PATHWAYS TO HEALTHY BOORAIS AND FAMILY PROJECT – A KOOLIN BALIT INIATIATIVE











The Policy Context

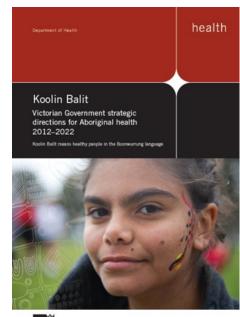
The Koolin Balit 2012-2022 – Victorian Government Strategic Directions for Aboriginal Health

Brings together Victoria's total effort in Aboriginal health in an integrated, whole of life framework based

around a set of key priorities and enablers

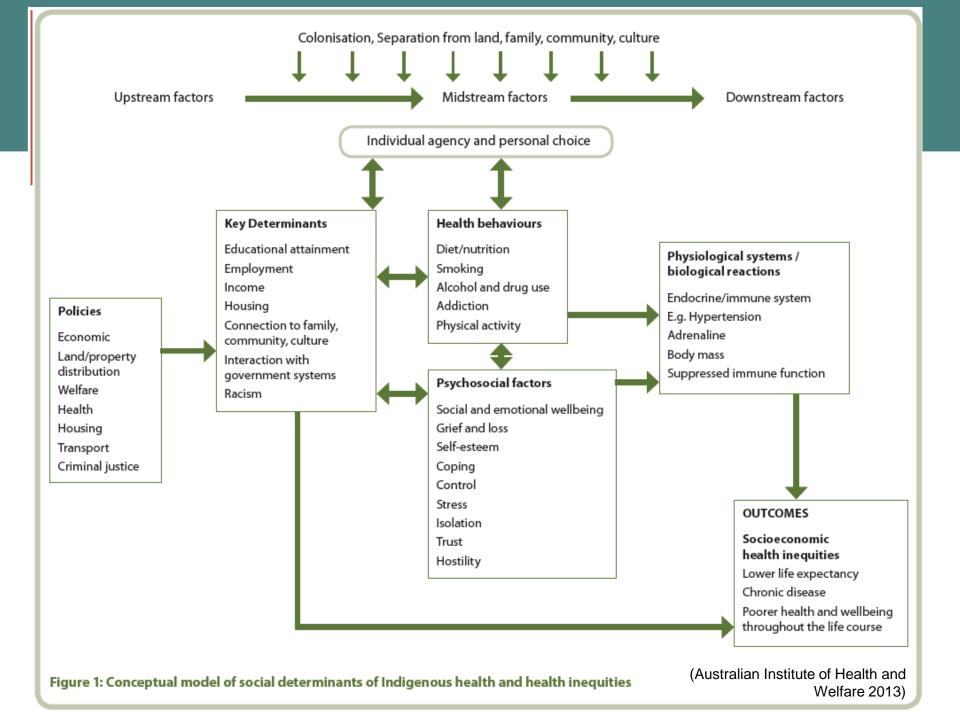
six key priorities:

- a healthy start to life
- 2. a healthy childhood
- 3. a healthy transition to adulthood
- 4. caring for older people
- addressing risk factors
- 6. managing illness better with effective health services









- Healthy
 Boorais and
 Families
 Program
- Feedback

Outcomes: Piloting the Project Planning Template

Healthy Boorais & Families Program

Strengthening linkage pathways to health and wellbeing support services for Aboriginal children and youth, to improve health outcomes and school engagement.



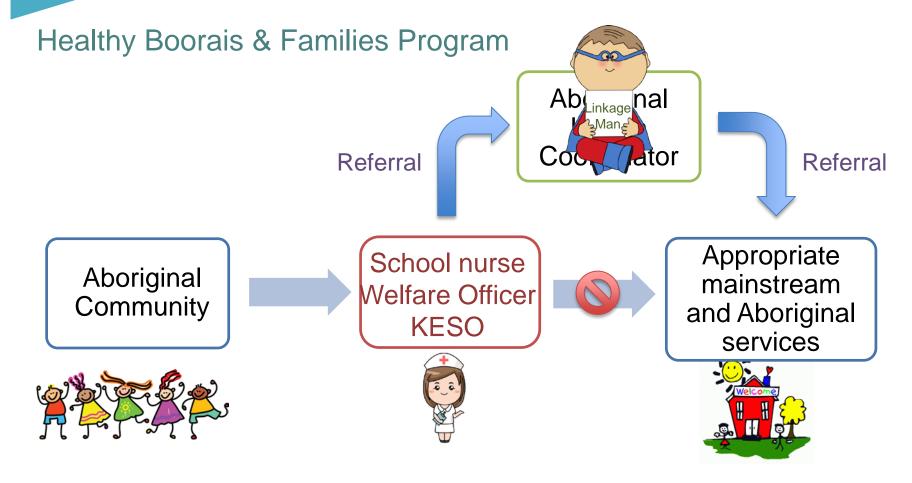
Population Health Principles	Examples of what we can do
1. Health is for everyone We start by seeing who is not healthy in the community, and why. We need to pay special attention to people who are more disadvantaged and cannot achieve the same level of health as the general community.	 Look at health status data (e.g. life expectancy, number of deaths, suicide rates) Compare health differences between different groups of people in the community There will be many things making people unhealthy. You need to decide amongst the data you have looked at which is the most critical
2. Look at why some are not as healthy as others and work on those causes To build a healthier community, we must focus on the "causes". What impacts the health of the people within the community? They could be: Income Transport Social environment, status, and support networks Education Employment, job security, work conditions Family violence Stress Early life Culture Lifestyle: smoking, drugs, diet, physical activity etc. Health and social services Disability & mental illness	 Build Aboriginal cultural values into available health and support services Providing culturally appropriate services to the community Think about what your Project can contribute to community. For example: Building a more cohesive community Motivating people to make the healthy choice the easy choice. For example what is needed to help keep Aboriginal kids at school and strengthen the school process to better meet their needs? Improving health status comes from changing the factors that are causing poor health. It is important to decide what is it that needs to be changed

 3. When you have decided what needs to be changed gather information to learn what works and what doesn't We can learn from looking at: Quantitative data: demographics, vital statistics Qualitative information provided by community, project staff, stakeholders, experts 	If the problem is low school attendance, gather information which can tell you what others have done, what has or has not worked. It might mean: Undertaking Aboriginal Cultural Awareness training with teachers and the broader school community. Partnering with the local Community Health Service to get active involvement of the children's services to support Aboriginal families and teachers.
4. Promote health and prevent illness before it happens We can build a healthier community if we do things that keep us healthy and stop us from getting sick.	 Immunising children Work with the community to get people active through sporting clubs, increase local supply of affordable local food (community kitchens/ gardens or partnerships with local food retailers). Give people more control over their own health and over their environments by through providing information, education for health, and enhancing life skills.
5. There are many causes of poor health which means we need to take a variety of actions We need to do multiple activities at different levels to keep the community healthy.	 Select and undertake varied levels of project activities. (E.g., look at targeted group, community, organisations, policy) Apply your project in various settings (schools, health clinics, community gathering places). You might get the school to improve school attendance by: having the school review the curriculum with some Aboriginal community members to be more suited to Aboriginal learning styles; Aboriginal cultural awareness raising to build better understanding of community; implementing learning assessment for children who are disengaging from school; running a food project for children who not are eating well; partnering with external sporting groups to involve children in physical activity.

6. Work with others Working together with different sectors and levels can achieve more for the community and can reduce doubling up.	 Identify who you can work with to achieve shared goals. For example, to encourage physical activity, sporting clubs, schools, local council, regional government, parents and citizens groups – they can all work together to make more change than working individually.
7. Involve community Work together with community so that your Project is more meaningful and addresses a wider range of community needs. Involve community in setting priorities, making decisions, planning and implementing actions to achieve goals.	 Get community interest, acceptance and support for your Project Gather community information and views Set up community reference group Mobilise young people to take leadership roles in schools Setup a peer support network between non-Aboriginal and Aboriginal students
8. Share your Project's story throughout the journey Deliver your promise to community by sharing your Project's journey, successes and failures. Be a role model. Share and learn together throughout your Project.	 Measure your Project successes by asking: How much did we do? (quantity/effort) How well did we do it? (quality) Is anybody better off? (effect/outcome) Compare information from the start and end of your Project Keep community informed – e.g., present at school assemblies, publish information in community and school newsletters, have students undertake school projects relating to your Project

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Outputs Outcomes (Results) Inputs Medium term Long term Short term **Participation Activities** Resources (6 months) (up to 3 years) (5+ years) (who we reach) (what we do) (what we invest) Sustainable health and Full cohort of 15 schools Expansion of program Devise a program action plan ully engaged in Program into Mornington wellbeing pathways in Overarching Koolin Balit Key internal and external Peninsula area FMP area strategy Engage schools stakeholders, including; EMR/SMR DHHS staff Schools and school staff Nairm Marr Djambana Nairm Marr Diambana (NMD) knowledge, ideas, skills and in North Frankston (NMD) Gathering Place is Health and wellbeing There are sustainable and engagement. Gathering Place is engaged in Program Aboriginal children, known by community to link pathways through welcoming Gathering Frankston City Council: youths, and families in to encourage youths and families to gathering places in FMP youths to appropriate Places in FMP Aboriginal Health seek support and inform about North Frankston Coordinator (AHC) - Grant available services. services Service providers Lea (Peninsula Health, and Increased numbers of Service providers improve Young Aboriginal people AHC builds relationships with service Community Strengthening others) their presence in young Aboriginal people across FMP are leading Department providers. Aboriginal community having health checks community healthy and fulfilling lives Youth Workers members and Social & Community Service providers improve awareness committees School staff upskilled Improved health status in The health gap has Planner Damien Patterson of available services through marketing •Government: Aboriginal youths by narrowed for data on Aboriginal and promotion. EMR/SMR staff improving access to families in the area Local Government School nurses and KESOs appropriate health and Extended Aboriginal Peninsula Model Alliances: Working with school nurses and State Government wellbeing services refer youths from each people's educational Child Health Alliance KESOs to identify their needs, priorities Departments school to the relevant attainment, transitioning Mental Health Alliance and challenges Central office staff Youths stay engaged in Aboriginal Health Alliance support service. from primary school to Stakeholders at 'flagship school high school to tertiary Department of Education AHC builds leadership skills and sites' education. and Training Regional knowledge in school nurses, wellbeing ACCHOs Community members officers and other staff. Offices •ACCOs understand Koolin Balit: 15 schools (10 primary, 4 Gathering places •What it means secondary, 1 special needs) AHC facilitates relationship building •Health sector How program will assist Break generational cycle Schools: between school nurses, KESOs, •NGOs the Aboriginal community in of poverty community, service providers and other Nurses Monash University improving health and . Health & Wellbeing stakeholders. Regional governance / Wider community wellbeing Coordinators decision-making groups understands and Link program participants into existing Assistant Principals and networks, e.g. FMP supports Koolin Balit The program is enhanced **KESOs** health and support services. Alliance, Mental Health, initiatives Maternal Child Health by the Aboriginal Koolin Balit regional community perspectives Workers Involve Aboriginal community members committees, Koolin Balit Aboriginal Community throughout program for feedback and working groups etc Advisory Group assistance in program and evaluation Identify champions who can •Inter Council Aboriginal Booklet of services planning advocate Program Consultative Committee

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Outcomes: Feedback and reflections

Aboriginal health coordinator:

- Program logic good representation, communication tool
- Project plan better designed program, communication tool

Department of Health and Human Services suggestions:

- Aboriginal illustration of program logic
- Bicultural project plan



Aboriginal Community



Services that I have referred to

I have referred the families to:

- Peninsula Health Koorie team and to work with the Paediatricians and Occupational Therapists.
- Better doctor services for one family who were not happy with their current doctor.
- Local Aboriginal Gathering place here in Frankston.

