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Social Inclusion in Inner East Melbourne: Engaging and Having a Voice

Report: Inner East Primary Care Partnership
            Social Inclusion Workshops 2021

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Overview

Social inclusion is an area of high priority for the Inner East Primary Care Partnership (IEPCP) and its partner organisations. IEPCP engaged the Global Obesity Centre (Deakin University) to conduct a series of group model building workshops to build partner organisations' capacity in systems thinking concepts and assist in the identification of underlying causes of social inclusion. The workshops were underpinned by IEPCP's Social Inclusion Framework, which identifies four pillars of social inclusion: learn, work, engage, and have a voice. It was agreed these workshops would focus on engage and have a voice because of the key influence areas of the health promotion and local government partners participating. In addition, there was a goal to clarify partners' understanding of the distinction between engage and have a voice.

Six online workshops were conducted between February and March 2021. The first five workshops followed the same format. They were carried out with groups of four to six participants each to encourage the opportunity for in depth online participation. Three of the first five workshops were attended by members of the social inclusion leadership group convened by IEPCP. The other two were attended by leaders and practitioners identified to be working in social inclusion in the region. The workshops were 90 minutes long and involved an introduction to the IEPCP social inclusion framework, a discussion on practical examples of 'engage' and 'have a voice', and then construction of an initial causal loop diagram (CLD) or systems map that summarised the barriers and enablers to engaging and having a voice in Inner East metropolitan Melbourne.

In the sixth and final workshop, participants from the five workshops reviewed a combined map representing the summary views from the first five workshops. Potential actions were identified following a strategic analysis of the prominent levers within the map.

Workshop	Description
Workshops 1-5	Discuss Social Inclusion aspects of engage and have a voice; develop a causal loop diagram of the problem
Workshop 6	Identify potential actions in response to the problem, based on the combined diagram from workshops 1-5. Gauge interest in partnerships and who will lead the actions.

The workshops were facilitated by Andrew Brown from Deakin University's Global Obesity Centre, with support from Laura Collins who ran STICK-E, the software that produced the systems map, and Belinda Budd who took notes and provided logistical support from IEPCP. Tracey Blythe and Sue Rosenhain from IEPCP also provided introductory presentations to set the context and purpose of the workshops.

The following report highlights the process that was undertaken, along with outputs as workshops progressed. This includes the final causal loop diagram, levers identified and individuals and organisations interested in participating in implementation of action. The report concludes with recommendations on how to progress with action and how these fit together.

Workshops

Workshops one through five

The workshop opened with a pre-recorded presentation from Tracey Blythe and Sue Rosenhain summarising the Social Inclusion Framework and the purpose of the workshops. After the presentation, the group was asked to brainstorm examples of engaging and having a voice either from their lives or from their work. Even after the presentation, most groups agreed that it was difficult to establish a clear difference between engaging and having a voice. It was explained that it would be uncommon that someone would 'have a voice' without 'engaging', but that engaging was a much broader concept that included socialising, volunteering, using services, and generally being an active part of the community. The Social Inclusion Framework identifies having a voice to include influencing decision making and exercising leadership, rather than passive participation. The examples helped participants clarify what each meant practically and how they differed from one another.

After sharing examples, the participants were introduced to the question driving the systems mapping exercise: *What factors in our community influence whether everyone has the resources, opportunities, and capabilities they need to engage and have a voice?* The participants were asked to brainstorm separately, first for 'engage' and then for 'have a voice', to reinforce the two as different, but interrelated concepts.

Participants shared the factors they brainstormed, and they were inputted around a connection circle in STICK-E. After factors had been brainstormed, participants identified connections between the factors. The maps created in the first five workshops are displayed in Figures 1 – 5 below.

After the five workshops, Andrew Brown worked with input from IEPCP on creating a combined map that summarised the perspectives across all five workshops. This combined map formed the basis for the second workshop that brought all participants together. The combined map is displayed in Figure 6 below, and a more detailed explanation of the map is included in the accompanying PowerPoint presentation.

A note on reading the causal loop diagrams

Where connections exist between variables, arrows follow on from each other, leading from one variable to the next (for example, *Equitable access to education* to *Intergenerational poverty* to *Economic equity*). In some instances, these join in a complete circle (as does the preceding example), creating a feedback loop. Feedback loops help to identify areas within the problem that may be reinforcing the problem (making that part of the problem worse or better), or relationships that are balancing each other out. More details about these loops can be found in the accompanying PowerPoint.
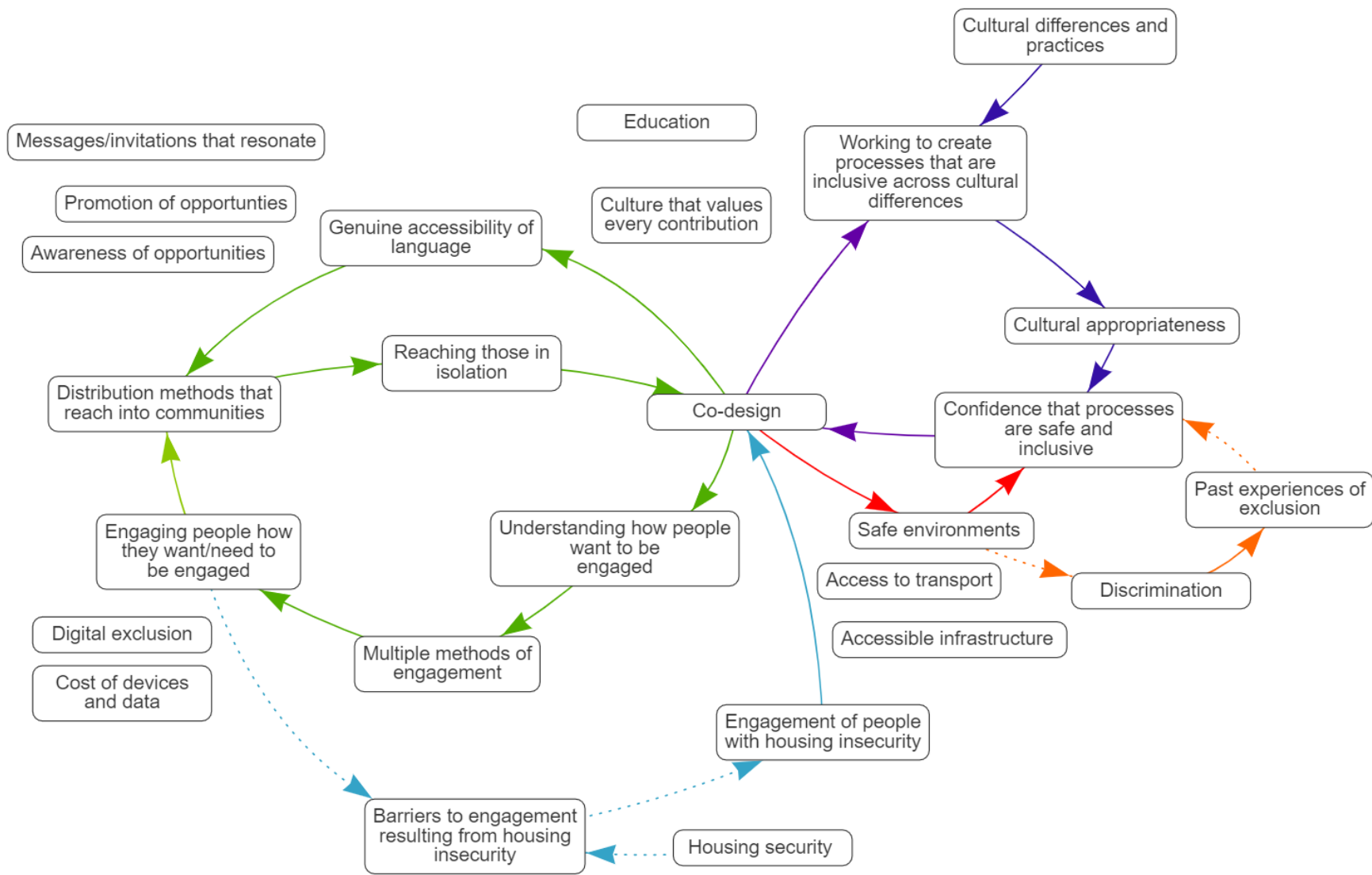
Figure 1: Causal loop diagram developed during workshop 1 of the initial 5 (Community of Practice)
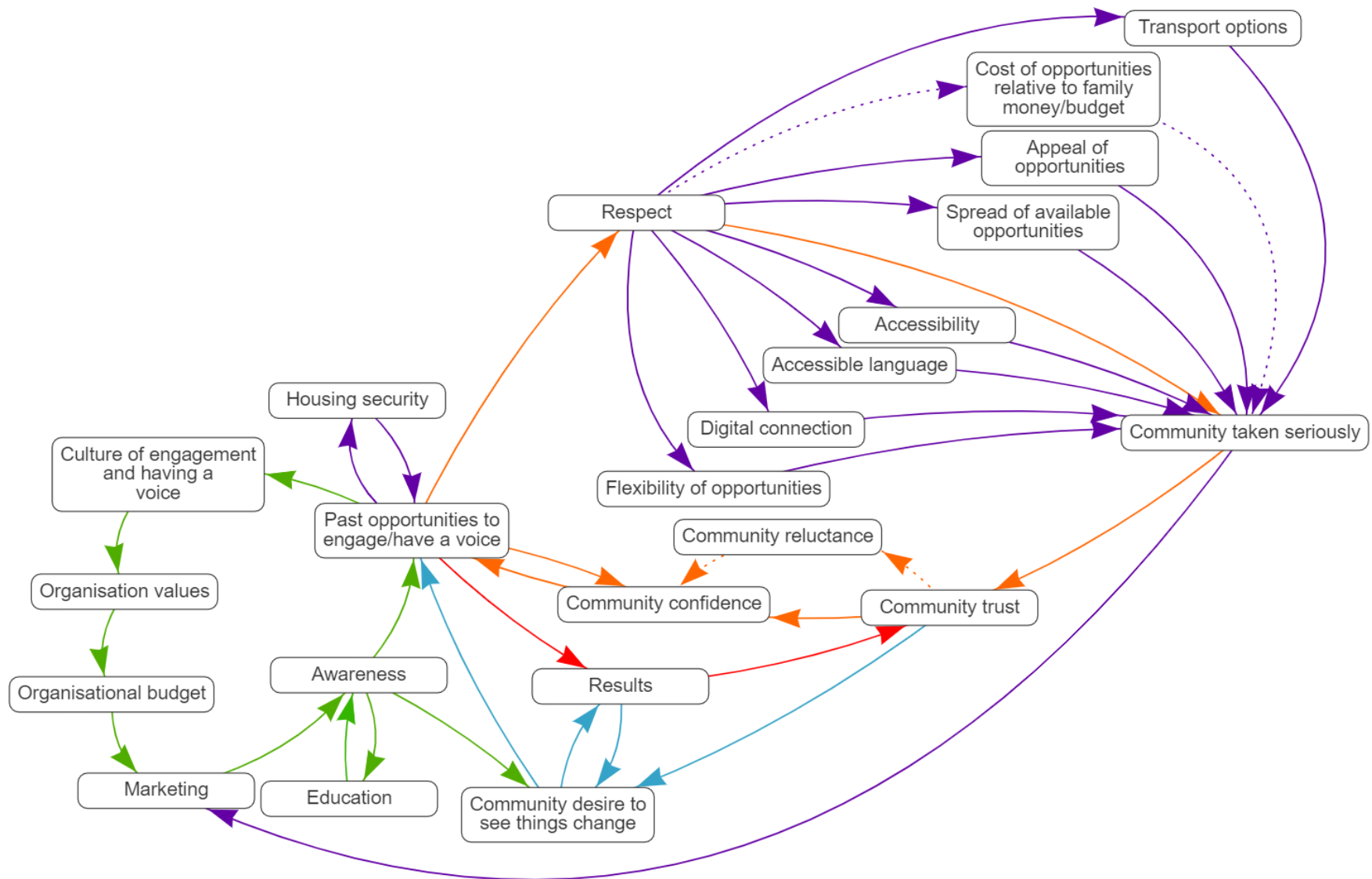
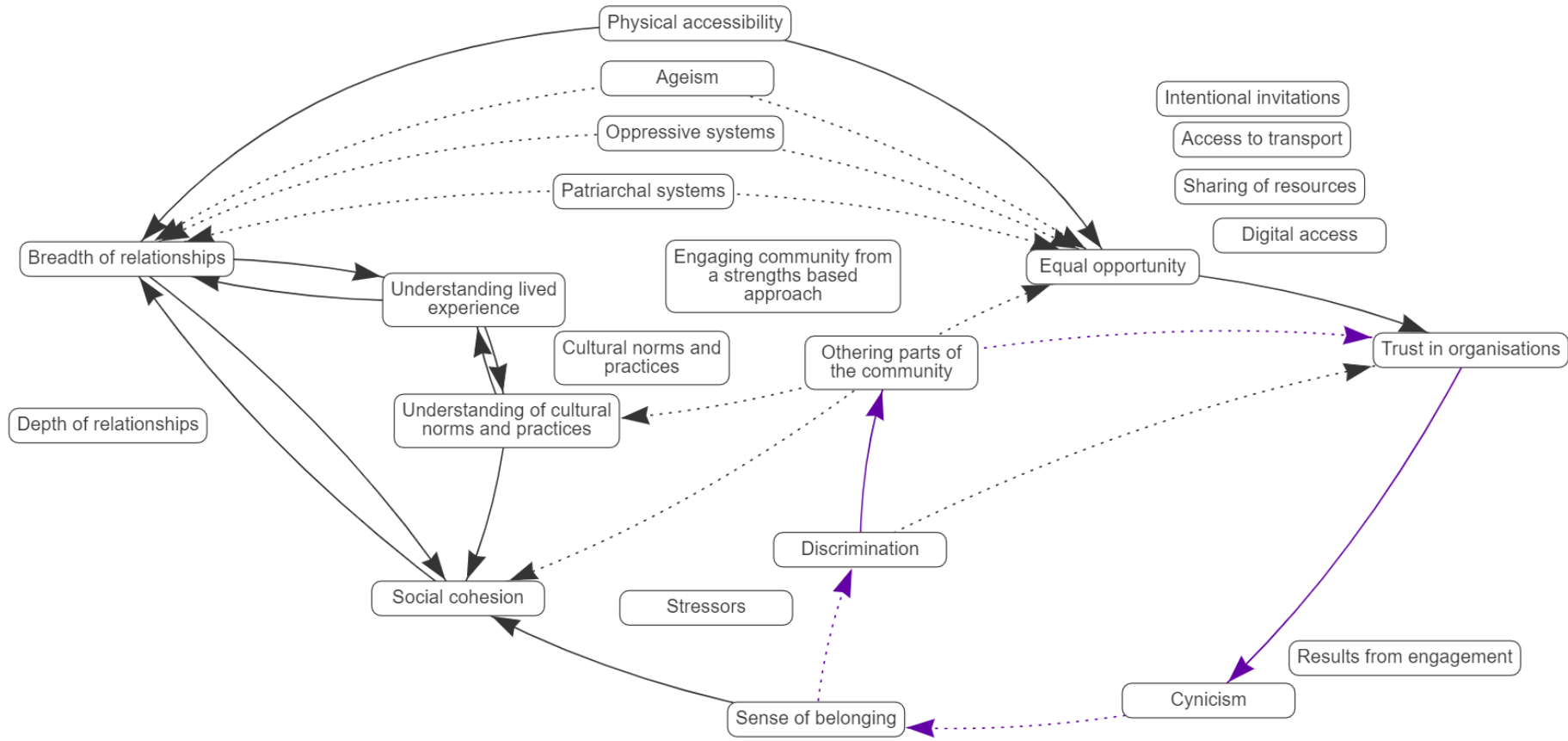**Figure 2: Causal loop diagram developed during workshop 2 of the initial 5 (Community of Practice)**

Figure 3: Causal loop diagram developed during workshop 3 of the initial 5 (Community of Practice)
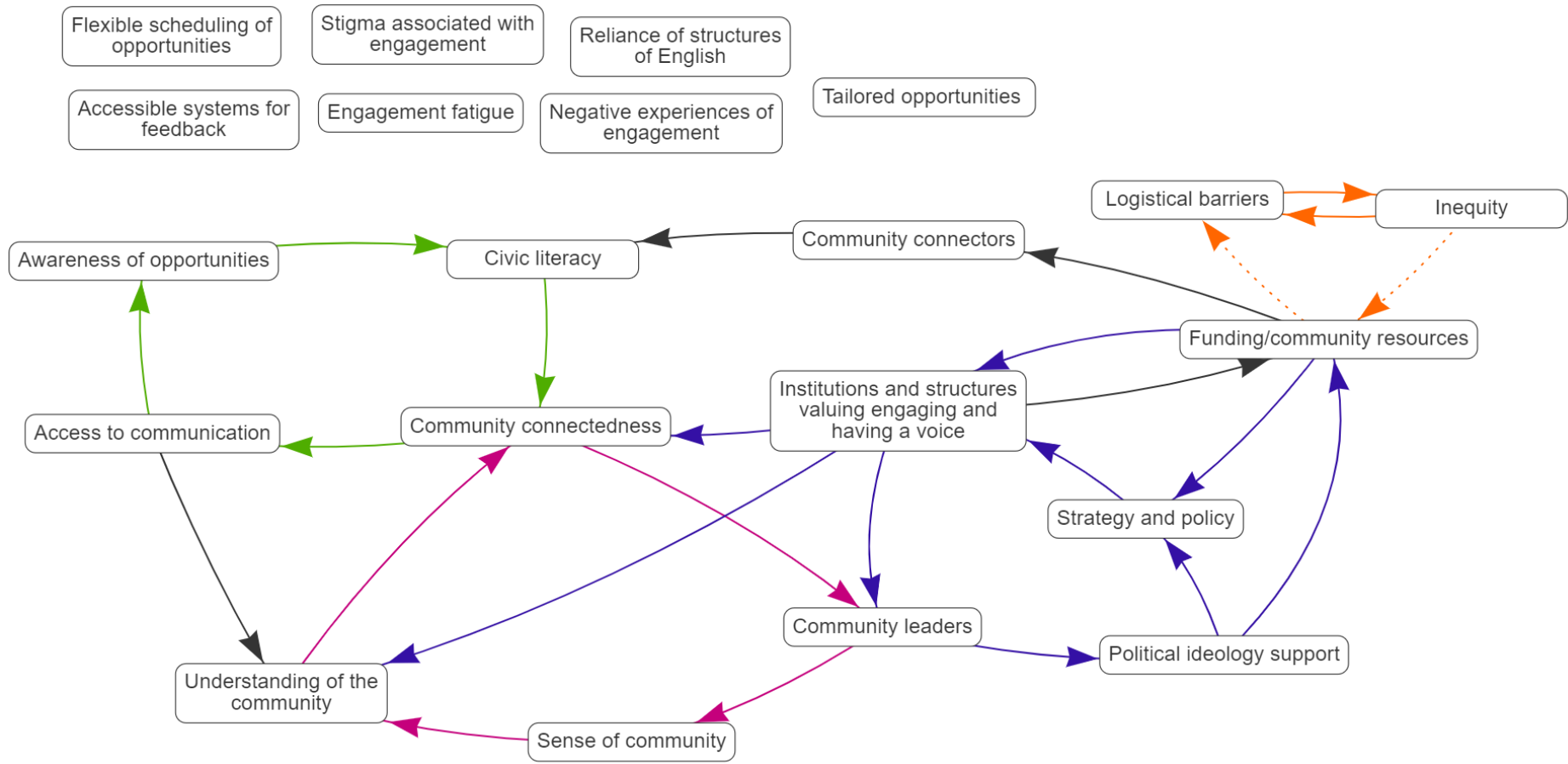
Figure 4: Causal loop diagram developed during workshop 4 of the initial 5 (Leaders)
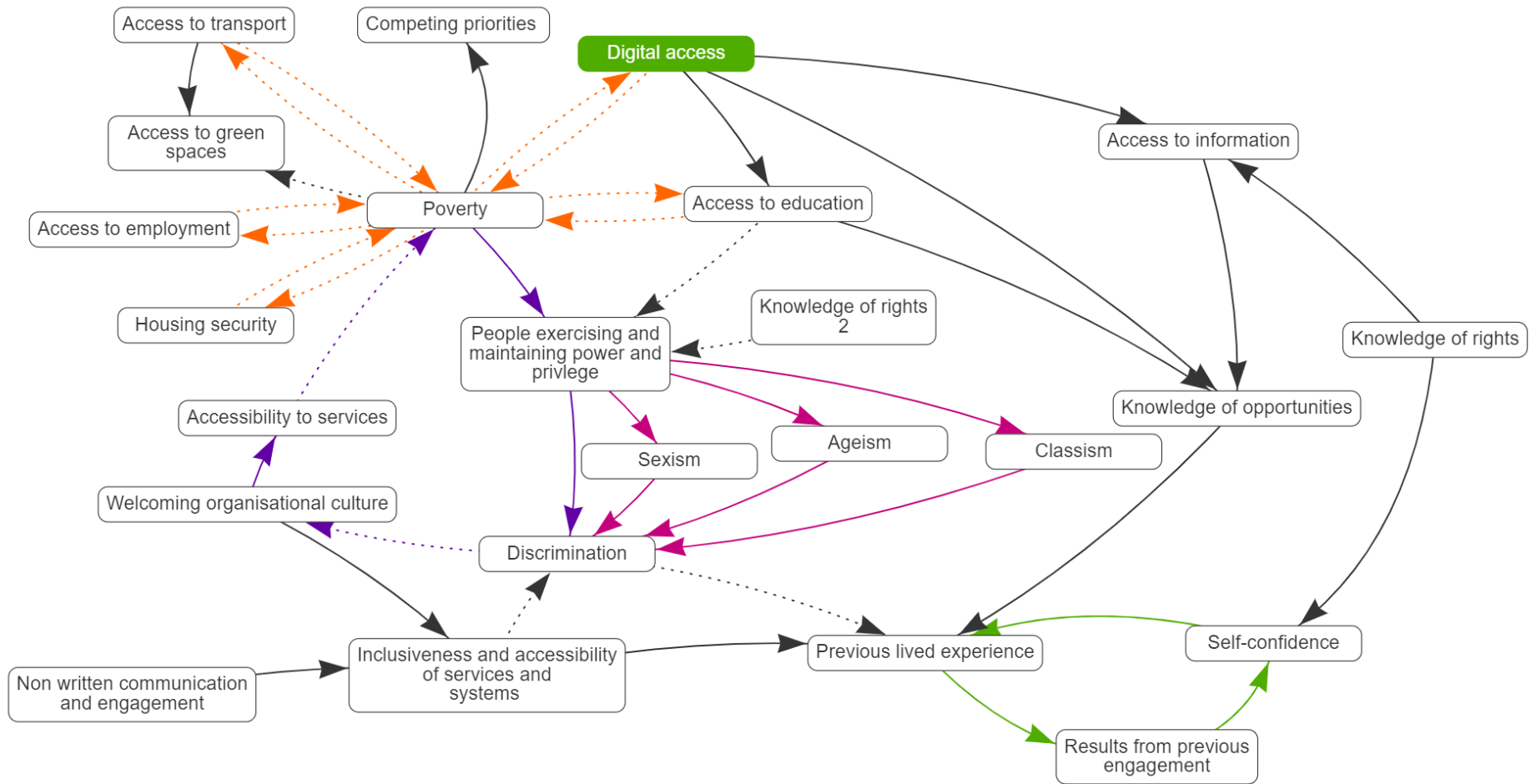
Figure 5: Causal loop diagram developed during workshop 5 of the initial 5 (Leaders)
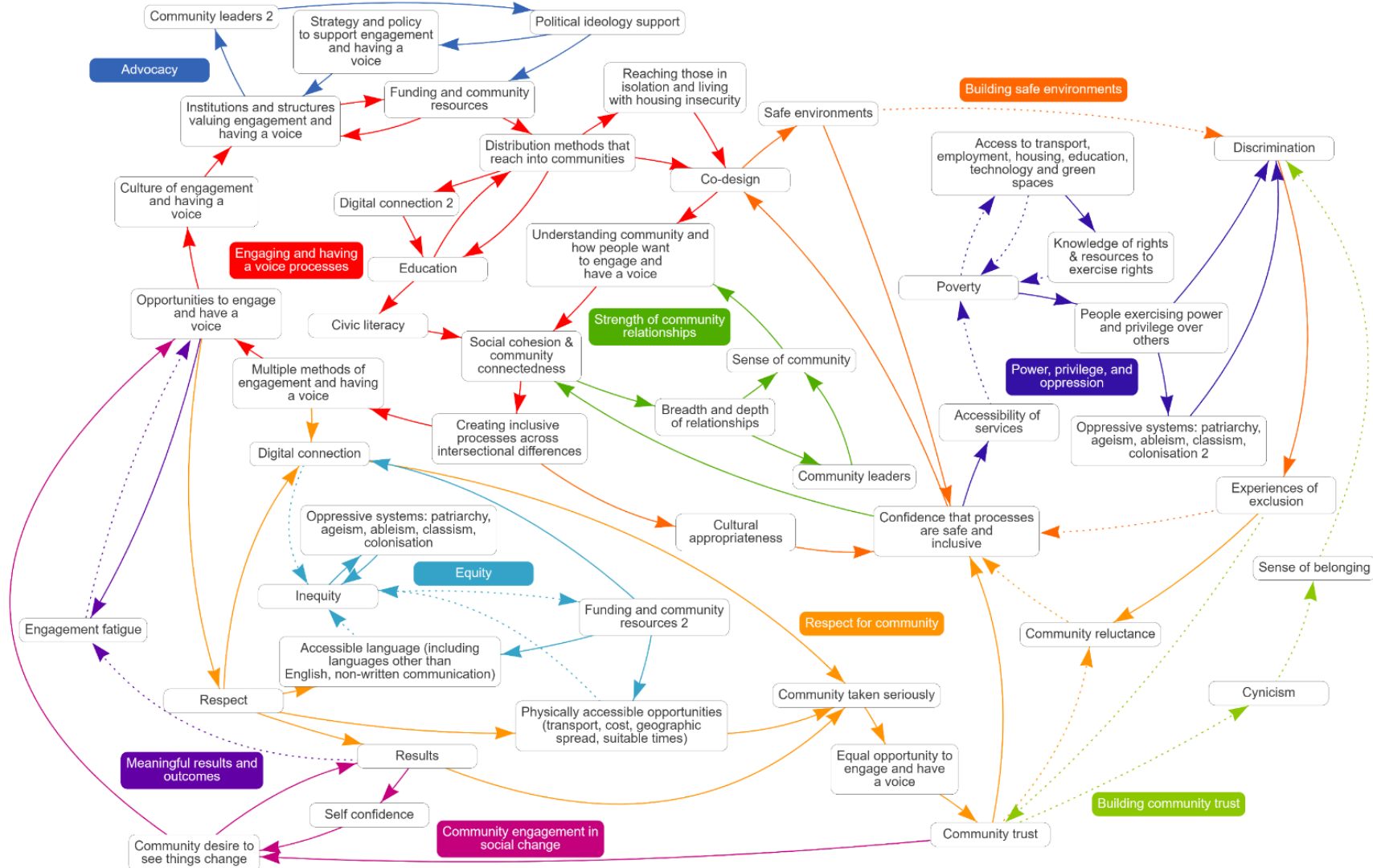
Figure 6: Final combined map (full details in included PowerPoint)

Workshop two

Attendees from the first five workshops, plus a few others who were unable to attend the initial workshops, were invited to attend a final, combined workshop to share ideas and create action. Attendees identified areas on the causal loop diagram that they felt held <u>most importance to act</u> along with areas they knew of action that was already happening in the Inner East catchment. The annotated diagram is given in Figure 7 below. Ticks denote factors where participants were aware of action that is currently happening. Stars denote the factors where participants felt new or further action is needed.

Some factors where participants identified significant existing action included:

- Strategy and policy to support engagement and having a voice
- Building a culture of engaging and having a voice
- Digital connection
- Co-design

- Distribution methods that reach into communities
- Understanding community and how people want to engage and have a voice
- Oppressive systems
- Physically accessible opportunities

Some key factors where participants saw a need for new or further action included:

- Reaching those in isolation and living with housing insecurity
- Co-design
- Oppressive systems

- Meaningful results and outcomes
- Digital connection
- Building a culture of engagement and having a voice

Figure 7: Causal loop diagram marked up by participants showing existing points of action (ticks) and most important places where further action is required (stars)

Attendees then worked in groups based on Inner East catchment LGAs to propose action ideas. People were asked to state in the chat box which ideas they were interested in working on. The top ideas proposed by each group and the potential project partners are summarised below.

Table 1: Summary of potential actions with individuals/organisation interested in supporting implementation.

LGA	Action Idea Description & Potential Project Partners
Boroondara	**Building Capacity for Social Inclusion in Eastern Region Councils** This project aims to support Councils improve the way they practice community engagement, including 'closing the loop' by making sure they feed outcomes back to the community which will help strengthen trust and engagement. This strategy also includes Councils supporting other community organisations to improve their own engagement practices and using levers to hold organisations to account (for example, via community grants or leasing/licensing agreements). **Key partners:** Eastern Metro Region Municipal Association of Victoria Inner East PCP **Potential project partners:** - Maree Guthrie – City of Boroondara - Jeff Walkley – Belgravia Leisure - Sangita Parsot – City of Boroondara - Owen Pietsch – Access Health and Community - Fiona Read – Access Health and Community
Whitehorse	**Co-Design Project to Address Barriers to Digital Inclusion** There is already work happening in the community, including work in partnership across organisations. There is also data being collected about digital inclusion, particularly during consultations. This has created a good basis to work on this issue. This idea would involve partnering with communities to understand the issue even better and do a true co-design project on digital inclusion. Some components could include advocacy and civic literacy. Additionally, there's a gap where people are being given information, but there's a need to change structures to make that meaningful. **Potential project partners:** - Lucy Wickham – Link/La Trobe Community Health Service - Jill Exon – Eastern Community Legal Centre - Angela Vidic – Access Health and Community - Karin Schwarz – City of Monash - Sarah Lausberg – Carrington healthAbility - Bronwyn Upston – Whitehorse City Council - Fiona Read – Access Health and Community

Monash	**Social Housing System Change** $5.4 billion have been allocated to drive a social housing build over the next several years. This project would focus on not losing sight of community and connecting with community to find out what they want out of social housing. Additionally, the project can involve bringing in new partners that were not previously involved. Because approvals are streamlined, there's a risk that opportunities for community consultation could be lost. To avoid this risk, a consortium could be built including local government, health services, and other partners to do high quality community consultation to understand need and complexity of community's lives. **Key Partners** State and local government Health services Relevant non-profit organisations The community themselves **Potential project partners:** • Lucy Wickham – Link/La Trobe Community Health Service • Karin Schwarz – City of Monash • Bronwyn Upston – Whitehorse City Council (indicated colleagues would be interested) • Fiona Read – Access Health and Community
Manningham	**Social Indicator Requirements in Service Delivery** This project would review contracts local government delivers, particularly services to start with. Requirements should be built into the contract that encourage dynamic and continuous community engagement. **Key Partners:** Manningham City Council **First Step:** Have a conversation with Manningham City Council. **Potential project partners:** • Maree Guthrie – City of Boroondara • Jeff Walkley – Belgravia Leisure • Sangita Parsot – City of Boroondara • Owen Pietsch – Access Health and Community • Bronwyn Upston – Whitehorse City Council • Fiona Read – Access Health and Community

Recommendations

Implementing action

Transitioning from defining a problem to implementing action is important and designing a supportive implementation structure can be a detailed process in itself. There are many *ways to progress action, from developing* smaller working groups that oversee action within each theme, to *one group leading implementation of all action*, amongst others. Regardless of the approach, open collaborative effort is critical.

Foundations for a Roadmap:

The following provides suggestions on where to start.

- Begin with those actions that have the **greatest momentum**, which could be any of the projects for different reasons. One way to gauge momentum is to follow up with participants from the workshop and see who is keen to follow up. Other indicators from the workshop include:
  - Boroondara: several potential project partners and synergy with the Manningham idea
  - Whitehorse: the most potential project partners and also existing data to justify the need for the project, creating a case to move things forward
  - Monash: connection with large pot of existing funding for social housing
  - Manningham: several potential project partners and synergy with the Boroondara idea
- Select actions that may **build on each other**, for example:
  - Participants expressed a lot of interest in combining the Boroondara and Manningham ideas and doing them in tandem, which may present an opportunity to do a bigger project with greater reach
  - Being mindful of the context is critical. Existing action was identified during the workshops and will continue to be identified. Where actions may already be in place or be starting, bolster existing action where possible.
- Begin a conversation about those areas that were marked as *important parts of the problem* but where the prioritised actions do not seem to reach or exert much influence. Participants may have felt they had little influence in these areas and so may not have proposed or prioritised action. Consider if additional action may be taken to increase attention to, or perceived power of influence over these areas.
- Regularly review and adapt actions as the context changes, including identifying and incorporating new actions. For example, if an action is not as feasible as first thought, consider revisiting the actions identified as there may be another action that is more feasible or will have greater impact as time passes.

- Research the evidence base to see whether there are established actions that have shown to be effective, rather than creating new initiatives and doing rigorous evaluation, or running the risk of trying actions that have previously not worked well.