

Sport & Health Social Marketing Strategy

STRATEGIC PLAN

FINAL

February 2015



Deadly
SPORT
GIPPSLAND



Sport & Health Social Marketing Strategy

GippSport has been funded by the Victorian Department of Health to develop and implement a social marketing strategy for Gippsland's Aboriginal community. This initiative forms part of the implementation of the Gippsland Koolin Balit Implementation Plan.

The projects focus is on encouraging positive lifestyle change among the Aboriginal community. It will leverage off the communities interest in sport and social media as the 'route' to the audience, but is primarily a health promotion social marketing initiative.

GippSport is one of nine Regional Sports Assemblies in Victoria and aims to support grassroots sport & recreation; encourage participation in active recreation; encourage access for all; create welcoming & inclusive clubs; and importantly promote health through sport.

The Sport and Health Social Marketing Strategy aims to encourage and support positive lifestyle change among the Aboriginal community by promoting sporting role models, activities and events using social media. The purpose of the program is to:

- Deliver a population based health promotion social marketing campaign reaching a large proportion of the Gippsland Aboriginal population,
- improve healthy lifestyle factors with related benefits to prevalence of chronic disease, cancer and other health conditions – and ultimately increased life expectancy,
- build the capacity of local sporting and health organisations to engage the Aboriginal community in health self-management and lifestyle modification through use of technology and social media
- and secure key Aboriginal community events that promote physical activity and participation in sport.

Key outcomes from the project include:

- Documented Social Marketing and Communication Strategic Plan outlining the key health messages and communication mechanisms to be used,
- Aboriginal sporting events across Gippsland become financially secure, have significant reach and engage a broad cross section of the Aboriginal community,
- Online media productions that promote health,
- Calendar of events,
- Increased online presence by health and sports organisations.

This strategic plan will outline the implementation plan for the length of the project and provide a framework for the project to work within. The specific details of the plan may be modified as the project develops, where lessons are learned and improvements can be made.

Acknowledgements

GippSport would like to acknowledge the support of the Project Control Group and Reference Group and other stakeholders for their assistance in developing the Sport & Health Social Marketing Strategy.

Context

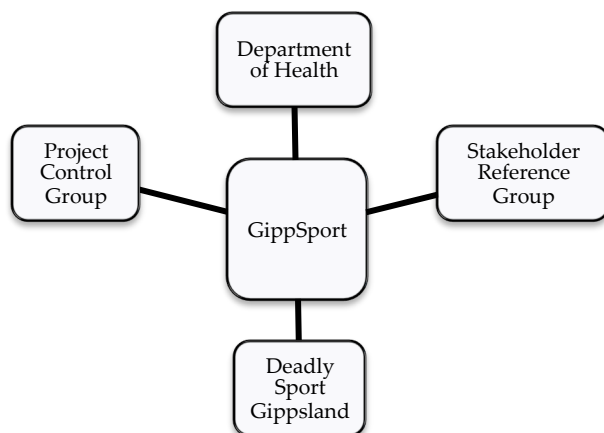
The Name 'Deadly Sport Gippsland'

Funded as the 'Sport & Health Social Marketing Strategy' it was acknowledged that the project would benefit from a new name that would engage and attract community members. Building on GippSport's 'Health through Sport' and the identified synergy of using the sporting environment to promote key health messages, 'Deadly Sport Gippsland' was created.

Organisational Structure

The following structure supports the operation of GippSport's Koolin Balit project.

- **Victorian Department of Health (DoH)** – As funding organisation manages Service Agreement and reporting processes
- **GippSport** – Ultimate responsible to DoH for management and implementation of the project
- **Project Control Group** – Responsible for determining Grant allocations and providing direction to GippSport on the Koolin Balit project. Membership includes Gippsland Medicare Local, DoH and GippSport
- **Stakeholder Reference Group** – Provides support and guidance to the project from across Gippsland and is to represent key stakeholders and the wider community.



Health Promotion

Health promotion not only embraces actions directed at strengthening the skills and capabilities of individuals, but also actions directed towards changing social, environmental, political and economic conditions to alleviate their impact on populations and individual health. This project will focus on individuals and the wider community. Efforts will be made to impact on individual behaviour change, whilst also supporting healthier environments for the wider community. In addition, the 'systems' within which these individuals live will be targeted through capacity building strategies designed to strengthen the key stakeholders and the wider community.

Project Needs Analysis

Victoria's Aboriginal population is young and growing. This is due to both a high birth rate and continued net migration from other states. There are an estimated 37,600 Aboriginal Victorians with almost half aged 18 or under (ABS 2010).

Nationwide, the life expectancy gap between Aboriginal and non-Aboriginal Australians is 9.7 years for women and 11.5 years for men. At the population level there is a significant gap between the health status of Victoria's Aboriginal population and the general population;

- **Tobacco use** by Aboriginal people in Victoria aged over 18 years is more than one and a half times the rate for non-aboriginal people
- **Alcohol-related harm** rates are higher for Aboriginal Victorians than the general population
- **Hospitalization** rates are one and a half times higher than for non-Aboriginal people
- **Potentially preventable hospitalization rates** are more than three times higher than for non-Aboriginal people
- **Birthweight:** the rate of low birth weight babies born to Aboriginal mothers in Victoria is approximately twice that of non-Aboriginal mothers
- **Oral health;** nationally, Aboriginal adults have on average, twice the amount of untreated tooth decay and higher rates of gum disease than non-Aboriginal adults

(Koolin Balit, Department Of Health, 2012)

This strategy is aligned with the Victorian Government strategic direction for Aboriginal Health 2012-2022, Koolin Balit. A number of the Koolin Balit priorities outlined in the key life stages, as well as the priority of addressing risk factors could be, in part, addressed through a social marketing strategy.

The Aboriginal community has a strong interest in sport and a number of the most significant regular events in the Aboriginal calendar of events are related to sport. In addition, Aboriginal Victorians are high users of mobile telephones and social media, with smart phones often the main device used for accessing the internet. The existence of strong connections within the relatively small but widely dispersed Gippsland Aboriginal community makes the use of social marketing as a vehicle to connect, an appropriate and relevant concept.

Target Populations for this Strategy

This project is aimed at the entire Aboriginal population throughout Gippsland, however target groups or 'segments' of the population have been identified and a tailor made social marketing campaign designed for each. This recognizes the variance in ages, gender, and family make-up (e.g. parents will be targeted in many of the campaigns designed to change children's behaviors). This approach acknowledges that people will access social media in different ways and be motivated to change in different ways.

The following population segments have been identified:

- Children (through their parents)
- Teenagers
- Middle age
- Parents (with a focus on mothers)

Community Elders may be engaged to convey key messages and to use their experience to guide and support the younger generations.

Children will not be a direct focus during 2014 and 2015, due to the concentration on social media and the recognised role parents play in growing healthy children. Children will benefit from many of the key messages around reducing harm to children from passive smoke and through family activities promoting increasing physical activity and consumption of fruit and vegetables.

Social Marketing

This project is focused on social marketing as the 'vehicle' to engage the target audience. Social Marketing uses current marketing techniques to positively influence health behavior. Social Marketing needs to be strategic, informed by research, consistently evaluated, refined and well-planned.

"Social marketing is the application of commercial marketing technologies to the analysis, planning, execution and evaluation of programs designed to influence the behavior of target audiences in order to improve the welfare of individuals and society" (World Health Organisation,2006).

Social marketing considers:

- Consumer Needs (Product) – What are the consumers' needs and wants?
- Cost (Price) – more than just price, there is a need to consider the cost of changing a health behavior, including time, travel, etc.
- Convenience (Place) – how easy is it to make the change? Can we change behavior easily?
- Communication (Promotion) – communication is two way and builds an interactive relationship with the consumer.

Content Marketing

Content marketing is the process of communicating with consumers without direct selling and significant interruption. The purpose is to attract and retain consumers by consistently creating and curating relevant and valuable content with the intention of changing or enhancing consumer behavior.

Content marketing is the technique of creating and distributing valuable, relevant and consistent content to attract and acquire a clearly defined audience – with the objective of driving profitable customer action. (Content Marketing Institute)

In the context of this project, sport provides the context in which to reach our target audience and engage them through stories. This will include human-interest features, sporting and community events, personal and team achievements.

Social Media

While Social Marketing is far greater than just social media, a large proportion of this project is focused at online communication structures. A recent survey by McNair Ingenuity Research has revealed that 60% of adult Indigenous Australians use Facebook on a daily basis as compared with 42% of Australians nationally, showing a clear predisposition to online social media.

While there are many social network channels, this project will focus on the two most popular; Facebook and YouTube, while building a presence on several others such as Twitter and Instagram (as deemed appropriate by project staff). The project also recognises the speed at which social trends change and will be adaptive if new technologies and trends arise during the project.

Quick Facts about Facebook:

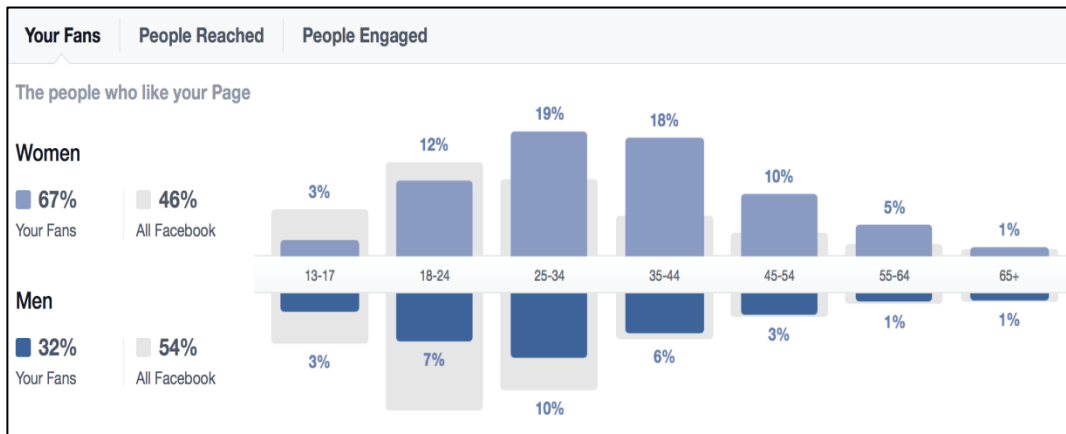
- There are 13.2 million Australian 'Facebookers'
- Facebook is the second most popular website in Australia (behind Google)
- Monthly time spent per person on Facebook smartphone app = 7hours 43 minutes
- Facebook accounts for 17% of all mobile usage
- Video posts received the greatest number of interactions from Facebook users

Quick Facts about YouTube:

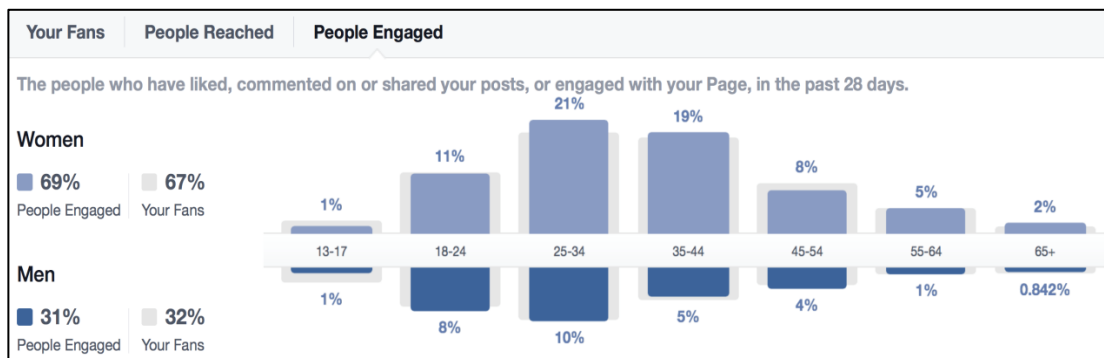
- YouTube has 11,538,000 users in Australia
- YouTube is the third most popular website in Australia (behind Google and Facebook)
- YouTube had an estimated 45,381,039 visits in Australia, week ending 26 April 2014
- 100 hours of video are uploaded to YouTube every minute
- Mobile makes up almost 40% of YouTube's global watch time
- YouTube accounts for 7% of all mobile usage
- Globally, online video traffic will be 55% of all consumer Internet traffic in 2016

Deadly Sport Gippsland – Facebook Usage

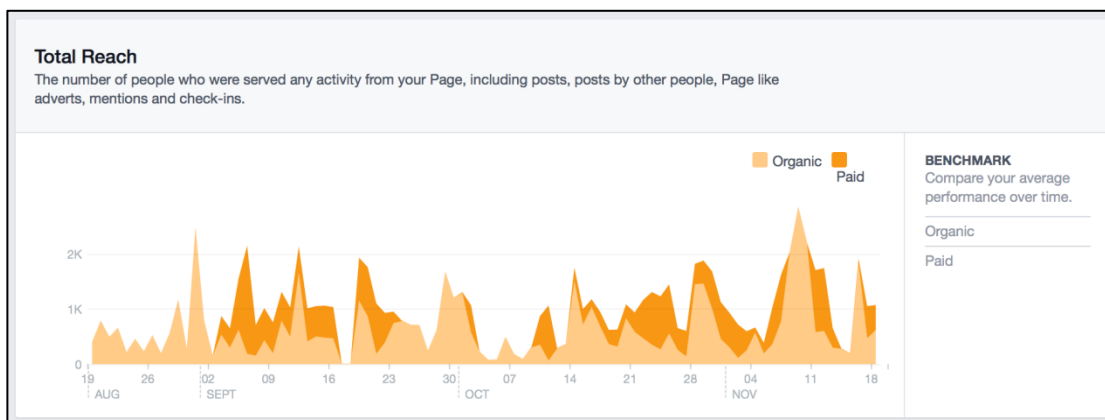
Deadly Sport Gippsland currently (20/11/2014) has 640 fans of which 67% are women and 32% men. The page has a much higher than average representation of women, particularly in the age bracket of 25 to 54 year olds.



While our reach and engagement has significantly varied over the last 3 months it is more in line with global averages, but again shows a strong opportunity to engage with women aged 25 to 54. In the 28 days prior to November 20 2014, 474 people have engaged with the page.



During this same period, the page has reached over 14,000 people (page impressions) and the graph below shows this trend over life of the Facebook page.



Sustainability and Legacy

A key priority of the Sport & Health Social Marketing Strategy is to build the capacity of Aboriginal Organisations to utilise Social Marketing in their activities, especially engaging with the community around health and well-being. During the project, staff will identify key opportunities to work with and support key stakeholders to develop policy and good practice in the use of social marketing. In addition, the project will develop instructional resources such as 'how to video's' to build the skills and capacity of other organisations to use social media. .

Initial meetings with the project reference group has highlighted the importance of getting key organisations from across Gippsland together to discuss sport and health initiative. It is anticipated that these organisations may continue to build on the project and leverage off it by including social marketing in their own projects, essentially building the ongoing sustainability of this initiative. Ideally a Gippsland wide network would continue beyond the length of this project. Additionally, there exists an opportunity to connect in with this social marketing strategy, strengthening their own work and providing some sustainability for this project in the longer term. There is however, an identified need to ensure a central point for the project through the provision of a skilled project team to 'bring it all together'.

Key stakeholders and the broader health promotion sector can share in the learnings from this project when the final evaluation will be made available. This will ensure that any future health promotion efforts targeted at the Aboriginal community can build on the work of this project.

Like any project aiming to change behaviours, there is recognition that this will not likely occur within the remaining 18 months of the project. Long term, embedded behaviours require long term efforts in order to improve. Quick wins will be possible; however this project is focussed on changing some of the most significant health issues of this time such as smoking, obesity, alcohol use. It would be unreasonable to expect these issues to be solved within this short term funded project, an ongoing commitment of funds to resource the project will be essential to the long term health behaviour change desired.

Methodology

The development of a Strategic Plan has been completed to provide direction and a strategic framework for the project staff. The plan has been broken down into three phases;

Phase 1 - 6 months (June 2014 - December 2014)

- Project planning and development
- Build following on main social media platforms
- Build content on website, YouTube, blogs and others
- Analyze early 'wins', what is working, what is not, SWOT analysis
- Build experience and expand on successful strategies
- Build partnerships with key stakeholders
- Build credibility and capacity to work with key stakeholders
- Development of strategic and evaluation plans

Phase 2 - 12 months (January 2015 - July 2016)

- Implementation of strategy
- Promote key health messages
- Build community and stakeholder capacity
- Provide training and resources in use of social media, video production and development of websites
- Expand content (continue to build content with more involvement from other organisations)
- Evaluation and modification of activities as a result of learnings

Phase 3 - 6 months (January 2016- July 2016)

- Evaluation and consolidation of the project
- Determine future priority areas like Alcohol that have not been targeted during this project
- Continue to support agencies to develop content and undertake social marketing activities
- Develop reference group into a sustainable Gippsland sport and health committee for the future

Phase 1- Project Planning & Development

The project commenced in August 2014 and this phase will be completed in December 2014. This strategy document was developed as a key part of this project planning phase along with the development of the evaluation plan. Staff have been learning how to utilise Social Media, have established branding and have used the time to establish a strong network throughout Gippsland with key stakeholders.

SWOT Project analysis

A SWOT analysis was undertaken in Oct 2014. The purpose of this process was to assess the introductory stages of the project with key staff and determine the impact of the introductory work being undertaken. It provided an opportunity to progress with strategies that appear to have worked and refine or dismiss those which do not appear to be 'sticking'. Information collected during the SWOT Included:

Strengths Identified:	Weaknesses Identified:
<ul style="list-style-type: none">• Funded by Department of Health, State Government backing• 2 year program funding• Strong Links with sporting clubs, SSA and Councils through GippSport• Two employed staff, not a reliance on volunteers• Evidence that social media works• Gippsland focus• Facebook interaction• Sports photos/videos are popular• Understanding of project is increasing• Networking in community is working well• Community acceptance (getting invited)• Stakeholder engagement with health promotion agencies• Despite obvious barriers- done a lot in a short amount of time• Opportunity to Experiment- getting to know what works• Research already completed- know what the problems are. Evidence based.	<ul style="list-style-type: none">• Hard to engage quickly with Aboriginal groups• Limited lead in time• Health conversations are hard in Community• People identifying as Aboriginal (not all linked in)• Some population segments are not engaged on social media• Limited marketing and advertising expertise• Funding for paid campaigns is minimal• Difficult to evaluate/ measure success• Need to develop a clear strategy to remain focused• There is a great deal of information/ opportunities which is difficult to filter/ prioritise

Opportunities Identified:

- Innovation – opportunity to try new ideas
- Gippsland wide focus
- Drawing communities together
- Strengthen work already being done to date
- Train sports clubs, volunteer organisations to be more inclusive
- Link into existing networks
- Reduce stigma/barriers around health issues
- Aiming for positive, gradual and realistic change - non judgmental
- Health benefits for individuals and community
- Capacity building of staff

Threats Identified:

- Changing social media environment
- Competing with other information on social media
- Short term project only
- Change in Government focus
- Staff leave
- Time to consult, not enough time to do it properly
- Competing with other messages- local, national, sport
- Don't want to preach/ turn people off
- Don't want to make people feel guilty
- The scope is huge, hard to know what to focus on
- Still learning what will work/ not work
- Overexposure on social media
- Amount of content in social media (everyone is doing it)- how to get your messages heard
- Hard to get health messages to be entertaining
- Privacy concerns
- Health messages are long term behavior change (hard to measure in short term project)
- Lots of people working in this 'space'
- Sensitivity of working with Community (number of difficult situations)
- Number / purpose/ targets of communication mechanisms- wide variety
- Capacity of target market is so different- preaching to the converted (messages are already known) as compared with individuals who require a lot of support.

Phase 2- Implementation

Phase 2 will be in place for 18 months from January 2015 until July 2016 and the focus will be on the implementation and delivery of key health messages. A variety of content and communication mechanisms will be utilised to implement the priority areas.

Priority Areas

- 1) **Nutrition & Oral Health**
- 2) **Tobacco**
- 3) **Prevention & Health Screening**
- 4) **Physical Activity**
- 5) **Alcohol** (To be implemented in 2016)

Each priority area will be spread across the implementation phase of the project. Where possible, focus months have been allocated to priority areas in line with external health promotion initiatives to maximise health messages.

The priority area tables below are provided as a framework with additional information included within the Gantt chart in the Appendix 3.

Further work will be completed in each priority area and developed into a monthly staff work plan and a template has been included in Appendix 4.

Each priority area will have a standard campaign developed and additional activities have been included within the priority table.

Standard campaign format will include;

- Health resource page on website (info & links)
- Weekly blog
- Weekly YouTube clip (story or infomercial)
- YouTube commercial (10-15 seconds in front of videos)
- Promo (3 seconds) on all YouTube clips (including past videos)
- Social Media posts (as per attached schedule)
 - ✍ Health Info & Call to Action
 - ✍ Tips & Link to Resources
 - ✍ Motivational prompts
- Podcasts (interviews, News etc.)
- Monthly Newsletter
- Recruitment of Champions / Ambassadors to assist promote health messages
 - Provide Merchandise with messages (Shirt, Bag, Hat, Drink Bottle etc.)
 - Guest Bloggers
 - Video Interviews
 - Weekly social media posts promoting messages

Priority 1- Nutrition & Oral Health

Poor nutrition is strongly linked to obesity, heart disease, type 2 diabetes, kidney disease and other conditions. Insufficient fruit and vegetable consumption alone accounts for 3.5% of the total burden of disease for Aboriginal Australians, 18% of the cardiovascular disease burden and 5% of the health gap (*Vos et. Al 2007, Koolin Balit 2012*). A diet high in sugar, refined carbohydrates, and saturated fat and salt, is associated in childhood with obesity and tooth decay. Poor dental health such as tooth decay can result in pain, infection, speech and language development as well as school attendance and performance with implications for self-esteem, employment and social wellbeing. Hospitalization rates in Victoria for dental-related treatment for Aboriginal children aged up to four years are approximately double those for non-Aboriginal children (*Productivity Commission 2009, Koolin Balit 2012*).

Expected impacts:

- Reduce rates of consumption of sugar sweetened drinks
- Improved food selection and preparation skills
- Increased consumption of fruits and vegetables
- Improve oral and nutritional health of Aboriginal children and increase physical activity
- Reduced consumption of energy dense foods

Objective	Improve the nutritional and oral health of children and adults through healthy eating and drinking		
Primary Message:	Eat Healthy, Choose Healthy		
Primary Hashtag:	#ChooseHealthy		
Key stakeholders:	<ul style="list-style-type: none"> • VicHealth – H30 Challenge • Primary Care Partnerships • Local Government • Community Health Centre's 		
Resources:	<ul style="list-style-type: none"> • Better Health Channel • Australian Dieticians • Rethink Sugary Drink campaign • Healthy Eating Advisory Service 		
Focus:	February, August & December		
Call to Action	Segments	Messages	Activities / Actions
1.1 Reduce sugary drinks & drink more water <i>Sign up for VicHealth's H30 Challenge</i>	<ul style="list-style-type: none"> • Children • Teenagers/ Young people • Middle Age 	<p>Aim for 8 glasses of water per day</p> <p>Sign up for H30 Challenge</p> <p>Provide information on sugar in Soft Drink etc.</p> <p>Promote Rethink Sugary Drinks Video</p>	<p>Sugar education activity at 2 events</p> <p>Award weekly prizes for participation in H30 Challenge and using the hash tag in Social Media - #ChooseHealthy</p> <p>Work with Ambassadors to promote messages</p>

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<p>1.2 Eat healthy:</p> <ul style="list-style-type: none"> - Increase fresh fruit and vegetable intake. - Decrease intake of sugars 	<p>Adult Women</p> <p>Mothers</p>	<p>Add one more fruit of vegetable and aim for the recommended serves of fruit and vegetables</p> <ul style="list-style-type: none"> - #5and2 <p>Promote online</p> <ul style="list-style-type: none"> - Healthy Diet - Cooking Healthy - Food Preparation - Shopping Healthy (How to read labels) <p>Food calories as related to minutes exercised</p> <p>Promote Healthy Recipes</p>	<p>Social Media Competitions using hash tag:</p> <ul style="list-style-type: none"> - Submit a Healthy Recipe - how many calories in food - benefits of fruit / vegetable <p>Produce videos with dieticians</p>
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Priority 2- Tobacco

Approximately one-third of the total burden of disease for all Victorians is attributable to risk factors, including lifestyle such as tobacco smoking, physical inactivity, alcohol consumption, poor diet, unsafe sex, illicit drug use and intimate partner violence (*Koolin Balit 2012*). As a community, Aboriginal people in Victoria have higher exposure to a range of risk factors than the population as a whole and have poorer health outcomes.

Tobacco was the leading cause of the burden of disease and injury for Aboriginal Australians in 2003, accounting for 12 per cent of the total burden and 20 per cent of all deaths. The reported daily and occasional smoking rate for Aboriginal adults in 2008 was 33 per cent compared to 19 per cent for non-Aboriginal adults.

Expected impacts:

- Reduce smoking
- Reduce children's exposure to passive smoking
- Reduce uptake of smoking, alcohol and other drugs
- Reduce the proportion of Aboriginal Adults who are smokers

Objective			
Primary Message:	Reduce your risks and live longer		
Primary Hashtag:	#BeSmokeFree		
Key stakeholders:	<ul style="list-style-type: none"> • Aboriginal Quitline • LEAHA – Gippsland Tobacco Action & Healthy Lifestyle Team • GEGAC – Gippsland and East Gippsland Aboriginal Co-operative Drug and Alcohol / Tobacco Cessation Workers • Community Health Centre's 		
Resources:	<ul style="list-style-type: none"> • Quit (quit.org.au) 		
Focus:	January, May & June 2015		
Call to Action	Segments	Messages	Activities/ Actions
2.1 Cut back and quit. <i>Call the Aboriginal Quitline</i>	<ul style="list-style-type: none"> • Teenagers • Middle Age 	Quitting - It's ok to be a quitter - give quitting a go - Every time you quit is a step closer to giving up for life Health Risks - Smoking Kills - Harm - Effects of smoking while pregnant	Trial online support Group to quit smoking (partner with QUIT or local agency) Support QUIT 'Pledge Campaign in January 2014 Interview with Aboriginal Quitline– 'What happens when I Phone' Follow Smokers /

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			<p>Ambassadors Journey</p> <p>Build on use of LEAHA content as per MOU. Promote Referrals to LEAHA.</p> <p>Social Media Competitions using #BeSmokeFree</p> <p>Work with Ambassadors to promote messages</p>
<p>2.2 Don't smoke around children</p>	<ul style="list-style-type: none"> • Teenagers • Middle Age 	<p>Protect children from passive smoke</p> <p>Kids in House don't smoke in House</p> <p>Kids in Car, Don't smoke in Car</p>	<p>Lung Capacity activities at 2 events with partners.</p>
<p>2.3 Support your mob to quit.</p> <p><i>Shift social attitudes towards actively supporting people quitting.</i></p>	<ul style="list-style-type: none"> • Teenagers • Middle Age 	<p>Support our mob to quit</p> <ul style="list-style-type: none"> - Don't quit the quitters - - It's ok to be a quitter 	<p>Develop a sign for events –</p> <p>“1000 likes and my ??? quits smoking”</p> <p>Work with Ambassadors to promote messages</p>

Priority 3 – Prevention & Health Screening

Access to screening programs can help to prevent and identify issues early on so that appropriate action can be taken. The proportion of Aboriginal children receiving key age and stage visits to maternal and child health screening is improving, but the gap remains and a great emphasis on prevention and screening is required

Expected impacts:

- Increase the rate of 715 Health Checks undertaken by Aboriginal community
- Increase Life expectancy through early identification
- Identify those at risk of Chronic Disease
- Decrease STI Rates

Objective	Increased participation in health screening programs		
Primary Message:	Get a 715 Health Check		
Primary Hashtag:	#GetChecked		
Key stakeholders:	Gippsland Medicare Local General Practitioners Organisations delivering Pitstops ACCHOS Event organisers Community Health Centre's		
Resources:			
Focus:	March, September & October 2015		
Call to Action	Segments	Messages	Activities/ Actions
3.1 Don't walk past, get a pit stop check Get a Pit Stop Check	<ul style="list-style-type: none"> • Teenagers / Young adults • Middle age 	<p>Any check is better than none, but don't stop here – get a 715</p> <p>Promote Pit Sops at Events</p>	<p>Support and promote Pit Stop at events</p> <p>Support the development of a referral system to 715 checks (access phone, email or do a sign-up 715 etc).</p>
3.2 Get Checked – book your 715 with GP	<ul style="list-style-type: none"> • Children (Parents) • Teenagers / Young Adults • Middle Age / Elders 	<p>What is a 715?</p> <p>Have you had a 715?</p> <p>Get a 715 regardless of Pit Stop results.</p> <p>Go as a Family</p>	<p>Facilitate Meeting with Key Stakeholders</p> <p>Facilitate campaign on nominating someone for a health check – 'Dob in a mate', 'Nominate 4' etc.</p> <p>Video Champion /</p>

		<p>Promote</p> <ul style="list-style-type: none"> - Free - Available all GP's - Where incentives are available - Need for CtG scripts <p>Best way to get family history good, Risk Behavior, prevention of chronic disease, mental illness.</p> <p>Give a healthy start to your children. "Grow your kids strong"</p>	<p>Ambassador's getting checks:</p> <ul style="list-style-type: none"> - Light hearted / fun - Knock on a door and challenge them to get their check <p>Social Media Campaign – get a photo with GP and nominate 4 other to get a 715.</p> <p>VIDEO - Demystify what a 715 Health Check is – "Not as scary as you think"</p> <p>Work with Ambassadors to promote messages</p>
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Priority 4 – Physical Activity

Insufficient physical activity increases the risk of cardiovascular disease along with many other conditions. Being physically active improves mental and musculoskeletal health and reduces the chances of being overweight and having high blood pressure or high blood cholesterol (AIHW 2004a).

Physical inactivity was the third leading cause of the burden of illness and disease for Aboriginal Australians in 2003, accounting for 8% of the total burden and 12% of all deaths. In Victoria the proportion of Aboriginal adults who have healthy levels of physical activity is slightly lower than that for non-Aboriginal adults (Department of Health 2011e, Koolin Balit 2012)

Expected impacts:

Reduce the proportion of Aboriginal adults who are obese

Objective	Increased participation in health screening programs		
Primary Message:	Be Active 30 minutes a day		
Primary Hashtag:	#GetActiveFor30		
Key stakeholders:	<ul style="list-style-type: none"> • Warreeny • Djillay Ngalu • Budjeri Napan • Sport & Recreation Victoria • State Sporting Associations • GippSport / Local Clubs • Local Government • Health Service • Leisure Centres/ Facilities • Event / Program organisers 		
Resources:	<ul style="list-style-type: none"> • Australian Sports Commission • Better Health Channel • Premiers Active April • Walktober 		
Focus:	April, July, October & November 2015		
Call to Action	Segments	Messages	Activities/ Actions
4.1 Get out, Get Active - Be active on your own - Get Active with a mate	<ul style="list-style-type: none"> • Teenagers/ Young adults • Middle age 	Aim for 30 minutes a day, every day Some is better than none. Start small and build up Walk while you watch – walk	Promote walking groups and activities in calendar Encourage event organisers to have walking groups at events, e.g. Carnivals Support Premiers Active April (<i>April</i>)

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		<p>around oval etc.</p> <p>Walk to.... - School - The Shops</p> <p>Walk, don't drive Swap car for a walk</p> <p>Visit the Park</p> <p>Be Active while your kids play - playgrounds</p> <p>Get active with a friend. Make a commitment together</p>	<p>Focus)</p> <p>Support and promote Walktober (October)</p> <p>Social media Competition – Set your goal to Walk 50, 75, 100 or 200 km in the month. Post your achievements each day using hash tag.</p> <p>Promote use of Map my Walk / Run App to promote and measure results.</p> <p>Work with Ambassadors to promote messages</p>
<p>4.2 Join up - Sport - Gym - Dance etc.)</p>		<p>Get Active with Sport</p> <p>Promote Inclusive Clubs & Activities #deadlysportfriendly</p>	<p>Identify current players, playing different Sports and use as role models with call to action to join a club.</p> <p>Promote come'n'try and sign-up days.</p> <p>Profile of Deadly Sports Clubs (Inclusive / Healthy Sporting Environments)</p> <p>Trial comic video of how you join a club</p> <p>Develop list of Grants / Sporting Subsidies available to help people join a club (Annual)</p>

Priority 5 – Alcohol

In relation to alcohol, Aboriginal people are less likely to drink alcohol than non-Aboriginal Australians, but of those who do drink, a higher proportion do so at risky levels (*Koolin Balit 2012*).

Addressing alcohol related issues is a complex task. It will require a comprehensive and targeted approach and a plan similar to that of the other priority health issues listed in this strategy. The following plan has been developed with the intention of implementing it in another stage of the project in 2016. Further information will be included into the Strategic Plan towards the end of the project, utilizing the lessons learned.

Expected impacts:

- Reduce uptake of smoking, alcohol and other drugs
- Reduce the proportion of Aboriginal Victorians drinking alcohol at risky levels

Objective	Reduce the number drinking at risky levels		
Primary Message:	Say no to binge drinking		
Primary Hashtag:	#BoozeLess #BeGrogWise #LoseTheBooze #CutBackYourGrog #RespectYourself #MakeSafeChoices		
Key stakeholders	<ul style="list-style-type: none"> • Alcohol and Drug Services 		
Call to Actions	Segments	Key messages / strategies	Additional Activities/ Actions
5.1 Drink in moderation – Know Your Limits	<ul style="list-style-type: none"> • Teenagers/ Young adults • Middle age 		
5.2 Behaviour? Risks? Be responsible.	<ul style="list-style-type: none"> • Teenagers/ Young adults • Middle age 		

Capacity Building & Recognition

In addition to the Koolin Balit Priority Areas, capacity building strategies have been developed. These can be actioned throughout the project in conjunction with work already being undertaken by the project and its key stakeholders.

Objective	SUPPORT STRATEGIES		
Support Strategy	Target Groups	Objectives	Additional Activities/ Actions
1. Building capacity of the Aboriginal community in social marketing	Event organisers Community Organisations Targeted groups (young people / schools etc.)	<ul style="list-style-type: none"> • Increase use of Social Marketing in Health Promotion / Events • Build community skills in Social Media, including Facebook, twitter, Instagram and YouTube and to include activities such as competitions, making videos, targeted advertising. • Encourage agencies to nominate a dedicate worker / volunteer to undertake social marketing activities 	<ul style="list-style-type: none"> • Series of 'How to' YouTube Clips • Resource Fact Sheets • One-to-one organisation Support • Small Group Training Sessions • Video competitions • Freelance video production • Investigate issue of lack of equipment resources in organisations / volunteer groups • Identify champions in organisations • Investigate potential Sports Journalists / Roving Reporters across Gippsland and provide training / mentoring. • Work with Sports Committees to develop skills and resources <ul style="list-style-type: none"> - Training - Roles - Mentoring <p>Conduct training at Cape Conan Leadership camp</p>
2. Build sustainable	Event Organisers	<ul style="list-style-type: none"> • Increase the 	<ul style="list-style-type: none"> • Financial support

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<p>Aboriginal Sporting Events</p>	<p>(primary) Aboriginal Sports Committees Aboriginal Health Organisations TeamUp</p>	<p>sustainability of Aboriginal community events</p> <ul style="list-style-type: none"> • Increase collaboration across Gippsland of event organisers • Ensure health and well-being messages are included in events • Build capacity of event organisers to generate social media content and promotion • Increase the profile of events • Increase attendance • Funding / Sponsorship opportunities 	<p>through the Aboriginal Sport and Health Funding Program</p> <ul style="list-style-type: none"> • Directly promote events through social marketing and content development • Provision of a Gippsland wide calendar of events • Include Event Organisers and Aboriginal Sports Committees as Reference Group members • Build capacity of event organisers to deliver own social marketing campaign • Resource Guides • How to' Video's • One-to-One Support
<p>3. Promote welcome and inclusive clubs and sporting activities/ Reduce Racism in Sport</p> <p>HashTag - #DeadlySportFriendly</p>	<p>General Community GippSport (HSE Program)</p>	<ul style="list-style-type: none"> • Increase number of inclusive clubs • Promote clubs and facilities that are inclusive and providing opportunities for Aboriginal community • Acknowledge 'champions' at clubs • Promote 'Racism. It stops with Me' Campaign 	<ul style="list-style-type: none"> • Profile Clubs and Champions in Clubs in YouTube Clips • Actively look for ways to acknowledge good practice • Support the role of Warreeny and other Sporting Committees to work with clubs • Focus on individuals and how they have benefited (health) through participation in clubs • Join Racism Stops with me campaign
<p>4. Raise the Profile of Aboriginal Athletes</p>	<p>General Community Gippstar Awards Local Media</p>	<ul style="list-style-type: none"> • Increase the positive profile of Aboriginal community • Identify potential role models 	<ul style="list-style-type: none"> • Feature Sports people in YouTube Clips • Actively look for ways to acknowledge

			achievement <ul style="list-style-type: none"> • Actively Nominate people for Gippsstar Awards. • Feature Acknowledgements in Newsletter
5. Advocate on behalf of Aboriginal groups	Gippsland	<ul style="list-style-type: none"> • Contribute to policy development to bring about formal change • Provide information and a voice on industry networks 	<ul style="list-style-type: none"> • Contribute to policy development • Attend relevant networks and advocate

Phase 3- Evaluation & Consolidation

There will be an ongoing rolling evaluation and review process throughout the life of this project. It is anticipated that the final 6 months of this project (January 2016 - June 2016) will focus on final evaluation analysis and reporting. An Evaluation Plan has been developed as a separate document to this strategy document.

The development of this Strategic Plan has been challenging as there are many priority areas to consider and it is not possible to do them all in only two years. You will see that the Alcohol priority for example has been identified as a key area but something that will need to be considered in the future as resources are available.

The Strategic Plan has considered on going sustainability as a challenge. The intention is to support key stakeholders to begin using social marketing themselves and continue to extend the health messages created throughout this initiative. It will likely be necessary to provide an ongoing platform and central delivery point through ongoing provision of funding to this project however.

The issues to be addressed in this initiative are complex and interconnected. The short timeframe will be challenging in terms of embedding the desired behavior modifications throughout the community. Extending the project beyond 2015 will improve the likelihood of reaching the whole Gippsland Aboriginal community, embedding key health messages and changing behaviors in the long term.

Opportunities to extend this project

Based on the early success of this project in engaging the community, the outcomes may warrant further funding and an extension to the funded time period. This extension would increase the likelihood of sustained behavior change, key stakeholders ability to embed social marketing techniques into their own business and the capacity to reach a wider population throughout Gippsland.

This project has the potential to begin the stages of behavior change within the community, however long term behavior change addressing complex issues such as obesity, smoking and oral health will require ongoing funding and a commitment to extend the outcomes of this project beyond the short timeframes. Capacity building strategies will enhance the ability of key stakeholders to embed social marketing techniques into their own businesses and create a new platform for engaging with the community.

There will be a concerted effort by the project team to develop tools and processes to assist other organisations to implement their own social marketing strategies. The extension of this project would enable this capacity building effort to extend further throughout Gippsland and potentially transfer this model to other regions of Australia. There are plans in place to address another series of priority health issues (including alcohol related issues), that due to the limited timeframe cannot be addressed in this project.

APPENDIX

1. Direct Communication Mechanisms

The aim of this table is to outline the range of communication mechanisms available and how they will apply in this project within the detailed work plans.

	Type	Audience	Measurement of Success/ Reach
1	Attendance at Aboriginal Groups Meetings i.e. Warreeeny, Budjeri Napan etc.	Health workers, PCP(Primary Care Partnership), Justice, Educations, GML (Gippsland Medicare Local), Health service's, Sport & Recreation Victoria, Not often community	Sharing of information, chain marketing, they have well developed networks, relationship development, partnership, enhance/ build on key messages, enhance outcomes, promoting other agencies as they have limited resources, gives content to Deadly Sport (stories, contacts, building knowledge), Hard to measure reach to community (numbers of their membership)
2	Formal correspondence with Health Agencies/ Service providers	Launch, could do letters-introduction, meet with key staff (could do on a regular basis)	Formal communication doesn't always go to the right people, builds awareness, political importance
3	Aboriginal Sporting Event Calendar	Central database for Aboriginal sporting events. Encourage sharing of information across regions.	Has started will increase when people know about it. Hits on calendar/ attendance at events, how long they stay on calendar (how did they know about it), events not on calendar,
4	Newspaper/ Media Coverage	No advertisements Media releases- no target number Little bit of coverage so far, could share blog with paper, help groups to use media (improve exposure)	Lots of papers, cost, project is about social marketing, evidence that target audience is through Facebook, unknown if community reading local papers and which ones, opportunity to utilise Koori Mail (not much about Gippsland)
5	Deadly Sport Gippsland Website	Everyone involved with project. Important place to learn about the project (providing detailed/ background information). Key place for calendar. Storing of information.	Visits to calendar, look up from GippSport newsletter, hits on site, time on site, opens, feedback about site, links to site from other websites (referrals), engagement on site (on

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			pages), like blogs/ pages,
6	Deadly Sport Facebook Posts Likes Sharing Comments	Shorter messages more effective. Everyone. Target audience is Aboriginal Community in Gippsland Effectiveness of Paid ads	Challenge is the quality of the post. Easy to manage engagement but need content that is relevant/ health related. (not just photos). Likes reflect engagement. Views = reach and likes/ shares= engagement. Behaviour types affect use of Facebook (lots of observers)
7	Blogs (written)	Can read the health message without identifying themselves. Target is everyone, easy to read, simple language, personal view (human connection), don't want to preach, relatable, not judgmental	Call to action, strong links to do something/ referral, Resources, helpful websites (try to measure)
8	Podcast (voice)	More sports focused, minutes of the meeting, provides quick turnaround, listen in cars	People listening, feedback, call to action, small adverts, regular conversations, range of information provided
9	YouTube (video clips)	Case studies, motivational messages, demonstration, instructions, demystifying health information, competitions for adverts/ health messages, run a campaign using a health message (like ice bucket challenge), nominate people	Numbers of people watching, comments, people wanting to participate, Balance between sport and health message
10	Staff Attendance at Events	Increase profile of project, content development (photos), YouTube, meet people, merchandise with campaign messages, learn about opportunities, ensure health messages are provided (as funded)	Hits (photos and blogs) after event, behavior change observation's, increased networking opportunities, observation of evidence of health messages, number of events attended
11	Website referral	Council, Health Agencies, SSA, Sporting Clubs, Health Services, health info net	Measurement of referrals, content, number of sites referring,
12	Participation at events	General Community, Sports Clubs,	Number of events where assistance is provided, how participation changes, level of promotion, effectiveness of promotion, event organizer feedback about how event has changed
13	Policy Development	Use of social media, inclusive clubs, health agencies. Sports Clubs, SSA,	Numbers of policy, impact of policy

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		GippSport staff	
14	Grants Program	Aboriginal organisations	Number of events assisted, number of organisations applying, range and reach of events, innovation, content driven as a result, included health messages
15	Competitions	Build engagement/ buy in. rewarded for getting involved, building connection with site, feel good, evaluation tool for health related messages	Comments, engagement
16	Twitter	Not sure if target audience is using Twitter yet. Maybe just agencies. Shouldn't be the same message, use in different ways	Hits, re-tweets, favorites
17	Instagram	Occasional photos. General Community for announcements, event promotion	Likes, creative content being developed
18	Community owned channels and networks Including Budjeri Napan, Warreeny, Djillay Ngalu, local media, community newsletters and email lists	Audience/ Membership of the organisations, General Community for newspaper articles	Re-posting and sharing of information via their social media sites and email, increased number of Deadly Sport followers as a result of accessing membership, coverage in local media. Increased profile of the Deadly Sport program. The increased % of health promotion material

Primary Focus for Each Month

January – Tobacco (Quit Pledge)

February - Nutrition (Dine in for Diabetes Day) – H30Challenge

March – Prevention & Screening (video on demystifying 715 Health Check) - Screening @ Football / Netball Carnival

April – Physical Activity – (Active April)

May – Tobacco (Online Support Group)

June – Tobacco / Screening (Cancer)

July – Physical Activity

August – Nutrition

September - Prevention & Screening (Prostrate & Childhood Cancer) - 715

October – Prevention & Screening (Breast Cancer), Physical Activity (Walktober)

November – Physical Activity

December – Nutrition

January – Alcohol

February – Prevention & Screening / Alcohol

March – Physical Activity

April – Alcohol

May – Tobacco

June – Nutrition

4. Example Monthly Work Plan template

Monthly Plan _____ (Month)

Theme:

Key Messages:

	WEEK 1	WEEK 2	WEEK 3	WEEK 4
Weekly Focuses				
YouTube Promo				
YouTube Commercial				
YouTube Story				
YouTube Other				
Events				
Health Days				
Newsletter Theme				
Campaign Activities				
1.				
2.				
3.				
4.				
5.				

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5. Weekly Facebook Schedule

- Posts can be scheduled (can set aside once a week to do most posts)
- Theme and Focus should be followed in each post, where possible
- Event Day promotions, including photographs may take precedence over regular posts

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7.30 – 9.00am	What's on this week? - Use a local photo - Link to Calendar - only post if something on (Karina)			Call to Health Action Join, sign up etc (David).		What's on this weekend? (David)	
12.00 – 4.30pm		Sports Message / Results (David)	Health Blog – Tip 1 Use simple Photo if possible (Karina)		Sports Podcast – News, Results or Interview (David)	Health Blog – Tip 3 Use simple Photo if possible (Karina)	
5.30 – 9.00pm	Call to Health Action Join, sign up etc (Karina).	Weekly Health Blog Advertising Boost for 3 days - \$8 (Karina)	VIDEO Post Advertising boost for 3 days - \$8 (David)	Health Blog – Tip 2 Use simple Photo if possible (Karina)			Share your Sporting results with us.... (David)

NOTES

- 1) A more complex schedule was trialed in 2014, but it was found that post reach was reduced due to too many posts.
- 2) Schedule allows for space for other content such as events, photo's or shares from other pages
- 3) Posts promoting the calendar will be swapped for regular paid advertising promoting this
- 4) Content will not be reposted and will be covered through advertng boosts.

6. References

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