

Open Road

New learnings and future priorities

December 2024 | Tasmanian Policy Exchange



ARBN 055 657 848 ABN 30 764 374 782

Acknowledgment of Country

The University of Tasmania pays its respects to elders past and present, and to the Tasmanian Aboriginal community that continues to care for Country. We acknowledge the profound effect of colonial settlement on this Country and seek to work alongside Tasmanian Aboriginal communities, respecting their deep wisdom and knowledge as we do so. The palawa/pakana belong to one of the world's oldest living cultures, continually resident on this Country for 42,000 years.*

We acknowledge this history with deep respect, along with the associated wisdom, traditions, and complex cultural and political activities and practices that continue to the present.

The University of Tasmania also recognises a history of truth that acknowledges the impacts of invasion and colonisation upon Aboriginal people and their lands, resulting in forcible removal, and profound consequences for the livelihoods of generations since. The University of Tasmania stands for a future that profoundly respects and acknowledges Aboriginal perspectives, culture, language and history, and continued efforts to realise Aboriginal justice and rights, paving the way for a strong future.

* Members of the Tasmanian Aboriginal community identify with a range of terms, including palawa, pakana, Pallawah, Aboriginal, Aborigine, Indigenous, Traditional Owners, First Nations, and First Peoples. In this report, we use the term Tasmanian Aboriginal people and communities, while recognising that there are several other ways Tasmanian Aboriginal people may choose to refer to themselves.

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Acknowledgments

This project received funding from the Tasmanian Transport Association (TTA).

The report authors wish to thank all those who participated in interviews and contributed their valuable time and insights to the research.

Suggested citation

Hyslop, S., Eccleston, R., Moran, F., Johnson, L. & Hills, A. (2024), *Open Road: New learnings*, Tasmanian Policy Exchange, University of Tasmania, October 2024

About the Tasmanian Policy Exchange

The Tasmanian Policy Exchange (TPE) was established in 2020 to enhance the University's capacity to work with government and community partners to make timely and informed contributions to policy issues and debates which will shape Tasmania's future.

It also works with staff from across the University of Tasmania to develop evidence-based policy options and longer-term collaborations.

The TPE's recent policy analysis includes:

- Supporting high quality forest carbon sequestration projects in Tasmania
- Change for Children: Tackling child sexual abuse in Tasmania
- Tasmanian greenhouse gas emissions update (June 2024)
- Modelling Australia's bushfire emissions
- Shaping a strategic partnership for Western Tasmania
- Tasmania's renewable energy future

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1. Introduction

The Open Road Truck Driver Health and Wellbeing Program is an initiative designed to improve the mental and physical health and wellbeing of truck drivers within the Tasmanian transport industry.

The Tasmanian economy and community are critically dependent on a safe, effective and sustainable road transport industry. The most recent data available tells us that 23.7 million tonnes (88 per cent) of freight is transported on the road network, with three million tonnes (12 per cent) by rail.¹ Yet there are concerns about health and wellbeing, as well as the ageing profile, of this critical workforce.

In line with the three key objectives of the project – Awareness Raising, Industry Capacity Building, and Direct Intervention (see Section 3) – this report is designed to establish insights and identify key learnings that could be used to inform a more comprehensive and sustained iteration of the *Open Road program*. As funding has been secured to continue the program in the short-term, the review provides a timely opportunity to assess and reflect on the effectiveness of design and delivery of the program to date – as opposed to conducting an outcomes evaluation – with an eye to its future.

We begin the report with a discussion of the approach of this evaluation (Section 2), followed by an exploration of the aims and methodology of the *Open Road* program (Section 3).

Section 4 seeks to provide the context for the evaluation, using the most recent ABS and other data to describe workforce characteristics of the Tasmanian heavy vehicle sector, and establish the setting of truck driver health and wellbeing nationally.

Similar programs in other jurisdictions are reviewed in Section 5, and we draw insights from the literature about interventions to improve heavy vehicle operator wellbeing.

At Section 6, the efforts to establish baseline data are discussed, while in the following Section (7) we reflect on the *Open Road* program so far. This information is largely based on interviews undertaken with individuals who were involved in the design and/or delivery of the program.

In the final section (8), we present information designed to support the strengthening of the *Open Road* program and its mission to improve the health and wellbeing of Tasmanian truck drivers and road transport workers.

¹ Tasmanian Government (n.d.), Infrastructure Tasmania,

https://www.infrastructure.tas.gov.au/network_management_and_freight/management/tasmanian_frei ght_survey, accessed 15 October 2024

2. Evaluation approach and methodology

The Tasmanian Policy Exchange (TPE), partnering with the Tasmanian Transport Association (TTA), presents this process evaluation of the *Open Road* program to assist the TTA in assessing the program design and activities, and to provide insights to refine and strengthen the program into the future.

An evaluation working group was established at the outset of the evaluation, consisting of members of the TPE research team and a representative from the TTA. The evaluation team met fortnightly to discuss progress and findings, and informal communication occurred as needed.

A mixed methods approach to data collection and analysis was adopted. Evaluation components comprised the following elements:

1	Review of similar programs and initiatives in other Australian states and territories.
2	A literature review focusing on academic insights into health and wellbeing programs supporting truck drivers.
3	Interviews with individuals involved in the design and/or activities of the Open Road program. (Seven interviews were undertaken.)
4	Analysis of program information and data, including the baseline survey and current state report.

In essence, the evaluation team has sought to answer the following key questions:

- What has worked well?
- What has been challenging and/or could be improved?
- Is there emerging evidence that the program is achieving its aims?

3. The Open Road program

The TTA has partnered with Rural Alive and Well (RAW) to deliver the Tasmanian Transport Industry Physical and Mental Health and Wellbeing Program, *Open Road*, from November 2022 to November 2024. The Open Road project is funded by the National Heavy Vehicle Regulator's Heavy Vehicle Safety Initiative, supported by the Australian Government.

3.1 Aims and activities

Open Road is a multi-faceted program aimed at encouraging drivers directly to seek advice and support regarding health and wellbeing issues. The program also encourages managers and operators to create a workplace culture that supports the health and wellbeing of its drivers. As interview participants described, this holistic approach will benefit everyone, from the truck drivers themselves, their supervisors and team members, the businesses that will see reduced turnover of staff and sick days and improved staff wellbeing and satisfaction, through to the general public, with potentially fewer accidents on the road.

On top of this, the program has aimed to reduce the stigma around health and wellbeing challenges so that they are normalised, and drivers become more proactive and comfortable in seeking support in relation to their health and wellbeing.

The program team used an integrated approach to physical and mental health and wellbeing, centring around an evidence-based, best practice, peer-to-peer model, within a framework of workplace awareness and support.

Local industry engagement was used to assist with problem definition, establishing priorities and project design. The program received funding under the Federal Government's National Heavy Vehicle Regulator's (NHVR) <u>Heavy Vehicle Safety Initiative</u> (HVSI) (Round 7 2022-23).

While primarily a partnership between the TTA and RAW, it has also engaged with and leveraged expertise from the Transport Workers Union (TWU), the Tasmanian Truck Owners & Operators Association, the Livestock Transporters Association of Tasmania (LTAT), the Royal Flying Doctor Service (RFDS), truck stop operators particularly Ampol Epping Forest and Mood Food Kempton, National Transport Insurance (NTI), TWUSUPER, and the University of Tasmania. Figure 1 illustrates the three key groups of partners involved with the Open Road program.

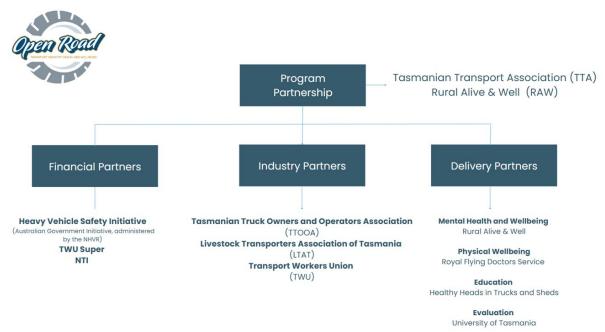


Figure 1: Open Road key partners

Figure 2 depicts the delivery partners of the program and their areas of responsibility.

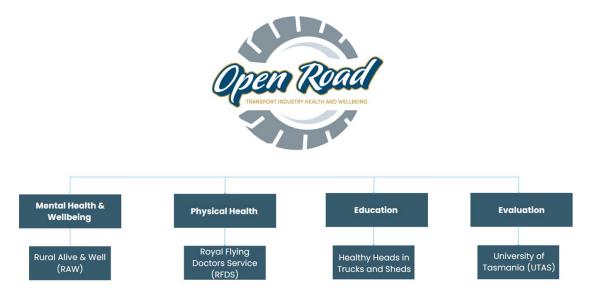


Figure 2: Open Road program delivery partners and their areas of responsibility

Within the overarching mission of improving the health and wellbeing of transport industry drivers, *Open Road* has three key objectives: Awareness Raising, Capacity Building, and Direct Intervention.

Objective 1:	Increase awareness of the importance and benefits of improving and supporting the physical and mental health of drivers in the Tasmanian Transport Industry
Objective 2:	Develop industry capacity to drive improvements in the physical and mental health of drivers in the Tasmanian Transport Industry, supporting better workplace cultures
Objective 3:	Providing early intervention and supporting recovery for individual drivers, through one-to-one support and peer-to-peer support models, through both a network of Mental Health First Aiders, and dedicated resources through Rural Alive and Well, including an industry facilitator and highly visible industry vehicle

The program uses a range of methods, featuring interventions at industry, company and individual worker level. The program aims, influenced by the workplace strategies in the National Roadmap for Healthy Heads in Trucks and Sheds (HHTS), can be classified in the following way:

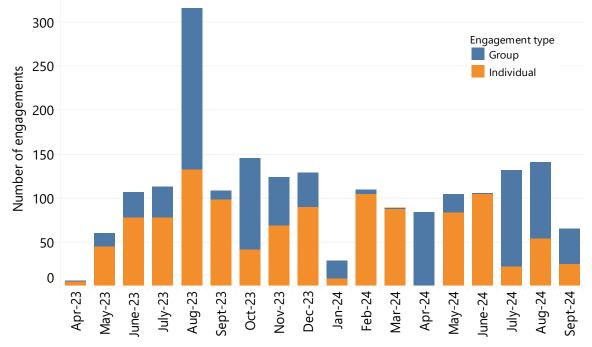
- Increasing awareness
- Building better workplace culture
- Building resilience, coping skills and industry capacity
- Supporting intervention and recovery
- Building an evidence base

Key elements of the project design comprised the following:

Intervention	Focus
Mental Health First Aid Training to establish a pool of drivers to provide peer-to-peer support	Building resilience, skills and better workplace culture
Managing for Team Wellbeing training to support businesses to integrate mental health strategies at work, using the Workplace Guidelines from Healthy Heads in Trucks and Sheds	Better workplace culture
Workplace benchmarking studies to establish a dedicated snapshot of the mental and physical health of the Tasmanian industry and to be referenced in the evaluation	Building an evidence base and increasing awareness
RAWś Fast 5 talks í workplace talks to provide workers with RAWś 5 key areas to keep people mentally and physically ¢Fit and Strong Todayé	Increasing awareness, building resilience, better workplace culture, early intervention
Referral pathways í a tailored and specialised approach for individuals provided by RAW, accessible and dedicated 1800 call service established and facilitated by RAW	Building resilience, early intervention, supporting recovery
Physical health awareness and consultations by health assessors at truck stops provided in partnership with the University of Tasmania and utilising the Mobile Interactive Learning Environment (MILE) Truck	Increasing awareness, building resilience, early intervention, supporting recovery
A statewide Industry Physical and Mental Health forum convened by the TTA	Increasing awareness, better workplace culture
Documentation of 3 case studies demonstrating the model, , ndings, and application of actions from the Healthy Heads in Trucks and Sheds Guidelines	Building an evidence base

3.2 Activity data

Available data highlights the reach of the Open Road program.



Engagements with drivers

Figure 3: Open Road engagements with drivers April 2023 – September 2024 (Data Source: RAW)

The *Open Road* program engaged with high numbers of truck drivers, both in groups and/or individually. It was not uncommon for over 100 interactions in a month, with an average of 66 engagements a month between May 2023 and September 2024. Lower points reflect the summer holiday period.

During interactions, which included truck stop events, workplace visits, Toolbox Talks, and phone calls to RAW from truck drivers and truck operators, a variety of topics was discussed – see Table 1.

	-
General RAW	Seasonal variability
Relationships	Partnerships and Funding
Mental health	Suicide
Physical health	Cost of Living Rural
Broad situational stressors	Youth
Workplace	AOTG (Ahead of the Game)
Wellbeing Tips & Tricks	Program Content
Industry Specific issues and industry	Rural Youth
downturn	RAW Conversations
Worrying about the uncontrollable	Other

Table 1: Topics discussed during RAW and truck driver interactions

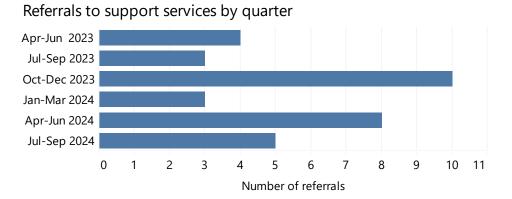


Figure 4: Referrals to support services, quarterly April 2023 – Sept 2024 (data source: RAW)

Referrals to support services such as mental health counsellors have been steady, with higher peaks reflecting increased engagements between the *Open Road* program and truck drivers, as shown in Figure 4.

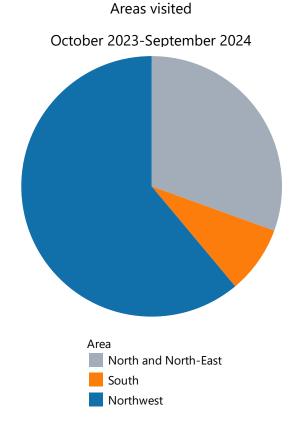
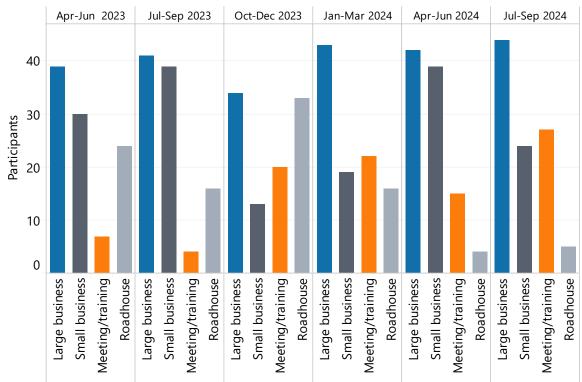


Figure 5: Areas visited October 2023 – September 2024 (data source: RAW)

Visits to the northwest of the State were most frequent, reflecting the location of the majority of transport business and drivers, given the proximity to Devonport and Burnie as Tasmania's most significant freight ports.



Places of engagement, quarterly by percentage, April 2023-September 2024

Figure 6: Places of engagement, quarterly by percentage April 2023 – September 2024 (data source: RAW)

Truck drivers were engaged by the program in a range of locations, the most common consistently being large businesses. Places of engagement were intentionally diversified through events at roadhouses and an *Open Road* presence at meetings and training events. Figure 6 shows fluctuations in places of engagement by quarter, while Figure 7 shows the overall percentage of places of engagement.

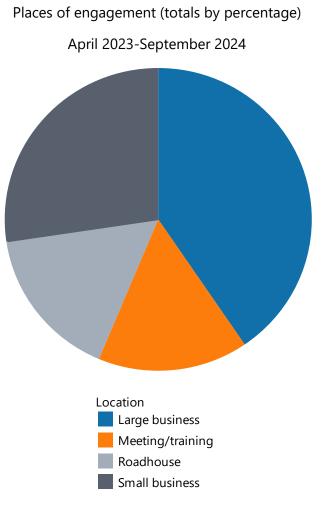


Figure 7: Places of engagement, totals by percentage April 2023 – September 2024 (data source: RAW)

While the *Open Road* program engaged with truck drivers and their workplaces through a variety of interactions, unfortunately the planned mental health training did not occur. This was largely because fully funded mental health training from Healthy Heads in Trucks and Sheds was made available and promoted to the industry at the same time.

Key insights

- Activity data shows high levels of interactions with truck drivers and their workplaces throughout the life of the *Open Road* program so far.
- Discussions between RAW and truck drivers centred on topics from mental and physical health, through to workplace and industry issues, relationships and tips and tricks to promote wellbeing.
- There has been a steady flow of referrals from RAW to other health and related professionals.
- While the planned mental health training did not go ahead, considerable capacity building within the industry occurred throughout the program at workplace visits and toolbox talks.

4. The context: Truck drivers in Tasmania and Australia

The challenges of truck driver mental and physical ill health across Australia are widely recognised and are evident in the collected data. The *Open Road* program was developed in recognition that these issues were not only negatively impacting individuals and companies, but families, the industry and communities more broadly.

4.1 Workforce characteristics

At the 2021 census there were 4010 truck drivers living in Tasmania, which is the second largest state or territory trucking workforce as a proportion of the population (see Table 2). Only Western Australia has more 'truck drivers per capita', so the truck driving community is a significant and important workforce in Tasmania. Connected to this, as a relatively remote island the Tasmanian community and economy is highly dependent on a safe, sustainable and efficient road transport system.

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Table 2: Truck drivers by number and gender in Australian states and territories (data source: ABS)

Concerningly, the truck driving workforce in Tasmania is ageing fairly rapidly. At the 2006 census, the median age of Tasmanian truck drivers was 44.6 – it is now over 50 – see Figure 8.

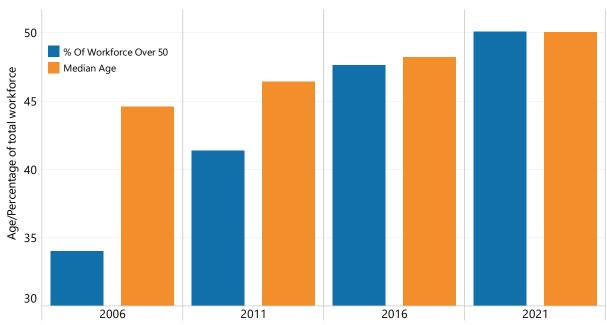
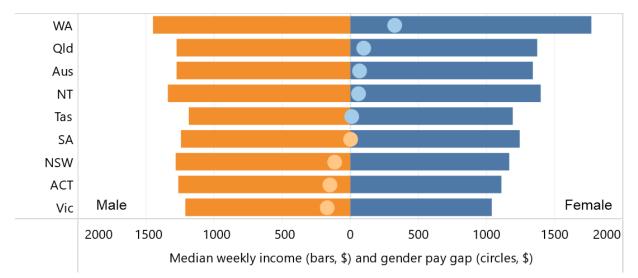


Figure 8: The age of Tasmania's truck drivers – 2006 to 2021 (data source: ABS)

Both nationally and in Tasmania, truck driving is a very heavily male-dominated workforce: on average, just 4.4% of truck drivers are female (and only 3.2% in Tasmania). There is a gender pay gap, but, perhaps surprisingly, the median weekly pay of female truck drivers in Tasmania is slightly more than that of male truck drivers – see Figure 9.





Potentially indicating the impact of the profession on relationships, truck drivers are the second most likely group of employed persons in Tasmania to report their marital status as separated or divorced (only real estate agents are more likely to experience relationship breakdown). Around 12.3% of the general employed population in Tasmania is separated or divorced compared with 18.5% of truck drivers.

4.2 Truck driver health and wellbeing

The most comprehensive and recent study (August 2019 to May 2020) of 1,390 truck drivers across Australia, the Driving Health survey, revealed the industry workforce was facing significant health issues with around one-third of drivers reporting three or more chronic health conditions and poor general health. Findings included the following:

- 54.3% of truck drivers were categorised as living with obesity, and chronic pain was an issue for 44%.
- The most commonly diagnosed issues were back problems (34.5%), high blood pressure (25.8%) and mental health problems (19.4%).
- Almost half reported one or more incidents of workplace violence in the previous year, with verbal abuse being the most prevalent.²
- 36.7% reported a moderate level of psychological distress and 13.3% a severe level.³

Health issues and workplace pressures are not only an issue for individual drivers, companies, and their families, but have potential implications for the broader community. For example, one in ten (of the drivers surveyed for the Driving Health project) reported having fallen asleep or nodding off at the wheel in the previous 12 months.⁴ While only 13% had been involved in a crash in the same period, 72% reported near misses on a weekly basis. The study calculated that, from a societal perspective, the health burden of truck drivers in monetary terms equated to "a total cost of AU\$2.6 billion (discounted) in lost productivity and AU\$4.7 billion in lost years of life was estimated over a 10-year period".⁵ These trends, as the 2022 Australian Parliament Joint Select Committee on Road Safety also recommended, highlight the need for targeted, comprehensive, early, and sustained interventions to improve heavy vehicle operator mental and physical wellbeing.⁶

The reported health and wellbeing of Tasmanian truck drivers is consistent with the above national trends. For example, as the TTA and above data reports, the Tasmanian transport industry has:

- The oldest workforce in Tasmania (and continuing to age), with 60% of workers aged 45 years and older;
- the 2nd highest number of fatalities amongst all industries in Tasmania;⁷ and
- an increased reporting of incidents of mental and physical health issues.

The contributing factors of mental health and wellbeing challenges for truck drivers

Studies consistently report that heavy vehicle drivers face a number of challenges that may lead to compromised health and wellbeing. As findings from a 2015 study attest,

² Caryn van Vreden, et al. (2021). *Driving Health Study Report No 6: Survey of the physical and mental health of Australian professional drivers*. Monash University. <u>https://doi.org/10.26180/13315961.v6</u>

³ Caryn van Vreden, et al. (2021). Driving Health Study Report No 6.

⁴ Caryn van Vreden, et al. (2021). Driving Health Study Report No 6.

⁵ Peter Lee, et al. (2023). "Exploring the Health and Economic Burden Among Truck Drivers in Australia: A Health Economic Modelling Study". *Journal of Occupational Rehabilitation* No 33. https://doi.org/10.1007/s10926-022-10081-4

⁶ See particularly Recommendations 57 and 58. Australian Government (2022). *Driving reform: Final report for the inquiry into road safety*. Joint Select Committee on Road Safety. https://nla.gov.au/nla.obj-3056180568/view

⁷ Tasmanian Government (2023). *Transport, Postal and Warehousing,* WorkSafe Tasmania. https://worksafe.tas.gov.au/topics/Health-and-Safety/safety-by-industry/transport,-postal-andwarehousing

...barriers to good health through adequate nutrition and physical activity are the result of a complex interaction between government regulations, corporate policies, the built environment and individual factors.⁸

Time pressures, sedentary work and isolation on the road are key characteristics of the job with notable impacts on wellbeing. Truck drivers tend to have less healthy diets than the broader population, reflecting factors such as a lack of access to healthy food options, work schedules leaving little time for food preparation, limited food storage options, and the cost of healthier food options (when available) at truck stops.⁹

Compared to other occupations, truck drivers engage in low levels of physical activity. This stems from the sedentary nature of driving and long workdays. Low levels of physical activity, combined with a poor diet, is correlated with increased rates of obesity, higher levels of fatigue, and challenges regarding quantity and quality of sleep. In turn, these issues are linked to higher rates of chronic health issues including type 2 diabetes, cardiovascular diseases and mental health disorders.¹⁰

Physical wellbeing is connected to, and has implications for, mental health. Long hours on the road mean significant time alone and potential constraints on social connections and stressors for family life. A lack of connection has been linked to adverse health outcomes, including a higher risk of suicide. An earlier New Zealand study found that over one third of 225 log truck drivers faced challenges fitting both work and family life into their days, with failed relationships and isolation from family a common outcome.¹¹ In addition to and compounding these challenges, there is also an increased risk of workplace injury, and exposure to road incident related trauma.¹²

4.3 What we heard

Interview participants corroborated the above issues and factors as affecting truck drivers in Tasmania and were emphatic that truck drivers need focused health and wellbeing support. Many participants referred to the heavy 'weight of responsibility' that drivers carry as part of their job. Issues for drivers commonly referenced in the interviews included:

- The need for drivers to be constantly alert and vigilant when driving
- Often being at the frontline when people are angry for example, when prices are down for farmers or at work sites where there are protesters
- Enduring unsafe driving from other vehicles on the road
- The long periods of time being sedentary at the wheel

¹⁰ OzHelp Foundation (2020). *Physical and mental health.*

⁸ Melissa Hill, Marguerite Sendall, Laura McCosker (2015). "Truckies and health promotion: A 'hard-toreach' group without a 'proper' workplace". *Australian & New Zealand Journal of Health, Safety and Environment* No 31 Vol 2. <u>https://eprints.qut.edu.au/94910/</u>

⁹ OzHelp Foundation (2020). *Physical and mental health and wellbeing of heavy vehicle drivers in the road transport industry: Risks, issues and impacts*. <u>https://ozhelp.org.au/wp-</u>content/uploads/2022/10/OzHelp-Transport-Literature-Review_Final.pdf

¹¹ Hamish Mackie, (2008). *The health and fitness of log truck drivers: An evaluation of the industry and recommendations for action*. Transport Engineering Research New Zealand Limited. https://www.ternz.co.nz/Publications/The%20Health%20and%20Fitness%20of%20Log%20Truck%20 Drivers.pdf

¹² Caryn van Vreden, Ting Xia, Alex Collie, Elizabeth Pritchard, Sharon Newnam, Dan I. Lubman, Abilio de Almeida Neto, and Ross Iles (2022). "The physical and mental health of Australian truck drivers: a national cross-sectional study". *BMC Public Health* Vol 22 No 1. https://link.springer.com/article/10.1186/s12889-022-12850-5

- Sometimes not being respected and recognised for the important skillset that they hold and the essential role they play in the food chain
- The "usual" issues that can impact mental health such as workplace challenges, alcohol, drugs, gambling and relationships issues
- The ageing cohort of truck drivers in Tasmania
- The difficulties of accessing healthy food options while on the road
- Drivers are often first on the scene at vehicle crashes

In addition, all participants felt that truck drivers generally have not been focused on health and wellbeing. In the words of Participant 5, "it's a bit of a bloke thing to not talk about health matters". Other participants expressed that there has been some stigma around asking for help and so, traditionally, truck drivers have got on with the job no matter the issue that they may have been facing.

Key insights

- Per capita Tasmania has a relatively high share of truck drivers
- Tasmania's cohort of truck drivers:
 - o Is ageing and heavily male-dominated
 - \circ $\,$ Is the second highest occupation group to experience marital separation or divorce
 - \circ Experiences relatively high incidences of health and mental health conditions
 - o Has been reluctant to seek help for health and wellbeing issues
 - Has worked in an industry in which health and wellbeing support has not necessarily been treated as a priority

5. Truck driver mental health and wellbeing programs in other Australian states and territories

Across Australia, a number of existing and past programs seek to address – either components of or more comprehensively – the physical and mental health of drivers in the transport industry (see Table 2 below). More recent programs have primarily been multifaceted, including initiatives seeking to research and raise awareness of issues, motivate behavioural change, and offer or direct drivers to support services. Drivers tend to be the primary target for such interventions, although several target drivers and their employers or organisational managers, and one was directed solely at businesses. The majority of programs seek to make contact with drivers in their workplaces, whether at depot toolbox meetings, in their trucks or on the roadside. Three of the nine described in the table below were short term, with six ongoing. The future of the *Health in Gear* program is uncertain following the collapse of provider, OzHelp. Most of the projects are (or were) funded under the Federal Government's Heavy Vehicle Safety Initiative.

Jurisdiction	Program	Timeframe	Target cohort/s	Activities	Further information
Aus	Driving Health project	2018- ongoing	Drivers and organisational managers	Varying initiatives including the Driving Health Allocator Training (DHAT), a 20- minute online program targeting managers to increase awareness and knowledge, and challenge unconscious bias	 A collaboration between Comcare and researchers, employers, and unions, including Monash University, NSW Centre for Work Health Safety, Linfox and Transport Workers Union Consisted of 3 stages: Work injury and illness study Driver surveys and interviews Intervention development Included the largest Australian study focusing on physical and mental health, surveying nearly 2000 drivers The study took place 2018-2021, with online training continuing to be available

Table 2: Summary of recent truck driver health and wellbeing initiatives in Australia

Aus	Healthy	2020-	Drivers and	Delivered	•	Showed progress towards influencing manager knowledge and actions, and in creating a platform for future interventions. ¹³ Tailored initiative to improve the physical and
	Heads in Trucks and Sheds	ongoing	businesses	educational programs, support resources and wellness initiatives, including workplace wellbeing plans, toolbox talks, nutrition and mental health training, financial incentives for healthy dietary choices, roadshow events, and an industry-specific app	•	 mental health of the supply chain industry Built on 3 key pillars: Training. Increasing in the number of people trained in mental health at transport and logistics facilities Standards. Standardisation of policies and regulation at these facilities Wellness. Helping the individual be healthier from a diet and mental health perspective.¹⁴ Produced a <u>3 year strategy</u> for all industry participants, including resources for workplaces to develop workplace wellbeing plans. A not-for-profit established by Australia Post, Coles, Linfox, Toll, Ron Finemore Transport, Woolworths and Qube.
Aus (Vic/NSW pilot)	Health In Gear	2020-2024	Drivers	Online resources, roadside health checks, support line, information campaign, research	•	Delivered by OzHelp in collaboration with the University of Wollongong While offering initial promising results, it appears unlikely the program is continuing due to OzHelp being placed into voluntary administration in July 2024
NSW	Open Road, Open Up	2023- ongoing	Drivers	A mental health initiative using UHF	•	Delivered by Rural Outreach Counselling (NSW)

 ¹³ Elizabeth Pritchard, Ting Xia, Caryn van Vreden, Sharon Newnam, Alex Collie and Ross Iles (2022). Driving Health Study Report No 9: Managers Supporting Truck Drivers – Driving Health Allocator Training (DHAT) Program. Monash University. <u>https://doi.org/10.26180/20424597.v2</u>
 ¹⁴ Healthy Heads in Trucks & Sheds (2023). Heavy Vehicle Safety Initiative Round 5 2020-2021 Final Report. <u>https://www.nhvr.gov.au/files/media/document/337/202307-1412-hvsi-520-healthy-heads-in-trucks-and-sheds-healthy-heads-in-trucks-and-shed-project-final-report.pdf</u>

				radio as a free support service connecting drivers to mental health advocates and peers	 Promoted by industry peer and high-profile drivers with mental health training Expanding into Queensland in 2024¹⁵
Qld	Driving Better Health	2021-2022	Drivers	Awareness raising and physical health assessments targeting drivers	 Queensland Trucking Association delivered by Heart of Australia Corporate Health Initiative 3 phases: Industry awareness and engagement Healthy Heart health assessment convoy National Education Campaign (online) Project design built on results of Heavy Vehicle Safety Around Ports Promoted replicability of the project delivery model for other jurisdictions Offered on-site visits and flexible timing to accommodate shift changes Utilised a 'nudge' approach to promoting positive lifestyle choices
WA	MaPS on our Roads	2020- ongoing	Drivers	Awareness raising, workplace promotional campaigns, nutritional guidance, online training, connecting drivers to resources	 Mental and physical safety initiative Delivered by West Australian organisation Injury Matters: Prevention to Recovery Awareness raising targeting drivers Tele-support through Road Trauma Support WA
Qld	Steering Healthy Minds	2020- ongoing	Drivers and businesses	Awareness raising targeting drivers and businesses,	 A collaboration between Transport Workers Union QLD, WorkCover Queensland, Qld Trucking Organisation, among others.

¹⁵ Big Rigs (2024). "Jillaroo Jess joins mental health initiative supporting truckies". <u>https://bigrigs.com.au/2024/07/19/jillaroo-jess-joins-mental-health-initiative-supporting-truckies/</u>

				primary activity has been mental health first aid training	 Aimed at normalising mental health conversations, promoting on-the-ground support for workers with mental health concerns, supporting organisations to establish peer-to-peer mental health programs Currently offering transport industry specific mental health training in four Australian states Expected to rollout a national peer-to-peer support program in 2025
Vic	HeadFit BusinessFit Program	2020-22	Businesses	Survey, desktop review, stakeholder interviews, working with organisations to develop/evolve tailored mental health strategies, capability building, workplace culture	 A collaboration between the Victorian Transport Association and Gallagher Workplace Risk Promote, foster and support positive mental health Focused upon creating long-term, operational and cultural change (as opposed to on the individual actions of drivers and owner-drivers), utilising an "integrated change management" approach Promoted replicability of the project across the industry 8 organisations with 843 participants involved in the pilot program Initially titled "Integrating Mental Health Makes Good Business Sense"
NT	Working for a Healthier Tomorrow	2020-21	Drivers	Research into the impact on drivers as first responders to road accidents Trial delivery of Stop the Bleed Research, capacity building training workshops.	 NT Road Transport Association Mental health focus Research into the impact on drivers as first responders to road accidents Trial delivery of "Stop the Bleed" training workshops equipping drivers to respond to road trauma effectively

5.1 Evidence from other truck driver health and wellbeing interventions

Studies examining the success or otherwise of health and wellbeing interventions for truck drivers are scarce, and the methodologies of interventions are not always explicitly described. However, it is possible to obtain some important learnings from available materials.

A 2015 meta study of international interventions to address health and wellbeing challenges for truck drivers found that such programs have strong potential to improve both short-term health behaviours and intermediate health outcomes for heavy vehicle drivers.¹⁶ Programs examined in the study tended to either target the truck drivers themselves, the management of businesses, or employ a multi-level approach where they target truck drivers, their managers and the workplace as a whole.

Successful interventions are collaborative, have complementary initiatives and are multifaceted.¹⁷ The Driving Health study argued results highlighted "the need for a multi-faceted collaboration between stakeholders; the driver, employing companies, policy makers/regulators and the public".¹⁸ Several systematic reviews argued that interventions were too heavily focused on the behaviours of individual truck drivers and instead "ideally responsibility and reform should be shared throughout the [entire transport] system".¹⁹

In efforts to elicit behaviour change, most interventions target truck drivers directly. Incentivisation through self-monitoring, such as via fitness devices or apps, and

¹⁸ Elizabeth Pritchard, Caryn Van Vreden, Ting Xia, Sharon Newnam, Alex Collie, Dan I. Lubman, Abilio de Almeida Neto and Ross Iles (2023). "Impact of work and coping factors on mental health: Australian truck drivers' perspective". *BMC Public Health* Vol 23 No 1.

https://link.springer.com/article/10.1186/s12889-023-15877-4; See also Marguerite C. Sendall, Phil Crane, Laura K. McCosker, Herbert C. Biggs, MaryLou Fleming, and Bevan Rowland (2016). "Workplace interventions to improve truck drivers' health knowledge, behaviours and self-reported outcomes." *Road & Transport Research: A Journal of Australian and New Zealand Research and Practice* Vol 25 No 1. <u>https://search.informit.org/doi/abs/10.3316/INFORMIT.292312497324238</u> ¹⁹ Angela Batson, Sharon Newnam and Sjaan Koppel (2022). "Health, safety, and wellbeing interventions in the workplace, and how they may assist ageing heavy vehicle drivers: A meta review." *Safety Science* No 150.

¹⁶ Mandy K Ng, Bilal Yousuf, Philip Lloyd Bigelow, and Dwayne Van Eerd (2015). "Effectiveness of health promotion programmes for truck drivers: A systematic review". *Health Education Journal* Vol 74 No 3. https://journals.sagepub.com/doi/10.1177/0017896914533953

¹⁷ OzHelp Foundation (2020). *Physical and mental health and wellbeing of heavy vehicle drivers in the road transport industry: Risks, issues and impacts.* <u>https://ozhelp.org.au/wp-</u>

content/uploads/2022/10/OzHelp-Transport-Literature-Review_Final.pdf; Sergio Garbarino, Ottavia Guglielmi, Walter G. Sannita, Nicola Magnavita and Paola Lanteri (2018). "Sleep and mental health in truck drivers: descriptive review of the current evidence and proposal of strategies for primary prevention". *International Journal of Environmental Research and Public Health* Vol 15 No 9. https://www.mdpi.com/1660-4601/15/9/1852

https://www.sciencedirect.com/science/article/pii/S0925753522000169; Rosa Virgara, Ben Singh, Edward O'Connor, Kimberley Szeto, Zydan Merkx, Christian Rees, Nicholas Gilson, and Carol Maher (2024). "Keep on truckin': how effective are health behaviour interventions on truck drivers' health? A systematic review and meta-analysis". *BMC Public Health* Vol 24, No 1; Jalila Jbilou, Ellène Comeau, Sharmeen Jalal Chowdhury, and Salah-Eddine El Adlouni (2024). "Understanding health needs of professional truck drivers to inform health services: a pre-implementation qualitative study in a Canadian Province." *BMC Public Health* Vol 24 No 1.

competitions, have yielded good results, particularly in increasing exercise. Supervised sessions of high-intensity exercise training at truck depots offered promising and costeffective results.²⁰ Telephone, online or radio support and monitoring have been shown to further consolidate change.²¹ Nutritional programs were found to be most beneficial where support was individualised through dietary counselling and education.²² On the other hand, financial incentives rewarding physical activity and dietary choices were found to be less effective in motivating behavioural change in the Queensland "Steering Health" program.²³

The literature consistently reported that it was essential for programs to be customised in recognition of the working conditions and characteristics of drivers. Promoting within, and going to, workplaces – whether a warehouse or a pitstop on the road – allows drivers to be exposed to interventions that they otherwise may not have the time, motivation, financial means or knowledge to access. Education around health literacy, via workplace promotions. in-person communication, pitstop health screening, online training and/or social media, has been recognised as critical in motivating behavioural change.²⁴

Two studies of specific interventions help draw out other aspects of program design, implementation and impact. The Queensland Transport Industry Workplace Health Intervention (QTIWHI) was a "settings-based mixed-methods project" with the aim of identifying promotional strategies appropriate for Australian transport industry workplaces. QTIWHI was designed to support "drivers to increase physical activity and to access healthy foods at work", with initiatives such as free fruit, a physical activity challenge and a social media page. Findings included the improvement of "key aspects of the health knowledge, health behaviour and self-reported health outcomes of participating truck drivers and a positive change in workplace culture". Authors highlighted that the collaborative relationship

²⁰ Nicholas Gilson, Mielke, G. I., Coombes, J. S., Duncan, M. J., & Brown, W. J. (2023). "The Efficacy and Feasibility of a High Intensity Interval Training Program to Improve Cardiorespiratory Fitness in Truck Drivers: The Fit 2 Drive Cluster Controlled Pilot Study". Journal of Occupational and Environmental Medicine Vol 65 No 10. https://doi.org/10.1097/JOM.00000000002914

²¹ Sergio Garbarino, Ottavia Guglielmi, Walter G. Sannita, Nicola Magnavita and Paola Lanteri (2018). "Sleep and mental health in truck drivers: descriptive review of the current evidence and proposal of strategies for primary prevention". International Journal of Environmental Research and Public Health Vol 15 No 9. https://www.mdpi.com/1660-4601/15/9/1852;

²² A. M. Hill, L. Fairlie-Jones, and A. Hatzinikolas. "Improving the health of South Australian truck drivers: A 6-week lifestyle intervention." (2017).

²³ N.D. Gilson, Pavey, T.G., Wright, O.R. *et al.* The impact of an m-Health financial incentives program on the physical activity and diet of Australian truck drivers. BMC Public Health 17, 467 (2017). https://doi.org/10.1186/s12889-017-4380-y; Hill, Melissa, Marguerite Sendall, Laura McCosker (2015). "Truckies and health promotion: A 'hard-to-reach' group without a 'proper' workplace". Australian & New Zealand Journal of Health, Safety and Environment No 31 Vol 2. https://eprints.gut.edu.au/94910/

²⁴ OzHelp Foundation (2020). Physical and mental health and wellbeing of heavy vehicle drivers in the road transport industry: Risks, issues and impacts. https://ozhelp.org.au/wp-

content/uploads/2022/10/OzHelp-Transport-Literature-Review Final.pdf ; Marguerite C. Sendall, Laura K. McCosker, Phil Crane, Bevan Rowland, Marylou Fleming, and Herbert C. Biggs (2018). "Using Facebook for health promotion in "hard-to-reach" truck drivers: qualitative analysis." Journal of medical Internet research Vol 20 No 11; Pamela Snyder, Eva Carbone, Karen Heaton, and Stephanie Hammond (2024). "Program evaluation of Fit to Pass®, a remotely accessible health promotion program for commercial motor vehicle truck drivers." Workplace Health & Safety Vol 72 No 1; And targeting sub-groups within the heavy vehicle driving cohort: Batson, Angela, Sharon Newnam, and Sjaan Koppel (2023). "A preliminary study on the barriers and facilitators to improving the health, safety, and well-being of aging heavy vehicle drivers", Journal of Safety Research Vol 86. https://www.sciencedirect.com/science/article/pii/S0022437523000907

between the project team and workplace managers was critical to success, but was difficult to maintain over longer periods.²⁵

The methodology of another program, the Steering Healthy Minds Transport Industry Mental Health Initiative, was evaluated by Central Queensland University. Recognising the prevalence and increase of mental health issues in the sector, key organisations in the transport industry collaborated to develop a pilot program (2020-2021) to offer support for workers and establish programs and assistance for employers.²⁶ The initiative was assessed for "reach, effectiveness, adoption, implementation and maintenance" (RE-AIM) among key stakeholder groups – Mental Health First Aiders (MHFAs), senior/middle-mangers, non-MHFA employees and steering group members.

In terms of promotion, the evaluation pointed out that some employees were unaware of the initiative. Strategies suggested to enhance the program's reach were summarised as "advertising and outreach", including increasing the visibility of mental health first aiders in the workplace and increased awareness about the cost-benefits for companies to encourage investment in such programs.

On the effectiveness of the program at an individual level, the consensus was that not enough time had passed to fully gauge success, although initial feedback was generally favourable. Barriers to adoption included the individual time investment required to complete MHFA training (12 hours), the availability of the course, existing work-load demands, awareness of whom to contact within companies, confidentially concerns, stigma around mental health, and awareness of the initiative across the industry.

In assessing the implementation of the program (consistency of delivery, how adapted etc.), the need for increased communication from management and again, promotion of the program more thoroughly, was noted. Although early in the program, a couple of potential issues for the maintenance of the program were noted, relating to issues of awareness and trust.

Based on the available evidence, depending on the focus of the intervention (such as exercise, mental health awareness, diet etc.), different strategies are required to maximise advantages.²⁷ All sources recommended further research.

https://search.informit.org/doi/abs/10.3316/INFORMIT.292312497324238

²⁵ Marguerite C. Sendall, Phil Crane, Laura K. McCosker, Herbert C. Biggs, MaryLou Fleming, and Bevan Rowland (2016). "Workplace interventions to improve truck drivers' health knowledge, behaviours and self-reported outcomes." *Road & Transport Research: A Journal of Australian and New Zealand Research and Practice* Vol 25 No 1.

²⁶ Transport Education Audit Compliance Health Organisation, Transport Workers Union QLD, Queensland Trucking Association, Queensland Council of Unions, Kitney OHS, WorkCover Queensland and Transport Workers Union Super.

²⁷ OzHelp Foundation (2020). *Physical and mental health and wellbeing of heavy vehicle drivers in the road transport industry: Risks, issues and impacts.* <u>https://ozhelp.org.au/wp-</u>

content/uploads/2022/10/OzHelp-Transport-Literature-Review_Final.pdf; Sergio Garbarino, Ottavia Guglielmi, Walter G. Sannita, Nicola Magnavita and Paola Lanteri (2018). "Sleep and mental health in truck drivers: descriptive review of the current evidence and proposal of strategies for primary prevention". *International Journal of Environmental Research and Public Health* Vol 15 No 9. https://www.mdpi.com/1660-4601/15/9/1852

Key insights

- Evidence indicates that, in general, multi-faceted initiatives delivering a range of activities that address truck driver health and wellbeing have more impact than those delivering singular or narrowly focused activities.
- Depending on the intended outcome, interventions may need to be tailored to particular cohorts.
- Good relationships and a collaborative approach between those delivering the initiative and workplaces targeted by them are important.
- Selecting the most effective strategies to support and increase awareness of initiatives is critical to success.
- Initiatives must be flexible and take into account the working conditions and characteristics of truck driving.

6. Building an industry picture

Preliminary *Open Road* data supports the need for target interventions for truck drivers, and the approach adopted by the program.

6.1 The baseline information: survey data

As part of the *Open Road* program, a benchmarking survey was undertaken "to establish a dedicated snapshot of the mental and physical health of the Tasmanian industry" and was designed for employers of truck drivers.²⁸ Developed by TTA and disseminated in early 2024 to transport operators, the resulting survey primarily focused on existing strategies (and outcomes) being used to address the health and wellbeing of drivers in transport sector businesses.

In total,15 respondents undertook the survey. Of those respondents (as of July 2024) a majority (54.5%) worked in businesses with 101 or more employees. The next business size in terms of respondents was those with 26-50 employees at 17.2% followed by an even split of 9.1% for those with 11 to 25 and 51 to 100 employees. In terms of area of operation, the majority of businesses are statewide (72.7%), with 18.1% operating in the north, 9.0% in the northwest, and none solely in the south, east and west.

The survey focused on the nature and extent of health and wellbeing awareness and processes in the trucking workplace. Most respondents stated that their businesses have:

- A mental health and wellbeing strategy in place (81.8%)
- Mental health first aid trained staff (63.6%)
- An employee assistance program (82.6%)
- Return-to-Work program that includes provisions for mental health
- Management that is strongly supportive or supportive of mental health initiatives (90.8%)

²⁸ Tasmanian Transport Association (2024). *Open Road TTA RAW Project Summary HVSI Funding Application*.

Nevertheless, of the 81.8% who have supports for the mental health and wellbeing of all employees, only 22.2% agreed that they had observed an increase in productivity and only 37.5% reported a decrease in absenteeism after implementing those policies. On top of this, almost half of respondents (45.4%) reported an increase in their employees accessing mental health support services in the last 12 months.

When asked what their average level of understanding of the impact of mental ill health on individuals, families and work, the average response was a 74% understanding, with responses ranging from 36 to 100%.

While participant numbers were low, survey results are aligned with other evidence that more needs to be done, and perhaps differently or in tandem with the traditional workplace processes and policies seen in some of the workplaces in this industry.

6.2 Data from truck stop health checks

A small, exploratory sample of health information has been collected during the *Open Road* program by the Royal Flying Doctor Service. A key data source and indicator of health and wellbeing is blood pressure. As of June 2024, the RFDS found that of the drivers assessed:

- 0% had a blood pressure reading in the normal or elevated range but rather all were in hypertension stage 1, 2 or 3 or in crisis
- 33% did not meet the blood pressure requirements of the Fitness to Drive for commercial drivers
- 50 years old was the average age, with the oldest driver being 73 and the youngest 20.²⁹

Key insights

- While absolute numbers are low, the survey results align with other evidence that some transport businesses are supporting processes and policies concerned with truck driver health and wellbeing but that more needs to be done in the workplace.
- Early evidence shows that Tasmanian truck drivers in general have poor indicators of overall health according to blood pressure check results. This also aligns with other research that shows truck drivers have higher rates of ill health and mental health issues than the general population.

²⁹ Tasmanian Transport Association (2024). *Open Road Program: Current State Report*. (Not publicly available)

7. Reflecting on the Open Road program

It is beyond the scope of this evaluation to assess the impact of the *Open Road* program on truck driver health and wellbeing outcomes. At this formative stage, it is more appropriate to reflect on what can be learned from the design and implementation of the initiative over the last two years, as well as on any emerging or preliminary indications of outcomes. While the survey data, designed to provide some baseline information, gives insight into the workplaces of some truck drivers in Tasmania (see Section 6 above), the interviews conducted as part of this evaluation (as well as project documentation) have helped us to establish preliminary learnings from this first phase of the program. Interviewees consisted of those involved in the design/and or implementation and activities of the *Open Road* program.

7.1 What has worked well

Interviewees were universally enthusiastic about the *Open Road* program, describing several key strengths that have contributed to the success of the program thus far. Firstly, a major strength was its industry-driven nature, having key players who "can walk the talk" (Participant 1), who understand the environment and the stressors that drivers are commonly subject to. Such individuals understand operational logistics – for example, they are familiar with driver movements and when to best schedule truck stop health checks.

It is crucial to have people involved who have experience in the industry. It needs to be in their language so [truck drivers] can see how it's relevant to them. (Participant 7)

Interviewees were generally pleased by how the *Open Road* program was being received and felt that it was beginning to shift attitudes particularly around mental health – "the change is starting to happen – we're seeing much more of an acceptance" (Participant 7). Initiating conversations around mental health and physical wellbeing across the industry more broadly was reported as helping with this shift, having a presence and "building connections" (Participant 2) at industry meetings, high school careers expos, livestock meetings and so forth:

It's good to get awareness of the program out there, even if drivers aren't ready to use the service – it also helps to break down the stigma around mental health and accessing help – "it's a safety blanket" and "barriers are getting broken down" (Participant 1)

Throughout the program, there has been growing awareness of and interest in the initiative with increasing participant numbers at the roadside health check events. Nine drivers attended the first event, building to 36 at the fourth: "word is getting out" (Participants 4 & 5).

Another acknowledged key strength (and simultaneously a challenge, see more below) has been the collaboration across and beyond the industry. It was reported that, among others, "we've got the Livestock Association, the Truck Owners & Operators Association, the Royal Flying Doctors onboard... it's a collaborative effort" (Participant 3). Large, private companies were also supportive, "as they recognise it's valuable for them too" (Participant 7). Individual participants and organisations put aside potentially competing aims and interests to coordinate action and leverage strengths to deliver a program that offered more than their individual capabilities: "it's been excellent to see how united the industry has been around supporting truck driver health and wellbeing" (Participant 7).

Going to drivers "on the ground" (Participants 1, 2, 3 & 6) – whether warehouse toolbox meetings or roadside stops – rather than being online or drivers having to seek out support services themselves, and the "outreach aspect and one-on-one psycho-social support" (Participant 1) were other facets of the program that were seen as critical to its success.

The confidentiality offered to truck drivers by *Open Road* was also referred to as an important feature of the program. Individuals were reassured that conversations and the findings of outcomes would not leave the room: "we let truckies know that their results won't get back to their managers" (Participant 4). This factor is critical in an industry in which it may have previously been the norm to not seek out health and wellbeing support. Notably, the confidentially promise has been supported by larger companies, recognising its importance.

Key insights

All interviewees felt that there are indications that the program is gaining acceptance and contributing to the normalisation of conversations about health and wellbeing. The following factors were seen as critical to the successful first phase of the *Open Road* program:

- Its industry-driven nature, with employees who understand the nature and impacts of truck driving
- Strong collaboration and a shared commitment to improve driver health and wellbeing between different organisations across a diverse range of stakeholders and supporting organisations.
- Tailoring program activities to take place at locations and times that encourage take up of the program.
- Confidentiality for truck drivers accessing the Open Road program.

Open Road case studies

- a. Middle-aged male truck driver, introduced to the Open Road program by his employer. Driver was supported for approximately four months by RAW via weekly meetings in which he identi ed situational stressors which were leading to anger issues and unsafe driving. Driver also engaged in professional driver risk management strategies, was referred to other clinical support, and subsequently returned to the workplace where he continued for a further four months to receive informal support from RAW.
- b. Middle-aged male truck driver contacted RAW after hearing about program from an Open Road facilitator workplace visit. Driver was a night shift truck

driver suffering from poor sleep patterns, workplace pressure, relationship issues and suicide ideation. Recognising the seriousness of the situation, RAW set up a face-to-face meeting within the week. Situational stressors were identi, ed and support was provided over a , ve month-period with a focus on strategies to manage anxiety and how to negotiate and hold respectful conversations in the workplace especially with workplace supervisors. Referral to a clinical specialist was undertaken and the truck driver continues to be supported by RAW.

7.2 What could be improved

Some planned initiatives (such as capacity building/formal mental health training and nursing student involvement) had not yet occurred, or not to the extent hoped, ostensibly due to difficulties coordinating activities with other organisations.

Some disappointments were where the timing or funding of other, national programs, and/ or the departure of key contacts from organisations, hindered the realisation of specific initiatives or delayed the rollout of the program. As studies of other initiatives have found, collaborative, continuing relationships between relevant organisations are simultaneously critical to the success of a program, and one of the most difficult elements to build and maintain. It is apparent that at times there were difficulties in bringing together and negotiating the role of different stakeholder bodies.

If we could improve something it would be better alignment with other organisations...co-design can be challenging. We can learn that we can co-exist – we each have a role to play and contribute something different. (Participant 7)

While collaboration in general has clearly been a strength of the program to date (see Section 7.2), driven by motivated individuals and organisations, the need for more strategic planning, the application of a 'design thinking' methodology and formal agreements were recognised in order to embed the program and provide certainty in the case of key people leaving their organisations.

Relationships have been built through informal conversations, friendships. It's good to have connections, but [the program] also needs a structure that ensures continuity (Participant 3).

Key insights

- Clarification of roles and expectations of outputs could have perhaps been more formalised at the start of the program.
- The relationships that have been key to the success of *Open Road* are largely dependent on key people and have not been supported by an underlying frameworks or formal arrangements.

7.3 Emerging indications of success

While too early to formally assess the success or otherwise of the program in terms of improving driver health and wellbeing outcomes, we do provide some initial indications of impacts against the original program aims – see Table 3 below. Initial anecdotal feedback from drivers, managers and operators reported by our interviewees was resoundingly positive and appreciative, agreeing the program was a necessary and beneficial initiative.

Drivers expressed that it was "really good to have someone to talk to" (Participant 6), and the wish that the program had been around earlier. As one participant reported, "drivers had been more open to it [the Open Road program] than expected – I've had comments like, "if this had been around 2 years ago, my brother-in-law might still be here, this is a really good thing" (Participant 3). Another participant confirmed the receptivity of drivers to the program's initiatives, stating that "80% of referrals to *Open Road* are self-referrals" (Participant 1).

Other comments included:

It is a very important asset (Participant 1) It is absolutely brilliant – I hope it's ongoing! (Participant 4) I'm really pleased with what we've achieved (Participant 3) There is definitely a need for this program (Participant 6)

A number of participants articulated that the program is about 'giving back' to the truck driving community that has done so much for Tasmanians and recognises them "as people, not just as truckers" (Participant 2), with their own unique and diverse challenges.

Key insight
• Feedback and early indications of take up suggest that truck drivers are receptive

• Feedback and early indications of take up suggest that truck drivers are receptive to the program and consider it a valuable initiative.

Program aims	Emerging evidence
Increasing awareness	All interviewees thought the Open Road program was beginning to see increased awareness of the importance and the mormalisingéof seeking help for health and wellbeing issues. Open Road facilitators and of cers were seeing an uptick in those who were contacting RAW for support from the industry and there has been a strong increase in those engaging with the truck stop clinics. However, interviewees were agreed that more needs to be done to increase awareness of the Open Road program. Suggestions included: the convening of a truck driver panel or committee to advise the Open Road program; the development of a website; use of social media; continuing to develop relationships with truck businesses and; strengthening the programé social license through the embedding of an ongoing program.
Building better workplace culture	Changing long-embedded workplace culture takes time, however early indications from all interviewees were that there has been

Table 3: Evidence of emerging outcomes against program aims

Building resilience, coping skills and industry capacity	pleasing support of the Open Road program from some trucking businesses in Tasmania. This support has included hosting Toolbox Talks on work premises, referral of employees to the Open Road program, and supporting the condential nature of the service. Of the three initial objectives of the program (see Section 3), this objective has seen least progress. The intended industry-wide mental health training, that was to be conducted in person by RAW and at a charge to the recipients, had not (to date) gone ahead due to scheduling challenges. It was also complicated by another service being simultaneously funded by the same body to provide similar but free training to the Tasmanian truck driving industry.
Supporting intervention and recovery	Initial indications are that this key aspect of the program is working well. Both the truck stop activities and the outreach service provided by RAW have been providing opportunities for truck drivers to access support and pursue referral to other healthcare professionals if needed. Interview participants were enthusiastic about the responses to the Open Road activities, citing strengthening interest at truck stops throughout the program and strong engagement with RAW. Case studies collected by program of cers show how the program has been tailored to support truck drivers with different issues (see case studies on p. 25).
Building an evidence base	As discussed above (see Section 6), the truck driver operator survey was intended as a baseline measurement to inform the Open Road program going forward. The interview is a useful indication of the awareness of health and wellbeing issues in the workplace and the efforts and initiatives of businesses to address them. The survey will need to be re-deployed at , xed intervals to assess any change or progress in this area. Health measures such as the blood pressure data collected by RFDS personnel at truck stop events could be used to track progress of truck driver health and wellbeing into the future to assess impact of the Open Road program.

8. Looking to the future

In conducting this formative evaluation, we found clear indications that the *Open Road* program, in its first 18 months of operation, has established itself as a valued initiative in an area of real need: the support of Tasmanian truck driver health and wellbeing. This is largely due to the determination and collaboration of individuals and organisations all having a shared commitment to this important task.

As described, the data around truck driver physical and mental health and wellbeing clearly points to the need for a program such as *Open Road* in Tasmania. The *Open Road* program's scope and activities are in line with initiatives in other jurisdictions across Australia, and consistent with the evidence base from the literature. Successful features of other programs (industry-driven, collaborative, flexible and multi-faceted, on-the-ground, tailored to industry environment, program initiatives customised to specific cohorts/ subsections of the industry) have been recognised and adopted as fundamental design features.

The program has largely overcome some initial (and likely inevitable) teething problems to successfully gain the support and assistance of relevant organisations and collaboratively deliver activities such as the truck stop clinics and outreach service.

Preliminary findings suggest a scaled-up, sustained version of the *Open Road* program will likely deliver on all five aims of the program (see Section 7.3).

From this point, it is recommended the program builds on its strengths and continues to consolidate and embed the program into the transport industry landscape in Tasmania. The following is a list of potential initiatives and/or changes that have emerged during the evaluation that could be adopted to further improve the *Open Road* program.

- 1. Promoting and growing brand recognition and awareness. Suggestions by interviewees included that this could be facilitated through media, social media, development of a website and inclusion of the program in private or mandated government induction training. Remote access of information has been identified as important by studies.³⁰ A series of targeted short videos could be developed to further disseminate messages regarding the *Open Road* program. In addition, information about the program needs to be repeatedly shared at industry meetings and through all the current channels such as the ongoing Toolbox Talks. Continuing reminders to prioritise the health and wellbeing of truck drivers will lead to increasing social license for the initiative.
- 2. Expanding the range of services offered at the pop-up truck stop events. All interviewees were excited about including a wider range of services at future truck stop clinics, such as diabetes and dental checks. *We need to think about what else we can do, how we can evolve so that we're not a 'one trick pony'* (Participant 2).
- 3. Scheduling regular and more frequent pop-up truck stop events. Participants agreed that ideally truck stop clinics would be embedded into an ongoing schedule: So that drivers know that once a month or so there will be a truck stop set up, so it becomes normal (Participant 3).

³⁰ Snyder et al. (2024), "Program evaluation of Fit to Pass®".

- 4. **Supporting a heightened focus on physical health and nutrition**. Interviewees were keen to see *Open Road* increase its scope of activities, for example, supporting the installation of exercise equipment at rest stops and introducing healthy eating initiatives. It was suggested that healthy (and appealing) meal options could be subsidised through collaboration with existing providers on certain days. Studies have pointed to promising initial results from interventions with individualised coaching or depot-based fitness training. Competitions were also suggested as a way to encourage behavioural change.³¹
- 5. **Convening an** *Open Road* **driver reference group**. It was suggested that such a panel could make drivers 'agents' (Participant 3) of the program, amplifying the message, awareness and effectiveness of the *Open Road* program. It would not only ensure programs were delivered in a contextually appropriate manner, but "would give the drivers a sense of ownership and responsibility ultimately change has to come from within" (Participant 2). Several studies emphasised the importance and effectiveness of working with "end-users-and stakeholders" in planning and refining successful and sustainable interventions.³²
- 6. **Developing a more comprehensive data collection**. While this first phase of the *Open Road* program was underpinned by the operator survey, the project team may like to re-consider the type of data it would like to continue to collect into the future to "help us understand the nature of our issues better" (Participant 3), to provide evidence, measure success, and aid in refining the program. This might mean that a survey that targets truck drivers (including owner-operators) in addition to organisers that is deployed at regular intervals. In addition, program officers may like to use anonymised health information collected at truck stop clinics, such as blood pressure levels, to attempt to measure the ongoing impact of the *Open Road* program.
- 7. **Cultural sensitivity training**. It was suggested that such training could be offered to encourage "being inclusive as we see different cultures and ethnic backgrounds coming into the industry" (Participant 1).
- 8. Advocacy on behalf of truck drivers. It was suggested that Open Road, as it matures, could be used as a vehicle to lobby businesses and/or government on behalf of drivers and the industry. This could be around systemic issues such as hours of work and other social and environmental determinants of health.³³ It was suggested that guidelines could be developed for how the media reports on road crashes involving trucks, as often the prevailing framing "causes anxiety and trauma" among truck drivers (Participant 3).
- 9. **Formalising project documentation.** The program could consider creating formalised agreements (such as a memorandum of understanding) with partnering bodies to ensure continuity and consistency to consolidate coalitions, and for when key contacts leave roles, and/or inform new individuals or organisations. This may or may not involve funding relevant parties to ensure specified services. Periodic and

³¹ Gilson et al. (2023), "Improve Cardiorespiratory Fitness"; Snyder et al. (2024), "Program evaluation of Fit to Pass®"; Jbilou et al. (2024), "Understanding health needs of professional truck drivers".

³² Jbilou et al. (2024), "Understanding health needs of professional truck drivers"; Virgara et al. (2024), "Keep on truckin".

³³ Virgara (2024), "Keep on Truckin".

formalised reviews assessing activities and progress against the established aims of the program could support iterative improvement.

- 10. **Promoting truck driving as a career in Tasmania**. Participants were concerned about the ageing demographic of truck drivers in Tasmania and were keen that the genuine skillset of truck drivers be acknowledged and appreciated in the community. They were also keen to communicate that truck driving is a career that has a lot going for it. "It is hard work so we need to invest in it and demonstrate that it's a genuine career path" (Participant 1).
- 11. **Ongoing and embedded funding**. The desire for continued and increased funding was also cited by interviewees as an important mechanism to improve the effectiveness of the *Open Road* program. Participants were concerned that funding needs to be ongoing and not dependent on short-term grants so that the program builds its social license and becomes a trusted part of the Tasmanian trucking workplace landscape:

The funding stream needs to be embedded for the longer term... people can be reluctant to engage if they think it's going to disappear. People don't want to see the seed, they want to see the plant (Participant 7).

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