



Successful Healthway Projects

Let's Get Physical Broome Style

Let's Get Physical – Broome Style was a pilot, culturally appropriate exercise program for Indigenous women with diabetes or those at risk of the disease.

Case Study

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Let's Get Physical Broome Style

Organisation:	Kimberley Population Health Unit
Healthway funding:	\$9,705 (Funded: Advertising, publications, child care, fitness instructors, participant transport)
Program period:	12 months
Year:	2003
Target group:	Indigenous women
Number of participants:	137

What was the project about?

The Let's Get Physical – Broome Style project targeted Indigenous women with diabetes, or those at risk of diabetes. The program was established in response to rising rates of diabetes and heart disease among Indigenous women in the Kimberley. Poor nutrition and sedentary lifestyles were identified as major modifiable health risk behaviours contributing to the disease.

The exercise program was culturally appropriate, coordinated by a local Indigenous leader and used local Indigenous women as group facilitators. Two exercise classes were held each week, in the local recreation centre during the dry season and at the local public swimming pool in the wet season. Before each class, guest speakers talked to the women about nutrition and health. The program engaged the women in regular exercise by making it enjoyable and sociable.

What strategies were used?

- The program included two exercise classes each week over one year, which were planned around school and public holidays, as well as weather conditions.
- Both low and high intensity exercise options were offered.
- The first class was free to participants, and thereafter participants agreed to pay a weekly fee of \$3 to help cover costs. No-one was excluded if they could not afford the fee.
- A short video was produced from the program to promote and encourage healthy lifestyles in other Indigenous communities in the region.
- The program was promoted in a variety of ways through a marketing campaign, which

included a public launch, advertisements and articles through Aboriginal networks and media, an 'invite a friend' day and flyers designed by participants. Relevant local organisations also promoted the program to their clients.

- Feedback was obtained through yarning sessions at the end of each class and end of term BBQs/picnics.
- Guest speakers presented culturally appropriate half-hour health education and nutrition sessions at the start of each class.
- Participants were encouraged to bring healthy food items to monthly morning teas and other social activities.
- Free transport and childcare were provided.

What did the project achieve?

- The project was successful in engaging the community.
- All the women were positive about the program and most reported changing their behaviour.
- There was considerable media interest and publicity about the program.
- The project coordinator had a fantastic relationship with the community and showed outstanding leadership and motivation.
- The program was able to continue for a period of time after the pilot due to funding from other sources, partnerships and resources.

What Healthway had to say about the Let's Get Physical – Broome Style project:

This project is a great example of a culturally appropriate health promotion program in an Aboriginal community. It is culturally sensitive in design and delivery, engages in community development and incorporates key strategies for successfully promoting health.

What Were the Effective Health Promotion Elements?

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PLANNING

The Broome Aboriginal Women's Support Group recognised the need for a project to address the high levels of diabetes in Aboriginal women in the region and approached the Population Health Unit for assistance.

Planning included reviewing local and national research into diabetes among Aboriginal women and previous health programs in the region.

A highly respected community member, who became the Indigenous Lifestyle Coordinator, was instrumental in planning the project.

A wide variety of key agencies were consulted in the planning process. These included:

- Women's Support Group.
- Aboriginal Medical Service.
- Chronic Disease Steering Committee.
- Healthy Lifestyle Team.
- Aged Care Service.
- Recreation Centre.
- Police and Citizens Youth Club.

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IMPLEMENTATION

The program coordinator and her knowledge of culturally appropriate activities and messages was a major factor in the success of the program.

Community members and participants designed the promotional materials which were widely distributed in the local Aboriginal community.

Some key barriers to participation were overcome through free transport, child care, and little or no cost to participate.

A range of recruitment strategies were used, including newspaper and local TV advertisements, radio announcements, flyers and referrals from local health service providers.

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EVALUATION

An evaluation plan was developed before the project started.

The evaluation measures included:

- Attendance records.
- Program experiences evaluation sheet.
- Feedback from the women and stakeholders.
- Pre- and post-lifestyle, knowledge, attitude and behaviour questionnaires.
- Yarning sessions at the end of each class.

The results were disseminated widely, through radio and television interviews, conference proceedings and a website.

A project video and PowerPoint presentation was provided to Aboriginal community networks.

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SUSTAINABILITY

By the end of the program further funding was secured from other sources to keep the program going. The Coordinator also adapted the program for other locations.

Broome Shire continued covering the costs of exercise instructors while local Indigenous organisations collaborated to provide transport.

The Shire of Broome and Kimberley Population Health Unit formed a partnership to ensure the program was accessible for Aboriginal women.

The Kimberley Aboriginal Medical Services Council and the Kimberley Division of General Practice collaborated to identify other possible support.

What lessons were learned?

- Child care, provided by family members or trusted carers, along with transport provision, are important considerations for health promotion programs for Aboriginal women.
- A project leader who is known and respected by the target group is crucial.
- Activities need to be provided for minimal (or no) cost.



Postal Address:
PO Box 1284
West Perth WA 6872

Telephone: (08) 9476 7000
WA statewide: 1800 198 450

Facsimile: (08) 9324 1145
Email: healthway@healthway.wa.gov.au

Web: www.healthway.wa.gov.au