2025 Active Living CENSUS

Healthy LODDON CAMPASPE

Loddon Shire

TOPLINE REPORT

LODDON SHIRE

The Active Living Census is a core component of the Healthy Loddon Campaspe initiative, funded by the Victorian Government.

This report presents the topline findings for the Loddon Shire and was prepared by the Healthy Loddon Campaspe team.

For more information, visit www.healthyloddoncampaspe.au/alc

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E1 Background and methodology

The 2025 Active Living Census (ALC) was conducted by the City of Greater Bendigo (CoGB) on behalf of the Healthy Loddon Campaspe (HLC) initiative. HLC is funded by the Victorian Government and aims to improve health outcomes across the Loddon Campaspe region.

A non-probabilistic self-selection survey approach was used. All residents across the Loddon Campaspe region were eligible to participate, and a broad promotional campaign was undertaken to encourage widespread awareness and engagement. The survey was administered primarily online (with a limited number of hard copies), with the aim of reaching as many community members as possible between May 26 and July 6, 2025. For each participating Local Government Area (LGA), the table below shows the number of survey responses alongside the total population of residents aged 3 years and over.

CITY OF GREATER BENDIGO	Macedon Ranges Shire Council	Campaspe Shire Council
Population: 117,254 Response: 4,158	**Population: 49,830 Response: 890**	**Population: 37,565 Response: 1,052**
Mount Alexander Shire Council	CENTRAL GOLDFIELDS SHIRE COUNCIL	LODDON SHIRE
Population: 19,766 Response: 859	**Population: 13,167 Response: 643**	**Population: 7,570 Response: 642**

* Population benchmarks for residents aged 3 years and over sourced from Australian Bureau of Statistics' 2021 Census data

The total number of responses received was 8,244. Among a residential population of 245,157 people aged 3 years and over, this represents an overall response rate of 3.4%. This report presents the results collected from the 642 respondents from Loddon Shire. Compared to population benchmarks, females, children and adolescents, Aboriginal and Torres Strait Islanders and those with a Bachelor level education or higher were over-represented. Weighting was applied at the LGA level so that results could be generalised to the Loddon Campaspe population. The weighting benchmarks used for adults in the 2025 ALC were age by education, sex, and country of birth, while children (aged 3 to 17) were weighted by age and sex only.

E2 Health indicator population benchmarks

The 2025 ALC incorporated several established health measures to enable comparisons with the broader Victorian adult population aged 18 and over. The most relevant benchmark data for Victoria was sourced from the 2023 Victorian Population Health Survey (VPHS), conducted by the Victorian Department of Health and Human Services. Where VPHS data was unavailable, benchmark data was supplemented with information from the 2022 Australian National Health Survey (NHS).

Loddon Shire respondents in the 2025 ALC demonstrated a combination of healthier behaviours compared to Victorian benchmarks as well as areas of concern, with comparable adherence to fruit and vegetable recommendations and self-reported health, fewer reports of engaging in health risk behaviours such as smoking, vaping and gambling and a smaller proportion failing to meet physical activity recommendations. Conversely, a comparatively higher proportion of Loddon Shire 2025 ALC respondents reported low levels of life satisfaction, were classed as overweight or obese and higher levels of risky alcohol consumption.

E3 Movement behaviours

The 2025 ALC survey incorporated items designed to assess 24-hour movement behaviours among Loddon Campaspe residents aged three years and older. This enables an evaluation of adherence to age-specific recommendations established by government and non-government expert bodies to support optimal health and wellbeing.

Overall, respondents showed strong adherence to aerobic physical activity recommendations, with 71.7% meeting recommendations, while 40.6% met the muscle-strengthening recommendations. Active travel patterns varied, with almost one in four respondents walking daily and one in ten cycling weekly. Adults were more likely than children to achieve recommended levels of aerobic physical activity cycling weekly for transportation. In contrast, recreational screen time was high across the sample, with over half exceeding recommended limits, particularly adolescents, although sex differences were minimal. Sleep adherence was comparatively stronger, with roughly 69% meeting age-specific recommendations and minimal differences were seen between children and adults or between males and females. Positive correlations seen between these movement behaviours and health and wellbeing outcomes highlights the need for greater investment in health policy and promotion to assist our community members to be more active.

Adults were more likely than children to report that they were not as active as they would like to be. These respondents also identified a range of barriers to participation, with lack of time particularly common among adults and cost more frequently reported by females. Additionally, parents reported being unsure about what activities are available for their children in the local area. Because these groups have expressed a desire to be more active, understanding the key reasons for their insufficient activity is essential for informing targeted efforts to better support them.

Perceptions of the local environment for physical activity were generally positive, with around 63% of respondents agreeing that it was easy to be active where they live. These respondents also tended to have more positive health and wellbeing outcomes; however, no associations were seen between perceived ease of being active and healthy movement behaviours.

E4 Diet

Overall, the diet-related findings from the 2025 ALC highlight significant challenges across the population, particularly in relation to food security and vegetable intake. Just under one-third of respondents experienced some level of food insecurity. Almost one-third of respondents consumed the recommended volume of water per day, while one in seven reported consuming sugar-sweetened beverages daily. Adherence to fruit and vegetable consumption recommendations was low, with less than half meeting the fruit recommendations and just 11% meeting the vegetable recommendations. Adherence to the vegetable recommendations was lower among males than females. Food insecurity was higher and fruit and vegetable consumption was lower among groups already facing broader health and social disadvantages.

Barriers to eating enough fruit and vegetables were widely reported, with the most common being personal preferences, cost and limited access to high-quality produce. Personal preference was more common among children, and satisfaction with current intake or low appetite was more common among adults when considering why they don't meet the recommended intake of vegetables. Perceived ease of access to healthy food in the local area were generally positive, more so among adults than children. Like physical activity, those who reported agreeing that it was easy to access health food locally were more likely to report more positive health and wellbeing.

E5 Public facilities and open spaces

Respondents reported frequent use of public spaces and pedestrian infrastructure. Just under half used public open spaces weekly, with higher use among children than adults. Footpaths were used more often, with 59% of respondents using them weekly. Off-road walking and cycling tracks were less commonly used, with just over one quarter using them weekly. Use of sports grounds, parks, halls / community centres, swimming facilities and playgrounds was widespread, with children more engaged in recreational and play-based facilities. The most common reasons for using public facilities or open spaces included socialising (60.4%), exercise or health and fitness (57.6%), and fun or enjoyment (55.6%), with children more likely to use spaces for socialising, fun and sports, and adults more likely to use them for mental health, time to themselves and to exercise the dog. Perceptions of safety in the local area were generally high, with 49.1% of adults reporting always feeling safe, and 90.7% of parents agreeing that their child is safe in their local area.

Suggestions for improvements most commonly related to walking tracks and footpaths, with around one in eight respondents (12.8%) indicating they would like to see more, improved and better-connected walking tracks and paths in the local area. Other commonly identified suggestions included more or improved recreational equipment and facilities (11.2%), improved provision and quality of toilets and change rooms including better disability access (9.4%), more and better camping facilities (7.3%) and more cover, shade and shelter in public spaces (6.4%).

E6 Health and wellbeing indicators

The 2025 ALC asked all respondents to report their (or their child's) general health status and provide height and weight measurements to calculate BMI, while adults also self-reported their life satisfaction, perceived value to society, and mental wellbeing. Among adults, just over one fifth (21.3%) rated their health as fair or poor, 8.5% reported low life satisfaction, 24.3% felt they were not valued by society, and 18.8% had poor mental wellbeing based on the WHO-5 index. In contrast, children's health ratings were markedly higher, with only 5.3% of parents or guardians reporting fair or poor health for their child. Obesity was almost three times as common among adults (35.8%) than children (13.5%), indicating substantial health and wellbeing challenges among adults living in the Loddon Campaspe region and underscoring the need for targeted investment to support improved population health.

Poorer health and welcomes outcomes were consistently more prevalent among people also experiencing financial stress or food insecurity. Health and wellbeing behaviours often clustered together, meaning that individuals with poor health in one area were more likely to experience poor outcomes in other aspects of their health and wellbeing. Consistent patterns were also observed linking poorer wellbeing with less healthy and higher-risk behaviours. This suggests that interventions targeting one area of health may have broader, positive spillover effects on other aspects of behaviour and wellbeing.

E7 Risk behaviours

Risk behaviours varied across the sample, with 61.0% of adult respondents reporting risky single-occasion alcohol consumption, 9.8% currently smoking, 3.1% currently vaping, and 35.0% gambling at least once in the past 12 months. Demographic, health and wellbeing, and health behaviours patterns varied across the four risk behaviours. Smoking was more common among those living in Inglewood / Bridgewater and surrounds, and those not meeting vegetable or screen time recommendations. Risky alcohol consumption was more common among those in the normal weight range or underweight. Weekly gambling was more common among those who are not neurodivergent. The four risk behaviours also showed clear clustering, reinforcing the fact that risk behaviours tend to co-occur, particularly among more disadvantaged groups and among those experiencing poorer health and wellbeing.

1. Introduction

1.1. Background

The Active Living Census (ALC) is a population health survey which provides locally and regionally relevant, reliable and valid data on the health behaviours, activity levels, preferences and needs of the Loddon Campaspe population. The data collected enables evidence-based planning for local health and recreation services and a better understanding of the health behaviours, needs and preferences of the local community. First completed in 2014 within the City of Greater Bendigo, the 2019 ALC was expanded to capture data from residents across all six Local Government Areas (LGAs) within the Loddon Campaspe region: City of Greater Bendigo, Mount Alexander Shire, Central Goldfields Shire, Loddon Shire, Macedon Ranges Shire and Campaspe Shire.

The ALC is integral to the Healthy Loddon Campaspe (HLC) initiative which aims to improve health outcomes across the Loddon Campaspe region and "make health everyone's business". The HLC model includes an overarching governance structure providing strategic oversight of the initiative, a local and regional Health Broker workforce, activation projects and using a data and research driven approach. The ALC provides the data required to:

- Provide a snapshot of current data as a benchmark for evaluating the success of local initiatives, including those introduced by HLC
- Inform targeted efforts and investment for activation projects and health broker policy work
- Increase coordination between groups across the community, and a heightened focus on evidence-based priorities
- Increase opportunities to attract projects and initiatives to the region, including informing grants and funding proposals
- Provide valid and reliable evidence to drive ongoing change across the region
- Allow for analysis to draw comparisons between different demographics
- Provide data for researchers to use in their own work, which often leads to new opportunities

Not only does the ALC capture data on behavioural risk factors to better understand the priority areas for targeted public health intervention, but it also captures in-depth, contextual information from residents about where and how these efforts could be targeted. Notably, the ALC addresses the key priorities for quality risk factor surveillance that were highlighted by The World Alliance for Risk Factor Surveillance in 2015[1], including the use of appropriate measures, sampling and data collection methodologies to enable reliable, robust and meaningful data to be collected and analysed in a way that meets the needs of the data users (e.g., community groups, program planners, policy makers etc.) and allows for comparisons with other key datasets to be made.

The 2025 ALC provides a much needed 6-year follow-up on the 2019 Loddon Campaspe region wide ALC, and an 11-year follow-up on the 2014 City of Greater Bendigo ALC. A separate report will explore changes over time using these three datasets.

[1] **Campostrini, S., McQueen, D., Taylor, A., & Daly, A.** (2015). *World Alliance for Risk Factor Surveillance White Paper on Surveillance and Health Promotion*. AIMS Public Health, 2(1), 10–26. https://doi.org/10.3934/publichealth.2015.1.10

1.2. Context

The Loddon Campaspe region encompasses six local government areas across the geographic centre of Victoria: about 60 to 120 minutes' drive from Melbourne. The population includes approximately 253,152 people, approximately 112,862 occupied households, and covers 19,027 square kilometres. The region includes the City of Greater Bendigo, Mount Alexander Shire, Central Goldfields Shire, Loddon Shire, Macedon Ranges Shire and Shire of Campaspe Councils, with regional centres including Bendigo, Gisborne, Castlemaine, Kyneton, Echuca, and Maryborough, small towns, and rural areas.

Data from the 2019 ALC showed that residents in the Loddon Campaspe region reported higher levels of health risk behaviours compared to Victorian benchmarks, including sugar-sweetened beverage consumption (VPHS 2014[2]) and excessive alcohol consumption (VPHS 2016[3]). Additionally, lower levels of life satisfaction were recorded compared to the Victorian average (VPHS 2016 and NHS 2017-18[4]), and a greater proportion of ALC respondents were overweight or obese according to their Body Mass Index (calculated based on self-reported height and weight) compared to 2016 VPHS respondents.

In comparison, smoking rates were lower amongst Loddon Campaspe residents compared to the Victorian average (VPHS 2016 and NHS 2017-18), however it is unclear whether the differences reflect the general decline in smoking over the years or whether they reflect a meaningful difference within the region. Adherence to the physical activity recommendations was greater amongst ALC

[2] **Department of Health and Human Services**. (2016). *Victorian population health survey 2014: Modifiable risk factors contributing to chronic disease in Victoria*. Victorian Government. https://www.health.vic.gov.au/publications/victorian-population-health-survey-2014-modifiable-risk-factors

[3] **Department of Health and Human Services**. (2018, July). *Victorian Population Health Survey 2016: Selected survey findings* (ISBN 978-0-7311-7323-5; ISSN 2206-7434). Victorian Government. http://www.health.vic.gov.au/survey vahi.vic.gov.au+11

[4] **Australian Bureau of Statistics**. (2018, December 12). *National Health Survey: First results, 2017–18 financial year* (Cat. No. 4364.0.55.001). https://www.abs.gov.au/statistics/health/health-conditions-and-risks/national-health-survey/2017-18

respondents compared to the 2016 VPHS respondents, however the questions used to determine adherence differed, so these differences should be interpreted with caution.

In addition to these differences in health behaviours and outcomes amongst residents in the Loddon Campaspe region compared to state-wide averages, the Loddon Campaspe population is growing at a fast rate, with notable changes being experienced by many communities in this region since the COVID-19 pandemic began. Moreover, changes to population distribution, daily living routines and habits, inflation, and climate change over the recent years will have undoubtedly had an impact on the population including their health behaviours (e.g., healthy eating and physical activity), and their preferences and needs to live a healthy lifestyle. Thus, the 2025 ALC provides essential data to adequately understand these changes that have not been captured via other means.

This report presents the 2025 ALC results exclusively for residents from Loddon Shire. In some places, data from the 2019 ALC and 2025 ALC have been compared but for the most part, this report presents only data from the 2025 survey. The 2019 ALC reports can be accessed at: 2019 Active Living Census | Healthy Loddon Campaspe

1.3. Research objectives

The 2025 ALC was designed to measure current physical activity levels, recreation, and health behaviours and trends in the Loddon Campaspe region. The main objectives for the 2025 ALC were to:

- Address gaps in current available data (i.e., Department of Health Community Profiles; Victorian Population Health Survey; National Health Survey)
- Benchmark against other relevant data sets by providing relevant, reliable and valid health data at a local area level that is not currently available from other sources
- Assist the planning, development and enhancement of public spaces, open spaces and recreation facilities
- Better understand the barriers people face to being active and meeting health recommendations, to inform future policies and initiatives
- Allow for comparisons to be made between different demographics (age, sex, LGA, etc.) and subregions within an LGA
- Provide results specific to each LGA to ensure that strategies developed from the data are locally driven
- Identify subgroups within the population requiring further targeting / investigation
- Provide data to support the evaluation of health and wellbeing initiatives conducted in local areas

1.4. Methodology

The principal requirement of the 2025 ALC was to provide an opportunity for all Loddon Campaspe residents to have the opportunity to participate in the survey. The project utilised a non-probability sampling design, whereby the survey was promoted across the Loddon Campaspe region via a comprehensive campaign, including via print, television, radio, and social media methods. The in-scope population for the survey was all children and adolescents (aged from 3 to 17 years) and adults aged 18 years and over living in one of the six LGAs across the region.

1.4.1. Sample frame / distribution

The 2025 ALC was primarily conducted online via the Software-as-a-Service (SaaS) platform called Qualtrics. All residents aged over 13 years were eligible to complete the survey. Additionally, parents and guardians were invited to provide proxy responses on behalf of children aged 3 to 17 years. The survey was promoted with an integrated advertising and communications campaign via radio, television, print, and social media in the Loddon Campaspe region before and during the enumeration period. More than 1,600 TV ads were aired, reaching over 3 million viewers, alongside 373 radio spots and 36 media articles across 16 outlets. Digital promotion generated nearly 2 million social media impressions and 198,000 engagements, supported by extensive organic posts shared by 145 community groups and 70 sporting clubs. Hard-copy materials included over 54,000 postcards, 2,000 posters, 120 large corflute signs, and 20 A2 signs, with targeted mailbox drops delivering postcards to more than 34,700 households across 280+ towns and suburbs. Direct promotion also included two subscriber emails, council communication channels, and on-the-ground activities such as café sessions, voucher giveaways, a promotional truck and Footy Record advertising. All advertising collateral contained a QR code and URL that would take residents directly to the online survey.

A limited number of hard copy questionnaire booklets (n=1000) were printed and distributed at key community locations (e.g., libraries, community houses) in attempt to reach community members living in more rural and remote areas, those with limited internet connectivity, and those who required assistance with completing the survey.

Case study: A case study was conducted to explore the uptake and experience completing a shortened version of the survey among neurodivergent people. The shortened survey contained only the items that were essential for the impact evaluation of the broader HLC initiative. Hard copies were distributed via relevant stakeholders, with some choosing to complete it during a supported session and others choosing to take it home to complete in their own time.

1.4.2. Questionnaire

The 2025 ALC remained comparable with the 2019 survey, however it was updated in accordance with the HLC monitoring, evaluation and learning (MEL) plan, as well as adaptations made to: 1) allow for comparisons against State-wide and National surveys, 2) allow establishment of adherence to national behavioural recommendations, and 3) capture data regarding current state and local priority areas (e.g., food insecurity, vaping). Finalisation of the survey design and development was a collaborative effort between Healthy Loddon Campaspe, and a working group of representatives across each of the six Loddon Campaspe LGAs.

Survey testing: A test–retest reliability study was carried out to assess the newly developed survey items among adult residents of the Loddon Campaspe region. Participants, recruited through social media and HLC's usual communication channels, completed the same online survey twice, one week apart. In total, 122 participants provided complete responses for both rounds. The findings demonstrated strong reliability, with a high level of agreement across demographics, nutrition, physical activity, and health risk behaviour measures. This consistency indicates that the survey captures stable and reproducible information, minimising measurement error and respondent bias.

Following the test–retest study, the full 2025 ALC survey was pilot tested with participants from outside the catchment area to identify any issues and gather additional feedback on completing the form. Insights from this pilot were incorporated into the final version of the questionnaire (see Appendix B).

1.4.3. Enumeration period

The Active Living Census (ALC) was open for participation from 26 May to 6 July 2025. In the lead-up to the survey, a comprehensive marketing campaign commenced in April across the Loddon Campaspe region. This included television, radio, print media, and social media advertisements aimed at raising awareness of the ALC and encouraging broad community engagement. To further boost participation, a prize draw was offered, featuring 143 prizes valued at over $12,000. These strategies supported a self-selection approach designed to maximise community reach and survey responses.

1.4.4. Returns / response rate

In total, 8,244 individual responses to the 2025 Active Living Census were received by the close of the enumeration period. This comprised 7,913 online completions and a further 331 individual responses through the paper-based version of the survey. Based on the regional population of 244,952 residents aged 3 years and over, this represents an individual response rate of 3.4%. For the Loddon Shire region specifically, there were 642 individual responses received, from the population of 7,570 individuals aged 3 years and up, making the response rate for Loddon Shire 11.8%. While this proportion is modest, it is important to note that the 2025 ALC was not designed as a true census-style survey, and despite the extension of the media campaign, it is unlikely that all residents were aware of or able to participate.

Campaign analytics provide further context for this response level. During the enumeration period, there were 20,950 survey link clicks with a 33% completion conversion rate, alongside 2,167 QR code scans (yielding 77 completions; 3.6% conversion). The ALC communications campaign achieved strong regional visibility, with over 1,600 TV ads reaching 3.1 million viewers, 373 radio ads, 36 local media articles, nearly 2 million social media impressions, and more than 54,000 pieces of hard copy collateral delivered across towns and suburbs. This extensive promotional reach highlights both the scale of effort to raise awareness and the inherent challenges of achieving high completion rates for a voluntary, non-mandatory survey of this length.

1.4.5. Data file preparation

Survey responses were collected through three sources: online submissions, hard copy surveys, and shortened case study surveys. Hard copy and case study responses were manually entered into the online survey platform to ensure consistent formatting. All three datasets were then downloaded and merged into a single master data file. Open-ended and 'other specify' responses were coded systematically to enable quantitative analysis. Partial responses were included in the final dataset if respondents had completed up to the end of Section B, which captured core information required for the Healthy Loddon Campaspe (HLC) impact evaluation.

1.4.6. Sampling error / weighting

As with most surveys of this type, the achieved sample distribution differed from the Loddon Shire population distribution for age, sex, residents' household location, education, and other demographics and was therefore not representative of the Loddon Shire population (see Section 2.1 below for further details). This suggests that sampling error influenced the achieved sample, potentially due to differential response rates across demographic and geographic groups. Factors such as disability, limited internet access, lower English proficiency, or reduced motivation or capacity to complete a survey may have affected participation across age, sex, education and location.

Furthermore, sampling error may have occurred due to the nature of the survey itself. The survey was focussed on 'active living' and contained questions on use of public facilities, open spaces, and walking and cycling tracks, and participation in various health behaviours. Thus, non-active residents may not have perceived the survey as being relevant to them and may have been less likely to respond as a result. Likewise, active residents may assume they don't need to complete the survey as they are already 'active enough'. Despite efforts in pre-survey communications to encourage participation across all activity levels, the survey should be considered as a sample of residents who self-selected to participate. Therefore, results from the 2025 ALC may not accurately reflect the attitudes and behaviours of the population of all Loddon Shire residents.

Sampling error was partially controlled using GREG (generalised regression) weighting, which calibrated the sample to align with ABS population benchmarks. This method adjusts the influence of individual respondents by increasing the weight of under-represented groups and decreasing the weight of over-represented groups, thereby improving the accuracy and representativeness of results. For the 2025 ALC, adult respondents were weighted by age, education, sex, and country of birth, while children (aged 3 to 17 years) were weighted by age and sex only. All benchmarks and weights were calculated separately for each LGA. Weighting was applied to enable results to be generalised to the broader Loddon Campaspe population or analysed at the individual LGA level. Further details on the weighting methodology are provided in Appendix A.

1.5. About this report

This report presents findings from the 2025 ALC for Loddon Shire residents only, with results shown for all respondents and, where relevant, by key subgroups. It begins with an overview of participant demographics in Section 2, followed by movement behaviours and dietary habits in Section 3 and 4, and an overview of use, quality and accessibility of public facilities and open spaces in Section 5. The report then presents findings on health and wellbeing indicators in Section 6, concluding with Section 7 providing an examination of risk-taking behaviours.

Appendices are presented at the end of the document, and provide further information on the report for the following areas:

- Appendix A – Weighting and missing data handling
- Appendix B – The questionnaire
- Appendix C – Detailed tables

Due to the nature of hardcopy forms, some respondents did not answer or did not provide a logical response (e.g., responded ‘Yes’ and ‘No’ to age) to all questions. Only ‘valid’ responses, unless otherwise stated, have been included in the base size when calculating results. That is, all ‘Not answered’, ‘Not applicable’ and ‘Skipped by design’ responses were excluded from analysis. A small number of responses were received from residents outside the Loddon Campaspe region and were excluded from the results. Additionally, a small proportion of respondents did not provide enough information to identify their LGA. These responses were included in the overall analysis but excluded from LGA-level reporting.

The 2025 ALC results are subject to non-sampling error, which may affect data quality and interpretation. These errors can result from inaccurate reporting (e.g., recall bias, misinterpretation of questions, or incorrect survey completion) as well as social desirability bias or reluctance to disclose certain behaviours. Additionally, differential non-response among specific population subgroups can lead to bias. As noted earlier, parents were permitted to complete the survey on behalf of their children, which may introduce further inaccuracies. As a result, the findings may not fully represent all residents of the Loddon Shire region. Given these limitations, the survey results should be interpreted with caution and considered alongside other data sources and within the broader policy context.

Please note that due to rounding, results in tables may not sum to 100%. Standard notation in tables includes the following:

- 'n' – base size or number of respondents used when calculating results
- '%' – proportion of responses within the base size.

Throughout the report, detailed tables are provided giving a breakdown of responses by a range of demographic and health characteristics. It may be noted that the bases for particular subgroups (e.g. sex) do not sum to the base for the total sample. This is due to missing responses for the question used to derive the sub-group (that is, for this example, if individuals did not provide their sex or the sex provided did not fall into the ‘male’ or ‘female’ category, they were not used for analysis as there were too few responses to make robust statistical comparisons).

Significance testing was conducted at the 99% confidence level. Survey-weighted analyses were performed using Stata’s survey procedures (svy commands), with linearised variance estimation to account for weighting. Associations between categorical variables were first examined using design-adjusted chi-square tests. Where overall associations were statistically significant, post-hoc

comparisons were conducted using survey-weighted regression models appropriate to the outcome type, and differences between groups were assessed using predicted probabilities. For continuous variables, survey-weighted means were estimated and compared across groups using design-adjusted methods.

In tables, cell colouring is used to indicate the presence of significant differences in proportions or mean scores between the subgroups of interest (at the 99% level of confidence). For the tables in this report, subgroups are going down the left side of the table. So, significance testing compares results down the column for each group rather than across the rows. As demonstrated in the example table below, purple highlighted cells represent a significantly *higher* result compared to the corresponding blue shaded cells which reflect a significantly *lower* result by comparison. Grey highlighted cells represent *both* a significantly greater and significantly lower result than other shaded comparisons.

In the example table below, there were no significant differences recorded between males and females. In the sex grouping significant differences were observable amongst males in different age groups. For example, looking at the Result 3 column, males aged 18 to 34 years (54.1%), 35 to 49 years (55.7%) and 50 to 69 years (52.9%) were significantly more likely to provide this response than males aged 70 years and above (42.5%). Result 1 column shows that males aged 18 to 34 years (10.4%) are significantly less likely to provide this response than males aged 70 years and above (17.6%). Additionally, males aged 35 to 49 (14.5%) are both more likely to provide this response than males aged 18 to 34 years and less likely to provide this response than males aged 70 years and above.

Table Example

	Unweighted base	Result 1	Result 2	Result 3
	n	%	%	%
Total sample	8,547			
Sex and age				
Males	3,122	17.9	35.0	52.8
Females	5,035	18.2	34.6	53.5
Males, 18 to 34	957	10.4	32.2	54.1
Males, 35 to 49	1,722	14.5	37.9	55.7
Males, 50 to 69	2,496	16.7	37.2	52.9
Males, 70+	1,358	17.6	35.0	42.5

Row percentages
(may not sum to 100% due to rounding)

2. Respondent Profile

The respondent profile, or the achieved sample distribution, for the 2025 ALC was measured across a range of demographic characteristics. The extent to which the achieved sample distribution (i.e., the composition of survey respondents) matches the Loddon Shire population distribution indicates how representative the pool of respondents is to the resident population.

If the percentage of respondents in a particular group (e.g., people aged 70 years and over) from the 2025 ALC sample is greater than the percentage of this group in the population, this respondent group is 'over-represented' in the achieved sample (see Table 2.1.1). Conversely, a respondent group is 'under-represented' if the achieved sample has a lower percentage of respondents in this group when compared to the population distribution. Data in Section 2.1 are unweighted and provided for all age groups where available.

In Section 2.2, unweighted respondent characteristics for a range of health indicators are compared to available population benchmarks. Due to the limited availability of comparable health benchmarks for children, this section compares weighted results to health indicators for respondents aged 18 years and over only.

2.1. ABS population benchmarks

Table 2.1.1 shows the population distribution of residents aged 3 years and over in Loddon Shire sourced from the 2021 ABS Census. These are compared to the distribution of respondents achieved in the 2025 ALC. When interpreting the achieved sample distribution as a proportion of the ABS population distribution, a percentage below 100% indicates that a respondent group is under-represented in the achieved sample, while a percentage above 100% indicates a respondent group is over-represented.

For the 2025 ALC, females were over-represented in the achieved Loddon Shire sample when compared to their proportions in the population. Both male and female child and adolescent respondents (3 to 11 years and 12 to 17 years) were also over-represented in the survey. Under-representation was most notable among males aged 18 to 34 years, males aged 35 to 49 years, males aged 50 to 69 years, and females aged 70 years and over. Note that ABS benchmarks do not include any alternate sex categories so a comparison for respondents falling into the "Other" category in the ALC (n=13, 2.0%) is not available. Throughout the report, only the two main sex classifications are used for subgroup comparisons due to the small base size for the other category.

The over-representation of females and under-representation of young adult respondents is relatively common for population health surveys, particularly those conducted using an online survey. One example is the 2016 VPHS conducted via Computer Assisted Telephone Interviewing (CATI) with a stratified random sample of Victorian residents. The 2016 VPHS achieved sample had an over-representation of females (57.2% in achieved sample vs 51.1% in Victorian population), and an under-representation of respondents aged 18 to 24 years (7.0% in achieved sample vs 12.8% in Victorian population).

In addition to age and sex, the distribution of respondents also differed from that of the population dependent upon the subregions in which they lived.

To correct for the under- and over-representation of particular subgroups of respondents, results have been weighted by location, age, sex and (for respondents aged 18 years and over) education and country of birth. Survey results provided in Section 3 of this report onwards are based on weighted

results ensuring they most closely reflect the views of the Loddon Shire population. Further information regarding weighting is provided in Appendix A.

Table 2.1.1 Achieved sample composition

Age group	ABS population[1] (Loddon Shire)		Active Living Census[2] (unweighted)		ALC % as a % of the population
	N	%	N	%	%
Total sample	7,570		642		
Sex					
Males	3,826	50.5	197	32.2	63.7
Females	3,745	49.5	415	67.8	137.1
Age					
3-11 years	691	9.1	90	14.5	158.6
12-17 years	539	7.1	136	21.9	307.2
18-34 years	1,017	13.4	71	11.4	85.0
35-49 years	1,134	15.0	87	14.0	93.4
50-69 years	2,612	34.5	149	24.0	69.4
70+ years	1,579	20.9	89	14.3	68.6
Sex and age					
Males, 3 to 11	337	8.8	37	19.0	215.1
Males, 12 to 17	255	6.7	68	34.9	522.5
Males, 18 to 34	499	13.1	13	6.7	51.0
Males, 35 to 49	565	14.8	16	8.2	55.5
Males, 50 to 69	1,349	35.3	28	14.4	40.7
Males, 70+	816	21.4	33	16.9	79.2
Females, 3 to 11	351	9.4	48	11.6	124.2
Females, 12 to 17	280	7.5	64	15.5	207.6
Females, 18 to 34	520	13.9	58	14.0	101.3
Females, 35 to 49	567	15.1	68	16.5	108.9
Females, 50 to 69	1,267	33.8	121	29.3	86.7
Females, 70+	766	20.4	54	13.1	64.0
Subregion					
Boort & Surrounds	1,228	13.6	169	26.8	196.9
East Loddon Area	1,006	11.2	108	17.1	153.6
Inglewood / Bridgewater & Surrounds	1,719	19.1	155	24.6	129.0
Pyramid Hill & Surrounds	1,378	15.3	62	9.8	64.4
South Loddon Area	1,760	19.5	27	4.3	21.9
Wedderburn & Surrounds	1,921	21.3	109	17.3	81.2

[1] Population benchmarks sourced from ABS Census 2021, population aged 3 years and above

[2] Base sizes include respondents aged 3 years and over living in the Loddon Shire

Additional demographic characteristics with available population benchmarks were also collected in the 2025 ALC and the comparative distribution of respondents aged 18 years and over are presented in Table 2.1.2.

Results revealed an over-representation of respondents with a Bachelor degree or higher (this has been adjusted during weighting). Aboriginal and Torres Strait Islanders, those living in households with four or more people and those with very low, low and marginal food security were also over-represented. Groups that were under-represented include people born overseas, those who speak a main language other than English, those who require help with daily activities and those living in single-person households. These differences to the benchmarks indicate that results should be interpreted with caution when comparing to the Loddon Shire general population despite the previously mentioned weighting applied.

Table 2.1.2 Achieved sample distribution for demographic characteristics

Age group	ABS population[1] (Loddon Shire)		Active Living Census[2] (unweighted)		ALC % as a % of the population
	n	%	n	%	%
Total sample	**6,343**		**396**		
Country of birth					
Born overseas	621	12.6	38	9.7	76.5
Born in Australia	4,295	87.4	355	90.3	103.4
Main language					
Speaks other main language	191	3.4	4	1.0	30.2
Speaks English as main language	5,455	96.6	387	99.0	102.4
Aboriginal and/or Torres Strait Islander status					
Aboriginal and/or Torres Strait Islander	90	1.6	11	2.8	175.6
Not Aboriginal or Torres Strait Islander	5,556	98.4	382	97.2	98.8
LGBTQIA+ Status[3]					
LGBTQIA+	-	-	9	2.3	-
Non-LGBTQIA+	-	-	382	97.7	-
Neurodivergent[4]					
Yes	-	-	26	7.3	-
No	-	-	249	70.1	-
Maybe	-	-	20	5.6	-
Not sure	-	-	60	16.9	-
Requires help with self-care, body movement or communication activities					
Requires help	540	9.6	24	6.1	64.2
Does not require help	5,110	90.4	367	93.9	103.8
Level of education					
Less than Bachelor level education	4,521	86.6	260	66.5	76.8
Holds a Bachelor degree or higher	701	13.4	131	33.5	249.6
Employment status					
Unemployed/Retired	2,599	46.3	139	35.5	76.6

Employed	3,014	53.7	253	64.5	120.2
Household size					
1 person	1,022	33.5	51	12.9	38.4
2-3 people	1,503	49.3	210	53.0	107.6
4-5 people	437	14.3	107	27.0	188.6
More than 5 people	88	2.9	28	7.1	245.1
Household financial status[4]					
Just getting along, poor or very poor	-	-	142	36.3	-
Reasonably comfortable, very comfortable or prosperous	-	-	249	63.7	-
Food security (last 12 months)[5]					
Very low food security	-	3.7	24	6.1	165.1
Low food security	-	5.8	37	9.4	162.3
Marginal food security	-	4.9	54	13.7	280.4
High food security	-	84.8	278	70.7	83.4

[1] Population benchmarks sourced from ABS Census 2021
[2] Base sizes include respondents aged 18 years and over living in Loddon Shire
[3] ABS 2022 estimates suggest 5.3% of the Victorian population is LGBTI+, estimates for Loddon Shire are not available
[4] Population benchmark data not available
[5] Australian sample of adults living outside of a capital city from the 2022 National Nutrition and Physical Activity Survey, estimates for Loddon Shire are not available
* Totals in subgroups don't sum to base due to invalid responses being excluded from analysis

2.2. Health indicator population benchmarks

Table 2.2.1 provides a summary of how the 2025 ALC population compared to available benchmarks for a range of health and wellbeing indicators. Throughout the report, ALC estimates are compared to the 2022 NHS data and the 2023 VPHS where available. These comparisons are indicative only as the methodology used for each study varied and this has the potential to influence results.

Although adherence to fruit and vegetable recommendations was similar to Victorian benchmarks, other findings from the 2025 ALC indicated greater differences in the health and wellbeing of Loddon Shire residents compared to state benchmarks. For example, there were fewer reports of engaging in health risk behaviours among ALC respondents including smoking, vaping, gambling and consuming sugar-sweetened beverages daily. Specifically, 9.8% of Loddon Shire ALC respondents indicated that they currently engaged in smoking, and 3.1% indicated that they currently engaged in vaping compared to 13.9% and 7.2% of 2023 VPHS respondents, respectively. Because of the two-year time gap between surveys, it is uncertain whether this difference reflects a general decline in smoking and vaping rates over recent years or is due to lower rates specifically in the Loddon Shire. The proportion of ALC respondents who indicated that they had gambled at least once in the year prior to survey completion was slightly lower than VPHS respondents (35.0% compared to 39.1%). Daily sugar-sweetened beverage consumption was lower among ALC respondents (16.9%) than VPHS respondents (19.0%), with the difference more pronounced among males (17.0% compared to 23.4%).

A greater proportion of Loddon Shire respondents to the 2025 ALC met the aerobic physical activity recommendations (24.2% failed to meet the recommendations) compared to the 2023 VPHS respondents (47.1%), however the proportion was more comparable to respondents in the 2022 NHS (28.2%). Additionally, a higher proportion of ALC respondents met the muscle strengthening recommendations of two or more sessions per week (42.3%) compared to the 2022 NHS respondents (24.5%). There are currently no comparable benchmark datasets, however among the 2025 ALC respondents, 51.7% failed to meet recreational screen time recommendations of three hours per day for adults and two hours per day for children and adolescents. Conversely, 69.0% of adult respondents met the sleep duration recommendations as outlined by the Sleep Health Foundation[5].

When comparing Body Mass Index (BMI), Loddon Shire ALC respondents were more likely to be overweight or obese (70.5%) than VPHS respondents (53.9%), and the 2022 NHS respondents (65.3%). BMI was calculated using self-reported height and weight and should be interpreted cautiously due to potential reporting bias. BMI itself is also a limited measure of overweight and obesity as it does not account for body composition or fat distribution. A greater proportion of Loddon Shire ALC respondents reported to have consumed four (females), or five (males), or more standard drinks on at least one occasion in the last 12 months and therefore be at greater risk of harm (61.0%) than those who responded to the VPHS 2023 (41.3%) or NHS 2022 (17.9%).

Health and wellbeing measures indicate poorer self-reported health and lower life satisfaction in the ALC sample compared to the available benchmark data. A greater proportion of Loddon Shire ALC respondents who are female reported their health as fair or poor (25.1%) compared to 2023 VPHS female respondents (20.7%) and 2022 NHS female respondents (13.5%). Similarly, a greater proportion of ALC respondents recorded low to medium life satisfaction (34.4%) than those who participated in the VPHS 2023 (21.9%).

[5] **Sleep Health Foundation** 2015. Sleep needs across the lifespan. Blacktown: Sleep Health Foundation. https://irp.cdn-website.com/0da81f14/files/uploaded/Sleep-Needs-Across-Lifespan.pdf

Table 2.2.1 Health indicator population benchmarks

Health and wellbeing indicators	Population benchmark (VIC)		Active Living Census[1] (weighted)	ALC % as a % of the population[4]
	NHS[2]	VPHS[3]		
Self-reported health status			**n=338**	
% rating health as fair or poor (persons)	13	20.9	21.3	101.9
% rating health as fair or poor (females)	13.5	20.7	25.1	121.2
% rating health as fair or poor (males)	12.2	20.8	18.2	87.4
Body Mass Index (BMI)			**n=227**	
% overweight or obese range (BMI ≥25.0) (persons)	65.3	53.9	70.5	130.8
% overweight or obese range (BMI ≥25.0) (females)	58.8	47.5	68.4	144.1
% overweight or obese range (BMI ≥25.0) (males)	72.1	60.6	71.8	118.5
Aerobic physical activity recommendations			**n=380**	
% not meeting recommendations (persons)	28.2	47.1	24.2	51.4
% not meeting recommendations (females)	29.8	48.7	29.0	59.6
% not meeting recommendations (males)	26.2	45.2	20.1	44.6
Muscle strengthening recommendations			**n=348**	
% not meeting recommendations (persons)	75.5	-	57.9	76.6
% not meeting recommendations (females)	77.2	-	56.3	72.9
% not meeting recommendations (males)	74.1	-	59.1	79.8
Screen time recommendations			**n=362**	
% not meeting screen time recommendations (persons)	-	-	51.7	-
% not meeting screen time recommendations (females)	-	-	51.9	-
% not meeting screen time recommendations (males)	-	-	51.8	-
Sleep duration recommendations			**n=354**	
% not meeting sleep recommendations (person)	-	-	31.0	-
% not meeting sleep recommendations (females)	-	-	32.3	-
% not meeting sleep recommendations (males)	-	-	30.2	-
Fruit intake recommendations			**n=392**	
% not meeting fruit recommendations (persons)	55.3	63.3	62.5	98.7
% not meeting fruit recommendations (females)	53.0	61.1	61.1	100.0
% not meeting fruit recommendations (males)	58.2	65.5	63.5	97.0
Vegetable intake recommendations			**n=387**	
% not meeting vegetable recommendations (persons)	93.6	90.3	90.6	100.4
% not meeting vegetable recommendations (females)	90.6	88.5	86.3	97.6
% not meeting vegetable recommendations (males)	96.5	94.3	94.0	99.7
Smoking status			**n=345**	

% current smokers (persons)	11.1	13.9	9.8	70.7
% current smokers (females)	8.7	11.3	9.1	80.4
% current smokers (males)	14	16.7	10.4	62.5
Vaping status			**n=345**	
% current vapers (person)	3.9	7.2	3.1	43.3
% current vapers (females)	2.5	5.5	2.0	36.8
% current vapers (males)	5.1	8.9	4.0	44.4
Alcohol consumption (single occasion past 12 months)[5]			**n=346**	
% had 4 or more standard drinks (persons)	17.9	41.3	61.0	147.6
% had 4 or more standard drinks (females)	11.6	30.1	52.0	172.6
% had 5 or more standard drinks (males)	24.1	53.2	67.7	127.2
Gambling			**n=343**	
% gambling (person)	-	39.1	35.0	89.5
% gambling (females)	-	32.7	27.8	85.2
% gambling (males)	-	45.8	40.3	88.0
Sugar-sweetened beverage consumption			**n=371**	
% drinks SSB daily (persons)	-	19	16.9	88.8
% drinks SSB daily (females)	-	14.9	16.9	113.7
% drinks SSB daily (males)	-	23.4	17.0	72.5
Life satisfaction			**n=328**	
% rating satisfaction as low to medium (0 to 6) (persons)	-	21.9	34.4	157.1
% rating satisfaction as low to medium (0 to 6) (females)	-	21.8	30.6	140.3
% rating satisfaction as low to medium (0 to 6) (males)	-	21.6	37.4	172.9

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Based on National Health Survey 2022
[3] Based on Victorian Population Health Survey 2023 (VPHS 2017 for alcohol and gambling)
[4] Comparison made to VPHS, unless data not available
[5] Based on at least monthly consumption; interpreted as consuming 5 or more drinks at least 12 times in the last 12 months. This measure is not directly comparable to single occasion risk.

3. Movement Behaviours

In 2021, the Australian Government Department of Health, Disability and Ageing[6] released updated *Physical Activity and Sedentary Behaviour Guidelines for all Australians*. These guidelines outline recommendations for aerobic activity, muscle-strengthening exercises, sedentary behaviour and (for children and adolescents) sleep.

To assess how residents of the Loddon Shire align with these recommendations and engage in healthy behaviours more broadly, respondents were asked a series of questions about their movement behaviours. These questions covered aerobic physical activity, muscle strengthening exercises, active travel, recreational screen time, sleep, sport and recreation participation, barriers to being active, and perceptions of how easy it is to be active locally.

Results presented in this section reflect all respondents (unless otherwise noted) and weighting has been applied.

3.1. Aerobic physical activity

The *Australian Guidelines* recommend that children aged 3-5 years should be physically active for at least 180 minutes each day, with at least 60 minutes spent in energetic play. Children and adolescents aged 5-17 years should engage in at least 60 minutes of aerobic physical activity daily, incorporating a variety of moderate and vigorous-intensity activities. Adults aged 18-64 years are advised to accumulate 150 to 300 minutes of moderate-intensity activity per week, or 75 to 150 minutes of vigorous-intensity activity, or an equivalent combination of both. For older adults aged 65 years and over, it is recommended that they engage in physical activity for at least 30 minutes of moderate intensity on most, preferably all, days. However, because “most days” cannot be measured precisely, the adult recommendations for those aged 18–64 years have been applied to all adult respondents, including those aged 65 and above.

The 2022 NHS indicated that 71.8% of Victorians aged 18 years and above had participated in sufficient aerobic physical activity. The equivalent proportion of Loddon Shire ALC respondents in the same age group who had met the recommendations was 75.8% and, overall, 71.7% of respondents had met the above-mentioned aerobic physical activity recommendations (see Table 3.1.1). Adults were significantly more likely to meet the aerobic physical activity recommendations than children (75.8% compared to 54.5%). No significant difference was seen between males and females in meeting the recommendations; however, males reported higher average daily minutes of moderate to vigorous intensity aerobic physical activity than females (298.3 minutes vs 181.5 minutes).

A lower proportion of respondents from Inglewood / Bridgewater & Surrounds (64.2%) met aerobic physical activity recommendations than those from Pyramid Hill & Surrounds (84.2%). Respondents who required help with daily activities (47.5%) were also less likely to meet the recommendations than those who did not require help (73.9%) and may benefit from targeted physical activity programs.

Table 3.1.1 Aerobic physical activity by selected demographic groups

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily minutes

[6] **Australian Government Department of Health and Aged Care**, 2021. Physical activity and exercise guidelines for all Australians. Canberra, Australia. https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians

	n	%	%	#
Total sample	**576**	**28.3**	**71.7**	**245.7**
Children	196	45.5	54.5	293.2
Adults	380	24.2	75.8	234.5
Males	175	24.3	75.7	298.3
Females	388	32.8	67.2	181.5
Sex and age				
Males, 3 to 11	33	48.5	51.5	297.7
Males, 12 to 17	56	41.1	58.9	344.1
Males, 18 to 34	13	2.7	97.3	450.7
Males, 35 to 49	14	13.6	86.4	216.3
Males, 50 to 69	27	15.6	84.4	331.6
Males, 70+	32	39.3	60.7	179.4
Females, 3 to 11	38	60.5	39.5	202.0
Females, 12 to 17	61	34.4	65.6	337.1
Females, 18 to 34	54	11.3	88.7	160.4
Females, 35 to 49	66	27.3	72.7	164.9
Females, 50 to 69	119	34.2	65.8	166.3
Females, 70+	50	38.3	61.7	117.4
Subregion				
Boort & Surrounds	154	27.6	72.4	271.5
East Loddon Area	100	21.9	78.1	288.5
Inglewood / Bridgewater & Surrounds	136	35.8	64.2	186.9
Pyramid Hill & Surrounds	55	15.8	84.2	350.4
South Loddon Area	23	19.7	80.3	303.7
Wedderburn & Surrounds	102	29.6	70.4	209.2
Demographic indicators				
Household size[2]				
1 person	48	37.4	62.6	147.1
2 or 3 people	202	21.7	78.3	238.9
4 or 5 people	104	15.8	84.2	325.3
More than 5 people	26	40.0	60.0	96.0
Born overseas	40	26.5	73.5	207.0
Born in Australia	534	28.4	71.6	250.5
Speaks other main language*	5	8.4	91.6	260.0
Speaks English as main language	566	28.6	71.4	245.7
Aboriginal and/or Torres Strait Islander*	24	62.2	37.8	181.9
Not Aboriginal or Torres Strait Islander	549	27.2	72.8	247.7
LGBTQIA+*	13	12.0	88.0	442.1
Non-LGBTQIA+	558	28.7	71.3	237.0

Neurodivergent	48	31.1	68.9	197.0
Not neurodivergent	373	27.3	72.7	246.2
Maybe	42	29.5	70.5	274.8
Not sure what neurodivergent means	73	26.8	73.2	267.7
Less than Bachelor level education[2]	252	24.2	75.8	241.7
Holds a Bachelor degree or higher	125	24.1	75.9	194.0
Unemployed/Retired[2]	135	34.2	65.8	160.3
Employed	243	18.7	81.3	275.5
Just getting along, poor or very poor[2]	137	19.4	80.6	244.6
Reasonably comfortable, very comfortable or prosperous	241	27.5	72.5	228.4
Requires help with daily activities	45	52.5	47.5	148.5
Does not require help	528	26.1	73.9	256.6
Food security (last 12 months)[2]				
Low or very low food security	60	22.9	77.1	150.4
Marginal food security	51	29.7	70.3	249.5
High food security	267	23.5	76.5	253.3

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.1.2 summarises aerobic physical activity participation by selected health and behaviour characteristics. Differences were seen according to some of the health and wellbeing indicators. Specifically, a lower proportion of those who self-reported their health to be fair or poor (56.4% vs 77.8%) and had low to moderate life satisfaction (67.6% vs 86.3%) met the aerobic physical activity recommendations compared to their counterparts who reported more positive health and wellbeing.

Differences in adherence to the aerobic physical activity recommendation were seen between those who did and did not report adherence to the muscle strengthening recommendation (86.1% of those who did compared to 63.9% of those who did not) and sugar-sweetened beverage consumption (76.0% compared to 53.6%).

Among risk behaviour indicators, average daily minutes of moderate to vigorous aerobic physical activity differed by smoking status and risky alcohol consumption. Current smokers (122.3 minutes) reported lower average daily minutes than never smokers (273.1 minutes). Contrary to most published literature, those who engaged in risky alcohol consumption reported higher average daily minutes of moderate to vigorous aerobic physical activity (290.3 minutes) than those who did not engage in risky alcohol consumption over the past 12 months (174.3 minutes).

Table 3.1.2 Aerobic physical activity by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily minutes
	n	%	%	#
Total sample	**576**	**28.3**	**71.7**	**245.7**
Health and wellbeing indicators				
Self-reported health - Fair or poor	85	43.6	56.4	155.1

Self-reported health - Good, very good, or excellent	410	22.2	77.8	283.7
Life satisfaction - Low to moderate (0 to 6)[2]	91	32.4	67.6	206.7
Life satisfaction - High/very high (7 to 10)	228	13.7	86.3	283.1
Does not feel valued by society[2]	69	23.2	76.8	253.2
Sometimes feel valued by society	139	20.9	79.1	220.6
Definitely feel valued by society	119	18.7	81.3	286.3
Poor mental wellbeing[2]	82	30.4	69.6	147.8
Good mental wellbeing	298	22.8	77.2	254.4
Overweight or obese (BMI ≥25.0)	163	25.0	75.0	236.9
Normal range or underweight (BMI <25.0)	123	13.2	86.8	377.0
Health behaviour indicators				
Does not meet fruit intake recommendations	286	24.1	75.9	225.6
Meets fruit intake recommendations	286	33.6	66.4	272.4
Does not meet vegetable intake recommendations	479	27.5	72.5	246.6
Meets vegetable intake recommendations	81	34.0	66.0	229.7
Does not meet muscle strengthening recommendations	289	36.1	63.9	213.6
Meets muscle strengthening recommendations	203	13.9	86.1	285.6
Does not meet screen time recommendations	319	32.5	67.5	200.7
Meets screen time recommendations	219	21.3	78.7	307.8
Does not meet sleep recommendations	167	28.6	71.4	206.5
Meets sleep recommendations	364	26.4	73.6	270.7
Drinks sugar-sweetened beverages daily	73	46.4	53.6	87.6
Drinks sugar-sweetened beverages less than daily	474	24.0	76.0	279.1
Does not meet water recommendations	316	26.6	73.4	232.8
Meets water consumption recommendations	219	28.1	71.9	295.7
Risk behaviour indicators[2]				
Current smoker	27	22.7	77.3	122.3
Ex-smoker	125	25.5	74.5	244.4
Never smoked	180	19.1	80.9	273.1
Current vaper*	10	24.5	75.5	147.2
Ex-vaper	20	4.3	95.7	384.2
Never vaped	302	23.8	76.2	238.1
Had more than 4 standard drinks on a single occasion	183	17.6	82.4	290.3
Has not had more than 4 standard drinks	150	30.2	69.8	174.3
Gambled	102	22.9	77.1	224.4

Never gambled	228	22.2	77.8	259.3

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.2. Muscle strengthening activities

The *Australian Guidelines*[7] recommend that children aged 3-5 years engage in activities that develop strength as part of their daily active play. Children and adolescents aged 5-17 years should include muscle and bone strengthening activities on at least three days per week. Adults aged 18-64 years are advised to perform muscle strengthening activities on at least two days per week, and the same recommendation applies to older adults aged 65 years and over, with additional emphasis on maintaining strength and balance. As there is no specific number of days per week of muscle strengthening activities recommended for children younger than age five (5), Tables 3.2.1 and 3.2.2 below present data for all respondents aged 5 years and above.

The 2022 NHS indicated that 24.5% of Victorians aged 18 years and above had engaged in muscle strengthening activities at least twice per week. The equivalent proportion of Loddon Shire ALC respondents in the same age group who had met the recommendations was 42.1% and, overall, 40.6% of respondents had met the above-mentioned muscle strengthening recommendations (see Table 3.2.1). No difference was noted between children and adults, or between males and females. However, differences were seen by sex and age, with females aged 5 to 11 years less likely to meet recommendations than females aged 50 to 69 years and 70 years and over (17.4% vs 44.1% and 48.2%).

Residents of Pyramid Hill & Surrounds were less likely to meet recommendations (20.9%) than those from Boort & Surrounds (48.6%) and East Loddon Area (53.5%). The average number of days per week spent in muscle strengthening activities was also lower in South Loddon Area (0.7 days) than in Boort and Surrounds (1.9 days), East Loddon Area (2.2 days) and Inglewood/Bridgewater & Surrounds (1.7 days).

Proportionately fewer respondents living in single-person households (24.6%) met the muscle strengthening recommendations than those living in 2 or 3 person households (48.1%) and may benefit from targeted programs.

Table 3.2.1 Muscle strengthening activities by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average days per week
	n	%	%	#
Total sample	**502**	**59.4**	**40.6**	**1.7**
Children	154	68.1	31.9	2.0
Adults	348	57.9	42.1	1.6
Males	148	59.6	40.4	1.7
Females	346	59.7	40.3	1.6
Sex and age				

[7] **Australian Government Department of Health and Aged Care**, 2021. Physical activity and exercise guidelines for all Australians. Canberra, Australia. https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians

Males, 5 to 11	14	64.3	35.7	2.0
Males, 12 to 17	55	61.8	38.2	2.3
Males, 18 to 34	13	51.4	48.6	1.7
Males, 35 to 49	14	60.8	39.2	1.5
Males, 50 to 69	23	72.8	27.2	1.2
Males, 70+	29	45.2	54.8	2.3
Females, 5 to 11	23	82.6	17.4	1.3
Females, 12 to 17	57	70.2	29.8	2.0
Females, 18 to 34	50	53.3	46.7	1.9
Females, 35 to 49	60	65.1	34.9	1.4
Females, 50 to 69	108	55.9	44.1	1.5
Females, 70+	48	51.8	48.2	1.9
Subregion				
Boort & Surrounds	129	51.4	48.6	1.9
East Loddon Area	84	46.5	53.5	2.2
Inglewood / Bridgewater & Surrounds	129	59.6	40.4	1.7
Pyramid Hill & Surrounds	52	79.1	20.9	1.5
South Loddon Area	21	72.2	27.8	0.7
Wedderburn & Surrounds	82	61.9	38.1	1.5
Demographic indicators				
Household size[2]				
1 person	45	75.4	24.6	1.2
2 or 3 people	181	51.9	48.1	1.9
4 or 5 people	95	58.3	41.7	1.6
More than 5 people	27	51.2	48.8	1.6
Born overseas	34	50.2	49.8	1.9
Born in Australia	466	60.6	39.4	1.7
Speaks other main language*	4	19.4	80.6	3.3
Speaks English as main language	494	60.1	39.9	1.7
Aboriginal and/or Torres Strait Islander*	20	46.0	54.0	2.6
Not Aboriginal or Torres Strait Islander	480	60.0	40.0	1.7
LGBTQIA+*	12	46.1	53.9	2.8
Non-LGBTQIA+	486	59.3	40.7	1.7
Neurodivergent	41	62.1	37.9	1.7
Not neurodivergent	327	58.6	41.4	1.7
Maybe	31	47.9	52.1	2.8
Not sure what neurodivergent means	62	61.3	38.7	1.5
Less than Bachelor level education[2]	228	59.3	40.7	1.6
Holds a Bachelor degree or higher	117	49.2	50.8	1.8
Unemployed/Retired[2]	123	49.3	50.7	2.1

Employed	223	62.5	37.5	1.4
Just getting along, poor or very poor[2]	122	60.0	40.0	1.6
Reasonably comfortable, very comfortable or prosperous	224	56.5	43.5	1.7
Requires help with daily activities	36	53.3	46.7	1.7
Does not require help	463	60.4	39.6	1.7
Food security (last 12 months)[2]				
Low or very low food security	50	69.7	30.3	1.3
Marginal food security	50	63.5	36.5	1.5
High food security	246	54.1	45.9	1.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.2.2 summarises engagement in muscle strengthening activity by selected health and behaviour characteristics. Respondents with the following health and wellbeing indicators engaged in muscle strengthening activities on significantly fewer days per week, on average, compared to their counterparts who reported more positive health and wellbeing:

- Fair or poor self-reported health (1.0 day) compared to good, very good or excellent health (1.8 days)
- Poor mental wellbeing (1.1 days) compared to good mental wellbeing (1.8 days)

Differences in adherence to the muscle strengthening recommendations were seen between those who did and did not report adherence to some health behaviour recommendations, including aerobic physical activity and sugar-sweetened beverage consumption. Specifically, adherence to the muscle strengthening recommendations was lower among those who did not meet aerobic physical activity recommendations (21.2% vs 48.4%) and those who consumed sugar-sweetened beverages daily (21.1% vs 43.5%). No associations were seen between engagement in muscle strengthening activities and any of the assessed risk behaviours.

Table 3.2.2 Muscle strengthening activities by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average days per week
	n	%	%	#
Total sample	**502**	**59.4**	**40.6**	**1.7**
Health and wellbeing indicators				
Self-reported health - Fair or poor	79	76.0	24.0	1.0
Self-reported health - Good, very good, or excellent	354	58.2	41.8	1.8
Life satisfaction - Low to moderate (0 to 6)[2]	85	71.2	28.8	1.4
Life satisfaction - High/very high (7 to 10)	205	54.1	45.9	1.7
Does not feel valued by society[2]	62	66.4	33.6	1.3
Sometimes feel valued by society	127	59.9	40.1	1.7

Definitely feel valued by society	111	54.8	45.2	1.6
Poor mental wellbeing[2]	75	71.6	28.4	1.1
Good mental wellbeing	273	54.6	45.4	1.8
Overweight or obese (BMI ≥25.0)	148	66.9	33.1	1.4
Normal range or underweight (BMI <25.0)	108	49.2	50.8	2.1
Health behaviour indicators				
Does not meet fruit intake recommendations	264	61.1	38.9	1.7
Meets fruit intake recommendations	235	56.8	43.2	1.7
Does not meet vegetable intake recommendations	424	60.8	39.2	1.6
Meets vegetable intake recommendations	66	50.6	49.4	2.0
Does not meet aerobic physical activity recommendations	156	78.8	21.2	1.0
Meets aerobic physical activity recommendations	336	51.6	48.4	2.0
Does not meet screen time recommendations	276	58.1	41.9	1.8
Meets screen time recommendations	192	61.6	38.4	1.7
Does not meet sleep recommendations	147	64.3	35.7	1.6
Meets sleep recommendations	312	58.9	41.1	1.7
Drinks sugar-sweetened beverages daily	67	78.9	21.1	0.9
Drinks sugar-sweetened beverages less than daily	408	56.5	43.5	1.8
Does not meet water recommendations	276	63.2	36.8	1.6
Meets water consumption recommendations	190	52.1	47.9	2.0
Risk behaviour indicators[2]				
Current smoker	24	67.0	33.0	1.3
Ex-smoker	113	56.5	43.5	1.6
Never smoked	168	58.9	41.1	1.7
Current vaper*	9	87.0	13.0	0.7
Ex-vaper	19	32.5	67.5	2.3
Never vaped	277	60.3	39.7	1.6
Had more than 4 standard drinks on a single occasion	167	57.9	42.1	1.7
Has not had more than 4 standard drinks	139	60.9	39.1	1.5
Gambled	98	56.7	43.3	1.8
Never gambled	205	60.0	40.0	1.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.3. Active travel and travel to work or education

Respondents were asked about their travel behaviours, including how often they walk or cycle to get to and from places, and their usual mode of travel to work or education. These questions were newly added to the 2025 ALC to reflect growing awareness of the environmental and public health benefits of reducing private vehicle use in favour of public transport and active travel. Walking frequency response options ranged from daily to less often than once every three months and were grouped into four categories: daily, at least weekly, at least monthly, and less frequent. Cycling responses were grouped into weekly, monthly, and less frequent categories. These groupings reflect the distribution of responses in the 2025 ALC sample. The question on travel mode to work or education was adapted from the ABS Census to allow comparison with the broader population.

3.3.1. Walking

Approximately 23.0% of 2025 Loddon Shire ALC respondents reported daily walking to get to and from places, 30.7% walked at least once a week but less than daily, 13.3% walked at least once a month but less than weekly and 33.1% walk to get to and from places less than once a month. No significant differences were seen between children and adults or males and females (see Table 3.3.1.1).

When looking at frequency of walking for transportation by subregion, respondents from Wedderburn & Surrounds were more likely to walk to get to and from places less than once a month (49.1%) compared to East Loddon Area (26.5%) and Inglewood/Bridgewater & Surrounds (25.8%).

Lower proportionate frequency of walking to get to and from places was seen for some demographic groups. Walking at least once a week was less common among respondents who were maybe neurodivergent than those who were not neurodivergent (12.6% vs 35.8%), and among respondents with low or very low food security than those with high food security (15.0% vs 33.3%). For monthly walking, respondents born overseas were less likely to walk at least once a month than those born in Australia (3.6% vs 14.3%), as were respondents who were not sure what neurodivergent means compared to those who were maybe neurodivergent (7.1% vs 29.5%).

Table 3.3.1.1 Walking frequency by selected demographic characteristics

	Unweighted base[1]	Daily	At least once a week	At least once a month	Less than once a month
	n	%	%	%	%
Total sample	**603**	**23.0**	**30.7**	**13.3**	**33.1**
Children	206	15.2	34.8	8.4	41.6
Adults	390	24.2	30.0	14.4	31.4
Males	184	28.6	32.1	11.0	28.4
Females	403	16.5	29.1	15.6	38.7
Sex and age					
Males, 3 to 11	33	0.0	30.3	3.0	66.7
Males, 12 to 17	61	24.6	32.8	16.4	26.2
Males, 18 to 34	13	32.4	19.0	13.5	35.1
Males, 35 to 49	16	34.5	26.8	26.8	12.0
Males, 50 to 69	27	32.8	36.5	11.3	19.4

Males, 70+	32	25.7	38.3	4.6	31.4
Females, 3 to 11	42	9.5	45.2	2.4	42.9
Females, 12 to 17	62	27.4	32.3	12.9	27.4
Females, 18 to 34	57	11.9	23.9	12.5	51.6
Females, 35 to 49	68	12.5	22.7	19.0	45.8
Females, 50 to 69	120	16.5	30.3	19.6	33.6
Females, 70+	52	25.1	22.6	15.3	37.0
Subregion					
Boort & Surrounds	155	21.4	37.8	10.4	30.4
East Loddon Area	104	23.9	33.5	16.1	26.5
Inglewood / Bridgewater & Surrounds	147	25.8	34.8	13.7	25.8
Pyramid Hill & Surrounds	58	23.6	26.8	16.8	32.8
South Loddon Area	25	26.0	16.8	16.2	41.0
Wedderburn & Surrounds	105	20.0	19.9	11.0	49.1
Demographic indicators					
Household size[2]					
1 person	49	26.9	26.1	22.5	24.5
2 or 3 people	208	23.6	35.2	10.1	31.0
4 or 5 people	106	25.6	24.9	17.7	31.8
More than 5 people	27	16.0	17.1	13.9	53.0
Born overseas	39	38.0	31.0	3.6	27.3
Born in Australia	562	21.3	30.7	14.3	33.7
Speaks other main language*	5	62.1	37.9	0.0	0.0
Speaks English as main language	593	22.6	30.4	13.5	33.5
Aboriginal and/or Torres Strait Islander*	24	10.6	23.1	26.9	39.4
Not Aboriginal or Torres Strait Islander	575	23.5	30.7	12.9	32.9
LGBTQIA+*	14	35.7	18.1	31.0	15.2
Non-LGBTQIA+	583	22.7	31.2	12.4	33.7
Neurodivergent	49	21.1	26.4	18.2	34.3
Not neurodivergent	383	18.9	35.8	14.3	31.0
Maybe	43	13.7	12.6	29.5	44.2
Not sure what neurodivergent means	80	33.0	23.0	7.1	36.9
Less than Bachelor level education[2]	256	22.9	29.7	14.7	32.7
Holds a Bachelor degree or higher	130	27.4	34.0	13.0	25.6
Unemployed/Retired[2]	135	20.5	31.8	9.6	38.1
Employed	252	25.2	29.5	17.0	28.3
Just getting along, poor or very poor[2]	141	21.9	21.2	20.1	36.7
Reasonably comfortable, very comfortable or prosperous	246	24.7	36.9	10.4	28.0
Requires help with daily activities	48	13.0	28.7	9.6	48.8
Does not require help	552	23.4	31.1	13.7	31.8

Food security (last 12 months)[2]					
Low or very low food security	61	20.0	15.0	19.3	45.7
Marginal food security	54	15.8	32.8	20.6	30.8
High food security	273	26.5	33.3	12.0	28.1

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.3.1.2 provides a comprehensive overview of walking frequency by health and behaviour characteristics. Only one health and wellbeing indicator was significantly associated with walking frequency. Respondents who self-reported their health status as fair or poor were less likely to walk daily (9.9%) compared to those with good, very good or excellent health (24.8%), and were more likely to walk less than once a month (54.8% vs 28.9%).

Differences in weekly walking were observed according to some health behaviour indicators, including muscle strengthening recommendations and sugar-sweetened beverage consumption. Weekly walking for transportation was less common among those who did not meet muscle strengthening recommendations (23.6% vs 41.1%), and among those who drank sugar-sweetened beverages daily (15.4% vs 34.6%) compared to their counterparts. Risk behaviours were not associated with frequency of transport-related walking.

Table 3.3.1.2 Walking frequency by selected health and behaviour characteristics

	Unweighted base[1]	Daily	At least once a week	At least once a month	Less than once a month
	n	%	%	%	%
Total sample	**603**	**23.0**	**30.7**	**13.3**	**33.1**
Health and wellbeing indicators					
Self-reported health - Fair or poor	89	9.9	18.3	17.0	54.8
Self-reported health - Good, very good, or excellent	431	24.8	34.1	12.2	28.9
Life satisfaction - Low to moderate (0 to 6)[2]	94	27.2	24.8	20.4	27.5
Life satisfaction - High/very high (7 to 10)	231	19.3	34.4	11.1	35.1
Does not feel valued by society[2]	69	18.7	25.9	13.1	42.3
Sometimes feel valued by society	145	20.3	34.9	18.5	26.2
Definitely feel valued by society	121	29.7	29.5	9.3	31.5
Poor mental wellbeing[2]	83	14.1	24.8	18.1	43.1
Good mental wellbeing	307	26.5	31.2	13.5	28.7
Overweight or obese (BMI ≥25.0)	169	22.9	34.6	13.6	29.0
Normal range or underweight (BMI <25.0)	125	21.8	32.9	8.2	37.1
Health behaviour indicators					
Does not meet fruit intake recommendations	299	20.1	31.8	14.5	33.5
Meets fruit intake recommendations	291	24.9	30.1	11.6	33.4

Does not meet vegetable intake recommendations	494	21.3	31.3	13.8	33.7
Meets vegetable intake recommendations	83	31.7	30.9	8.3	29.2
Does not meet aerobic physical activity recommendations	188	23.7	21.9	10.8	43.6
Meets aerobic physical activity recommendations	384	22.1	33.9	14.1	29.9
Does not meet muscle strengthening recommendations	299	22.3	23.6	17.4	36.7
Meets muscle strengthening recommendations	202	22.3	41.1	9.3	27.3
Does not meet screen time recommendations	320	24.4	28.0	11.4	36.2
Meets screen time recommendations	228	18.3	35.7	14.6	31.5
Does not meet sleep recommendations	173	25.3	34.2	13.3	27.2
Meets sleep recommendations	369	20.3	30.0	12.7	37.0
Drinks sugar-sweetened beverages daily	74	35.0	15.4	15.1	34.5
Drinks sugar-sweetened beverages less than daily	499	19.9	34.6	12.5	32.9
Does not meet water recommendations	326	22.4	33.0	13.4	31.2
Meets water consumption recommendations	223	19.5	31.8	10.4	38.2
Risk behaviour indicators[2]					
Current smoker	27	9.7	27.0	32.7	30.6
Ex-smoker	126	24.4	31.9	9.3	34.4
Never smoked	187	25.5	30.1	13.8	30.5
Current vaper*	10	22.1	11.8	50.0	16.1
Ex-vaper	20	3.4	30.5	0.0	66.1
Never vaped	310	25.1	31.1	13.4	30.4
Had more than 4 standard drinks on a single occasion	186	24.8	31.7	13.1	30.4
Has not had more than 4 standard drinks	155	21.4	28.3	14.6	35.7
Gambled	104	20.3	34.2	14.0	31.5
Never gambled	234	25.6	28.5	13.7	32.1

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

3.3.2. Cycling

Approximately 10.8% of 2025 Loddon Shire ALC respondents reported cycling to get to and from places at least once a week (weekly), 18.6% cycled at least once a month but less than weekly (monthly), and the remaining 70.6% cycled to get to and from places less than once a month (infrequently). Children reported cycling for transportation more frequently than adults, with a higher proportion cycling weekly (23.0% vs 7.2%) and a lower proportion cycling less than once a month (60.4% vs 74.0%). Males were more likely than females to cycle at least once a month (26.9% vs 9.8%) and less likely to cycle less than once a month (60.5% vs 81.5%) (see Table 3.3.2.1).

Cycling frequency varied by sex and age. Among males, weekly cycling was higher among adolescents aged 12 to 17 years (42.6%) and lower among adults aged 35 years and over. Among females, weekly cycling was higher among children and adolescents aged 3 to 17 years and lower among adults aged 18 years and over. No significant differences were seen by subregion.

Weekly cycling was less common among respondents who were not sure what neurodivergent means than those who were not neurodivergent (4.6% vs 12.7%). Cycling at least once a month was more common among respondents born overseas than those born in Australia (51.3% vs 15.6%). Conversely, cycling less than once a month was more common among respondents born in Australia than those born overseas (73.2% vs 41.6%).

Table 3.3.2.1 Cycling frequency by selected demographic characteristics

	Unweighted base[1]	At least once a week	At least once a month	Less than once a month
	n	%	%	%
Total sample	**583**	**10.8**	**18.6**	**70.6**
Children	206	23.0	16.6	60.4
Adults	371	7.2	18.8	74.0
Males	175	12.6	26.9	60.5
Females	392	8.7	9.8	81.5
Sex and age				
Males, 3 to 11	33	21.2	6.1	72.7
Males, 12 to 17	61	42.6	14.8	42.6
Males, 18 to 34	13	16.2	24.3	59.4
Males, 35 to 49	15	5.6	39.5	54.8
Males, 50 to 69	25	4.1	39.1	56.8
Males, 70+	26	8.7	15.2	76.1
Females, 3 to 11	42	19.0	16.7	64.3
Females, 12 to 17	62	12.9	32.3	54.8
Females, 18 to 34	57	5.2	3.7	91.1
Females, 35 to 49	68	2.8	9.7	87.5
Females, 50 to 69	117	9.5	6.4	84.1
Females, 70+	45	3.5	0.9	95.6
Subregion				
Boort & Surrounds	151	15.9	22.3	61.8
East Loddon Area	104	17.4	14.1	68.5
Inglewood / Bridgewater & Surrounds	138	7.1	17.1	75.7
Pyramid Hill & Surrounds	56	7.8	24.3	67.9
South Loddon Area	23	16.6	34.5	48.9
Wedderburn & Surrounds	102	5.5	12.6	81.9
Demographic indicators				
Household size[2]				
1 person	46	9.7	23.2	67.2
2 or 3 people	195	6.4	14.2	79.4

4 or 5 people	105	8.6	27.3	64.1
More than 5 people	25	1.4	8.7	90.0
Born overseas	37	7.1	51.3	41.6
Born in Australia	545	11.2	15.6	73.2
Speaks other main language*	5	39.4	31.0	29.5
Speaks English as main language	574	10.6	18.1	71.3
Aboriginal and/or Torres Strait Islander*	24	19.3	16.6	64.1
Not Aboriginal or Torres Strait Islander	555	10.6	18.7	70.7
LGBTQIA+*	14	37.2	4.0	58.8
Non-LGBTQIA+	565	10.2	18.9	70.8
Neurodivergent	49	11.6	20.8	67.6
Not neurodivergent	380	12.7	20.7	66.6
Maybe	43	11.5	11.7	76.8
Not sure what neurodivergent means	78	4.6	17.8	77.6
Less than Bachelor level education[2]	240	6.8	18.0	75.2
Holds a Bachelor degree or higher	129	9.9	23.3	66.8
Unemployed/Retired[2]	125	6.9	10.7	82.5
Employed	245	7.4	22.9	69.7
Just getting along, poor or very poor[2]	133	2.7	16.5	80.8
Reasonably comfortable, very comfortable or prosperous	237	10.3	20.4	69.3
Requires help with daily activities	48	4.9	18.4	76.8
Does not require help	534	11.5	18.6	69.9
Food security (last 12 months)[2]				
Low or very low food security	61	2.3	20.1	77.5
Marginal food security	51	2.9	21.1	76.0
High food security	258	9.4	18.0	72.6

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.3.2.2 provides a comprehensive overview of cycling frequency by health and behaviour characteristics. Only one health and wellbeing indicator was significantly associated with cycling frequency. Respondents who self-reported their health as fair or poor were less likely to cycle at least once a week (2.6%) than those who rated their health as good, very good or excellent (11.7%).

There were no significant associations between transport-related cycling frequency and any of the health behaviour or risk behaviour indicators.

Table 3.3.2.2 Cycling frequency by selected health and behaviour characteristics

	Unweighted base[1]	At least once a week	At least once a month	Less than once a month
	n	%	%	%

Total sample	**583**	**10.8**	**18.6**	**70.6**
Health and wellbeing indicators				
Self-reported health - Fair or poor	84	2.6	12.9	84.6
Self-reported health - Good, very good, or excellent	421	11.7	19.3	69.0
Life satisfaction - Low to moderate (0 to 6)[2]	91	8.2	20.8	70.9
Life satisfaction - High/very high (7 to 10)	222	6.0	17.7	76.3
Does not feel valued by society[2]	68	2.0	25.7	72.2
Sometimes feel valued by society	139	8.8	16.3	74.8
Definitely feel valued by society	114	7.4	15.5	77.1
Poor mental wellbeing[2]	82	2.5	14.6	82.9
Good mental wellbeing	289	8.3	19.8	71.9
Overweight or obese (BMI ≥25.0)	162	8.3	21.4	70.3
Normal range or underweight (BMI <25.0)	121	12.6	15.2	72.2
Health behaviour indicators				
Does not meet fruit intake recommendations	293	7.9	19.6	72.5
Meets fruit intake recommendations	278	14.0	16.9	69.2
Does not meet vegetable intake recommendations	479	10.2	19.7	70.1
Meets vegetable intake recommendations	80	12.0	10.7	77.3
Does not meet aerobic physical activity recommendations	185	7.9	17.2	74.9
Meets aerobic physical activity recommendations	372	11.8	18.7	69.6
Does not meet muscle strengthening recommendations	293	7.4	18.7	73.9
Meets muscle strengthening recommendations	192	14.7	21.2	64.1
Does not meet screen time recommendations	311	11.6	16.1	72.3
Meets screen time recommendations	222	8.9	20.1	71.0
Does not meet sleep recommendations	168	8.6	20.5	70.9
Meets sleep recommendations	358	10.9	16.8	72.2
Drinks sugar-sweetened beverages daily	71	5.4	11.7	82.8
Drinks sugar-sweetened beverages less than daily	484	11.4	19.2	69.4
Does not meet water recommendations	314	8.3	19.4	72.3
Meets water consumption recommendations	219	15.1	14.4	70.5
Risk behaviour indicators[2]				
Current smoker	27	4.7	15.2	80.2
Ex-smoker	121	5.8	12.5	81.8
Never smoked	177	7.5	23.4	69.1

Current vaper*	10	0.0	36.3	63.7
Ex-vaper	20	8.6	4.1	87.3
Never vaped	295	6.6	18.6	74.9
Had more than 4 standard drinks on a single occasion	182	8.2	14.8	77.0
Has not had more than 4 standard drinks	144	3.6	23.5	72.9
Gambled	101	7.3	16.9	75.8
Never gambled	223	5.9	18.8	75.4

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

3.3.3. Adult's travel to work or education

Driving (64.2%) was the most common method of travel, followed by active travel (9.1%), passenger in a private vehicle (4.9%), work or education at home (4.7%) and public transport (1.3%). A quarter of respondents (26.4%) indicated that they did not engage in work or study. Table 3.3.3.1 presents the results regarding methods of travel to work or education among adults, according to selected demographic characteristics. Briefly, driving was more common among younger adults than adults aged 70 years and over, and among households with 4 or 5 people than one-person households, households with 2 or 3 people, and households with more than 5 people. Active travel was more common among residents of Boort & Surrounds compared to Pyramid Hill & Surrounds, and among households of 2 or 3 people and 4 or 5 people compared to households with more than 5 people.

Table 3.3.3.2 presents the results according to health and wellbeing characteristics. Differences in travel methods were seen for a few indicators. Indicators that differed according to travel method for adults were self-reported health status, aerobic physical activity, muscle strengthening recommendations, screen time and smoking status.

Driving was more common among the following people:

- Met aerobic physical activity recommendations (69.9%) compared to did not (44.4%)
- Did not meet muscle strengthening recommendations (71.9%) compared to met them (52.6%)
- Met screen time recommendations (78.0%) compared to not (52.3%)

Active travel was more common among those who reported their health as good, very good or excellent (8.7%) compared to fair or poor health (1.1%).

Table 3.3.3.1 Adult's travel to work/education by selected demographic characteristics

	Unweighted base[1] n	Drive %	Passenger in private vehicle %	Active travel %	Take public transport %	Work or study at home %	Do not work/study %
Total sample	**390**	**64.2**	**4.9**	**9.1**	**1.3**	**4.7**	**26.4**
Males	88	65.0	3.7	10.9	2.3	3.3	27.5
Females	297	63.2	6.5	6.9	0.1	6.4	25.1
Sex and age							
Males, 18 to 34	13	97.3	21.6	13.5	13.5	13.5	0.0
Males, 35 to 49	16	82.8	0.0	24.6	0.0	0.0	7.4
Males, 50 to 69	27	68.8	0.0	13.4	0.0	0.0	19.4
Males, 70+	32	33.1	0.0	0.0	0.0	3.4	63.5
Females, 18 to 34	57	85.2	12.6	1.6	0.7	9.7	13.3
Females, 35 to 49	68	76.5	5.1	7.8	0.0	4.9	12.3
Females, 50 to 69	120	60.8	4.0	8.9	0.0	6.9	22.8
Females, 70+	52	23.9	7.9	6.2	0.0	2.3	65.8
Subregion							
Boort & Surrounds	96	73.4	2.9	14.0	1.2	3.5	17.2
East Loddon Area	48	50.2	8.4	3.5	0.0	12.6	32.8
Inglewood / Bridgewater & Surrounds	119	56.9	5.6	9.0	0.2	1.9	30.0
Pyramid Hill & Surrounds	24	80.3	0.0	0.0	0.0	5.2	18.3
South Loddon Area	19	74.1	17.2	15.7	15.7	17.0	24.7
Wedderburn & Surrounds	80	64.6	1.8	8.5	0.0	2.2	30.5
Demographic indicators							
Household size							
1 person	49	47.3	1.5	16.9	0.0	2.5	35.5

2 or 3 people	207	61.8	1.7	5.5	0.5	3.7	32.0
4 or 5 people	106	87.4	13.2	13.8	4.5	9.1	4.2
More than 5 people	28	41.5	8.1	0.0	0.0	1.9	40.2
Born overseas	38	45.2	2.9	12.4	0.0	0.6	40.6
Born in Australia	350	66.9	5.2	8.7	1.5	5.2	24.3
Speaks other main language*	4	66.1	0.0	33.9	0.0	25.1	0.0
Speaks English as main language	382	64.8	5.0	9.0	1.4	4.5	26.0
Aboriginal and/or Torres Strait Islander*	11	63.5	0.0	15.3	14.1	24.0	5.5
Not Aboriginal or Torres Strait Islander	376	64.1	5.0	9.0	1.0	4.2	27.0
LGBTQIA+*	9	74.0	17.5	25.8	17.3	17.5	17.5
Non-LGBTQIA+	378	63.9	4.8	9.0	1.1	4.5	26.6
Neurodivergent	26	79.5	21.2	6.4	4.3	4.3	17.5
Not neurodivergent	248	66.9	4.4	10.3	1.9	5.7	24.0
Maybe	20	46.5	0.0	10.9	0.0	2.7	42.6
Not sure what neurodivergent means	60	60.9	2.8	11.0	0.0	4.6	25.8
Less than Bachelor level education	256	62.6	5.3	8.3	1.2	4.4	28.6
Holds a Bachelor degree or higher	131	75.2	2.3	14.7	2.3	6.8	11.2
Just getting along, poor or very poor	142	61.1	3.8	3.6	0.2	2.6	33.4
Reasonably comfortable, very comfortable or prosperous	246	66.7	5.7	13.2	2.2	6.2	21.0
Requires help with daily activities*	24	37.7	6.2	4.3	3.3	1.0	48.0
Does not require help	363	67.0	4.8	9.6	1.2	5.0	23.9
Food security (last 12 months)							
Low or very low food security	61	59.7	6.7	8.5	1.9	1.5	33.9
Marginal food security	54	80.1	5.7	3.6	0.0	7.0	13.6
High food security	273	62.6	4.3	10.4	1.5	5.0	26.7

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Table 3.3.3.2 Adult's travel to work/education by selected health and behaviour characteristics

	Unweighted base[1] n	Drive %	Passenger in private vehicle %	Active travel %	Take public transport %	Work or study at home %	Do not work/study %
Total sample	**390**	**64.2**	**4.9**	**9.1**	**1.3**	**4.7**	**26.4**
Health and wellbeing indicators							
Self-reported health - Fair or poor	75	49.0	3.4	1.1	0.0	2.9	47.4
Self-reported health - Good, very good, or excellent	258	70.8	5.7	8.7	2.0	5.5	21.8
Life satisfaction - Low to moderate (0 to 6)	93	70.1	5.7	8.5	1.1	2.7	22.8
Life satisfaction - High/very high (7 to 10)	232	66.5	4.3	6.7	1.8	6.4	27.6
Does not feel valued by society	69	63.4	3.1	1.8	0.3	2.8	34.0
Sometimes feel valued by society	145	69.4	5.3	7.3	0.7	3.6	21.7
Definitely feel valued by society	121	65.2	5.5	10.5	3.3	8.1	28.9
Poor mental wellbeing	83	63.8	1.5	5.2	0.0	3.7	31.6
Good mental wellbeing	307	64.2	5.7	10.0	1.6	4.9	25.2
Overweight or obese (BMI ≥25.0)	145	70.5	1.6	3.7	0.0	2.9	26.6
Normal range or underweight (BMI <25.0)	78	70.4	7.0	14.1	5.9	8.4	22.7
Health behaviour indicators							
Does not meet fruit intake recommendations	226	65.8	4.3	7.7	0.5	2.7	26.9
Meets fruit intake recommendations	161	61.2	5.9	11.7	2.7	8.1	26.0
Does not meet vegetable intake recommendations	333	65.5	4.8	9.6	1.5	5.1	24.7

Meets vegetable intake recommendations	50	53.1	3.5	5.2	0.0	1.5	44.2
Does not meet aerobic physical activity recommendations	104	44.4	2.9	16.4	0.0	4.3	34.3
Meets aerobic physical activity recommendations	274	69.9	5.3	7.1	1.8	4.9	24.6
Does not meet muscle strengthening recommendations	194	71.9	6.9	11.0	2.0	4.9	18.3
Meets muscle strengthening recommendations	153	52.6	2.3	8.9	0.9	4.8	36.9
Does not meet screen time recommendations	193	52.3	7.7	7.3	2.8	5.4	40.2
Meets screen time recommendations	167	78.0	2.7	6.9	0.0	4.7	14.7
Does not meet sleep recommendations	108	59.6	5.7	4.0	0.0	2.6	34.8
Meets sleep recommendations	243	67.7	5.1	7.8	1.8	6.4	24.7
Drinks sugar-sweetened beverages daily	60	56.9	9.5	5.7	1.6	2.0	37.4
Drinks sugar-sweetened beverages less than daily	307	67.2	4.3	7.2	1.4	5.6	25.3
Does not meet water recommendations	226	65.1	5.3	7.3	1.8	4.0	28.8
Meets water consumption recommendations	133	66.4	4.1	5.8	0.3	8.3	23.9
Risk behaviour indicators							
Current smoker	28	50.2	11.6	2.5	0.0	0.0	50.2
Ex-smoker	126	65.4	0.2	6.0	0.7	5.6	29.0
Never smoked	186	68.7	7.3	8.6	2.4	5.9	21.8
Current vaper*	10	91.0	36.3	4.5	0.0	0.0	4.5
Ex-vaper	20	84.0	1.2	5.3	5.1	8.2	13.7
Never vaped	310	62.6	4.1	7.2	1.3	5.1	29.9
Had more than 4 standard drinks on a single occasion	188	70.5	5.6	6.7	2.3	6.4	24.9
Has not had more than 4 standard drinks	153	56.5	3.7	7.3	0.2	3.2	32.8

Gambled	103	65.9	5.8	5.7	0.8	3.6	30.9
Never gambled	235	64.2	4.5	7.7	1.9	6.1	26.8

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

3.3.4. Children's travel to school

Parents were asked to report their child's method of travel to get to and from school. Response options included 'they are driven to or from school in a car', 'public transport with an adult present', 'public transport without an adult present', 'walk or ride with an adult present', 'walk or ride without an adult present', 'other', and 'my child does not attend school', For all children who attend school, responses were recoded as 'car', 'public transport' or 'active travel' for analysis and reporting purposes.

Overall, 37% of children were driven to school in a car, 45.8% took public transport and 14.8% engaged in active travel to and from school. Table 3.3.4.1 presents children's travel to school findings according to selected demographic characteristics. Among males, children aged 3 to 11 years were more likely to be driven to school by car than those aged 12 to 17 years (51.5% vs 18.2%). Conversely, active travel was more common among males aged 12 to 17 years than males aged 3 to 11 years (33.3% vs 3.0%). Among females, those aged 12 to 17 years were more likely to take public transport than those aged 3 to 11 years (69.4% vs 40.5%). Active travel was more common among children from Boort & Surrounds (23.7%) than Inglewood / Bridgewater & Surrounds (5%) and South Loddon Area (0.0%). Public transport use was higher in East Loddon Area (61.3%) than Wedderburn & Surrounds (23.9%).

Table 3.3.4.1 Children's travel to school by selected demographic characteristics

	Unweighted base[1]	Car	Public transport	Active travel
	n	%	%	%
Total sample	**151**	**37.1**	**45.8**	**14.8**
Males	66	41.9	44.2	11.8
Females	78	36.0	50.7	18.2
Sex and age				
Males, 3 to 11	33	51.5	36.4	3.0
Males, 12 to 17	33	18.2	63.6	33.3
Females, 3 to 11	42	40.5	40.5	19.0
Females, 12 to 17	36	27.8	69.4	16.7
Subregion				
Boort & Surrounds	49	34.8	42.6	23.7
East Loddon Area	29	25.3	61.3	6.0
Inglewood / Bridgewater & Surrounds	25	45.4	47.6	5.2
Pyramid Hill & Surrounds	20	44.3	44.6	17.0
South Loddon Area	5	73.2	46.4	0.0
Wedderburn & Surrounds	20	41.8	23.9	21.8
Demographic indicators				
Born overseas*	0	-	-	-
Born in Australia	151	37.1	45.8	14.8
Speaks other main language*	0	-	-	-
Speaks English as main language	151	37.1	45.8	14.8
Aboriginal and/or Torres Strait Islander*	10	55.4	7.2	19.1

Not Aboriginal or Torres Strait Islander	141	35.8	48.7	14.5
LGBTQIA+*	2	0.0	54.5	45.5
Non-LGBTQIA+	148	37.7	46.1	14.7
Neurodivergent*	16	19.7	46.9	4.0
Not neurodivergent	97	39.3	44.8	16.0
Maybe	15	44.5	51.9	8.8
Not sure what neurodivergent means	12	63.8	53.5	10.5
Requires help with daily activities*	24	23.9	30.1	2.5
Does not require help	127	39.7	48.9	17.2

[1] Base sizes include respondents aged 3 to 17 years living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

No significant differences in travel modes to and from school were seen for any of the health and wellbeing or health behaviour indicators (see Table 3.3.4.2).

Table 3.3.4.2 Children's travel to school by selected health and behaviour characteristics

	Unweighted base[1] n	Car %	Public transport %	Active travel %
Total sample	**151**	**37.1**	**45.8**	**14.8**
Health and wellbeing indicators				
Self-reported health - Fair or poor*	6	12.3	27.0	12.3
Self-reported health - Good, very good, or excellent	131	35.5	49.7	13.0
Overweight or obese (BMI ≥25.0)*	18	45.5	45.7	24.3
Normal range or underweight (BMI <25.0)	33	30.1	68.6	21.5
Health behaviour indicators				
Does not meet fruit intake recommendations	56	31.9	41.4	18.2
Meets fruit intake recommendations	95	39.6	48.0	13.2
Does not meet vegetable intake recommendations	118	39.4	47.6	16.1
Meets vegetable intake recommendations*	26	36.4	47.5	10.8
Does not meet aerobic physical activity recommendations	65	45.5	34.3	13.4
Meets aerobic physical activity recommendations	76	29.7	55.8	17.0
Does not meet muscle strengthening recommendations	75	41.9	55.3	18.3
Meets muscle strengthening recommendations*	27	18.6	51.6	16.6
Does not meet screen time recommendations	85	36.2	45.2	14.4
Meets screen time recommendations	51	35.5	53.5	13.3
Does not meet sleep recommendations	42	43.1	36.7	13.8
Meets sleep recommendations	96	33.5	52.1	14.8

Drinks sugar-sweetened beverages daily*	11	32.7	49.7	16.0
Drinks sugar-sweetened beverages less than daily	133	35.1	47.8	14.7
Does not meet water consumption recommendations	76	36.6	47.7	13.1
Meets water consumption recommendations	62	31.9	49.8	16.2

[1] Base sizes include respondents aged 3 to 17 years living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

3.4. Recreational screen time

The *Australian Guidelines*[8] recommend that children aged 3-5 years engage in no more than one (1) hour per day of screen time. For children and adolescents aged 5 to 17 years, they should limit their recreational screen time to no more than two (2) hours per day, excluding time spent on educational activities. For adults aged 18 years and above, there are no Government screen time recommendations, however there are established recommendations based on a harmonised meta-analysis of data from over one million adults. This review found that recreational screen time in excess of three (3) hours per day was associated with an increased risk of detrimental health implications. Therefore, a cut-off of three hours per day was used to differentiate adult ALC respondents who met/did not meet the screen time recommendations.

Table 3.4.1 presents a summary of the findings regarding screen time recommendation adherence and the average number of hours spent engaging in recreational screen time per day, according to selected demographic characteristics. Overall, adults engaged in a greater average number of hours of recreational screen time per day than children (5.3 vs 4.0 hours). No differences were seen between males and females overall.

Findings varied by sex and age. Among males, average daily recreational screen time was higher among those aged 12 to 17 years, 50 to 69 years and 70 years and over than those aged 5 to 11 years (5.6, 5.8 and 5.8 hours vs 2.5 hours). Among females, those aged 12 to 17 years were less likely to meet screen time recommendations than those aged 18 to 69 years (26.2% vs 50.0% to 54.1%).

Residents from Inglewood/Bridgewater and Surrounds engaged in a greater average number of hours (6.0 hours) compared to Boort and Surrounds (3.9 hours).

Differences in adherence to the recreational screen time recommendation were also seen according to a range of demographic characteristics. Specifically, people in the following groups were less likely to meet the screen time recommendations and may need the most support to reduce their screen time:

- Neurodivergent (22.9%) compared to not neurodivergent (49.2%) or unsure what neurodivergent means (52.4%)
- Unemployed/retired (29.4%) compared to employed (59.6%)
- High food security (44.9%) compared to marginal food security (70.8%)

Table 3.4.1 Recreational screen time by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average hours per day
	n	%	%	#
Total sample	**551**	**54.3**	**45.7**	**5.0**
Children	189	65.1	34.9	4.0
Adults	362	51.7	48.3	5.3
Males	162	53.4	46.6	5.3

[8] **Australian Government Department of Health and Aged Care**, 2021. Physical activity and exercise guidelines for all Australians. Canberra, Australia. https://www.health.gov.au/topics/physical-activity-and-exercise/physical-activity-and-exercise-guidelines-for-all-australians

Females	376	55.2	44.8	4.7
Sex and age				
Males, 3 to 11	28	50.0	50.0	2.5
Males, 12 to 17	54	77.8	22.2	5.6
Males, 18 to 34	13	40.6	59.4	4.1
Males, 35 to 49	11	57.9	42.1	7.5
Males, 50 to 69	24	48.5	51.5	5.8
Males, 70+	32	60.7	39.3	5.8
Females, 3 to 11	38	60.5	39.5	2.6
Females, 12 to 17	61	73.8	26.2	5.5
Females, 18 to 34	55	45.9	54.1	3.9
Females, 35 to 49	64	49.4	50.6	4.9
Females, 50 to 69	108	50.0	50.0	5.2
Females, 70+	50	69.4	30.6	5.0
Subregion				
Boort & Surrounds	150	46.0	54.0	3.9
East Loddon Area	96	50.0	50.0	4.5
Inglewood / Bridgewater & Surrounds	123	60.9	39.1	6.0
Pyramid Hill & Surrounds	55	59.7	40.3	5.2
South Loddon Area	22	58.2	41.8	4.5
Wedderburn & Surrounds	99	55.0	45.0	5.5
Demographic indicators				
Household size[2]				
1 person	42	62.0	38.0	6.7
2 or 3 people	198	50.7	49.3	4.5
4 or 5 people	94	45.6	54.4	5.5
More than 5 people	28	57.6	42.4	6.7
Born overseas	37	67.9	32.1	7.1
Born in Australia	512	52.7	47.3	4.8
Speaks other main language*	4	87.9	12.1	10.8
Speaks English as main language	542	54.2	45.8	5.0
Aboriginal and/or Torres Strait Islander*	21	44.8	55.2	3.1
Not Aboriginal or Torres Strait Islander	529	54.6	45.4	5.1
LGBTQIA+*	13	74.6	25.4	4.7
Non-LGBTQIA+	533	54.3	45.7	5.0
Neurodivergent	47	77.1	22.9	4.9
Not neurodivergent	345	50.8	49.2	4.6
Maybe	43	66.7	33.3	5.2
Not sure what neurodivergent means	73	47.6	52.4	5.3
Less than Bachelor level education[2]	235	51.3	48.7	5.2

Holds a Bachelor degree or higher	124	53.3	46.7	5.7
Unemployed/Retired[2]	133	70.6	29.4	5.9
Employed	227	40.4	59.6	4.9
Just getting along, poor or very poor[2]	125	50.1	49.9	5.1
Reasonably comfortable, very comfortable or prosperous	235	52.6	47.4	5.3
Requires help with daily activities	44	75.4	24.6	4.9
Does not require help	504	51.8	48.2	5.0
Food security (last 12 months)[2]				
Low or very low food security	56	52.5	47.5	4.6
Marginal food security	49	29.2	70.8	3.5
High food security	255	55.1	44.9	5.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.4.2 summarises recreational screen time engagement by selected health and behaviour characteristics. No significant differences were seen according to health and wellbeing or health behaviour indicators. Smoking was the only risk behaviour significantly associated with meeting screen time recommendations. Current smokers (19.9%) were less likely to meet the screen time recommendation than ex-smokers (53.0%) and those who had never smoked (52.4%).

Table 3.4.2 Recreational screen time by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average hours per day
	n	%	%	#
Total sample	**551**	**54.3**	**45.7**	**5.0**
Health and wellbeing indicators				
Self-reported health - Fair or poor	87	57.0	43.0	4.8
Self-reported health - Good, very good, or excellent	414	51.7	48.3	4.9
Life satisfaction - Low to moderate (0 to 6)[2]	92	48.3	51.7	4.8
Life satisfaction - High/very high (7 to 10)	230	48.2	51.8	5.1
Does not feel valued by society[2]	69	48.1	51.9	4.3
Sometimes feel valued by society	142	49.0	51.0	5.2
Definitely feel valued by society	121	50.8	49.2	5.5
Poor mental wellbeing[2]	83	49.7	50.3	5.5
Good mental wellbeing	279	52.3	47.7	5.2
Overweight or obese (BMI ≥25.0)	166	49.3	50.7	4.8
Normal range or underweight (BMI <25.0)	123	53.0	47.0	4.8
Health behaviour indicators				

Does not meet fruit intake recommendations	272	55.7	44.3	5.3
Meets fruit intake recommendations	275	52.6	47.4	4.6
Does not meet vegetable intake recommendations	456	54.3	45.7	5.1
Meets vegetable intake recommendations	78	53.0	47.0	4.7
Does not meet aerobic physical activity recommendations	178	64.8	35.2	5.0
Meets aerobic physical activity recommendations	360	50.9	49.1	5.0
Does not meet muscle strengthening recommendations	283	52.8	47.2	5.1
Meets muscle strengthening recommendations	185	56.4	43.6	5.3
Does not meet sleep recommendations	170	61.6	38.4	5.1
Meets sleep recommendations	368	49.5	50.5	4.7
Drinks sugar-sweetened beverages daily	73	66.1	33.9	6.3
Drinks sugar-sweetened beverages less than daily	478	52.3	47.7	4.8
Does not meet water recommendations	316	54.9	45.1	5.4
Meets water consumption recommendations	221	53.2	46.8	4.2
Risk behaviour indicators[2]				
Current smoker	27	80.1	19.9	8.0
Ex-smoker	125	47.0	53.0	4.8
Never smoked	185	47.6	52.4	5.0
Current vaper*	10	74.4	25.6	5.3
Ex-vaper	20	49.5	50.5	6.5
Never vaped	307	50.2	49.8	5.1
Had more than 4 standard drinks on a single occasion	184	48.1	51.9	4.8
Has not had more than 4 standard drinks	154	55.3	44.7	5.8
Gambled	103	52.1	47.9	5.7
Never gambled	232	50.8	49.2	4.9

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.5. Sleep

In 2015, the Sleep Health Foundation[9] released a report recommending sleep durations for different age groups, highlighting that sleep needs to support good health generally decrease with age. The recommendations are as follows:

[9] **Sleep Health Foundation** 2015. Sleep needs across the lifespan. Blacktown: Sleep Health Foundation. https://irp.cdn-website.com/0da81f14/files/uploaded/Sleep-Needs-Across-Lifespan.pdf

Age group	Hours per night
3 to 5 years	10 to 13
6 to 13 years	9 to 11
14 to 17 years	8 to 10
18 to 64 years	7 to 9
65 years and above	7 to 8

Tables 3.5.1 and 3.5.2 present the average hours per night of sleep and adherence to these age-related recommendations according to selected demographic characteristics and health and behaviour characteristics.

On average, children slept longer than adults (9.0 hours vs. 7.2 hours), although there was no difference in adherence to the recommendations. No significant differences were observed between males and females overall. Sleep duration varied by sex and age, with children aged 3 to 11 years reporting higher average hours of sleep than older age groups. Boort & Surrounds residents reported higher average hours of sleep per night (8.0 hours) than residents of Inglewood/Bridgewater & Surrounds (7.3 hours), Pyramid Hill & Surrounds (7.3 hours) and Wedderburn & Surrounds (7.2 hours).

Neurodivergent respondents (46.9%) were less likely to meet their respective age-related sleep recommendations than those who were not neurodivergent (73.5%). Additionally, residents with low or very low food security (6.7 hours) reported lower average sleep per night than those with high food security (7.3 hours). Respondents born overseas also reported lower average sleep per night than those born in Australia (6.8 hours vs 7.6 hours).

Table 3.5.1 Sleep by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average hours per night
	n	%	%	#
Total sample	**546**	**31.3**	**68.7**	**7.5**
Children	192	32.1	67.9	9.0
Adults	354	31.0	69.0	7.2
Males	161	29.2	70.8	7.5
Females	373	32.8	67.2	7.6
Sex and age				
Males, 3 to 11	29	17.2	82.8	9.9
Males, 12 to 17	54	33.3	66.7	8.5
Males, 18 to 34	12	11.1	88.9	7.8
Males, 35 to 49	10	38.2	61.8	7.0
Males, 50 to 69	24	32.7	67.3	7.1
Males, 70+	32	35.7	64.3	6.9
Females, 3 to 11	40	30.0	70.0	9.6
Females, 12 to 17	61	39.3	60.7	8.2
Females, 18 to 34	54	34.1	65.9	7.3

Females, 35 to 49	64	32.7	67.3	6.9
Females, 50 to 69	105	32.3	67.7	7.1
Females, 70+	49	29.0	71.0	7.3
Subregion				
Boort & Surrounds	148	24.1	75.9	8.0
East Loddon Area	99	28.5	71.5	7.8
Inglewood / Bridgewater & Surrounds	120	36.9	63.1	7.3
Pyramid Hill & Surrounds	55	42.2	57.8	7.3
South Loddon Area	22	33.2	66.8	7.4
Wedderburn & Surrounds	96	29.4	70.6	7.2
Demographic indicators				
Household size[2]				
1 person	41	33.7	66.3	6.8
2 or 3 people	195	30.4	69.6	7.2
4 or 5 people	92	32.4	67.6	7.3
More than 5 people	26	25.3	74.7	7.5
Born overseas	34	46.1	53.9	6.8
Born in Australia	510	29.9	70.1	7.6
Speaks other main language*	3	0.0	100.0	8.0
Speaks English as main language	539	31.0	69.0	7.5
Aboriginal and/or Torres Strait Islander*	21	34.5	65.5	7.6
Not Aboriginal or Torres Strait Islander	525	31.2	68.8	7.5
LGBTQIA+*	13	45.6	54.4	7.1
Non-LGBTQIA+	528	31.3	68.7	7.6
Neurodivergent	46	53.1	46.9	7.2
Not neurodivergent	344	26.5	73.5	7.7
Maybe	44	37.7	62.3	7.9
Not sure what neurodivergent means	69	33.7	66.3	7.1
Less than Bachelor level education[2]	229	31.2	68.8	7.2
Holds a Bachelor degree or higher	121	27.4	72.6	7.2
Unemployed/Retired[2]	130	39.3	60.7	6.9
Employed	221	25.7	74.3	7.3
Just getting along, poor or very poor[2]	122	37.1	62.9	6.9
Reasonably comfortable, very comfortable or prosperous	229	26.3	73.7	7.4
Requires help with daily activities	43	43.6	56.4	7.4
Does not require help	500	29.7	70.3	7.6
Food security (last 12 months)[2]				
Low or very low food security	53	45.0	55.0	6.7
Marginal food security	49	41.2	58.8	6.9
High food security	250	25.9	74.1	7.3

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.5.2 summarises sleep duration by selected health and behaviour characteristics. Differences were seen according to selected health and wellbeing indicators. Specifically, a lower proportion of those who self-reported their health to be fair or poor (52.8% vs 72.8%) and had poor mental wellbeing (44.2% vs 75.4%) met the sleep recommendations compared to their counterparts who reported more positive health and wellbeing.

Similarly, average hours of sleep per night were lower among respondents who rated their health as fair or poor (6.9 hours vs 7.7 hours), had low to moderate life satisfaction (6.8 hours vs 7.3 hours), did not feel valued by society (6.7 hours vs definitely [7.4 hours]), had poor mental wellbeing (6.4 hours vs 7.4 hours), or were overweight or obese (7.1 hours vs 7.9 hours), compared to their respective comparison groups.

Differences in average hours of sleep per night were also observed by fruit and vegetable intake recommendations. Respondents who met fruit intake recommendations reported more average hours of sleep per night than those who did not meet fruit intake recommendations (8.1 hours vs 7.1 hours). Respondents who did not meet vegetable intake recommendations also reported fewer average hours of sleep per night than those who met vegetable intake recommendations (7.5 hours vs 8.1 hours).

No risk behaviours were associated with either meeting sleep recommendations or average hours of sleep per night.

Table 3.5.2 Sleep duration by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average hours per night
	n	%	%	#
Total sample	**546**	**31.3**	**68.7**	**7.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	87	47.2	52.8	6.9
Self-reported health - Good, very good, or excellent	413	27.2	72.8	7.7
Life satisfaction - Low to moderate (0 to 6)[2]	91	44.3	55.7	6.8
Life satisfaction - High/very high (7 to 10)	226	25.2	74.8	7.3
Does not feel valued by society[2]	69	41.8	58.2	6.7
Sometimes feel valued by society	136	33.0	67.0	7.2
Definitely feel valued by society	121	21.3	78.7	7.4
Poor mental wellbeing[2]	82	55.8	44.2	6.4
Good mental wellbeing	272	24.6	75.4	7.4
Overweight or obese (BMI ≥25.0)	164	38.2	61.8	7.1
Normal range or underweight (BMI <25.0)	125	20.8	79.2	7.9
Health behaviour indicators				

Does not meet fruit intake recommendations	266	37.1	62.9	7.1
Meets fruit intake recommendations	277	24.0	76.0	8.1
Does not meet vegetable intake recommendations	451	31.5	68.5	7.5
Meets vegetable intake recommendations	79	24.3	75.7	8.1
Does not meet aerobic physical activity recommendations	174	32.4	67.6	7.8
Meets aerobic physical activity recommendations	357	30.1	69.9	7.4
Does not meet muscle strengthening recommendations	280	33.2	66.8	7.4
Meets muscle strengthening recommendations	179	28.3	71.7	7.5
Does not meet screen time recommendations	310	35.6	64.4	7.5
Meets screen time recommendations	228	25.3	74.7	7.6
Drinks sugar-sweetened beverages daily	71	38.6	61.4	7.2
Drinks sugar-sweetened beverages less than daily	475	30.1	69.9	7.6
Does not meet water recommendations	315	32.6	67.4	7.4
Meets water consumption recommendations	218	27.8	72.2	7.8
Risk behaviour indicators[2]				
Current smoker	27	50.6	49.4	6.5
Ex-smoker	124	29.9	70.1	7.2
Never smoked	180	28.4	71.6	7.3
Current vaper*	10	74.5	25.5	6.2
Ex-vaper	19	1.3	98.7	7.9
Never vaped	302	32.4	67.6	7.1
Had more than 4 standard drinks on a single occasion	180	29.0	71.0	7.2
Has not had more than 4 standard drinks	152	35.3	64.7	7.1
Gambled	100	35.5	64.5	7.2
Never gambled	229	29.6	70.4	7.0

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.6. Participation in desired level of physical activity

Before asking more detailed questions about participation in specific activities, all respondents were first asked whether they had been as physically active as they would have liked over the past 12 months. This section focuses on describing the demographic, health, and wellbeing characteristics of those who reported lower than desired activity levels. The next section will then explore the *reasons* why they were not as active as they wished. Because these individuals have already expressed an

interest in being more active, supporting them to increase their participation could lead to quick gains in overall activity rates among residents.

A little over half of all respondents (56.8%) indicated that they had not participated in activities as often as they would like. Adults (63.0%) were more likely than children (35.1%) to indicate they had not participated in physical activities as often as they would have liked in the last 12 months. Among both males and females, lower than desired level of participation was generally more common among adults than children and adolescents. Across subregions, no significant differences were recorded in the proportion of respondents who wanted to participate in physical activity more often.

Respondents who were just getting along, poor or very poor (72.8%) were more likely to report lower than desired level of physical activity than those who were reasonably comfortable, very comfortable or prosperous (55.4%).

Table 3.6.1 Participation in desired level of physical activity by selected demographic characteristics

	Unweighted base[1]	Yes	No
	n	%	%
Total sample	**606**	**43.2**	**56.8**
Children	206	64.9	35.1
Adults	393	37.0	63.0
Males	185	44.0	56.0
Females	405	42.3	57.7
Sex and age			
Males, 3 to 11	33	54.5	45.5
Males, 12 to 17	61	75.4	24.6
Males, 18 to 34	13	40.6	59.4
Males, 35 to 49	16	33.9	66.1
Males, 50 to 69	27	36.1	63.9
Males, 70+	33	44.1	55.9
Females, 3 to 11	42	59.5	40.5
Females, 12 to 17	62	77.4	22.6
Females, 18 to 34	57	37.1	62.9
Females, 35 to 49	68	18.4	81.6
Females, 50 to 69	121	35.3	64.7
Females, 70+	53	49.9	50.1
Subregion			
Boort & Surrounds	157	51.0	49.0
East Loddon Area	104	40.8	59.2
Inglewood / Bridgewater & Surrounds	148	33.1	66.9
Pyramid Hill & Surrounds	58	48.9	51.1
South Loddon Area	25	55.8	44.2
Wedderburn & Surrounds	105	43.8	56.2

Demographic indicators			
Household size[2]			
1 person	50	22.6	77.4
2 or 3 people	209	39.7	60.3
4 or 5 people	106	37.0	63.0
More than 5 people	28	54.1	45.9
Born overseas	40	21.9	78.1
Born in Australia	564	45.5	54.5
Speaks other main language*	5	31.0	69.0
Speaks English as main language	596	43.5	56.5
Aboriginal and/or Torres Strait Islander*	24	29.1	70.9
Not Aboriginal or Torres Strait Islander	578	43.5	56.5
LGBTQIA+*	14	59.4	40.6
Non-LGBTQIA+	585	43.2	56.8
Neurodivergent	49	37.1	62.9
Not neurodivergent	383	40.8	59.2
Maybe	43	50.6	49.4
Not sure what neurodivergent means	80	53.8	46.2
Less than Bachelor level education[2]	258	37.8	62.2
Holds a Bachelor degree or higher	131	33.9	66.1
Unemployed/Retired[2]	138	45.5	54.5
Employed	252	32.9	67.1
Just getting along, poor or very poor[2]	142	27.2	72.8
Reasonably comfortable, very comfortable or prosperous	247	44.6	55.4
Requires help with daily activities	48	44.8	55.2
Does not require help	554	43.4	56.6
Food security (last 12 months)[2]			
Low or very low food security	61	22.9	77.1
Marginal food security	54	29.4	70.6
High food security	276	41.9	58.1

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.6.2 summarises preference to be more physically active by selected health and behaviour characteristics. Associations were seen with all health and wellbeing indicators, except feeling valued by society. Specifically, a greater proportion of those who self-reported their health to be fair or poor (72.5% vs 51.6%), had low to moderate life satisfaction (76.1% vs 54.6%), had poor mental wellbeing (82.4% vs 58.7%), and were overweight or obese (65.5% vs 36.8%) did not engage in as much physical activity over the past 12 months as they would have liked compared to their counterparts who reported more positive health and wellbeing.

An association was seen between being as active as desired and adherence to some health behaviour recommendations. Specifically, lower than desired level of physical activity was greater among those who did not meet the fruit intake (66.4% vs 46.8%) and aerobic physical activity (69.9% vs 51.9%) recommendations compared to those who met the respective recommendations. Current smokers (84.5%) were also more likely to report lower than desired level of physical activity than ex-smokers (57.5%) and those who had never smoked (60.3%).

Understanding the motivations and barriers related to participating in physical activity among groups with poorer health and wellbeing is strategically important. First, these individuals have already signalled a desire to be more active, making them an engaged audience with the potential for immediate gains if their needs are supported. Second, increasing activity levels within these groups offers substantial health benefits, given their existing lower health status and behaviours.

Table 3.6.2 Participation in desired level of physical activity by selected health and behaviour characteristics

	Unweighted base[1]	Yes	No
	n	%	%
Total sample	**606**	**43.2**	**56.8**
Health and wellbeing indicators			
Self-reported health - Fair or poor	89	27.5	72.5
Self-reported health - Good, very good, or excellent	433	48.4	51.6
Life satisfaction - Low to moderate (0 to 6)[2]	94	23.9	76.1
Life satisfaction - High/very high (7 to 10)	232	45.4	54.6
Does not feel valued by society[2]	69	29.4	70.6
Sometimes feel valued by society	145	31.6	68.4
Definitely feel valued by society	122	51.8	48.2
Poor mental wellbeing[2]	83	17.6	82.4
Good mental wellbeing	310	41.3	58.7
Overweight or obese (BMI ≥25.0)	170	34.5	65.5
Normal range or underweight (BMI <25.0)	126	63.2	36.8
Health behaviour indicators			
Does not meet fruit intake recommendations	300	33.6	66.4
Meets fruit intake recommendations	293	53.2	46.8
Does not meet vegetable intake recommendations	496	40.7	59.3
Meets vegetable intake recommendations	84	54.4	45.6
Does not meet aerobic physical activity recommendations	189	30.1	69.9
Meets aerobic physical activity recommendations	384	48.1	51.9
Does not meet muscle strengthening recommendations	299	38.9	61.1

Meets muscle strengthening recommendations	203	44.7	55.3
Does not meet screen time recommendations	321	43.2	56.8
Meets screen time recommendations	228	45.3	54.7
Does not meet sleep recommendations	173	39.7	60.3
Meets sleep recommendations	370	46.5	53.5
Drinks sugar-sweetened beverages daily	75	31.8	68.2
Drinks sugar-sweetened beverages less than daily	500	46.2	53.8
Does not meet water recommendations	328	39.4	60.6
Meets water consumption recommendations	224	50.7	49.3
Risk behaviour indicators[2]			
Current smoker	28	15.5	84.5
Ex-smoker	126	42.5	57.5
Never smoked	189	39.7	60.3
Current vaper*	10	21.0	79.0
Ex-vaper	20	61.3	38.7
Never vaped	313	36.8	63.2
Had more than 4 standard drinks on a single occasion	188	41.0	59.0
Has not had more than 4 standard drinks	156	33.7	66.3
Gambled	104	37.7	62.3
Never gambled	237	38.1	61.9

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.7. Barriers to physical activity participation

Respondents who indicated they had not participated in physical activity as frequently as they would have liked were asked to indicate the reasons why this was the case, from a list provided within the survey. Table 3.7.1 summarises the barriers to physical activity participation, in order from most to least commonly reported. Being too busy or not having enough time was the main reason for not doing as much activity as desired (50.2%). Lack of social support (26.7%) and poor health or disability (21.0%) were also common barriers to engaging in physical activity as much as they would have liked.

Table 3.7.1 Barriers to physical activity participation

	%
Unweighted base (n)[1]	**323**
Too busy / not enough time	50.2
Lack of social support	26.7

Poor health or disability	21.0
Unsure about what activities are available	16.3
Cost	14.3
No cool or shaded areas to exercise locally during hot weather	12.5
Safety	11.7
Preferred activity not on offer locally / at suitable time	7.7
Lack of transport	5.8
Personal or cultural reasons	4.9
Distance	4.6
Lack of motivation / laziness	4.4
Caring responsibilities	2.6
Injury	1.9
Weather / seasonality	0.4
Lack of footpaths / bike paths	0.1
Tiredness / fatigue	0.1

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

The top five reported barriers to physical activity participation were analysed further according to demographic characteristics (see Table 3.7.2) and health and wellbeing characteristics (see Table 3.7.3).

Reporting of being too busy or not having enough time as a barrier to physical activity differed according to several demographics, health behaviours and risk behaviours. Specifically, a greater proportion of the following respondents reported being too busy or not having enough time as a barrier to physical activity participation:

- Adults (52.9%) compared to children (30.7%)
- Employed (72.0%) compared to unemployed/retired (10.9%)
- Did not require help with daily activities (54.8%) compared to required help (11.0%)
- Good, very good or excellent health (57.9%) compared to fair or poor health (31.0%)

There were few differences in reports of lack of social support as a barrier to physical activity according to health and behaviour indicators. The following respondent groups were more likely to report lack of social support as a barrier to physical activity participation:

- Poor mental wellbeing (45.9%) compared to good mental wellbeing (20.3%)
- Did not meet vegetable intake recommendations (28.8%) compared to met recommendations (7.6%)

Poor health or disability as a barrier to physical activity also differed according to some demographic, health and wellbeing indicators. A greater proportion of the following respondents reported poor health or disability to be a barrier to engaging in as much physical activity as they would have liked:

- Wedderburn & Surrounds (35.6%) compared to Inglewood/Bridgewater & Surrounds (10.3%)

- Unemployed/retired (39.1%) compared to employed (13.4%)
- Fair or poor health (53.4%) compared to good, very good or excellent health (14.1%)

Unsure about what activities are available was the fourth most common barrier to physical activity, which was reported by a greater proportion of respondents from the following groups:

- Children (40.7%) compared to adults (13.0%)
- Maybe neurodivergent (40.7%) compared to not sure what neurodivergent means (7.0%)

The fifth most common physical activity barrier was cost, with differences seen between some demographic groups and health and wellbeing indicators. A greater proportion of the following respondents reported cost as a barrier to engaging in as much physical activity as they would have liked:

- Females (23.5%) compared to males (6.8%)
- Low or very low food security (32.8%) compared to high food security (4.7%)
- Did not feel valued by society (25.0%) and sometimes felt valued by society (12.2%) compared to definitely felt valued by society (1.1%)
- Poor mental wellbeing (28.1%) compared to good mental wellbeing (7.6%)

Table 3.7.2 Top five barriers to physical activity participation by selected demographic characteristics

	Unweighted base[1]	Too busy / not enough time	Lack of social support	Poor health or disability	Unsure about what activities are available	Cost
	n	%	%	%	%	%
Total sample	**323**	**50.2**	**26.7**	**21.0**	**16.3**	**14.3**
Children	65	30.7	28.5	11.9	40.7	27.3
Adults	258	52.9	26.4	22.2	13.0	12.6
Males	83	48.9	27.9	19.5	14.6	6.8
Females	231	53.2	25.9	21.9	18.8	23.5
Subregion						
Boort & Surrounds	75	58.8	26.8	15.7	11.6	12.6
East Loddon Area	52	45.5	42.3	23.6	16.4	16.3
Inglewood / Bridgewater & Surrounds	90	44.9	23.3	10.3	21.2	11.6
Pyramid Hill & Surrounds	23	51.3	32.5	37.7	8.4	11.7
South Loddon Area	17	76.0	18.4	32.8	15.8	22.8
Wedderburn & Surrounds	62	46.4	19.9	35.6	15.0	18.4
Demographic indicators						
Born overseas	30	42.4	24.2	36.5	30.3	7.8
Born in Australia	291	51.7	27.1	18.3	13.8	15.3
Speaks other main language*	4	21.6	42.9	21.6	100.0	9.5
Speaks English as main language	315	51.2	26.0	20.9	15.2	14.5
Aboriginal and/or Torres Strait Islander*	14	16.3	38.8	47.4	24.1	42.3
Not Aboriginal or Torres Strait Islander	308	51.6	26.2	19.9	16.0	13.2
LGBTQIA+*	7	67.6	27.7	27.5	37.5	24.5
Non-LGBTQIA+	311	49.7	27.2	20.9	15.9	14.5
Neurodivergent	30	60.3	20.8	31.2	15.1	14.9

Not neurodivergent	199	57.2	25.0	17.1	13.2	14.3
Maybe	21	38.8	51.7	18.3	40.7	33.9
Not sure what neurodivergent means	43	44.2	27.5	25.5	7.0	10.5
Less than Bachelor level education[2]	162	52.5	26.8	21.1	12.5	12.5
Holds a Bachelor degree or higher	93	59.8	26.5	21.3	14.3	14.3
Unemployed/Retired[2]	79	10.9	27.7	39.1	22.3	20.1
Employed	176	72.0	26.3	13.4	8.6	9.6
Just getting along, poor or very poor[2]	105	52.2	34.2	28.9	12.3	18.9
Reasonably comfortable, very comfortable or prosperous	149	55.3	20.0	14.1	13.3	7.0
Requires help with daily activities	30	11.0	35.3	49.4	19.5	42.1
Does not require help	289	54.8	26.3	18.3	15.8	12.0
Food security (last 12 months)[2]						
Low or very low food security	50	50.3	36.1	32.4	13.7	32.8
Marginal food security	40	69.4	38.6	17.0	10.0	19.0
High food security	166	50.3	20.7	19.5	12.9	4.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.7.3 Top five barriers to physical activity participation by selected health and behaviour characteristics

	Unweighted base[1]	Too busy / not enough time	Lack of social support	Poor health or disability	Unsure about what activities are available	Cost
	n	%	%	%	%	%
Total sample	**323**	**50.2**	**26.7**	**21.0**	**16.3**	**14.3**
Health and wellbeing indicators						

Self-reported health - Fair or poor	66	31.0	33.5	53.4	17.1	29.7
Self-reported health - Good, very good, or excellent	211	57.9	27.5	14.1	14.3	10.3
Life satisfaction - Low to moderate (0 to 6)[2]	72	61.0	32.2	29.2	10.6	19.1
Life satisfaction - High/very high (7 to 10)	142	51.4	24.7	17.8	11.6	6.1
Does not feel valued by society[2]	51	50.6	40.7	35.6	10.1	25.0
Sometimes feel valued by society	105	52.6	26.7	17.7	17.0	12.2
Definitely feel valued by society	64	61.7	19.4	22.4	9.0	1.1
Poor mental wellbeing[2]	70	43.8	45.9	33.2	20.8	28.1
Good mental wellbeing	188	55.7	20.3	18.7	10.5	7.6
Overweight or obese (BMI ≥25.0)	106	54.6	31.3	22.3	12.1	10.3
Normal range or underweight (BMI <25.0)	53	66.0	33.4	10.0	11.2	12.5
Health behaviour indicators						
Does not meet fruit intake recommendations	194	54.5	29.8	20.0	15.4	15.2
Meets fruit intake recommendations	128	42.5	20.9	22.7	17.9	12.7
Does not meet vegetable intake recommendations	274	52.1	28.8	20.1	15.3	15.2
Meets vegetable intake recommendations	40	37.9	7.6	26.2	29.1	7.8
Does not meet aerobic physical activity recommendations	126	39.0	24.3	26.4	19.9	18.6
Meets aerobic physical activity recommendations	179	56.8	27.7	17.5	13.9	10.6
Does not meet muscle strengthening recommendations	168	54.5	30.6	25.4	15.5	15.1
Meets muscle strengthening recommendations	101	43.2	20.0	17.5	14.6	11.5
Does not meet screen time recommendations	173	39.4	26.0	24.0	21.4	17.8
Meets screen time recommendations	119	60.3	32.5	21.1	9.1	10.6

Does not meet sleep recommendations	98	41.0	28.4	26.3	17.7	17.9
Meets sleep recommendations	189	53.7	30.1	21.3	13.1	12.6
Drinks sugar-sweetened beverages daily	51	58.0	29.9	26.2	19.4	11.5
Drinks sugar-sweetened beverages less than daily	254	48.1	28.6	21.9	15.8	15.3
Does not meet water recommendations	189	53.6	29.9	23.3	15.6	14.1
Meets water consumption recommendations	111	39.2	25.7	19.7	19.3	16.7
Risk behaviour indicators[2]						
Current smoker	19	36.0	24.1	30.0	25.0	21.7
Ex-smoker	82	50.7	23.6	28.7	11.4	11.3
Never smoked	124	61.1	33.0	19.1	13.2	10.6
Current vaper*	7	91.3	14.3	5.7	14.3	0.0
Ex-vaper	11	29.4	24.0	51.1	15.7	15.7
Never vaped	208	52.9	28.9	23.3	13.9	12.6
Had more than 4 standard drinks on a single occasion	122	57.3	24.1	17.4	12.4	14.0
Has not had more than 4 standard drinks	104	48.1	33.7	32.7	16.2	9.7
Gambled	68	42.8	29.5	28.6	13.7	16.8
Never gambled	156	58.7	27.6	21.4	14.3	9.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.8. Sport, exercise and recreation participation

Respondents were asked whether they had participated in any physical activities for sport, exercise, or recreation in the 12 months prior to completing the survey. Those who answered “yes” were then asked how many such activities they had taken part in. From a list of 60 predefined activity categories, respondents could select up to five activities. Because the survey captured only respondents’ top five activities, these may not represent all activities they participate in. Therefore, when interpreting participation rates for each of the 60 activities, these should be viewed as the proportion of the population who consider the activity to be one of their main activities.

For each activity selected, respondents were asked a series of follow-up questions, including how frequently they participated in the past 12 months and details about the facility, venue, or place where they most often took part. This included the facility’s name, location, quality, accessibility, how respondents travelled there, and the distance travelled. While this report focuses on identifiable facilities, venues, and places, some highly used facility types (i.e., footpaths) do not appear in the analysis because they are not named and cannot be identified in the same way as venues included in subsequent sections.

3.8.1. Participation in sport, exercise and recreation activities

All respondents were asked to list up to five activities they had participated in over the past 12 months. Overall, 69.2% reported participating in at least one activity and 18.8% had participated in four or more activities. In the 2019 ALC, 19.0% of Loddon Shire respondents reported they had not participated in any activities, whereas in 2025, 30.8% responded that they had not participated in any activities. This suggests that activity levels have decreased over the past six years, with a greater proportion of residents reporting inactivity on this occasion. This section focuses on the demographic, health and wellbeing characteristics of inactive respondents (i.e., those who had not participated in any activities). Understanding the characteristics of residents who belong to the least active groups in the community provides a solid foundation for effectively addressing the needs of these groups.

Overall, a greater proportion of adults (34.5%) compared to children (15.4%) did not participate in any activities. Participation varied by sex and age, with males aged 70 years and over more likely to report no participation than males aged 3 to 17 years, while females aged 18 years and over were more likely to report no participation than females aged 12 to 17 years. A greater proportion of residents of Inglewood/Bridgewater & Surrounds (32.8%), Pyramid Hill & Surrounds (38.7%), and Wedderburn & Surrounds (41.0%) did not participate in any sport, exercise or recreation activities compared to South Loddon Area (9.9%).

When looking at demographic indicators, a greater proportion of respondents from the following groups reported not participating in any sport, exercise or recreation activities over the past 12 months:

- Unemployed/retired (46.1%) compared to employed (27.4%)
- Required help with daily activities (53.9%) compared to did not require help (27.6%)

Table 3.8.1.1 Participation in sport, exercise and recreational activities by selected demographic characteristics

	Unweighted base[1]	None	One	Two to three	Four or more

	n	%	%	%	%
Total sample	**621**	**30.8**	**22.9**	**27.6**	**18.8**
Children	206	15.4	20.1	39.3	25.2
Adults	395	34.5	23.1	25.0	17.3
Males	185	33.0	24.8	21.6	20.7
Females	406	26.6	20.4	35.4	17.7
Sex and age					
Males, 3 to 11	33	18.2	30.3	33.3	18.2
Males, 12 to 17	60	6.7	23.3	33.3	36.7
Males, 18 to 34	13	43.2	13.5	35.1	8.2
Males, 35 to 49	16	32.0	19.4	32.0	16.6
Males, 50 to 69	28	29.2	33.4	7.9	29.5
Males, 70+	33	48.3	21.0	19.2	11.5
Females, 3 to 11	43	20.9	18.6	41.9	18.6
Females, 12 to 17	61	4.9	11.5	49.2	34.4
Females, 18 to 34	57	29.7	20.2	35.6	14.5
Females, 35 to 49	68	30.4	16.2	34.5	18.8
Females, 50 to 69	121	27.7	23.5	31.8	17.0
Females, 70+	54	40.6	21.8	30.8	6.8
Subregion					
Boort & Surrounds	162	23.3	17.0	35.9	23.9
East Loddon Area	106	30.5	21.2	23.7	24.5
Inglewood / Bridgewater & Surrounds	150	32.8	31.9	20.9	14.4
Pyramid Hill & Surrounds	61	38.7	20.3	25.0	16.1
South Loddon Area	25	9.9	18.0	41.6	30.5
Wedderburn & Surrounds	106	41.0	19.8	26.8	12.4
Demographic indicators					
Household size[2]					
1 person	51	48.5	23.5	10.1	18.0
2 or 3 people	210	32.3	22.8	22.0	22.9
4 or 5 people	106	28.8	21.8	41.3	8.2
More than 5 people	28	35.4	29.7	29.7	5.3
Born overseas	40	24.6	2.8	24.5	48.0
Born in Australia	565	30.9	24.7	28.2	16.2
Speaks other main language*	5	31.0	23.0	37.6	8.4
Speaks English as main language	597	30.5	22.7	28.0	18.8
Aboriginal and/or Torres Strait Islander*	23	24.9	14.9	36.9	23.2
Not Aboriginal or Torres Strait Islander	580	30.7	22.8	27.4	19.0
LGBTQIA+*	15	42.5	6.8	35.7	15.0
Non-LGBTQIA+	585	29.3	23.2	28.0	19.5

Neurodivergent	49	28.3	25.1	42.7	3.8
Not neurodivergent	384	26.7	22.1	28.7	22.5
Maybe	42	38.6	11.7	28.0	21.7
Not sure what neurodivergent means	80	29.2	30.1	29.0	11.7
Less than Bachelor level education[2]	260	35.1	23.7	24.6	16.5
Holds a Bachelor degree or higher	130	26.3	20.6	29.8	23.3
Unemployed/Retired[2]	139	46.1	20.2	22.5	11.1
Employed	252	27.4	24.9	26.8	21.0
Just getting along, poor or very poor[2]	141	34.7	23.5	20.3	21.5
Reasonably comfortable, very comfortable or prosperous	249	33.0	23.2	29.0	14.8
Requires help with daily activities	48	53.9	15.2	18.9	12.0
Does not require help	555	27.6	23.5	28.9	20.0
Food security (last 12 months)[2]					
Low or very low food security	61	43.4	22.9	14.9	18.9
Marginal food security	53	37.5	18.2	29.8	14.5
High food security	278	31.4	24.1	26.8	17.6

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Respondents who reported lower levels of health and wellbeing were also more likely to indicate they had not participated in any activities (see Table 3.8.1.2). This was especially notable amongst respondents with the following health characteristics:

- Fair or poor self-rated health (54.9%) compared to good, very good or excellent health (24.1%)
- Did not feel valued by society (59.2%) compared to sometimes (26.4%) or definitely (21.2%) felt valued by society

A greater proportion of respondents who did not meet the aerobic physical activity recommendation reported not participating in any sport, exercise or recreation activities compared to those who met the recommendation (43.6% vs 25.2%). None of the risk behaviours were found to be associated with participation in sport, exercise or recreation activities over the past 12 months.

Table 3.8.1.2 Participation in sport, exercise and recreational activities by selected health and behaviour characteristics

	Unweighted base[1]	None	One	Two to three	Four or more
	n	%	%	%	%
Total sample	**621**	**30.8**	**22.9**	**27.6**	**18.8**
Health and wellbeing indicators					
Self-reported health - Fair or poor	90	54.9	19.5	11.0	14.6

Self-reported health - Good, very good, or excellent	436	24.1	24.5	32.2	19.2
Life satisfaction - Low to moderate (0 to 6)[2]	95	42.5	21.7	13.7	22.1
Life satisfaction - High/very high (7 to 10)	233	27.1	25.4	32.1	15.3
Does not feel valued by society[2]	70	59.2	11.5	15.7	13.7
Sometimes feel valued by society	145	26.4	27.0	25.8	20.8
Definitely feel valued by society	123	21.2	31.3	31.9	15.6
Poor mental wellbeing[2]	85	45.4	10.4	21.6	22.6
Good mental wellbeing	310	32.0	26.1	25.8	16.1
Overweight or obese (BMI ≥25.0)	171	35.4	22.4	23.3	18.9
Normal range or underweight (BMI <25.0)	126	17.4	20.9	42.0	19.7
Health behaviour indicators					
Does not meet fruit intake recommendations	300	34.3	22.6	24.1	19.0
Meets fruit intake recommendations	293	26.1	22.3	32.7	18.9
Does not meet vegetable intake recommendations	496	30.7	22.5	27.4	19.4
Meets vegetable intake recommendations	84	28.2	25.6	31.0	15.2
Does not meet aerobic physical activity recommendations	190	43.6	22.4	23.6	10.5
Meets aerobic physical activity recommendations	382	25.2	22.6	29.4	22.8
Does not meet muscle strengthening recommendations	298	32.8	25.3	22.0	19.9
Meets muscle strengthening recommendations	202	23.7	18.4	36.5	21.4
Does not meet screen time recommendations	320	30.4	24.9	30.5	14.2
Meets screen time recommendations	227	27.6	20.7	27.4	24.2
Does not meet sleep recommendations	172	38.0	19.8	22.2	20.1
Meets sleep recommendations	370	26.2	24.6	30.7	18.4
Drinks sugar-sweetened beverages daily	75	45.5	20.6	26.7	7.1
Drinks sugar-sweetened beverages less than daily	500	26.8	23.1	29.5	20.6
Does not meet water recommendations	330	31.8	24.7	24.7	18.8
Meets water consumption recommendations	222	25.2	18.5	40.0	16.3
Risk behaviour indicators[2]					
Current smoker	28	33.4	41.6	13.5	11.4
Ex-smoker	126	34.9	19.5	23.3	22.3
Never smoked	191	33.1	23.4	29.9	13.6
Current vaper*	10	38.2	36.3	2.6	22.8
Ex-vaper	20	4.3	39.7	47.9	8.1
Never vaped	315	35.7	22.6	24.6	17.1

Had more than 4 standard drinks on a single occasion	189	28.2	27.6	28.1	16.0
Has not had more than 4 standard drinks	157	42.1	18.8	21.5	17.6
Gambled	104	24.0	30.0	27.4	18.5
Never gambled	239	39.3	21.1	25.0	14.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

3.8.2. Types of sport, exercise and recreation activities participated in

As noted earlier, respondents were asked to list up to five activities they had participated in during the 12 months prior to the survey. Because the survey only captured their top five activities, it does not include information about any additional activities they may have undertaken. Therefore, this section should be interpreted as providing insight into the most common primary activities reported by residents, rather than a complete record of all activities they engaged in.

Table 3.8.2.1 shows the number of respondents who had participated in each of the top 20 activities. Using all activities mentioned as the base, the table shows how frequently respondents had participated in the activity they named amongst their top five.

Of the activities people had participated in, the five most common included:

- Walking – 12.7%
- Netball (indoor/outdoor) – 11.2%
- Swimming – 7.7%
- Australian Rules Football – 6.9%
- Tennis (indoor/outdoor) and Fitness: Gym – 5.5%

Participation frequency was classified as *heavy* when respondents took part in an activity at least weekly, *medium* when participation occurred one to three times per month, and *light* when it occurred less than once a month. Activities with the highest rates of heavy participation included a variety of team and individual sports, including jogging/running (93.6%), weightlifting/body building (93.1%) and Australian Rules football (91.6%). High levels of heavy participation were also reported for walking (88.4%), hockey (86.9%), swimming (85.4%), Horse riding/equestrian activities (84.3%), fitness: indoor group activities (81.4%), netball (80.8%) and cricket (80.8%). In contrast, activities with the greatest proportions of light participation included fishing (57.8%), bush walking/hiking (45.8%) and cycling, including both general recreational cycling (42.6%).

What is unclear from these results is the extent to which the frequency of participation is a function of the activity itself, such as activities that are unstructured general recreation (e.g., bush walking and recreational cycling) versus organised sports that occur at least weekly, and the extent to which frequency of participation varies for respondent-driven reasons. To fully understand the motivations for participation in each activity, further research would be required.

Table 3.8.2.1 Activity types by frequency of participation

	Unweighted base[1]	Heavy	Medium	Light
		Once a week or more often	1 to 3 times a month	Less than once a month
	n	%	%	%
Top 20 activities	**882**	**71.2**	**14.5**	**14.3**
Walking	107	88.4	8.4	3.2
Netball (indoor / outdoor)	97	80.8	15.6	3.6
Swimming	68	85.4	6.6	8.0

Australian Rules Football (AFL)	61	91.6	3.3	5.1
Tennis (indoor / outdoor)	49	67.9	10.3	21.8
Active play (at playgrounds / play centres)	41	49.3	18.1	32.5
Hockey (indoor / outdoor)	40	86.9	10.6	2.6
Fitness: Gym	38	64.7	31.2	4.1
Fitness: Indoor group activities / Aerobics	32	81.4	8.6	10.0
Jogging / running	29	93.6	1.3	5.1
Cricket (all types)	24	80.8	3.8	15.4
Lawn bowls	22	76.1	16.2	7.7
Basketball (indoor / outdoor)	20	76.4	4.3	19.3
Bush walking / Hiking	20	48.9	5.3	45.8
Cycling: General cycling for recreation	20	51.8	5.6	42.6
Golf	19	22.2	53.5	24.2
Fitness: Outdoor fitness / Personal training	18	65.9	22.4	11.7
Horse riding / equestrian activities /	13	84.3	12.5	3.2
Fishing	12	6.7	35.5	57.8
Weightlifting / Body building	12	93.1	4.4	2.5

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Tables 3.8.2.2 and 3.8.2.3 provide an overview of the demographic characteristics, health and wellbeing indicators, health behaviours and risk behaviours of respondents who engaged in each of the top ten most common sport, exercise and recreation activities.

Overall, children were more likely than adults to participate in netball, swimming, Australian Rules Football (AFL), active play and hockey. In contrast, adults were more likely to take part in walking, fitness: gym and fitness: indoor group activities. Differences by sex were also evident. Females were more likely than males to participate in netball and hockey, while males were more likely to participate in AFL.

Differences in participation rates were observed across all other demographic characteristics, except education level. Participation also varied by selected health and wellbeing indicators, health behaviours and risk behaviours. Specifically, differences were evident according to self-reported health, BMI, aerobic physical activity, muscle strengthening, sugar-sweetened beverage consumption, smoking, and gambling.

Table 3.8.2.2 Top ten activities by selected demographic characteristics

	Unweighted base[1]	Walking	Netball (indoor / outdoor)	Swimming	Australian Rules Football (AFL)	Tennis (indoor / outdoor)	Active play (at playgrounds / play cent	Hockey (indoor / outdoor)	Fitness: Gym	Fitness: Indoor group activities / Aero	Jogging / running
	n	%	%	%	%	%	%	%	%	%	%
Total sample	891	14.6	7.5	6.3	6.5	5.2	4.1	3.5	5.2	3.7	3.7
Children	386	2.8	16.4	14.2	14.9	5.1	9.0	6.6	1.1	0.2	2.3
Adults	488	19.3	4.3	3.6	3.7	5.3	2.4	2.2	6.6	5.1	4.3
Males	272	13.0	0.4	4.2	12.7	4.5	3.4	1.5	6.6	2.1	4.8
Females	594	16.5	14.7	8.7	0.2	5.9	4.6	5.1	3.7	5.4	2.7
Subregion											
Boort & Surrounds	272	11.4	8.5	13.5	4.2	3.9	2.3	9.0	5.3	5.8	6.0
East Loddon Area	165	8.8	11.9	6.0	8.8	5.6	5.6	0.0	3.4	2.0	1.2
Inglewood / Bridgewater & Surrounds	190	21.6	4.5	2.6	5.5	1.4	2.5	0.2	8.5	3.9	5.1
Pyramid Hill & Surrounds	90	10.3	17.6	5.2	5.0	19.3	7.2	0.0	7.6	4.0	3.4
South Loddon Area	33	19.1	0.0	0.0	9.6	1.8	10.0	0.0	1.8	1.8	0.0
Wedderburn & Surrounds	121	13.5	5.1	2.9	9.8	7.8	4.5	4.4	2.1	1.8	1.1
Demographic indicators											
Household size[2]											
1 person	43	27.2	0.0	2.9	0.0	5.7	0.0	0.0	5.7	4.3	3.3
2 or 3 people	267	23.0	1.4	3.2	0.4	2.4	1.5	1.2	8.2	6.5	4.3
4 or 5 people	151	7.9	11.8	3.0	13.3	10.9	3.3	4.6	4.6	3.6	3.9
More than 5 people	27	16.1	9.9	12.7	0.0	6.4	14.6	6.6	1.3	0.0	9.7
Born overseas	58	28.8	0.0	6.3	0.0	0.9	0.5	0.0	14.1	3.1	5.1
Born in Australia	821	12.6	8.6	6.4	7.6	5.9	4.7	3.8	3.8	3.8	3.5
Speaks other main language*	8	32.4	18.9	5.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Speaks English as main language	867	14.3	7.5	6.3	6.7	5.2	4.2	3.4	4.8	3.8	3.8

Aboriginal and/or Torres Strait Islander	43	11.6	4.8	2.7	7.3	4.5	13.7	2.7	1.3	0.0	0.0
Not Aboriginal or Torres Strait Islander	832	14.8	7.5	6.5	6.6	5.3	3.8	3.4	5.3	3.9	3.9
LGBTQIA+*	19	3.1	3.7	3.7	3.1	3.7	0.0	3.1	8.1	0.0	3.7
Non-LGBTQIA+	858	14.9	7.6	6.4	6.7	5.3	4.2	3.3	5.1	3.8	3.7
Neurodivergent	61	4.9	6.9	9.6	11.4	0.8	5.9	6.1	0.7	11.2	3.6
Not neurodivergent	606	16.6	9.6	7.1	5.4	5.3	2.8	3.7	5.7	2.5	4.9
Maybe	60	7.6	9.0	9.7	9.3	7.0	7.8	6.6	1.4	1.2	1.2
Not sure what neurodivergent means	101	8.9	1.4	2.1	11.2	8.2	5.7	1.4	3.8	2.2	1.5
Less than Bachelor level education[2]	293	18.8	4.2	3.6	4.3	5.1	2.4	2.3	6.4	5.4	3.6
Holds a Bachelor degree or higher	190	20.8	4.8	3.3	1.2	6.3	2.6	1.9	7.7	3.8	7.6
Unemployed/Retired[2]	137	19.7	0.6	3.1	0.0	1.1	1.4	0.8	5.2	10.4	0.0
Employed	350	19.1	5.7	3.8	5.0	6.8	2.8	2.7	7.1	3.2	5.9
Just getting along, poor or very poor[2]	162	20.6	1.3	3.8	6.2	3.0	4.2	0.6	6.5	3.6	4.7
Reasonably comfortable, very comfortable or prosperous	325	18.2	6.5	3.4	1.9	6.9	1.1	3.3	6.7	6.2	4.0
Requires help with daily activities	45	3.6	6.1	4.8	4.3	0.0	12.4	0.0	0.0	9.7	0.0
Does not require help	834	15.3	7.6	6.4	6.7	5.5	3.7	3.5	5.4	3.4	3.9
Food security (last 12 months)[2]											
Low or very low food security	62	19.7	4.1	7.7	6.5	0.0	8.3	0.8	2.7	8.0	3.9
Marginal food security	52	20.3	2.8	5.2	9.0	1.2	0.0	3.2	1.6	1.2	2.7
High food security	373	19.0	4.6	2.6	2.3	6.9	1.7	2.3	8.1	5.2	4.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.8.2.3 Top ten activities by selected health and behaviour characteristics

	Unweighted base[1]	Walking	Netball (indoor / outdoor)	Swimming	Australian Rules Football (AFL)	Tennis (indoor / outdoor)	Active play (at playgrounds / play cent	Hockey (indoor / outdoor)	Fitness: Gym	Fitness: Indoor group activities / Aero	Jogging / running
	n	%	%	%	%	%	%	%	%	%	%
Total sample	891	14.6	7.5	6.3	6.5	5.2	4.1	3.5	5.2	3.7	3.7
Health and wellbeing indicators											
Self-reported health - Fair or poor	70	16.7	5.3	3.2	1.1	3.7	2.3	1.2	1.2	13.4	1.6
Self-reported health - Good, very good, or excellent	700	14.1	7.5	7.6	7.3	6.0	4.0	3.8	5.5	3.2	4.2
Life satisfaction - Low to moderate (0 to 6)[2]	93	26.9	5.0	4.5	3.8	3.0	2.6	2.6	9.3	2.4	1.8
Life satisfaction - High/very high (7 to 10)	323	14.2	3.6	3.9	4.4	6.9	2.6	2.2	5.6	6.9	5.6
Does not feel valued by society[2]	63	16.7	4.7	7.5	0.0	1.4	7.3	3.7	1.0	2.8	6.0
Sometimes feel valued by society	179	22.5	4.6	3.1	2.3	2.8	3.0	2.9	9.2	7.6	1.9
Definitely feel valued by society	183	15.5	3.2	3.7	7.4	10.2	0.5	1.0	5.9	4.8	6.7
Poor mental wellbeing[2]	85	23.1	3.7	7.9	0.0	1.5	1.3	4.9	8.4	6.9	2.5
Good mental wellbeing	403	18.6	4.5	2.7	4.4	6.0	2.6	1.7	6.2	4.7	4.7
Overweight or obese (BMI ≥25.0)	218	21.7	4.3	6.1	1.4	5.6	4.2	1.2	9.9	6.4	4.9
Normal range or underweight (BMI <25.0)	240	6.6	8.1	4.5	12.1	8.5	2.0	4.7	1.9	3.0	4.7
Health behaviour indicators											
Does not meet fruit intake recommendations	349	16.5	5.9	5.0	4.8	4.5	4.2	3.5	8.3	3.3	4.2
Meets fruit intake recommendations	516	13.0	9.0	8.0	8.7	6.1	4.2	3.3	1.9	4.3	3.2
Does not meet vegetable intake recommendations	713	14.8	7.3	6.1	7.1	4.9	4.4	3.3	5.1	3.6	3.9
Meets vegetable intake recommendations	139	15.9	7.5	9.9	4.0	8.1	1.3	3.8	6.2	5.3	2.8
Does not meet aerobic physical activity recommendations	203	17.3	8.4	7.8	8.1	1.8	8.4	4.2	1.5	2.3	0.5

Meets aerobic physical activity recommendations	643	14.6	7.2	6.1	6.4	6.1	2.9	3.2	5.9	4.2	4.6
Does not meet muscle strengthening recommendations	398	16.9	9.3	6.2	6.7	6.3	3.6	4.4	4.0	4.3	3.2
Meets muscle strengthening recommendations	353	14.0	4.4	5.4	5.9	4.7	3.3	1.9	7.4	3.7	5.4
Does not meet screen time recommendations	471	15.2	8.0	7.2	6.1	4.3	4.7	3.0	5.3	3.2	3.0
Meets screen time recommendations	342	14.8	6.7	6.3	7.4	6.9	2.6	4.3	5.0	5.1	5.0
Does not meet sleep recommendations	208	18.6	8.5	5.5	5.7	5.9	4.1	1.8	9.2	1.7	4.0
Meets sleep recommendations	592	14.1	7.2	7.6	7.4	5.6	3.1	4.4	3.9	4.8	3.8
Drinks sugar-sweetened beverages daily	81	16.6	3.6	4.8	10.0	1.4	1.0	4.0	6.0	4.1	2.6
Drinks sugar-sweetened beverages less than daily	764	14.4	8.1	6.8	6.1	5.9	4.4	3.4	5.2	3.9	4.0
Does not meet water recommendations	439	16.2	6.4	6.2	4.9	5.0	3.8	3.4	5.9	3.6	4.4
Meets water consumption recommendations	378	12.3	9.9	8.0	9.5	6.5	4.9	3.6	3.6	4.7	2.9
Risk behaviour indicators[2]											
Current smoker	26	17.6	5.2	8.3	13.7	0.0	0.9	0.0	0.0	1.9	0.0
Ex-smoker	159	20.8	3.4	1.4	5.6	6.7	1.3	0.4	5.9	4.2	5.8
Never smoked	245	17.4	4.7	5.3	1.8	5.9	3.7	3.8	8.1	7.1	4.2
Current vaper*	9	0.0	0.0	0.0	52.1	0.0	0.0	0.0	8.2	0.0	10.5
Ex-vaper	30	4.1	8.1	2.0	21.4	10.7	5.4	3.4	0.8	0.0	0.8
Never vaped	392	20.6	3.9	4.3	1.1	5.4	2.3	2.1	7.2	6.3	4.7
Had more than 4 standard drinks on a single occasion	253	14.0	4.9	3.7	6.5	6.6	2.4	2.1	5.5	3.7	5.2
Has not had more than 4 standard drinks	178	26.5	3.0	4.5	0.0	4.4	2.7	2.4	8.5	8.8	3.4
Gambled	137	15.2	3.4	2.2	8.3	6.2	2.0	1.5	7.2	1.5	3.6
Never gambled	289	21.2	4.3	5.2	1.6	5.7	2.9	2.7	6.4	6.6	5.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.

* Significance testing not conducted due to small base size.

3.8.3. Facilities for sport, exercise and recreational activities

Table 3.8.3 presents the top 20 facilities respondents identified as places where they participate in their main activities. For each facility, the table shows how frequently users engage in the associated activity. This highlights which facilities are used most often (those with a high proportion of daily or weekly users) and where there may be opportunities to increase usage (facilities where users participate monthly or less).

The most commonly identified facility for respondents' main activities was Boort Park, followed by Boort Swimming Pool and Mitchell Park. People who use the following venues for their main activity were more likely to be heavy users of the facility:

- Bridgewater Recreation Reserve (94.1%)
- Mitchell Park (93.5%)
- Bendigo Regional Hockey Complex (89.6%)
- Boort Swimming Pool (87.3%)
- Boort Park (84.7%)

Some of the facilities that were commonly used for main activities but frequented less often (used less than once a month) included:

- Nolen's Park, Boort (35.5%)
- Boort-Yando Cricket Club (32.8%)
- Calivil Recreation Reserve (32.7%)
- Pyramid Hill & District Lawn Tennis Club (32.5%)
- Inglewood Swimming Pool (28.5%)

While lower participation rates may simply reflect the seasonal or naturally irregular nature of certain activities, or the smaller populations served by some facilities (such as those in small towns), it is still valuable to explore opportunities to increase how often these facilities and spaces are used. However, the small sample sizes for some facilities may limit how well these findings represent the broader population, so results should be interpreted with caution.

Table 3.8.3 Main recreational facilities used by frequency of activity

	Unweighted base[1]	Heavy Once a week or more often	Medium 1 to 3 times a month	Light Less than once a month
	n	%	%	%
Top 20 facilities				
Boort Park	71	84.7	9.6	5.7
Boort Swimming Pool	29	87.3	4.7	8.0
Mitchell Park	26	93.5	0.0	6.5
Serpentine Recreation Reserve	24	60.2	36.5	3.3
Inglewood Community Sports Centre	23	74.4	10.7	14.9
Little Lake Boort	19	82.5	15.8	1.6
Inglewood & Districts Health Service (IDHS)	19	73.2	26.8	0.0
Boort Resource & Information Centre (BRIC)	17	78.8	0.0	21.2
Bridgewater Recreation Reserve	17	94.1	5.9	0.0
Donaldson Park	17	72.9	27.1	0.0
Gurri Wanyarra Wellbeing Centre	15	70.9	16.2	13.0
Loddon River	15	24.3	48.0	27.7
Pyramid Hill & District Lawn Tennis Club	15	63.3	4.2	32.5
Calivil Recreation Reserve	13	67.3	0.0	32.7
Nolen's Park, Boort	13	51.1	13.5	35.5
Boort Tennis Club	9	50.9	24.6	24.6
Boort-Yando Cricket Club	9	67.2	0.0	32.8
Inglewood Swimming Pool	7	59.1	12.3	28.5
Wedderburn Swimming Pool	7	65.7	24.2	10.0
Bendigo Regional Hockey Complex	6	89.6	0.0	10.4

[1] Base sizes include respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

3.8.4. Travel to get to and from activities and their facilities

Respondents were asked about the main forms of transport they used to travel to and from their main activities. Table 3.8.4.1 summarises the transport modes used for each activity. Because respondents may use different forms of transport for different activities, and because the transport questions

referred specifically to travel for each activity, the base for this analysis is all activities reported rather than all respondents.

Approximately 65.5% of activities were accessed by car, while around 30.6% were accessed via active transportation, including 26.6% on foot and 4.0% by bicycle. Few (0.3%) used public transport, taxis, or Uber to get to or from their main activities. As might be expected, where the activity is also a mode of transport (walking or cycling), respondents often mentioned accessing their activity via this same mode. The following activities were almost always accessed via car:

- Tennis (98.1%)
- Cricket (96.9%)
- Fishing (93.3%)
- Swimming (90.0%)

Of the main activities that residents had participated in, residents had travelled the furthest to go fishing (83.5 kilometres on average). Residents had to travel the least distance for weightlifting (2.5 kilometres), walking (3.4 kilometres) and lawn bowls (9.5 kilometres), making these accessible activity options.

Table 3.8.4.1 Travel to and from main activities

	Unweighted base[1]	Car	Walking	Bicycle	Public transport / taxi / Uber	Average kilometres travelled[2]
	n	%	%	%	%	#
Total sample	**825**	**65.5**	**26.6**	**4.0**	**0.3**	**19.0**
Subregion						
Boort & Surrounds	263	64.2	30.4	3.4	0.3	19.5
East Loddon Area	155	72.3	19.4	4.5	1.2	24.2
Inglewood / Bridgewater & Surrounds	173	62.7	32.9	0.6	0.0	17.2
Pyramid Hill & Surrounds	85	70.5	25.5	2.6	0.6	19.9
South Loddon Area	28	65.0	15.1	10.8	0.0	19.0
Wedderburn & Surrounds	105	67.0	18.5	7.1	0.0	15.8
Top 20 activities						
Walking	98	14.8	81.6	0.5	0.0	3.4
Netball (indoor / outdoor)	92	86.5	13.5	0.0	0.0	17.1
Swimming	67	90.0	7.8	1.2	0.0	32.8
Australian Rules Football (AFL)	57	86.6	11.1	1.5	0.8	15.4
Tennis (indoor / outdoor)	49	98.1	1.9	0.0	0.0	15.1
Active play (at playgrounds / play centres)	37	56.7	34.0	0.0	1.8	12.3
Hockey (indoor / outdoor)	38	79.5	20.5	0.0	0.0	24.5
Fitness: Gym	35	64.2	34.3	0.0	0.0	32.6
Fitness: Indoor group activities / Aerobics	33	73.0	20.7	0.0	0.0	18.3
Jogging / running	28	54.5	35.3	0.0	1.3	11.4
Cricket (all types)	24	96.9	1.5	1.5	0.0	19.7
Lawn bowls	22	87.1	12.9	0.0	0.0	9.5
Basketball (indoor / outdoor)	21	60.3	36.2	3.5	0.0	14.7
Bush walking / Hiking	20	32.1	56.9	0.0	0.0	12.7
Cycling: General cycling for recreation	17	10.3	0.0	75.7	0.0	18.0

Fitness: Outdoor fitness / Personal training	13	28.6	68.7	0.0	2.7	13.3
Golf	19	88.7	11.3	0.0	0.0	13.1
Horse riding / equestrian activities /	12	53.9	26.5	0.0	0.0	35.3
Fishing	12	93.3	4.3	2.4	0.0	83.5
Weightlifting / Body building	9	35.7	24.6	0.0	0.0	2.5

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

[2] The unweighted base for kilometres travelled differs from mode of transport base because it is a separate variable, and some respondents did not provide a response to this question.

Table 3.8.4.2 shows the average travel distance to get to particular facilities was 19.0 kilometres.

Across Loddon Shire, residents of East Loddon Area travelled the furthest on average to access their activities (24.2 kilometres). Residents of East Loddon Area were also the most likely to travel by car to reach the facilities they used for their main activities. In contrast, residents of Inglewood/Bridgewater and Surrounds were the most likely to walk as their primary mode of travel (33%)

The facilities/spaces that residents most frequently reported travelling to by car were those that are used primarily for fitness and indoor sports, including:

- Pyramid Hill & District Lawn Tennis Club (100%)
- Gurri Wanyarra Wellbeing Centre (100%)
- Wedderburn Swimming Pool (100%)
- Bendigo Regional Hockey Complex (100%)

Conversely, residents most frequently reported walking to the following facilities/spaces that are typically used for more unstructured recreational activities:

- Little Lake Boort (78.2%)
- Nolen's Park Boort (66.3%)
- Mitchell Park (45.8%)
- Boort Resource & Information Centre (41.0%)

Lake Little Boort was the destination with the highest percentage of cycling as a method of travel (7.1%). Residents were travelling furthest to get to Bendigo Regional Hockey Complex (107.0 kilometres), followed by Gurri Wanyarra Wellbeing Centre (63.2 Kilometres).

Table 3.8.4.2 Travel to and from main activity facilities

	Unweighted base[1]	Car	Walking	Bicycle	Public transport / taxi / Uber	Average kms travelled[2]
	n	%	%	%	%	#
Total sample	**825**	**65.5**	**26.6**	**4.0**	**0.3**	**19.0**
Top 20 facilities						
Boort Park	71	77.7	19.8	1.7	0.8	12.8
Boort Swimming Pool	30	86.8	9.9	3.3	0.0	12.8
Mitchell Park	25	54.2	45.8	0.0	0.0	13.0
Serpentine Recreation Reserve	24	72.0	24.8	3.3	0.0	10.0
Inglewood Community Sports Centre	19	79.9	20.1	0.0	0.0	4.0
Little Lake Boort	20	14.7	78.2	7.1	0.0	1.9
Inglewood & Districts Health Service (IDHS)	15	73.5	26.5	0.0	0.0	21.2
Boort Resource & Information Centre (BRIC)	15	59.0	41.0	0.0	0.0	1.5
Bridgewater Recreation Reserve	17	97.1	1.8	1.1	0.0	11.2
Donaldson Park	17	76.6	23.4	0.0	0.0	4.3
Gurri Wanyarra Wellbeing Centre	14	100.0	0.0	0.0	0.0	63.2
Loddon River	11	82.9	14.0	3.1	0.0	5.8
Pyramid Hill & District Lawn Tennis Club	15	100.0	0.0	0.0	0.0	13.4
Calivil Recreation Reserve	13	94.1	5.9	0.0	0.0	7.2
Nolen's Park, Boort	13	33.7	66.3	0.0	0.0	4.7
Boort Tennis Club	9	82.5	17.5	0.0	0.0	5.4
Boort-Yando Cricket Club	9	93.4	6.6	0.0	0.0	19.0
Inglewood Swimming Pool	6	77.3	22.7	0.0	0.0	11.0
Wedderburn Swimming Pool	7	100.0	0.0	0.0	0.0	9.9
Bendigo Regional Hockey Complex	6	100.0	0.0	0.0	0.0	107.0

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

[2] The unweighted base for kilometres travelled differs from mode of transport base because it is a separate variable, and some respondents did not provide a response to this question.

3.8.5. Quality and accessibility of facilities available for main activities

Respondents rated the quality and accessibility of the facilities they used for each activity on a five-point scale: *Excellent, Good, Average, Poor, and Very Poor*. For analysis, the ratings were grouped into two categories: *Average, Poor, and Very Poor* were combined into one group, and *Good and Excellent* were combined into another. Tables 3.8.5.1 and 3.8.5.2 present these results according to facilities where people engaged in the most reported activities.

The highest quality ratings were received for the facilities or spaces where people participated in fitness related activities, including gym, indoor group activities and personal training, as well as lawn bowls. These facilities also received the highest accessibility ratings, except for those used for indoor group fitness activities. Instead, facilities used for golf were rated as highly accessible.

The lowest ratings for quality were received for jogging/running, horse riding/equestrian activities and bushwalking/hiking. Accessibility ratings differed, with facilities used for basketball, horse riding/equestrian activities and general or recreational cycling rated as least accessible. Reviewing the suggested improvements for these facilities will go some way to understanding low quality and accessibility ratings for these facilities (refer to Section 5.4).

Table 3.8.5.1 Quality of facilities by activity

	Unweighted base[1]	Very poor to average quality	Good to excellent quality
	N	%	%
Top 20 activities			
Walking	105	37.5	62.5
Netball (indoor / outdoor)	94	25.1	74.9
Swimming	67	34.1	65.9
Australian Rules Football (AFL)	61	37.6	62.4
Tennis (indoor / outdoor)	49	34.8	65.2
Active play (at playgrounds / play centres)	39	41.0	59.0
Hockey (indoor / outdoor)	39	31.6	68.4
Fitness: Gym	38	33.0	67.0
Fitness: Indoor group activities / Aerobics	33	19.5	80.5
Jogging / running	27	46.1	53.9
Cricket (all types)	24	38.2	61.8
Lawn bowls	22	11.1	88.9
Basketball (indoor / outdoor)	21	33.2	66.8
Bush walking / Hiking	20	44.4	55.6
Cycling: General cycling for recreation	7	34.4	65.6
Fitness: Outdoor fitness / Personal training	18	12.4	87.6
Golf	19	28.4	71.6
Horse riding / equestrian activities /	12	45.8	54.2

Fishing	11	39.1	60.9
Weightlifting / Body building	12	24.6	75.4

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Table 3.8.5.2 Accessibility of facilities by activity

	Unweighted base[1]	Very poor to average access	Good to excellent access
	N	%	%
Top 20 activities			
Walking	105	28.0	72.0
Netball (indoor / outdoor)	94	24.5	75.5
Swimming	68	41.9	58.1
Australian Rules Football (AFL)	61	19.2	80.8
Tennis (indoor / outdoor)	49	15.0	85.0
Active play (at playgrounds / play centres)	39	16.1	83.9
Hockey (indoor / outdoor)	39	20.0	80.0
Fitness: Gym	37	23.9	76.1
Fitness: Indoor group activities / Aerobics	31	13.9	86.1
Jogging / running	27	27.8	72.2
Cricket (all types)	24	22.8	77.2
Lawn bowls	22	0.0	100.0
Basketball (indoor / outdoor)	21	45.7	54.3
Bush walking / Hiking	19	29.2	70.8
Cycling: General cycling for recreation	7	42.4	57.6
Fitness: Outdoor fitness / Personal training	18	9.6	90.4
Golf	19	1.6	98.4
Horse riding / equestrian activities /	11	43.0	57.0
Fishing	12	33.1	66.9
Weightlifting / Body building	12	15.1	84.9

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

3.8.6. Quality and accessibility of specific facilities

Tables 3.8.6.1 and 3.8.6.2 show the quality and accessibility ratings provided for the top 20 facilities, venues and places respondents had used for their main activities in the last 12 months.

The five facilities or spaces with the highest proportion of good and excellent ratings for quality were:

- Inglewood & Districts Health Service (100%)
- Gurri Wanyarra Wellbeing Centre (100%)
- Bendigo Regional Hockey Complex (100%)
- Wedderburn Swimming Pool (93.8%)
- Mitchell Park (85.6%)

Conversely, the facilities or spaces with the lowest proportion of respondents rating them as good or excellent in quality are:

- Bridgewater Recreation Reserve (37.4%)
- Boort Swimming Pool (47.3%)
- Inglewood Community Sports Centre (51.3%)
- Boort Resource & Information Centre (57.4%)
- Calivil Recreation Reserve (61.4%)

Overall, accessibility ratings were similar to quality ratings for facilities and spaces where people engage in sports, exercise and recreational activities, with the following being reported as the top ranked facilities for accessibility:

- Little Lake Boort (100.0%)
- Inglewood Community Sports Centre (100%)
- Inglewood & District Health Service (100%)
- Calivil Recreation Reserve (100%)
- Wedderburn Swimming Pool (100%)
- Bendigo Regional Hockey Centre (100%)

Different facilities appeared among the five lowest rated facilities for accessibility; however, Boort Swimming Pool and Inglewood Community Sports Centre appeared in both the lowest quality and lowest accessibility lists. The facilities or spaces with the lowest proportion of respondents rating them as good or excellent in accessibility were:

- Boort Swimming Pool (31.2%)
- Boort-Yando Cricket Club (42.9%)
- Boort Tennis Club (63.1%)
- Inglewood Community Sports Centre (67.9%)
- Serpentine Recreation Reserve and Loddon River (74.4%)

Understanding which facilities and spaces receive the lowest ratings from users helps identify where improvements to quality and accessibility are most needed. Importantly, gathering this feedback ensures that future investments align with actual community needs, rather than relying solely on usage patterns or

assumptions about what people value. This helps avoid misdirected spending and supports more effective, targeted upgrades. In turn, addressing these user-identified issues can increase participation, reduce barriers to access, and contribute to a more positive and inclusive overall user experience. More nuanced feedback and suggested improvements to facilities and spaces are presented in Section 5.4.3.

Table 3.8.6.1 Quality ratings for most used facilities or spaces

	Unweighted base[1]	Very poor to average quality	Good to excellent quality
	N	%	%
Top 20 facilities			
Boort Park	71	32.3	67.7
Boort Swimming Pool	30	52.7	47.3
Mitchell Park	25	14.4	85.6
Serpentine Recreation Reserve	24	31.6	68.4
Inglewood Community Sports Centre	23	48.7	51.3
Little Lake Boort	20	24.0	76.0
Inglewood & Districts Health Service (IDHS)	19	0.0	100.0
Boort Resource & Information Centre (BRIC)	17	42.6	57.4
Bridgewater Recreation Reserve	17	62.6	37.4
Donaldson Park	17	37.0	63.0
Gurri Wanyarra Wellbeing Centre	15	0.0	100.0
Loddon River	15	25.6	74.4
Pyramid Hill & District Lawn Tennis Club	15	23.8	76.2
Calivil Recreation Reserve	13	38.6	61.4
Nolen's Park, Boort	13	15.9	84.1
Boort Tennis Club	9	31.6	68.4
Boort-Yando Cricket Club	9	37.6	62.4
Inglewood Swimming Pool	7	20.9	79.1
Wedderburn Swimming Pool	7	6.2	93.8
Bendigo Regional Hockey Complex	6	0.0	100.0

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Table 3.8.6.2 Accessibility ratings for most used facilities or spaces

	Unweighted base[1]	Very poor to average access	Good to excellent access
	N	%	%
Top 20 facilities			

Boort Park	71	24.9	75.1
Boort Swimming Pool	30	68.8	31.2
Mitchell Park	25	18.9	81.1
Serpentine Recreation Reserve	24	25.6	74.4
Inglewood Community Sports Centre	23	32.1	67.9
Little Lake Boort	20	0.0	100.0
Inglewood & Districts Health Service (IDHS)	19	0.0	100.0
Boort Resource & Information Centre (BRIC)	17	18.9	81.1
Bridgewater Recreation Reserve	17	3.0	97.0
Donaldson Park	17	22.5	77.5
Gurri Wanyarra Wellbeing Centre	15	13.5	86.5
Loddon River	15	25.6	74.4
Pyramid Hill & District Lawn Tennis Club	15	16.3	83.7
Calivil Recreation Reserve	13	0.0	100.0
Nolen's Park, Boort	13	9.9	90.1
Boort Tennis Club	9	36.9	63.1
Boort-Yando Cricket Club	9	57.1	42.9
Inglewood Swimming Pool	7	20.9	79.1
Wedderburn Swimming Pool	7	0.0	100.0
Bendigo Regional Hockey Complex	6	0.0	100.0

[1] Base sizes include all activities mentioned by respondents aged 3 years and over living in the Loddon Shire. Results are weighted to population benchmarks and exclude ‘Not answered’ / ‘Not applicable’ responses from base sizes.

3.9. Perceived ease of being physically active in local area

Respondents were asked about their perceived ease of being physically active in their local area, with response options ranging from strongly agree to strongly disagree. Table 3.9.1 provides a detailed overview of responses according to selected demographic characteristics. Overall, 63.2% reported agreeing that it was easy to be physically active in their local area. No differences were observed between children and adults, or between males and females overall. When looking at responses by sex and age, females aged 12 to 17 years (69.8%) and 70 years and over (84.4%) were more likely to agree that it was easy to be physically active in their local area, while agreement was lower among females aged 18 to 69 years.

A greater proportion of respondents from Boort & Surrounds (74.5%) agreed that it was easy to be physically active in their local area compared to respondents from East Loddon Area (50.6%). The following demographic groups were less likely to agree that it was easy to be physically active in their local area and may benefit from targeted interventions to increase awareness of opportunities for local physical activity:

- Neurodivergent (40.5%) compared to not sure what neurodivergent means (72.6%)
- Required help with daily activities (28.3%) compared to did not require help (66.2%)
- Low or very low food security (33.5%) compared to high food security (70.7%)

Table 3.9.1 Perceived ease of being physically active in local area by selected demographic characteristics

	Unweighted base[1]	Strongly agree/ Agree	Neutral	Strongly disagree / Disagree
	n	%	%	%
Total sample	**605**	**63.2**	**20.3**	**16.5**
Children	208	63.7	19.6	16.7
Adults	390	62.9	20.4	16.7
Males	183	66.7	19.8	13.5
Females	406	60.0	20.9	19.1
Sex and age				
Males, 3 to 11	33	63.6	24.2	12.1
Males, 12 to 17	61	65.6	16.4	18.0
Males, 18 to 34	13	43.3	43.2	13.5
Males, 35 to 49	16	41.2	41.5	17.2
Males, 50 to 69	27	79.0	11.8	9.2
Males, 70+	31	72.9	8.8	18.3
Females, 3 to 11	43	62.8	20.9	16.3
Females, 12 to 17	63	69.8	15.9	14.3
Females, 18 to 34	57	44.7	23.6	31.7
Females, 35 to 49	68	51.0	23.1	25.9
Females, 50 to 69	120	59.3	22.3	18.4
Females, 70+	53	84.4	11.9	3.7
Subregion				

Boort & Surrounds	155	74.5	18.5	7.1
East Loddon Area	105	50.6	22.7	26.7
Inglewood / Bridgewater & Surrounds	146	60.5	24.7	14.8
Pyramid Hill & Surrounds	58	64.3	19.7	16.1
South Loddon Area	25	71.4	23.7	4.9
Wedderburn & Surrounds	107	60.0	12.3	27.7
Demographic indicators				
Household size[2]				
1 person	49	75.3	9.0	15.7
2 or 3 people	209	61.2	22.9	15.9
4 or 5 people	106	56.2	23.2	20.6
More than 5 people	26	68.2	21.4	10.4
Born overseas	39	61.2	19.3	19.5
Born in Australia	564	63.3	20.5	16.2
Speaks other main language*	5	37.6	0.0	62.4
Speaks English as main language	595	63.7	20.2	16.2
Aboriginal and/or Torres Strait Islander*	24	50.0	11.4	38.6
Not Aboriginal or Torres Strait Islander	577	63.6	20.7	15.8
LGBTQIA+*	15	49.4	24.2	26.4
Non-LGBTQIA+	584	63.1	20.5	16.4
Neurodivergent	49	40.5	31.1	28.3
Not neurodivergent	384	63.2	21.2	15.6
Maybe	44	51.4	25.0	23.7
Not sure what neurodivergent means	80	72.6	15.5	11.9
Less than Bachelor level education[2]	255	62.1	22.0	15.8
Holds a Bachelor degree or higher	131	64.9	12.1	23.0
Unemployed/Retired[2]	135	61.7	14.2	24.1
Employed	252	63.0	23.9	13.1
Just getting along, poor or very poor[2]	141	54.9	22.6	22.5
Reasonably comfortable, very comfortable or prosperous	246	68.0	19.2	12.9
Requires help with daily activities	46	28.3	17.2	54.6
Does not require help	557	66.2	20.6	13.1
Food security (last 12 months)[2]				
Low or very low food security	61	33.5	27.3	39.1
Marginal food security	54	59.2	27.4	13.4
High food security	273	70.7	17.5	11.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 3.9.2 presents the findings by selected health and behaviour characteristics. Differences were seen for all health and wellbeing indicators, except BMI status. Specifically, a lower proportion of those with fair

or poor health (40.8% vs 68.5%), with low to moderate life satisfaction (45.7% vs 72.4%), who did not feel valued by society (41.3% vs definitely [86.8%]) or sometimes felt valued by society (56.8% vs definitely [86.8%]), and had poor mental wellbeing (36.5% vs 69.0%) agreed that it was easy to be physically active in their local area compared to their counterparts with more positive health and wellbeing indicators.

No significant differences were seen by health behaviour or risk behaviour indicators in perceived ease of being physically active in the local area.

Table 3.9.2 Perceived ease of being physically active in local area by selected health and behaviour characteristics

	Unweighted base[1]	Strongly agree/ Agree	Neutral	Strongly disagree / Disagree
	n	%	%	%
Total sample	**605**	**63.2**	**20.3**	**16.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	89	40.8	17.1	42.1
Self-reported health - Good, very good, or excellent	434	68.5	20.7	10.8
Life satisfaction - Low to moderate (0 to 6)[2]	94	45.7	29.8	24.5
Life satisfaction - High/very high (7 to 10)	232	72.4	15.3	12.3
Does not feel valued by society[2]	69	41.3	22.6	36.0
Sometimes feel valued by society	145	56.8	28.2	15.0
Definitely feel valued by society	121	86.8	8.5	4.7
Poor mental wellbeing[2]	84	36.5	24.7	38.7
Good mental wellbeing	306	69.0	19.4	11.6
Overweight or obese (BMI ≥25.0)	168	63.9	16.3	19.7
Normal range or underweight (BMI <25.0)	126	74.0	15.8	10.2
Health behaviour indicators				
Does not meet fruit intake recommendations	300	57.9	22.7	19.5
Meets fruit intake recommendations	292	69.5	17.3	13.1
Does not meet vegetable intake recommendations	497	61.9	21.4	16.7
Meets vegetable intake recommendations	82	76.1	10.8	13.1
Does not meet aerobic physical activity recommendations	188	54.1	21.7	24.2
Meets aerobic physical activity recommendations	384	66.5	19.2	14.4
Does not meet muscle strengthening recommendations	297	60.9	22.1	17.0
Meets muscle strengthening recommendations	202	66.4	13.6	19.9
Does not meet screen time recommendations	320	59.4	19.7	20.9
Meets screen time recommendations	228	70.5	17.0	12.4
Does not meet sleep recommendations	172	54.7	24.7	20.6
Meets sleep recommendations	371	68.9	16.2	14.9

Drinks sugar-sweetened beverages daily	73	57.7	25.7	16.5
Drinks sugar-sweetened beverages less than daily	502	65.0	18.6	16.4
Does not meet water recommendations	329	64.0	21.4	14.7
Meets water consumption recommendations	222	63.8	14.7	21.4
Risk behaviour indicators[2]				
Current smoker	28	55.2	21.9	22.9
Ex-smoker	124	59.9	24.8	15.2
Never smoked	188	68.2	15.7	16.1
Current vaper*	10	21.0	72.2	6.8
Ex-vaper	20	83.3	2.0	14.7
Never vaped	310	63.1	19.3	17.5
Had more than 4 standard drinks on a single occasion	187	62.3	23.1	14.7
Has not had more than 4 standard drinks	154	64.9	14.5	20.6
Gambled	104	63.9	16.9	19.1
Never gambled	234	62.3	21.6	16.0

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4. Diet

The following section summarises the findings regarding a range of dietary factors that respondents were asked about. This includes food security, fruit and vegetable consumption and barriers to consuming sufficient volumes of fruit and vegetables, water intake, sugar-sweetened beverage consumption and perceived ease of access to healthy food in the local area. Results in this section are for all respondents, unless otherwise indicated, and weighting has been applied.

4.1. Food security

Food security was measured using the valid and widely used 10-item USDA food security module[10]. Respondents were asked a series of 10 questions regarding their experiences over the 12 months prior to survey completion. Questions focused on worrying about food running out, food not lasting and inability to afford more, affordability of balanced meals, cutting meal size or skipping meals due to lack of money, eating less than felt needed, hunger due to inability to afford food, weight loss due to lack of food, and frequency of these experiences. Respondents were categorised as having high food security if they provided no indications of food-access problems or limitations, and marginal food security if they reported some concern or anxiety about food sufficiency but little or no actual change in diet or food intake. Conversely, respondents were categorised as having low food security if they reported a reduced quality and/or variety of their diet, and very low food security if they reported disrupted eating patterns and reduced intake.

Table 4.1.1 provides a summary of food security among 2025 Loddon Shire ALC respondents according to their demographic characteristics. Overall, 70.2% of respondents had high food security, while 10.3% had low food security and 6.7% had very low food security. No differences were seen between males and females overall. By sex and age, females aged 70 years and over were more likely to report high food security than females aged 18 to 69 years (89.8% vs 55.6% to 72.2%).

Food security varied by household financial status, with respondents who were just getting along, poor or very poor more likely to report low food security (22.7% vs 1.6%) and very low food security (15.0% vs 0.9%) than those who were reasonably comfortable, very comfortable or prosperous. Conversely, this group was less likely to report high food security (42.2% vs 89.7%).

Table 4.1.1 Adult food security by selected demographic characteristics

	Unweighted base[1]	High food security	Marginal food security	Low food security	Very low food security
	n	%	%	%	%
Total sample	**393**	**70.2**	**12.9**	**10.3**	**6.7**
Sex and age					
Males	89	71.3	11.7	8.9	8.1
Females	299	69.2	14.2	12.1	4.5
Males, 18 to 34	13	59.4	16.2	10.8	13.5
Males, 35 to 49	16	68.0	17.2	7.4	7.4
Males, 50 to 69	27	71.0	11.8	7.5	9.6

[10] **U.S. Department of Agriculture, Economic Research Service**. (2012). U.S. Household Food Security Survey Module: Three-Stage Design, With Screeners. September 2012 Revision. https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/survey-tools

Males, 70+	33	79.7	6.6	10.4	3.3
Females, 18 to 34	58	55.6	25.8	14.3	4.3
Females, 35 to 49	68	59.9	13.9	16.7	9.5
Females, 50 to 69	121	72.2	12.9	11.0	3.9
Females, 70+	52	89.8	2.3	7.1	0.8
Subregion					
Boort & Surrounds	98	72.2	16.3	8.2	3.2
East Loddon Area	48	70.2	9.7	5.1	15.0
Inglewood / Bridgewater & Surrounds	117	77.4	8.8	10.2	3.5
Pyramid Hill & Surrounds	26	70.1	14.4	12.0	3.4
South Loddon Area	19	57.4	29.1	13.5	0.0
Wedderburn & Surrounds	81	61.5	11.7	12.0	14.8
Demographic indicators					
Household size					
1 person	49	72.2	7.4	3.3	17.1
2 or 3 people	210	74.0	12.5	10.7	2.8
4 or 5 people	107	61.8	18.8	11.1	8.3
More than 5 people	27	65.8	7.9	22.3	4.0
Born overseas	38	68.0	14.2	9.0	8.8
Born in Australia	355	70.5	12.7	10.4	6.4
Speaks other main language*	4	41.0	33.9	25.1	0.0
Speaks English as main language	387	70.3	12.7	10.2	6.7
Aboriginal and/or Torres Strait Islander*	11	13.1	39.2	27.5	20.2
Not Aboriginal or Torres Strait Islander	379	71.5	12.3	9.9	6.3
LGBTQIA+*	9	23.3	17.5	14.9	44.3
Non-LGBTQIA+	382	70.6	12.9	10.3	6.2
Neurodivergent	26	43.6	10.2	33.9	12.3
Not neurodivergent	249	71.2	14.5	9.6	4.6
Maybe	20	48.2	24.6	13.0	14.2
Not sure what neurodivergent means	60	64.4	14.5	9.8	11.2
Less than Bachelor level education	260	69.9	11.9	11.7	6.5
Holds a Bachelor degree or higher	131	71.0	19.1	1.9	8.0
Unemployed/Retired	139	68.8	7.7	14.1	9.3
Employed	253	70.7	15.7	8.3	5.3
Just getting along, poor or very poor	142	42.2	20.2	22.7	15.0
Reasonably comfortable, very comfortable or prosperous	249	89.7	7.8	1.6	0.9
Requires help with daily activities*	24	49.8	12.2	22.2	15.8
Does not require help	367	71.6	13.0	9.4	6.0

[1] Base sizes include respondents aged 18 years and above living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Table 4.1.2 provides an overview of food security according to selected health and behaviour characteristics of the 2025 Loddon Shire ALC sample. Differences in food security were observed across some health and wellbeing indicators and health behaviour indicators. High food security was lower among respondents from the following groups:

- Low to moderate life satisfaction (47.8%) compared to high or very high life satisfaction (78.6%)
- Did not feel valued by society (40.1%) compared to sometimes (71.6%) or definitely (85.1%) felt valued by society
- Poor mental wellbeing (38.6%) compared to good mental wellbeing (77.4%)
- Did not meet fruit intake recommendations (64.0%) compared to those who met the recommendations (80.4%)
- Did not meet vegetable intake recommendations (68.1%) compared to those who met the recommendations (94.4%)

No risk behaviour indicators were associated with food security.

Table 4.1.2 Adult food security by selected health and behaviour characteristics

	Unweighted base[1]	High food security	Marginal food security	Low food security	Very low food security
	n	%	%	%	%
Total sample	**393**	**70.2**	**12.9**	**10.3**	**6.7**
Health and wellbeing indicators					
Self-reported health - Fair or poor	77	52.6	12.1	21.9	13.5
Self-reported health - Good, very good, or excellent	259	73.5	13.1	7.4	5.9
Life satisfaction - Low to moderate (0 to 6)	94	47.8	16.4	19.1	16.7
Life satisfaction - High/very high (7 to 10)	233	78.6	11.7	6.5	3.2
Does not feel valued by society	69	40.1	18.0	22.8	19.0
Sometimes feel valued by society	145	71.6	9.5	11.4	7.5
Definitely feel valued by society	121	85.1	13.7	1.2	0.0
Poor mental wellbeing	84	38.6	16.2	23.2	21.9
Good mental wellbeing	309	77.4	12.1	7.3	3.2
Overweight or obese (BMI ≥25.0)	147	67.2	14.6	13.2	5.0
Normal range or underweight (BMI <25.0)	79	75.7	14.2	3.1	7.0
Health behaviour indicators					
Does not meet fruit intake recommendations	229	64.0	13.5	14.5	8.0
Meets fruit intake recommendations	161	80.4	11.9	3.2	4.4
Does not meet vegetable intake recommendations	337	68.1	13.5	11.4	7.0
Meets vegetable intake recommendations	48	94.4	3.2	0.0	2.4
Does not meet aerobic physical activity recommendations	104	68.2	15.5	9.4	6.9
Meets aerobic physical activity recommendations	274	70.8	11.7	10.6	6.9
Does not meet muscle strengthening recommendations	194	66.2	14.0	10.6	9.1

Meets muscle strengthening recommendations	152	77.1	11.1	7.7	4.1
Does not meet screen time recommendations	192	75.2	6.7	11.8	6.3
Meets screen time recommendations	168	65.3	17.3	9.0	8.5
Does not meet sleep recommendations	109	58.6	16.0	15.7	9.8
Meets sleep recommendations	243	75.6	10.3	8.1	6.0
Drinks sugar-sweetened beverages daily	58	58.1	13.1	16.3	12.5
Drinks sugar-sweetened beverages less than daily	311	72.1	12.9	9.0	6.1
Does not meet water recommendations	228	69.3	11.1	11.5	8.2
Meets water consumption recommendations	133	72.2	17.1	7.1	3.6
Risk behaviour indicators[2]					
Current smoker	28	50.1	10.4	20.0	19.5
Ex-smoker	124	72.8	15.7	9.3	2.3
Never smoked	190	72.0	10.6	9.6	7.8
Current vaper*	10	47.7	11.5	36.3	4.5
Ex-vaper	20	68.7	16.0	8.2	7.1
Never vaped	312	70.5	12.2	9.8	7.5
Had more than 4 standard drinks on a single occasion	188	70.5	12.0	9.4	8.1
Has not had more than 4 standard drinks	155	68.6	13.1	12.1	6.2
Gambled	104	68.7	14.6	8.1	8.6
Never gambled	236	69.8	11.5	11.9	6.8

[1] Base sizes include respondents aged 18 years and above living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

4.2. Fruit and vegetable consumption

The Australian Dietary Guidelines[11] recommend daily servings of fruit and vegetables for each age group to support health and wellbeing. One serve of vegetables equals ½ cup cooked vegetables or 1 cup of salad vegetables, and a serve of legumes or beans is ½ cup cooked, dried, or canned beans, peas, or lentils. One serve of fruit equals 1 medium piece, 2 small pieces, or 1 cup of diced fruit.

For vegetables, children aged 3 should have 2.5 serves, ages 4-8 should have 4.5 serves, and ages 9-11 should have 5 serves. Females aged 12 and over require 5 serves, while males need 5 serves at age 70+, 5.5 serves at ages 12-18 and 51-70, and 6 serves at ages 19-50. For fruit, children aged 3 should have 1 serve, ages 4-8 should have 1.5 serves, and everyone aged 9 and over should have 2 serves. The table below contains the detailed recommendations by age and sex.

Recommended daily consumption	Fruit	Vegetables
Toddlers and children		
Boys and girls 3 years	1	2.5
Boys and girls aged 4 to 8 years	1.5	4.5

[11] **National Health and Medical Research Council** (2013) Australian Dietary Guidelines. Canberra: Australian Government Department of Health and Aged Care. https://www.health.gov.au/resources/publications/the-australian-dietary-guidelines

Boys and girls aged 9 to 11 years	2	5
Adolescents		
Girls aged 12 to 18 years	2	5
Boys aged 12 to 18 years	2	5.5
Adults		
Women aged 19 years and over	2	5
Men aged 19 to 50 years	2	6
Men aged 51 to 70 years	2	5.5
Men aged over 70 years	2	5

4.2.1. Fruit consumption

As shown in Table 4.2.1.1, the average serves of fruit per day for residents of Loddon Shire was 1.5, which is below the recommended daily intake, and less than half (43.4%) meet the age-specific fruit intake recommendations. Among adults, 37.5% of the 2025 Loddon Shire ALC sample met their recommendation, compared with 46.0% in the 2019 ALC. In addition, 36.7% of adults in the 2023 VPHS and 44.7% in the 2022 NHS Victoria-wide samples met the fruit consumption guidelines. These differences may reflect variations in methodology and data collection years, so comparisons should be interpreted with caution.

Average daily fruit consumption was higher among children than adults (2.2 vs 1.4 serves). No significant differences were observed between children and adults, or between males and females, in meeting the guideline. A greater proportion of children and adolescents, as well as older adults aged 70 years and above, met the fruit consumption recommendations compared to adults aged 18 to 69 years. A lower proportion of people with low or very low food security (16.9%) reported consuming the recommended serves of fruit compared to high food security (42.8%).

Table 4.2.1.1 Fruit consumption by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily serves
	n	%	%	#
Total sample	**606**	**56.6**	**43.4**	**1.5**
Children	214	33.4	66.6	2.2
Adults	392	62.5	37.5	1.4
Males	186	57.9	42.1	1.5
Females	408	54.7	45.3	1.6
Sex and age				
Males, 3 to 11	35	17.1	82.9	2.7
Males, 12 to 17	62	50.0	50.0	1.9
Males, 18 to 34	13	51.4	48.6	1.4
Males, 35 to 49	16	76.0	24.0	1.1
Males, 50 to 69	27	77.4	22.6	1.2
Males, 70+	33	46.1	53.9	1.6
Females, 3 to 11	46	28.3	71.7	2.1
Females, 12 to 17	63	36.5	63.5	2.3

Females, 18 to 34	58	66.0	34.0	1.4
Females, 35 to 49	68	69.5	30.5	1.2
Females, 50 to 69	120	62.1	37.9	1.4
Females, 70+	53	40.9	59.1	1.6
Subregion				
Boort & Surrounds	97	59.8	40.2	1.3
East Loddon Area	47	54.6	45.4	1.7
Inglewood / Bridgewater & Surrounds	118	60.7	39.3	1.3
Pyramid Hill & Surrounds	26	77.4	22.6	1.4
South Loddon Area	19	75.2	24.8	1.1
Wedderburn & Surrounds	81	62.5	37.5	1.4
Demographic indicators				
Household size[2]				
1 person	49	67.1	32.9	1.3
2 or 3 people	209	63.0	37.0	1.4
4 or 5 people	106	62.5	37.5	1.3
More than 5 people	28	46.1	53.9	1.4
Born overseas	40	69.1	30.9	1.3
Born in Australia	564	55.5	44.5	1.6
Speaks other main language*	5	85.1	14.9	1.2
Speaks English as main language	597	56.4	43.6	1.5
Aboriginal and/or Torres Strait Islander*	24	59.9	40.1	1.5
Not Aboriginal or Torres Strait Islander	580	56.5	43.5	1.5
LGBTQIA+*	14	68.6	31.4	1.6
Non-LGBTQIA+	586	56.1	43.9	1.6
Neurodivergent	49	66.5	33.5	1.4
Not neurodivergent	386	54.6	45.4	1.6
Maybe	44	47.7	52.3	1.9
Not sure what neurodivergent means	76	68.2	31.8	1.3
Less than Bachelor level education[2]	258	65.2	34.8	1.3
Holds a Bachelor degree or higher	130	50.0	50.0	1.6
Unemployed/Retired[2]	138	62.3	37.7	1.3
Employed	251	63.4	36.6	1.4
Just getting along, poor or very poor[2]	141	65.5	34.5	1.3
Reasonably comfortable, very comfortable or prosperous	247	61.1	38.9	1.4
Requires help with daily activities	49	43.6	56.4	1.7
Does not require help	553	58.3	41.7	1.5
Food security (last 12 months)[2]				
Low or very low food security	60	83.1	16.9	1.0
Marginal food security	54	65.6	34.4	1.2
High food security	276	57.2	42.8	1.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.2.1.2 provides a summary of fruit consumption according to selected health and behaviour characteristics of the 2025 Loddon Shire ALC sample. Differences in fruit intake were seen for three of the five health and wellbeing indicators. Specifically, those with poor mental wellbeing (19.0% vs 41.7%), who did not feel valued by society (19.5% vs definitely [45.2%]), and who were overweight or obese (28.6% vs 53.4%) were significantly less likely to meet the fruit consumption recommendations compared to their counterparts with more positive wellbeing indicators.

Differences in adherence to fruit intake recommendations were also seen by vegetable intake and water consumption. A smaller proportion of respondents who did not meet the vegetable (38.6% vs 85.0%) and water consumption (38.0% vs 57.6%) recommendations reported meeting the fruit consumption recommendation compared to those meeting the corresponding health behaviour recommendations.

No assessed risk behaviours were associated with adherence to the fruit consumption recommendations.

Table 4.2.1.2 Fruit consumption by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily serves
	n	%	%	#
Total sample	**606**	**56.6**	**43.4**	**1.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	89	65.2	34.8	1.3
Self-reported health - Good, very good, or excellent	426	55.2	44.8	1.6
Life satisfaction - Low to moderate (0 to 6)[2]	93	75.9	24.1	1.1
Life satisfaction - High/very high (7 to 10)	232	59.3	40.7	1.4
Does not feel valued by society[2]	69	80.5	19.5	1.1
Sometimes feel valued by society	144	61.4	38.6	1.4
Definitely feel valued by society	122	54.8	45.2	1.5
Poor mental wellbeing[2]	84	81.0	19.0	1.0
Good mental wellbeing	308	58.3	41.7	1.4
Overweight or obese (BMI ≥25.0)	169	71.4	28.6	1.3
Normal range or underweight (BMI <25.0)	126	46.6	53.4	1.7
Health behaviour indicators				
Does not meet vegetable intake recommendations	508	61.4	38.6	1.4
Meets vegetable intake recommendations	84	15.0	85.0	2.5
Does not meet aerobic physical activity recommendations	188	47.9	52.1	1.6
Meets aerobic physical activity recommendations	384	59.5	40.5	1.5
Does not meet muscle strengthening recommendations	297	60.9	39.1	1.4
Meets muscle strengthening recommendations	202	56.6	43.4	1.5

Does not meet screen time recommendations	320	57.3	42.7	1.5
Meets screen time recommendations	227	54.3	45.7	1.6
Does not meet sleep recommendations	173	65.8	34.2	1.4
Meets sleep recommendations	370	50.7	49.3	1.6
Drinks sugar-sweetened beverages daily	75	67.4	32.6	1.2
Drinks sugar-sweetened beverages less than daily	496	54.7	45.3	1.6
Does not meet water recommendations	331	62.0	38.0	1.4
Meets water consumption recommendations	225	42.4	57.6	1.9
Risk behaviour indicators[2]				
Current smoker	28	82.3	17.7	1.0
Ex-smoker	126	57.9	42.1	1.4
Never smoked	188	61.2	38.8	1.5
Current vaper*	10	81.6	18.4	1.0
Ex-vaper	20	56.2	43.8	1.2
Never vaped	312	62.0	38.0	1.4
Had more than 4 standard drinks on a single occasion	188	62.9	37.1	1.3
Has not had more than 4 standard drinks	155	61.2	38.8	1.4
Gambled	104	66.8	33.2	1.3
Never gambled	236	60.1	39.9	1.4

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.2.2. Vegetable consumption

Table 4.2.2.1 shows that on average, Loddon Shire residents were consuming 2.3 daily serves of vegetables, well below the recommended serves per day for all ages. Overall, 89.0% of respondents did not meet the age- and sex-specific vegetable consumption guidelines. Among adults, 90.6% of the 2025 sample fell short of their recommended intake, compared with 85.0% in the 2019 sample, indicating a slight decline in vegetable consumption over the past six years. The 2023 VPHS and 2022 NHS Victorian results are similar to the 2025 ALC findings, with 90.3% and 93.6% of adults, respectively, not meeting the vegetable intake recommendations.

No significant differences in meeting the vegetable consumption recommendation were observed by age group alone. However, males (7.1%) were less likely than females to meet the recommendation (15.8%). By sex and age, males aged 3 to 11 years (20.0%) and 70 years and over (18.1%) were more likely to meet the vegetable consumption recommendation than males aged 12 to 69 years (0.0% to 4.6%). Among females, meeting the vegetable consumption recommendation was higher among those aged 12 to 17 years (27.0%) and 70 years and over (28.9%) than among those aged 18 to 69 years (6.0% to 13.9%).

Across Loddon Shire, residents of Boort & Surrounds (10.6%) and Inglewood/Bridgewater & Surrounds (12.4%) were the most likely to meet daily vegetable consumption recommendations, with the proportion being significantly greater than respondents from Pyramid Hill & Surrounds (2.5%) and South Loddon Area (0.0%). Similarly, respondents from Inglewood/Bridgewater & Surrounds (2.2 serves) and Wedderburn &

Surrounds (2.5 serves) consumed a higher daily average number of serves of vegetables compared to residents from Pyramid Hill & Surrounds (1.5 serves).

A lower proportion of respondents with low or very low food security (1.3%) and marginal food security (2.3%) met the vegetable consumption recommendation compared to those with high food security (12.2%). Additionally, average daily vegetable consumption was lower among respondents with less than Bachelor level education than those with a Bachelor degree or higher (2.1 vs 2.8 serves), and among respondents with low or very low food security than those with high food security (1.4 vs 2.4 serves).

Table 4.2.2.1 Vegetable consumption by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily serves
	n	%	%	#
Total sample	**593**	**89.0**	**11.0**	**2.3**
Children	206	82.1	17.9	2.6
Adults	387	90.6	9.4	2.2
Males	186	92.9	7.1	2.1
Females	407	84.2	15.8	2.4
Sex and age				
Males, 3 to 11	35	80.0	20.0	2.6
Males, 12 to 17	62	98.4	1.6	2.1
Males, 18 to 34	13	100.0	0.0	2.7
Males, 35 to 49	16	95.4	4.6	1.6
Males, 50 to 69	27	100.0	0.0	1.5
Males, 70+	33	81.9	18.1	2.7
Females, 3 to 11	46	80.4	19.6	2.7
Females, 12 to 17	63	73.0	27.0	3.0
Females, 18 to 34	57	94.0	6.0	1.8
Females, 35 to 49	68	90.7	9.3	2.3
Females, 50 to 69	121	86.1	13.9	2.3
Females, 70+	52	71.1	28.9	3.3
Subregion				
Boort & Surrounds	96	89.4	10.6	2.2
East Loddon Area	46	90.4	9.6	2.3
Inglewood / Bridgewater & Surrounds	116	87.6	12.4	2.2
Pyramid Hill & Surrounds	25	97.5	2.5	1.5
South Loddon Area	19	100.0	0.0	1.7
Wedderburn & Surrounds	81	91.3	8.7	2.5
Demographic indicators				
Household size[2]				
1 person	48	89.0	11.0	1.9
2 or 3 people	209	90.7	9.3	2.1
4 or 5 people	103	92.5	7.5	2.6

More than 5 people	27	87.2	12.8	2.2
Born overseas	39	90.4	9.6	1.8
Born in Australia	552	89.0	11.0	2.3
Speaks other main language*	5	85.1	14.9	2.0
Speaks English as main language	584	89.1	10.9	2.3
Aboriginal and/or Torres Strait Islander*	20	94.5	5.5	1.9
Not Aboriginal or Torres Strait Islander	571	88.8	11.2	2.3
LGBTQIA+*	13	89.7	10.3	2.0
Non-LGBTQIA+	575	89.1	10.9	2.3
Neurodivergent	44	90.5	9.5	2.0
Not neurodivergent	383	87.7	12.3	2.3
Maybe	41	93.6	6.4	2.2
Not sure what neurodivergent means	77	92.7	7.3	2.2
Less than Bachelor level education[2]	255	91.4	8.6	2.1
Holds a Bachelor degree or higher	128	87.3	12.7	2.8
Unemployed/Retired[2]	135	87.7	12.3	2.2
Employed	249	92.5	7.5	2.1
Just getting along, poor or very poor[2]	139	95.1	4.9	2.0
Reasonably comfortable, very comfortable or prosperous	244	87.8	12.2	2.3
Requires help with daily activities	43	89.5	10.5	2.4
Does not require help	546	89.6	10.4	2.2
Food security (last 12 months)[2]				
Low or very low food security	59	98.7	1.3	1.4
Marginal food security	52	97.7	2.3	2.1
High food security	274	87.8	12.2	2.4

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.2.2.2 provides a summary of vegetable consumption according to selected health and behaviour characteristics of the 2025 ALC sample. Differences in average daily serves of vegetables were seen in four of five health and wellbeing indicators, apart from self-reported health. Similarly, differences in adherence to the vegetable consumption recommendations were seen in four of five health and wellbeing indicators, apart from BMI. Specifically, with regards to the health and wellbeing indicators, respondents with fair or poor self-reported health (4.4% vs 12.2%), low to moderate life satisfaction (2.2% vs 11.9%), poor mental wellbeing (3.2% vs 10.8%) and who did not feel valued by society (2.0% vs definitely [16.1%]) were significantly less likely to meet the vegetable consumption recommendation than their counterparts with more positive wellbeing indicators.

A smaller proportion of respondents who did not meet the fruit intake recommendation (3.0% vs 21.5%) and water consumption recommendation (8.5% vs 17.2%) met the vegetable consumption recommendation than those who met the corresponding health behaviour recommendations.

Smoking status was associated with meeting the vegetable consumption recommendation. Current smokers were less likely to meet the vegetable consumption recommendation than those who had never smoked (1.6% vs 12.2%).

Table 4.2.2.2 Vegetable consumption by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily serves
	n	%	%	#
Total sample	**593**	**89.0**	**11.0**	**2.3**
Health and wellbeing indicators				
Self-reported health - Fair or poor	85	95.6	4.4	2.0
Self-reported health - Good, very good, or excellent	419	87.8	12.2	2.4
Life satisfaction - Low to moderate (0 to 6)[2]	90	97.8	2.2	1.7
Life satisfaction - High/very high (7 to 10)	230	88.1	11.9	2.4
Does not feel valued by society[2]	67	98.0	2.0	1.6
Sometimes feel valued by society	143	91.8	8.2	2.1
Definitely feel valued by society	120	83.9	16.1	2.7
Poor mental wellbeing[2]	83	96.8	3.2	1.6
Good mental wellbeing	304	89.2	10.8	2.3
Overweight or obese (BMI ≥25.0)	169	91.1	8.9	2.0
Normal range or underweight (BMI <25.0)	125	89.4	10.6	2.9
Health behaviour indicators				
Does not meet fruit intake recommendations	297	97.0	3.0	1.6
Meets fruit intake recommendations	295	78.5	21.5	3.1
Does not meet aerobic physical activity recommendations	184	86.4	13.6	2.3
Meets aerobic physical activity recommendations	376	89.6	10.4	2.2
Does not meet muscle strengthening recommendations	293	91.3	8.7	2.1
Meets muscle strengthening recommendations	197	87.4	12.6	2.5
Does not meet screen time recommendations	313	88.8	11.2	2.3
Meets screen time recommendations	221	88.2	11.8	2.3
Does not meet sleep recommendations	165	90.7	9.3	2.0
Meets sleep recommendations	365	87.2	12.8	2.5
Drinks sugar-sweetened beverages daily	75	84.5	15.5	2.1
Drinks sugar-sweetened beverages less than daily	483	89.6	10.4	2.3
Does not meet water recommendations	327	91.5	8.5	2.1
Meets water consumption recommendations	226	82.8	17.2	2.9
Risk behaviour indicators[2]				
Current smoker	28	98.4	1.6	1.4

Ex-smoker	125	92.4	7.6	2.3
Never smoked	185	87.8	12.2	2.3
Current vaper*	10	100.0	0.0	1.2
Ex-vaper	20	98.0	2.0	2.9
Never vaped	308	89.8	10.2	2.2
Had more than 4 standard drinks on a single occasion	186	89.9	10.1	2.2
Has not had more than 4 standard drinks	153	92.0	8.0	2.2
Gambled	103	94.6	5.4	2.3
Never gambled	233	88.4	11.6	2.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.2.3. Barriers to fruit consumption

Respondents who did not consume at least 2 serves of fruit per day were asked separately to provide the main reason why they did not consume the recommended amount. Table 4.2.3.1 below provides a snapshot of the main barriers reported by 2025 Loddon Shire ALC respondents. The main themes that emerged amongst those who provided a response as to why they did not meet fruit consumption recommendations were access and quality (15.8%) and personal preferences (15.4%). Other relatively common barriers to increasing serves of fruit were no particular reason (15.1%) and cost (14.1%), while 6.2% stated that habit or routine was the reason for not meeting the recommended intake.

Table 4.2.3.1 Barriers to fruit consumption

Reasons	% ([1]N=308)
Access/quality	15.8
Preferences	15.4
No particular reason	15.1
Cost	14.1
Habit/routine	6.2
Satisfied with current intake/low appetite	4.7
Inconvenient to prepare	4.1
Diet/health restrictions	1.6
Time	1.4
Other	0.9

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Tables 4.2.3.2 and 4.2.3.3 present a breakdown of the top five most common barriers to fruit consumption according to demographic, health and wellbeing, health behaviour and risk behaviour characteristics of the sample. Solutions aimed at addressing the main barriers of access, quality, desirability (personal

preference), affordability and habit formation are likely to be the most effective in increasing fruit consumption.

Reporting of access/quality as a barrier to fruit consumption did not differ by demographic characteristics, health and wellbeing indicators, health behaviour indicators or risk behaviour indicators.

Personal preference as a barrier to fruit consumption differed according to neurodivergent and sleep recommendations. No differences were seen according to risk behaviours. The following groups were more likely to report preference as a barrier and may benefit from targeted intervention:

- Maybe neurodivergent (48.8%) compared to neurodivergent (8.7%) and not neurodivergent (12.8%)
- Met sleep recommendation (21.7%) compared to did not meet recommendation (7.0%)

No particular reason as a barrier to fruit consumption differed according to subregion, mental wellbeing, BMI, vegetable intake and smoking status. The following groups were more likely to report no particular reason as a barrier and may benefit from targeted intervention:

- Inglewood/Bridgewater & Surrounds (17.6%) compared to South Loddon Area (0.0%)
- Good mental wellbeing (18.7%) compared to poor mental wellbeing (2.7%)
- Overweight or obese (16.0%) compared to normal range or underweight (1.7%)
- Did not meet vegetable intake recommendation (15.2%) compared to met recommendation (0.0%)
- Never smoked (20.1%) compared to current smoker (0.9%)

Cost as a barrier to fruit consumption differed across some demographic and health and wellbeing indicators. It did not differ according to health behaviour or risk behaviour indicators. The following groups were more likely to report cost as a barrier and may benefit from targeted intervention:

- Just getting along, poor or very poor (24.4%) compared to reasonably comfortable, very comfortable or prosperous (6.8%)
- Low or very low food security (42.8%) compared to high food security (3.8%)
- Did not feel valued by society (31.7%) compared to definitely felt valued by society (3.0%)
- Poor mental wellbeing (39.1%) compared to good mental wellbeing (6.6%)

Differences in habit/routine being reported as a barrier to fruit consumption were seen for one demographic characteristic. Specifically, habit/routine was reported by a greater proportion of those with high food security (9.2%) compared to marginal food security (0.0%).

While this research provides insight into potential target populations, it did not look specifically at how these barriers could be overcome. This is an area which would merit further investigation.

Table 4.2.3.2 Top five barriers to fruit consumption by selected demographic characteristics

	Unweighted base[1]	Access/quality	Preferences	No particular reason	Cost	Habit/routine
	n	%	%	%	%	%
Total sample	**308**	**15.8**	**15.4**	**15.1**	**14.1**	**6.2**
Children	79	7.9	20.0	16.9	11.6	5.2
Adults	229	16.8	14.8	14.8	14.4	6.3
Males	91	14.9	15.4	19.3	10.0	6.5
Females	208	17.1	15.4	9.0	19.2	6.0
Subregion						
Boort & Surrounds	67	13.9	6.5	8.2	13.1	3.2
East Loddon Area	46	18.5	34.7	6.5	23.0	3.5
Inglewood / Bridgewater & Surrounds	84	13.1	18.0	17.6	6.2	9.7
Pyramid Hill & Surrounds	27	4.5	11.6	34.4	17.6	1.3
South Loddon Area	20	28.1	14.9	0.0	33.0	1.4
Wedderburn & Surrounds	60	22.0	12.6	18.8	14.3	9.7
Demographic indicators						
Born overseas*	25	20.0	4.3	14.3	14.4	4.7
Born in Australia	283	15.2	16.8	15.2	11.4	6.4
Speaks other main language*	3	0.0	0.0	73.0	0.0	0.0
Speaks English as main language	304	15.2	15.7	14.4	14.4	6.3
Aboriginal and/or Torres Strait Islander*	14	27.1	8.1	15.1	15.6	0.0
Not Aboriginal or Torres Strait Islander	292	15.4	15.7	15.0	14.1	6.4
LGBTQIA+*	9	0.0	5.8	5.8	38.8	10.5
Non-LGBTQIA+	295	16.4	14.5	15.5	13.9	6.2
Neurodivergent	30	19.2	8.7	10.8	19.7	12.3
Not neurodivergent	187	18.3	12.8	14.2	10.8	7.9
Maybe	19	10.2	48.8	5.5	23.3	0.0

Not sure what neurodivergent means	48	10.0	17.3	23.1	20.3	2.0
Less than Bachelor level education[2]	165	16.3	14.4	14.4	15.5	6.4
Holds a Bachelor degree or higher	64	20.9	17.2	18.3	6.2	5.6
Unemployed/Retired[2]	82	19.1	7.9	14.4	20.7	2.6
Employed	147	15.7	18.3	15.1	11.1	8.3
Just getting along, poor or very poor[2]	87	19.7	15.8	12.8	24.4	1.6
Reasonably comfortable, very comfortable or prosperous	141	14.7	14.0	16.5	6.8	10.0
Requires help with daily activities*	24	23.3	7.0	13.9	24.9	3.3
Does not require help	283	15.3	16.0	15.2	13.3	6.4
Food security (last 12 months)[2]						
Low or very low food security	51	20.2	9.0	16.5	42.8	2.0
Marginal food security	32	27.8	23.3	7.8	17.5	0.0
High food security	146	13.3	15.0	15.7	3.8	9.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.2.3.3 Top five barriers to fruit consumption by selected health and behaviour characteristics

	Unweighted base[1]	Access/quality	Preferences	No particular reason	Cost	Habit/routine
	n	%	%	%	%	%
Total sample	**308**	**15.8**	**15.4**	**15.1**	**14.1**	**6.2**
Health and wellbeing indicators						
Self-reported health - Fair or poor	62	25.2	13.5	11.6	25.7	4.1
Self-reported health - Good, very good, or excellent	198	15.2	16.4	13.5	12.8	7.3
Life satisfaction - Low to moderate (0 to 6)[2]	71	24.9	11.2	10.9	19.4	8.9
Life satisfaction - High/very high (7 to 10)	124	14.5	16.7	14.3	13.8	5.2

Does not feel valued by society[2]	58	23.4	10.2	13.3	31.7	7.9
Sometimes feel valued by society	87	19.0	10.5	9.3	14.2	5.5
Definitely feel valued by society	53	13.7	24.3	17.2	3.0	7.0
Poor mental wellbeing[2]	65	21.1	11.3	2.7	39.1	3.3
Good mental wellbeing	164	15.5	15.8	18.7	6.6	7.3
Overweight or obese (BMI ≥25.0)	102	16.8	11.2	16.0	15.0	4.1
Normal range or underweight (BMI <25.0)	52	10.5	33.2	1.7	18.0	18.7
Health behaviour indicators						
Does not meet vegetable intake recommendations	285	14.5	15.1	15.2	14.3	6.3
Meets vegetable intake recommendations*	12	51.3	28.3	0.0	10.7	6.8
Does not meet aerobic physical activity recommendations	93	18.5	9.8	18.1	11.5	8.8
Meets aerobic physical activity recommendations	193	15.4	16.5	15.0	15.4	5.6
Does not meet muscle strengthening recommendations	164	17.4	19.2	15.4	17.4	7.0
Meets muscle strengthening recommendations	100	15.4	10.0	15.1	11.2	5.3
Does not meet screen time recommendations	161	14.7	13.9	15.8	13.3	8.3
Meets screen time recommendations	111	20.8	18.2	9.7	18.3	5.0
Does not meet sleep recommendations	100	19.9	7.0	18.5	19.1	6.6
Meets sleep recommendations	166	16.4	21.7	9.4	13.9	6.6
Drinks sugar-sweetened beverages daily	47	22.0	19.1	14.8	25.1	6.1
Drinks sugar-sweetened beverages less than daily	241	15.7	15.8	12.2	12.9	6.7
Does not meet water recommendations	187	16.4	14.2	13.6	16.3	7.8
Meets water consumption recommendations	90	17.7	26.1	9.7	10.9	3.0
Risk behaviour indicators[2]						

Current smoker	20	26.1	15.1	0.9	17.0	5.0
Ex-smoker	72	23.5	13.1	4.5	13.0	14.6
Never smoked	108	13.2	16.4	20.1	18.1	1.3
Current vaper*	8	44.5	11.2	0.0	14.3	21.6
Ex-vaper	11	1.8	28.5	0.0	14.6	0.0
Never vaped	181	18.5	14.1	14.3	16.1	6.4
Had more than 4 standard drinks on a single occasion	110	19.0	19.6	13.6	12.2	6.8
Has not had more than 4 standard drinks	91	17.6	7.2	11.4	22.0	6.3
Gambled	62	26.4	13.2	12.2	9.9	1.4
Never gambled	137	13.8	16.0	12.6	19.7	9.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.2.4. Barriers to vegetable consumption

Respondents who did not consume the recommended serves of vegetables per day were asked separately to provide the main reason why they did not consume the recommended amount. The table below provides a snapshot of the main barriers reported by 2025 Loddon Shire ALC respondents. The main themes that emerged amongst those who provided a response as to why they did not meet vegetable consumption recommendations were personal preferences (13.1%), satisfied with current intake (12.0%), no particular reason (11.2%), cost (9.6%), and access and quality (9.1%).

Table 4.2.4.1 Barriers to vegetable consumption

Reasons	% (N=509)[1]
Preferences	13.1
Satisfied with current intake/low appetite	12.0
No particular reason	11.2
Cost	9.6
Access/quality	9.1
Inconvenient to prepare	8.6
Time	6.1
Habit/routine	3.0
Other	1.4
Diet/health restrictions	0.9

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Tables 4.2.4.2 and 4.2.4.3 present a breakdown of the top five most commonly reported barriers to vegetable consumption according to demographic, health and wellbeing, health behaviour and risk behaviour characteristics of the sample. Solutions aimed at addressing the main barriers of desirability (personal preference), current intake satisfaction and affordability are likely to be the most effective in increasing vegetable consumption.

Reporting of personal preferences as a barrier to vegetable consumption differed according to some demographic characteristics. No differences were seen according to health and wellbeing and risk behaviours. Specifically, the following respondents were more likely to report personal preferences as a barrier to vegetable consumption:

- Children (29.4%) compared to adults (9.5%)
- Boort & Surrounds (14.9%) compared to Wedderburn & Surrounds (4.7%)

Being satisfied with current intake was reported as a barrier to vegetable consumption more frequently among the following groups:

- Adults (13.6%) compared to children (4.6%)
- High food security (16.8%) compared to low or very low food security (3.2%)

No particular reason was the third most frequent barrier to vegetable consumption. Those from the following groups were more likely to report this barrier:

- Inglewood/Bridgewater & Surrounds (15.5%) compared to Wedderburn & Surrounds (3.0%)
- Good mental wellbeing (13.6%) compared to poor mental wellbeing (3.1%)
- Overweight or obese (12.2%) compared to normal range or underweight (0.8%)
- Never smoked (13.9%) compared to current smoker (0.8%)

Cost as a barrier to vegetable consumption was reported more commonly for the following groups and may benefit from targeted intervention:

- Just getting along, poor or very poor (17.7%) compared to reasonably comfortable, very comfortable or prosperous (4.6%)
- Low or very low food security (37.2%) compared to marginal (10.5%) and high (2.9%) food security
- Poor mental wellbeing (28.3%) compared to good mental wellbeing (5.8%)

Access and quality as a barrier to vegetable consumption was not associated with any demographic, health, wellbeing or risk behaviour indicators.

Similar to the barriers to fruit consumption, this research provides insight into potential target populations, however it did not look specifically at how these barriers could be overcome. Again, this is an important area for further research to identify the most appropriate and efficacious strategies to increase the proportion of the Loddon Shire population who consume sufficient vegetables for good health and wellbeing.

Table 4.2.4.2 Top five barriers to vegetable consumption by selected demographic characteristics

	Unweighted base[1]	Preferences	Satisfied with current intake/ low appetite	No particular reason	Cost	Access/quality
	n	%	%	%	%	%
Total sample	**509**	**13.1**	**12.0**	**11.2**	**9.6**	**9.1**
Children	172	29.4	4.6	9.7	6.8	3.7
Adults	337	9.5	13.6	11.5	10.2	10.3
Males	171	11.8	12.3	12.8	8.5	7.5
Females	338	14.8	11.5	9.1	11.1	11.2
Subregion						
Boort & Surrounds	133	14.9	7.7	11.3	9.9	4.3
East Loddon Area	78	21.9	13.8	6.3	9.9	12.6
Inglewood / Bridgewater & Surrounds	128	11.5	12.4	15.5	3.8	7.3
Pyramid Hill & Surrounds	45	6.0	8.8	25.3	17.0	7.1
South Loddon Area	25	32.4	16.4	4.9	1.7	12.1
Wedderburn & Surrounds	92	4.7	15.9	3.0	18.4	16.1
Demographic indicators						
Born overseas	34	12.9	11.6	16.7	14.9	10.6
Born in Australia	475	13.1	12.0	10.6	9.1	9.0
Speaks other main language*	3	0.0	0.0	73.0	0.0	0.0
Speaks English as main language	504	13.3	12.2	10.7	9.8	8.7
Aboriginal and/or Torres Strait Islander*	18	12.7	16.9	13.7	6.0	0.0
Not Aboriginal or Torres Strait Islander	489	13.1	11.8	11.0	9.8	9.4
LGBTQIA+*	11	10.5	12.4	13.4	15.7	15.7
Non-LGBTQIA+	496	13.2	11.3	11.3	9.6	9.1
Neurodivergent	40	25.3	6.6	7.0	11.1	2.8
Not neurodivergent	323	12.9	10.5	12.1	8.8	10.0

Maybe	37	32.0	15.4	4.9	25.1	14.5
Not sure what neurodivergent means	68	10.1	14.7	14.6	9.9	10.7
Less than Bachelor level education[2]	225	9.8	13.6	10.9	10.6	10.7
Holds a Bachelor degree or higher	110	7.7	14.1	16.1	8.5	8.1
Unemployed/Retired[2]	117	6.7	20.4	7.9	17.9	13.8
Employed	219	10.9	10.3	13.4	6.5	8.7
Just getting along, poor or very poor[2]	128	10.3	11.9	9.6	17.7	11.7
Reasonably comfortable, very comfortable or prosperous	207	9.0	15.1	13.2	4.6	9.4
Requires help with daily activities	37	5.9	4.0	5.2	19.7	22.3
Does not require help	471	13.7	12.7	11.7	8.7	8.0
Food security (last 12 months)[2]						
Low or very low food security	58	14.3	3.2	9.7	37.2	11.8
Marginal food security	50	17.0	11.5	5.8	10.5	11.2
High food security	229	6.7	16.8	13.1	2.9	9.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.2.4.3 Top five barriers to vegetable consumption by selected health and behaviour characteristics

	Unweighted base[1]	Preferences	Satisfied with current intake/ low appetite	No particular reason	Cost	Access/quality
	n	%	%	%	%	%
Total sample	**509**	**13.1**	**12.0**	**11.2**	**9.6**	**9.1**
Health and wellbeing indicators						
Self-reported health - Fair or poor	79	13.1	8.5	8.8	23.7	16.2
Self-reported health - Good, very good, or excellent	351	14.0	13.6	8.6	7.6	8.2

Life satisfaction - Low to moderate (0 to 6)[2]	86	13.6	10.0	3.5	17.9	8.2
Life satisfaction - High/very high (7 to 10)	195	7.4	17.7	12.9	8.1	12.8
Does not feel valued by society[2]	65	13.0	18.6	5.0	17.5	12.3
Sometimes feel valued by society	126	7.6	11.3	9.0	14.1	9.9
Definitely feel valued by society	96	10.0	15.9	13.4	3.3	11.2
Poor mental wellbeing[2]	78	16.7	6.7	3.1	28.3	12.9
Good mental wellbeing	259	7.7	15.3	13.6	5.8	9.7
Overweight or obese (BMI ≥25.0)	147	11.8	13.9	12.2	12.0	7.1
Normal range or underweight (BMI <25.0)	105	20.4	19.5	0.8	5.4	9.6
Health behaviour indicators						
Does not meet fruit intake recommendations	285	13.8	13.8	12.3	11.9	9.7
Meets fruit intake recommendations	223	12.0	9.2	9.4	6.1	8.3
Does not meet aerobic physical activity recommendations	157	11.2	10.2	11.9	9.4	3.8
Meets aerobic physical activity recommendations	322	14.0	13.4	11.5	10.2	10.9
Does not meet muscle strengthening recommendations	258	15.5	7.4	12.1	9.6	8.4
Meets muscle strengthening recommendations	166	6.6	18.4	12.8	11.7	10.7
Does not meet screen time recommendations	270	15.3	13.3	9.7	11.9	11.4
Meets screen time recommendations	186	12.1	13.6	7.6	9.3	7.4
Does not meet sleep recommendations	145	14.1	10.3	11.7	15.1	9.3
Meets sleep recommendations	306	14.0	14.2	7.0	8.9	9.9
Drinks sugar-sweetened beverages daily	63	20.3	6.8	2.6	10.7	10.7
Drinks sugar-sweetened beverages less than daily	415	12.9	13.8	9.6	10.2	9.6
Does not meet water recommendations	291	14.3	12.7	9.5	9.4	10.0

Meets water consumption recommendations	183	13.4	13.3	6.5	13.0	9.3
Risk behaviour indicators[2]						
Current smoker	27	25.9	10.8	0.8	23.9	12.8
Ex-smoker	112	6.8	11.0	3.8	9.4	13.8
Never smoked	155	8.5	17.5	13.9	9.6	8.2
Current vaper*	10	54.6	13.8	2.6	4.5	0.0
Ex-vaper	19	0.0	2.1	1.3	8.3	14.0
Never vaped	265	8.7	15.2	10.0	11.5	11.0
Had more than 4 standard drinks on a single occasion	159	9.6	12.4	9.0	9.3	9.5
Has not had more than 4 standard drinks	136	9.7	16.7	9.2	13.6	12.9
Gambled	93	6.5	11.4	10.1	10.6	15.2
Never gambled	199	11.6	16.0	7.1	11.4	8.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.3. Water consumption

Water consumption recommendations have been outlined in the Nutrient Reference Values for Australia and New Zealand published by the National Health and Medical Research Council[12]. The table below provides a summary of these recommendations, which differ according to age and sex. The following results are aligned to the recommendations for cups per day.

	Litres	Cups
3 years	1.0	4
4-8 years	1.2	5
9-13 years, male	1.6	6
9-13 years, female	1.4	5.5
14-18 years, male	1.9	7.5
14-18 years, female	1.6	6
19 years and above, male	2.6	10
19 years and above, female	2.1	8

Overall, respondents reported drinking an average of 6.4 cups of water per day and 29.0% met their age- and sex- specific recommendations (see Table 4.3.1.1). Adults reported drinking an average of 6.5 cups per day and 25.1% met the recommendation, which is more than in 2019, when the average was just 4.9 cups per day and 21.4% met the recommendation. A lower proportion of adults than children met their respective water consumption recommendation (25.1% vs 44.7%). Males were also less likely than females to meet the recommendation (18.0% vs 42.2%).

By sex and age, males aged 35 years and over were less likely to meet the water consumption recommendation than males aged 3 to 17 years (0.0% to 12.2% vs 48.3% to 54.4%). Among females, those aged 3 to 11 years reported lower average daily water consumption than all other female age groups (4.5 cups vs 5.8 to 6.7 cups). Across Loddon Shire, residents of Inglewood / Bridgewater & Surrounds (16.7%), Pyramid Hill & Surrounds (23.0%) and South Loddon Area (15.0%) were less likely to meet water consumption recommendations than residents of Boort & Surrounds (32.3%) and East Loddon Area (50.8%).

Proportionate differences in adherence to the water consumption recommendation were seen among some of the demographic groups. Specifically, adherence was lower among respondents who were:

- Born overseas (9.8%) compared to born in Australia (30.9%)
- Neurodivergent (22.7%) compared to those who were maybe neurodivergent (52.2%)

Table 4.3.1.1 Water consumption by selected demographic characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily cups
	n	%	%	#

[12] National Health and Medical Research Council, Australian Government Department of Health and Ageing, New Zealand Ministry of Health (2017). Nutrient Reference Values for Australia and New Zealand. Canberra: National Health and Medical Research Council. https://www.nhmrc.gov.au/about-us/publications/nutrient-reference-values-australia-and-new-zealand-including-recommended-dietary-intakes

Total sample	**559**	**71.0**	**29.0**	**6.4**
Children	196	55.3	44.7	5.7
Adults	363	74.9	25.1	6.5
Males	169	82.0	18.0	6.7
Females	386	57.8	42.2	6.0
Sex and age				
Males, 3 to 11	29	51.7	48.3	6.0
Males, 12 to 17	57	45.6	54.4	6.5
Males, 18 to 34	13	62.2	37.8	8.6
Males, 35 to 49	12	90.2	9.8	6.9
Males, 50 to 69	25	100.0	0.0	6.0
Males, 70+	33	87.8	12.2	6.7
Females, 3 to 11	44	68.2	31.8	4.5
Females, 12 to 17	62	46.8	53.2	6.3
Females, 18 to 34	55	52.6	47.4	6.2
Females, 35 to 49	66	49.4	50.6	6.7
Females, 50 to 69	109	60.9	39.1	6.0
Females, 70+	50	65.3	34.7	5.8
Subregion				
Boort & Surrounds	153	67.7	32.3	6.5
East Loddon Area	98	49.2	50.8	7.2
Inglewood / Bridgewater & Surrounds	126	83.3	16.7	6.2
Pyramid Hill & Surrounds	54	77.0	23.0	5.2
South Loddon Area	23	85.0	15.0	5.4
Wedderburn & Surrounds	98	66.1	33.9	6.7
Demographic indicators				
Household size[2]				
1 person	42	80.6	19.4	6.5
2 or 3 people	200	74.8	25.2	6.4
4 or 5 people	94	68.0	32.0	6.8
More than 5 people	27	87.5	12.5	6.1
Born overseas	35	90.2	9.8	5.6
Born in Australia	522	69.1	30.9	6.4
Speaks other main language*	4	57.1	42.9	6.0
Speaks English as main language	551	71.0	29.0	6.3
Aboriginal and/or Torres Strait Islander*	18	77.1	22.9	6.8
Not Aboriginal or Torres Strait Islander	541	70.8	29.2	6.3
LGBTQIA+*	13	71.3	28.7	6.4
Non-LGBTQIA+	540	71.0	29.0	6.3
Neurodivergent	45	77.3	22.7	5.4

Not neurodivergent	351	69.1	30.9	6.1
Maybe	41	47.8	52.2	5.8
Not sure what neurodivergent means	73	72.8	27.2	7.1
Less than Bachelor level education[2]	237	76.8	23.2	6.4
Holds a Bachelor degree or higher	122	62.5	37.5	7.2
Unemployed/Retired[2]	131	77.7	22.3	6.3
Employed	229	73.2	26.8	6.6
Just getting along, poor or very poor[2]	126	77.5	22.5	6.3
Reasonably comfortable, very comfortable or prosperous	233	73.3	26.7	6.6
Requires help with daily activities	41	72.8	27.2	6.0
Does not require help	514	70.9	29.1	6.3
Food security (last 12 months)[2]				
Low or very low food security	55	84.6	15.4	5.7
Marginal food security	49	66.1	33.9	6.3
High food security	257	74.2	25.8	6.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.3.1.2 provides a summary of water consumption according to selected health and behaviour characteristics of the 2025 Loddon Shire ALC sample. Average daily water consumption differed by mental wellbeing, with respondents with poor mental wellbeing reporting fewer average daily cups of water than those with good mental wellbeing (5.4 cups vs 6.8 cups).

Water consumption recommendation adherence was associated with fruit consumption. Respondents who did not meet the fruit consumption recommendation (21.8%) were less likely to meet the water consumption recommendation than those who met the fruit consumption recommendation (38.1%).

Table 4.3.1.2 Water consumption by selected health and behaviour characteristics

	Unweighted base[1]	Does not meet recommendation	Meets recommendation	Average daily cups
	n	%	%	#
Total sample	**559**	**71.0**	**29.0**	**6.4**
Health and wellbeing indicators				
Self-reported health - Fair or poor	86	76.7	23.3	5.7
Self-reported health - Good, very good, or excellent	420	69.6	30.4	6.5
Life satisfaction - Low to moderate (0 to 6)[2]	90	79.1	20.9	6.1
Life satisfaction - High/very high (7 to 10)	230	72.3	27.7	6.7
Does not feel valued by society[2]	67	73.8	26.2	6.3
Sometimes feel valued by society	143	77.0	23.0	6.4
Definitely feel valued by society	120	72.9	27.1	6.7

Poor mental wellbeing[2]	83	76.4	23.6	5.4
Good mental wellbeing	280	74.5	25.5	6.8
Overweight or obese (BMI ≥25.0)	169	76.6	23.4	6.4
Normal range or underweight (BMI <25.0)	125	66.5	33.5	6.7
Health behaviour indicators				
Does not meet fruit intake recommendations	277	78.2	21.8	6.1
Meets fruit intake recommendations	279	61.9	38.1	6.7
Does not meet vegetable intake recommendations	474	72.8	27.2	6.3
Meets vegetable intake recommendations	79	54.7	45.3	6.8
Does not meet aerobic physical activity recommendations	175	69.8	30.2	5.7
Meets aerobic physical activity recommendations	360	71.3	28.7	6.6
Does not meet muscle strengthening recommendations	284	75.2	24.8	6.0
Meets muscle strengthening recommendations	182	65.7	34.3	7.1
Does not meet screen time recommendations	317	71.1	28.9	6.3
Meets screen time recommendations	220	69.7	30.3	6.5
Does not meet sleep recommendations	169	73.7	26.3	5.9
Meets sleep recommendations	364	69.1	30.9	6.6
Drinks sugar-sweetened beverages daily	74	80.1	19.9	5.3
Drinks sugar-sweetened beverages less than daily	484	69.6	30.4	6.5
Risk behaviour indicators[2]				
Current smoker	28	85.9	14.1	5.8
Ex-smoker	125	71.8	28.2	6.6
Never smoked	185	75.0	25.0	6.5
Current vaper*	10	77.1	22.9	8.5
Ex-vaper	20	44.6	55.4	9.0
Never vaped	308	77.3	22.7	6.3
Had more than 4 standard drinks on a single occasion	186	75.0	25.0	6.6
Has not had more than 4 standard drinks	153	74.9	25.1	6.3
Gambled	103	74.1	25.9	7.1
Never gambled	233	75.3	24.7	6.3

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.4. Sugar-sweetened beverages

According to the 2023 VPHS, 19% of Victorian adults consume sugar-sweetened drinks (soft drink, cordials, sports drinks or caffeinated energy drinks) daily, which is higher than the 14.3% of 2025 ALC respondents from the Loddon Shire who reported consuming sugar-sweetened beverages daily. The proportion of adults (16.9%) consuming sugar-sweetened beverages daily was higher than children (5.4%), and no difference was seen between males and females – contrary to the 2023 VPHS data indicating that males are more likely than females to consume sugar-sweetened beverages daily.

By sex and age, daily consumption of sugar-sweetened beverages was higher among males aged 12 to 17 years (16.9%), 35 to 49 years (45.0%) and 70 years and over (20.3%) compared to males aged 3 to 11 years (0.0%) and 50 to 69 years (4.1%). Among females, daily consumption was higher among those aged 35 to 49 years (16.4%), 50 to 69 years (14.9%) and 70 years and over (25.4%) compared to those aged 3 to 11 years (2.2%) and 12 to 17 years (6.3%). Across Loddon Shire, the proportion of respondents consuming sugar-sweetened beverages daily was higher amongst residents of Inglewood/Bridgewater & Surrounds (21.9%) and Wedderburn & Surrounds (21.2%) when compared to Pyramid Hill & Surrounds (1.7%) and South Loddon Area residents (4.9%).

A higher proportion of neurodivergent (39.3%) residents reported consuming sugar-sweetened beverages daily compared to not neurodivergent (8.3%) and maybe neurodivergent (9.1%) and may benefit from public health intervention to reduce their intake.

Table 4.4.1.1 Sugar-sweetened beverage consumption by selected demographic characteristics

	Unweighted base[1]	Daily	Weekly	Monthly or less often	Never
	n	%	%	%	%
Total sample	**584**	**14.3**	**38.1**	**32.0**	**15.5**
Children	206	5.4	49.7	35.2	9.7
Adults	371	16.9	34.7	31.5	16.9
Males	175	15.1	37.4	33.1	14.3
Females	393	13.9	39.2	30.4	16.5
Sex and age					
Males, 3 to 11	30	0.0	43.3	46.7	10.0
Males, 12 to 17	59	16.9	55.9	25.4	1.7
Males, 18 to 34	13	24.3	43.3	21.6	10.8
Males, 35 to 49	13	45.0	15.0	40.0	0.0
Males, 50 to 69	25	4.1	41.9	41.8	12.2
Males, 70+	33	20.3	24.3	25.8	29.6
Females, 3 to 11	46	2.2	47.8	30.4	19.6
Females, 12 to 17	63	6.3	57.1	31.7	4.8
Females, 18 to 34	56	16.0	38.7	44.5	0.8
Females, 35 to 49	66	16.4	46.0	29.1	8.5
Females, 50 to 69	108	14.9	32.8	27.8	24.4
Females, 70+	52	25.4	26.9	16.2	31.5

Subregion					
Boort & Surrounds	157	8.7	41.6	36.2	13.6
East Loddon Area	103	13.7	37.8	43.1	5.3
Inglewood / Bridgewater & Surrounds	129	21.9	26.0	31.3	20.7
Pyramid Hill & Surrounds	58	1.7	54.6	16.6	27.2
South Loddon Area	24	4.9	55.7	34.2	5.3
Wedderburn & Surrounds	103	21.2	38.4	25.4	15.1
Demographic indicators					
Household size[2]					
1 person	43	23.2	36.9	20.5	19.4
2 or 3 people	202	11.9	29.1	37.9	21.0
4 or 5 people	98	18.7	43.2	27.9	10.3
More than 5 people	28	34.4	43.4	18.4	3.8
Born overseas	37	12.3	29.1	39.4	19.2
Born in Australia	545	14.3	39.2	31.4	15.1
Speaks other main language*	4	0.0	12.1	87.9	0.0
Speaks English as main language	575	14.3	38.5	31.4	15.7
Aboriginal and/or Torres Strait Islander*	22	15.2	35.3	30.1	19.4
Not Aboriginal or Torres Strait Islander	560	14.3	38.3	32.1	15.2
LGBTQIA+*	15	23.2	45.7	31.1	0.0
Non-LGBTQIA+	563	14.0	38.3	31.7	15.9
Neurodivergent	49	39.3	33.3	15.0	12.4
Not neurodivergent	361	8.3	40.0	35.2	16.5
Maybe	44	9.1	47.7	36.8	6.4
Not sure what neurodivergent means	79	14.4	43.2	25.9	16.5
Less than Bachelor level education[2]	241	16.9	35.0	31.1	17.0
Holds a Bachelor degree or higher	126	15.8	35.3	35.1	13.8
Unemployed/Retired[2]	134	21.5	24.6	30.9	22.9
Employed	234	14.0	40.9	32.2	12.9
Just getting along, poor or very poor[2]	129	19.7	36.2	30.1	14.0
Reasonably comfortable, very comfortable or prosperous	239	14.7	34.2	32.9	18.2
Requires help with daily activities	45	18.2	23.8	41.7	16.2
Does not require help	536	13.8	39.8	31.4	15.0
Food security (last 12 months)[2]					
Low or very low food security	57	27.6	32.1	21.8	18.5
Marginal food security	51	16.9	52.0	26.2	4.9
High food security	261	13.8	32.3	35.0	18.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.4.1.2 provides a summary of sugar-sweetened beverage consumption by selected health and behaviour characteristics of the 2025 ALC sample in Loddon Shire.

Two health behaviour indicators were associated with daily consumption of sugar-sweetened beverages. Specifically, respondents who did not meet aerobic physical activity recommendations (24.6% vs 10.6%) and muscle strengthening recommendations (19.7% vs 7.9%) were significantly more likely to consume sugar-sweetened beverages daily than their counterparts who met the respective recommendations.

Table 4.4.1.2 Sugar-sweetened beverage consumption by selected health and behaviour characteristics

	Unweighted base[1]	Daily	Weekly	Monthly or less often	Never
	n	%	%	%	%
Total sample	**584**	**14.3**	**38.1**	**32.0**	**15.5**
Health and wellbeing indicators					
Self-reported health - Fair or poor	89	18.4	40.7	18.6	22.3
Self-reported health - Good, very good, or excellent	434	12.2	38.4	35.9	13.5
Life satisfaction - Low to moderate (0 to 6)[2]	94	22.3	31.8	30.3	15.6
Life satisfaction - High/very high (7 to 10)	233	9.6	38.1	34.2	18.1
Does not feel valued by society[2]	69	16.3	35.0	29.5	19.2
Sometimes feel valued by society	145	17.9	35.3	31.6	15.2
Definitely feel valued by society	123	12.3	35.3	34.6	17.8
Poor mental wellbeing[2]	84	19.4	33.2	28.9	18.5
Good mental wellbeing	287	16.3	35.1	32.1	16.6
Overweight or obese (BMI ≥25.0)	169	15.4	32.9	31.9	19.8
Normal range or underweight (BMI <25.0)	126	9.3	40.4	34.1	16.3
Health behaviour indicators					
Does not meet fruit intake recommendations	288	17.4	35.7	32.1	14.8
Meets fruit intake recommendations	283	11.0	40.7	32.3	16.1
Does not meet vegetable intake recommendations	478	14.1	38.2	32.4	15.3
Meets vegetable intake recommendations	80	20.6	35.3	27.2	16.9
Does not meet aerobic physical activity recommendations	180	24.6	35.4	24.7	15.2
Meets aerobic physical activity recommendations	367	10.6	38.3	35.8	15.3
Does not meet muscle strengthening recommendations	289	19.7	40.4	26.1	13.9
Meets muscle strengthening recommendations	186	7.9	31.7	43.5	16.9
Does not meet screen time recommendations	323	17.6	32.7	32.3	17.4
Meets screen time recommendations	228	10.7	42.9	33.9	12.5

Does not meet sleep recommendations	174	17.1	32.2	34.6	16.1
Meets sleep recommendations	372	12.4	40.0	31.9	15.7
Does not meet water consumption recommendations	333	16.4	34.8	31.7	17.1
Meets water consumption recommendations	225	10.0	45.2	34.2	10.6
Risk behaviour indicators[2]					
Current smoker	28	35.4	20.1	31.0	13.5
Ex-smoker	126	17.7	40.3	28.4	13.6
Never smoked	189	12.6	33.8	34.2	19.3
Current vaper*	10	72.2	27.8	0.0	0.0
Ex-vaper	20	10.1	63.6	25.1	1.2
Never vaped	313	15.4	32.8	33.1	18.8
Had more than 4 standard drinks on a single occasion	188	17.3	35.0	33.6	14.1
Has not had more than 4 standard drinks	156	15.9	34.5	28.1	21.5
Gambled	104	17.9	36.4	35.4	10.3
Never gambled	237	16.4	33.3	29.7	20.6

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

4.5. Ease of access to healthy food locally

Respondents were asked about their perceived ease of accessing healthy food in their local area, with response options ranging from strongly agree to strongly disagree. Table 4.5.1 provides a detailed overview of responses according to selected demographic characteristics. Overall, 62.3% reported agreeing that it was easy to access healthy food in their local area, with more adults (64.7%) reporting ease of access compared to children (51.1%). No difference was seen between males and females. When looking at the responses by sex and age, both males and females aged 70 years and above were the most likely to report agreeing that it was easy to access healthy food in the local area. A greater proportion of respondents from Boort & Surrounds (67.6%) and Inglewood/Bridgewater & Surrounds (72.3%) agreed that it was easy to access healthy food in their local area compared to respondents from East Loddon Area (38.1%).

A lower proportion of people from the following demographic groups agreed that it was easy to access healthy food locally and may benefit from targeted interventions to increase awareness of how to access local healthy food:

- Just getting along, poor or very poor (45.0%) compared to reasonably comfortable, very comfortable or prosperous (78.3%)
- Low or very low (39.2%) and marginal (39.8%) food security compared to high (75.4%) food security

Table 4.5.1 Perceived ease of access to healthy food in local area by selected demographic characteristics

	Unweighted base[1]	Strongly agree/ Agree	Neutral	Strongly disagree / Disagree
	n	%	%	%
Total sample	**607**	**62.3**	**17.5**	**20.2**
Children	208	51.1	26.3	22.6
Adults	392	64.7	15.4	19.9
Males	185	65.5	16.2	18.2
Females	406	59.2	19.1	21.7
Sex and age				
Males, 3 to 11	33	36.4	33.3	30.3
Males, 12 to 17	61	54.1	26.2	19.7
Males, 18 to 34	13	48.6	19.0	32.4
Males, 35 to 49	16	63.4	16.6	20.0
Males, 50 to 69	27	63.0	19.8	17.2
Males, 70+	33	91.8	1.1	7.1
Females, 3 to 11	43	53.5	25.6	20.9
Females, 12 to 17	63	66.7	22.2	11.1
Females, 18 to 34	57	46.1	23.6	30.3
Females, 35 to 49	68	39.1	24.3	36.5
Females, 50 to 69	120	62.3	16.3	21.4
Females, 70+	53	91.0	4.5	4.5
Subregion				
Boort & Surrounds	156	67.6	15.1	17.3
East Loddon Area	105	38.1	24.0	37.9
Inglewood / Bridgewater & Surrounds	147	72.3	14.2	13.5
Pyramid Hill & Surrounds	58	62.7	23.0	14.4
South Loddon Area	25	51.0	28.3	20.7
Wedderburn & Surrounds	107	60.4	15.5	24.2
Demographic indicators				
Household size[2]				
1 person	49	77.2	7.9	14.8
2 or 3 people	210	66.2	16.6	17.3
4 or 5 people	106	50.2	17.2	32.6
More than 5 people	27	73.5	18.6	7.9
Born overseas	40	51.1	25.4	23.5
Born in Australia	565	63.4	16.7	19.9
Speaks other main language*	5	60.6	8.4	31.0
Speaks English as main language	597	62.2	17.6	20.2
Aboriginal and/or Torres Strait Islander*	24	43.8	29.7	26.5

Not Aboriginal or Torres Strait Islander	579	63.0	17.0	20.0
LGBTQIA+*	15	59.6	29.2	11.2
Non-LGBTQIA+	586	61.9	17.5	20.6
Neurodivergent	49	43.7	14.5	41.8
Not neurodivergent	384	63.7	19.2	17.0
Maybe	44	41.6	26.1	32.3
Not sure what neurodivergent means	80	58.5	17.1	24.4
Less than Bachelor level education[2]	257	65.6	15.0	19.5
Holds a Bachelor degree or higher	131	57.1	18.9	24.0
Unemployed/Retired[2]	137	73.8	7.7	18.4
Employed	252	59.4	19.6	21.0
Just getting along, poor or very poor[2]	142	45.0	21.1	33.8
Reasonably comfortable, very comfortable or prosperous	247	78.3	11.5	10.3
Requires help with daily activities	47	44.6	14.1	41.3
Does not require help	557	63.7	18.0	18.4
Food security (last 12 months)[2]				
Low or very low food security	61	39.2	21.6	39.1
Marginal food security	54	39.8	26.2	34.1
High food security	275	75.4	11.9	12.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 4.5.2 presents the findings by selected health and behaviour characteristics. Differences were seen for two health and wellbeing indicators. Specifically, a lower proportion of those with fair or poor health (45.8% vs 65.7%) and those with poor mental wellbeing (34.0% vs 71.7%) agreed that it was easy to access healthy food in their local area compared with their counterparts with more positive health and wellbeing indicators. No differences were associated with health behaviours or risk behaviour indicators.

Table 4.5.2 Perceived ease of access to healthy food in local area by selected health and behaviour characteristics

	Unweighted base[1]	Strongly agree/ Agree	Neutral	Strongly disagree / Disagree
	n	%	%	%
Total sample	**607**	**62.3**	**17.5**	**20.2**
Health and wellbeing indicators				
Self-reported health - Fair or poor	89	45.8	19.2	35.0
Self-reported health - Good, very good, or excellent	434	65.7	16.7	17.6
Life satisfaction - Low to moderate (0 to 6)[2]	94	53.1	22.6	24.4
Life satisfaction - High/very high (7 to 10)	233	68.7	13.3	18.0

Does not feel valued by society[2]	69	47.5	21.5	31.0
Sometimes feel valued by society	145	64.6	17.3	18.1
Definitely feel valued by society	122	73.7	11.0	15.3
Poor mental wellbeing[2]	84	34.0	26.5	39.5
Good mental wellbeing	308	71.7	12.8	15.5
Overweight or obese (BMI ≥25.0)	169	63.6	19.6	16.8
Normal range or underweight (BMI <25.0)	126	66.2	14.5	19.3
Health behaviour indicators				
Does not meet fruit intake recommendations	300	57.7	21.9	20.4
Meets fruit intake recommendations	294	67.4	12.1	20.5
Does not meet vegetable intake recommendations	498	61.5	18.1	20.4
Meets vegetable intake recommendations	83	69.8	14.7	15.6
Does not meet aerobic physical activity recommendations	189	66.4	16.7	17.0
Meets aerobic physical activity recommendations	385	60.7	18.2	21.1
Does not meet muscle strengthening recommendations	298	63.8	19.5	16.7
Meets muscle strengthening recommendations	203	63.8	13.3	22.8
Does not meet screen time recommendations	322	63.2	14.2	22.6
Meets screen time recommendations	228	62.4	19.3	18.3
Does not meet sleep recommendations	174	54.4	21.1	24.6
Meets sleep recommendations	371	66.3	15.2	18.5
Drinks sugar-sweetened beverages daily	74	65.9	12.5	21.6
Drinks sugar-sweetened beverages less than daily	503	61.8	17.8	20.4
Does not meet water recommendations	331	65.3	15.6	19.1
Meets water consumption recommendations	222	55.4	20.3	24.3
Risk behaviour indicators[2]				
Current smoker	28	57.6	8.8	33.6
Ex-smoker	125	62.9	19.3	17.7
Never smoked	189	66.7	14.2	19.1
Current vaper*	10	29.4	22.7	47.9
Ex-vaper	20	59.1	9.2	31.7
Never vaped	312	66.3	15.7	18.0
Had more than 4 standard drinks on a single occasion	188	64.6	15.2	20.1
Has not had more than 4 standard drinks	155	64.4	16.1	19.5
Gambled	104	61.0	16.3	22.7
Never gambled	236	66.5	15.0	18.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
***** Significance testing not conducted due to small base size.

5. Use of public facilities and open spaces

This section presents usage data related to public spaces including open spaces, footpaths, and off-road walking and cycling tracks, and facilities. To ensure residents were using comparable definitions of the spaces, the following descriptions were provided to all respondents:

> ***Public open spaces*** *include all land which is freely accessible that people can visit for recreation, relaxation and socialising, including organised sporting activities and informal play (e.g. your local park, oval or playground). Public open spaces also include 'green spaces', which include areas of natural or cultural heritage value, habitat corridors, some easements, and open water / wetlands (e.g. lakes, state forests, national parks).*
>
> ***Off-road walking and cycling tracks*** *are signed paths / tracks that are not accessible to cars and provide connections between townships, major suburban areas and surrounding open space networks. Footpaths are paved sidewalks, generally found in urban areas. This question is not referring to informal tracks, such as animal tracks or unpaved road reserves.*

The frequency of use of public spaces was measured using a 7-point frequency scale: 'Daily', '4 to 6 times a week', '1 to 3 times a week', '2 to 3 times a month', 'Once a month', 'Once or twice in the last 3 months' and 'Less often'. Respondents answering these questions were categorised into three distinct groups for the purpose of reporting: once per week or more, 1 to 3 times a month, less than once a month. To highlight the biggest potential for gains in use of public spaces, we focus on residents who are non-users.

This section also presents data related to a broader list of public facilities and open spaces that residents have used in the last 12 months, their reasons for use of these public facilities and open spaces, and suggested improvements that would encourage greater use of public facilities and open spaces in the region.

Results in this section are provided for residents aged 3 years and over unless otherwise specified. At the time of reporting, there were no known recent benchmarks available for public open space use amongst Victorian residents. External benchmark data is therefore not reported for results presented in this section. Comparisons to the 2019 ALC, conducted with residents of Loddon Shire, are made where available.

5.1. Frequency of public open space use

Overall, 45.2% of respondents reported using public open spaces at least once per week. This has decreased compared to the results obtained in the 2019 ALC, in which 52.0% of respondents reported being weekly users of public open space. Consistent with 2019, children (64.7%) were significantly more likely to be weekly users of public open spaces compared to adults (40.3%). No significant difference was observed between males and females overall. However, use varied by sex and age, with weekly use higher among males aged 3 to 11 years (70.4%) and 12 to 17 years (64.2%) than males aged 70 years and over (34.9%), and higher among females aged 3 to 11 years (69.0%) and 12 to 17 years (60.0%) than females aged 70 years and over (19.5%). Additionally, residents from Boort & Surrounds (64.6%) were more likely to use public open spaces once a week or more than residents from East Loddon Area (37.3%), Inglewood / Bridgewater & Surrounds (39.9%) and Wedderburn & Surrounds (33.5%).

People from the following marginalised demographic groups were less likely to use public open spaces at least once per week, reinforcing the need to consider the barriers to the use of public open space amongst the more vulnerable members of the community:

- Not sure what neurodivergent means (27.7%) compared to not neurodivergent (53.2%)
- Required help with daily activities (23.6%) compared to does not require help (46.9%)

Table 5.1.1 Frequency of public open space use by selected demographic characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**539**	**45.2**	**26.6**	**28.2**
Children	191	64.7	19.6	15.6
Adults	342	40.3	28.1	31.6
Males	158	47.9	25.1	27.0
Females	365	42.4	28.1	29.5
Sex and age				
Males, 3 to 11	27	70.4	18.5	11.1
Males, 12 to 17	53	64.2	20.8	15.1
Males, 18 to 34	13	24.3	48.6	27.0
Males, 35 to 49	13	75.8	9.2	15.0
Males, 50 to 69	24	50.6	21.4	28.0
Males, 70+	26	34.9	22.5	42.7
Females, 3 to 11	42	69.0	16.7	14.3
Females, 12 to 17	60	60.0	21.7	18.3
Females, 18 to 34	52	41.1	35.4	23.5
Females, 35 to 49	64	50.0	27.0	22.9
Females, 50 to 69	103	32.4	33.6	34.0
Females, 70+	43	19.5	20.4	60.1
Subregion				
Boort & Surrounds	146	64.6	22.6	12.8
East Loddon Area	95	37.3	34.0	28.7
Inglewood / Bridgewater & Surrounds	117	39.9	24.9	35.1
Pyramid Hill & Surrounds	57	52.3	33.0	14.8
South Loddon Area	22	38.1	17.1	44.7
Wedderburn & Surrounds	94	33.5	27.8	38.7
Demographic indicators				
Household size[2]				
1 person	41	54.7	9.2	36.1
2 or 3 people	188	33.6	32.2	34.3
4 or 5 people	89	44.2	35.0	20.8
More than 5 people	24	42.5	16.4	41.1
Born overseas	33	58.1	12.8	29.1

Born in Australia	505	43.9	27.9	28.2
Speaks other main language*	4	90.5	9.5	0.0
Speaks English as main language	532	44.4	26.9	28.7
Aboriginal and/or Torres Strait Islander*	21	26.2	39.8	34.0
Not Aboriginal or Torres Strait Islander	516	45.7	26.2	28.1
LGBTQIA+*	13	44.4	37.8	17.8
Non-LGBTQIA+	521	45.4	26.6	28.0
Neurodivergent	46	31.3	35.6	33.1
Not neurodivergent	345	53.2	23.3	23.5
Maybe	38	44.4	34.0	21.6
Not sure what neurodivergent means	74	27.7	37.6	34.7
Less than Bachelor level education[2]	225	39.6	27.8	32.6
Holds a Bachelor degree or higher	116	43.9	29.9	26.2
Unemployed/Retired[2]	122	32.5	19.8	47.7
Employed	220	44.4	32.5	23.1
Just getting along, poor or very poor[2]	119	38.9	24.7	36.4
Reasonably comfortable, very comfortable or prosperous	223	41.2	30.5	28.3
Requires help with daily activities	43	23.6	29.4	47.0
Does not require help	494	46.9	26.5	26.6
Food security (last 12 months)[2]				
Low or very low food security	55	27.1	19.0	53.9
Marginal food security	49	44.6	45.1	10.3
High food security	238	43.0	27.2	29.9

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Differences in public open space use were seen for some health and wellbeing and health behaviour indicators. A higher proportion of people with the following health, wellbeing or health behaviour characteristics reported using public open spaces less than once in three months or never:

- Fair or poor health (53.3%) compared to good, very good or excellent health (23.1%)
- Did not feel valued by society (57.7%) compared to sometimes felt valued by society (31.9%) and definitely felt valued by society (12.9%)
- Poor mental wellbeing (54.8%) compared to good mental wellbeing (25.8%)
- Did not meet fruit recommendations (36.4%) compared to met recommendations (18.0%)
- Did not meet water recommendations (32.3%) compared to met recommendations (18.3%)

Given the health benefits associated with use of open space, strategies to encourage use of open spaces should consider people who fail to meet established health behaviour recommendations and have poor health and wellbeing. Further research is needed to understand reasons why these groups of people are not using public open spaces frequently.

Table 5.1.2 Frequency of public open space use by selected health and behaviour characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**539**	**45.2**	**26.6**	**28.2**
Health and wellbeing indicators				
Self-reported health - Fair or poor	84	20.6	26.1	53.3
Self-reported health - Good, very good, or excellent	424	49.4	27.5	23.1
Life satisfaction - Low to moderate (0 to 6)[2]	89	34.9	20.0	45.1
Life satisfaction - High/very high (7 to 10)	228	41.5	33.5	25.0
Does not feel valued by society[2]	66	29.5	12.8	57.7
Sometimes feel valued by society	141	34.8	33.3	31.9
Definitely feel valued by society	117	53.3	33.9	12.9
Poor mental wellbeing[2]	83	30.9	14.3	54.8
Good mental wellbeing	259	42.6	31.6	25.8
Overweight or obese (BMI ≥25.0)	162	46.4	24.1	29.5
Normal range or underweight (BMI <25.0)	122	44.4	21.5	34.1
Health behaviour indicators				
Does not meet fruit intake recommendations	268	39.8	23.7	36.4
Meets fruit intake recommendations	260	51.9	30.0	18.0
Does not meet vegetable intake recommendations	441	44.4	25.9	29.8
Meets vegetable intake recommendations	75	51.6	30.5	17.9
Does not meet aerobic physical activity recommendations	170	35.0	30.0	35.0
Meets aerobic physical activity recommendations	341	48.5	25.9	25.6
Does not meet muscle strengthening recommendations	271	41.3	27.5	31.2
Meets muscle strengthening recommendations	174	49.4	21.7	28.9
Does not meet screen time recommendations	300	43.4	22.3	34.3
Meets screen time recommendations	214	48.1	30.7	21.2
Does not meet sleep recommendations	160	43.6	21.0	35.5
Meets sleep recommendations	348	46.7	28.1	25.2
Drinks sugar-sweetened beverages daily	68	32.0	22.1	45.8
Drinks sugar-sweetened beverages less than daily	469	47.2	27.4	25.4
Does not meet water recommendations	306	42.5	25.2	32.3
Meets water consumption recommendations	210	51.0	30.7	18.3
Risk behaviour indicators[2]				

Current smoker	27	52.2	26.9	20.9
Ex-smoker	119	36.8	31.5	31.7
Never smoked	182	40.3	26.7	33.0
Current vaper*	10	16.3	45.6	38.1
Ex-vaper	19	39.5	53.1	7.4
Never vaped	299	40.8	25.8	33.4
Had more than 4 standard drinks on a single occasion	184	40.2	30.8	28.9
Has not had more than 4 standard drinks	145	39.1	24.3	36.6
Gambled	100	41.5	35.6	22.9
Never gambled	227	38.9	24.4	36.7

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

5.2. Frequency of footpath use

Amongst Loddon Shire residents who completed the 2025 ALC, around 59.0% used footpaths in the area at least once per week (see Table 5.2.1). Approximately 27.2% reported using footpaths less often or never. No differences were seen between adults and children or males and females. A greater proportion of residents of East Loddon Area (51.0%) and Wedderburn & Surrounds (40.8%) rarely used footpaths compared to residents of Boort & Surrounds (12.0%) and Inglewood / Bridgewater & Surrounds (12.7%). This suggests improving the access to or usability of footpaths in the area has the potential to increase use amongst residents.

Table 5.2.1 Frequency of footpath use by selected demographic characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**541**	**59.0**	**13.8**	**27.2**
Children	191	57.0	14.8	28.2
Adults	344	59.0	13.7	27.3
Males	159	61.0	12.3	26.7
Females	366	57.1	16.0	26.9
Sex and age				
Males, 3 to 11	27	44.4	14.8	40.7
Males, 12 to 17	53	71.7	7.5	20.8
Males, 18 to 34	13	40.6	0.0	59.4
Males, 35 to 49	13	75.8	9.2	15.0
Males, 50 to 69	24	65.2	17.1	17.7
Males, 70+	27	62.9	16.2	20.8

Females, 3 to 11	42	59.5	19.0	21.4
Females, 12 to 17	60	58.3	18.3	23.3
Females, 18 to 34	52	58.4	12.7	29.0
Females, 35 to 49	64	52.3	19.4	28.3
Females, 50 to 69	101	56.1	13.1	30.8
Females, 70+	46	59.1	20.9	19.9
Subregion				
Boort & Surrounds	147	77.4	10.6	12.0
East Loddon Area	94	39.9	9.1	51.0
Inglewood / Bridgewater & Surrounds	116	70.2	17.1	12.7
Pyramid Hill & Surrounds	59	51.3	26.2	22.5
South Loddon Area	21	47.4	2.0	50.5
Wedderburn & Surrounds	96	44.3	14.9	40.8
Demographic indicators				
Household size[2]				
1 person	40	54.8	24.3	20.9
2 or 3 people	190	63.5	10.7	25.8
4 or 5 people	89	54.7	15.8	29.6
More than 5 people	25	48.2	6.1	45.7
Born overseas	32	66.8	7.5	25.7
Born in Australia	508	58.3	14.4	27.3
Speaks other main language*	4	90.5	9.5	0.0
Speaks English as main language	534	58.4	14.0	27.6
Aboriginal and/or Torres Strait Islander*	21	61.6	4.4	34.0
Not Aboriginal or Torres Strait Islander	518	58.8	14.2	27.0
LGBTQIA+*	13	82.2	5.5	12.3
Non-LGBTQIA+	523	58.9	13.3	27.8
Neurodivergent	46	70.1	2.6	27.3
Not neurodivergent	344	60.6	16.2	23.1
Maybe	38	54.1	14.2	31.7
Not sure what neurodivergent means	72	49.5	10.0	40.4
Less than Bachelor level education[2]	225	56.9	14.3	28.8
Holds a Bachelor degree or higher	117	69.1	11.3	19.6
Unemployed/Retired[2]	126	56.0	19.2	24.8
Employed	217	60.2	10.9	29.0
Just getting along, poor or very poor[2]	119	51.6	13.5	34.9
Reasonably comfortable, very comfortable or prosperous	224	63.6	14.0	22.3
Requires help with daily activities	43	32.2	24.4	43.4
Does not require help	497	61.6	12.8	25.6
Food security (last 12 months)[2]				

Low or very low food security	55	44.9	17.7	37.4
Marginal food security	49	64.7	11.4	23.9
High food security	240	61.6	13.1	25.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

The profile of non-users of footpaths was similar somewhat similar to that observed for public open space use. Some people reporting poorer health and wellbeing outcomes were more likely to be non-users of footpaths. That is, people reporting lower levels of health and wellbeing were more likely to be non-users of footpaths. The proportion of non-users was particularly high for those reporting:

- Do not feel valued by society (46.2%) compared to sometimes feel valued by society (17.9%)
- Normal weight or underweight (46.1%) compared to overweight or obese (18.5%)

There was no association between footpath use and health behaviour or risk behaviour indicators.

Table 5.2.2 Frequency of footpath use by selected health and behaviour characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**541**	**59.0**	**13.8**	**27.2**
Health and wellbeing indicators				
Self-reported health - Fair or poor	87	47.7	17.9	34.4
Self-reported health - Good, very good, or excellent	425	61.8	12.6	25.6
Life satisfaction - Low to moderate (0 to 6)[2]	92	55.8	15.0	29.2
Life satisfaction - High/very high (7 to 10)	226	61.0	13.1	25.9
Does not feel valued by society[2]	68	43.4	10.5	46.2
Sometimes feel valued by society	141	68.6	13.5	17.9
Definitely feel valued by society	116	61.4	15.4	23.2
Poor mental wellbeing[2]	83	43.3	14.0	42.7
Good mental wellbeing	261	62.9	13.7	23.4
Overweight or obese (BMI ≥25.0)	163	61.8	19.7	18.5
Normal range or underweight (BMI <25.0)	124	47.8	6.1	46.1
Health behaviour indicators				
Does not meet fruit intake recommendations	269	54.3	16.3	29.4
Meets fruit intake recommendations	261	64.0	11.1	25.0
Does not meet vegetable intake recommendations	443	57.9	14.5	27.7
Meets vegetable intake recommendations	74	66.7	12.5	20.8

Does not meet aerobic physical activity recommendations	169	56.2	15.9	27.9
Meets aerobic physical activity recommendations	342	58.6	13.7	27.7
Does not meet muscle strengthening recommendations	274	54.4	19.3	26.4
Meets muscle strengthening recommendations	172	60.4	8.8	30.8
Does not meet screen time recommendations	298	54.4	16.3	29.3
Meets screen time recommendations	217	62.2	11.8	26.0
Does not meet sleep recommendations	160	58.8	18.5	22.6
Meets sleep recommendations	350	57.7	12.3	29.9
Drinks sugar-sweetened beverages daily	68	59.8	11.5	28.7
Drinks sugar-sweetened beverages less than daily	471	58.8	14.3	27.0
Does not meet water recommendations	306	60.6	14.7	24.7
Meets water consumption recommendations	211	54.6	12.2	33.2
Risk behaviour indicators[2]				
Current smoker	27	51.0	32.3	16.7
Ex-smoker	119	61.4	9.3	29.2
Never smoked	184	59.7	11.6	28.7
Current vaper*	10	84.0	4.5	11.5
Ex-vaper	19	38.9	11.6	49.5
Never vaped	301	59.8	13.7	26.4
Had more than 4 standard drinks on a single occasion	182	60.5	13.9	25.6
Has not had more than 4 standard drinks	149	57.1	12.2	30.7
Gambled	102	59.2	18.6	22.1
Never gambled	226	58.5	10.5	31.0

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

5.3. Frequency of off-road walking and cycling track use

Amongst Loddon Shire residents who completed the 2025 ALC, around 26.1% used off-road walking and cycling tracks in the area at least once per week (see Table 5.3.1). No significant differences were observed between adults and children, or between males and females overall. However, use varied by sex and age, with weekly use higher among males aged 12 to 17 years (41.5%) and females aged 12 to 17 years (38.3%). Males aged 70 years and over (73.1%) and females aged 70 years and over (75.6%) were among the most likely to use off-road walking and cycling tracks less often or never.

Usage was also lower amongst people from the following demographic groups, suggesting that they may benefit from targeted promotion efforts:

- Maybe neurodivergent (13.5%) compared to not neurodivergent (32.2%)

- Required help with daily activities (10.5%) compared to did not require help (27.7%)

Table 5.3.1 Frequency of off-road walking and cycling track use by selected demographic characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**533**	**26.1**	**17.5**	**56.4**
Children	190	30.4	18.2	51.3
Adults	337	24.8	17.5	57.7
Males	154	31.2	16.8	52.0
Females	363	21.0	18.3	60.7
Sex and age				
Males, 3 to 11	27	22.2	18.5	59.3
Males, 12 to 17	53	41.5	20.8	37.7
Males, 18 to 34	13	24.3	13.5	62.2
Males, 35 to 49	12	42.0	32.1	25.9
Males, 50 to 69	23	42.0	15.9	42.1
Males, 70+	24	13.0	13.9	73.1
Females, 3 to 11	41	26.8	17.1	56.1
Females, 12 to 17	60	38.3	18.3	43.3
Females, 18 to 34	52	11.1	26.6	62.3
Females, 35 to 49	64	24.4	18.9	56.7
Females, 50 to 69	101	19.3	17.0	63.7
Females, 70+	44	13.6	10.7	75.6
Subregion				
Boort & Surrounds	144	30.4	22.5	47.2
East Loddon Area	94	20.3	10.4	69.2
Inglewood / Bridgewater & Surrounds	115	26.4	17.8	55.9
Pyramid Hill & Surrounds	57	23.4	27.5	49.1
South Loddon Area	22	42.9	8.0	49.1
Wedderburn & Surrounds	93	18.9	15.0	66.0
Demographic indicators				
Household size[2]				
1 person	41	22.9	20.8	56.4
2 or 3 people	184	29.1	12.5	58.3
4 or 5 people	88	19.7	26.6	53.7
More than 5 people	24	16.3	11.7	72.0
Born overseas	31	54.5	14.7	30.8
Born in Australia	501	23.8	17.6	58.6

Speaks other main language*	3	82.7	0.0	17.3
Speaks English as main language	527	25.4	17.5	57.1
Aboriginal and/or Torres Strait Islander*	21	18.3	14.5	67.1
Not Aboriginal or Torres Strait Islander	510	26.4	17.3	56.2
LGBTQIA+*	13	42.6	26.6	30.7
Non-LGBTQIA+	515	26.1	17.2	56.7
Neurodivergent	45	20.0	27.0	53.0
Not neurodivergent	342	32.2	18.3	49.5
Maybe	38	13.5	19.4	67.1
Not sure what neurodivergent means	72	16.9	11.6	71.5
Less than Bachelor level education[2]	221	24.4	17.5	58.1
Holds a Bachelor degree or higher	115	27.1	17.1	55.8
Unemployed/Retired[2]	120	22.1	13.3	64.5
Employed	217	26.3	19.6	54.1
Just getting along, poor or very poor[2]	115	23.9	13.2	62.9
Reasonably comfortable, very comfortable or prosperous	222	25.5	20.4	54.1
Requires help with daily activities	41	10.5	13.8	75.7
Does not require help	491	27.7	17.7	54.6
Food security (last 12 months)[2]				
Low or very low food security	53	21.5	20.7	57.9
Marginal food security	49	26.1	20.3	53.6
High food security	235	25.5	16.0	58.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Off-road walking and cycling track use differed according to self-reported health (see Table 5.3.2). Infrequent off-road track use was higher among those who reported fair or poor health (74.7%) compared to those who reported good, very good or excellent health (53.7%).

Off-road walking and cycling track use was also associated with aerobic physical activity. Those who did not meet aerobic physical activity recommendations (10.5%) were less likely to report weekly track use compared to those who met recommendations (31.1%).

There were no differences in frequency of off-road track use according to engagement in risk behaviours.

Table 5.3.2 Frequency of off-road walking and cycling track use by selected health and behaviour characteristics

	Unweighted base[1]	Once a week or more often	< once a week, > once in the last 3 months	Less often / never
	n	%	%	%
Total sample	**533**	**26.1**	**17.5**	**56.4**

Health and wellbeing indicators				
Self-reported health - Fair or poor	82	13.6	11.8	74.7
Self-reported health - Good, very good, or excellent	421	28.4	17.9	53.7
Life satisfaction - Low to moderate (0 to 6)[2]	89	25.9	17.5	56.6
Life satisfaction - High/very high (7 to 10)	223	25.2	17.2	57.6
Does not feel valued by society[2]	66	27.0	8.5	64.6
Sometimes feel valued by society	138	25.2	19.2	55.6
Definitely feel valued by society	115	23.7	20.0	56.3
Poor mental wellbeing[2]	82	17.8	11.7	70.5
Good mental wellbeing	255	26.7	18.9	54.4
Overweight or obese (BMI ≥25.0)	159	29.8	20.1	50.0
Normal range or underweight (BMI <25.0)	122	29.0	10.0	61.0
Health behaviour indicators				
Does not meet fruit intake recommendations	266	26.1	18.4	55.6
Meets fruit intake recommendations	256	25.5	16.4	58.1
Does not meet vegetable intake recommendations	436	27.1	17.6	55.3
Meets vegetable intake recommendations	74	19.0	18.6	62.5
Does not meet aerobic physical activity recommendations	167	10.5	21.0	68.5
Meets aerobic physical activity recommendations	338	31.1	16.8	52.1
Does not meet muscle strengthening recommendations	269	24.1	19.2	56.7
Meets muscle strengthening recommendations	172	26.9	18.2	54.9
Does not meet screen time recommendations	295	24.6	17.1	58.3
Meets screen time recommendations	213	27.0	18.7	54.3
Does not meet sleep recommendations	157	25.9	23.0	51.1
Meets sleep recommendations	346	25.5	15.4	59.1
Drinks sugar-sweetened beverages daily	68	23.2	15.3	61.5
Drinks sugar-sweetened beverages less than daily	463	26.6	17.7	55.7
Does not meet water recommendations	301	26.0	18.1	55.8
Meets water consumption recommendations	209	24.4	16.9	58.7
Risk behaviour indicators[2]				
Current smoker	27	22.3	43.3	34.4
Ex-smoker	118	26.9	12.4	60.7
Never smoked	179	23.4	14.7	61.9
Current vaper*	10	0.0	45.5	54.5
Ex-vaper	19	26.0	6.3	67.7

Never vaped	294	25.6	16.4	58.0
Had more than 4 standard drinks on a single occasion	182	27.8	17.0	55.2
Has not had more than 4 standard drinks	142	19.3	16.1	64.6
Gambled	98	24.6	17.9	57.5
Never gambled	224	24.7	16.1	59.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

5.4. Use of other public facilities or open spaces

All respondents were asked to indicate the other types of public facilities or open spaces they had used in the last 12 months from a list provided. As the prior question asked about frequency of use of public open spaces more broadly, footpaths and off-road walking or cycling tracks, these were excluded from the list of other facilities or open spaces provided. Overall, 9.8% of respondents indicated that they had not used any other types of public facilities or open spaces in the last 12 months. These respondents were subsequently excluded from the following analysis looking at types of public facilities or open spaces used and reasons for use of public facilities and open spaces.

5.4.1. Types of public facilities or open spaces used

Of the other types of public facilities and open spaces listed, sports grounds, ovals and clubrooms were the most common with approximately 65.7% of respondents having used them. The next most common were parks (55.3%), halls and community centres (41.2%), swimming pools and splash parks (40.4%) and playgrounds (30.9%).

Table 5.4.1.1 Types of public facilities or open spaces used by user types

	All respondents %
Unweighted base (n)[1]	**498**
Sports grounds, ovals and clubrooms	65.7
Parks	55.3
Halls / community centres	41.2
Swimming pools / splash parks	40.4
Playgrounds	30.9
Hard courts (e.g., netball / tennis)	17.3
Indoor sports / leisure / fitness centres	16.5
Community gardens	15.8
Skateparks / BMX	3.7
After hours usage of education facilities (e.g., school, TAFE, university)	1.8

[1] Base sizes include respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

For the top eight facility and open space types, analysis was conducted regarding the demographic characteristics of users and their health and wellbeing, health behaviour and risk behaviour indicators. 'Skateparks / BMX' and 'after-hours usage of education facilities' were not explored further due to small base sizes.

Differences between children and adults were evident for several facility types. Children were more likely than adults to use sports grounds, ovals and clubrooms (77.2% vs 62.6%), swimming pools / splash parks (72.2% vs 32.3%), playgrounds (68.5% vs 21.2%), hard courts (36.0% vs 12.4%) and indoor sports / leisure / fitness centres (27.2% vs 13.9%). Females were more likely than males to use swimming pools / splash parks (56.2% vs 27.1%) and playgrounds (40.2% vs 22.3%). Facility usage also differed between subregions, demonstrating a need for tailored, localised action and engagement when it comes to facility additions, removals or upgrades.

Usage of top facilities differed by demographic indicators. Notable differences include:

- Use of sports grounds, ovals and clubrooms was lower among residents in one person households and 2 to 3 person households compared to those in 4 to 5 person households and households with more than 5 people (48.9% and 55.4% vs 80.3% and 89.0%), among unemployed/retired respondents compared to employed respondents (42.7% vs 74.0%), and among those who required help with daily activities compared to those who did not require help (36.9% vs 68.6%).
- Use of parks was lower among residents who were not sure what neurodivergent means compared to those who were not neurodivergent (36.3% vs 61.1%).
- Use of halls and community centres was lower among residents who required help with daily activities compared to those who did not require help (19.2% vs 43.4%).
- Use of swimming pools and splash parks was lower among people from 1 person households compared to larger households (9.2% vs 32.5%, 42.4% and 49.6%), among those who were not sure what neurodivergent means compared to those who were not neurodivergent (27.6% vs 43.5%), among those with less than Bachelor level education compared to those with a Bachelor degree or higher (28.5% vs 54.8%), and among unemployed/retired respondents compared to employed respondents (18.5% vs 40.1%).
- Use of playgrounds was lower among 2 to 3 person households compared to 4 to 5 person households (14.2% vs 36.3%), and among those who were not sure what neurodivergent means compared to those who were not neurodivergent (8.5% vs 35.1%).
- Hard courts were less frequently used by people from 2 to 3 person households compared to 4 to 5 person households (3.3% vs 31.7%), and by unemployed/retired respondents compared to employed respondents (2.0% vs 18.2%).
- Community garden use was lower among residents with marginal food security compared to those with high food security (5.8% vs 20.2%).

When looking at health and wellbeing indicators, differences were seen in usage of several of the top facilities. Specifically:

- Those with fair or poor self-rated health were less likely to use sports grounds, ovals and clubrooms (46.8% vs 70.4%), swimming pools / splash parks (21.5% vs 44.0%) and hard courts (3.9% vs 19.5%) compared to those with good, very good or excellent health.

- Those who did not feel valued by society were less likely to use sports grounds, ovals and clubrooms compared to those who definitely felt valued by society (43.0% vs 75.6%).
- Those who were overweight or obese were more likely to use parks than those in the normal range or underweight BMI category (64.0% vs 37.0%).
- Use of playgrounds was higher among those who met fruit intake recommendations (44.2% vs 21.2%) and aerobic physical activity recommendations (44.0% vs 26.6%) compared to those who did not meet recommendations.
- Those who met water consumption recommendations were more likely to use swimming pools / splash parks (55.4% vs 34.9%), hard courts (28.6% vs 13.1%) and indoor sports / leisure / fitness centres (26.3% vs 12.7%) compared to those who did not meet water consumption recommendations.

When looking at risk behaviours, current smokers were less likely to use hard courts compared to ex-smokers or those who had never smoked (0.0% vs 13.0% and 13.9%). Respondents who gambled were less likely to use playgrounds compared to those who had never gambled (12.5% vs 26.8%).

Future research could focus on understanding the specific drivers for, and barriers to, using specific facilities, with the aim of increasing use across the broader population.

Table 5.4.1.2 Public facilities and open spaces by selected demographic characteristics

	Unweighted base[1]	Sports grounds, ovals and clubrooms	Parks	Halls / community centres	Swimming pools / splash parks	Playgrounds	Hard courts (e.g., netball / tennis)	Indoor sports / leisure / fitness centres	Community gardens
	n	%	%	%	%	%	%	%	%
Total sample	**498**	**65.7**	**55.3**	**41.2**	**40.4**	**30.9**	**17.3**	**16.5**	**15.8**
Children	184	77.2	61.4	43.6	72.2	68.5	36.0	27.2	10.1
Adults	309	62.6	53.9	41.0	32.3	21.2	12.4	13.9	17.6
Males	154	68.4	58.6	38.7	27.1	22.3	13.4	14.1	15.9
Females	330	63.1	51.8	44.3	56.2	40.2	22.3	19.7	16.0
Sex and age									
Males, 3 to 11	28	82.1	64.3	39.3	71.4	89.3	25.0	17.9	7.1
Males, 12 to 17	52	75.0	55.8	34.6	57.7	32.7	28.8	30.8	1.9
Males, 18 to 34	10	80.0	56.0	36.0	8.1	31.9	20.0	0.0	4.0
Males, 35 to 49	13	84.2	63.5	30.0	65.8	26.6	26.6	48.1	27.3
Males, 50 to 69	23	65.8	62.0	31.0	18.9	9.5	10.8	9.5	18.4
Males, 70+	26	53.7	52.0	59.4	7.1	5.7	0.0	8.5	22.6
Females, 3 to 11	40	75.0	65.0	47.5	92.5	92.5	40.0	32.5	15.0
Females, 12 to 17	56	85.7	62.5	53.6	69.6	46.4	55.4	32.1	16.1
Females, 18 to 34	50	63.8	60.7	14.1	61.3	48.4	22.2	7.4	13.4
Females, 35 to 49	57	70.3	57.7	47.3	67.3	52.4	35.2	20.2	20.9
Females, 50 to 69	88	52.1	41.5	48.6	42.9	18.4	5.5	17.3	17.0
Females, 70+	38	46.3	35.8	61.1	17.2	10.3	2.2	18.8	11.8
Subregion									
Boort & Surrounds	146	76.9	64.3	42.5	63.3	37.9	18.9	29.3	17.0
East Loddon Area	84	71.8	44.7	36.0	45.9	38.9	27.1	10.3	4.3
Inglewood / Bridgewater & Surrounds	108	56.4	53.0	42.4	26.8	23.0	8.1	15.0	19.6
Pyramid Hill & Surrounds	53	69.4	68.9	55.4	35.2	38.2	39.7	13.8	18.5

South Loddon Area	18	31.1	60.9	27.0	1.3	26.4	0.0	3.7	2.7
Wedderburn & Surrounds	81	69.2	42.3	35.5	35.6	22.1	15.3	10.4	19.8
Demographic indicators									
Household size[2]									
1 person	34	48.9	58.8	43.1	9.2	17.9	10.8	14.7	25.9
2 or 3 people	169	55.4	50.9	37.3	32.5	14.2	3.3	11.0	14.9
4 or 5 people	83	80.3	55.6	42.3	42.4	36.3	31.7	20.1	15.6
More than 5 people	23	89.0	61.3	63.7	49.6	27.1	15.1	10.9	29.8
Born overseas*	29	43.0	71.2	26.7	36.6	19.8	2.0	19.5	21.9
Born in Australia	468	68.1	53.7	42.8	40.8	31.9	18.8	16.3	15.2
Speaks other main language*	3	0.0	10.8	10.8	48.8	48.8	48.8	51.2	51.2
Speaks English as main language	492	66.6	55.2	41.7	40.5	30.8	17.0	16.4	15.7
Aboriginal and/or Torres Strait Islander*	18	57.0	66.3	50.8	43.8	34.9	21.3	8.2	17.4
Not Aboriginal or Torres Strait Islander	478	66.0	54.9	40.9	40.4	30.7	17.2	16.8	15.8
LGBTQIA+*	11	53.0	36.7	19.4	35.9	51.8	17.3	4.6	17.3
Non-LGBTQIA+	482	66.5	56.0	41.1	40.8	30.5	17.5	16.9	15.9
Neurodivergent	41	67.3	52.3	26.0	51.6	46.8	19.4	18.6	15.9
Not neurodivergent	317	65.5	61.1	42.9	43.5	35.1	20.1	19.1	13.1
Maybe	37	72.9	56.6	39.0	61.0	51.9	19.5	7.3	17.2
Not sure what neurodivergent means	62	67.3	36.3	30.4	27.6	8.5	12.1	8.5	8.8
Less than Bachelor level education[2]	197	62.8	53.1	38.6	28.5	18.8	10.3	11.9	16.0
Holds a Bachelor degree or higher	110	64.3	60.6	51.3	54.8	35.3	24.7	25.5	27.9
Unemployed/Retired[2]	110	42.7	49.8	44.6	18.5	12.9	2.0	14.3	23.2
Employed	198	74.0	56.7	38.4	40.1	25.9	18.2	13.9	14.8
Just getting along, poor or very poor[2]	103	57.4	57.6	29.2	29.3	20.0	9.4	15.4	16.0
Reasonably comfortable, very comfortable or prosperous	205	66.8	52.0	48.3	34.7	22.3	14.7	13.1	19.0

Requires help with daily activities	35	36.9	70.5	19.2	27.9	32.8	16.1	15.3	29.0
Does not require help	461	68.6	53.7	43.4	41.7	30.9	17.5	16.8	14.8
Food security (last 12 months)[2]									
Low or very low food security	43	54.7	54.5	34.5	33.9	29.6	7.3	6.9	17.3
Marginal food security	46	58.6	65.3	30.5	29.3	23.3	21.0	13.3	5.8
High food security	220	65.0	51.4	44.5	32.5	19.0	11.7	15.5	20.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 5.4.1.3 Public facilities and open spaces by selected health and behaviour characteristics

	Unweighted base[1]	Sports grounds, ovals and clubrooms	Parks	Halls / community centres	Swimming pools / splash parks	Playgrounds	Hard courts (e.g., netball / tennis)	Indoor sports / leisure / fitness centres	Community gardens
	n	%	%	%	%	%	%	%	%
Total sample	**498**	**65.7**	**55.3**	**41.2**	**40.4**	**30.9**	**17.3**	**16.5**	**15.8**
Health and wellbeing indicators									
Self-reported health - Fair or poor	69	46.8	46.8	34.5	21.5	22.2	3.9	9.0	15.4
Self-reported health - Good, very good, or excellent	404	70.4	56.1	43.3	44.0	32.5	19.5	17.9	16.0
Life satisfaction - Low to moderate (0 to 6)[2]	71	53.6	67.0	33.9	35.0	27.4	9.0	19.1	17.6
Life satisfaction - High/very high (7 to 10)	215	67.1	48.6	42.0	32.1	19.1	13.9	11.4	16.4
Does not feel valued by society[2]	53	43.0	53.1	30.8	36.3	29.1	6.2	18.9	21.2
Sometimes feel valued by society	128	61.0	52.7	42.3	30.7	21.2	8.7	13.6	16.4
Definitely feel valued by society	111	75.6	54.3	42.9	32.0	17.8	18.8	11.2	18.7
Poor mental wellbeing[2]	64	50.0	57.0	26.9	40.1	22.6	6.9	21.4	17.7
Good mental wellbeing	245	65.3	53.2	44.0	30.5	20.9	13.6	12.3	17.6

Overweight or obese (BMI ≥25.0)	146	60.9	64.0	43.6	35.8	21.2	13.0	20.2	21.7
Normal range or underweight (BMI <25.0)	115	73.0	37.0	41.2	39.5	30.2	22.8	17.2	8.6
Health behaviour indicators									
Does not meet fruit intake recommendations	240	61.4	54.7	36.1	36.5	21.2	15.3	13.9	18.0
Meets fruit intake recommendations	248	71.5	56.4	48.9	46.3	44.2	20.3	20.6	13.8
Does not meet vegetable intake recommendations	409	66.0	57.1	41.9	39.4	29.2	16.1	15.9	15.9
Meets vegetable intake recommendations	67	68.8	45.8	41.5	54.6	45.4	27.7	25.7	19.2
Does not meet aerobic physical activity recommendations	146	60.8	61.1	40.6	48.0	44.0	11.7	16.2	14.6
Meets aerobic physical activity recommendations	324	67.7	53.4	42.6	39.4	26.6	19.2	16.5	17.0
Does not meet muscle strengthening recommendations	247	68.1	61.3	42.9	40.4	33.4	18.1	19.2	18.2
Meets muscle strengthening recommendations	164	62.9	46.8	39.5	35.0	20.0	16.9	15.8	15.7
Does not meet screen time recommendations	271	67.0	56.3	39.3	41.3	30.4	14.7	19.1	18.9
Meets screen time recommendations	203	66.6	53.8	43.6	41.5	32.5	20.1	13.7	13.9
Does not meet sleep recommendations	147	54.8	57.3	32.8	35.1	28.0	14.8	19.0	19.1
Meets sleep recommendations	322	71.8	53.9	45.7	43.9	33.2	17.6	15.3	14.0
Drinks sugar-sweetened beverages daily	55	71.5	54.5	34.2	47.2	29.4	17.4	16.1	23.5
Drinks sugar-sweetened beverages less than daily	441	65.1	55.3	42.2	39.6	31.0	17.3	16.6	14.9
Does not meet water recommendations	280	65.0	57.9	42.7	34.9	28.4	13.1	12.7	17.1
Meets water consumption recommendations	196	68.4	50.7	39.5	55.4	39.2	28.6	26.3	14.2
Risk behaviour indicators[2]									
Current smoker	23	59.9	73.9	23.5	17.4	17.9	0.0	4.9	26.9
Ex-smoker	104	59.7	53.2	37.8	27.8	19.5	13.0	8.5	15.7
Never smoked	169	66.6	49.2	47.4	36.5	23.6	13.9	17.8	17.4

Current vaper*	9	62.4	83.2	7.5	25.6	37.6	0.0	0.0	2.8
Ex-vaper	19	67.7	36.3	11.6	32.6	19.0	33.4	2.1	8.5
Never vaped	268	62.3	53.2	45.2	32.0	20.7	10.7	15.3	19.0
Had more than 4 standard drinks on a single occasion	169	63.6	51.2	38.5	29.4	18.3	13.0	11.3	16.7
Has not had more than 4 standard drinks	128	61.5	55.8	45.7	36.1	26.7	10.5	17.8	19.1
Gambled	98	68.1	54.6	32.2	24.6	12.5	12.0	14.4	21.5
Never gambled	196	58.6	52.0	45.8	36.3	26.8	12.1	13.1	15.0

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

5.4.2. Reasons for use of public facilities or open spaces

Regardless of how frequently they had used the areas, all respondents were asked to provide the reasons why they had used public facilities and open spaces in their area in the past 12 months.

The top three reasons for use of public facilities and open spaces were each selected by over half of all respondents: socialising with family or friends (60.4%), exercise or health and fitness (57.6%) and for fun or enjoyment (55.6%). The next most frequently reported reasons were for organised sport (33.8%), mental health and wellbeing (28.0%) and entertaining kids / watching kids' activities (26.1%).

The top three main reasons reported for using public facilities and open spaces were the same as those reported in the 2019 ALC, however frequency reporting of these reasons differ. Respondents to the 2019 ALC reported using public facilities or open spaces for unstructured physical recreation activities (44.9%) and commuting (16.9%) more frequently compared to 2025 respondents (23.3% and 8.6%, respectively). '*For my mental health and wellbeing'* and '*taking part in cultural activities or events on Country'* were added as response options in 2025 reflecting to increased awareness of the importance of mental health, wellbeing and cultural participation. These findings suggest that reasons for using public facilities and open spaces shift over time, highlighting the importance of regularly checking in with residents to ensure their needs are being met and that any barriers to use are identified and addressed.

Full data from comparable demographic subgroups, health and wellbeing indicators, and health and risk behaviours are available in Table 5.4.2.2 and Table 5.4.2.3.

Table 5.4.2.1 Reasons for using public facilities or open spaces by user types

	All respondents %
Unweighted base (n)[1]	**494**
Socialising with family / friends	60.4
Exercise / health and fitness	57.6
For fun / enjoyment	55.6
Organised sport (e.g., cricket or netball for a club)	33.8
For my mental health and wellbeing	28.0
Entertaining kids / watching kids' activities	26.1
Community event / performance	24.4
For time to myself	24.0
Unstructured physical recreation activities	23.3
Exercising the dog	21.6
Getting back to nature	17.6
Commuting (i.e., to get from a to b)	8.6
Some other reason	3.0
Taking part in cultural activities or events on Country	2.3

[1] Base sizes include respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

For the top ten reasons reported in the ALC, analysis was conducted regarding the demographic characteristics, health and wellbeing characteristics, health behaviours and risk behaviours of users, subgroup comparisons are shown below in Tables 5.4.2.2 and 5.4.2.3.

Children were more likely than adults to use public facilities and open spaces for socialising with family / friends (73.7% vs 57.4%), fun / enjoyment (72.9% vs 50.4%) and organised sport (55.2% vs 28.3%). Adults were more likely than children to use public facilities and open spaces for mental health and wellbeing (32.3% vs 13.1%), time to themselves (27.6% vs 12.4%) and exercising the dog (23.7% vs 12.7%). No significant difference was seen between males and females overall.

Differences in use of public facilities and open spaces for various reasons were seen across some subregions and selected additional demographic indicators (see Table 5.4.2.2 for more detail). Likewise, there were differences in reasons for usage for selected health and wellbeing indicators, health behaviours and risk behaviours (see Tables 5.4.2.3 for more detail).

Table 5.4.2.2 Top 10 reasons for using public facilities or open spaces by selected demographic characteristics

	Unweighted base[1]	Socialising with family / friends	Exercise / health and fitness	For fun / enjoyment	Organised sport (e.g., cricket or netball for a club)	For my mental health and wellbeing	Entertaining kids / watching kids' activities	Community event / performance	For time to myself	Unstructured physical recreation activities	Exercising the dog
	n	%	%	%	%	%	%	%	%	%	%
Total sample	**494**	**60.4**	**57.6**	**55.6**	**33.8**	**28.0**	**26.1**	**24.4**	**24.0**	**23.3**	**21.6**
Children	181	73.7	58.4	72.9	55.2	13.1	17.9	21.5	12.4	24.3	12.7
Adults	308	57.4	58.3	50.4	28.3	32.3	28.8	25.5	27.6	23.4	23.7
Males	153	57.4	56.4	59.9	28.5	29.6	21.6	22.9	26.7	20.6	25.0
Females	328	64.3	59.6	49.6	40.6	26.8	31.4	26.2	21.3	26.1	17.9
Sex and age											
Males, 3 to 11	27	74.1	51.9	81.5	55.6	14.8	25.9	29.6	0.0	29.6	7.4
Males, 12 to 17	52	65.4	55.8	65.4	50.0	9.6	5.8	17.3	25.0	17.3	15.4
Males, 18 to 34	11	62.0	51.7	82.8	62.0	20.7	17.2	38.0	17.2	41.3	17.2
Males, 35 to 49	13	85.0	85.0	81.9	45.0	63.5	35.8	30.0	39.2	39.2	51.9
Males, 50 to 69	23	58.3	57.5	52.5	10.8	37.3	20.2	10.8	34.2	6.9	34.2
Males, 70+	25	36.9	52.2	33.9	13.3	23.6	25.7	31.0	29.5	20.7	11.8
Females, 3 to 11	41	80.5	53.7	70.7	53.7	9.8	26.8	17.1	2.4	22.0	17.1
Females, 12 to 17	54	79.6	77.8	70.4	66.7	20.4	9.3	25.9	27.8	25.9	13.0
Females, 18 to 34	49	56.2	58.5	48.1	36.2	31.3	52.8	15.9	23.2	27.2	14.9
Females, 35 to 49	57	70.3	48.4	64.7	59.5	38.8	61.2	29.5	21.5	29.5	26.9
Females, 50 to 69	89	56.6	60.6	34.1	23.6	27.0	22.6	37.1	27.2	27.4	20.8
Females, 70+	37	55.7	64.0	36.6	32.2	29.1	16.7	14.5	16.2	22.3	7.8
Subregion											
Boort & Surrounds	146	69.9	66.3	61.2	46.3	31.5	32.0	27.8	30.0	23.9	20.6
East Loddon Area	84	51.3	49.1	58.0	34.2	35.2	22.3	20.5	30.1	21.4	19.2
Inglewood / Bridgewater & Surrounds	104	51.8	54.5	45.9	25.9	17.5	29.2	25.6	11.6	19.3	27.9

Pyramid Hill & Surrounds	52	59.5	65.4	53.7	35.9	36.4	26.6	25.6	15.8	18.1	11.5
South Loddon Area	18	40.5	25.4	55.8	20.9	18.7	5.9	29.0	20.3	26.0	36.0
Wedderburn & Surrounds	82	72.8	61.6	62.3	29.6	33.4	22.4	16.3	36.9	30.5	17.3
Demographic indicators											
Household size[2]											
1 person	34	63.3	53.4	55.9	6.1	33.3	21.9	22.7	37.1	26.8	50.6
2 or 3 people	170	47.5	55.7	41.4	19.1	30.5	23.6	23.7	28.0	21.4	20.6
4 or 5 people	82	78.9	65.1	67.4	57.2	34.7	41.0	27.7	21.0	26.9	14.9
More than 5 people	22	36.0	66.9	43.6	49.7	36.0	44.3	42.2	26.2	16.1	16.5
Born overseas*	28	44.5	68.3	49.7	3.1	35.6	23.6	7.9	28.9	17.0	32.1
Born in Australia	465	62.0	56.6	56.1	36.7	27.3	26.4	26.1	23.6	24.0	20.6
Speaks other main language*	3	100.0	62.1	10.8	0.0	0.0	37.9	10.8	0.0	0.0	10.8
Speaks English as main language	488	60.5	57.9	56.1	34.1	28.3	25.6	24.7	24.4	23.6	21.8
Aboriginal and/or Torres Strait Islander*	18	44.5	50.3	57.7	43.7	13.3	17.0	28.9	28.1	33.3	13.0
Not Aboriginal or Torres Strait Islander	474	60.9	57.9	55.4	33.5	28.5	26.4	24.2	23.9	23.0	21.9
LGBTQIA+*	12	29.1	49.6	66.2	24.0	22.0	26.3	22.5	16.2	4.3	7.9
Non-LGBTQIA+	477	60.6	58.3	55.7	34.3	28.5	26.3	23.8	24.4	23.7	22.2
Neurodivergent	41	50.2	47.9	69.6	43.9	23.1	21.1	19.2	27.3	12.9	17.0
Not neurodivergent	318	61.3	57.6	56.8	33.2	28.9	30.7	25.8	28.3	25.7	24.7
Maybe	34	58.4	50.6	63.8	36.6	28.1	37.3	23.5	17.1	41.2	8.8
Not sure what neurodivergent means	61	65.7	61.3	48.7	40.8	20.9	16.0	12.6	12.6	17.9	19.7
Less than Bachelor level education[2]	196	56.7	58.1	50.0	26.8	32.4	25.8	21.2	27.3	21.7	24.0
Holds a Bachelor degree or higher	110	63.6	62.2	55.6	38.2	33.1	46.8	46.6	30.7	33.8	23.5
Unemployed/Retired[2]	108	45.1	55.3	41.9	13.4	32.3	22.4	22.2	29.9	20.5	13.9
Employed	199	64.3	60.5	55.4	36.3	32.6	32.4	26.5	26.7	25.1	29.0

Just getting along, poor or very poor[2]	101	62.2	63.6	46.4	23.2	35.0	24.5	18.4	24.2	24.1	21.3
Reasonably comfortable, very comfortable or prosperous	206	54.8	55.5	53.7	32.0	30.8	32.0	29.4	30.2	23.1	25.6
Requires help with daily activities	35	41.4	21.5	50.2	8.2	20.7	17.9	10.2	40.1	9.0	24.7
Does not require help	457	62.6	60.7	56.4	36.3	28.9	27.1	26.0	22.7	24.9	21.5
Food security (last 12 months)[2]											
Low or very low food security	42	60.7	55.7	52.3	24.6	33.0	34.4	12.6	44.2	18.6	26.8
Marginal food security	45	62.7	42.2	47.4	34.1	35.3	38.3	24.6	19.5	23.1	26.4
High food security	221	55.6	62.1	50.7	27.9	31.5	25.8	28.3	25.8	24.4	22.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Table 5.4.2.3 Top 10 reasons for using public facilities or open spaces by selected health and behaviour characteristics

	Unweighted base[1]	Socialising with family / friends	Exercise / health and fitness	For fun / enjoyment	Organised sport (e.g., cricket or netball for a club)	For my mental health and wellbeing	Entertaining kids / watching kids' activities	Community event / performance	For time to myself	Unstructured physical recreation activities	Exercising the dog
	n	%	%	%	%	%	%	%	%	%	%
Total sample	**494**	**60.4**	**57.6**	**55.6**	**33.8**	**28.0**	**26.1**	**24.4**	**24.0**	**23.3**	**21.6**
Health and wellbeing indicators											
Self-reported health - Fair or poor	70	44.1	34.7	33.6	12.8	17.7	20.1	20.7	16.7	18.2	17.0
Self-reported health - Good, very good, or excellent	402	63.5	61.8	60.1	38.0	29.5	27.0	25.0	25.4	24.1	21.6
Life satisfaction - Low to moderate (0 to 6)[2]	70	61.4	54.1	52.2	23.7	30.4	31.3	23.4	33.8	17.0	22.7
Life satisfaction - High/very high (7 to 10)	216	55.8	60.7	50.6	31.6	32.5	27.2	23.1	26.3	25.3	23.1
Does not feel valued by society[2]	53	35.5	40.3	41.0	21.2	43.7	27.4	16.4	51.7	15.5	23.7
Sometimes feel valued by society	127	60.1	54.4	54.3	25.2	25.3	29.4	27.1	22.1	22.9	25.2
Definitely feel valued by society	112	65.5	74.4	53.3	36.6	33.8	28.6	24.8	22.6	27.5	20.7

Poor mental wellbeing[2]	65	46.5	44.4	45.7	26.2	31.6	29.9	12.7	31.5	17.5	23.0
Good mental wellbeing	243	59.8	61.4	51.5	28.8	32.4	28.6	28.4	26.7	24.7	23.9
Overweight or obese (BMI ≥25.0)	146	54.3	59.7	48.5	23.8	33.0	27.0	21.9	25.6	17.8	24.1
Normal range or underweight (BMI <25.0)	113	71.8	65.0	67.5	56.5	24.0	23.7	26.5	24.1	34.7	19.2
Health behaviour indicators											
Does not meet fruit intake recommendations	240	53.6	57.1	48.4	30.6	28.8	25.4	21.1	22.4	17.3	23.3
Meets fruit intake recommendations	244	70.1	59.6	63.6	38.5	27.9	27.9	29.5	27.2	31.7	18.5
Does not meet vegetable intake recommendations	406	60.0	57.2	54.4	34.3	29.9	25.9	23.6	25.3	22.9	21.7
Meets vegetable intake recommendations	67	71.3	67.8	61.5	35.7	19.0	31.2	35.3	20.7	29.0	17.4
Does not meet aerobic physical activity recommendations	143	63.5	44.6	56.3	22.8	17.6	27.2	19.3	21.4	26.9	20.6
Meets aerobic physical activity recommendations	322	60.8	63.4	56.1	37.7	32.2	25.9	26.2	26.7	23.0	21.8
Does not meet muscle strengthening recommendations	243	66.0	52.3	55.4	30.9	26.5	28.1	28.2	22.7	26.4	24.1
Meets muscle strengthening recommendations	163	48.6	70.5	51.1	40.5	31.0	20.0	21.0	30.1	21.9	20.9
Does not meet screen time recommendations	265	62.4	62.4	59.2	32.7	25.4	20.5	25.0	25.5	23.2	19.4
Meets screen time recommendations	204	58.7	56.0	52.1	36.2	30.7	34.2	24.1	25.0	24.8	23.9
Does not meet sleep recommendations	146	56.2	50.8	47.2	30.5	26.7	27.1	13.5	19.8	19.3	18.3
Meets sleep recommendations	319	62.6	62.0	59.6	35.4	28.7	26.2	29.6	27.5	25.7	22.8
Drinks sugar-sweetened beverages daily	55	65.1	63.0	60.3	43.1	31.2	28.2	28.6	21.9	25.8	32.2
Drinks sugar-sweetened beverages less than daily	437	59.8	57.0	54.9	32.5	27.7	25.9	24.0	24.3	23.1	20.3
Does not meet water recommendations	278	57.8	54.7	53.9	30.0	27.8	27.9	26.1	23.0	20.8	21.3
Meets water consumption recommendations	195	68.2	65.4	59.0	44.0	30.3	23.5	22.1	29.3	30.1	20.9
Risk behaviour indicators[2]											

Current smoker	24	60.2	70.0	68.6	25.1	37.9	23.4	4.1	30.9	16.6	22.3
Ex-smoker	104	58.7	53.2	49.2	26.7	24.0	33.1	28.6	22.5	24.3	23.7
Never smoked	168	55.4	58.8	48.3	30.5	36.1	26.3	27.1	31.2	23.0	22.1
Current vaper*	9	73.2	52.3	82.9	47.6	14.3	28.7	12.1	2.8	0.0	9.6
Ex-vaper	18	71.4	83.7	49.9	49.6	22.9	19.4	12.8	8.6	22.2	10.6
Never vaped	269	54.9	56.2	49.2	25.5	33.0	29.0	26.8	30.4	23.7	24.1
Had more than 4 standard drinks on a single occasion	167	62.8	60.7	54.6	33.5	29.1	26.9	25.2	25.5	25.5	22.4
Has not had more than 4 standard drinks	130	46.6	53.8	43.2	19.6	35.6	30.9	25.1	31.2	17.9	22.7
Gambled	97	59.2	66.3	54.8	32.9	28.5	18.1	20.8	26.1	25.2	19.3
Never gambled	197	55.5	53.2	47.7	25.1	33.3	34.8	28.1	29.0	20.7	24.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Respondents were only asked to provide their reasons for using any public facilities or open spaces generally, rather than provide reasons for using each specific facility type. Despite this, links have been drawn between facility types and reasons for use to provide an indication of why each location is being used. Table 5.4.2.4 below presents these findings.

Table 5.4.2.4. Reason for use of public facilities and open spaces by facility type

	Unweighted base[1]	Socialising with family / friends	Exercise / health and fitness	For fun / enjoyment	Organised sport (e.g., cricket or netball for a club)	For my mental health and wellbeing	Entertaining kids / watching kids' activities	Community event / performance	For time to myself	Unstructured physical recreation activities	Exercising the dog
	n	%	%	%	%	%	%	%	%	%	%
Unweighted base (n)	**494**	**320**	**291**	**283**	**208**	**124**	**140**	**134**	**109**	**130**	**91**
Facility type											
Sports grounds, ovals and clubrooms	331	70.2	67.4	64.3	49.6	29.9	29.6	28.1	25.0	29.4	21.0

Parks	273	71.4	61.4	65.0	34.2	34.5	32.6	28.9	26.3	31.0	24.3
Halls / community centres	219	72.8	61.5	58.6	48.2	36.0	35.2	50.8	25.7	39.2	18.5
Swimming pools / splash parks	263	76.1	71.8	69.8	47.0	34.7	34.2	30.7	25.4	29.8	20.4
Playgrounds	198	76.4	53.3	78.0	48.1	28.9	53.0	38.0	22.8	38.1	16.6
Hard courts (e.g., netball / tennis)	116	81.1	79.7	75.8	75.3	31.4	41.0	38.6	24.9	34.5	23.6
Indoor sports / leisure / fitness centres	103	75.0	80.2	71.7	51.2	41.8	28.8	33.5	34.3	31.7	21.8
Community gardens	75	80.3	75.5	67.9	35.4	42.3	36.6	36.9	34.0	33.8	29.1
Skateparks / BMX	28	82.8	79.6	84.4	62.1	23.7	49.4	45.2	10.0	40.1	9.0
After hours usage of education facilities (e.g., school, TAFE, university)	14	95.7	82.6	81.7	57.4	32.0	34.9	34.5	33.7	29.4	23.8

[1] Base sizes include respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

The findings for this section are currently being updated and will be included in this report as soon as they become available

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5.5. Perceived safety in local area

2025 ALC respondents were asked about their perceived safety and security in the local area. The question was slightly different depending on whether it was adult's self-report or proxy report on behalf of their child/adolescents. Adult respondents were asked to self-report how often they feel safe and secure in their local area. Response options included 'always', 'most of the time', 'sometimes and 'rarely'. For analysis purposes due to small sample numbers, 'sometimes' and 'rarely' options were combined. Adults were then asked to proxy report on their child's behalf, the extent to which they agree that their child is safe in the local area. Response options were 'definitely agree', 'somewhat agree', 'somewhat disagree', 'definitely disagree'. Responses were collapsed to create the binary categories of 'agree' or 'disagree'.

5.5.1. Adult safety in local area

Overall, 49.1% of adults reported always feeling safe in their local area, and 7.5% reported sometimes or rarely feeling safe. No significant differences in perceptions of safety were seen by age-group only or sex only. However, by sex and age, females aged 70 years and over were more likely to report always feeling safe (60.9%) than females aged 18 to 34 years (31.1%) and 35 to 49 years (31.3%).

Differences in perceived safety were seen for two demographic indicators, with a greater proportion of those in the following demographic groups reporting feeling safe only sometimes or rarely compared to their counterparts:

- Maybe neurodivergent (43.6%) compared to neurodivergent (6.4%) not neurodivergent (8.1%) and unsure what neurodivergent means (3.6%)
- Low or very low food security (28.4%) compared to marginal food security (3.7%) or high food security (3.2%)

Table 5.5.1.1 Adult's perceived safety in local area by selected demographic characteristics

	Unweighted base[1]	Always	Most of the time	Sometimes or rarely
	n	%	%	%
Total sample	**393**	**49.1**	**43.4**	**7.5**
Males	89	54.5	39.6	5.8
Females	299	42.1	48.1	9.8
Sex and age				
Males, 18 to 34	13	48.6	51.4	0.0
Males, 35 to 49	16	50.8	36.6	12.6
Males, 50 to 69	27	52.1	42.5	5.4
Males, 70+	33	62.7	30.2	7.1
Females, 18 to 34	57	31.1	46.7	22.2
Females, 35 to 49	68	31.3	59.6	9.0
Females, 50 to 69	120	44.6	48.3	7.0
Females, 70+	54	60.9	36.2	2.9
Subregion				

Boort & Surrounds	96	61.0	33.9	5.1
East Loddon Area	48	45.4	45.8	8.7
Inglewood / Bridgewater & Surrounds	119	49.3	45.2	5.5
Pyramid Hill & Surrounds	26	31.7	56.6	11.7
South Loddon Area	19	48.9	49.9	1.2
Wedderburn & Surrounds	81	45.3	41.3	13.4
Demographic indicators				
Household size				
1 person	49	53.3	36.6	10.1
2 or 3 people	210	51.8	41.3	6.9
4 or 5 people	106	39.2	57.1	3.7
More than 5 people	28	52.7	27.6	19.7
Born overseas	38	45.3	45.1	9.6
Born in Australia	353	49.4	43.3	7.3
Speaks other main language*	4	0.0	66.1	33.9
Speaks English as main language	385	49.7	42.9	7.3
Aboriginal and/or Torres Strait Islander*	11	49.6	50.4	0.0
Not Aboriginal or Torres Strait Islander	379	48.9	43.3	7.7
LGBTQIA+*	9	24.4	58.1	17.5
Non-LGBTQIA+	381	49.7	42.8	7.5
Neurodivergent	26	37.2	56.4	6.4
Not neurodivergent	248	45.0	46.9	8.1
Maybe	20	19.1	37.3	43.6
Not sure what neurodivergent means	60	58.6	37.8	3.6
Less than Bachelor level education	258	48.8	43.8	7.4
Holds a Bachelor degree or higher	131	47.8	43.1	9.0
Unemployed/Retired	138	53.6	32.3	14.1
Employed	252	46.0	49.9	4.1
Just getting along, poor or very poor	142	44.3	43.3	12.4
Reasonably comfortable, very comfortable or prosperous	248	51.8	44.1	4.2
Requires help with daily activities*	24	44.4	28.1	27.5
Does not require help	366	49.0	45.1	5.9
Food security (last 12 months)				
Low or very low food security	61	29.6	42.0	28.4
Marginal food security	54	38.5	57.8	3.7
High food security	276	55.5	41.3	3.2

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Feelings of safety differed according to three health and wellbeing indicators, including self-reported health, feeling valued by society and mental wellbeing (see Table 5.5.1.2). A greater proportion of those with fair or poor self-reported health (21.5% vs 2.7%), who did not feel valued by society (19.4% vs definitely [0.7%]) and those with poor mental wellbeing (24.5% vs 3.7%) reported sometimes or rarely feeling safe in their local area, compared with their counterparts experiencing more positive health and wellbeing.

Differences in perceived safety were also seen according to vegetable intake and aerobic physical activity recommendations. Specifically, respondents who did not meet vegetable intake recommendations were more likely to report feeling safe only sometimes or rarely compared to those who met the recommendations (8.4% vs 0.0%). Conversely, a greater proportion of those who met the aerobic physical activity recommendations (48.0%) reported feeling safe most of the time compared to those who did not meet the recommendations (30.3%).

No associations were seen between perceived safety and any of the assessed risk behaviours, suggesting that safety may be unrelated to personal risk taking. This however does not account for the risk-taking behaviours of others in their local area.

Table 5.5.1.2 Adult's perceived safety in local area by selected health and behaviour characteristics

	Unweighted base[1]	Always	Most of the time	Sometimes or rarely
	n	%	%	%
Total sample	**393**	**49.1**	**43.4**	**7.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	77	41.6	36.9	21.5
Self-reported health - Good, very good, or excellent	259	49.7	47.7	2.7
Life satisfaction – Low to moderate (0 to 6)	94	34.9	51.5	13.5
Life satisfaction – High/very high (7 to 10)	233	54.0	42.6	3.5
Does not feel valued by society	69	38.4	42.2	19.4
Sometimes feel valued by society	145	34.9	60.4	4.7
Definitely feel valued by society	123	69.0	30.3	0.7
Poor mental wellbeing	84	24.5	51.1	24.5
Good mental wellbeing	309	54.7	41.6	3.7
Overweight or obese (BMI ≥25.0)	146	46.8	45.6	7.5
Normal range or underweight (BMI <25.0)	79	56.8	40.6	2.6
Health behaviour indicators				
Does not meet fruit intake recommendations	227	44.4	45.7	9.9
Meets fruit intake recommendations	163	57.2	39.1	3.7
Does not meet vegetable intake recommendations	335	49.2	42.3	8.4
Meets vegetable intake recommendations	50	48.2	51.8	0.0
Does not meet aerobic physical activity recommendations	105	60.3	30.3	9.4

Meets aerobic physical activity recommendations	274	44.8	48.0	7.2
Does not meet muscle strengthening recommendations	195	47.0	44.8	8.2
Meets muscle strengthening recommendations	153	50.0	43.1	6.9
Does not meet screen time recommendations	194	51.4	38.9	9.7
Meets screen time recommendations	168	46.4	48.4	5.2
Does not meet sleep recommendations	109	37.2	48.4	14.4
Meets sleep recommendations	245	54.2	41.7	4.1
Drinks sugar-sweetened beverages daily	60	42.6	46.5	10.9
Drinks sugar-sweetened beverages less than daily	310	50.0	43.4	6.6
Does not meet water consumption recommendations	228	48.3	43.7	8.0
Meets water consumption recommendations	133	51.0	43.5	5.5
Risk behaviour indicators				
Current smoker	28	40.2	41.9	17.9
Ex-smoker	126	50.5	43.7	5.8
Never smoked	189	47.9	45.8	6.3
Current vaper*	10	22.8	65.3	11.9
Ex-vaper	20	73.7	26.3	0.0
Never vaped	313	47.3	45.1	7.6
Had more than 4 standard drinks on a single occasion	188	47.7	46.9	5.3
Has not had more than 4 standard drinks	156	49.6	40.2	10.1
Gambled	104	48.7	47.1	4.1
Never gambled	237	47.5	43.5	9.0

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

5.5.2. Children's safety in the local area

Overall, 90.7% of parents agreed that their child was safe in their local area. No significant differences in child safety were seen between males and females, or between children aged 3 to 11 years and adolescents aged 12 to 17 years. Representation of minority subgroups among Loddon Shire's children and adolescents was small and therefore results regarding demographic differences in perceived child safety in the local area should be interpreted with caution (see Table 5.5.2.1).

Table 5.5.2.1 Children's perceived safety in local area by selected demographic characteristics

	Unweighted base[1]	Agree	Disagree
	n	%	%

Total sample	**153**	**90.7**	**9.3**
Males	66	93.9	6.1
Females	80	92.6	7.4
Sex and age			
Males, 3 to 11	33	93.9	6.1
Males, 12 to 17	33	93.9	6.1
Females, 3 to 11	43	93.0	7.0
Females, 12 to 17	37	91.9	8.1
Subregion			
Boort & Surrounds	49	95.6	4.4
East Loddon Area	30	89.4	10.6
Inglewood / Bridgewater & Surrounds	25	100.0	0.0
Pyramid Hill & Surrounds	20	77.6	22.4
South Loddon Area	5	100.0	0.0
Wedderburn & Surrounds	21	75.9	24.1
Demographic indicators			
Born overseas*	0	-	-
Born in Australia	153	90.7	9.3
Speaks other main language*	0	-	-
Speaks English as main language	152	90.7	9.3
Aboriginal and/or Torres Strait Islander*	10	45.0	55.0
Not Aboriginal or Torres Strait Islander	143	93.9	6.1
LGBTQIA+*	3	100.0	0.0
Non-LGBTQIA+[2]	149	90.4	9.6
Neurodivergent*	16	53.6	46.4
Not neurodivergent	98	94.7	5.3
Maybe	16	96.2	3.8
Not sure what neurodivergent means	12	100.0	0.0
Requires help with daily activities*	24	66.3	33.7
Does not require help	129	95.4	4.6

[1] Base sizes include respondents aged 3 to 17 years living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Parent-reported child safety differed according to fruit consumption and screen time recommendations. Specifically, parents of children who did not meet fruit intake recommendations (77.6% vs 97.1%) and screen time recommendations (87.7% vs 100.0%) were less likely to agree that their child was safe in the local area compared to parents of children who met the respective recommendations.

Table 5.5.2.2 Children's perceived safety in local area by selected health and behaviour characteristics

	Unweighted base[1]	Agree	Disagree
	n	%	%
Total sample	**153**	**90.7**	**9.3**
Health and wellbeing indicators			
Self-reported health - Fair or poor*	6	12.3	87.7
Self-reported health - Good, very good, or excellent	132	95.7	4.3
Overweight or obese (BMI ≥25.0)*	18	96.4	3.6
Normal range or underweight (BMI <25.0)	33	86.5	13.5
Health behaviour indicators			
Does not meet fruit intake recommendations	57	77.6	22.4
Meets fruit intake recommendations	96	97.1	2.9
Does not meet vegetable intake recommendations	120	92.3	7.7
Meets vegetable intake recommendations	26	97.4	2.6
Does not meet aerobic physical activity recommendations	65	88.4	11.6
Meets aerobic physical activity recommendations	77	91.6	8.4
Does not meet muscle strengthening recommendations	75	94.3	5.7
Meets muscle strengthening recommendations	27	68.2	31.8
Does not meet screen time recommendations	86	87.7	12.3
Meets screen time recommendations	51	100.0	0.0
Does not meet sleep recommendations	43	81.5	18.5
Meets sleep recommendations	97	97.6	2.4
Drinks sugar-sweetened beverages daily*	11	74.4	25.6
Drinks sugar-sweetened beverages less than daily	135	93.2	6.8
Does not meet water consumption recommendations	78	88.3	11.7
Meets water consumption recommendations	62	98.1	1.9

[1] Base sizes include respondents aged 3 to 17 years living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

6. Health and Wellbeing

Respondents were asked a range of questions relating to their health and wellbeing. This includes questions related to their self-reported health status, mental wellbeing, life satisfaction, perceived value to society and their body mass index. Most data presented in this section is based on responses of all residents aged 18 years and over (unless otherwise specified) and weighting has been applied. Questions in this section are standardised and frequently used health measures taken from the Victorian Population Health Survey and the World Health Organisation.

6.1. Self-reported health status

Self-reported health is a common measure of the general health status of Australians. Respondents are asked to rate their health on a 5-point scale as either 'excellent', 'very good', 'good', 'fair' or 'poor'. Recent Victorian population benchmarks have shown the proportion of the respondents identifying as having lower levels of general health (rating their health as ‘fair’ or ‘poor’) are:

- 20.9% of those aged 18 years or over according to the 2023 VPHS
- 13.0% of those aged 15 years and over according to the 2022 NHS,

Table 6.1.1 shows that the proportion of Loddon Shire adult respondents who self-reported a lower level of health closely reflected the VPHS benchmark at 21.3%. However, the 2022 NHS indicated that fewer Victorians self-identified as having ‘fair’ or ‘poor’ health suggesting that the health of adults in Loddon Shire may be lower than in other areas of Victoria.

There were no significant differences in self-reported levels of health between males and females overall; however, adults were more likely to report fair or poor health than children (21.3% vs 5.3%). By sex and age, males aged 70 years and over were more likely to report fair or poor health (35.6%) than males aged 3 to 11 years (0.0%), males aged 12 to 17 years (12.0%) and males aged 18 to 34 years (0.0%). Among females, those aged 18 to 34 years (27.1%), 35 to 49 years (30.5%), 50 to 69 years (20.3%) and 70 years and over (31.4%) were more likely to report fair or poor health than females aged 3 to 11 years (2.4%) and 12 to 17 years (7.0%).

No significant differences were seen between residents from different subregions. In relation to key demographic indicators, people from the following groups were more likely to self-report lower levels of health:

- Unemployed/retired (37.2%) compared to employed (11.4%)
- Just getting along, poor or very poor (31.4%) compared to reasonably comfortable, very comfortable or prosperous (13.1%)
- Required help with daily activities (44.5%) compared to did not require help (15.1%)
- Low or very low food security (41.4%) compared to high food security (16.0%)

Table 6.1.1 Self-reported health status by selected demographic characteristics

	Unweighted base[1]	Fair / Poor	Good	Very good / Excellent
	n	%	%	%
Total sample	**526**	**17.8**	**37.9**	**44.3**

Children	182	5.3	19.0	75.7
Adults	338	21.3	43.3	35.4
Males	157	15.8	38.9	45.3
Females	356	20.2	37.0	42.8
Sex and age				
Males, 3 to 11	28	0.0	21.4	78.6
Males, 12 to 17	50	12.0	16.0	72.0
Males, 18 to 34	13	0.0	35.1	64.9
Males, 35 to 49	10	11.6	46.1	42.2
Males, 50 to 69	26	16.0	53.7	30.3
Males, 70+	28	35.6	32.6	31.8
Females, 3 to 11	41	2.4	24.4	73.2
Females, 12 to 17	57	7.0	10.5	82.5
Females, 18 to 34	49	27.1	38.2	34.7
Females, 35 to 49	63	30.5	39.2	30.3
Females, 50 to 69	100	20.3	47.4	32.4
Females, 70+	45	31.4	39.8	28.7
Subregion				
Boort & Surrounds	147	13.8	37.0	49.2
East Loddon Area	88	14.0	41.9	44.1
Inglewood / Bridgewater & Surrounds	114	14.7	44.7	40.6
Pyramid Hill & Surrounds	56	24.4	33.2	42.4
South Loddon Area	22	21.4	28.8	49.8
Wedderburn & Surrounds	90	26.7	32.9	40.4
Demographic indicators				
Household size[2]				
1 person	41	34.9	42.3	22.9
2 or 3 people	187	19.7	44.1	36.3
4 or 5 people	87	16.1	39.0	44.9
More than 5 people	23	21.2	56.9	21.9
Born overseas	31	26.5	49.6	23.9
Born in Australia	492	16.8	36.9	46.3
Speaks other main language*	3	0.0	100.0	0.0
Speaks English as main language	518	17.8	38.0	44.2
Aboriginal and/or Torres Strait Islander*	21	32.2	55.1	12.7
Not Aboriginal or Torres Strait Islander	503	17.5	37.5	45.1
LGBTQIA+*	14	26.7	23.3	50.0
Non-LGBTQIA+	504	17.7	37.8	44.5
Neurodivergent	45	25.4	48.3	26.3
Not neurodivergent	329	14.3	31.3	54.4

Maybe	34	26.5	26.3	47.2
Not sure what neurodivergent means	70	15.0	51.7	33.3
Less than Bachelor level education[2]	222	21.5	43.9	34.6
Holds a Bachelor degree or higher	112	14.0	42.4	43.5
Unemployed/Retired[2]	124	37.2	37.4	25.5
Employed	211	11.4	47.1	41.5
Just getting along, poor or very poor[2]	114	31.4	51.9	16.7
Reasonably comfortable, very comfortable or prosperous	220	13.1	37.8	49.1
Requires help with daily activities	41	44.5	40.2	15.2
Does not require help	481	15.1	37.7	47.2
Food security (last 12 months)[2]				
Low or very low food security	51	41.4	50.7	7.9
Marginal food security	47	19.6	43.0	37.4
High food security	238	16.0	41.6	42.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Self-reported health differed according to all other health and wellbeing indicators (see Table 6.1.2). Specifically, a greater proportion of respondents who reported they do not feel valued by society (39.3% vs sometimes [17.6%] and definitely [10.7%]) and poor mental wellbeing (53.4% vs 12.4%) self-reported their health to be fair or poor compared to their counterparts with more positive health and wellbeing indicators. Conversely, fewer respondents who reported low to moderate life satisfaction (22.9% vs 43.8%), poor mental wellbeing (11.2% vs 42.1%) and overweight or obese (31.3% vs 73.1%) self-reported their health to be very good or excellent compared to their counterparts with more positive health and wellbeing indicators.

Self-reported health also differed according to most health behaviour indicators. Respondents who did not meet the following health behaviour recommendations were more likely to self-report their health as fair or poor:

- Did not meet vegetable intake recommendation (19.0%) compared to met recommendation (7.2%)
- Did not meet aerobic physical activity recommendation (29.3%) compared to met recommendation (13.3%)

Respondents who did not meet the following health behaviour recommendations were less likely to self-report their health as very good or excellent:

- Did not meet fruit intake recommendation (35.1%) compared to met recommendation (54.3%)
- Did not meet sleep recommendation (31.4%) compared to met recommendation (49.8%)
- Drank sugar-sweetened beverages daily (18.3%) compared to drank sugar-sweetened beverages less than daily (48.4%)
- Did not meet water consumption recommendation (39.1%) compared to met recommendation (54.7%)

No risk behaviours were significantly associated with self-reported health status.

Table 6.1.2 Self-reported health status by selected health and behaviour characteristics

	Unweighted base[1]	Fair / Poor	Good	Very good / Excellent
	n	%	%	%
Total sample	**526**	**17.8**	**37.9**	**44.3**
Health and wellbeing indicators				
Life satisfaction - Low to moderate (0 to 6)[2]	94	30.9	46.3	22.9
Life satisfaction - High/very high (7 to 10)	230	14.4	41.7	43.8
Does not feel valued by society[2]	68	39.3	34.9	25.8
Sometimes feel valued by society	145	17.6	50.6	31.9
Definitely feel valued by society	118	10.7	41.1	48.2
Poor mental wellbeing[2]	84	53.4	35.3	11.2
Good mental wellbeing	254	12.4	45.5	42.1
Overweight or obese (BMI ≥25.0)	169	23.5	45.2	31.3
Normal range or underweight (BMI <25.0)	126	12.9	14.0	73.1
Health behaviour indicators				
Does not meet fruit intake recommendations	260	20.5	44.4	35.1
Meets fruit intake recommendations	255	14.5	31.1	54.3
Does not meet vegetable intake recommendations	430	19.0	38.7	42.3
Meets vegetable intake recommendations	74	7.2	36.8	56.0
Does not meet aerobic physical activity recommendations	160	29.3	39.4	31.4
Meets aerobic physical activity recommendations	335	13.3	38.5	48.2
Does not meet muscle strengthening recommendations	270	23.3	37.9	38.8
Meets muscle strengthening recommendations	163	11.8	37.6	50.6
Does not meet screen time recommendations	288	19.2	39.7	41.1
Meets screen time recommendations	213	16.2	36.7	47.2
Does not meet sleep recommendations	157	27.9	40.7	31.4
Meets sleep recommendations	343	13.9	36.3	49.8
Drinks sugar-sweetened beverages daily	65	24.4	57.3	18.3
Drinks sugar-sweetened beverages less than daily	458	16.6	35.0	48.4
Does not meet water consumption recommendations	299	19.3	41.6	39.1
Meets water consumption recommendations	207	14.2	31.1	54.7
Risk behaviour indicators[2]				

Current smoker	27	30.7	47.0	22.3
Ex-smoker	120	24.7	36.0	39.3
Never smoked	188	16.0	48.8	35.3
Current vaper*	9	23.4	39.7	36.9
Ex-vaper	19	18.6	32.2	49.2
Never vaped	307	21.4	44.3	34.3
Had more than 4 standard drinks on a single occasion	183	16.4	43.0	40.6
Has not had more than 4 standard drinks	153	28.8	44.1	27.2
Gambled	103	22.3	42.5	35.3
Never gambled	230	20.0	44.3	35.8

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

6.2. Life satisfaction

Life satisfaction was measured by asking adult respondents how satisfied they feel about life in general. Responses were provided on a scale of 0 to 10, where zero means 'not at all satisfied' and 10 means 'completely satisfied'. For the purpose of analysis, responses have been combined into four main categories:

- Ratings of 0 to 4 represent 'low' life satisfaction
- Ratings of 5 to 6 represent 'medium' life satisfaction
- Ratings of 7 to 8 represent 'high' life satisfaction
- Ratings of 9 to 10 represent 'very high' life satisfaction

For the purpose of identifying the most vulnerable groups within the population, our analysis focuses on those with low life satisfaction.

Overall, 8.5% of respondents aged 18 years and over recorded low life satisfaction. No differences were seen between males and females. When looking by age and sex, a greater proportion of females aged 35 to 49 years reported low life satisfaction (16.2%) compared to their counterparts aged 70 years and over (1.0%). Residents from Wedderburn & Surrounds (11.7%) were more likely to report low levels of life satisfaction compared to residents from South Loddon Area (0.0%).

Residents experiencing low or very low food security (22.3%) were more likely to record low levels of life satisfaction than respondents experiencing high food security (2.6%).

Table 6.2.1 Life satisfaction by selected demographic characteristics

	Unweighted base[1]	Low (0-4)	Medium (5-6)	High (7-8)	Very high (9-10)
	n	%	%	%	%
Total sample	**328**	**8.5**	**25.9**	**42.5**	**23.1**
Males	74	7.2	30.1	42.3	20.4

Females	250	10.3	20.3	43.1	26.3
Sex and age					
Males, 18 to 34	13	0.0	35.1	62.2	2.7
Males, 35 to 49	10	18.9	23.3	50.5	7.3
Males, 50 to 69	26	1.7	41.7	36.6	20.0
Males, 70+	25	18.2	8.8	34.3	38.7
Females, 18 to 34	48	14.5	22.1	39.5	23.9
Females, 35 to 49	62	16.2	25.5	47.8	10.5
Females, 50 to 69	97	8.8	18.7	42.7	29.8
Females, 70+	43	1.0	15.7	43.5	39.8
Subregion					
Boort & Surrounds	89	10.2	27.6	43.2	19.0
East Loddon Area	41	8.8	23.6	46.1	21.5
Inglewood / Bridgewater & Surrounds	83	6.0	29.2	35.2	29.6
Pyramid Hill & Surrounds	24	11.0	9.8	43.8	35.3
South Loddon Area	15	0.0	22.3	47.8	29.9
Wedderburn & Surrounds	72	11.7	28.6	46.4	13.3
Demographic indicators					
Household size					
1 person	39	7.3	35.7	30.3	26.7
2 or 3 people	184	7.7	22.6	41.4	28.3
4 or 5 people	87	10.0	28.5	51.2	10.3
More than 5 people	18	14.1	18.2	50.9	16.9
Born overseas	30	7.2	35.9	33.4	23.5
Born in Australia	297	8.2	24.7	43.9	23.1
Speaks other main language*	2	0.0	0.0	100.0	0.0
Speaks English as main language	324	8.2	26.3	42.7	22.7
Aboriginal and/or Torres Strait Islander*	11	33.7	20.2	16.5	29.5
Not Aboriginal or Torres Strait Islander	317	7.8	26.1	43.2	22.9
LGBTQIA+*	9	17.5	61.2	21.3	0.0
Non-LGBTQIA+	317	8.0	24.6	43.5	23.8
Neurodivergent	24	15.0	34.5	26.8	23.7
Not neurodivergent	208	8.2	25.4	42.2	24.2
Maybe	17	19.2	38.0	37.3	5.5
Not sure what neurodivergent means	52	7.6	14.3	55.1	23.0
Less than Bachelor level education	214	8.4	28.5	40.6	22.4
Holds a Bachelor degree or higher	112	6.0	10.4	55.6	27.9
Unemployed/Retired	117	11.9	22.6	33.1	32.4
Employed	210	6.2	27.8	47.6	18.5
Just getting along, poor or very poor	111	10.9	38.3	34.4	16.4

Reasonably comfortable, very comfortable or prosperous	216	6.1	17.4	48.5	27.9
Requires help with daily activities*	17	29.4	21.2	35.9	13.4
Does not require help	309	6.6	26.6	42.7	24.1
Food security (last 12 months)					
Low or very low food security	52	22.3	43.5	26.4	7.7
Marginal food security	47	16.5	25.5	33.3	24.6
High food security	228	2.6	21.4	49.0	27.1

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Life satisfaction differed according to three health and wellbeing indicators (see Table 6.2.2). Specifically, a greater proportion of respondents who reported fair or poor health (23.8% vs 4.7%), did not feel valued by society (24.1% vs sometimes [5.0%] and definitely [1.5%]) and had poor mental wellbeing (28.7% vs 2.7%) reported low life satisfaction compared to their counterparts with more positive health and wellbeing indicators.

Life satisfaction was also associated with vegetable intake and sleep duration. Respondents did not meet sleep recommendations (17.2%) were more likely to report low life satisfaction than those who met recommendations (4.2%). An additional difference was observed for vegetable intake, with respondents who did not meet vegetable intake recommendations more likely to report medium life satisfaction than those who met recommendations (27.7% vs 5.6%). No risk behaviour indicators were associated with life satisfaction.

Table 6.2.2 Life satisfaction by selected health and behaviour characteristics

	Unweighted base[1]	Low (0-4)	Medium (5-6)	High (7-8)	Very high (9-10)
	n	%	%	%	%
Total sample	**328**	**8.5**	**25.9**	**42.5**	**23.1**
Health and wellbeing indicators					
Self-reported health - Fair or poor	74	23.8	29.4	33.8	12.9
Self-reported health - Good, very good, or excellent	250	4.7	25.4	44.2	25.7
Does not feel valued by society	69	24.1	44.4	19.4	12.1
Sometimes feel valued by society	142	5.0	35.8	42.9	16.4
Definitely feel valued by society	117	1.5	1.3	58.6	38.6
Poor mental wellbeing	85	28.7	45.1	20.2	6.0
Good mental wellbeing	243	2.7	20.4	49.0	28.0
Overweight or obese (BMI ≥25.0)	144	11.8	27.9	37.7	22.6
Normal range or underweight (BMI <25.0)	78	4.9	21.7	49.9	23.5
Health behaviour indicators					
Does not meet fruit intake recommendations	195	8.4	31.5	37.1	23.0
Meets fruit intake recommendations	130	7.7	15.7	53.6	23.0

Does not meet vegetable intake recommendations	281	8.3	27.7	41.8	22.1
Meets vegetable intake recommendations	39	3.1	5.6	56.6	34.6
Does not meet aerobic physical activity recommendations	82	19.9	35.0	28.3	16.9
Meets aerobic physical activity recommendations	237	5.3	23.4	46.8	24.6
Does not meet muscle strengthening recommendations	171	9.4	31.3	41.9	17.4
Meets muscle strengthening recommendations	119	7.1	17.6	44.8	30.5
Does not meet screen time recommendations	163	8.5	25.9	41.7	23.9
Meets screen time recommendations	159	8.0	26.3	44.6	21.0
Does not meet sleep recommendations	101	17.2	31.1	33.6	18.2
Meets sleep recommendations	216	4.2	24.1	47.0	24.6
Drinks sugar-sweetened beverages daily	46	7.3	47.3	26.4	19.0
Drinks sugar-sweetened beverages less than daily	281	8.2	22.6	45.3	23.9
Does not meet water consumption recommendations	200	7.8	28.0	39.2	25.0
Meets water consumption recommendations	120	8.2	19.5	54.5	17.7
Risk behaviour indicators					
Current smoker	26	6.0	38.1	29.3	26.6
Ex-smoker	117	8.1	27.6	43.9	20.4
Never smoked	183	8.1	22.9	44.6	24.4
Current vaper*	9	4.6	64.6	21.2	9.5
Ex-vaper	19	0.0	14.3	65.9	19.8
Never vaped	298	9.4	25.5	41.4	23.7
Had more than 4 standard drinks on a single occasion	181	7.7	26.5	43.5	22.3
Has not had more than 4 standard drinks	146	10.0	25.0	41.0	24.0
Gambled	97	10.2	24.1	45.7	20.0
Never gambled	227	7.7	27.2	40.2	24.9

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

6.3. Perceived value to society

Respondents were also asked whether they feel valued by society. They could select one of four responses 'No, not at all', 'Not often', 'Sometimes' or 'Yes, definitely'. For the purpose of analysis, the first two response options ('No, not at all' and 'Not often') have been combined to form one category representing people who do not feel valued by society.

Overall, 24.3% of residents aged 18 years and over indicated that they did not feel valued by society. No significant differences were seen according to sex. Among females, those aged 18 to 69 years were more likely to report not feeling valued by society than those aged 70 years and over (18.4% to

29.5% vs 3.5%). Conversely, females aged 70 years and over were more likely to report definitely feeling valued by society than females aged 18 to 69 years (55.3% vs 17.9% to 37.0%). Across subregions, respondents from Inglewood / Bridgewater & Surrounds were less likely to report definitely feeling valued by society than those from Pyramid Hill & Surrounds (27.8% vs 63.5%).

As was observed in relation to life satisfaction, respondents experiencing low or very low food security (55.5%) were more likely to report they did not feel valued compared than those experiencing high food security (14.0%).

Table 6.3.1 Perceived value to society by selected demographic characteristics

	Unweighted base[1]	Does not feel valued	Sometimes feels valued	Definitely feels valued
	n	%	%	%
Total sample	**338**	**24.3**	**40.2**	**35.5**
Males	76	27.1	36.0	36.8
Females	258	20.5	45.7	33.8
Sex and age				
Males, 18 to 34	13	32.4	27.0	40.6
Males, 35 to 49	10	11.6	50.5	37.9
Males, 50 to 69	26	28.5	33.1	38.3
Males, 70+	27	26.1	42.3	31.6
Females, 18 to 34	50	29.4	52.7	17.9
Females, 35 to 49	63	29.5	44.0	26.5
Females, 50 to 69	98	18.4	44.6	37.0
Females, 70+	47	3.5	41.3	55.3
Subregion				
Boort & Surrounds	89	23.2	41.0	35.7
East Loddon Area	42	36.7	27.9	35.4
Inglewood / Bridgewater & Surrounds	91	11.6	60.7	27.8
Pyramid Hill & Surrounds	24	16.4	20.1	63.5
South Loddon Area	15	51.4	14.2	34.4
Wedderburn & Surrounds	73	31.9	31.3	36.8
Demographic indicators				
Household size				
1 person	41	24.0	40.5	35.5
2 or 3 people	187	23.5	43.4	33.1
4 or 5 people	87	22.1	36.1	41.8
More than 5 people	23	43.6	25.3	31.1
Born overseas	31	31.0	45.2	23.8
Born in Australia	304	23.2	39.9	37.0
Speaks other main language*	2	0.0	82.5	17.5
Speaks English as main language	332	24.4	39.8	35.8

Aboriginal and/or Torres Strait Islander*	11	42.7	20.2	37.1
Not Aboriginal or Torres Strait Islander	327	23.8	40.7	35.5
LGBTQIA+*	9	52.9	40.7	6.4
Non-LGBTQIA+	325	23.8	39.9	36.3
Neurodivergent	24	18.7	65.9	15.4
Not neurodivergent	211	24.9	37.7	37.5
Maybe	17	26.7	53.5	19.8
Not sure what neurodivergent means	52	25.0	31.2	43.8
Less than Bachelor level education	220	25.5	40.3	34.2
Holds a Bachelor degree or higher	114	15.0	41.9	43.1
Unemployed/Retired	122	33.9	36.0	30.0
Employed	213	18.8	42.9	38.4
Just getting along, poor or very poor	114	32.2	38.9	28.9
Reasonably comfortable, very comfortable or prosperous	221	18.4	41.6	40.0
Requires help with daily activities*	18	61.1	25.0	13.9
Does not require help	316	21.5	41.9	36.6
Food security (last 12 months)				
Low or very low food security	52	55.5	42.2	2.3
Marginal food security	47	33.3	29.5	37.2
High food security	236	14.0	42.1	43.9

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Perceived value to society differed according to selected health and wellbeing indicators. Specifically, a greater proportion of respondents who reported fair or poor health (47.0% vs 18.7%), low to moderate life satisfaction (49.5% vs 11.9%), and poor mental wellbeing (55.4% vs 15.6%) did not feel valued by society compared to their counterparts with more positive health and wellbeing indicators.

Feeling valued by society also differed according to selected health behaviour indicators. Respondents who did not meet the fruit intake (30.5% vs 12.9%) and vegetable intake (25.8% vs 5.0%) recommendations were more likely to report not feeling valued by society compared to their counterparts who met them. Conversely, a higher proportion of respondents who had never gambled (30.3%) were more likely to report not feeling valued by society compared to those who gambled (13.7%).

Table 6.3.2 Perceived value to society by selected health and behaviour characteristics

	Unweighted base[1]	Does not feel valued	Sometimes feels valued	Definitely feels valued
	n	%	%	%
Total sample	**338**	**24.3**	**40.2**	**35.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	76	47.0	34.9	18.0

Self-reported health - Good, very good, or excellent	255	18.7	42.3	39.0
Life satisfaction - Low to moderate (0 to 6)	95	49.5	47.7	2.8
Life satisfaction - High/very high (7 to 10)	233	11.9	36.4	51.6
Poor mental wellbeing	85	55.4	36.7	7.9
Good mental wellbeing	253	15.6	41.1	43.2
Overweight or obese (BMI ≥25.0)	145	27.6	41.1	31.2
Normal range or underweight (BMI <25.0)	78	22.0	27.7	50.3
Health behaviour indicators				
Does not meet fruit intake recommendations	198	30.5	38.9	30.6
Meets fruit intake recommendations	137	12.9	42.8	44.2
Does not meet vegetable intake recommendations	287	25.8	41.1	33.1
Meets vegetable intake recommendations	43	5.0	34.9	60.1
Does not meet aerobic physical activity recommendations	86	27.3	40.5	32.3
Meets aerobic physical activity recommendations	241	23.6	40.0	36.5
Does not meet muscle strengthening recommendations	176	26.7	40.7	32.5
Meets muscle strengthening recommendations	124	20.0	40.4	39.7
Does not meet screen time recommendations	171	23.7	40.2	36.1
Meets screen time recommendations	161	25.0	40.8	34.2
Does not meet sleep recommendations	101	33.4	42.2	24.4
Meets sleep recommendations	225	20.9	38.5	40.5
Drinks sugar-sweetened beverages daily	52	25.2	46.5	28.3
Drinks sugar-sweetened beverages less than daily	285	23.8	39.2	37.0
Does not meet water consumption recommendations	207	23.5	41.7	34.8
Meets water consumption recommendations	123	24.7	36.9	38.3
Risk behaviour indicators				
Current smoker	27	26.7	36.2	37.1
Ex-smoker	123	17.8	43.7	38.5
Never smoked	186	27.8	38.6	33.6
Current vaper*	10	11.6	79.2	9.2
Ex-vaper	19	2.2	25.9	72.0
Never vaped	307	26.6	39.8	33.6
Had more than 4 standard drinks on a single occasion	186	21.2	41.8	37.0
Has not had more than 4 standard drinks	151	29.4	37.3	33.3
Gambled	101	13.7	49.7	36.6

Never gambled	233	30.3	34.5	35.2

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

6.4. Mental wellbeing

Mental wellbeing was assessed using the globally recognised, valid WHO-5 mental wellbeing index[13]. Respondents were asked to indicate how they had been feeling over the last two weeks in response to five statements. Response options were 'all of the time' (5), 'most of the time' (4), 'more than half of the time' (3), 'less than half of the time' (2), 'some of the time' (1) and 'at no time' (0). The scores on each of the five questions are summed and then multiplied by four to get a final score out of 100, with lower scores indicating poorer mental wellbeing. A score below 50 is an indicator of poor mental wellbeing and suggests the possible presence of a mental health condition (e.g., depression).

Overall, 18.8% of residents aged 18 years and over were classified as having poor mental wellbeing. No significant differences in poor mental wellbeing or average mental wellbeing score were seen by sex only. For females, the only difference observed was respondents 70 years and above reported a higher average score (64.8) compared to those aged 35 to 49 years (54.8).

Respondents who belonged to the following groups were more likely to indicate they had poor mental wellbeing:

- Just getting along, poor, or very poor (30.5%) compared to those who were reasonably comfortable, very comfortable, or prosperous (10.3%)
- Low or very low food security (49.3%) compared to high food security (10.2%)

Table 6.4.1 Mental wellbeing by selected demographic characteristics

	Unweighted base[1]	Poor mental wellbeing (≤50)	Good mental wellbeing (51-100)	Average score
	n	%	%	#
Total sample	**396**	**18.8**	**81.2**	**62.8**
Males	90	14.4	85.6	65.1
Females	301	24.1	75.9	60.2
Sex and age				
Males, 18 to 34	13	10.8	89.2	64.9
Males, 35 to 49	16	26.8	73.2	53.4
Males, 50 to 69	28	15.3	84.7	65.0
Males, 70+	33	10.4	89.6	70.2
Females, 18 to 34	58	25.8	74.2	56.7
Females, 35 to 49	68	36.3	63.7	54.8
Females, 50 to 69	121	20.4	79.6	62.5
Females, 70+	54	19.9	80.1	64.8

[13] **World Health Organization** (2024). The World Health Organization-Five Well-Being Index (WHO-5). Geneva: World Health Organization. https://www.who.int/publications/m/item/WHO-UCN-MSD-MHE-2024.01

Subregion				
Boort & Surrounds	99	22.7	77.3	61.4
East Loddon Area	48	29.4	70.6	57.9
Inglewood / Bridgewater & Surrounds	119	10.1	89.9	65.7
Pyramid Hill & Surrounds	26	18.0	82.0	67.3
South Loddon Area	19	25.7	74.3	72.7
Wedderburn & Surrounds	81	22.3	77.7	58.1
Demographic indicators				
Household size				
1 person	51	27.9	72.1	56.5
2 or 3 people	210	15.2	84.8	65.8
4 or 5 people	107	19.6	80.4	60.9
More than 5 people	28	19.1	80.9	60.2
Born overseas	38	26.1	73.9	62.2
Born in Australia	355	17.5	82.5	63.1
Speaks other main language*	4	0.0	100.0	87.8
Speaks English as main language	387	18.8	81.2	62.7
Aboriginal and/or Torres Strait Islander*	11	39.9	60.1	53.7
Not Aboriginal or Torres Strait Islander	382	18.3	81.7	63.0
LGBTQIA+*	9	43.9	56.1	51.7
Non-LGBTQIA+	382	18.3	81.7	63.3
Neurodivergent	26	36.3	63.7	53.0
Not neurodivergent	249	18.6	81.4	64.7
Maybe	20	42.3	57.7	46.5
Not sure what neurodivergent means	60	12.0	88.0	64.3
Less than Bachelor level education	260	19.0	81.0	63.0
Holds a Bachelor degree or higher	131	16.5	83.5	62.9
Unemployed/Retired	139	26.4	73.6	60.5
Employed	253	14.4	85.6	64.2
Just getting along, poor or very poor	142	30.5	69.5	52.7
Reasonably comfortable, very comfortable or prosperous	249	10.3	89.7	69.8
Requires help with daily activities*	24	41.0	59.0	46.8
Does not require help	367	16.8	83.2	64.2
Food security (last 12 months)				
Low or very low food security	61	49.3	50.7	44.8
Marginal food security	54	23.4	76.6	62.3
High food security	278	10.2	89.8	68.1

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Mental wellbeing differed according to health and wellbeing indicators, excluding BMI. Specifically, a greater proportion of respondents who reported fair or poor health (54.3% vs 12.8%), low to moderate life satisfaction (48.1% vs 9.0%), and did not feel valued by society (49.8% vs sometimes [20%] and definitely [5%]) reported poor mental wellbeing compared to their counterparts with more positive health and wellbeing indicators.

Mental wellbeing also differed according to selected health behaviour indicators. Respondents who did not meet the following health behaviour recommendations were more likely to report poor mental wellbeing:

- Did not meet fruit intake recommendation (24.0%) compared to met recommendation (9.4%)
- Did not meet vegetable intake recommendation (19.8%) compared to met recommendation (6.4%)
- Did not meet sleep recommendation (36.9%) compared to met recommendation (13.2%)

No risk behaviour indicators were associated with mental wellbeing.

Table 6.4.2 Mental wellbeing by selected health and behaviour characteristics

	Unweighted base[1]	Poor mental wellbeing (≤50)	Good mental wellbeing (51-100)	Average score
	n	%	%	#
Total sample	**396**	**18.8**	**81.2**	**62.8**
Health and wellbeing indicators				
Self-reported health - Fair or poor	78	54.3	45.7	42.9
Self-reported health - Good, very good, or excellent	260	12.8	87.2	67.5
Life satisfaction - Low to moderate (0 to 6)	95	48.1	51.9	46.4
Life satisfaction - High/very high (7 to 10)	233	9.0	91.0	71.2
Does not feel valued by society	70	49.8	50.2	49.6
Sometimes feel valued by society	145	20.0	80.0	62.1
Definitely feel valued by society	123	4.9	95.1	72.9
Overweight or obese (BMI ≥25.0)	148	24.9	75.1	61.5
Normal range or underweight (BMI <25.0)	79	18.9	81.1	67.1
Health behaviour indicators				
Does not meet fruit intake recommendations	229	24.0	76.0	60.8
Meets fruit intake recommendations	163	9.4	90.6	66.9
Does not meet vegetable intake recommendations	337	19.8	80.2	62.3
Meets vegetable intake recommendations	50	6.4	93.6	71.3
Does not meet aerobic physical activity recommendations	105	23.5	76.5	56.4
Meets aerobic physical activity recommendations	275	17.1	82.9	64.7
Does not meet muscle strengthening recommendations	195	23.8	76.2	59.1

Meets muscle strengthening recommendations	153	13.0	87.0	68.2
Does not meet screen time recommendations	194	19.4	80.6	63.1
Meets screen time recommendations	168	21.1	78.9	62.6
Does not meet sleep recommendations	109	36.9	63.1	54.0
Meets sleep recommendations	245	13.2	86.8	66.5
Drinks sugar-sweetened beverages daily	60	22.6	77.4	56.3
Drinks sugar-sweetened beverages less than daily	311	19.1	80.9	64.0
Does not meet water consumption recommendations	229	20.2	79.8	63.2
Meets water consumption recommendations	134	18.6	81.4	62.5
Risk behaviour indicators				
Current smoker	28	37.8	62.2	51.5
Ex-smoker	126	16.5	83.5	63.4
Never smoked	191	21.7	78.3	64.4
Current vaper*	10	25.1	74.9	55.7
Ex-vaper	20	2.0	98.0	65.0
Never vaped	315	22.5	77.5	62.9
Had more than 4 standard drinks on a single occasion	189	16.7	83.3	63.9
Has not had more than 4 standard drinks	157	28.1	71.9	60.9
Gambled	104	18.6	81.4	60.8
Never gambled	239	22.8	77.2	63.8

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

6.5. Body mass index (BMI)

The 2025 ALC asked Loddon Shire respondents to report their height and weight as a means of calculating their Body Mass Index (BMI). It was made clear that providing a response to this question was optional, and as such, response numbers are lower than for other indicators. Overall, 3.3% were classified as underweight, 30.1% healthy weight, 33.2% overweight and 33.4% obese. To identify opportunities for supporting improved health amongst Loddon Shire residents, we have focussed our analysis on the proportion of respondents whose BMI fell into the obese range (BMI of ≥30). However, health promotion activities should also address individuals across the full BMI spectrum, from healthy weight to overweight to obese, to encourage healthy behaviours at all stages and help prevent progression to higher BMI classifications.

The latest available benchmark, the 2022 NHS, indicated that 30.3% of Victorians aged 18 years and over were obese, compared to 22.8% in the 2023 VPHS. The 2025 ALC data suggests that 35.8% of adult respondents within the Loddon Shire have a BMI that puts them in the obese range. This is a very slight increase compared to the 2019 ALC, whereby 32.7% of respondents were classified as obese according to their BMI.

Adults were more likely to be obese (35.8%) compared to children (13.5%). No significant difference in overweight or obesity rates was seen between males and females. When looking by sex and age, older males aged 35 and above, and females aged 18 and above reported a higher average BMI compared to their younger counterparts. Residents from Inglewood/Bridgewater & Surrounds (45.5%), Pyramid Hill & Surrounds (54.7%), and Wedderburn and Surrounds (33.1%) were all more likely to be obese compared to residents from Boort & Surrounds (8.4%).

Obesity rates differed according to household size, with respondents who live in a single-person household is more likely to be obese (58.6%) compared to those from a 4-5 person household (23.2%).

Table 6.5.1 Body Mass Index by selected demographic characteristics

	Unweighted base[1] n	Under weight %	Healthy weight %	Overweight %	Obese %	Average BMI #
Total sample	**297**	**3.3**	**30.1**	**33.2**	**33.4**	**27.8**
Children	70	13.4	51.9	21.2	13.5	20.4
Adults	227	2.1	27.5	34.6	35.8	28.7
Males	90	3.3	28.0	31.7	37.0	28.3
Females	207	3.2	33.1	35.2	28.4	27.1
Sex and age						
Males, 3 to 11	6	16.7	50.0	0.0	33.3	18.1
Males, 12 to 17	23	8.7	65.2	17.4	8.7	21.1
Males, 18 to 34	9	16.6	83.4	0.0	0.0	22.0
Males, 35 to 49	9	0.0	20.6	54.0	25.4	28.2
Males, 50 to 69	21	0.0	15.8	30.2	54.0	31.1
Males, 70+	22	0.0	10.1	49.7	40.2	29.6
Females, 3 to 11	15	13.3	40.0	33.3	13.3	19.3
Females, 12 to 17	26	15.4	53.8	23.1	7.7	21.9
Females, 18 to 34	29	0.0	28.5	51.4	20.2	27.1
Females, 35 to 49	40	0.0	45.5	20.8	33.7	28.0
Females, 50 to 69	68	0.0	24.0	37.5	38.5	29.4
Females, 70+	29	8.1	36.8	32.9	22.2	26.1
Subregion						
Boort & Surrounds	75	2.1	29.9	59.6	8.4	26.1
East Loddon Area	47	5.1	46.5	17.3	31.1	25.4
Inglewood / Bridgewater & Surrounds	65	1.5	20.5	32.5	45.5	29.8
Pyramid Hill & Surrounds	41	0.9	15.3	29.1	54.7	29.1
South Loddon Area	14	18.2	35.2	9.3	37.2	28.1
Wedderburn & Surrounds	54	1.7	41.0	24.3	33.1	27.3
Demographic indicators						
Household size[2]						

1 person	30	0.0	5.6	35.8	58.6	30.6
2 or 3 people	130	0.8	27.0	37.4	34.7	28.9
4 or 5 people	61	6.1	42.1	28.5	23.2	26.4
More than 5 people	6	0.0	17.3	31.7	50.9	33.3
Born overseas*	24	0.0	18.3	28.1	53.7	32.0
Born in Australia	272	3.7	31.8	34.0	30.4	27.2
Speaks other main language*	2	0.0	44.0	56.0	0.0	24.7
Speaks English as main language	292	3.4	30.4	33.7	32.6	27.7
Aboriginal and/or Torres Strait Islander*	11	0.0	26.4	40.2	33.3	28.2
Not Aboriginal or Torres Strait Islander	286	3.4	30.2	32.9	33.4	27.7
LGBTQIA+*	3	29.9	24.9	0.0	45.2	25.1
Non-LGBTQIA+	290	3.2	30.7	34.1	32.0	27.6
Neurodivergent	24	2.4	29.2	40.0	28.4	26.0
Not neurodivergent	193	3.6	32.0	35.3	29.1	27.0
Maybe	16	6.9	39.9	15.8	37.4	25.1
Not sure what neurodivergent means	33	1.3	35.9	18.4	44.4	28.6
Less than Bachelor level education[2]	151	2.4	25.5	33.9	38.2	28.9
Holds a Bachelor degree or higher	74	0.0	43.4	36.4	20.1	26.8
Unemployed/Retired[2]	91	1.2	22.5	41.4	34.9	28.8
Employed	134	2.6	31.1	30.0	36.3	28.6
Just getting along, poor or very poor[2]	78	0.6	25.1	31.8	42.6	29.8
Reasonably comfortable, very comfortable or prosperous	146	3.2	30.0	36.2	30.7	27.6
Requires help with daily activities*	18	7.0	13.4	54.2	25.4	28.4
Does not require help	276	3.2	31.5	31.7	33.6	27.6
Food security (last 12 months)[2]						
Low or very low food security	32	0.0	19.0	32.7	48.3	30.4
Marginal food security	33	0.0	29.2	32.3	38.5	29.0
High food security	161	3.0	29.2	35.9	31.9	28.2

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

Obesity rates did not differ according to health and wellbeing indicators. However, obesity rates differed according to adherence to selected health behaviour recommendations, with obesity recorded among a greater proportion of those who did not meet the following recommendations:

- Did not meet fruit intake recommendation (42.0%) compared to met recommendation (18.0%)
- Did not meet muscle strengthening recommendation (42.4%) compared to met recommendation (14.8%)
- Did not meet sleep recommendation (48.1%) compared to met recommendation (24.5%)

No significant risk behaviour findings were identified for BMI categories or average BMI.

Table 6.5.2 Body Mass Index by selected health and behaviour characteristics

	Unweighted base[1]	Under weight	Healthy weight	Overweight	Obese	Average BMI
	n	%	%	%	%	#
Total sample	**297**	**3.3**	**30.1**	**33.2**	**33.4**	**27.8**
Health and wellbeing indicators						
Self-reported health - Fair or poor	59	1.0	20.9	28.3	49.8	29.6
Self-reported health - Good, very good, or excellent	236	3.9	32.8	33.5	29.8	27.3
Life satisfaction - Low to moderate (0 to 6)[2]	71	0.6	21.7	36.7	41.0	29.6
Life satisfaction - High/very high (7 to 10)	151	2.9	31.3	32.2	33.5	28.0
Does not feel valued by society[2]	49	0.0	25.3	30.0	44.7	29.8
Sometimes feel valued by society	89	1.2	21.0	39.0	38.7	29.2
Definitely feel valued by society	85	4.4	36.3	31.9	27.4	27.0
Poor mental wellbeing[2]	61	1.0	23.1	33.9	42.0	30.5
Good mental wellbeing	166	2.4	28.8	34.9	34.0	28.1
Health behaviour indicators						
Does not meet fruit intake recommendations	154	0.2	24.7	33.1	42.0	29.4
Meets fruit intake recommendations	141	8.6	40.0	33.4	18.0	24.9
Does not meet vegetable intake recommendations	252	3.4	29.7	33.8	33.1	27.8
Meets vegetable intake recommendations	42	2.9	34.7	28.7	33.8	27.0
Does not meet aerobic physical activity recommendations	81	2.2	19.2	35.4	43.2	28.6
Meets aerobic physical activity recommendations	205	3.7	33.7	32.2	30.4	27.4
Does not meet muscle strengthening recommendations	153	3.4	24.4	29.8	42.4	29.2
Meets muscle strengthening recommendations	103	1.7	42.8	40.8	14.8	25.8
Does not meet screen time recommendations	163	5.5	30.4	31.8	32.3	27.5
Meets screen time recommendations	126	1.3	31.2	34.8	32.6	27.8
Does not meet sleep recommendations	91	2.2	20.0	29.6	48.1	29.3
Meets sleep recommendations	198	3.8	36.5	35.3	24.5	26.8
Drinks sugar-sweetened beverages daily	41	2.5	21.0	34.1	42.4	28.4
Drinks sugar-sweetened beverages less than daily	254	3.4	31.8	33.4	31.4	27.5

Does not meet water consumption recommendations	176	3.5	26.9	36.8	32.7	28.0
Meets water consumption recommendations	118	2.7	39.1	23.6	34.5	27.1
Risk behaviour indicators[2]						
Current smoker	16	3.4	13.8	53.8	29.0	29.2
Ex-smoker	77	0.6	34.0	31.3	34.1	27.6
Never smoked	133	2.9	25.2	35.1	36.8	29.2
Current vaper*	5	0.0	36.9	0.0	63.1	29.0
Ex-vaper	14	0.0	75.4	21.8	2.8	23.7
Never vaped	208	2.3	23.4	36.5	37.8	29.0
Had more than 4 standard drinks on a single occasion	125	2.6	35.1	27.6	34.7	27.5
Has not had more than 4 standard drinks	102	1.2	14.6	46.4	37.8	30.6
Gambled	69	0.0	28.5	38.0	33.5	28.9
Never gambled	156	3.3	27.3	31.9	37.5	28.5

[1] Base sizes include respondents living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
[2] Reported only by respondents aged 18 years and over.
* Significance testing not conducted due to small base size.

7. Risk behaviours

The following section contains the findings related to engagement with risk behaviours, including smoking, vaping, excessive alcohol consumption and gambling. These questions were only asked of adults, aged 18 years and above due to government mandated age restrictions for these behaviours. Results in this section are therefore for 2025 ALC respondents aged 18 years and above, and weighting has been applied.

7.1. Smoking

Adult respondents were asked to indicate their current smoking status using the following response options: smoking 'daily', 'occasionally', 'not currently smoking but used to', 'tried a few times but never smoked regularly', or 'never smoked'. As per benchmarks used in the 2022 NHS and the 2023 VPHS, current smokers included those who reported that they smoke daily or occasionally, while ex-smokers include those who used to smoke but do not currently or have tried a few times, as distinct to those who have never smoked.

Compared to the 2023 VPHS, which reported the proportion of current smokers as 13.9%, the proportion of current smokers in the Loddon Shire according to the 2025 ALC was lower at 9.8% (see Table 7.1.1). No significant differences in smoking rates were seen between males and females. There were also no differences among males by age group. Among females, ex-smoking rates were significantly higher for those aged 50 to 69 years (43.0%) compared to those aged 18 to 34 years (21.3%). Across the Loddon Shire subregions, current smoking rates were lower amongst residents of Pyramid Hill & Surrounds (0.0%) and South Loddon Area (0.0%) than those from Inglewood/Bridgewater & Surrounds (13.7%). No significant association was observed between smoking rates and any of the demographic indicators.

Table 7.1.1 Smoking by selected demographic characteristics

	Unweighted base[1]	Current smoker	Ex-smoker	Never smoked
	n	%	%	%
Total sample	**345**	**9.8**	**38.7**	**51.5**
Males	79	10.4	42.3	47.3
Females	263	9.1	34.0	56.9
Sex and age				
Males, 18 to 34	13	10.8	51.4	37.8
Males, 35 to 49	10	11.6	30.6	57.8
Males, 50 to 69	26	12.0	34.3	53.6
Males, 70+	30	7.6	51.2	41.1
Females, 18 to 34	51	13.7	21.3	65.0
Females, 35 to 49	64	8.3	31.1	60.6
Females, 50 to 69	100	7.8	43.0	49.2
Females, 70+	48	7.5	27.1	65.3

Subregion				
Boort & Surrounds	91	5.7	34.2	60.1
East Loddon Area	42	11.8	32.1	56.1
Inglewood / Bridgewater & Surrounds	93	13.7	40.3	46.0
Pyramid Hill & Surrounds	25	0.0	37.3	62.7
South Loddon Area	16	0.0	33.0	67.0
Wedderburn & Surrounds	74	14.7	45.9	39.4
Demographic indicators				
Household size				
1 person	43	23.4	28.6	47.9
2 or 3 people	188	5.6	44.4	50.0
4 or 5 people	89	9.4	33.4	57.2
More than 5 people	25	12.3	36.3	51.4
Born overseas	33	5.8	36.0	58.2
Born in Australia	309	10.5	39.0	50.5
Speaks other main language*	3	0.0	37.9	62.1
Speaks English as main language	338	10.0	38.2	51.7
Aboriginal and/or Torres Strait Islander*	10	10.2	41.0	48.9
Not Aboriginal or Torres Strait Islander	335	9.8	38.6	51.6
LGBTQIA+*	9	8.5	41.8	49.8
Non-LGBTQIA+	331	10.0	39.1	50.9
Neurodivergent	24	23.1	43.4	33.4
Not neurodivergent	215	9.1	39.3	51.6
Maybe	16	8.9	43.8	47.3
Not sure what neurodivergent means	51	6.1	35.7	58.2
Less than Bachelor level education	225	10.9	38.6	50.5
Holds a Bachelor degree or higher	115	3.6	41.2	55.2
Unemployed/Retired	126	17.0	36.8	46.1
Employed	215	6.0	40.0	54.0
Just getting along, poor or very poor	114	15.0	38.9	46.1
Reasonably comfortable, very comfortable or prosperous	226	6.7	39.0	54.3
Requires help with daily activities*	19	19.5	49.1	31.4
Does not require help	321	9.2	38.1	52.7
Food security (last 12 months)				
Low or very low food security	52	22.5	25.8	51.7
Marginal food security	46	8.2	48.3	43.5
High food security	244	7.1	40.1	52.8

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Smoking did not differ according to any health and wellbeing indicators (see Table 7.1.2). Current smoking rates were higher among respondents who did not meet vegetable intake recommendations compared to those who met recommendations (10.8% vs 1.7%), and among those who did not meet screen time recommendations compared to those who met recommendations (15.8% vs 4.0%).

No significant differences in current smoking rates were seen according to other risk behaviours. However, residents who had never smoked were also more likely to report not engaging in risky alcohol consumption (63.2% vs 43.9%).

Table 7.1.2 Smoking by selected health and behaviour characteristics

	Unweighted base[1]	Current smoker	Ex-smoker	Never smoked
	n	%	%	%
Total sample	**345**	**9.8**	**38.7**	**51.5**
Health and wellbeing indicators				
Self-reported health - Fair or poor	76	14.0	45.9	40.1
Self-reported health - Good, very good, or excellent	259	8.2	36.5	55.3
Life satisfaction - Low to moderate (0 to 6)	94	12.4	39.5	48.1
Life satisfaction - High/very high (7 to 10)	232	8.1	36.7	55.3
Does not feel valued by society	69	10.6	28.8	60.7
Sometimes feel valued by society	144	8.5	41.7	49.8
Definitely feel valued by society	123	9.8	41.4	48.7
Poor mental wellbeing	85	17.5	30.0	52.5
Good mental wellbeing	260	7.8	41.0	51.2
Overweight or obese (BMI ≥25.0)	147	7.9	34.3	57.8
Normal range or underweight (BMI <25.0)	79	3.9	42.9	53.3
Health behaviour indicators				
Does not meet fruit intake recommendations	200	13.1	36.4	50.4
Meets fruit intake recommendations	142	4.6	43.2	52.2
Does not meet vegetable intake recommendations	294	10.8	39.9	49.3
Meets vegetable intake recommendations	44	1.7	32.0	66.3
Does not meet aerobic physical activity recommendations	90	10.1	45.8	44.1
Meets aerobic physical activity recommendations	242	9.7	37.7	52.6
Does not meet muscle strengthening recommendations	178	11.6	36.6	51.7
Meets muscle strengthening recommendations	127	8.2	40.2	51.6
Does not meet screen time recommendations	177	15.8	36.0	48.2
Meets screen time recommendations	160	4.0	41.6	54.4
Does not meet sleep recommendations	102	15.5	37.6	46.8

Meets sleep recommendations	229	6.8	39.8	53.3
Drinks sugar-sweetened beverages daily	56	20.8	40.8	38.4
Drinks sugar-sweetened beverages less than daily	287	7.7	38.5	53.8
Does not meet water consumption recommendations	212	11.4	37.5	51.0
Meets water consumption recommendations	126	5.6	43.8	50.6
Risk behaviour indicators				
Current vaper*	10	40.8	50.0	9.2
Ex-vaper	20	15.7	74.1	10.2
Never vaped	314	8.3	35.5	56.2
Had more than 4 standard drinks on a single occasion	188	12.0	44.1	43.9
Has not had more than 4 standard drinks	157	6.5	30.3	63.2
Gambled	103	15.4	45.1	39.5
Never gambled	239	7.0	35.9	57.1

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

7.2. Vaping

Using the same question word as for smoking, adult respondents were asked to indicate their current vaping status using the following response options: vaping 'daily', 'occasionally', 'not currently vaping but used to', 'tried a few times but never vaped regularly', or 'never vaped. As per benchmarks used in the 2022 NHS and the 2023 VPHS for smoking, current vapers included those who reported that they vape daily or occasionally, while ex-vapers include those who used to vape but do not currently or have tried a few times, as distinct to those who have never vaped.

Compared to the 2023 VPHS, which reported the proportion of current vapers as 7.2%, the proportion of current vapers in Loddon Shire according to the 2025 ALC was lower at 3.1% (see Table 7.2.1). No significant differences in vaping rates were seen between males and females. When looking at vaping rates by sex and age, males and females aged 70 years and over were more likely to have never vaped than those aged 18 to 34 years.

Respondents from the following groups were less likely to have never vaped and may benefit from targeted intervention:

- 4-5 person households (71.8%) compared to 2-3 person (96.2%) and 5 or more person households (100.0%)
- Born in Australia (88.5%) compared to born overseas (98.6%)
- Neurodivergent (56.9%) compared to not neurodivergent (94.9%) and maybe neurodivergent (100.0%)

Table 7.2.1 Vaping by selected demographic characteristics

	Unweighted base[1]	Current vaper	Ex-vaper	Never vaped
	n	%	%	%
Total sample	**345**	**3.1**	**7.1**	**89.8**
Males	80	4.0	7.9	88.2
Females	262	2.0	6.0	92.0
Sex and age				
Males, 18 to 34	13	16.2	24.3	59.4
Males, 35 to 49	10	11.6	0.0	88.4
Males, 50 to 69	26	0.0	8.0	92.0
Males, 70+	31	0.0	0.0	100.0
Females, 18 to 34	51	5.0	20.3	74.7
Females, 35 to 49	63	5.5	6.7	87.8
Females, 50 to 69	100	0.0	1.2	98.8
Females, 70+	48	0.0	0.0	100.0
Subregion				
Boort & Surrounds	91	1.6	4.3	94.1
East Loddon Area	42	4.0	13.2	82.8
Inglewood / Bridgewater & Surrounds	94	5.9	2.0	92.1
Pyramid Hill & Surrounds	24	0.0	3.6	96.4
South Loddon Area	16	4.4	0.0	95.6
Wedderburn & Surrounds	74	1.0	17.7	81.2
Demographic indicators				
Household size				
1 person	43	2.3	6.1	91.6
2 or 3 people	189	1.2	2.6	96.2
4 or 5 people	89	8.7	19.5	71.8
More than 5 people	24	0.0	0.0	100.0
Born overseas	33	0.7	0.7	98.6
Born in Australia	309	3.5	8.0	88.5
Speaks other main language*	3	0.0	37.9	62.1
Speaks English as main language	338	3.2	6.9	89.9
Aboriginal and/or Torres Strait Islander*	10	0.0	20.7	79.3
Not Aboriginal or Torres Strait Islander	335	3.2	6.7	90.1
LGBTQIA+*	9	17.0	17.3	65.7
Non-LGBTQIA+	331	2.9	7.0	90.0
Neurodivergent	24	32.2	10.9	56.9
Not neurodivergent	214	1.8	3.3	94.9
Maybe	16	0.0	0.0	100.0
Not sure what neurodivergent means	52	0.0	20.5	79.5

Less than Bachelor level education	225	2.8	7.4	89.8
Holds a Bachelor degree or higher	115	5.5	5.7	88.8
Unemployed/Retired	127	1.6	2.7	95.7
Employed	214	4.1	9.7	86.2
Just getting along, poor or very poor	114	4.2	12.5	83.3
Reasonably comfortable, very comfortable or prosperous	226	2.5	3.6	93.9
Requires help with daily activities*	19	0.0	3.7	96.3
Does not require help	321	3.4	7.5	89.1
Food security (last 12 months)				
Low or very low food security	53	7.2	6.1	86.8
Marginal food security	46	2.9	9.1	88.0
High food security	243	2.1	7.0	90.8

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

The only health and wellbeing indicator associated with vaping status was mental wellbeing (see Table 7.2.2). Specifically, a greater proportion of those with good mental wellbeing were ex-vapers compared to those with poor mental wellbeing (8.8% vs 0.7%).

Similarly, there were only two health behaviour indicators associated with vaping status. A greater proportion of those who met vegetable intake recommendations had never vaped compared to those who did not meet recommendations (98.5% vs 88.8%). A greater proportion of those who met sleep recommendations were ex-vapers compared to those who did not meet sleep recommendations (10.2% vs 0.3%).

Vaping status was associated with other risk behaviours. Specifically, never smokers (98.0%) were more likely to have never vaped compared to ex-smokers (82.4%). Similarly, a higher proportion of those who did not engage in risky alcohol consumption (96.8% vs 85.4%) or who had never gambled (95.9% vs 78.4%) had never vaped compared to those who had engaged in risky alcohol consumption or had gambled. Strategies to reduce vaping rates should therefore be implemented alongside approaches that address other related risk behaviours.

Table 7.2.2 Vaping by selected health and behaviour characteristics

	Unweighted base[1]	Current vaper	Ex-vaper	Never vaped
	n	%	%	%
Total sample	**345**	**3.1**	**7.1**	**89.8**
Health and wellbeing indicators				
Self-reported health - Fair or poor	77	3.4	6.1	90.5
Self-reported health - Good, very good, or excellent	258	3.0	7.2	89.7
Life satisfaction - Low to moderate (0 to 6)	95	6.5	3.0	90.6
Life satisfaction - High/very high (7 to 10)	231	1.5	9.4	89.1

Does not feel valued by society	70	1.5	0.6	97.8
Sometimes feel valued by society	144	6.4	4.5	89.1
Definitely feel valued by society	122	0.8	14.2	84.9
Poor mental wellbeing	85	3.7	0.7	95.6
Good mental wellbeing	260	3.0	8.8	88.3
Overweight or obese (BMI ≥25.0)	148	2.0	2.5	95.5
Normal range or underweight (BMI <25.0)	79	2.8	18.2	79.0
Health behaviour indicators				
Does not meet fruit intake recommendations	200	4.1	6.4	89.5
Meets fruit intake recommendations	142	1.5	8.2	90.2
Does not meet vegetable intake recommendations	294	3.5	7.7	88.8
Meets vegetable intake recommendations	44	0.0	1.5	98.5
Does not meet aerobic physical activity recommendations	90	3.5	1.4	95.1
Meets aerobic physical activity recommendations	242	3.1	8.9	88.0
Does not meet muscle strengthening recommendations	178	4.7	4.2	91.1
Meets muscle strengthening recommendations	127	1.0	12.6	86.4
Does not meet screen time recommendations	178	4.7	7.0	88.3
Meets screen time recommendations	159	1.7	7.5	90.9
Does not meet sleep recommendations	103	7.7	0.3	92.0
Meets sleep recommendations	228	1.2	10.2	88.6
Drinks sugar-sweetened beverages daily	56	13.5	4.3	82.2
Drinks sugar-sweetened beverages less than daily	287	1.0	7.7	91.3
Does not meet water consumption recommendations	212	3.2	4.3	92.5
Meets water consumption recommendations	126	2.9	15.8	81.3
Risk behaviour indicators				
Current smoker	28	13.0	11.3	75.7
Ex-smoker	126	4.1	13.6	82.4
Never smoker	190	0.6	1.4	98.0
Had more than 4 standard drinks on a single occasion	189	3.9	10.7	85.4
Has not had more than 4 standard drinks	156	2.0	1.3	96.8
Gambled	104	5.5	16.1	78.4
Never gambled	238	1.9	2.3	95.9

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

7.3. Alcohol consumption

The National Health and Medical Research Council (NHMRC) uses a measure of excessive alcohol consumption to identify individuals who are at risk of alcohol-related injury on a single occasion. The risk associated with excessive drinking includes risk of death or injury due to road transport accidents, falls, drowning, assault, suicide and acute alcohol toxicity. People are classified as being at risk due to the acute effects of excess alcohol consumption if they have consumed more than four standard drinks on a single occasion in the past 12 months. To assess risk of harm in the 2025 ALC, respondents aged over 18 years were asked how often they had consumed more than four standard drinks in a day. Respondents who reported having more than four standard drinks on a single occasion in the past 12 months were classified as being at risk according to NHMRC guidelines.

Overall, 61.0% of all respondents aged 18 years and over reported they had engaged in risky drinking behaviour in (at least) one sitting in the last 12 months, which is over the guideline for 'at risk' alcohol consumption. This compares to benchmarks of 17.9% for respondents to the 2022 NHS and 41.3% for respondents to the 2023 VPHS, respectively. Respondents from Loddon Shire therefore were more likely to engage in risky drinking behaviour than the benchmarks suggest for Victorian residents more broadly.

No significant differences were seen between males and females overall. By sex and age, females aged 70 years and over (20.3%) were less likely to report risky alcohol consumption than females aged 18 to 69 years (54.4 - 64.4%). No other demographic factors were associated with risky alcohol consumption.

Table 7.3.1 Risky alcohol consumption on single occasion by selected demographic characteristics

	Unweighted base[1]	Risky alcohol consumption in past year	No risky alcohol consumption in past year
	n	%	%
Total sample	**346**	**61.0**	**39.0**
Males	80	67.7	32.3
Females	263	52.0	48.0
Sex and age			
Males, 18 to 34	13	89.2	10.8
Males, 35 to 49	10	53.9	46.1
Males, 50 to 69	26	69.8	30.2
Males, 70+	31	55.6	44.4
Females, 18 to 34	51	57.8	42.2
Females, 35 to 49	64	64.4	35.6
Females, 50 to 69	100	54.4	45.6
Females, 70+	48	20.3	79.7
Subregion			
Boort & Surrounds	91	58.9	41.1
East Loddon Area	42	56.1	43.9
Inglewood / Bridgewater & Surrounds	94	64.3	35.7

Pyramid Hill & Surrounds	25	42.3	57.7
South Loddon Area	16	56.8	43.2
Wedderburn & Surrounds	74	68.9	31.1
Demographic indicators			
Household size			
1 person	43	54.5	45.5
2 or 3 people	189	62.2	37.8
4 or 5 people	89	67.8	32.2
More than 5 people	25	42.2	57.8
Born overseas	33	42.4	57.6
Born in Australia	310	63.6	36.4
Speaks other main language*	3	48.8	51.2
Speaks English as main language	339	60.8	39.2
Aboriginal and/or Torres Strait Islander*	10	83.1	16.9
Not Aboriginal or Torres Strait Islander	336	60.4	39.6
LGBTQIA+*	9	41.6	58.4
Non-LGBTQIA+	332	61.1	38.9
Neurodivergent	24	51.6	48.4
Not neurodivergent	215	60.8	39.2
Maybe	16	48.5	51.5
Not sure what neurodivergent means	52	78.0	22.0
Less than Bachelor level education	226	62.1	37.9
Holds a Bachelor degree or higher	115	56.3	43.7
Unemployed/Retired	127	52.8	47.2
Employed	215	66.3	33.7
Just getting along, poor or very poor	115	60.2	39.8
Reasonably comfortable, very comfortable or prosperous	226	62.4	37.6
Requires help with daily activities*	19	40.6	59.4
Does not require help	322	62.6	37.4
Food security (last 12 months)			
Low or very low food security	53	59.9	40.1
Marginal food security	46	58.9	41.1
High food security	244	61.7	38.3

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

The only health and wellbeing indicator associated with risky alcohol consumption was BMI (see Table 7.3.2). Specifically, respondents who were in the normal range or underweight BMI category were more likely to report risky alcohol consumption than those who were overweight or obese (79.9% vs 55.3%).

Among risk behaviour indicators, respondents who gambled were more likely to report risky alcohol consumption than those who had never gambled (79.4% vs 51.8%). As with the recommendation for vaping, strategies to reduce alcohol consumption should be paired with measures that address other related risk behaviours.

Table 7.3.2 Risky alcohol consumption by selected health and behaviour characteristics

	Unweighted base[1]	Risky alcohol consumption in past year	No risky alcohol consumption in past year
	n	%	%
Total sample	**346**	**61.0**	**39.0**
Health and wellbeing indicators			
Self-reported health - Fair or poor	77	47.0	53.0
Self-reported health - Good, very good, or excellent	259	64.6	35.4
Life satisfaction - Low to moderate (0 to 6)	95	61.9	38.1
Life satisfaction - High/very high (7 to 10)	232	62.7	37.3
Does not feel valued by society	70	54.0	46.0
Sometimes feel valued by society	144	64.6	35.4
Definitely feel valued by society	123	64.4	35.6
Poor mental wellbeing	85	48.1	51.9
Good mental wellbeing	261	64.4	35.6
Overweight or obese (BMI ≥25.0)	148	55.3	44.7
Normal range or underweight (BMI <25.0)	79	79.9	20.1
Health behaviour indicators			
Does not meet fruit intake recommendations	201	61.7	38.3
Meets fruit intake recommendations	142	59.9	40.1
Does not meet vegetable intake recommendations	295	60.6	39.4
Meets vegetable intake recommendations	44	66.6	33.4
Does not meet aerobic physical activity recommendations	91	48.1	51.9
Meets aerobic physical activity recommendations	242	65.2	34.8
Does not meet muscle strengthening recommendations	179	58.6	41.4
Meets muscle strengthening recommendations	127	61.5	38.5
Does not meet screen time recommendations	178	57.6	42.4
Meets screen time recommendations	160	64.4	35.6
Does not meet sleep recommendations	103	55.6	44.4
Meets sleep recommendations	229	62.6	37.4
Drinks sugar-sweetened beverages daily	56	62.9	37.1

Drinks sugar-sweetened beverages less than daily	288	60.6	39.4
Does not meet water consumption recommendations	213	61.2	38.8
Meets water consumption recommendations	126	61.0	39.0
Risk behaviour indicators			
Current smoker	28	74.0	26.0
Ex-smoker	126	69.3	30.7
Never smoker	191	51.8	48.2
Current vaper*	10	75.5	24.5
Ex- vaper	20	92.9	7.1
Never vaper	315	58.1	41.9
Gambled	104	79.4	20.6
Never gambled	239	51.8	48.2

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

7.4. Gambling

Two gambling related questions were asked in the 2025 ALC. The first gambling-related question asked respondents how often, if at all, they had gambled in the last 12 months. Overall, 35.0% of Loddon Shire ALC respondents reported having gambled at some time during the past 12 months. This figure was higher than the 31.8% reported by 2019 ALC Loddon Shire respondents, but lower than the 39.1% reported in the 2023 VPHS.

The second gambling-related question asked those who had gambled at some time in the past 12 months, which type/s of gambling that they had engaged in. A list of nine (9) different gambling types was provided, as well as an option to report an 'other' type of gambling if it wasn't included in the list.

7.4.1. Gambling frequency

Of the Loddon Shire residents who responded to the survey, 6.9% reported that they gamble every week (see Table 7.4.1). No significant differences in gambling frequency were seen between males and females, or by age group among males or females. Residents from South Loddon Area (89.5%) were more likely to report never gambling compared to Inglewood/Bridgewater & Surrounds (56.0%) and Wedderburn & Surrounds (48.3%).

Respondents from the following groups had proportionately higher rates of gambling monthly or less, and would benefit from targeted intervention:

- 2-3 people households (29.2%) and 4-5 people households (33.1%) compared to 5 or more people households (6.3%)
- Not sure what neurodivergent means (52.2%) compared to a neurodivergent (14.1%) and not neurodivergent (21.8%)

Residents who are not neurodivergent reported higher rates of weekly gambling (7.6%) compared to maybe neurodivergent (0.0%).

Table 7.4.1.1 Gambling frequency by selected demographic characteristics

	Unweighted base[1]	Weekly	Monthly or less often	Never gambled
	n	%	%	%
Total sample	**343**	**6.9**	**28.1**	**65.0**
Males	79	10.1	30.2	59.7
Females	261	2.8	25.0	72.2
Sex and age				
Males, 18 to 34	13	16.2	27.0	56.7
Males, 35 to 49	10	11.6	18.9	69.4
Males, 50 to 69	26	4.0	30.3	65.7
Males, 70+	30	14.3	35.2	50.5
Females, 18 to 34	51	1.6	22.9	75.5
Females, 35 to 49	63	3.0	27.4	69.6
Females, 50 to 69	99	2.5	27.5	70.0
Females, 70+	48	5.3	17.3	77.4

Subregion				
Boort & Surrounds	90	1.3	25.1	73.6
East Loddon Area	42	0.0	20.9	79.1
Inglewood / Bridgewater & Surrounds	92	10.6	33.4	56.0
Pyramid Hill & Surrounds	25	7.5	13.0	79.5
South Loddon Area	16	3.8	6.7	89.5
Wedderburn & Surrounds	74	11.7	40.0	48.3
Demographic indicators				
Household size				
1 person	43	8.5	26.0	65.5
2 or 3 people	188	6.5	29.2	64.3
4 or 5 people	87	8.3	33.1	58.6
More than 5 people	25	2.1	6.3	91.6
Born overseas	33	1.5	21.5	77.0
Born in Australia	307	7.7	29.2	63.1
Speaks other main language*	3	0.0	10.8	89.2
Speaks English as main language	336	7.1	27.9	65.0
Aboriginal and/or Torres Strait Islander*	10	25.4	43.8	30.7
Not Aboriginal or Torres Strait Islander	333	6.5	27.7	65.9
LGBTQIA+*	9	0.0	41.6	58.4
Non-LGBTQIA+	329	7.2	28.4	64.4
Neurodivergent	24	17.2	14.1	68.6
Not neurodivergent	213	7.6	21.8	70.7
Maybe	16	0.0	34.8	65.2
Not sure what neurodivergent means	52	1.5	52.2	46.3
Less than Bachelor level education	223	6.4	28.9	64.7
Holds a Bachelor degree or higher	115	6.1	25.4	68.5
Unemployed/Retired	126	9.1	29.5	61.4
Employed	213	4.9	27.8	67.3
Just getting along, poor or very poor	115	11.6	30.0	58.4
Reasonably comfortable, very comfortable or prosperous	223	2.9	27.5	69.7
Requires help with daily activities*	19	8.0	29.5	62.6
Does not require help	319	7.0	28.5	64.6
Food security (last 12 months)				
Low or very low food security	53	12.9	19.9	67.2
Marginal food security	46	9.0	31.8	59.2
High food security	241	5.1	29.8	65.1

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

The only health and wellbeing indicator associated with gambling frequency was perceived value to society (see Table 7.4.1.2). Specifically, those who reported not feeling valued by society (80.3%) were more likely to report never gambling than those who sometimes felt valued by society (56.1%). No significant association was observed for any health behaviour indicators.

Differences in gambling frequency were seen according to alcohol consumption behaviours. Residents who had not engaged in risky alcohol consumption in the past 12 months were more likely to report never gambling (81.3%) compared to those who had engaged in risky alcohol consumption (54.8%).

Table 7.4.1.2 Gambling frequency by selected health and behaviour characteristics

	Unweighted base[1]	Weekly	Monthly or less often	Never gambled
	n	%	%	%
Total sample	**343**	**6.9**	**28.1**	**65.0**
Health and wellbeing indicators				
Self-reported health - Fair or poor	76	8.5	30.0	61.5
Self-reported health - Good, very good, or excellent	257	6.8	28.5	64.7
Life satisfaction - Low to moderate (0 to 6)	94	9.6	25.1	65.4
Life satisfaction - High/very high (7 to 10)	230	4.8	30.5	64.7
Does not feel valued by society	69	3.3	16.4	80.3
Sometimes feel valued by society	143	10.6	33.3	56.1
Definitely feel valued by society	122	3.5	32.7	63.9
Poor mental wellbeing	85	6.2	24.3	69.5
Good mental wellbeing	258	7.1	29.1	63.8
Overweight or obese (BMI ≥25.0)	146	7.9	29.3	62.8
Normal range or underweight (BMI <25.0)	79	3.5	31.3	65.2
Health behaviour indicators				
Does not meet fruit intake recommendations	199	6.5	31.2	62.3
Meets fruit intake recommendations	141	7.8	23.4	68.8
Does not meet vegetable intake recommendations	292	7.5	29.4	63.2
Meets vegetable intake recommendations	44	2.7	17.7	79.6
Does not meet aerobic physical activity recommendations	90	7.9	27.9	64.2
Meets aerobic physical activity recommendations	240	6.1	28.9	65.0
Does not meet muscle strengthening recommendations	177	10.0	26.7	63.3
Meets muscle strengthening recommendations	126	3.1	36.7	60.2
Does not meet screen time recommendations	177	7.9	28.0	64.1
Meets screen time recommendations	158	5.0	29.7	65.2
Does not meet sleep recommendations	102	8.4	31.6	60.0

Meets sleep recommendations	227	6.7	27.0	66.3
Drinks sugar-sweetened beverages daily	56	14.5	22.7	62.8
Drinks sugar-sweetened beverages less than daily	285	5.4	29.4	65.2
Does not meet water consumption recommendations	211	8.0	26.9	65.1
Meets water consumption recommendations	125	4.1	32.3	63.6
Risk behaviour indicators				
Current smoker	28	17.2	36.6	46.2
Ex-smoker	126	6.3	33.5	60.1
Never smoker	188	5.5	21.3	73.2
Current vaper*	10	45.5	16.3	38.2
Ex- vaper	20	0.0	79.2	20.8
Never vaper	312	6.1	24.5	69.4
Had more than 4 standard drinks on a single occasion	188	9.7	35.5	54.8
Has not had more than 4 standard drinks	155	2.4	16.2	81.3

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

7.4.2. Types of gambling

Table 7.4.2.1 below provides a summary of the proportion of respondents who engaged in various types of gambling over the past 12 months, ranked in order from most to least popular. Respondents could report participating in as many different types of gambling as they engaged in. Therefore, the proportions do not add up to 100%. The most common form of gambling was lottery with 54.7% of respondents who engaged in gambling participating in the lottery. The next most common were race betting (42.6%), electronic gaming machines (20.3%) and sports betting (13.9%).

Table 7.4.2.1 Types of gambling

Types of gambling	%	n (N=104)
Lottery	54.7	63
Race betting	42.6	32
Electronic gaming machines	20.3	21
Sports betting	13.9	14
Instant scratch tickets	12.1	17
Keno or bingo	10.2	12
Casino table games	7.5	6
Online casino games	1.2	2
Private betting	0.0	0

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.

Table 7.4.2.2 provides an overview of participation in the top three most common types of gambling by sex, sex and age, and subregion. Males were more likely than females to engage in race betting (53.2% vs 22.9%). No significant differences between males and females were highlighted for lottery or electronic gaming machine use.

Representation of demographic subgroups among Loddon Shire was small and therefore results regarding differences in gambling types should be interpreted with caution (see Table 7.4.2.2).

Table 7.4.2.2 Types of gambling by selected demographic characteristics

	Unweighted base[1]	Lottery	Race betting	Electronic gaming machines
	n	%	%	%
Total sample	**104**	**54.7**	**42.6**	**20.3**
Males	34	49.4	53.2	18.9
Females	69	64.1	22.9	23.4
Males, 18 to 34	7	31.2	62.5	31.2
Males, 35 to 49	3	38.1	38.1	38.1
Males, 50 to 69	9	46.8	53.2	13.2
Males, 70+	15	63.8	50.7	14.5
Females, 18 to 34	12	27.4	3.3	39.6
Females, 35 to 49	18	68.3	25.6	6.0
Females, 50 to 69	29	79.7	29.2	22.3
Females, 70+	10	48.6	22.2	32.1
Subregion				
Boort & Surrounds	23	66.0	39.4	11.2
East Loddon Area	10	84.0	9.6	0.0
Inglewood / Bridgewater & Surrounds	32	69.1	50.0	24.5
Pyramid Hill & Surrounds	6	24.9	36.7	21.1
South Loddon Area	3	58.5	41.5	0.0
Wedderburn & Surrounds	30	29.8	42.9	25.2

[1] Base sizes include respondents aged 18 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from base sizes.
* Significance testing not conducted due to small base size.

Appendix A: Detailed description of weighting

Sample surveys are a commonly used tool for making inferences about a population using responses from just a subset of it. To be able to do so, however, requires a probability sample – one in which every element of the population has a known, non-zero chance of selection. Since some units in the population may not have a chance of selection (such as people who do not have a telephone in the case of telephone surveys) and there may be different rates of response across unit characteristics (such as young people who are less likely to respond), many sample surveys yield subsets that imperfectly cover their target populations. This occurs even with the best possible sample design and data collection practices (Valliant *et al.,* 2013). In such situations, weighting can reduce the extent of any biases introduced through non-coverage or non-response.

The approach for deriving weights generally consists of the following steps:

1. Compute a design weight for each respondent as the inverse of their chance of selection
2. Adjust the design weights so they match population distributions across a range of respondent characteristics.

The first step is essential in providing the statistical framework necessary for making population inferences from a sample survey. The second step aims to reduce non-response bias and to ensure that survey estimates are consistent with other sources (such as published results from the ABS Census of Population and Housing).

Each step will now be covered in turn.

Design weights

The design weights account for the different probabilities that respondents have of being selected to take part in the survey. Each respondent's weight is the inverse of their probability of selection,

$$d_k = \frac{1}{p_k}.$$

For the 2025 ALC, all households in the six LGAs, and all household members aged 3 years and over were in-scope for the survey, so all respondents get a design weight of 1.

Calibrating to population benchmarks

To ensure that estimates made from the dataset are representative of the target population, the design weights are adjusted so that they match external benchmarks of key demographic parameters likely to be correlated with the survey outcomes and propensity to participate. The benchmarks used for the adults in the 2025 ALC were age by education, sex and country of birth, while children (aged 3 to 17) were weighted by age and sex only. All benchmarks and weights were calculated separately for each LGA.

The method for calibrating the design weights was generalised regression weighting (GREG weighting) which uses non-linear optimisation to minimise the distance between the design and calibrated weights subject to the weights meeting the benchmarks. Following calibration to the population benchmarks, extremely large weights were capped to limit variance inflation, and the weights were subsequently recalibrated so that benchmark alignment was maintained.

Refer to Lumley (2017) for more details on the implementation of regression calibration in R (R Core, 2018) and to Valliant *et al.* (2013) for a more general treatment of weighting and estimation for sample surveys.

Treatment of missing values

The regression weighting approach requires that there are no missing values across the adjustment variables or values other than those for which there are reliable benchmarks. Like most surveys, however, some respondents did not provide answers to the questions required for weighting (see Table A1).

Imputation was performed using the Amelia package in R. Five imputed datasets were created, and the modal imputed value was used as the final value for any missing cell. The imputation process is expected to have a negligible impact on weighted estimates made from the dataset.

Table A1 Extent of missing values among weighting characteristics

Questionnaire item		Not stated		Related weighting characteristic(s)
		n	%	
A1.	What Shire or Council area do you live in?	Nil	0	All benchmarks
B1.	Firstly, how old are you?	166	2.0	All benchmarks
B2.	Which of the following best describes your current sex identity?	218	2.6	Sex
B6.	In which country were you born?	162	1.97	Country of birth
B7.	What is the highest level of education you have completed?	140	2.24	Age by education
	Total number of respondents with one or more missing values for weighting items	336	4.08	

Not stated consists of Don't know, Refused or Other responses.

Benchmarks

The benchmarks used for weighting in Loddon Shire can be seen in Table A2.1. Benchmarks for education and country of birth have been adjusted so that age by region totals are consistent across benchmarks.

Table A2.1 Loddon – Population benchmarks used for calibration

Benchmark category		Population proportion[1]
Age group	**Education**	**%**
3 to 11	-	11.4
12 to 17	-	8.9
18 to 34	Has Bachelors	2.6
	No Bachelors	12.0
35 to 49	Has Bachelors	3.4
	No Bachelors	7.8
50 to 69	Has Bachelors	4.0
	No Bachelors	31.1
70+	Has Bachelors	1.2
	No Bachelors	17.5
Age	**Sex**	
3 to 17	Male	9.8
	Female	10.5
18+	Male	43.3
	Female	36.4
Age	**Country of birth**	
3 to 17	-	20.3
18+	Australia	8.9
	Other	70.8

[1] Population benchmarks sourced from ABS Census 2021

References

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Appendix B: Questionnaire

2025 Active Living CENSUS

Healthy LODDON CAMPASPE

Census Booklet

Help shape a healthier tomorrow!

Introduction

This survey asks you questions about your health and wellbeing, recreational activities, and use of public open spaces and facilities. This will help us to plan programs, services and infrastructure that meets the needs of the community.

You may find some of these questions to be personal or sensitive. Please be assured that your answers are confidential and anonymous – no individual will be identifiable from the data provided to us.

We strongly encourage you to complete all questions. However, if there are any questions you would prefer not to answer, please leave these blank.

Section A – Demographic Questions

This first set of questions asks you about your household and personal demographic situation.

You may find some of these questions to be personal or sensitive. Please be assured that your answers are confidential and anonymous – no individual will be identifiable from the data provided to us.

We strongly encourage you to complete all questions. However, if there are any questions you would prefer not to answer, please leave these blank.

A1	**What Shire or Council area do you live in?**	☐ Central Goldfields Shire ☐ Greater Bendigo ☐ Loddon Shire ☐ Macedon Ranges Shire ☐ Mount Alexander Shire ☐ Shire of Campaspe
A2	**What is the suburb or town of your residence?**	
A3	**What is the postcode of your residence?**	
A4	**Including yourself, how many people currently live in your household?**	☐ 1 ☐ 7 ☐ 2 ☐ 8 ☐ 3 ☐ 9 ☐ 4 ☐ 10 ☐ 5 ☐ 11 ☐ 6 ☐ 12+
A5	**What is your age?**	*years old*
A6	**Which of the following best describes your current gender identity?**	☐ Male ☐ Female ☐ Gender diverse / Non-binary / Self-described / Other ☐ Prefer not to say
A7	**What sex were you assigned at birth?**	☐ Male ☐ Female ☐ Something else *(please specify)* ☐ Prefer not to say
A8	**Do you identify as Aboriginal and/or Torres Strait Islander?** *We are asking how you identify so that we can better plan programs, services and public spaces to meet the needs of the Aboriginal and Torres Strait Islander community.*	☐ No **Skip to A9** ☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander ☐ Yes, both Aboriginal and Torres Strait Islander

A8a	Do you use an Aboriginal Community Controlled Health Organisation for health and wellbeing care?	☐ Yes **Skip to A9** ☐ No
A8b	Why not?	
A9	Is English your main language?	☐ Yes ☐ No *(please specify)*
A10	In which country were you born?	☐ Australia ☐ Other *(please specify)*
A11	Do you currently identify as LGBTQIA+?	☐ Yes ☐ No
A12	What is the highest level of education you have completed?	☐ Bachelor Degree or higher ☐ TAFE / trade school / diploma ☐ Completed Year 12 ☐ On the job training ☐ Have not finished year 12 and no longer in school ☐ Still in school
A13	In the last week, did you have a job of any kind?	☐ Yes, work for payment or profit ☐ Yes, but currently on holidays, on paid leave, on strike or temporarily stood down ☐ Yes, unpaid work in a family business ☐ Yes, other unpaid work *(please specify)* ☐ No, do not have a job
A14	Given your current needs and financial responsibilities, would you say that you and your family are...	☐ Prosperous (well off) ☐ Very comfortable ☐ Reasonably comfortable ☐ Just getting along ☐ Poor ☐ Very poor
A15	Which of these statements best describes the food eaten in your household in the last 12 months?	☐ Enough of the kinds of food we want to eat ☐ Enough but not always the kinds of food we want ☐ Sometimes not enough to eat ☐ Often not enough to eat

A16	*For these statements, please tell us whether the statement was often true, sometimes true, or never true for your household in the last 12 months:*	Often true	Sometimes true	Never true
A16a	We worried whether our food would run out before we got money to buy more.	☐	☐	☐
A16b	The food we bought just didn't last, and we didn't have money to get more.	☐	☐	☐
A16c	We couldn't afford to eat balanced meals.	☐	☐	☐

Skip to Question A21 if you selected "never true" for all statements in Question A16 AND "enough" foods in Question A15

A17	In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?	☐ Yes ☐ No **Skip to A18**
A17a	How often did this happen?	☐ Almost every month ☐ Some months but not every month ☐ Only 1 or 2 months
A18	In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?	☐ Yes ☐ No
A19	In the last 12 months, did you lose weight because there wasn't enough money for food?	☐ Yes ☐ No

Skip to Question A21 if you responded "no" to Questions A17, A18 and A19

A20	In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?	☐ Yes ☐ No **Skip to A21**
A20a	How often did this happen?	☐ Almost every month ☐ Some months but not every month ☐ Only 1 or 2 months
A21	Do you ever need someone to help you with, or be with you for, self-care activities, body movement activities and/or communication activities? *(choose all that apply)*	☐ No ☐ No, I do not need help with daily activities, however I have been diagnosed with a disability ☐ Yes, need help with self-care activities ☐ Yes, need help with body movement activities ☐ Yes, need help with communication activities
A22	Are you covered by any of these concession cards? *(choose all that apply)*	☐ Health Care Card ☐ Pensioner Concession Card ☐ Commonwealth Seniors Health Card ☐ Veterans Affairs Treatment Entitled Card ☐ None of these

Section B – Movement and nutrition behaviours

The next set of questions asks about your movement and nutrition behaviours.

B1	**How many serves of vegetables, legumes or beans do you usually eat each day?** *A 'serve' of vegetables is 1/2 cup of cooked vegetables or 1 cup of salad vegetables and a serve of legumes or beans is 1/2 cup of cooked, dried or canned beans, peas or lentils.* 	☐☐ *serves*
B2	**How many serves of fruit do you usually eat each day?** *A 'serve' is 1 medium piece or 2 small pieces of fruit or 1 cup of diced pieces.* 	☐☐ *serves*
B3	**Health experts say that you should eat at least 5 serves of vegetables a day. If you don't do this, what is the main reason why not?**	
B4	**Health experts say you should eat at least 2 serves of fruit a day. If you don't do this, what is the main reason why not?**	
B5	**How many litres or cups of water do you usually drink in a day?**	☐☐ *litres* ☐☐ *cups*
B6	**How often do you consume cordial, soft drinks, flavoured mineral water, energy or sports drinks?**	☐ Every day ☐ Several times per week ☐ About once a week ☐ About once a fortnight ☐ About once a month ☐ Less often than once per month ☐ Never

B7	During the last 7 days, on how many days did you do **vigorous** physical activities like heavy lifting, digging, aerobics, or fast bicycling?	☐ None **Skip to B9** ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ Every day				
B8	How much time did you usually spend doing **vigorous** physical activities on one of those days?	☐☐ *hours* ☐☐ *minutes*				
B9	During the last 7 days, on how many days did you do **moderate** physical activities like carrying light loads, bicycling at a regular pace, doubles tennis, or brisk walking?	☐ None **Skip to B11** ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ Every day				
B10	How much time did you usually spend doing **moderate** physical activities on one of those days?	☐☐ *hours* ☐☐ *minutes*				
B11	How often do you do physical activities in your own time that strengthen your muscles (i.e. activities that are not carried out as part of your job)? *This includes resistance training such as free weights, using weight machines and exercises like push ups / sit ups along with other tasks you may do around the home such as lifting, carrying or digging. Include all such activities even if you have included them before.*	☐☐ *days per week* ☐☐ *days per month* *(if less than once a month, record 0)*				
B12	During the last 7 days, what do you estimate was the average time per day you spent on screens (e.g., TV, computer, digital tablets) in your free time? Do not include time on screens for work or education.	☐☐ *hours* ☐☐ *minutes*				
B13	During the last 7 days, on average, how much time did you sleep per night?	☐☐ *hours* ☐☐ *minutes*				
B14	*Please indicate whether you agree or disagree with the following statements:*	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
B14a	I feel that accessing healthy food and drinks in my local area is easy for me.	☐	☐	☐	☐	☐
B14b	I feel that being physically active in my local area is easy for me.	☐	☐	☐	☐	☐

B15	How often do you feel safe and secure in your local area?	☐ Always ☐ Most of the time ☐ Sometimes ☐ Rarely

B16	*How often do you walk or cycle to get to and from places?*	Daily	4-6 times a week	1-3 times a week	2-3 times a month	Once a month	Once or twice in last 3 months	Less often
B16a	Walk	☐	☐	☐	☐	☐	☐	☐
B16b	Cycle	☐	☐	☐	☐	☐	☐	☐

B17	During most weeks, how do you travel to your place of work or education? (choose all that apply)	☐ Public transport ☐ Car – as a driver ☐ Car – as a passenger ☐ Truck ☐ Taxi or ride-share service ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walk only ☐ Work/school at home ☐ Other *(please specify)* ☐ I don't work/not studying
B18	In the last 12 months, have you participated in physical activities as often as you would like?	☐ Yes **Skip to C1** ☐ No
B19	What are the reasons why you have not done physical activities as often as you would like? (choose all that apply)	☐ Too busy / not enough time ☐ Lack of social support (e.g., no encouragement, no one to go with) ☐ Personal or cultural reasons *(please name)* ☐ Safety (e.g., poor lighting, remote venue / facility) ☐ Unsure about what activities are available ☐ No cool or shaded areas to exercise locally during hot weather ☐ Poor health / medical condition ☐ Disability ☐ Lack of transport ☐ Cost ☐ Other reason *(please specify)*

Section C – Recreation behaviours, and use of public facilities and open spaces

Next we want to hear about your recreation and use of public facilities and open spaces. This will help us to plan for and improve facilities and spaces to suit you.

C1	In the last 12 months, did you take part in any physical activities for sport, exercise or for recreation?	☐ Yes ☐ No **Skip to C45**
C2	In the last 12 months, how many physical activities did you take part in for sport, exercise, or for recreation?	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 or more
C3	Please select the **main** physical activity you have taken part in over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
C4	If "other", please specify which is the **main** physical activity you have taken part in over the last 12 months.	
C5	Approximately, how many times in total have you done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
C6	What is the name of the facility, venue, or place where you took part in this activity most often?	
C7	What is the name of the suburb or town where the facility, venue or place is located?	

		Very poor	Poor	Average	Good	Excellent
C8	*How would you rate the quality and accessibility of the facility, venue or place where you took part in this activity?*					
C8a	Quality	☐	☐	☐	☐	☐
C8b	Accessibility	☐	☐	☐	☐	☐

C9	How did you get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*

List of physical activities

No.	Physical activity
1	Active play (at playgrounds / play centre)
2	Air sports / aviation / drone racing / hang-gliding
3	Aqua aerobics
4	Archery
5	Athletics / track and field
6	Australian rules football (AFL)
7	Badminton
8	Baseball
9	Basketball (indoor / outdoor)
10	Billiards / snooker / pool
11	Bocce / boules / pétanque
12	Boxing
13	Bush walking / hiking
14	Caneball
15	Canoeing / kayaking / rowing / dragon boating / paddle boarding
16	Carpet bowls
17	Cheerleading
18	Cricket (all types)
19	Croquet
20	Cycling: Mountain bike riding
21	Cycling: BMX
22	Cycling: Road and sport cycling
23	Cycling: General cycling for recreation or transport
24	Dancing / ballet / calisthenics
25	Fishing
26	Fitness: Gym
27	Fitness: Indoor group activities / aerobics / Zumba / yoga / pilates
28	Fitness: Outdoor fitness / personal training / group activities
29	Frisbee / boomerang throwing

No.	Physical activity
30	Golf
31	Gymnastics
32	Hockey (indoor / outdoor)
33	Horse racing / harness racing
34	Horse riding / equestrian activities / polo
35	Jogging / running
36	Lawn bowls
37	Martial arts / tai chi
38	Minigolf
39	Motor sports (cars and bikes)
40	Netball (indoor / outdoor)
41	Orienteering
42	Rock climbing / abseiling / caving
43	Rugby league / rugby union / touch football
44	Sailing
45	Shooting sports
46	Roller sports / inline hockey / roller derby / roller skating
47	Skateboarding / scooting
48	Soccer (indoor / outdoor)
49	Squash / racquetball
50	Swimming
51	Sword sports / fencing / kendo / swordcraft
52	Table tennis
53	Tennis (indoor / outdoor)
54	Tenpin bowling
55	Triathlons / ironmans
56	Volleyball (all types)
57	Walking
58	Water-skiing / power boating
59	Weight lifting / body building
60	Other

C10	How many kilometres do / did you travel to get to this activity?	☐☐☐ *km*
	Skip to C19 if you have not taken part in any more physical activities	
C11	Please select the physical activity you have taken part in **second most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
C12	If "other", please specify which physical activity you have taken part in **second most often** over the last 12 months.	
C13	Approximately, how many times in total have you done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
C14	What is the name of the facility, venue, or place where you took part in this activity most often?	
C15	What is the name of the suburb or town where the facility, venue or place is located?	

C16	*How would you rate the quality and accessibility of the facility, venue or place where you took part in this activity?*	Very poor	Poor	Average	Good	Excellent
C16a	Quality	☐	☐	☐	☐	☐
C16b	Accessibility	☐	☐	☐	☐	☐

C17	How did you get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
C18	How many kilometres do / did you travel to get to this activity?	☐☐☐ *km*
C19	Thank you for providing those details regarding the physical activities that you took part in most often over the last 12 months. Is there anything else that you would like to let us know about your participation in these activities, or in regard to any additional physical activities that you also took part in? *(for example, travel requirements, cost, facilities/venues/locations, availability and accessibility of options etc.)*	

C20	If you mentioned that you took part in more than two physical activities over the past year, would you like to answer some more questions about those extra activities?	☐ Yes ☐ No **Skip to C45**
C21	Please select the physical activity you have taken part in **third most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	
C22	If "other", please specify which physical activity you have taken part in **third most often** over the last 12 months.	
C23	Approximately, how many times in total have you done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
C24	What is the name of the facility, venue, or place where you took part in this activity most often?	
C25	What is the name of the suburb or town where the facility, venue or place is located?	

		Very poor	Poor	Average	Good	Excellent
C26	*How would you rate the quality and accessibility of the facility, venue or place where you took part in this activity?*					
C26a	Quality	☐	☐	☐	☐	☐
C26b	Accessibility	☐	☐	☐	☐	☐

C27	How did you get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
C28	How many kilometres do / did you travel to get to this activity?	*km*

Skip to C45 if you have not taken part in any more physical activities

C29	Please select the physical activity you have taken part in **fourth most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	
C30	If "other", please specify which physical activity you have taken part in **fourth most often** over the last 12 months.	

C31	Approximately, how many times in total have you done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
C32	What is the name of the facility, venue, or place where you took part in this activity most often?	
C33	What is the name of the suburb or town where the facility, venue or place is located?	

C34	*How would you rate the quality and accessibility of the facility, venue or place where you took part in this activity?*	Very poor	Poor	Average	Good	Excellent
C34a	Quality	☐	☐	☐	☐	☐
C34b	Accessibility	☐	☐	☐	☐	☐

C35	How did you get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
C36	How many kilometres do / did you travel to get to this activity?	*km*

Skip to C45 if you have not taken part in any more physical activities

C37	Please select the physical activity you have taken part in **fifth most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	
C38	If "other", please specify which physical activity you have taken part in **fifth most often** over the last 12 months.	
C39	Approximately, how many times in total have you done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often

C40	What is the name of the facility, venue, or place where you took part in this activity most often?							
C41	What is the name of the suburb or town where the facility, venue or place is located?							
C42	*How would you rate the quality and accessibility of the facility, venue or place where you took part in this activity?*	Very poor	Poor	Average	Good	Excellent		
C42a	Quality	☐	☐	☐	☐	☐		
C42b	Accessibility	☐	☐	☐	☐	☐		
C43	How did you get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*						
C44	How many kilometres do / did you travel to get to this activity?	☐☐☐ *km*						
C45	*In the last 12 months, how often have you used the following in your area?*	Daily	4-6 times a week	1-3 times a week	2-3 times a month	Once a month	Once or twice in last 3 months	Less often / never
C45a	Public open spaces	☐	☐	☐	☐	☐	☐	☐
C45b	Off-road walking and cycling tracks	☐	☐	☐	☐	☐	☐	☐
C45c	Footpaths	☐	☐	☐	☐	☐	☐	☐
C46	Which of the following types of public facilities or open spaces have you used in your area in the last 12 months? (choose all that apply)	☐ Swimming pools / splash parks ☐ Indoor sports / leisure / fitness centres ☐ Sports grounds, ovals and clubrooms ☐ Halls / community centres ☐ After hours usage of education facilities (e.g., school, TAFE, university) ☐ Parks ☐ Community gardens ☐ Hard courts (e.g., netball / tennis) ☐ Skateparks / BMX ☐ Playgrounds ☐ Other *(please specify)* ☐ Have not used public facilities and open spaces in my area in the last 12 months **Skip to C48**							

C47	What are the reasons why you have used public facilities and open spaces in your area in the last 12 months? (choose all that apply)	☐ Exercise / health and fitness ☐ Socialising with family / friends ☐ For fun / enjoyment ☐ Commuting (i.e., to get from a to b) ☐ Exercising the dog ☐ Organised sport (e.g., cricket or netball for a club) ☐ Unstructured physical recreation activities (e.g., going for a walk, playing ball games with friends) ☐ For time to myself ☐ For my mental health and wellbeing ☐ Getting back to nature ☐ Entertaining kids / watching kids' activities ☐ Community event / performance ☐ Taking part in cultural activities or events on Country ☐ Some other reason *(please specify)*
C48	What improvements would encourage you to use public facilities and open spaces more often?	
C49	Where would you like to see these improvements made? (e.g., name of facility, venue or place)	

Section D – General health and risk behaviours

This last set of questions asks about your general health and risk-taking behaviours.

You may find some of these questions to be personal or sensitive. Please be assured that your answers are confidential and anonymous - no individual will be identifiable from the data provided to us.

We strongly encourage you to complete all questions. However, if there are any questions you would prefer not to answer, please leave these blank.

D1	How tall are you without shoes? (height in centimetres) – *OPTIONAL*	☐☐☐ *cm*
D2	What is your weight without clothes or shoes? (weight in kilograms) – *OPTIONAL*	☐☐☐ *kg*
D3	In general, would you say your health is...	☐ Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor

		All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
D4	*Please indicate for each of the five statements which is closest to how you have been feeling over the **last two weeks**.*						
D4a	I have felt cheerful and in good spirits	☐	☐	☐	☐	☐	☐
D4b	I have felt calm and relaxed	☐	☐	☐	☐	☐	☐
D4c	I have felt active and vigorous	☐	☐	☐	☐	☐	☐
D4d	I woke up feeling fresh and rested	☐	☐	☐	☐	☐	☐
D4e	My daily life has been filled with things that interest me	☐	☐	☐	☐	☐	☐

D5	Overall, how satisfied are you with life as a whole these days? *This question asks about how satisfied you feel about life in general on a scale from 0 to 10. 0 means you feel 'not at all satisfied' and 10 means 'completely satisfied'.*	☐ 0 - Not at all satisfied ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 - Completely satisfied
D6	Do you feel valued by society?	☐ No, not at all ☐ Not often ☐ Sometimes ☐ Yes, definitely	

Complete D7 to D10 only if age 18 years or above

D7	Which of the following best describes your smoking status?	☐ Smoke daily ☐ Smoke occasionally ☐ Don't smoke now, but used to ☐ Tried a few times but never smoked regularly ☐ Never smoked

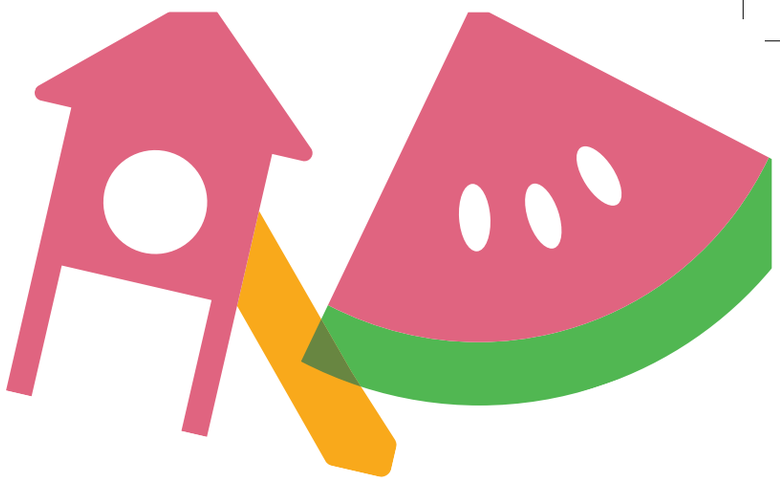
D8	Which of the following best describes your vaping status?	☐ Vape daily ☐ Vape occasionally ☐ Don't vape now, but used to ☐ Tried a few times but never vaped regularly ☐ Never vaped
D9	In the last 12 months, how often did you have more than four (for women) or five (for men) standard drinks in a day?	☐ Every day ☐ 3-6 days a week ☐ 1-2 days a week ☐ 1-3 days a month ☐ Less than once a month ☐ Never
D10	In the last 12 months, how often did you gamble?	☐ Every day ☐ 3-6 days a week ☐ 1-2 days a week ☐ 1-3 days a month ☐ Less than once a month ☐ Never **Skip to D11**
D10a	In the last 12 months, what type/s of gambling did you participate in? (choose all that apply)	☐ Casino table games ☐ Online casino games ☐ Sports betting ☐ Race betting ☐ Electronic gaming machines ☐ Keno or bingo ☐ Instant scratch tickets ☐ Lottery ☐ Private betting ☐ Other *(please specify)* [ ]
D11	Do you have any other comments or feedback about what would help you and/or your family be healthier and more active?	[ ]

Section E – Children

E1	Do you have any children aged 17 or younger living with you at least 50% of the time?	☐ Yes ☐ No **Skip to end of survey**
E2	How many children aged between 3-17 years live with you at least 50% of the time?	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ More than 5

Answer the following questions for up to five children between 3-17 years of age, starting with the oldest first

		Child number → 1
E3	What is your child's age?	☐☐ *years old*
E4	Which of the following best describes your child's current gender identity?	☐ Male ☐ Female ☐ Gender diverse / Non-binary / Self-described / Other ☐ Prefer not to say
E5	What sex was your child assigned at birth?	☐ Male ☐ Female ☐ Something else *(please specify)* ☐ Prefer not to say
E6	Does your child identify as Aboriginal and/or Torres Strait Islander? *We are asking how you identify so that we can better plan programs, services and public spaces to meet the needs of the Aboriginal and Torres Strait Islander community.*	☐ No **Skip to E7** ☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander ☐ Yes, both Aboriginal and Torres Strait Islander
E6a	Does your child use an Aboriginal Community Controlled Health Organisation for health and wellbeing care?	☐ Yes **Skip to E7** ☐ No
E6b	Why not?	
E7	Is English your child's main language?	☐ Yes ☐ No *(please specify)*
E8	In which country was your child born?	☐ Australia ☐ Other *(please specify)*



	2	3	4	5
	☐☐ *years old*	☐☐ *years old*	☐☐ *years old*	☐☐ *years old*
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	Child number →	1
E9	Does your child currently identify as LGBTQIA+?	☐ Yes ☐ No
E10	What is the highest level of education your child has completed?	☐ Bachelor Degree or higher ☐ TAFE / trade school / diploma ☐ Completed Year 12 ☐ On the job training ☐ Has not finished year 12 and no longer in school ☐ Still in school ☐ Has not started school
E11	Does your child ever need someone to help them with, or be with them for, self-care activities, body movement activities and/or communication activities? (choose all that apply)	☐ No ☐ No, my child does not need help with daily activities, however they have been diagnosed with a disability ☐ Yes, need help with self-care activities ☐ Yes, need help with body movement activities ☐ Yes, need help with communication activities
	The next set of questions asks about your child's movement and nutrition behaviours.	
E12	How many serves of vegetables, legumes or beans does your child usually eat each day? *A 'serve' of vegetables is 1/2 cup of cooked vegetables or 1 cup of salad vegetables and a serve of legumes or beans is 1/2 cup of cooked, dried or canned beans, peas or lentils.* 	☐☐ *serves*
E13	How many serves of fruit does your child usually eat each day? *A 'serve' is 1 medium piece or 2 small pieces of fruit or 1 cup of diced pieces.* 	☐☐ *serves*
E14	Health experts say children should eat at least 5 serves of vegetables a day. If they **don't** do this, what is the main reason why not?	
E15	Health experts say children aged 4-8 years should eat at least 1.5 serves of fruit a day and children aged 9 years and over should eat at least 2 serves of fruit a day. If they **don't** do this, what is the main reason why not?	

	2	3	4	5
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	☐☐ *serves*	☐☐ *serves*	☐☐ *serves*	☐☐ *serves*
	☐☐ *serves*	☐☐ *serves*	☐☐ *serves*	☐☐ *serves*

	Child number →	1
E16	How many litres **or** cups of water does your child usually drink in a day?	☐☐ *litres* ☐☐ *cups*
E17	How often does your child consume cordial, soft drinks, flavoured mineral water, energy or sports drinks?	☐ Every day ☐ Several times per week ☐ About once a week ☐ About once a fortnight ☐ About once a month ☐ Less often than once per month ☐ Never
E18	During the last 7 days, on how many days does your child do **vigorous** physical activities like heavy lifting, digging, aerobics, or fast bicycling?	☐ None **Skip to E20** ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ Every day
E19	How much time did your child usually spend doing **vigorous** physical activities on one of those days?	☐☐ *hours* ☐☐ *minutes*
E20	During the last 7 days, on how many days did your child do **moderate** physical activities like carrying light loads, bicycling at a regular pace, doubles tennis, or brisk walking?	☐ None **Skip to E22** ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ Every day
E21	How much time did your child usually spend doing **moderate** physical activities on one of those days?	☐☐ *hours* ☐☐ *minutes*
E22	How often does your child do physical activities in their own time that strengthens their muscles (i.e. activities that are not carried out as part of their job)? *This includes resistance training such as free weights, using weight machines and exercises like push ups / sit ups along with other tasks they may do around the home such as lifting, carrying or digging. Include all such activities even if you have included them before.*	☐☐ *days per week* ☐☐ *days per month* *(if less than once a month, record 0)*

	2	3	4	5
	☐☐ litres	☐☐ litres	☐☐ litres	☐☐ litres
	☐☐ cups	☐☐ cups	☐☐ cups	☐☐ cups
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	☐☐ days per month	☐☐ days per month	☐☐ days per month	☐☐ days per month

	Child number →	1
E23	In the last 7 days, what do you estimate was the average time per day your child spent on screens (e.g., TV, computer, digital tablets) in their free time? Do not include time on screens for work or education.	☐☐ *hours* ☐☐ *minutes*
E24	During the last 7 days, on average, how much time did your child sleep per night?	☐☐ *hours* ☐☐ *minutes*
E25	*Please indicate whether you agree or disagree with the following statements:*	
E25a	I feel that accessing healthy food and drinks in my local area is easy for my child	☐ Strongly agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly disagree
E25b	I feel that being physically active in my local area is easy for my child	☐ Strongly agree ☐ Agree ☐ Neutral ☐ Disagree ☐ Strongly disagree
E26	To what extent do you agree that your child is safe in your local area?	☐ Definitely agree ☐ Somewhat agree ☐ Somewhat disagree ☐ Definitely disagree
E27	*How often does your child walk or cycle to get to and from places?*	
E27a	Walk	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice in last 3 months ☐ Less often
E27b	Cycle	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice in last 3 months ☐ Less often

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E28	Thinking about most weeks during the school term, which of the following ways does your child go to and/or from school? (choose all that apply)	☐ They are driven to or from school in a car ☐ Public transport **with** an adult present (e.g., bus, train, tram, ferry) ☐ Public transport **without** an adult present (e.g., bus, train, tram, ferry) ☐ Walk or ride (e.g., bike, scooter, skateboard) **with** an adult present ☐ Walk or ride (e.g., bike, scooter, skateboard) **without** an adult present ☐ Other *(please specify)* ☐ My child does not attend school
E29	In the last 12 months, has your child taken part in physical activities as often as they would like?	☐ Yes **Skip to E31** ☐ No
E30	What are the reasons why your child has not done physical activities as often as they would like? (choose all that apply)	☐ Too busy / not enough time ☐ Lack of social support (e.g., no encouragement, no one to go with) ☐ Personal or cultural reasons *(please name)* ☐ Safety (e.g., poor lighting, remote venue / facility) ☐ Unsure about what activities are available ☐ No cool or shaded areas to exercise locally during hot weather ☐ Poor health / medical condition ☐ Disability ☐ Lack of transport ☐ Cost ☐ Other reason *(please specify)*
	Next we want to hear about your child's recreation and use of public facilities and open spaces. This will help us to plan for and improve facilities and spaces to suit them.	
E31	In the last 12 months, did your child take part in any physical activities for sport, exercise or for recreation?	☐ Yes ☐ No **Skip to E75**
E32	In the last 12 months, how many physical activities did your child take part in for sport, exercise, or for recreation?	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ More than 4

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	Child number →	1
E33	Please select the **main** physical activity your child has taken part in over the last 12 months from the list of physical activities on **page 10** and record the number.	
E34	If "other", please specify which is the **main** physical activity your child has taken part in over the last 12 months.	
E35	Approximately, how many times in total has your child done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
E36	What is the name of the facility, venue, or place where your child took part in this activity most often?	
E37	What is the name of the suburb or town where the facility, venue or place is located?	
E38	*How would you rate the quality and accessibility of the facility, venue or place where your child took part in this activity?*	
E38a	Quality	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E38b	Accessibility	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E39	How did your child get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*

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	Child number →	1
E40	How many kilometres did your child travel to get to this activity?	☐☐☐ *km*
	Skip to Question E49 if your child has not taken part in any more physical activities	
E41	Please select the physical activity your child has taken part in **second most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
E42	If "other", please specify which physical activity your child has taken part in **second most often** over the last 12 months.	
E43	Approximately, how many times in total has your child done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
E44	What is the name of the facility, venue, or place where your child took part in this activity most often?	
E45	What is the name of the suburb or town where the facility, venue or place is located?	
E46	*How would you rate the quality and accessibility of the facility, venue or place where your child took part in this activity?*	
E46a	Quality	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E46b	Accessibility	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E47	How did your child get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*

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		Child number → 1
E48	How many kilometres did your child travel to get to this activity?	☐☐☐ *km*
E49	Thank you for providing those details regarding the main physical activities that your child took part in most often over the last 12 months. Is there anything else that you would like to let us know about their participation in these activities, or in regard to any additional physical activities that your child also took part in? *(for example, travel requirements, cost, facilities/venues/locations, availability and accessibility of options etc.)*	
	Skip to Question E75 if your child has not taken part in any more physical activities	
E50	If you mentioned that your child took part in more than two physical activities over the past year, would you like to answer some more questions about those extra activities?	☐ Yes ☐ No **Skip to E75**
E51	Please select the physical activity your child has taken part in **third most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
E52	If "other", please specify which physical activity your child has taken part in **third most often** over the last 12 months.	
E53	Approximately, how many times in total has your child done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
E54	What is the name of the facility, venue, or place where your child took part in this activity most often?	
E55	What is the name of the suburb or town where the facility, venue or place is located?	
E56	*How would you rate the quality and accessibility of the facility, venue or place where your child took part in this activity?*	
E56a	Quality	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E56b	Accessibility	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent

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		Child number → 1
E57	How did your child get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
E58	How many kilometres did your child travel to get to this activity?	☐☐☐ *km*
	Skip to Question E75 if your child has not taken part in any more physical activities	
E59	Please select the physical activity your child has taken part in **fourth most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
E60	If "other", please specify which physical activity your child has taken part in **fourth most often** over the last 12 months.	
E61	Approximately, how many times in total has your child done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
E62	What is the name of the facility, venue, or place where your child took part in this activity most often?	
E63	What is the name of the suburb or town where the facility, venue or place is located?	
E64	*How would you rate the quality and accessibility of the facility, venue or place where your child took part in this activity?*	
E64a	Quality	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E64b	Accessibility	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent

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		Child number → 1
E65	How did your child get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
E66	How many kilometres did your child travel to get to this activity?	☐☐☐ *km*
	Skip to Question E75 if your child has not taken part in any more physical activities	
E67	Please select the physical activity your child has taken part in **fifth most often** over the last 12 months from the list of physical activities on **page 10** and record the number.	☐☐
E68	If "other", please specify which physical activity your child has taken part in **fifth most often** over the last 12 months.	
E69	Approximately, how many times in total has your child done this activity during the last 12 months? (including practice or training)	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice every 3 months ☐ Less often
E70	What is the name of the facility, venue, or place where your child took part in this activity most often?	
E71	What is the name of the suburb or town where the facility, venue or place is located?	
E72	*How would you rate the quality and accessibility of the facility, venue or place where your child took part in this activity?*	
E72a	Quality	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent
E72b	Accessibility	☐ Very poor ☐ Poor ☐ Average ☐ Good ☐ Excellent

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E73	How did your child get to this activity?	☐ Public transport ☐ Taxi / Uber ☐ Car ☐ Motorbike or motor scooter ☐ Bicycle ☐ Walked ☐ Other *(please specify)*
E74	How many kilometres did your child travel to get to this activity?	☐☐☐ *km*
E75	*In the last 12 months, how often has your child used the following in your area?*	
E75a	Public open spaces	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice in the last 3 months ☐ Less often / Never
E75b	Off-road walking and cycling tracks	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice in the last 3 months ☐ Less often / Never
E75c	Footpaths	☐ Daily ☐ 4-6 times a week ☐ 1-3 times a week ☐ 2-3 times a month ☐ Once a month ☐ Once or twice in the last 3 months ☐ Less often / Never

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E76	Which of the following types of public facilities or open spaces has your child used in your area in the last 12 months? (choose all that apply)	☐ Swimming pools / splash parks ☐ Indoor sports / leisure / fitness centres ☐ Sports grounds, ovals and clubrooms ☐ Halls / community centres ☐ After hours usage of education facilities (e.g., school, TAFE, university) ☐ Parks ☐ Community gardens ☐ Hard courts (e.g., netball / tennis) ☐ Skateparks / BMX ☐ Playgrounds ☐ Other *(please specify)* ☐ Have not used public facilities and open spaces in my area in the last 12 months **Skip to E78**
E77	What are the reasons why your child has used public facilities and open spaces in your area in the last 12 months? (choose all that apply)	☐ Exercise / health and fitness ☐ Socialising with family / friends ☐ For fun / enjoyment ☐ Commuting (i.e., to get from a to b) ☐ Exercising the dog ☐ Organised sport (e.g., cricket or netball for a club) ☐ Unstructured physical recreation activities (e.g., going for a walk, playing ball games with friends) ☐ For time to myself ☐ For my mental health and wellbeing ☐ Getting back to nature ☐ Entertaining kids / watching kids' activities ☐ Community event / performance ☐ Taking part in cultural activities or events on Country ☐ Some other reason *(please specify)*
E78	What improvements would encourage your child to use public facilities and open spaces more often?	

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E79	Where would you like to see these improvements made? (e.g., name of facility, venue or place)	
	This last set of questions asks about your child's general health. You may find these questions to be personal or sensitive. Please be assured that your answers are confidential and anonymous – no individual will be identifiable from the data provided to us. We strongly encourage you to complete all questions. However, if you would prefer not to answer, please leave these blank.	
E80	How tall is your child without shoes? (height in centimetres) – *OPTIONAL*	☐☐☐ *cm*
E81	What is your child's weight without clothes or shoes? (weight in kilograms) – *OPTIONAL*	☐☐☐ *kg*
E82	In general, would you say your child's health is...	☐ Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor

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2025 Active Living Census
Healthy Loddon Campaspe
Regional Partnerships Loddon Campaspe
Victoria State Government
The Healthy Loddon Campaspe initiative is supported by the Victorian State Government
City of Greater Bendigo
Campaspe Shire Council
Central Goldfields Shire Council
Loddon Shire
Macedon Ranges Shire Council
Mount Alexander Shire Council


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Rollers
SKATING ON SACRED LAND

Appendix C: Detailed tables

Table C1 Population by LGA

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Unweighted base[1]	642	169	108	155	62	27	109
Sex							
Males	54.5	48.0	46.3	64.2	54.3	64.9	50.6
Females	45.5	52.0	53.7	35.8	45.7	35.1	49.4
Age							
Males, 3 to 11	10.5	15.0	23.8	5.6	6.8	12.4	4.9
Males, 12 to 17	7.8	8.3	21.4	4.9	12.3	0.0	5.3
Males, 18 to 34	13.7	3.6	31.2	8.4	0.0	27.2	27.8
Males, 35 to 49	9.7	24.1	0.0	9.4	8.6	0.0	4.1
Males, 50 to 69	34.1	27.8	23.6	35.7	45.4	60.4	30.1
Males, 70+	24.2	21.2	0.0	36.1	26.9	0.0	27.8
Females, 3 to 11	12.2	22.0	11.3	5.5	18.4	10.4	39.0
Females, 12 to 17	10.4	9.2	19.6	4.9	21.5	6.7	8.3
Females, 18 to 34	15.6	17.4	22.0	11.6	16.1	0.0	17.8
Females, 35 to 49	12.9	13.6	17.4	10.0	6.9	18.9	11.1
Females, 50 to 69	37.7	29.3	23.5	42.1	30.9	59.1	53.5
Females, 70+	11.1	8.5	6.1	26.0	6.2	5.0	5.4

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from the base sizes.

Table C2 Health behaviours by LGA

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Unweighted base[1]	642	169	108	155	62	27	109
Health and wellbeing							
General health - Fair / poor	17.8	17.3	17.3	16.2	32.7	26.0	29.2
Life satisfaction - Low to moderate (0 to 6 out of 10)[2]	34.4	37.8	32.4	35.2	20.9	22.3	40.3
Does not feel valued by society[2]	24.3	23.2	36.7	11.6	16.4	51.4	31.9
Poor mental wellbeing[2]	18.8	22.7	29.4	10.1	18.0	25.7	22.3
Overweight or obese (BMI ≥25.0)	66.6	68.0	48.4	77.9	83.8	46.5	57.3
Health behaviours							
Does not meet fruit recommendations	43.4	48.4	46.8	59.2	62.9	75.5	60.7
Does not meet vegetable recommendations	89.0	86.9	85.3	88.8	90.8	100.0	89.4
Does not meet aerobic physical activity recommendations	28.3	27.6	21.9	35.8	15.8	19.7	29.6
Does not meet muscle strengthening recommendations	59.4	51.4	46.5	59.6	79.1	72.2	61.9
Does not meet screen recommendations	54.3	46.0	50.0	60.9	59.7	58.2	55.0
Does not meet sleep recommendations	31.3	24.1	28.5	36.9	42.2	33.2	29.4
Drinks sugar-sweetened beverages daily	14.3	8.7	13.7	21.9	1.7	4.9	21.2
Does not meet water recommendations	71.0	67.7	49.2	83.3	77.0	85.0	66.1
Other risk factors							
Current smoker[2]	9.8	5.7	11.8	13.7	0.0	0.0	14.7
Current vaper[2]	3.1	1.6	4.0	5.9	0.0	4.4	1.0

Consumed more than 4 standard drinks on at least one occasion in the last 12 months[2]	61.0	58.9	56.1	64.3	42.3	56.8	68.9
Gambled in past 12 months[2]	35.0	26.4	20.9	44.0	20.5	10.5	51.7
Food security							
Low or very low food security[2]	17.0	11.4	20.1	13.7	15.5	13.5	26.8

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire. Results are weighted to population benchmarks and exclude 'Not answered' / 'Not applicable' responses from the base sizes.

[2] Reported only by respondents aged 18 years and over.

Table C3 Activities – Walking

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Total activities							
% of respondents undertaking activity	14.6	11.4	8.8	21.6	10.3	19.1	13.5
# respondents undertaking activity	113	27	14	36	9	9	15
Frequency of participation							
Heavy - Once a week or more	88.4	81.6	79.7	100.0	93.2	77.2	88.5
Medium - One to three times a month	8.4	15.9	6.6	0.0	0.0	12.4	11.5
Light - Less often	3.2	2.4	13.6	0.0	6.8	10.4	0.0
Travel mode							
Car	14.8	16.4	13.6	13.0	56.6	16.7	0.0
Walking	81.6	83.6	74.7	85.6	43.4	83.3	85.0
Bike	0.5	0.0	0.0	1.4	0.0	0.0	0.0
Public transport / taxi / Uber	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	3.1	0.0	11.7	0.0	0.0	0.0	15.0
Distance to activity							
Average distance travelled to activity	3.4	2.5	2.0	3.6	5.5	5.8	2.1
Facility quality rating							
Good, excellent	62.5	52.4	47.4	77.2	72.8	50.9	69.9
Average	32.2	47.6	39.0	10.4	27.2	49.1	30.1
Very poor, poor	5.3	0.0	13.6	12.4	0.0	0.0	0.0
Mean score (out of 5)	3.8	3.7	3.5	3.9	3.8	3.5	4.2
Facility accessibility rating							
Good, excellent	72.0	72.5	69.3	80.1	72.8	35.9	94.0
Average	23.9	27.5	30.7	7.5	27.2	64.1	6.0
Very poor, poor	4.1	0.0	0.0	12.4	0.0	0.0	0.0
Mean score (out of 5)	4.0	4.1	3.9	4.0	3.9	3.4	4.4

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire who had participated in the nominated activity. Frequency of participation and all average / mean rating results exclude 'Not answered' / 'Not applicable' responses due to the derived nature of the variable. Travel mode and rating scale results are based on all participants in the nominated activity. All results are weighted to population benchmarks.

Table C4 Activities – Netball

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Total activities							
% of respondents undertaking activity	7.5	4.5	11.9	4.5	17.6	0.0	5.1
# respondents undertaking activity	100	13	28	13	18	0*	10
Frequency of participation							
Heavy - Once a week or more	80.8	83.7	75.6	83.7	95.7	0.0	63.3
Medium - One to three times a month	15.6	16.3	24.4	16.3	4.3	0.0	26.8
Light - Less often	3.6	0.0	0.0	0.0	0.0	0.0	10.0
Travel mode							
Car	86.5	100.0	96.1	100.0	58.9	0.0	64.6
Walking	13.5	0.0	3.9	0.0	41.1	0.0	35.4
Bike	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Public transport / taxi / Uber	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Distance to activity							
Average distance travelled to activity	17.1	34.9	16.6	34.9	10.7	0.0	15.9
Facility quality rating							
Good, excellent	74.9	68.9	80.7	68.9	100.0	0.0	79.5
Average	21.4	31.1	19.3	31.1	0.0	0.0	20.5
Very poor, poor	3.7	0.0	0.0	0.0	0.0	0.0	0.0
Mean score (out of 5)	4.1	3.9	4.2	3.9	4.2	0.0	4.3
Facility accessibility rating							
Good, excellent	75.5	75.7	84.3	75.7	92.6	0.0	53.8
Average	21.4	24.3	15.7	24.3	7.4	0.0	25.7
Very poor, poor	3.1	0.0	0.0	0.0	0.0	0.0	20.5
Mean score (out of 5)	4.1	4.0	4.2	4.0	4.2	0.0	3.6

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire who had participated in the nominated activity. Frequency of participation and all average / mean rating results exclude 'Not answered' / 'Not applicable' responses due to the derived nature of the variable. Travel mode and rating scale results are based on all participants in the nominated activity. All results are weighted to population benchmarks.

*Five or fewer respondents reported participating in this activity, so results cannot be generalised to the broader population.

Table C5 Activities – Swimming

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Total activities							
% of respondents undertaking activity	6.3	13.5	6.0	2.6	5.2	0.0	2.9
# respondents undertaking activity	69	38	12	7	6	0*	5*
Frequency of participation							
Heavy - Once a week or more	85.4	88.4	94.2	52.1	86.6	0.0	100.0
Medium - One to three times a month	6.6	6.9	5.8	15.2	0.0	0.0	0.0
Light - Less often	8.0	4.7	0.0	32.6	13.4	0.0	0.0
Travel mode							
Car	90.0	92.1	100.0	69.8	73.2	0.0	100.0
Walking	7.8	5.9	0.0	30.2	13.4	0.0	0.0
Bike	1.2	2.0	0.0	0.0	0.0	0.0	0.0
Public transport / taxi / Uber	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.9	0.0	0.0	0.0	13.4	0.0	0.0
Distance to activity							
Average distance travelled to activity	32.8	37.5	40.3	16.6	10.1	0.0	21.1
Facility quality rating							
Good, excellent	65.9	53.1	100.0	74.5	68.7	0.0	100.0
Average	30.0	40.3	0.0	25.5	31.3	0.0	0.0
Very poor, poor	4.1	6.6	0.0	0.0	0.0	0.0	0.0
Mean score (out of 5)	3.8	3.7	4.4	4.1	3.8	0.0	4.0
Facility accessibility rating							
Good, excellent	58.1	38.9	100.0	76.1	82.1	0.0	100.0
Average	26.3	36.1	0.0	23.9	17.9	0.0	0.0
Very poor, poor	15.6	25.0	0.0	0.0	0.0	0.0	0.0
Mean score (out of 5)	3.5	3.1	4.3	4.1	3.8	0.0	4.0

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire who had participated in the nominated activity. Frequency of participation and all average / mean rating results exclude 'Not answered' / 'Not applicable' responses due to the derived nature of the variable. Travel mode and rating scale results are based on all participants in the nominated activity. All results are weighted to population benchmarks.

*Five or fewer respondents reported participating in this activity, so results cannot be generalised to the broader population.

Table C6 Activities – Australian Rules Football

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Total activities							
% of respondents undertaking activity	6.5	4.2	8.8	5.5	5.0	9.6	9.8
# respondents undertaking activity	61	17	15	12	7	2*	7
Frequency of participation							
Heavy - Once a week or more	91.6	92.1	90.2	79.2	100.0	100.0	96.8
Medium - One to three times a month	3.3	3.9	9.8	3.5	0.0	0.0	0.0
Light - Less often	5.1	3.9	0.0	17.3	0.0	0.0	3.2
Travel mode							
Car	86.6	66.6	86.3	100.0	64.6	100.0	100.0
Walking	11.1	25.5	13.7	0.0	23.6	0.0	0.0
Bike	1.5	7.9	0.0	0.0	0.0	0.0	0.0
Public transport / taxi / Uber	0.8	0.0	0.0	0.0	11.8	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Distance to activity							
Average distance travelled to activity	15.4	8.6	26.4	10.2	24.6	19.7	13.1
Facility quality rating							
Good, excellent	62.4	56.9	78.4	72.2	88.2	100.0	16.2
Average	28.6	26.3	21.6	0.0	11.8	0.0	83.8
Very poor, poor	9.0	16.8	0.0	27.8	0.0	0.0	0.0
Mean score (out of 5)	3.9	3.7	4.3	3.5	4.1	5.0	3.3
Facility accessibility rating							
Good, excellent	80.8	73.7	72.6	68.0	59.0	100.0	100.0
Average	18.5	26.3	27.4	28.5	41.0	0.0	0.0
Very poor, poor	0.7	0.0	0.0	3.5	0.0	0.0	0.0
Mean score (out of 5)	4.1	4.1	4.2	4.2	3.9	4.0	4.1

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire who had participated in the nominated activity. Frequency of participation and all average / mean rating results exclude 'Not answered' / 'Not applicable' responses due to the derived nature of the variable. Travel mode and rating scale results are based on all participants in the nominated activity. All results are weighted to population benchmarks.

*Five or fewer respondents reported participating in this activity, so results cannot be generalised to the broader population.

Table C7 Activities – Tennis

	Total	Boort & Surrounds	East Loddon Area	Inglewood / Bridgewater & Surrounds	Pyramid Hill & Surrounds	South Loddon Area	Wedderburn & Surrounds
	%	%	%	%	%	%	%
Total activities							
% of respondents undertaking activity	51.6	3.9	5.6	1.4	19.3	1.8	7.8
# respondents undertaking activity	49	16	12	2*	9	1*	9
Frequency of participation							
Heavy - Once a week or more	67.9	54.7	68.9	100.0	62.9	0.0	84.9
Medium - One to three times a month	10.3	19.6	7.5	0.0	3.6	100.0	4.9
Light - Less often	21.8	25.7	23.7	0.0	33.5	0.0	10.2
Travel mode							
Car	98.1	91.6	100.0	100.0	100.0	100.0	100.0
Walking	1.9	8.4	0.0	0.0	0.0	0.0	0.0
Bike	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Public transport / taxi / Uber	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Distance to activity							
Average distance travelled to activity	15.1	14.2	5.7	57.5	11.0	20.0	11.6
Facility quality rating							
Good, excellent	65.2	40.6	62.7	100.0	100.0	100.0	29.0
Average	28.0	45.5	22.4	0.0	0.0	0.0	64.4
Very poor, poor	6.8	13.9	14.9	0.0	0.0	0.0	6.6
Mean score (out of 5)	3.7	3.2	3.8	4.4	4.0	4.0	3.4
Facility accessibility rating							
Good, excellent	85.0	52.0	85.1	100.0	100.0	100.0	90.4
Average	11.9	34.1	14.9	0.0	0.0	0.0	9.6
Very poor, poor	3.1	13.9	0.0	0.0	0.0	0.0	0.0
Mean score (out of 5)	4.0	3.4	4.6	5.0	4.0	4.0	4.0

[1] Base sizes include all respondents aged 3 years and over living in Loddon Shire who had participated in the nominated activity. Frequency of participation and all average / mean rating results exclude 'Not answered' / 'Not applicable' responses due to the derived nature of the variable. Travel mode and rating scale results are based on all participants in the nominated activity. All results are weighted to population benchmarks.

*Five or fewer respondents reported participating in this activity, so results cannot be generalised to the broader population.