COMMUNITY ENGAGEMENT SURVEY BEPORT September 2024



Part of Latrobe Regional Health



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ACKNOWLEDGMENT OF COUNTRY

The Gippsland Region Public Health Unit acknowledges the Gunaikurnai, Bunurong, Monero, Bidawel and Wurundjeri people, as the Traditional Owners and Custodians of the lands on which our public health unit works across.

We pay our respects to Elders past and present and future leaders. We recognise the ongoing connection to ancestral lands within and beyond Gippsland, and the strength, resilience and survival of Aboriginal and Torres Strait Islander peoples.

Gippsland Region Public Health Unit is committed to working in partnership with the community for better health outcomes for everyone, everywhere.

Artist: Nannette Channing

SUMMARY

Gippsland Region Public Health Unit (GRPHU) conducted community consultation from 1 March 2024 to 31 May 2024 to develop a stronger understanding of the community and their feelings, experiences and preferences regarding engagement.

The survey results will directly inform the development of GRPHU's Community Participation and Engagement Plan.

A total of 326 survey responses were received across the six Local Government Areas (LGAs) in Gippsland, demonstrating broad community engagement.

High-level findings:

- The community feels it is important for GRPHU to engage with them.
- 47% of respondents know who GRPHU is.
- The most frequently selected response for the question "What does 'community participation' mean to you?" was "having a say on the decision being made in the community". The main reasons for involvement in health discussions are personal and family importance, as well as the desire to make a difference.
- The main reported barrier to getting involved in discussions related to health was uncertainty about "where to start / don't know what is available". 30% of respondents reported this as a barrier.
- People prefer communication through social media and email. 27% and 23% of respondents reported these options, respectively
- 44% of respondents want to continue being involved in discussing health-related initiatives.

BACKGROUND

GRPHU is developing a Community Participation Engagement Plan to enhance how we connect with the community and ensure that our activities are responsive to local needs. As part of this development, GRPHU consulted with Gippsland community members, partner organisations and stakeholders to foster positive and insightful discussions about their understanding, experiences and preferences regarding engagement.

From 1 March to 31 May 2024, GRPHU undertook community consultation to ensure meaningful engagement on all future activities and projects.

The survey had two components: one for community members and one for partner organisations and stakeholders. The survey was able to be completed online, by phone, or in hard copy.

Community Consultation, Engagement & Survey Promotion

Promoted through multiple channels, including:

- GRPHU existing distribution networks (e.g., mailing lists)
- Networks attended or supported by GRPHU staff
- Latrobe Regional Health (LRH) Facebook
- GRPHU LinkedIn
- Media releases
- LRH website
- Community and organisational newsletters
- Word of mouth
- Face-to-face interactions at community events

Our engagement aimed to achieve broad participation and include under-represented voices. To support this, we engaged with over 700 community members at 20 community events over 12 weeks. These events provided opportunities to share information, listen to feedback, and directly connect with communities throughout Gippsland.

GRPHU Community Participation and Engagement Plan will provide a structured approach to our engagement activities, outlining our commitment to ongoing community and stakeholder engagement. The plan aims to improve our practices and ensure that we effectively design and implement health initiatives throughout the region, ultimately promoting better health outcomes for the Gippsland community.

PARTICIPATION

A total of 326 surveys were received, representing a variety of community and partner organisation and stakeholder's perspectives.

Figure 1 illustrates the breakdown of participation and reach across the engagement activities. It is conservatively estimated that 700 people were directly engaged through face-to-face events over a three-month period.

This number (700) specifically refers to primary engagement at in-person events. While our broader promotion efforts—such as online channels, newsletters, and media releases—likely reached a much larger audience, it is challenging to accurately measure the total reach of these activities.

There is a small risk of duplication, as an individual might have attended a pop-up event and then completed an online survey.

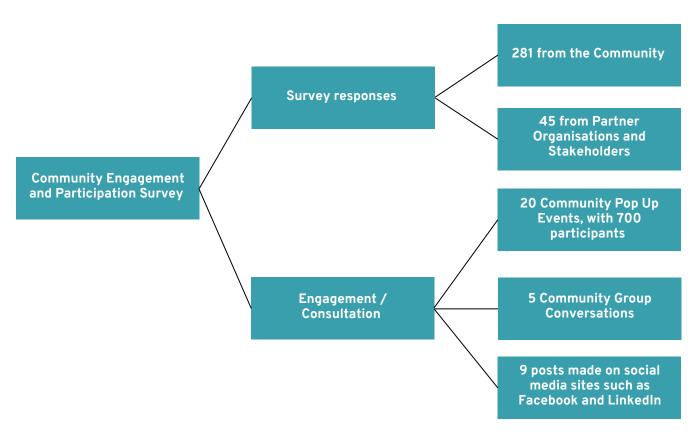


Figure 1: Participation and reach during engagement

COMMUNITY RESULTS

Demographics

The survey collected demographic information such as gender, age, local government area of residency, cultural background, sexual identity, and whether survey respondents are living with a mental illness or disability to understand the diversity of participants and their engagement levels.

Survey respondents had the option to provide or withhold this information to remove potential barriers to participation.

Of the 280 respondents who identified their gender, the majority were female (208), followed by male (70), with only a few identifying as non-binary (1) or preferring not to say (1).

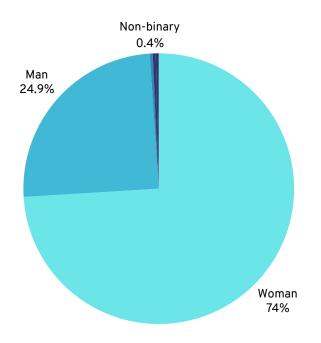


Figure 2: Gender of survey respondents

The age distribution showed a greater representation from adults aged 35-59 years and 60-79 years, with a combined percentage of 77.2% of the responses, while participation from those under 18 years was notably lower, with only 9 respondents.

This difference could be attributed to the demographics of attendees at community events, where individuals from older age groups are typically more involved and more inclined to participate in such activities.

These findings suggest that future engagement strategies may need to focus on increasing participation among younger age groups to ensure a more representative input.

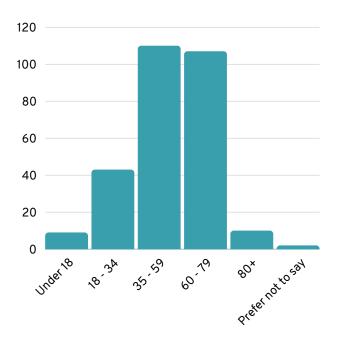
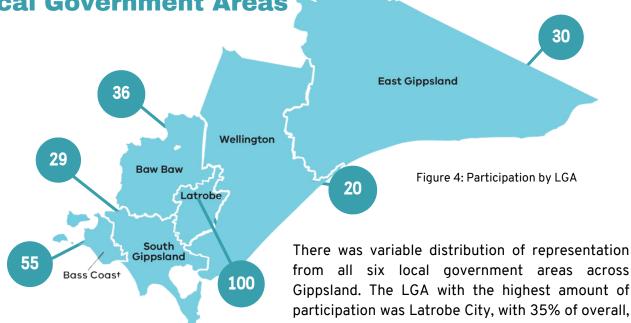


Figure 3: Number of survey respondents by age group

Local Government Areas



Out of 281 individual responses, 270 (96.4%) were Gippsland residents, with 11 respondents residing in various metropolitan council areas in Victoria. Survey responses from outside Gippsland were included in our overall analysis of results because these respondents may represent public health or community organisations that are tied to GRPHU or are otherwise connected to the Gippsland region through tourism or work.

from all six local government areas across Gippsland. The LGA with the highest amount of participation was Latrobe City, with 35% of overall, and 37% of Gippsland respondents, which is about 32.4% higher than the estimated proportion of the regional population of 25%. Similarly, survey participation was higher for Bass Coast Shire by about 33% compared to its estimated proportion of the Gippsland population. Baw Baw Shire and East Gippsland Shire had lower participation compared to estimated proportion of the population, by about 44.4% and 45.9%, respectively. The LGA with the most disproportionate participation was Wellington Shire, with survey participation that was about two times lower than its estimated proportion of the total Gippsland population. South Gippsland Shire had the most proportionate survey participation of the six LGAs in the Gippsland catchment.

Proportionality of Survey Participation by Gippsland Local Government Area				
	Total Survey Responses N=270* n(%)	Gippsland Region Population, based on ABS Census 2021 N=300,664 n(%)		
Bass Coast Shire	55 (20.4)	40,789 (13.6)		
Baw Baw Shire	36 (13.3)	57,626 (19.2)		
East Gippsland Shire	30 (11.1)	48,715 (16.2)		
Latrobe City	100 (37.0)	77,318 (25.0)		
South Gippsland Shire	29 (10.7)	30,577 (10.2)		
Wellington Shire	20 (7.4)	45,639 (15.2)		

Table 1: Survey Participation by Gippsland Local Government Area

*Please note, 11 responses from non-Gippsland residents were excluded from this table but included in overall analysis.

Access, Inclusion and Equity

The survey also sought to understand the diverse backgrounds of participants to identify potential barriers to engagement. Participants were asked to select any options that applied to them. Over half of the 281 respondents (n=159) indicated that none of the listed categories applied to them. 1.8% of participants (n=5) preferred not to disclose their information. The most identified groups among individuals who selected a subgroup were those reporting living with a disability and those born overseas, at about 11.4% and 17.8%, respectively. This diversity underscores the importance of tailoring engagement approaches to ensure access, inclusion, and equity across different communities, which will be a critical consideration in developing GRPHU's engagement plan.

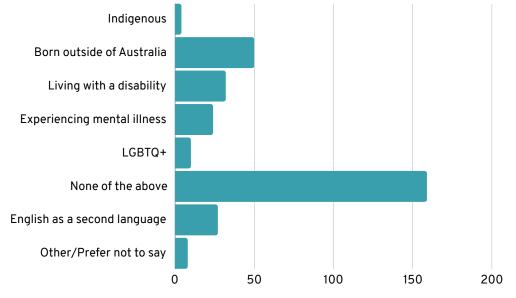


Figure 5. Access, inclusion equity as identified by survey respondents





AWARENESS AND UNDERSTANDING OF THE GRPHU

47%

The survey results indicate that, despite 47% of respondents being aware of GRPHU, the majority of respondents were not aware of our organisation or the work we do. This suggests there is room for improvement in increasing public awareness of GRPHU, and underscores the need for enhanced brand awareness and clearer communication of GRPHU activities. Addressing this gap is crucial for ensuring that our community is well-informed about the services and initiatives provided by GRPHU.

23.5%

66 out of 218 survey respondents (23.5%) recognise that GRPHU manages and prevents diseases while promoting health within our community.

However, 30.6% of respondents indicated they have never heard of GRPHU before, highlighting a significant opportunity for increased awareness efforts. Additionally, 14.2% of survey respondents understood that GRPHU works to enhance health outcomes in Gippsland but was unable to specify its activities, while 16.7% were aware of GRPHU's existence but were uncertain about its specific functions.

AREAS OF HEALTH THAT ARE MOST IMPORTANT To the gippsland community

Survey respondents were asked to select their top three priorities regarding public health initiatives. This data highlights their interests and concerns, providing valuable insights into areas where GRPHU can focus its efforts to make more meaningful connections with the community.

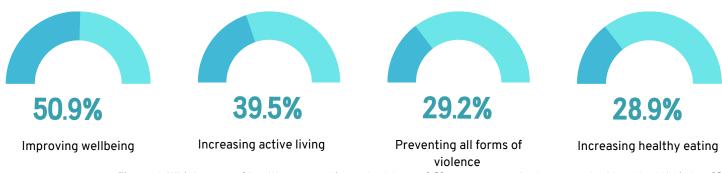


Figure 6. Which areas of health are most important to you? [Survey respondents were asked to select their top 3]

The results show a significant emphasis on improving wellbeing, particularly in mental health support and resources, which emerged as the top priority with 148 respondents highlighting this need.

Increasing active living and healthy eating were also highly prioritised, with 114 and 84 respondents respectively, reflecting a strong interest in lifestyle-related health improvements. These insights may support the framing of GRPHU activities to better align with community interests and needs.



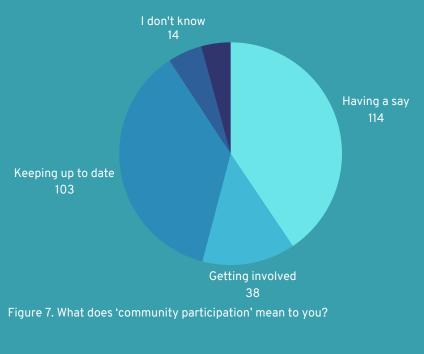
COMMUNITY PARTICIPATION

Importance of community participation

To gauge the value placed on community participation in health initiatives, respondents were asked to rate its importance on a scale of 1 to 5. Most respondents rated community participation highly, with an average score of 4.4 and a median score of 5. This strong support for community involvement indicates that future initiatives should ensure that community voices are part of the planning and decision-making processes.

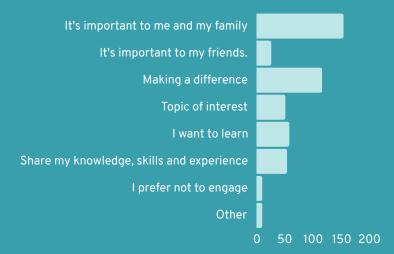


Understanding community participation



The data on what 'Community Participation' means to respondents highlights several perspectives. The most common understanding, with 40.6% (114 respondents), was 'Having a say on the decisions being made in my community'. This was followed by 'Keeping up to date with what's happening in my community (social media, online, local news)' at 36.7% (103 respondents), indicating a significant interest in staying informed. 'Getting involved in the planning of local health initiatives' is important to 13.5% (38 respondents), showing a willingness to engage more deeply health-related activities.

These insights highlight the need for GRPHU to focus on transparent communication and active involvement in decision-making processes to meet community expectations and enhance engagement.



Motivations

When asked what motivates survev respondents to be involved in discussions, the most selected response selected was "It is important to myself, and my family," (54.8% of respondents), closely followed by "Making а difference" (41.3% of respondents). Respondents were able to select as many responses as they wished

Figure 8. What motivates you to be involved in discussions related to health?

Barriers

Respondents were able to select more than 120 one barrier to participation. The most significant barrier preventing survey respondents from getting involved in healthrelated discussions is uncertainty about where to start, with 110 respondents indicating this.

A small number of respondents (seven) indicated they weren't interested in participating. Additionally, the 'Other' responses highlighted logistical challenges, such as access and travel, meetings being held during working hours, and lack of access to surveys.

Personal and social factors, including language, disability, anxiety, political concerns, and the behaviour of other participants, as crucial factors in preventing active engagement.

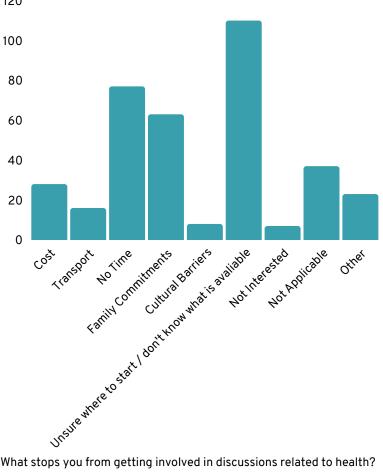


Figure 9. What stops you from getting involved in discussions related to health?

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Ð Ð Ð	Social Media	28.7%
	Online meetings / Focus groups	16.2%
	In-person meetings / Focus groups	30.8%
	Other	4%

The survey identified preferred methods of engagement, with in-person methods (30.8%), social media (28.7%), and online surveys (20.4%) being the top choices among respondents. These preferences suggest that a multi-channel approach, combining inperson and digital engagement, will be most effective in reaching and involving the community. GRPHU will look to consider these preferences in designing future engagement strategies to ensure broad and effective participation.

Involvement

Figure 10. What is the best way to get people from the community involved in discussions related to health?

Communication

Social media was the top response, preferred by 146 respondents. Email was popular, selected by 125 survey respondents. Traditional media sources, such as local news (including newspapers, radio, and television) remained relevant, with 75 respondents selecting this method.

'Other' responses suggested recognising and compensating community members for their time, emphasising the need for clear outcomes and using community advisory panels to ensure community involvement in planning and decision-making.

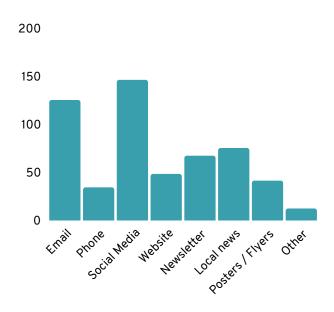


Figure 11. What is the best way for us to communicate with you about local health priorities?

ADDITIONAL COMMENTS MADE BY COMMUNITY

These key findings are based on additional comments made by survey respondents for GRPHU.

- High appreciation for GRPHU's engagement efforts
- Recognition of GRPHU's value and importance in the community
- Strong desire for more serious and structured community engagement
- Calls for improvements in healthcare access and local environmental health
- Some confusion or lack of awareness about GRPHU's role and activities
- Mixed sentiments about government involvement and effectiveness

The insights gathered highlight the importance of continuous community engagement, addressing specific concerns, and maintaining transparency in communication and decision-making processes.



Figure 14. Which local government areas does your organisation cover?

The survey received responses from a diverse geographical representation, indicating broad interest and involvement across the Gippsland region. Survey respondents could select multiple choices depending on the areas of operation for their organisation.

Sector & Industry

Survey respondents came from various industries and sectors. Key sectors included Health (eight respondents), Local Government (five), Neighbourhood Houses (three), Dairy (three), and Education (two).

Other sectors, each with one respondent, included Agriculture, Community Care, Community Service, Construction, Disability Advocacy and Support, Economic Development, Family Services, Family Violence Prevention, Food Relief, Government, Mental Health, Multicultural Women's groups, Public Health, Social Support, Sport and Recreation, and Water and Wastewater Services.

Many organisations provide services for the entire community (26). There is a notable focus on vulnerable populations, with 'People experiencing disadvantage' mentioned 20 times and 'People living with a disability' mentioned 19 times.





People living with a disability

AWARENESS AND UNDERSTANDING OF THE GRPHU

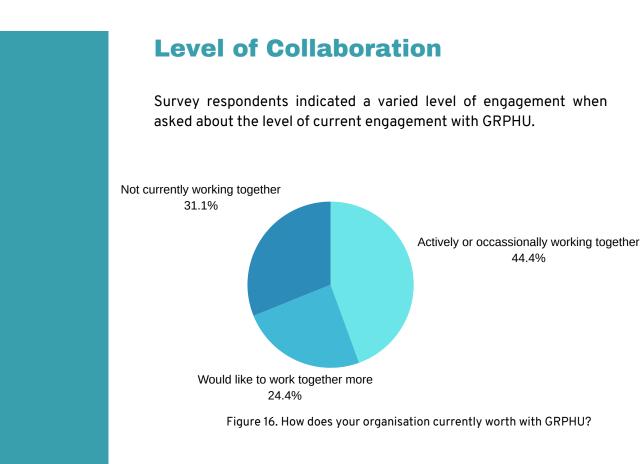
The survey data highlighted varied levels of awareness and understanding of the GRPHU among respondents.

The most common response (16 respondents, 35.6%) recognised the GRPHU's role in managing and preventing diseases while promoting health within the community. However, 24.4% of responding organisations acknowledged understanding GRPHU's mission without being able to specify their activities. 7 respondents were aware of the GRPHU but unsure of its functions, and a small number (n=2) had never heard of the organisation.

Which of the following statements best describes your understanding of the GRPHU?		
	Responses N=45 n(%)	
The GRPHU works closely with community on health matters	8 (17.8)	
I understand GRPHU works to improve health for people in Gippsland, but I can't list anything they do	11 (24.4)	
The GRPHU does a range of things, like managing and preventing diseases and promoting health in our community	16 (35.6)	
I have heard of GRPHU but I'm not sure what they do	7 (15.6)	
I've never heard of the GRPHU before	2 (4.4)	
Unanswered	1 (2.2)	

Table 2. Which of the following statements best describes your understanding of the GRPHU?

Varied understanding of GRPHU's role and activities highlights the need for improved communication and increased awareness. By enhancing our outreach and clarifying our role we can ensure that partner organisations and stakeholders are more informed and engaged leading to strong and more effective partnerships.



The information received from partner organisation and stakeholder survey respondents highlights the need for GRPHU to strengthen and expand partnerships, enhancing collective efforts in addressing health priorities in Gippsland.



PARTNER ENGAGEMENT

The question "What does partner engagement mean to you"? was asked in this survey, with options including; keeping informed, consulting, collaborating, other. 46% of responding organisations reported viewing partner engagement primarily as collaboration on relevant health priorities, indicating a preference for active and cooperative partnerships.

Consultation with partners and stakeholders was selected by 31% of respondents, indicating that this is an important component for successful partner engagement.

GRPHU keeping partners and stakeholders informed was recognised by 21% of respondents as an essential element of engagement, suggesting that effective communication is a foundational component of successful partnerships.

Whilst our preference is for active collaboration, the opportunities are becoming more limited as a result of the really tight financial operating environment. It's hard to justify 'nice to haves' around the side of core funded work

Free text response to question "How would you prefer to be involved by GRPHU initiatives?"

30

25

20

15

10

5

0

Beinformed

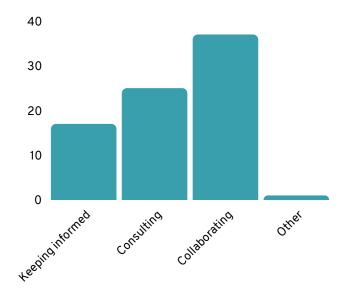


Figure 17. What does 'partner engagement' mean to you?



Prefered Involvement

The most frequently selected answer by respondina organisations was "Active collaboration through partnership", followed by "Be informed".

Figure 18. How would you prefer to be involved by GRPHU initiatives?

other

Activecolaboration

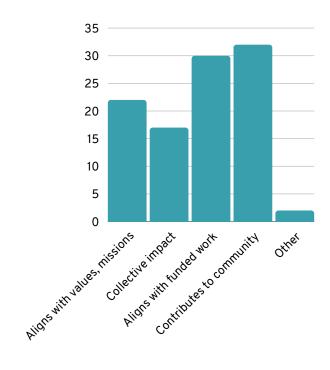
Beconsulted

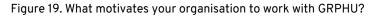
Motivations

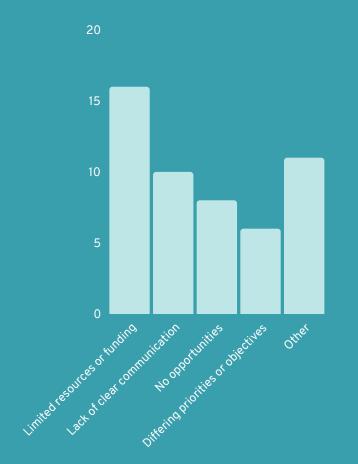
Survey respondents indicated the primary motivation for organisations to collaborate with GRPHU is the shared commitment to community well-being and contributing positively to the health of Gippsland.

30 organisations selected alignment with funded work as a significant motivator, suggesting that financial structures and projects that align play a crucial role in a successful partnership.

GRPHU's initiatives need to continue to align with partner values and seek opportunities that resonate with existing funding streams to strengthen collaborations.







Barriers

The most significant barrier to collaboration referred to by respondents is limited resources or funding. Seven respondents reported no barriers, suggesting that for these partner organisations and stakeholders, the partnership process with GRPHU is smooth and accessible.

Considering ways to address resource constraints, that might include funding, resource sharing strategies and so one, could support GRPHU in enhancing collaborative efforts with partner organisations and stakeholders.

Figure 20. What prevents your organisation from working with GRPHU?

Methods of Engagement

Online platforms, including email, social media, online videoconferencing, newsletters, and surveys, were indicated by survey respondents as being the most effective methods for engaging partners in communityoriented initiatives.

Meetings and workshops, along with networks and forums, were equally valued methods, each receiving 27 responses, indicating a preference for both face-to-face and structured group interactions. The expressed preference for digital and in-person engagement suggests that GRPHU could consider adopting a hybrid approach to engagement in order to more effectively reach a broader audience.



Figure 21. What are best methods for engaging partners in community-oriented initiatives?



HEALTH AND COMMUNITY PRIORITIES

Mental health was reported as the main concern for partner organisations and stakeholders, followed by family violence.

Survey respondents commented that issues related to health equity, access to resources, and regional health disparities highlight systemic barriers affect community well-being and inclusivity. Additionally, responses emphasised the importance of addressing social determinants such as food insecurity, homelessness, and poverty. Emerging concerns such as vaping, digital health, environmental impacts and evolving community priorities were also identified as important considerations by partner organisations and stakeholders.

The insights provided from survey responses can assist GRPHU in supporting and collaborating with partners to address key community concerns.

FURTHER CONSIDERATION

Summarised comments and suggestions on partner organisation, stakeholders and community engagement emphasise the importance of effective communication, collaboration, diversity and inclusion, networking, and consideration of local context. Key areas of opportunity for strengthening include avoiding duplication of efforts, leveraging data and research, focusing on early intervention, and maintaining consistent approaches. These insights reflect a strong desire for clear, inclusive, and well-coordinated health initiatives.



Communication

- Over-communication and early-stage involvement are crucial.
- Clear communication of visions and purposes is necessary.



Collaboration and Avoiding Duplication

- Avoid duplicating efforts and projects.
- Enhance ongoing discussions and collaboration between systems.



Diversity and Inclusion

- Partner with diversity and inclusion events.
- Involve various groups like the Youth Council or Diversity & Inclusion Working Group.



Networking and Partnerships

- Leverage networking opportunities.
- Continue successful partnerships and explore new ones.



Data and Research Collaboration:

• Explore opportunities for data collection, analysis, and research projects.



Local Focus and Tailoring

- Tailor initiatives to local community needs.
- Ensure staff are co-located if possible.



Early Intervention and Specific Focus Areas

- Focus on early intervention for children's health and development.
- Ensure consistent approaches across key local settings.

SURVEY STRENGTHS AND LIMITATIONS

Strengths

Reach: The survey engaged a diverse range of respondents from various sectors and communities across Gippsland.

Response Rate: The survey received 326 responses within three months from online and face-to-face interactions. This has provided a dataset to inform the development of GRPHU's Community Participation and Engagement Plan, intended to further strengthen meaningful engagement with community and partners.

Engagement: The survey's design, which included separate components for community members and partner organisation and stakeholders, allowed for targeted insights from both groups.

Limitations

Potential Bias: The voluntary nature of the survey may have introduced self-selection bias, with those more interested in public health being more likely to respond.

Representation Gaps: Despite efforts to reach a wide audience, certain demographic groups, particularly younger individuals, were underrepresented in the survey responses.

Awareness Challenges: The survey revealed that a significant portion of the community is unaware of GRPHU's role, which may have impacted the breadth of feedback.

CONCLUSION

The GRPHU Community and Participation Survey has provided valuable insights. Responses provided an understanding of what was understood about the GRPHU, identified key health priorities and concerns such as mental health and chronic disease management, and uncovered barriers to participation, including cost and time constraints. Additionally, insights into motivations for participation and preferred communication channels will help design initiatives that align with community interests and effectively engage members.

Responses indicate there was a strong sense of community and a desire to contribute to healthrelated decision-making and activities. However, a number of responses indicated that community members are not connected or engaged. The development of a community participation and engagement plan by GRPHU needs to acknowledge community insights and ensure opportunities for meaningful contribution.

The community values the role of GRPHU in building a strong, resilient community. However, there was also an expressed desire from survey respondents for a stronger partnership-based approach to decision making, supported by enhanced information sharing and increased communication about opportunities to participate.



Some of the next steps we, at GRPHU, will be undertaking include:



Providing the Community with a Report: Share the engagement data with the community using infographics. Highlight what was important to the survey respondents and how this will support the development of the Community Participation and Engagement Plan and Framework.



Developing the Community Participation and Engagement Plan: Continue developing a plan and ensure community members who have subscribed to be involved are kept informed. We will engage as broadly as possible with our community on these next steps.



Creating a Community Engagement Framework: Develop an internal overarching guide that outlines the principles, values, and general approaches for engaging with the community across multiple projects and initiatives.

ACKNOWLEDGMENTS

We would like to extend our gratitude to all those who contributed to this report, including the Latrobe Regional Health (LRH), our local partners, and community members across Gippsland.

Your insights and participation have been invaluable in shaping GRPHU's Community Participation and Engagement Plan.

Special thanks to those who supported the distribution and promotion of the survey, ensuring broad community engagement.

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