



CENTRAL COAST SOCIAL PLANNING FRAMEWORK

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PURPOSE

The Central Coast Social Planning Framework (the Framework) guides and informs all efforts to make a positive difference to the community's health and well-being.

INTRODUCTION

The Council is committed to working with its community to make sure the Central Coast is a great place to live, work, play and raise a family. The aim is that everyone has the opportunity to realise their potential and fully participate in all aspects of community life. This means tackling the challenges and developing opportunities to build resilience and prosperity for the benefit of *all*, with a particular focus on those who, for whatever reason, are at risk of social exclusion.¹

The Framework provides the direction and outcomes sought to achieve improved health and well-being. It comes from and contributes to the realisation of the community's vision and Strategic Plan (2014-2024), which outlines the things that need to be done to achieve the preferred future.

The Framework also assists the Central Coast Council (the Council), stakeholders, service providers and the community to define their roles, allocate resources, make contributions, engage and communicate shared purpose and take action.

As the needs of many individuals in our community become more complex, the demand on relevant support systems and services will come under increased pressure. To effectively respond, all involved will need to work together to achieve local social outcomes.

More traditional public service delivery roles and responsibilities will of course continue, however the emerging emphasis is on approaches based on building relationships and working collaboratively with local people and groups within our community.² It is these emerging approaches that the Framework will influence the most.

Governments at all levels have an important role to play, but they are no substitute for a community's own knowledge, networks, enterprise, institutions and other forms of social capital.³ This creates the context for new place-based and collaborative approaches to community development and service delivery, which build from existing capabilities and provide the basis for engaging key local stakeholders in the development and delivery of their own meaningful solutions to identified issues.

It is also important that the Council's efforts complement the plans and initiatives that are being considered or implemented across neighbouring councils, the broader region and the

¹ Social inclusion means building a community in which its residents have the opportunity and support they need to participate fully in economic and community life, develop their own potential and be treated with dignity and respect. 'A Stronger, Fairer Australia', Commonwealth of Australia (2009)

² Managing councils in the future will be more akin to running a start-up; Guardian Professional; 28 February 2014

³ 'Community Agency and Community Engagement: Re-theorising Participation in Governance'; Eversole; 2011; Journal of Public Policy, 31, 1, p. 51-71

State. Local Government boundaries may serve a useful purpose for the delivery of local public infrastructure and services, however such jurisdictions do not necessarily coincide with the various scales at which community development should occur. More collaborative, adaptable and scalable approaches may be required to address complex or shared issues affecting social well-being.

In developing this Framework we acknowledge the valuable contribution of our Councillors, staff, community members, local groups, service agencies, neighbouring councils and peak bodies who brought their collective knowledge and experience to the following strategic conversations, projects and activities:

- The Mayor's Health and Well-being Roundtable;
- The Council's Social Determinants of Health workshop;
- The Mersey-Leven Food Hub project;
- The Local Food Security Strategy planning workshop; and
- Research and evidence of the Healthy Food Access Tasmania project (Heart Foundation).

CONTEXT

Health and well-being are linked and are essential for quality of life, which over the long term is central to active participation and engagement in society. Physical health is the most important area of overall quality of life.⁴ Physical health is connected to mental and emotional health. Taking care of your body is a powerful first step towards mental and emotional health. The mind and the body are linked. When you improve your physical health, you'll automatically experience greater mental and emotional well-being.

The Framework includes a focus on health as the first step to assist Central Coast residents to enjoy active, engaged, included, secure, healthy lives and continue learning throughout their journey. The Guiding Principles and priority areas for action articulate the Council's commitment to health and well-being outcomes and their importance to social planning. This commitment will enhance the ability of the Council, service providers, stakeholders and the community to work towards enabling sustainable quality of life for Central Coast residents.

Global

The World Health Organisation (WHO) defines social determinants of health as 'the conditions in which people are born, grow, live, work and age'. The health system also forms part of the definition. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are in turn influenced by policy choices. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.

There is ample evidence that social factors including education, employment status, income

⁴ Quality of life refers to the desirability of a place to live in terms of its non-marketable (social) goods and is therefore important for social planning. 'Developing indicators to inform local economic development in England'; Wong; 2002; Urban Studies, 39, 10, p. 1833-1863

level, gender and ethnicity have a marked influence on how healthy a person is. In all countries, whether low, middle or high-income, there are wide disparities in the health status of different social groups. The lower an individual's socio-economic position, the higher their risk of poor health.

Health inequities have significant social and economic costs to individuals, communities and societies.

State

The Tasmanian Government's vision is for Tasmania to have the healthiest population in Australia by 2025. Taking effective action in preventive health is integral to achieving this vision. The Healthy Tasmania Five Year Strategic Plan makes the case for change and proposes new approaches for identifying, managing and evaluating preventive health programs.

The Healthy Tasmania Committee (HTC) developed a framework of principles, strategies and enablers to underpin new directions for preventive health in Tasmania.

The principles are:

- Focus on people and communities;
- Facilitate coordination, communication and collaboration between sectors to improve health outcomes;
- Take action that promotes health through responsible partnerships;
- Reduce inequities in health;
- Make health information publicly accessible; and
- Strengthen prevention by building the evidence-base and understanding of what works.

The four key strategies for developing priorities and actions are:

- **Concentrate on the early years** - support families to give their children a healthy, positive start that has lasting health and well-being benefits;
- **Create health where people live, learn, work and play** – work with organisations and all parts of government to foster the conditions that support people to make healthy choices;
- **Target health risk factors** – reduce smoking and risky alcohol consumption and improve nutrition, physical activity levels and mental health; and
- **Focus on the health of vulnerable groups** – target actions where evidence tells us there is the greatest risk of harm.

The proposed key leadership enablers to drive effective action are:

- **State-wide leadership** – to inform and coordinate action and track progress towards meeting the healthiest population in Australia by 2025 goal;
- **Public access to information** – combine new and existing data to develop public and organisation understanding and the capability to act; and
- **Work in health promoting ways** – provide services and information in ways that promote health and well-being and are easy for individuals to understand.
- **Local action and choice** – people gain greater control of their own health by working in their own local community, with local community groups and organisations and local government;

Local

The Council's Strategic Plan (2014–2024) identified and is already addressing a number of key outcomes. Those that relate specifically to this Framework include:

- Socio-economic well-being;
- Economic prosperity and resilience;
- Resilient and engaged community; and
- Healthy community and healthy lifestyle.



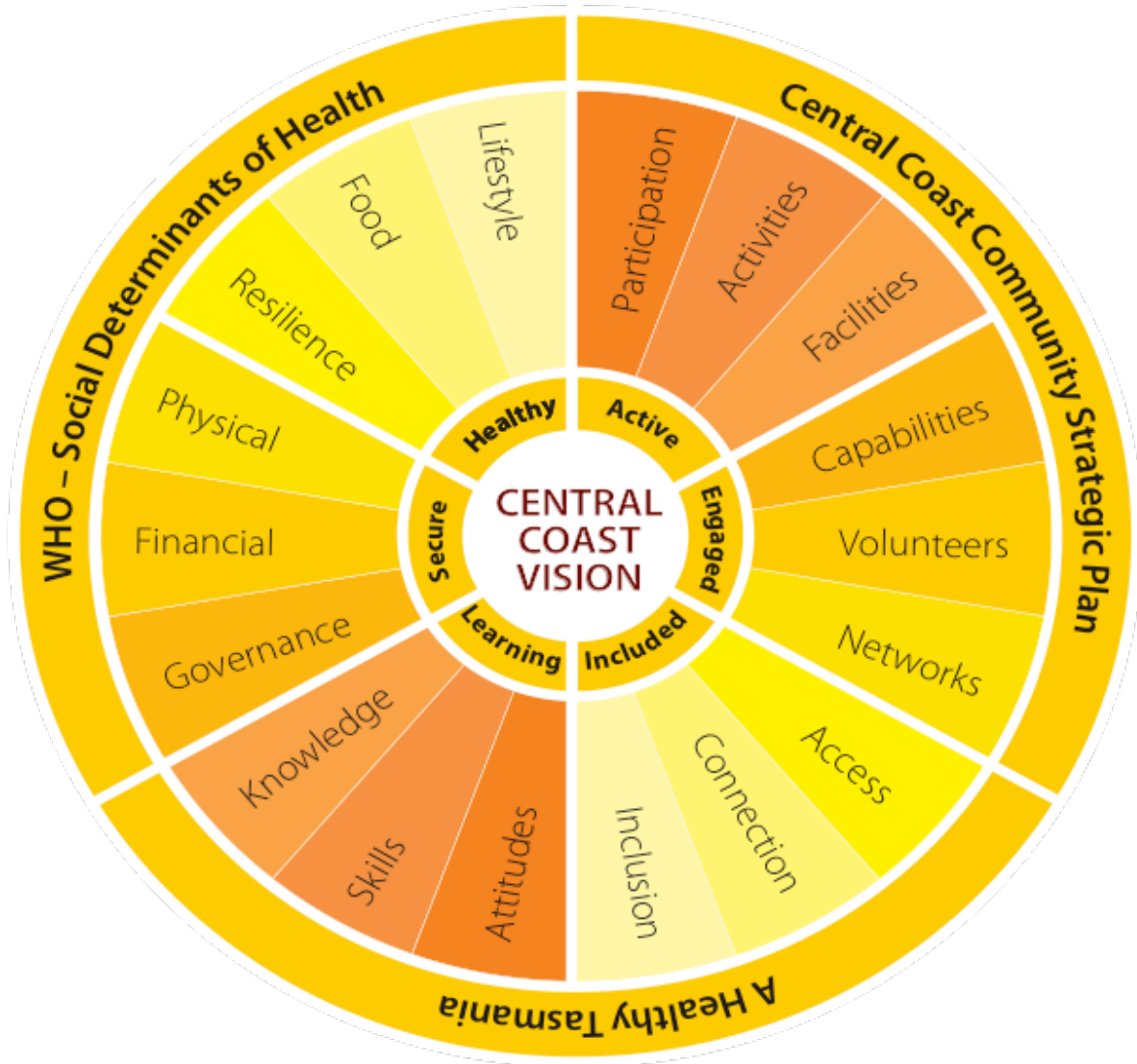
RATIONALE - THE PRESENT SITUATION

The following table outlines the Central Coast community health profile:

| | |
|---------------------|--|
| Ageing | <ul style="list-style-type: none"> • 40.5% of the population is over 50 years; • The median age is 43 years; and • There is a leakage in the productive section of the population aged 29 to 49 years. |
| Diversity | <ul style="list-style-type: none"> • 5.9% of the population (1,269 people) are Aboriginal and Torres Strait Islander; and • 2.6% of the population came from countries where English was not their first language. |
| Disadvantage | <ul style="list-style-type: none"> • 8% are unemployed; • 33% are Concession Card holders; • 348 single parent households; • 1,328 residents are receiving the disability support payment; • 6% of households are without a car; • 26.8% of households are single (lone person) households; • 23.5% of households experience housing stress (>30% household income spent on rent or mortgage payments); • 17% of children are estimated to be living in poverty; and • SEIFA (Socio-Economic Indexes for Areas) Index score 956.4. |
| Education | <p>In 2011:</p> <ul style="list-style-type: none"> • 27% were attending an educational institution of which 31.5% were attending primary school and 22.8% were attending secondary school; • 51% reported no educational qualification; • 23% reported a vocational qualification; and • 16% reported a degree or diploma. |
| Employment | <ul style="list-style-type: none"> • 9,522 people report being in the labour force; • The top four industries of employment are health care and social assistance, retail, manufacturing and education and training. The highest increase in numbers since 2006 is in construction and mining; and • The top three occupations are technicians and trade workers, professionals and labourers and the number of community and personal service workers increased the most. |
| Health | <ul style="list-style-type: none"> • 22.2% of adults are obese; • 21.6% of adults report their health as poor or fair; • 27.9% of adults drink alcohol at lifetime risky levels; • 28.5% are insufficiently active; • 46.3% of adults eat the recommended two pieces of fruit per day; • 10.8% of adults eat the recommended five serves of vegetables per day; • 14.1% of adults are daily smokers; and • 84.2% of adults were screened for high blood pressure in the last two years. |

CENTRAL COAST SOCIAL PLANNING FRAMEWORK

The Framework places the Central Coast community vision at centre, linking the Council's Strategic Plan (2014-2024), WHO social determinants of health and the State Government's Healthy Tasmania Strategic Plan to place-based needs.



Vision

‘Central Coast – living our potential. We are a vibrant, thriving community that continues to draw inspiration and opportunities from its natural beauty, land and people and connected by a powerful sense of belonging.’ This is the community’s vision.

The Council’s Strategic Plan 2014-2024 outlines strategies and actions to help achieve the preferred future around the following strategic directions:

- The Shape of the Place;
- A Connected Central Coast;
- Community Capacity and Creativity;
- The Environment and Sustainable Infrastructure; and
- Council Sustainability and Governance.

Guiding Principles

The following principles will guide the work and approaches of the Council, stakeholders and community towards achieving positive change in the community’s present health and well-being outcomes.

Making a Difference

- Transforming the systems and relationships to produce social impact and better community outcomes;
- Aligning practices, delivery systems and culture with the Central Coast Vision; and
- Taking action; achieving by doing.

Innovation

- Using the Framework to align effort across policy and service domains;
- Identifying improved and new ways of working; and
- Providing inspiration and incentives to encourage innovation to achieve agreed outcomes.

Collaboration

- Working together to achieve positive social outcomes;
- Using a shared vision and purpose;
- Building on existing assets/strengths;
- Developing broad coalitions to identify and resolve key challenges; and
- Developing service agreements, partnerships and other effective collaborative models.

THE COUNCIL'S RESPONSIBILITIES AND ROLES

Provision of goods and services

Broadly speaking, the Council can provide three kinds of goods and services:

| Type of good | Characteristics | Funded by |
|----------------|--|---|
| Public | Provided by government because there is wide community benefit, everyone has equal access and market failure exists in provision. Could be described as core business. There is an expectation that government will provide. | Taxes. |
| Mixed | Provision can be shared between government and the private sector. It is discretionary for government; however there is community demand, which justifies involvement. Part market failure exists for its provision. | <ul style="list-style-type: none">• User charges; and• Community Service Obligations (CSO) |
| Private | Provided by the public sector and with no reason for government to be involved. Market forces set demand for the service. There is no market failure for the provision. Access is not equal to all. | Price. |



ROLES

The three roles of the Council are provider, facilitator and advocator.

The **provider** role includes regulatory activities. The Council provides the good or delivers the service because they are required by legislation to do so. Presently, community related services the Council provides include the following:

- Accommodation for older members of the community;
- Arts and cultural development;
- Building and plumbing services;
- Caravan parks;
- Cemeteries;
- Child and youth services;
- Community, cultural, recreation, sport and leisure facilities;
- Dog control;
- Economic development;
- Emergency services;
- Event support;
- Facilities, roads, footpaths and street lighting;
- Immunisation;
- Land-use planning;
- Public amenities;
- Public health and environmental management;
- Rubbish collection;
- Stormwater drainage;
- The 'Made Open Tasmania' online engagement and networking platform; and
- The community's public realm.

As a **facilitator** the Council cooperates with other groups to help deliver a good or service. The facilitating actions can be large or small. Presently, the Council helps facilitate the activities including that of:

- Anglicare;
- Central Coast Community Safety Partnership Committee;
- Central Coast Youth Engaged Steering Committee;
- Cradle Coast Innovation;
- Forth Community Representatives Committee;
- Inter-Agency Support Team;
- Red Cross;
- The Heart Foundation;
- Turners Beach Community Representatives Committee;
- Ulverstone Wharf Precinct Advisory Committee; and
- Volunteering Tasmania.

As an **advocate** the Council speaks up, lobbies and supports a cause or issue. Apart from also advocating for the issues and outcomes sought by the groups above, the Council speaks up and lobbies for equity of access for State and Federal Government funding, improved and/or new services and to influence the directions of, for example:

- Regional Development Australia;
- The Cradle Coast Authority;
- The Department of State Growth; and
- The Tourism Industry Council of Tasmania.

Actions

Building on the social determinants of health, the Framework outlines health and well-being priority areas for action, community outcomes and indicators to monitor and measure so the positive difference that is being made is known.

There will be actions that the Council will be able to undertake within their three roles of provider, facilitator and advocate to achieve the desirable outcomes around the six elements that need to be addressed to make a difference:

Active

Opportunities and facilities to gather and participate in recreational activities and cultural experiences.

Engaged

Capabilities and networks to volunteer our time and skills and engage in decisions that affect us.

Included

Connectivity and inclusivity for our communities to access services, shops, education, work and play.

Learning

The knowledge, skills and commitment to learning needed to participate fully in society and reach our potential.

Secure

Local work opportunities and affordable living in a well-governed and safe community environment.

Healthy

Local resources to support good food and lifestyle choices that build physical health and emotional resilience.



KEY COUNCIL STRATEGIES AND PLANS

The many actions and associated tasks are contained within these Council strategies and plans⁵:

| Type of good | Healthy | Learning | Included | Active | Secure | Engaged |
|---|---------|----------|----------|--------|--------|---------|
| Accommodation Strategy* | | | ✓ | ✓ | | ✓ |
| Arts & Culture Strategy | | ✓ | ✓ | ✓ | | ✓ |
| Asset Management Plan - Buildings & Facilities | ✓ | | ✓ | ✓ | ✓ | |
| Asset Management Plan - Parks & Natural Resources | ✓ | | ✓ | ✓ | ✓ | |
| Community Safety Plan | | | | ✓ | ✓ | ✓ |
| Disability Access Strategy* | ✓ | | ✓ | ✓ | ✓ | ✓ |
| Economic Development Framework | | ✓ | ✓ | ✓ | ✓ | ✓ |
| Emergency Management Plan | | | | | ✓ | |
| Events Management Guide | | ✓ | ✓ | ✓ | ✓ | ✓ |
| Forth Community Plan | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Local Food Security Strategy* | ✓ | ✓ | ✓ | ✓ | | ✓ |
| Open Space and Recreation Plan | ✓ | | ✓ | ✓ | ✓ | ✓ |
| Positive Ageing Strategy* | ✓ | | ✓ | ✓ | ✓ | ✓ |
| Recreation & Facilities Strategy | ✓ | | ✓ | ✓ | ✓ | ✓ |
| Shared Pathways | ✓ | | ✓ | ✓ | ✓ | ✓ |
| Turners Beach Community Plan | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Visitor Strategy | | | ✓ | ✓ | | ✓ |
| Venue Management Plans | ✓ | | ✓ | ✓ | ✓ | |
| Volunteering Strategy* | | ✓ | ✓ | ✓ | | ✓ |
| Youth Strategy* | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

⁵ The Council's planned Strategies/Plans and those currently being developed (*)

SOCIAL INDICATORS OF SUCCESS FOR THE COUNCIL TO MONITOR AND MEASURE

One of the key roles the Council can play overall is to monitor, measure and report whether a positive difference is being made to the community's health and well-being. Outlined in the table below around each social determinant of health are the community outcomes sought, community indicators to monitor, local initiatives to measure and the data sources.

| Social determinants of health | Community outcomes | Community indicators (to monitor) | Local initiatives (to measure) | Data sources |
|--|---|--|--|---|
| Active Opportunities and facilities to gather and participate in recreational activities and cultural experiences. | Participation | Insufficient physical activity | | Department of Health and Human Services, Tasmania Population Health Survey (2013; next release 2018) |
| | Activities: sport and recreation | | Registered sporting groups | Council data |
| | Facilities: shared pathways, open space, community facilities | | Community facilities bookings | Council data |
| Engaged Capabilities and networks to volunteer our time and skills and engage in decisions that affect us. | Capabilities | | Partnerships established around collaborative projects | Council data Made Open Tasmania ⁶ |
| | | | Collaborative projects that make a difference | Council data |
| | Volunteers | Unpaid Work: Percentage of Total Population Aged 15 Years and Over - Persons undertaking voluntary work for an organisation or group (%) | Volunteers involved with Council activities | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) Council data |
| | Networks | | Council-led community engagements | Council data |

⁶ An online engagement platform where individuals, communities and organisations come together to connect, share ideas, start projects, crowd-source and create events.

| Social determinants of health | Community outcomes | Community indicators (to monitor) | Local initiatives (to measure) | Data sources |
|---|--------------------|--|--------------------------------|---|
| Included Connectivity and inclusivity for our communities to access services, shops, education, work and play. | Access | Access to internet at home – with broadband connection (%) | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| | Connection | Local jobs | | Department of Employment, Small area labour markets (December 2016; March quarter 2016 issue of SALM will be released in June 2016) |
| | Inclusion | Acceptance of other cultures – cultural diversity | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| | | Migration in to and out of the area | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| Learning The knowledge, skills and commitment to learning needed to participate fully in society and reach our potential. | Knowledge | Adult literacy and life skills | | Australian Bureau of Statistics, Programme for the International Assessment of Adult Competencies (2011-12) |
| | | People aged 20-24 years with Year 12 or higher qualification | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| | Skills | People employed in high and low skilled occupations who live and work in Central Coast | | Department of Employment, Small area labour markets (December 2016; March quarter 2016 issue of SALM will be released in June 2016) |
| | Attitudes | People aged 15-19 years not engaged at all in work or study | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| Secure Local work opportunities and affordable living in a well-governed and safe community environment. | Physical | Crime rate | | Tasmanian Department of Police and Emergency Management Crime Statistics Supplement (2013-14; next release 2016) |
| | Financial | Unemployment | | Department of Employment, Small area labour markets (December 2016; March quarter 2016 issue of SALM will be released in June 2016) |
| | | Housing stress (>30% household income spent on rent or mortgage payments) | | Australian Bureau of Statistics, Census of Population and Housing (2011; next release 2016) |
| | Governance | | Community Survey | Central Coast Council Community Survey (2015, next release April 2019) |

| Social determinants of health | Community outcomes | Community indicators (to monitor) | Local initiatives (to measure) | Data sources |
|---|--------------------|--|--------------------------------|--|
| Healthy Local resources to support good food and lifestyle choices that build physical health and emotional resilience. | Resilience | Psychological distress, high or very high | | Department of Health and Human Services, Tasmania Population Health Survey (2013; next release 2018) |
| | | Tobacco use, alcohol risk and recent (a) illicit drug use, people aged 14 years or older, by Statistical Area Level 4 (SA4), 2013 (per cent) | | AIHW National Drug Strategy Household Survey (2013; next release 2017) |
| | Food | Obese BMI | | Department of Health and Human Services, Tasmania Population Health Survey (2013; next release 2018) |
| | | Adequate consumption of fruit and vegetables | | Department of Health and Human Services, Tasmania Population Health Survey (2013; next release 2018) |
| | Lifestyle | Potentially preventable hospitalisations, age standardised rate per 1,000 population | | Department of Health and Human Services, Epidemiology Unit data (2011; next release 2018) |
| | | Persons aged 18+ with four or more chronic conditions | | Department of Health and Human Services, Tasmania Population Health Survey (2013; next release 2018) |

CONTACTS

If you would like information, want to share what you are doing or make use of the online engagement platform '**Made Open Tasmania**', where individuals, communities and organisations come together to connect, share ideas, start projects, crowd source and create events please contact:

Heidi Willard

STRATEGY & POLICY OFFICER

