Evaluation of the Regional Mental Health and Wellbeing Hubs initiative:

Evaluation Report

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Executive summary

Communities play a central role in supporting and protecting good mental health and wellbeing through fostering social inclusion, connectedness and equity, and enabling access to resources and services. This occurs through the process of community engagement, participation and cohesion, as well as through addressing specific factors within a given community that may facilitate or diminish wellbeing.

The Regional Mental Health and Wellbeing Hub initiative was established to develop, deliver and evaluate a coordinated and evidence-based approach to strengthening and embedding community awareness, understanding and capacity for improved individual and collective mental health and wellbeing. The Regional Mental Health and Wellbeing Hubs were instigated by the Queensland Mental Health Commission (QMHC) in 2016 as an initiative under the *Early Action: Queensland Mental Health Promotion, Prevention and Early Intervention Action Plan 2015-2017* (QMHC, 2015). The Hubs were developed based on the recognition that communities, local networks, schools and workplaces are primary settings for improving mental health and wellbeing and that mental health and wellbeing is more than the absence of mental illness. At the time that this evaluation was undertaken there were three Wellbeing Hubs based in Central Highlands, Logan/Southern Moreton Bay Islands and in Atherton/Cooktown.

The Regional Mental Health and Wellbeing Hubs were established to work with local communities to strengthen awareness and understanding of mental health and wellbeing, increase community capacity and facilitate access to information, training and tools to improve mental health and wellbeing, and coordinate local mental health and wellbeing networks and activity. This work was facilitated through three main foci:

1. Awareness activities (e.g. promoting the importance and benefits of positive mental health and wellbeing) with local agencies and networks;
2. Capacity building (e.g. facilitating access to information, training and skills development aimed at improving mental health and wellbeing) among key stakeholders; and
3. Coordination activity (e.g. developing and coordinating mental health and wellbeing networks and activities) through local networks and groups.

In addition to the Hub initiative, QHMC provided support to each local Hub through the establishment of a state-wide reference group, contract management processes and capacity building support, resources and training.

Evaluation of the Regional Mental Health and Wellbeing Hubs initiative

In 2018, the QMHC commissioned Griffith University to undertake an evaluation of the Regional Mental Health Wellbeing Hubs Initiative. The overarching objectives of the evaluation were to investigate:

1. Evidence that the Hubs initiative is achieving its intended outcomes, particularly in terms of improving local mental health awareness, capacity and co-ordination;
2. How the different components of the Hubs initiative have contributed to the outcomes;
3. How other factors (i.e. local conditions and circumstances) have impacted on the outcomes;
4. Actions which could be taken to strengthen and sustain the outcomes of the Hub initiative; and

5. Learnings for future place-based initiatives aimed at improving mental health awareness, capacity and co-ordination.

The evaluation utilised qualitative evaluation methods, including focus groups and interviews, to map each Hub's activities to the four domains of the Community Capacity Index (CCI) (Bush, Dower, & Mutch, 2002). As a measure, the CCI can be used formatively to identify actions to improve capacity building and the sustainability of interventions as well as a summative measure to ascertain the levels of community capacity building and sustainability that has been achieved.

The evaluation has generated information and evidence regarding the levels of community capacity achieved to date (and progress towards sustainability) in relation to:

- Network partnerships;
- Knowledge transfer;
- Problems solving; and
- Infrastructure (policy capital, financial capital, human capital and social capital).

Results

The results of this evaluation demonstrate that the established sites have built substantial community capacity to promote wellbeing, as measured by the different domains of the Community Capacity Index. The recently established Hub in Far North Queensland has also progressed well across different domains of community capacity building. Although it is acknowledged that some outcomes take time to emerge and different sites have had varying timeframes to demonstrate their potential some opportunities for further improvement were identified. As a result, a total of 12 key considerations and critical success factors were identified, including opportunities to supplement individual capacity building strategies and a greater focus on the service coordination component of the Hub model moving forward.

Key considerations

In keeping with the objectives of this evaluation a number of key considerations were identified. These included:

1.   There can be a multitude of ways to achieve community capacity success

The different ways that local Hubs have evolved demonstrates there are a multitude of ways of achieving community capacity building success. Both service-driven and bottom-up or community-driven approaches achieved results. A mix of local strategies is required to develop individual capacity and community capacity.

2.   The impact of locally responsive Hub leads

The Hub leads have been instrumental in mentoring and building capacity of community members and organisations, and their local knowledge and partnerships were key in the development of strong networks. Relationships were identified as the building block for improving mental health awareness, capacity and coordination within communities. Hub leads required an ability to work incrementally with their local communities, building relationships, making connections and supporting or coordinating activities that respond to the local context.

3.   Local community characteristics shape how Hubs form

Variations in geography, socio-economics, community identity, local services and leadership all affect community capacity building. An understanding of discrete community identities and how they influence participation in community capacity building programs is important.

4.   The importance of social capital building as a process and outcome

The development of social networks, norms of trust and reciprocity, community involvement and acceptance of others, is both an important process and a key outcome of the Wellbeing Hubs initiative. The mutual investment (sharing of knowledge and resources) and benefits (co-led activities and wellbeing outcomes) experienced between Hub members is also considered to be key to sustaining community building programs.

5.   Increased focus on mental health and wellbeing coordination functions

One area of the Wellbeing Hub model that requires further support and development to be more consistent across Hub sites, relates to the 'coordination' functions. All sites were working well with their Local Council but there was a notable absence of health service and health promotion stakeholders across the Hubs. Indeed, substantial opportunities remain to engage with a range of settings and community service partners and settings, for instance in aged care, disabilities and early child education/care.

6.   Responding to gender differences in community engagement

The majority of Hub members and participants engaged to date have been female, reflecting some of the challenges in engaging men in health promotion programs more broadly. Strategies to increase male participation in wellbeing activities across the state requires further development.

7.   The legacy of stigma and the language of wellbeing

Across sites, Hub members identified that how mental health and wellbeing was described, influenced the responses they received from community members and organisations due to the stigma surrounding mental illness. Being able to articulate the purpose and benefit of 'wellbeing' was reportedly useful to the recruitment of Hub members.

8.   The utilisation of a Wellbeing framework

All Hubs had adopted the WoW framework which provided Hub members with the ability to describe and develop a shared understanding about how to enhance the wellbeing of others. The WoW framework allowed flexibility to address macro and micro factors of wellbeing as well as working at organisational and individual community member levels. Ensuring rural and remote community members have access to training and developing the applicability of frameworks to diverse cultural communities is recommended.

9.   Complementing individual change strategies with structural solutions

The connection of actions to promote individual wellbeing and the need to undertake a collaborative (local) planning process to identify and address community needs and broader structural issues should be further promoted at a program level. This would also provide additional opportunities for local collaboration, networking and to deepen community understanding and impacts.

10.   Responsive governance and program coordination

The corporate governance of a program that operates on a bottom-up or community capacity building basis potentially presents some challenges, however, ensuring local autonomy and flexibility in funding and governance is critical. Flexibility ensures the Hubs are able to respond to local needs, adapt to community challenges and adjust resourcing priorities dependent on local contexts. The following aspects were identified as supportive:

- A process for Hub members to connect and share program information and resources, developing a community of practice (e.g. State-wide Reference Group);
- Short-term funding models presented some challenges to the sustainability of community development programs nad consideration should be given to longer term funding agreements (for instance, up to four or five years); and
- The importance of flexible funding models which allowed access to resources and processes responsive to local community needs.

11.   The need to monitor outcomes

To fully understand the implementation of the Hubs initiative and its impact, an evaluation framework and data collection systems would ideally be in place from the commencement of the project. Opportunities to standardise data collection and outcomes monitoring processes moving forward, will support greater continuous quality improvement activities in the short term, and inform strategic decision-making in relation to the funding of community-based wellbeing interventions longer-term. The monitoring of outcomes can provide a structured approach to reviewing and planning activities and including a range of evaluation processes and information collection techniques promotes collective ownership.

12.   The value of focussing on community capacity sustainability

Developing community capacity takes time and is a highly skilled practice. To this end, both the literature on place-based approaches and the learnings from the Wellbeing Hubs initiative suggested the approach to building community capacity to promote wellbeing should be characterised by:

- Agreed understanding of people and place;
- Engagement of local community, partners/stakeholders and leaders to establish common values and a shared vision
- Valuing of local knowledge and practices, assets, structures and opportunities in the development and implementation of local plans;
- Shared processes to work together, resolve emerging issues and in particular, to celebrate successes
- Shared understanding of measuring outcomes and any incremental changes (or continuous improvements) required.

1.   Introduction

1.1.   Background

The Regional Mental Health and Wellbeing Hubs were instigated by the QMHC in 2016 as an initiative under the Early Action: Queensland Mental Health Promotion, Prevention and Early Intervention Action Plan 2015-2017 (QMHC, 2015). The Hubs aimed to develop and increase the awareness, knowledge and capacity for improved mental health and wellbeing in key groups and the broader community through three main foci:

1.   Awareness activities (e.g. promoting the importance and benefits of positive mental health and wellbeing) with local agencies and networks;
2.   Capacity building (e.g. facilitating access to information, training and skills development aimed at improving mental health and wellbeing) among key stakeholders; and
3.   Coordination activity (e.g. developing and coordinating mental health and wellbeing networks and activities) through local networks and groups.

The QMHC initially funded three non-government organisations to develop and implement the Hubs in 2016:

- Centacare Central Queensland (CCQ) to lead the Central Highlands Mental Health and Wellbeing Hub;
- Relationships Australia Queensland (RAQ) to lead the Logan and Southern Moreton Bay Islands Hub;
- Supported Options in Lifestyle and Access Services (SOLAS) to lead the Townsville and Western Queensland Hub.

The Wellbeing Hub initiative aimed to review and strengthen the effectiveness of local responses to build community capacity and capability for sustainable and evidence-based mental health and wellbeing activity. The Regional Mental Health and Wellbeing Hubs were provided with support to develop individual approaches to meeting the QMHC goals allowing the processes of each Hub to reflect local circumstances/characteristics and evolve as needed. The Hubs were initially funded for two years, with funding recently extended for a further two years. In 2017, SOLAS advised it would be unable to continue implementation of the Townsville and North Queensland Hub. In 2018, Centacare Far North Queensland (CFNQ) was appointed to develop and lead the new Far North Queensland Wellbeing Hub.

In addition to the locally-based Hubs, the QMHC provided each Hub with a number of state-wide supports. These supports included flexible contract management processes and supports, the establishment of a Reference Group and support for members to attend meetings, and access to internationally recognised tools, resources and training for Hub members to build knowledge and skills in mental health and wellbeing capacity building frameworks.

Figure 1 provides an overview of the program logic for the Wellbeing Hubs.

Inputs	Outputs	Outcomes -- Impact		
	Activities	Shorter term	Medium term	Longer term
Three regional mental health and wellbeing hubs acting as backbones with support from Commission. Regular reference group meetings to support and guide shared action. Queensland Mental Health and Wellbeing Capacity Building Program to help Hubs develop shared skills. Existing community infrastructure and in-kind support from community agencies, groups, networks including local government. Communities of practice to support ongoing skills development in Hubs partners	Awareness activities (e.g. promoting the importance and benefits of positive mental health and wellbeing) with local agencies and networks. Capacity building (e.g. facilitating access to information, training and skills development aimed at improving mental health and wellbeing) among key stakeholders. Coordination activity (e.g. developing and coordinating mental health and wellbeing networks and activities) through local networks and groups.	Service providers, organisations and community members have a greater awareness and understanding of mental health and wellbeing and the role they play in supporting it. Increasing numbers of service providers, organisations and community members participate in local mental health and wellbeing initiatives. Service providers, organisations and community members develop new knowledge and skills that support the promotion of good mental health and wellbeing. Services providers, organisation and community members increasingly collaborate to deliver mental health activities in their communities	Services providers, organisation and community members increasingly take a leadership role in promoting mental health in their communities. Service providers, organisations and community groups incorporate the promotion of mental health into local planning processes, programs, services and events. Community members increasingly engage in behaviours that their support good mental health and wellbeing and experience improved mental health and wellbeing.	Mental health and wellbeing improves at a population level (e.g. positive emotion, ability to cope with challenges, resilience, reduced psychological distress, improved quality of life). Social capital is enhanced at a community level (e.g. increased community participation and inclusion for vulnerable groups, and improved capacity to respond to adversity). Early detection of mental ill-health increases and access to support at the early stages of mental health problems and during recovery is improved.

Figure 1. Regional mental health and wellbeing Hub program logic

1.2.   Wellbeing and mental wellbeing

Good mental health and wellbeing is associated with a wide range of factors including: improved physical health; improved life expectancy; better learning outcomes and educational achievement; creativity; increased productivity; increased resilience and coping in the face of challenges and difficulties; and supportive and cohesive communities (QMHC, 2016). A well-known definition of health is the World Health Organisation's (WHO) statement: 'a state of complete physical, mental and social wellbeing, and not merely the absence of disease of infirmity' (World Health Organization, 1946, p. 100). Mental health is clearly an integral component in this definition of health and is described by WHO as a 'state of wellbeing in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community' (World Health Organization, 2014). Historically, mental wellbeing has been misunderstood and forgotten conversations about health but is now gaining priority within international health development agendas (World Health Organization, 2005).

Mental health has been described as the foundation for wellbeing and effective functioning for both individuals and communities (World Health Organization, 2005). Subjective wellbeing, or the mental state account of wellbeing, is based on aspects of preference satisfaction; allowing individuals to

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decide how well their life is going for them, without someone else deciding their wellbeing (Dolan & Metcalfe, 2012). Mental wellbeing has been conceptualised as a positive emotion (feelings of happiness), as a personality trait (inclusive of resources such as self-esteem and mastery) and resilience (capacity to cope with adversity) (World Health Organization, 2005). Capacity for optimal functioning, confidence in being able to formulate and act to fulfil important goals and the motivation and energy to persist in the face of obstacles are all aspects of subjective wellbeing (Ryan & Sapp, 2007).

Whilst a focus on individual wellbeing is understandable, there is increasing recognition that there are structural, cultural and environmental factors which can impact on an individual's ability to adopt healthy lifestyle choices. Mental wellbeing is an important resource for individuals, families and communities and social capital and cohesion can support wellbeing (World Health Organization, 2005). Within health services, health promotion is gaining attention as strategies are based on the question of how health is created, and aims to offer people more control over the determinants of their health (World Health Organization, 2005). Social capital, cohesion and connectedness have been identified as important in the support of mental wellbeing (Berry, 2009; Collins, Ward, Snow, Kippen, & Judd, 2017). It is clear that community-based interventions can support both individual and community mental wellbeing, provided that they take into account the influence of the characteristic of local communities and places (Wall et al., 2009).

1.3.   Community capacity building

Communities play a central role in supporting and protecting good mental health and wellbeing through fostering social inclusion, connectedness and equity, and enabling access to resources and services (QMHC, 2016). There is broad international consensus that building the capacity of communities, organizations and systems is a critical area of action for tackling the public health challenges of the 21st century. Building community capacity has been identified as necessary condition for the development, implementation, and maintenance of effective, community-based health promotion and disease prevention programs (Goodman et al., 1998). Community capacity building (CCB) has been defined as a health promotion intervention which involves the use of community action in improving and promoting the health of community members (Raeburn, Akerman, Chuengsatiansup, Mejia, & Oladepo, 2006). Seen as an empowering form of health promotion, CCB has a 'bottom up' and strengths approach which focuses on the skills and abilities that enable a community to take action rather than focussing on deficits (Lovell, Kearns, & Rosenberg, 2011). Building community capacity involves efforts across several domains including the development of knowledge, skills, structures, resources and commitments to health improvement (Millar et al., 2013).

CCB can be viewed as an aim in itself, fostering the role of community as a natural process for identifying and implementing solutions for diverse health needs (Labonte, Woodard, Chad, & Laverack, 2002). Literature identifies the multiple dimensions of CCB including ideas of leadership, civic participation, skills, access to resources, social networks, community control, self-determination, sense of community, community history and values, and critical reflection (Goodman et al., 1998; Raeburn et al., 2006).

Community capacity reasons that the people are more likely to change behaviours if they have had a voice in the design and implementation of the intervention and the outcome is meaningful and relevant to themselves and the community they live within (Traverso-Yepez, Maddalena, Bavington,

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& Donovan, 2012). Advantages to CCB include better access and impact on target populations, better use of resources, increased local competence and commitment to change and increased community ability to respond to emerging issues (Liberato, Brimblecombe, Ritchie, Ferguson, & Coveney, 2011). Strong communities possess the skills, resources and networks to advocate effectively, respond to uncertainty and challenges, and possess the capacity to absorb and survive change (Lovell, Gray, & Boucher, 2015).

Often understandings of CCB are service oriented (Mills, Rosenberg, & McInerney, 2015). Although CCB has a focus on community-determined processes, there are frequently professionals or others in authority involved (Raeburn et al., 2006). CCB does not need to rely solely on individuals and can be strengthened by the involvement of organisations and institutions (Jung & Choi, 2013).

CCB is a difficult concept to measure and as a result, its value is often disputed or under-estimated. Reviews of CCB suggest the benefits to be gained from strengthened community processes can take years, and even generations for capacity building to translate into improved health outcomes (Crosby & Noar, 2010). CCB is about building sustainable skills, organisational structures, resources and commitment to health (de Groot, Robertson, Swinburn, & de Silva-Sanigorski, 2010). CCB has the potential to contribute to community wellbeing, however, it is important to remember that CCB is a process rather than a final destination (Noya & Clarence, 2009). CCB needs to be a community driven activity and is not something which can be maintained from outside communities.

2.   The Regional Mental Health and Wellbeing Hubs

In keeping with the Regional Mental Health and Wellbeing Hubs initiative intent, each Hub has developed, implemented and supported its own particular approach to improving awareness, capacity and coordination, reflecting local needs and circumstances. The following sections will outline how each Hub has approached the promotion of wellbeing within their own region as well as discussing state-wide supports provided by the QMHC.

2.1.   The Logan and Southern Moreton Bay Islands Mental Health and Wellbeing Hub

The Logan and Southern Moreton Bay Islands (SMBI) Hubs have focused on working with local services to embed wellbeing. The Logan community is a large, metropolitan community, multi-cultural with many residents of low socio-economic status. Logan has a number of established mental health and community organisations and resources and as a result, the Hub took the approach of building on existing networks to engage stakeholders in the promotion of wellbeing.

The Hubs have engaged with local community collectives, initiatives, networks and services to identify community wellbeing needs and utilise frameworks such as Wheel of Wellbeing (WoW) to promote individual wellbeing as well as build the capacity of service providers and organisations to the structural or community-level determinants of wellbeing.

RAQ was chosen to lead the Hub in the Logan area and the SMBI. RAQ aimed to build and develop the awareness, knowledge and capacity for improved community wellbeing in key groups and the community. The Logan and SMBI Hub identified key individuals and networks in the community, industry and government to involve in the project and provided WoW training to a number of organisations and individuals. A number of training and WoW activities are reported in the documentation. Due to staff changes, a new Hub lead from RAQ was appointed to the Logan and SMBI Hubs earlier this year.

As represented in the visual harvest of information collected as part of the evaluation workshop (Appendix 5), the Logan/SBMI Hub has worked through three different phases of development since its inception. In the first year the focus was on stakeholder engagement and awareness raising (including raising awareness of WoW). The second year had a bigger focus on capacity building including more training as well as brokering partnerships to address local community issues and the social determinants of wellbeing. The final year of activities has seen the focus shift to increasing the visibility and sustainability of local actions to increase wellbeing in Logan and SMBI communities.

2.2.   The Central Highland Mental Health and Wellbeing Hub

CCQ established the Hub project in the Central Highlands (CH) in February 2016, supported by Central Highlands Regional Council and Central Queensland Rural Health. The CH Hub is facilitated by a part-time lead, supported by a project manager. The Hub has taken a community development focus due to the rural and remote nature of the communities in the area and the lack of formal support services. The focus of this region was to equip groups of community members to take the lead in ensuring mental health and wellbeing is supported in the different communities. During the initial stages of the Hub development, the Hub lead approached existing community reference groups and community stakeholders to gauge community interest in, and capacity to, participate in the Wellbeing Hub initiative. As a result, four satellite Hubs across the region have been developed

– in the communities of Blackwater, Capella/Tieri, Sapphire Gemfields and Springsure. At the time of the evaluation, Hub representatives from the Springsure area were not available, and as a result the evaluation is focused on the other satellite Hubs.

Each of the satellite Hubs exist in communities which differ significantly in terms of populations, industry and employment options and health and wellbeing needs. Blackwater and Tieri are primarily mining towns with fly-in-fly-out (FIFO) and transient populations. The satellite Hub members were able to identify community wellbeing needs in terms of supporting and connecting families new to the area, providing young people with appropriate activities and supporting the mental health of the FIFO workforce. The Sapphire Gemfields was described as a mining and tourism town with a population of 2500, increasing to 6000 over the tourism season. Community members are transient and there is difficulty recruiting and retaining health workers to the area. In contrast, Capella is an established township with a history of agriculture, experiencing an aging population. In both of these communities Hub members identified a need to facilitate closer community connections to allow community members to support each other, preventing isolation and loneliness.

As a result of community engagement activities and processes, each of these satellite Hubs has established a group of interested and motivated local volunteers. The Hub lead has provided mentoring and coordination support to these group of volunteers, promoting the participation in, planning and delivery of Hub initiatives and activities. The Hub lead has assisted each satellite Hub to develop local actions plans. In addition, a number of Hub members have been trained to use WoW activities and processes in the promotion of wellbeing. The satellite Hubs have focused on attaching much of their activity to existing events in the community and developing relationships with existing community initiatives and organisations. More recently a number of other local community reference groups and Councils have expressed interest in the Wellbeing Hub initiative. Middlemount, Dysart and Biloela communities have commenced discussions with the Hub lead regarding the Hub initiative. In the last six months the CH Hub has experienced a change in Hub lead staff.

2.3.   Far North Queensland Mental Health and Wellbeing Hub

In early 2018, a new Wellbeing Hub site was established, with CFNQ identifying the Atherton Tablelands and Cooktown (including Wujal Wujal and Hope Vale) as Hub sites within the region.

The Atherton Tablelands is situated inland from Cairns and encompasses a number of townships including Atherton, Malanda, Tolga, Mareeba and Herberton. The region is supported by agriculture and farming industry along with tourism and mining. A number of common community issues including unemployment, an aging population, limited economic investment, reduction in ability to maintain sport and recreation activities and resources, and families leaving the area were identified across the region. Since establishment, the Atherton Tablelands Hub has primarily focused on engaging with services and existing community networks in the local region. The Hub lead has concentrated on forming and consolidating Hub membership and building a more collective understanding of wellbeing. This has been achieved by focusing on the development of relationships and networks through identifying key stakeholders and the promotion of WoW as a framework for understanding wellbeing.

WoW training was delivered early in the establishment of this Hub. An expression of interest (EOI) process was undertaken to recruit community organisations, services and members to attend the WoW training. The EOI process was seen as important in providing people with some background information about wellbeing, engendering enthusiasm and promoting self-selection to the Hub. Those attending the WoW training have developed a community of practice and Hub members have been involved in a number of successful WoW activities. The Hub has recently been involved in the successful local Maize festival, in which the WoW framework was utilised to structure the festival themes and activities over the next few years. Embedding principles of WoW within local organisations, service delivery and policy has been a focus of many of the Hub members.

The Hub lead has provided support to Hub members to develop WoW activities and resources, develop relationships and promote networking and understanding of the Hub. Assistance activities has included: supporting communication and networking between members, developing Wow activities and resources, site visits to develop relationships and promote networking, collation of data and records of activities. Hub lead also presents at community committees, organisations and Tablelands Regional Council to promote Hub activities.

In contrast, Cooktown and its surrounding areas are in an isolated region of Queensland. The remoteness of these communities requires extensive travel to enable face-to-face contact, with extreme weather events occasionally cutting off communities from each other and access to larger regional centres (e.g., Cairns). Cook shire is the largest shire in the country and reliable communication can be difficult due to telecommunication and internet issues. After initial scoping conversations with key stakeholders within the Cooktown communities, a decision was made to initially focus on Cooktown, Wujal Wujal and Hope Vale in the Hub development.

Each of these townships has very different community needs and processes. Cooktown has a population of 2600 focused on providing services to the region or tourism. Hope Vale and Wujal Wujal are small Aboriginal townships (population approximately 1000 and 300 respectively) which are serviced by different Aboriginal Shire Councils.   The Hub lead has identified that time to develop trust with local communities is needed to support the development of cohesive partnerships within these communities. The Hub lead has been focused on identifying existing networks and community partnerships to commence conversations about wellbeing. During 2018, the Cooktown region has had a change in Hub lead staffing. The focus of the new staff member is to continue the scoping and planning activities for the three diverse communities in this region. Hub activities will capitalise on established relationships with youth and over 60's community groups.

2.4.   State-wide support and capacity building

Alongside the Hub initiative, the QMHC provided a number of central supports to the Hub staff. A Queensland Hubs Reference Group was established, comprising of representatives from the Hubs, QMHC and key representatives to support and monitor the planning, implementation and evaluation of the Wellbeing Hubs. The Reference Group has met regularly to discuss progress, share information and promote collaboration. The QMHC provided support to Hubs with contract management processes to ensure an appropriate level of flexibility and governance which was required to develop and implement locally-based responses to achieve the Hub goals.

Parallel to the establishment of the Regional Mental Health and Wellbeing Hubs (Hubs) initiative, the Commission also invested in a cross-sectoral Mental Health and Wellbeing Capacity Building Project

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(Capacity Building Project) through Implemental (formerly Maudsley International). The Capacity Building Project aimed to enhance the mental health and wellbeing awareness, knowledge and skills of key stakeholders across community, non-government and government sectors. This included personnel associated with the Regional Mental Health and Wellbeing Hubs; Queensland government policy officers and service providers; and community and non-government service providers. Hub personnel have engaged with the Capacity Building Project to develop knowledge and skills in mental health and wellbeing capacity building frameworks.

Whilst the Hubs were able to use any (suitable) framework to build mental health and wellbeing capacity, the Capacity Building project has focused on two main mechanisms of building capacity: Mental Wellbeing Impact Assessment (MWIA) and the Wheel of Wellbeing (WoW). Additionally, the WoW Support Program was established within the Capacity Building Project to further support WoW practitioners, including Hub personnel, to further embed and sustain WoW in Queensland. The QMHC also supported local Hub members to present at conferences and disseminate learnings.

Mental Wellbeing Impact Assessment

The MWIA process is a systematic and structured assessment process that identifies how new and existing policies, programs, and services can both promote and minimise risks to mental health and wellbeing. The MWIA screening tool can be used to assist stakeholders who are planning or implementing policies, programs and services to explore how they might make a difference to mental well-being as part of their planning and implementation work.

Using Health Impact Assessment methods, MWIA focuses on the factors that are known to promote and protect mental well-being (Coggins et al., 2007):
- a sense of control over one's life including having choices and skills
- communities that are capable and resilient
- opportunities to participate, for example in making decisions or through work
- being included and connected.

MWIA participants are trained to use the MWIA Screening Toolkit to assist organisations to make initial evidence-based assessment of the impact of policies, programs and services on mental wellbeing. This is then applied to real-life screening practicals to consolidate learning.

The Wheel of Wellbeing

Based on positive psychology, WoW is a flexible framework that represents six universal themes (Figure x) that contribute to mental health and wellbeing (Coggins, 2014):
- Body (health, fitness and being active);
- Mind (learning, skills, creativity and thinking);
- Spirit (meaning, giving, positive emotions and health);
- People (connecting to others, friends and family);
- Place (taking notice, surroundings, neighbourhoods); and
- Planet (caring for the environment, sustainable happiness).

Better understanding of these six themes can enable us to lead happier, healthier and more meaningful, connected and productive lives. The WoW framework links each of the six themes to positive action.

Figure 2. Wheel of Wellbeing

In Queensland, WoW has been used in a range of contexts including by individuals, within communities, in government and non-government agencies and organisations, in schools, as well as in workplaces.

Two types of WoW training are offered in Queensland through the Commission: WoW Intensive training and WoW Advanced Practitioner (AP) training.

WoW Intensive training

WoW Intensive training is an adaptation for Queensland of Implemental's eight-session Do It Yourself Happiness program, which was designed to be run with community groups over eight weeks. Delivered over five days, WoW Intensive training provides participants with an understanding of the concepts underpinning good mental health and wellbeing, a grounding in the WoW framework, and introduces simple tools that can be used to help people improve mental health and wellbeing. As part of their training, participants deliver as part of a team, a one-day 'Introduction to WoW' workshop. Following completion trainees are verified to deliver half-day and full-day 'Introduction to WOW' awareness workshops and are given access to relevant lesson plans, resources and support through the Commission's agreement with Implemental.

WoW Advanced Practitioner training

A small number of participants who have completed WoW Intensive training are able to undertake a train-the-trainer program to become WoW Advanced Practitioners. The WoW Advanced Practitioner program requires the trainees to attend four days of training and planning sessions to prepare them for delivery of a WoW Intensive training program; participants then co-deliver a WoW Intensive program and oversee and support a small group of WoW Intensive trainees in the delivery of a one-day 'Introduction to WoW' Workshop.

Following completion of WoW Advanced Practitioner training, participants are verified to deliver the Do It Yourself Happiness program and WoW Intensive training, to provide mentoring and support to other WoW facilitators, and contribute to the promotion and development of WoW capacity across Queensland.

Whilst there are a range of tools and frameworks available to the Hubs to build capacity, in particular the WoW framework has resonated with a wide range of stakeholders in a range of contexts. Through the Capacity Building project, five Regional Mental Health and Wellbeing Hub personnel have undertaken Advanced Practitioner training, and two Hub personnel participated in MWIA training.

3. Evaluation

3.1. Method

A Reference Group was established to ensure that key stakeholders were engaged in all aspects of the research, strengthening relationships and ensuring relevancy of the research questions.

The evaluation process primarily utilised qualitative evaluation methods to gather information and capture processes and outcomes at each Hub site. The CCI (Bush, Dower, & Mutch, 2002) was utilised in this evaluation as the domains map closely with the evaluation aims and outcomes (Appendix 1). Workshops with key stakeholders in each region were undertaken, facilitated by two members of the research team and audio-recorded to ensure information was accurately represented. The interview schedules were shared with local Hubs and opportunities to continue using the tool on an annual basis (by the Hub members) were discussed in the evaluation workshops.

In addition to the local consultations, a SWOT (strengths, weaknesses, opportunities and threats) analysis workshop with key members of the Reference Group was held to gather evaluation feedback on the State-wide support provided to the Hub initiative.

3.2. Recruitment

The Hub lead in each region was approached to advise and assist in the recruitment of Hub members to participate in the evaluation focus groups. Information sheets (Appendix 2) were provided for dissemination to stakeholders and Hub members to assist in recruitment. A Reference Group was established to oversee the evaluation and provide feedback regarding the evaluation process. Members of the Reference Group were invited to participate in the SWOT analysis of the State-wide support mechanisms. Consent (Appendix 3) was obtained from each participant prior to the focus group/workshop.

3.3. Data collection

Logan and Southern Moreton Bay Islands Hub

Information gathering processes for the Logan and SMBI Hubs were undertaken in the first two weeks of June 2018. The workshop for the SMBI Hub was held on Thursday 7 June, 2018 on Macleay Island and was attended by local residents and visiting service providers (n=7). The Logan workshop which comprised primarily services providers (n=15), was held on Friday 15 June.

Each of the workshops began with a storytelling session reflecting on how the Wellbeing Hubs have been operationalised and inviting Hub members to share their respective involvements. This was followed with a guided conversation or group interview based on the CCI Checklist. The information derived from the storytelling and group interview processes was summarised and represented diagrammatically by an expert consultant in visual harvesting. As per the evaluation plan an additional 'community engagement' process was always planned for the Logan workshop given the size and diversity of stakeholders involved, hence the use of storytelling and visual harvesting methods. This also provided another perspective to check understanding and theming of the data collected and was used to summarise workshop findings with participants.

The Logan/SMBI Hub Coordinator negotiated for Redland City Council to fund the visual harvesting so this could be undertaken for the SMBI workshop too. Results of the visual harvesting for the

SMBI and Logan workshops are presented in Appendix 4 and Appendix 5, respectively, and have been presented to the Hub Coordinator. As some key Hub members were identified in the visual harvesting, advice from the Human Ethics Officer suggested obtaining consent from those participants to be identified in the visual representation of results, and a variation to the ethics approval for this project was approved on this basis.

Information collected from evaluation workshops was made available to Hub stakeholders for review and further input prior to the finalisation of results.

Central Highlands Wellbeing Hub

To better understand the priorities and processes for each of the communities identified in the

Central Highlands (CH) region, two focus groups were undertaken (17th and 18th of May, 2018). The researchers travelled to Blackwater on 17th May and met with the Blackwater Hub members (n=5). A second focus group was undertaken on 18th May with the Hub lead and Capella, Tieri and Sapphire Gemfields satellite Hub members (n=4). The CCI guided the conversations during these focus groups and a report was completed by researchers following the visit. Each focus group participant had the opportunity to review the reports and make comments or changes to the documents.

Far North Queensland Hub

The evaluation team travelled to Cairns on 31st of May 2018 to meet with the Hub leads (n=3) to

review the Hub activities and processes as outlined in the CCI. On the 1st June, 2018, the researchers attended the WoW training in Atherton to speak with Hub members (n=11) to complete CCI data collection. The Hubs were provided with the reports for comment. This 'baseline review' will assist stakeholders to identify and plan the range of community capacity activities that could potentially be implemented in their local communities to promote mental health and wellbeing and will also provide a useful reference point for any future evaluation activities.

State-wide support and capacity building

In addition to the information derived from the local Hubs, information received from Project Reference Group, document and literature review and information from other key stakeholders (as appropriate) was included in the evaluation. A SWOT analysis workshop took place with the Reference Group on the 3rd of October, 2018, to gather information about the state-wide support and governance mechanisms. Key members of the reference group attended (n=9) and QMHC staff (n=2) participated in the first half of the workshop, but left the room for the final half to allow members open communication with the research team. Extensive notes of the discussion were taken by a research team member to reflect the conversations and priorities of the workshop participants.

3.4. Ethics Approval

Full ethics approval (GU Ref No: 2018/185) for the proposed evaluation plan, including participant information and consent forms and interview guide was obtained from the Griffith University Human Research Ethics Committee.

3.5. Data analysis

Data collected through the workshops, focus groups and any individual conversations was synthesised in respect to the four domains of the CCI. Reporting includes evidence of the progress made in respect to each domain as well as identification of actions which can be taken to strengthen and sustain community wellbeing. In addition, the results of the evaluation were reported against the shorter and medium-term outcomes identified in the Program Logic for the Wellbeing Hubs. These outcomes include:

- Awareness and understanding of mental health and wellbeing within communities and how to support this;
- Identifying numbers of organisations and community members participating in local wellbeing initiatives;
- The development of new knowledge and skills that support promotion of mental health and wellbeing;
- Increasing collaborations which deliver mental health activities in the community;
- Identifying leadership in promoting mental health within communities;
- Understanding how mental health and wellbeing issues have been incorporated in local planning processes, programs and events; and
- Increasing engagement in behaviours that support mental health and wellbeing.

4.   Results

The results of the CCI administration are reported separately for each Hub site in Appendices 6-11. A summary of progress against each of the domains is presented for the Hubs below.

4.1.   Logan and SMBI Hub Summary

Network partnerships

Deliberate engagement strategies that responded to the local communities of Logan and SMBI have been effective in establishing solid network partnership for both the Logan Wellbeing Hub (e.g. use of snowballing technique) and SBMI Hub (which has engaged ten organisations through a memorandum of understanding).   There are nevertheless key differences between the Hubs established in these sites with Logan Hub investing heavily in organisational and intersectoral partnerships and training delivery and the SMBI Hub taking more of a local action group approach. Both networks operate with different levels of formalisation with memorandum of understandings developed in the SMBI context and more organic or 'fluid' partnership evident within the Logan Hub. Despite the achievements which have been made in engaging different community members and service providers in the Wellbeing Hub initiative, opportunities to further engage with diverse groups and build community ownership have also been identified as part of the evaluation workshop process.

Knowledge transfer

This Hub appears to have placed a premium on local engagement and knowledge transfer activities. The Logan Hub has invested heavily in the delivery of both modes of WoW training, with Hub members demonstrating a willingness to engage and adapt activities to respond to the needs of diverse groups (e.g. adaption of WoW principles for yarning groups by Murri Sisters) and key settings (e.g. local schools). SMBI has also invested in WoW in addition to undertaking formalised local needs assessment processes (e.g. MWIA).   Both Hub sites have demonstrated their ability to identify and respond to local needs and use feedback to continually improve activities and processes.

Problem solving

The use of circle processes (introduced by the Hub lead) were identified as being a useful framework for collaboration and collaborative problem solving. Both sites provided examples where they had adapted activities or plans in response to emerging issues or feedback from local participants, demonstrating there is substantial capacity for flexible problem solving in this Hub.

Infrastructure and investments

Significant examples were cited in both Logan (e.g. with partner organisations Kingston State School and the Benevolent Society adoption WoW; the latter funding a dedicated position to support its roll out) and SMBI Hubs (e.g. investment in MWIA process by Redland City Council) demonstrating that Hub members are incorporating recognised tools to promote wellbeing in the community, in workplaces and as part of community activities.

The investment in local engagement and training activities has ensured that this Hub has the most champions for wellbeing and WoW trainers across the state.

Plans to secure funding for a purpose-built Wellbeing centre for the Bay Islands is an unexpected but exciting development arising from this initiative.

As noted in the workshop attendances and reported by Hub members, there is strong community identity present in both Hub sites and a willingness to share and celebrate successes suggests both Hubs will have sufficient social capital to help sustain their collaborative efforts to promote wellbeing into the future.

4.2.   Central Highland Hub summary

Network partnerships

Whilst all Hub sites in the Central Highlands region had identified members, Blackwater Hub was the only Hub in the region, at the time of the evaluation, with an established group of committed community members. The influence of a number of 'champions' within the Hub, members with a strong commitment to the wellbeing of the local community was identified as an important element in the strength of Hub relationships. Hub members had identified potential new members, with a range of skills and networks, and were in the process of introducing new people to the Hub. Blackwater Hub also had a clear vision and local action plan for wellbeing activities in Blackwater and were able to provide evidence of a number of recent wellbeing activities which had been undertaken. Due to the small number of interested community members in the other Hub sites, the Hub lead had encouraged Capella/Tieri and Sapphire Gemfields to work together. By working together, Hub members in these areas were able to share ideas and resources, support each other and plan joint activities.

All Hubs in the regions were able to identify key stakeholders within the local community and had established relationships with a number of organisations and individuals in the local community (particularly Local Council). For Hubs still attracting membership, there were plans to approach and work with identified stakeholders. Blackwater Hub members were looking to increase their sustainability by seeking independence from CCQ in the future. Auspicing from an existing community organisation or becoming their own entity were being explored by Hub members with support from the Hub lead. Blackwater Hub was also investigating how they could develop their own logo, email address, Facebook site and website and had recruited a member with skills in this area to support this plan.

Both Capella/Tieri and Sapphire Gemfields Hub members identified difficulty in attracting and maintaining active membership in these regions. These regions acknowledged a current need to focus on recruitment of Hub members and had identified potential opportunities to increase membership. Despite difficulties with membership, Capella/Tieri and Sapphire Gemfields reported utilising the WoW framework to approach organisations and facilitate WoW activities to embed wellbeing concepts within community events and organisations. These regions were still in the formation stage but had developed strong connections with some key community groups (e.g. CTMlinks and Local Councils). Hub members were able to articulate clear purpose and commitment to the Hub and acknowledge strong relationship between the Hubs.

Knowledge transfer

The Blackwater Hub members were able to identify and articulate the needs of their local community and were interested in developing future activities and support opportunities for men in their community. They were using the WoW as a guiding framework to develop community

activities and looking to attend future WoW training to increase Hub member's knowledge and skills in WoW. The Hub lead was undertaking the WoW Advanced Practitioner training and a number of Hub members had completed the intensive WoW workshop. The Hub members identified a need to engage further with organisations and services to facilitate WoW understanding and uptake in the community.

Capella/Tieri and Sapphire Gemfields Hub members had a clear understanding of their differing local community needs. Whilst the WoW framework has been adopted by the Hubs, there was some acknowledgement that further understanding of the framework and support to utilise activities with different community groups would be useful. Increasing access to male community members was identified as an issue for this region and Blackwater Hub members had engaged in recent conversations with the Health and Safety Officers at the local mines and a sporting organisation to explore how to bring wellbeing activities to this group of community members.

Problem solving

The strength of the Blackwater Hub members pre-existing relationships (from church) were identified as an important factor in successful and respectful problem solving. It was evident that the Hub had the resources and networks available to manage future issues and problem solve effectively due to the respectful relationships which had developed within the Hub.

Due to the changing nature and limited Hub membership, there were restricted examples of how the Capella/Tieri and Sapphire Gemfields Hubs identify and overcome problems encountered. CCQ was identified as a resource which would be accessed to support the solving of problems. All Hub members articulated commitment to the Wellbeing Hub which would provide the motivation to overcome issues.

Infrastructure and investments

The Blackwater Hub members were working with a number of large organisations (e.g. Local Council, Schools, daycare centres) to embed WoW activities and frameworks within these organisations. Blackwater were keen to look at how WoW could be used in workplace environments to improve the mental health of workers, particularly in the local mines. They were working on skills to develop financial independence (e.g. grant writing) and acknowledged a continued focus on maintaining and further developing the human capital of the Hub.

The Capella/Tieri and Sapphire Gemfields Hub members had established positive working relationships with Local Council and larger organisations within their local communities. There was an understanding of current community resources and members had clear ideas regarding other opportunities to link and build resourcing opportunities. Strong and supportive relationships between the Hubs sites, and with CCQ, were observed and described as important in promoting engagement with the Hub and ongoing support from members.

4.3.   Far North Queensland Hub summary

Network partnerships

Due to the differing communities and needs, the Hub sites in Far North Queensland had adopted different community engagement strategies. Tablelands Hub had invested much of their energy in identifying and linking with the key stakeholders in the local communities. The Tablelands Hub lead had been able to utilise existing professional relationships to engage organisations and articulated a

longer-term goal of embedding wellbeing frameworks into the service delivery plans of organisations (e.g., Education Queensland).

Providing community and service access to the WoW training in the establishment phase of the Hubs was seen as important in generating interest and support. Advertising for the WoW training generated interest in, and conversations about, mental wellbeing. The WoW training provided a framework and skills for participants to engage community and promote wellbeing. The framework provided a language to promote wellbeing to others, as well as information and activities to advocate for this work both within organisations and within different sectors. The training also appeared to develop relationships and increase member's networks, with reports that new connections and partnerships had formed as a result of attending the training. The remoteness of some of the communities and extreme weather events limited participation from the Cooktown community members. Hub networks will continue to broaden and strengthen as the Hub activities continue.

Knowledge transfer

Hub members demonstrated a good understanding of the local community needs and had been able to target wellbeing activities to different identified priority groups. In the Tablelands, the Maize festival was utilised to focus on young people and families through incorporating the WoW framework in planning the festival. Hub members reported increasing confidence in the application skills and knowledge acquired through the WoW training and were able to identify examples of how the framework has been used in their personal lives (e.g., a focus on mindfulness and managing stress), within their own families (increasing time with loved ones and improving family communications), within their workplaces (e.g., instigating wellbeing activities for staff), within their roles and spheres of influence (e.g., developing a new youth focussed service based on concepts of wellbeing), as well as within their professional practice (e.g., providing wellbeing knowledge and tools for clients to use). The resources required to attend initial WoW training (travel, staff time) was seen as a limiting factor for community participation and flexible training processes was identified as promoting access for rural and remote community members and ensuring a diversity of Hub membership. For instance, the use of online and virtual platforms has proved useful in connecting rural and remote communities in other contexts and may have some utility in the current context.

Problem solving

As new networks, the Far North Queensland Hubs had limited experience of solving problems. Identifying issues at an early stage and strengthening relationships and negotiation skills of Hub members was seen as important factors in promoting sustainability of Hub membership. Resourcing of WoW activities was identified as an issue for Hub members, as was the cultural appropriateness of the activities. Finding sustainable funding sources for activities, as well as reviewing WoW training and activities in terms of cultural and community relevance were identified as goals. It should be noted that similar issues have been considered and addressed by the Logan Hub that may have some applicability in the context of Far North Queensland.

Infrastructure and investments

Hub members articulated that the WoW framework and activities were applicable across a range of sectors and purposes and seemed to fit well with current social policies.

4.4.   State-wide support and capacity building summary

State-wide support and resources include the QMHC project management and governance structure, resources for Hubs to connect and share, access to MWIA and WoW training and resources, as well as support and mentoring from the WoW support program.

Table 1 provides an overview of the strengths and weaknesses of the support provided to the Wellbeing Hubs by the QMHC including the workshop participant's views on the project management, support, training and resources provided. Future opportunities and risks for the Hub initiative were also identified.

Table 1. Summary of SWOT analysis

Strengths
- Flexibility provided to local Hubs (e.g. the focus on outcomes, needs keep changing, different mix of communities involved)   - Access to resources (e.g. WoW, Tony Coggins etc)   - WoW training provided a 'hook' to engage community members and implement things quickly   - Support developed within and between communities   - Locally responsive   - Doing things together (including coming together for state-wide reference groups) and doing training together established good relationships and provided opportunities for cross-pollination   - Relationships with contract managers   - QMHC sponsored initiative gives credibility
Weaknesses
- Funding needs to be more flexible – (e.g. mini-grants funding for local activities)   - Calling it a Hub can create confusion (i.e. where is the Hub or building?)   - Training is primarily delivered away (from regional sites)   - Is heavily reliant on coordinator and their skills sets   - Also relies on in-kind and voluntary contributions from auspicing organisations   - Geographic catchments are vast   - Project timeframes – (e.g. we would have done things differently if known it would run for four years from the beginning)   - Evaluation was not built in from the start
Opportunities
- Extending reach (e.g. into Isaac shire, beyond Redlands and SMBI)   - Local badging and marketing of initiatives (including Facebook and website development)   - Use of intensive and one day training (e.g. staging and getting the right mix)   - Connecting strategies to address micro and macro factors and providing tools to promote individual wellbeing (e.g. WoW) and community wellbeing (e.g. Mental Wellbeing Impact Assessment)   - Contextualising and adapting WoW (given applicability across populations) – e.g. with mental health service consumers, different cultural groups and settings (e.g. WoW-ED)   - Establishing community of practice and identifying/sharing critical success factors   - Capturing and sharing success stories and ripple effects (e.g. digital stories)   - Engaging other sponsorships, and with a wide range of services, settings and diverse groups   - Evaluation and planning process appears to have re-invigorated some Hub sites
Threats/risks

- Focus on mental health versus mental illness (where does WoW fit)?
- Clarity and evidence re: how and why things worked or didn't work
- Maintaining (and sustaining) WoW Advanced Practitioner workforce (i.e. natural attrition)
- Maintaining program fidelity if there are cultural adaptions of WoW
- Sustaining program gains and not losing local momentum
- Need to ensure strategies are named as evidence-based to ensure they have traction

4.5.   Results summary

As to be expected given the marked differences in communities and geography across Hub sites, each Hub has formed differently according to the local context and conditions. Clearly local factors, in particular, differences in the number, range and resources available to local service partners, the different auspice arrangements and differences in the make-up of each community and engagement of local residents have shaped how the Hubs operate and what each has achieved, to date.

These differences are also reflected in differences within and between the Hub sites. For instance, in relation to the new Hub sites in FNQ, Atherton Tablelands has a discrete community based within a number of towns, with strong community identity, whereas Cooktown has its own community and neighbouring Indigenous communities in Hopevale and Wujal Wujal, all of which are communities with their own identities (and with varying travel times subject to seasonal conditions). Furthermore, even among the mining communities of Central Highlands, there are significant differences between communities, including those communities specifically established to support mining (e.g. Tieri/Blackwater) and pre-existing communities such as Capella or the Sapphire Gemfields.

Collaborations were developed differently according to the local context and Hub membership. In Central Highlands, strong community engagement was evident as were collaborations with Local Council. The focus on community membership of some local Hubs (e.g. Blackwater) was different to other Hubs which had more service-oriented memberships. Although the SMBI Hub had a good mix of local residents and service providers engaged, the Logan Hub has primarily focused on developing service partnerships and collaborations to promote wellbeing. In the context of this large, diverse, heavily-serviced community which has a number of other place-based initiatives, this approach has merit, however, some opportunities were also identified to more actively engage community groups moving forward. Some of the Central Highlands Hubs have their own Program Logic identified (e.g. Blackwater, Sapphire Gemfields and Tieri/Capella have developed mission statements). The Blackwater Hub also has a local action plan.   Nevertheless, further opportunities to engage in collaborative planning and rapid appraisal processes, moving forward, are highlighted.

Some Hubs have focused their efforts and been successful in identifying and building community leadership (e.g. Blackwater Hub), and others on capturing opportunities in a dense of service network and needing to develop intersectoral leadership (e.g. Logan Hub). The SMBI Hub, in large part due to its geography, has been successful in identifying and building both community leadership and intersectoral collaboration and engagement, however, this may also reflect the conscious use of Implemental's MWIA which laid the platforms for local engagement and collaborative action. One example of a significant outcome arising from Hub collaborations, appears to have borne out of the planning (and engagement processes) used by the SMBI Hub and which has resulted in the establishment of a new 'Wellbeing Hub'. This service hub is a consortium of (visiting) community

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services to improve the health and wellbeing of Island residents. This development has generated considerable excitement and was clearly attributed to the Hub's MWIA/local planning processes.

Network partnerships are the relationships between groups and organisations within a community or network (Bush, Dower & Mutch, 2002). All Wellbeing Hubs were able to identify and provide evidence of at least some key partnerships with local services, organisations and individuals. As expected, the emerging Hubs in FNQ are currently working on developing key relationships and their understanding of local needs and resources. A number of key organisations had engaged well with the Wellbeing Hubs, in particular Local Government and education providers, however, generally speaking there appears to be limited engagement with formal health service providers and opportunities exist to strengthen engagement with other health and community service partners (e.g. mental health services, GP's and Primary Health Networks).

The Hub leads and auspice organisations were found to be key to the identification of local resources and formation of Hub membership. The Hub leads have been instrumental in mentoring and supporting community members and organisations to develop strong networks and adopting the WoW framework. Difficulty in recruiting appropriately skilled Hub leads was noted by Hubs in rural and regional centres. Hub leads are required to undertake a variety of roles dependent on the local community needs and the ability to develop strong relationships with others was seen as a prerequisite for capacity building.

Some local hubs, in particular the Blackwater Hub, in Central Highlands and SMBI Hub in Logan/SMBI are well positioned to sustain existing gains and further build on their efforts with plans to secure ongoing funding and/or auspice arrangements longer term. If Hubs, had not yet considered these matters, the current evaluation sought to prompt such discussions. Indeed, specific opportunities were identified for all Hubs across each of the domains of the CCI, including the infrastructure domain which suggests the need to develop local policy capital, financial capital, human capital and social capital to sustain capacity building outcomes (Bush, Dower & Mutch, 2002).

As indicated in the results from the CCI administration, the Hubs have substantially developed their capabilities to transfer knowledge. The WoW has been adopted in different degrees by all Hubs as a framework and process of upskilling and promoting mental health and wellbeing. WoW, as a multidimensional framework was described as a clear and easy way of talking about, and engaging people in, activities that promote wellbeing. All Hubs saw the WoW framework as providing the Hub with a set of strategies which encouraged the incorporation of new awareness and practices across their networks and within the wider community. The WoW framework was described as enabling quick access to the community whilst providing some flexibility to provide locally relevant knowledge and activities. Further adaptation of the WoW activities and training to different cultural and community contexts would enhance the skills of Hub members to provide locally relevant wellbeing knowledge and activities.

Levels of training (e.g. number and type of training programs provided) and knowledge/skills development varied between Hubs, however, it is also clear this has been a major investment by all Hubs and was in overall terms, a program strength. Nevertheless, opportunities to improve access to training for rural communities to WoW training, in particular, access to the WoW Intensive training were also identified.

Every Hub, as reported in each of the (locally held) workshops for this evaluation, had actively sought to increase actions (i.e. behaviours) to promote mental health and wellbeing. This was

primarily demonstrated through undertaking a range of activities in accordance with the different domains of WoW. These included activities to nurture the body, mind, spirit, and planet, social relationships and taking notice and appreciating our surroundings.

Hub members, including local resident members, variously reported how their exposure to WoW had been personally transformative, with testimonies also provided about the changes this was making to people's lives, including family members, clients and/or colleagues (i.e. the ripple effects). The inability to effectively capture individual engagement has been discussed above, but the evaluation team are aware of some plans or proposals for measuring WoW's ripple effects, and agree specific approaches are required to gauge the true effect of individual behaviour change in the population attributable to WoW.

Evidence was collected that indicates principles of the WoW framework are being utilised within partner organisations and starting to feed up through government (including Local Council) and non-government providers (e.g. FSG Open Day, Department of Education).   A number of examples were provided of how wellbeing activities had been incorporated into community events (e.g. Maize festival in the Tablelands) and Savvy Seniors (Logan/SMBI Hub). Overall, achievements in relation to the development of local policy capital, to date, have been mixed across Hub sites, however, opportunities to get a wellbeing focus embedded in local planning process (in particular with Local Council) were identified.

Although most Hubs collect feedback forms for specific training events and activities undertaken, there is no reliable data to indicate the number of community members who have been variously engaged, in particular, through the many 'soft-entry' and incidental engagement activities undertaken as part of local festivals and events.   Moreover, difficulties in accurately identifying the number of individuals impacted is further complicated by the inability or lack or opportunities to fully capture the many 'ripple effects' that are reported. For instance, when the participants from WoW training programs and Hub events are inspired to run their own programs and activities as part of their local playgroups, school-based and/or community activities, there is no system to capture this information.

The State-wide project scope and management process which allowed each Wellbeing Hub to develop locally flexible and appropriate approaches to collaboration and activities was seen as instrumental in the success of the Hubs. Each Hub described the importance of being able to adapt to the changing needs of their communities to ensure outcomes and sustainability, and felt supported to do so. Hubs expressed appreciation for the QMHC's resourcing for Hubs to connect and share program information and resources through regular reference group meetings.

Nevertheless, opportunities were identified to strengthen support across the leadership of Hub sites and the importance of having supportive relationships within and across the Hubs was also noted. Sharing of resources and the need to develop communities of practice were identified as important future goals for the Wellbeing Hubs and WoW Support Program.

The evaluation process itself has also reportedly "added value" to the formation and strength of collaboration within Hubs, providing a formal or structured opportunity for members to reflect on and plan Hub local activities together. Hubs are encouraged to utilise the CCI tool in future evaluations to track progress and plan for future activities.

In addition, the use of the CCI in evaluation appears to have contributed to the "ripple effects" as evidenced by the Redlands City Council seeking the University's permission to use the visual harvest from the SMBI workshop as the basis for a mural on the island – a project which will be undertaken with resident young people.

5. Key Considerations and critical success factors

As a result of this evaluation, a number of key considerations and critical success factors have been identified.

1.   There can be a multitude of ways to achieve community capacity success

The different ways that local Hubs have evolved demonstrates there are a multitude of ways of achieving success.   For instance, both inter-town rivalry and collaborative dynamics can be useful for stimulating local action, as demonstrated within the context of the Central Highlands Hub. Similarly, both service driven approaches (e.g. Logan and Atherton) and bottom-up or community driven approaches (e.g. Blackwater, SMBI) have had successes. The use of formal arrangements (e.g., MoU's and local partnership agreements) and informal arrangements (e.g., "associate members") also reflect local differences and culture. However, irrespective of the initial emphasis and focus for engagement, Hubs need to more actively engage community stakeholders if they have primarily prioritised service engagement activities and conversely, undertake more service engagement and coordination in areas that have strongly focussed on community engagement and capacity building efforts to date. Similarly, whether Hubs have invested in WoW or MWIA, a mix of local strategies was required to develop individual capacity and community capacity.

2.   The impact of locally responsive Hub leads

The Hub leads have been instrumental in mentoring and building capacity of community members and organisations, developing strong networks that value the benefits of the WoW framework. Some difficulties in recruiting appropriately skilled Hub leads were noted by Hubs in rural and regional centres. The Hub leads are required to undertake a variety of roles depending on local needs and the ability to develop strong relationships with others was seen as a prerequisite for capacity building. Across all the Hubs, relationships were emphasised as the building block for improving mental health awareness, capacity and coordination within communities. Hub leads required an ability to work incrementally with their local communities, building relationships, making connections and supporting or coordinating activities that respond to the local context. This is complex practice and requires competent practitioners who value and understand their communities.

Hub leads who already had strong local connections and a good understanding of the community needs were able to leverage existing relationships to identify interested parties and promote an understanding of the purpose of the Hub initiative. The speed of Hub formation and the strength of partnerships were impacted on the skills and backgrounds of the Hub leads. It appeared that being a local person with pre-existing local knowledge and partnerships is an advantage in how the Hubs were established. Project managers identified difficulties in recruitment of appropriately skilled local Hub leads, particularly in rural and remote areas.

3.   Local community characteristics shape how Hubs form

Variations in geography, socio-economics, community identity, local services and leadership all appear to be key, and are recognised determinants or critical success factors for community capacity building (Bush, Dower & Mutch, 2002).   Not only were there major differences between Wellbeing Hubs, there were also marked differences in the local communities.   Some Hubs are based in low-socio economic areas such as in Logan and SMBI and others are high socioeconomic communities

such as the mining communities Tieri/Capella. Having said that recent volatility in the mining sector, drought and other local conditions were reported as having major impacts on the needs of community. There was also considerable variation in relation to the degree to which pre-existing community networks were utilised. Where connections within and between established groups were made, community involvement prospered, for instance in Blackwater (through the Catholic Church) and SMBI (through the local Progress Association).

In relation to the new Hub sites in FNQ, the Tablelands has well-connected communities with a strong community identity, whereas the Cooktown region has three discrete communities with different identities and cultural backgrounds. An understanding of discrete community identities, in addition to the need to travel long distances, subject to seasonal conditions, will impact on how communities participate in any program. Such elements impact on a community's ability to respond to and make sense of training and other opportunities to promote wellbeing capacity building.

The transient nature of many of the communities influenced the membership of the Hubs. Whilst having an established core of interested Hub members was identified as an important factor for success, future planning and ongoing recruitment needs to be considered to ensure sustainability of the Hubs.

## 4.	The importance of social capital building as a process and outcome

The development of social networks, norms of trust and reciprocity, community involvement and acceptance of others, is both an important process of this community capacity building program, but also a key outcome of the Wellbeing Hubs initiative. Thus, networking is an end to itself. Relationships established within the Hubs were described as having "ripples" outside of the Hub initiative – including strengthening service delivery partnerships. For instance, in the Atherton Tablelands, relationships within the Hub network had resulted in service delivery collaborations (e.g. a social enterprise organisation teaming with Health and Youth services to provide new services to support community members with particular needs).

The mutual investment (sharing of knowledge and resources) and benefits (co-led activities and wellbeing outcomes) experienced between Hub members was also considered to be key to sustaining community building programs (e.g. Bush, Dower & Mutch, 2002). Within all Hubs, relationships were emphasised and seen as the building block for improving mental health awareness, capacity and coordination within communities. This also included across Hub sites thanks to the QMHC's efforts to help connect and share program information and resources through regular reference group meetings.

Those communities that already have strong community-based or volunteer-based organisations were able to leverage those relationships to promote the Hubs and integrate wellbeing activities into existing frameworks. This was most clear in the context of understanding how the Blackwater Hub has progressed differently to the other Central Queensland Hubs and the importance of pre-existing networks established through local Catholic Church with some committed local champions who understood the benefits and joy of community involvement. As a Blackwater Hub member routinely said – "the number one thing that can do for your mental health is volunteer", reiterating the importance of community members with a volunteer orientation. Communities with less cohesive networks (e.g. Cooktown) and transient and FIFO populations, experienced difficulties in bringing people together and identifying community members which would support and develop the Hub initiative. As a strategy to increase membership and participation, a number of the Hubs were

engaging with, or identified the need to engage more effectively with, online and social media platforms. These initiatives should be further monitored to determine if online engagement strategies are effective in increasing program reach and participation.

5.   Increased focus on mental health and wellbeing coordination functions

One area of the Wellbeing Hub model that requires further support and development to be more consistent across Hub sites, relates to the 'coordination' functions. All sites were working well with their Local Council which. This is considered an important partnership given Local Council is a key stakeholder in community capacity building programs (Bush, Dower & Mutch, 2002). Although, it was not clear why Local Council had been such a strong supporter across the state, it was observed that Local Council has dedicated community development officers and resources, and thus seen to be "logical and receptive partners". Of significant note, two Hub sites had also initiated new service collaborations. In Atherton, this include a new partnership to provide service in response to a previously unmet need, and on the SMBI, coordination of visiting services and plans to establish a purpose-built, multi-provider Wellbeing Hub.

While most Hub sites were particularly well engaged with local schools (or had plans to do this), there was a notable absence of health service and health promotion stakeholders across the Hubs. To date, the engagement of the health sectors remains underdeveloped, be this in relation to population health (health promotion) services, primary health networks, primary health care providers and/or community care services more broadly.   Given the traction that WoW has had across all sites, and that WoW is a broader health promotion strategy (incorporating strategies that promote mental health, nutrition and physical activity), it would seem there are significant opportunities to further promote WoW in the community and its use and/or cross-fertilisation with other health promotion programs (e.g. Deadly Choices).

Indeed, substantial opportunities remain to engage with a range of settings and community service partners and settings, for instance in aged care, disabilities and early child education/care.   The engagement of more local services and settings to promote wellbeing activities, including WoW, will create more fertile or supportive environments for change, further disseminating/reinforcing key messages, increasing visibility, building a critical mass and generating more 'ripple effects' in the community.   For the purpose-built mining communities of Tieri/Capella the engagement of the mines will be key to this end. Across the state, however, there are also opportunities to support the settings-based initiatives already being trailed by the QMHC, including the use of WoW with school principals in Education Queensland, which in the longer-term, suggests an exciting model of top-down and bottom-up coordination of strategies to promote wellbeing at the population level.

6.   Responding to gender differences in community engagement

The majority of Hub members and participants engaged to date have been female, reflecting some of the challenges in engaging men in health promotion programs more broadly. In the process of undertaking this evaluation, a number of Hub sites actively considered how they could better connect with males. Logan/SMBI Hub has engaged specific strategies in partnership with a local group (Fishers for Men) to run a WoW program. The Blackwater Hub also identified opportunities to engage more men through social clubs (e.g. Skiing Club) and Capella/Tieri (and other Central Queensland Hubs) were keen to engage more actively with local mining companies. Given this identified issue, the learnings from these initiatives need to be recognised and disseminated to

develop strategies that will be successful in increasing male participation in wellbeing activities across the state.

7. The legacy of stigma and the language of wellbeing

Across sites, Hub members identified that how mental health and wellbeing was described, influenced the responses they received from community members and organisations. The terminology of mental health was often equated with mental illness and that there was existing stigma associated with mental illness in the community. Being able to articulate the purpose and benefit of 'wellbeing' was reportedly useful to the recruitment of Hub members. Indeed, WoW was identified as being a particularly helpful (and simple) framework for discussing what is meant by 'wellbeing'.

8. The utilisation of a Wellbeing framework

The provision of WoW training to Hubs provided Hub members with the ability to work from a framework to describe and develop a shared understanding about how to enhance the wellbeing of others. The WoW framework was easily understood by Hub leads and members and provided a structured way of thinking about wellbeing, moving from an abstract notion to a practical approach for the Hubs to work with community members and organisations. The framework allowed flexibility to address macro and micro factors of wellbeing as well as working at organisational and individual community member levels.

Every Hub, as reported in each of the (locally held) workshops for this evaluation, had actively sought to increase actions (i.e. behaviours) to promote mental health and wellbeing. This was primarily demonstrated through undertaking a range of activities in accordance with the different domains of WoW. These included activities to nurture the body, mind, spirit, and planet, social relationships and savouring our surroundings. Hub members variously reported how their exposure to WoW had been personally transformative, with testimonies also provided about the changes the WoW framework had made to people's lives, including family members, clients and/or colleagues (i.e. the ripple effects). The difficulty in effectively capturing individual engagement has been discussed above, but the evaluation team are aware of some plans or proposals for measuring WoW's ripple effects, and agree specific approaches are required to gauge the true effect of individual behaviour change in the population attributable to the use of the WoW framework.

Evidence was collected that indicates principles of the WoW framework are being utilised within partner organisations and starting to feed up through government (including Local Council) and non-government providers (e.g. FSG Open Day, Education Queensland). A number of examples were provided of how wellbeing activities had been incorporated into community events (e.g. Maize festival in the Tablelands) and Savvy Seniors (Logan/SMBI Hub).

Current WoW training processes requires substantial resourcing (5 days of attendance at face-to-face workshops). Whilst participants identified positive outcomes from the training including a good understanding of the WoW framework and an opportunity to connect and build relationships with others - difficulties in resourcing these opportunities was noted. The need to travel long distances and be away from family for 5 days were seen as barriers to participation and limited participation by community members from diverse backgrounds.

Improved access to WoW Intensive training for rural and remote communities is essential to ensure a state-wide inclusive approach. Access to WoW training is a resource intensive undertaking for

participants and a review of training delivery options that reflect a more flexible approach could be considered (e.g. the development of an online package of training, blended learning approaches). It was also suggested that the training package should be reviewed to ensure it meets the need of a range of communities, including communities with culturally diverse populations. Hub members reported that the WoW framework could be useful in Aboriginal and Torres Strait Islander communities and future work to map the WoW concepts against cultural understandings of social and emotional wellbeing would be useful. Through the course of the evaluation, it was noted that Wow could be adapted or utilised as part of existing culturally appropriate programs and concepts (e.g. tangate whaiora"). For instance, Logan Hub members talked about how WoW is incorporated into their yarning circles. Hub members also identified how WoW is being used in key settings such as the Community Hubs and a local school in Logan. This suggests there are more opportunities to expand the reach of WoW through engaging with other cultures and key settings.

Whilst WoW was identified as a valuable tool in promoting the understanding of and participation in wellbeing activities, this investment of resources guided the focus of Hub activities and diverted action from the development of sustainable CCB and Hub formation. It is recommended that the integration of frameworks and tools be planned carefully to ensure that the focus remains on how the Hub can use the tool in capacity building rather than delivering training and wellbeing activities.

9.   **Complementing individual change strategies with structural solutions**

The connection of actions to promote individual wellbeing and the need to undertake a collaborative (local) planning process to identify and address community needs and broader structural issues should be further promoted at a program level. This would also provide additional opportunities for local collaboration, networking and to deepen community understanding and impacts. A good example of this, as observed in the context of the current evaluation, was the SMBI Hub which had undertaken a formal process of assessing and addressing the local determinants of wellbeing using the MWIA in collaboration with Redland City Council. As a result of their extensive community consultation and planning process, the SMBI Hub had developed strong community and service provider/partner buy-in and ownership and comprehensive strategy to move forward. In the short-term this included things like coordinating transport support for visiting services and in the longer-term applying for capital funding to build a purpose-built Wellbeing Centre on the Islands. The use of formalised local planning and impact assessment processes to achieve community-level and structural changes, is considered a necessary addition to investing in WoW training.

10.   **Responsive governance and program coordination**

The corporate governance of a program that operates on a bottom-up or community capacity building basis potentially presents some challenges, however, it is clear from all Hub sites that there had been minimal top-down involvement or interference, and this had allowed the local autonomy and flexibility, which has been identified as a critical success factor of this initiative. The flexibility of the QMHC project guidelines and management allowed each Hub site to respond to local needs, adapt to community challenges and adjust resourcing priorities dependent on local contexts. This flexibility, allowing for co-design of the Hub program and activities, was important not only during the establishment phase but has also enabled Hubs to continue to build local ownership and sustainability.

The value of a State-wide Reference Group

The Hubs expressed appreciation for the QMHC's resourcing for Hubs to connect and share program information and resources through regular Reference Group meetings. Such meetings were important in the development of a community of practice that supported the complex practice of community development work to promote wellbeing, and with diverse communities across Queensland. This is also considered particularly important for connecting Hub leads in rural, remote and isolated communities.

The impact of timeframes on Hub formation and process

The two Hub sites initially funded (CH and Logan/SMBI), was for two years only, but consequently extended. These Hub sites have now been in operation for three years in contrast to Atherton/Cooktown which had only been established in the last 12 months. Obviously, each of the Hubs are in different stages of formation, however, short-term funding models presented some challenges to the sustainability of community development programs.   In addition, to supporting local Hubs to increase the financial capital, consideration should be given to longer term funding agreements (for instance, up to four or five years) to increase the opportunity that local actions are built in a sustainable way.

Flexible Funding models

The Hubs reported that they were able to access money flexibly and were provided with additional resources through QHMC for training and resource packs which were highly valued. All of the Hubs were reliant on the Hub auspice organisations for in-kind contributions including assistance with funding and applying for grants. Further consideration to governance issues (e.g. auspice arrangements for applying for partnership funds) need to be factored in to support sustainable, independent Hubs. It was noted that the Blackwater was already exploring longer term auspice arrangements to promote sustainability   From the perspective of the QMHC, consideration could also be given to the provision of micro-grants to resource local activities and collaborative (capacity building) projects, in particular, for new sites or specific activities during the establishment phase.

11.   The need to monitor outcomes

Need to routinely collect information against program outcomes

Although most Hubs collect feedback forms for specific training events and activities undertaken, there is no tracking or reliable data to indicate the number of community members who have been variously engaged, in particular, through the many 'soft-entry' and incidental engagement activities undertaken as part of local festivals and events. Moreover, difficulties in accurately identifying the full impact of the initiative is further confounded by the inability to capture the many 'ripple effects' that are reported anecdotally. For instance, there were not systems to collect information when the participants from WoW training programs and Hub events were inspired to run their own programs and activities as part of their local playgroups, school-based and/or community activities.

To fully understand the implementation of the Hubs initiative and its impact, an evaluation framework and data collection systems would ideally be in place from the commencement of the project. Opportunities to standardise data collection and outcomes monitoring processes moving forward, will support greater continuous quality improvement activities in the short term, and

inform strategic decision-making in relation to the funding of community-based wellbeing interventions longer-term. For example, local data collection would not need to be an onerous task and could be collected on a quarterly basis.

Evaluation is both formative and summative

The current evaluation process has reportedly "added value" to the formation and strength of local collaborations and action within Hubs. Across all sites, it provided a formal or structured opportunity for members to reflect upon and plan future Hub activities as a group. The use of a capacity building framework to undertake the evaluation, the sharing of group interview schedules and encouragement of local hubs to continue using the tool on an annual or semi-regular basis, has built capacity to track progress and jointly plan in the longer-term.

From a process perspective, the incorporation of visual harvesting methods for the Logan and SMBI workshops appeared to be powerful for local participants and worked well as a strategy to further engage participants. Indeed, following the SMBI workshop, Redland City Council sought permission to have the results of the visual harvest permanently displayed in the community as a mural. The use of different forms and processes of engagement and information-collection, not only helps ensure all participant voices are heard, but also promotes collective ownership and buy-in to the Wellbeing Hubs initiative.

12.   The value of focussing on community capacity sustainability

Developing community capacity takes time and is a highly skilled practice. To this end, both the literature on place-based approaches and the learnings from the Wellbeing Hubs initiative suggested the approach to building community capacity to promote wellbeing should be characterised by:

- Agreed understanding of people and place;
- Engagement of local community, partners/stakeholders and leaders to establish common values and a shared vision
- Valuing of local knowledge and practices, assets, structures and opportunities in the development and implementation of local plans;
- Shared processes to work together, resolve emerging issues and in particular, to celebrate successes
- Shared understanding of measuring outcomes and any incremental changes (or continuous improvements) required.

To ensure the sustainability of local community capacity building efforts, it is recommended that Hub sites continue investing in local networks and partnerships, knowledge transfer activities, local action and problem solving, and in the development of financial capital, human capital, social capital and policy capital (e.g. embedding a focus on improving wellbeing in local plans and organisational policies). This is in keeping with the different domains of the CCI.

Conclusion

In response to the question are Hubs intending their intended outcomes – the answer in short is yes. The newly established sites in Atherton/Cooktown are progressing well and substantial capacity has been developed across established Hub sites to develop local networks and transfer knowledge to increase community awareness and actions to promote wellbeing. This was demonstrated through

evidence indicating activities are being coordinated with local partners. It is also clear that WoW is used as a common framework for shared thinking, increasing a shared awareness and shaping ways of working together to promote wellbeing across Hub sites.

Local factors have clearly impacted on outcomes achieved. In particular, differences in the number, range and resources available to local service partners, the different auspice arrangements and differences in the socio-economic and cultural make-up of each community were observed. The ability of Hub leads to engage established groups and community members has shaped how the Hubs have operated and influenced their focus and the outcomes they have achieved to date.

The deliberate use of WoW as a framework to increase individual wellbeing and the MWIA as a process to address the broader community or structural issues appears to present a potential model, should QMHC consider rolling out the Wellbeing Hub initiative in further sites.

Some local Hubs, in particular the Blackwater Hub, in Central Highlands and SMBI Hub in Logan/SMBI are well positioned to sustain existing gains and further build on their efforts with plans to secure ongoing funding and/or auspice arrangements longer term. Further support will be required to support established Hub in their transition phase, and if additional sites are being considered, the results of this evaluation suggest funding agreements beyond two year timeframes would be preferable.

The governance of the project and use of state-wide support and coordination mechanisms has been valued as was the use of the current evaluation for furthering local planning processes. It is also suggested that an outcomes reporting framework is developed and shared across Hub sites to better capture the reach and impact of the initiative moving forward. It is the conclusion of this evaluation that the initiative is indeed worthwhile. From all reports the Hubs have stimulated a range of changes and outcomes including many report ripple effects which are currently not captured, thus necessitating further evaluative work and program monitoring of outcomes which are yet to emerge and/or be measured.

6.   References

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Appendix 1: Community Capacity Index Checklist

Mental Health and Wellbeing Hubs: Interview Guide

Please assess each factor by placing T1 (Time 1) in the relevant column. T2 (Time 2) can be placed in the same table at a later date to show progress. T1/2 indicates that the factor was the same for Times 1 and 2.

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	1. There is a pool of potential leaders (network members) in the community who are available and interested in Wellbeing Hubs.				
	2. Network members can identify the outcomes they would like the Wellbeing Hubs to achieve.				
	3. Network members can identify the resources needed to achieve the desired outcomes / implement a program.				
	4. Network members can identify the individuals, groups or organisations within the network with resources necessary to achieve the desired outcomes / implement a program.				
	5. Network members can identify the other individuals or groups outside the network with resources necessary to achieve the desired outcomes / implement a program.				
	Aggregate of first level: The network has capacity to **identify** the organisations and groups with **resources** to implement / sustain a program.				
Second level capacity	6. There are community members who are already taking on a visible leadership role in community activities.				
	7. Network members can state how their own involvement in the network will/does benefit themselves.				
	8. Network members can describe the benefits other members will gain from involvement in the network.				
	9. Network members have formalised arrangements within their own group / organisation to implement / sustain a program.				
	10. There is tangible evidence that resources have been allocated to a program by network members.				
	Aggregate of second level: The network has capacity to **deliver** a program.				
Third level capacity	11. Existing community leaders have experience, knowledge and skills in capacity building efforts.				
	12. There is tangible evidence of investment in a program by groups and organisations beyond the original sponsoring group.				
	13. There is tangible evidence that a program is now 'owned' by the participants of the network.				
	14. There is tangible evidence that a program is being maintained by the network using its own resources.				
	Aggregate of third level: There is a sustainable network established to **maintain** and resource a program.				

Please provide evidence / examples below. This section could end up being around 1-2 pages.

Capacity level	Time 1	Time 2
First		
Second		
Third		

Part 2: Knowledge transfer	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity 1. Network members have identified what resources will be transferred to others within the network.				
2. Network members have identified what resources from outside the network will be transferred to them.				
3. Network members have reviewed and changed the activities / program / initiative so that it meets local needs (e.g., target group needs).				
4. Network members have reviewed and modified the activities / program / initiative so that it meets the needs of the network.				
Aggregate of first level: The network has capacity to **develop** a program that meets **local needs**.				
Second level capacity 5. Network members have implemented some knowledge transfer.				
6. Network members have reviewed and changed the activities / program / initiative so that it is evidence based / reflects current good practices.				
7. Network members have made structural arrangements to support knowledge transfer.				
Aggregate of second level: The network has capacity to **transfer** knowledge in order to achieve the desired outcomes / implement a program within a network.				
Third level capacity 8. Network members have mechanisms to obtain feedback about progress towards achieving the desired outcomes / implementing a program.				
9. Network members have incorporated a program into the mainstream activities of each organisation and group in the network.				
Aggregate of third level: The network has capacity to **integrate** a program into the mainstream practices of network partners.				

Examples / evidence

Capacity level	Time 1	Time 2
First		
Second		
Third		

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Part 3: Problem solving		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	1. Network members have identified the key players within the network to problem solve difficulties encountered in achieving the desired outcomes.				
	2. Network members have identified the key players <u>outside</u> the network to problem solve difficulties encountered in achieving the desired outcomes.				
	3. There is evidence that network members recognise the strengths of key players <u>within</u> the network.				
	4. Network members can gain agreement to work together to solve problems.				
	Aggregate of first level: There is capacity within the network to **work together** to solve problems.				
Second level capacity	5. Network members can gain agreement to work with others <u>outside</u> the network to solve problems.				
	6. There is evidence that network members recognise the strengths of those both <u>within</u> and <u>outside</u> the network.				
	7. Network members have adopted a well-recognised problem solving process.				
	8. Network members have moved from identifying problems to implementing activities designed to overcome problems <u>within</u> the network.				
	Aggregate of second level: There is the capacity to **identify and overcome** problems encountered in achieving the desired outcomes.				
Third level capacity	9. There have been demonstrations of problem solving across the network partners.				
	10. There is evidence of flexibility in problem solving across the network.				
	Aggregate of third level: There is capacity to **sustain** flexible problem solving.				

Examples / evidence

Capacity level	Time 1	Time 2
First		
Second		
Third		

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	1. Network members invest their own resources so that adequate program related policies and plans are developed for the whole network.				
	2. Network members are able to identify the benefits from their investment in program related policy development.				
	Aggregate of policy investment: The network has capacity to develop program related policy.				
Finance	3. Network members invest resources so that the network can determine the costs and benefits of participation in the network.				
	4. Network members invest financial resources in the network to maintain a partnership approach to program implementation.				
	Aggregate of financial investment: The network has capacity to develop financial capital.				
Training	5. Network members invest in helping emerging leaders develop necessary experience and skills.				
	6. Network members invest in education and training of network members to facilitate the achievement of network objectives.				
	7. Network members can identify returns on investment in education and training.				
	Aggregate of training investment: The network has capacity to develop training capital.				
Social	8. Network members invest in developing and maintaining social relations between the members of the network.				
	9. There is evidence of responsiveness to the concerns of other partners in the network.				
	Aggregate of social investment: The network has capacity to develop social capital.				

Examples / evidence

Investment type	Time 1	Time 2
Policy		
Finance		
Training		
Social		

Part 5: Overall network capacity summary

In the space below, please summarise the current capacity of the network to achieve its objectives.

Time 1	Time 2

Part 6: Future capacity building plans

In the space below, please identify future plans to build capacity to achieve program objectives. This section could end up being 1-2 pages.

	Time 1	Time 2
Network partnerships		
Knowledge transfer		
Problem solving		
Infrastructure & investments		

Templates adapted from Bush, R., Dower, J., & Mutch, A. (2002). *Community Capacity Index Manual. Version 2*. Brisbane: The University of Queensland.

Appendix 2: Participant information sheet

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Evaluation of Regional Mental Health and Wellbeing Hubs
GU ref no: 2018/185

INFORMATION SHEET

Who is conducting the research

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Why is the research being conducted?

The Queensland Mental Health Commission (QMHC) began funding a number of Mental Health and Wellbeing Hub initiatives in 2016, as documented in the *Early Action: Queensland Mental Health Promotion, Prevention and Early Intervention Action Plan 2015-2017* (Queensland Mental Health Commission, 2015). These initiatives aim to:
- strengthen community awareness and understanding of mental health and wellbeing;
- increase community capacity, including facilitating access to information, training and tools to improve mental health and wellbeing; and
- coordinate local mental health and wellbeing networks and activities.

Each hub has been designed and implemented by different non-government organisations, in accordance with local needs, strengths and opportunities. The Logan and Southern Moreton Bay Island Hubs are coordinated by Relationships Australia, whereas the Central Highlands Mental Health and Wellbeing Hubs are coordinated by Centacare Central Queensland. A third Hub was recently established through Centacare North Queensland to lead the Far North Queensland Wellbeing Hubs.

QMHC commissioned Griffith University to evaluate the Regional Mental Health and Wellbeing Hubs initiatives. This evaluation aims to investigate:
1. evidence that the hubs are achieving their intended outcomes, particularly in terms of improving local mental health awareness, capacity and coordination;
2. how the different components of the initiatives have contributed to the outcomes;
3. how other factors (i.e. local circumstances) have impacted on the outcomes;
4. actions that could strengthen and sustain the outcomes of the hub initiatives; and
5. learnings for future place-based initiatives aimed at improving mental health awareness, capacity and coordination.

What you will be asked to do

You will be asked to discuss your local Mental Health and Wellbeing Hubs initiative/s. This could include interviews with the research team or facilitated community meetings, focus groups or community engagement activities (such as creating a vision of success for your community or small group discussions). You may also be asked to provide relevant evidence relating to initiative outcomes and/or contribute to a follow up meeting to provide feedback on preliminary evaluation findings. Conversations will be observed and recorded by researchers and written field notes of the events and conversations taken.

The basis by which participants will be selected or screened

Key informants will be identified with guidance from the QMHC, the Evaluation Advisory Group, Hub coordinators and community leaders.

The expected benefits of the research

This research will document the key learnings relating to the Mental Health and Wellbeing Hubs, including strengths and opportunities for improvement. This should be helpful for the Hubs themselves, as well as future place-based initiatives that aim to enhance mental health awareness, capacity and coordination. In addition to the reports produced for QMHC, it is anticipated that the results of this evaluation will be disseminated through academic journal articles.

Risks to you

There are no foreseeable risks associated with participation in this research.

Your confidentiality

The research team will be collecting data through audio-recordings and written notes but will not identify source. This means that your data will be anonymous in reports and publications. Some demographic data will be collected via consent forms, but this will be reported across the group as a whole, rather than being attributed to you as an individual. All data will be stored securely in password protected computers and locked filing cabinets, in line with Griffith University policies and procedures. Audio-recordings will be erased after data analysis and data will be securely stored for five years.

Your participation is voluntary

Your participation in this study is voluntary and will not affect your relationship with QMHC or Griffith University. You are free to withdraw from the study at any time.

Questions / further information

Please contact Victoria Stewart or Paul Harris for additional information. Their contact details are available on the first page of this information sheet.

The ethical conduct of this research

Griffith University conducts research in accordance with the *National Statement on Ethical Conduct in Human Research*. If you have any concerns or complaints about the ethical conduct of the research project you can contact the Manager, Research Ethics by telephone on (07) 3735 4375 or email: research-ethics@griffith.edu.au.

Feedback to you

You will receive a summary of the overall findings and research results. You may also be provided with an opportunity to provide feedback on preliminary findings.

Privacy Statement – non disclosure

"The conduct of this research involves the collection, access and/or use of your identified personal information. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements. A de-identified copy of this data may be used for other research purposes including publishing openly (e.g. in an open access repository). However, your anonymity will at all times be safeguarded. For further information consult the University's Privacy Plan at http://www.griffith.edu.au/about-griffith/plans-publications/griffith-university-privacy-plan or telephone (07) 3735 4375."

Appendix 3: Participant consent form

Griffith
UNIVERSITY

Evaluation of Regional Mental Health and Wellbeing Hubs
GU ref no: 2018/185

CONSENT FORM

Research Team
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By signing below, I confirm that I have read and understood the information package and in particular:

- I understand that my involvement in this research will include one or more discussions about my local Mental Health and Wellbeing Hub/s through interviews or facilitated community meetings, focus groups or community engagement activities. I may also be asked to provide relevant evidence relating to initiative outcomes and/or contribute to a follow up meeting to provide feedback on preliminary evaluation findings. Recordings of conversations and observation notes will be collected by the research team;

- I understand that the research may include audio recording and written notes from my participation, but that I will not be identified in relation to my contributions;

- I have had any questions answered to my satisfaction;

- I understand the risks involved;

- I understand that there will be no direct benefit to me from my participation in this research;

- I understand that my participation in this research is voluntary;

- I understand that if I have any additional questions I can contact the research team;

- I understand that I am free to withdraw at any time, without explanation or penalty;

- I understand that I will not be identified or identifiable in publications or presentations resulting from this research;

- I understand that I can contact the Manager, Research Ethics, at Griffith University Human Research Ethics Committee on (07) 3735 4375 (or research-ethics@griffith.edu.au) if I have any concerns about the ethical conduct of the project; and

- I agree to participate in the project.

Demographic details:

Position:

Organisation:

Age:

Gender:

Local wellbeing hub/s:

Time involved in local wellbeing hub/s:

Name	
Signature	
Date	

Appendix 4: Visual harvest from SBMI Hub evaluation workshop

Mel Geltch, Campfire Co-op
mel@campfire.coop

Appendix 5: Visual harvest from Logan Hub evaluation workshop

LOGAN MENTAL HEALTH & WELLBEING HUB – evaluation workshop

GRIFFITH UNIVERSITY LOGAN 15 June 2018

Mel Geltch, Campfire Co-op
mel@campfire.coop

Appendix 6: Logan Wellbeing Hub CCI report

Table 2. Logan Wellbeing Hub CCI report

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**			x	
	The Logan/SMBI Hub lead described a conscious effort to engage stakeholders in the wellbeing Hub initiative in a way that recognised and sought to build on existing efforts. This was in recognition that there were so many pilot programs, consortia-based and place-based activities in Logan. The process of engagement was described as "walking alongside partners and planting seeds" – that it takes time to nurture and grow partnerships, with example of conversation which began in 2016 only now to coming to fruition. Key principles of engagement that were:				
	'*Acknowledge what we are already doing*'.				
	'*Description, not a prescription of wellbeing*'				
	'*have to do it ourselves to be authentic*'				
	A number of organisations and stakeholders have been engaged in both sites as reflected in the attendance and participation in the Logan and SMBI workshops, respectively. The benefits of engaging in the Hub initiative are considered to be multi-layered: personal, organisational and community.				
	Opportunities				
	Recognised changes in mental health frameworks as a prime opportunity to incorporate a wellbeing focus. This was noted through work of Hub partners (e.g. Benevolent Society).				
	Responding to cultural and linguistically diverse needs - It was noted that Access Inc. did train someone, but this person has now moved on so there are opportunities to re-engage this partner as well as local schools; community gardens; community centres; place-based approach/framework; disability providers and domestic violence services.				
	When asked- where are the men?—it was suggested by Hub members that more could be done to engage with Aboriginal and Torres Strait Islander communities				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to deliver a program.**			x	
	Supporting evidence:				
	This Hub has had a major focus on delivering WoW training and has been successful in engaging participants from both Logan and SMBI to this end: 'included the Wheel into existing workshops and built it into what we were already doing. Wheel is a big part and to create your own.'				
	Formalised partnership arrangements are not in place but also considered to not be needed given the buy-in and ripple effects evidence within partner organisations – with testimonies to this provided by Wesley Mission, Kingston State School, Benevolent Society and Murri Sisters				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
	• Kingston State School- 8 week program. Not a physical space but promoted wellbeing at pick-up time and identified people who may benefit. School has provided resources. • Benevolent Society now has a dedicated WoW facilitator • Incorporated into playgroup at Wesley Mission • Incorporated into yarning at Murri Sisters The key to successful engagement was considered to be timing and capacity. This was reported as being evident in relationships with local council and housing department. Sometimes programs, 'they quickly grow and blossom- sometimes it feels like there is a hiatus.' **Opportunities identified:** Re-instate the community of practice/network meetings. Capacity is substantial in pockets but there are still opportunities to grow given the scale (and diversity) of Logan.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is a sustainable network established to maintain and resource a program.**			x	

Supporting evidence:

The Community Development Officer from council was identified as being particularly invested in the Hub and supportive in accessing Council resources. Cultural perspectives were also seen to be well represented within the network. Network members recognise a shared sense of the deliberately staged engagement process and the importance of engaging with what exists within community to thoughtfully consider how to grow the initiative.

Network members reported that one of their strengths was the ability to feed into other programs and support this existing work to be more effective.

Many Hub members reported that the initiative is owned by the network. The 'right stakeholders are involved and there is a strong ownership of WoW'.

Organisation members have established their own dedicated role, (e.g. WoW facilitator, at Benevolent Society) to promote wellbeing in the community.

Members suggested it (probably) works because of its prevention focus. It is appealing and easy to engage with.

As a result of reflecting on the Hub's progress and achievements, Hub members now see that it is a time to celebrate achievements and a time of opportunity- the 'stars are aligning'

Opportunities identified:

Making great work more visible. Hub lead identified possibility of developing a case study to put into a journal.

How do we value add e.g.: supporting Fishers of Men (in Logan) and build on more opportunities to engage with men?

Opportunities to nurture and build ownership of the Hub through sharing of stories, celebrations, yarning, and practising self-care.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Part 2: Knowledge transfer					

First level capacity	The network has capacity to develop a program that meets local needs.			**X**	

Supporting evidence:

There is a wealth of information about local needs that has already been collected, including things like literacy and cultural needs, and "our job is to build responsiveness to needs into what we do" and "we ask people what they need".

Five 8-week DIYH training programs were delivered in response to stakeholder needs. These were rolled out to various organisations and consumer groups e.g.: Canefields Clubhouse who reported "really positive feedback"; that "people had never considered their mental health and wellbeing in this way before" and it enabled individual ownership and a safe way to disclose experiences.

Examples were shared where Hub members were drawing on existing skills and knowledge- for instance, use circle practice (circle way) – and check in and check out processes.

Programs have been tailored to local needs. The network asked for feedback through a survey and this has informed activities moving forward, e.g. "checking in with people and tailoring it to needs like anxiety".

The network has also modified activities in response to local feedback - for example laughing yoga as someone found this activity offensive and "it is just something to consider".

Opportunities identified:

It was suggested that there is greater capacity in Logan to run 8-week programs.

 "As a network we need to identify assets, consider what we can offer and then look at readiness. It is a diverse community with ongoing needs and how to sustain this work is an important question".

Opportunities exist for offering more trauma informed work.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.				X

Supporting evidence:

Lots of training and tasters having been delivered with five 8-week DIYH programs and 11 one day events. This was seen as critical to achieving the many ripple effects in line with the objectives of this program.

Partnerships "rippled from year one". The 'Dream Team' planned an 8-week program. Only a small (but dedicated) group attended and this had a significant impact for participants, both professionally and personally. Examples included:

 "*this is the most exciting work that I have ever done"; "We bring our own experience'; "our clients teach us a lot"; We "get to know them".*

One male Hub member was identified as being very influential – through his *'softly and gently' approach to help 'support and grow'*

Murri sisters noted the benefits for Indigenous communities, including the "beauty to find and connect to supports for families and to keep families together" – "we got a lot out of it".

A local neighbourhood centre provides weekly offering at the school to provide tea and coffee as a soft entry approach - this is ongoing and incorporates elements of WoW

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
	One Hub member noted their past experiences delivering similar work in NZ and the similarities between WoW and "tangate whaiora". We are all seeking wellbeing- regardless of who we are. "This work is person to person. It is beyond work to life." Hub members are able to recognised evidence base for their work and can discuss the rationale for the activities they deliver. **Opportunities identified:** To do more work to engage, transfer knowledge and support the wellbeing of men and more diverse community groups.				
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**			X	
	Network members expressed excitement in trying new ways to use WoW. For instance, Hub member the Benevolent Society has included the WoW in their assessment tools and Recovery plans. It was also reported as being very relevant in schools and their engagement with parents and the community. • Look at how the Wheel of Wellbeing fits into existing delivery of WRAP (Benevolent Society) and the wellness toolbox. • Multiple members reported that WoW informs our work and "how we can build wellness into existing activities" • One Hub member gave an example of a client with significant mental health challenges and how wellbeing could be incorporated into different service responses. The initial response was "this isn't for us", but was useful to help them see that they were number one "when it comes to connecting to your own wellbeing". • Hub works with Mental Health coaches to support work in schools. **Opportunities Identified** • Using WoW program as a strategy for people who are on the waitlist for programs. • Using WoW online to educate children in a more positive and proactive way rather than targeting specific problems like bullying.				

Part 3: Problem solving		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**			X	
	Supporting evidence: The Logan Hub was described as being more nebulous/fluid – "not a network in its own right", which was seen as being ideally suited to work alongside other services and networks. People work together in pre-existing relationships. These relationships were described as- *patient, flexible, respectful and not expecting people to be perfect.* We share ideas, what worked and what didn't. Use check-ins and check-outs and feedback (e.g. feedback surveys) - 'We all have different strengths'. It was reported that the pre-evaluation survey could be triggering for some people. "For one lady this was a difficult experience and proved to be a barrier so we learnt from this experience". If laughter yoga is too confrontational it can be changed to Tai Chi or chair yoga.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
	Network is seen as being "action focused" and "action driven". **Opportunities identified:** Working well together in pockets but could look at how to do this more broadly across Logan - the community of practice was seen as one way to do this. Tap into broader structures that have formalised processes/agreements, such as Logan Together Opportunity to capture stories and share successes.				
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**			x	
	Supporting evidence: Logan presents some unique consideration, with a highly multi-cultural community and an area of low socio-economic status. "Visual tools are useful for cultural groups". "We are working with vulnerable populations". "Literacy can be an issue for some people." "yarning first before forms", were some further examples provided on the Hub's responsiveness to emerging issues and learn. **Opportunities identified:** Considering the need to formalise partnership arrangements, if required.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**			x	
	Even with concerns for vulnerable populations, WoW was seen as effective for use with people with 'severe and persistent mental illness' as evident in the work with Benevolent Society in their Personal Helpers and Mentors program. The Hub lead has reportedly "led by example" and provided leadership that is focused on action, solutions and supportive relationships. The use of circle way was seen as a flexible and sustainable way of problem solving.				

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**			x	
	Supporting evidence: WoW has been built into team meetings and supervision frameworks of Hub partners. This has been primarily at RAQ's office at Logan but has also influenced the organisation more widely. For instance, Centrelink have used WoW as part of their team activities- 'we even did laughter yoga' Local council have provided training and access to advertising in council publications.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

Wellbeing is now on the agenda for organisations as reflected in State-wide Education Meeting

Structural issues not addressed as much in Logan as in SMBI. Initial work through Council but this has not continued although the council's representative at the evaluation workshop indicated a willingness to re-engage.

Opportunities identified:

How do we gauge the collective impact of the Hub?

Engaging with Logan City Council and considering using the Mental Wellbeing Impact Assessment to engage more the community and with the Logan Together initiative.

Present and be a presence at a National Conference – e.g. Change Fest 2018

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.			**x**	

Future challenges:

It was suggested that the NDIS will pose a challenge for group-based activities.

Champions may or may not have jobs in the future.

There is free training for wellbeing but who is going to provide training. Can embed wellbeing into what we do and can do a lot without training.

Extra stuff like gifts that we don't have resources for- not sure how to sustain them?

Opportunities

Corporate funding is an opportunity that is yet to be explored. A number of possibilities to be considered eg: Logan Law, Theiss.

Consideration of longer term funding and auspice arrangements, as appropriate.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Human	**The network has capacity to develop human capital.**			x	

Potential leaders are identified as interested and able. The interest and passion of key people drive the work, and this "impacts others". There are leaders now in the community who can deliver training.

New position funded by the Commission will continue to support roll out of WoW training.

Training may not be feasible without paid trainers.

The role established within Benevolent Society is self-sustaining- delivered DIY happiness (8 week program).

Structural model in place- train the trainer and Implemental verification process.

Opportunities

Possibility of an on-line refresher.

Capturing the 'ripples' and how it is impacting the community.

The yearly survey is an opportunity to capture impact more.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Social	**The network has capacity to develop social capital**			x	

Supporting evidence:

'This evaluation reminds me that this is important but sometimes falls by the wayside'.

	'We are more connected' significance of circles processes (e.g. using the talking 'stone').
	As a network there are clusters and constellations. How do we connect the dots more?
	Ritual of connecting over morning tea. Shared morning tea and gifts.
	Opportunities identified:
	Link into existing mechanisms to look beyond 2019.
	Facebook page for network- online community, could personalise more e.g: interviews with trainers.
	Have private group page but need to activate this.
	More conscious gathering and celebration. Desire for more contact and greater connection.

Appendix 7: Southern and Moreton Bay Islands Wellbeing Hub CCI report

Table 3. SMBI Wellbeing Hub CCI report

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
First level capacity	**The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**			x	
	Supporting evidence:				
	The network has identified community resources needed to both deliver activities as part of the initiative and to sustain the project. Coordination is in place through the network with a clear goal to be community led (which reflects a strong overlap in group membership with the Progress Associations. Network members having undertaken an extensive local engagement and planning process (using the MWIA) are currently looking to engage external funding support to establish a purpose-built Wellbeing Centre and implement a raft of strategies to promote Wellbeing. Key achievements have included:				
	- Initially, 10 signatories to the MOU with community representation from the islands. This gave people a voice. - An initial action plan was developed. - Engaged the Bayside MH network.				
	Potential leaders have been identified within the reference group and existing network. Leadership and ownership of the Hub is evident in the commitment of the reference group. There are also a lot of new people attending community meetings and the network "can definitely identify potential new partnerships".				
	Hub initiative began with existing community centre with the aim to better utilise this physical space. This was achieved, for example, when computer training was offered, and Redlands Community Centre used the physical space for emergency relief. Centrelink also use the space and a support group was offered with Bayside Initiatives Group (BIG) – although this had time limited funding.				
	Work started with existing partnerships and began to look at how existing initiatives can include a wellbeing focus as part of raising awareness of wellbeing. Partnerships were established with several services, for example, Benevolent Society, FSG, BIG.				
	SMBI reference group now meets on the island- was previously meeting on the mainland. This was an important step and an important message to the people living on the islands				
	Identified desired outcomes as:				
	"Help people live a good life"				
	"flourishing individuals and communities"				
	The Hub has identified members/community that still need to be engaged e.g.: churches and AA. Hub members have consciously asked 'who is not visible?' The Hub also recognises the challenge in connecting - 'to do that effectively'. A snowballing technique is utilised whereby Hub members are seeking to work in with groups to identify others. "Once you start something it builds…"				
	The context on island living was seen to be particularly significant- sometimes people on islands are more solitary. It was recognised that this is sometimes a choice and that, as a Hub, they didn't want to be seen to be imposing on people but at the same time,				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely

acknowledge that isolation is a real issue. The aging population was considered to have significant needs on the islands in this regard.

Opportunities developed

A mind map was developed by the reference group and identified links both within and outside network.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Second level capacity	**The network has capacity to deliver a program.**			x	

Supporting evidence:

Within the Hub, there are visible community leaders who can provide training, engage with community and share knowledge. Hub members identified who they were connected to and recognise that groups/services/community members add value and support each other more. Own self- care was important to network members in their knowledge and delivery of wellbeing.

Benefits were identified as connections. Also, "Food was there and it is always a success' "Fun and food'

WoW activities started happening and were more formally incorporated into existing activities, events and marketing in the community. Wellbeing focus and activities were incorporated into existing opportunities at activities and events – e.g. Savvy seniors, Sea markets. The network then began to build greater connections and capture details of people who are interested and built a stronger awareness of wellbeing within the community.

Network members who are part of the core wellbeing group had additional skills which led to other activities such as the delivery of CPR training to the islands. Linked WoW to early learning centre- two week WoW workshop provided for the early learning centre. Savvy seniors- marketing/flyers all branded with WoW logo etc.

Opportunities identified:

Greater marketing to promote the existing links the Hub has with existing initiatives.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Third level capacity	**There is a sustainable network established to maintain and resource a program.**			x	

Supporting evidence:

The network identified three phases of the Hub: initial investment, involvement of more partners and leaders, and progress towards a community led model.

Experience and capacity were identified within (and through) existing members. Considerable resources provided by members of the network- examples include physical spaces which have been made available for visiting services, including the library on Macleay. The "service sector and community are ready to respond".

Network identified that they were at a "crucial moment- at a pivot point and were ready to take off" (with the establishment of a purpose-built Wellbeing centre for SMBI).

They also identified that with community development that you "can't rush but the focus is on sustainable". Key strengths appear to be that:

- Services are coordinated and co-designed with local community. How to use skills on the island that are already here?

- Recognition of the community and the strengths of residents. Who is part of the community and invested? Involving local people and local organisations and associations
- A Mind Map was developed to explore existing and potential links from a range of focus areas
- Workshops on the mainland for staff. Workshops in the Redlands for services to up-skill people coming to deliver services. More training delivered for volunteers, community members and service providers. Trainers from previous 'train the trainer' training led the workshop.
- Invited people to come together to form a working party. They asked- what does this mean? who can we engage? what are the needs and how to respond? how can we get down to the common level to find out what the needs are? Connections and mind map to get things started.

There were clear examples of investment beyond the initial investment by the Queensland Mental Health Commission. Funding submissions are also now in place for work towards a community governance model.

Owned by participants

Community have identified that this is a community wellbeing space. Wellbeing was recognised as important and an area of focus by the community.

Involvement of the Progress Association has been important in leading the work of community involvement.

Greater community investment- connection of associations/groups/individuals and services

There was an example of an individual within community using Facebook to ask- what would help you to have better health and wellbeing on the island? 'Tons of responses to the post'. Natural community response.

Maintained by network

Sustainable network but acknowledged that it relies on a few key people and without them' it would fall apart' 'without RAQ and council it will not survive'.

- Network proposed to arrange a one day a week (fortnight) opportunity to connect as a community. Spaces in community and how community can benefit for this regular opportunity. Connect together to engage in an activity as a community but support is available, and services can be involved- 'soft entry'.
- Great assets in community that need to be activated. Network will help to activate these assets and services can come alongside. Community and natural supports first- communities first, services second

Opportunities identified:

These networks will continue to broaden and strengthen relationships and focus on wellbeing. Beyond and into the future- coordinator position for the island is needed. Building better regions funding may be able to supply funds for this role.

Part 2: Knowledge transfer	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
First level capacity	**The network has capacity to develop a program that meets local needs.**			x	
	Supporting evidence: *Sharing resources and knowledge.*				

Hub members reported that there has been significant community representation and input (from all islands).

Network members have worked together in identifying groups of residents and gaps and needs on the islands. This includes directly asking the community and harvesting feedback- "everyone could give an example of what happens when you don't have support"

Examples:

- Lions established activities, pick up and provide lunch to seniors, seated tai chi…
- Neighbour day used wheel of wellbeing- initiated by Redlands Council.
- Establishing a vision of what the community wants
- Ideas from community - what is available? What do the community want and need- conscious desire to not pre-empt what community want
- MWIA has been completed with community and has been a useful screening tool in identifying needs

Good coordination evident within network.

Physical space at the Hub has been established and is used by services and community. There are hopes for greater utilisation of a physical space, once it is more developed. Progress hall is also utilised.

Modifying activities

Initially, identifying that needs are not being met but recognising that initiative is not being driven by the community. This awareness was present in the initial stages of the program and strategies were utilised to address this shortfall. For instance, liaising with community groups and local resources.

- Targeted strategies have now been developed.
- Asked- how to reach broader communities beyond those already engaged?
- Reaching identified groups e.g. teenagers, isolated older people
- Seniors, men's health and youth are identified gaps

More than a space for workers- needs to be available for the "people", the "common herd"

Opportunities identified:

Community Champions - key people who are trained in disaster management and also looking to include WoW training for Community Chaplains.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Second level capacity	**The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.**			x	
	Supporting evidence:				
	A formal screening of local needs and structural barriers was undertaken as part of the MWIA. The work has focused on what can enhance strengths of the local community and mitigate risks? The Hub at its core, has a strengths-based focus and is built around factors that support wellbeing. This focus includes aspects of enhancing community control, community assets and building capacity and participation. Identifying resources is seen as a foundational part of the process of developing the project and making it sustainable. This also included a broader process in building capacity and knowledge so training broadened to service providers and community.				
	Examples included:				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
	• Sharing WoW at events and community activities eg- FSG Open Day • Soft entry for improved access and support and using existing activities within community- how can services be available/offer support rather than be the focus. **Opportunities identified:** Need to capture and disseminate evidence of this effectiveness.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**			x	

	Supporting evidence: Have incorporated wellbeing and WoW at events e.g.-Thrive event, Savvy seniors. The Hub lead identified a time of 'Hiatus' but later recognised this "as a time of transition" when the Hub transitioned to more work involving WoW. Hub described as an idea or concept but they are now trying to establish a more user-friendly physical (community service) Hub. Focus is on bringing community in and bringing together what is happening already Examples: • One Hub member wears different hats (e.g. Salvos and Progress Association), seen as the 'technical advisor', also as integral knowledge in to how to develop governance model and delivery component that is community driven • Interest from service sector has grown in last five months (now 30-40 people attending network meetings). MWIA is backed by evidence and specific initiatives are used that are backed by evidence. Share this information when appropriate. "When they ask the question- then I give the information" *Feedback* At training- ask what do you want at the beginning? Did you get what you wanted? Feedback was elicited from Quandamooka event and other public events – "we ask people for feedback and ideas. Examples were provided where the Hub has modified activities to meet needs of participants and community, for instance- changed time of training to fit the needs of the group and use of FSG Open Day- tailored to people with disability **Opportunities Identified** • Identified need and desire to capture the impact more effectively. How "can (we) build evidence about what we do and create evidence of what we are doing to build sustainability"? • "we could do better at sharing information about local activities and community responses". • Community governance is the next step.

Part 3: Problem solving	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**			x	
	Supporting evidence:				

there were also funding dollars attached to services that were supposed to be provided on the island. Initially, tried to find a new location (physical premises) to make it easier to provide services as the existing physical premises was inadequate and a barrier. This initiative has meshed well with community needs for a physical "wellbeing Hub".

MWIA was completed with community and was a useful tool to gauge the structural needs of the community.

Examples:

- Asking for council support to bring together network and representation that needs to be involved and to identify strengths and needs
- Bringing in state government to support with funding for the future.
- Engagement of Social planner.
- Feedback from the MWIA and final report to SMBI reference group

Opportunities identified:

The development of processes to manage communication and coordination more effectively. Planning and problem solving outside of the Hub lead will promote sustainability of the Hub. Funding is currently being addressed to support sustainability of Hub.

Transport is an issue on the islands- volunteer drivers is another way to do this.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**			X	

Supporting evidence:

Considered- how would Hub impact the wellbeing of the people on the islands? Began with an MOU between the 10 organisations but there is now a greater focus on community driven governance as part of efforts to establish a physical wellbeing Hub.

Opportunities identified:

Terms of reference was identified as something missing

It will be important to review/update the WoW resources to better reflect Australian content. For instance, when working with First Australians or culturally diverse communities.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**			X	

Supporting evidence:

Key recommendations from the MWIA were developed that went back to stakeholders- network asked what does the literature say? Establishing ways to involve people was seen to be key. It "needed to be driven by the community".

Identified that 'we have to do something more around the Hub?' Key people came into place. Reference group met. Looked at report and informed what was needed moving forward. Recognised that it wasn't sustainable- nobody was driving it, didn't have community involvement and it wasn't driven by community.

Some solutions were offered- Redlands Council- stepped into acting chair. It was recognised that ownership needed to be broadened, more membership and needed to include more than those who had signed the MOU, physical space at Hub not fit for purpose.

Examples:

		Benevolent Society offered to be initial connectors and respond to barriers e.g. transport, physical premises and how to connect.

- Benevolent Society offered to be initial connectors and respond to barriers e.g. transport, physical premises and how to connect.
- Need for physical spaces. Community will decide meeting place and spaces to help coordinate and support visiting services.

Opportunities:

In the future there is a need someone for someone in a paid role to lead this community development work. Coordination work needs to happen to expand and to create space on other islands.

Part 4: Infrastructure & investments	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**			x	

Supporting evidence:

It is clear that key local organisations are involved in the Hub and that Hub members are committed and invested. Hub members reported the initiative aligns with their constitution and/or values of local organisations e.g.- Progress Association and Salvation Army.

Wellbeing is identified as important to local residents and services are invested to support the needs of the local community. Redlands Council and FSG have reportedly taking it up as a model and a way to guide work. It has also been embedded in partner's service delivery. For e.g.; Benevolent Society. clients of mental health services if they want to do a course on Recovery or WoW. People reportedly prefer to use community spaces for WoW, although the spaces are not always friendly

Structures set up to support collaborations

- Spaces in community are already activated. The focus now needs to be on how to coordinate and bring together community in a more purposeful and structured way. Agreement from community associations to design and bring together ideas.
- Community development framework- we can come together as a community and provide wellbeing activities and service can link into these- initiated and led by community

Opportunities identified:

- Data collation and reporting of activities and impact will be required to support policy commitment and change.
- Need to better capture and measure community impacts. One possibility is to share and better capture stories. Who will measure this?

Capitalising on local research possibilities.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.			x	

Supporting evidence:

Network can identify costs and benefits that are needed. Partnerships and support have been established e.g.; Benevolent Society and Running Wild have supported wellbeing roles and programs.

Progress building and community library are utilised to meet local needs.

Funding being progressed to develop a purpose-built wellbeing centre for SMBI.

Opportunities:

Identified potential future funding and network is progressing these opportunities:

- Islands eligible for regional funding, building better communities funding. This was identified as an opportunity to tap into funding and greater sustainability.
- Goal- Funding for community governance funding, applying for infrastructure funding.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Human	**The network has capacity to develop human capital.**			x	
	Supporting evidence: Significant local champions exist (and were present at the evaluation workshop). WoW training is continuing to be delivered with a focus on upskilling the community sector. Examples: Many initiatives already in place e.g.: • Progress Association has wellbeing events • Organic farm and markets. • Neighbour day. • A staff member from carers FSG, held a one-day workshop- first aid training • Mental Health First Aid • Storyteller- this was a memorable event and significant for the community Took it to the markets to get ideas from the community? • How can we have a more vibrant and flourishing SMBI? Lots of people came, someone from every island. What is vibrant and flourishing? **Opportunities:** Empowerment of more community groups to support other people in their community.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Social	**The network has capacity to develop social capital**			x	x
	Supporting evidence: Social cohesion is strong on the islands and this is reflected within the network. "We do a smashing job because we have had to support each other. Compared to other communities" "Feed them, Fun and laughter" is the key. • Strong community identity **Opportunities identified:** A focus on strengthening Hub relationships outside the training will be a need going forward. New Hub Coordinator is getting to know community and how to value add?				

Appendix 8: Blackwater Wellbeing Hub CCI report

Table 4. Blackwater Wellbeing Hub report

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**			X	

Supporting evidence:

Hub members were able to identify other organisations that they are working with e.g. council and Rotary. They are receiving invitations to work with other organisations including the Indigenous Development Officer at the local council, where they have been invited to present a WoW activity. Members were able to discuss other roles that they have within other community organisations e.g. Progress Association, church groups, CWA and how they connect these roles with Hub activities.

The Regional council were an initial catalyst and continue to be a big support in addition to Centacare as auspice agency.

Hub members were able to identify outcomes they were seeking to achieve. These outcomes were consistent with the Wow framework. They were also able to identify the positive influences that involvement in the Hub had on their personal wellbeing and community connections. Social connection is a big goal for the Hub in addition to learning new ways to support mental health.

Opportunities identified:

The Hub members were able to identify a number of community stakeholders that could be engaged in partnerships with the Hub. They have identified the need for further conversations with CWA, Lions, mines and local schools. During discussions, the Hub members were able to identify other community partnerships they may be able to approach (e.g. youth groups, PCYC, Scouts).

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to deliver a program.**				X

Supporting evidence:

The Hub comprises of a group of people who reported they are working well together. The group has a shared vision and were able to identify strengths and roles for each member. The respect for other Hub members was evident to the evaluation team. Members identified that the Hub vision is focused on giving to the community and were able to discuss how they have used WoW activities informally within their own networks and relationships e.g. a Hub member shares with others a "*fun fact that volunteering is the number one thing that you can do for your wellbeing*".

Whilst there is no formal roles or arrangements within the group, each group member was able to identify skills and contributions to the group. They were able to identify skill gaps and have sought other community members who may be able to assist and share knowledge and skills; associate members of the Hub. With the assistance of Centacare, the Hub has developed a program logic and action plan. The Hub documented key actions and meeting notes (minutes) and clearly delegated activities to members to achieve their goals. The Hub members prided themselves on ensuring that activities undertaken were well organised and they collected feedback to identify improvements.

Members reported personal benefits from Hub involvement such as getting out into the community and doing something, learning something new, building on existing knowledge and building connections. Comments from Hub members included:

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

"*It really blows me away; This is giving me greater fulfilment than when I was working*"

In relation to identifying local resources, the Hub members were able to cite appropriate local options for funding and in-kind resourcing and contributions. Hub members reported that having an auspice organisation for legitimacy, supporting the development of grant applications to receive funds as important elements in their success to date. Discussed that they would like to move away from always using Centacare as a resource and identified the council and Rotary as possible alternatives.

Opportunities identified:

Engaging more members, in particular "associate members" around their particular interests and skills to contribute to the Hub.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is a sustainable network established to maintain and resource a program.**				**x**

Supporting evidence:

One Hub member has recently been engaged by Centacare to support the Hub initiative for two days a week. This member is undertaking tertiary studies and has a good understanding of community development or asset-based/strengths-based approaches. More broadly other network members recognise the importance of social inclusion and connectedness within their community.

As tangible evidence of investments being made beyond the original sponsoring group, the Hub has been engaging with external providers. For instance, engaging Aurizon, local council and schools to coordinate a week-long program engaging Nicole Gibson to work with all schools in Central Highlands region as a youth mental health promotion initiative. A number of in-kind contributions including venue hire from local churches and council were also cited.

A number of examples were provided where the Hub is able to capture people with specific skills or interest to connect them with activities beyond the core activities of the Hub (e.g. C&K community garden).

In relation to the Hub's sustainability members expressed that if core members remain, the Hub would definitely be able to continue without support from Centacare as the auspice body. Ongoing funding was identified as major issue in a community which is struggling/limited resources, however, have identified good plans for ongoing funding and support (including using Council Community Development Officers).

Opportunities identified:

The Hub members were able to identify the need to develop a local brand e.g. The Blackwater WoW Hub through the development of a logo, independent email address, further use of their Facebook page and potentially a website. Additionally, the establishment of an ongoing auspice arrangement e.g. with Rotary would ensure sustainability beyond the current funding cycle.

Part 2: Knowledge transfer		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to develop a program that meets local needs.**			**x**	
	Supporting evidence:				

Hub members were able to identify their own strengths and also where more help is needed. They take onboard feedback from others (from events) and when they work with larger events and organisations they report they are trying to "*listen to what is needed*". A common belief is the desire to build on what is already happening rather than developing a new program. "*Partnerships are important*" and Hub members are aware that other organisations are struggling with volunteers.

It was noted that the community is highly transient with significant FIFO needs – something they have received feedback about e.g. "*the need to target more men*". It was reported that approximately 95% of event attendees are women. Although they have 'associate members' who are men – these family and friends contribute and provide support in various ways. Although FIFO's were seen to be a difficult group to engage effectively some brainstorming of ideas proceeded.

The Blackwater Hub has its own (local) program logic. In terms of the key local needs identified, they are youth mental health, older people's mental health and developing social connections. "*We see a range of people attending, people that you would not expect, outside the usual groups*".

Opportunities identified:

Following up on brainstorming of strategies to engage more men and FIFO's (e.g. having "community" rather than "family" picnics in the park, golf and water skiing events etc).

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.**			X	

Supporting evidence:

Initial WoW workshop held in March 2017 and it clearly had an impact. "*I have learnt so much*". "*It's transformative*". "*It was instrumental.*"

The WoW has subsequently been used as a guiding framework to create events. This includes providing supporting information and awareness raising (e.g. research provided in handout regarding herbs and nutrition and the connection to mental health). One Hub member is trained to deliver WoW activities, but more are keen.

Opportunities identified:

Two additional Hub members have expressed an interest in undertaking WoW training, e.g. (we)"*would like to do more training but haven't been able to lock in dates*", as yet.

Opportunities were identified to attend training in Brisbane, however, local training is needed and "*it would good be able to support other Hubs in other areas*".

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**		X	X	

Supporting evidence:

The Blackwater Hub, having previously been identified as "*flourishing*" acknowledge the need to work with other local Hubs with the first WoW workshop being a combined effort of all Hubs in the region. A Hub member has also been invited to attend a group in Biloela (neighbouring local government area) to talk about the Wellbeing Hub and WoW.

	Hub members report that they haven't seen many others using WoW within their organisations as yet. Feedback suggests that individuals can see the value and the Hub is the main driver of this. The (local) Council has done some activities. Local schools are identified as key opportunities, but it is still "*early days*" in establishing these partnerships.
	Opportunities identified:
	Following up on opportunities to engage with Biloela, local schools and CWA – as well as mining companies.

Part 3: Problem solving		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**			x	
	Supporting evidence: Hub members demonstrate they engage in respectful collaborative practices (including sitting at round tables for meeting discussions and using established group processes). A number of areas where they have worked with local partners to overcome issues were identified (e.g. working with council regarding use of local venues and combining events for International Women's Day). They have also engaged the services of the Youth Development Officer as to how to best engage the high schools. **Opportunities identified:** Continuing planning and discussions to ensure the sustainability of the network beyond December 2019.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**			x	
	Supporting evidence: Although no significant issues have been encountered within the Hub, Hub members are aware of a good resource (given to them by the auspicing body) which provides useful assistance for how to work through problems as they arise. The group has already recognised the importance of mentoring, to this end. **Opportunities identified:** Furthering local mentoring opportunities.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**		x	x	
	Supporting evidence: Although Hub members have not had to problem solve any substantial issues as yet there is significant capacity evident which suggests they have resources and networks available to utilise or engage when needed. **Opportunities identified:** Continuing annual review mechanisms or discussions as a Hub.				

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**		X	X	

Supporting evidence:

In relation to getting the wellbeing focus embedded in local organisations and plans, Hub members identify some promising developments with Council. For instance, the Youth Development Officer has approached them to include WoW in a number of youth/community events. Mental Health First Aid is being integrated into some schools. Schools are seen as a valued partner – keen to target more teachers – and Hub members also identified day care as another important sector/stakeholders. It was noted that they are looking to do a Saturday workshop to capture some more people and/or break the WoW workshop into a number of two hour sessions. Need to find a forum about how WoW can be used as a tool in workplaces and its many 'ripple effects.'

Opportunities identified:

Saturday WoW sessions and influencing the schools, and in particular, Health and Safety officers at the mines to look at how WoW can be used in workplace environments to improve mental health and productivity.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.			X	

Supporting evidence:

The Hub collects gold coin donations at events with donations going to the auspice agency and various in-kind contributions made.

Hub members have developing grant writing skills and access to support for local funding opportunities (e.g. with the mines).

Discussions are also planned with Rotary regarding future auspice arrangements to ensure the Hub is able to continue to receive funding and operating post December 2019.

Opportunities identified:

Following up on plans to establish ongoing arrangements with an auspicing body and local project funding opportunities with the mines.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Human	The network has capacity to develop human capital.			X	

Supporting evidence:

As noted in Knowledge Transfer, Hub members have established human capital (having engaged some local community leaders in the network) and continue to develop community knowledge, skills and local leadership to promote mental health and wellbeing

Opportunities identified:

Developing more male 'wellbeing champions'.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Social	The network has capacity to develop social capital.			X	X

Supporting evidence:

	Hub members report they enjoy working with each other and identify each other's strengths.
	We *"would love a two year celebration"* - whether in house or with community to recognise achievements.
	Recognise the need to have a solid membership (and five or six is seen as being good in this respect) as well as the need to continue to involve more associates and champions. Members are also aware of the need to have more diversity in the Hub and see opportunities to try some different things to engage others (e.g. a game night, ski club were identified).
	Opportunities identified: Although members appreciate and enjoy each other's contributions, the Hub needs to ensure deliberate investments are made in recognising each other and celebrating achievements on a continuing basis - including linking (and/or lunching) with other CH Wellbeing Hub members, especially as new members continue to be engaged in different capacities. The two year celebration will be important to this end.

Appendix 9: Capella, Tieri and Sapphire Gemfields Wellbeing Hubs CCI report

Table 5. Capella, Tieri and Gemfields Wellbeing Hub CCI report

Part 1: Network partnerships	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity — **The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**			x	

Supporting evidence:

Both Capella/Tieri (CT) and Sapphire Gemfields (SG) identified difficulty in attracting and maintaining active membership to the Hubs. Whilst there was initial interest in the Hub idea, membership has slipped away and now much of the work is done by one or two leads in each area. Each community has very different populations and needs which influence membership and priorities of the Hubs. Hub leads were able to brainstorm a number of recruitment strategies and reported a need to further develop the Hub group/network.

Hub leads have strong connections to community development staff in each region and work closely with CTMlinks (Capella, Tieri and Middlemount Community Support Network) when organising wellbeing activities. Hub leads from both regions were able to describe a number of local organisations (Council, churches, schools) which they are able to work with and access in-kind resourcing (e.g. venue support).

Opportunities identified:

Hub leads identified a need to focus on recruitment of Hub members and developing Hub groups to ensure sustainability of the Wellbeing Hub initiative. Strategies to increase recruitment identified and include planning of strategies, having a calendar of events (ensuring that there are future events to keep momentum going and engage people in the longer term), revisit membership target groups and expand options (e.g. mother's groups). Hub leads identified a need for some resourcing for recruitment (i.e. marketing material).

	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity — **The network has capacity to deliver a program.**		x ←→	x	

Supporting evidence:

SG Hub lead reported utilising the WoW framework to approach local organisations and provide wellbeing activities. Has an interest and training in laughing yoga and has presented activities to Guides and Garden Group. Hub lead described self as a community 'knitter', bringing different elements of the community together. Reports that the WoW framework fits well with the promotion of wellbeing – easy to understand, easy to use to plan activities and can use these activities to start conversations around mental health and wellbeing. Has noticed avoidance of discussion about mental health so now uses wellbeing as the focus. Hub lead reported that there has been confusion regarding the Hub and WoW – a lot of energy has gone into WoW activities but sees a need to focus on clarifying what the Hub is and building the Hub membership.

CT Hub leads have also delivered wellbeing activities (e.g. gratitude activities with domestic violence groups, bushwalk and macramé community activities, Aboriginal art days). Also articulated that the Hub leads have been side-tracked by WoW and would like to review the development of the Hub membership. Capella and Tieri have recently joined forces to strengthen the development of the Hub and Tieri Hub lead has developed a

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

vision and mission statement. Finding these activities difficult to fit into their busy lives and would like to increase the network to share the load.

All Hub leads articulated strong support from, and networks with, each other. Each Hub lead described a commitment to the concept of the Wellbeing Hub.

Opportunities identified:

Hub leads are increasing confidence in facilitating WoW activities. Have identified the need to further develop the Hub identity and membership. Currently looking at developing some plans for future activities – to be more proactive rather than reactive.

Third level capacity	**There is a sustainable network established to maintain and resource a program.**		X		

Supporting evidence:

The CT and SG Hubs are still in the formation stage. Strong connections have already formed with some key community groups (e.g. CTMlinks and Local Councils). Hub leads were able to articulate clear purpose and commitment to the Hub and good support from each other.

Opportunities identified:

Both Hubs have committed members and the potential for sustainability but need to strengthen Hub membership.

Part 2: Knowledge transfer		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to develop a program that meets local needs.**		X ◄──►	X	

Supporting evidence:

Hub leads were able to identify the characteristics of their local communities as well as the wellbeing issues impacting on community members.

SG was described as a mining and tourism town with a population of 2,500, increasing to 6,000 over the tourism season. Community members are transient and there is difficulty recruiting and retaining health workers to the area. There is one primary school in the area. The Hub lead was able to identify the community members that are active and volunteer regularly. Currently many of the current community groups are based around an identifying factor or activity (e.g., craft group) and closed to other community members. Hub lead would like the Wellbeing Hub to be an inclusive gathering, particularly supportive of community members with limited support networks.

Capella and Tieri were described as very different communities with different issues and needs. Tieri is a mining town with a lot of new, young families with limited support networks. Capella is an established township with a history of agriculture, with an aging population. Hub leads describe the purpose of the Wellbeing Hub as a 'tribal vitamin', promoting a sense of community and the development of support networks for those people who have limited family and natural supports.

Both groups identified goals of the Wellbeing Hubs as fostering community spirit and connectedness and providing opportunities for people to give back to their community.

Opportunities identified:

Hub leads are currently changing the way they approach recruitment to the Hub and articulation of WoW activities. There are plans to approach different community groups and develop plans for future WoW activities to address identified community needs.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.**		X		

Supporting evidence:

Hub leads described difficulty articulating WoW activities and Hub purpose to community members. The Hub leads have attended training but described a need to develop a clearer framework or plan to introduce WoW activities and concepts to community members. SG described some pick up of the WoW activities by different Hub members within different contexts (e.g. school teacher has implemented some WoW activities with school children and choir members), but there is no overarching plan or communication of how this occurs. Hub leads identified a need to further develop the skills and understanding of WoW activities within the Hub membership. Would like to develop a plan of further WoW activities and better articulate anticipated outcomes.

Resourcing of WoW activities identified as an issue for the Hubs. Many activities require resourcing and to date there has been limited exploration of how to acquire or fund these resources.

Opportunities identified:

Hubs are currently developing a clearer understanding of the aims and purposes of the Hub and Hub activities.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**	X ←——→ X			

Supporting evidence:

Hubs are continuing to develop members and community understanding of Wellbeing and WoW activities. As this progresses it is hoped that activities will become integrated into the practices of other organisations.

Opportunities identified:

The Hubs would benefit from developing a system of recording events and activities to track the transfer of knowledge.

Part 3: Problem solving		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**			X	

Supporting evidence:

Due to the limited and changing nature of the Hub membership, there were few examples of Hub members working together to solve problems. Hub leads were able to describe how they work together to solve problems. Centacare was identified as a resource to assist Hubs overcomes hurdles and problems.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
	Opportunities identified: As the Hubs recruit new members and develop plans, a process for managing and solving problems will need to be agreed upon by Hub members.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**			X	
	Supporting evidence: As the Hubs are currently undergoing a recruitment phase, the focus has been on group formation. As membership increases, the skills and resources provided by new members can be used to assist in the achievement of wellbeing outcomes. **Opportunities identified:** As the Hubs are currently recruiting new members, community members with desired skills and abilities could be targeted to assist the Hub achieve goals.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**			X	
	Supporting evidence: The Hub leads articulated a commitment to the Wellbeing Hub which will be essential to ensure Hub sustainability into the future.				

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**		X ←→	X	
	Supporting evidence: The Hubs will continue to develop capacity as they expand membership and increase their investment in wellbeing activities. The positive working relationships already established with Local Councils and CTMlinks will assist and support embed wellbeing into different policy contexts. **Opportunities identified:** The development of mission and value statements for the Hubs, in addition to the development of plans for each Hub, will assist in ensuring that wellbeing activities are adopted by individuals and organisations.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.		X		
	Supporting evidence: The Hub leads have a clear understanding of current community resources and the potential to develop these partnerships further. As stronger links are made with these organisations, resourcing opportunities may become available. The Hub leads were able to articulate potential grant opportunities, but may need support to capitalise on these opportunities.				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
	Opportunities identified: The development of further partnerships and networks is needed to ensure sustainable resourcing and support.				
Training	**The network has capacity to develop training capital.**			x	
	Supporting evidence: Current Hub leads and Hub members have skills in leading WoW activities and as the Hub membership grows, so too will the opportunities to train further community members and organisations. Centacare has clear expertise in the delivery of WoW and the Hubs are able to access this expertise quickly and easily. **Opportunities identified:** As network membership grows, further thought to how to support and develop knowledge, skills and leadership will be needed.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Social	**The network has capacity to develop social capital**			x	
	Supporting evidence: The Hub leads demonstrated strong and supportive relationships within their own network and reported a commitment to developing positive relationships within each Hub. **Opportunities identified:** Social capital will continue to develop as the Hub networks develop and expand.				

Appendix 10: Atherton Tablelands Wellbeing Hub CCI report

Due to the limited amount of time that the Atherton Tablelands Hub had been operating, Hub members did not feel comfortable to provide an overall rating for the different domains. A summary of collected data has been provided to allow the Hub to track progress in future reviews.

Table 6. Atherton Wellbeing Hub CCI report

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**				
	Supporting evidence: Hub lead reported that there was initial effort put into identifying and linking with the 'right people'. Hub lead has good links with a number of organisations and committees in the local community and identified the following services which had displayed interest in wellbeing and were well placed to support the Hub activities: ECHO (Malanda), Qld Health, Community Services Tablelands (CST), Access Place (Churches of Christ), Tablelands Regional Council (TRC), P&C representative from Regional Catholic Schools, Education Qld. These people were all invited to submit EOI to attend the WoW training. The EOI process was seen as important in providing people with some background information about wellbeing, engendering enthusiasm and promoting self-selection to the Hub. A number of community members were also supported by community organisations to submit EOI's. A deliberate initial focus was placed on the Atherton and Malanda areas to promote Hub due to existing community groups and connections. **Opportunities identified:** The Hub will continue to develop relationships and networks. Participants are currently very enthusiastic about continuing this process.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to deliver a program.**				
	Supporting evidence: WoW workshop delivered in March 2018 with 14 participants from the Tablelands region. All participants have remained engaged in the WoW workshops. Once training was commenced, Hub lead reported an 'explosion of interest' from different organisations and sectors. The WoW training provided a framework and skills for participants to engage community and promote wellbeing. The framework provides a language to promote wellbeing to others, as well as information and activities to advocate for this work both within organisations and within different sectors (e.g. education, health, aged care, social welfare, disability). The Hub lead has continued to provide support to WoW participants since the commencement of the training. Assistance activities has included: supporting communication and networking between members, developing WoW activities and resources, site visits to develop relationships and promote networking, collation of data and records of activities. Hub lead also presents at community committees, organisations and TRC to promote Hub activities. Hub lead describes a relational approach to building				

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

networks and skills and the importance of meeting with people and facilitating conversations around wellbeing.

Opportunities identified:

Network is still forming and developing. Now that the WoW training has been completed, it will be important to set up processes for continued communication and networking.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is a sustainable network established to maintain and resource a program.**				

Supporting evidence:

Hub is currently seen as a fluid concept – initial relationships and networks will change dependant on priorities and connections of group members. Hub is still in the formation stage – focusing on consolidating current members as well as scoping new networking options. Current Hub members have existing connections with a number of committees within the local community and promotion work is still in progress.

Strong connections have been made with a local festival committee which includes local businesses, schools and community members. The Maize Festival, an annual event, has adopted the WoW framework to guide Festival activities for the next 7 years. This year's theme is 'Colour my World' which will introduce the WoW framework and then subsequent years will focus on individual sections of the WoW.

TRC and Department of Education have expressed support for the WoW and are promoting WoW within these organisations – both within their own organisations as well as for use within service delivery.

Opportunities identified:

These networks will continue to broaden and strengthen relationships and focus on wellbeing.

Part 2: Knowledge transfer		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to develop a program that meets local needs.**				

Supporting evidence:

Hub lead was able to identify many local community issues including: unemployment, aging population, limited economic investment, reduction in ability to maintain sport and recreation activities and resources, families leaving the area. The local community has a divide between wealthy farming families and other community members which are struggling. Currently the community has a number of aged care programs but there is a great need to for family and community support. The overall aim of the Hub was articulated as increasing community connectedness. Hub lead has targeted sectors which are best placed to meet these needs when recruiting for Hub membership.

Hub members were able to identify a number of activities to date which have supported these target groups e.g. activities with youth through the high school and Access. The Maize festival has a focus on supporting young people and families but lacked a framework to support the engagement of these groups. The WoW has been picked up by the festival committee as an overarching framework to plan for the future.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

Understanding of existing resources is developing, but strong relationships with the Department of Education and TRC have provided opportunities for extra resourcing.

Opportunities identified:

Hub members are planning on delivering a number of activities (both with colleagues and within the community). A better understanding of needs will be developed by ongoing engagement with community.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.**				

Supporting evidence:

Hub members reported increasing confidence in the application of skills and knowledge acquired through the WoW training. It was evident that participants were using the WoW framework in their personal lives, with their own families, within their workplaces, within their roles and spheres of influence as well as within their practice. They described the WoW as a tool which assisted them to build connections around wellbeing work in their locality. Participants reported that they were able to use the WoW to influence organisations and transfer knowledge easily to colleagues and others in the sector – a 'basic but not simple' tool which was applicable in multiple settings with a range of people.

The Hub lead is developing different strategies and mediums to share WoW knowledge between Hub members and the community e.g. a Hub website, social media presence and organising promotional material.

Opportunities identified:

Current WoW training process is difficult for rural and remote communities to access and commit to. Flexible training solutions could be explored.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**				

Supporting evidence:

Participants were able to give clear examples of how they have integrated wellbeing concepts and activities into their organisations and practice. Department of Education has developed a learning lounge at a local high school to promote teacher wellbeing. Wellbeing activities can then be replicated by teachers in classroom and curriculum. ECHO has developed a new Youth program using the wellbeing concepts, describing this as a shared language and guide for appropriate activities. Qld Health has started integrating wellbeing activities when working with individuals and has partnered with Access to deliver a wellbeing activity. The Hub lead is currently liaising with the Maize festival committee to recruit and train Youth Ambassadors to engage with young people around the festival activities.

Opportunities identified:

As more activities are delivered, the Hub members will gain a better understanding of what resonates with community members. A process to capture and share activity ideas for different groups of people would be useful and improve efficiency when planning new activities.

Part 3: Problem solving		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**				
	Supporting evidence:				
	The Tablelands Hub is a very new network that as yet, not experienced many problems. The practice approach of the Hub lead, focusing on relationships and negotiating, has identified barriers and problems at an early stage and has been able to work with the Hub members to overcome these. The Hub lead also has good relationships with a number of organisations and committees within the community and can liaise with these groups to manage difficulties as they arise. Hub members are currently developing relationships but reported feeling positive about opportunities to work with others in the Hub context.				
	Opportunities identified:				
	The development of processes to manage communication, planning and problem solving outside of the Hub lead will promote sustainability of the Hub.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**				
	Supporting evidence:				
	The Hub is in the formation stages of the group. Members articulated a willingness and enthusiasm for working together to promote a wellbeing agenda across different sectors of the community. A problem identified by both the Hub lead and participants is in resourcing the WoW activities. The training was expensive for the organisation to support e.g. printing, travel. Many of the activities promoted in the WoW training require resources which come from Maudsley and are expensive and difficult to obtain. The cultural appropriateness of many of the WoW activities is questioned and there has been limited uptake by First Australian communities.				
	Opportunities identified:				
	It will be important to review the WoW resources to better reflect Australian content. This is particularly important when working in First Australian or culturally diverse communities.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**				
	Supporting evidence:				
	The Hub is in a developmental phase and not applicable at this time.				

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**				
	Supporting evidence:				
	The WoW activities seem to fit well with current social policies. Participants reported that they were able to speak about WoW to leaders and decision makers in sphere of influence –				

	both organisational and community leaders. Hub members articulated that the WoW wellbeing framework and activities are applicable across a range of sectors and purposes. Hub members are hopeful that the wellbeing agenda will be supported by management.				
	Opportunities identified:				
	Data collation and reporting of activities and impact will be required to support policy commitment and change.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.				
	Supporting evidence:				
	Partnerships are being developed which may result in extra resourcing for the Hub. At this point, the Hub is focusing on awareness raising and building capacity.				
	Opportunities identified:				
	Further exploration of partnerships to better identify sustainable resourcing and support.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Training	**The network has capacity to develop training capital.**				
	Supporting evidence:				
	Currently much of the resourcing has been directed to develop training capital within Hub membership. Hub lead agency and WoW Support Program are resourcing and supporting this training. Hub members are now planning to run a number of one-day DIY Happiness training to interested colleagues and partners. Hub members have arranged to support each other with this training. Hub members are enthusiastic about this training as they can identify applicability within their own practice.				
	Opportunities identified:				
	As Hub members develop skills and confidence in training, further opportunities to extend knowledge and skills to others will be explored.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Social	**The network has capacity to develop social capital**				
	Supporting evidence:				
	Social capital is developing within the Hub. Hub members identified that being together as a group for the 5 days of training promoted strong relationships between members, but these relationships are not necessarily sustained outside the WoW training. Some members and organisations had worked together to prepare and run activities and Hub members expressed a goal to do more collaborative activities. Hub members were new to WoW and wellbeing promotion but were committed to using these approaches further within their own contexts and communities.				
	Opportunities identified:				
	Social capital is developing in this Hub – a focus on strengthening Hub relationships outside the training will be needed going forward.				

Appendix 11: Cooktown Wellbeing Hub CCI report

Due to the limited amount of time that Cooktown Hub had been operating, Hub members did not feel comfortable to provide an overall rating for the different domains. A summary of collected data has been provided to allow the Hub to track progress in future reviews.

Table 7. Cooktown Wellbeing Hub CCI report

Part 1: Network partnerships		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to identify the organisations and groups with resources to implement / sustain a program.**				
	Supporting evidence:				
	Hub lead reported that initial scoping for the Hub identified three communities to target for Hub participation – Cooktown, Wujal Wujal and Hope Vale. Services, organisations, community groups and Shire Councils were preliminarily approached regarding interest in the Wellbeing Hub. EOI's to participate in the WoW training were disseminated. Two elders from Wujal Wujal were put forward to attend the first WoW workshops but unfortunately a community event prevented their attendance. Two replacement community members were identified through the neighbourhood centre and council library in Wujal Wujal. These community members attended the first WoW training but were unable to attend follow up training due to an extreme weather event which prevented travel to the training.				
	Opportunities identified:				
	The Hub lead is continuing to identify community members and organisations which may be interested in the Hub activities. Due to the diverse and isolated nature of the communities, this is a difficult process and will require time to build trusting and strong relationships with a number of different community members/organisations.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**The network has capacity to deliver a program.**				
	Supporting evidence:				
	The two community members from Wujal Wujal and the Hub lead participated in the initial WoW workshop in March 2018. The community members appeared engaged with the training and involved themselves in the training activities but at this stage there appears to be limited take up of wellbeing activities within their local communities. Possible reasons for this slow translation of training into practice include:				
	• Inability of community members to attend follow up training due to events outside their control.				
	• The appropriateness of the WoW activities for Aboriginal and Torres Strait Islander Peoples. The Hub lead feels that while the concepts within the WoW fit well with community (e.g. connection to land and people), the training may not translate these concepts appropriately for Aboriginal and Torres Strait Islander participants.				
	• A focus on wellbeing activities within the community requires the support of community elders. Unfortunately, the elders were unable to attend the WoW training and further engagement activities/processes may be needed to assist the whole of community engagement in wellbeing activities.				
	Opportunities identified:				

The Hub network is at a very early stage of development. The Hub lead is looking at different ways to engage with these diverse communities. There are existing wellbeing centres in both Hope Vale and Wujal Wujal – what frameworks do they use and what activities do they undertake? How can the Wellbeing Hub connect with these centres?

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is a sustainable network established to maintain and resource a program.**				

Supporting evidence:

The Hub is still very much in the formation stage – identifying potential networks and partnerships which can build the Hub. The Hub lead has presented information about the Hub and WoW activities at interagency meetings in Cooktown. As a result of these presentations, a relationship with the Cooktown District Community Centre (CDCC) has been established and a WoW activity was run with the 60's and better group. This activity was well received by the 18 participants and a second activity is planned.

Opportunities identified:

The Hub networks and partnerships have been slow to develop and the Hub lead is now looking at alternative ways to build a Hub network. An interested member of the Cooktown community has been identified and this person may be able to assist in the engagement process through the use of their personal networks and community knowledge.

Part 2: Knowledge transfer		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**The network has capacity to develop a program that meets local needs.**				

Supporting evidence:

The Hub lead was able to identify many local community issues. Cooktown and its surrounding areas are in an isolated region which experiences extreme weather events. Reliable communication can be difficult due to telecommunication and internet issues. Cook Shire is the largest shire in the country and a decision was made to focus on Cooktown, Wujal Wujal and Hope Vale in the establishment phase of the Hub.

Hope Vale and Wujal Wujal are small Aboriginal townships (population approximately 1,000 and 300 respectively) which are serviced by different Aboriginal Shire Councils. Each township has very different community needs and processes. Cooktown has a population of 2,600 focused on providing services to the region or tourism.

From initial conversations, the Hub lead has identified a need to focus on social isolation of community members. The Hub lead has identified some difficulties with discussing mental health issues in small communities – requiring a focus on wellbeing. Supporting young people has also been identified as an area of priority. The Hub lead was able to identify a number of potential opportunities to engage youth-oriented partners e.g. PCYC, Cooktown Discovery Festival.

Opportunities identified:

The Hub lead is continuing to connect with local communities to better understand need and appropriate wellbeing opportunities and activities.

		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely

Second level capacity	**The network has capacity to transfer knowledge in order to achieve the desired outcomes / implement a program within a network.**				
	Supporting evidence:				
	The Hub lead has completed the WoW Intensive training and is planning on initiating wellbeing activities within established networks. There are logistical difficulties which need to be overcome to increase local participation in WoW training opportunities. Cooktown is a remote location and communities within the Hub are 1-2 hours drive from Cooktown. Consideration regarding to the cross-cultural applicability of the WoW training is required.				
	The Hub lead is a member of the community of practice alongside the Atherton Tablelands Hub members and will continue to share WoW learnings, resources and applications with this network. The establishment of a Hub website and social media presence will assist with this connection.				
	Opportunities identified:				
	Flexible training opportunities could be explored to assist these communities to acquire skills and knowledge in Wellbeing frameworks and activities. Innovative methods of developing and maintaining relationships and connections will be needed to transfer knowledge across this geographically and culturally diverse Hub area.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**The network has capacity to integrate a program into the mainstream practices of network partners.**				
	Supporting evidence:				
	This Hub is in the early stage of development and has not yet integrated wellbeing into the mainstream practices of its partners.				

Part 3: Problem solving	Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
First level capacity	**There is capacity within the network to work together to solve problems.**				
	Supporting evidence:				
	The Hub lead has identified a number of issues or problems in the development of the Hub networks. The development of cohesive partnerships within these communities will take some time and require creative problem solving on behalf of the Hub lead. A number of strategies to address these issues were explored and the Hub lead will continue to work with community leaders to develop and support a Hub network.				
	Opportunities identified:				
	The Cooktown Hub is still in the formation stage and as membership grows, will need to develop a plan to manage communication and problem solving.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Second level capacity	**There is the capacity to identify and overcome problems encountered in achieving the desired outcomes.**				
	Supporting evidence:				

	Not applicable due to the Hub's early stage of development.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Third level capacity	**There is capacity to sustain flexible problem solving.**				
	Supporting evidence:				
	The Hub is in a developmental phase and not applicable at this time.				

Part 4: Infrastructure & investments		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Policy	**The network has capacity to develop program related policy.**				
	Supporting evidence:				
	Wellbeing has been identified as important community priority for the Cooktown Hub communities. The Hub Lead is currently investigating ways to work with or within already established wellbeing centres and programs. It is unclear at this time if the WoW activities will work well for First Australian communities.				
	Opportunities identified:				
	Further understanding of the cultural appropriateness of WoW for Aboriginal and Torres Strait Islander communities is needed to determine the best frameworks and processes to support the Cooktown Wellbeing Hub.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Finance	The network has capacity to develop financial capital.				
	Supporting evidence:				
	To date there has been limited investment by local organisations in the Wellbeing Hub.				
	Opportunities identified:				
	The development of further partnerships and networks is needed to ensure sustainable resourcing and support.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ entirely
Training	**The network has capacity to develop training capital.**				
	Supporting evidence:				
	The Cooktown Hub has offered the opportunity of training to local community organisations and members but unfortunately this has not rolled out as planned due to community and weather events. The Hub Lead has completed the WoW Intensive training and will work with individuals to increase their confidence and understanding of wellbeing frameworks and activities.				
	Opportunities identified:				
	As network membership grows, further thought to how to support and develop knowledge, skills and leadership will be needed. This will be a challenge for this remote Hub.				
		Not at all/ very limited	Somewhat	Substantial	Almost entirely/ Entirely
Social	**The network has capacity to develop social capital**				

| | **Supporting evidence:** |
| | Further development of Hub relationships and networks will be needed to support the development of social capital. |