

Community programs and partnerships

Introduction

- 6.1 Throughout the course of the inquiry, the Committee was impressed by the range of excellent community initiatives being implemented across Australia. Focusing on both dietary and physical activity, these programs and partnerships are contributing to the behavioural and societal change required to achieve long-term results in better health and wellbeing. Any strategy to successfully combat the growing problem of obesity will need to include community involvement and community centred programs/projects.
- 6.2 The variety of initiatives and programs is enormous and this chapter will only attempt to provide a brief description of a few. They include individual and community initiatives as well as school, organisational and government programs and touch all demographics. This chapter will examine how these projects are successful in three areas:
- motivating people;
 - sustaining change; and
 - providing flow on benefits for communities.

Motivation

- 6.3 The Committee recognises the difficulty of motivating communities and individuals to become involved and make lifestyle changes. The following

strategies were identified by witnesses to the inquiry as effective motivators:

- a supportive environment;
- structured programs;
- accessible programs;
- inclusive programs;
- variety;
- hands-on experience; and
- community ownership.

Supportive environment

6.4 Oral and written evidence to the inquiry identified a supportive environment as a crucial motivator for many people wishing to lose weight. It became apparent to the Committee that both emotional and practical advice and assistance help individuals to apply knowledge, make changes and overcome challenges with success.

6.5 Weight Watchers Australasia (Weight Watchers) told the Committee that a supportive environment enhances the chances of success for many individuals. Weight Watchers is a weight management program based on four key principles:

- changing your diet by making smarter food choices;
- behaviour modification;
- a supportive environment; and
- exercise.¹

6.6 While the program provides scientifically based information on diet, exercise and behaviour change, it is the help provided by program leaders and regular meetings that participants credit with helping them succeed. A Weight Watchers leader who lost 30 kilos and has maintained her loss for over 12 years told the Committee that the ongoing support supplied by the program was critical to her success:

I found the greatest difference was in receiving support from week to week with trying to deal with all the ups and downs that come with trying to lose weight. At the core of my success in losing and

1 Weight Watchers Australasia, Submission No. 138, p 7.

keeping off my weight were the support and motivation of my leader and fellow members in the room and that continued support I received from week to week.²

- 6.7 A supportive environment provides an opportunity to talk about difficulties as they arise and for people to share experiences and solutions. The Weight Watchers Slimmer of the Year for 2008 explained to the Committee that these conversations reinforce an individual's commitment to change their lifestyle and lose weight:

The environment was incredibly supportive, with that feeling of 'shared experience'. Every week that I went, I would learn something from one of the other members, or there would be someone who had done really well to be cheered on.³

- 6.8 A number of other witnesses to the inquiry stressed the importance of knowing others who are sharing your experience. Nutrition Australia told the Committee that they use group encouragement with many different groups, including refugees adapting to Australian life, when delivering their food skills programs. They teach these food skills in a 'social setting where people have the opportunity to cook together, to shop together and to discuss topical issues in relation to food choices'.⁴ Nutrition Australia called this approach a 'powerful motivator for positive behaviour changes in relation to food intake'.⁵

- 6.9 The ongoing support and encouragement of others in a group situation also helps individuals stay committed with regard to physical activity. At its hearing on the Gold Coast, the Committee heard of the wide variety and easy accessibility of physical activities provided by the Gold Coast City Council. However, the Senior Active Parks Officer admitted that encouraging participation is still difficult. She gave a personal example where she had taken three years to convince her own sister to participate in an activity run close to her home. The Officer credited having the encouragement and support of the other members of the group as the real motivator for her sister's participation:

2 Mrs MT Elliott, Official Transcript of Evidence, 11 September 2008, p 29.

3 Ms A Mennen, Weight Watchers Australasia, Official Transcript of Evidence, 11 September 2008, p 30.

4 Ms J Phillips, Nutrition Australia, Official Transcript of Evidence, 24 October 2008, p 21.

5 Ms J Phillips, Nutrition Australia, Official Transcript of Evidence, 24 October 2008, p 21.

It is the motivation of having other people in a group environment that really seems to get them over the line.⁶

- 6.10 By comparison, witnesses to the inquiry warned that a competitive atmosphere can discourage engagement and deter participation. The Committee was told that, while many people thrive on competition, some find it threatening. The need to prove themselves against others can be daunting and induce anxiety and stress. Associate Professor Morgan, an academic responsible for implementing the Hunter Illawarra Kids Challenge Using Parent Support (HIKCUPS)⁷ program, stressed the need to create a supportive environment where children will be confident enough to become involved:

The programs that we designed were meant to be taught in a non-threatening supportive learning environment with lots of opportunities for success and positive reinforcement.⁸

- 6.11 Associate Professor Morgan explained that the major reason children felt threatened by a competitive environment was a lack of the necessary skills to carry out the task successfully. The HIKCUPS program was designed to tackle this issue. A community-based family weight management program, it trialled three intervention strategies centred on physical activity levels, dietary modification, and a combination of physical activity levels and dietary modification. The physical activity intervention focuses on teaching and improving children's basic motor skills so they build confidence. Associate Professor Morgan told the Committee that instead of using competitive, structured sports and games, the program concentrates on separate skills like running, kicking, catching, and hopping. The key to engaging the children is 'making physical activity fun'.⁹
- 6.12 Creating a positive, supportive environment and using fun activities to develop confidence and a skills base improved the self-esteem of these children and encouraged them to engage in regular sporting activities.

6 Ms SR Hughes, Gold Coast City Council, Official Transcript of Evidence, 8 December 2008, p 31.

7 Hunter & Illawarra Kids Challenge Using Parent Support (HIKCUPS), Child Obesity Research Centre, University of Wollongong, <http://www.uow.edu.au/educ/research/CORe/files/HIKCUPS_Program_Summary.pdf> accessed 17 April 2009.

8 Associate Professor PJ Morgan, Private capacity, Official Transcript of Evidence, 12 September 2008, p 31.

9 Associate Professor PJ Morgan, Private capacity, Official Transcript of Evidence, 12 September 2008, pp 28-29.

Associate Professor Morgan felt this was the most important outcome of the project and shared some of the powerful stories that had come out of the program:

Children who had never played sport were then selected to play in a Newcastle baseball team, or there were others who were quite emotional because for the first time they had been invited to play cricket at recess because they had learnt how to throw and catch.¹⁰

Structured program

6.13 Another key motivational strategy identified by witnesses to the inquiry is the provision of structured programs. The Committee heard that people can be overwhelmed by the amount of information available, particularly with regard to weight loss, and welcome structured programs that tell them clearly what they need to do.¹¹

6.14 Compounding the plethora of information on diet, weight loss and activity is the round the clock availability of food that has created distorted eating patterns. A number of witnesses indicated the dangers engendered by the deregulation of food availability. Associate Professor Noakes from the Commonwealth Science and Industrial Research Organisation (CSIRO) identified some of the consequences of the deregulation for the Committee, including extended shopping hours and the increase in non-traditional food outlets like petrol stations.¹²

6.15 Associate Professor Collins who is working with the HIKCUPS program, referred to the enormous amount of choice available at supermarkets and called it living in 'the most delectable, unimaginable giant lolly shop':

The lolly shop has become more enticing, it is allowed to stay open 24/7, it will do home deliveries, it will send us out messages to say, 'Hey everybody is in here tasting everything and its great, come on in.'¹³

6.16 This need to restore structure and order to eating patterns was a driving force behind the creation of the *CSIRO Total Wellbeing Diet*, one of the

10 Associate Professor PJ Morgan, Private capacity, Official Transcript of Evidence, 12 September 2008, p 32.

11 Associate Professor PJ Morgan, Private capacity, Official Transcript of Evidence, 12 September 2008, p 33.

12 Associate Professor M Noakes, Commonwealth Science and Industrial Research Organisation (CSIRO), Official Transcript of Evidence, 13 June 2008, p 42.

13 Associate Professor CE Collins, Official Transcript of Evidence, 12 September 2008, p 30.

successful programs the Committee encountered throughout the course of the inquiry. The *Total Wellbeing Diet* provides a twelve week eating plan, recipes, shopping lists and exercise guidelines. The Committee was advised that upward of one million copies of the diet have been sold and that approximately 540,000 people have successfully followed the diet plan, lost up to six kilograms, and maintained that loss.¹⁴

- 6.17 At the hearing in Adelaide, the Committee asked CSIRO to identify what had made the program so successful. Professor Clifton, a co-author of the program, attributed success to the diet's detailed information and simplicity:

... it is a very structured approach – 'You follow this and you will lose weight.' That is true; if you follow it, you will lose weight. And it is not hard to follow. It is not a radical diet that deviates you wildly from your normal daily pattern. It is very similar to what you do. It just makes little changes around the edges, so most people do not notice they have actually gone on a diet. That is its success. It is very structured and it tells you exactly what to do.¹⁵

Accessible programs

- 6.18 Accessibility to facilities and programs is important to achieve ongoing participation and engagement. The easier it is for individuals to participate the more likely they are to become involved. Witnesses identified a number of factors that affect accessibility, including:

- frequency and availability;
- cost; and
- taking programs to people rather than expecting them to come to the program.

- 6.19 The Gold Coast City Council identified frequency and availability as the key. The Council's Senior Active Parks Office explained they had increased availability in order to encourage ongoing participation:

We started off by doing a couple of weeks in a block. We found that residents were really quite interested in continuing on and they really did not enjoy the break in between. Every time we had

14 Professor P Clifton, Commonwealth Science and Industrial Research Organisation (CSIRO), Official Transcript of Evidence, 13 June 2008, p 40.

15 Professor P Clifton, Commonwealth Science and Industrial Research Organisation (CSIRO), Official Transcript of Evidence, 13 June 2008, p 45.

a break it was always hard for the instructors to get people motivated again. You found that they participated and went on a regular basis, and as soon as you stopped they would lose that motivation and persistence.¹⁶

- 6.20 The Council has developed a program in partnership with community groups and commercial providers that offers a wide variety of activities across the city. Conducted indoors and outdoors, the programs cover all demographics from toddlers to senior citizens as well as people with disabilities and special needs. For seniors there is a 'Fun and Friendship Morning' where they can join in gentle exercise such as indoor bowls, table tennis or cards. For mums there are a wide range of activities from the gentle 'Mum and Bubs' yoga group to the demanding 'Super Mums Triathlon Training Squad'.¹⁷ The overall program runs seven days a week, 48 weeks of the year and had approximately 140,000 participants in 2008.¹⁸
- 6.21 The Young Men's Christian Association (YMCA) Australia told the Committee that one of the most significant factors inhibiting access was cost. The Chief Executive Officer of the YMCA said that their organisation ensures that no-one is denied access to their programs or services due to cost. Through their Open Doors program YMCA raises funds specifically to:
- ... cover the cost of providing access to people who, for a range of reasons – special needs, low income; those sorts of things – would not otherwise be able to access programs.¹⁹
- 6.22 A number of witnesses stressed the need to go to people where they are, rather than expecting them to come to you. The Australian Sports Commission with their Active After-school Communities (AASC) program and the YMCA both provide programs for children in schools. Weight Watchers has an *At Work* program that can be tailored to the workplace offering either group meetings or individual consultations.²⁰ The Committee heard from a number of employers who have successfully implemented the Weight Watchers *At Work* program. The Gold Coast City

16 Ms SR Hughes, Gold Coast City Council, Official Transcript of Evidence, 8 December 2008, p 29.

17 Gold Coast City Council, Active and Healthy Citywide Program, <http://www.goldcoast.qld.gov.au/t_standard2.aspx?PID=4364> accessed 17 April 2009.

18 Ms SR Hughes, Gold Coast City Council, Official Transcript of Evidence, 8 December 2008, p 29. See Gold Coast City Council, Active and Healthy Program, <http://www.goldcoast.qld.gov.au/t_standard2.aspx?pid=4291> for further details.

19 Mr RG Nicholson, YMCA Australia, Official Transcript of Evidence, 24 October 2008, p 44.

20 Weight Watchers Australasia, Submission No. 138, p 8.

Council testified that they had collectively lost a tonne of weight over 24 weeks using the program.²¹

- 6.23 Another group of people who benefit from programs coming to them rather than having to go to the programs are those who are housebound, including some older Australians. As mobility and independence lessens they cannot get out and participate in activities easily. National Seniors Australia (NSA) told the Committee about a program that has been piloted in Victoria utilising Home and Community Care (HACC) workers to support elderly people to implement dietary and activity programs. The HACC workers regularly visit them in their homes and can encourage, support and motivate them to persevere. The NSA provided the Committee with a copy of the write up of their project in the *Australian Health Review*. The journal includes an anecdotal story that illustrates the effectiveness of the program in helping an elderly person gain the confidence to increase her activity level:

One participant recounted that her physical activity plan was to walk, and her long-term goal was to walk her rather energetic dog. At first, she walked to and from her letterbox under the watchful eye of a homecare [HACC] worker, then she progressed to walking around the block in the company of her granddaughter, who walked the dog. By the end of the 6-month project, the client reported that she walked her dog around the block.²²

- 6.24 The Committee also expressed concern about retirees who have not been especially active during their working life and, while they may be mobile, are reluctant to take up exercise and change lifelong habits. In their written submission, NSA suggested that locations where seniors gather for recreational and social interaction such as Seniors Clubs 'could be encouraged and supported to provide appropriate physical activities and nutritious food'.²³ Such a setting provided the opportunity to introduce new ideas and activities and gave older people the confidence to try new things. The YMCA strength training programs were cited as an example, where:

21 Ms SR Hughes, Official Transcript of Evidence, 8 December 2008, p 29. See also Mr A Hall, Woolworths Ltd, Official Transcript of Evidence, 11 September 2008, p 18.

22 Cameron, M et al., 'A pilot program of physical activity promotion among clients receiving home and community care', *Australian Health Review*, August 2008, vol 32, no 3, p 448.

23 National Seniors Australia, Submission No. 79, p 10.

They start off as a social thing and then they go on to participate in walking programs and strength training programs.²⁴

Inclusive programs

6.25 Throughout the course of the inquiry, the Committee took evidence that children and adults alike feel less inclined to take part in exercise programs if they feel self-conscious, embarrassed, or unable to participate for any number of reasons, including cultural restrictions. The Director of Community Sport at the Australian Sports Commission (ASC) told the Committee that:

If children are not confident, the one thing that they do not want to happen is to be exposed so that their peers can see them not doing something well. That often happens when you put kids into large team game-type environments.²⁵

6.26 Associate Professor O'Dea spoke about a school she worked with in Sydney that had a lot of Muslim girls that were veiled, who would not do physical education (PE), sport or swimming.²⁶ Associate Professor O'Dea told the Committee she had worked with the school and had designed a PE uniform that was veiled and covered the girls, and that they were able to swim in. A time was set aside for the girls to 'swim, splash and giggle in privacy'. Associate Professor O'Dea said that everyone in the community was happy with this solution - the imam, the parents, teachers and children.²⁷

6.27 At its hearings, the Committee sought advice on ways to make sport and exercise programs more accessible and/or appealing to people who might otherwise shy away from organised physical activity.

6.28 Both the ASC and Associate Professor O'Dea spoke about the importance of developing programs that make people feel more comfortable about participating, that people prefer choices and control over the sort of activity they do, and that the activities should cater to different abilities. People are then more likely to enjoy the exercise, rather than perceive it as a chore and/or too hard for them.

24 Ms A Perfect, National Seniors Australia, Official Transcript of Evidence, 1 October 2008, p 58.

25 Mrs J Flanagan, Australian Sports Commission, Official Transcript of Evidence, 25 June 2008, p 5.

26 Associate Professor JA O'Dea, University of Sydney, Official Transcript of Evidence, 11 September 2008, p 47.

27 Associate Professor JA O'Dea, University of Sydney, Official Transcript of Evidence, 11 September 2008, p 5.

6.29 The ASC said that their approach included small team games rather than large team games:

...two on two and three on three. We get them all engaged so that they are not all standing around watching while one person missed as they try to get the basketball into the net and things like that.²⁸

6.30 At the Committee's Perth hearing, a doctor with many years experience of working in remote areas with indigenous communities, Dr Jeffries Stokes, Chief Investigator of the Western Desert Kidney Health Project, pointed out to the Committee that a lot of Aboriginal people in an area she had lived in, Mount Margaret, 'could not see the point in wasting energy with meaningless exercise [such as walking groups], for exercise's sake', especially in a hot harsh climate where one might encounter wild dogs and snakes on a stroll.²⁹ However, after consultation with community members, activities like dance, drumming, yoga and even gardening (not usually considered a form of exercise) had been instigated and proven very popular:

We went for things that people did not think of as exercise... They were much more fun and that was more successful.³⁰

6.31 The ASC described how it had expanded its AASC program over the years to include a range of non-traditional sport activities like flying discs, circus skills and dance for children who didn't want to do traditional sports, for example games like football or cricket.

...programs which are a lot of fun, and again engaging for [children].³¹

6.32 The Committee had the opportunity to visit and participate in a Tai Chi class on the Gold Coast on 8 December 2008. Organised by the Gold Coast City Council and taking place in a number of locations, the Tai Chi class had between 50-60 participants and catered to all levels, from beginners through to advanced Tai Chi practitioners. The local Council sponsors the program, paying the instructor \$80 per class. The Committee enjoyed

28 Mrs J Flanagan, Australian Sports Commission, Official Transcript of Evidence, 25 June 2008, p 5.

29 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 39.

30 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 39.

31 Mrs J Flanagan, Australian Sports Commission, Official Transcript of Evidence, 25 June 2008, p 4.

speaking with the instructor and some of the regular participants after the class who were clearly very enthusiastic. Several participants told members how much they enjoyed the class and wished it was available more than once a week. Interestingly, the instructor told the Committee what a difference the class had made to elderly participants in this class and in some nursing homes in the surrounding area at which he also taught Tai Chi classes. In his experience, the classes reduced the number of falls the elderly experienced and increased their strength, flexibility and general feelings of wellness.

Figure 6.1 Members participating in a Tai Chi class on the Gold Coast, Queensland



Variety

- 6.33 Variety is another important motivator for adults and children alike. Evidence to the inquiry suggests that variety provides individuals with choice, the opportunity to pursue their own interests and to gain confidence. Variety can make healthy choices fun, interesting and exciting.
- 6.34 Variety was a driver for participation in the WellingTONNE Challenge program. At the hearing in Broken Hill the Committee learnt more about this program that had been implemented in the mid western New South

Wales town of Wellington. Organised by the Wellington Community Health Centre, the intervention was designed to tackle increasing levels of obesity, diabetes and heart disease. The program was conducted over a 12 week period and challenged the population of the town to collectively lose a tonne of weight. The Director of the Broken Hill Centre for Remote Health Research explained how variety was incorporated into the program:

It was voluntary and not prescriptive and offered a range of activities in which community members could choose to be involved, including lectures about dietary information, shopping information, exercise circuits of one sort or another and participant weigh-ins to see how they were going.³²

- 6.35 As well as providing different ways for people to participate, the program provided flexibility. Activities were conducted at a range of venues and at different times of the day and week, so that everyone in the community had an opportunity to participate. Additionally, community activities were conducted throughout the period including a family sports day, an orienteering family fun day, and a gala night.³³ The Committee heard that participants appreciated the choices available to them and that they understood that any involvement was better than none. Commenting on the versatility of the program, the Director said:

I think one of the issues is that, in a sense, different people will take very different approaches to exercise. For some people it will be a 30-minute walk or something. Others will get the bug, and they will be on their mountain bikes or whatever it is. So some will be managing their weight by major investments in exercise and not much dietary change; others will be doing it by dietary change and less exercise.³⁴

- 6.36 Another organisation that emphasised the importance of variety as a motivator was the YMCA. The Development Manager for YMCA Australia told the Committee that they implement their programs across Australia in urban, regional and remote areas and the programs were

32 Associate Professor D Perkins, Broken Hill Centre for Remote Health Research, Official Transcript of Evidence, 9 December 2008, p 2.

33 Australian Department of Health, *A healthy lifestyle resource based on experiences from the WellingTONNE Challenge*, Exhibit No. 95, pp 32-34.

34 Associate Professor D Perkins, Broken Hill Centre for Remote Health Research, Official Transcript of Evidence, 9 December 2008, p 5.

designed to appeal to a diverse range of people across age groups and socioeconomic levels. The objective of the programs is:

... getting the young people involved, getting the families involved, often getting older adults involved for the first time, and, whether that be a game of badminton or a workout in the gym or a swim in the pool, it is about trying to reach a whole range of areas of interest that they might choose to take up.³⁵

- 6.37 Variety is also one of the tools used to break down the competitive atmosphere that can hinder engagement and participation. Mrs Flanagan from the ASC explained that the inclusion of many small games and lots of equipment in the AASC program encouraged children to take part. The program targets inactive children and variety provides them with the opportunity and confidence to try new things:

I think they do like a lot of variety. Particularly if they are not confident, they do not like to feel exposed – that they are going to go out there and not catch a ball, not hit a ball or whatever it is they are doing. The program is taking that away and making it a lot of fun rather than that rigid competitiveness.³⁶

- 6.38 Throughout the inquiry, the Committee heard of many small, innovative ideas that use variety to encourage dietary change as well as physical activity. For example, at the hearing in Dubbo the Principal of St Pius X Primary School told the Committee of a simple technique that is encouraging students to eat fruit:

I do not know what it is called but we place an apple in a slicer, the apple is sliced up like a long worm, and the kids love that. They take an apple to school and they might pay 10c extra to get their apple sliced. It does not taste any different but they love it as it is a bit of a novelty.³⁷

- 6.39 The Committee experienced the importance of variety when they visited the AASC program at Marks Point Public School. The Committee commented on the inclusive nature of the program and the 'clever design'

35 Mr NC Cox, YMCA Australia, Official Transcript of Evidence, 24 October 2008, p 46.

36 Mrs J Flanagan, Australian Sports Commission, Official Transcript of Evidence, 25 June 2008, pp 4-5.

37 Mr G Cant, St Pius X Primary School, Official Transcript of Evidence, 10 September 2008, p 28.

of the games so that no-one excelled and everyone, including the politicians, could make a worthwhile contribution.³⁸

Figure 6.2 Members participating in the Active After-school Communities program at Marks Point Public School, Lake Macquarie, New South Wales



Hands-on experience

6.40 The Committee heard that another way to encourage participation in healthy eating and activity is to provide hands-on experiences and practical demonstrations. Giving people the opportunity to actively participate and apply knowledge is far more helpful than simply providing them with information.

6.41 Hands-on experience is at the heart of the kitchen garden projects being introduced in many schools, such as the Stephanie Alexander Kitchen Garden Project. A number of witnesses to the inquiry mentioned the success that this program is having. During a private briefing, the Committee heard from Stephanie Alexander that the program aims to introduce children to the pleasure of food by emphasising the link between growing, cooking and eating seasonal produce. The project is

38 Mr M Coultton MP, Member for Parkes, Official Transcript of Evidence, 12 September 2008, pp 30-31.

integrated into the curriculum and run by a Program Coordinator, who is a trained teacher, a Kitchen Specialist, a Garden Specialist and a number of volunteers.³⁹

- 6.42 The Committee visited the project in action at one school, Westgarth Primary School in Melbourne on 20 June 2008 and was impressed by the skill and enthusiasm that the children displayed working in their garden and preparing a meal in the kitchen. Exploring the garden with the children, Committee members learnt from students about natural pesticides and fertilizers. One student explained, 'The bugs don't like the chilli in the spray, so they won't eat the leaves.' In the kitchen Members were curious about which recipe a group of students were following to create a dressing for a salad. 'Oh we made it up sir. We've been cooking for two years.' This display of confidence was impressive as was the assurance and dexterity with which children handled utensils and kitchen equipment (including sharp professional knives which they are taught how to use properly and safely).
- 6.43 Sharing the food that they prepare with each other and the adult volunteers and conversing at the table is an intrinsic part of the program. Teachers told the Committee that students were taught table manners, how to set a table and decorate it with flowers from the garden. The socialisation component of the program is as important a part of the program as eating the meal.
- 6.44 Members were impressed with the lively discussions taking place around the room and the social interaction between children and adults.
- 6.45 NSA told the Committee that they use the Men's Sheds project to deliver hands-on programs to older men and veterans to help them learn to shop for and prepare healthy meals. Developed in response to the growing number of older men who are unemployed, retired, divorced or widowed, the Men's Sheds project is a grass roots initiative that provides a shed or workshop type space where older men can gather. Men in this cohort are often reluctant to discuss personal problems or health issues and the Sheds are used by a variety of organisations and agencies to reach them with health programs and information in a relaxed, friendly environment. NSA explained they use Men's Sheds to support a program targeting

39 Stephanie Alexander Kitchen Garden Project, Submission No. 1; see also Alexander, S., 2006, *Kitchen Garden Cooking with Kids*, Lantern, Camberwell and Stephanie Alexander Kitchen Garden Foundation, <<http://www.kitchengardenfoundation.org.au/index.shtml>> accessed 17 April 2009.

clients who have not traditionally been responsible for shopping or cooking and now find themselves having to perform these duties:

They are really hands-on programs. They go with people, help them pick out nutritious food, show them how to cook it and how to develop a healthy eating program.⁴⁰

- 6.46 Reiterating the benefit of the practical demonstrations in the Men's Sheds project, the Committee heard from one participant how useful this approach was for him:

The best thing for people like me ... is more a personal approach. We need somebody to show us ... not talk to us ... about how to put our own kitchen in order, not books, but real in the home practical stuff.⁴¹

- 6.47 It is not only children and older men who benefit from practical demonstrations. At the hearing in Dubbo, the Program Practice Manager from Walgett Aboriginal Medical Service (WAMS) spoke of a program they have implemented in the local high school for young mums. They take these young women shopping and show them how to choose healthy foods. Then they provide cooking lessons so the young mums can learn how to prepare the food for their families:

We are physically going up there, picking them up, teaching them how to budget and we take them to the grocery store. We demonstrate how to cook recipes and how to freeze vegetables, et cetera, and prepare them for a week in advance and correctly store them.⁴²

- 6.48 A range of community activities such as the ones described above play an integral role in not just reducing obesity but engendering a sense of community identity and wellbeing.

Community ownership

- 6.49 Evidence to the Committee showed that communities are more likely to succeed in tackling obesity and related issues if the community has ownership of the program. The Committee heard that community ownership can be created and supported in a number of ways, including:

40 Ms A Perfect, National Seniors Australia, Official Transcript of Evidence, 1 October 2008, p 59.

41 National Seniors Australia, Submission No. 79, p 11.

42 Ms K Gilmore, Walgett Aboriginal Medical Service, Official Transcript of Evidence, 10 September 2008, p 9.

- engaging local interest and getting people actively involved;
- supporting the community to find local solutions for local problems;
- encouraging local leaders and champions; and
- fostering grassroots movements.

6.50 In Adelaide, the Committee heard about the Fit2play program which was implemented in primary schools in the Gawler area but engaged the broader community innovative ways. Fit2play is a behavioural change program that encourages lifelong physical activity and healthy eating habits. It is delivered in schools through the existing curriculum and runs from reception to year 7. The program is built around five simple key messages:

- aim to watch less TV;
- aim to do more physical activity on most days of the week;
- aim to eat more fruit;
- aim to eat more vegetables; and
- aim to drink more water.⁴³

6.51 Teachers were happy to get involved because the program offered them a professional development opportunity and ongoing support. Program organisers ran a poster competition for children and invited local dignitaries, politicians, business people and community leaders to judge the competition. Gawler High School students wrote a play promoting the program and performed it to 690 primary school age children in the area. Ms Flint from the Gawler Health Service told the Committee she had never experienced such a positive response from a community health promotion project:

It is the most exciting program I have ever worked with in my 20 years of working for community health. I was absolutely amazed at the reaction from the community when we asked them to help us with the project.⁴⁴

6.52 On a smaller scale, but no less important, was the engagement of groups in localised communities such as schools. The Committee learnt that supporting community ownership in this type of setting produced some

43 Fit2play, <<http://www.fit2play.com.au/SA/default.asp>> accessed 17 April 2009.

44 Ms E Flint, Gawler Health Service, Official Transcript of Evidence, 13 June 2008, p 3.

extraordinary results. The Committee visited the Dubbo College Delroy Campus where students proudly showed off their school canteen. Teachers told the Committee they obtained funding to promote a healthy eating campaign and students were involved in growing vegetables and cooking dishes in the canteen. The Year 7 students had revamped the canteen, named it the 'Snak-Shak' and repainted it in vivid colours depicting a tropical theme. Allowing the students to run with their ideas and produce such a tangible result gave them a stake in the changes and helped reinforce the messages about healthy eating.

Figure 6.3 Members visiting the Snak-Shak at Delroy Campus, Dubbo College, New South Wales



6.53 Several witnesses to the inquiry cited the Colac project in Victoria and suggested that its success was due to community involvement in its development and implementation. This project aimed to encourage healthy eating and activity levels in children aged 4 to 12. It was a collaboration between Colac Area Health, Colac-Otway Shire and Colac Neighbourhood Renewal while Deakin University provided support, training and evaluation.⁴⁵ The project involved a wide range of intervention strategies covering diet and activity spread across the whole

45 The WHO Collaborating Centre for Obesity Prevention Deakin University, Submission No. 95, Attachment, npn.

community: families; schools; food outlets; sporting clubs; media; and community gardens. Professor Swinburn from Deakin University explained that agencies and stakeholders in the community designed and planned the program according to local needs. He called this a 'community capacity building approach' and told the Committee capacity building started by encouraging the community to find solutions not by imposing solutions from outside:

The Colac project did not say: 'Here's a bunch of programs that we worked out how to do sitting in the university. Let's take them down to Colac and see if they work.' It was not that at all. It was: 'How do you give some money and the support to a community to work out its own solutions?'⁴⁶

- 6.54 The Committee heard that involving community leaders from the start encourages engagement and participation. This was evident in a number of the projects the Committee examined including, for example, the WellingTONNE Challenge. Associate Professor Perkins, who evaluated that program, told the Committee that leadership can come from many different sources within the community but it always plays a pivotal role in developing and sustaining motivation:

Community leadership is important. Whether it is a health relations specialist, the local mayor or some people in the community who are willing to meet, I think that active, energetic leadership is critical. The combination of education and leadership leads to community motivation ...⁴⁷

- 6.55 While the Colac and Wellington community projects involved community organisations, councils, schools and universities developing and implementing a program, the Committee also learnt about grassroots initiatives that originate with individuals or small groups. These types of programs often combine local solutions and community leadership and fostering them can achieve outstanding results at a community level.
- 6.56 Another example, provided to the Committee by the Area Director of Population Health in the Western Australian (WA) Department of Health, demonstrated how small local initiatives can snowball and have a ripple effect. In the small wheat belt town of Dalwallinu, 250 kilometres north-east of Perth, the Area Director was approached by a member of the

46 Professor BA Swinburn, Deakin University, Official Transcript of Evidence, 20 June 2008, p 29.

47 Associate Professor D Perkins, Broken Hill Centre for Remote Health Research, Official Transcript of Evidence, 9 December 2008, p 6.

community requesting financial support to be trained to provide an exercise program. The community member also approached the local council for money to purchase equipment. She was refused on both accounts. The Area Director and the council felt her motivation was personal as her son had a weight problem.⁴⁸

- 6.57 However, this knock-back only prompted the community member to find other avenues to further her case. She energised the community, starting up a submission to pressure the hospital and council to support her. Eventually she got results and the community ended up having a personal stake in the program:

She got some support in the end from the hospital. We did pay for her training to provide a course, but that was it, and the shire subsidised a building that was not used, but did not pay for any equipment. That ended up being paid for and bought by the community at large.⁴⁹

Sustainability

- 6.58 The Committee recognises the importance of community programs and partnerships in combating overweight and obesity. Some of the programs mentioned in this chapter have been taken up enthusiastically and produced impressive results. However, more often than not, they are only available for a limited time and when they finish participants are left with no ongoing support or encouragement to continue. The Committee heard that the following components were fundamental to the sustainability of programs including:

- ongoing funding;
- parental involvement; and
- a whole-of-community approach.

48 Mrs K Gatti, Western Australian Department of Health, Official Transcript of Evidence, 6 November 2008, p 5.

49 Mrs K Gatti, Western Australian Department of Health, Official Transcript of Evidence, 6 November 2008, pp 5-6.

Funding

- 6.59 The Committee acknowledges the importance of ongoing, secure funding for community programs and partnerships. This is discussed further in Chapter 3 in the context of government assistance.
- 6.60 The issue of ongoing funding for programs was brought to the attention of the Committee time and time again throughout the course of the inquiry. For instance, Dr Jeffries-Stokes, from the Western Desert Kidney Health Project, told the Committee about a multifaceted, community based intervention program that had been implemented on the Goldfields of Western Australia. The program was triggered by very high rates of renal disease in the Aboriginal communities in the area. The program proposed an intervention that would reduce the risk factors by:
- ... the provision of culturally appropriate and relevant advice about the disease process, diet and lifestyle.⁵⁰
- 6.61 This program used art to engage and motivate communities and was extraordinarily successful. Dr Jeffries-Stokes told the Committee that the program was very innovative, using Indigenous artists to produce culturally appropriate material that would get the relevant health messages across to the community:
- They worked with the community for six weeks, developing their own health promotion materials that were specific for their communities, in appropriate language, but also the process of doing that meant that people learnt the messages, internalised them and were then able to teach them to their own families and their communities.⁵¹
- 6.62 However, when the Committee enquired whether the project would continue, Dr Jeffries-Stokes replied that unfortunately they were experiencing difficulties in securing ongoing funding:
- We are working to expand it to the whole of the Goldfields now, to 10 communities over three years. We are working to get the funding for that. We had no problem getting the arts funding but,

50 University of Western Australia, *Wanti Sugarba: a report of the intervention phase of the Northern Goldfields Kidney Health Project*, July 2007, Exhibit No. 85, p 3.

51 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 36.

sadly, the health funding is extremely difficult to secure. There has been very little commitment from state and federal health.⁵²

6.63 At the Adelaide hearing, the Committee was told about the excellent results that the Fit2play program had achieved. When asked how long the program would continue Committee members were told 'one term'.⁵³ The organisers told the Committee they are attempting to put in place a fundraising scheme within the schools participating in the program which will eventually allow the program to be self-funded and sustainable. However, this will take time and, meanwhile, the program will need ongoing commitment from a funding source to continue.⁵⁴

6.64 The Committee heard from local governments responsible for providing recreation programs and facilities, that they too find it difficult to obtain ongoing funding. The Mackay Regional Council in North Queensland told the Committee they had instigated a very successful Active Parks program that attracted 1300 participants over approximately ten months. The program was funded from a one-off grant from Sport and Recreation Queensland and Queensland Health. The Locality Development Officer receives frequent inquiries from the public wanting to know when the activities will be run again and told the Committee:

I had to explain that unfortunately it was a funded program and we do not have any more money, so we are not doing it again ... It is a kind of catch 22, where the community really want it and we would love to give it to them but we are under resourced to be able to deliver this as an ongoing thing.⁵⁵

6.65 The Committee was delighted to learn that secure, ongoing funding will ensure sustainability of the Stephanie Alexander Kitchen Garden National Program with \$12.8 million being committed over four years. Stephanie Alexander told the Committee that she and her team had deliberately started the program on a small scale to make sure that it would work before committing to the large scale program. Careful planning and selection of a start up school gave the program a chance to work through

52 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 40.

53 Mr M Henderson, Queen Elizabeth Hospital Research Foundation, Official Transcript of Evidence, 13 June 2008, p 9.

54 Mr M Henderson, Queen Elizabeth Hospital Research Foundation, Official Transcript of Evidence, 13 June 2008, p 12.

55 Mrs KM Gooch, Mackay Regional Council, Official Transcript of Evidence, 18 August, 2008, p 11.

any difficulties. The program was trialed in Victoria to further modify and refine the process and test adaptability to different types of schools and determine what was required to ensure success before being rolled out nationally.

6.66 In 2009 the program was rolled out nationally and at a private briefing in Canberra the Committee was updated on the outcome of the first round of grants. The Department of Health and Ageing (DoHA) informed the Committee that 44 schools had received grants to implement the Program in 2009: 7 demonstration schools in metropolitan areas, 20 city schools and 17 rural/remote schools. DoHA explained that the application process is designed to enhance sustainability. By gathering the information required and completing the application a school demonstrates the commitment and capacity to successfully run the program. The reasons schools missed out on selection highlighted areas that would compromise the school's ability to implement the program and included a combination of the following:

- lack of adequate garden space;
- lack of space to convert to kitchen use;
- insufficient capacity to fund staff; and
- lack of capability to generate local, in-kind support.

6.67 The Committee also raised with DoHA the issue of extending the program beyond the school system, perhaps to youth and unemployed groups. DoHA assured the Committee that once the program is well established in the school system it will look at expansion, but this will not be for several years. They told the Committee that DoHA is developing an evaluation strategy which will ensure the program improves and grows. The Committee endorses the program and Members have written to schools in their constituency to encourage them to apply for grants in coming rounds.

Recommendation 19

6.68 The Committee recommends that the Federal Government continue to support initiatives such as community garden projects, cooking classes and the Stephanie Alexander Kitchen Garden Program, in order to teach children and adults about:

- The benefits of growing and eating fresh fruit and vegetables; and
- Preparing and enjoying healthy and nutritious meals.

Figure 6.4 Members visited Westgarth Primary School in Melbourne to learn more about the Stephanie Alexander Kitchen Garden Program, Victoria



Parental involvement

6.69 The Committee heard substantial evidence that programs targeting children are more likely to be sustainable if parents and carers are involved. Parental involvement and interest ensures children will be encouraged and supported to make and continue behavioural change.

6.70 Associate Professor Collins from the HIKCUPS program identified the parent-centred interventions as the most successful part of that program. She put the reason succinctly to the Committee:

... parents are the gatekeepers of the kitchen and you have to change energy intake in order to affect weight loss ...⁵⁶

6.71 Mr Georgalli, the creator of the Fit2play program, told the Committee that parental involvement ensured behavioural change for both the children and parents. He demonstrated how this flow on effect works:

So children endorse the values of the program and go home to mum and dad; mum and dad see that Johnny all of a sudden wants to have broccoli on his plate as opposed to fried chips. What is the first thing that a parent is going to be doing? They are going to think, 'Wow, this is great. I'm going to support Johnny in what he wants to do.' So all of a sudden, when they are in the supermarket they are purchasing broccoli as opposed to those chips that are pre-prepared and have trans-fatty acids inside.⁵⁷

6.72 This example also demonstrates that parents find it easier to encourage behavioural change in their children when they are given external support. This was borne out by other programs. At the hearing in Dubbo, the Committee heard from a teacher at St Pius X Primary School where they introduced a policy of 'Fruit First Monday' that required every child to eat a piece of fresh fruit at the beginning of their recess on Mondays. Parents who had been finding it difficult to get their children to eat fruit could now insist it was school policy:

Parents now say, 'The teacher said that you have to have it, we say that you have to have it, so it is coming along.' That was the biggest change of mindset. We were supporting parents and they were supporting us.⁵⁸

6.73 Mr Cant, the Acting Principal of St Pius X Primary School went on to explain that parent support had not only sustained the program but expanded it. Instead of just one day a week, the program now runs five days a week and this was instigated by the parents:

56 Associate Professor CE Collins, Official Transcript of Evidence, 12 September 2008, p 34.

57 Mr M Georgalli, The Queen Elizabeth Hospital Research Foundation, Official Transcript of Evidence, 1 October 2008, p 24.

58 Mrs M Gabb, St Pius X Primary School, Official Transcript of Evidence, 10 September 2008, p 29.

They brought it up at a meeting and said, 'Why do you not do it for five days? If you guys do it we will do it.' We said, 'You are the ones who are packing the lunchboxes. We will go along with it.' It has gone from there and it is now second nature.⁵⁹

A whole-of-community approach

- 6.74 The Committee heard that a whole-of-community approach also contributes to long-term results and sustainability by developing skills and resources within the community and creating environmental change. By making changes within the community and building its strength the community is given the capability to continue programs.
- 6.75 The town of Dalwallinu in Western Australia, mentioned earlier in this chapter, is a good example. Instead of a program being imposed from outside and offered for a limited time, the initiative of the community member resulted in Dalwallinu gaining a trained exercise provider, exercise space and equipment. WA Health told the Committee that in the five years since the town has collectively lost a lot of weight and taken steps to incorporate healthy dietary practices into the physical activity program. Currently, approximately 50 members of the town travel 150 kilometres every week to attend a Weight Watchers program in a neighbouring town because nothing similar is available in Dalwallinu.⁶⁰
- 6.76 The Committee received an evaluation of the Colac intervention that showed the project had promoted sustainability through the development of skills and resources within the community, but it also found that the program had contributed to changing the overall environment of the community. For example, both the school canteen and take-away food outlets in the community now offer healthier food choices.⁶¹
- 6.77 The Committee heard that one of the important benefits for the Wellington community from the WellingTONNE Challenge was the training of local people as exercise group leaders.⁶² In this community too, the environment changed with local food outlets improving food choices. For

59 Mr G Cant, Acting Principal, St Pius X Primary School, Official Transcript of Evidence, 10 September 2008, p 29.

60 Mrs K Gatti, Western Australian Department of Health, Official Transcript of Evidence, 6 November 2008, p 6.

61 WHO Collaborating Centre for Obesity Prevention, Submission No. 95, npn.

62 Associate Professor D Perkins, Broken Hill Centre for Remote Health Research, Official Transcript of Evidence, 9 December 2008, p 7.

example, local hotels began to offer grills and salads instead of schnitzel and chips.⁶³

Flow-on benefits

- 6.78 The Committee discovered that the benefits of community programs and partnerships reached far beyond the targeted area of obesity prevention or intervention. By changing lifestyles, either through dietary or activity interventions, these programs contributed to building a sense of community and provided social benefits, including improving mental health and reducing individual isolation.
- 6.79 The Committee was provided with anecdotal evidence identifying the following additional benefits from the WellingTONNE Challenge:
- The recently bereaved, discovering a reason to socialise again.
 - The program providing a social function that everyone could attend.
 - 'Community awareness also made it okay to talk about being overweight.'
 - 'Fun, friendly atmosphere created within the Wellington Community. Good positive media coverage for the community, made us all feel proud to be part of it.'
 - 'Feeling motivated because everyone is doing it.'
 - 'I've had depression for three years. In the past four weeks, I've felt better than [I have] in a long time because I'm socialising and exercising.'⁶⁴
- 6.80 Many of the community and school garden projects that the Committee came into contact with demonstrated numerous flow-on-benefits. The Committee experienced this first-hand at the West Leederville Community Gardens in Perth where they met parents, teachers, children and volunteers working together, forming friendships and sharing knowledge. Escorted to the gardens by students from nearby West Leederville Primary School, the Members met a variety of local community people involved in the garden project. While the garden is a source of fresh produce for the community, it is also an important centre for community

63 'The Wellington Challenge', *Local Government Focus*, September 2005, <<http://lgfocus.com.au/editions/2005/september/september.shtml>> accessed 17 April 2009.

64 Australian Department of Health, *A healthy lifestyle resource based on experiences from the WellingTONNE Challenge*, Exhibit No. 95, p 33.

interaction. Members met a range of people involved, including a local bariatric surgeon and resident retirees passing on gardening knowledge from one generation to the next. The Committee was told that barbeques are held on Saturday afternoons when everyone has finished work in their gardens. Committee members lent a hand with pitchfork and shovel while children and adults alike shared their stories of growing, harvesting and enjoying fresh produce. One Committee member commented on the sense of community spirit being reclaimed by the project.

Figure 6.5 West Leederville Community Gardens, Perth, Western Australia



6.81 Gardening was also a component of the Western Desert Kidney Health Project, albeit taking a different approach. Dr Jeffries-Stokes told the Committee that conventional community gardens projects had failed in the past so instead they:

... taught people how to set up household gardens, growing things in pots, and school gardens. Now all the schools have fruit

trees in their yards and they have school gardens growing vegetables, and lots of people are growing stuff at home.⁶⁵

- 6.82 Dr Jeffries-Stokes went on to speak about an unexpected benefit of the project. Many of the able-bodied adults have left the communities for work due to the resources boom. The children, elderly and less able-bodied left behind often felt they are not contributing to the community but growing fresh produce in their gardens makes them feel valued again:

... it is also very rewarding for those people who may not be feeling very productive, very useful or very valued, because they can be the ones that grow stuff, who stand there with a hose and water it.⁶⁶

- 6.83 In Adelaide, the Committee heard about another community changing event. The Fit2play program was successfully implemented in a number of schools in the Gawler area. Ms Flint from the Gawler Health Service shared a story with the Committee that demonstrates the power of children to effect community change:

... one of our supermarket owners rang up after the program had been going a few weeks and he said, 'I'm sick and tired of all these people coming through stores with their children on Thursday nights, because they are all reading labels' - and that was one child to the other reading the same label. He said, 'Could you please stop it, because it is becoming a nuisance.' I do not know what happened, but the store had to close for two days and they had to alter their aisles. There was not the correct regulated space in between the aisles. That was the power of children.⁶⁷

Committee comment

- 6.84 The Committee was impressed by the strength and breadth of the community programs and partnerships they saw and heard about during the inquiry. The Committee was also encouraged by the positive stories and tangible results that came out of these programs.

65 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 41.

66 Dr C Jeffries-Stokes, Western Desert Kidney Health Project, Official Transcript of Evidence, 6 November 2008, p 41.

67 Ms E Flint, Gawler Health Service, Official Transcript of Evidence, 13 June 2008, p 12.

- 6.85 While these programs are not the whole solution, they are a vital part of the overall solution. These often small, local programs initiate incremental change that creates a snowball effect, contributing substantially to the effort to combat the national obesity epidemic.
- 6.86 Community programs reinforce moves by governments and health agencies to encourage physical activity and healthy eating. The programs demonstrate practical ways that increased physical activity and healthy choices can be embedded in everyday life. These types of projects are successful because they draw on the large pool of expertise and knowledge existing in our communities. The Committee notes the potential for community skills to be tapped further to provide innovative and lasting solutions to the obesity epidemic. Programs of this ilk have in developing and maintaining motivation for individuals and the contribution they make to long-term and sustainable solutions.
- 6.87 The Committee acknowledges the important role that community programs and partnerships play in addressing the issue of obesity in Australia. What is needed, however, is work to correlate and disseminate information about successful programs. In this regard the Committee supports the work being done by Deakin University through the Community Obesity Prevention Sites Collaboration (CO-OPS) which will provide this type of information. This project has been funded by the Department of Health and Ageing for four years (2008-2011) and will collect, correlate and disseminate the knowledge gained from the implementation of a number of community-based projects. CO-OPS will establish a collaboration network to share knowledge and develop an evaluation system and best practice principles for communities and other interested stakeholders.
- 6.88 To complement the Deakin work, the Committee suggests that the Department of Health and Ageing develop some information kits and fun educational resources for use by children, parents, teachers and community organisations across Australia. These should highlight a selection of the community programs and projects promoting healthy diets and active lifestyles that have been brought to the attention of the Committee during this inquiry. The resources might take the form of posters, booklets, and/or CD/DVDs.
- 6.89 The resources should be made available quickly to interested families, schools and community organisations across Australia to enable the good ideas gathered in this inquiry to be disseminated as widely as possible, and hopefully inspire other communities to try them or their own versions. The Committee believes that it would be useful to have these

resources available through a central repository and that the website of the *How do you measure up?* campaign could be expanded into such a repository. This type of information would complement the tape measure kit already available through the website and give concrete examples of actions that individuals and communities can undertake in order to be more healthy and active.

Recommendation 20

- 6.90 **The Committee recommends that the Minister for Health and Ageing explore ways to enhance the *How do you measure up?* campaign website and further develop it as a central repository of information about the benefits of healthy eating and exercise.**