

Healthy Cities Australia - Program

• Active In-Betweens

Case Study



Healthy People.
Healthy Cities.

About Healthy Cities Australia

Healthy Cities Australia (HCA) is a not-for-profit organisation committed to improving the health, well-being, and social equity of communities across the Illawarra and Shoalhaven regions. Established with a vision to create healthier environments for all, HCA focuses on addressing social determinants of health, promoting sustainable lifestyles, and reducing health disparities through innovative, community-driven programs.

Guided by core values of integrity, collaboration, inclusivity, and equity, HCA delivers a range of initiatives that empower individuals and families to make healthier choices, build stronger social connections, and improve their quality of life. Through partnerships with local governments, community organizations, and academic institutions, HCA supports health promotion activities, including physical activity, nutrition education, mental well-being, and social inclusion.

With a long-standing history of impactful community engagement, HCA is dedicated to fostering a culture of health and resilience across diverse populations in the region.

Acknowledgement of Country

We acknowledge the Traditional Custodians of the lands on which we live and work. We pay our respects to Aboriginal and Torres Strait Islander Elders past, present, and emerging and extend that respect to all Aboriginal and Torres Strait Islander people.

• Introduction

Active In-Betweens

The Active In-Betweens (AIB) program is an after-school initiative focused on improving the health, well-being, and social engagement of children (ages 8-12) in socially disadvantaged communities within the Illawarra-Shoalhaven region. Designed to enhance physical activity, promote healthy eating, and foster community connections, AIB operates at local community centres and is facilitated by trained Health Promotion Officers and volunteers. The program provides a safe, supportive environment that encourages active participation, social interaction, and the development of essential life skills. AIB's approach is flexible and tailored to meet the unique needs of each community, while empowering children through



Key Highlights

- 84% of children reported increased physical activity because of participating in AIB
- 54% of children gained practical knowledge of healthy eating habits and cooking skills
- 94% of children felt connected to others at AIB, with 97% feeling safe and 91% reporting a sense of belonging
- 877,391 in net benefits from the AIB program, reflecting its strong social and economic value over a 6-month period (2024 evaluation).
- Benefit-Cost Ratio of 6.68: For every dollar invested, the program generates approximately \$6.68 in social and economic value.
- \$4,387 per participant: The program reaches around 200 children each school term, with an average net benefit of \$4,387 per participant.

These outcomes reflect the program's commitment to fostering long-term behavioral change around health and well-being, reinforcing its positive impact on the physical, emotional, and social development of children.

Overview

01 Program Features

Active In-Betweens (AIB) is an after-school program designed to improve the health and well-being of preadolescent children (ages 8-12) in socially disadvantaged communities within the Illawarra-Shoalhaven region. The program focuses on physical activity, healthy eating habits, and fostering social connections through structured and unstructured activities. AIB is facilitated by a team of trained Health Promotion Officers and volunteers, with sessions held weekly at local community centres, providing a safe, supportive space for children. The program is place-based and tailored to the needs of each community it serves, with a flexible structure that encourages leadership and social engagement.

02 Program rationale

AIB was developed to address the increasing need for structured after-school programs in areas of socio-economic disadvantage, where children face higher risks of physical inactivity, poor nutrition, and social isolation. The program is grounded in evidence showing that physical activity and social engagement can significantly improve physical, mental, and emotional health in children (Bailey et al, 2013; Biddle & Asare, 2011; Lubans et al, 2012). The program aligns with several national and local policies, including the National Preventive Health Strategy 2021-2030, which emphasizes the importance of healthy lifestyles for children. The theory of change for AIB is that by providing children with access to fun, structured activities, positive role models, and healthy meals, the program can foster long-term improvements in health and social well-being.

03 Goals

The AIB program aims to:

1. Increase physical activity levels among children aged 8-12 years.
2. Improve knowledge of and engagement with healthy eating practices.
3. Strengthen children's social and community connections.
4. Enhance emotional resilience and leadership skills.
5. Promote long-term behavioral change around health and well-being.

04 Structure & development

AIB operates weekly during school terms, providing 2.5-hour sessions over 36 weeks per year. The program uses a child centered approach, allowing children to co-design activities and take leadership roles. Each session incorporates physical activity, nutritional education, and social connection opportunities with structured and unstructured activities. The program is supported by trained facilitators, volunteers, and community partners, who guide activities and foster a safe environment for individual and social development. Additionally, it involves collaborations with local community centres, sporting clubs, and cultural organisations.

05 Content

The program includes three main models, each designed to engage children in meaningful, fun, and educational ways.

Physical Activity:

The program incorporates both structured and unstructured games, with a focus on child-directed active play. Each week, AIB provides children with a variety of sporting equipment, and once per term invites guest facilitators to increase motivation for participating in moderate to vigorous physical activity. This model encourages physical fitness while allowing children to choose activities that interest them.

Healthy Eating:

Nutritional education is integrated through hands-on cooking sessions and gardening activities that teach children about healthy food choices. Every week, children are offered a healthy food platter as an afternoon snack, along with a “weird and wonderful” item—introducing a new fruit or vegetable to explore and promote healthy eating habits. This model fosters curiosity and improves knowledge of nutrition in a practical, engaging manner.

Social Activities:

Children have opportunities to interact with peers, community members, and role models through activities and community excursions. Facilitators focus on promoting socially accepted behaviors, teaching children how to interact respectfully with peers and adults. These sessions are aimed at building social skills and community connection.

06 Training & Support

Health Promotion Officers are trained in trauma-informed practices and community development, ensuring they can support the emotional and physical needs of the children. Volunteers receive training in leadership and facilitation, focusing on promoting positive role modelling and active participation. Resources needed for the program include kitchen equipment for cooking activities, sporting gear, and educational materials on nutrition and health.

07 Duration & intensity

The program operates for 9 weeks every school term, with one 1.5-hour session each week. Currently the AIB is being implemented in 5 local communities with each group session hosting between 10-30 children, allowing for small and large group interactions. The program is delivered at various community centres across the region with the focus on the areas with higher socio-economic disadvantage, ensuring accessibility for children from different communities.

08 Funding

AIB is funded through a combination of government grants, and in-kind community partnerships. Additional funding is sought through additional non-government grants. Shortfalls in funding are addressed by in-kind donations from local businesses and partnerships with other community organizations, allowing for the program to remain sustainable.

09 Partnerships & collaborations

Key partners include local councils, community centres, health organisations and universities. Local councils provide funding and support for community outreach. Community centres offer venues and resources for program delivery. Health organizations support nutritional education components and offer health resources, with resources or as guest facilitators. Universities and research institutions assist with program evaluation and data collection.

While these collaborations are crucial for sustaining and expanding the program, ensuring it reaches more children, it is important to note that many of these partnership elements come at a cost to HCA, requiring financial investment for facilitation, coordination, and other programmatic needs.

10 Impacts & outcomes

The AIB program aims to improve children's physical health, mental health, and social engagement. Key outcomes include:

- Increased physical activity levels: 84% of children reported being more physically active due to their participation in AIB (2024, Term 3).
- Enhanced self-esteem and emotional resilience: Improvements in confidence and emotional wellbeing are consistently observed (evaluation ongoing, Term 4).
- Improved healthy eating knowledge and cooking skills: 54% of children indicated they gained practical knowledge of healthy eating habits that they planned to implement (2024, Term 1).
- Increased social connectedness and reduced isolation: 94% of children felt connected to others at AIB, with 97% feeling safe and 91% feeling a sense of belonging (2024, Term 2).
- Strengthened family relationships: Shared experiences and communication, supported by tools like Facebook communities, foster stronger bonds within families.

11 Evaluation

The program is evaluated using pre- and post-program surveys and facilitator debriefs after each session. These evaluations measure improvements in physical activity, nutrition knowledge, and social well-being. Data is analysed to ensure continuous improvement, with adjustments made each year based on feedback.

12 Facilitators & barriers

Facilitators:

- Strong community partnerships.
- Positive engagement from participants.
- Trained facilitators and volunteers.

Barriers:

- Challenges in securing consistent funding.
- Limited volunteer availability in some areas.

13 Program relation to policy

The AIB program aligns various local, state, nation and global policies, focussed on increasing physical activity, healthy food habits and improving social inclusion. More information on this is provided in the Policy summary below.

For more information, visit
healthycities.org.au/programs/active-in-betweenes/

Active In-Betweens is an after school program designed to support the overall health and well-being of children aged 8-12, particularly those living in socially disadvantaged communities. The program focuses on improving physical activity, healthy eating habits, and social connectedness by providing a safe, supported environment where children can explore and learn together through play and community involvement.

Inputs

- Program Facilitators & Regular Volunteers: Guide and support the children through the program activities.
- Community Partners & Collaborators: Provide resources and opportunities for additional activities and community engagement.
- Local Communities: Engagement with families, community centres, and local organizations.
- Behavioural Guidelines ("The Promise"): A collaborative agreement between participants and facilitators to foster respect, cooperation, and positive behaviour.
- Project Advisory Group: Oversees the program's development and ensures it meets its goals.
- Funding and In-Kind Support: Financial and material resources provided by funders and partners.

→ Outputs

Participants

- Children aged 8-12 from socially disadvantaged communities within the Shellharbour and Wollongong regions, with a focus on promoting health and resilience.

Activities

- Weekly 1.5-hour afterschool sessions that include a mix of structured and unstructured play, physical activities, and learning.
- Provision of healthy snacks, including seasonal fruits, vegetables and a "weird and wonderful" (food), to promote good nutrition.
- Connections with local organizations through guest speakers and group excursions.
- Opportunities for children to take on leadership roles and engage in group decision-making.
- Positive role modeling provided by facilitators and guest mentors from cultural, sporting, and creative sectors.

Products

- Data sets on children's health, nutritional knowledge, physical activity levels, and social connectedness, gathered through observations and participant feedback.

→ Outcomes & Impacts

Short term

- Increased interest in physical play and active lifestyles.
- Improved understanding of healthy snacks and hydration, leading to better dietary choices.
- Greater awareness of local community activities and available services.
- Enhanced social skills and emotional regulation as children learn to interact with peers and mentors in a supported environment.
- Strengthened relationships between children, facilitators, and community centres.

Medium term

- Development of group cohesion and social connections, fostering a sense of belonging.
- Improved communication, emotional regulation, and conflict resolution skills.
- Increased physical activity levels and skills, reducing sedentary behaviour.
- Strengthened self-determination and resilience as children face new challenges in a supportive environment.
- Feelings of safety and trust established within the community centres and program facilitators.

Long term

- Children develop lasting healthy habits, leading to improved physical activity and nutrition.
- Reduction in sedentary behaviours and anti-social tendencies as children become more engaged in positive activities.
- Strengthened community and relationships with positive role models that persist beyond the program.
- Increased sense of agency and leadership in community and family settings.

Assumptions:

- Regular attendance, engaged community partners, and a focus on leadership and activities will drive behaviour change.

External Factors:

- Availability of funding, competing school events, and weather conditions may affect program delivery. Other services available to participants could also influence engagement.

Policy Summary

Linking the Active In-Betweens (AIB) program to relevant policies is essential for demonstrating the program's alignment with broader health, education, and social inclusion objectives. Local, state, and national policies provide a framework for improving childhood health, promoting physical activity, and reducing social disparities, particularly in underserved communities. By connecting the program to these policies, we highlight how AIB contributes to these wider goals, such as enhancing children's physical activity levels, fostering social resilience, and addressing health inequities. AIB serves as an example of how community-based, after-school initiatives can implement the principles outlined in key policies aimed at improving child health and well-being.



The following table outlines key policies, their relevance to the AIB program, and how they guide or support the program’s goals. By establishing these policy connections, AIB reinforces its role as a policy-driven initiative that enhances community well-being and supports broader social outcomes.

Policy	What is the connection?	Local/ State/ National/ Global	Link
Illawarra Shoalhaven: Health Promotion Service Strategic Framework 2023 - 2028	Focuses on health and well-being by promoting physical activity, healthy eating, and reducing social isolation in children.	Local	Health Promotion Service Framework 2023 - 2028 (nsw.gov.au)
Wollongong City Council: Future 2032 Community Strategic Plan	Goals to connect and engage communities and have a healthy community in a liveable city.	Local	Our-Wollongong-Our-Future-Community-Strategic-Plan.pdf (nsw.gov.au)
Play Wollongong Strategy 2014-2024	Aims to enhance community well-being by promoting active play, physical activity, and the use of public spaces, fostering physical fitness and social engagement in children.	Local	Play-Wollongong-Strategy-2014-2024.pdf (nsw.gov.au)
Child Safety and Wellbeing Policy (Shellharbour)	Supports the development and enhancement of child-safe practices across all council operations, ensuring compliance with the NSW Child Safe Standards.	Local	ECM_11997106_v1_Child Safety and Wellbeing - Council Policy (1).pdf

Policy	What is the connection?	Local/ State/ National/ Global	Link
NSW Healthy Eating and Active Living Strategy 2022 - 2032	Encourages children's physical activity and healthy eating, directly supporting AIB's goals of improving children's nutrition and physical fitness.	State (NSW)	nsw-healthy-eating-strategy.pdf
NSW Youth Health Framework 2017-2024	Focuses on youth health through programs that encourage active lifestyles and mental well-being, while responding to the needs of vulnerable young people.	State (NSW)	NSW Youth Health Framework 2017-24
The NSW Strategic Plan for Children and Young People 2022-2024	Great link with the AIB's goals, this plan commits to hope for the future, connectiveness and safety, health and wellbeing, environments for joy, and respect and acceptance.	State (NSW)	ACYP_StrategicPlan.pdf (hubspotusercontent-na1.net)
NSW Plan for Healthy Culturally and Linguistically Diverse Communities: 2019-2023	Focuses on promoting inclusive communities by addressing cultural responsiveness and building healthy literacy communities.	State (NSW)	NSW Plan for Healthy Culturally and Linguistically Diverse Communities: 2019-2023
National Preventive Health Strategy 2021-2030	Aims to improve child health by promoting physical activity, reducing sedentary behavior, and addressing social health inequities, which align with AIB's goals.	National	National Preventive Health Strategy 2021-2030 Australian Government Department of Health and Aged Care
The National Obesity Strategy	Builds a 10-year framework to action prevention and reduction of overweight and obesity in Australia.	National	National Obesity Strategy 2022-2032

Policy	What is the connection?	Local/ State/ National/ Global	Link
National Physical Activity and Sedentary Behaviour Guidelines for Children	Provides guidelines for sleep, physical activity and sedentary behavior in children, supporting AIB's focus on increasing children's participation in moderate to vigorous physical activity.	National	New national 24-hour movement guidelines for 5-17-year-olds
National Strategic Framework for Chronic Conditions	Encourages health promotion programs to promote lifestyle changes with for example priority area 1.3 focussing on the critical life stage of the young children.	National	National Strategic Framework for Chronic Conditions Australian Government Department of Health and Aged Care
Closing the Gap Initiative	Focuses on reducing health disparities, particularly among Indigenous Australians, aligning with AIBs inclusion of diverse and disadvantaged groups.	National	National Agreement on Closing the Gap Closing the Gap
United Nations Sustainable Development Goals (SDGs)	SDG 3: Good Health and Well-Being - promotes children's physical and mental well-being. SDG 10: Reduced Inequalities - focuses on reducing health disparities.	Global	THE 17 GOALS Sustainable Development (un.org)



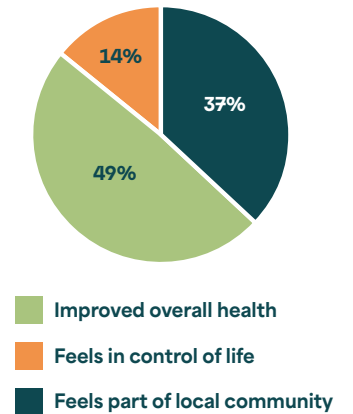
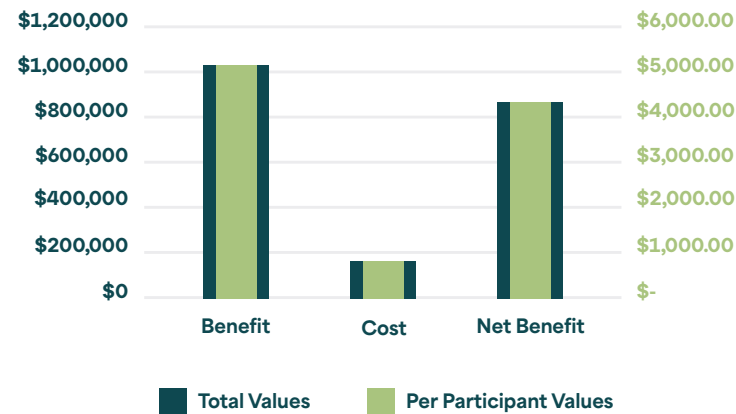
Australian Social Impact Valuation (ASVB)

Healthy Cities Australia holds a license to use the Australian Social Value Bank (ASVB) for evaluating its programs. The ASVB enables us to assess the social and economic value our initiatives generate, using robust, nationally recognized metrics derived from the HILDA Survey and the Journeys Home longitudinal study.

• 2018-2023

Active In-Betweens Program

The AIB program has shown outstanding positive outcomes in our most recent evaluation using the ASVB. The program is for children 8-12-year-olds, the ASVB is not designed to calculate Cost-Benefits for this age group as it starts from 16 and older. Nonetheless, we believe the ASVB is the best cost benefit analyses to our availability. Often children at younger ages will have more benefits from Health Promotion programs in the future. These results will, however, will have to be considered carefully, due to the methods used.



The ASVB was assess on a 6 months timeframe, the net benefits of the AIB program were \$877,391, with an average benefit-cost ratio of 6.68. This means that for every dollar invested, the program returns approximately \$6.68 in social and economic value. The program reaches approximately 200 children every school term, with a net benefit of \$4,387 per participant, demonstrating its substantial impact on enhancing children’s health and well-being.

• Closing Statement

We invite communities and partners to fund and implement the Active In-Betweens program.



Contact Healthy Cities Australia for additional information on expanding this initiative in new regions.

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