

# cohealth: Health Promotion Action Plan

**2023-24**

**31/08/2023**

# Table of Contents

<b>1. Introduction.....</b>	<b>2</b>
1.1 Summary.....	2
1.2 Summary of settings and populations groups.....	2
1.3 Summary of approaches used in health promotion. ....	3
1.4 Partnerships.....	4
<b>2. Health Promotion Interventions.....</b>	<b>5</b>
2.1 Increasing Healthy Eating.....	5
2.1.1 Healthy Eating alignments to policy or frameworks.....	7
2.2 Increasing Active Living.....	7
2.2.1 Active Living alignment to policy or frameworks.....	9
2.3 Reducing tobacco and e-cigarette/vaping related harm.....	9
2.3.1 Reducing Tobacco, e-cigarette/vaping related harm alignment to policy or frameworks.....	9
2.4 Gender Equity/ Preventing Violence Against Women.....	10
2.4.1 Gender Equity/PVAW alignment to policy or frameworks.....	11
2.5 Mental Health.....	11
2.5.1 Mental Health alignment to policy or frameworks.....	12
2.6 Other Project.....	13
2.6.1 Other project relevant alignment to policy or frameworks.....	14

cohealth acknowledges the Traditional Custodians of the land and waterways on which we live and work. We pay respects to Elders past, present and emerging. We acknowledge the Stolen Generations and the historical and ongoing impact of colonisation on Aboriginal and Torres Strait Islander peoples. cohealth recognises the resilience, strength, and pride of Aboriginal and Torres Strait Islander communities. First Nation peoples' living culture is the oldest continuing culture in the world, and the land and waterways are a place of age-old ceremonies of celebration, initiation, and renewal.

**cohealth welcomes the invitation of Aboriginal and Torres Strait Islander people to participate in action towards a better future, specifically through supporting a Voice to Parliament being enshrined in the Constitution.**

# 1. Introduction

## 1.1 Summary

This document provides an overview of cohealth health promotion activities for 2023-2024 funded by Community Health- Health Promotion (CHHP) from the Department of Health. This is the third action plan for the CHHP 2021-2025 program period. The projects within this action plan are predominately in the focus areas of healthy eating (8 projects), active living (5 projects), reducing tobacco and vaping-related harm (1 project), mental health (3 projects) and gender equity (3 projects) which align to the Victorian Public Health and Wellbeing Plan 2019-2023 (see table 1). For ease of documentation, projects are placed in one focus area; however, we note that some projects may impact more than one focus area and have secondary benefits. The health promotion budget cuts reduced health promotion staffing FTE, project number, and scope compared to previous years. Despite this challenging transition period and reduced capacity, we have developed this action plan to deliver impactful health promotion initiatives effectively. Over time, we have strengthened partnerships, allowing further activity development in projects from the previous year.

Key Outcomes	Indicators linked to projects	Total projects
1.1: Victorians have good physical literacy	Increase self-rated health	1
1.2: Victorians have good mental health	Increase mental wellbeing	4
1.3: Victorians act to protect and promote health	Increase healthy eating & active living.	15
	Reduce smoking	1
2.1 Victorians live free from abuse and violence	Reduce prevalence and impact of family violence	4
3.2 Victorians participate in and contribute to the economy	Increase labour market participation	1
3.3 Victorians have financial security	Decrease financial stress	2
4.1 Victorians are socially engaged and live in inclusive communities	Increase connection to culture and communities.	9
	Increase access to social support	
4.2 Victorians can safely identify and connect with their culture and identity	Increase tolerance of diversity	4

## 1.2 Summary of settings and populations groups

The projects outlined in the action plan work with a range of population groups, including:

- Children and their families aged 0-4 years old.
- Primary and secondary-aged students, particularly female and gender-diverse people.
- People who have culturally and linguistically diverse backgrounds, including refugees and people seeking asylum
- People or families experiencing low socioeconomic status.
- Women
- LGBTQIA + Communities
- Aboriginal and Torres Strait Islanders

We typically work with settings across the City of Yarra, the City of Melbourne, Moonee Valley City Council or Maribyrnong Council areas. These settings include playgroups, primary and secondary schools, sports clubs, community-based settings, and workplaces (see Table 2).

**Table 2: Summary setting type alignment to focus area and total project number.**

Setting Type	Focus Area	Total projects
Playgroups, Early Learning Centres	Healthy Eating	1
Primary Schools	Healthy Eating	1
	Gender Equity	1
Secondary Schools, including secure welfare	Healthy Eating	2
	Active Living	3
Sports Clubs	Healthy Eating	1
	Active Living	1
	Gender Equity	1
Community-Based Settings (e.g., library, youth service, arts centre)	Healthy Eating	1
	Active Living	1
	Vaping	1
	Mental Health	1
Workplaces	Healthy Eating	1
	Gender Equity	1

## 1.2 Summary of approaches used in health promotion.

cohealth health promotion team utilise a range of approaches when planning, implementing, and evaluating projects, including the following approaches.

- A **Health Promotion approach** aligned with the Ottawa Charter for Health Promotion ([WHO 2023](#)). Fundamental principles underpinning this approach include working in partnership towards equity in health and wellbeing through participatory and empowering engagement with settings and communities.
- A **social determinants approach aligned** with the Victorian Public Health and Wellbeing Plan ([Vic Gov 2019, p7](#)). We understand that health is driven by a complex range of factors beyond the individual. Individual identities intersect with these determinants through exposure to overlapping forms of marginalisation and discrimination ([Vic Gov 2021](#)), leading to an **intersectional approach** on every issue.
- We take a **value-based approach** aligning with [organisational](#) and team values. cohealth has a long-standing commitment to a human rights approach (WHO,2022) because we understand that discrimination and exclusion directly impact health and well-being.
- We apply a **creative approach** involving working with artists and different art forms in a collaboration process with target communities, producing a creative outcome and encouraging participation, creativity, and activation ([Centre for Creative Health, 2022](#)).
- We embrace the participation, influence, and leadership of people with **lived experience** ([Vic Gov, 2023](#)). We use **codesign practices** ([Vic Gov, 2023](#)) and collaboratively problem-solve challenges with the community's experiences and knowledge and with respect to their needs and preferences.
- We adopt a **whole school** approach when creating health-promoting environments in schools or early learning centres, including leadership commitment, teaching & learning, culture, policies, and procedures.
- Use **system thinking** to understand interrelated factors of complex public health problems and seek to address or influence population health behaviours ([The Australian Prevention Partnership Centre, 2023](#)). This requires establishing connections and partnerships and engaging in codesign, collective decision-making and reflective learning.

- A **community-led approach** ([Dailly and Barr, 2008](#)) to ensure that we are community engaged and our health promotion activities are community-led across project stages.
- Implementing a **culturally safe approach** ([Vic Gov, 2023](#); [Curtis et al., 2019](#)) in our work enables an environment that is safe for people to be respected, listened too and removes barriers in project design and delivery to ensure that cultural values and practices are not negatively impacted.
- A **strengths-based** approach to ensure we centre the abilities, knowledge, and capacity of groups we collaborate with ([Department of Social Services, 2016](#)).
- We use both an **evidence-based** and **evidence-informed approach** ([McMaster University, 2023](#); [Alla and Joss, 2021](#)) to health promotion. We recognise and utilise academic publications that uphold high standards in public health practice. However, where limited research is available, we consider grey literature, local settings or community knowledge, skills, and resources to inform health promotion practices.

### 1.3 Partnerships

cohealth health promotion team values our relationships with stakeholders and their ongoing commitment to projects outlined in this document. The project tables below include an extensive list of project partners (n>30) who contribute their time, knowledge, and resources. This includes local government, school leadership, public health units, other health promotion organisations such as Women in the North, Gen West, local community groups and sports and volunteers. We recognise that without them, the impact of these projects would not be possible!

## 2. Health Promotion Projects

### 2.1 Increasing Healthy Eating

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Culturally appropriate healthy eating resources	cohealth Shop Bao Ngoc (SBN) Vietnamese community	1. To reduce barriers to culturally healthy food with a specific focus on Vietnamese communities by: <ul style="list-style-type: none"> <li>Increasing awareness of the benefits and strengths of cultural foods and dietary guidelines.</li> <li>Increasing accessibility to affordable healthy food for families and communities when cooking at home or community events (catering at scale)</li> <li>Increasing opportunities for healthy eating through social participation and intergenerational sharing.</li> </ul>	Codesign healthy eating recipes and resources development, implementation, and evaluation plan in partnership with SBN	3-5 workshop outlines, including evaluation plan.	Participants who report an increased awareness of the health benefits and strengths of cultural foods  Participants increase confidence in home and community cooking using cost-effective strategies and healthy eating principles.  Reach and number of engagements, impressions and clicks from social media posts.  Case study demonstrating exchange of knowledge and skills related to culturally healthy eating.
			Conduct 3-5 workshops to develop healthy eating resources.	3-5 codesign workshops  Number of participants at each workshop  Age range of participants  Healthy eating resources: <ul style="list-style-type: none"> <li>1 Recipe zine</li> <li>3 to 5 recipe cards</li> <li>1-page printable resource</li> <li>3-5 videos for social media</li> </ul>	
			Launch: community event of recipes with participation from partners, community groups and members from representative cultural groups.	1 Launch event.  Number attending the launch event.	
			Development of a dissemination plan (for implementation in Year 2)	Dissemination plan for recipes and resources	
Breastfeeding-friendly community spaces	Australian Breastfeeding Association (ABA)  Moonee Valley Council (MVC)  Maribymong Council (MC)  cohealth	1. To increase breastfeeding-supportive community spaces in Moonee Valley, Maribymong and within cohealth to support, protect and promote breastfeeding practices using ABA Breastfeeding is Welcome Everywhere Program (BWEPE).	Establish partnerships with community settings in MV to create breastfeeding-supportive environments.	1-4 capacity-building workshops on breastfeeding friendly public spaces delivered to management and staff of participating community settings & cohealth sites.	Number of new community settings recognised as breastfeeding welcoming settings by ABA.  Proportion of staff participated in capacity-building workshops, reporting increased knowledge to support breastfeeding parents.  Proportion of staff participating in capacity-building workshops reported increased confidence in supporting breastfeeding parents in their community settings.
			Engage additional community settings in MC to expand BWEPE.	Number of staff from community settings and cohealth sites participating in capacity building workshops.	
			Scope implementation of BWEPE, including establishing supportive internal partnerships at cohealth.	8 community settings & 3 cohealth locations implement BWEPE.	
			Establish a working group to drive local actions to promote breastfeeding in MV.	6 working group meetings to drive local actions & promote breastfeeding.	
INFANT program-cultural adaptation	cohealth (lead) WPHU	1. To assess the accessibility (reach and impact) of an evidence-based INFANT program for Punjabi-speaking communities with children aged 0- 3 years old in Wyndham local government area.	Maintain partnership with WPHU and relevant stakeholders	4-6 meeting with WPHU  Meeting with INFANT and Wyndham Council	Stakeholders have increased their understanding of the barriers, enablers, and cultural needs/considerations of the Punjabi-speaking community in accessing and engaging with the INFANT program.
			Recruitment of BCW	Onboarding of BCW	
			Upskill BCW and HPO in the INFANT program.	Bicultural worker & HPO upskilled in the INFANT program.	
			Conduct 2 session focus group with Punjabi-speaking participants to: <ul style="list-style-type: none"> <li>Examine the enablers, barriers, and cultural needs/considerations to participation in the INFANT program.</li> <li>Evaluate the cultural appropriateness of previously INFANT translated resources.</li> <li>Provide focus group participants with evidence-based information and linkages to INFANT services.</li> </ul>	Focus group conducted with the Punjabi community.	
Develop and disseminate evaluation findings with recommendations for stakeholders.	Evaluation report +/- a presentation				
	cohealth		Re-engage MUSC leadership on VKEW in response to volunteer absence in a previous financial year.	1-4 meetings with the MUSC committee	Number and type of VKEW small bites achieved.

cohealth: Health Promotion Action Plan

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Maidstone Unified Soccer Club (MUSC) –	MUSC VKEW	1. To improve healthy eating environments at MUSC using VKEW small bite changes during soccer season 2024: <ul style="list-style-type: none"> <li>Water is promoted and is freely available.</li> <li>Switch to healthier drinks</li> </ul>	Establish a VKEW action plan at MUSC in line with previous needs assessments.	1 VKEW action and evaluation plan (*subject to planning)	Other changes to knowledge, attitudes, behaviour, organisational policy, and practices as identified in the evaluation plan.
			*Support MUSC to implement their VKEW action plan, aligned with VKEW bites.	1 or more actions implemented to drive VKEW bites.	
			*Evaluate changes implemented.		
Ascot Vale Secure Welfare Food Overhaul	cohealth Ascot Vale Secure Welfare Campus (AVSW) VKEW	1. To create a healthy eating environment for children by using VKEW to make small bite changes: <ul style="list-style-type: none"> <li>Boost veggies &amp; salad</li> <li>Switch to healthier snacks</li> </ul> 2. To increase DE Teachers' knowledge, skill, and use of tools for healthy eating.	Development of a food services list for students to access fresh produce and healthy when leaving secure welfare to be re-homed.	Food services Flyer for AVSW students	Number and type of VKEW small bites achieved.  Other changes to the knowledge of teachers and practices as identified in the evaluation plan
			Capacity building of DE Teacher(s), e.g., cultural safety and food, Nutrition, and co-benefits to mental health	1-2 capacity-building sessions for Teaching staff (Hospitality)	
			Introduce DE Teacher(s) to HEAS and FoodChecker and utilise these tools to review recipes	1-4 meetings with Hospitality Teacher / DE Campus Staff Two recipes with an increase in the serves of vegetables	
			Development of tips sheet on VKEW snack foods options for setting staff	Tips sheet on VKEW snack foods options	
			Implementing VKEW small bite changes	Menu including recipes with increased number of vegetables	
Maribymong Secure Welfare Food Overhaul	cohealth Maribymong Secure Welfare Campus (MSW) VKEW	1. To create a healthy eating environment for children using VKEW 2. To increase the knowledge and skill development of DE Teachers.	Complete VKEW Baseline Survey.	Completed VKEW Baseline Survey	Needs assessment completed.  Number and type of VKEW small and big bites identified.
			Identify relevant VKEW Small Bites and develop an action plan.	1 Healthy Eating Action Plan	
			Explore opportunities for capacity building based on Achievement program baseline findings for Campus staff.	1-4 meetings with Hospitality Teacher / DE Campus Staff Capacity building opportunities identified for hospitality teaching staff	
Carlton Learning Precinct (CLP) Healthy Eating Initiative	cohealth Carlton Primary School (CPS) Gowrie Early Learning City of Melbourne (CoM) Playgroups Our Place groups	1. To create a healthy eating environment for children and families attending the Precinct. 2. To improve children's and families' knowledge and skills in healthy eating.	Facilitation of Brainfood Session Series for children and families	2 Brainfood Sessions for Parents at Our Place 4 Brainfood Sessions (CoM Parents playgroup x2 and Small Talk x2) 2 Brainfood Sessions for CPS students 1 Brainfood Sessions for Gowrie 4 yr. old kinder students (Benchmark 4: Child Teaching and Learning)	Gowrie Early Learning CLP number and type of Achievement Program Benchmarks Measure's achieved.  Proportion of parents reporting increased knowledge on switching to healthier snacks  Number of students demonstrating increased knowledge in switching to healthier snacks
			Development of Gowrie CLP Healthy Eating Achievement Program Action Plan	Gowrie Early Learning CLP registered for the Achievement Program Development of HE policy for Gowrie CLP (AP Benchmark 1: Leadership and Commitment)	
			Maintain partnerships and consult with local stakeholders. Share findings and project updates with CLP Practice Group	1-3 meetings with CLP Practice Group Summary report and recommendations produced	
Strengthening oral health	cohealth	1 Optimise oral health staff understanding of catchment population data and access to oral health services	Analyse past dental patient data to understand demographic and utilisation factors of the catchment population's engagement with dental services	Data profile of past dental patients	The Oral Health team can use population health data to inform potential improvements to catchment population access and use of oral health services.
			Develop a geographical population profile for each dental service program based on eligibility factors and vulnerabilities within cohealth dental catchment.	Population data summary in cohealth catchments	
			Collaboration with the dental team to enhance understanding and applicability of analysis findings to improving oral health access and service.	2 meetings with the dental team to discuss patient and population data	

### 2.1.1 Healthy Eating Alignments to policy or frameworks

- The healthy eating projects above align with aspects of the following:
  - Department of Education: [Canteens, Healthy Eating and Other Food Services Policy](#)
  - Healthy Eating Advisory Service: [Menu Planning Guidelines](#)
  - Victorian Government: [Healthy Choices Guidelines](#)
  - Victorian Government: [Healthy Kids, Healthy Futures Action Plan](#)
  - Australian Breastfeeding Association: [Australian National Breastfeeding Strategy: 2019 and Beyond.](#)
  - Cancer Council: [Vic Kids Eat Well](#)
  - [Health Promoting Schools Model and Achievement Program](#)
  - [INFANT program](#)

## 2.2 Increasing Active Living

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (indicators)
Mount Alexander College (MAC)	cohealth MAC	1. Increase female and non-binary students' participation in sports, recreation, or physical activity.  2. Strengthen connections to local partners and sporting organisations.  3. Increase staff knowledge and confidence in physical literacy.	Delivering a codesign session with student leadership to ensure student voice is included in the planning process	1 codesign session with student leaders  Disseminate report on codesign session findings to student leaders and key MAC staff.	Students participating in the school health day reported increased knowledge of physical literacy.  Number of staff reporting increased knowledge of physical literacy  Staff reporting increased confidence in supporting students to participate in physical activity.  Proportion of girls and gender-diverse students participating in before-school physical activity programs reporting increased levels of physical activity
			Codesign a 2-Year Action Plan for improving Female and non-binary student's participation in physical activities	4 working group meetings with MAC leadership  1 Action and evaluation plan developed (*subject to planning)	
			*Enable MAC in delivering school health day.	Number of students participating in school health days activities  6 active sessions facilitated by Moonee Valley MOVE at the school health day	
			*Delivery of ACHPER capacity-building workshops for MAC staff to enable promoting of physical literacy to students.	Number of Staff attending capacity training  1 capacity-building workshop for MAC staff to promote physical literacy for students facilitated by ACHPER.  Number of local partners and sporting organisations connected to the school	
			*cohealth connects the school to local partners and sporting organisations for the school nurse to deliver before-school activities.	Number of girls and non-binary students participating in before-school physical activity program  Evaluation report summarising key findings and recommendations on activities delivered.	
Wurun (Senior Campus)	cohealth Collingwood College	1. Increase female and non-binary students' participation in sports, recreation, or physical activity.	Deliver a co-design session with students (from FGD) to ensure student voice is included in the planning process.	1 co-design session with students who attended FGD.  Number of students participating in codesign sessions with gender disaggregation	Proportion of staff attending Needs Assessment briefing who report an increased understanding of barriers to physical activities in students.  Proportion of students who participate in lunchtime sessions reporting increased participation in physical activity.
			Share findings and recommendations from Needs Assessment with Wurun staff to establish a shared understanding of the baseline and build collective engagement and ownership.	Needs Assessment Summary findings (briefing) for Wurun Staff, including recommendations of positive roles staff can take	
			Support Wurun to develop a Physical Activity Action Plan	1 Wurun Physical Activity Action Plan (*subject to planning)	



cohealth: Health Promotion Action Plan

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (indicators)
			*Commence implementation of Physical Activity Action Plan	Lunchtime physical activities for students x2 (Term 4 2023, Term 1 2024) Number of students attending lunchtime physical activities sessions 1-3 feedback sessions with students or staff on the implementation of the Action Plan Evaluation report summarising key findings and recommendations on activities delivered.	
MUSC & WELS	cohealth Maidstone United Soccer Club (MUSC) Western English Language School (WELS)	1. Increase female and CALD WELS student participation in sport, recreation, or physical activity utilising a physical literacy framework focusing on elements of society and culture, connection to place and motivation.	Establish and support the partnership between WELS and MUSC Develop a shared project, implementation, and evaluation plan Conduct 1-2 focus groups to identify barriers, enablers, and opportunities to increase physical literacy in identified element areas. *Implement community and sports engagement activities at WELS and MUSC, including: • 3 x 3 blocks of MUSC-led soccer clinics delivered in PE class. • Gala day bring together student level that participated in soccer clinics Complete evaluation and reporting of key activities Support MUSC in implementing their Change Our Game grant events	3-6 meetings with WELS/MUSC stakeholders 1 Project plan 1 focus group with 6-8 students *Summary of focus group findings & recommendations to inform soccer clinic and gala day 3 MUSC soccer clinics 1 gala day Project report to inform future physical activity plans 3 events delivered	Number and type of CHHP Active Living ICF small steps achieved.  Other changes to knowledge, attitudes, behaviour, organisational policy, and practices as identified in the evaluation plan.
Transomatics	Sarinah Winoto (Transomatics practice founder) Arts Gen	1. Increasing accessibility of trans and gender-diverse safe active living resources 2. Identify 2 elements in physical literacy framework that can be embedded into the workshop design, resource use and trainer toolkit.	Development of project plan, including workshop outlines Conduct 2-3 closed co-design workshops to scope and develop resources Conduct focus group to test resources Update resource and launch at a community event Development of a toolkit for future trainers to support utilisation of new resources	1 Project Plan, including an evaluation plan. 2-3 workshop outlines 2-3 active living resources Number of people who participated in active living during workshops. Summary report of focus group feedback 1 Launch Event Number of people at the launch event Number of engagements, impressions and clicks on Instagram Trainer toolkit	Proportion of workshop participants who identified this active living practice as a safe and inclusive gender-diverse practice.  2-3 evaluation indicators based on elements within the physical literacy framework.
Rainbow Ready Program	Proud2Play Richmond Rowing Club Kensington City Soccer Club Melbourne Social Soccer Club Melbourne Ice	1. To increase safe and inclusive sports clubs for LGBTQIA community. 2. To increase LGBTQIA+ person participation in sports.	Onboard 3 sports clubs to the Rainbow Ready Program (RRP).  Conduct assessment at 4 sports clubs. Complete process evaluation survey at the end of the assessment phase Conduct education phase across 3 clubs.	3 meetings to onboard clubs to RRP. 3 working groups from each club. Number of club members in each working group.  3 completed Rainbow Ready Club assessments. 3 assessment debriefs with (1 per club working group) Number of working group members attending assessment debrief. Summary of assessment phase process evaluation findings 4-6 education sessions delivered by Proud 2 Play	Total number of sports clubs onboarded to RRP.  Proportion of sports clubs engaged in RRP.  Total proportion of club members who attended education sessions.  Total proportion of club members who attended education sessions reported a change in knowledge, awareness, or confidence in LGBTQIA inclusion.

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (indicators)
	Melbourne Mustangs cohealth		Develop and implement evaluation of the education phase	Proportion of club members (per club) attending each education sessions Proportion of club members (per club) reporting a change in knowledge, awareness, or confidence in LGBTQIA inclusion	
			2 clubs commence consultation phase	1-2 consultation meetings completed	

### 2.2.1 Active Living alignment to policy/ frameworks

- The active living projects above align with the aspects of the following:
  - Sport Australia: [Australian Physical Literacy Framework](#)
  - Local Government: [Women’s participation in Sports and Active Recreation Melbourne’s West: Action Plan for Change 2020 - 2025](#)
  - Victorian Government: [Health Promoting Schools Model and Achievement Program](#)
  - Victorian Government: [Women in Sports Recruitment and Retention Guidelines](#)
  - Victorian Government: [Pride in our Future: Victoria LGBTQIA strategy 2022-32](#)
  - Proud2Play: [Rainbow Ready Program](#)

### 2.3 Reducing tobacco and e-cigarette/ vaping related harm

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (indicators)
Reducing e-cigarette-related harm in young people	cohealth Maribyrnong Youth Services (MYS)	Increase knowledge of youth service staff in health and well-being harms of e-cigarettes. Increase youth service staff knowledge of nicotine cessation (vaping) support options. Increase the capacity of youth service staff to address e-cigarette use	Engage with youth services in Maribyrnong via the Maribyrnong Youth Services and the Maribyrnong Workers with Young People Network (MWYPN) meetings	Engaged with 3-4 youth services in Maribyrnong	CHHP ICF to reduce tobacco and vaping-related harm (7a, 7d, 9a, 9b)
			Plan and deliver e-cigarette education workshops/s	1 e-cigarette education workshop session delivered to youth services in Maribyrnong. Number of Youth Service staff attending an education session	
			Consider replicating with other youth services in cohealth catchment or transferability to other community populations.	Number of e-cigarette education sessions/workshops delivered in other youth services/community populations	

#### 2.3.1 Reducing tobacco and e-cigarette/ vaping related harm alignment to frameworks and strategy.

- QUIT: [Community Health Promotion Framework for Action: Reducing Tobacco-Related Harm](#)
- VicHealth: [Tobacco Strategy 2019 -2023](#)

## 2.4 Gender Equity/ Preventing Violence Against Women

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (indicators)
16 Days of Activism	cohealth Moonee Valley Council (MVCC) Sports clubs in Moonee Valley Moonee Valley Family Violence Network	<ol style="list-style-type: none"> <li>Increase the capacity of the sports clubs in Moonee Valley to create equitable and inclusive environments and cultures for women, girls, and non-binary people.</li> <li>Promote opportunities for women, girls, and non-binary people to safely access and participate in sports and active recreation.</li> <li>Inspire women, girls, and gender-diverse people to be active and participate in sports and active recreation.</li> <li>Increase knowledge of 16 Days event participants on the connection between gender equity, gendered drivers of violence and prevention of violence against women (PVAW).</li> <li>Increase sports clubs' capacity to identify and respond to family violence.</li> </ol>	codesign project and evaluation plan	1 Action and evaluation plan (*subject to planning)	Number of participants accessing 'Come and Try Days' reporting increased motivation for ongoing engagement in sports/ recreational activities.  Proportion of participating club members who report: <ul style="list-style-type: none"> <li>- Increased knowledge of gendered drivers of violence and PVAW</li> <li>- Increased awareness of the connection between gender equity, participation and access to sports and recreational activities and prevention of violence against women</li> <li>- Increased awareness of the importance of creating equitable and inclusive environments and cultures for women, girls, and gender-diverse people</li> <li>- Increased knowledge in identifying and responding to family violence.</li> </ul> Additional relevant evaluation indicators as developed in the evaluation plan
			*Scoping players or coaches to share their stories and experiences.	Summary notes on suitable candidates for activities	
			*Develop and implement activities (e.g., videos) that showcase examples of clubs or female and nonbinary role models from diverse backgrounds.	Number of activities were implemented to showcase inspiring stories of female role models from diverse backgrounds.  Number of people participating/ engaging with the activities	
			*'Come and Try Day/s' at sports clubs.	Number of women and gender diverse people participating in the 'Come and Try Days'.  Summary report on Physical Activity survey on barriers and enablers to participation and physical activity needs	
			*Conduct engagement surveys at 'Come and Try Days' to understand barriers to participation and needs.	1 capacity-building session on gender equity, gendered drivers, PVAW, increasing access and participation and creating equitable, inclusive environments.  1 capacity-building session on identifying and responding to family violence.  Number of sports clubs participating in the capacity-building sessions  Number of club members attending the capacity-building sessions	
Student-led Gender Equality Pilot Project Partnership	cohealth Women's Health in the North (WHIN) Department of Education and Training (DET) One School (TBC)	<ol style="list-style-type: none"> <li>Build the leadership and capacity of students and/or teachers to understand the impacts of gender inequality and the link to gender-based violence.</li> <li>Mobilise students and/or teachers to enable gender-transformative change in their schools and communities.</li> </ol>	Maintain partnerships with WHIN, DET and other stakeholders.	20 fortnightly partnership meetings	Participating students and staff will increase: <ul style="list-style-type: none"> <li>- Knowledge of GE.</li> <li>- Confidence and capability to progress GE action.</li> </ul> Relevant sustainability factors identified as per the implementation plan.
			Support proposed partnership activities: <ul style="list-style-type: none"> <li>Engage school leadership buy-in</li> <li>Info session for school community – carers, staff,</li> <li>Capacity-building workshops for teachers and students</li> <li>Co-design activities, including workshops for students.</li> <li>Implementation of co-designed activities by students</li> <li>Peer mentoring of primary school students by secondary school students</li> </ul>	1 RISEC application completed.  1 partnership agreement with the School.  1-3 capacity-building engagements with school staff.  6-8 workshops delivered with students.  1-2 codesigned student-led projects implemented.	
			Collation of learnings for evaluation and storytelling.	Evaluation report produced and disseminated.	
cohealth BRC Action Plan	cohealth WHIN	1. cohealth strengthens gender equity policies and organisational practices	Implement cohealth Building Respectful Communities Action Plan	6 cohealth BRC working group meetings.  1 monitoring and evaluation document.  4 BRC WHIN meetings.  2 policies  Number of staff communications related to gender equity	Number and type of learning related to gender equity.  Number and type of gender drivers addressed by activity outputs

### 2.4.1 Gender Equity/Prevention of Violence Against Women alignment to policy/ frameworks

- The gender equity and prevention of violence against women projects outlined above align with the following:
  - *Our Watch*: [Change the Story Framework to Prevent Violence Against Women](#)
  - *WHIN*: [Building respectful communities strategy](#)
  - *Department of Education and Training, Victorian Government*: [Respectful Relationships Program](#)

## 2.5 Mental Health

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Marios Gallery	Arts Gen Key artists	1. To improve communities' mental wellbeing through engagement in a community arts space 2. To create a greater representation of priority community in the Arts 3. Understand factors that enhance awareness and participation in health using art-based health activities.	Tailored artist support to develop their artwork using health promotion themes	Produce art for exhibition	Total target audience reached (number and age bracket)
			Support the final artist with the installation /de-installation of the exhibition.	Final exhibition in series	A proportion of people who attended the exhibit experienced an increased sense of inclusion and social connection.
			Coordinate launch event with artist	1 opening night event Number of attendees and the proportion who completed the survey	Total number of artists from the priority community Total number of art pieces that reflect priority community.
			Co-design with artist workshop content and coordinate workshop	1 public program workshop delivered. Number of workshop participants.	Proportion of artists within priority communities feel confident in their art and community-making. Identified number and type of program barriers limiting participation in novel health engagement.
			Develop social media content and promote events, workshops, and exhibit	Reach and number of engagements, impressions and clicks from social media posts.	Thematic analysis of - artist identified opportunities in artistic skill development and support required. - artist awareness, experience, and confidence in health promotion in arts practice
			Develop and implement pre and post artists surveys. Conduct summative evaluations of exhibit series, events, and workshop run Feb 2023- Jan 2024	Evaluation report findings and recommendations for subsequent project improvements.	- Participants definition of inclusion and social connection - Participant awareness and engagement of cohealth and/or arts gen
SHELF	Arts Gen Đất Nước	1. To improve communities' social connection through engagement in a community arts space 2. To create a greater representation of priority community in the Arts 3. To platform strengths of the Vietnamese community that support good mental wellbeing	Maintain partnership with Đất Nước.	3 meetings with Đất Nước. 1 interview with 2 facilitators to develop a case study	Number of artists of priority community
			Co-design workshop content with the artist Identify capability-building knowledge and skills required by group facilitators to support participant's mental well-being.	4 Workshop outline and evaluation plans As required, increase Đất Nước facilitator's confidence, knowledge or skills in mental health and well-being support.	Total number of art pieces that reflect priority community, Total number of attendees from target communities
			Implementation of Đất Nước workshop	Deliver 4 workshops in the Arts Gen space. Number of participants per workshop Proportion of participants who report an increased sense of connection. 1-2 community identified strengths	Number and types of mental well-being strengths identified by the community. Total proportion of participants who report an increased sense of connection.
			Co-develop social media content and promote workshops.	Reach and number of engagements, impressions and clicks from social media posts.	

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Aged Residential Outreach Team x Arts Gen	cohealth	1. Participants experience increased social connection. 2. Exploration of sustainable mental health arts-based programming for AROT clients	Onboarding of Vietnamese artist/group facilitator	1 artist 1 orientation meeting and follow-up as required	Total number of artists of priority community Total number of art pieces that reflect priority community, Total number of attendees from target communities Proportion of participants report an increased sense of social connection. AROT staff reporting an increase in skills, awareness, knowledge, and networks to sustainably continue arts-based mental well-being programs for their clients
			codesign 3x workshops and participant surveys with key stakeholders (artist, AROT staff and Arts Gen)	4 working group meetings Workshop series outline	
			Prepare workshop content and coordinate workshops.	Art packs (per client) Translated evaluation	
			Deliver workshop	3 half-day bilingual artist-led workshops Number of workshop participants	
			Artist fabricates a collective artistic outcome of the participant's works.	1 creation of an artistic outcome per client	
			Implement pre- and post-workshop series evaluation.	1 post workshop debrief. Summary report of recommendations in best practice of arts-based health-promoting programs	
			Explore sustainability options for art-based mental well-being programs to be run by AROT using alternative sustainable funding.	2 follow-up meetings with key stakeholders	

### 2.5.1 Mental Health alignment to policy or frameworks

- The mental health projects outlined above align with the following:
  - Victorian Government: [Victoria's 10-year mental health plan](#)
  - Victorian Government: [Healthy Kids, Healthy Futures Action Plan](#)
  - Australian Government: [National Arts and Health Framework 2014](#)

## 2.6 Other Projects

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Bicultural Program	cohealth	<ol style="list-style-type: none"> <li>Develop participant skills and confidence to act as bi-cultural workers (BCWs) and support employment readiness through professional development, information sharing and networking.</li> <li>Improve the health and well-being of refugee and asylum seeker communities through the delivery of community-led projects.</li> <li>Work in partnership with bi-cultural workers to:                             <ul style="list-style-type: none"> <li>Educate organisations and their staff about the role of bi-cultural workers, the benefits they bring and facilitate employment opportunities.</li> <li>Build sector capacity to employ bi-cultural workers in a culturally safe way.</li> </ul> </li> </ol>	Scope BCW Network priorities and needs and design a program to respond. Deliver 10x capacity-building workshops/ Networking events for members of the Vic BCWs network.	Reach Summary of BCW priorities/needs Capacity Building workshop outline	BCW Network membership increases BCWs increase knowledge, skill, or confidence. Community members increase in knowledge, skill, or confidence. Strengthens relationships with hard-to-reach refugee communities. BCWs experience cultural safety in their roles. BCWs increase access to employment, information, and networking.
			BCWs deliver 25x community-led projects (past projects have aimed to improve social connection, mental health and wellbeing, active living, health literacy and system navigation)	Reach Number of sessions Number of Community resources Number and type of partnerships	
			4 x group supervision sessions for cohealth BCWs.	Reach Summary of challenges experienced by BCW.	
			Regular employment, networking and capacity-building opportunities shared (Via Victorian BCWs Network)	Number of opportunities shared	
Community engagement on the Voice to Parliament	cohealth	<ol style="list-style-type: none"> <li>Increase staff and community understanding and confidence to communicate about:                             <ul style="list-style-type: none"> <li>The Australian Constitution and referendum process</li> <li>Uluru Statement from the Heart</li> <li>Structure and purpose of the Voice to Parliament</li> </ul> </li> </ol>	Deliver 2 x capability-building engagements with staff. Support staff to engage with the community via community of practice	2 engagements with staff Community of Practice established.	Increased staff knowledge and confidence to communicate with others on the Voice to Parliament.
Arts Gen Theory of Change	cohealth	<ol style="list-style-type: none"> <li>Strengthen Arts Gen's health promotion program design, implementation, and impact.</li> <li>Increase confidence in communicating Arts Gen's role in health promotion and corresponding impact.</li> </ol>	Define the scope of Arts Gen Theory of Change informed by: <ul style="list-style-type: none"> <li>Victorian Health and Wellbeing Plan 2024-28</li> <li>CHHP Guidelines</li> <li>cohealth Health Promotion Strategy</li> <li>cohealth organisational Strategy</li> <li>Sector evidence</li> </ul> Recruitment of consultant to support with Arts in Health expertise	2 team meetings Documentation of sector evidence	Arts Gen staff report increased knowledge in health promotion practices leading to impacts. Arts Gen staff report increased confidence in communicating Arts Gen practices and impact to internal and external stakeholders. Narrative of Theory of Change
			Develop Arts Gen Team Theory of Change Develop and implement post-workshop evaluations	3-4 team workshops 1 Arts Gen Theory of Change (an internal and external document)	
			Develop monitoring and evaluation methods	Documentation of TOC evaluation methods	
Health Promotion Theory of Change	cohealth	<ol style="list-style-type: none"> <li>Strengthen Health Promotion program design, implementation, and impact.</li> </ol>	In 2024, define the scope of the theory of change informed by: <ul style="list-style-type: none"> <li>Victorian Health and Wellbeing Plan 2024-28</li> <li>CHHP Guidelines</li> <li>cohealth Health Promotion Strategy</li> <li>cohealth organisational strategy</li> </ul>	2 team meetings	Health Promotion staff report increased knowledge in health promotion practices leading to impacts. Narrative of Theory of Change
			Develop Health Promotion Team Theory of Change Develop and implementation of post-workshop evaluations	3- 4 team workshops 1 Health Promotion Theory of Change (an internal and external document)	
			In 2024-25, Revise monitoring and evaluation methods to ensure alignment with Theory of change.	Documentation of TOC evaluation methods	

Project Title	Lead/ Partner	Planned Objectives	Planned Activities	Outputs	Impact (Indicators)
Re-establish Health promotion team post-budget cuts	Health promotion team	1. To effectively utilise known data to support new staff during onboarding and change in project lead staff. 2. Strengthen health promotion codesign and evaluation practice.	Collate and present barriers and enablers to participating in physical activity across 3 high schools engaged with the Health Promotion Team in 2021-23.	Increased staff awareness of known data on barriers and enablers to physical activity.	Health promotion staff report increased understanding of barriers and enablers to inform physical activity intervention development.  Health promotion team learnings and insights in codesign and evaluation practices
			Collaborating with health promotion staff to optimise the utilisation of data collection tools and data analysis for health promotion projects.	Number of questionnaires, reports or presentations developed (as required). 2 health promotion team meetings	
			Implement health promotion staff capacity building codesign sessions	4-5 codesign staff learning sessions	
			Develop capacity-building sessions on evaluation	4 evaluation workshop outlines	
Population health data use	cohealth	1. Enable effective and efficient staff access to relevant population health data to inform work.	Sourcing relevant population health data	Number and type of data set used.	Health promotion staff report increased knowledge, confidence, and ability to access and use catchment population health data to inform health promotion projects.
			Cleaning and formatting data for data visualisation	Document of cleaned and formatted data	
			Creating an interactive power BI dashboard	Presentation of Power BI use to health promotion team	
			Testing power BI dashboard utility for health promotion staff	Staff feedback on the usability of the dashboard	
			Launching power BI dashboard	Power BI dashboard	
			Develop and implement an evaluation questionnaire	Report on evaluation findings	
			Develop a geographical population profile for each dental service program based on eligibility factors and vulnerabilities within cohealths dental catchment.	Population data summary in cohealth catchments	
			Collaboration with the dental team to enhance understanding and applicability of analysis findings to improving oral health access and service.	2 meetings with the dental team to discuss patient and population data	

## 2.7 Other Projects relevant alignment to policy or frameworks

- These projects align with the following guidelines, policies, practices, and frameworks:
  - *Better Evaluation:* [Managers Guide to Evaluation](#)
  - *Australian Government:* [The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional wellbeing \(2017-2023\)](#)
  - [cohealth privacy policy](#)
  - *cohealth:* Professional standards of bicultural work [code of ethics](#)
  - *cohealth:* Professional standards of bicultural work [inclusive recruitment guide](#)
  - *cohealth:* Professional standards of bicultural work [working together guide](#)