2022
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2032

COMMUNITY WELLBEING STRATEGY

Clarence...
a brighter place

CONTENTS

We acknowledge the Tasmanian Aboriginal People as the traditional custodians of the land and pay respect to Elders past and present and recognise their continuing spiritual connection to the land.

RELATIONSHIP TO OUR STRATEGIC PLAN

Our purpose

To provide for the health, safety and welfare of the community

To represent the interests of the community

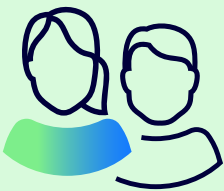To provide for the peace, order and good governance of the municipal area

Our mission

To respond to the needs of the community through a commitment to excellence in leadership, advocacy, best practice governance and service delivery

Our vision

Clarence… a vibrant, prosperous, sustainable city

Governance and leadership

We seek to act with the highest ethical standards and foster trusting and respectful relationships, demonstrating leadership and accountable transparent governance of the city. Good governance promotes public trust, leads to informed and ethical decision-making, and improves efficacy.

Assets and resources

We will efficiently and effectively manage financial, human, and property resources to attain our strategic goals and meet statutory obligations.

OUR GOALS

A people friendly city

Clarence values diversity and encourages equity, inclusiveness and accessibility. We aspire to create high quality public places for all people to live actively, engage socially and enhance our health and wellbeing.

A well-planned liveable city

Clarence will be a well-planned liveable city with services and infrastructure to meet current and future needs of our growing and vibrant community.

A prosperous and creative city

Clarence encourages creativity, innovation and enterprise and will develop the local economy by enabling opportunities for all people.

An environmentally responsible city

Clarence is environmentally responsible, valuing and protecting the natural environment for a sustainable and liveable future.

While each strategy stands alone, many objectives overlap.

Our strategies

This strategy is one of seven key strategies adopted by council to support achievement of the goals in our Strategic Plan.

While each strategy stands alone, many objectives overlap. In achieving the best outcomes for our community, we will take a whole of council approach to align planning, resources and delivery, particularly where objectives have connections with other key strategies.

This strategy establishes three priority areas:

1. Planning and partnership
Promoting wellbeing through planning and partnerships.

2. Spaces and places
Strengthening the capacity of places and spaces to support wellbeing.

3. Opportunities for wellbeing
Expanding opportunities for everyone to lead healthy and active lives.

Our role in wellbeing

Improving the wellbeing of communities is a responsibility that falls to all tiers of government. It also involves many other sectors: private enterprise, not-for-profit organisations, and communities themselves. As the level of government closest to the community, council is well placed to understand local issues and to coordinate or facilitate local responses.

The way in which council chooses to do this will depend on the urgency and impact of the issue, the wellbeing objective it relates to, who else has a key role and available resources. We will work respectfully with others and make sure we don't duplicate efforts.

Council will usually choose from one or more of the following roles: delivering, partnering, facilitating and advocating.

Delivering
direct provision of wellbeing services.

Partnering
working collaboratively with other committees, agencies and organisations in the delivery of wellbeing services.

Facilitating
providing key engagement, connections and planning to help progress wellbeing outcomes.

Advocating
for stakeholders to be heard and promoting wellbeing opportunities in our community.

Figure 1. Health and wellbeing principles

State Government Strategic Plan

State Government has launched its Healthy Tasmania Five-Year Strategic Plan 2022-2026. The governance framework of the state's strategy identifies:

"The involvement of local government is critical to support future preventive health efforts at the community level. Local government has a high level of engagement with communities, knows their needs, and has responsibility for many factors that can impact on health and wellbeing.

Local government is already playing a key role in supporting community health and wellbeing. We will formally recognise the role of local government as a part of the preventive health system, and provide an authorising environment, strategic direction and resources to support local government to contribute to preventive health actions."

Guiding principles

Council has adopted a set of principles that will inform and apply to all strategies. Council will take the lead role in delivering some objectives; however our role will vary depending upon our scope of responsibility and organisational capacity to affect change.

Figure 1 illustrates these principles set against council's role and key principles.
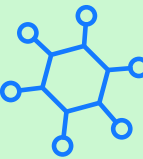
Community-focused

We understand that the health and wellbeing of our communities is at the heart of our business.

→   We will work with communities to ensure their voices are heard.

Evidence- informed

We appreciate the complexity of health and wellbeing and the need to draw upon the latest research in addressing health and wellbeing challenges.

→   We will research what's likely to work best for our circumstances and measure the results of our actions to find what works well and what needs improvement.

Place-based

We understand that local issues are best addressed locally drawing on local strengths and opportunities.

→   We will work locally to apply the combined efforts of local organisations and communities themselves.

Inclusive

We recognise that age, disability, gender, culture, sexuality, indigenous disadvantage, and low income can lead to health and wellbeing inequities.

→   We will make access and equity in health and wellbeing a priority.

Collaborative

We appreciate that the work of many organisations can overlap or inform health and wellbeing. Taking a broad view of these interacting systems increases the likelihood of success.

→   We will work with other organisations to understand needs and partner with them as a coherent system to achieve shared objectives.

Integrated

We recognise that many council policies and programs influence health and wellbeing and that a whole of council approach can improve our effectiveness.

→   We will we work as a whole organisation to combine our expertise and direct our resources to achieve our objective.

Council is a key player in providing a natural and built environment that supports a healthy lifestyle.

Kayak trail
Image Natalie Mendham

OUR COMMUNITY WELLBEING VISION

Clarence... a city that values wellbeing.

Working with others to improve community wellbeing through providing and supporting access to services, programs and information, enhancing our natural and built environment and growing opportunities so everyone can enjoy our spaces and places and live well.

All levels of government have a key role in delivering and supporting wellbeing activities and initiatives. As the level of government best connected to the community, council plays an important role in delivering programs and facilitating partnerships to meet community wellbeing needs.

Council improves community wellbeing by first understanding its local community and responding through creative actions in partnership with others. This includes reducing factors that put people at risk and increasing factors that protect people from poor health.

Council is a key player in providing a natural and built environment that supports a healthy lifestyle. Improvements to walking and cycling infrastructure also make it easier for people to choose active travel. Improving parks, streetscapes and open spaces makes it more attractive for people to get outside and active. Building our infrastructure and spaces to meet universal design principles ensures that facilities are accessible and safe for everyone.

Council takes a life course approach to community wellbeing seeking to provide programs and services that are accessible and inclusive of all ages and all abilities.

It is also important to focus on the early years in a child's life to give them the best start possible. Improving everyone's access to physical activity, healthy eating and drinking, oral health information and services, and mental health supports are key components to this strategy. Also important in improving community wellbeing, is promoting opportunities for connection as a response to social isolation and building a more resilient community.

Council will also work to connect people of all ages and all abilities to services and opportunities for learning to help them, within their capacity, to address their own wellbeing needs.

We will also work collaboratively with other organisations and agencies to address social and lifestyle factors that place people's wellbeing at risk.

The overarching vision of the Community Wellbeing Strategy is that every person in Clarence can live well.

OVERVIEW

Consultation and feedback

Direct feedback and contributions from several sources have been considered in the development of this strategy, including the Community Health and Wellbeing Advisory Committee, our community, community organisations and government sectors. Workshops were conducted with councillors, council staff and consultations held with representatives from Special Committees of Council.

Background

To date, council has adopted a number of community plans to support the improved wellbeing of our community, including:

Health and Wellbeing Plan

Access and Inclusion Plan

Age Friendly Clarence Plan

Community Safety Plan

Youth Plan

Cultural Arts Plan

Health and Wellbeing Plan

This plan was the first of its kind for Clarence and an innovative concept within Tasmania. The plan aims to tackle health and wellbeing challenges faced by our community and recognises that influencing health and wellbeing is not just about treating and preventing illness; it is also about the social, economic, built and natural environments in which we live.

Access and Inclusion Plan

Council has to date developed three access plans. Addressing the needs of people living with disabilities has been the focus of each Plan. Council has placed critical importance on strengthening our capacity to respond and provide for infrastructure and services for people living with disabilities in a coordinated and planned way.

Community Safety Plan

For people to feel and live well, it is vital that they can go about their activities free from fear or risk of injury or harm. The Clarence Community Safety Plan identifies actions that council will take to improve safety in our communities.

Age Friendly Clarence Plan

Council was the first Tasmanian council to join the World Health Organisation Global Network of Age Friendly Cities and Communities. The Age Friendly Clarence Plan presents how council will provide leadership in partnership with older people, to plan for and provide services, programs, facilities and information, in a way that supports the importance of a life course approach to ageing that is strategic and realistic.

Youth Plan

Council has a long history of supporting and empowering young people. To build on this strong foundation the Youth Plan outlines current services for young people and identifies future services required to support the growth and development of young people across the city.

Cultural Arts Plan

This plan provides direction around arts and cultural activity and facilitates the further development of our arts programs. Enduring partnerships have been formed to facilitate a broader reach in the provision of arts activities and programs across Clarence

What do we mean by health and wellbeing?

We understand that health, safety and welfare are factors that work together to enable people to lead satisfying lives and contribute to the community. 'Health' is defined in the World Health Organisation (WHO) constitution as:

"A state of complete physical, social and mental wellbeing, and not merely the absence of disease or infirmity. Within the context of health promotion, health… can be expressed… as a resource which permits people to lead an individually, socially and economically productive life. Health is a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities." WHO, 1986

In a subsequent definition, WHO describes 'wellbeing' as:

"a state … in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community." WHO, 2013

Figure 1. The determinants of health and wellbeing

THE DETERMINANTS OF HEALTH AND WELLBEING

HEALTHY COMMUNITIES

ENVIRONMENTAL PROTECTION › NATURAL ENVIRONMENT › LAND USE PLANNING

TOWN PLANNING › BUILT ENVIRONMENT › STREETSCAPES

SUBSIDISED SERVICES › ECONOMIC ENVIRONMENT › JOB CREATION

COMMUNITY ARTS › SOCIAL ENVIRONMENT › COMMUNITY ENGAGEMENT

RECREATION › LIFESTYLE › LEISURE

AGE, GENDER & HEREDITARY FACTORS

GLOBAL INFLUENCES: CLIMATE, ECONOMY, POLITICS

LOCAL INFLUENCES: NATIONAL, REGIONAL, OTHER COMMUNITIES

Adapted from World Health Organization 2008, City leadership for health. Summary evaluation of Phase IV of the WHO European Healthy Cities Network, WHO, Denmark

What factors influence community wellbeing?

Community wellbeing is influenced by a range of interrelated factors including:

- our genetic make-up
- the families and communities we grow up in
- our lifestyle choices
- our relationships and social connections
- the work we do, paid or voluntary
- our access to information
- the care and support we receive when we need it

Risk and protective factors

The relationship between the determinants of health and the wellbeing of individuals and communities can also be understood by considering:

- the factors that jeopardise good wellbeing – 'risk factors'
- the factors that contribute to good wellbeing – 'protective factors'

Figure 3. Risk and protective factors

PROTECTIVE FACTORS

Healthy conditions and environments
Safe physical environments
Supportive economic and social conditions
Regular supply of nutritious food and water
Restricted access to tobacco and drugs
Healthy public policy and organisational practice
Provision for meaningful, paid employment
Provision of affordable housing

Psychosocial factors
Participation in civic activities and social engagement
Strong social networks
Feeling of trust
Feeling of power and control over life decisions
Supportive family structure
Positive self-esteem
Resilience

Effective health services
Provision of preventative services
Access to culturally appropriate health services
Community participation in the planning and delivery of health services

Healthy lifestyles
Tobacco cessation
Low-risk use of alcohol
Regular physical activity
Balanced healthy eating
Positive mental health
Safe sexual activity
Injury prevention

QUALITY OF LIFE, FUNCTIONAL INDEPENDENCE, WELLBEING, MORTALITY, MORBIDITY, DISABILITY

Risk factors
Poverty
Low social status
Dangerous work
Polluted environment
Natural resource depletion
Discrimination (age, sex, race, disability)
Steep power hierarchy (wealth, status, authority) within a community and workplace

Psychosocial Risk factors
Isolation
Lack of social support
Poor social networks
Low self-esteem
High self-blame
Low perceived power
Loss of meaning or purpose
Abuse

Behavioural Risk factors
Smoking
Poor nutritional intake
Physical inactivity
Substance abuse
Poor hygiene
Being overweight
Unsafe sexual activity

Physiological Risk factors
High blood pressure
High cholesterol
Release of stress hormone
Altered level of biochemical markers
Genetic factors

RISK FACTORS

Adapted from Labonte, R 1998, A community development approach to health promotion: a background paper on practice, tensions, strategic models and accountability requirements for health authority work on the broad determinants of health, Health Education Board of Scotland, Research Unit on Health and Behaviour Change, University of Edinburgh, Edinburgh.

Table 1. Significant risk factors

Significant risk factors	2009		2019	
	Clarence	Tasmania	Clarence	Tasmania
Self-assess their health as fair/poor	22.5%	19.9%	20.9%	21.7%
Risky alcohol consumption[1]	19.6%*	20.8%*	18.8%	19.1%
Insufficient exercise levels	27.5%	27.5%	13.0%	11.1%
Obesity	20.1%	18.7%	26.3%	28.2%
Overweight/Obese[2]	58.5%*	60.0%*	52.4%	58.8%
Insufficient fruit consumption (<2 serves daily)	60.0%	49.2%	53.5%	53.1%
Insufficient vegetable consumption (less than 5 serves daily)	52.4%	88.1%	90.2%	91.2%
Current smokers[3]	58.5%	19.8%	6.5%	12.1%
Daily smokers[3]	-	16.1%	4.9%	9.3%

1. Risky alcohol consumption figures are taken from TPHS 2016, as the way this risk factor is measured changed from 2016 onwards.
2. Overweight / Obese figures are taken from TPHS 2016 – comparable data not available for 2009
3. Reliable smoking data for Clarence was not available in 2009 or 2016.

Table 2. Chronic conditions

The TPHS 2019 also shows that Clarence residents have some chronic health conditions at levels that are higher than the Tasmanian average, while other conditions are below the state average but still at concerning levels. See Table 2.

Chronic conditions [a, b, c]	2009		2019	
	Clarence	Tasmania	Clarence	Tasmania
Diabetes	8.7%	6.7%	7.5%	8.3%
Heart disease	9.3%	6.9%	7.9%	6.5%
Arthritis	27.8%	25.0%	23.9%	22.9%
Osteoporosis	9.1%	6.4%	5.9%	5.6%
Cancer	8.8%	7.8%	7.6%	8.4%
Stroke	3.6%*	3.4%	1.95%	2.3%
Depression / Anxiety	24.5%	21.8%	30.0%	33.6%
Asthma	25.5%	20.6%	23.1%	25.1%

a. Sources: Tasmanian Population Health Survey 2009 and Tasmanian Population Health Survey 2019
b. Age standardised to the 2009 and 2019 Tasmanian populations respectively
c. Defined as 'ever-diagnosed by a doctor'. This is as stated by the respondent; not independently validated.
* Estimates should be used with caution – relative standard error above 25 percent

WHERE ARE WE NOW?

Community profile

The City of Clarence is a mix of urban, rural and coastal communities ranging from very low to very high socioeconomic status. The population of 62,396 people is the second highest of the municipal areas in Tasmania.

The median age in the city is 41, compared with the Australian median of 37. Four percent of people speak a language other than English (ABS Census 2016). 3.5 percent of Clarence residents identify as Indigenous Australians.

Wellbeing status

The University of Canberra Regional Wellbeing Survey, 2018, which measures the subjective wellbeing of people and communities living outside Australia's major cities, shows that in 2018 overall community wellbeing was higher in Clarence compared to Tasmania or Australia. However, results also showed that almost 30 percent of our population reported poor household finances and scored lower than the Australian average on access to health, education and childcare services.

The 2019 Tasmanian Population Health Survey (TPHS 2019) of self-assessed health shows that our residents exhibit several risk factors. Table 1 compares these risk factors over the past decade.

The TPHS 2019 also shows that our residents have some higher chronic health conditions than the Tasmanian average, while some are below the state's average but still at concerning levels (refer Table 2).

Health inequity

Some residents of Clarence are at greater risk of poorer wellbeing than the general population. This includes older people, people living with a disability or mental health challenges, vulnerable children and young people, people who experience inequality arising from gender or sexual identity orientation, Aboriginal or Torres Strait Islander people, people from culturally and linguistically diverse backgrounds and people in low socio-economic groups.

The Tasmanian Population Health Survey 2016 reports that: Tasmanians in the most disadvantaged quintile of the Index of Relative Social disadvantage[1] reported significantly worse health status than Tasmanians in the least disadvantaged quintile. Within Clarence, over 12,500 of our residents are represented in the most disadvantaged quintile.

Barriers to health services

The Anticipatory Care Project: Preliminary Findings Report (July 2019) prepared by the University of Tasmania Institute for the Study of Social Change identifies key barriers to health services as:

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1. Socio-Economic Indexes for Areas (SEIFA) were developed by the Australian Bureau of Statistics (ABS) to rank areas in Australia by relative socio-economic advantage and disadvantage. These measures consider factors such as income, educational attainment and unemployment and are often used to divide populations into five equally sized groups known as quintiles, with a fifth (20 per cent) in each quintile.

- geographical and physical – for example, distance coupled with lack of transport options

- emotional or psychological – for example, trusting and feeling safe in service or social settings

- resources – for example, lack of financial, educational (literacy) and technological resources (internet) to interact with or enter services

- social disconnection barriers – for example, isolation and lack of routine exposure to health services

Health literacy

Health literacy is the ability of a person to find, understand and use health information to make decisions about their health and healthcare. How health systems are set up and how information is communicated by healthcare providers can make it easier for people to find, use and understand information and services. Health literacy is important because people who have difficulty understanding health information and what they need to do to look after their health, such as the importance of good nutrition and physical activity, are more likely to experience poorer health.

Health literacy underpins all the principles of practice and is key to achieving improvement in the priority areas for action.

Table 3. Summary of social indicators displayed through the City of Clarence

	Median age	Percent Unemployed	Median household income ($/pw)	Percent of households rented	State SEIFA ranking*
Acton Park	43 (40)	3.3(3)	2,195 (1,921)	3.4 (3.9)	677
Bellerive	47 (47)	4.3 (4.5)	1,175 (1,000)	28.1 (27.9)	616
Cambridge	43 (46)	3.4 (3.6)	1,784 (1,221)	8.7 (13)	645
Clarendon Vale	31 (30)	19.3 (19)	750 (641)	63.3 (62)	5
Clifton Beach	36 (34)	4.5 (1.7)	2,673 (1.916)	8.4 (12.4)	678
Cremorne	41 (39)	5.2 (3.3)	1,838 (1.422)	8.4 (11.1)	655
Geilston Bay	43 (42)	3.8 (3.6)	1,440 (1,237)	17.1 (15)	699
Howrah	45 (43)	4.2 (3.9)	1,388 (1,177)	18 (16.8)	628
Lauderdale	42 (39)	2.7 (3.3)	1,562 (1,340)	12.1 (1.2)	624
Lindisfarne	49 (46)	4.6 (3.7)	1,312 (1185)	21.5 (18.7)	614
Montagu Bay	45 (44)	6.3 (5.9)	1172 (1,034)	33.2 (27.3)	485
Mornington	36 (35)	6.6 (7.2)	1,125 (948)	33.6 (29.9)	148
Oakdowns	31 (31)	3.3 (2.7)	1,370 (1.257)	24.6 (17.1)	506
Opossum Bay	55 (50)	5 (10.7)	1,055 (883)	16.2 (15.8)	596
Otago	48 (48)	4.9 (1.9)	1,625 (1.625)	5.8 (5.2)	646
Richmond	50 (42)	4.9 (3.2)	1,223 (1.271)	19.8 (14.8)	617
Risdon Vale	34 (33)	9.5 (9.4)	960 (766)	31.2 (30.1)	31
Rokeby	32 (32)	10.8 (8.7)	888 (830)	40.6 (39.2)	33
Rose Bay	49 (48)	4.1 (3.8)	1,433 (1.297)	22.8 (22.4)	648
Rosny	50 (47)	5.8 (7.6)	1,447 (1,208)	17.3 (18.3)	660
Sandford	44 (40)	3.8 (3.1)	1,845 (1.607)	6.9 (5.6)	644
Seven Mile Beach	43 (41)	3.2 (3.2)	1,904 (1,561)	7.2 (12.1)	665
South Arm	47 (40)	6.2 (6.6)	1,200 (1,068)	16.2 (16.2))	571
Tranmere	44 (39)	3.8 (3.5)	1,966 (1,799)	10 (11.6)	674
Warrane	38 (37)	9.4 (10.1)	848 (736)	50.4 (46.5)	17

Sources: ABS 2016 Census data (ABS 2012 Census data)

WHAT HAVE WE ACHIEVED TO DATE?

Council's community development plans have influenced the way council works with others to address wellbeing issues in Clarence. Fostering new connections and working closely with partners and the community has enabled local people, community groups, all levels of government, service providers and organisations to solve problems together.

Making a difference to community wellbeing can take many years and therefore results might not be readily visible in the life or strategy of a single community wellbeing plan. Council is committed to continuing a planned and structured approach to supporting improved outcomes for all in our community.

Some of the programs, services and significant impacts delivered to date as part of council's community development framework are outlined below.

Access and Inclusion

An Access and Inclusion Assessment Toolkit was developed by council as a unique resource to assist council with general design elements for buildings, facilities, streetscapes, and recreational spaces that deliver more accessible and inclusive facilities for our community.

Age Friendly Clarence

Live Well. Live Long. is a 12 week free, informative, interactive and educative program that provides a holistic approach to health and wellness.

Our Shared Space, a partnership between council's Youth Network Advisory Group and Clarence Positive Ageing Advisory Committee, focuses on inter-generational connections and tackling ageism.

Clarence community volunteer service

The Clarence Community Volunteer Service offer a range of services to residents aged 65 years and over, and to people 18 to 64 years old living with a disability, who need support to live independently and connected to their local community. The program has consistently increased and maintained the number and diversity of volunteers providing support to well over 100 residents.

Community safety

A Community Safety Plan was endorsed in 2016 with four safety themes: personal safety, resilient communities, safe streets and spaces and powerful partnerships. A Community Safety Officer was appointed to support this implementation. One Community Together was also established to support the Clarence Plains community to create a welcoming, proud, safe and attractive community.

> ## Several health promotion projects have been successfully delivered across our community.

Fitness in the Park

A year-round program of mixed fitness-based activities in our parks attracting over 300 people a year, including 30-40 people during the cooler months.

Health Promotion Projects

Several health promotion projects have been successfully delivered across our community, including:

- Oral Health – including promotional resources, and water stations

- My Wellbeing Kit– addressing resilience and mental health

- Food films – filming of ten recipes to promote healthy eating

- Neighbour Day – Neighbourly Awards and Neighbour Connection Card

- Christmas Brunch – an event that attracts up to 110 diners

Help to Health

The Help to Health project is made up of five different initiatives that help the community get better access to health care and to take more control of their wellbeing needs.

Live Clarence

Facilitating communication with the community including a website, social media and E-news on community wellbeing matters.

Liveability Projects

- Community Hubs – a mapping project to identify community hubs and services.

- Walkable Clarence Project – a case study assessing the ease of use of a Clarence streets and movement networks.

Intercultural Festival

A community festival facilitating community wellbeing through learning, listening and getting to know other cultures on a deeper level.

The festival includes workshops and activities, where the emphasis is on the story and the cultural context of the facilitator, and creates opportunities for community members from all cultural backgrounds to share their skills and stories with others.

Youth Services

Youth Network Action Group (YNAG) is a council committee for young people aged 12-24 who live, work, or go to school in the Clarence area and are interested in providing a stronger voice for young people in our city.

Our Youth Centre has a fully equipped workshop where we provide learning opportunities in project planning, wood and metal work and promotes general skills development. This program engages young people in an alternative education program during the school term, aiming to help young people develop skills which will guide them towards employment. The workshop is also open to young people from year five upwards to restore, reuse or make something new.

Children's Services

Clarence Children's Services is committed to providing high quality and affordable child care. While at our programs, children are encouraged to participate in supervised activities that are safe and fun. Each child is respected as a unique person with his or her own needs, experiences, abilities and interests. We foster children's needs by offering and planning for a safe, stimulating, happy and caring environment.

Rosny Early Learning Service

The service vision is to provide a safe, happy, enriched, and sustainable minded environment which encircles children, families, service staff and our community. The service strongly advocates the importance of play in the early education and care setting and the learning environment is a welcoming space set in a natural bush style garden with a vegetable patch. Our small size means that a real sense of belonging is achieved as children can build relationships with all educators and children in shared spaces.

Before and After School Care and Vacation Care

These programs are for primary school children. Children are encouraged to participate in supervised activities that are safe and fun. The service offers a variety of indoor and outdoor activities as well as quiet times and areas for rest or homework.

Family Day Care

This service is sponsored by council and has educators throughout southern Tasmania, including the Clarence, Brighton, Glenorchy, Hobart, Sorell and Tasman municipalities. Our vision is to deliver quality home-based childcare that provides flexible responses in meeting the individual needs of children and their families.

From plan to strategy

In reviewing the Health and Wellbeing Plan, council made the decision to lift the plan to a strategy level to recognise the importance of community wellbeing to the purpose of council.

Plans integral to achieving outcomes include the Access and Inclusion Plan, Age Friendly Clarence Plan, Community Safety Plan and Youth Plan.

Each child is respected as a unique person with his or her own needs, experiences, abilities and interests.

WHERE DO WE WANT TO BE IN TEN YEARS?

Key outcomes we will work to achieve by 2032

Outlined below are the outcomes council will work to achieve by 2032. The outcomes will result from implementing the objectives outlined under each Key Priority Area.

Good governance

- Identify baseline data to determine effectiveness and impact of objectives outlined in this strategy

Planning and partnership

- Council has established internal policies and processes and criteria for improving community wellbeing and strives for equitable access and participation

- Council will work in partnership with others to change the way wellbeing services are delivered to remove barriers and improve access to services

- Council has programs and plans in place to support the life course approach to community wellbeing

- Council has well established internal and external partnerships directly aimed at improving the wellbeing of our communities

- Research and evaluation are embedded in council processes and learnings are shared

Opportunities for community wellbeing

- Council has a well-established program supporting childhood health

- Council has supported physical, mental, and social activities for the community

- Council has provided activities in response to targeted health risks

- Council has provided information about and connection to the health service system

- Council is implementing a Community Safety Plan

Spaces and places

- There are improvements in walkability and cycling infrastructure across the city

- Council is implementing an Open Space Plan

- Principles of 'healthy by design' and universal access underpin all facilities developed

Who will we engage with?

In delivering the objectives outlined in this strategy we will engage with:

Our community

Internal stakeholders

Council special committees

External providers and organisations

State and Federal government

IMPLEMENTATION PLANS
3-5 year lifecycle

Provides an outline for achieving outcomes from council's strategies, highlighting inter-relationships of activities across council strategies and including statutory responsibilities and reporting requirements.

What will be done	How it will be done	Those responsible	Estimated timelines	Resources required

ANNUAL PLAN
1 year lifecycle

Provides a detailed outline for achieving Plan outcomes across the immediate financial year.

Specific activities to be delivered this year	Specific timelines
How it will be done	Resources required for the current year
Those responsible	

BUDGET
1 year lifecycle

Allocation based on resources required to deliver outcomes in the relevant plan.

Allocation for actual activities for the year
Provision for future works across Plan

How will we get there?

Implementation plans will be developed that outline how and when each objective will be delivered. Relevant activities from existing planning documents and other implementation plans will be mapped against the objectives of this strategy to ensure that our efforts are coordinated, rigorous and do not duplicate effort or resources.

Complementary objectives across council's strategies will be delivered in a collaborative manner.

Implementation plans will provide for a major review of progress every 3 years, and an annual minor review to inform budget and annual plan discussions and decision-making.

What is a 'systems approach'?

Council understands that influencing change is complex and requires effort across many interrelated areas both within council and externally. A 'systems' approach means that council will look at factors that impact community wellbeing and issues that lead to wellbeing inequities, examining underlying causes and applying tailored tools and opportunities to overcome them.

FROM INEQUALITY TO INCLUSION

INEQUALITY

Unequal access to services and opportunities

↓

EQUALITY

Access to services and opportunities evenly distributed but results in those who need additional support to access services and opportunities being at a disadvantage

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EQUITY

Additional support provided where needed to ensure everyone is able to access services and opportunities

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INCLUSION

Systems improved to ensure everyone has equal access to services and opportunities

Brighter Place Brigade

WHAT WILL WE DO TO IMPROVE COMMUNITY WELLBEING OVER THE NEXT TEN YEARS?

The following pages set out the objectives we will pursue over the next ten years based on an analysis of the challenges facing the community and the factors that influence community wellbeing.

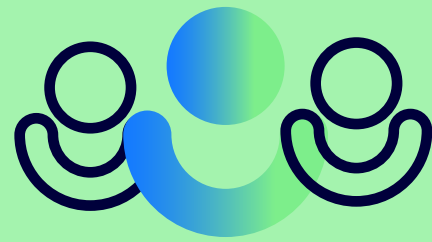The nature and extent of our involvement will depend on the role council chooses to take.

Providing areas for our community to readily meet, play and connect is important to facilitating physical, social and mental activity.

Priority Two: Spaces and places

PLANNING AND PARTNERSHIPS

Promote community wellbeing through planning and partnerships

KEY PRINCIPLES

We will work with others to address issues that lead to wellbeing inequities.

We will work with other organisations to understand community needs and partner with them to achieve shared objectives.

We will work locally to combine the efforts of local organisations and communities, building capacity and resilience.

WHY IS THIS IMPORTANT

We recognise that many policies and programs influence community wellbeing and that a whole of council approach can improve our effectiveness.

The work of many organisations can overlap and influence community wellbeing. Taking a broad view of these interacting systems increases the likelihood of success and maximises available resources.

We understand that local issues can be best addressed locally drawing on local strengths and opportunities.

Objectives we will work towards

Policies and processes

- Support collaborative practices across council to integrate and consolidate council's efforts to achieve community wellbeing objectives

- Develop processes that consider the wellbeing impacts of policies and project proposals

- Adopt and support a healthy workplace policy to support staff to lead healthy lifestyles

- Address health inequities across the city to improve equity and inclusiveness in delivery of council services and advocate for equity in delivery of other provider services

Partnerships

- Increase community participation in identifying and responding to community wellbeing issues

- Identify opportunities to engage external organisations with common objectives to develop joint activities

- Implement policies to model healthy choices in events and interactions and encourage adoption by our community

Research and evaluation

- Undertake research and evaluation to build understanding of what works and what can be improved in our efforts to achieve our objectives

Internal wellbeing structures

- Share lessons learnt across council and with external partners

We understand that local issues can be best addressed locally drawing on local strengths and opportunities.

SPACES AND PLACES

Strengthen the capacity of spaces and places to support community wellbeing

KEY PRINCIPLES

We will build environments that support community wellbeing considering all ages and abilities.

We will promote the connection between best-practice planning and design in achieving improved community wellbeing outcomes.

WHY IS THIS IMPORTANT

Providing areas for our community to readily meet, play and connect is important to facilitating physical, social and mental activity. It provides for a vibrant community and one with a sense of place.

A safe physical environment is one of the key protective factors in contributing to good community wellbeing which supports our quality of life and functional independence.

Objectives we will work towards

Movement networks

• Work with providers to improve accessibility to infrastructure and alternative active transport modes

• Increase walking and cycling options that are connected and fit for purpose

Open space

• Increase access to open space that can be used for leisure and recreation and that includes adequate amenities

• Enhance natural spaces to provide opportunities for people to enjoy nature

• Make suitable open space available for food growing, such as community gardens, edible street/park plantings

Built environments

• Collaborate to make attractive built spaces and streetscapes that bring people together

• Bring a wellbeing focus to developments and public facilities

• Engage developers in understanding and applying 'healthy by design' principles

Climate change

• Assist communities to understand, engage with and mitigate climate change risks

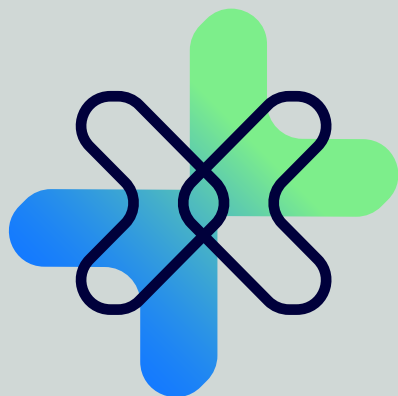• Increase our capacity to live sustainably and reduce energy consumption

We will build environments that support community wellbeing considering all ages and abilities.

PRIORITY THREE

OPPORTUNITIES FOR COMMUNITY WELLBEING

Expand opportunities
for everyone to lead
healthy and active lives

KEY PRINCIPLES

We will make access and equity in wellbeing a focus for our community.

We will work with communities to ensure their voices are heard.

We will research what works well, what needs improvement and the best approach to deliver outcomes.

WHY IS THIS IMPORTANT

The wellbeing of our communities is at the heart of our business.

Age, disability, gender, culture, sexuality, indigenous disadvantage and low income can lead to wellbeing inequities. It is important to provide support and services on an equitable and inclusive basis to all ages and, where appropriate, to target groups to achieve improved outcomes.

Objectives we will work towards

Physical activity

• Increase opportunities for physical activity and active travel

• Increase opportunities for affordable active leisure and sport

Healthy eating and oral health

• Improve access to safe, healthy, affordable food through working with groups and stakeholders

• Promote water as a drink of first choice through our networks and spaces

• Promote improved oral health and hygiene practices through working with groups and stakeholders

Social connection

• Encourage community members to participate in the life of their community and form social connections

• Support communities to be resilient in response to major challenges such as pandemics

• Increase opportunities for lifelong learning

Community safety

• Improve community safety including perceptions of community safety

• Support communities to prepare for and recover from natural disasters

Mental health

• Work to improve mental health and reduce suicide

Health risks

• Work with other groups and stakeholders to reduce health risks associated with smoking and the harmful use of drugs and alcohol

• Work with relevant stakeholders and community groups to reduce the incidence of homelessness

• Identify and respond to the impacts and consequences of COVID-19

Health awareness and access

• Increase community member access to available services and relevant information about health issues affecting them through working with other agencies and advocating for our community members

• Support our communities to build the skills and knowledge to address their own health needs

• Use research and action learning to inform activity design and delivery

Children

• Supporting increased achievement of child development milestones through working with other groups and stakeholders to provide opportunities for children to develop physically, socially, intellectually, and emotionally

• Provide wellbeing information to families through schools, other children's services and children's programs and activities

EXPLANATION OF TERMS

Life course approach

A life course approach is a framework that considers the physical and social hazards during all stages of life from birth to older adulthood.

Strategy

Outlines the key issues in the strategic plan and identifies the key objectives and what needs to be done at a high level.

Framework

Provides guidance around strategies without being prescriptive. Allows for some flexibility in delivery to adapt to changing conditions.

Plan

A detailed outline for achieving outcomes from a strategy or framework. Identifies specific actions, what, who when and how.

Policy

Formal statement of principles. Primarily seeks to ensure compliance with legislation, standards, and community expectations

Procedure

Generally, relates to a policy. Mandates operational activities and assigns responsibilities through specific operational actions.

Clarence...
a brighter place