

Project Summary:

The 'PCP Problem Gambling (PG) Initiative' is a state-wide project funded by the Department of Justice (DoJ) based in Primary Care Partnerships (PCP). The initiative commenced in 2008 and aims to reduce risk factors for PG in their communities, as well as raising awareness of PG as a public health issue. The focus of this project for 2011-12 is on upstream interventions which will address the social determinants of PG.

Project considerations:

This work plan document outlines the objectives and strategies to be undertaken during 2011-12. The plan reflects the funding and service agreement (FASA) requirements from DoJ, in addition to the results from research of best practice and of consultation with key stakeholders.

Specifically, in developing this work plan, the project worker has;

- Researched what PG work has occurred statewide, by the DoJ PCP PG Initiatives and within the Eastern Metropolitan Region (EMR), including past work the EMR PCP PG Initiative (since 2008), by Outer East Health and Community Support Alliance (OEHCSA), Gamblers Help Eastern (GHE), Monash City Council (Monash CC), Eastern Region Gambling Group (ERGG), Monash Responsible Gambling Taskforce (MRGT), Local Government Working Group on Gambling (LGWGoG) and identified high risk population groups identified by stakeholders for the EMR.
- Examined best practice, frameworks, successful from the other PCP PG Initiatives – including *A guide to using a health promotion approach to problem gambling*, and *Health Promotion Resource Guide for Problem Gambling Prevention in Melbourne's North* and *Health Promotion Resource Guide for Problem Gambling Prevention in Melbourne's East*.
- *Health Promotion Resource Guide for Problem Gambling Prevention in Melbourne's East*.
- The priorities, target populations and current work of key stakeholders
- Identified gaps and opportunities to add value to and/or link with existing work.
- Identified opportunities for new and emerging work including engage in new partnerships.

The information collected from this research and consultations was then considered in light of the project FASA from DoJ. In 2011-12 the PCP PG Initiative we will continue to address the social determinants, risk and protective factors of PG related harm. Social isolation, as a known social determinant of PG, was chosen to be a specific focus within the work plan for 2011-12. This determinant is a recognised issue in the EMR, it is a key priority area of many partner organisations including for all key stakeholders (IEPCP, OEHCSA, Monash CC and GHE) thereby providing opportunities for leverage for implementing new work. There are a number of large social inclusion initiatives within the EMR with which this project can continue to partner and collaborate with.

DoJ has also stipulated that project activities should avoid duplication of existing resources (between PCP initiatives) and/or of further resource development that might duplicate the future work/remit of the Victorian Responsible Gambling Foundation, due to be launched in 2012.

Project Setting:

This project will work across the EMR which includes the 7 local government areas (LGA) of Boroondara, Manningham, Whitehorse, Monash, Yarra Ranges, Maroondah and Knox. A particular focus will be placed on Monash LGA as they have been identified as a “hot spot” and a funding priority due to having the highest PG rates and losses within the EMR.

Funding Information:

Additional funds have been pulled together by the IEPCP and OEHCSA to implement this project. **IEPCP was allocated priority PCP funding by DoJ and the decision was made to pull both “base funding” payments (from IEPCP and OEHCSA) together and have a project worker sit with the IEPCP.** Therefore, all planning, project implementation, evaluation and reporting will be carried out by the IEPCP. OEHCSA will continue to provide input into this project through their involvement in the steering group.

Goal: To strengthen communities in the EMR so that they are less vulnerable to problem gambling			
	Status	Performance Indicators	Progress/Evaluation
<p>Objective 1 Build the <u>capacity</u> of health and community/education sector to engage in actions to reduce problem gambling related harm.</p>	2011-12	Number of actions to reduce problem gambling harm undertaken by PCP member agencies.	Review of how many problem gambling related projects of PCP member agencies occurred/implemented in 2011-12.
<p>Strategy 1.1 Support partner agencies to prioritise and plan interventions to reduce problem gambling related harm by providing/sharing relevant information and resources.</p>	2011-12	Problem Gambling identified as a focus area for action in organisational policies and strategic plans for partner agencies.	Collect feedback from PCP member agencies on their organisational policies and plans. Coordinate this activity with PCP IHP evaluation activities.
<p>Strategy 1.2 Partner with existing <u>local government</u> networks in order to increase their effectiveness in preventing and responding to gambling related harm in the community.</p>	2011-12	Membership and active participation of: <ul style="list-style-type: none"> • Local Government Working Group on Gambling (LGWGoG) • Eastern Region Gambling Group (ERGG) • Monash Responsible Gambling Taskforce (MRGT) 	Number of meetings held and attended.
<p>Strategy 1.3 Support workforce development activities to better equip and enable workers to identify, recognise and respond to problem gambling related harm.</p>	2011-12	-Number of problem gambling related training sessions. -Distribution of resources.	- Attendance records. - Distribution. - Evaluation of any training provided.

<p>Strategy 1.4 Work with local government networks to raise awareness of PG and ensure PG is included in all agendas of council departments.</p>	2011-12	An increased capacity for Council to incorporate the prevention of problem gambling into their policies and projects.	Signs of collaboration and a shift within council departments towards PG reduction.
<p>Objective 2 Increase the capacity of <u>Gamblers Help Services</u> to plan, implement and evaluate a variety of health promotion interventions.</p>	2011-12	Greater proportion of problem gambling initiatives delivered in partnership.	Collection of data and other signs and collaboration.
<p>Strategy 2.1 Meet regularly with GHE to consult on community education matters</p>	2011-12	Meetings held for planning joint activities, information sharing and support with health promotion interventions.	Number of formal and informal consultations with GHE.
<p>Strategy 2.2 To take opportunities to support and/or deliver initiatives in partnership with GHE to reduce the risk to priority populations, specifically International Students and young people (aged 15-24*).</p>	2011-12	Opportunities for collaboration identified through project networking, i.e. Responsible Gambling Awareness Week (May 2012).	Review of joint initiatives planned and implemented by the partnership of IEPCP and GHE.
<p>Objective 3 Address the <u>social determinants</u> of problem gambling by strengthening partnerships within the sector of the EMR, in order to address <u>social isolation</u>.</p>	2011-12	Number of new or member agencies participating in programs linked to the social determinants of problem gambling.	Survey of participants/member agencies to capture an understanding of knowledge of social determinants of problem gambling and if this knowledge is integrated into their work.
<p>Strategy 3.1 Identify opportunities to “add value” and/or increase sustainability to the 6 EMR projects. Background: <i>Funded by the community grants initiative 2010/2011 (as part of the problem gambling PCP initiative 2010-11).</i></p>	2011-12	Number of sustained initiatives continuing throughout 2011-12.	Evaluation of the community grants initiative projects.

<p>Strategy 3.2 Increase the understanding and commitment by PCP members and other agencies' to address the social determinants of problem gambling.</p>	2011-12	Number of PCP members identifying the social determinants of problem gambling as being a risk to health and wellbeing.	Evaluation of awareness by partners of the social determinants of problem gambling as a significant and regionally relevant public health issue.
<p>Strategy 3.3 Share evaluation impacts and learning from 6 EMR projects.</p>	2011-12	<ul style="list-style-type: none"> -Number of opportunities to information share/distribution of resources. -Provide feedback of EMR projects within meetings, i.e. ERRG, PCP PG Initiative meetings. 	Distribute findings to key stakeholders and PCP member agencies.
<p>Objective 4 Work with emerging population groups whom are at risk of problem gambling related harm in the EMR, specifically International students and young people (15-24).</p>	2011-12	<ul style="list-style-type: none"> - Number of opportunities to partner/reach emerging priority population groups. - A more informed sector re: priority population in EMR. 	Distribute research findings re. Priority populations, to key stakeholders and PCP member agencies.
<p>Strategy 4.1 Explore and initiate new partnerships between key stakeholders (GHE, LG, PCP) and educational institutions (i.e. Schools, Universities/TAFEs) in order to reach International students and young people to reduce problem gambling related harm.</p>	2011-12	Number of new partnerships explored (or established) within 2011-12.	Review of new collaborations. Through use of the Partnership Analysis Tool (VicHealth). Review of collaborative activities via the International Association of Public Participation (IAP2) Tool.
<p>Strategy 4.2 Plan joint initiatives with stakeholders to better reach both International students and young people.</p>	2011-12	<p>Number of joint initiatives undertaken throughout 2011-12.</p> <ul style="list-style-type: none"> - Non-traditional/new partner sharing relationship, re: Problem gambling and reducing problem gambling related harm. 	Records of new interventions or strategies adopted.

* For the purpose of this work plan, young people will be defined between the ages 15-24, as per the Australian Governments definition (as researched using <http://www.youth.gov.au/>).

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