


Cardinia Shire's Liveability Plan 2017–29





Prepared by:

Cardinia Shire Council
Community and Planning Services



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ABN: 32 210 906 807
20 Siding Avenue, Officer

PO Box 7, Pakenham Vic 3810
(DX 81006)

Phone: 1300 787 624
Email: mail@cardinia.vic.gov.au
Web: www.cardinia.vic.gov.au

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Acknowledgement of Country

Cardinia Shire Council acknowledges the Bunurong and Wurundjeri peoples as the Traditional Custodians of the land and waterways across our region. We pay our respects to Elders past and present and recognise their deep and enduring connection to Country. Guided by our community, we strive for a future grounded in truth, respect, equity, and cultural safety, where everyone feels connected and has the opportunity to thrive.

Statement of Commitment to Reconciliation

Through Reconciliation, we are building a future where:

- Aboriginal and Torres Strait Islander peoples are empowered, celebrated, and actively involved in shaping the future of Cardinia Shire
- Relationships between First Nations and non-Indigenous peoples are grounded in truth, trust and mutual respect.
- Cultural safety is upheld across our workplaces, community services, and public spaces.
- All people have equitable access to opportunities to support positive physical and mental wellbeing
- We are committed to learning from the past, acting with integrity in the present, and shaping a future where reconciliation is a shared journey. We are proud to play our part in creating a community where everyone belongs, and Aboriginal and Torres Strait Islander people feel safe, respected, and connected.

Statement of inclusion

Cardinia Shire Council encourages a sense of belonging within our shire. We support an inclusive community comprised of people from diverse backgrounds, including and not limited to Aboriginal and Torres Strait Islander people, people from multicultural backgrounds, those identifying as LGBTIQ+, people of faith, and people of all ages, genders and disability.

Acknowledgements

We acknowledge and thank the many hundreds of individuals and groups who provided their advice, participation, and input into the development and review of *Cardinia Shire's Liveability Plan 2017–29*. From local people who provided input through stakeholder pop-ups and surveys, Future Cardinia and the Community Panel, to community workers, leaders, and members of the Liveability Partnership, and Council staff and Cardinia Shire's Councillors.

Mayor and CEO foreword

It is our pleasure to present a reviewed *Cardinia Shire Liveability Plan 2017–29*. The Plan recognises Council's role in coordinating local public health planning, by bringing together a range of organisations, groups and our local community to collectively protect, improve and promote the health and wellbeing of our community and the land we live on, now and into the future. Insights from our Partnership Group, community consultation, and research, has supported the review of the Liveability Plan in aligning to its long-term vision:

Cardinia Shire is a liveable, resilient community where the environment flourishes and residents are healthy, included and connected

This vision recognises that people's health and wellbeing is shaped by the environments and conditions in which we grow, live, learn, work and age, and the opportunities which shape the social fabric of our community. In other words, how liveable our community is.

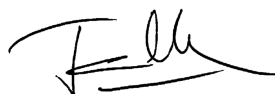
While Council plays a leading role in protecting and improving community health and wellbeing, we cannot do it alone. This whole-of-community Plan reflects the work that Council, our partners, and community groups will undertake collectively to address the priorities for public health identified by, and affecting, our community. The Plan recognises that health outcomes are not equally distributed due to various social, economic and geographical barriers, applying equity and social justice principles to address these disparities. The Plan also recognises that maintaining the health of our planet, is symbiotic with creating environments where the health of our people thrive.

Reviewed to ensure we are focussed on emerging health and wellbeing priorities, through extensive community consultation, research and partnership planning, the Plan provides guidance for addressing our community's health and wellbeing needs over the next four years.

As one of Victoria's fastest growing municipalities, we have an opportunity to build liveable, inclusive, and sustainable community, with social and economic systems that promote health. To do this we need the public and private sector, all levels of government, and our communities to be championing progress towards this vision. Aligning our priorities and coordinating our efforts will ensure that we make the best use of local resources. The challenge we pose to you is, how will you contribute to the collective effort of improving the liveability, health and wellbeing of Cardinia Shire?



Cr Jack Kowarzik
Mayor
Cardinia Shire Council



James Collins
Chief Executive Officer
Cardinia Shire Council

Our shire

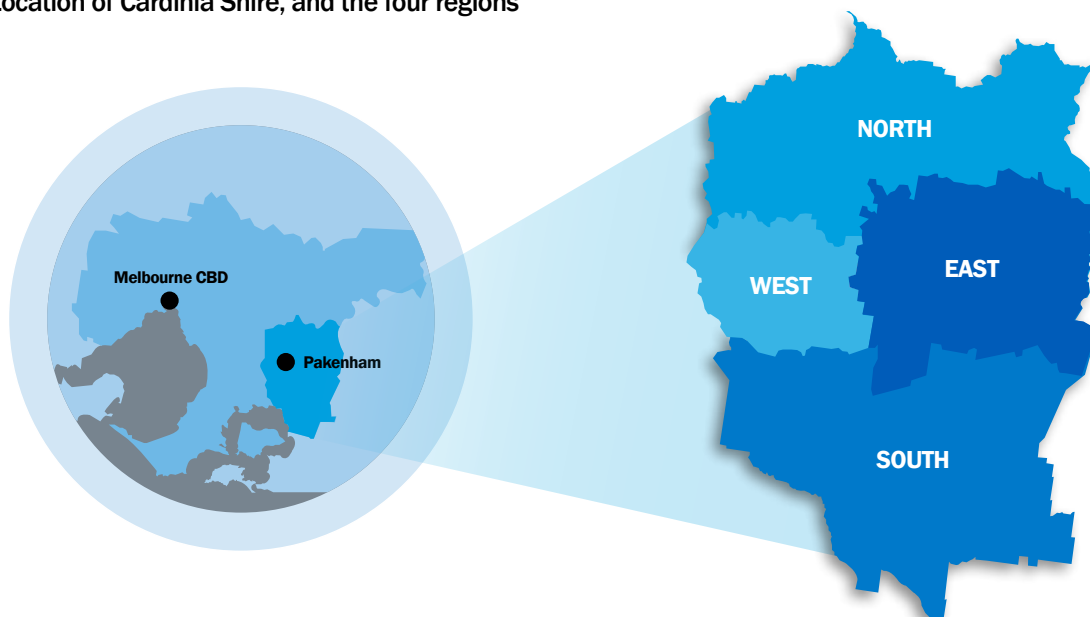
Cardinia Shire is located in the south east of Melbourne and is one of 10 'Interface Councils' which form the perimeter of metropolitan Melbourne, providing a transition between urban and rural areas. Interface Councils represents one of Australia's fastest growing regions in terms of population, with challenges associated with planning and delivering community infrastructure and services which match the pace of growth and needs of a rapidly changing community needs. Cardinia Shire specifically, also faces the challenge of managing this growth across a great geographical expanse, with an area of approximately 1,280 square kilometres.

There are four distinct regions in the Shire (See *Figure 1*), which comprise of multiple localities with similar landforms and landscapes, and built and natural assets, each with unique histories, social networks, population densities, economic systems and people that live within them. Balancing the different needs of regions, alongside emerging and existing communities throughout this growth is key to creating a liveable Shire. This involves a *place-focused approach*, where local community participation guides decision making around services, infrastructure and investment.

The Shire's estimated population of 132,289 people in 2025, is expected to increase to a total of 146,520 or 11% over the life of this Plan (2029), and ultimately, by 2046 we expect to reach a population of 167,989 people.¹ How this population is distributed, impacts planning. The west region is currently home to 70% of Cardinia Shires population (90,329) including four localities of Beaconsfield, Officer, Officer South and Pakenham. The west region will accommodate most future residential and commercial growth, expect to grow by 25% to a total population of 112,982 by 2046.¹ Almost 15% of Cardinia Shire's population reside in the northern region, with a population of 18,950 residents and is forecast to grow to 19,046 by 2046. The northern region is the second largest of the four regions with a total land area of 375km, and includes prominent localities of Gembrook, Cockatoo, Emerald and Beaconsfield Upper.¹

The south region has the largest land area of at 459km² and is home to 7.5% (10,360) of Cardinia Shires residents.¹ This population is expected to grow to 12,061 residents in 2046, spread across 20 localities including Kooweerup, Lang Lang and Bayles.¹ The Eastern region is forecast to grow to 23,900 residents in 2046 and is currently home to 7.5% of Cardinia Shires population at 9,609 residents.¹ The eastern region includes 11 localities including Bunyip, Garfield and Nar Nar Goon.

Figure 1. Location of Cardinia Shire, and the four regions



Integrating health and wellbeing planning across Council

Under the *Victorian Public Health and Wellbeing Act 2008*, Council has a responsibility to protect, improve and promote public health and wellbeing within the Shire. This is achieved through Councils' core operations summarised below.

D Delivering services, programs and infrastructure

Co-ordinate and provide services to and within the municipal district

- Maternal and child health, play groups, parenting programs, and youth services
- Facility and contract management (Libraries, Leisure, Kindergartens)
- Arts, cultural and leisure events, programs and development

Ensuring that the Shire is maintained in a clean and sanitary condition

- Waste management services
- Building and facility management and services

Creating environments which support the health of the community

- Land use planning
- Develop and implement local policy
- Funding, planning, delivery and maintenance of infrastructure and facilities

A Advocating

Attracting investment from public and private sources

- Attracting new business, funding and public/ private investment in housing, roads, services and infrastructure
- Advocating for local investments from other levels of government, or policy changes on behalf of our community

P Partnering

Leading public health planning alongside local agencies and the community, to inform the development and implementation of health-promoting policies and programs

- Coordinating plans which respond to equity legislation
- Good governance of the political process and engaging the community in decision making
- Leading Municipal Public Health and Wellbeing Planning
- Delivering grants and capacity building to empower and enable community to lead positive change in their communities

R Regulating

Developing and enforcing public health standards

- Ensuring compliance with regulations and providing education about local laws
- Emergency management, environmental protection and conservation, and climate change mitigation and adaptation.

These roles are identified using symbols, throughout the Liveability Plan, to highlight how Council will invest in improving the health and wellbeing of the community through the roles of delivery, advocacy, partnership and regulation.

The Liveability Plan sits alongside several other governing plans within Council’s strategic planning framework (see Figure 2) to inform the Council Plan 2025–29 and related operational strategies, on the risk and opportunities for health- equity.

Relevant operational strategies have been aligned against each of the health outcome areas and domains, listed throughout the Liveability Plan. These strategies may be led by Council, State and Federal Governments, or local or regional organisations, and highlight the opportunities for cross-sector partnerships to generate greater alignment, efficiencies in resource distribution and stimulate shared measurement of our collective impact towards health, wellbeing and liveability.

Figure 2. Relationship of the Liveability Plan 2017–29 to the Community Vision and Council Plan



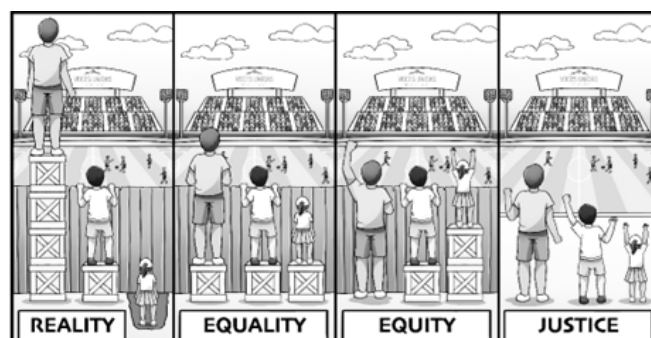
Reducing avoidable differences in health and wellbeing

Cardinia Shire is home to diverse population of people with different backgrounds, characteristics and identities. This diversity leads to vibrancy, creativity and the broadening experiences in the community. However, some people and groups face disproportionate barriers to health, wellbeing, economic and social outcomes. These people and groups in Cardinia Shire include:

- Aboriginal and Torres Strait Islander People
- People with a disability
- Multicultural communities
- Gender
- People living in rural and remote areas
- LGBTIQ+
- Different ages, including older and younger people
- Families
- Low income

These people and groups are captured under the Liveability Plans' *Social Justice and Equity Lens*, which responds to council's requirements under the Gender Equality Act 2020. Addressed through the Plans implementation approach, the lens is a commitment to work with community and partners to address unequal health outcomes, focusing our efforts on those who face the greatest health disparities. Some people may belong to more than one of these groups, which can result in a compounding of disadvantage, and heighten experiences of exclusion and discrimination. We also know that people outside of these groups may experience disadvantage, and that the experience of individuals within these groups will vary from person to person. Recognising the complexity of how this plays out in our society, we will simultaneously strive towards social justice by tackling whole-of-community barriers to health and wellbeing. Figure 3 depicts the difference between social equity and social justice.

Figure 3. Sample graphic representation of the concepts of equality, equity and justice (Voces Unidas)



In practice, this lens will be applied across all outcome areas and domains in the Liveability Plan, using tools, capacity building and community participation and engagement to inform our understanding. This will guide Council, partners and community in identifying and embedding social justice and equity through the distribution of resources, engagement with community, and in our actions, to collectively work towards human rights.

Climate change and health

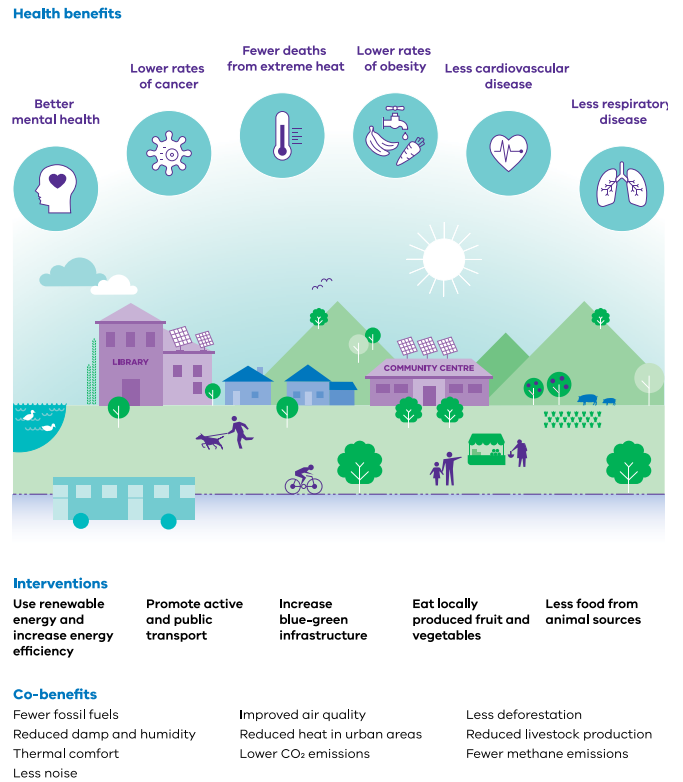
Climate change is a global threat to wellbeing, caused by increasing concentrations of greenhouse gas in the atmosphere, resulting in a hotter, drier climate. Locally, the consequences of climate change including increasing intensity of rainfall, an increase to the number of bushfire risk days, and more severe and frequent climate-events.

Climate change also exacerbates underlying health vulnerabilities and contributes to adverse health outcomes such as respiratory disease, allergies, mental illness, injuries, poor nutrition and cardiovascular disease. These impacts are not evenly distributed, with those with chronic health conditions, those relying on the land for their livelihood and wellbeing such as Indigenous peoples and farmers, children and young people, low-income households, those who speak a language other than English, and older people, at greater risk of climate-related health and wellbeing impacts.⁵²

Maintaining the health of our natural and built environment through actions which mitigate (or ease) climate emissions, alongside actions to help communities adapt to (or cope with) the adverse impacts of climate change, are critical to the liveability of our neighbourhoods and health of our communities.

The Liveability Plan has embedded climate change mitigation and adaptation within its objectives and measures in responding to the *Climate Change Act 2017*. This approach highlights climate change as a responsibility of council alongside all levels of government, partners and the community, and will guide the delivery of actions which achieve mutual improvements in health and the environment; An approach termed health co-benefits. Examples of co-benefits are depicted in Figure 4.

Figure 4. Health co-benefits of climate change interventions



Council works alongside partners to respond to extreme weather events, build climate resilience among populations most at risk of harm, and supports communities to adapt and mitigate climate change through actions that have a positive influence on our environment. Our collective approach demonstrates a commitment to protecting and enhancing the health of our natural and built environment for our communities and future generations.

Liveable neighbourhoods for improved health outcomes

The Liveability Plan takes a contemporary approach to public health and wellbeing planning, focusing on the social, physical and economic conditions in which people are born, learn, live, work and age and how they determine health outcomes. These are also known as the 'social determinants of health' which are fundamentally linked with 'liveability' (See Figure 5).²

Liveable communities are regarded as “safe, attractive, socially cohesive and inclusive, and environmentally sustainable with affordable housing linked via public transport, walking and cycling to employment, education, public open space, local shops, health and community services, and leisure and cultural opportunities.” (Centre for Urban Research, RMIT University)

Extensive research proves that by influencing key aspects of local liveability, we can improve long term health, social, economic and environmental outcomes, and sustainability.³ Alongside RMIT, we have identified seven

liveability domains for Cardinia Shire, which focus on the roles that Council, local agencies and all levels of government can influence through public health and urban planning in creating environments which enhance the health and wellbeing of our community and the natural environment. These domains include:

- Active travel and transport
- Housing
- Community Infrastructure and Services
- Education
- Employment
- Environment And Open Space
- Food

Each domain includes a strategic objective and a set of indicators to help us track liveability over time. These combine indicators from RMITs Australian Urban Observatory alongside measures which capture the community themes identified through hundreds of conversations held with community in 2025.

Our long-term outcomes

Improving liveability will ultimately improve the health and wellbeing of communities. However, this requires a long-term vision, with changes in liveability only seen over decades, which then influence changes in access, attitudes and behaviours, which impact health. That is why we have continued our commitment to the seven long-term outcomes of the 12-year Plan. These outcomes target the top health and wellbeing opportunities for our community, drawing from the ten health priorities identified in the Victorian Public Health and Wellbeing Plan 2023–27.

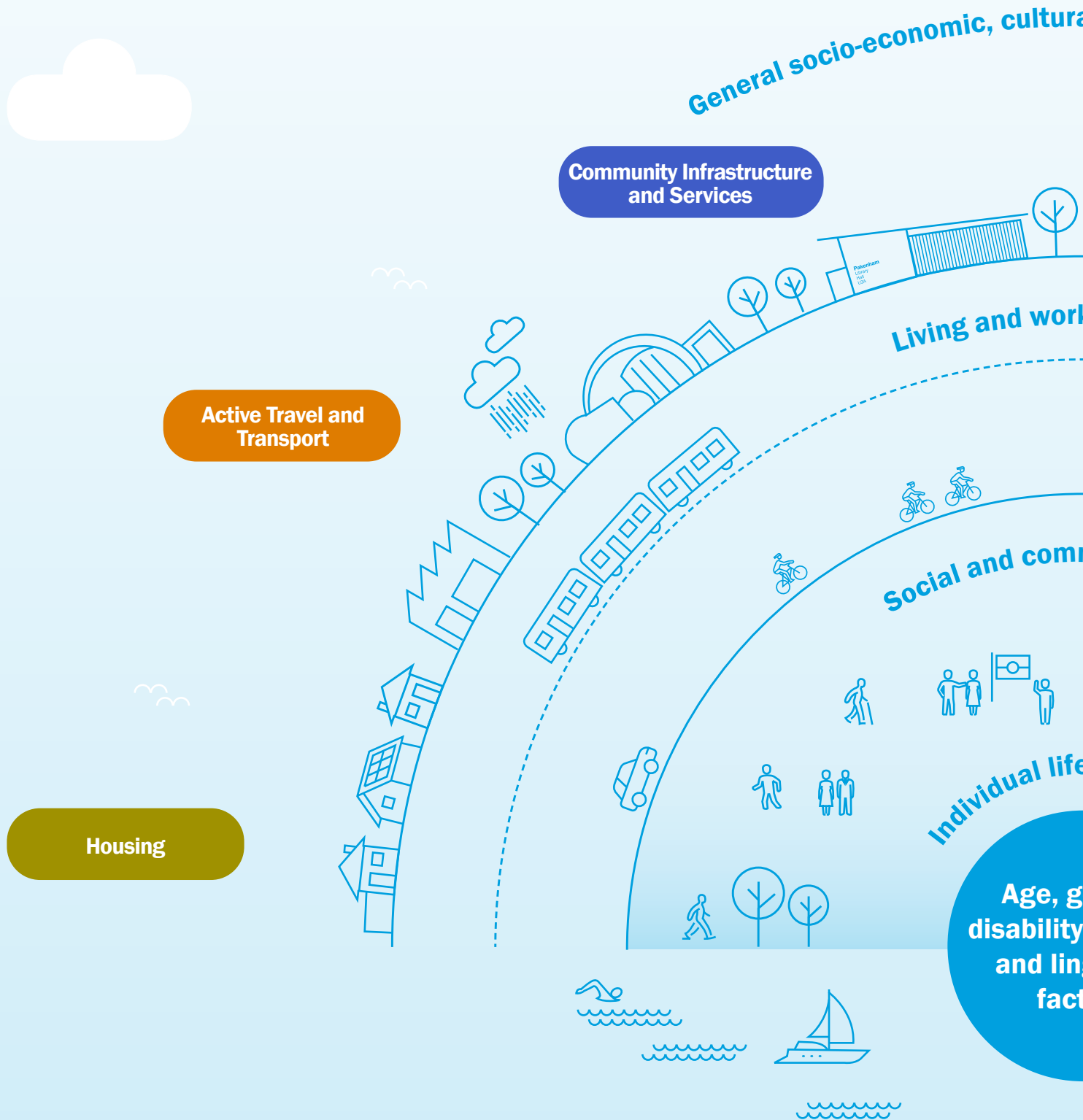
By 2029, we expect to:

- Improve mental wellbeing
- Improve social cohesion
- Improve safety
- Improve healthy eating and active living
- Reduce family violence
- Improve financial wellbeing and resilience
- Reduce harm from tobacco, vaping, alcohol, drugs and gambling

Our contribution to the bigger picture

While Council, local agencies and our community have a clear commitment for a healthy and liveable Cardinia Shire, we cannot take a direct credit for affecting the direction of change across the outcomes or domains of the Liveability Plan. Our collective efforts through the Liveability Plan, and partner strategies combining multiple actions and plans, delivered by many stakeholders, are only part of the process of addressing liveability and health. These changes may be affected by broader political systems, environmental, geopolitical and biological events, global economics, evolving technology and societal shifts which may positively or negatively impact progress.

Figure 5. Socio-ecological model of health and liveability domains for Cardinia Shire



al and environmental conditions

Employment

Environment and Open Space

Education

Food

working conditions

community networks

lifestyle factors

gender, cultural linguistic factors



Our partnership approach

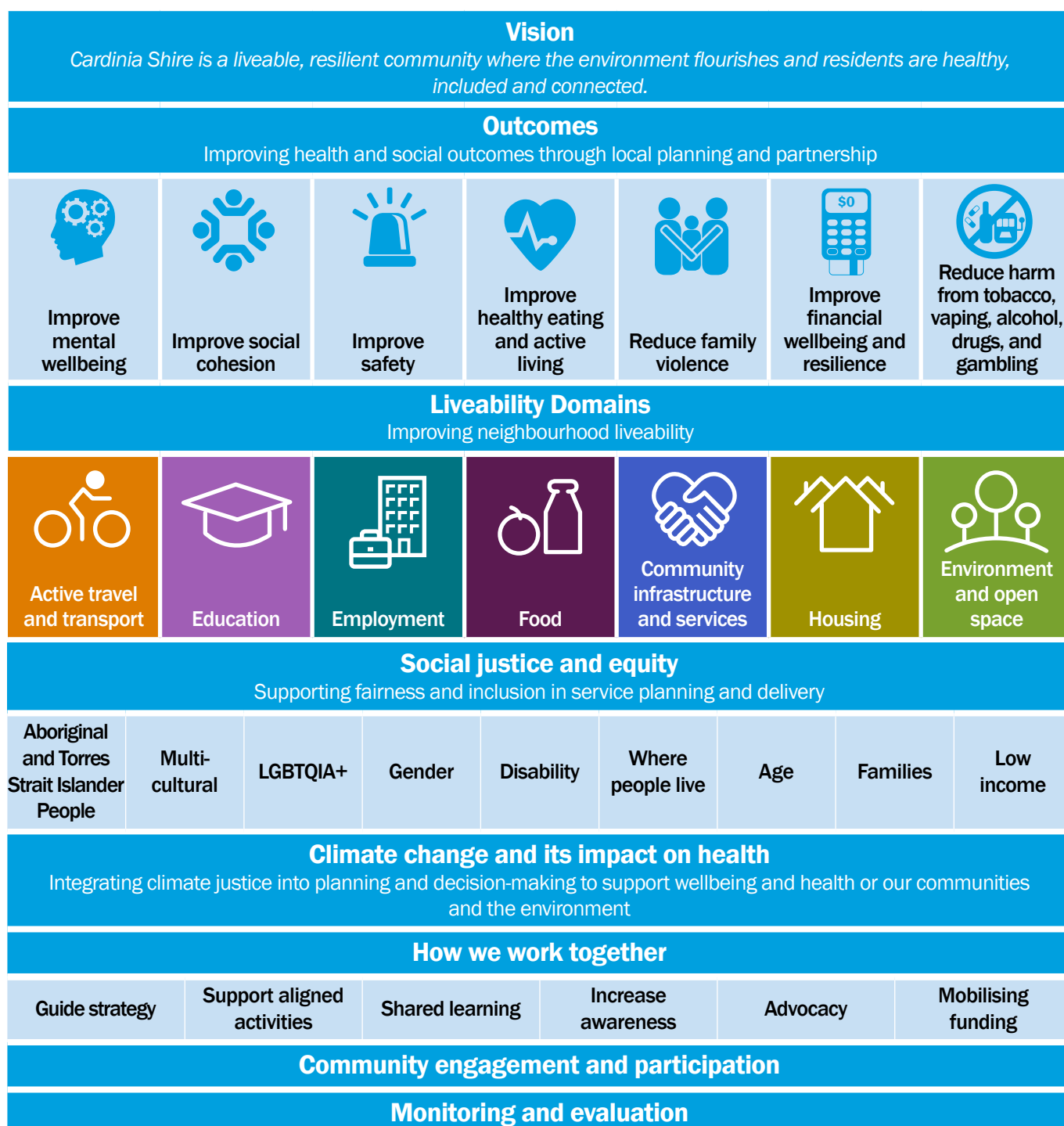
The Liveability Partnership Group was established in 2016 to provide strategic oversight of the Liveability Plan. Consisting of organisations who are funded to protect, improve, and promote health and wellbeing, we will continue to build on, and strengthen our partnerships to deliver the Liveability Plan's objectives for 2025–29. Collectively, Council and partners, take responsibility for the priorities identified in the Plan by working with the community to implement, monitor and evaluate actions identified in an annual *Action Agenda* which respond to Council and partner organisation strategies. Six principles aligned to the *Public Health and Wellbeing Act 2008* will guide this work, including:

1. **Evidence-based decision making** | Decisions relating to the Plan will be based on the relevant and reliable evidence to ensure efficient use of resources and the greatest impact on wellbeing and health equity.
2. **Safe to learn** | A lack of current evidence and knowledgebase for addressing a particular public health issue should not be used as a reason to not act. Innovation and safe-to-learn approaches will be encouraged to develop new solutions.
3. **Prevention is better than cure** | The Plan aims to 'keep well people well'. The primary prevention of disease, illness, injury, disability, or premature death is preferable to remedial measures. Capacity building and health promotion activities are central to reducing health inequities and achieving optimal health and wellbeing among our community.
4. **Accountability** | Decisions relevant to public health planning will be transparent and systematic. The community will have access to reliable information to ensure a good understanding of public health issues and have opportunities to actively participate in policy and program development, implementation and evaluation of the Plan.
5. **Proportionality** | Decisions and actions relating to the protection and promotion of public health, and prevention of disease, illness and disability should be proportionate to the identified risk. Careful consideration based on clear reasoning and evidence to ensure fairness and consistency will be used.
6. **Collaboration** | The Plan is a whole-of-community blueprint to collectively address health and wellbeing. Collaboration between all levels of government, industry, business, communities, and individuals is essential to improving the liveability, health and wellbeing of our community.

Our framework

Cardinia Shire's *Liveability Plan 2017–29* has been developed to provide a clear framework for public health planning within the shire. The framework outlines the common agenda that Council, partners, and the community, will collectively work towards over the next 4 years.

Figure 6. Cardinia Shire's Liveability Plan 2017–29 Framework



Health and wellbeing snapshot of our community

Mental wellbeing



24% of adults experience loneliness, compared to 23% of Victorians ⁷



20% feel no connection to the local community in 2023; an increase from 15% in 2021, but lower than 24% in 2019⁶. This is higher in the South (26%) and West region (23%) and among males (23%).



22% experience high or very high psychological distress, compared to 19% of Victorians; an increase from 20% in 2020.⁷



In 2023, 20% of year 4–6 students and 19% of year 7–9 students had been bullied at their school; a decrease since 2017 with 26% and 25% of students experiencing bullying, respectively ⁸



9.3% have a long-term mental health condition, compared to 7.5% across the other interface councils and 8.8% across Victoria. ⁹



Rates of suicide and self-inflicted injuries between 2018–2022 were higher than Victoria (11.6 vs 10.9 per 100,000 population)⁵¹



Spotlight – Loneliness

Loneliness is 'a subjective unpleasant or distressing feeling of lack of connection to other people, along with a desire for more'.⁵⁴ Loneliness is higher among females (26%) than males (22%) in Cardinia Shire, and across Victoria, is significantly more common among those aged 18–24 years (32%) and less common among those aged between 65–74 (18%) and 75–84 (12%).⁷ The harmful impact of loneliness on health has been estimated to be equal to smoking 15 cigarettes a day, increasing risks of cardiovascular disease, depression, anxiety, dementia, and premature death.⁵⁵

Social cohesion



63% of current residents lived in Cardinia Shire prior to 2016⁹



29% feel no connection to their own cultural heritage, and 22% feel it's not enough⁶



55% feel no connection to the Australian indigenous culture, and 32% feel it's not enough⁶



Between 2016 and 2021, volunteering rates declined from 18% to 12%, mirroring the trend in Victoria, where rates fell from 19% to 13%⁹



78% had someone outside the household who could care for themselves or their children in an emergency in 2023, down from 82% in 2019⁶



42% feel valued by society, lower than the Victorian average of 48%⁷



23% have experienced discrimination ⁶



56% feel that multiculturalism makes life better, lower than the Victorian average of 67%⁷



Spotlight – Discrimination

Discrimination is defined as 'being treated badly or unfairly because of a personal characteristic protected under the Victorian Opportunity Act'.⁶⁰ Experiences of discrimination are associated with an increased risk of depression, anxiety, post-traumatic stress disorder, psychosis and substance abuse disorders, cardiovascular disease, adult-asthma and cancer.⁵⁷ In Cardinia Shire in 2023, discrimination was experienced by 31% of those who speak a language other than English due to their cultural background (versus 2% English only), 15% of those aged between 60–69 and 11% of those aged 70+ due to age (versus 7% of all ages), and 9% of females due to gender (versus 3% males).⁶

Safety



There were 18–19 criminal incidents per day in the year ending March 2025; a 32% increase compared to 2024, most of which were theft or breaches of family violence orders¹⁷



Between 2021 and 2022, 4,783 residents were admitted to hospital due to unintentional injury: a rate of 1,971 per 100,000 population and higher than the Victorian rate of 1,805 per 100,000 population.²⁰ The most common injuries were falls (45%), followed by transport injuries (20%).



In 2024, there were 11 road fatalities (10 male, 1 female) and 90 serious road injuries (60 male, 30 female), compared to 4 fatalities and 143 serious road injuries in 2023.¹⁹



Since 2009 until 2025, there have been 23 significant natural incidents, including bushfires, grassfires, floods, storms and heatwaves. Those most likely to have done nothing to prepare for extreme weather events are 35–49-year-olds (25%), people who speak a language other than English (29%), renters (36%), and single parents (47%).⁶



Spotlight – Perceptions of safety

Feeling “unsafe” at night in the public areas in the Shire increased from 11% in 2024 to 19% in 2025. Feeling unsafe was more common among females, and adults aged 45–54 years old. The most common safety concerns related to crime and policing (26%), concerns around various groups of people (24%), and specific incidents or knowledge of break-ins (15%).⁵⁸ In 2023, 14% of households reported dangerous driving having a negative impact on them or their families, with higher concern among males (17%), people aged 50–59 (21%), and residents in the North region (19%). 12% of residents stated that they avoid walking, riding, or scooting to local activities due to “troublemakers” along active travel routes. This concern was more commonly raised by residents in the West region (16%), males (15%), individuals under 35 years old (20%), and those who speak a language other than English (18%).⁶

Healthy eating and active living



24% consume sugar sweetened beverages daily; notably higher among males (34%), and higher than the Victorian average of 19%.⁷



34% consume takeaway weekly or more often⁶, and an increase from 31% in 2019



Only one in three (35%) meet Australian Dietary Guidelines for fruit consumption and 6% meet the vegetable consumption guidelines, similar to rest of Victoria⁷



6% of households have run out of food and couldn't afford more in 2023, an increase from 5% in 2021⁶



43% grow their own fruit or vegetables, and 56% buy or eat locally produced fruit or vegetables⁶



Of those who travelled to work, rates of walking or cycling for transport are very low (2% versus 4.7% in Victoria), a slight increase from 1.7% in 2016⁹



Only one in three adults met the physical activity guidelines in 2023, lower among females (30%) and a significant decrease from 53% in 2017⁷



Male participation in sport is relatively stable around 21% in 2023, while female participation has declined from 19% in 2019 to 14% in 2023⁶



Spotlight – Food insecurity

Food insecurity is defined as ‘when the availability of nutritionally adequate and safe foods, or the ability to acquire acceptable food in socially acceptable ways is limited or uncertain’. Food insecurity increases the risks of diabetes, cardiovascular disease, obesity, arthritis, back problems and poor mental health, as well as having long term impacts on a child’s physical, social, emotional and academic development.⁵⁹ Locally, food insecurity is more common among those who rent (12%) and single parent households (19%). However, many more households are using strategies to cope, often used to maintain nutrition for children in the household. This includes cutting the size or skipping meals because there wasn’t enough money for food (12% households, 16% households with children, and 28% of single parent households). This is more commonly experienced by females (13%), those who speak a language other than English (14%) and in the West region (13%).⁶

Family violence



78% of people experiencing family violence are female, including children ²⁹



In 2025, there were an average of 5.4 family incidents reported each day, a 19% increase from 2024³⁰, and 1,302 breaches of family violence orders³⁰



In 2023–24, the most common forms of family-violence-related abuse included verbal (38%), emotional (29%) and physical (15%) abuse, followed by financial (2.9%) and sexual (1.7%).



Children are a witness in 50% of family violence incidences, and approximately one in ten incidents are perpetrated against a child aged 17 or under.³⁰



46% of females and 39% of males agree family violence is a serious problem, however the proportion of people rating family violence as no problem at all increased notably, to 5% in 2023, up from 2% in previous years.⁶



Spotlight

Some populations are at greater risk of experiencing family violence across Australia, including women with a disability, Aboriginal and Torres Strait Islander women, young women, those in economic hardship, older women, LGBTIQ+ people and those with lower educational attainment.³⁴

Financial wellbeing and resilience



17% households have a low income (less than \$800 a week), compared to the Victorian average of 21%.⁹

14% of residents' income is spent on transport costs, compared to the Victorian average of 10%⁴⁶



16% of households were experiencing housing stress in 2021, a similar rate to 2016 ⁷

19% of residents had difficulty finding a suitable property to purchase within their budget in 2023, compared to 9% in 2019. This experience was higher among those aged under 35 (32%), those who speak a language other than English (29%) and those in the North region (30%)⁶



16% of residents couldn't afford to pay bills in 2023 compared to 10% in 2021; This experience was higher among females (19%), those who speak a language other than English (22%), couples with children (21%) and single parent households (31%)⁶



16% had friends or family needing housing support in 2023, similar to 2019 (17%). This experience was higher among those who speak a language other than English (23%).⁶



There are 5.7 people experiencing homelessness per 1,000 population⁹



Spotlight – Housing stress

Housing stress is defined as when a low-income household (in the bottom 40% of incomes across Australia), spends more than 30% of their income on housing costs (rent or a mortgage).⁵⁶ In Cardinia Shire, 17% of households experience mortgage stress (highest in Bayles, Catani & Surrounds (25.5%)), compared to 14% of Victorian mortgage owners and 42% of households experience rental stress (highest in Beaconsfield Upper & Surrounds (61.5%))⁹, compared to 35% of Victorian renters. Housing stress can have significant impacts on an individual's mental health while also limiting the ability to buy necessities such as nutritious food, healthcare, and educational materials, and participate in social activities.⁵³

Tobacco, vaping, alcohol, other drugs and gambling



5.3% use vapes daily (higher among males (6.5%)) compared to 4.5% of Victorians⁷ and 12% smoke tobacco daily (higher among males (13%)) compared to 10% of Victorians⁷



In 2023, 6.6% of women smoked in the first 20 weeks of their pregnancy compared to 7.3% in 2022⁴⁰



14% of adults, and specifically one in five males (19%), have an increased risk of alcohol-related harm or disease, defined as drinking on average, more than 10 standard alcohol drinks in a week, or more than 4 standard alcoholic drinks in any one day⁷



In 2022/23, there were 203/100,000 population alcohol-related and 238/100,000 population illicit-drug-related episodes of care; both of which are below the Victorian average, however, are the 2nd and 4th highest rates in the south-east Melbourne catchment, respectively.
^{33,42}



In 2024, the average distance between households and off-license alcohol outlets was 1km, compared to 1.1km in 2021⁴¹



In 2024/25, \$39.5 million was lost on electronic gambling machines, up from \$36.8 million in 2023/24 ⁴³



Nearly 1% of prep-grade children had experienced stress relate to gambling issues in the family, while 4.8% had experienced stress related to an alcohol or drug problem in the family⁴⁹



Spotlight – Gambling harm

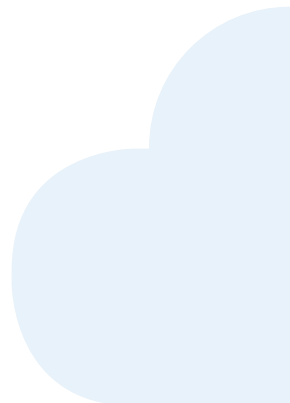
Harm from gambling affects 12.4% of gamblers in the south-east metro region of Victoria, which includes Cardinia Shire. The most common harms are reductions in spending money and savings, while the most common harms affecting those around the gambler include feelings of distress about the other person's gambling (80.0%), and increased tension in relationships (64.3%). Those most at risk of harm from gambling include males, those aged 35 to 54, those on an annual income between \$20,800 to \$42,599, and Aboriginal and Torres Strait islanders, while exposure to gambling during childhood is a key risk factor for harm.⁶¹ Gambling participation rates are similar between males and females, however, females are more likely to gamble due to boredom, loneliness, to engage socially, and to lessen anxiety and depression, as well as attending gambling venues to feel safe, particularly among those experiencing family violence.²⁸



Outcome 1: Improve mental wellbeing

A positive state of wellbeing is about feeling good, being able to cope with life's stressors, an ability to work productively, realise our individual potential and an ability to contribute to family and community life. *Positive mental wellbeing* can be experienced even when an individual has *mental illness*, and high levels of wellbeing can both reduce the risk of developing a mental illness by 800%, and can support recovery from mental illness. A person's wellbeing is supported by having access to the resources for everyday life, including safe and secure housing, education, employment and income, access to green spaces, social support, and healthy food options. Active travel also contributes to positive mental wellbeing through physical activity and the ability to move about freely. Enhancing community resilience to adverse climate impacts and improving community ability to cope with and adapt to future climate hazards, is also crucial for managing the mental health impacts of climate change.

Mental distress and mental illness can have a significant impact on an individual's ability to reach their full potential and can increase the risk of other chronic diseases like diabetes and cardiovascular diseases.^{4,5}





Objectives to improve mental wellbeing:

1.1	Increase equitable access to services and programs which support positive mental wellbeing	D A P
1.2	Increase community resilience to prepare, adapt, recover, and support each other through adversity	D A P
1.3	Increase connection to natural, cultural and social spaces and groups	D P

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

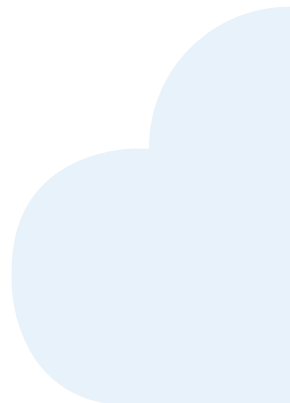
- Percentage of adults who were worried about running out of money to buy food in the last year.
- Percentage of adults who had a negative personal or family experience in the last 12 months related to expensive medical services, underemployment, unemployment or workplace stress.
- Percentage of adults who had difficulty finding a suitable property to purchase, or rent, within budget.
- Percentage of residents diagnosed with anxiety or depression.
- Rate of suicide and intentional injury.
- Percentage of adults who are 'not at all' prepared for extreme weather events.
- Percentage of adults who experienced high or very high psychological distress.
- Percentage of households who have someone outside household who can care for person or children in an emergency.
- Percentage of adults who sought help for mental health, who accessed services outside of Cardinia Shire.
- Percentage of year 4–6 students and year 7–9 students who have reported being bullied.
- Percentage of adults who feel 'mostly or completely' connected to the land they live on, or their local community.
- Percentage of adults experienced loneliness.
- Percentage adults who do voluntary work.

Council policy supporting improving mental wellbeing	Federal and Victorian government, and local agency policy supporting improving mental wellbeing
<ul style="list-style-type: none"> • Active Cardinia Strategy • Advocacy Agenda • Climate Change Adaptation Strategy 2022–32 • Community Food Strategy 2018–26 • Community Infrastructure Plan • Investment Attraction Plan • Municipal Emergency Management Plan • Open Space Strategy • Social and Affordable Housing Strategy 2017–25 • Social Justice and Equity Policy 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • My Community Library Strategic Plan 2025–29 • National Aboriginal & Torres Strait Islander Suicide Prevention Strategy • National Children's Mental Health and Wellbeing Strategy • National Urban Policy • Plan for Victoria • Victorian Community Health – Health Promotion Guidelines • Victorian Diverse Communities Mental Health & Wellbeing Framework • Victorian Healthy Kids, Healthy Futures • Victorian Mental Health & Wellbeing Workforce Strategy 2021–24 • Victorian Suicide Prevention & Response Strategy 2024–34 • Victorian Wellbeing Strategy • Women's Health in the Southeast Strategy 2023–28



Outcome 2: Improve social cohesion

Social cohesion is the glue that holds communities together. It is about people feeling a sense of personal worth, belonging, acceptance and inclusion in a community. It refers to the sense of justice, fairness and trust within neighbourhood social and political systems, and people's willingness to help their neighbour and participate in creating a cohesive community.¹² Cohesive communities are more resilient in the face of climate change and able to respond more rapidly during emergencies. Research has found a positive association between social cohesion and the mental¹³, physical¹⁴ and social wellbeing of the community.¹⁵



Objectives to improve social cohesion:

2.1	Increase community sense of belonging, inclusion and acceptance.	D P
2.2	Increase equitable opportunities for civic participation and diverse leadership through volunteering and programs.	D P

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

- Percentage of adults who feel ‘mostly or completely’ connected to their cultural heritage, Australian indigenous culture, and the Australian culture.
- Percentage of adults who participate in community festivals, cultural events, art exhibitions, community markets, leisure centres, libraries, sportsgrounds to play sport, or art/craft workshops.
- Percentage of adults who have experienced discrimination.
- Percentage of adults who feel that multiculturalism makes life better.
- Percentage of adults who participate in voluntary work.
- Percentage of adults who feel valued by society.
- Percentage of adults who have had low levels of life satisfaction.

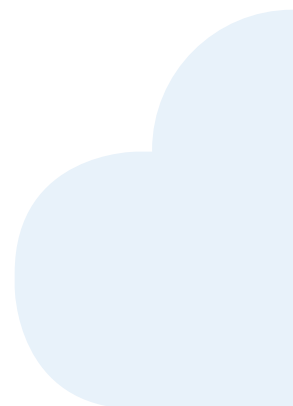
Council policy supporting improving social cohesion	Federal and Victorian government, and local agency policy supporting improving social cohesion
<ul style="list-style-type: none"> • Ageing Well Strategy • Art and Culture Strategy • Community Infrastructure Plan • Community Safety Framework • Cultural Diversity Action Plan • Disability Action Plan • Fair Access Policy • Gender Equity Action Plan • Neighbourhood House Policy • Reconciliation Action Plan 2025–27 • Social Justice and Equity Policy • Universal Design Policy 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • Inclusive Victoria: State Disability Plan 2022–2026 • National Disability Strategy 2021–31 • National Inclusion, Equity and Diversity Strategy 2024–2027 • National Strategy for Gender Equality 2024–34 • Victorian Multicultural and Multifaith Action Plan 2023–2027





Outcome 3: Improve safety

To feel safe is to be free from danger, risk, or threat of harm, injury, or loss to your person and/or property, whether caused deliberately or by accident. Everyone deserves to feel safe at home and in the community. For some, perceptions of safety relate to crime, for others it relates to dangerous driving, risk of injury, perceived threat, discrimination or work environment.

Neighbourhoods which are perceived as safe, foster community participation, encourage physical activity, community connectedness and add to the health and wellbeing of residents and visitors.¹⁶ Protecting people from danger and preventing harm where there are known hazards or risks to personal safety requires reducing community exposure and sensitivity to hazards, including the adverse impacts of climate change.



Objectives to improve safety:

3.1	Improve perceived and actual safety through implementing inclusive crime prevention strategies and improving the safety of public amenity and spaces.	
3.2	Increase education and skills to reduce personal risks to safety and climate hazards in Cardinia Shire.	

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

- Percentage of households that state crime or safety issues, vandalism, dangerous driving or anti-social behaviour had a negative impact on themselves or their family in the last 12 months
- Rate of criminal incidents
- Number of criminal offenders
- Percentage of adults who report poor quality footpaths, poor lighting, unsafe driver behaviour, trouble makers on route and/or no pedestrian crossing, as reasons that stop them from walking, riding or scooting for active travel
- Percentage (and rate) of adults and children (aged 0–14 years) who are admitted to hospital due to unintentional injury
- Percentage of adults who have done nothing to prepare for extreme weather events
- Rate of road injuries and fatalities

Council policy supporting improving safety	Federal and Victorian government, and local agency policy supporting improving safety
<ul style="list-style-type: none"> • Asset Management Strategy • CCTV Policy • Child Safety Policy • Climate Change Adaptation Strategy • Community Safety Framework • Crime Prevention Through Environmental Design Policy • Environmentally Sustainable Design Policy • Healthy by Design Policy • Municipal Emergency Management Plan • Municipal Heat Health Plan 2020–25 • Road Safety Strategy 2016–25 • Social Justice and Equity Policy 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • National Online Safety Act 2021 • South East Public Health Unit Population Health Catchment Plan 2023–28 • Victorian Crime Prevention Strategy 2021 • Victorian Neighbourhood Policing Framework 2022 • Victorian Police Strategy 2023–28 • Victorian Road Safety Strategy 2021–2030



Outcome 4: Improve healthy eating and active living

Poor nutrition and physical inactivity are some of the leading risk factors for disease and death in Australia, contributing 4.8% and 2.1% respectively to preventable disease burden in 2024.²¹ Physical inactivity and diets high in sugar, fat, and salt, and low in nutrients and fibre increase the risk of developing a range of chronic health conditions, such as cardiovascular disease, some cancers and type 2 diabetes, as well as obesity. Obesity is now the leading contributor to preventable disease and death in Australia, responsible for 8.3% of all burden in 2024.²¹

The consumption of local, sustainably produced, fresh produce and participation in active transport helps to reduce carbon emissions, and people who are physically healthy are more resilient to the impacts of climate change.

Social inequities in liveability conditions such as poor access to education and poorer employment conditions are key predictors of income, and therefore food insecurity and poor dietary quality. These inequities also contribute to physical inactivity, with barriers of education, affordability, transport, and access to suitable opportunities for physical activity.²²⁻²⁴



Objectives to improve healthy eating and physical activity:

4.1	Increase consumption of nutritious and sustainably produced food	A P
4.2	Increase participation in walking and cycling, and active and passive recreation among underrepresented groups	D A P

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

- Percentage of adults who grow their own fruit or vegetables and buy or eat locally produced fruit or vegetables.
- Percentage of adults who eat the recommended serves of vegetables and fruit each day.
- Percentage of adults who ran out of food and could not afford to buy more in the last 12 months.
- Percentage of adults who eat fast food three or more times a week.
- Percentage of adults who drink sugar-sweetened beverages daily or several times per week.
- Percentage of adults who travel to work by car, public transport, walk or cycle.
- Percentage of adults who meet the physical activity guidelines each day.
- Percentage of adults who sit for 8 hours or more each weekday.
- Percentage of adults who use of footpaths daily, or shared bike paths daily
- Percentage of adults who visiting native bushland, local parks/open spaces, children’s playgrounds, off-lead dog parks, go to a sportsground to watch other people play sport, or go to a sports ground to play a team sport.
- Percentage of adults who, when visiting parks and reserves, run/jog/walk for exercise, play casual sport, use public sports equipment, or public exercise equipment, use playground equipment or exercise the dog.

Council policy supporting improving healthy eating and active living	Federal and Victorian government, and local agency policy supporting improving healthy eating and active living
<ul style="list-style-type: none"> • Active Cardinia Strategy • Advocacy Agenda • Community Food Strategy 2018–26 • Community Infrastructure Plan • Economic Development Strategy 2023–27 • Fair Access Policy • Healthy by Design Guidelines • Investment Attraction Plan • Open Space Strategy • Pedestrian and Bicycle Strategy 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • Inclusive Victoria: State Disability Plan 2022–2026 • Melbourne Metropolitan Open Space Strategy • National Obesity Strategy 2022–2032 • National Preventative Health Strategy 2021–2030 • Plan for Victoria 2050 • South East Public Health Unit Population Health Catchment Plan 2023–28 • VicHealth Strategy 2023–33 • Victorian Community Health, Health Promotion Guidelines • Victorian Healthy Kids, Healthy Futures • Victorian Healthy Parks, Healthy People



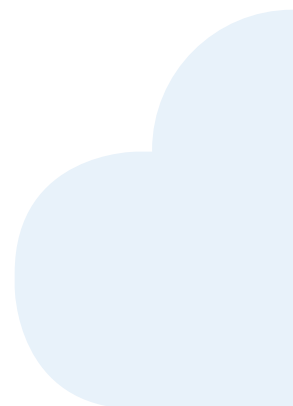
Outcome 5: Reduce family violence

Family violence is any violent, threatening, coercive or controlling behaviour that occurs in current or past family, domestic or intimate relationships. This includes not only physical violence, but direct or indirect threats, sexual assault, reproductive coercion, emotional and psychological torment, economic control, damage to property, social isolation and any behaviour which causes a person to live in fear.²⁵ The majority of family violence is perpetrated by men, against women and children. However, systemic inequities can increase the severity and rates of family violence, particularly for First Nations people, people identifying as LGBTQIA+, people with disabilities, and people from migrant and refugee backgrounds.²⁶ Witnessing family violence as a child can have harmful impacts on a child's development, mental and physical wellbeing, educational attainment, social participation and future risk of victimisation or violent offending.³⁰⁻³¹ Abuse and neglect during childhood has severe and persistent effects on physical and mental health and is the leading avoidable risk factor for avoidable death, disability and illness in Victorian women aged 15 to 44.³² Incidents of family violence increase during times of emergency, including through the recovery phase.

Family violence is a prevalent and preventable public health issue that is driven by²⁷:

- The condoning of violence against women, including the shifting blame onto the victim.
- Men's control of decision-making and limits to women's independence in private and public life and relationships.
- Rigid gender roles and stereotyped constructions of masculinity and femininity.
- Male peer relationships or 'male bonding' that emphasises aggression, dominance and control.

Liveability conditions which support the prevention of family violence include safe and secure housing, access to education, employment and social support, safe public spaces, and active travel.²⁸



Objectives to reduce family violence:

5.1	Improve community and organisational awareness and attitudes to gender equity and family violence.	D A P
5.2	Increase the capacity of individuals, organisations, and communities to prevent discrimination and harm from gender-based violence, especially for those facing multiple forms of disadvantage.	D A P
5.3	Increase local access to and awareness of social support and services for individuals at risk of experiencing or perpetrating family violence.	A P

Ways to measure change (gender disaggregated data):

Our partners and community may choose to assess their impact using the following measures

- Percentage of adults that agree family violence is a serious problem
- Percentage of adults that agree family violence is extremely common or very common
- Percentage of family violence incidents where a child under the age of 17 is the victim
- Percentage of adults who experience discrimination based on their gender
- Rate of incidents of family violence recorded by police
- Number of family violence intervention orders breached
- Proportion of adults who access family violence services, who did so outside of the Shire
- Percentage of adults aged between 20–24, who left school before completing year 12
- Percentage of adults aged between 20–24, who were not employed or enrolled in education
- Percentage of business owners/manager who are female
- Numbers of hours spend on unpaid domestic work in the last week
- Full time average weekly salary

Council policy supporting reducing family violence	Federal and Victorian government, and local agency policy supporting reducing family violence
<ul style="list-style-type: none"> • Social Justice and Equity Policy • Gender Equity Action Plan • Family Violence Leadership and Community Statement • Fair Access Policy • Universal Design Policy • Investment Attraction Plan • Social and Affordable Housing Strategy 2017–25 • Reconciliation Action Plan 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • Ending Family Violence – Victoria’s Plan for Change 2020–2030 • National Plan to End Violence against Women and Children 2022–2032 • Victorian Dhelk Dja: Safe Our Way – Strong Culture, Strong Peoples, Strong Families 2018–2028 • Victorian Police Strategy for Family Violence, Sexual Offences and Child Abuse 2018–2023 • Women’s Health in the South East Strategic Plan 2023–28



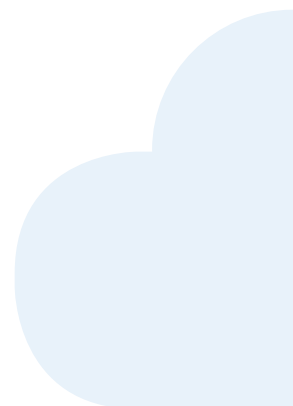
Outcome 6: Improve financial wellbeing and resilience

Financial security is the ability to meet basic living costs for housing, food, transport, health, and education, with some money left over, and feelings of control of personal finances and financial security, now and in the future.³⁵ Households experiencing financial stress are not able to meet basic costs which can affect community participation and have significant impacts on health and wellbeing.

An individual's financial resources can be influenced by a range of circumstances including employment, education, and community supports. Transitional life events, such as moving out, relationship abuse, breakdowns or divorce, downsizing housing, commencing work, or retiring, having dependants, or changes to household structure, can all impact income and expenses.

Food insecurity and homelessness are growing issues in Cardinia Shire and are signs of financial distress. Food insecurity, or experiences of running out of food not being able to afford more, can begin with food stress and behaviours to reduce the quality, quantity or frequency of meals. Homelessness can include insecure forms of housing such as living in temporary lodgings, boarding houses, 'severely' crowded dwellings, caravan parks, or staying with others, or in supported accommodation, as well as tents or sleeping rough.³⁶ Gender inequality is a significant driver of homelessness among women, with family violence driving many women to seek specialist homelessness services, and income inequality and the cost of childcare also impacting women's financial resources.³⁷ Improving financial wellbeing and resilience requires reducing financial sensitivity and increasing the ability to cope with financial stresses and shocks. From a climate change adaptation perspective, financial wellbeing and resilience begins by improving the financial security at a household level.

Financial wellbeing and security are supported by access to education, training, and jobs close to home and through the provision of affordable housing, food, and services. Financial wellbeing can also be enhanced by reducing reliance on cars through provision of public transport and connected walking and cycling paths.



Objectives for improving financial wellbeing and resilience:

6.1	Increase access to local services and affordable programs and activities which mitigate cost of living pressures.	D A P
6.2	Increase access to financial wellbeing and capability services to increase personal resilience.	A P
6.3	Increase education and employment pathways	A P

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

- Percentage of adults who had difficulty finding a suitable property to purchase within their budget
- Percentage of household expenditure on transport costs, food, health, education, housing, and utilities
- Percentage of households in housing stress
- Percentage of adults who were unable to access a GP when needed in the past year due to cost or transport issues
- Percentage of adults who accessed financial and/or food support services in the past year
- Percentage of adults who couldn't afford to pay bills
- Percentage of households that are classified as low income
- Percentage of adults who have a bachelor or higher degree
- Percentage of adults who report negative personal or family experiences of underemployment or unemployment

Council policy supporting improving financial wellbeing and resilience	Federal and Victorian government, and local agency policy supporting improving financial wellbeing and resilience
<ul style="list-style-type: none"> • Advocacy Agenda • Arts and Culture Strategy • Community Food Strategy 2018–26 • Community Infrastructure Plan • Community Wellbeing Support Grants • Economic Development Strategy 2023–27 • Environmentally Sustainable Design Policy • Investment Attraction Plan • Neighbourhood House Policy • Open Space Strategy • Rates and Charges Financial Hardship Policy • Social and Affordable Housing Strategy and Action Plan 2018–2025 	<ul style="list-style-type: none"> • Cardinia Leisure Strategic Plan 2025–29 • My Community Library Strategic Plan 2025–29 • National Agreement on Social Housing and Homelessness • National Financial Wellbeing and Capability Activity • Plan for Victoria 2050



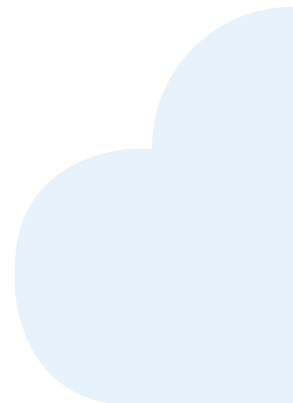
Outcome 7: Reduce harm from tobacco, vaping, alcohol, drugs, and gambling

Addiction to tobacco, vaping, alcohol, drugs, and gambling can have a harmful impact on individuals, their families, and the broader community. The harms associated with harmful use of alcohol, other drugs and tobacco are summarised in Table 1. Gambling harms can include relationship and financial issues, job security, and physical and mental health issues. Use of electronic cigarettes, or 'vapes', where users inhale aerosol containing flavourings, a range of toxic chemicals, and in some cases nicotine, has increased significantly in recent years particularly among young people. Nicotine use among this population can increase reward seeking behaviour, use of other drugs and alcohol, and increase the likelihood of tobacco-smoking by 300%.³⁸

Table 1. Harms associated with harmful use of alcohol, other drugs and tobacco (Adapted from National Drug Strategy 2017–2026)³⁹

Economic harms	Social harms	Health harms
<ul style="list-style-type: none">• Costs associated with management (law enforcement, health care and social services)• Reduced workplace productivity and absenteeism• Damages to public infrastructure• Impacts on children and young people in the household, impacting generational outcomes	<ul style="list-style-type: none">• Antisocial behaviour and violence• Poor childhood development (social, cognitive, behavioural)• Intergenerational trauma• Contribution to family violence• Family wellbeing	<ul style="list-style-type: none">• Injury• Road trauma• Mental health problems• Preventable acute and chronic conditions (cancers, cardiovascular disease and liver disease)

Reducing harm from tobacco, vaping, alcohol, drugs, and gambling is supported by access to education, training, and jobs close to home and through the provision of affordable housing, food, and services.



Objectives to reduce harm from tobacco, vaping, alcohol, drugs, and gambling:

7.1	Decrease exposure to and uptake of smoking, vaping, gambling and harmful alcohol and drug use.	D A P R
7.2	Decrease short and long-term harm from tobacco, vaping, gambling, alcohol and drug use, on individuals and communities.	D A P R
7.3	Reduce stigma and remove barriers that prevent people from seeking help for harmful tobacco use, vaping, gambling, alcohol, and drug-related issues.	A P

Ways to measure change

Our partners and community may choose to assess their impact using the following measures

- Proportion of prep-grade children who had experienced stress related to a gambling problem and/or an alcohol or drug problem in the family
- Proportion of mothers who smoked during pregnancy
- Proportion of adults who are at increased risk of harm from alcohol related disease or injury
- Rate of hospital admissions related to illicit drug use or alcohol
- Proportion of adults who smoke or vape
- Rate of losses from EGMs per 100,000 population

Council policy supporting reducing harm from tobacco, vaping, alcohol, drugs, and gambling	Federal and Victorian government, and local agency policy supporting reducing harm from tobacco, vaping, alcohol, drugs, and gambling
<ul style="list-style-type: none"> • Community Signage Policy • Facility Standards Policy • Gambling Harm Prevention and Minimisation Policy 	<ul style="list-style-type: none"> • Strategic Plan 2025–29 • National Alcohol Strategy 2019–2028 • National Drug Strategy 2017–2026 • National Tobacco Strategy 2023–30 • South East Public Health Unit Population Health Catchment Plan 2023–28 • VicHealth Strategy 2023–33 • Victorian Cancer Plan 2024–2028 • Victorian Community Health, Health Promotion Guidelines • Victorian Police Drug Strategy 2020–2025



Liveability Domain: Active Travel & Transport

Neighbourhoods which promote walking and cycling for transport are safe, enjoyable, accessible, and have links to places of daily living such as schools, supermarkets, and public transport. Walkable neighbourhoods promote social connection, reduce financial hardship and can enhance the health of people and the environment.

Living close to public transport encourages passive physical activity, reduces individual emissions from motorised transport and reduces inequities through enhancing access to services, employment, education and activities for those without access to personal transport or with restricted mobility. Living within walking distance to public transport (approximately 400 meters) increases the likelihood of communities using public transport, as well as the general cost, frequency, comfort and suitability of the service for travel requirements and destinations.



What the community has told us is important

Advocating for better access to public transport networks to reduce reliance on cars, costs of vehicle ownership, congestion on roads and streets, and to support those without access to personal vehicles to travel

Raising awareness about the opportunities to access, and benefits of creating accessible walkable routes to reduce reliance on cars and exposure to pollution (air and noise)

Ensuring the safety, sustainable-design, and health-amenity of active travel and transport infrastructure will maximise use. This includes maintenance, lighting, water access, tree canopy, school crossings, accessible footpaths and crossings, and seating

There are trends in uptake of alternative modes of transport (e.g. e-scooters and walking/cycling part-way to school or work) which may reduce the reliance on cars and car parks in certain areas

Better understanding of the projected climate-risks for suburbs, to plan for where and what active travel and transport infrastructure will be required for future users

What the data says

- 94% of households own at least one motor vehicle⁹
- Of those who travel to work, 94% travel via a motor vehicle, while 4% use public transport and 2% cycle or walk. ☀⁹ However, 19% of residents work from home.⁹
- Households have an average of 1 daily living destination (supermarkets, public transport stops or convenience stores) within 1600 meters⁴¹
- 9% of households are located within 400 meters of public transport with a regular 30-minute weekday service (7am–7pm); this has decreased from 19% in 2018⁴¹
- In 2022/23, there were 271,000 tonnes of carbon dioxide equivalent emissions from transport, this is 19% higher than the annual emissions from transport in 2020/21, but similar to the annual emissions from transport in 2018/19 ⁴⁴☀

☀ *Climate and health-related measure (inclusive of exposure, sensitivity, adaptive capacity and resilience measures)*

Strategic objective

Increase access to and connectivity of public transport, cycling routes and footpaths.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of residents who own at least one motor vehicle
- % of residents who report travelling to work by motor vehicle
- % of residents who report travelling to work by public transport
- % of residents who report travelling to work by bicycle or walking
- Average number of daily living destination (supermarkets, public transport stops or convenience stores) within 1600 meters
- % of households located within 400 meters of public transport with a regular 30-minute weekday service (7am–7pm)
- Annual municipal greenhouse emissions from transport

Supporting Council documents

- Asset Management Strategy
- Cardinia Planning Scheme
- Cardinia Leisure Strategic Plan 2025–29
- Community Safety Framework 2024
- Disability Strategy and Action Plan 2021–26
- Open Space Strategy 2023–2033
- Pedestrian and Bicycle Strategy
- Road Safety Strategy 2016–2025

Supporting State and Federal frameworks and policies

- Plan for Victoria 2050
- Victorian Cycling Strategy 2019–2028
- Victorian Road Safety Strategy 2021–2030
- Victoria's Climate Change Strategy 2021



Liveability Domain: Education

Access to a variety of education and training opportunities close to home, makes it possible for each individual to access the benefits of learning. Modern and diverse learning environments support quality education, cater to lifelong learning, enhance employment opportunities and social connection, and lead to better health and environmental outcomes.



What the community has told us is important

Cardinia Shire has a growing proportion of families and older residents who require diverse education opportunities across the lifespan, including informal skills programs through to attracting formal tertiary education locally.

Building the capability of organisations to provide traineeships and workplace learning opportunities is an opportunity for the region.

Community education and awareness is needed around climate change adaptation and mitigation actions including energy choices.

We have an increasingly diverse population, with the need for cultural literacy across the Shire through representation, education, events and inclusive communication.

Advocacy is needed to ensure adequate funding, infrastructure and workforce is available for the delivery of education programs across the life span, including kindergarten.

Ensuring communication channels reach all community members regarding health and safety matters such as climate events and preparedness, community services, programs and procedures.

What the data says

- 52% of residents have completed year 12 equivalent, this is increasing⁹
- 31% of residents have completed a university qualification, compared to the Victorian average of 46%⁹
- 57% of residents have completed a diploma or certificate, compared to the Victorian average of 42%⁹
- 13% of children are developmentally vulnerable on two or more domains⁵⁰
- 8% of the population aged 15–24 years are disengaged from education/employment⁹

Strategic objective

Increase access to and participation in, local education across the lifespan.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of residents who have completed year 12 equivalent
- % of residents who have completed a university qualification
- % of residents who have completed a diploma or certificate qualification
- % of children who are developmentally vulnerable on two or more domains
- % of the population aged 15–24 years disengaged from education/employment

Supporting Council documents

- Asset Management Strategy
- Cardinia Planning Scheme
- Cardinia Leisure Strategic Plan 2025–29
- Community Food Strategy 2018–2026
- Community Infrastructure Plan 2024
- Investment Attraction Plan
- Neighbourhood House Policy
- Social Justice and Equity Policy
 - Disability Strategy and Action Plan 2021–26
 - Reconciliation Action Plan 2025–27
- Strategic Workforce Plan
- Sustainable Environment Policy 2018–28

Supporting State and Federal frameworks and policies

- Greater South East Melbourne (GSEM) Jobs and Skills Roadmap
- National Closing the Gap
- National Inclusion, Equity and Diversity Strategy 2024–27
- National Youth Policy Framework
- Plan for Victoria 2050
- Victorian Aboriginal Affairs Framework
- Victorian Early Years Learning and Development Framework
- Victorian Multicultural and Multifaith Action Plan 2023–27



Liveability Domain: Employment

Access to local jobs, supports a resilient, innovative, and thriving local economy. Short commute times not only reduced environmental carbon emissions associated with motorised travel, but is also associated with improved work-life balance and health family and social relationships and self-care activities like physical activity and reduced reliance on convenience foods. Healthy workplaces that are inclusive and promote the health, wellbeing, and safety of workers also benefits the local economy through improved productivity and reduced absenteeism.



Photo credit: West Gippsland Progress Association

What the community has told us is important

Increasing business readiness to host student placements, promote diverse employment pathways and address barriers to employment, including for migrants and refugees.

Facilitating investment attraction in critical industries and priority locations and activation of smaller precincts and towns through pop-ups, events and visitor economies to foster vibrant, thriving communities.

Promotion and expansion of volunteering and pre-and-post career opportunities.

Enhancing local businesses' innovation, resilience, knowledge sharing and collaboration.

Consider how the public and private business sectors can integrate energy and water resilience, and circular economy practices, including the food sector.

Advocating for the protection of agricultural land, and diversification of produce, including multicultural foods.

Addressing the heat island effect in industrial and commercial precincts.

Boosting use of established assets across the Shire such as multi-use facilities for training, events, and co-location of services and growing industries.

Advocating for the development of essential transport links, sealed roads and new bus routes, to support the growth of industrial and commercial precincts.

Supporting the growth and productivity of local arts, culture, and creative industries.

Increasing adoption of local, sustainable and social procurement practices, including of Aboriginal and Torres Strait Islander businesses

What the data says

- The top 5 industries by employment are construction, education and training, retail, healthcare and social assistance, and manufacturing⁴⁶
- There were 11,937 local businesses in 2024, a 6% increase from 2023⁴⁶
- The jobs-to-residents ratio in 2022/23 was 0.58, meaning there were less jobs than resident workers; a slight improvement from 2017/18⁴⁶
- 4.8% people aged 15–64 years are accessing JobSeeker or Youth Allowance payments⁴⁷
- 49% of residents aged 15+ are fully engaged in education or the workforce⁹
- 36% of residents work locally in Cardinia Shire⁹☀
- 12% of residents participate in volunteering, a decrease from 18% in 2016⁹☀
- Estimated annual greenhouse emissions from commercial and industrial properties from electricity has decreased by 24% and gas has decreased by 15% between 2018/29 and 2022/23⁴⁴☀

Strategic objective

Increase access to and participation in local employment and volunteering.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- Top 5 industries by employment
- Number of local businesses
- Jobs-to-residents ratio
- % people aged 15–64 years accessing JobSeeker or Youth Allowance payments
- % of residents aged 15+ fully engaged in education or the workforce
- % of residents who work locally in Cardinia Shire
- % of residents participating in volunteering
- Estimated annual greenhouse emissions from commercial and industrial properties

Supporting Council documents

- Arts and Culture Strategy
- Cardinia Planning Scheme
- Community Food Strategy 2018–2026
- Economic Development Strategy 2023–27
 - Investment Attraction Plan
- Lease & License Policy 2022
- Neighbourhood House Policy
- Strategic Workforce Plan
- Social Justice and Equity Policy
 - Disability Strategy and Action Plan 2021–26
 - Reconciliation Action Plan 2025–27

Supporting State and Federal frameworks and policies

- GSEM Jobs and Skills Roadmap
- National Closing the Gap
- National Strategy for Gender Equality
- National Urban Policy
- Plan for Victoria 2050
- Victoria's Antiracism Strategy 2024–29
- Victorian Multicultural and Multifaith Action Plan 2023–27
- Victorian Southeast Growth Corridor Plan
- Victorian Visitor Economy Community Engagement Framework



Liveability Domain: Food

Access to healthy, sustainable, and culturally appropriate local food, promotes the health of people, strengthens the local economy, and enhances the natural environment. People are likely to travel up to one kilometre to access food stores via active travel, which further promotes health and health-equity for those who may not have personal transport. In contrast, a diet consisting of highly processed, low-nutrient food items often contribute to poorer health outcomes in communities, such as type 2 diabetes, coronary heart disease and some cancers, while also negatively impacting the environment through higher emissions associated with processing, packaging and distribution.

What the community has told us is important

Identifying opportunities to enhance the financial and environmental sustainability and resilience of the food sector through tourism, uptake of sustainable technology and practices, local markets and networks, and advocacy and investment attraction to build shorter distribution chains.

Addressing workforce shortages through opportunities to support new entrants, including migrants, multicultural communities, and young people into agriculture.

Advocate for the protection of viable farmland.

Leveraging opportunities for schools, young people, and communities to engage in shared interests and practical learning in kitchens, gardens, and farms, to foster food literacy and promote agricultural careers.

Promoting local opportunities for donating or selling surplus food.

Exploring opportunities for edible gardens as part of housing developments and estates.

What the data says

- 6% of residents experience food insecurity⁶
- 12% of households have cut the size or skipped, meals because there wasn't enough money for food⁶ ☀
- There are 7.5 workers in agriculture, forestry and fishing, for every 10 jobs available, and this gap is worsening⁴⁶
- 42% of households are located within 1 kilometre of a supermarket⁴¹ ☀
- 5% of households do not have a food outlet within 3.2km⁴¹ ☀
- 56% of residents buy / eat locally produced fruit or vegetables⁶ ☀
- Annual municipal greenhouse emissions from agricultural activity have increased by 12% between 2018/19 and 2022/23⁴⁴
- The value of agriculture related outputs in 2023/24 was \$605 million⁴⁶

Strategic objective

Increase access to affordable, sustainable and nutritious food.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of residents who experienced food insecurity
- % of households which cut the size of, or skip, meals because there wasn't enough money for food
- Jobs to workers ratio in agriculture, forestry and fishing
- % of households that are within 1 kilometre of a supermarket
- % of households that do not have a food outlet within 3.2km
- % of residents who buy / eat locally produced fruit or vegetables
- Annual municipal greenhouse emissions from agricultural activity
- Value of agriculture related outputs

Supporting Council documents

- Cardinia Planning Scheme
- Community Food Strategy 2018–2026
- Community Infrastructure Plan
- Compliance and Enforcement Policy 2019–2022
- Economic Development Strategy 2023–27
 - Investment Attraction Plan
- Neighbourhood House Policy
- Social and Affordable Housing Strategy 2018–25
- Sustainable Environment Policy 2018–28

Supporting State and Federal frameworks and policies

- Adult, Community and Further Education Board Strategy 2020–25
- Cardinia Planning Scheme
- GSEM Jobs and Skills Roadmap
- National Urban Policy
- Plan for Victoria 2050
- Planning for Melbourne's Green Wedges and Agricultural Land Action Plan 2024
- Victorian Recycling Infrastructure Plan



Liveability Domain: Community infrastructure and services

Local services and community groups ensure residents can access appropriate and affordable services and facilities which promote and protect health and social, economic and physical wellbeing throughout life. Accessible and well-planned public infrastructure including play spaces, buildings and facilities like pools and playgrounds, enable communities to socialise, learn skills and increases life satisfaction, while supporting financial wellbeing and increasing safety and inclusion.



What the community has told us is important

Monitoring access to and identifying gaps in affordable, accessible health, cultural, and social services, programs, and infrastructure to proactively advocate for and attract funding for their delivery.

Facilitating community participation in decisions around infrastructure, service and place-making.

Ensuring new buildings and upgraded/maintenance of facilities are sustainable, safe, accessible and inclusive, and adopt principles of local procurement, cultural safety and inclusion.

Enhancing usage of facilities across the region through place-based planning, non-traditional partnerships, mixed and joint-use arrangements, and activation strategies such as volunteering, events, projects.

What the data says

- There are 31 general practice (GP) clinics in the Shire, of which 53% are bulk-billed⁴¹
- The average distance to a GP clinic with bulkbilling is 1.9 kilometres⁴¹
- Majority of residents access doctor (65%), dental (58%), allied health (54%), and/or food support (52%) within the Shire, however many go outside of the Shire mental health (64%), housing (72%) and alcohol and drug rehabilitation (70%) services⁶
- There are 18 Council-owned and managed buildings which act as 'cool refuge centres' (e.g. leisure centres, libraries, community centres) and are open to the public ☀
- Cardinia Shire scored 3.5 out of 16 on the Social Infrastructure Index,⁴¹ which includes community and individual support services such as health, education, early childhood, community support, community development, culture, sport and recreation, parks and emergency services.
- 67% of residents participate in community markets, 41% participate in children's playgrounds, 37% participate in libraries, and 29% participate in leisure centres⁶

Strategic objective

Increase equitable access to community infrastructure and services within the Shire.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of general practice clinics which are bulk-billed
- average distance to a GP clinic with bulkbilling
- % of residents who can access a doctor, dental, allied health, food support, mental health service, housing service, and alcohol and drug rehabilitation service within the Shire.
- Number of council-owned and managed buildings which act as 'cool refuge centres'
- Social Infrastructure Index
- % of residents who participate in community markets, children's playgrounds, libraries and leisure centres

Supporting Council documents

- Active Cardinia Strategy 2023–33
- Asset Management Strategy
- Cardinia Planning Scheme
- Climate Change Adaptation Strategy 2023–2033
- Community Garden Policy
- Community Safety Framework 2024
- Cultural Diversity Action Plan
- Disability Strategy and Action Plan 2021–26
- Emergency Management Policy
- Neighbourhood House Policy (Under review)
- Reconciliation Action Plan 2025–27

Supporting State and Federal frameworks and policies

- National Construction Code
- National Urban Policy
- Plan for Victoria 2050
- Victoria's Antiracism Strategy 2024–29
- Victorian Crime Prevention Strategy
- Victorian Preparedness Framework



Liveability Domain: Housing

Safe, secure and appropriate housing for individual needs is a critical determinant of physical and mental wellbeing. Communities with diverse, high quality and sustainable housing, with affordable options for all, near employment, education, goods and services and open space, and connected by active travel infrastructure, are critical ingredients for a growing and diverse community.



What the community has told us is important

Facilitating housing investment through public-private partnerships with developers and community housing providers, and leveraging grants for the delivery and management of social and affordable housing in growth- and high need areas.

Explore opportunities to mitigate environmental impacts of existing and new housing development, including environmentally sustainable design, climate-sensitive retrofits, waste management services, resource recovery programs, and planning for extreme weather risks and mitigation.

The opportunity and need for housing, particularly social housing, to be near services, public transport and community infrastructure and amenity (i.e. open spaces).

Enhancing community perceptions and attitudes towards social housing.

What the data says

- 16% of households are experiencing housing stress, compared to 13% of Victorian households⁹ ☀
- 0.8% of dwellings are government owned or community housing⁹ ☀
- 4.8% of housing sales are affordable for a person on low or very low income⁴⁸
- There are 5.7 homeless people per 1,000 population, with 1 in every 16,000 to 17,000 sleeping rough or outside of shelter⁹
- 66% of residents strongly support/support housing that is 'specifically built and/or allocated to assist members of the community who have very low incomes, disabilities, or are impacted by family violence, or who are unable to find housing themselves'⁶
- Estimated annual municipal greenhouse emissions from residential properties from electricity has decreased by 24% and gas has decreased by 15% between 2018/29 and 2022/23☀⁴⁴

Strategic objective

Increase access to appropriate and affordable housing.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of households experiencing housing stress
- % of dwellings that are government owned or community housing
- % of housing sales which are affordable for a person on low or very low income
- Rate of people experiencing homelessness per 1,000 population
- % of residents that strongly support/support housing
- Annual municipal greenhouse emissions from residential properties

Supporting Council documents

- Cardinia Planning Scheme
- Reconciliation Action Plan 2025–27
- Social and Affordable Housing Strategy 2018–25

Supporting State and Federal frameworks and policies

- National Housing Accord
- National Strategy for First Nations Housing
- National Urban Policy
- Plan for Victoria 2050
- Southeast Growth Corridor Plan
- Victoria's Anti-racism Strategy 2024–29



Liveability Domain: Environment and open space

Public open spaces which are strategically planned, developed, and maintained to create a sense of place, encourage participation, protect the natural environment, promote health and wellbeing. These include parks and recreational and nature reserves.

Amenities, or the things within these open spaces, are also important, with shelters and toilets supporting social gatherings, while multiple spaces such as playgrounds and sports and open fields fostering use by a broad range of community members. Larger open spaces, defined as being greater than 1.5 hectares, are often more like to accommodate multiple uses. Increasing frequent and diverse use of open spaces increases safety through public surveillance, which is all influenced by proximity to housing.



Photo credit: West Gippsland Progress Association

What the community has told us is important

Monitoring and enhancing activation of underutilised open spaces, in ways that balance the needs of different users and promote social connection.

Protecting natural and open spaces, and manage pest species, waste, and climate change impacts such as hotter and drier climates.

Record keeping of natural assets including trees.

Advocating for the development of land management plans and open space master plans.

Ensuring sustainable amenity within open spaces to maximise useability and safety for all (i.e. solar lighting, bike racks, water access, tree canopy and seating and water management that incorporates sustainability).

Investigate opportunities for partnerships to provide passive open, green and play spaces within residential areas and streetscapes.

Investigating opportunities to attract waste management services to the Shire to enhance the health and cleanliness of open spaces.

Building local knowledge of the environment and climate change through participation in environmental groups and volunteering, and education strategies to mitigate commercial and household pollution.

Active engagement of communities in decisions and delivery of open space projects and maintenance.

What the data says

- 63% of residents visit open spaces, this is decreasing⁶
- 51% of residents visit native bushland, this is increasing⁶
- 82% of households are within 400 meters of public open space, this has increased from 78% in 2018⁴¹ ☀
- 47% of households are within 800 meters of a neighbourhood park (>1 to <5 ha), this has increased from 33% in 2018⁴¹
- 39% of residents feel completely or mostly connected 'to the land they live on'⁶ ☀
- 52% of residents plant native plants in the garden / have enhanced garden habitat for plants⁶ ☀

Strategic objectives

Increase sustainability and protection of the environment and open space.

Increase access to and quality of public open space.

Indicators

Our partners and community may choose to assess their impact using the following indicators

- % of adult residents who visit open spaces
- % of adult residents who visit native bushland
- % of households that are within 400 meters of public open space
- % of households that are within 800 meters of a neighbourhood park (>1 to <5 ha)
- % of residents who feel completely or mostly connected 'to the land they live on'
- % of residents who plant native plants in the garden / have enhanced garden habitat for plants

Supporting Council documents

- Biodiversity Strategy
- Cardinia Planning Scheme
- Community Garden Policy
- Community Safety Framework 2024
- Domestic Animal Management Plan 2021–25 (Under review)
- Disability Strategy and Action Plan 2021–26
- Fencing Policy (Under review)
- Municipal Emergency Management Plan – Cardinia
- Open Space Strategy 2023–2033
- Reconciliation Action Plan 2025–27
- Sustainable Environment Policy 2018–2028

Supporting State and Federal frameworks and policies

- Biodiversity 2037
- Eastern Region Pest Management Strategy 2020–2030
- Open Space for Everyone
- Plan for Victoria 2050
- Planning for Melbourne's Green Wedges and Agricultural Land Action Plan 2024
- Victorian Air Quality Strategy

Implementation and Evaluation

Many issues affecting our community's health and wellbeing can only be addressed through a coordinated response across sectors and a commitment over the long term to address the environments and systems which ultimately shape our community's health. Council plays a key role in providing the infrastructure to foster cross-sector communication, alignment and collaboration at the local level, towards public health agendas over time. This role is described under the six functions of 'how we work together' in the Liveability Plan's Framework including:

- **Guiding a shared vision and strategy** | Council and leaders across organisations will share data and insights to help prioritise opportunities for impact through annual planning cycles and build the capacity of the partnership to embed the Prevention Principles and equity in our work.
- **Support aligned activities** | The partnership will create opportunities for collaboration and strategic planning across organisations, expanding our partnerships, and fostering alignment and identification of shared opportunities, resources and areas for learning.
- **Shared learning** | We will share data, stories and evidence to inform impact across organisations, ensuring we continuously learn from our experiences, and centre the voice of community in decision-making.
- **Increasing awareness** | We will build understanding and empower communities to act.
- **Advocacy** | We will advocate internally and externally for policy change, resource flows and action which supports our shared vision.
- **Mobilising funding** | We will attract investment and distribute resources in ways that empower communities to enact change and address social inequities.

Council and the Liveability Partnership also recognise the critical role of volunteering in our community to improve liveability, health and wellbeing. Council encourages and enables community groups to align to the objectives of the plan through the Council and partner grants programs, local partnerships and other relevant policy levers.

Local ownership and capacity are key to ensuring the ongoing sustainability and resilience of our community. Organisations, businesses, community groups and individuals who would like to support this plan are encouraged to visit Council's website for more information on how to get involved.



Implementing and monitoring of *Cardinia Shire's Liveability Plan 2017–29* will take a whole-of-Council and whole-of-community approach.

The *Data Profile* provides population health, demographic and liveability data related to Cardinia Shire. The *Background Paper* provides the context, consultation and data analysis and rationale, which has informed the goals and objectives within the Plan. The *Monitoring and Evaluation Plan* identifies the measures we will use to track progress, benchmarked against the Victorian Public Health and Wellbeing Outcomes Framework, with localised measures to fill identified gaps through Council's biennial Household Liveability Survey, Australian Urban Observatory Liveability Index, and shared data from the Liveability Partnership.

An Action Agenda will be reviewed each financial year over the 4-year plan, establishing a set of incremental actions which detail how Council, partner organisations and the community will work together to achieve the Plans' objectives, and measure impact. Actions will be developed through consideration of:

- **Council's priorities identified within the Council Plan**
- **Community engagement, participation and surveys:** Providing updated health and wellbeing data to evidence emerging needs and priorities.
- **Strategic partnerships:** Identifying local organisations, groups and businesses with aligned strategies, activities, advocacy, mobilised workforce or funding for the delivery of actions within the Plan.

The *Liveability Plan 2017–29* will be evaluated in 2029 in consultation with partners and the community. This evaluation will summarise the achievements and progress towards the Plans' 12-year vision, and trends emerging around each of our outcome areas.

References

1. Informed Decisions. Population and household forecasts, 2024 to 2046 [Internet]. Informed Decisions; 2024 [cited 2025 Apr].
2. Australian Institute of Health and Welfare. Social determinants of health [Internet]. Canberra: AIHW; 2024 [cited 2025 Apr].
3. United Nations. Sustainable Development Goals 2030 [Internet]. [Cited 2025 Apr]. Available from: <https://sdgs.un.org/goals>
4. Australian Department of Health and Aged Care. Australia's National Preventive Health Strategy 2021–2030 [Internet]. Canberra: Department of Health and Aged Care; 2021 [cited 2025 Apr].
5. Badland H, Roberts R, Butterworth I, Giles-Corti B. How liveable is Melbourne? Conceptualising and testing urban liveability indicators: Progress to date. Melbourne: The University of Melbourne; 2015.
6. Cardinia Shire Council. Household Liveability Survey 2019, 2021 and 2023. Cardinia Shire Council; 2023.
7. Victorian Department of Health. Victorian Population Health Survey 2023. Melbourne: Department of Health; 2023.
8. Victorian Department of Education and Training. Attitudes to school survey 2021. Melbourne: DET; 2021.
9. Australian Bureau of Statistics. 2021 Census. Canberra: ABS; 2021 [cited 2025 Apr].
10. Public Health Information Development Unit. Local Government Area Dashboard 2021. PHIDU; 2021.
11. South East Melbourne Primary Health Network. Annual Needs Assessment 2023. SEMPHN; 2023.
12. Scanlon Foundation Research Institute. Mapping Social Cohesion in 2024. Scanlon Foundation; 2024.
13. Aneshensel CS, Sucoff CA. The neighbourhood context of adolescent mental health. *J Health Soc Behav.* 1996;37(4):293–310. Available from: www.jstor.org/stable/2137258
14. Cramm JM, van Dijk HM, Nieboer AP. The importance of neighbourhood social cohesion and social capital for the well-being of older adults in the community. *Gerontologist.* 2013;53(1):142–52.
15. Dennison EM, Cooper C, Sayer AA. Neighbourhood environment and positive mental health in older people: The Hertfordshire Cohort Study. *Health Place.* 2011;17(4):867–74.
16. Informed Decisions. Why social cohesion is crucial for a functioning society. [Internet]: Informed Decisions; 2025
17. Victorian Crime Statistics Agency. Offence Classification Dashboard [Internet]. Melbourne: CSA; [cited 2025 Apr]. Available from: [Latest crime data by area | Crime Statistics Agency Victoria](#).
18. Cardinia Shire Council. Community Safety Framework 2023/24. Officer (VIC): Cardinia Shire Council; 2023.
19. VicRoads. Interactive Crashstats 2023 [Internet]. Melbourne: VicRoads; [cited 2025 Apr]. Available from: [Victoria road crash data - Data Collection - Open Data - Transport Victoria](#)
20. Victorian Injury Surveillance Unit. Injury Atlas 2020. Melbourne: VISU; 2020.
21. Australian Institute of Health and Welfare. Australian Burden of Disease Study. Canberra: AIHW; 2024 [cited 2025 Feb].
22. VicHealth. Evidence review: Addressing the social determinants of inequities in physical activity and related health outcomes. Melbourne: VicHealth; 2015.
23. Ball K, Carver A, Downing K, Jackson M, O'Rourke K. Addressing the social determinants of inequities in physical activity and sedentary behaviours. *Health Promot Int.* 2015;30(Suppl 2):ii8–ii19.
24. Brandt EJ, Mozaffarian D, Leung CW, Berkowitz SA, Murthy VL. Diet and food and nutrition insecurity and cardiometabolic disease. *Circ Res.* 2023;132(12):1692–706.
25. Australian Government Department of Social Services. What is family and domestic violence [Internet]. Canberra: DSS; [cited 2025 Apr].
26. Government of Victoria. Free From Violence Second Action Plan (2022–2025). Melbourne: State Government of Victoria; 2022.
27. Our Watch. The issue [Internet]. Our Watch; [cited 2025 Apr]. Available from: www.ourwatch.org.au/the-issue
28. Symplan. Cardinia Shire Gambling Harm Minimisation Policy – Background Report. Melbourne: Symplan; 2023
29. Crime Statistics Agency. Family Violence Dashboard: Family Incidents, Other Parties and Affected Family Members [Internet]. Melbourne: CSA; [cited 2025 Apr].
30. Victorian Crime Statistics Agency. Family Violence Dashboard [Internet]. Melbourne: CSA; [cited 2025 Apr].
31. Australia's National Research Organisation for Women's Safety (ANROWS). Research summary: The impacts of domestic and family violence on children. Sydney: ANROWS; 2018.
32. Australian Institute of Health and Welfare. Australian Burden of Disease Study 2024: Attributable burden across the life course. Canberra: AIHW; [cited 2025 Apr].
33. Turning Point. Alcohol and Other Drugs Statistics Dashboard 2021. Melbourne: Turning Point; 2021.

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34. Australian Institute of Health and Welfare. Population groups – Family, domestic and sexual violence [Internet]. Canberra: AIHW; [cited 2025 Apr].
 35. Muir K, Hamilton M, Noone JH, Marjolin A, Salignac F, Saunders P. Exploring financial wellbeing in the Australian context. Sydney: Centre for Social Impact & Social Policy Research Centre – University of New South Wales; 2017.
 36. Australian Bureau of Statistics. Estimating homelessness: Census [Internet]. Canberra: ABS; 2021 [cited 2025 Apr].
 37. Australian Institute of Health and Welfare. Homelessness and homelessness services. Canberra: AIHW; 2025 [cited 2025 Apr].
 38. Baenziger ON, Ford L, Yazidjoglou A, Joshy G, Banks E. E-cigarette use and combustible tobacco cigarette smoking uptake among non-smokers, including relapse in former smokers: umbrella review, systematic review and meta-analysis. *BMJ Open*. 2021;11(3):e045603.
 39. Australian Department of Health and Aged Care. National Drug Strategy 2017 –2026. Canberra: Department of Health; 2017.
 40. Australian Institute of Health and Welfare. National Perinatal Data Collection, National Core Maternity Indicators. Canberra: AIHW; 2024.
 41. RMIT University: Centre for Urban Research. Australian Urban Observatory. Melbourne: RMIT; 2021.
 42. Southeast Melbourne Primary health Network. 2024 Annual Needs Assessment. Available at: [2024 Health needs Assessment](#)
 43. Victorian Commission for Gambling and Liquor Regulation. Gambling data [internet] VCGLR; 2025.
 44. Snapshot Climate. Australian Emissions Profile [Internet]. [cited 2025 Apr]. Available from: <https://snapshotclimate.com.au/locality/municipality/australia/victoria/cardinia/>
 45. Victorian Department of Education and Training. Victorian Child and Adolescent Monitoring System. Melbourne: DET; 2021.
 46. National Institute of Economic and Industry Research. Compiled and presented in economy.id by .id (Informed Decisions); 2023.
 47. Department of Social Services. JobSeeker and Youth Allowance recipients. Canberra: DSS.
 48. PropTrack. Housing Affordability Report [Internet; cited 2025 Apr].
 49. Victorian Department of Education and Training. School Entrant Health Questionnaire. Canberra: DET; 2021.
 50. Australian Early Development Census. Community results table. Canberra: AEDC; 2024.
 51. Australian Institute of Health and Welfare. Suicide & self-harm – Monitoring National Mortality Database. Canberra: AIHW.
 52. Department of Health. Tackling climate change and its impacts on health through municipal public health and wellbeing planning: Guidance for local government. Melbourne: Department of Health; 2024.
 53. Australian Institute of Health and Welfare. Australia’s children [Internet]. Canberra: AIHW; 2022 [cited 2025 Aug 27].
 54. Badcock JC, Holt-Lunstad J, Garcia E, Bombaci P, Lim M. Position statement: Addressing social isolation and loneliness and the power of human connection. *Global Initiative on Loneliness and Connection*; 2022.
 55. Holt-Lunstad J. Social connection as a public health issue: The evidence and a systemic framework for prioritizing the “social” in social determinants of health. *Annu Rev Public Health*. 2022;43:193–213.
 56. Victorian Department of Health. Racism in Victoria and what it means for the health of Victorians [Internet]. Melbourne: Department of Health; [cited 2025 Aug]. Available from: <https://www.health.vic.gov.au/population-health-systems/racism-in-victoria-and-what-it-means-for-the-health-of-victorians>
 57. Australian Bureau of Statistics. Housing, 2019–20 [Internet]. Canberra: ABS; [cited 2025 Aug 27].
 58. Metropolis Research. 2025 Annual Community Satisfaction Survey – Cardinia Shire Council. Melbourne: Metropolis Research; 2025.
 59. Australian Institute of Family Studies. Understanding food insecurity in Australia. Melbourne: AIFS; 2020.
 60. Victorian Human Rights and Equal Opportunity Commission. Discrimination [internet; accessed August 2025]. Available at: [Discrimination | Victorian Equal Opportunity and Human Rights Commission](#)



Cardinia Shire Council
Civic Centre
20 Siding Avenue, Officer

PO Box 7
Pakenham 3810 (DX 81006 Pakenham)

Phone: 1300 787 624
Email: mail@cardinia.vic.gov.au
Web: www.cardinia.vic.gov.au

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