

VicHealth Metro ACTIVE evaluation

Final report

March 2008

Participation and equity for health

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Megan Kerr, from VicHealth, helped guide the evaluation and we acknowledge her contribution.



Evaluation Team

Wendy Hodge and Margaret Thomas
Level 4, 352 Kent St, Sydney
PO Box 1167
Queen Victoria Building NSW 1230
tel 02 9373 9900
www.artd.com.au

Executive summary

This report presents the findings of the Evaluation of the Metro ACTIVE Demonstration Grants Program from 2005 to 2007. The Metro ACTIVE Program is intended to influence local governments to adopt an integrated planning approach to support residents to be physically active.

VicHealth funded six councils under a two-level funding model, with councils receiving between \$72,000 and \$140,000 funding for the two years. The funded councils are not identified in this report, but are referred to as Councils A–F.

The evaluation

The evaluation used mixed methods to collect a range of information:

- in-depth face-to-face qualitative interviews with a total of 82 key informants in funded councils. Sixty-seven informants were interviewed in June 2006, and 50 informants at the end of the funding period, May 2007. Thirty-seven informants were interviewed at both these times. The informants comprised council officers from across council departments and the council hierarchy, elected members of council, external partners and the Project Team
- document analysis of project submissions/ progress reports/ final reports and key council plans
- email survey of 189 members of VicHealth Local Government Physical Activity Network. The survey had a 19% response rate
- observation of VicHealth-facilitated Metro ACTIVE Cluster Meetings.

Key findings

Demonstration grants are a useful tool for encouraging local government to take up an integrated planning approach for physical activity.

All the projects made some progress towards strengthening council's capacity in one or more of the key areas: workforce development, resource allocation and organisational change. Two of the projects brought about changes to council planning processes or organisational structures and systems, and it is likely that these councils will adopt some form of integrated planning for physical activity in the future. All projects increased council officers' knowledge about the broader role of local government in supporting physical activity, and the application of integrated planning approaches.

The extent to which projects achieved the goals of the Metro ACTIVE Program depended on critical contextual and implementation factors. Where conditions were optimal – that is, where there was both a supportive organisational context, and necessary implementation success factors in place – projects achieved the most gains. Where some of these critical success factors were missing, the projects achieved less.

The culture of the council was a critical contextual factor. Without a supportive culture, the projects found it difficult to advance Metro ACTIVE objectives past workforce development. Where coordinated planning or joint activities were the norm within council, or there was CEO commitment to integrated planning principles, the projects flourished. The more sophisticated the understanding and application of integrated planning, the easier it was to introduce the idea to apply this approach to encouraging people to be active. A practical demonstration of the concept that exemplified the principles of integrated planning was also critical to explaining the idea.

Another aspect of council culture, the organisational climate, was an important contextual factor. In councils where officers were under stress and there was evidence of internal conflicts, it was more difficult to advance the projects.

The size of the council was also part of the context: the smaller the council, the easier it is to develop relationships outside an officer's own area of responsibility.

The VicHealth funding was a critical contextual factor, particularly because it was not tied to council making a contribution. The funding provided resources for councils to explore the approach, and in the successful projects to fast-track some features essential to its adoption. The funding also gave the idea a high profile across council and ensured support from senior executives for collaborative partnerships.

A number of implementation success factors also emerged. The quality of leadership provided by the project team was important. Aspects of leadership that meant success was more likely were: having the right set of skills (strategic thinking, networking, initiative) and being supported by senior management in the lead unit.

Being well located within the council's operations was also a success factor. Those projects located in sections with a direct planning role, or where a close relationship existed with the section of council with this role, had a greater chance of success. The location within the council hierarchy was linked to the status of the lead unit, and the higher the status, the easier it was to engage others in council.

Another key implementation success factor was using strategies to promote the project and explain its objectives across council. All the projects that were successful established strong internal partnerships, which led to successful collaboration on joint activities and to the emergence of champions for the project in other parts of council.

Two-level funding model

The two-level funding model was not a useful way of funding projects.

The evaluation showed that one of the assumptions behind the funding model was fundamentally correct: that is, organisational planning culture is a powerful predictor of councils' readiness to adopt the Metro ACTIVE approach for encouraging people to be more physically active. However, the funding model is too simplistic and did not take into account other predictors of success, such as the way integrated planning is understood and applied in councils, council planning priorities and where the project was placed within the council structure.

In addition, the related assumption for Model 1 funding was flawed. Where there is weak existing organisational capacity for integrated planning, project-based funding at the officer level is unlikely to be able to drive substantive organisation-wide change. This was particularly problematic in cases where projects were receiving the lower level of funding, as it meant that the project officers could only devote part of their time to the project. Informants described organisational change as taking many years to achieve, and needing to be driven by the executive leadership.

The assessment processes used to assess integrated planning capacity were inadequate for a number of reasons. There is no one understanding of integrated planning in local government, and it appears that council applicants had varying frameworks in mind when they classified their existing capacity.

Potential for replicating successful approaches

Although there was no one ideal approach identified, there is potential for replicating successful strategies in other councils.

There were a number of capacity-building strategies that were fairly successful across different council contexts, and which are practical and feasible to implement in a variety of organisational contexts.

These strategies are:

- staff training in integrated planning
- high-level forums to promote the concept and engage partners
- use of cross-council reference groups
- audits of the physical and social infrastructure, or audits of council plans and policies.

However, future projects must take the context of the council into account when deciding which of these strategies to use and how they are to be implemented.

Recommendations

The success of the Metro ACTIVE Program merits consideration of expanding the demonstration grants program to other councils. If the program is expanded, we recommend that VicHealth:

1. Fund projects where the existing council context is favourable. Specifically, where councils can demonstrate a commitment to cross-council ways of working: that is, coordinated planning or joint activities are the norm or there is senior executive commitment to integrated planning principles.
2. Develop a new funding model that provides sufficient funds for the employment of a full-time project officer, and for evaluation activities.
3. Review and revise funding assessment processes so that they are better able to identify the necessary council context. These tools could consider including markers of organisational capacity, such as the existence of formal high-level structures supporting integrated planning: for example, cross-functional teams and principles imbedded in strategic planning guidelines.
4. Require that funded projects be located in units with a planning role or where a close relationship with a unit with this role can be demonstrated.
5. Require projects to be focused on capacity building within council, including partnerships across council to achieve objectives and demonstrate legitimate reasons for these partnerships.

1 The Metro ACTIVE program

Metro ACTIVE is a demonstration grants program designed to strengthen the capacity of metropolitan local governments to adopt a whole-of-government approach to planning for physical activity. It is part of a broader VicHealth initiative – Participation in Community Sport and Active Recreation – which aims to increase the health of Victorians by increasing the level of physical activity. Regular physical activity plays an important role (second only to reduction in tobacco smoking) in preventing chronic disease among Victorian residents.

1.1 The role of local government

The Metro ACTIVE Program recognises the important role local councils play in providing local environments that support participation in physical activity by all members of the community. Local government can affect the health and wellbeing of its residents through built, social, economic and natural environments. These contexts (the ‘four environments for health’) provide many opportunities for local council to influence the health and wellbeing of its residents.

1.2 Objectives of Metro ACTIVE

The objectives of Metro ACTIVE are to:

- strengthen the capacity of local government in metropolitan Victoria to adopt and apply an integrated planning approach to increase participation in physical activity through community sport and active recreation
- strengthen local government authorities’ leadership in working with metropolitan communities to increase participation in physical activity
- empower communities in the decision-making process for increasing participation in physical activity
- engage people who have least access to opportunities for participation in physical activity
- increase opportunities for those who are least active or at increased risk of inactivity as a result of social or economic disadvantage.

The major assumptions underlying the Metro ACTIVE Program in relation to local government included:

- local government has a key role in improving local access to physical activity
- sustainable access to active choices can be achieved by reducing systemic and infrastructure barriers in local government
- targeting local government areas with the lowest Socio-Economic Index For Areas (SEIFAs) to reduce the systemic and infrastructure barriers would reduce health inequalities.

1.3 Program components

The Metro ACTIVE Program consists of four components:

1. Specific project funding for selected councils under one of two funding models
2. Workshops to educate key council staff about barriers and motivators for physical activity, and on integrated planning principles and practice. These workshops use the framework from the *Leading the Way* document to describe integrated planning
3. Cluster meetings for funded councils as a forum to exchange ideas and improve practice, facilitated by VicHealth
4. Statewide Physical Activity Network. The Network is funded by VicHealth and facilitated by Kinect Australia.

1.3.1 Demonstration projects

VicHealth funded six council projects for two years (June 2005 to June 2007) under two models, intended to reflect the councils' organisational readiness to use integrated planning. The funded councils are not identified in this report but are referred to as Councils A-F.

Three of the projects were funded under each of the two models:

- Model 1 - required the project to work within council for the first year to increase organisational capacity, and then expand to working with other agencies in the second year
- Model 2 - required the project to work in partnerships with other agencies in both years. Councils funded under this model had demonstrated in their applications an existing approach to integrated planning.

Table 1.1 shows which councils were funded under each model, and the amount of annual project funding received. Two council projects, Council C and Council F, requested and received considerably less funding than the other projects

Table 1.1: Funding models and funding amounts

Model 1		Model 2	
Council	\$ 2-year Funding	Council	\$ 2-year Funding
Council A	\$130,000	Council D	\$140,000
Council B	\$140,000	Council E	\$140,000
Council C	\$72,000	Council F	\$97,000

2 Evaluation framework and methodology

This section outlines the evaluation framework, and the methods used to collect evaluation data.

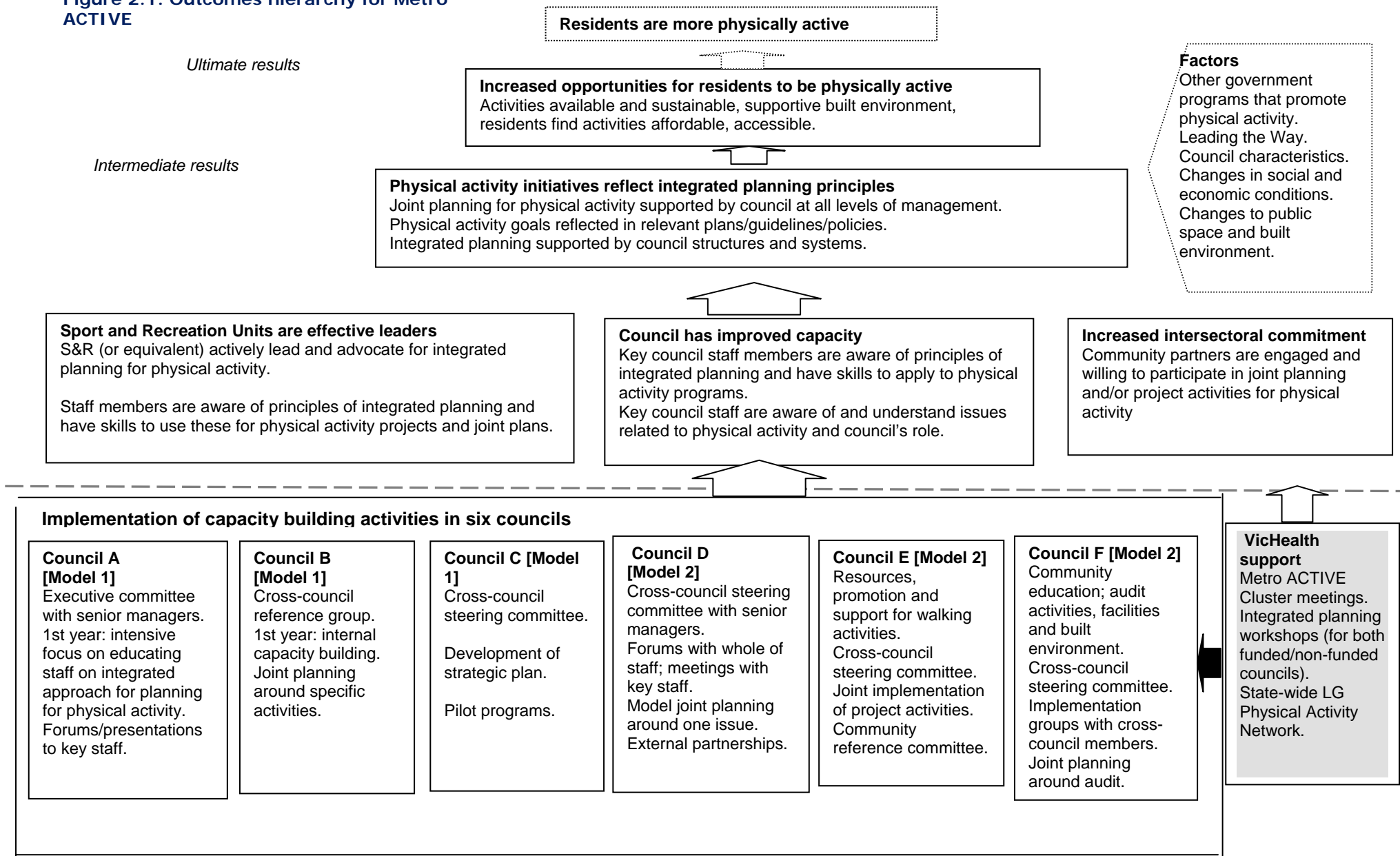
In the initial stage, ARTD developed an evaluation framework that set out the methods, data collection instruments and timeframe for data collection, synthesis, reporting outcomes and performance information needed.

The framework was developed from the program's objectives and strategies, which are represented by program logic. The analysis was based on a review of key program documents, including Metro ACTIVE grant guidelines and project applications. This was complemented by interviews with funded project teams, the VicHealth Metro ACTIVE Project Officer (Megan Kerr) and Ged Dibley from PDF. The interviews were used to clarify program and project aims, project activities, and each council's understanding of integrated planning and how it would be achieved in their context.

2.1 Program logic

The Metro ACTIVE Program was depicted as an outcomes hierarchy (Figure 2.1), which represents the program logic: that is, an explanation of how the activities are expected to achieve success. Figure 2.1 shows the assumed causal links between the activities and strategies being used and the various outcomes. Intermediate outcomes include: improved leadership by Sport and Recreation Units, increased council capacity, changes in key council guidelines and policies and improved intersectoral commitment; and longer-term outcomes include: physical activity initiatives reflect integrated planning principles, there are increased opportunities for residents to be physically active (more activities are available and affordable, there is a supportive built environment) and, ultimately, residents are more physically active.

Figure 2.1: Outcomes hierarchy for Metro ACTIVE



2.2 Evaluation purpose

The purpose of the evaluation was to assess whether the Metro ACTIVE Program was an effective way of influencing local governments to use integrated planning to support participation in physical activity.

The evaluation was designed to provide information about how the program was actually implemented by each council and, in particular, how the capacity-building activities worked in the specific circumstances of each of the demonstration projects. The intention was to identify the specific outcomes of the program as they related to the stated objectives, and to identify the contexts and mechanisms that contributed to the success of the Metro ACTIVE program, both within individual councils and across the funded projects.

More specifically, the evaluation:

- tested the effectiveness of the two funded models, identifying what works, for what councils and under what circumstances
- identified implementation issues and key success factors in achieving the program outputs for each model, and barriers to success
- assessed the potential for replicating successful strategies and activities in other councils
- tested whether the Sport and Recreation Unit is the appropriate part of council to drive integrated planning around physical activity
- tested the contribution of training workshops and/or membership of a physical activity network to supporting an integrated planning approach
- identified the contribution that the specific project funding makes, above what may be obtained by offering training on integrated planning and membership of a Local Government Physical Activity Network.

2.3 Evaluation methods

The evaluation used mixed methods to collect a range of information to answer the evaluation questions:

- qualitative interviews with key informants in funded councils at mid-term, and at the end of funding
- document analysis of project submissions/progress reports/final reports and key council plans
- survey of members of the Local Government Physical Activity Network
- observation of three Metro ACTIVE Meetings.

2.3.1 Key informant interviews

We used a before and after design, with 67 key informants from funded councils interviewed mid-term (June 2006), and 50 key informants interviewed in May 2007, at the end of funding. Overall, 117 interviews were completed, with 82 individual key informants. Where possible, we interviewed the same key informants or the person in the same position at mid-term and at the end of funding, so that 37 individuals were interviewed both times.

Key informants were selected purposively from relevant departments within councils and primarily comprised key council stakeholders and informants from all levels of seniority, external partners (in some cases) and the Project Team. Table 2.1 provides a summary of the location of interviewees within councils and council departments, as well as external interviewees.

Table 2.1: Summary of council interviews

Council	Council F		Council E		Council A		Council B		Council D		Council C		Total
	Mid-Term	End	Mid-Term	End	Mid-Term	End	Mid-Term	End	Mid-Term	End	Mid-Term	End	
Timing of interview													
CEO/Division Head	0	0	2	2	1	0	1	1	1	1	0	1	10
Strategic Planning/Business Develop.	1	0	1	0	1	2	0	1	0	1	0	0	7
Corporate Services	1	1	0	0	0	0	0	0	0	0	0	0	2
Environmental/Urban/Landscape Design	1	1	1	1	1	1	0	1	0	0	1	0	8
Community Services/Access Planning	2	0	1	1	1	1	1	0	1	1	1	1	11
Health Promotion/Community Health	1	1	1	1	1	1	0	0	0	0	1	1	8
Parks/Gardens/Open Spaces	0	0	0	1	1	0	1	1	1	0	1	1	7
Leisure/Recreation/Cultural Planning	3	1	2	1	3	3	2	2	2	2	2	3	26
Traffic/Transport Services/Planning	0	0	1	1	0	1	1	0	1	2	1	1	9
Infrastructure Services/Works Dept	0	0	0	0	1	2	1	0	1	1	1	0	7
Councillor/Mayor	1	0	1	0	0	0	1	0	1	0	1	0	5
Community stakeholder	1	0	1	0	1	0	0	0	0	1	1	0	5
Metro ACTIVE Project Officer	1	1	1	1	1	1	1	1	1	1	1	1	12
Total	12	5	12	9	12	12	9	7	9	10	11	9	117

2.3.2 Survey of members of the Local Government Physical Activity Network

In March 2007, ARTD surveyed all 180 members of the Local Government Physical Activity Network, including funded projects. Kinect distributed the survey electronically as a Word-Form and non-respondents received one reminder to complete the survey via email. Respondents returned the survey directly to a designated email address administered by ARTD.

The survey covered:

- position and role of member
- council characteristics (e.g., organisational structure, council, planning culture, approach to planning for physical activity)
- regularity of attendance
- role of sport and recreation in leading integrated planning for physical activity
- knowledge of the principles and practical ways of integrated planning for physical activity, and how this can influence participation in physical activity
- understanding of council units' roles, and the way different units can work together
- nature of relationships between members, the extent information is shared, and the extent to which there is shared problem solving
- perceived relevance and usefulness of Network meetings.

Overall, 35 members returned the survey, a response rate of 19%. Just over half the respondents worked for local councils (Table 2.2), with the majority coming from metropolitan areas.

Of the council respondents, almost two-thirds worked in either community health/health promotion (32%) or leisure/recreation/cultural planning (26%). Two-thirds were working in relatively low-level positions within council as council officers.

Table 2.2: Membership of respondents who completed the survey of the Local Government Physical Activity Network (March 2007)

Organisation	Total (n=31)	Metro (n=14)	Rural (n=17)
Local council	55%	71%	41%
Community health	16%	14%	18%
PCP	13%	0%	24%
Other	10%	7%	12%
RSA	3%	0%	5%
Fitness centre	3%	8%	0%
Total	100%	100%	100%
Missing data	4	0	0

Table 2.3: Council respondent's role

Part of council worked in	N=19
Health Promotion/Community Health	32%
Leisure/Recreation/Cultural Planning	26%
Parks/Gardens/Open Space	11%
Community Services/ Access Planning	11%
Strategic Planning/Business Development	11%
Environmental/Urban/Landscape Design	5%
Other	4%
Total	100%

Position	
Officer	68%
Team Leader	21%
Manager	11%

3 Implementation of the Metro ACTIVE program

This section describes the implementation of the Metro ACTIVE program, drawing out the differences and similarities in approaches and strategies used by the funded projects.

3.1 Conceptual approaches underpinning the projects

Each funded council had an underlying conceptual approach to the project that was influenced by several factors, including: senior management's understanding of council's role in encouraging physical activity,¹ the position of the project within council, the previous work of that unit and their visions for the future, and the orientation of the personnel conducting the project. The VicHealth funding model also influenced the approach taken (discussed in Section 3.2).

There was significant variation in the conceptual approaches for some of the projects, and similarities between others.

As a result of the differing underlying conceptual approaches, the mix of strategies used varied (see Section 3.2), as did the focus of each project in meeting wider Metro ACTIVE program objectives (see Table 3.1 and Figure 3.1). For some projects, efforts and resources were mainly spent on meeting the community objectives (Objectives 2–5), while others put more resources into strengthening internal capacity to adopt an integrated planning approach to increasing physical activity (Objective 1).

Figure 3.1: Metro ACTIVE objectives

1. To strengthen the capacity of local government in metro Victoria to adopt and apply an integrated planning approach to increase participation in physical activity through community sport and active recreation
2. To strengthen local government authorities' leadership in working with metro communities to increase participation in physical activity
3. To empower communities in the decision-making process to increase participation in physical activity
4. To engage people who have least access to opportunities to participate in physical activity
5. To increase opportunities for those who are least active, or at increased risk of inactivity as a result of social or economic disadvantage

3.1.1 Health promotion or health education approach

Council E and Council F conceptualised their projects as health promotion and community education projects, respectively. These projects were largely outwardly focused on engaging with the community to either provide residents with more opportunities for being physically active, and/or be better informed about the need to be active (Objectives 2-5). Neither of these projects had a strong focus on internal capacity-building strategies around integrated planning for physical activity across council (Objective 1), although Council F did hold an integrated planning forum in the second year. Both projects were funded under Model 2, which required the project to work in partnership with other agencies over the life of the project, and there is no doubt this influenced the direction of these projects.

The goal of Council E's project was to increase residents' participation in walking by facilitating and supporting the social infrastructure for walking groups. Two related factors that shaped this direction were the location of the project, and council priorities. The project built on earlier Cultural and Leisure initiatives to support and promote walking. In addition, the Cultural and Leisure Services' usual way of working is to provide services and programs for the community, with the unit

¹ Discussed in detail in ARTD's (October 06) Mid-term Report on Metro ACTIVE Program, section 4.1

having no direct planning role, so the project reflected this orientation. Given the objectives of the project, it was logical for the council to employ a skilled health promotion practitioner.

Council F's approach was focused on a particular disadvantaged community, and involved working in a partnership initiative with an external organisation to promote and support physical activity for residents of this community. Council F is strongly oriented to providing facilities and programs, and the direction the Leisure Unit took in implementing the project reflected this focus. The project was also influenced by the relatively low priority given to cross-council work in this large council, which serves a rapidly growing community.

3.1.2 Internal capacity building approach

Three of the projects – Council D, Council B and Council A – conceptualised their projects as primarily being about building the capacity of the council to adopt an integrated planning approach to physical activity (Objective 1). However, the area targeted as an entry point to engage council interest differed markedly for each council (see Section 3.2). Council D and Council B also put some resources into meeting Objectives 3–5, by developing and promoting new physical activity programs.

The approach of Council A's project to internal capacity building focused on influencing infrastructure development for walking and cycling. This approach reflected the interests and experience of the project team. The approach taken was also influenced by the location of the project team within council, and the lack of existing infrastructure for walking and cycling. This council area is currently undergoing urban renewal, so that an emphasis on influencing infrastructure fitted current council priorities.

The approach of Council D's project was to target senior managers in a range of areas, and influence operational planning around physical activity and also the work practices of relevant officers. The project tapped into an existing culture of working jointly to achieve outcomes for the community, and was perceived to be a good fit with council interests and ways of working. For example, the council culture enabled the project officer to access senior officers. The project officer was recruited from within the organisation and was highly skilled at networking and negotiating.

Council B's approach was influenced by the size of the council, the project's location within a planning unit and the existing council commitment to integrated planning approaches. The project focused on building both internal and external partnerships and, in addition to focusing on building capacity for integrated planning within council, was able to implement a number of practical physical activity initiatives, such as an Active Community map. The project's direction was also influenced by the appointment of a full-time project officer from within council who had good relationship-building skills and knowledge of how council worked.

3.1.3 Coordinating and planning approach

In Council C, the project was conceived more narrowly around coordinating the planning of services to improve disadvantaged residents' access to existing facilities and programs. The unit responsible for conducting the project is separated structurally and physically from the Community Development Division, which is responsible for conducting physical activity programs and promoting physical activity more broadly. Thus, the main project strategy, preparation of a services plan, fitted into the unit's core business. In addition, Council C has concentrated its resources on organised sport, formal programs and managing facilities, and the

project reflected this orientation.

3.2 Project activities

Even though the organisational environment shaped the way the projects were implemented, there were nevertheless many similarities in the kinds of strategies used across projects. The main differences were in the scope of the activities, and how and for whom they were targeted.

All projects used a range of strategies, and all included strategies intended to assess the current situation and gather evidence to develop a case for change. In keeping with the underlying conceptual approach taken, the projects chose different aspects of the local system to analyse, from audits of the physical infrastructure to audits of social infrastructure and audits of council policies and plans.

The projects also all established cross-council reference groups to engage support and interest for the project from other departments. The level of involvement of these groups varied across projects and time, with some being highly functional and others less so. The groups that successfully recruited senior officers appeared to function more effectively than others. Nevertheless, most of the reference groups successfully spread the message about the importance of physical activity, the role of local government and the relevance of using an integrated planning approach.

We also observed some cross-fertilisation of ideas between projects, with projects taking on strategies that others had demonstrated were successful. The VicHealth program meetings promoted the sharing of ideas. One example of a strategy being taken up by others is the forums on integrated planning approaches to physical activity. Both Council D and Council A held forums in the initial stages of implementing their projects, and the other councils picked up on the idea.

The main strategies used by the projects to address Metro ACTIVE objectives are shown below.

Strategies to achieve an increased capacity to apply an integrated planning approach within council [Metro ACTIVE Objective 1]

- Forums for council staff focusing on integrated planning [Council F, Council A, Council D, Council C]
- Formal planning exercise lead by project group, focused on service provision [Council C]
- Audit of strategies and policies related to physical activity [Council F, Council A]
- Training of staff members [Council D, Council B]
- Active participation in reviews of strategically important council plans [Council E, Council A, Council D, Council B]

- Facilitation of new guidelines for practice impacting on the built environment [Council D]
- Contribution to current related planning reviews [all projects].

Strengthen leadership in working with communities [Metro ACTIVE Objective 2]

- Partnerships with community groups to implement joint activities [Council F, Council E, Council D, Council C, Council B]
- Partnerships with government agencies, e.g., PCPs [Council E, Council D], Community Health [Council F, Council D]

- Development of an action plan in conjunction with a community group [Council D].

These activities gave projects a link with the community, and the opportunity to access needs and target activities.

Strategies to work with disadvantaged communities/empower communities [Metro ACTIVE Objectives 3 and 4]

- Consultation with the community through community reference groups [Council E, Council D], focus group research [Council D, Council B], survey of residents [Council D, Council E]
- Development of new information promoting physical activity opportunities, e.g., walking trail maps, walking guides, brochures on community programs [Council E, Council D, Council B].

Strategies to increase social opportunities [Metro ACTIVE Objective 5]

- Targeting initiatives in one locality with a high concentration of disadvantage [Council F, Council D, Council C]
- Establishing and/or supporting formal walking groups [Council E, Council D, Council B]
- Developing tailored activities or new programs for specific disadvantaged groups and other groups [Council E, e.g., training of people with disability leaders; Council C, e.g., youth and women's programs; Council D, 13 site-based activities, e.g., sports clinics; Council B, e.g., NHF 10,000 Steps]
- Conducting a community forum to promote physical activity opportunities [Council D]
- Audit of walking clubs [Council B].

Strategies to develop supportive physical environment [Metro ACTIVE Objective 5]

- Audit of the physical environment, parks and walking trails [Council E, Council B]; pedestrian routes [Council A].

The Appendix summarises the main activities of each project. The contextual factors influencing the success of the strategies are discussed in detail in Section 4.

4 Results of the Metro ACTIVE program in funded councils

This chapter discusses what results the Metro ACTIVE Program achieved, particularly whether integrated planning increased the capacity of councils to adopt and apply an integrated planning approach to physical activity.

The chapter also identifies the critical success factors and critical contextual factors influencing the success of councils' efforts.

4.1 Metro ACTIVE outcomes – changes in capacity for integrated planning on physical activity

We have used the capacity-building model developed by Hawe and colleagues (Hawe et al, 1997) as a guide for our analysis of the evaluation data, but have further developed this model to fully explain the findings.

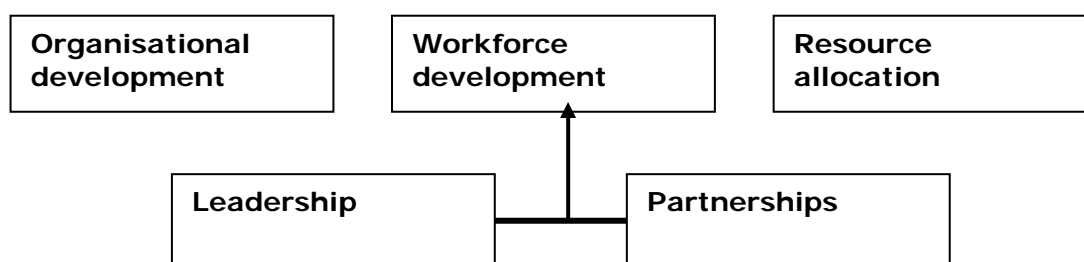
Hawe and colleagues describe capacity building as:

An approach to the development of sustainable skills, organizational structures, resources and commitment to health improvement in health and other sectors, to prolong and multiply health gains many times over (Hawe et al, 1997).²

Workforce development, organisational development and resource allocation were identified in that model as dimensions of capacity building. In evaluating Metro ACTIVE, we have found they are critical capacity outcomes in the development of integrated planning for physical activity. All councils were able to demonstrate some achievements in building capacity on these dimensions, but to different degrees.

Figure 4.1 shows the capacity-building framework as described in the NSW Health Department's document, *A Framework for Building Capacity to Improve Health* (2001).³ Figure 4.2 shows some refinement of the model to reflect the critical factors identified in the evaluation of Metro ACTIVE.

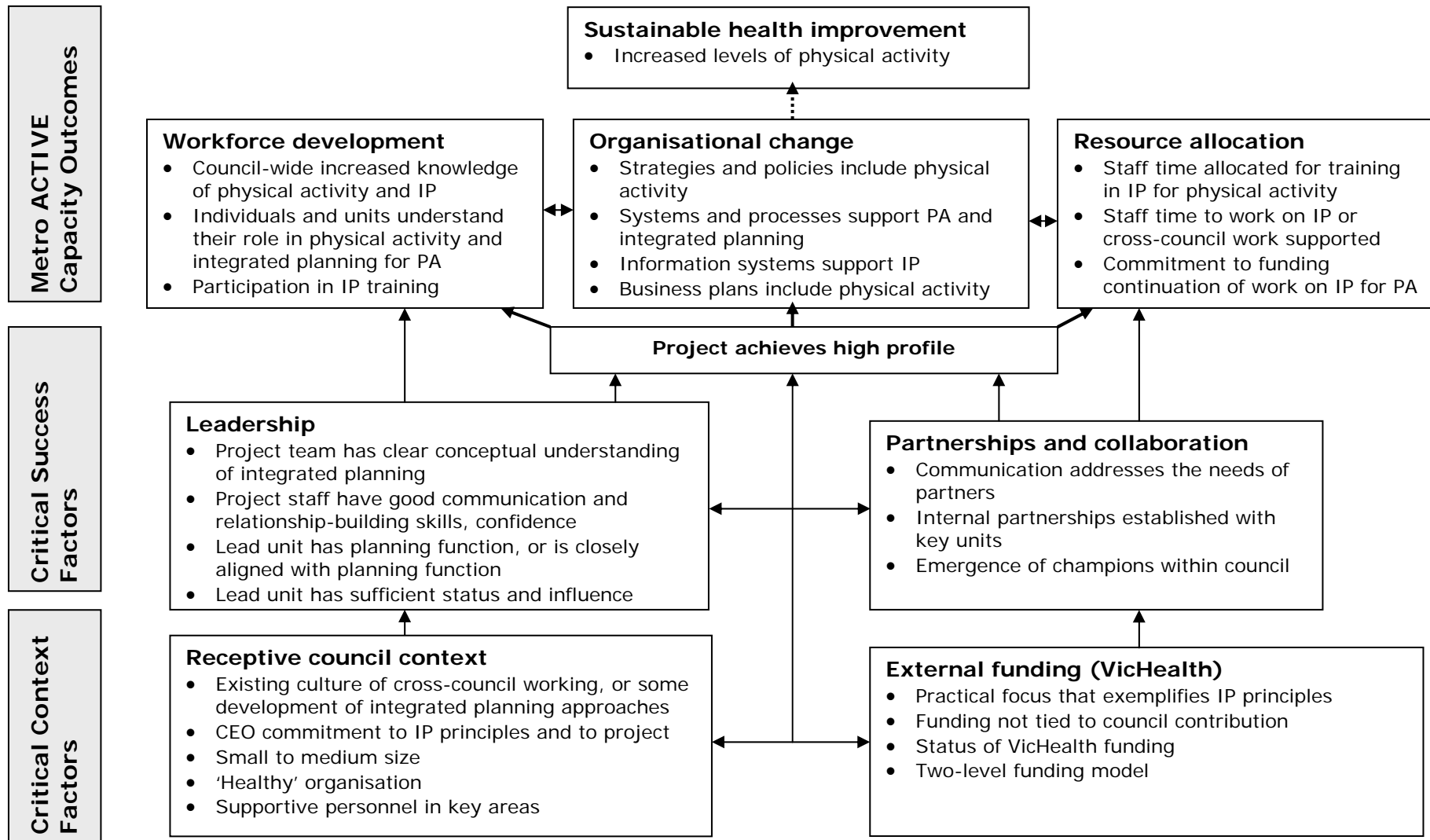
Figure 4.1: Capacity building framework



² Hawe, P, Noort, M, King, L & Jordens, C (1997), 'Multiplying Health Gains: the critical role of capacity building within health promotion programs', *Healthy Policy*, 39: 29–42.

³ NSW Health Department (2001), *A Framework for Building Capacity to Improve Health*, Author, Sydney.

Figure 4.2: Model of capacity outcomes and critical success and contextual factors for integrated planning (IP) for physical activity (PA) in councils



Our evaluation has revealed three critical success factors – leadership, partnerships and collaborations – that are necessary to achieve the critical capacity outcomes of workforce development, organisational development and resource allocation. Also, the presence of a practical project on which to focus capacity-building efforts is required. The presence of these factors directly influenced the recognition and status achieved by the projects in council, and subsequently the capacity changes noted above.

4.2 Workforce development

In all councils, at least some progress has been made towards increasing the knowledge and awareness of council staff about both physical activity and integrated planning approaches. Informants frequently reported that the Metro ACTIVE project had raised awareness of physical activity and integrated planning, but the extent to which this happened varied across councils.

4.2.1 Physical activity awareness

In the 2006 interviews, there was evidence that many council staff were aware of the importance of physical activity for the community and the role that council can play in supporting physical activity. However, three councils – Council A, Council B and Council D - demonstrated a more sophisticated understanding of council's role, with informants able to identify that actions were required to improve the physical environment and address social and economic barriers. Other council informants in 2006 were more likely to predominantly reflect the traditional roles of council, saying that council provided sport, leisure and recreation facilities and programs. The 2007 interviews showed evidence among council staff of increased awareness of council's role in physical activity, so it is likely that the project activities contributed to an increase in the understanding of council informants of the role of local government in promoting physical activity. In a few cases, informants explicitly linked their increase in knowledge to attendance at information sessions conducted by the project.

Informants for the 2007 evaluation interviews consistently said that awareness of the importance of physical activity in council's work had increased in many council departments and among many council staff as a result of the project.

'You hear people talking about physical activity...it's in the ether' (Council D informant)

'The increased thinking in council about physical activity has been driven by the project' (Council A informant)

'From a very low level of knowledge it has helped me see what council can do' (Council C informant)

'The project has raised the profile of physical activity access' (Council B informant)

The awareness of informants about council's role in physical activity was influenced by the focus that each of the projects had taken. Access and accessibility for physical activity, particularly for walking, was frequently mentioned; and in Council A and Council B, informants talked about increased awareness of walkability and cyclability and barriers to this. Increased awareness of council's role in physical activity was particularly evident concerning opportunities for informal activity and sustainable transport. In Council B and Council D, informants also talked about the importance of health and wellbeing or healthy lifestyle and council's role in this.

In Council E there was discussion of walkability and walking group opportunities,

but also awareness of issues related to parks and open spaces, reflecting the project's focus on these areas. However, Council E informants were less likely to discuss physical activity and council's role in physical activity in more general terms. There was little evidence presented by Council F informants that awareness of council's role in physical activity had been increased among council staff.

For some councils, this new knowledge about physical activity was evident across all levels of staff - officer level, middle and senior management – and across different departments.

'We've got strategic planners thinking about walkability, trails etc. during the MSS process – also some engineers starting to think about it' (Council B informant)

'Previously, walking and cycling were left to the recreational department, seen as recreational issues only. Now the entire organisation is beginning to see these issues as relevant for them' (Council A informant)

'They have brought walking into the conversation of others, moved it further up the agenda for traffic engineers, infrastructure and strategic planning' (Council D informant)

It seemed that most informants had become more aware of how physical activity was relevant to their work, and some reported that they now believed all or most council staff were more aware of their role in supporting physical activity participation. However, this was less likely to be reported by informants in Council C and Council F (in both 2006 and 2007). In other councils there was evidence that there is still a way to go in influencing all parts of the workforce.

'The philosophy has been taken on board and taken forward – although not necessarily as far as it needs to go' (Council A informant)

Where specific areas of council were mentioned as not having been influenced to the same degree, these were most likely to be Engineering or Infrastructure departments.

4.2.2 Integrated planning awareness

Many council staff appeared to have become more aware of integrated planning approaches as a result of the project. Even in the two councils where the Metro ACTIVE project faced significant barriers, there was some recognition that integrated planning was now more visible.

However, there was considerable variability in the expressed understanding of integrated planning among staff in different councils and within councils, and this influenced the extent to which their awareness had increased. Across all councils, awareness of the need for integrated planning within council was usually higher among middle and senior managers.

More senior people were also more aware of integrated planning approaches and, not surprisingly, council staff whose roles included planning were much more likely to be aware of integrated planning than those with no planning responsibility, particularly those at officer level. At Council B, it was reported that the increased awareness of integrated planning mainly occurred at the officer level, as management level staff already had a good understanding of integrated planning.

In Council B and Council D, increased awareness of integrated planning has progressed to strong acceptance of the need to adopt integrated planning for physical activity to achieve council's objectives.

'It's now an advantage if people get access, walkability etc. signed off – the project gets more credibility and is easier to get signed off' (Council A informant)

Some informants described resistance to increasing awareness of integrated planning because staff did not understand it. In some councils, there was variable understanding or acceptance of why integrated planning was important for councils' work in physical activity.

'Integrated planning is a great concept but how people understand it is the key – some people see it as a way to pass on their responsibilities to others – so people are resistant to this' (Council C informant)

'The main barriers have been initially a lack of understanding of why integrated planning is relevant for physical activity. Some people didn't understand why everyone in council needed to be involved in walking initiatives' (Council A informant)

In Council A there were still some remaining pockets of resistance but these areas were specifically being targeted by project activities towards the end of the project.

The projects in Council F and Council E did not adopt a strong focus on influencing integrated planning for physical activity, partly because they had interpreted the VicHealth objectives as requiring a strong community-focused project, or because they believed their council had already adopted an integrated planning approach to physical activity. However, while the Council E project did not set out to influence groups such as strategic planners (as other councils had), the project's profile meant that it had an impact on these groups, with town planners and strategic planners becoming interested in physical activity issues such as walkability.

'Before the project the town planners and strategic planners would not have been interested so we are building on what has already been done' (Council E informant)

Even in Council F and Council C, where there was little evidence that the project had an impact on awareness of integrated planning for physical activity, raising the issue in a key informant interview produced these responses.

'Next year we're doing a review of our integrated planning – it's recognised that we could do better' (Council F informant)

'There have been benefits and learnings for parts of the organisation who had not worked out integrated planning before...some cultural change around working in a more integrated way' (Council C informant)

Projects are ending at different points, with some only beginning to take on workforce development approaches.

'The next phase will focus on workforce development re planning for physical activity' (Council E informant)

While the projects have contributed to changes in thinking about integrated planning, particularly for physical activity, it is difficult to know whether they also contributed to cultural change in council. Given that informants were clear that cultural change was driven from the top, this would mean that senior management would need to have been influenced by the projects, and there is no real evidence to support this.

As in the case of physical activity awareness, the changes in awareness of integrated planning were most likely the result of a combination of council culture

and the Metro ACTIVE project.

4.2.3 Training

Another indicator of increased workforce development was the commitment to training staff in integrated planning. All projects had attempted some training of council staff, and this appeared to be essential for increasing knowledge and awareness of council's role in supporting physical activity in the community and integrated planning for physical activity. However, the interest and support for these initiatives varied across councils.

At Council B a one-day onsite IP training program was conducted, with 30 staff attending, including senior and middle managers. At Council C, a one-day workshop was also well attended.

In some instances, middle and senior managers and staff from sections of council with which the project had weak links did not attend integrated planning forums. This was often despite intensive efforts by the project team, including having international expert speakers, sending individual invitations and free participation.

In Council E, several council staff had attended the Walk 21 Conference, and this was followed up by a session conducted by the project team for all council staff. The session was well attended, including by planners.

4.3 Organisational development

Most of the councils' existing plans and strategies included references to cross-council coordination of activities, including those councils where informants described resistance to cross-council working and planning in practice. While the health and wellbeing of the community were included as strategies or indicators in all council plans, Council B had the strongest representation. Council B's plan structure is based on the four environments for health, with one section in the plan called 'Health and wellbeing'. Physical activity strategies and indicators were strongly featured in this section, as opposed to the recreation and leisure strategies more commonly found in other council plans.

Councils traditionally develop plans for particular parts of council business, and the responsibility for the development and implementation of those plans rests with the area responsible for that work. The purpose of integrated planning is to create cross-links between plans, recognising that a planning process that does not allow for cross-fertilisation between plans results in gaps and duplication of effort.

There was reasonable evidence in most councils of increased efforts to make connections between different council plans, and to include physical activity in plans. This was mainly achieved through consultation processes, and through including design and planning initiatives to improve the physical activity and health and wellbeing of the community in council plans and strategies.

'...we had a discussion afternoon and out of that came the idea of embedding the healthy by design principles in the MSS' (Council D informant)

'We put in submissions to relevant strategies and policies when they are open to consultation – they all have a consultation process where other departments can submit or comment on these. For example we put in a response about the Precinct Plan' (Council E informant)

'In the review of the MSS we found giant holes re health and physical activity...re how to address the gaps' (Council D informant)

'The open space strategy is being drafted and I have been asked to add a section on the link between physical activity and health' (Council E informant)

In some cases, there was explicit awareness that the organisation's systems would need to change for integrated planning for physical activity to progress.

'The project has tried to change the culture, now we are trying to embed change in systems and processes' (Council B informant)

'As new strategies, plans and policies come up for revamp the physical activity component will be more picked up...also sustainability and health and wellbeing and social issues' (Council B informant)

In Council C, where there appeared to be less commitment to integrated planning, one manager said that they were aiming to get key performance indicators for physical activity into more divisions across council to try to influence practice.

Other councils had made changes in processes and systems. For example, at Council D, council planning processes were changed to include new design principles for pedestrian cross-overs that had been agreed across a number of departments.

In Council B, the new Capital Works Policy now includes an assessment of the impact of the proposed project on walkability and access. When a new Capital Works proposal is put up for approval, it must include a list of those in council who are to be consulted. The comments of those consulted need to be reported and that record signed off before the new capital works project can go ahead. The council unit leading the Metro ACTIVE project had strongly advocated for these changes.

There was also evidence of some organisational change in Council A, with one informant noting that council staff now consider physical activity issues to be a legitimate part of business and a genuine item for their business plans. In fact, planning processes appear to have been influenced in a variety of ways by the projects.

'I am encouraged to hear landscape architects talking about using the information from the audits of pathways in their designs and planning' (Council E informant)

'Strategic planning is now driving the development of the Walking Strategy and it will be everyone's responsibility' (Council B informant)

In Council A, a Sustainable Transport Group was established as a direct result of the project, but also made possible by the arrival of a new manager in the infrastructure department, who supported the ideas of sustainable transport that were being promoted by the Metro ACTIVE project.

Council B was poised to take advantage of a new information system ('Interplan') which they planned to use to coordinate planning across council, including planning for physical activity.

'We are about to start implementing an IT system that is all about integrated planning' (Council B informant)

4.4 Resource allocation

There was evidence of council commitment to the principles of integrated planning for physical activity through the allocation of staff time to participate in joint planning and joint projects. In most councils, the workforce development initiatives were supported, with staff given approval to participate in forums, project activities and steering committee meetings.

Several councils had also made a commitment to continuing the work of the projects in some way, including employing a part-time staff member to continue the project. Council D had decided to retain the steering committee, and continue internal forums. Some councils planned to continue the work with existing council staff, and several had already applied, or planned to apply for more external funding to continue the work.

'Council has made a commitment to continue with the project using current staff' (Council E informant)

4.5 Leadership

Successful implementation of the Metro ACTIVE project in the complex local government environment required strong leadership skills.

The more successful projects had been very visible within council, securing time at council and executive meetings, presenting the project to regular council staff forums, securing the participation of high-level staff on the steering committee, and bringing in key experts to raise awareness of physical activity and integrated planning. Council A secured the attendance of senior managers on the steering committee by holding the meetings at 8.30am for half an hour, once every two weeks.

Council F had experienced considerable difficulty in engaging with middle and senior management and establishing a significantly high-enough profile for the project for it to be noticed among the huge number of activities competing for attention in this very large council. One Council F informant noted that the project had never been discussed at the Executive Management group, which was the usual practice if the project was thought to be important.

The ability of a project team to work horizontally and vertically across the council and infiltrate the relevant divisions and sections was a key factor in creating opportunities for the team to show leadership in the development of integrated planning for physical activity.

Leadership also needed to be strategic to be successful. One example of a strategic approach was identifying and targeting those most likely to be responsive to the aims of Metro ACTIVE, working with them in the early parts of the project and then developing strategies to work with those initially less interested once the project had established some status and credibility in the organisation. This was particularly evident in Council A.

Some Metro ACTIVE project teams adopted a high-level strategic approach from the beginning, and this proved to be very successful. However, the ability to do this was influenced by contextual factors (discussed in Section 4.3). Adopting a high-level strategic approach was also influenced by the skills and experience of the project teams, with some Metro ACTIVE project officers lacking the necessary skills to work at this level within council. In councils where it was acceptable for the

project team to make approaches to senior levels of management or councillors, there were increased opportunities to raise the profile of the project.

Council E took a more operational approach to the project and used this to engender a high level of enthusiasm for the project, bringing in support from other parts of council as needed to meet the project objectives; for example, securing additional seating and opened toilets.

'It is high profile, people know about it' (Council E informant)

'The project has a high profile across council and at the councillor level...the resources mean that we can develop collective goals and objectives...the project has been elevated to a much higher level within council than it otherwise would' (Council E informant)

'Everyone has taken it on board and it has the right amount of support to succeed – the GM knows all about it and understands it' (Council E informant)

The status of the lead unit for the Metro ACTIVE project and the position of the unit within the council structure were also key factors in how well the project teams were able to promote the objectives of the project. Due to the varying structures within councils, the lead unit had slightly different functions and many different positions within council.

The most successful location seemed to be where the lead unit had a planning role. In most cases, a leisure unit on its own was not seen as the right lead unit for the project. In most councils, leisure units were focused on the provision of facilities and programs, and in other councils predominantly focused on the financial management of leisure centres. However, the exception was Council D, where informants believed that the leisure unit developed capacity for providing leadership as a result of the project.

Another factor affecting the poor view of leisure as a lead unit is the training of leisure unit staff, who are predominantly focused on facilities and programs for recreational activity, rather than having a broad understanding of physical activity opportunities and environments. Additionally, several informants felt that the leisure area did not have sufficient status within council to drive an integrated planning approach.

In Council B, while nominally located in leisure, the project was in fact managed through the social planning unit. Informants from other councils also suggested the social planning or strategic planning unit is a better place to locate a project about integrated planning for physical activity.

'One key success is that the project wasn't located in leisure. Action is expected from social planning and the area has more credibility' (Council B informant)

With a project focus on infrastructure development to support walking and cycling, two Council A informants felt that the infrastructure planning area should be driving integrated planning for physical activity.

The Metro ACTIVE project in Council F was considerably disadvantaged when, just after the commencement of the project, the leisure planning team was split from the remainder of the leisure unit and moved to a new division within council. This seriously undermined the ability of the project to engage with the planning sections of council.

Most project staff also reported that a full-time project officer was important for project success. This was the case whether they had in fact had a full-time or part-time project officer. Also, project officers who had been appointed from within council had been able to 'hit the ground running' and got the project off to a good start.

4.5.1 Partnerships

Establishing relationships with other sections of council was a critical factor in building capacity within the organisation for integrated planning for physical activity.

A fundamental way in which relationships were established in the projects was through the Project Steering Committees. However, the composition of these committees varied across projects. In some cases, the membership was primarily from within the same council division and at an officer or team leader level with little middle and no senior management representation. In other councils, the project team had put together a committee with middle and senior management representation and across council divisions.

Projects that were able to establish a more heterogeneous Steering Committee with more senior-level staff reaped the benefits. However, projects able to do this not only had the leadership skills required but were working within a supportive context.

In Council E, which had a 'whole-of-council' approach, collaborations and cross-functional planning were encouraged. Evidence from informant interviews indicated that links and relationships between departments had been strengthened as a result of the project.

For some projects, partnerships with external agencies were a key component of the project: for example, in Council E and Council F, and to a lesser extent in Council B. Council E worked with several external partners, including a Division of General Practice and Community Health, while Council B worked with Community Health and the YMCA. Council F focused on the external partnership with a community organisation and had a lesser focus on building relationships with internal council partners.

Council B had set up a unique networking group involving both internal and external partners – Bicycle Victoria, council engineering and leisure departments and a local bicycle users group.

The level of awareness of the project across council was an indicator of how well the Metro ACTIVE project team had been able to foster partnerships with other parts of council. More specifically, the project teams were able to point to new relationships they had developed with other council departments.

More significantly, developing cross-council relationships and partnerships increased links between council staff independent of the leisure unit's involvement.

Strategies to capitalise on existing council groups and committees to form relationships and build support for the project were utilised more in some projects than in others. A cross-functional group of team leaders in Council F presented an opportunity to have an influence across council divisions, but this opportunity was unable to be utilised. The reasons for this were not clear.

4.6 Council context

The existing council culture at the commencement of the project was a key contextual factor influencing the success of the Metro ACTIVE projects. Those councils with a strong focus on cross-council working created a much more fertile environment for the project. The culture as it was experienced by staff in practice was more important than council philosophies espoused by senior staff. At Council F and Council A, middle and senior managers expressed positive views of integrated planning and council's commitment to this, whereas officer-level informants were more likely to say that it was not a priority and did not happen.

Council management attitudes and practices had a significant effect on the ability of the council environment to incorporate new ideas.

'The leadership style at management level means that everyone has a role in contributing across issues' (Council B informant)

'We are doing well in the "new agendas" which cut across the organisation, for example, ecological issues, health and wellbeing' (Council B informant)

4.6.1 Existing culture of integrated planning or cross-council working

There is a significant difference between integrated planning approaches and cross-council working at a project level. Integrated planning requires a high-level strategic commitment, usually at senior management level, whereas cross-council working on projects is facilitated by relationships between staff who are usually at officer or team leader level.

Councils were at varying stages of development of cross-council ways of working. Several councils had a strong culture of cross-council ways of working. This included a variety of strategies, including cross-functional committees, opportunities for sharing information, a culture of openness and availability both horizontally and vertically, joint working on projects and cross-referencing of plans or evidence of integrated planning. Some councils predominantly used the cross-council way of working, and others were more advanced in the adoption of integrated planning approaches.

'We have always been able to work across council on a project basis but struggled to get to the next step, that is a common set of goals for the organisation and to get joint goals for the community and get these into work plans. Integrated planning has been supported in principle but not by our managers' (Council C informant)

'This organisation is very progressive in integrated planning – the CEO, the Council Plan, cross-division deliverables – they all support integrated planning' (Council B informant)

The evaluation of Metro ACTIVE has found that commitment by senior-level management in council to the development and support of integrated planning is important for building capacity in council for integrated planning for physical activity. However, commitment to cross-council ways of working is also important and can provide a platform for the development of integrated planning approaches. In either case, informants consistently said that it is senior people in council who create the culture.

'It needs to be driven from high up' (Council A informant)

A cross-council way of working facilitated the implementation of the Metro ACTIVE

projects, particularly the more operational projects.

'Council E's culture of working together on cross-functional projects, that way of working is well accepted and people understand that they can take on different roles on joint projects' (Council E informant)

Council E used this culture of cross-council working to secure the involvement of key people in their project. This raised the awareness of council staff around planning for physical activity, and ultimately led to some integrated planning outcomes. The Metro ACTIVE projects were able to have the most impact where a supportive environment for integrated planning already existed.

'The change in approach to integrated planning is a combination of council culture and the project' (Council A informant)

Physical location of staff was a significant factor affecting cross-council working, particularly the more informal interactions, as in all councils' staff were located in at least two and sometimes three or more different physical locations.

Those councils where integrated planning or cross-council working was the norm appeared to have broken down the silo mentality completely – most evident in Council D, Council B and Council E, and to a slightly lesser extent in Council A.

Councils where integrated planning was not actively supported reported many barriers.

'There are many barriers to integrated planning – not having systems in place, not being driven from the top, community and council growing so fast, fact that it's not part of the culture and there's a high staff turnover – when relationships are good with someone and then they leave it's a problem' (Council F informant)

In Council F and Council C there was evidence of resistance to working across council, and reference to the silo mentality.

'We have lots of strategies but we're in a silo – links outside our corner of the organisation don't really happen' (Council F informant)

'There is still a lot of resistance to working across council on joint things – people say it is too hard' (Council C informant)

Without a culture of cross-council working or integrated planning, staff generally lacked awareness of the benefits of the approach and believed it would increase their workload.

One strong indicator of organisational systems that supported integrated planning was the presence of cross-functional groups. These were present in Council B, Council D, Council A and Council E.

From talking with CEOs and senior managers, it seems that the landscape of local government is changing, and other forces are driving new agendas and ways of working in local government, including environment and wellbeing agendas and a focus on community outcomes rather than council outputs.

4.6.2 Champions

High-level support for the principles and aims of the Metro ACTIVE project had a significant effect on the project outcomes. In the most successful projects, there was unqualified support from the CEO and senior management staff. This support enhanced the status of the projects, and provided an imprimatur to pursue the promotion of integrated planning for physical activity across the organisation.

At Council B, a strategic planner who had been invited to participate in the steering committee became a strong advocate for the project, having a significant effect because of his position and influence within council.

In Council D, the support of the Mayor was very important to the profile of the project and for achieving cooperation across council.

Council A was fortunate in that a program champion emerged in the infrastructure planning department in the latter part of the project.

The Council F project struggled to get support from middle and senior management, evidenced by the difficulty the evaluators had in securing interviews with this level of council staff, which left the project largely without influential project champions.

4.6.3 Council size

Council size appeared to have a significant influence on the impact of projects. Larger councils were less likely to have a strong integrated planning culture, and there were significant barriers faced by projects in large councils due to the sheer number of staff and departments, the complexity of managing council business and the number of council activities competing for attention. This situation was exemplified in Council F, which was not only an extremely large council, but was also located in a rapidly developing outer urban area which introduced other problems, such as a pressing need to establish infrastructure as rapidly as possible.

'It's difficult to communicate the issues – council is too large, people are too busy so the capacity to maintain relationships between departments is limited' (Council F informant)

In contrast, Council B informants spoke of the advantages of a small council.

'The involvement of staff has been mainly influenced by the size and culture of this organisation' (Council B informant)

4.7 VicHealth project funding

For all funded councils, the project funding provided by VicHealth was a critical factor in influencing changes within council. Informants' comments indicated that VicHealth is a highly regarded and influential organisation, particularly among senior staff.

'Also gave profile – if VicHealth thinks it is worth doing then it must be' (Council D informant)

Another senior executive informant of a smaller council said that he maintained a strong interest in projects that had been funded by VicHealth. However, for a large council such as Council F, the VicHealth label did not appear to have been sufficient to generate a similarly high level of interest.

However, all councils said that the VicHealth funding has made a substantial difference to progress on integrated planning and physical activity.

'The funding from VicHealth was very valuable. It made a remarkable difference – we're a lot further down the track than we would have been without it' (Council A informant)

'...helped us educate people – without it we would be 2 or 3 years behind – the

money has helped supply the frameworks' (Council C informant)

One Council E informant was particularly direct about the impact of the VicHealth funding:

'VicHealth are able to influence service delivery and its focus by funding such as this'.

It was particularly important for councils that the VicHealth funding did not require a co-contribution from council, as several Metro ACTIVE project team members believed they would not have been able to secure the co-contribution and therefore would not have submitted a proposal.

Most councils used the funding to pay for a dedicated person to work on the project. Those who employed a full-time person were most satisfied with the results of their project, with others frequently saying that, in retrospect, having a full-time person dedicated to the project would have allowed them to make more progress.

4.7.1 Practical projects

Many informants talked about the significance of having a practical project on which to 'hang their work' in the promotion of integrated planning for physical activity. The Metro ACTIVE project provided a concrete example of integrated planning for physical activity in action, and enabled the project to be seen as providing tangible outcomes for council, thereby increasing the willingness of council staff to engage with the work.

'A number of concrete projects across council were used as a way of demonstrating what we are about, for example the cross-over work' (Council D informant)

4.7.2 Two-level funding model

The VicHealth two-level funding model influenced, to some extent, the broad approaches and strategies used by councils, and had only a weak influence on what the different projects were able to achieve. The model as applied had poor predictive power in distinguishing council organisational capacity to apply integrated planning approaches, and underestimated the influence of other factors on project outcomes.

VicHealth hypothesised that the council's existing organisational capacity to undertake integrated planning would predict a council's readiness to take up such an approach in planning on physical activity and, ultimately, whether Metro ACTIVE objectives were achieved. Applicants had varying motives for seeking funding, and it is possible that some were optimistic about the existing organisational capacity and/or where a project focused on physical activity would fit within the planning hierarchy of the organisation.

5 The Victorian Local Government Physical Activity Network – progress and results

This section summarises the role of the Local Government Physical Activity Network in supporting councils to adopt and integrate planning approaches to support their residents to become physically active.

At this stage, there is insufficient evidence to assess the impact of the Local Government Physical Activity Network on strengthening councils' capacity to adopt and apply these approaches. Only 35 (19%) members responded to the survey, and of these members, just 19 worked in local government, with the rest working in health or other government agencies (Section 2, Table 2.1). It is likely that only those most engaged in the Network responded, biasing the results in a positive light.

5.1 The members

The Network has attracted members from local government, as well as from Primary Care Partnerships and health (Table 5.1).

Amongst local government members, the Network has initially attracted people with an existing interest in the area. Almost half of local government respondents had undertaken a VicHealth course in integrated planning, and two-thirds stated that they were already working on cross-council planning for physical activity before joining the Network (Table 5.2).

The majority of local government respondents were in fairly low-level positions, working in community health/health promotion or sport and recreation, the parts of council that generally hold responsibility for protecting and promoting health and wellbeing. If this is representative of the whole Network membership, then it is unlikely that this group would have sufficient seniority and influence to drive organisational change at this stage in their careers.

**Table 5.1: The Physical Activity Network
(Survey of the Local Government Physical Activity Network, March 2007)**

Organisation	Total (n=31)	Metro (n=14)	Rural (n=17)
Local council	55%	71%	41%
Community health	16%	14%	18%
PCP	13%	0%	24%
Other	10%	7%	12%
RSA	3%	0%	6%
Fitness centre	3%	7%	0%
Total	100%	100%	100%
Missing data	4	0	0

Table 5.2: Characteristics of council respondents
(Survey of the Local Government Physical Activity Network, March 2007)

Part of council worked in	N= 19
Health Promotion/ Community Health	32%
Leisure/ Recreation/ Cultural Planning	26%
Parks/ Gardens/ Open Space	11%
Community Services/ Access Planning	11%
Strategic Planning/ Business Development	11%
Environmental/ Urban/ Landscape Design	5%
Other	4 %
Total	100%
Position	
Officer	68%
Team Leader	21%
Manager	11%
Role in planning	
Planning one of a range of roles	74%
Planning main role	26%
Not involved in planning	5%
Does role include promoting physical activity	
One of a range of roles	74%
Main role	26%
Frequency you work across council	
Regularly	60%
Occasionally	40%
Done VicHealth short course in integrated planning	47%
Involved in cross-council planning for physical activity	68%
<i>Number involved prior to joining the Network</i>	<i>12</i>
<i>Number got involved around the same time as joining the Network</i>	<i>1</i>

5.2 Capacity to adopt an integrated planning approach for physical activity

Respondents gave mixed messages about the capacity of their organisations to adopt and integrate a planning approach for physical activity. Only 29% of respondents thought that this approach was well accepted within their council. On the other hand, around half of the councils were said to have processes or structures in place to support integrated planning: for example, 53% of councils have cross-divisional committees and Team Leader meetings (Table 5.3).

Table 5.3: Integrated planning culture of councils
(Survey of the Local Government Physical Activity Network, March 2007)

Approach to integrated planning	
<i>How well accepted are integrated planning approaches within your council</i>	
	N=17
Well accepted	29%
Somewhat accepted	47%
Not very accepted	18%
Don't know	6%
<i>To what extent does your council include planning approaches in its policies and strategic directions</i>	
	N=17
Somewhat	41%
Quite a bit	53%
Don't know	6%
<i>How interested is your council in using an integrated planning approach to encourage physical activity</i>	
	N=17
Very interested	59%
Somewhat interested	29%
Not at all interested	6%
Don't know	6%
Processes/structures that support integrated planning	
Has senior cross-divisional meetings	41%
Cross-divisional/ sectional planning committees	53%
Team Leader meetings	53%
Information sharing forums	47%
Other	12%
No formal structures in place to support integrated planning	12%
Where in council integrated planning occurs	
Corporate level	59%
Operational or divisional level	76%
Program or service level	76%
Project level	71%
Does not occur	0%
Don't know	12%

Note: Two responses received from Metro ACTIVE pilot councils.

5.3 Results

The feedback we received indicates that the Network is operating mainly as an information forum and clearing house, rather than a network where members interact and learn from each other's experience. Respondents are interested in the information they are getting, and most agreed that they were better informed as a result of being in the Network (Table 5.4). Understanding the principles of integrated planning is one aspect in increasing people's capacity to adopt and apply the approach. We do not know if the information being learnt is sufficient or targeted enough to be used instrumentally.

The stated strategies to achieve the Network aims are to provide information via newsletters, posting information on a website, conducting meetings and developing an email network. In the first phase of the Network, a ListServe intended to provide networking opportunities did not attract any users, and was discontinued. Only a small number of members, 30–40, regularly attend meetings. Members currently have no easy way of locating and contacting other members.

Table 5.4: Impact of the Local Government Physical Activity Network

As a result of being part of the PA Network I am...	Agree	Tend to agree	Tend to disagree	Disagree
Better informed about integrated planning principles for LG	18%	77%	5%	0%
Better informed about the factors that affect whether people are active or not	23%	77%	0%	0%
Better informed about council's role in encouraging and supporting people to be active	17%	70%	13%	0%
More able to contribute to cross-council planning on physical activity	17%	72%	11%	0%
Intending to seek change in the way council plans for physical activity	41%	41%	14%	4%
Becoming involved in cross-council planning for physical activity	24%	57%	14%	5%
Forming a partnership with my local council	65%	24%	6%	5%

6 Conclusions and recommendations

This section summarises the main findings of the evaluation and makes recommendations about future funding.

6.1 Role of demonstration grants in encouraging take-up of integrated planning approach for physical activity

Demonstration grants are a useful tool for encouraging local government to take up an integrated planning approach for physical activity.

All the projects made some progress towards strengthening councils' capacity in one or more of the key outcomes of workforce development, organisational change and resource allocation. Two of the projects brought about changes to council planning processes or organisational structures and systems, and it is likely that these councils will adopt some form of integrated planning for physical activity in the future. All projects increased council officers' knowledge about the broader role of council in supporting physical activity and the application of integrated planning approaches.

The extent to which projects achieved the goals of the Metro ACTIVE Program depended on critical contextual and implementation factors. Where conditions were optimal – that is, there was both a supportive organisational context and necessary implementation success factors were in place – projects achieved the most gains. Where some of these critical success factors were missing, then the projects achieved less.

The culture of the council was a critical contextual factor. Without a supportive culture, the projects found it difficult to advance Metro ACTIVE objectives past workforce development. Where coordinated planning or joint activities were the norm within council, or there was CEO commitment to integrated planning principles, the projects flourished. The more sophisticated the understanding and application of integrated planning, the easier it was to introduce this approach for encouraging people to be active. A practical demonstration of the concept that exemplified the principles of integrated planning was also critical to explaining the idea.

Another aspect of council culture, the organisational climate, was an important contextual factor. In councils where officers were under stress and there was evidence of internal conflicts, it was more difficult to advance the projects.

The size of the council was also part of the context: the smaller the size, the easier it was for officers to develop relationships outside their area of responsibility.

VicHealth funding was a critical contextual factor, particularly because it was not tied to council making a contribution. The funding provided resources for councils to explore the approach and, in the successful projects, fast-tracked some features essential to its adoption. The funding also gave the idea a high profile across council, and ensured support from senior executives for collaborative partnerships.

A number of implementation success factors also emerged. The quality of leadership provided by the project team was important. Aspects of leadership that meant success was more likely were having the right set of skills (strategic thinking, networking, initiative), and being supported by senior management in the unit.

Being well located in the council structure was also a success factor. Those projects

located in sections with a direct planning role, or where a close relationship existed with a section of council with this role, had a greater chance of success. The location within the council hierarchy was linked to the status of the lead unit, and the higher the status, the easier it was to engage others in council.

Another key implementation success factor was using strategies to promote the project and explain its objectives across council. All the projects that were successful established strong internal partnerships, which led to successful collaboration on joint activities and to the emergence of champions for the project in other parts of council.

6.2 VicHealth's two-level funding model

The two-level funding model was not a useful way of funding projects.

The evaluation showed that one of the assumptions behind the funding model was fundamentally correct: that is, organisational planning culture is a powerful predictor of councils' readiness to adopt this approach towards encouraging people to be more physically active. However, the funding model is too simplistic and did not take into account other predictors of success, such as the way integrated planning is understood and applied in councils, council planning priorities and where the project was placed within the council structure.

In addition, the related assumption for Model 1 funding was flawed. Where there was weak existing organisational capacity for integrated planning, project-based funding at the officer level was unlikely to be able to drive substantive organisational change, particularly as the lower level of funding meant that the project officers could only devote part of their time to the project. Informants described organisational change as taking years, and needing to be driven by the executive leadership.

The assessment processes used to assess integrated planning capacity were inadequate for a number of reasons. There is no one understanding of integrated planning in local government, and it appears that council applicants had varying frameworks in mind when they classified their existing capacity.

6.3 Potential for replicating successful approaches

Although there was no one ideal approach identified, there is potential for replicating successful strategies in other councils.

There were a number of capacity-building strategies that were fairly successful across different councils, and which are practical and feasible to implement in a variety of organisational contexts.

These strategies are: staff training in integrated planning, high-level forums to promote the concept and engage partners, use of cross-council reference groups and audits of the physical and social infrastructure or an audit of council plans and policies.

However, future projects must take the context of the council into account when deciding which of these strategies to use and how they are implemented.

6.4 Role of the Local Government Physical Activity Network

We have insufficient evidence to assess whether the Local Government Physical Activity Network (LGPAN) could be a successful stand-alone strategy to strengthen

councils' capacity to adopt an integrated planning approach to physical activity.

The limited evidence we have shows that there is potential for the LGPAN to contribute to increasing members' awareness and knowledge about the approach. However, there are indications that the LGPAN may need to recruit more senior council officers, and officers from those parts of council without a traditional responsibility for physical activity, to drive organisational change.

6.5 Recommendations

The success of the Metro ACTIVE program merits consideration of expanding the demonstration grants program to other councils. If the program is expanded, we recommend that VicHealth:

1. Fund projects where the existing council context is favourable. Specifically, where councils can demonstrate a commitment to cross-council ways of working (that is, coordinated planning or joint activities are the norm), or there is senior executive commitment to integrated planning principles.
2. Develop a new funding model that provides sufficient funds for the employment of a full-time project officer, and for evaluation activities.
3. Review and revise funding assessment processes so that they are better able to identify the necessary council context. These tools could consider including markers of organisational capacity, such as the existence of formal high-level structures supporting integrated planning: for example, cross-functional teams and principles embedded in strategic planning guidelines.
4. Require funded projects to be located in units with a planning role, or where a close relationship with a unit with this role can be demonstrated.
5. Require projects to be focused on capacity building within council, include partnerships across council to achieve objectives, and demonstrate legitimate reasons for these partnerships.

Appendix - Summary of project activities

Project	Main Activities ⁴
Council F	<p>Distribution of community education pamphlets/existing materials through events</p> <p>Audit of local sport and recreation clubs/services/opportunities</p> <p>Installation of two community noticeboards providing information about physical education opportunities/events</p> <p>Physical activity expo and other council events, forums, support for community forums</p> <p>Audit of the physical environment, barriers, enablers</p> <p>2 Integrated planning forums held</p> <p>Cross-council steering committee</p> <p>Community working group</p>
Council E ⁵	<p>Development of resources on walking trails, groups (maps, brochures, posters, web-based info)</p> <p>Support for walking groups:</p> <p>Training volunteer walking group leaders</p> <p>Contributed to PCP training manual</p> <p>Development of leader's kits</p> <p>Promotion of walking trails/groups through events, presentation to community groups and government agencies, inclusion of articles in council newsletters, launch of one map</p> <p>Reference group includes internal council and external community members and executive group – culture and leisure + public health + sustainable transport</p> <p>Audit of walking trails and open space</p>
Council D	<p>Cross-council steering committee</p> <p>IP forums</p> <p>Audit of strategies and policies</p> <p>Participation in council reviews of strategic plans, e.g., Municipal Strategic Statement and Sport and Recreation Review</p> <p>Community reference groups, focus groups and workshops at meetings</p> <p>Staff training</p> <p>Community facilitator training</p> <p>Facilitation of cross-over re-design working group</p> <p>Community >3 events to promote physical activities – <i>Come and Try Day</i></p> <p>Development of 13 site-based programs, e.g., Tai Chi</p> <p>Promote physical activity to community</p> <p>Project to establish community garden</p> <p>Participation in the Development of Physical Activity Plan</p> <p>Participation in regional interest groups, e.g., PCP Physical Activity Action Group</p>
Council B	<p>Project management committee</p> <p>Cross-council reference committee, TOR</p> <p>Training for staff re IP for PA</p> <p>Audit of partnerships, services, facilities, walking clubs</p> <p>Promotion of walking trails</p> <p>Implement new physical activity programs</p> <p>Establish/support local physical activity network and walking groups</p> <p>Integrate planning across new Community and Leisure Service Group</p>
Council C	<p>Cross-council Working Group</p> <p>Development of Physical Activity Plan</p> <p>Audit of existing facilities and programs</p> <p>Development of 4 pilot programs targeted at disadvantaged groups</p>
Council A	<p>Cross-council steering committee</p> <p>Internal capacity building:</p> <ul style="list-style-type: none"> • Council forums • Workshops • Presentations to key decision makers <p>Media articles</p> <p>Community forum to launch project</p> <p>Updated walking and cycling maps</p> <p>Scoped costs of improving existing walking and cycling trails</p> <p>Contribute to planning for re-development of area. Development of physical activity;</p> <p>Signage Style Guide</p> <p>Audit of plans, products, programs for 3 municipalities</p>

⁴ Note – details of all activities are in Final Project Reports – this table lists main activities and highlights.

⁵ Council E provided a separate detailed report to VicHealth.