

# Regional Public Health and Wellbeing Plan 2022 - 2026

MURRAYLANDS & RIVERLAND  
LOCAL GOVERNMENT ASSOCIATION



**Murraylands and Riverland  
Local Government Association**

An initiative of Murraylands Riverland LGA in  
partnership with URPS



**Government of South Australia**  
Green Industries SA



# Murraylands & Riverland Regional Public Health & Wellbeing Plan 2022-2026

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# Introduction

## Public Health and Wellbeing Plan

Public health is what we do collectively as a society to create the conditions and environments that enable health and wellbeing of individuals and communities.

In South Australia public health is guided by the Public Health Act and the South Australian State Public Health Plan 2019-2024. These acknowledge the role of local governments in public health and encourage the development of regional public health plans that support the collaboration of Councils and stakeholders to improve regional public health outcomes.

This plan is the second regional plan for the Murraylands and Riverland region and is a collaboration of the Murraylands and Riverland Local Government Association (the MRLGA) and the region's eight constituent Councils: the Rural City of Murray Bridge, District Council of Karoonda East Murray, Southern Mallee District Council, Mid Murray Council, Coorong District Council, Renmark Paringa Council, Berri Barmera Council and the District Council of Loxton Waikerie (Figure 1).



**Figure 1: The Murraylands and Riverland Region and constituent Councils**



**Figure 2:** *Examples of the domains of public health*  
(Source: State Public Health Plan 2019-2024)



Services and programmes at libraries or community centres



Community gardens or local fruit and veg swaps



Footpaths and walking trails



The way our communities are planned



Events that bring the community together



Disability inclusion services



Recreation facilities and sports grounds



Parks and shaded playgrounds



Skate parks and dog parks



Climate risk management planning



Services that celebrate and promote cultural diversity



Safe and nutritious food



Safe drinking water



Immunisation services



Volunteering and community involvement



Wastewater management



Health information and education programs



Smoke and alcohol free environments

# About Public Health

Public health protects and promotes the health and wellbeing of communities. It is influenced by many different aspects of our lifestyles and communities from what we put in our bodies and exercise, to sanitation, community services, and how our communities are planned and built (Figure 2).

Public health is influenced by an individual's ability to make healthy choices and by having access to services and infrastructure that support our wellbeing. It is also influenced by the ability of our communities to plan for and respond to environmental influences such as climate change or disease outbreaks.



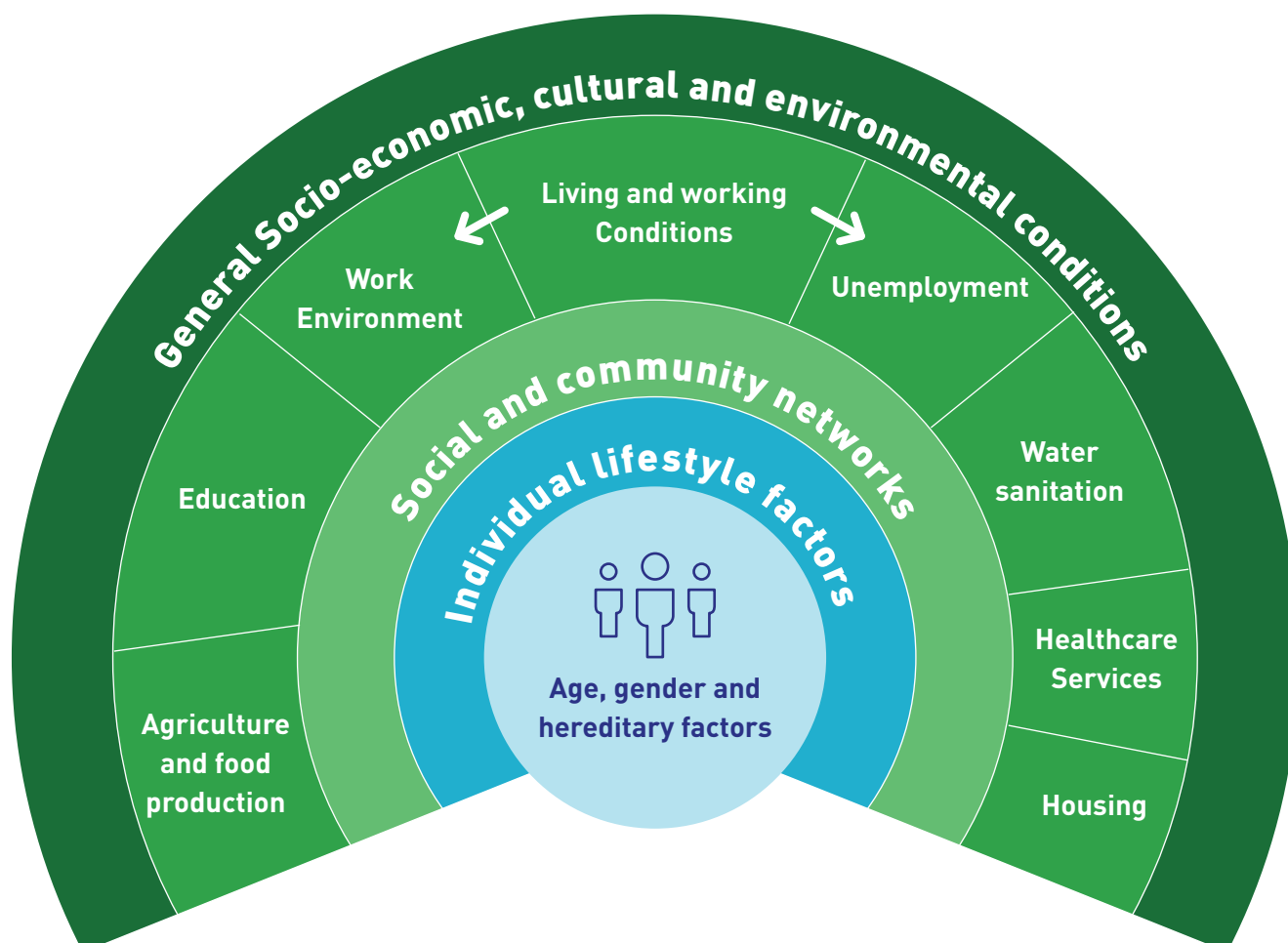
## The Determinants of Health:

The factors that have an impact on the health and wellbeing of individuals and communities are many and varied and include where we are born, live and work, the state of the environment, genetic factors, our income and education level, and our relationships with other people (Figure 3).

The State Public Health Plan 2019-2024 recognises that, while most South Australians live and work in communities and environments that support wellbeing, in South Australia there are significant inequalities in the health status of several population groups, in particular:

- Aboriginal and Torres Strait Islanders people (ATSI)
- People living in rural and regional areas.
- People experiencing socioeconomic disadvantage.
- People from culturally and linguistically diverse backgrounds (CALD).

**Figure 3:** The determinants of health (Source: State Public Health Plan 2019-2024)



# About This Plan

This plan outlines the priorities and response of the constituent Councils for improving public health and wellbeing in the Murraylands and Riverland Region over a five-year period (2022-2026). It has been prepared with the input of the constituent Councils and regional stakeholders.

The constituent Councils and the MRLGA are committed to progressively increasing collaboration to deliver improved public health outcomes for the region through the preparation of regional plans every five years (Figure 4). This is the second public health plan that has been prepared for the region.

**Figure 4:** Regional public health plans with increasing collaboration



## The First Regional Plan (2013-2018)

The first regional plan (2013-18) acknowledged the breadth of public health work being undertaken by the constituent Councils and integrated public health into Council business. It audited and articulated projects and activities being undertaken by individual Councils in the region and encouraged a public health lens. It reported on regional characteristics that are still relevant to public health and wellbeing planning in the region.

## The Second Regional Plan (2022-2026)

This second plan (2022-2026) builds on the first by seeking to consolidate regional collaboration through governance arrangements that encourage common purpose and provide an opportunity to share information, resources and agendas. This second plan builds on regional strengths and addresses regional challenges, as well as the strategic priorities and priority populations identified in the South Australian State Public Health Plan (Table 1 & Figure 5).

It is the aspiration of this plan that the next regional public health plan will springboard off the consolidated collaboration culture established under this plan, and will identify regional projects for collaboration.

## South Australian State Public Health Plan 2019-2024: Strategic Priorities and Priority Populations

**Table 1: Priority Populations**

Aboriginal and Torres Strait Islanders people (ATSI)
People living in rural and regional areas
People experiencing socioeconomic disadvantage
People from culturally and linguistically diverse backgrounds (CALD)



**Figure 5:** *Strategic Priorities*



### **Promote**

Build stronger communities  
and healthier environments



### **Protect**

Protect against public and  
environmental health  
risks and respond to  
climate change



### **Prevent**

Prevent chronic disease,  
communicable disease  
and injury



### **Progress**

Strengthen the systems that  
support public health  
and wellbeing



# Our Region

This section provides some key statistics about the region's demographics and health outcomes. Unless stated otherwise, they have been compiled from the Population Health Profile (2019) prepared for the Region by the Public Health Information Development Unit (PHIDU) in collaboration with the South Australian Department of Health and Wellbeing and the Local Government Association of South Australia.

Using accurate evidence to inform public health planning is important. The statistics in this section indicate a real need and opportunity to collaborate to drive positive outcomes. The councils are committed to working together and with other level of government and organisations to support the wellbeing of our communities.

The councils acknowledge that some statistics may raise concern for people in our community. If the information raises concern for you please contact one of the services below:

- lifeline – 13 11 14 [www.lifeline.org.au](http://www.lifeline.org.au)
- Kids Helpline (5-25 years) – 1800 55 1800 [www.kidshelpline.com.au](http://www.kidshelpline.com.au)



# Quick Facts About People and Their Health

Murraylands & Riverland Region compared to Regional SA has...



## Cultural diversity and language proficiency

- Higher % of people born in a non-English speaking country
- Higher % of people not speaking English well or at all
- Higher % of HACC clients who do not speak English
- Slightly lower % of people of Aboriginal or Torres Strait Islander descent across the region. However noting that compared to the Regional SA average, the Coorong has a higher % of people of Aboriginal or Torres Strait Islander descent



## Employment, income and education

- Higher % of people receiving unemployment benefits
- Higher % of people on Disability Support Pension, Age Pension, Pensioner Concession Card and Health Care Card
- Higher % of household crowding, mortgage stress and need for rent relief
- Slightly higher % of 16 year olds not in full time secondary school
- Slightly higher % of school leavers enrolled in university
- Slightly lower % of people volunteering (ABS Census 2016)
- Similar % of young people (aged 15-24 years) engaged in school, work or education/training



## Health and Wellbeing

- Higher % of high psychological distress
- Higher % of smokers
- Higher % of premature mortality rate for males
- Higher % of suicides
- Higher % of clients of community mental health services
- Higher % of obese adults
- Higher % self-assessed health as fair or poor



## Disability and long-term illness

- Higher % of people with a profound or severe disability in the community
- Similar % of people providing unpaid care



## Early life and childhood

- Higher % of pregnant women smokers
- Higher % of obese children
- Higher % of infant deaths
- Higher % of Child and Adolescent Mental Health clients
- Higher % of children live in low-income families

# Looking Closer Within Our Region

Trend	Comparison of local government areas within region
<b>Aboriginal &amp; Torres Strait Islander people</b>	<ul style="list-style-type: none"> <li>• Largest populations: The Coorong (7.4% of the population), Murray Bridge (5.7%) and Berri and Barmera (5.6%)</li> </ul>
<b>People born in non-English speaking countries</b>	<ul style="list-style-type: none"> <li>• Largest proportions: Renmark Paringa and Murray Bridge (both 9.9%), and Berri and Barmera (7%)</li> </ul>
<b>Most common non-English speaking Countries of birth</b>	<ul style="list-style-type: none"> <li>• Philippines: 570 people, especially in Murray Bridge, Berri and Barmera, and The Coorong</li> <li>• India: 540 people, mainly in Renmark Paringa and Berri and Barmera</li> <li>• Greece: 366 people, mainly in Renmark Paringa, Berri and Barmera and Loxton Waikerie</li> </ul>
<b>Language spoken at home other than English</b>	<ul style="list-style-type: none"> <li>• Highest %: Renmark Paringa (13.6%), Murray Bridge (10%) and Berri Barmera (9.1%)</li> <li>• The languages are Greek, Mandarin, Punjabi, Filipino/Tagalog and Italian (ABS Census 2016)</li> </ul>
<b>Not being able to speak English well or at all</b>	<ul style="list-style-type: none"> <li>• Highest %: Renmark Paringa (2.8%) and Murray Bridge (2.7%)</li> </ul>
<b>Median age and age profile</b>	<ul style="list-style-type: none"> <li>• Murray Bridge LGA has more young adults and fewer older people than Regional SA</li> <li>• Berri and Barmera LGA have more young adults than Regional SA</li> <li>• Mid Murray LGA and The Coorong LGA have the oldest age profiles</li> </ul>
<b>People living with profound or severe disability (largest proportions)</b>	<ul style="list-style-type: none"> <li>• Largest proportions of people aged 0-64 years- Berri and Barmera (4.9%), Mid Murray (4.8%), Murray Bridge (4.5%) and Karoonda East Murray (4.5%)</li> <li>• People aged 65 years and over- in Karoonda East Murray (17.2%, 40 people), Southern Mallee (17.1%, 67 people), Berri and Barmera (16.0%, 340 people) and Renmark Paringa (13.8%, 245 people)</li> </ul>
<b>Assistance with core activities (ABS Census 2016)</b>	<ul style="list-style-type: none"> <li>• Highest in Berri Barmera (8%), Karoonda East (7.1%) and Mid Murray (7.0%)</li> </ul>
<b>Social disadvantage (IRSD score)</b>	<ul style="list-style-type: none"> <li>• Murray Bridge (894) has the greatest relative social disadvantage compared with Southern Mallee (990), Karoonda East Murray (953) and Loxton Waikerie (951) which scored comparatively higher</li> </ul>
<b>People receiving unemployment benefits (People aged 16-64 years)</b>	<ul style="list-style-type: none"> <li>• Largest proportions - Berri and Barmera (10.4%), Renmark Paringa (10.1%), Murray Bridge (9.9%) and Mid Murray (9.7%)</li> </ul>
<b>Obesity rates</b>	<ul style="list-style-type: none"> <li>• Children: little variation between LGAs. Highest in Murray Bridge (approx. 8.0%)</li> <li>• Men highest rates: Mid Murray (37.0%), Loxton Waikerie (36.9%), Karoonda East Murray, Southern Mallee and The Coorong (each with 36.7%)</li> <li>• Women highest rates: Mid Murray (41.6%), Loxton Waikerie (41.1%), Karoonda East Murray (40.5%), Southern Mallee and The Coorong (40.4%) and Murray Bridge (39.0%)</li> </ul>

<b>Children and young people clients of the Child and Adolescent Mental Health Service</b>	<ul style="list-style-type: none"> <li>The highest rates: Murray Bridge (47% above the Regional SA rate), Berri and Barmera (28% above) and The Coorong (19% above)</li> </ul>
<b>Adults assessed as having high or very high levels of psychological distress</b>	<ul style="list-style-type: none"> <li>Highest in Murray Bridge (17.1%) other LGAs below the Regional SA rate</li> </ul>
<b>Self-assessed health as fair or poor</b>	<ul style="list-style-type: none"> <li>Murray Bridge (20.2%) one third above the Regional SA rate</li> <li>The other LGAs in the region had rates at or below the Regional SA rate</li> </ul>
<b>Smoking</b>	<ul style="list-style-type: none"> <li>Highest estimated rates: Berri and Barmera (22.1%) and Mid Murray (21.9%)</li> </ul>
<b>Physical activity (people aged 15 years plus)</b>	<ul style="list-style-type: none"> <li>LGAs below the Regional SA rate: Southern Mallee and The Coorong (80.8%), Karoonda East Murray (80.3%), Loxton Waikerie (78.3%) and Renmark Paringa (78.3%).</li> </ul>
<b>Suicide</b>	<ul style="list-style-type: none"> <li>Mid Murray had the highest rate of suicide (29.2 deaths per 100,000 population, 2.11 times the Regional SA rate of 14)</li> <li>The Rural City of Murray Bridge (10.4), Renmark Paringa (11.6), Loxton Waikerie (13), and Berri Barmera (12.6) were all below the Regional SA rate</li> <li>Data was not available for Karoonda East Murray or Southern Mallee</li> </ul>
<b>Daily fruit consumption</b>	<ul style="list-style-type: none"> <li>Adults - All LGAs had daily fruit consumption just below the Regional SA average (46.2%)</li> <li>Children lowest rates: Southern Mallee and The Coorong (61.4%) and Karoonda East Murray (61.7%)</li> </ul>
<b>Not in full time high school (aged 16 years)</b>	<ul style="list-style-type: none"> <li>Highest: Renmark Paringa (30.1%) and Karoonda East Murray (25%)</li> </ul>
<b>School leavers enrolled in higher education</b>	<ul style="list-style-type: none"> <li>Highest: Southern Mallee (33.5%, although with only six people), Berri and Barmera (26%) and Renmark Paringa (19.5%), all of which had proportions above the Regional SA average</li> <li>Mid Murray equal to the Regional SA average (18.1%). The Coorong (14.7%) and Murray Bridge (16.1%) had the poorest outcomes</li> </ul>
<b>Young people (aged 15-24 years) engaged in school, work or education/training</b>	<ul style="list-style-type: none"> <li>Southern Mallee (84.7%), Loxton Waikerie (84.1%), the Coorong (82.2%) and Berri and Barmera (80.7%) all above the Regional SA average</li> </ul>
<b>Volunteering</b>	<ul style="list-style-type: none"> <li>Highest rates: Southern Mallee (39.5%), Karoonda East Murray (37.5%) and Coorong (35.5%)</li> <li>Lowest in Murray Bridge (22.0%), Renmark Paringa (21.3%) and Berri Barmera (24.1%)</li> </ul>

# Regional strengths and challenges for public health and wellbeing

The following strengths and challenges for public health planning in the region have been compiled from input from the constituent councils and regional stakeholders to develop this plan, and from the Murraylands and Riverland Social Issues Report (2019, MRLGA).

## Regional Strengths

- Attractive natural landscapes and aquatic environments that are accessible and free
- Rural lifestyle
- Existing successful public health and wellbeing initiatives and networks across the region
- Good quality recreation facilities
- Local government community facilities
- Growing culture of sharing and collaboration between Councils and organisations
- Existing community participation and volunteering
- Strong sense of community and personal safety
- Multicultural acceptance and networks

## Regional Challenges

- Mental health issues and access to services
- Adapting to climate change
- Drug and alcohol use
- Ageing population
- Joblessness and welfare dependence
- Difficulty accessing transport
- Services for marginalised vulnerable and youth
- Coordination between programs and service providers
- High-socio economic disadvantage and financial stress
- Disability access and inclusion
- Water security
- Attraction and retention of public health professionals (esp. young)
- Access to affordability of specialist care
- Childhood and adult obesity
- Increasing volunteering
- Availability of affordable and rental housing



## What does this mean for regional public health planning?

The key demographic trends, strengths and challenges identified in the previous sections raise the following imperatives that need to be considered in public health planning in the region:

### 1. Enabling regional coordination

Many councils share the same public health impacts regionally and sub-regionally. This provides an excellent opportunity to collaborate in addressing shared issues and harnessing strengths, however councils will need a regional resource to coordinate efforts.

### 2. Ensuring affordability and accessibility of activities

Many unemployed and welfare dependent households and those without their own transport need to be able to easily access affordable services and activities.

### 3. Building on existing assets

The region's natural environment, rural lifestyle and recreational and council facilities provide an opportunity to leverage off these assets and provide more or better ways for people to be active, unwind and recharge, or to connect with local community. There are also many existing successful networks, programs and volunteers operating across the region that can be linked to or expanded upon to achieve regional outcomes.

### 4. Supporting access and inclusion

Planning and activities must consider how to best engage with and use the strengths of culturally and linguistically diverse members of the community, as well as with people living with a disability.

### 5. Improving mental health and preventing suicide

People in the community need support to manage high levels of psychological stress. How can councils improve the health outcomes of the high number of adults and children already accessing mental health services or prevent people reaching that point?

### 6. Encouraging healthy lifestyles

Obesity, lack of exercise and smoking are an issue across the region. How can councils support the adults and children to eat well and exercise more, and support people to quit smoking?

### 7. Addressing drug and substance use

Substance use (particularly Ice), is a concern that is impacting on the health and wellbeing of individuals and their households and networks. How can councils contribute to recovery and prevent and reduce substance use?

### 8. Adapting to climate change

Climate change can impact a community's physical and mental health, lifestyle and budgets. Regional responses need to consider how to best manage impacts and maintain vitality and prosperity.

### 9. Responding to disease outbreaks

Planning and activities must consider how to best engage with and use the strengths of culturally and linguistically diverse members of the community, as well as with people living with a disability.

### 10. Supporting housing affordability and availability

A supply of affordable and social housing is required to address the level of people suffering rental and mortgage stress.

### 11. Improving employment prospects

There is an opportunity to look at volunteering and training programs and other civic participation opportunities to provide purpose and build employment prospects for those on unemployment benefits providing opportunities for civic participation that improve wellbeing and employment prospects.

# Our Principles

To deliver this plan we will apply the following principles:



## **Engagement**

We will engage with our community and stakeholders in the design and delivery of public health services and programs



## **Reaching Out**

We will reach out to First Peoples, other cultural groups and communities outside of key townships to understand their needs and provide opportunities to participate in programs and services



## **All Ages and Abilities**

We will ensure that our facilities and programs are accessible to people of all abilities and provide something for people of all ages



## **Affordable**

We will ensure that council facilities and programs are free or affordable to enable participation of those on low-incomes



## **Collaboration**

We will work together and with other levels of government and organisations to deliver this plan



## **Advocacy**

We will advocate to other levels of government on behalf of our community for access to public health services and infrastructure

# Our Goals

Five long term aspirational regional goals have been identified to address the imperatives for public health planning and the priorities and target populations of the State Public Health Plan. These goals and local government roles in delivering them have been adjusted from the previous plan, acknowledging the extensive work councils already have underway.

For this plan, a series of regional collaboration priority actions have been identified for each goal that the councils will work on together. Councils will also each undertake their own activities that collectively work towards the achievement of each regional goal. Under each goal, each council has a list of priority actions they will focus on within their roles over the life of the plan. They will also continue to deliver other public health activities.



## **Goal 1:**

Build community wellbeing and resilience



## **Goal 2:**

Increase healthy living choices



## **Goal 3:**

Prepare for climate change and plan for emergency



## **Goal 4:**

Sustain environmental and public health



## **Goal 5:**

Strengthen regional public health collaboration and delivery



## State Public Health Plan Alignment



### Promote

Build stronger communities and healthier environments

## Examples of local government role in delivering this goal:

- Disability access and inclusion planning
- Planning policy that supports community health and housing diversity
- Libraries, community centre and other social infrastructure and programs
- Reconciliation Action Planning
- Celebrating and supporting cultural diversity
- Public safety design and infrastructure
- Local Area Traffic Management
- Youth facilities and activities
- Volunteer programs and traineeships
- Engaging communities in Council decisions and activities
- Community transport
- Access to digital resources and improving digital literacy
- Connecting people with education, employment and support services
- Community events
- Community grants



# Goal 1

## Build community wellbeing and resilience

### In Our Region:

- People of all ages, backgrounds, abilities and means are welcomed, connected and participate in community life
- People's mental health is supported
- People feel safe
- Community support structures aid resilience and recovery

### Our regional collaboration priority actions for this goal:

Priority action	Description
<b>Regional education, promotion and advocacy to support mental wellbeing and suicide prevention</b>	<ul style="list-style-type: none"> <li>• Sharing resources of and working together with the South Australian Council on Suicide Prevention to support a whole of government approach</li> <li>• Provide education to council frontline staff to enable them to recognise and provide compassionate support to community members in distress at the right time</li> <li>• Collaborate with Local Suicide Prevention Networks</li> <li>• Promotion of local services to connect people in distress to the support they need</li> <li>• Advocate for access to mental health services in the region</li> <li>• Share or cross-promote free or affordable opportunities to participate in community life</li> </ul>
<b>Regional support and advocacy to improve transport options</b>	<ul style="list-style-type: none"> <li>• Monitor and ensure appropriate provision of community transport across the region</li> <li>• Advocate for improved public transport within the region</li> </ul>
<b>Regional collaboration to improve access and inclusion</b>	<ul style="list-style-type: none"> <li>• Work together and share learnings and resources in the implementation of Disability Access and Inclusion Plans</li> </ul>

## Council priority actions for this goal:

Council	Priority Action
<b>The Berri Barmera Council</b>	<ol style="list-style-type: none"> <li>1. Implement the Disability Access and Inclusion Plan</li> <li>2. Continue to support and promote health, learning and wellbeing initiatives in our community</li> <li>3. Engage with our diverse community to develop and support opportunities for storytelling and shared understanding</li> <li>4. Implement infrastructure projects that include and improve public safety design</li> </ol>
<b>Coorong District Council</b>	<ol style="list-style-type: none"> <li>1. Develop and implement a Disability Access and Inclusion Plan</li> <li>2. Support and advocate for mental health and wellbeing programs</li> <li>3. Support, monitor and value Council's Volunteer Management Program</li> <li>4. Advocate support for community transport to enable social health and wellbeing</li> </ol>
<b>The District Council of Karoonda East Murray</b>	<ol style="list-style-type: none"> <li>1. Develop and implement a Disability Access and Inclusion Plan</li> <li>2. Support local community groups to build capacity and inclusion</li> <li>3. Assist Karoonda Area School to provide community access to the Karoonda School Swimming Pool</li> <li>4. Provide community grant writing support for identified projects and funding opportunities</li> </ol>
<b>The District Council of Loxton Waikerie</b>	<ol style="list-style-type: none"> <li>1. Develop and implement a Council wide Active Ageing and Wellness Strategy</li> <li>2. Develop and implement a Disability Access and Inclusion Plan</li> <li>3. Provide up to \$250,000 in grants to community groups and organisations</li> <li>4. Develop and implement a Youth Activation Strategy</li> </ol>
<b>Mid Murray Council</b>	<ol style="list-style-type: none"> <li>1. Support the development and implementation of the community-led Mid Murray "Our Town" Plan</li> <li>2. Work with internal and external stakeholders to assist in addressing mental health and wellbeing issues in the region</li> <li>3. Develop and implement a Disability Access and Inclusion Plan</li> <li>4. Provide diverse and increased opportunities for community engagement, connection and participation</li> <li>5. Promote and celebrate Aboriginal Culture and significance through increased opportunities for engagement and collaboration</li> </ol>
<b>Renmark Paranga Council</b>	<ol style="list-style-type: none"> <li>1. Develop and implement a Disability Access and Inclusion Plan</li> <li>2. Continue to support Council's Volunteer Program</li> <li>3. Provide programs that assist in upskilling in regard to digital literacy, in partnership with external funding partners</li> <li>4. Partner with other tiers of government and community groups to deliver arts and cultural heritage projects</li> <li>5. Advocate for improved regional health services with State and Federal agencies</li> <li>6. Ensure that crime prevention through environmental design principles are embedded in new and renewed infrastructure</li> </ol>
<b>The Rural City of Murray Bridge</b>	<ol style="list-style-type: none"> <li>1. Lobby for greater access to mental health services for those most vulnerable</li> <li>2. Develop and implement a Disability Access and Inclusion Plan</li> <li>3. Create diverse housing options through development assessment and influencing planning and design code policy applicable to the residential growth areas</li> </ol>
<b>Southern Mallee District Council</b>	<ol style="list-style-type: none"> <li>1. Implement the Disability Access and Inclusion Plan</li> <li>2. Engage our community in planning for two major projects that improve community facilities and spaces</li> <li>3. Provide grants and support to enable community wellbeing, mental health and grass roots initiatives</li> </ol>

## State Public Health Plan Alignment



### Prevent

Prevent chronic disease, communicable disease and injury

## Examples of local government role in delivering this goal:

- Walking and cycling trails and networks
- Open space, sporting grounds, recreational facilities and playgrounds
- Supporting exercise programs through Council centres
- Smoke free environments and dry zones
- Supporting farmers markets
- Recreation and sport planning and grants
- Healthy eating events
- Alcohol and Drug Foundation Local Drug Action Teams, and Local Government Prevention Capacity & Infrastructure Surveys and Reports
- Connecting people with information and services to prevent harm from smoking, alcohol and drugs
- Collaborating with other programs (eg. ORSR Recreation and Sport grants, STARCLUB, Good Sports, Parkrun, Heart Foundation)



## Goal 2

### Increase healthy living choices

#### In Our Region:

- People can eat well and exercise regularly regardless of their circumstances
- Smoking, alcohol and substance use is reduced

#### Our regional collaboration priority actions for this goal:

Priority action	Description
<b>Regional collaboration and advocacy to reduce drug and alcohol related harms</b>	<ul style="list-style-type: none"> <li>• Work together with organisations, such as the Alcohol and Drug Foundation, to share resources across the region and participate in programs such as Local Drug Action Teams and Planet Youth</li> <li>• Promote and collaborate with local support services</li> <li>• Advocate for the increased provision of local support services across the region</li> </ul>
<b>Regional promotion and planning for sport and recreation outcomes</b>	<ul style="list-style-type: none"> <li>• Sharing and promoting free or affordable recreation and sport opportunities across the region to improve access and participation</li> <li>• Implement the Murray Coorong Trail Strategy</li> <li>• Murraylands Starclub Field Officer, co-funded by the Murraylands Councils and the Office of Recreation, Sport and Racing</li> <li>• Identify priority collaborative actions from the Murraylands and Riverland Region Sport and Recreation Facilities Needs Review</li> </ul>

## Council priority actions for this goal:

Council	Priority Action
<b>The Berri Barmera Council</b>	<ol style="list-style-type: none"> <li>1. Upgrade key recreational spaces for improved community use</li> <li>2. Extend and link walking, cycling and recreation trails networks across the district</li> <li>3. Support and facilitate activities and events that focus on community health, wellbeing and resilience</li> </ol>
<b>Coorong District Council</b>	<ol style="list-style-type: none"> <li>1. Continue to support groups and organisations to develop healthy and active lifestyle choices through education, awareness and access to healthy eating and physical activity</li> <li>2. Work with the community to deliver sport and recreation opportunities</li> <li>3. Support education about drug, alcohol and substance misuse in partnership with recognised organisations and the State Government</li> </ol>
<b>The District Council of Karoonda East Murray</b>	<ol style="list-style-type: none"> <li>1. Develop three new playgrounds in Wanbi, Karoonda and Wynarka to provide opportunities for outdoor family activities</li> <li>2. Develop district walking and hiking trails to encourage social participation and healthy lifestyles</li> </ol>
<b>The District Council of Loxton Waikerie</b>	<ol style="list-style-type: none"> <li>1. Facilitate the development of the Moorook Kingston on Murray Eco Trail in collaboration with Moorook Kingston on Murray Community Association and Department for Environment and Water</li> <li>2. Continue the Waikerie Walking Trail - linking the Fauna Park, Hart Lagoon Trail and the Waikerie Riverfront</li> <li>3. Promote Council Dry Areas</li> <li>4. Continue to operate swimming pools and recreation facilities in Loxton and Waikerie</li> </ol>
<b>Mid Murray Council</b>	<ol style="list-style-type: none"> <li>1. Maintain infrastructure that supports opportunities for sport and recreation</li> <li>2. Facilitate active partnerships with sporting clubs to achieve sustainable, inclusive and increased participation</li> <li>3. Leverage existing open spaces, and explore other recreation strategies, to provide a broad range of opportunities for social connection and inclusion for all ages</li> </ol>
<b>Renmark Paringa Council</b>	<ol style="list-style-type: none"> <li>1. Develop a Wayfinding Strategy and work with potential partners to develop trail network opportunities</li> <li>2. Provide a diverse range of activities at Council recreation facilities that support community needs and culture</li> <li>3. Develop the Taylor Riverfront Precinct, including walking paths, waterplay and outdoor spaces for community and visitor enjoyment</li> <li>4. Upgrade the Renmark Swimming Pool</li> <li>5. Review of the "walkability" of Renmark</li> </ol>
<b>The Rural City of Murray Bridge</b>	<ol style="list-style-type: none"> <li>1. Participate in the drug prevention Pilot Program for Planet Youth and explore opportunities to establish a longer-term program</li> <li>2. Lobby for greater access to alcohol and other drug treatment and support services</li> <li>3. Continue implementation of the Trail Strategy (Murray Coorong Trail Strategy)</li> <li>4. Continue to develop and support the partnership with the Murraylands Star Club and "Game On" strategy</li> <li>5. Implement Council's Playspace Strategy</li> </ol>
<b>Southern Mallee District Council</b>	<ol style="list-style-type: none"> <li>1. Develop and provide better open space, sporting grounds, recreational facilities and playgrounds for public, community group and sporting club use</li> <li>2. Support clubs and groups to secure external grant funding for recreation and sport facility upgrades and programs</li> <li>3. Provide grants to support community organisations to deliver healthy living outcomes</li> <li>4. Upgrade the Lameroo and Pinnaroo swimming facilities</li> </ol>

## State Public Health Plan Alignment



### Protect

Protect against public and environmental health risks and respond to climate change

## Examples of local government role in delivering this goal:

- Regional and local climate change adaptation planning and integration
- Planning policy that supports energy and water efficient buildings and industry
- Green and cool, drought tolerant landscapes and public realm
- Energy and water efficient Council buildings and facilities
- Council facilities as refuges during heat waves
- Emergency management and disaster response planning
- Regional and subregional water management planning including reuse
- Community education about and communication during extreme events



# Goal 3

## Prepare for climate change and plan for emergency

### In Our Region:

- We have planned for and are resilient to the long-term impacts of climate change such as reduced rainfall and increased temperatures
- Our communities are planned and resourced to respond to and recover from emergencies and disasters (including extreme weather events such as heat waves, floods, storms and bushfires)

### Our regional collaboration priority actions for this goal:

Priority action	Description
<b>Regional climate change planning and institutional collaboration</b>	<ul style="list-style-type: none"> <li>• Develop the Murraylands and Riverland Plan to improve the region's resilience to drought</li> <li>• Establish institutional collaboration between the Murraylands and Riverland Local Government Association, Regional Development Authority and Landscapes Board to improve regional climate resilience</li> </ul>
<b>Regional emergency management response</b>	<ul style="list-style-type: none"> <li>• Participate and respond to decisions of the Murray and Mallee Zone Emergency Management Committee</li> <li>• Share resources to help ensure our community is prepared and knows how to respond in an emergency</li> </ul>

## Council priority actions for this goal:

Council	Priority Action
<b>The Berri Barmera Council</b>	<ol style="list-style-type: none"> <li>1. Implement the Environment and Sustainability Strategy</li> <li>2. Work with regional stakeholders to create waste minimisation and educations programs</li> <li>3. Work with emergency services and stakeholder agencies to prepare and enact actions that support disaster management, mitigation and recovery</li> </ol>
<b>Coorong District Council</b>	<ol style="list-style-type: none"> <li>1. Support the Coorong Tatiara Local Action Plan to continue to educate and build resilience amongst rural communities and industries on the impacts of climate variability</li> <li>2. Provide Council facilities as refuges during heat waves, in conjunction with community and Government facilities</li> <li>3. Undertake emergency management and disaster response planning</li> <li>4. Install solar panels on Council owned buildings</li> </ol>
<b>The District Council of Karoonda East Murray</b>	<ol style="list-style-type: none"> <li>1. Undertake a strategic review of existing waste facilities and explore regional opportunities</li> <li>2. Feature renewable technology in upgrades to community infrastructure where applicable</li> </ol>
<b>The District Council of Loxton Waikerie</b>	<ol style="list-style-type: none"> <li>1. Develop an Emergency Management Plan</li> <li>2. Promote use of community facilities as refuges during heat waves</li> <li>3. Develop the Riverland Smart Agriculture Project - including wireless sensors within irrigated and dry land agricultural areas</li> <li>4. Undertake an LED light replacement program to reduce electricity use</li> </ol>
<b>Mid Murray Council</b>	<ol style="list-style-type: none"> <li>1. Explore and implement renewable energy and energy saving initiatives</li> <li>2. Develop and enact a Community Emergency Management Plan</li> <li>3. Plan and implement revegetation programs that use native, drought tolerant species and support biodiversity outcomes</li> </ol>
<b>Renmark Paranga Council</b>	<ol style="list-style-type: none"> <li>1. Develop and enact an Emergency Management Plan including response and recovery arrangements to build community resilience</li> <li>2. Develop and implement a Tree Strategy to "re-green" streets and open spaces and improve amenity, cooling, climate resilience and biodiversity outcomes</li> <li>3. Complete the initial Alliance for Water Stewardship (AWS) certification and develop a Water Stewardship Plan</li> <li>4. Provide community education programs to support waste reduction, reuse, recycling and the correct use of waste streams</li> <li>5. Audit street lighting and install LED streetlights</li> </ol>
<b>The Rural City of Murray Bridge</b>	<ol style="list-style-type: none"> <li>1. Investigate installation of solar panels on Council buildings</li> <li>2. Investigate further water reuse projects in Council parks and gardens</li> <li>3. Undertake a waste reuse project for the Tour Down Under</li> <li>4. Implement the Climate Change Adaptation Plan</li> <li>5. Implement the Environmental Management Plan</li> </ol>
<b>Southern Mallee District Council</b>	<ol style="list-style-type: none"> <li>1. Prepare and enact emergency management and disaster response planning documents</li> <li>2. Improve the energy and water efficiency of Council buildings and facilities</li> <li>3. Review Council tree and planting policies to encourage use of climate resilient species</li> </ol>

## State Public Health Plan Alignment



### Protect

Protect against public and environmental health risks and respond to climate change



### Prevent

Prevent chronic disease, communicable disease and injury

## Examples of local government role in delivering this goal:

- Vaccination programs
- Mosquito management
- Food safety and air and water quality education, regulation and enforcement
- Asbestos management and removal education
- Water safety education



# Goal 4

## Sustain environmental and public health

### In Our Region:

- People are protected against preventable communicable diseases
- Environmental risks to public health are well understood and people and organisations have the capacity to act accordingly.

### Our regional collaboration priority actions for this goal:

Priority action	Description
<b>Regional Environmental Health Officer networks</b>	<ul style="list-style-type: none"><li>• Regional Environmental Health Officer Network to share programs and resources and coordinate environmental health efforts including those for which they have regulatory responsibility</li><li>• Participate in the SA Regional Special Interest Group of Environmental Health Officers</li></ul>
<b>Support regional immunisation outcomes</b>	<ul style="list-style-type: none"><li>• Share learnings of and resources for the delivery and promotion of immunisation programs (including COVID-19 vaccination) across the region</li></ul>

## Council priority actions for this goal:

Council	Priority Action
<b>The Berri Barmera Council</b>	<ol style="list-style-type: none"> <li>1. Advocate and collaborate regionally to ensure continued operation of immunisation clinics</li> <li>2. Continue the implementation of public health and safety education and prevention programs</li> <li>3. Encourage and support local aquatic operators to implement and expand approved water safety programs to our community</li> </ol>
<b>Coorong District Council</b>	<ol style="list-style-type: none"> <li>1. Implement the Mosquito Management Plan</li> <li>2. Continue to monitor the COVID-19 environment and deliver Council responsibilities and consider how learnings may inform future service delivery</li> <li>3. Implement the School Immunisation Program</li> </ol>
<b>The District Council of Karoonda East Murray</b>	<ol style="list-style-type: none"> <li>1. Develop and implement a Waste Facility Strategy incorporating future plans for Karoonda Landfill Site</li> <li>2. Deliver the Immunisation Program in collaboration with the Karoonda Area School</li> <li>3. Provide bi-annual food inspections of local food handling business and community groups</li> </ol>
<b>The District Council of Loxton Waikerie</b>	<ol style="list-style-type: none"> <li>1. Develop and implement Asbestos Management Plans for Council buildings</li> <li>2. Implement the Riverland Integrated Mosquito Management Plan, and in conjunction with SA Health, mosquito and midge monitoring programs</li> <li>3. Provide a School Vaccination Program</li> <li>4. Provide a green bin green waste composting service</li> </ol>
<b>Mid Murray Council</b>	<ol style="list-style-type: none"> <li>1. Complete and implement the Joint Murraylands Mosquito Management Plan</li> <li>2. Support and facilitate the School Immunisation Program</li> <li>3. Coordinate education programs to heighten skills and knowledge of food handlers</li> </ol>
<b>Renmark Paranga Council</b>	<ol style="list-style-type: none"> <li>1. Improve food safety education</li> <li>2. Advocate and collaborate regionally to ensure continued operation of immunisation clinics</li> <li>3. Implement the Riverland Integrated Mosquito Management Plan</li> </ol>
<b>The Rural City of Murray Bridge</b>	<ol style="list-style-type: none"> <li>1. Continue to promote Council's Community immunisation clinic and encourage strong uptake at School clinics</li> <li>2. Investigate the feasibility of a communal sewerage system for the Eastside of Murray Bridge</li> <li>3. Complete and implement the Joint Murraylands Mosquito Management Plan</li> </ol>
<b>Southern Mallee District Council</b>	<ol style="list-style-type: none"> <li>1. Deliver vaccination programs in partnership with local medical practices and schools</li> <li>2. Provide asbestos management and removal education to the community</li> <li>3. Increase the frequency of Council's food safety inspections and education</li> <li>4. Provide improved water safety education through Swimming programs</li> </ol>

## State Public Health Plan Alignment



### Progress

Strengthen the systems that support public health and wellbeing



## Goal 5

### Strengthen regional public health collaboration and delivery

#### In Our Region:

- Councils collaborate to deliver regional public health outcomes
- Councils are resourced to support regional collaboration

#### Examples of local government role in delivering this goal:

- Seeking funding to support regional coordination
- Sharing resources
- Shared service agreements
- Regional planning
- Linking or adding value to existing successful programs and networks

#### Our regional collaboration priority actions for this goal:

Priority action	Description
<b>Murraylands &amp; Riverland Regional Public Health &amp; Wellbeing Plan Committee</b>	<ul style="list-style-type: none"> <li>• The Committee to meet at least three times a year to drive the delivery of the plan and build collaboration</li> <li>• The running of a forum of public health stakeholders, convened by the Committee in the first 12 months of its formation, to promote the range of public health services delivered in the Murraylands and Riverland, explore examples best practice and consider the benefits of regional collaboration</li> <li>• The development of regional collaboration teams to deliver the regional collaboration priorities for each goal and to further explore key regional public health issues and act or advocate for change</li> </ul>
<b>Delivery of regional collaboration priority actions</b>	<ul style="list-style-type: none"> <li>• Regional education, promotion and advocacy to support mental wellbeing and suicide prevention</li> <li>• Regional support and advocacy to improve transport options</li> <li>• Regional collaboration to improve access and inclusion</li> <li>• Regional collaboration and advocacy to reduce drug and alcohol related harm</li> <li>• Regional promotion and planning for sport and recreation outcomes</li> <li>• Regional climate change planning and institutional collaboration</li> <li>• Regional emergency management response</li> <li>• Environmental Health Officer regional networks</li> <li>• Support regional immunisation outcomes</li> </ul>

# Working Together and Tracking Our Progress



This section outlines how the Murraylands and Riverland Local Government Association (MRLGA) and constituent councils will organise and resource themselves to best deliver this plan whilst also meeting any legislative requirements of the Public Health Act.

Regional collaboration and partnerships are the cornerstone that will support the success of this Plan. A regional committee has been established by the MRLGA to lead the development of this plan (and future reviews) and to oversee the delivery and reporting of the plan's progress.

This plan establishes a new Regional Coordinator position to drive collaboration and assist in coordinating partnerships and a regional response.

## Partnerships

The councils will engage with Public Health Partner Authorities and other relevant groups and organisations to deliver the plan and to add value to existing efforts. The councils will engage to better understand community needs and partner activities so that actions delivered through this plan have the best impact and reach (within local government responsibilities).

### Potential partners could include:

- |   |   |
|---|---|
| • Public Health Partner Authorities                             | • Suicide Prevention Networks   |
| • Heart Foundation  | • Mental health support services  |
| • Local Health Network  | • Drug and alcohol services   |
| • Walking, cycling groups and recreation groups (e.g. Park Run) | • Community and social services peak groups (e.g. Community Centres SA, Volunteering SA, South Australian Council of Social Services) |
| • Disability advocacy or service providers                      | • Regional Development Australia (RDA)  |
| • Sporting clubs  | • Murray Mallee Emergency Management Committee  |
| • Cultural groups   | • Department for Environment and Water (eg. National Parks, Landscapes SA)  |
| • Community groups  | • Emergency and affordable housing providers  |
| • Aboriginal groups and service providers                       | • South Australian Regional Organisation of Councils (SAROC)  |
| • Premiers Council for Suicide Prevention                       | • Animal welfare organisations (eg. RSPCA)  |

*\*This is not an exhaustive list. Partners will be engaged on a project-by-project basis and will depend on the initiatives being delivered.*



# Public Health Partner Authorities

The State Public Health Plan and the Public Health Act introduced the establishment of Public Health Partner Authorities to improve population health and wellbeing through collaboration.

## Public Health Partner Authorities are agencies which:

- Contribute to key priority areas within the State Public Health Plan, and those emerging through regional public health planning
- Operate or impact at a state-wide or regional population level
- Are a key stakeholder for addressing significant public policy issues that impact on population level health and wellbeing.

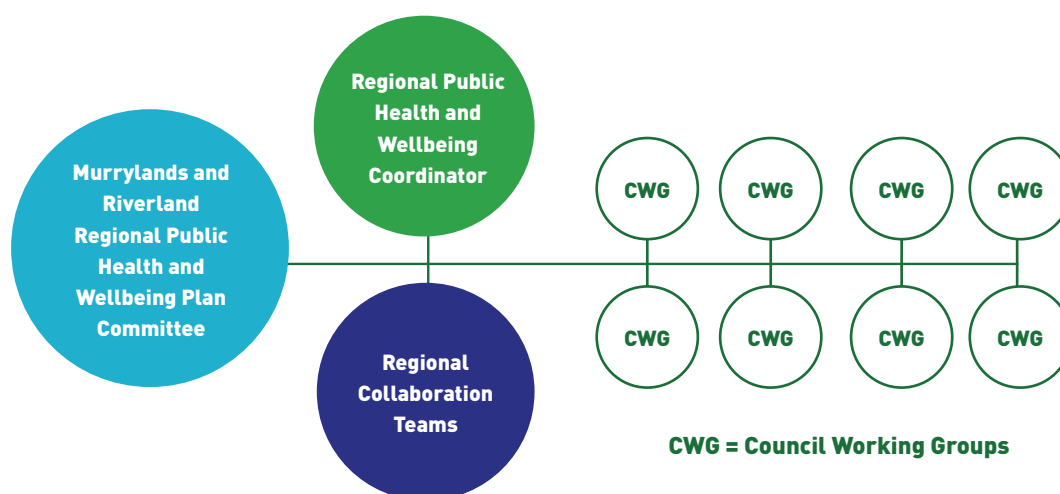
## Current Public Health Partner Authorities are:

- |  |  |
|--|--|
| • Alcohol and Drug Foundation          | • Kidsafe SA   |
| • Biosecurity SA                       | • Primary Health Networks (eg Country SA PHN)  |
| • Council on the Ageing SA             | • Renewal SA   |
| • Department of Correctional Services  | • SafeWork SA and ReturnToWork SA  |
| • Department of Education              | • South Australian Health and Medical Research Institute – Wellbeing and Resilience Centre |
| • Department of Human Services (DHSSA) | • SA Council of Social Services  |
| • Department for Environment and Water | • University of South Australia.   |
| • Department for Transport             |  |

**Source:** [sahealth.gov.au](https://sahealth.gov.au)

The councils will engage with relevant Public Health Authorities as required to support understanding and a strengthened response of the regional collaboration priority actions as well as the individual services and programs of each council.

# Governance Structure



	Role	Membership
<b>Murraylands &amp; Riverland Regional Public Health &amp; Wellbeing Plan Committee</b>	<ul style="list-style-type: none"> <li>To oversee the preparation, implementation, reporting and review of the plan; and to pursue regional collaboration and partnership in the interest of improved service delivery and public health outcomes.</li> <li>The Chair for the Committee to be appointed by MRLGA.</li> <li>The Committee will be supported by the Regional Public Health Coordinator.</li> <li>Meet at least three times a year to drive the delivery of the plan and build collaboration.</li> </ul>	<p>A senior manager from both the community services/ planning and environmental health portfolios of each constituent council.</p> <p>The CEO and President of the MRLGA will serve on the Committee by right of their position with the MRLGA.</p>
<b>Council Working Groups</b>	<ul style="list-style-type: none"> <li>To project manage the delivery of individual council priorities/actions.</li> <li>A leader will be appointed to ensure coordination and delivery. This role may be rotated within council.</li> <li>The lead will call, chair and minute actions from working group meetings. And will ensure that project plans are prepared and ensure accountability of action delivery by project working group members.</li> </ul>	<p>A senior council manager to act as Project Sponsor to provide guidance and assist in any operational or political barriers.</p> <p>An operational staff member to act as the Regional Project Manager</p>
<b>Regional Public Health and Wellbeing Coordinator</b>	<ul style="list-style-type: none"> <li>Coordinating Committee meetings, managing the agenda and minutes.</li> <li>Implementing decisions of the Committee in accordance with the business plans of the MRLGA and the Regional Public Health Plan.</li> <li>Providing advice and reports to the Committee on its performance against the plan.</li> <li>Identifying and developing partnerships and funding opportunities.</li> </ul>	<p>A skilled public health planner with project management, networking and collaboration expertise.</p> <p>A co-funded position, appointed by the Committee and hosted by the MRLGA.</p>
<b>Regional Collaboration Teams</b>	<ul style="list-style-type: none"> <li>Where collaboration opportunities are identified, councils will meet to explore and implement these opportunities.</li> </ul>	<p>Councils.</p> <p>Regional Public Health and Wellbeing Coordinator</p>

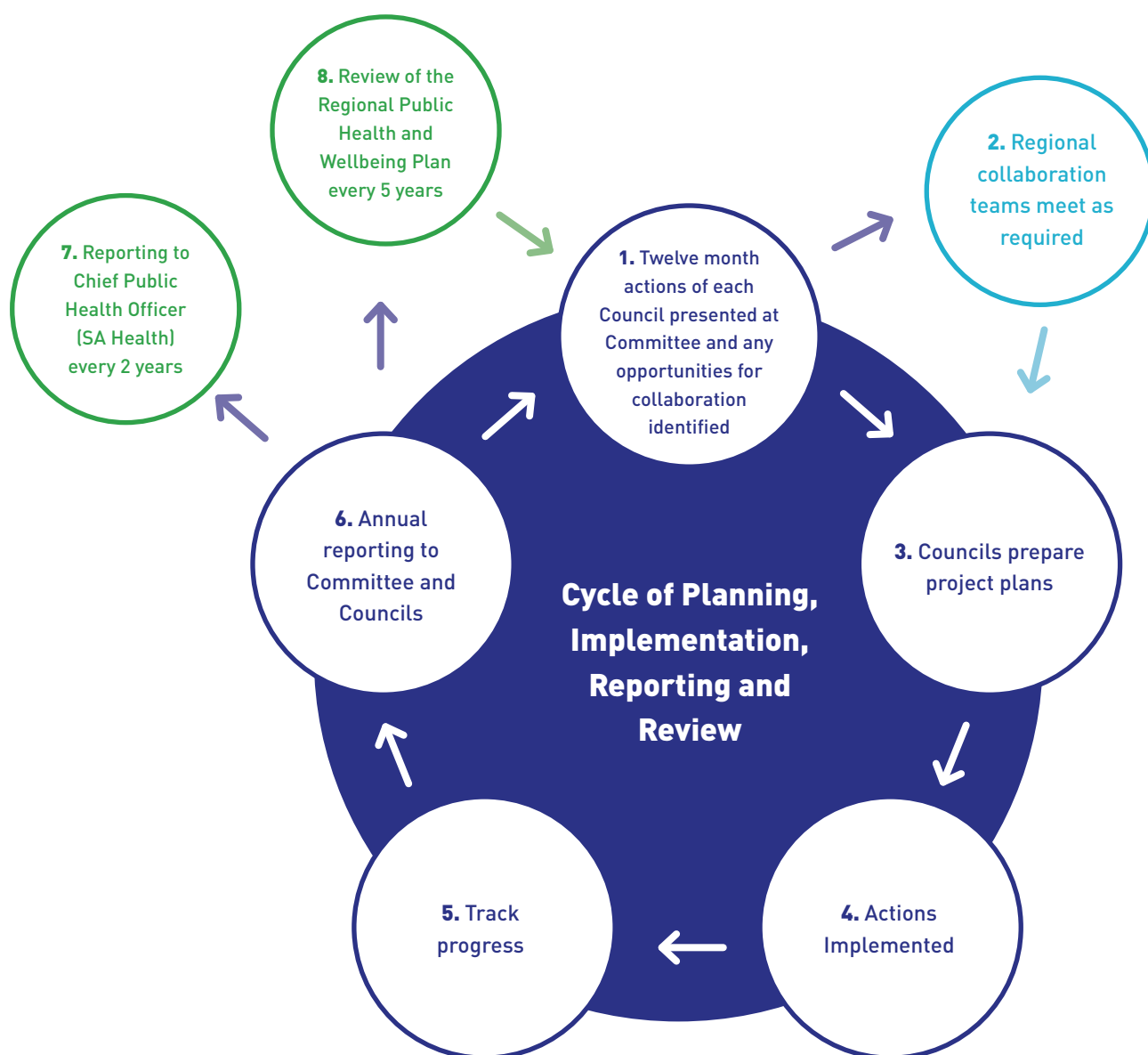
# Delivering the Plan and Tracking Our Progress

This plan will be delivered through the following cycle of planning, implementation, reporting and review.

This cycle will assist in the delivery of regional collaboration projects but also supports the delivery of each council's priority actions and other ongoing public health services.

It also allows for the legislatively required reports to SA Health every two years, and review of the plan every five years. Funding will be determined through each Council's annual business plan and budget process.

A description of each of the steps is provided in the table on the following page.



Cycle Step	Description	Who	How	When
<b>1. 12 month actions of each Council presented at Committee and opportunities for collaboration identified (if any)</b>	<p>Committee meets and each council presents their priority actions to deliver over the coming year. These actions relate to what is necessary in a given year to deliver the council's priorities/ actions listed under each goal in this plan, plus any other actions they wish to progress in relation to the public health goals.</p> <p>Emerging issues relating to each goal are discussed and delivery of regional collaboration priorities discussed.</p>	The Committee	Workshop	Annually
<b>2. Regional collaboration teams meet as required</b>	Councils will form teams to deliver the regional collaboration priorities.	Councils (Regional collaboration teams) and Regional Coordinator	Meetings, calls, emails	Throughout the year
<b>3. Council Working Groups plan for priorities/actions</b>	Councils prepare 12 month project snapshots/ plans for their priority actions which may or may not include regional collaboration actions. Measures for reporting will be identified.	Councils	Internal meetings	Annually
<b>4. Actions implemented</b>	Councils implement actions across the year.	Individual councils	As per own project plans	Throughout the year
<b>5. Track progress</b>	Data collected (based on measures agreed to at 3) and reported to Committee. Approaches adjusted as required to improve outcomes.	Councils Regional Coordinator	<p>Collected as per project plans</p> <p>Project meetings to adjust approach</p> <p>Report tabled to Committee meeting</p>	Every 6 months
<b>6. Annual reporting to Committee and Councils</b>	Prepare annual reports of progress on delivery of council and regional collaboration priorities under each goal and consider and identify adjustments or opportunities for following year.	Regional Coordinator	Report tabled to Committee meetings and distributed to councils	Annually
<b>7. Reporting to Chief Public Health Officer (SA Health)</b>	Prepare a report to the Chief Public Health Officer (SA Health), as required by the Public Health Act, that collates progress against the council and regional collaboration priorities under each goal based on the annual report.	Regional Coordinator	Report emailed to SA Health	Every two years

# Regional Public Health and Wellbeing Plan 2022 - 2026

MURRAYLANDS & RIVERLAND  
LOCAL GOVERNMENT ASSOCIATION



**Murraylands and Riverland  
Local Government Association**

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An initiative of Murraylands Riverland LGA in  
partnership with URPS