CO-OPS Collaboration
enabling best practice to create healthier communities

Case Studies in Community-based Obesity Prevention – Practice to Evidence

Dr Penny Love, Jill Whelan, Dr Tahna Pettman

The CO-OPS Collaboration, WHO CC, Population Health SRC, Deakin University, Geelong, Australia


RESEARCH INTO PRACTICE
PRACTICE INTO RESEARCH

CO-OPS Collaboration

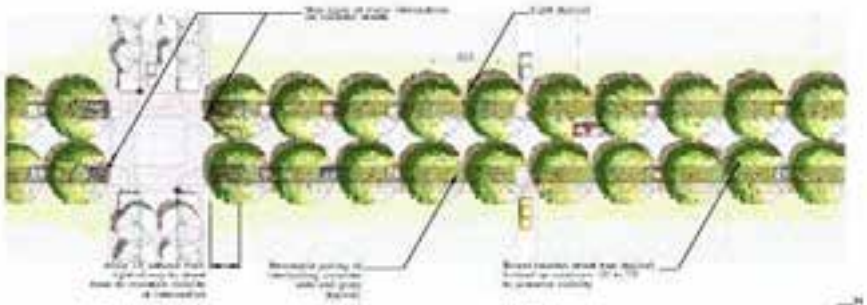
enabling best practice to create healthier communities

www.**co-ops**.net.au

Like @co_ops

CO-OPS Collaboration

enabling best practice to create healthier communities



www.**co-ops**.net.au

Like

@co_ops

www.**co-ops**.net.au

Like @co_ops

CO-OPS Collaboration

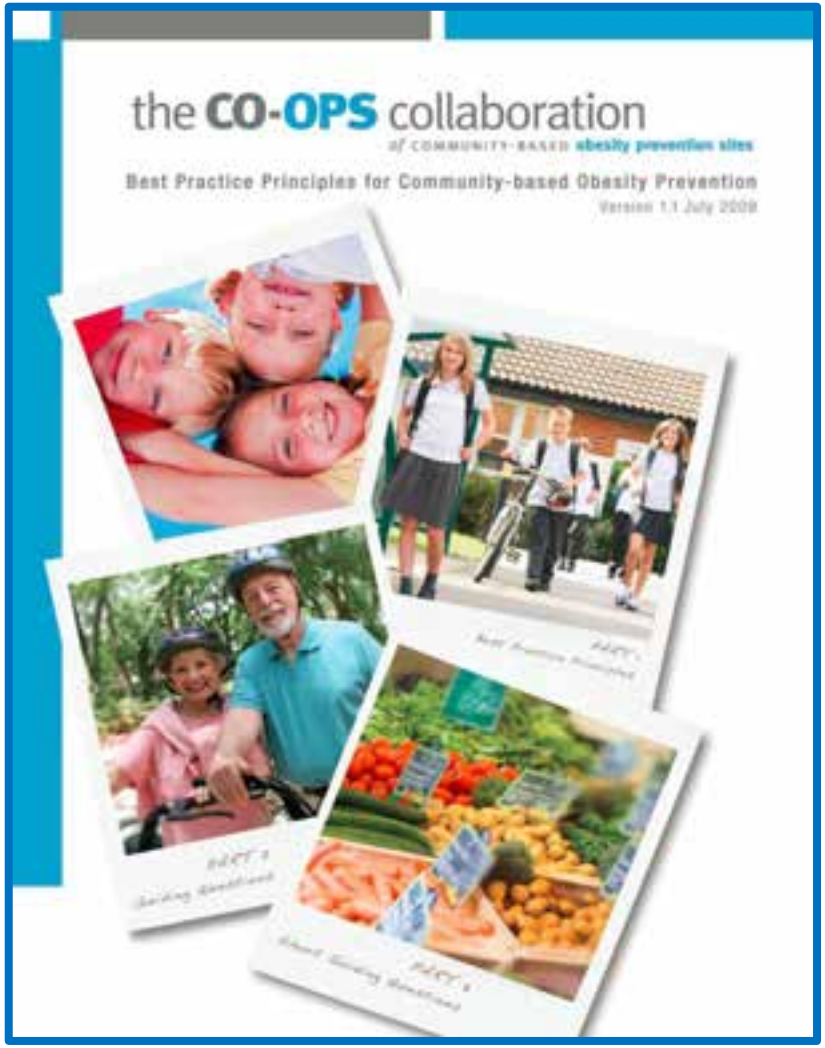
enabling best practice to create healthier communities

1. Identify audience and purpose
2. Develop systematic process
3. Develop st
4. Collect
5. Co
6. Develop
7. Write
8. Organize stories
9. Design and print
10. Disseminate publication

1. **Online Template**
2. **Appraisal Tool**
3. **Dissemination Process**

CO-OPS Collaboration

enabling best practice to create healthier communities



Community engagement

C1. Approach C2. Analysis
C3. Partnerships C4. Community capacity

Program design and planning

P1. Problem Analysis P2. Problem framing
P3. Planning context P4. Evidence & innovation
P5. Theory of change P6. Feasibility
P7. Program plan P8. Target groups

Implementation and sustainability

I1. Consumer testing I2. Quality monitoring
I3. Adaptations and responsiveness

Evaluation

E1. Approach E2. Plan
E3. Data collection & management
E4. Context E5. Active dissemination

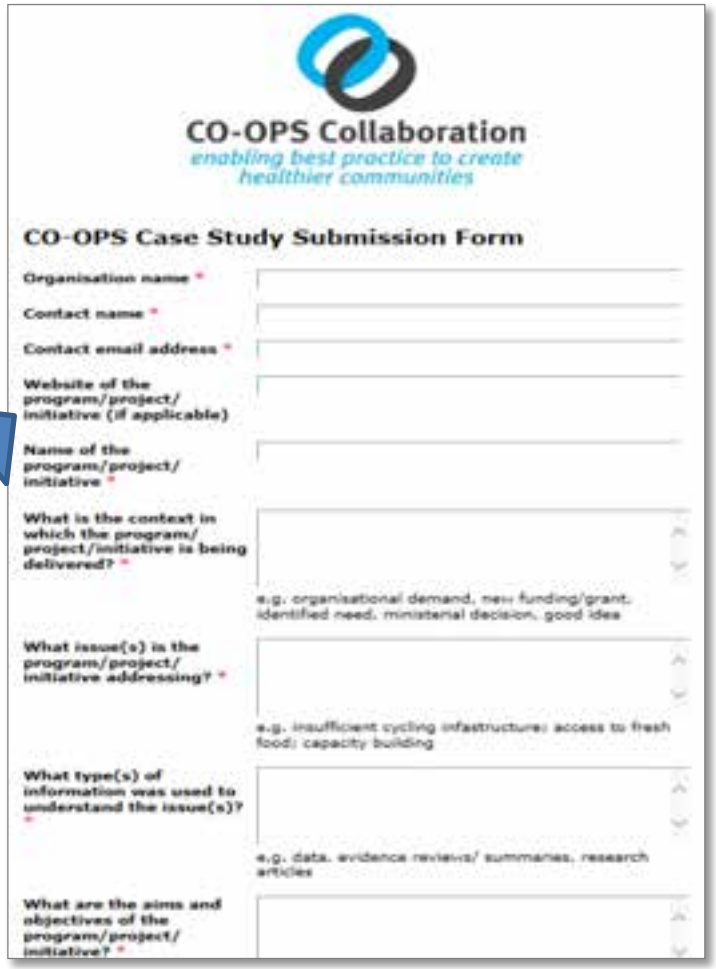
Governance and accountability

G1. Funding G2. Management

www.**co-ops**.net.au

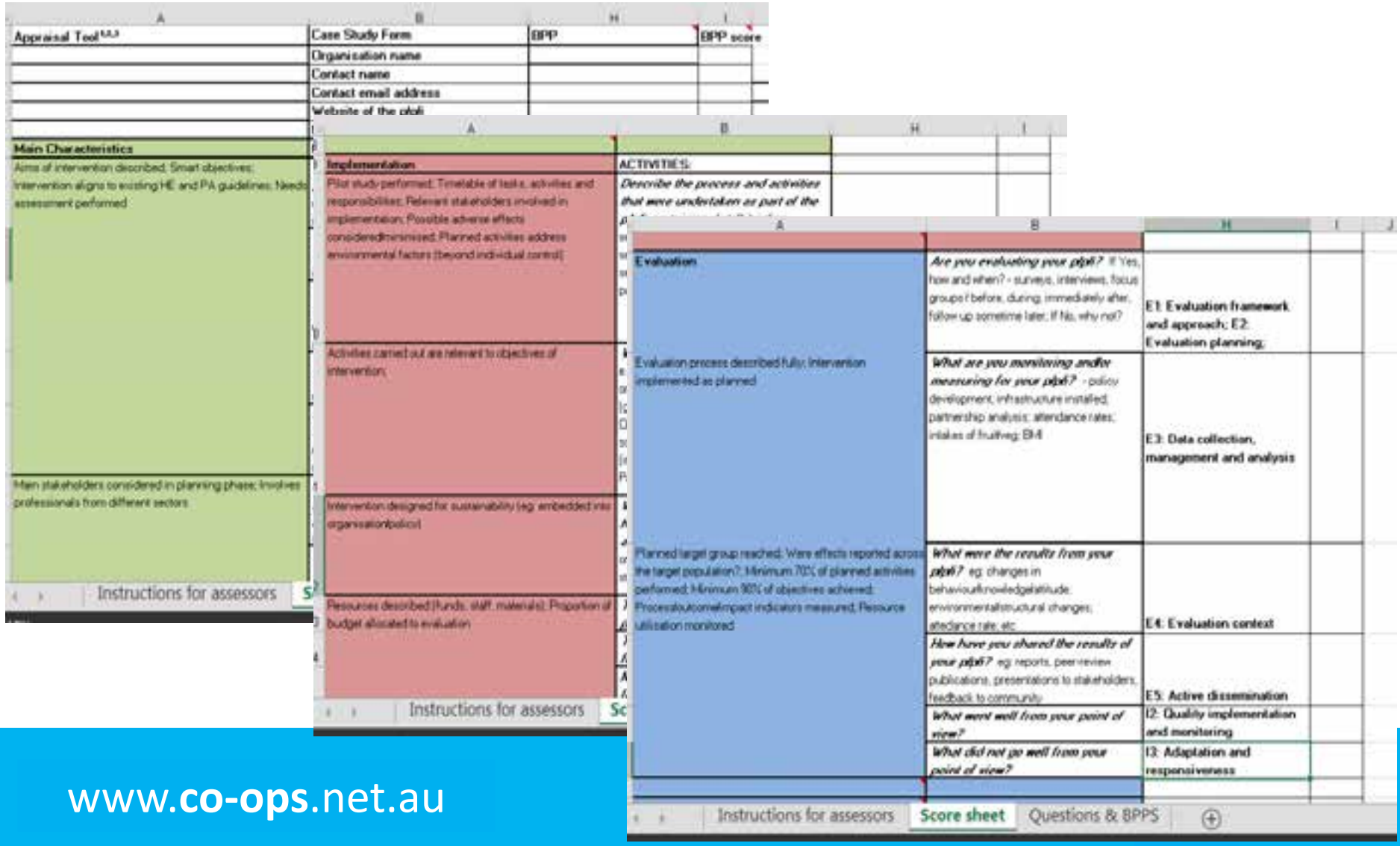
Case Study Template

CO-OPS Collaboration
enabling best practice to create healthier communities



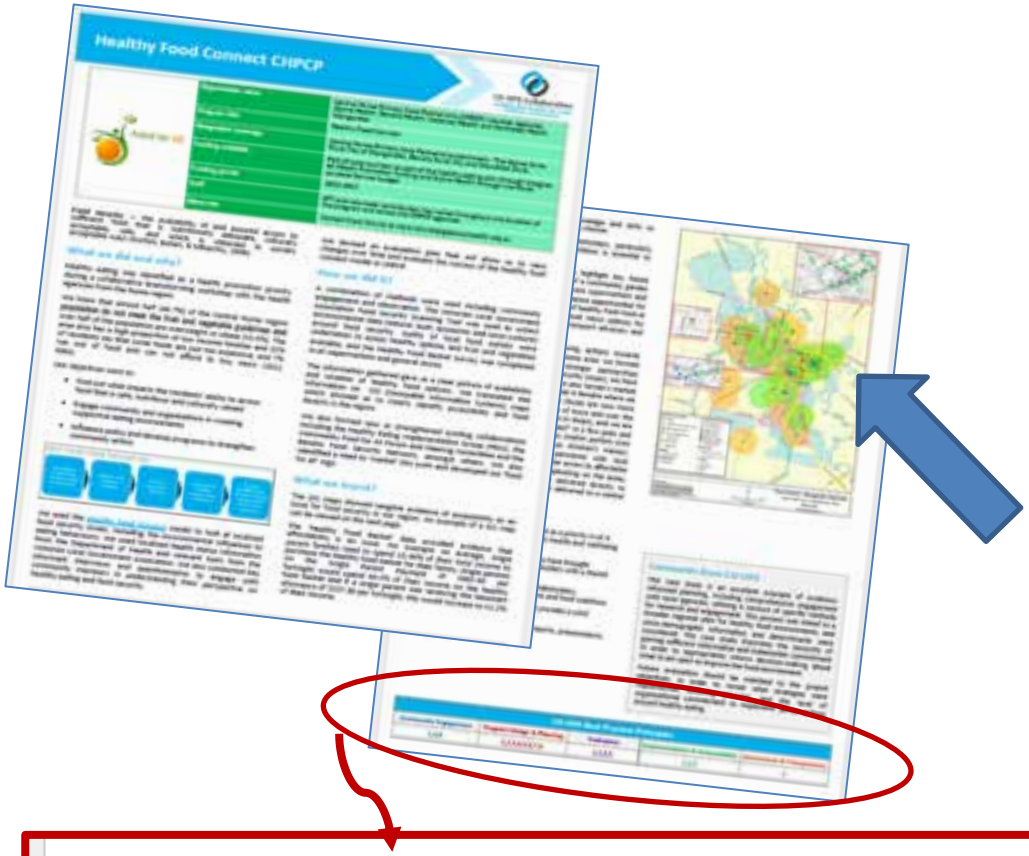
CO-OPS Collaboration
enabling best practice to create healthier communities

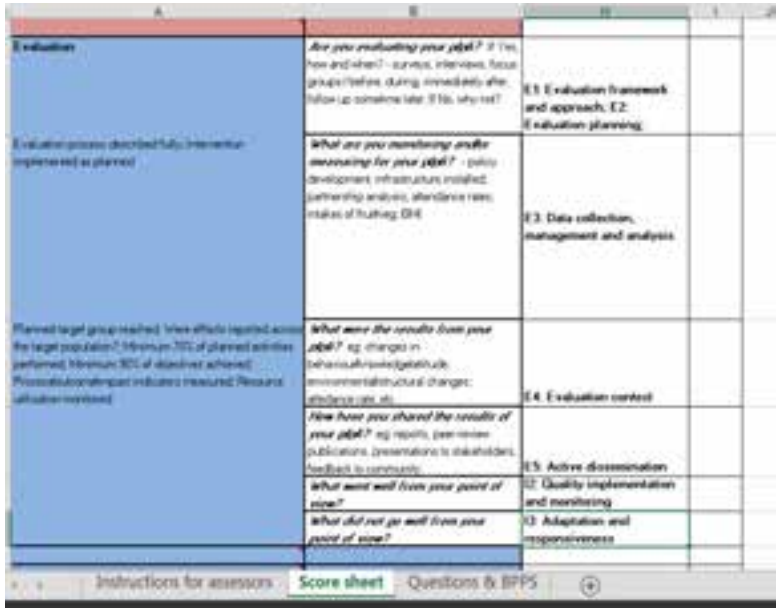
Case Study Appraisal Tool



CO-OPS Collaboration
enabling best practice to create healthier communities

Case Study Dissemination



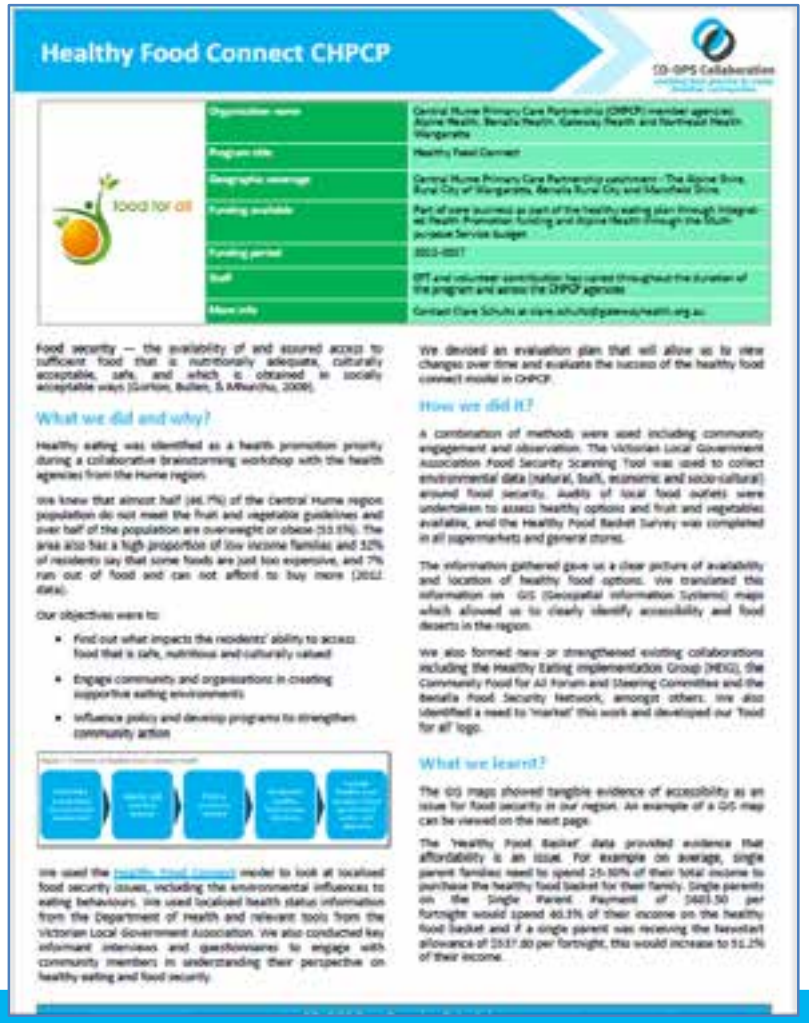


CO-OPS Best Practice Principles				
Community Engagement	Program Design & Planning	Evaluation	Implementation & Sustainability	Governance & Transparency
1,3,4	1,2,3,4,5,6,7,8	1,2,3,5	1,2,3	2

Like @co_ops

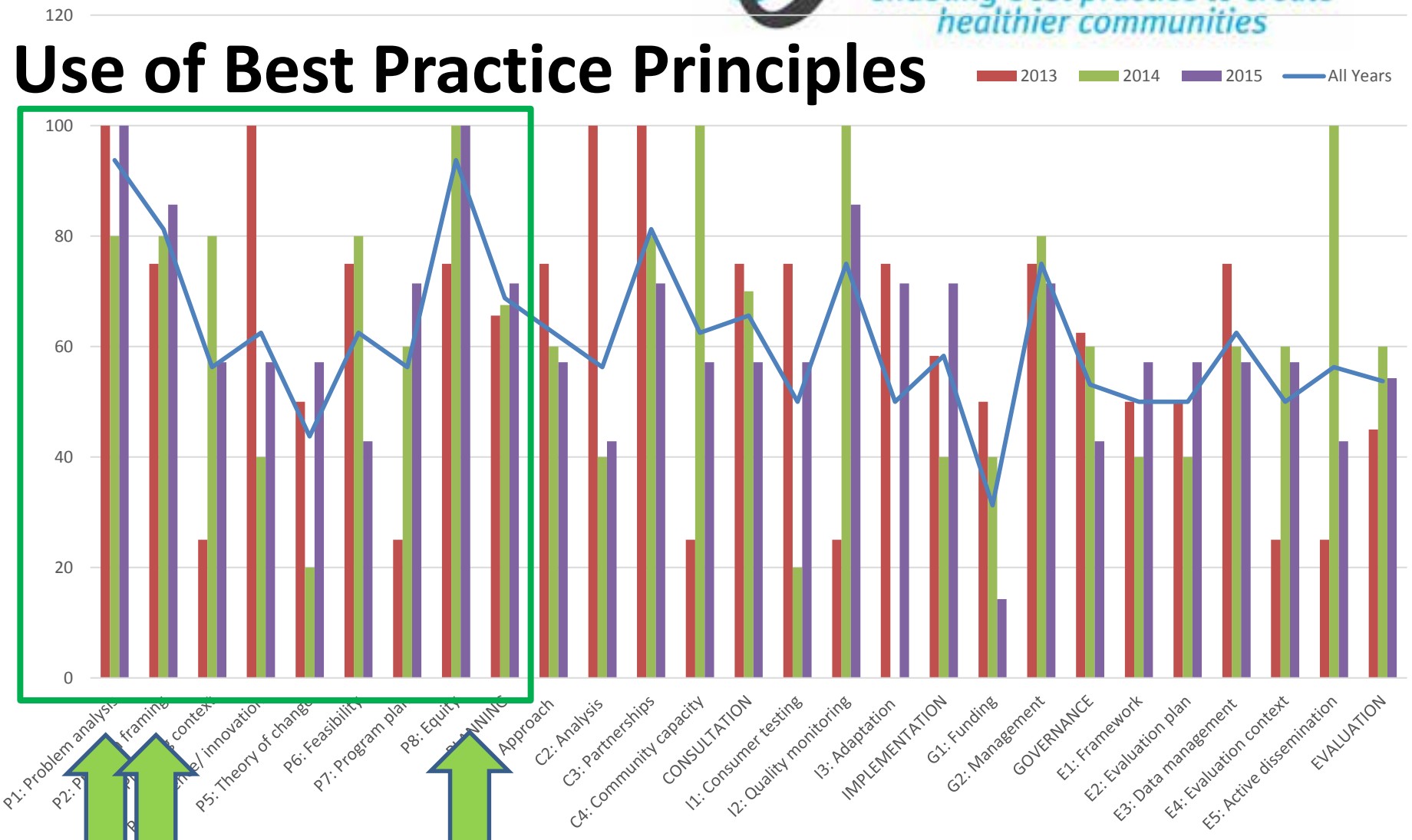
CO-OPS Collaboration
enabling best practice to create healthier communities

Case Study Dissemination



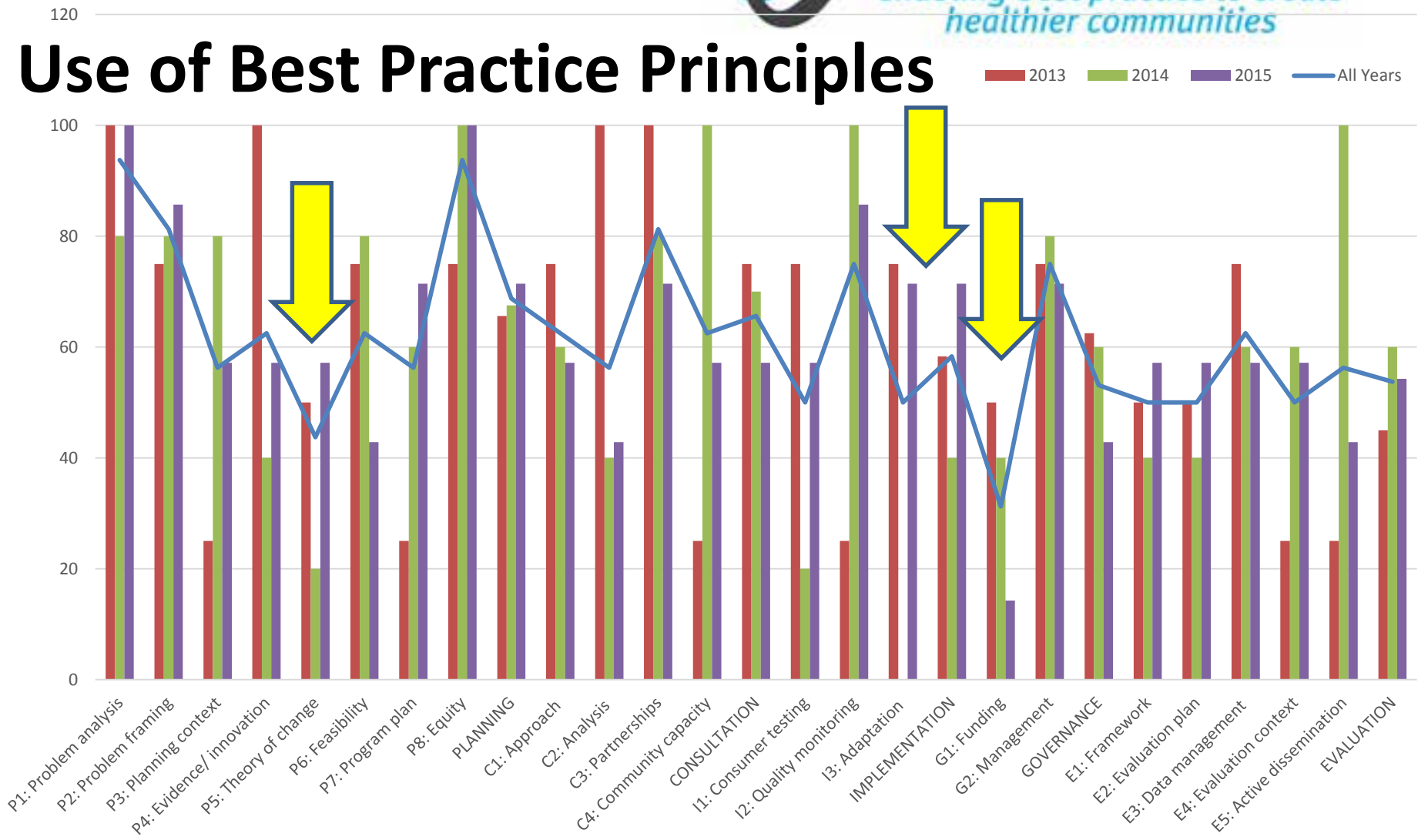
CO-OPS Collaboration
enabling best practice to create healthier communities

Use of Best Practice Principles



CO-OPS Collaboration
enabling best practice to create healthier communities

Use of Best Practice Principles



CO-OPS Collaboration
enabling best practice to create healthier communities

Pettman, Bolton, Love et al (2015). A snapshot of the scope of obesity prevention practice in Australia. Health Promotion International

CO-OPS Collaboration

enabling best practice to create healthier communities

Primary School Fruit and Veggie Co-op

What we did & why?

Active Launceston

Healthy School Football Canteen

Communities Latching on to Breastfeeding

Organisation name	Central Hume Primary Care Partnership (CHPCP)
Program title	Communities Latching on to Breastfeeding
Geographic coverage	Rural City of Wangaratta with plans to extend across the entire CHPCP area
Funding available	Campaign was part of the general activities of the PCP
Funding period	2012 - 2017
Staff	0.3 EFT
More info	www.humehealth.com.au/having-a-baby/breastfeeding

What we did and why?

Available data (from our Parents' Needs Survey and localised health status information) showed low breastfeeding rates and a need for additional support for breastfeeding mothers in the Central Hume Primary Care Partnership (CHPCP) area.

Our data suggested that there is a large drop off in breastfeeding rates at 3 months after birth and that the main reason for discontinuing breastfeeding is a lack of support. The World Health Organisation (WHO) states that breastfeeding is the best way to provide newborns with the nutrients they need, and encourages exclusive breastfeeding for the first six months of life. Research has also suggested that breastfeeding does not just benefit the infant, but has a number of positive health implications for mothers.

In an effort to provide additional supportive environments for breastfeeding mothers and increase the opportunity to and likelihood that women will breastfeed for longer periods, we started a social marketing campaign called "Communities Latching on to Breastfeeding" (CLOB).

How we did it?

The Health Promotion staff located at Gateway Health, Northeast Health Wangaratta and Women's Health Goulburn North East have worked collaboratively to increase breastfeeding duration rates, an objective under our broader work of increasing healthy eating for children. We undertook a developmental process to design a campaign that would raise community awareness and advocate for an increase in community support:

- We engaged with potential partners including various health services, the Australian Breastfeeding Association (ABA), Maternal and Child Health (MCH) services, the local lactation clinic, local businesses, Council and the local media.
- We organised a social marketing workshop to develop the campaign brand and messages. MCH nurses, lactation consultants and other PCP members were invited to attend. We identified barriers and enablers that would support our work and goals and developed a clear vision for our campaign, which gave us direction to finalise our logo and tagline for the campaign.
- At the same time that our campaign was shaping up, Council was looking at the state of the baby change rooms facilities in Wangaratta. We formed a working group with Council staff, members of the ABA, the lactation clinic and MCH staff. Together we created a survey that captured information, not only about the facilities, but local community perceptions of breastfeeding. The survey was distributed to parents in the Local Government Area. The major themes from the survey were that facilities were poor, families were limiting their shopping time and they were unsure where feeding a baby was acceptable.
- To encourage driving messages, we used existing resources as part of our campaign (WHO World Breastfeeding Week posters) and promoted existing programs (ABA Welcome Here Program - a program aimed at improving community acceptability of breastfeeding in public through the promotion of breastfeeding friendly premises).
- We launched an event with service providers and parents to introduce the campaign and contacted a local journalist to publicise the campaign and key messages. The strong relationship formed with the media allows us to sustain a public presence for the project.

What we learnt?

An evaluation plan has been developed and we are monitoring the following information:

- **Quantitative data**: number articles in the local newspaper, number of organisations utilising our resource kit, webpage visits and downloads, breastfeeding rates (through MCH service).
- **Qualitative data**: anecdotes from service providers and health professionals as well as feedback from businesses regarding the ABA breastfeeding welcome here sticker on their premises.
- **Pre and Post surveys**: the initial survey investigating the needs of parents in the Wangaratta community and the cultural acceptability of breastfeeding was administered in 2013. The same study will be re-administered in May 2015, tracking changes over time and measuring changes in the needs of parents, facilities available, community/family friendliness and cultural acceptability of breastfeeding. The May 2015 survey will also gain information on CLOB brand recognition and the needs of fathers when caring for their babies in the community.

OPAL—Playford: Creating a healthier Davoren Park IGA

Organisation name	Bit Health
Program title	OPAL—Playford: Creating a healthier Davoren Park IGA
Geographic coverage	Davoren Park, City of Playford, South Australia
Funding available	$500

Healthy Food Connect CHPCP

Organisation name	Central Hume Primary Care Partnership (CHPCP) member agencies: Alpine Health, Benalla Health, Gateway Health and Northeast Health Wangaratta
Program title	Healthy Food Connect
Geographic coverage	Central Hume Primary Care Partnership catchment - The Alpine Shire, Rural City of Wangaratta, Benalla Rural City and Mansfield Shire.
Funding available	Part of core business as part of the healthy eating plan through Integrated Health Promotion funding and Alpine Health through the Multi-purpose Service budget.
Funding period	2013-2017
Staff	EFT and volunteer contribution has varied throughout the duration of the program and across the CHPCP agencies
More info	Contact Clare Schuhs at clare.schuhs@gatewayhealth.org.au

Food security — the availability of and assured access to sufficient food that is nutritionally adequate, culturally acceptable, safe, and which is obtained in socially acceptable ways (Gorton, Bullen, S, &Marchiu, 2008).

What we did and why?

Healthy eating was identified as a health promotion priority during a collaborative brainstorming workshop with the health agencies from the Hume region.

We knew that almost half (46.7%) of the Central Hume region population do not meet the fruit and vegetable guidelines and over half of the population are overweight or obese (53.6%). The area also has a high proportion of low income families and 52% of residents say that some foods are just too expensive, and 7% ran out of food and can not afford to buy more (2012 data).

Our objectives were to:

- Find out what impacts the residents' ability to access food that is safe, nutritious and culturally valued
- Engage community and organisations in creating supportive eating environments
- Influence policy and develop programs to strengthen community action

We used the Healthy Food Connect model to look at localised food security issues, including the environmental influences to eating behaviours. We used localised health status information from the Department of Health and relevant tools from the Victorian Local Government Association. We also conducted key informant interviews and questionnaires to engage with community members in understanding their perspective on healthy eating and food security.

We devised an evaluation plan that will allow us to view changes over time and evaluate the success of the healthy food connect model in CHPCP.

How we did it?

A combination of methods were used including community engagement and observation. The Victorian Local Government Association Food Security Scanning Tool was used to collect environmental data (natural, built, economic and socio-cultural) around food security. Audits of local food outlets were undertaken to assess healthy options and fruit and vegetables available, and the Healthy Food Basket Survey was completed in all supermarkets and general stores.

The information gathered gave us a clear picture of availability and location of healthy food options. We translated this information on GIS (Geospatial information Systems) maps which allowed us to clearly identify accessibility and food deserts in the region.

We also formed new or strengthened existing collaborations including the Healthy Eating Implementation Group (HEIG), the Community Food for All Forum and Steering Committee and the Benalla Food Security Network, amongst others. We also identified a need to 'market' this work and developed our 'food for all' logo.

What we learnt?

The GIS maps showed tangible evidence of accessibility as an issue for food security in our region. An example of a GIS map can be viewed on the next page.

The 'Healthy Food Basket' data provided evidence that affordability is an issue. For example on average, single parent families need to spend 25-30% of their total income to purchase the healthy food basket for their family. Single parents on the Single Parent Payment of $683.50 per fortnight would spend 40.3% of their income on the healthy food basket and if a single parent was receiving the Newstart allowance of $537.80 per fortnight, this would increase to 51.2% of their income.

CO-OPS Collaboration
enabling best practice to create healthier communities

CO-OPS is a collaboration between

DEAKIN UNIVERSITY AUSTRALIA | Worldly

THE UNIVERSITY OF SYDNEY

THE UNIVERSITY OF MELBOURNE

Flinders UNIVERSITY

www.co-ops.net.au

Email admin@co-ops.net.au