informed by community aspirations (including those of young people), research data and the wisdom of our local community organisations and service providers.

Our vision is that Circular Head and Waratah-Wynyard will be places in which all young people enjoy enhanced wellbeing; are valued for who they are; can access the opportunities, services and supports they need; can share in community decision-making; and are encouraged to fulfill their potential.

Over the coming years, the YPlan will guide our two Councils and our local partners in delivering on this vision. The YPlan will be implemented through annual action plans, and we will use a framework of indicators to track progress towards our objectives.

We would like to thank all who contributed to the YPlan, and we look forward to working to make Circular Head and Waratah-Wynyard places where all young people can thrive



A handwritten signature in black ink that reads "D. H. Quilliam".

Cr Daryl Quilliam

Mayor Circular Head Council



A handwritten signature in black ink that reads "R. H. W. Walsh".

Cr Robby Walsh

Mayor Waratah-Wynyard Council

ABOUT THE YPLAN

This YPlan (Youth Plan) is intended to ensure that Circular Head and Waratah-Wynyard local government areas are places where young people feel included, enjoy optimum wellbeing, and can realise their dreams and ambitions.

The YPlan refreshes and extends Circular Head Council's original YPlan 2016-2019 and incorporates content from Waratah-Wynyard Council's Young Persons' Strategy 2011-2013. It is also closely aligned with the recently developed Circular Head and Waratah-Wynyard Councils' Community Health and Wellbeing Plan.

We see this YPlan as a living document. We look forward to tracking our progress towards our goals, learning from experience, and strengthening the plan over time.

Developing the Plan

Development of this YPlan began with a review of the State and local planning and policy context, and a rapid scan of existing research and consultation findings relating to young people and their experiences and aspirations.

A dedicated program of youth engagement was beyond the scope of this project. However, we drew on a range of community sources to inform our thinking about the needs, experiences and aspirations of young people in Circular Head and Waratah-Wynyard, including:

- Outcomes of consultation with young people aged 12-24 in the development of the original Circular Head YPlan 2016-2019;
- Input provided by Waratah-Wynyard young people during the Live Well Tasmania Young People's Forum, 2017;
- Video interviews with young people living in Wynyard and Yolla, 2008;
- Input from a health and wellbeing planning workshop held in May 2018 with 32 participants drawn from Council staff, community leaders, and local and regional service providers. While working through several health and wellbeing issues, participants identified a range of issues relating to young people. This included naming potential enablers and barriers to achieving positive change;
- Findings from Circular Head and Waratah-Wynyard Councils' Annual Community Survey as well additional community consultation outcomes from internal research; and
- Community input into *Sustainable Murchison 2040*, a joint strategic planning framework for Circular Head, Waratah-Wynyard, West Coast, King Island and Burnie.

Feedback on the Plan

The draft version of this YPlan was exhibited for community feedback between 26 September and 24 October, 2018.

Consultation on the draft YPlan was undertaken alongside consultation on the Councils' draft Community Health and Wellbeing Plan and Age-Friendly Communities Plan. The drafts and the invitation to provide feedback were disseminated through the following channels:

Print media

- The draft plans and the call for community feedback were featured in *The Advocate* newspaper on 29 September and in the *Circular Head Chronicle* on 4 October.

Council website

- A media release about the draft plans and the call for community feedback were posted to both Council websites in the 'Latest News' and 'Have Your Say' sections on 26 September.

Social media

- A notice about the drafts and invitation to provide feedback was posted to the Circular Head Council Facebook page on 1 October, with an additional reminder posted on 22 October.

Hardcopies

- Hardcopies of the draft plans were placed in the Council foyer from 26 September and remained there throughout the feedback period.
- Hardcopies of the draft plans were distributed to the committees of the Service Providers Access Network (SPAN), Circular Head Education and Training Consultative Committee (CHETCC) and the Sport and Recreation Network.

Email

- The plans were circulated by email to all participants of the original Health and Wellbeing Planning Workshop convened during the plans' development; as well as to the Service providers Access Network (SPAN) and the Sport and Recreation Network. A reminder email was sent to these recipients 22 October with links to the plans.

Community members and other stakeholders were invited to provide feedback on the draft plans via letter, telephone, the 'Have Your Say' online facility or email. Circular Head Council Facebook posts about the drafts made on the 1st and 22nd October reached 1,412 and 451 people respectively; and generated 66 and 7 engagements respectively. By close of the consultation period, Council had received seven written submissions on the drafts.

The resultant YPlan is a five-year framework for action informed by community priorities. Annual implementation plans derived from each YPlan will be comprised of actions targeted to the needs and characteristics of individual communities.

VISION

Circular Head and Waratah-Wynyard will be places in which all young people enjoy enhanced wellbeing; are valued for who they are; can access the opportunities, services and supports they need; can share in community decision-making; and are encouraged to fulfill their potential.

GUIDING PRINCIPLES

Inclusivity

Circular Head and Waratah-Wynyard Councils take an inclusive view of wellbeing. We recognise that not everyone in our community shares the same advantages. Our collective wellbeing will be measured by how our most vulnerable young people are faring.

Place-based planning

Our local government areas are comprised of diverse communities, each with particular needs. We recognise that a one-size-fits-all approach to supporting young people is unlikely to succeed. We aim to take actions that are targeted and responsive to local needs.

Collective impact

While we recognise the importance of local government in community supporting young people, we cannot—and should not—try to solve complex social problems on our own. Instead, we see this YPlan as a platform to help us coordinate our efforts with others in pursuit of shared goals.

Understanding dynamics

We recognise that youth wellbeing is a web of interrelated factors. Something that may seem like a cause may have its roots elsewhere. We are committed to gaining insight into complex youth issues so that we can better tackle problems at their source.

Measuring success

We view this YPlan as a living document. We look forward to tracking progress towards our goals, learning from experience, and strengthening this plan over time.

OUR PRIORITIES

The first seven priorities listed below are adapted from the Circular Head and Waratah-Wynyard Community Health and Wellbeing Plan 2019-2024; while the eighth priority, 'Empowering young people,' is specific to the YPlan.

1. Reducing isolation

2. Supporting wellness

3. Valuing difference

4. Reducing socio-economic disadvantage

5. Improving access to the basics

6. Reducing harms from alcohol, drugs and tobacco

7. Building resilience

8. Empowering young people

1. Reducing isolation

What we know

Being socially connected has a positive influence on emotional, psychological and physical wellbeing. Conversely, experiencing social isolation—through living alone, having few social ties or little social engagement—is associated with poorer wellbeing¹. In 2017, **friendships and family relationships** were named among the most valued aspects of life by Tasmanians aged 15-19².

Service providers and community leaders report that isolation is a critical issue for people of all ages in Circular Head and Waratah-Wynyard. There is the perception that young people lack **options for social activities**, especially during school holidays, and that outlying areas in particular lack programs and activities for young people.

When asked what they would keep or create in Circular Head, young people said they would keep ‘the sports culture and sports facilities’ and would create ‘cultural and activity-based innovations such as galleries, festivals and more whole-community activities’³. Waratah-Wynyard youth similarly value the recreation opportunities afforded by natural landscapes but seek more opportunities to participate in **arts and other organised recreation** beyond a skate park^{4,5}.

Civic participation is considered an important measure of youth development in Australia. This participation can take many forms: volunteering, participation in team or groups events, participation in sports, religious or cultural activities. Between 2006 and 2016, Tasmania was the only State or territory to experience a **deterioration in youth civic participation**, with a 12% decline in the proportion of young people who had volunteered for an organisation in the 12 months prior to 2016⁶.

Tasmanian research has found that enhancing youth volunteer participation depends partly

on organisations being ‘youth ready’ and embracing digital platforms, creating meaningful volunteer roles, and effective leadership for young volunteers⁷.

Local service providers and community leaders see **transport disadvantage** as contributing significantly to the social isolation of young people. The Tasmanian Council of Social Services (TasCOSS) defines transport disadvantaged people as those who cannot own or operate a vehicle due to age, disability, ill health or financial constraints⁸.

In 2016, 35% of Circular Head residents and 62% of Waratah-Wynyard residents agreed that public transport was adequate to meet their needs^{9,10}. When Tasmanian children and young people were asked to name what was not working well for them and for other young people in their community, ‘Transport’ received the second highest number of responses. Respondents expressed a wish for increased transport options, particularly for those living in rural and remote areas¹¹. Young people in Waratah-Wynyard have said that improved public transport connections would enable them to access the services and activities they seek¹².

The internet can also provide opportunities for enhanced social connectivity and access to information. Service providers and community leaders have highlighted the importance of **digital literacy and access to the digital world** in Circular Head and Waratah-Wynyard. In 2016, the proportion of Circular Head and Waratah-Wynyard households with an internet connection was lower than the Tasmanian and Australian average, with 701 households in Circular Head and 1,275 households in Waratah-Wynyard reporting no internet connection¹³. When asked what they would create in Circular Head, the young people who contributed to the original YPlan said ‘access to free WiFi around the township’¹⁴.

What we will do



2. Supporting wellness

What we know

The Youth Development Index is a composite measure across the domains of education, health and wellbeing, employment and opportunity, political participation and civic participation. Tasmania ranked second to last in 2015 overall, and it was the only State or territory whose overall YDI had declined since 2006. This decline was driven by a large **decrease in youth health and wellbeing**¹⁵.

The main driver of this deterioration was a 62% increase in the rate of chlamydial infection¹⁶. **Sexually transmitted infections** are becoming more prevalent in Australia, with young people among those at highest risk. Australia-wide, around 70% of people aged 16 to 29 are sexually active. Sexual health includes not only STI prevention but a **positive and respectful approach to sexuality** and sexual relationships free of coercion, discrimination and violence¹⁷.

Physical activity is important to people of all ages. In 2016, an estimated 19.3% of Circular Head adults did not meet the guidelines for moderate/vigorous activity, and 84.6% did not meet the guidelines for muscle strengthening activity. In Waratah-Wynyard, an estimated 20.6% of residents did not meet the guidelines for moderate/vigorous activity, with 74.0% failing to meet the guidelines for muscle strengthening¹⁸.

Mental illness is one of the biggest health risk factors for Australian young people aged between 15 and 29 years¹⁹. Tasmanians of all ages showed a marked **increase in the prevalence of depression and anxiety** between 2009 and 2016. Compared to the total population, significantly more psychological distress was reported by young people aged 18 to 24 years. The north west adult population saw a significant increase in depression/anxiety during this period, from 20.0% to 29.4% between 2009-2016.²⁰

Local service providers and community stakeholders have identified a lack of youth mental health services, especially in relation to crisis situations.

In a nationwide survey of young people aged 15-19 in 2016²¹, nearly **one in four respondents** met the criteria for having a probable serious mental illness, and this measure has risen over the previous five years. The top three issues of concern for these young people were **coping with stress, school or study problems and depression**. Females were around twice as likely as males to meet the criteria for having a probable serious mental illness.

In Tasmania, the majority (59.2%) of Kids Help Line calls in 2016 were related to mental health and emotional wellbeing. A majority of callers were female and were aged between 13-18. Between 2011-2015, Tasmania had a higher rate of deaths of children and young people due to intentional self-harm than nationally²². There is lack of information about young people's access to mental health services in Tasmania, as well as information on parental mental health issues or psychological distress, despite this being a risk factor for young people²³.

In 2017, Tasmanians aged 15-19 named **mental health as one of the top three barriers** preventing them from achieving their goals after finishing school. More than four in ten respondents from Tasmania reported that they were 'extremely' or 'very' concerned about coping with stress, and nearly a quarter of respondents reported feeling 'extremely' or 'very' concerned about depression²⁴. Young people with a probable serious mental illness have said that **friends, parents and the internet** are the top three sources they are likely to go to for help with important issues in their lives²⁵.

What we will do



3. Valuing difference

What we know

Diversity is front-of-mind for Tasmanian youth. When asked in 2017 to identify the three issues they considered most important in Australia, more than one quarter (27.6%) of Tasmanian young people identified ‘equity and discrimination’, and 6.7% named LGBTIQ issues²⁶.

In a separate survey, a majority of Tasmanian children and young people named ‘Equality and respect’ as the factor that made a good society for children and young people. Respondents said they [children and young people] **wanted to be treated with the same respect** as adults²⁷. Young people in Waratah-Wynyard have commented that perceptions that all young people are destructive or ‘rebellious’ are inaccurate, and more could be done to value young people’s contributions²⁸.

Local service providers and community leaders similarly noted that the contributions of young people can be undervalued and underutilised. They also underscored the **importance of diversity in tailoring services**. They report that diversity can add to the challenges in connecting with hard-to-reach or disengaged individuals.

Disability can result from accidents, illness or genetic disorders, and may affect a wide range of dimensions of a person’s life, including mobility, communication, learning and education, income, social activities and workforce participation. In 2016, a total of 60 young people aged 10 to 19 in the combined Circular Head and Waratah-Wynyard areas reported needing assistance with core activities²⁹. Local service providers and community leaders have flagged that public

spaces in both Circular Head and Waratah-Wynyard are not always accessible to those with mobility issues.

Lesbian, Gay, Bisexual, Transgendered and Intersex (LGBTI) Australians experience worse mental health outcomes and have higher risk of suicidal behaviours than their peers due to experiences of stigma, prejudice, discrimination and abuse, as well as a lack of specialised and accepting health services³⁰. Trans and gender diverse people tend to have a worse health status than the general population as well as others in the LGBTI cohort³¹.

The total youth LGBTI population of Circular Head and Waratah-Wynyard is unknown due to a lack of data. However, it is estimated that people of diverse sexual orientation, sex or gender identity may account for up to 11% of the general population³².

Australia-wide, there is a large developmental gap for **young Indigenous people**, including a higher suicide rate than non-Indigenous youth³³. Circular Head and Waratah-Wynyard is home to a relatively high proportion of people who identify as Indigenous, making up 15.7% and 7.6% of the population respectively

Consistent with the Australian average, the Aboriginal and/or Torres Strait Islander population in Circular Head and Waratah-Wynyard has a younger age profile, with a median age of 22 years and 24 years respectively³⁴. Aboriginal children and young people in Tasmania have reported a desire for more respect for their culture and history, and the sharing of positive stories about Tasmanian Aboriginal people³⁵.

What we will do



4. Reducing socio-economic disadvantage

What we know

In 2016, Circular Head local government area had a SEIFA score of 940, while Waratah-Wynyard had a score of 925, both indicating **higher levels of disadvantage** than the national average³⁶. Local service providers and community leaders associate poverty and social inequity with intergenerational patterns of under- or unemployment, and with **low capacity for employment** due to low levels of literacy, numeracy, digital literacy and access to the digital world. When surveyed by Council in 2016, only 14% of Circular Head residents and 10% of Waratah-Wynyard residents agreed there were enough jobs available in the local area^{37,38}.

Tasmanian young people score poorly on development scores relating to employment and opportunity³⁹. However, when asked in 2017 to state how much they valued aspects of life such as financial security, getting a job, and school/study satisfaction, around seven in ten Tasmanian young people aged 15-19 said **school/study satisfaction was 'very' or 'extremely' important**. At the same time, school or study problems were named as major concerns for nearly one third of Tasmanian young people. Around four in ten Tasmanian young people **placed a high value on financial security and getting a job**⁴⁰.

When asked what they would create in Circular Head, the young people said they would create 'opportunities for young people, primarily in the area of jobs and youth-run enterprise'⁴¹. Participants felt there was an opportunity for Circular Head to **become a community with opportunity** and potential for young people to be able to choose to stay or return; not just in search of jobs created by others, but also with the skills and attitudes to create their own jobs⁴². Some young people from Waratah-Wynyard reported that they expected to need to move away from the

region in order to pursue their chosen career⁴³.

Being a young person from a low SES area can **affect experiences and perceptions**. For example, the top three most important issues for young Australians in 2016 across all SES groups were alcohol and drugs, equity and discrimination, and mental health. However, young Australians from low SES areas were more likely to identify **personal safety, bullying/emotional abuse, suicide and family conflict** as issues of personal concern. Young Australians from low SES areas also reported feeling less safe in public spaces, had lower levels of community trust, and were the least likely to have participated in a range of activities⁴⁴.

Problem gambling is a significant public health issue. Problem gambling occurs more often in people aged between 18 and 30 than in other age groups, with poker machines the most common type, and sports betting also on the increase in this age group⁴⁵. In 2016-17, 4% of clients accessing Gambling Help Online and Gambling Helpline Tasmania Services were aged 0-20 years⁴⁶.

Across Australia, rural youth **have a lower participation rate** in education, employment or training than their urban counterparts⁴⁷. In 2016, both Circular Head and Waratah-Wynyard had a lower educational profile than both Tasmania and Australia, with significantly fewer people attaining a bachelor degree and above.⁴⁸

When Tasmanian children and young people were asked in 2016 to name what was not working well for them and for other young people in their community, **'Education and Opportunities'** received the highest number of responses. Respondents said they wanted their education to be relevant, useful and practical and to give them the best preparation for gaining employment⁴⁹.

What we will do



5. Improving access to the basics

What we know

Consistent with the data on socio-economic disadvantage (above), stakeholder consultation has **emphasised the importance of the basics**—good quality housing, food security and a healthy environment—to the wellbeing of people of all ages. Housing quality and security of tenure have been highlighted as particular priorities for Circular Head.

The **‘material basics’ have been named as a key domain** of the *Tasmanian Child and Youth Wellbeing Framework*⁵⁰. This is defined as having access to: educational or training materials; healthy food in sufficient quantities, including increasing need for nutrients such as calcium and iron; appropriate housing and adequate heating/cooling; and access to adequate clothing and footwear.

When surveyed by Council in 2016, 70% of residents in Circular Head⁵¹ and 74% of residents in Waratah-Wynyard⁵² agreed there was good housing choice and availability in their local government area. However, the rental vacancy rate has declined in the north west since 2017, indicating more competition for tenants in securing lease. Falling vacancy rates typically put **upward pressure on rents**, which has a disproportionate effect on people on low or fixed incomes⁵³.

Anglicare’s rental ‘Snapshot’ study found a 45% drop in advertised rental properties in the north west between 2017 and 2018, with no available properties advertised on the 2018 Snapshot weekend that would be affordable for a young person on Youth Allowance⁵⁴.

1,622 people in Tasmania were **homeless** in 2016, with 20% of these people in the north west. Young people aged 12 to 24 comprised one quarter of all Tasmanian people experiencing homelessness. Aboriginal and Torres Strait Islander people were overrepresented in all sections of the Tasmanian homeless population⁵⁵.

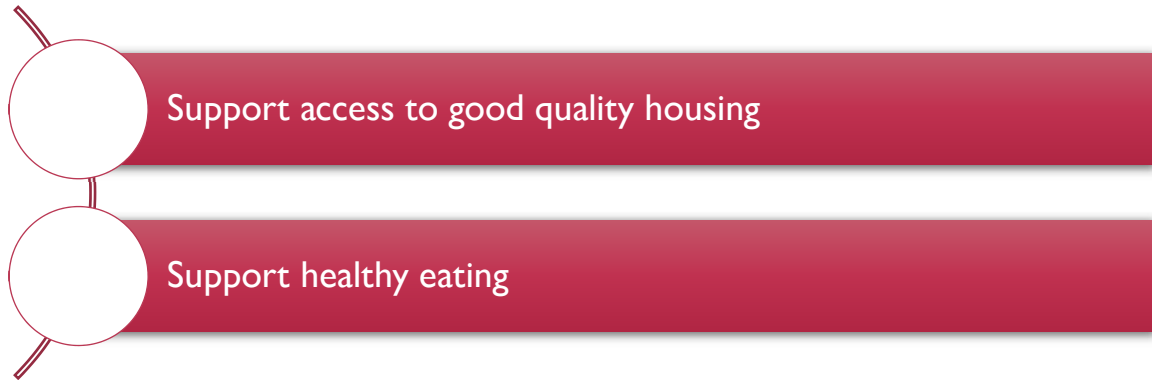
As Tasmanian children get older, the percentage of those who meet the recommended daily number of serves of fruit and vegetables decreases⁵⁶.

According to healthy eating guidelines, Circular Head and Waratah-Wynyard residents aged 18 and over are **eating insufficient fruit and vegetables**. In 2016, 71.2% of adult Circular Head residents did not meet the guidelines for fruit consumption, and 93.9% did not meet the guidelines for vegetable consumption. In Waratah-Wynyard, 67.2% of residents did not meet the guidelines for fruit consumption, and 90.6% did not meet the guidelines for vegetable consumption⁵⁷.

Compared to the Tasmanian average, Circular Head and Waratah-Wynyard residents **paid more for a standard basket of healthy foods** when utilising a minor supermarket or general/convenience shop in 2014⁵⁸.

The prevalence of **running out of food** and being unable to purchase more increased across all socio-economic quintiles in Tasmania in 2009-2016. In the north west region in 2016, more than one in twenty (6.4%) of people reported that sometime in the past 12 months they had run out of food and had been unable to afford to buy more⁵⁹.

What we will do



6. Reducing harms from alcohol, tobacco and other drugs

What we know

Harms from alcohol and illicit drugs are among the **biggest health risk factors** facing young Australians aged 15 to 29 years⁶⁰. Service providers and community leaders in Circular Head and Waratah-Wynyard have identified underage drinking and drugs and the drinking culture as key issues for the region.

When asked in 2017 to identify the three issues they considered most important in Australia, nearly one third (29.8%) of Tasmanian young people nominated 'alcohol and drugs'⁶¹. Nationwide, a greater proportion of respondents from regional areas (36.9%) than urban areas identified alcohol and drugs as an issue of concern⁶².

Alcohol consumption can cause harms to the individual drinker, their family and the wider community. There is no safe level for drinking alcohol. The lifetime risk guideline for alcohol consumption by healthy adults aged 18 and over specifies no more than two drinks on any given day. For single occasion harm, this level is no more than four drinks.

In 2016, 29.2% of Circular Head residents aged 18 years and over drank alcohol to risk levels for lifetime harm, with 48.7% drinking to risk levels for single occasion harm; while 18.2% of Waratah-Wynyard residents drank alcohol to risk levels for lifetime harm, with 33.3% drinking to risk levels for single occasion harm⁶³.

Smoking causes more disease and injury in Australia than any other single risk factor. In

2004-05, smoking caused 14 times as many deaths as alcohol, and 17 times the number of deaths due to illicit drug use⁶⁴. Smoking prevalence is significant in the Circular Head local government area. In 2016, nearly one-third (29.3%) of Circular Head residents aged 18 years and over were current smokers (daily and occasional combined), with nearly one-quarter (24.2%) estimated to be daily smokers. Smoking rates in Waratah-Wynyard were lower, with an estimated 9.0% of adults being current smokers (daily and occasional combined) and 8.1% daily smokers⁶⁵.

Illicit drug use is associated with a range of short- and long-term physical and psychological harms to the user, as well as a range of social and relational harms. Drug dependency can also cause severe financial distress.

National wastewater monitoring data from 2017 names methylamphetamine (one form of which is known as 'ice') as the most commonly used illicit drug in regional Tasmania.⁶⁶ However, data collection limitations mean these findings should be treated with caution. Research from the Illicit Drug Reporting System (IDRS) found **cannabis was the most frequently used illicit substance** across regional Tasmania in the same time period⁶⁷.

When asked what they would change in Circular Head, the young people who contributed to the original YPlan said they would change the 'culture of drug use within the community'⁶⁸.

What we will do



7. Building resilience

What we know

‘Resilience’ has been defined as **the capacity to cope, learn and thrive** in the face of change, challenge and adversity. Young people with higher levels of resilience are more likely to do well in their education and to suffer fewer social and psychological health problems⁶⁹.

Research commissioned by the Victorian Government has shown that **schools can build resilience** by providing supportive learning environments, promoting positive teacher-student and peer relationships, providing emotional skills programs, providing tailored support for higher-needs individuals, and involving families and students in decision-making⁷⁰.

Resilience can also be built outside of school environments. Local service providers and community leaders have reported that one of the most pressing issues in Circular Head and Waratah-Wynyard is ensuring that every person (including every young person) has at least **one positive and responsive adult** in their lives. This recognises the critical role of the social networks in which we live, and that no individual can thrive without the care and affirmation of another. When asked to say what they liked about their lives in Waratah-Wynyard, young people described it as a friendly and supportive place to live⁷¹.

Feeling safe and secure is a key issue for young people. When Tasmanian children and young people were asked in 2016 to name what was not working well for them and for other young people in their community, **‘Safety, bullying, crime and violence’** was among the top-four responses. Respondents said they wanted to feel safe at home, at

school and in public⁷². Young people who contributed to the original Circular Head YPlan stated it was important to retain Circular Head’s strong sense of community and safety⁷³. Young people in Waratah-Wynyard have noted that spaces for teenagers (e.g. skate parks) do not always feel like safe spaces for younger children⁷⁴.

Exposure to family violence can have a detrimental effect on children’s mental and physical wellbeing, and these effects can impact behavior as well as school outcomes. In 2016, Tasmania Police recorded 453 juveniles present at family violence incidents in the Western district, which includes Circular Head and Waratah-Wynyard. Tasmanian children and young people coping with family violence have emphasised their need to be listened to and actively involved in decision-making and finding solutions to their challenges⁷⁵.

Local service providers and community leaders have reported that there are **not enough foster carers** for children and young people in the region. Tasmania is home to a cohort of highly vulnerable teenagers who are not in the Out of Home Care system. Many of these teens have experienced violence, abandonment and abuse at home, and go on to experience continued adversity and trauma in adolescence. This adversity severely impacts their ability to survive independently and to avoid future disadvantage⁷⁶.

Local service providers and community leaders also highlighted low levels of **emotional competency** among some young people. Improving emotional intelligence and healthy communication skills for young people were seen as key enablers of positive change in this domain.

What we will do



8. Empowering young people

What we know

In addition to voting in elections, non-electoral political participation—**feeling empowered to participate in public decision-making**—is considered an important measure of youth development in Australia. Between 2006 and 2016, Tasmania's Youth Development Index measure for political participation increased by 69%, due mainly to an increase in the proportion of youth sitting on Student Representative Councils⁷⁷.

In 2017, 7.2% of young Tasmanians surveyed reported being involved with political groups or organisations, and 49.5% reported being involved in student leadership activities. A greater proportion of females than males participated in student leadership activities⁷⁸.

The Tasmanian Government acknowledges that **young people have much to contribute to governmental decision-making**. Benefits of effective engagement include: helping young people to understand the democratic process; developing young people's skills and confidence in engaging with institutions; sharing skills, experiences and knowledge; improving social connectedness, wellbeing and belonging in the community; providing government and organisations with access to the ideas and skills of young people; and developing a clearer understanding of each other's priorities, needs and expectations⁷⁹.

Research by the Commissioner for Children and Young People in 2016 found that young Tasmanians aged 11 to 17 highly valued having opportunities to **share their opinions and influence adults' decisions**. The study found that young Tasmanians wish to have more of a say about the decisions that affect

their lives. These young people expect adults to not just listen to them, but also to take action on their behalf. When asked about the best ways for adults to listen to young people, most respondents said there should be more events/activities organised by young people, followed by more adults in support roles, and the establishment of student representative councils in all schools⁸⁰.

Young people feel engaged when they enjoy a **strong sense of agency and are empowered** to make their own decisions about their education, employment and health. On the flipside, 'being told what to do' and having few options for decision-making is associated with disengagement⁸¹.

A series Australia-wide workshops found that government **decision-makers and young people see engagement differently**. To policy makers, youth engagement is about including diverse voices and influencing/improving decision-making. While young people agreed with this view, they also viewed engagement as an expression of respect and the intent to address unequal power relations⁸².

Facilitating youth empowerment and participation is not only valuable for young people—it is also **valuable for the wider Circular Head and Waratah-Wynyard community**. Young Australian adults aged 18-29 display a strong track record in volunteerism and activism, have a higher rate of early-stage entrepreneurial behaviour, are more digitally networked and have higher literacy and education rates than their older counterparts⁸³. Empowering young people and enabling these strengths and skills to flourish is likely to confer benefits on the broader population.

What we will do



YPLAN 2019-2024

Note: Potential partners for co-delivering these actions will be identified as annual implementation plans are developed.

Priority	Objectives	Actions	Indicator	Baseline
1. Reducing isolation	Increase opportunities for youth social and recreational participation	Ensure that young people's requirements are factored into Council's social, cultural, recreation and strategic land-use planning.	No. of Council strategies that account for youth-specific social and recreational participation.	None evident in 2018
		Within strategic land-use and recreational planning, prioritise the creation of youth-focused accessible public spaces and recreational facilities and spaces.		
		Explore options for supporting the operations of youth-focused service providers by subsidising their overhead costs (e.g. hydro, insurance)		
	Enhance the digital and geographic connectedness of young people	Support existing initiatives by community providers (e.g. Libraries Tasmania) to enhance young people's digital literacy.	No. of free publicly-accessible WiFi locations in NW townships listed by Tasmanian Govt (freewifi.tas.gov.au)	Total listed = 6 – Wynyard: 2 (incl. Libraries Tasmania) – Somerset: 1 – Waratah: 1 – Smithton: 1 (Libraries Tasmania) – Stanley: 1
		Advocate for increased provision of free WiFi in facilities, parks, shopping areas and other public spaces across Circular Head and Waratah-Wynyard areas; and promote young people's awareness of existing free WiFi locations such as libraries.		
		Engage with young people to identify their transport needs and related issues.	% of residents who report that public transport is adequate to meet their needs (Council survey).	35% CHC in 2016 62% WWC in 2016
		Advocate to the Tasmanian Government and other providers for enhanced public transport options for young people.		
		Continue to support local driver mentoring programs to assist young people to gain their probationary drivers licence.		
	Support youth participation in arts and cultural activities	Work in partnership with community organisations and local service providers to increase the availability of, and young people's access to, social and cultural activities and programs.	No. of youth-focused arts/culture programs and activities supported by, or promoted, by Council.	CHC: Art About Town Youth Art/ Photography competitions, Smithton 7UP arts programming. WWC: Smith Family, Big hART, Guides Australia, Wynyard 7UP, Tasmanian Youth Week. Securing grants, e.g. from TMAG and Arts Tasmania.
		Promote arts and cultural production opportunities for young people in conjunction with schools, libraries, museums, galleries and arts organisations.		

Priority	Objectives	Actions	Indicator	Baseline
2. Supporting wellness	Support young people's mental health and wellbeing	Publicise and promote existing youth-focused mental health supports, including remote/online support services.	% of residents with anxiety/depression (DHHS Pop. Health Survey)	29.4% NW region in 2016
		Work with local service providers (including schools) to promote and facilitate access to youth-appropriate preventative and early intervention mental health initiatives.	% of residents reporting high/very high psychological distress (DHHS Pop. Health Survey)	11.7% NW region in 2016
		Take a 'no wrong door' approach and provide a referral process to participants in Council's youth programs who are seeking mental health supports.	No. of young people (Yrs 9 & 10) participating each year in Mental Health First Aid Training (Council data).	CHC N/A; WWC all Yr 9 students at Wynyard High in 2018
		Advocate for more youth mental health services and youth focused counsellors in the local area and confirm local delivery/outreach is occurring.		
		Investigate options for supporting students to maintain good mental health when transitioning to post-secondary education, e.g. mentoring, pathways information, life skills instruction, etc.		
		Assist people in the community (including young people) to recognise mental health risks and to know how to respond to mental illness in themselves and others.		
	Support young people's physical health and wellbeing	Provide a range of accessible and affordable recreational facilities and programs (both structured and unstructured) for young people, and address potential barriers to participation.	% people not meeting the guidelines for moderate/physical activity (DHHS Pop. Health Survey)	19.3% Circular Head; 20.6% Waratah-Wynyard in 2016
		Ensure youth perspectives are included in Council's recreation planning and service delivery.	% people not meeting the guidelines for muscle strengthening (DHHS Pop. Health Survey)	84.6% in Circular Head; 74.0% Waratah-Wynyard in 2016
		In partnership with local organisations and service providers, explore options for providing low-cost, high participation sports and physical recreation activities for young people.		
	Support young people's sexual health and wellbeing	Support Family Planning and/or advocate for agencies to provide sexual health checks and sexual health information to young people in CHC and WWC.	Notification rates (per 100,000) of chlamydial infections in the NW region, (DHHS Notifications data).	340 in 2016

Priority	Objectives	Actions	Indicator	Baseline
3. Valuing difference	Enhance inclusivity for young people	Promote a positive image of young people; champion and raise awareness of young people's positive contributions to society.	No. of Council activities annually that champion and raise awareness of young people and their positive contributions (Council data)	CHC: Australia Day Young Citizen of the year, CHYL has an Emerging Leader Award at each High School, Circular Head Youth Facebook page recognises young people doing great things in our community; WWC: Australia Day award for Young Citizen of the Year.
		Work with young people to develop an annual youth festival during National Youth Week to celebrate young people's contributions.		
	Enhance gender inclusivity	Work in partnership with diverse local stakeholders to challenge stereotypical views and to challenge violence against girls and young women.	No. of family violence incidents in the Western district of Tasmania (Tasmanian Police data)	589 in the year to February 2018.
	Enhance inclusivity for LGBTI youth	Work in partnership with local service providers and youth leadership to improve the range of LGBTI-positive youth programs, activities and services in the community.	No. of people/organisations served through Council-hosted LGBTI training (Council data)	None in 2018.
		Promote and host LGBTI training opportunities for service providers and highlight the organisational benefits of participation.		
	Enhance inclusivity for young Indigenous and CALD people	Continue to work in partnership with local service providers and youth leadership to provide a range of culturally appropriate services and supports for Aboriginal and CALD (culturally and linguistically diverse) community members.	No. of people/organisations served through Council-hosted cultural diversity training (Council data)	None in 2018.
		Promote and host cultural diversity training opportunities for service providers and highlight the organisational benefits of participation.	Presence of Aboriginal flag outside Council buildings (Council data).	In 2018, only displayed during NAIDOC week.
		Celebrate Aboriginal heritage by formally recognising Aboriginal custodianship within Council documents, by flying the Aboriginal flag on Council buildings, and by formally acknowledging country at all official events.		
	Enhance inclusivity for young people with a disability	Ensure Council events, festivals, programs and facilities are accessible to young people with physical, psychological, intellectual and sensory disabilities.	% of Council events, programs, festivals and facilities deemed accessible to people with disabilities (Council data)	0 in 2018
		Assist local businesses to achieve high standards of disability accessibility through advocacy and information provision.		

Priority	Objectives	Actions	Indicator	Baseline
4. Reducing socio-economic disadvantage	Improve the capacity and socio-economic wellbeing of young people	Support programs already working to improve the capacity of young people facing multiple barriers to employment, including literacy and numeracy programs.	No. of people aged 15-24 who are disengaged from employment and education (ABS data)	13.6% in Circular Head; 12.8% in Waratah-Wynyard in 2016.
		Establish a buddy/mentor 'register' to connect skilled volunteers with young job-seekers requiring extra help with job-readiness (e.g. resume-writing, interviews, confidence-building).	No. of adults (post-school-age) receiving regular one-to-one literacy support at Smithton and Wynyard libraries (Libraries Tasmania data)	42 in Smithton; 9 in Wynyard in 2018
		Explore ways to promote youth-led enterprise (e.g. dedicated or 'pop-up' spaces, training, activities, mentorship guest speakers).		
		Support public education campaigns working to combat problem gambling via education and awareness-raising.		
	Boost local education and employment opportunities	Ensure young people's education and employment aspirations are reflected in Council's economic development activities.	Youth unemployment rate (ABS data).	8.9% in Circular Head; 13.8% in Waratah-Wynyard in 2016.
		Work in partnership with industry and business organisations and regional bodies to identify emerging employment trends and opportunities for young people in the NW.		
		Create and promote work experience and traineeship/cadetship opportunities for young people across diverse areas of Council employment.		
		Investigate the possibility of Council staff members serving as referees/character references for young job seekers.		
	Strengthen local education and employment pathways	Support education providers, local agencies and industry networks to closely align training and industry trends/demand.	Year 12 completion rates for people aged 15 years and over (ABS data).	22.6% in Circular Head; 26.7% Waratah-Wynyard in 2016
		Support schools to encourage Year 12 completion.		
		Support local employers to provide vocational 'tasters', pathways information, connections, vocational assessments and experiences to assist young people to identify career options.		

Priority	Objectives	Actions	Indicator	Baseline
5. Improving access to the basics	Support access to good quality housing	Support existing and future initiatives by other agencies to ensure property owners/managers are aware of, and complying with, guidelines for rental property amenity, and are not discriminating against tenants based on age.	No. of available properties in the NW identified during Anglicare's 'Snapshot' weekend deemed affordable for a young person on Youth Allowance (Anglicare).	0 in 2018.
		Promote young people's awareness of renters' rights and tenancy law, and the process of applying for rental housing.		
		Improve Council's understanding of the housing needs of young people in the community so it can respond to changes in supply/demand.		
		In conjunction with Youth Homelessness Day, raise Council and community awareness of the nature and complexity of youth homelessness.		
		Advocate for youth-focused crisis accommodation options in the region.		
		Seek opportunities to refer young people who are homeless or at risk of homelessness to appropriate services and supports such as Housing Connect.		
		Investigate the feasibility of converting Council-owned dwellings to transitional housing for young people.		
	Support healthy eating	Actively contribute to existing regional healthy eating initiatives and awareness-raising activities.	% people not consuming the recommended quantity of vegetables (DHHS Pop. Health Survey)	93.9% CHC in 2016 90.6% WWC in 2016
		Encourage businesses and other agencies serving food to young people (including clubs and schools) to provide healthy food options to their customers; and continue to provide attendees of 7UP centres with health food options.	% people not consuming the recommended quantity of fruit (DHHS Pop. Health Survey)	71.2% CHC in 2016 67.2% WWC in 2016
		Ensure all Council-run events are catered for with healthy foods, including minimal sugars and trans fats, e.g. by implementing a Healthy Catering Policy or No Soft Drink Policy	No. of high schools with 'Gold Star' rated canteens, as awarded by the Tasmanian School Canteen Association (Council data).	None in CHC; 2 in WWC in 2018.

Priority	Objectives	Actions	Indicator	Baseline
6. Reducing harms from alcohol, tobacco and other drugs	Enhance young people's ability to make safer and healthier choices around alcohol, tobacco and other drugs	Encourage local youth service providers to provide access to Quit Tasmania resources and materials.	% of current smokers (daily and occasional combined) (DHHS Pop. Health Survey)	29.3% CHC in 2016 9.0% WWC in 2016
		Encourage secondary schools to implement measures to dissuade young people from taking up smoking and help them to quit.	% of people drinking to single occasion harm (DHHS Pop. Health Survey)	48.7% CHC in 2016 33.3% WWC in 2016
		Promote youth-focused alcohol and drug harm reduction programs hosted by service providers and other third parties.		
		In partnership with schools and other youth organisations, facilitate and encourage harm minimisation information sharing and education.		
	Combat cultures of alcohol, tobacco and other drug use	Hold and promote events for young people that are drug- and alcohol-free and/or that promote safe consumption of alcohol.	% of people drinking to lifetime harm (DHHS Pop. Health Survey)	29.2% CHC in 2016 18.2% WWC in 2016
		Encourage local education providers to incorporate education and awareness-raising around the harms of alcohol, tobacco and other drugs.	No. of organisations currently renting Council facilities who are on the Good Sports register (Council data).	11 in CHC; Unknown WWC in 2018.
		Encourage local facilities with high youth participation to adopt voluntary harm minimisation codes around alcohol and drugs, e.g. the Good Sports program		
		Make Good Sports accreditation a condition of hiring Council premises.		
		Encourage Good Sports and other harm reduction educators to conduct community outreach and build accountability amongst organisations.		
	Improve local access to specialist services and supports	Advocate for increased drug and alcohol addiction treatment and rehabilitation options for young people in the region.	No. of alcohol rehabilitation places/beds in the NW (Community data).	17 Total in 2018 – 5 at Serenity House, Burnie – 12 at Salvation Army, Ulverstone At time of writing, Serenity House had been funded to increase the total beds by another 5.

Priority	Objectives	Actions	Indicator	Baseline
7. Building resilience	Help young people to develop emotional intelligence	Encourage local primary and secondary schools to implement emotional intelligence teaching.	No. of schools in which teachers have completed RULER training (RULER Health Tasmania data).	3 in CHC; 2 in WWC in 2018
		Support programs outside the school system (e.g. parent info sessions) that assist young people to build emotional intelligence and active engagement.		
	Help young people to have access to a safe, secure family life	Promote and publicise existing supports available for young people living with/exposed to family violence.	No. of young people present at family violence incidents in the Western police district (Tasmania Police data).	453 in 2016
		Encourage collaborative and awareness-raising initiatives that prevent or reduce family violence.		
		Encourage and work with education providers to deliver parent/carer information sessions to encourage positive relationships between parents/carers and young people.		
		Work in partnership to grow the number of available Out of Home Care places available in the region.		
		Seek opportunities to support service providers to deliver assertive outreach support services to at-risk young people.		
	Encourage and create opportunities for young people to excel	Promote and celebrate the successes of high-achieving young people in CHC and WWC, including within the education, community, arts/culture, sports and business/employment sectors, including through the Young Achiever Awards.	No. of Council activities in which the successes of high-achieving young people are promoted and celebrated.	CHC: Mayor's Education Fund Scholarship, Celebration of Education; WWC: Bill French Tertiary Education Scholarship.
		Work in partnership with the business sector to develop and promote local opportunities for young people to engage in innovation and entrepreneurship.		
		Continue to support youth innovation and entrepreneurship through Council's economic development activities.		

Priority	Objectives	Actions	Indicator	Baseline
8. Empowering young people	Support young people's decision-making	Provide a range of accessible/plain English youth-specific information via a range of appropriate communication strategies, including (but not limited to) a youth services section of the Council website and social media.	Evidence of a youth-themed section of CHC and WWC websites	CHC youth info page; WWC page for children and youth services due for renewal as of 2019.
	Ensure Council understands, and acts on, the needs and aspirations of young people	Advocate for the needs and aspirations of young people to all levels of government as well as the education and community sectors.	Evidence of a youth engagement policy, or of a youth focus within Council's engagement policy.	No policies in 2018
		Incorporate principles of best practice in youth engagement in Council community engagement.		
		Regularly update Councillors, Council Officers and partner agencies about youth policy and research trends.		
		Support the input of diverse spectrum of young people into the design of Council youth activities and programs.		
		Actively seek the input of young people in the creation of Council plans and strategies, including future iterations of this YPlan.		
	Support youth leadership opportunities	Reinstate the Circular Head Youth Network and initiate a Waratah-Wynyard Youth Network.	Evidence of a functioning Circular Head Youth Network and Waratah-Wynyard Youth Network	Neither operating in 2018.
		Explore opportunities to develop the leadership capacity of young people, in which 'leadership' includes a variety of forms such as peer mentoring and coaching.		
		Explore opportunities to subsidise local youth leadership training.		
		Encourage young people to access opportunities for consultation and leadership through the Youth Network of Tasmania (YNOT), including participation in the Tasmanian Youth Forum.		
	Enable participation in youth programs and activities	Encourage the organisers of youth programs and activities to embrace a culture of inclusion—saying 'yes' to everyone who wishes to participate.	Participation rates in Council-led youth activities and programs.	WWC: School holiday program, leaders program and Try Skills program all well supported; CHC: School holiday program reasonably well supported; CHYL very well supported; I AM and Work Inspirations programs well supported.
		Explore IT and mobile-based options for making Council's activities for young people more accessible and open to spontaneous participation.		
		Engage young people in evaluating Council's youth services and activities against the principles of youth-focused delivery to ensure continuous improvement.		

APPENDIX—POLICY AND PLANNING CONTEXT

State policy and planning context

Tasmanian Child and Youth Wellbeing Framework

The *Tasmanian Child and Youth Wellbeing Framework*⁸⁴ recognises that wellbeing is a complex and multi-dimensional concept that encompasses physical, social and psychological aspects. It notes that when a child or young person has a strong sense of wellbeing, they will be more resilient, more confident, able to enjoy positive social interactions, and able to learn better.

The Framework provides the following definition of child and youth wellbeing: ‘Wellbeing refers to a state where a child or young person feels loved and safe; has access to material basics; has their physical, mental and emotional health needs met; is learning and participating; and has a positive sense of culture and identity.’

The Framework sets out six domains of wellbeing for children and young people, as well as a range of developmental indicators for each age group. The domains and their indicators for young people aged 13 and over are as follows:

Domain	Developmental Indicator
Being loved and safe	<ul style="list-style-type: none"> • Young person feels safe in their home and community environment • Although conflict with family may be more likely, this does not turn into violence or aggression • Young person has a growing level of independence from caregivers • Young person is able to identify at least one person who they can rely on for support and assistance • Young person has access to a safe, stable and nurturing environment • Young person is provided opportunities to raise concerns and have their concerns addressed
Having material basics	<ul style="list-style-type: none"> • Young person has access to educational or training materials • Young person has access to healthy food in sufficient quantities, including increasing need for nutrients such as calcium and iron • Young person has access to appropriate housing and adequate heating/cooling • Young person has access to adequate clothing and footwear
Being healthy	<ul style="list-style-type: none"> • Young person is a healthy weight for their age and height • Young person is physical and socially active • Young person is emotionally and mentally well, happy and supported • Young person is able to access health services, including oral health services, when needed and is supported to do so • Young person is fully immunised • Young person avoids smoking or engaging in risky alcohol/drug use; or is supported to give up smoking or risky alcohol/drug use
Learning	<ul style="list-style-type: none"> • Young person is receiving an education • If attending school, the young person attends regularly, with minimal unexplained absences • Young person is developing age-appropriate language and literacy • Young person demonstrates positive and ethical behaviour
Participating	<ul style="list-style-type: none"> • Young person is able to engage in organised activities, including sport • Young person is able to satisfy emotional or social needs outside of family group (e.g. by spending time with peers) • Young person is permitted and encouraged to engage with their community

Domain	Developmental Indicator
	<ul style="list-style-type: none"> • Young person is provided with opportunities to meaningfully participate in decisions • Young person is encouraged to have a voice
Having a positive sense of culture and identity	<ul style="list-style-type: none"> • Young person's sense of personal identity is supported • Young person is supported to understand their family history • Young person is supported to satisfy any interest in their identity or culture • Young person's environment, including educational environment, is culturally appropriate • Young person's environment is free from bullying or victimisation

Youth at Risk Strategy

The aims of the State Government's *Youth at Risk Strategy*⁸⁵ are to provide the Tasmanian Government with a long term, financially sustainable, whole of government, strategic direction for responding to the safety and rehabilitative needs of young people.

The Strategy defines 'youth at risk' as being any young person aged between 10 and 17 experiencing or displaying the following indicators of vulnerability (risk factors) which, if not addressed, would expose the individual, family or community to significant harm (actual or potential):

- Legal problems;
- Educational disengagement;
- Homelessness;
- Family violence;
- Family troubles that require significant family supports;
- Social and familial isolation or exclusion;
- Drug and alcohol addiction;
- Culture, identify and gender-related issues;
- Mental health issues/ mental illness;
- Disability, leaning, speech impairments, etc;
- Violent or self-harming behaviours;
- Offending behaviours;
- Problematic sexualised behaviours;
- Abuse, neglect and exploitation;
- Sexual health issues;
- Trauma; and
- Suicidal thoughts.

The Strategy's seven key actions areas are to:

1. Build a strong foundation for the Youth at Risk service system through the development of a vulnerability assessment tool and the formation of agreed outcomes based on the Child and Youth Wellbeing Framework;
2. Provide timely and appropriate safety and supports for young people in out of home care and those engaged in the Youth Justice System;
3. Increase awareness and create alternative pathways within the homelessness and housing system for young people at risk;
4. Improve the education and employment opportunities for vulnerable young Tasmanians;
5. Improve the health and wellbeing of our most vulnerable young people;
6. Create safe and inclusive communities for young people; and
7. Establish system wide overarching enablers to support the youth service sector.

Tasmanian Youth Policy Framework for Local Government

The *Tasmanian Youth Policy Framework for Local Government*⁸⁶ is intended as a guide for Councils in developing a role in youth affairs (for people aged 12 to 25). It provides a suite of policy statements that Councils may wish to adopt.

The policy statements relate to a variety of elements Council may consider in developing their role in youth affairs, such as: planning; services and strategies; roles and responsibilities; policy; diversity; funding; participation; partnership; and research.

The Framework also identifies some common youth issues identified through the consultation process: transport; arts and culture; housing; public space; education and training; recreation/entertainment; health and wellbeing; community pride; employment; justice/law; and safe community.

The Framework notes that defining a role in youth affairs does not mean that all Councils will have to take on a whole new set of responsibilities. Rather, it is about building youth needs and issue into existing function of Council and ensuring young people's needs are recognised and addressed.

Legislative context

Section 20 of Tasmania's *Local Government Act 1993* requires local governments to provide for the health, safety and welfare of its community.

Local policy and planning context

The policy and planning context at the local level is set by each Council's 10-year Corporate Strategic Plan, which is in actioned through each Council's four-year delivery program and annual operating plans. Each Corporate Plan is intended to be adaptable to changing social, economic, environmental and regulatory circumstances.

Waratah-Wynyard Corporate Strategic Plan

The *Waratah-Wynyard Council Corporate Strategic Plan 2017-2027*⁸⁷ is founded on Council's mission, vision and values. The vision of Waratah-Wynyard Council is 'to deliver innovative, sustainable services to our community through strong leadership, clear direction and collaborative relationships'.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- 'Waratah-Wynyard community members will feel a sense of inclusion, belonging and value within a thriving, innovative and diverse population. They will be actively engaged in developing Council facilities, services and programs, and will be encouraged to provide input to planning for community needs'; and
- 'Waratah-Wynyard will be a healthy community with access to more recreational choices in safe and welcoming environments. It will enjoy programs and recreational spaces that are

inclusive, thriving and energetic, and will have access to high quality facilities, services and equipment’.

Circular Head Corporate Strategic Plan 2017-2027

The *Circular Head Council Corporate Strategic Plan 2017-2027*⁸⁸ is founded on Council’s mission, vision and values. The vision of Circular Head Council is ‘to provide leadership excellence focused on strategic objectives through local and regional engagement to deliver value for money and services to meet community needs’.

The Plan is based around seven thematic goals: 1. Leadership and Governance; 2. Organisational Support; 3. Connected Communities; 4. Community Recreation and Wellbeing; 5. Economic Prosperity; 6. Transport and Access; and 7. Environment. In part, the Plan states that:

- ‘The Circular Head community will be inclusive and resilient with a strong sense of belonging. People will be connected to one other and the world around them. The Circular Head community will be connected to its past and engaged in its present, creating a vibrant shared future’; and
- ‘Circular Head will be a place where services, facilities and open space provide opportunities for individuals and groups of all ages and abilities to participate in recreational activities that encourage health and wellbeing’.

Circular Head Youth Statement 2016

The *Circular Head Youth Statement* is a policy that sets out Council’s goals for supporting young people.

- | | |
|---------|--|
| Goal 1: | To make youth participation the core approach to youth leadership and youth development. |
| Goal 2: | To develop a positive Circular Head identity that encourages diversity, creativity and opportunity. |
| Goal 3: | To embed local youth initiatives in a cooperative and strategic regional approach. |
| Goal 4: | (a) To achieve best practice in governance and administration of youth services;
(b) To bring alive the ‘Council Vision’ with input from young people; and
(c) To ensure that the YPlan’s implementation is continuously informed by leading edge policy trends. |

REFERENCES

- ¹ Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T., & Stephenson, D., 2015, Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10, 227-237.
- ² Mission Australia, 2017, Youth Survey Report.
- ³ MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ⁴ Waratah-Wynyard Council, 2008, Video interviews with young people living in Wynyard and Yolla.
- ⁵ Krabbe, R., 2017, Waratah-Wynyard National Youth Week Form report, Live Well Tasmania.
- ⁶ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ⁷ Moffatt, L., 2011, Engaging Young People in Volunteering: What Works in Tasmania, Volunteering Tasmania.
- ⁸ Tasmanian Council of Social Services (TASCOSS), 2014, Transport in the Community.
- ⁹ Insync, 2016, Circular Head Council Community Survey Report.
- ¹⁰ Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ¹¹ Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ¹² Waratah-Wynyard Council, 2008, Video interviews with young people living in Wynyard and Yolla.
- ¹³ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ¹⁴ MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ¹⁵ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ¹⁶ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ¹⁷ McGaurr, L., 2014, 'Young Australians and sexual health', Face the Facts Briefing, Australian Clearinghouse for Youth Studies, Hobart.
- ¹⁸ Department of Health and Human Services Tasmania 2016, *Report on the Tasmanian Population Health Survey 2016*, Hobart.
- ¹⁹ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ²⁰ Department of Health and Human Services Tasmania 2016, *Report on the Tasmanian Population Health Survey 2016*, Hobart.
- ²¹ Mission Australia, 2016, Youth Mental Health Report: Youth Survey 2012-16.
- ²² Commissioner for Children and Young People Tasmania, 2017, Health and Wellbeing of Tasmania's Children, Young People and Their Families, Hobart.
- ²³ Commissioner for Children and Young People Tasmania, 2017, Health and Wellbeing of Tasmania's Children, Young People and Their Families, Hobart.
- ²⁴ Mission Australia, 2017, Youth Survey Report.
- ²⁵ Mission Australia, 2016, Youth Mental Health Report: Youth Survey 2012-16.
- ²⁶ Mission Australia, 2017, Youth Survey Report.
- ²⁷ Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ²⁸ Waratah-Wynyard Council, 2008, Video interviews with young people living in Wynyard and Yolla.
- ²⁹ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³⁰ Morris, S., 2016, Snapshot of Mental Health and Suicide Prevention Statistics for LGBTI People and Communities, National LGBTI Health Alliance, Newtown NSW.
- ³¹ LGBTI Health and Wellbeing Ministerial Advisory Committee, 2014, Transgender and Gender Diverse Health and Wellbeing, Victorian Department of Health, Melbourne.
- ³² Australian Human Rights Commission, 2014, Face the Facts: Lesbian, Gay, Bisexual, Trans and Intersex People.
- ³³ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ³⁴ Australian Bureau of Statistics, 2016, Census of Population and Housing.
- ³⁵ Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ³⁶ Australian Bureau of Statistics, 2016, Socio-Economic Indexes for Areas (SEIFA)
- ³⁷ Insync, 2016, Circular Head Council Community Survey Report.

-
- ³⁸ Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ³⁹ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ⁴⁰ Mission Australia, 2017, Youth Survey Report.
- ⁴¹ MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ⁴² MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ⁴³ Waratah-Wynyard Council, 2008, Video interviews with young people living in Wynyard and Yolla.
- ⁴⁴ Mission Australia, 2016, Concepts of Community: Young People's Concerns, Views and Experiences.
- ⁴⁵ Know Your Odds, 2019, <https://www.knowyourodds.net.au/healthworkers/risk-factors/>
- ⁴⁶ ACIL Allen Consulting, Deakin University, Central Queensland University and The Social Research Centre, 2017, Fourth Social and Economic Impact Study of Gambling in Tasmania: Report 1, Tasmanian Dept of Treasury and Finance, Hobart.
- ⁴⁷ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ⁴⁸ Australian Bureau of Statistics, 2016, Census of Population and Housing
- ⁴⁹ Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ⁵⁰ Tasmanian Government Strong Families Safe Kids Project Team, 2017, Child and Youth Wellbeing Framework, Hobart.
- ⁵¹ Insync, 2016, Circular Head Council Community Survey Report.
- ⁵² Insync, 2016, Waratah-Wynyard Council Community Survey Report.
- ⁵³ Tenants' Union of Tasmania, 2017, Tasmania Rents: December Quarter 2017.
- ⁵⁴ Social Action Research Centre, 2018, Rental Affordability Snapshot, Anglicare Tasmania, Hobart.
- ⁵⁵ Shelter Tasmania, 2018, *Fact Sheet: Homelessness in Tasmania 2018*.
- ⁵⁶ Commissioner for Children and Young People Tasmania, 2017, Health and Wellbeing of Tasmania's Children, Young People and Their Families, Hobart.
- ⁵⁷ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁵⁸ Healthy Food Access Tasmania and the Heart Foundation, 2016, Circular Head Council Area: Community Food/Household Access Profile.
- ⁵⁹ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁰ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ⁶¹ Mission Australia, 2017, Youth Survey Report.
- ⁶² Mission Australia, 2017, Youth Survey Report: Comparison Between Major Cities and Regional Areas.
- ⁶³ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁴ Scollo, MM and Winstanley, MH. Tobacco in Australia: Facts and issues. Melbourne: Cancer Council Victoria; 2018. Available from www.TobaccoInAustralia.org.au
- ⁶⁵ Department of Health and Human Services Tasmania 2016, Report on the Tasmanian Population Health Survey 2016, Hobart.
- ⁶⁶ Australian Criminal Intelligence Commission, 2018, National Wastewater Drug Monitoring Program—Report 4, March 2018.
- ⁶⁷ Lusk, B., Ney, L., Peacock, A. & Bruno, R., 2017, Tasmanian Drug Trends 2017. Findings from the Illicit Drug Reporting System (IDRS). *Australian Drug Trends Series No. 149*. Sydney, National Drug and Alcohol Research Centre, University of New South Wales.
- ⁶⁸ MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ⁶⁹ Cahill, H., Beadle, S., Farrelly, A., Forster, R. & Smith, K., date unknown, 'Building resilience in children and young people: A literature review for the Department of Education and Early Childhood Development', Youth Research Centre, University of Melbourne.
- ⁷⁰ Cahill, H., Beadle, S., Farrelly, A., Forster, R. & Smith, K., date unknown, 'Building resilience in children and young people: A literature review for the Department of Education and Early Childhood Development', Youth Research Centre, University of Melbourne.
- ⁷¹ Waratah-Wynyard Council, 2008, Video interviews with young people living in Wynyard and Yolla.
- ⁷² Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ⁷³ MOHOW, 2015, Y-Plan Youth Forum and Focus Groups Report.
- ⁷⁴ Krabbe, R., 2017, Waratah-Wynyard National Youth Week Form report, Live Well Tasmania.

-
- ⁷⁵ Commissioner for Children and Young People Tasmania, 2016, Children and Young People's Unique Experiences of Family Violence, Hobart.
- ⁷⁶ Robinson, C., 2017, Too Hard? Highly Vulnerable Teens in Tasmania, Social Action and Research Centre, Anglicare Tasmania, Hobart.
- ⁷⁷ Commonwealth Youth Program, 2016, Australian Youth Development Index: A Jurisdictional Overview of Youth Development, Canberra.
- ⁷⁸ Mission Australia, 2017, Youth Survey Report.
- ⁷⁹ Department of Premier and Cabinet, 2012 (est), Young People: A Guide to Engagement, Hobart.
- ⁸⁰ Commissioner for Children and Young People, 2016, Listening to Children and Young People in Tasmania, Hobart.
- ⁸¹ Burns, J., Collin, P., Blanchard, M., De-Freitas, N. & Lloyd, S., 2008, 'Preventing youth disengagement and promoting engagement', Australian Research Alliance for Children and Youth.
- ⁸² Collin, P., Lala, G., Palombo, L., Maci, G., Marrades, R., Vromen, A., 2016, 'Creating benefit for all: young people, engagement and public policy', Young and Well Cooperative Research Centre, Abbotsford.
- ⁸³ Lam, K-J. & Blakeley, D., 2018, 'Challenges, impacts and benefits of increased youth participation in sustainable development in Australia', Supplementary report for SDSN Youth Australia/Pacific Senate Inquiry Submission, Sustainable Development Solutions Network Youth, April 2018.
- ⁸⁴ Tasmanian Government Strong Families Safe Kids Project Team, 2017, Child and Youth Wellbeing Framework, Hobart.
- ⁸⁵ Tasmanian Government Strong Families Safe Kids Project Team, 2017, Youth at Risk Strategy, Hobart.
- ⁸⁶ Tasmanian Government Office of Youth Affairs, 1999, Tasmanian Youth Policy Framework for Local Government, Hobart.
- ⁸⁷ Waratah-Wynyard Council, 2017, Waratah-Wynyard Corporate Strategic Plan 2017-2027.
- ⁸⁸ Circular Head Council, 2017, Circular Head Council Corporate Strategic Plan 2017-2027.

Social Plans—Community feedback and proposed response

Contributor	Feedback	Proposed response
Damian Collins – YFCC	<ul style="list-style-type: none"> • Drug use data from wastewater monitoring re. methamphetamines may be incomplete; cannabis the most commonly used illicit substance 	<ul style="list-style-type: none"> • Reference to original data qualified with this supplemental data
Graeme and Margo Clark	<ul style="list-style-type: none"> • Reinforced importance of connection, communication and cooperation. • Proposed neighbourhood watch and church communities as connection points. 	<ul style="list-style-type: none"> • Noted • These organisations are potential partners to be identified in annual plans
Michele Towle - THS	<ul style="list-style-type: none"> • Re. carpool options; directed to statewide network coolpooltas.com.au • Typo p30 LINC/16Ten • Re. winterizing homes, example of Sustainable Living Tasmania's previous initiative • Re. healthy catering for events, example of Healthy Catering Policy of the Chronic Conditions Prevention team at THS. Also HOVER eatwelltas.org.au/hover/ • Re. harm minimisation in sports, example of Burnie Who's Des Tonight campaign • Gap identified: impact of climate change 	<ul style="list-style-type: none"> • The suggested coolpooltas.com.au does not seem to exist • Typo corrected • Sustainable Living Tasmania is a potential partner to be identified in annual plans • Added, 'e.g. developing of a Healthy Catering Policy' in relation to this action • Added an action: 'Investigate opportunities to support local Designated Driver programs.' • Noted—climate change not emphasised due to existing political sentiment. Climate change issues are being introduced strategically by other Council depts at present, see the NRM Discussion Paper.
Anne Shepherd – Literacy Coordinator, Libraries Tasmania	<ul style="list-style-type: none"> • Re. youth digital inclusion, free wifi already in library, look for opportunities to better publicise? • Re. arts and cultural activities, library keen to partner, e.g. art gallery space in any new building • Re. literacy and numeracy, library keen to collaborate on the buddy/mentor program • Re. aged civic participation and employment, library keep to support e.g. U3A 	<ul style="list-style-type: none"> • Added: 'and make young people more aware of existing free WiFi locations such as Libraries' To the relevant action. • Libraries added to list of potential partners around arts and culture • Library is a potential partner in annual plans for arts/culture, literacy, civic participation.

	<ul style="list-style-type: none"> • Change all LINC references to Libraries Tasmania • Re. literacy and numeracy in CHWP, proposed 'Promote and support the Smithton Library 26TEN digital literacy program, including supporting and exploring options for partnerships between organisations; • Re. plain English, could expand to suggest provision of 26TEN plain English workshop and encourage providers and organisations to attend, also to join the 26TEN network 	<ul style="list-style-type: none"> • LINC references changed across all three plans • Edited the action to say: 'Support and promote existing literacy and numeracy programs, and work in partnership to identify and develop additional programs as needed.' • Could not find the reference to plain English in the CHWP.
Rob Waterman – Rural Health Tasmania	<ul style="list-style-type: none"> • Confirmed already working in several of the spheres listed in the strategy. 	<ul style="list-style-type: none"> • Noted.
Cr Ashley Popowski – Circular Head Council	<ul style="list-style-type: none"> • Emphasis of YPlan too deficit-focused, does not sufficiently emphasise the link between wellness and individual hard work, achievements, etc. Seeking more in the plan that promotes success and encouraging high-achieving young people, opportunities for youth innovation and entrepreneurship. 	<ul style="list-style-type: none"> • Have added the following to the YPlan under the 'Building Resilience' theme: Objective: Encourage and create opportunities for young people to excel. Actions: <ul style="list-style-type: none"> • Promote and celebrate the successes of high-achieving young people in CHC and WWC, including within the education, community, arts/culture, sports and business/employment sectors. • Work in partnership with the business sector to develop and promote local opportunities for young people to engage in innovation and entrepreneurship. • Continue to support youth innovation and entrepreneurship through Council's economic development activities.
Cr Andrea Courtney Waratah-Wynyard Council	<ul style="list-style-type: none"> • Raised the importance of the issue of gambling and the impact on young people and the community more broadly 	<ul style="list-style-type: none"> • Inclusion of comments on problem gambling in the Health and Wellbeing plan and also the Youth Plan.

