



Actions and research to address obesity and mental health priorities in South West Victoria: Report 2 from the 2012/13 SW Alliance Delphi Study

**A Project completed by the Deakin University/DH/DHS Strategic Alliance
www.deakin.edu.au/dhs/index.php**

Summary

This paper presents findings from a Delphi survey (50 people: 56% response rate) sampled to reflect people with different workplace planning expertise and geographic area knowledge across the Barwon South West Region of Victoria in 2012/13. A first report from the Delphi survey revealed that the main health and social priorities listed by respondents included obesity (50%) and mental health issues (40%). The present report summarises actions and research respondents recommended to address these two regional priorities. Using evidence-based approaches informed by research and evaluation were emphasised by a number of respondents. To address obesity respondents recommended community strategies supported by multiple systems with actions including education and health promotion, environment planning and childhood and other preventative actions. Recommendations to address mental health issues included community strategies to achieve a continuum of prevention, early-intervention, treatment and wellbeing approaches.

Background

Since 1998 the Victorian Department of Health, the Department of Human Services and Deakin University have been engaged in the Barwon South West Alliance (SW Alliance). The SW Alliance provides a vehicle for policy and practice innovation and enables conversations and collaboration between the Department of Health, the Department of Human Services, Deakin University, and other relevant organizations across the Barwon South West region. The SW Alliance is structured to include three advisory groups (www.deakin.edu.au/dhs/advisory-group-tor.php) addressing: Capacity building; Workforce; and Research. The Research Advisory Group facilitated the study reported in this document that was planned to coincide with local and regional health priority setting activities occurring across the region in 2013. The first report from the Delphi survey (SW Alliance, 2013a) revealed the main health and social priorities listed by respondents included obesity (50%) and mental health (40%). The present report aimed to summarise actions and strategies respondents recommended to address these two regional priorities.

Method

The Delphi survey is a forecasting and innovation consulting technique that was used in the current study to consult people with health and social planning expertise from across the Barwon South West Region of Victoria in 2012/13. The aim of the study was to identify priority health and social problems and actions and research to address these priorities. The sample invited to participate was identified using available databases of employees working in a range of sectors across the region.

Invitations to participate in the study were sent to 90 people working in the region and 50 responded (56% response rate).

The respondents described their employers as: State government (18%); Local Government (26%); Health services (24%); Regional planning (6%); University and other academics (8%); and other employers (8%). The respondents described the following as the geographic area they were most knowledgeable about: All the South West Region (29%), G21 (www.g21.com.au) or Geelong (14%), Other LGA in G21 (10%), Great South Coast (GSC: www.greatsouthcoast.com.au) region (16%), Warrnambool (14%), Other LGA in GSC (16%).

The present report was completed by identifying the main themes of the recommendations made by respondents listing either obesity or mental health as priority issues. As recommendations for actions and research showed considerable overlap they were analysed as integrated themes.

Theme analysis of actions and research to address obesity

In total, 25 stakeholders (50% of respondents) identified obesity as a priority problem, with this priority more common for those working in the west of the region. The main themes for actions and research recommended to address obesity are summarised in Table 1 below and then detailed in the text that follows. In overview using evidence-based approaches informed by research and evaluation was emphasised by a large group of respondents (40-48%). Respondents recommended community strategies supported by multi-system coordination with actions including education and health promotion, environment planning and childhood and other preventative actions.

Table 1: Actions and research recommendations to address obesity	Respondents	
	(N	%¹)
Research to understand the causes, trends and costs	12	(48%)
Program evaluation research	10	(40%)
Community approaches and actions	9	(36%)
Multi-system coordinated actions	8	(32%)
Education and health promotion	5	(20%)
Environmental planning approaches	5	(20%)
Childhood and preventative approaches	5	(20%)

¹ Percentage of 25 listing obesity as a priority
Responses are inter-related and categories overlap

Research to understand the causes, trends and costs (recommended by 12) included:

- burden of disease and economic modelling
- collection of data from multi-cohort and student survey studies to inform data on obesity trends, associated risk factors and consequent health and social issues
- identification of local factors that influence the high rates of obesity and cardiovascular disease
- identification of best practices to tackle obesity in local communities, especially in rural areas
- local health behaviour research investigating what people are eating, their level of physical activity, the availability of healthy food, and access to services
- developing and implementing individual and population level interventions in regional areas, with research input from different academic streams

Program evaluation (10):

- increase research and evaluation expertise and capacity
- review evidence-based approaches
- evaluations and trials measuring service use, impacts and outcomes
- practical approaches to local evaluation that don't require significant resources
- identifying barriers to healthy eating and lifestyle

Community approaches and actions (9):

- providing training to local health and wellbeing workers to better understand effective approaches to address the issue
- integrated local community strategy plans and partnerships
- Indigenous community

Multi-system coordinated actions (8):

- coordinated actions at the federal, state, local government and the non-government levels
- regional plans through G21 and the Greater South Coast group
- integrated partnerships between health sectors, workplace, schools, and business
- options for bridging health promotion, prevention, and primary care services (investments in food security,... activity and treatments)

Education and health promotion (5):

- health education in schools
- health promotion campaigns and social marketing to raise awareness around local issues and solutions
- information on healthy food choices
- behavioural incentive programs

Environmental planning approaches (5):

- infrastructure and facilities to increase opportunities for active transport, exercise and healthy lifestyle choices
- environments that demonstrate the benefits of an active lifestyle
- information on how "active infrastructure" such as green spaces and facilities translates into health outcomes

Childhood and preventative approaches (5):

- childhood interventions such as Be active Eat well, Romp & Chomp
- preventing through increasing physical activity and healthy nutrition
- preventative health programs in primary care and other settings
- whole of region prevention system

Theme analysis of actions and research to address mental health issues

In total, 20 stakeholders identified mental health issues as a regional priority, with no differences across geographic areas or employer categories. The main themes for actions and research recommended to address mental health issues are summarised in Table 2 below and then detailed in the text below. In overview most respondents recommended community approaches (60%) that included a continuum of prevention, early-intervention (40%), treatment (20%) and wellbeing approaches (15%). Research was emphasised to identify local community characteristics (40%) and to enhance evaluation and program implementation (35%).

Table 2: Actions and research recommendations to address mental health issues	Respondents	
	(N	%¹)
Community approaches	12	(60%)
Prevention and early intervention approaches	8	(40%)
Local community research	8	(40%)
Program evaluation and implementation research	7	(35%)
Education and health promotion approaches	4	(20%)
Improving tertiary services and case management approaches	4	(20%)
Positive mental health and wellbeing approaches	3	(15%)

¹ Percentage of 20 listing mental health as a priority
Responses are inter-related and categories overlap

Community approaches (12 respondents) including:

- involving key stakeholders as local champions and establishing ownership
- community funding for evidence-based activities and evaluations
- creating a supportive community environment with increased educational, employment, and other social opportunities
- improvements in community service investment and coordination
- focusing on the continuum of care, i.e., from prevention to treatment, and options for rehabilitation and integration into the community post mental illness
- targeting specific populations such as ageing, disability, indigenous community

Prevention and early intervention approaches (8):

- prevention and early-intervention to reduce and better manage mental illness, drug and alcohol problems
- state driven and community-based strategies used preventatively
- preventative mental health as a positive message of maintaining self-esteem, confidence, and resilience in response to life's challenges

Local community research (8):

- local area research that informs actions to improve community wellbeing in rural areas with both high and low socio-economic indicators
- research into relevant demographics, such as age groups, to identify significant gaps between existing programs and people with different needs
- regional planning approaches to identify and support community strategies
- using the Communities That Care Strategy to monitor primary and secondary school students self-reports of depressive symptoms, and risk and protective factors (such as coping and positive development)
- monitoring data to evaluate and reward achievement of short- and long-term community prevention goals

Program evaluation and implementation research (7):

- process, impact and outcome evaluations to determine the effectiveness of actions implemented and in turn suggest improvements for further interventions
- local evaluation across multiple service providers to help build evidence of what works when efforts are focussed and prioritised
- the utility of health service accreditation
- accessible reviews of effective models relevant to local conditions the optimal interventions that suit local circumstances with the greatest impact on health outcomes

Education and health promotion approaches (4):

- education and information programs can be used to promote awareness and for effective lobbying and advocacy
- sporting and community groups can be supported with education to minimise alcohol and drug related harm
- school effectiveness, mental health education and access to employment

Improving tertiary services and case management approaches (4):

- mindfulness training in tertiary services
- closer case management and links with psychosocial support
- earlier services for people close to mental health crisis
- client-centred practices.

Positive mental health and wellbeing approaches (3):

- mental health needs to be redefined as mainstream relevant to all and embedded in schools, workplaces, and communities
- evidence-based resilience building programs implemented early on in primary schools.
- youth civic engagement and volunteering to protect against mental health risks associated with disadvantage
- wellbeing approaches

Discussion

This report was completed by the Research Advisory Group of the SW Alliance of the Victorian Department of Health, the Department of Human Services and Deakin University to compliment the priority setting activities occurring across the Barwon South West region in 2013. The report summarises the recommendations for actions and research to address the issues of obesity and mental health that respondents indicated to be amongst their priority concerns. The findings reveal a number of stakeholders across the region recommending the use of evidence-based community-level approaches informed by research and evaluation that are supported by multiple systems.

The study strengths include the consultation with a range of stakeholders from different areas across the region. The limitations include the response rate of 56% and the failure to consult people not available on professional databases.

Further reports from the Delphi study are planned in the future for:

- different stakeholders including local government and regional planners at G21 and the Greater South Coast
- research publication

This report prepared 3rd September 2013.

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