



**ARRCH**

Alliance of Rural & Regional  
Community Health



# 2023

## ARRCH Initiatives and Impacts

Innovative projects, programs and research  
of the Alliance of Rural and Regional  
Community Health member organisations.



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# A force for good

The Alliance of Rural and Regional Community Health was formed by a group of 11 community health Chief Executive Officers, committed to improving the health and wellbeing of their communities.

The focus of ARRCH is to reduce health inequity in rural and regional Victoria by addressing the social determinants of health.

Each of ARRCH's community health organisations is an expert in the social determinants of health, a specialist in rural and regional health service delivery, and a service provider deeply connected and invested in its local community.

In October, 2023, ARRCH hosted its inaugural conference, showcasing the exciting and innovative work of the 11 member organisations, alongside keynote speakers, workshop sessions, research presentations, and addresses from ministers and key public policy figures.

This publication highlights some of the work that was shared, and the impacts that work is having on communities across 82.5 per cent of Victoria.



## Food Access Network

Leading partnerships and advocacy to address food insecurity in Ballarat

Food insecurity is the uncertain or limited physical, economic or social access to food. Being food secure and having access to nutritious food is a key social determinant of health. Over 12% of Ballarat's 120,000 residents are estimated to be food insecure.

### 2013 - SecondBite commences at BCH

Ballarat Community Health's interest in food security began when it took on the coordination of the SecondBite Regional Community Connect program. Annually, SecondBite rescued on average 25,000kg of produce from supermarkets and redistributed to community food programs. Many similar programs were operating in Ballarat and a more coordinated approach was required.

### 2015 - Food Access Network established

Food security stakeholders across the Ballarat region formed the Food Access Network (FAN) to enable collective action to address food insecurity. FAN members include food relief agencies, health services, local government, Foodbank Victoria, neighbourhood centres, Ballarat Foundation and community organisations.

Coordinated by BCH, the FAN has led a number of local food insecurity initiatives, including joint funding submissions, advocacy and awareness raising campaigns and research to support better access to nutritious food in the region.



Over 12% of Ballarat's 120,000 residents are estimated to be food insecure

### Research

While local research found 1 in 8 Ballarat residents had experienced food insecurity, further consumer research enabled a greater perspective of lived experience of food insecurity, the effects of long-term hunger and reliance on charitable food relief. A survey of 100 clients from three emergency food relief (EFR) organisations in 2018 found:

- 78% were experiencing moderate or severe food insecurity with hunger.
- 39% had gone without food for one day or more in the previous week.
- 49% had been accessing EFR for a year or more.
- 1 in 5 lacked cooking or cold storage facilities.
- Respondents were at risk of malnourishment.
- 69% identified mental health repercussions.
- If given an extra \$20 most respondents said they would buy meat, fresh vegetables and fruit.

### Partnerships and advocacy

Partnerships with universities, philanthropic organisations, government, and food relief organisations have been key to FAN's success and have supported events, research, awareness campaigns and advocacy towards the State Government's commitment to build a local Foodbank Victoria centre in Ballarat in 2023.

### Impact

Research findings have assisted to raise community awareness of the extent and impacts of food insecurity and inform current and future initiatives to prevent and address this complex issue.

### Acknowledgements

Food Access Network, Monash University, Melissa Farrington Healthy Communities Coordinator Ballarat Community Health





## Power to Kids

### Strengthening supports for young people in residential care services

Tameaka Lakey, Health Promotion Officer  
Ballarat Community Health

The Power to Kids (P2K) program aims to reduce the risk of harmful sexual behaviour, domestic violence and child sexual exploitation for children and young people living in residential care.

It was developed by Mackillop Family Services, in partnership with Melbourne University, and piloted by Ballarat Community Health (BCH) at Ballarat Child and Family Services (Cafs).

#### Purpose

Children and young people in residential care are at significantly increased risk of child sexual abuse. The three most common forms of abuse are:

- 1. Child sexual exploitation (CSE);** adult-perpetrated sexual abuse that involves grooming, child receiving goods, drugs and alcohol, money, or attention in exchange for sexual activity.
- 2. Harmful sexual behaviours (HSB);** behaviour carried out by children that is developmentally inappropriate and abusive towards self or others.
- 3. Dating violence (DV);** intimate partner violence, which refers to any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship.

#### Actions taken

##### Prevention Strategy 1:

Whole-of-house, trauma-informed sexuality and relationships education for residential carers, supervisors and case managers.

**Early-Intervention Strategy 2:** Audit of organisational guidelines and policies that support the program and development of a missing-from-home strategy.

##### Intervention Strategy 3:

Sexual safety response for children and young people experiencing child sexual abuse.



#### Summary of results

- Train-the-trainer model to build the knowledge of all residential care staff.
- Increased self-efficacy in having sexual health and safety conversations.
- Improved capacity to identify and intervene any HSB, CSE, and DV.
- More opportunities to build rapport with young people.
- Engaged local schools in P2K and aligned with school curriculum.
- Strengthened referral pathways into local sexual health services.

#### Lessons learnt

- Age, ability and developmentally appropriate and fun resources are needed for younger and complex clients.
- Staff are often managing competing priorities.
- Staff movement changes and a high workforce turnover is common in residential care service organisations.
- The program has now been distributed across Australia.



**The most common red flag for a young person experiencing sexual abuse is 'going missing from home, care or education.'**

## Individualising dental health services for clients with autism spectrum disorder

Bellarine Community Health secured Department of Health and Human Services funding to develop a pilot program to improve oral health outcomes and dental experiences for clients with autism spectrum disorder (ASD).

The pilot aimed to provide an individualised care plan and environment that supported the sensory and communication challenges encountered by clients with ASD.

### Purpose

Adults and children with ASD often have poor oral health because sensory issues create barriers for them seeking dental treatment and dental practitioners often have little knowledge on how to support a client with ASD.

### Actions taken

A project team worked with people with lived experience to design a person-centred approach to meet the needs of the client. This included training for staff to understand how a patient with ASD experiences the world.

A key learning was that more information was required about each patient's needs prior to them attending their appointment. Patients also needed more information about what to expect at the dentist.

A unique 'My Story' intake assessment form was developed to identify potential issues, strategies, and preferred resources to support challenges. This allowed staff to set up the dental clinic to suit the patient.

Visual aids, social stories, and video walk throughs were created to help familiarise patients with the clinic before their visit. A separate sensory friendly waiting area was established, featuring sensory aids and equipment to support emotional and behavioural regulation.



### Impact

Key findings included enhanced identification of ASD clients, improved dental treatment outcomes and enhanced service experience. The resources and program learnings have since been embedded into Bellarine Community Health's dental service and expanded to support clients with mild intellectual disability (ID). BCH is seeing on average up to 15 ASD/ID appointments per month.

The learnings and resources are also routinely used to assist with dental anxiety and trauma. There is the potential to develop the 'My Story' intake process for all patients across community health.

Expansion of this program could be facilitated by Dental Health Services Victoria by adding autism as a priority group in their priority group definitions. This would mean people who live with autism would not have to be on a waiting list for public treatment.

## Little Growers

### Story time in the garden project

Little Growers is a joint pilot project between Bellarine Community Health (BCH) and Geelong Regional Libraries Corporation (GRLC) to engage preschool children with exploring healthy sustainable food. It was designed as a healthy eating initiative within BCH's integrated Health Promotion Plan.

#### Purpose

1. Strengthen the local food system through community partnerships which increase children, young people and families' access to healthy sustainable food.
2. Build the capacity of children, young people and families to grow, source and eat healthy and sustainable food, connect with nature and try new vegetables.
3. Address access barriers for families, by delivering sessions within early childhood settings within equity communities, including Portarlington, St Leonards, Drysdale and Clifton Springs.

#### Actions taken

The Little Growers program was trialled at the BCH Youth Guerrilla Garden behind the Ocean Grove Library, then promoted to Northern Bellarine-based preschools, with Portarlington Preschool engaged as the second trial site.

The program included a 30-minute outdoor Story Time in the Garden facilitated by a GRLC librarian, followed by a hands-on Get into the Garden activity facilitated by a BCH Health Promotion planner and/or preschool staff.

Garden activities included planting seeds or seedlings, exploring the garden and finding insects, composting, building up soil, weeding, smelling and tasting edible plants.



#### Impact

The pilot reached 84 children through five Little Growers story time sessions and one workshop.

Parents/carers and educators indicated through anecdotal and survey feedback that the program was an enjoyable way to engage children with growing food, connecting with nature and exploring healthy eating.

The participating preschools indicated they would recommend the program to other settings.

#### Outcome

Due to its success, Little Growers will continue to be delivered in preschools within the Northern Bellarine by BCH with support from GRLC.

Preschool educators were supported to embed Little Growers sessions, food growing and sustainability into their regular program.

The *Little Growers Gardening and Storybook Activity Guide* was developed to support preschools to include garden and food activities into their program.



## Cancer Support for People of Refugee Background

Analysis, education and support to improve the cancer journey

This project is working with Bendigo Karen and Afghan communities, and service providers, to identify the enablers, barriers, and myths surrounding cancer, prevention, cancer care, and refugee sensitive practice.

Bendigo is home to approximately 3500 Karen and 300 Afghan refugees. Humanitarian arrivals often come with limited preventative and primary care knowledge, and limited health, service, English and digital literacy, having experienced decades of deprivation.

The project arose after Bendigo Community Health Services staff noticed increased advanced cancer diagnosis and poor service engagement among the population.

### Purpose

CSPRB aims to improve health equity across the cancer continuum by supporting former refugees to better understand cancer, prevention and early intervention, and take part in optimal care pathways which are culturally safe and easily understood.



Funded by the Victorian Government and delivered in partnership with Loddon Mallee Integrated Cancer Service.

### Actions taken

- Refining evidence of under-representation in screening and cancer care via data analytics and community and service provider focus groups and surveys.
- Targeted training for BCHS bi-cultural staff.
- Facilitating in-language education sessions, co-designed with peak bodies.
- Simplifying and translating existing cancer resources, with peak bodies.

- Co-designing and producing new in-language videos and resources.
- Community focus testing resources for accessibility.
- Developing a pilot cancer navigation model where BCHS staff with lived refugee experience support patients throughout their cancer journey.
- Identifying and implementing system improvements within cancer care services.

### Lessons learnt

After conducting nine focus groups with 128 participants, BCHS found:

- Former refugees had a fear of cancer and cancer screening.
- They found it challenging to screen unsupported.
- Existing cancer resources were too complex.

*“Everyone [with cancer] will die, so there is no point getting treated”* - extreme fatalism based on experiences in refugee camp/like settings.

### Service provider challenges

Consultation with service providers has highlighted:

- A dearth of appropriate in-language patient information.
- Limited cultural awareness of refugee communities.
- Reported lack of engagement and difficulty communicating with diverse consumers.
- Limited interpreter availability and competence.

### Literature review

- Former refugees have limited exposure to public health and protective messaging, resulting in lower screening participation and presentation of more advanced disease.
- Language and communication challenges create individual and institutional barriers.
- Complexity of health systems highlight the value of in-language education and navigator models to build trust and confidence.



## Refugee Health System Navigator Project

Support and advocacy for people of refugee background

Pre and post arrival experiences have profound impacts on the health of people from refugee backgrounds. Prolonged periods in refugee camps, experiences of war, effects of torture and trauma, deprivation, and lack of basic health care and shelter are traumas that differentiate refugees from most other Australian migrants.

The Refugee Health System Navigator Project provides support, health literacy assistance, referral facilitation and advocacy for people with complex and chronic health conditions. BCHS works with other health and wellbeing organisations to support clients to navigate the 'system'.

### Actions taken

- Support for health appointments including advocacy and service navigation by BCHS staff of refugee lived experience.
- Increasing health literacy through building understanding of health conditions and treatment options.
- Facilitating the development of service system referral pathways that are easily navigated by clients of refugee and migrant background.
- Developing in-language resources.
- Building health services' cultural competency and refugee sensitive practice.



Funded by the Victorian Government and delivered in partnership with Loddon Mallee Integrated Cancer Service.



### Impact

- Assisted 500+ people to access health care.
  - Facilitated 24+ education sessions with 220+ healthcare providers.
  - Worked with peak bodies to build health promotion programs to meet cultural needs.
  - Developed more than 15 in-language resources.
  - Partnered with local agencies to build service capacity and engagement.
  - Helped local organisations to develop communications strategies, so clients receive easily understood, timely information.
- Engaging health professionals and bicultural workers has been key to developing a program that builds knowledge, increases health system utilisation and simplifies referral pathways.
- This program is funded by Murray PHN through the Australian Government's PHN Program.





## Wodonga RESPOND Brains Trust

**RESPOND-ing to the root causes of childhood health and wellbeing issues**

Childhood obesity has emerged as a complex health issue in northeast Victoria, influenced by a range of social, economic, and environmental determinants.

### Purpose

RESPOND (Reflexive Evidence and Systems interventions to Prevent Obesity and Non-communicable Disease) is a National Health and Medical Research Council (NHMRC) funded partnership project, 2018 to 2023, led by Professor Steven Allender, of Deakin University.

The project takes a supported, community-led approach to better understanding and addressing local determinants of childhood obesity, using systems science, underpinned by principles of collaboration and collective impact.



### Actions taken

To ensure community-driven decision making, a Wodonga RESPOND Brains Trust was formed to consult with for the project. The Brains Trust was developed by building on existing relationships, and through working with the participants, to grow new engagement.

Brains Trust members represent disability organisations, schools, businesses, community foundations, Aboriginal community-controlled health organisation, the local council and LGBTIQ+ communities. The Brains Trust provide a high level of decision-making capacity in their current roles, and are well connected in the community beyond their jobs.

### Lessons learnt

Working with the Brains Trust ensures decision making for Wodonga RESPOND initiatives is led by community.

This innovative approach to governance has been dynamic and is evolving.

The Brains Trust feedback has led to changes in the design of initiatives, community engagement strategies,

promotion and marketing of activities, and provided access to new networks.

The Brains Trust offer frank and fearless advice to drive forward community-identified initiatives that aim to address the determinants of child health and wellbeing, such as sleep health seminars, and community advocacy training.

*"I have really enjoyed being involved and hearing about what others are doing locally, so thank you." – Brains Trust member.*





## Alert and Alarmed

### Outcomes of a new personal alarm group education and clinic model

Personal alarms (PA) enable people to call for help after a fall or a medical event. The alarm is usually worn as a pendant or bracelet and, when activated, can call nominated contacts and/or emergency services.

Australian Geat2GO is a federally-funded program offering free PAs to Commonwealth Home Support Program clients.

In November 2022, the prescriber requirements shifted, allowing only allied health professionals to request these products, resulting in an immediate 20% increase in referrals to OT services. This affected an already pressured, small rural OT workforce (1.8 EFT). A local response in the form of monthly clinics was developed, enabling clients to bypass the OT waitlist and have timely access to this assistive technology.

### Materials and methodology

Group clinics ran monthly and included a 30-minute presentation, an opportunity to trial the assistive products and speak with an OT or allied health assistant (AHA).

Over time, the presentation was opened to clients from different funding streams. After receiving PA watches, 60% of clients requested and received follow-up home visits from allied health assistants to help with PA setup and education.



### Discussion

Advantages of PA clinics:

- OTs and AHAs learnt about a wide range of PAs.
- The OT waitlist remained stable despite a 20% increase in referrals.
- Home Care Package case managers began attending the clinics to alert their clients to available PAs.
- Clients shared powerful personal stories, adding to the sessions.
- Clients shared their knowledge with friends and family, resulting in referrals to subsequent clinics.

- Community awareness of the role of OTs was expanded, resulting in referrals for additional services.

What we found out:

- 71 people attended the nine clinics, and 50 obtained PAs. Concerned children also brought their parents along.
- The group sessions saved at least 284 OT hours.
- Reasons for choosing to purchase PAs included a fear of falls, living alone, health issues, immobility/ balance concerns and seeking to feel safe at home.

### Conclusion

PA clinics provided this rural workforce with an efficient approach to managing the sudden increase in client referrals. PAs were obtained within one month of ordering through G2G, supporting clients and their families concerned about their home safety.

For more information, scan the QR Code.





## On the move

Supporting East Gippsland children and young people through innovation

Gippsland Lakes Community Health Integrated Family Support Groupwork Facilitator, Warren, wanted to engage more effectively with children and young people in remote locations across East Gippsland and provide them with group-based and individual support. His solution? To go mobile in a custom Mobile Activity Van (MAV) decked out with the latest virtual reality technology and other digital devices.

He sought funding and conducted community engagement sessions with young people in remote locations such as Cann River and Omeo, who told him they wanted access to specialised and universal services in their communities.

They said they often felt left out due to their isolated locations, inability to transport themselves, and reliance on caregivers.

They also spoke about their need for safe spaces, such as youth centres, where they could socialise and seek support.

The MAV fills these voids. It was co-designed by the children and young people and takes the solution to where they live.

This mobile technology hub is an engaging and specialised space that features artwork inspired by the Gunaikurnai Country lands and waters.



*They often felt left out due to their isolated locations, inability to transport themselves, and reliance on caregivers.*

Photo: Integrated Family Support Groupwork Facilitator Warren and Minister for Health Mary-Anne Thomas.

## VR applications in the MAV:

- Flowborne: An app to guide controlled breathing and staying calm under pressure.
- Tilt brush: A 3D art app.
- Meditation apps to encourage self-regulation during stress.
- Beat Saber: An engaging movement game set to dance music that encourages grounding and focus.

Meta Quest VR headsets with various games and applications also feature, and a wider range of social and wellbeing applications such as life skills simulators and other immersive experiences will be added in the future.

For further information about this project, scan the QR code or contact Warren on 5155 8300.





## Community is Our Middle Name

Grampians Community Health reaching the community in a different way.

### Purpose

Grampians Community Health Communication and Media Officer, Gareth Olver, wanted to reach the community in a different way. His proposal was to trial a podcast as another platform for engagement, so Community Is Our Middle Name was launched in August, 2021, discussing health, wellbeing and issues of interest for communities in the Grampians/Wimmera region of Western Victoria.

*"A lot of younger people in particular don't read the local newspapers. They don't listen to the radio. And we thought, what's another way we can talk about things that are happening in our communities and let people know that there are services available? Podcasts are a great medium and you can listen to them whenever you like."* –

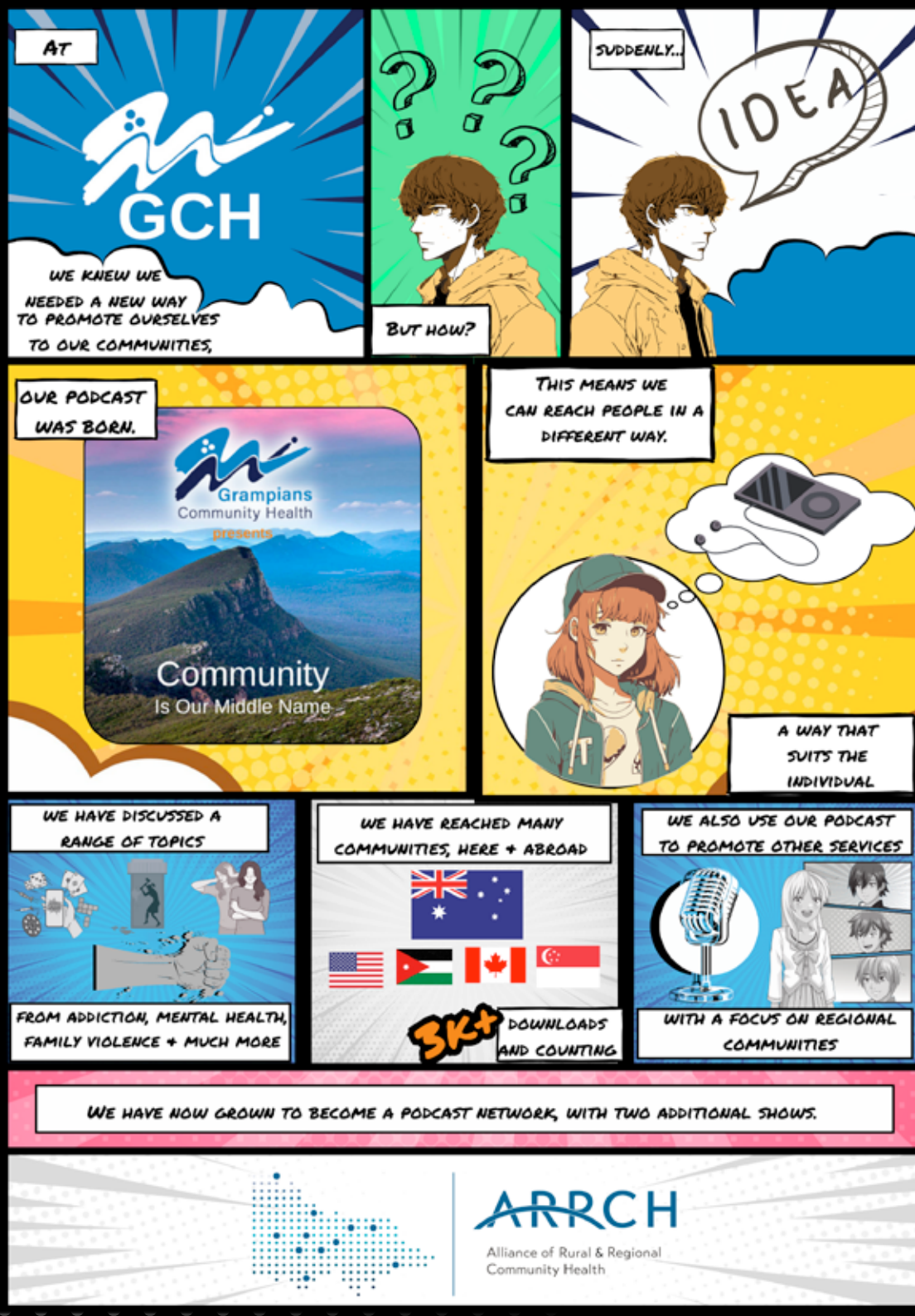
Gareth Olver, podcast host

### Impact

Community Is Our Middle Name has released 62 episodes, featured on ABC National Radio and the Great Australian Podcast directory, and diversified into a podcast network including Our Community is Able, which focuses on disability self-advocacy, health and wellbeing.

The platform has had almost 4000 downloads across the region and the world from countries such as the United States, Canada, Jordan, Singapore and India. It has engaged the community, opened up conversations and connected people with local services. Guests have shared powerful personal stories of depression, anxiety, family violence, addiction, and recovery, which have deeply resonated with the community.

*"What an insightful and entertaining podcast that tells us how it is in our community. The topics are so relevant, and the guests know their stuff - the host is on the money as well."* – podcast listener



Workforce resourcing issues in the Goulburn region, as across most of regional Victoria, presented challenges for some local Department of Education (DET) teams and schools requiring allied and mental health supports and interventions for brief, timely intervention.

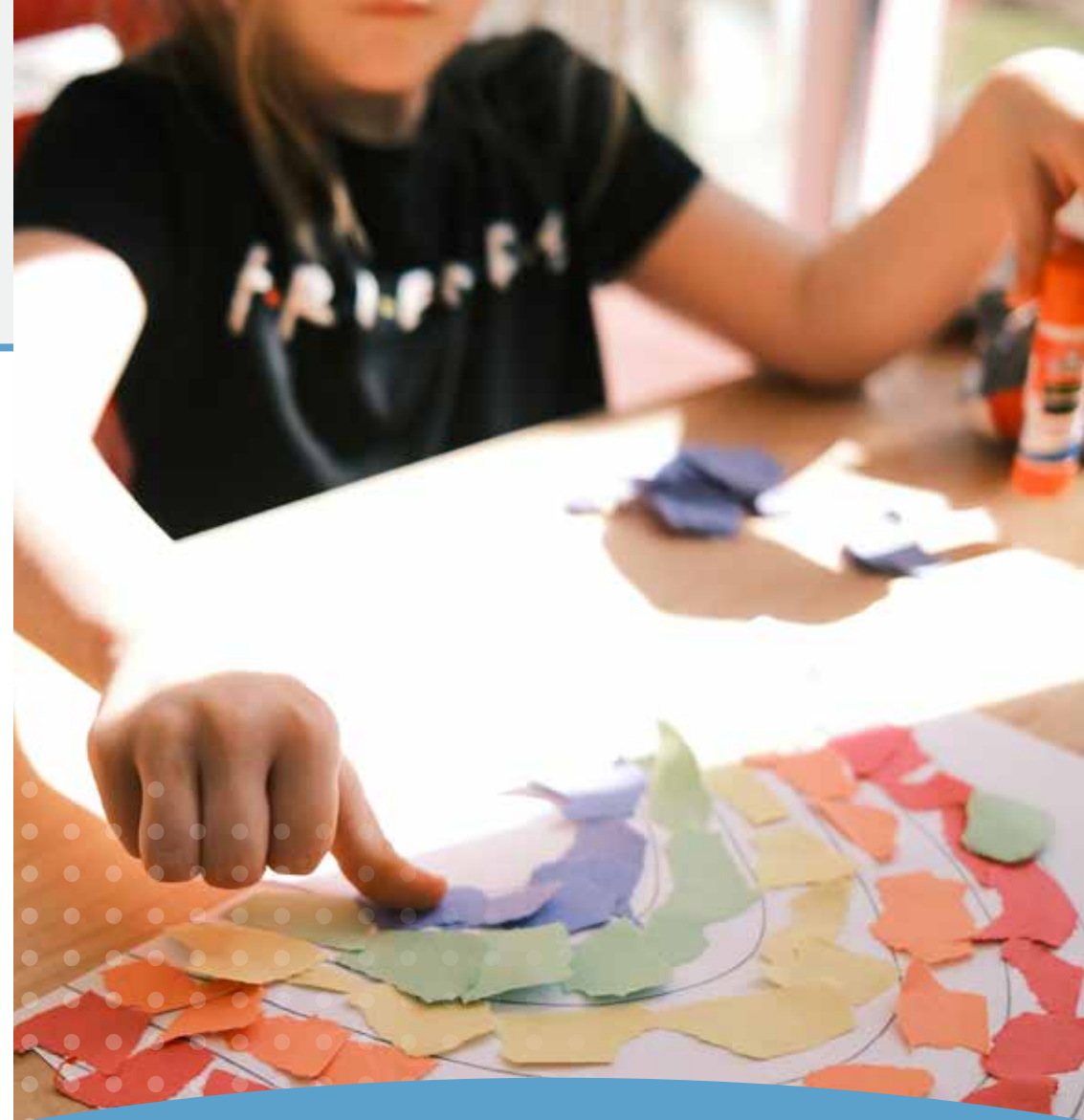
Schools are funded to employ allied and mental health resources, however Goulburn schools are facing increased mental health needs with a limited workforce and limited capacity across the Goulburn service sector, impacted further by geographical challenges and a lack of accessible mental health services in the region.

A relationship facilitated through the Goulbourn Mental Health and Wellbeing Project Steering Committee in early 2022 supported a conversation to have Nexus provide allied health into a northern Mitchell Shire school initially. Further work has followed with Nexus providing mental health support into other Goulbourn region schools with positive outcomes.

### Impact

While the programs are in their infancy, the partnership has resulted in multiple successes:

- Once difficult cohort (younger students) to engage in clinic, we have seen a significant decrease in the fail-to-attend rate.
- Clinicians are more engaged, and the diverse workplace experience is a strong recruitment tool.
- Better outcomes for students as service delivery takes into consideration the client and their family's need and is more credible in the understanding of the barriers facing our community.
- Improved coordination of services as having services onsite has encouraged more referrals, including warm referrals for a broader range of services, an ability to support the client and family in navigating the health system.



### Next steps

Outcome analysis - partnership between DET and Nexus is proposed to support better identification of area need through collective data and focussed areas of intervention for priority Goulburn students.

Review of the integrated partnership model to gauge transferability into other areas such as health education and other social services support models to support the students and their families.



## Small Business MATTERS in Gannawarra

### A wellbeing partnership between five not-for-profit organisations

Rachel Clarke and Tanya Maher-Toose, Health Promotion Department, Northern District Community Health

The Small Business MATTERS in Gannawarra campaign was a result of Northern District Community Health, Kerang Neighbourhood House, Cohuna Neighbourhood House, Quambatook Resource and Information Centre and Cohuna & District Progress Association each receiving a \$15,000 Victorian Government grant to improve the mental health and wellbeing of small business owners.

The initiative proved vital during the COVID-19 pandemic. It brought small business owners together, boosted their confidence during a tough time and encouraged them to emerge from the pandemic stronger. It also highlighted the importance of mental health and encouraged participants to take care of themselves.

86.6% of small business owners felt the events relaxed and/or recharged them.

83.3% of small business owners received information to support their health and wellbeing.

The campaign also helped the community re-connect by:

- Distributing 500 wellbeing packs.
- Purchasing and distributing 80 gift vouchers from local small businesses.
- Organising a Morning Tea On Us event for 80 people in Cohuna.
- Providing Lunch On Us for 62 businesses and 313 individuals.
- Hosting a comedy night in Quambatook with 100 attendees.
- Organising the Sharni Layton event in Cohuna, attended by 92 people.
- Conducting a wreath making workshop in Koondrook with 17 participants.
- Launching five radio ads.

- Informing and engaging the community via social media.
- Holding a free farmers breakfast in Quambatook with the Grains Research and Development Corporation, attended by 29 people, with catering by the local bowls club.
- Offering health checks with AgriSafe nurse, Rosi Bear, where four farmers received a night's glamping in Koondrook and a Long Paddock Food Store voucher.
- Organising a painting and storytelling event with local Indigenous artist, Tobie Cameron, in Quambatook, attended by 30 people, with afternoon tea catered by the local football netball club and tastings using Indigenous ingredients by Paul and Cathie Haw.
- Producing print media, posters, and flyers for distribution to local businesses and placement throughout Gannawarra, including in the local paper.

*"Congratulation to all who made the events possible. It's nice to feel loved, important and recognised. Thanks a million."* – small business owner.

*"These small things really have a big impact on the group as a whole and actually build team bonding, which is fantastic."* – Lunch On Us participant.





## Smoking and vaping prevention study

Identifying the enablers that facilitate young people to take up smoking and vaping in the Buloke, Loddon and Gannawarra shires.

The 2020 Victorian Population Health Survey found Buloke, Loddon and Gannawarra Shire residents were above the state average for percentage of the population being current smokers. While comprehensive, the survey did not break down the data by sex or age, nor include data on vaping habits.

Understanding the factors that increase the likelihood someone will take up smoking or vaping enables health care professionals, community health services, local and state governments to implement place-based interventions to prevent exposure or enablers and thus prevent future uptake.

### Purpose

In conjunction with Monash University and the BLG Health Executive Network, NDCH aims to identify the socio-ecological enablers that facilitate people aged 18-30 years to take up smoking and vaping in the Buloke, Loddon and Gannawarra Shires.

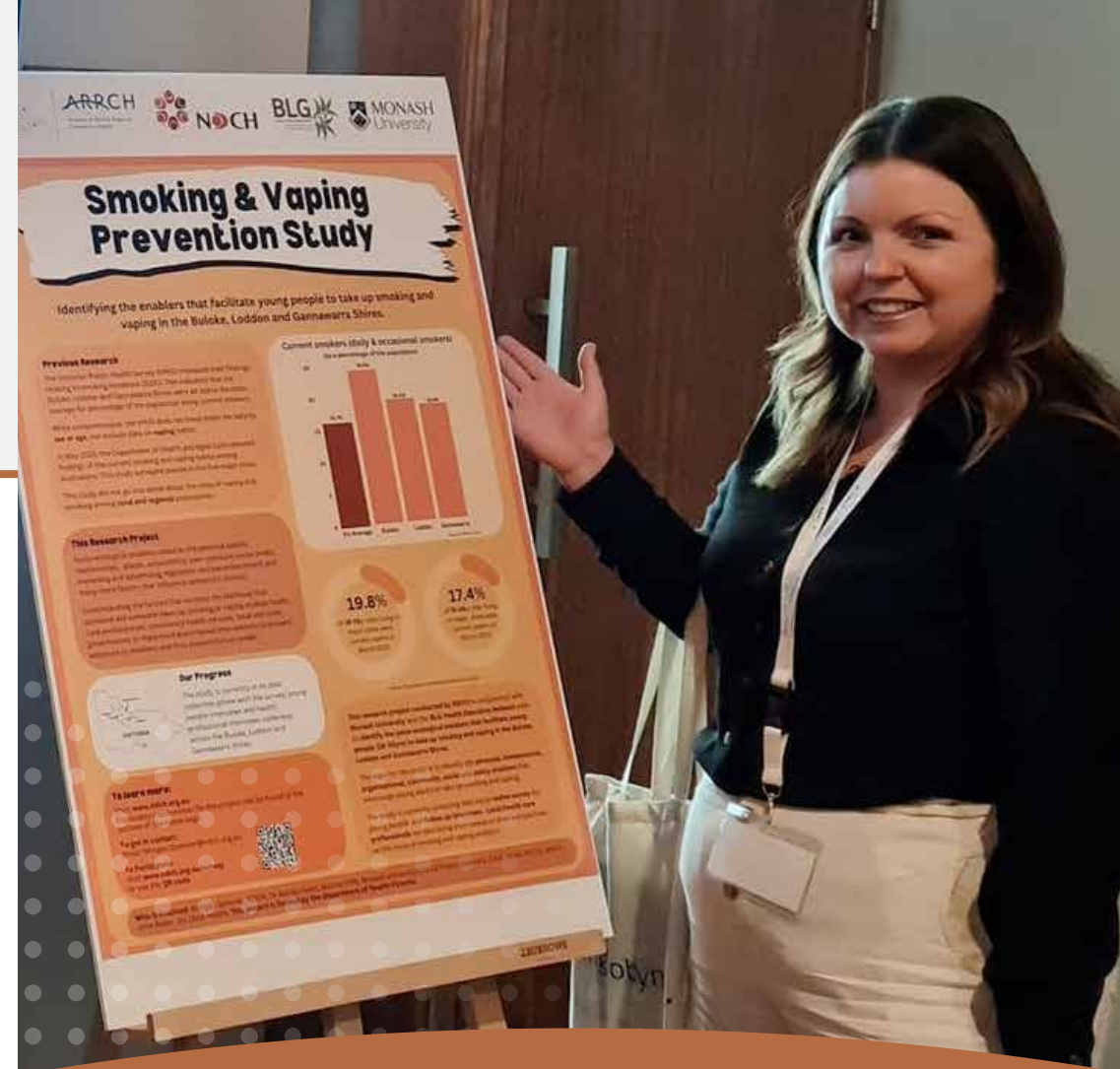
Socio-ecological enablers which influence someone's choice to smoke or vape relate to personal beliefs, relationships, places, accessibility, peer pressure, social media, marketing and advertising, legislation and law enforcement and others.

### Actions taken

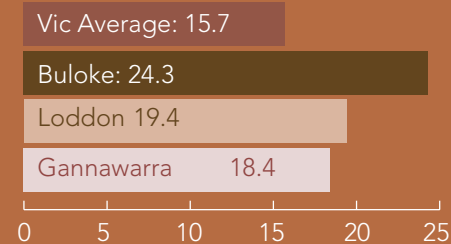
The study is currently in its data collection phase and includes an online survey for, and interviews with young people. Local health professionals across the Buloke, Loddon and Gannawarra Shires are also being interviewed on their perspectives on smoking and vaping enablers.

Department of Health and Aged Care figures show that:

- 19.8% of 18–24-year-olds living in major cities were current vapers in March 2023.
- 17.4% of 25–34-year-olds living in major cities were current vapers in March 2023.



Current daily and occasional smokers (as a percentage of the population)



### People involved

Morgan Spencer, NDCH, Dr Nerida Hyett, Murray PHN, Monash University and La Trobe University, Emily Wood, NDCH, and Dr John Baker, Vic Dept Health. This project is funded by the Department of Health Victoria.

## AgriClinics and Primary Care Connect

An innovative community health program focused on farmer health

The agricultural sector has the highest fatality rate of any industry in Australia, and according to a recent Monash University study, farmer suicide rates are far higher than for non-farmers. In rural and regional areas, these high rates of fatalities, injuries and suicides are devastating and can impact entire communities.

Primary Care Connect is located in the Goulburn Valley region in Victoria – an area well known for its orchards, dairy and farming, and where the community feels the impacts of the mental and physical health of farmers and agricultural workers.

### The program

AgriSafe AgriClinics was designed by the National Centre for Farmer Health (NCFH), with Primary Care Connect facilitating the program in the Greater Shepparton and Moira shires.

The program provides farmers with the unique opportunity to consult with trained agricultural health clinicians via a free comprehensive health check, which includes:

- Blood glucose testing
- Blood lipid testing
- Blood pressure
- Body mass index calculation
- Respiratory testing (not during COVID-19)
- Hearing screening
- Skin examination
- Vision testing
- Urine testing
- Screening for agrichemical exposure (anticholinesterase)
- Fit testing of mask or respirator
- Occupational risk surveying and assessment



### Impact

Primary Care Connect has engaged with more than 70 farmers who have undertaken their initial health assessments and have returned for ongoing management. Approximately 30% of those farmers have been referred to their GP due to health issues discovered during the AgriClinic health assessment.

AgriClinics have been effective in preventing physical and/or mental health decline. Farmers have

improved their safe work practices to ensure their health and safety, from implementing personal protective equipment use, safer handling of Agri chemicals, increasing sun protection, eating healthier, reducing alcohol intake and quitting smoking.

The program has grown steadily and has worked to implement positive changes in the farmer health space, creating health and safety awareness for those working and living in farming communities.





#thehumancode aimed to pilot initiatives to combat the role of harmful, outdated masculine norms and stereotypes as drivers of gender inequality and negative mental health and wellbeing for men and boys in the Macedon Ranges.

### Purpose

#thehumancode project was delivered in response to high levels of male suicide, alcohol-related road injuries among men, and increased family violence in the Macedon Ranges Shire.

The project was informed by local research that found:

- One in five male respondents experienced shame in asking for help.
- Over half agreed boys and men wouldn't be comfortable talking about their mental health before they reached a breaking point.
- A third of male respondents and over half of non-male respondents thought boys and men in the Macedon Ranges were not free to be themselves.

- Half of male respondents and over half of non-male respondents agreed boys and men in the Macedon Ranges were expected to take on traditional masculine roles.
- Nearly one-third of men surveyed and almost half of young men indicated high levels of loneliness.

### Actions taken

A series of one-off events.

Two x six-week pilot programs:  
Raising Teenage Boys in the Macedon Ranges, delivered by Tomorrow Man and Mentoring Boys in the Macedon Ranges, delivered by Man Cave Academy.

These programs engaged, educated and supported a group of parents and mentors of adolescent boys to build their awareness of and confidence to challenge harmful masculine stereotypes in their interactions with young men.



### Lessons learnt

- Both pilot programs increased participants' knowledge about and confidence to challenge outdated masculine stereotypes.
- The project reached 500 people, including 63 local adults who completed the six-week pilot program.
- Mothers were more likely to engage with parenting programs, so factoring fathers into content design and targeted marketing materials should be a priority.

*"Through our conversations, I became aware that characteristics like vulnerability, which I thought negative or at least not 'manly', were a strength to be developed. I saw how other men opened up to boys and other men and this helped them connect."*

- Mentoring Boys participant.

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## Care for Complexity in Community Health: the 3C trial

Coping with chronic health conditions (CHCs) requires ongoing self-management and this can constitute a significant workload, especially if someone has more than one condition. People need sufficient capacity, including social support, socioeconomic resources, and adequate mental/physical functioning, to cope with self-management tasks, health system interactions and other life demands. Limited capacity (poverty, social isolation) or overwhelming burden (multimorbidity) may reduce adherence and lead to disease escalation.

Minimally Disruptive Medicine (MDM) is a model of care which aims to assess burden and capacity levels, and undertake practical actions to reduce burden and/or increase capacity. For this trial, a training and care coordination program based on the MDM model of care was developed. The aim was to assess the feasibility of this program for clients experiencing multimorbidity and psychosocial complexity.

### Methods

The study included training in MDM, followed by a care coordination intervention. The trial included specific assessment and care planning tools to support the MDM focus and fortnightly case conferencing/supervision sessions.

Qualitative data included interviews with clients, focus groups with care coordinators, meeting notes, care planning documents and reflective vignettes. Quantitative data consisted of client demographics, measures of treatment burden, individual capacity, and quality of life at baseline and six months, and demand, servicing, and referral patterns.

*"I feel a lot more confident in handling myself and knowing that there is health help out there if I need it."*

*"We worked together...(the CC) didn't try and tell me what to do, and they didn't expect me to do it all on my own either."*



### Results

Feasibility outcomes covered acceptability, demand, implementation, practicality, integration, and efficacy. A total 26 clients were referred and 19 clients subsequently engaged with three care coordinators over the nine month period.

The trial was found to have high acceptability amongst clients and clinicians. Clients (48-82 yr, mean 66.5 yr) reported a mean of 11 chronic health conditions, with high levels

of treatment burden, social isolation and financial disadvantage. Analysis of implementation, practicality and integration supported the feasibility of an MDM model of care. Although assessment of efficacy was limited due to the small sample size and lack of control group, qualitative and quantitative data indicated clients felt more in control and less overwhelmed, with some improvements in treatment burden and quality of life.

### Conclusion

Care coordination using a burden-capacity (MDM) approach is feasible in the community health setting and can effectively target clients with multimorbidity and psychosocial complexity, who are known to be less likely to engage in chronic disease self-management approaches. Further work to embed pathways and explore how this can be supported and funded in Sunraysia Community Health Service is recommended.

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