

KNOX
your city

Covid-19 Community Impact Survey

Analysis as at 5 August 2020



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26 August 2020

1 EXECUTIVE SUMMARY

1.1 OVERVIEW

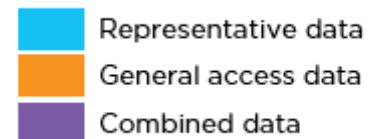
The first wave of the Knox Covid-19 Community survey was processed based on data collected from the 20 July to 5 August 2020, with 1,615 total sample.

n=1,615

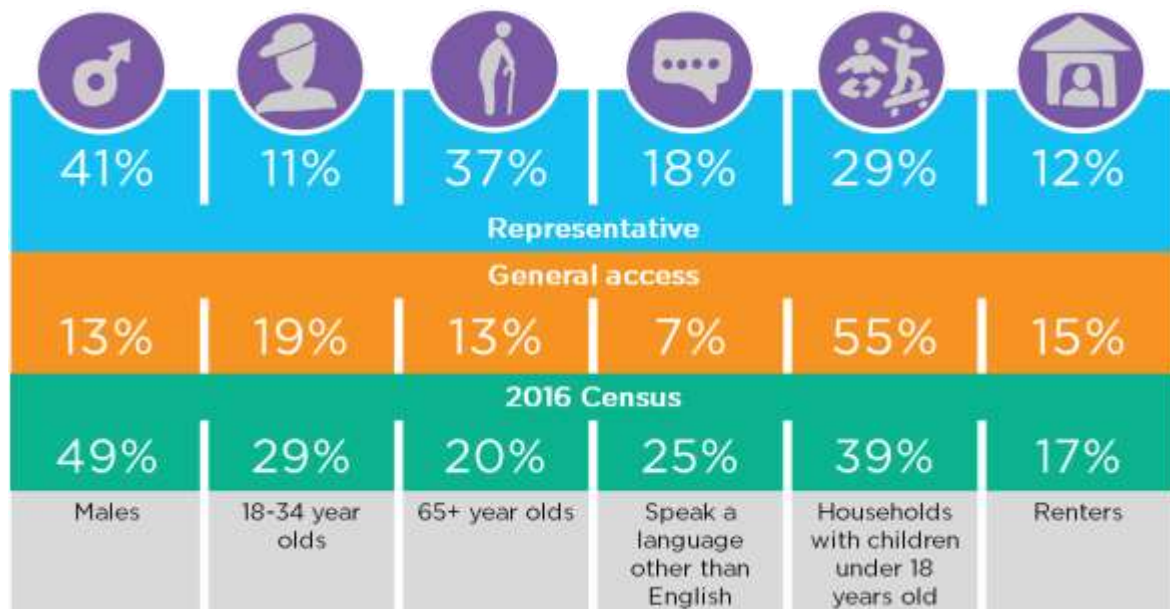
This comprises of:

- **919** responses collected through random proportional sampling of the rates database (online and paper completion options) to provide incidences representative of the broader community. This data has been weighted to align with City of Knox age, gender and location demographics (interlocking) as per the 2016 Census; and
- **696** responses collected through an open access online survey promoted through Council networks (with a paper completion option) to provide more robust insights into impacts and behaviours. The online survey remains open so future comparative analysis can be conducted for different timeframes throughout the Covid-19 pandemic.

Colour coding of results has been used throughout to illustrate the sample used for analysis.

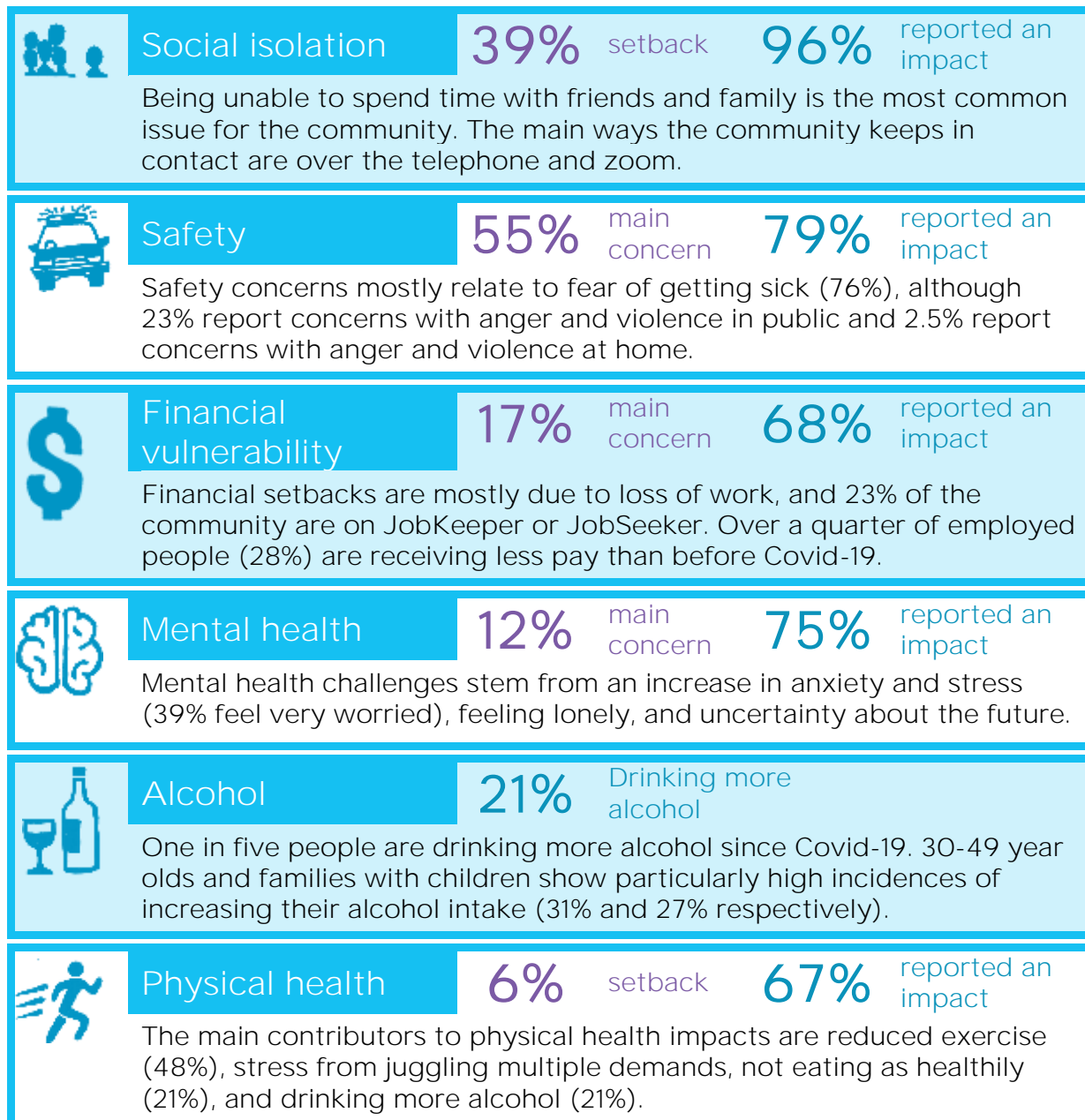


The survey samples provide a **robust coverage** of key 'hard to reach' community demographics:



1.2 KEY FINDINGS

The most widespread impacts of Covid-19 on the Knox community are as follows:



% representative **% All respondents**

Many residents also reported experiencing improvements to their lives as a result of Covid-19 (57%), mostly stemming from having additional time for family, home maintenance, personal pursuits, exercise, and home cooking.

As the pandemic progresses the main challenges for the Knox community are likely to be:

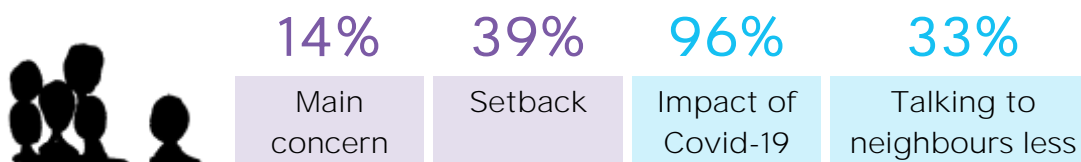
- Fostering community connections and ensuring people keep in touch with friends and family to address feelings of loneliness;
- Increased stress and anxiety caused by fear of getting sick, isolation, financial challenges, and having too much to do (working and home schooling);

- Inability to maintain care and undertake households duties if people fall ill with Covid-19 (groceries, looking after children, no space to isolate);
- Potential financial difficulties for many as they use up their savings and/or received reduced government assistance;
- Maintaining healthy lifestyles, amid a reduction in opportunity to exercise and fewer eating healthy food; and
- Supporting the elderly, vulnerable, and those effected by Covid-19.

1.3 TOPIC AREA SUMMARIES

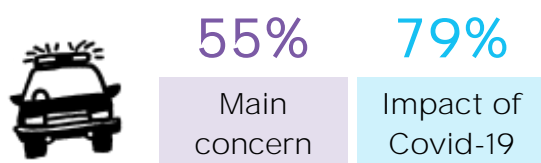
The main impacts on the community relate to social isolation, employment, finances, mental health, behaviour changes that could result in increased health risks, and the added workload and stress of home-schooling.

1.3.1 SOCIAL ISOLATION



Social isolation is the most common concern and setback experienced by the community. It is understood that isolation can have an impact on mental health and wellbeing, as well as healthy brain functioning. Social isolation is occurring more commonly in the Hills, Rowville, Wantirna and Wantirna South regions. There is a common expectation that the ability to see friends and family more will occur in the latter half of 2020; should this not eventuate the lack of expectations being met and continued isolation runs the risk of increased mental health issues. People are mostly combatting social isolation through phone calls and zoom meetings.

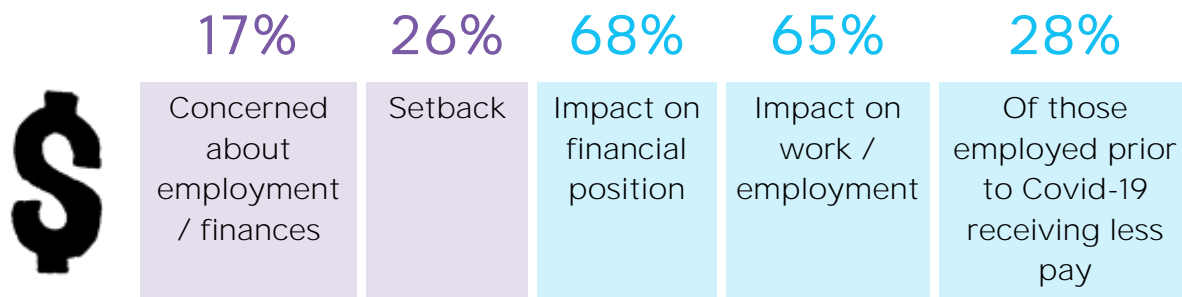
1.3.2 SAFETY



The primary safety concerns and impacts revolve around a fear of getting sick and worry that people **aren't doing the right thing and spreading the virus**. Almost a quarter reported concerns about anger and violence in the community, and 44 mentioned anger and violence at home (family violence measure, extrapolates to 2.4% of the population or potentially 3,300 people if calculating as a percentage of 15+ year old population as per the 2020 forecast population for Knox¹). Higher instances of reporting safety impacts are evident amongst females, 30-49 year olds and those who speak a language other than English.

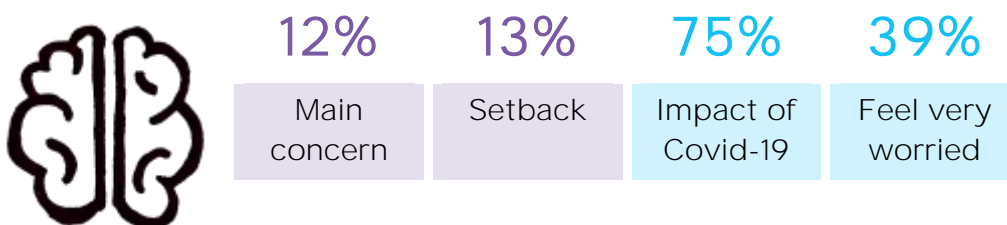
¹ <https://forecast.id.com.au/knox> 15+ year old forecast for 2020 at 135,812 people.

1.3.3 FINANCIAL VULNERABILITY



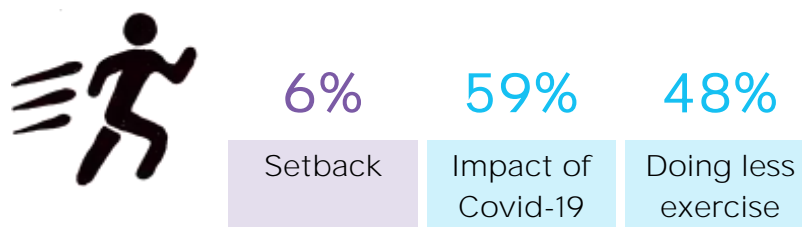
People are experiencing a broad range of impacts on their work and employment, with the most common being switching to working from home, a reduction in work income, and still having to go into work. Many business and residents are using JobKeeper and JobSeeker; Many are expecting these programs to end soon, which introduces significant financial vulnerability risks to those relying on the payments - particularly low income households, young people and renters.

1.3.4 MENTAL HEALTH



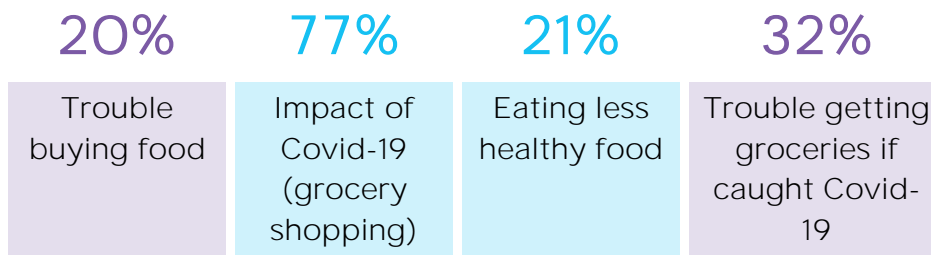
The mental health impacts being experienced by the Knox community primarily revolve around anxiety, stress and loneliness. Mental health challenges can have significant impacts on both personal wellbeing as well as family safety. Younger people (18-39 year olds) are more commonly reporting mental health issues, whilst older adults (65+ year olds) more often report feeling secure and relaxed. Other segments with higher incidences of reporting mental health challenges include females and renters. Stress, anxiety and struggling with being overwhelmed are more common amongst those in the middle age ranges (30-49 year olds).

1.3.5 EXERCISE



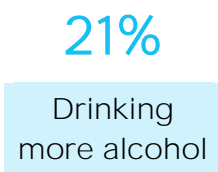
Not being able to exercise as much is the primary physical health impact reported by the Knox community. A reduction in exercise can lead to a range of associated health issues (obesity, mental health, increased rates of disease etc.). A reduction in exercising is particularly prominent amongst younger people (under 40 years of age). Some are exercising more since Covid-19; an increase in exercising is more common amongst 40-49 year olds, those with children at home and those living below the poverty line. There is a wide-spread expectation that exercise will increase in the second half of 2020.

1.3.6 HEALTHY EATING



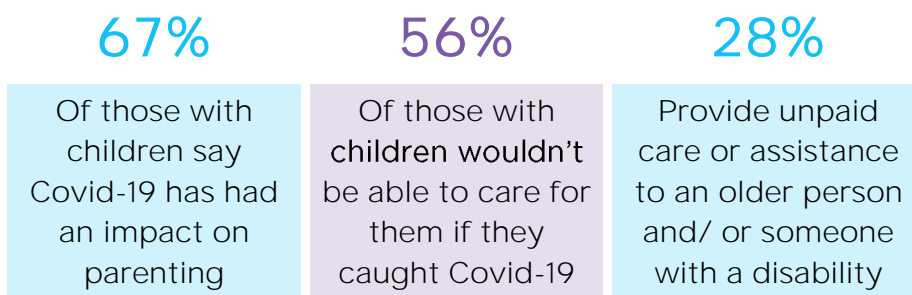
Covid-19 has had a widespread impact on grocery shopping, and a notable segment of the community could struggle obtaining food and groceries if they were to catch the virus, particularly those in lone person households. Healthy eating is on the decline, which runs the risk of associated health issues such as obesity. Many are preparing more meals at home, but this doesn't always coincide with healthier eating.

1.3.7 ALCOHOL CONSUMPTION



Increases in alcohol consumption can increase the risk of a range of health impacts, including high blood pressure and stroke. It can also cause weight gain and have impacts on mental health and family violence. 30-49 year olds show a particularly high incidence of increasing their alcohol intake, as do families with children. Data shows that there has been an increase in drinking behaviour amongst parents who are having to home-school, suggesting that it may be being used as a coping mechanism.

1.3.8 PARENTING AND CAREGIVING



Parents are facing greater pressures during Covid-19 restrictions as a result of the closure of schools and childcare, resulting in parents having to facilitate their child's schooling at home, often juggling work commitments at the same time. Females are disproportionately taking on the work of home-schooling, often whilst still working. Unpaid carers are more often experiencing challenges relating to work, mental health (increased stress of juggling responsibilities), healthy eating and internet connectivity.

1.3.9 RESILIENCE



37%

Wouldn't be able to care for others if caught Covid-19

8%

Very likely to volunteer

33%

Internet connectivity issues

41%

No one to rely on in an emergency

Resilience covers peoples' ability to cope with and/or react to significant life changes or events. There are some clear pockets of lack of resilience in the Knox community which could become problematic as the pandemic continues. Specifically those with children could have trouble finding help in an emergency or caring for their children if contracting the virus, and renters could also have difficulty finding help in an emergency and/or \$2000 in a week.

1.4 DEMOGRAPHIC INSIGHTS

Younger people (18-29 year olds) are more commonly experiencing issues with mental health and reduction in work, the latter having a significant impact on their financial position. They have also adopted a number of unhealthy behaviours, such as exercising less (which they recognise as an issue) and eating less healthy food. However they are drinking less. This group utilises technology and the internet to keep in touch with friends and family, through channels such as social media, zoom and online games / quizzes, however they also show a high instance of having experienced internet connectivity issues which could be contributing to isolation given their connection methods are internet focussed.

65+ year olds often have quite a different view of the pandemic than other age groups. Given many are retired the incidence of experiencing issues relating to changes in work or finances are significantly reduced, and as a result higher instances of older people report feeling secure and relaxed. Indeed, many don't think that contracting a mild version of Covid-19 would have much of an impact on their life, and there is a widespread expectation that they will be able to socialise again in the latter half of 2020. However, there are some who are concerned about the potential impacts catching Covid-19 could have on other health issues, and notably high proportions said they would be unlikely to volunteer to help recovery efforts. For this age group, the most common method of keeping in touch with friends and family is over the telephone.

Females more commonly report a big impact on mental health, particularly relating to feeling worried. This may be accentuated by the finding that they are disproportionately responsible for home-schooling children, whilst also juggling work responsibilities.

Males more commonly report not being able to exercise as much, despite a higher percentage reporting that they have switched to working from home. This may be a function of the closure of gyms (although the data doesn't provide enough information to quantify this). Males are also more often experiencing a change to

the nature of their work and reduced incomes. Encouragingly a notable proportion of males indicated they were drinking less.

Those with children at home show a higher incidence of drinking more alcohol, but also exercising more. They more commonly report issues with food and grocery shopping and internet connectivity, the latter which can cause particular challenges for home-schooling. This group also show a lower instance of having someone outside their household they can rely on in an emergency which could prove problematic if they were to fall ill from Covid-19.

Those who speak a language other than English show higher instances of reporting that they are very worried, but lower instances of reporting mental health issues, suggesting that they may not associate anxiety with mental health. They less often feel secure and are talking to their neighbours less, suggesting that they are at higher risk of safety and isolation issues. They more commonly experience impacts relating to food and grocery shopping, potentially stemming from more commonly experiencing changes to their work environment (which can change shopping timing and finances), specifically having lost their job, switching to working from home, and still having to go into work.

Renters more commonly report a big impact on their mental health, likely due to many of them being in the younger age groups (who also show higher instances of reporting mental health issues). They more commonly face a range of resilience risk factors such as financial vulnerability, reduced healthy eating and inability to access \$2,000 in a week for an emergency.

Households below the poverty line are more commonly experiencing a broad range of impacts of Covid-19 that could reduce resilience and increase financial vulnerability. These include higher rates of being very worried, more often feeling not at all secure, impacts on food and grocery shopping, impacts in financial position, inability to find \$2,000 in a week in an emergency, internet connectivity issues, and changes in work - specifically losing their job, having less work to do, **and having to go to work because they can't work from home.** However, this segment did show a higher rate of being very likely to volunteer to help with recovery efforts and a notably high incidence indicated they were exercising more.

2 METHODOLOGY

Knox City Council used an adaptation of the ASDF Research Covid-19 Community Survey, available to Councils to assist in understanding their community. The base syndicated survey was used with additional questions designed specifically to meet the needs of Knox Council. Additional questions were developed through a question design workshop with the research and recovery teams.

For this research, respondents were sourced using two methods:

1. **Random proportional representative sampling of the rates database.** Selected addresses were matched against Council’s contact database to source email addresses. Where an email address was available the household was sent an email invitation to the survey. If no email address was available they were posted a paper version of the survey (with an option to complete online included in the cover letter). This sample provides insights from across the municipality, rather than just those who are engaged with Council’s communication channels and services.
2. **General access online survey.** This was distributed through Council networks and services (see Appendix 2) and a paper form was available upon request. This sample was completed by those who are engaged with Council and interested in the topic.

The general access survey has been left open so that it can continue to collect data. This provides Council with the opportunity to run comparison data at a later date.

The response figures at the time of reporting were as follows, achieving a total of 1,616:

Table 1.4.1 Responses by mode

	Mode	Returned	Sent	Response rate
Representative	Mail-out, online	75	4,111	14%
	Mail-out, paper	504		
	Email	340	2,556	13%
General Access	Various	696		
TOTAL		1,615		

2.1.1 SURVEY TIMING

The survey was in field from 20 July to 5 August 2020. At the time of distribution the following restrictions were in place for those living in the Melbourne metropolitan area (including Knox):

- Mandatory wearing of face masks (as of 22 July 2020);
- People can only leave home for four reasons: shopping for food and supplies, outdoor exercise and recreation, medical care and caregiving, and study or work (if can't do it from home);
- People cannot have visitors to their home except for caregiving or compassionate reasons or receiving services;
- People cannot visit friends and family outside their home, except to see their intimate partner, for shared care arrangements, for caregiving or compassionate reasons, or for providing services;
- People should only exercise with the members of their household or one other person, and they should stay as close to home as possible;
- Limits on the number and type of people who can visit hospitals, aged care and disability facilities, and the number and length of visits per day;
- State of disaster and Stage 4 restrictions (2 August 2020):
 - Curfew between 8pm and 5am;
 - Night Network suspended and public transport services reduced during curfew hours;
 - Exercise limited to a maximum of one hour per day and no more than five kilometres from home. Group size will be limited to a maximum of two;
 - Shopping limited to one person per household per day within five kilometres from home;
 - Study for TAFE and university must be done remotely;
 - Weddings in Melbourne cannot occur; and
 - Schools conduct remote and flexible learning across all year levels.




The online survey has been left open so that it can continue to collect responses. This will allow for comparison of community needs across time and at different stages of restriction.

2.2 HOW TO READ THIS DOCUMENT

Prior to the analysis of each question, a table shows the question number, sample size (number of people who provided an answer), which sample is used for the analysis (and why), and notes to consider when reading the analysis and/or replicating the research in the future.

Comment boxes have been provided throughout with direct respondent quotes. Each comment is referenced with the respondents' suburb, age range and gender.

The base data used to calculate the findings for each question varies depending on which is the most suitable for meaningful analysis. Throughout this report colour coding has been used as follows:

	Representative data
	General access data
	Combined data

2.2.1 GLOSSARY

Base	The number of responses used to calculate percentages / statistics.
n=	Number of people who responded to a question. Indicates the base number when calculating percentages.
Free text field	Question type where responses are recorded as written text.
Net	This is a special variable that shows the number or percentage of respondents who chose one or more answers options within a group of answers. When this is applied to a question that allows multiple responses the net will not necessarily equal the sum of the individual responses within it, as respondents who may have selected multiple individual items are only included once in the net.
Respondent	Those who participated in the survey.
Region	The grouped geographic areas for the purpose of analysis: Boronia & Bayswater, Wantirna & Wantirna South, Rowville, Ferntree Gully, Knoxfield & Scoresby, and Hills (Upper Ferntree Gully, The Basin & Lysterfield).
Sample size	The number of people who provided an answer to the question.
Statistically significant	Highlights a phenomenon / variation in the data that one can be confident is reflective of the entire target population. For more information see section 2.2.3.
Thematic analysis	Grouping of written comments into themes to assist in analysis. See section 2.2.2.

2.2.2 THEMATIC ANALYSIS

For the questions collecting a written answer, responses have been grouped into meaningful themes to assist with analysis. Where relevant, individual comments have been assigned to multiple themes. An excel document with this thematic analysis has been provided separately and allows for filtering of comments by themes.

2.2.3 STATISTICAL SIGNIFICANCE TESTING

Results have been tested for statistical significance using the Bonferroni method at 95% confidence level. Where a statistically significant variation has been identified in the analysis, this has either been included in a written comment or demonstrated in charts and tables with arrows denoting a higher than average result (↑) or lower than average result (↓). To ensure relevance and usefulness of this report, cross analysis of variables which do not yield any statistically significant insights have not been included in the written analysis.

All findings have had significance testing conducted based on:

- Gender;
- Age;
- Household structure;
- Tenure;
- Employment status;
- Region;
- Poverty line;
- Speak a language other than English;
- Disability; and
- Carer status.

2.2.4 WEIGHTING

The representative sample data was weighted to be in line with the 2016 ABS Census for gender, age and region (interlocking). This means the weight of each individual survey response towards the overall results is adjusted to balance out demographic variations in the sample. This ensures the results better represent the views of the overall population.

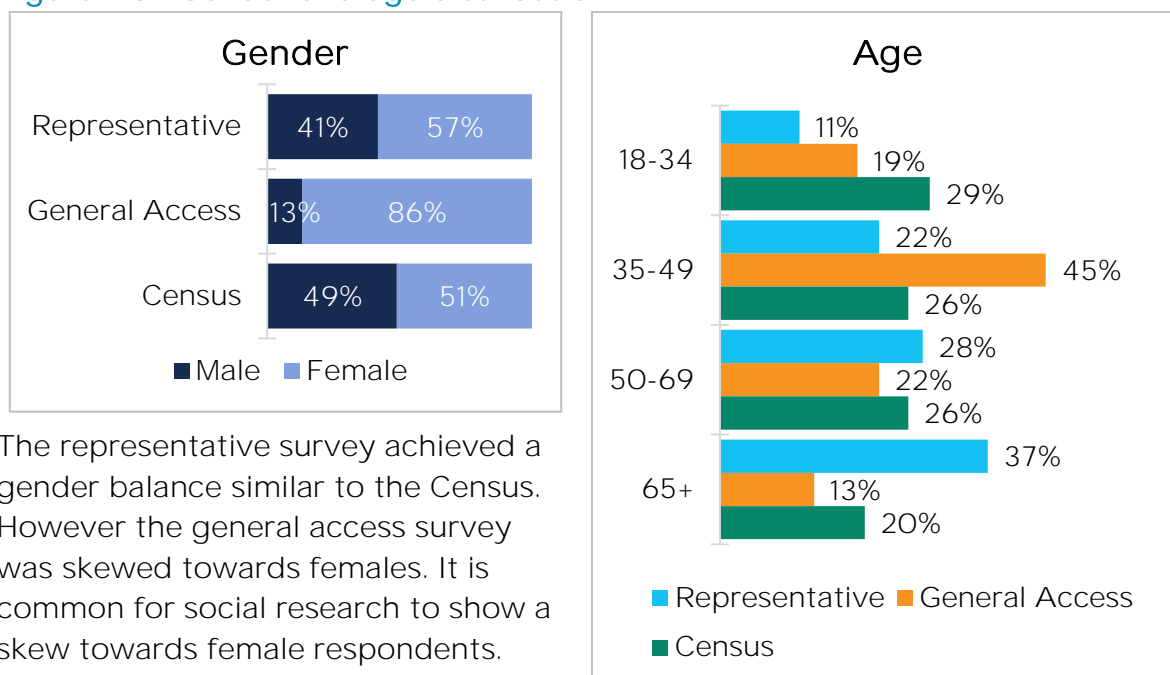
For instance, in the representative survey 11% of respondents were aged 18-34, whereas in the Census 29% of the population is 18-34. Therefore the weighting means that each 18-34 year old in the sample acts as if it is 2.6 responses in the weighted results. Conversely, 37% of the representative sample was 65+ years old, compared to 20% in the Census, so each 65+ year old in the sample acts like 0.54 responses in the weighted results.

2.3 SURVEY COVERAGE

When viewing the demographics of each sample source compared to Census data it is clear that the representative survey provides good coverage of the overall community. However, there was a gap in young people responding to the representative survey (particularly young males). To cater for this we have weighted the data (interlocking weight) by age, gender and region, and moved 2 respondents from the general access sample into representative to fill the gaps.

The following charts show unweighted data, compared to 2016 Census data for Knox:

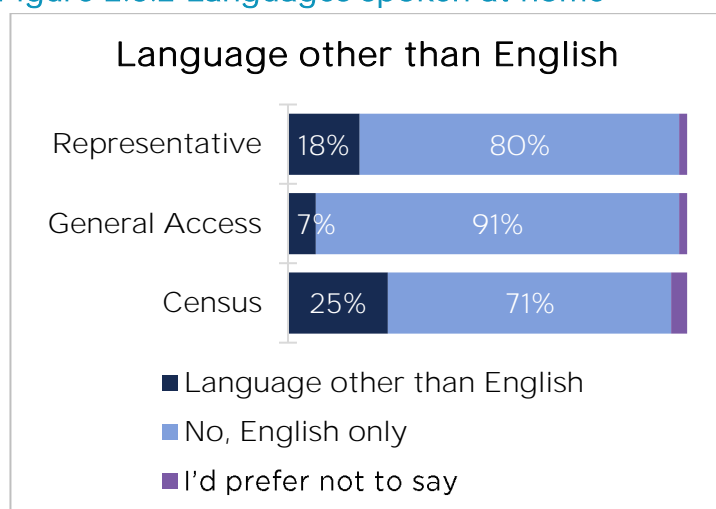
Figure 2.3.1 Gender and age distribution



The representative survey achieved a gender balance similar to the Census. However the general access survey was skewed towards females. It is common for social research to show a skew towards female respondents.

The representative survey shows a skew towards older adults, whereas the general access survey shows a skew towards those aged 35-49. It is common for social research to have low number of responses from people under the age of 35.

Figure 2.3.2 Languages spoken at home



The representative survey included a robust component of respondents who speak a language other than English. The main languages specified were:

- Cantonese;
- Mandarin;
- Chinese;
- German;
- Sinhalese;
- Italian; and
- Hindi.

Figure 2.3.3 Family type

The representative survey showed an over-representation of households without children, as a result of the skew towards 65+ year olds. Due to the general access survey's skew towards 35-49 year olds, it shows a skew towards families with children.

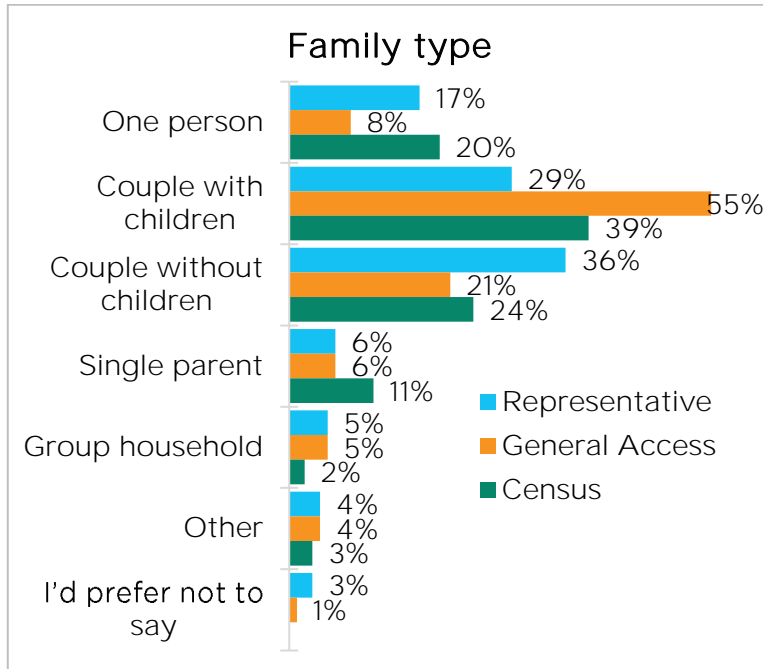
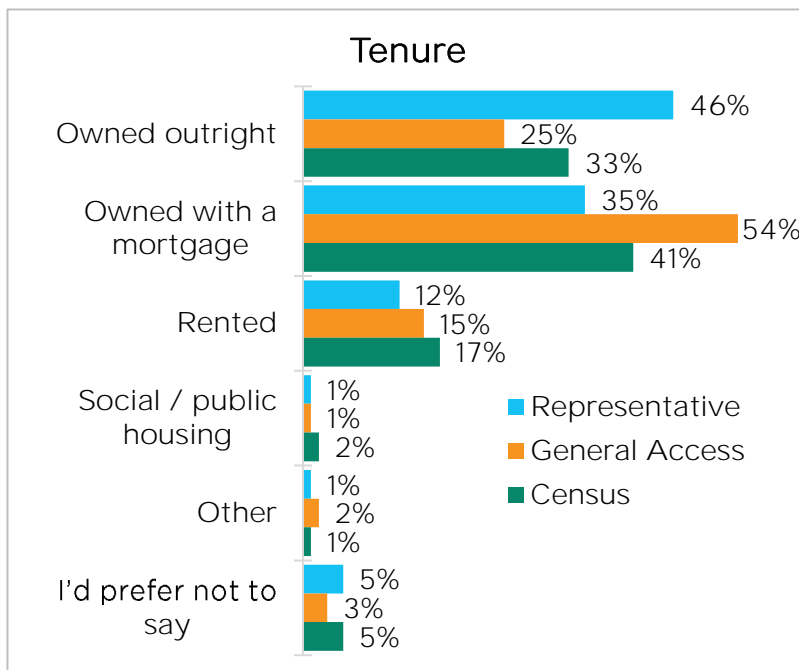
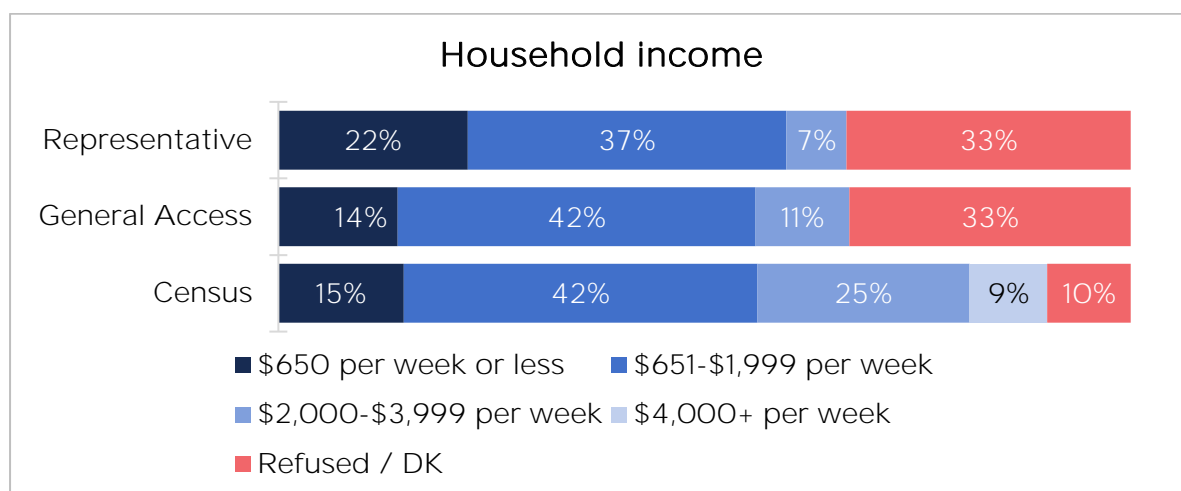


Figure 2.3.4 Tenure



Both survey distributions (representative and general access) reached a robust proportion of renters. The representative survey showed a higher proportion of those who own their home outright as a result of the skew towards 65+ year olds within that data set.

Figure 2.3.5 Household income



The representative survey shows a slight over-representation of lower income households, likely due to the skew towards 65+ year olds, many of whom are retired.

Utilising the ACOSS Poverty Line² calculations we have generated a flag within the data for households who are below the poverty line (using the 50% of median income measure). In the representative survey 32% of respondents were below the poverty line, and in the general access survey the proportion below the poverty line was 26%.

² Davidson, P., Saunders, P., Bradbury, B. and Wong, M. (2020), Poverty in Australia 2020: Part 1, Overview. ACOSS/UNSW Poverty and Inequality Partnership Report No. 3, Sydney: ACOSS http://povertyandinequality.acoss.org.au/wp-content/uploads/2020/02/Poverty-in-Australia-2020_Part-1_Overview.pdf Table 1, page 20

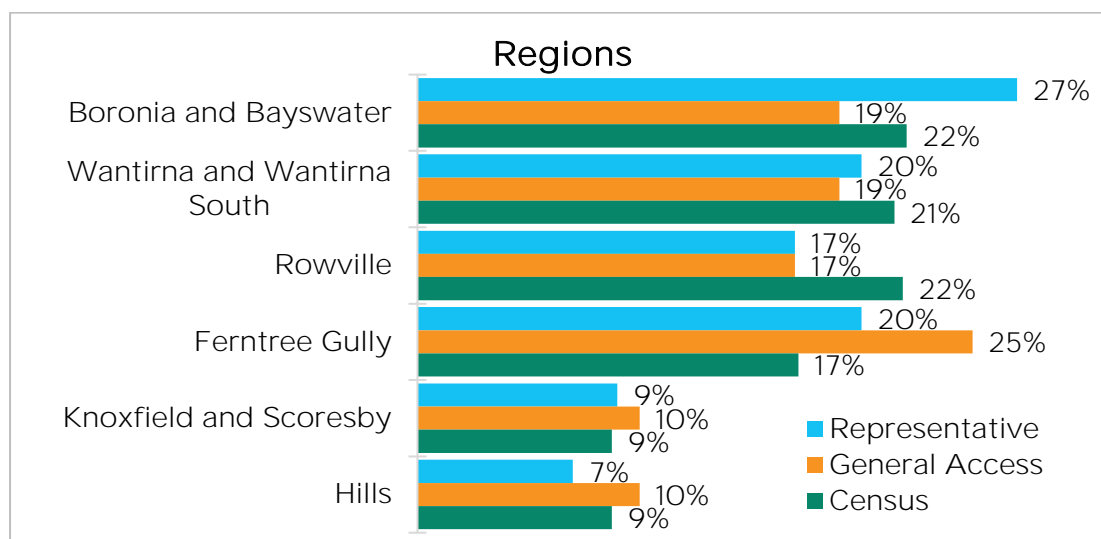
The representative survey was sampled from the rates database to achieve an even distribution across City of Knox suburbs. The following table shows the number of households invited and the final count of responses for each suburb. Both the representative and general access surveys show a geographic distribution relatively in line with population distribution.

Table 2.3.1 Sample by suburb

	Representative					General access	
	Sent	Sample	Response rate	Proportion of sample	2016 Census	Sample	Proportion of sample
Bayswater	578	75	13%	8%	8%	31	5%
Boronia	1120	171	15%	19%	14%	99	14%
Ferntree Gully	1212	182	15%	20%	17%	166	24%
Lysterfield	238	29	12%	3%	4%	25	4%
Knoxfield	322	45	14%	5%	5%	38	6%
Rowville	1278	152	12%	17%	22%	115	17%
Sassafras	2	0	0%	0%	0%	0	0%
Scoresby	246	36	15%	4%	4%	25	4%
The Basin	181	20	11%	2%	3%	30	4%
Upper Ferntree Gully	107	17	16%	2%	2%	11	2%
Wantirna	572	71	12%	8%	9%	67	10%
Wantirna South	811	114	14%	12%	13%	63	9%
Outside Knox		2				13	2%
Total	6667	914				683	

To provide robust sample sizes for geographic cross-analysis, suburbs have been grouped into the following regions. These regions were developed in consultation with Knox to combine suburbs with similar geographic and demographic traits, whilst also allowing for large enough sample sizes to identify statistically significant variations in survey findings. The 'Hills' region includes Lysterfield, The Basin and Upper Ferntree Gully.

Figure 2.3.6 Regions



3 RESEARCH FINDINGS

3.1 CONCERNS

The first question in the survey presented an open ended question asking people to type in their concerns regarding Covid-19. This was designed to capture salient issues amongst the community and give people the opportunity to have their say on these issues so that they wouldn't dwell on them in unrelated questions later in the survey.

What are your main concerns at the moment regarding Coronavirus?

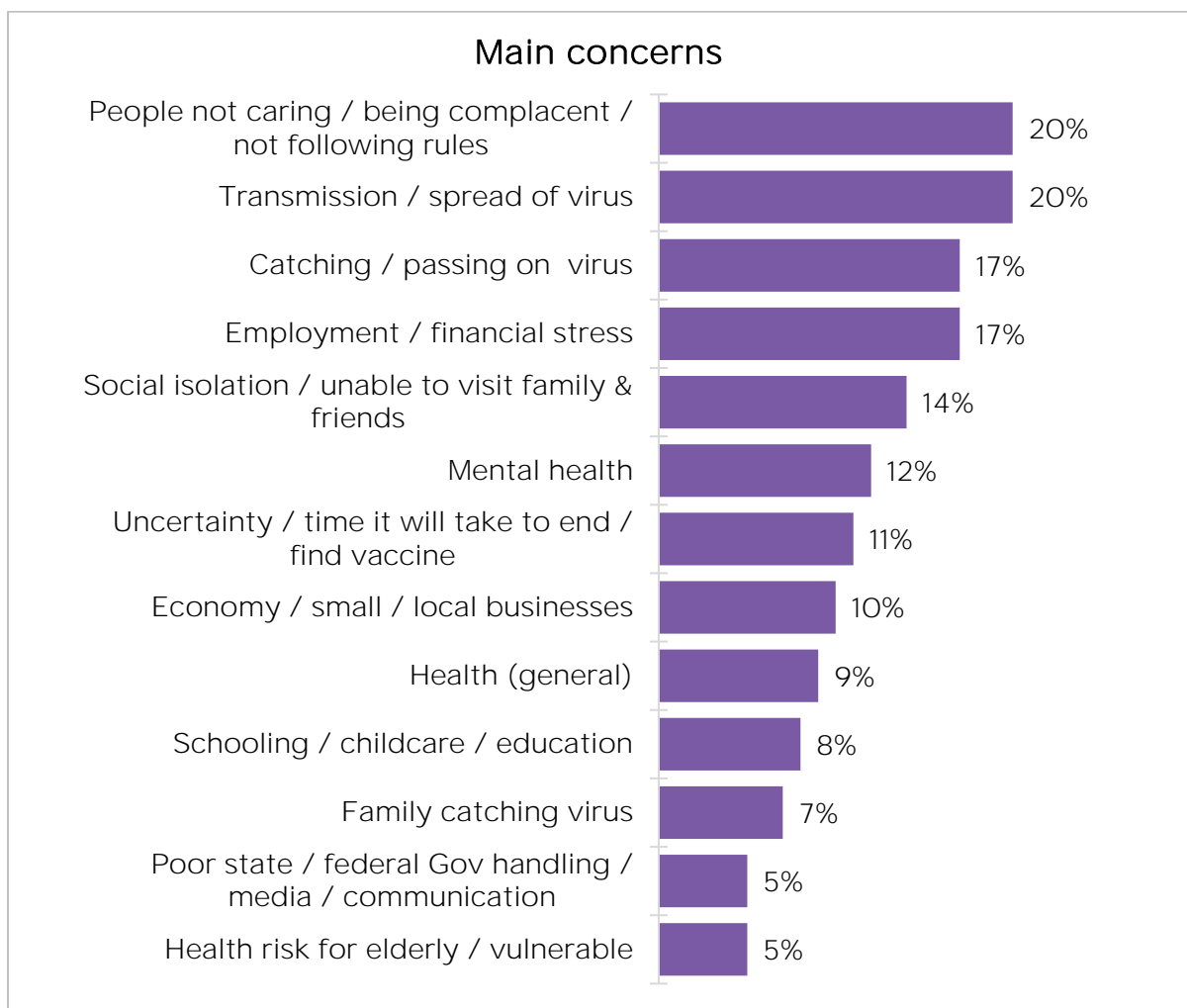
Base: All Respondents

Free-text field, thematically coded. Includes multiple responses.

n=1,520

The most common top-of-mind concerns for the Knox community clearly relate to transmission aspects of the pandemic, which is understandable given the survey was conducted at a time where community transmission in Victoria was increasing. The key top-of-mind impacts of the lockdown are financial stress caused by changes to employment, social isolation and mental health.

Figure 3.1.1 Main concerns



When netting together the concerns regarding safety (catching the virus, transmission, people not following rules and general safety), 55% put forth a comment relating to safety.

A range of other comments were made with the following key themes:

Table 3.1.1 Other concern themes

Theme	% of sample
Safety (General)	4%
Crowding in Shopping Centres	1%
Restricted travel	1%
PPE availability	1%

How quickly the virus is spreading. People not adhering to guidelines, for example: my neighbour continuing to have gatherings. with visitors. Job uncertainty,

Female 50-64

That many people are ignoring the advice and directives given by medical authorities & federal and state governments.

Female 50-64

Catching it. People running without a mask passing us when we walk on the footpath. Insane and unfair to allow them to run without a mask while not in a special area.

Male 70-74

I'm scared that I might get the virus, and die alone. This causes insomnia. I'm concerned about never working again.

Female 65+

The continued spread of this deadly disease. The outrageous and criminal behaviour of those who have and continue to spread the virus. The terrible impact on families who have lost loved ones, the loss of jobs, the economy and the future. The impact of isolation on our families, particularly our elderly parents and friends and those unable to grieve at a funeral with family.

Female 65-69

3.2 SALIENT SETBACKS AND IMPROVEMENTS

At the start of the survey respondents were asked to write in any setbacks or improvements they were experiencing in their life as a result of Coronavirus. Written comments were grouped into themes for ease of analysis. Further discussion of the key themes occur in the related section later in this report.

If there have been any changes due to Coronavirus that have resulted in setbacks and/or improvements in your life, please tell us about them below.

Base: All Respondents

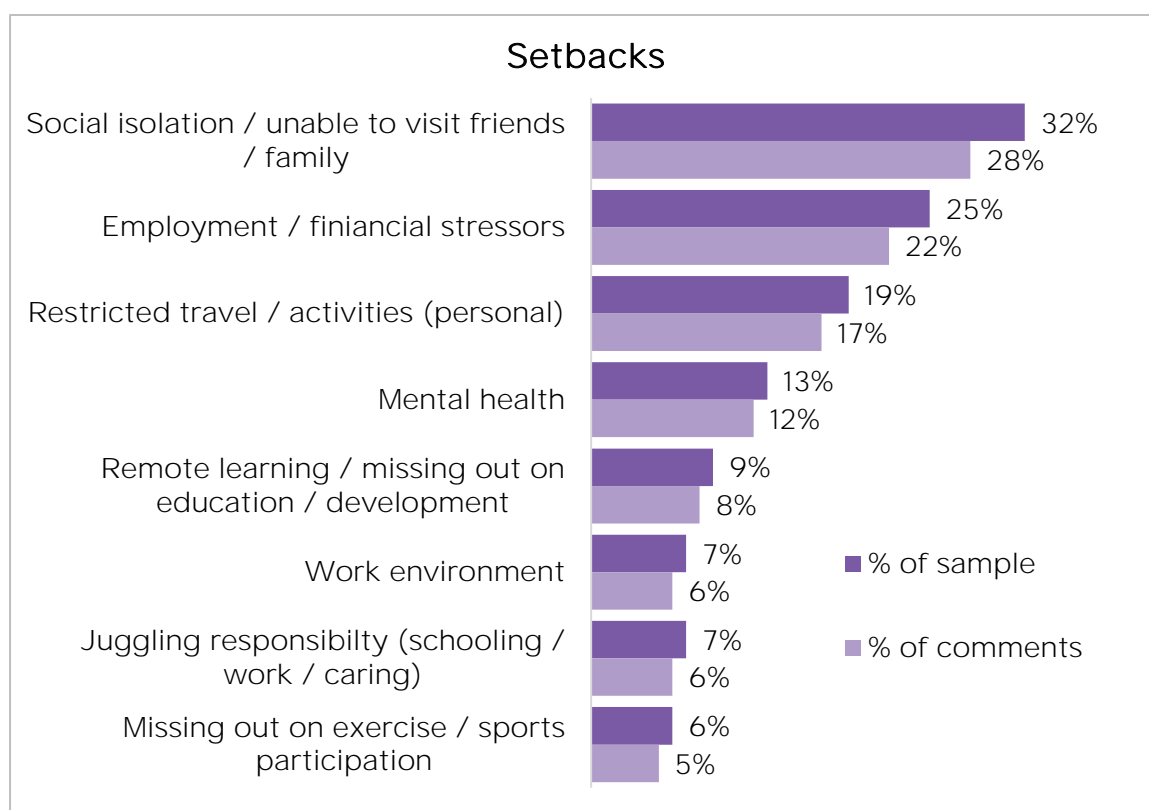
Free-text field, thematically coded. Includes multiple responses.

Note, 50% coded at time of reporting.

Almost all of those who completed the survey (92%) provided a comment when asked about setbacks. The following analysis shows findings across the entire sample (representative and general access) as this provides full detail about the range of experiences occurring in the community.

It is clear that the primary challenges being faced by the community relate to isolation, finances and mental health.

Figure 3.2.1 Setbacks



Further detail about some of these themes follow:

- **Employment / financial stressors** – respondents mentioned a broad range of situations, including losing their job, having reduced hours, unable to find work, higher bills due to working from home, and having to use their savings to survive.
- **Restricted travel / activities (personal)** – These include not being able to visit family members, not being able to go on holidays, not being able to attend groups (including church), and cancelled events.

- **Mental health** – Many of the mental health comments related to feeling sad, increased anxiety, having to adjust to a different lifestyle, and exasperation of pre-existing mental health conditions.
- **Work environment** – Some are struggling with having to work from home, be it due to living alone (isolation) or having to home school as well, while others are afraid of catching Covid-19 at work.

I have been at home working for more than 3 months and I am a bit depressed
Female 40-49

A range of other comments were made with the following key themes:

Table 3.2.1 Other setback themes

Theme	% of sample
Personal / local businesses	4%
Restricted travel / activities (kids)	2%
Restricted access to healthcare (non Covid-19)	2%
Health (general)	1%

We run a business so obviously our sales have suffered and we are facing financial uncertainty. But mostly concerned about our kids and their mental health.

Female 40-49

We are fortunate. No setbacks beyond postponement of travel and house improvement plans. Mainly Inconvenience. Higher bills for power and gas though, as husband is working from home.

Female 40-49

Not being able to support family. Not being able to see my beautiful grandchildren

Female 65+

My wife still goes to work as a preschool staff which worries me and my family as they are not wearing mask or any protective stuff during the work.

Male 35-39

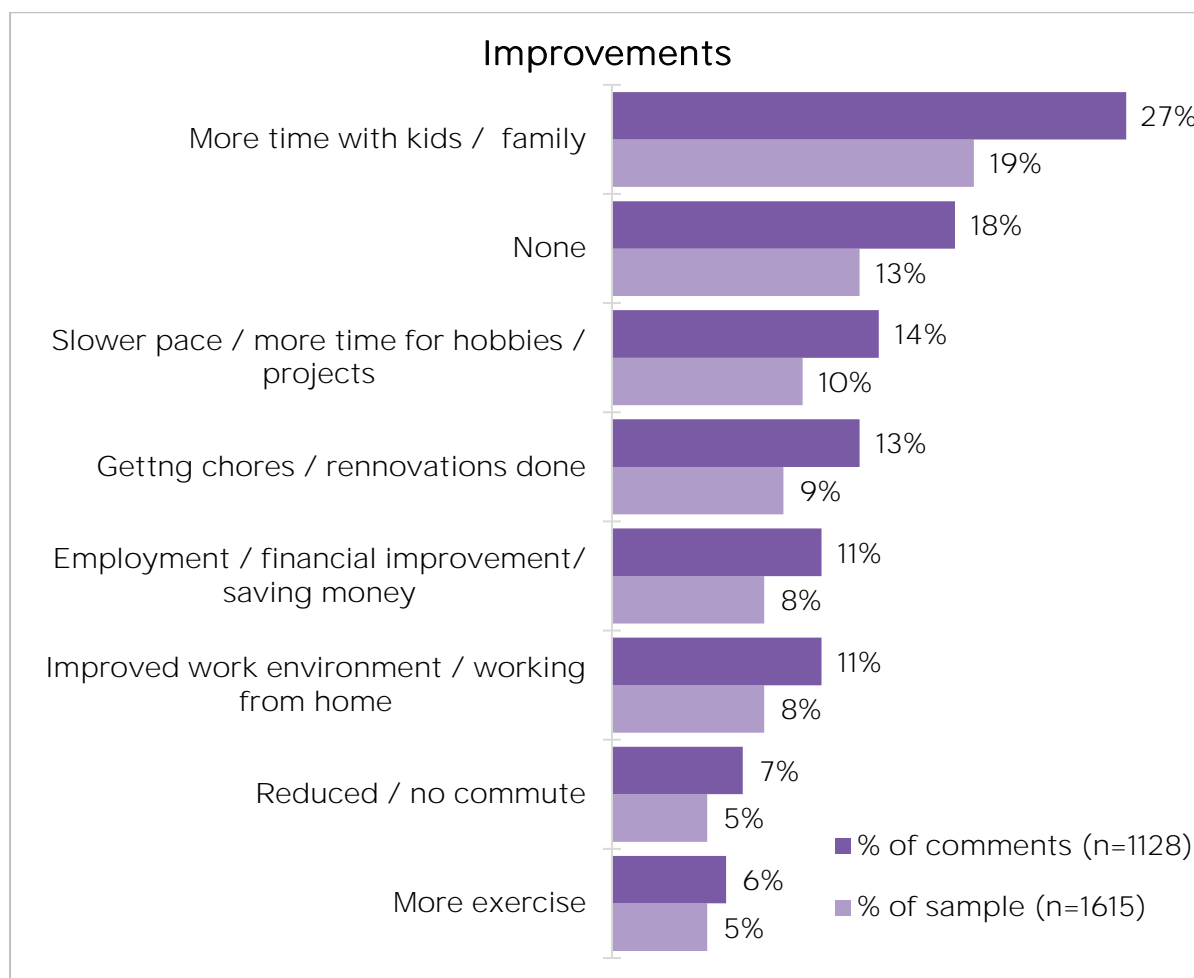
Had to cancel a holiday we had looked forward to (within Victoria). There was a lot of family stress as our adult children were trying to work from home, home school our grandchildren and manage toddlers at the same time. We became worried about our superannuation. Was unable to attend exercise classes.

Female 65-69

Over half (57%) specified some way that their life had improved since Coronavirus. Most improvements put forth relate to the opportunity to spend more time with their family and on personal pursuits.

Given not everyone answered this question, the following chart presents the percentage of those who answered the question (n=541, dark purple), and then extrapolates this as percentage of the entire sample (coded to date n=899, light purple) to represent the incidence of this occurring in the community.

Figure 3.2.2 Improvements



The most common chores mentioned included those relating to gardening, cleaning, and clearing out the house.

Many were saving money through not having to commute and not going out to dinner.

The improved employment and work environment comments revolved around people spending less money and liking working from home as it provides more time for other important things in their life (exercising, time with the family, exploring the local area).

A range of other comments were made with the following key themes:

Table 3.2.2 Other improvement themes

Theme	% of sample
Undertaking / learning new activities (including online learning/courses and learning new technology such as Zoom)	3%
Less traffic / noise / environmental improvements	3%
Happier pets / more time with pets	2%
More time at home (general)	2%
More connected to the community	2%
Less stress / improved mental health	2%
Time for reflection / me time	2%
Better public hygiene practices	2%
Healthier eating / cooking at home	1%
Personal / local business improvement (including buying local)	1%

Notable variations in mentions of life improvements since Covid-19 include:

- Females show a higher instance of specifying an improvement (62%, compared to 46% males), specifically more exercise (5%, 2% males), more time with the family (21%, 13% males) and slower pace (12%, 5% males);
- One in five (21%) males wrote in none / nothing (compared to 9% females);
- Older people show a higher instance of saying no improvements (21% 65+ year olds, compared to 13% or less for other age groups);
- Those living above the poverty line more commonly specified an improvement (66%, compared to 49% of those below the poverty line), as did those with kids in their household (66%, compared to 50% of those without kids).
- Overall, 64% of employed people put forth an improvement (compared to 44% not employed). Amongst employed people, 11% said they have an improved working environment, 25% said they get more time with family, 11% said they like the slower pace / having more time for hobbies, and 7% said the lack of commute was an improvement.

I have followed all the recommended guidelines re stay at home orders etc.

As a result I have invested time & money into make a veggie garden to be more self-sufficient.

Male 50-59

I think education in hygiene and technology will be of benefit to our community in the long run.

Female 65-69

I work in my garden and make my garden pretty, planting flowers and growing veggies. I usually do not go to garden very often.

I have time now to think about what I really need in my life. I can spend more time with my family and talk to my family overseas. I feel like I was rushing to do things but ignoring what is important in the past.

I spend time for cooking and I do enjoy cooking anyway. My wife is quite happy.

Male 50-54

Not having to run the kids around to activities and enjoying more time at home with family. Walking more regularly for exercise. A stronger sense of community as people feel we are all going through something big and are keen to form connections and show care for one another.

Female 45-49

Working from home has been a nice change, I have a lot more time in the day to do other things (albeit I am limited to doing more things around the home which is still okay). I also appreciate the position of privilege that I am in to have a stable job during this challenging time, particularly for others with less job security and lower income.

Male 18-24

Working from home is working well. Some elements are more difficult but overall the time I am saving by not commuting into the City has been fantastic. I am enjoying daily walks with my teenage daughter.

Female 45-49

3.3 OVERVIEW OF IMPACTS AND BEHAVIOURS

In what ways, if any, has the Coronavirus impacted on you? *These could be positive or negative impacts. There will be a chance to provide more detail for some of these later in the survey.*

Base: All Respondents

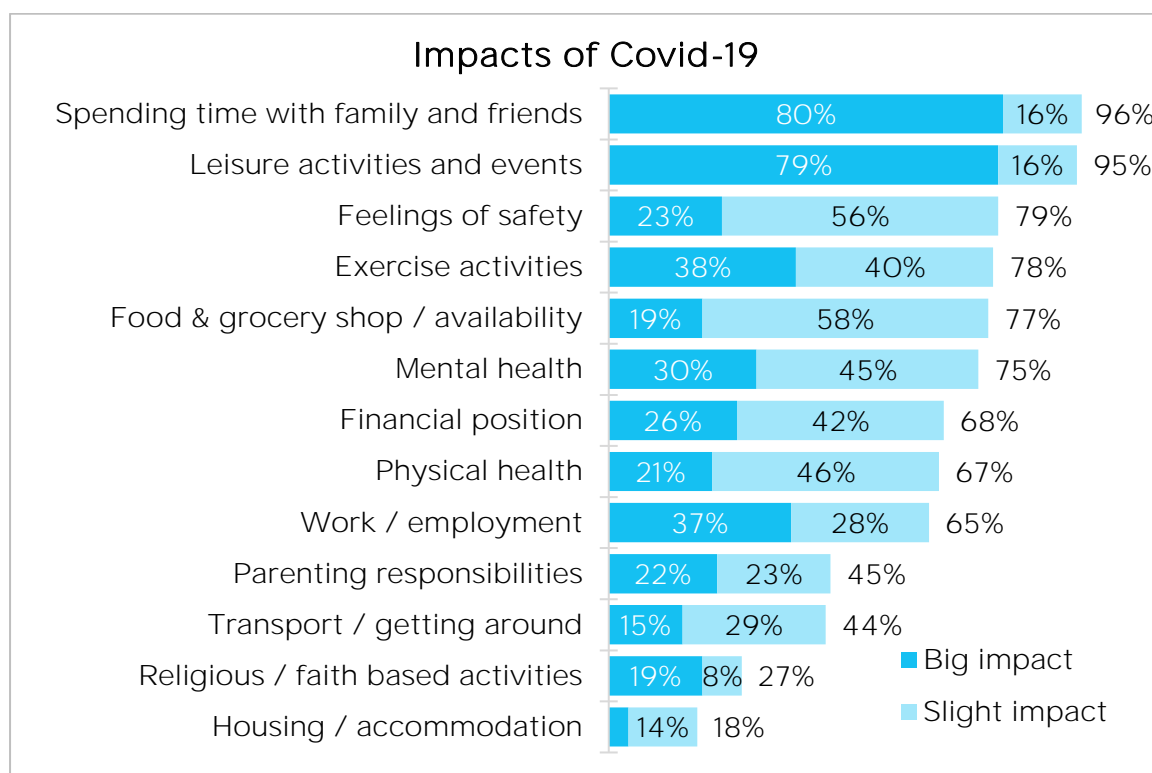
Grid question, rating of each statement. Single answer per statement.

n=857

Respondents were presented with 13 items and asked to rate the extent to which the coronavirus had caused an impact for them. This question does not distinguish between positive and negative impact (as they may experience both), but instead provides a measure of the extent of change in these areas. Findings are based on the weighted representative data to show incidence of impact across the whole community. Later sections explore these impacts in greater detail.

The most widespread impacts of Covid-19 on the community are relating to isolation, leisure, safety and exercise.

Figure 3.3.1 Impacts of Covid-19



Many of these areas have been covered in greater detail in the following sections, including assessing whether impacts are positive or negative.

Since the restrictions, have you been doing the following more, about the same, or less?

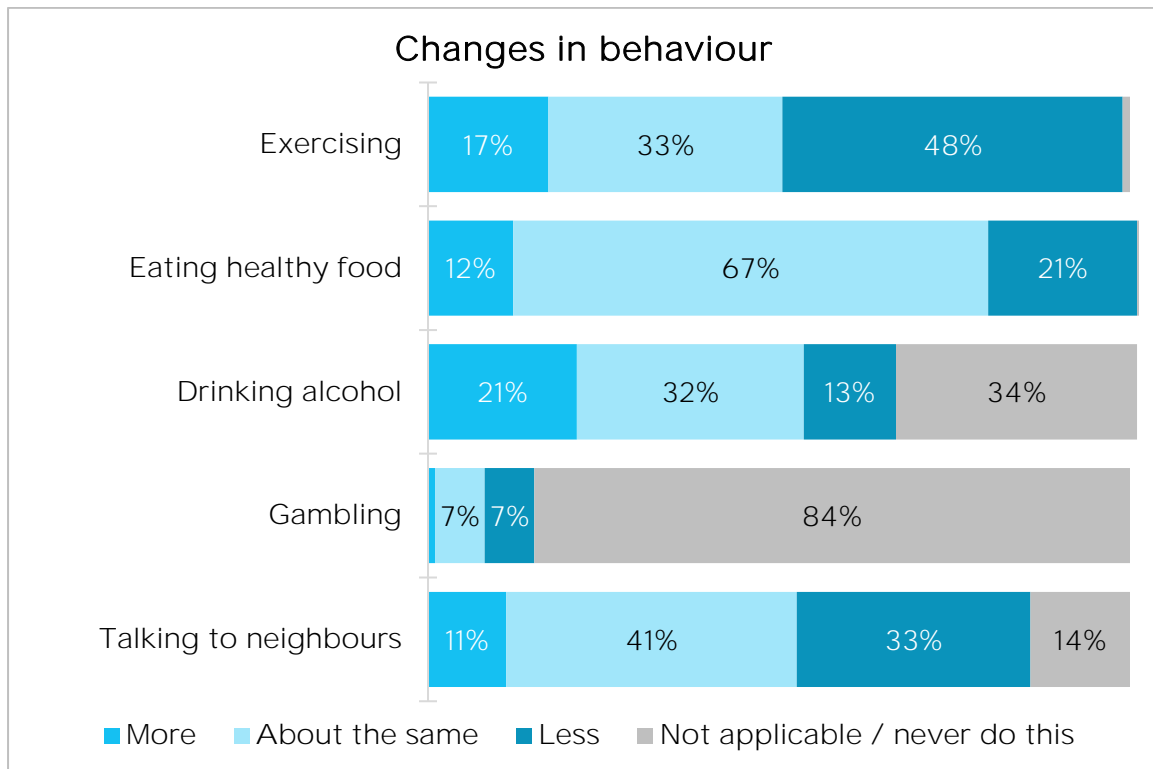
Base: All Respondents

Grid question, rating of each statement. Single answer per statement.

n=859

Since the Covid-19 restrictions many residents have reduced the amount of exercise, reduced healthy eating and increased alcohol consumption.

Figure 3.3.2 Changes in behaviour



These topics are explored in greater detail in the following sections.

3.4 SOCIAL ISOLATION

Social isolation is clearly the primary impact of Covid-19 on the community.



Some insights into the isolation being experienced within the community include:

- Being unable to see family members (26% of sample). This includes people with sick family members and/or family who live in other parts of the county/world who they can't visit;
- Being unable to see friends (15% of sample). This includes children not being able to socialise and the impact it could have on their behaviour and development, as well as not being able to go for coffee or a meal with friends; and
- Other items commonly mentioned in relation to social isolation were loneliness (20 mentions) and not being able to go to church (19 mentions).

A third (33%) said they are talking to neighbours less. A reduction in talking to neighbours is more common amongst:

- Those who speak a language other than English (53%, compared to 28% of those who speak English only);
- Those who own their home (35%, compared to 23% renters); and
- Those in the Hills region (42%), Rowville (39%), and Wantirna & Wantirna South (38%, compared to 23% Boronia and Bayswater). This may be due to these regions having higher instances of non-English speaking respondents.

Despite these setbacks, there are segments of the community who are talking to neighbours more (11%).

Over half of those surveyed (57%, base all respondents, n=1,607) indicated that they expect to be able to see family and friends more in the 6 months subsequent to interview. It is important to consider that health department directives that result in continued isolation could have a considerable negative impact on around half of the population, who expect the isolation aspects to reduce before the end of the year. This expectation was particularly common amongst those aged 65 years and over (71%).

*Not being able to see family,
grandchildren and friends*

Male 65-69

*Being forced online which I feel
is changing my personality and
losing social skills*

Female 40-44

*Young infant can't socialise with
friends or family, possibly
affecting social development.
Can't visit friends with newborns
and offer support*

Female 30-34

*Cannot go around, have meal
outside, meet relatives and
friends.*

Male 60-64

*Inability to socialise with friends and
participate in activities such as
camping, travel and visiting other
locations.*

Female 40-49

*I can't see my father in
aged care only windows or
video calls*

Female 50-59

*Can't socially interact
with friends - getting
pretty depressed alone*

Male 18-24

*Not being able to see your
children and grandchildren,
not being able to hug or give
them a cuddle.*

Female 75-79

*We truly value the time we spend
with close family members which
we have not been able to do
during lockdown periods. This has
been especially difficult for the
grandparents and grandchildren.*

Female 40-44

3.4.1 KEEPING IN TOUCH

What sort of things are you doing to stay in touch with family and friends who don't live with you?

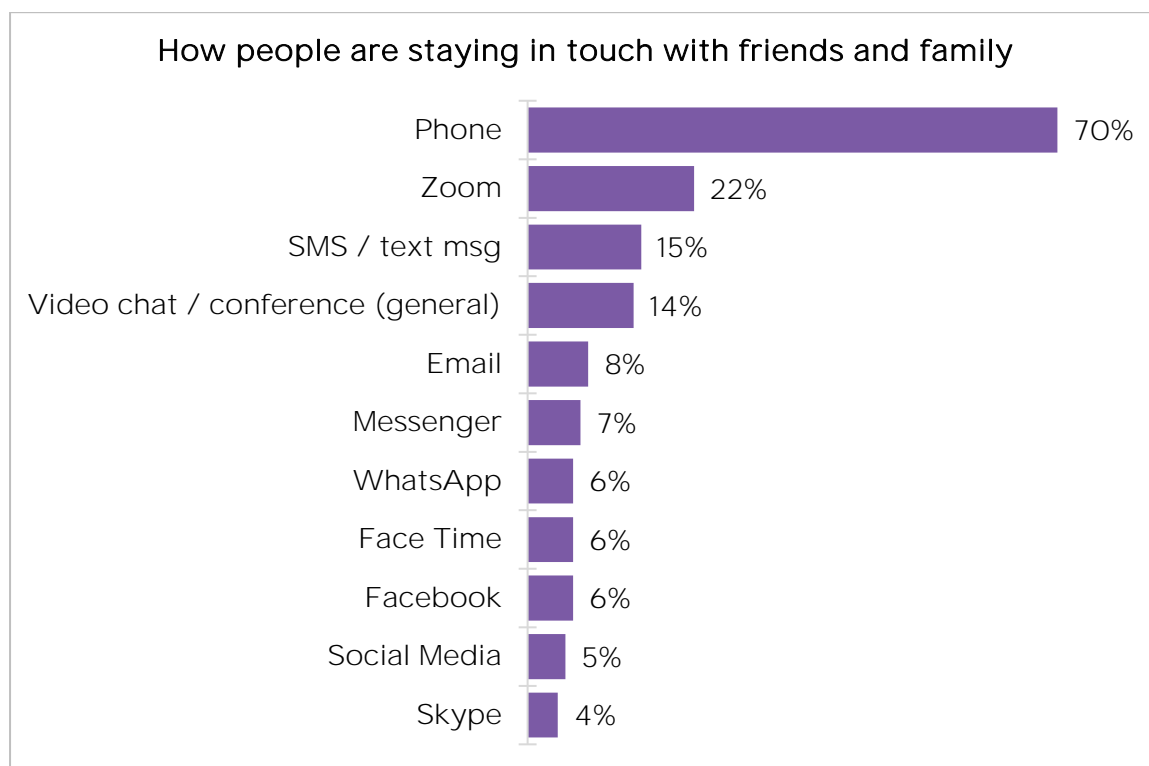
Base: All Respondents

Responses recorded as written text and later coded for ease of analysis.

n=855

The primary method people are using to keep in touch is phone calls.

Figure 3.4.1 How people are staying in touch with friends and family



Key variations in contact methods used by demographics are:

- Employed people more commonly use zoom (24%, 17% amongst those not employed) and/or video chat (18%, compared to 5% not employed);
- Older people more commonly keep in touch over the telephone (85%), whilst younger people (18-29 years) show higher instances of using social media (11%), video chat (26%) and online games / trivia (10%); and
- Use of WhatsApp is particularly common amongst Wantirna and Wantirna South residents (10%).

3.5 MENTAL HEALTH

Covid-19 is having an impact on the mental health of most community members.

14% 75%

Named an aspect relating to mental health as a setback in their life due to Covid-19

Reported an impact on mental health

When mentioning an aspect of mental health as a setback (14%), most used the term 'mental health' without further information. Those who did clarify spoke about things like:

- Isolation negatively impacting on their mental health;
- Loneliness;
- Concern for mental health of children (who are isolated from their friends / unable to socialise); and
- Anxiety, stress, or depression.

Mental health-suffering heightened anxiety.
Female 35-39

My children's education has suffered and I worry about their mental health
Female 45-49

Lack of exercise which leads to mental stress
Male 30-39

I have been at home working for more than 3 months and I am a bit depressed
Female 40-44

Mentally going backward since I use to be on six figures salary as [retracted] and now to JobSeeker payment
Male 45-49

Three quarters (75%) said that COVID-19 was having a big or slight impact on their mental health. Some segments of the community more commonly report a big impact on their mental health. Some of these variations may be due to mental health literacy ('mental health' not being a common concept amongst older people and those who speak a language other than English):

- Females (34%, compared to 25% males);
- 18-29 year olds (47%) and 30-39 year olds (39%, compared to 12% 65+ year olds);
- Those who speak English only (31%, 23% language other than English); and
- Renters (49%, 25% owners).

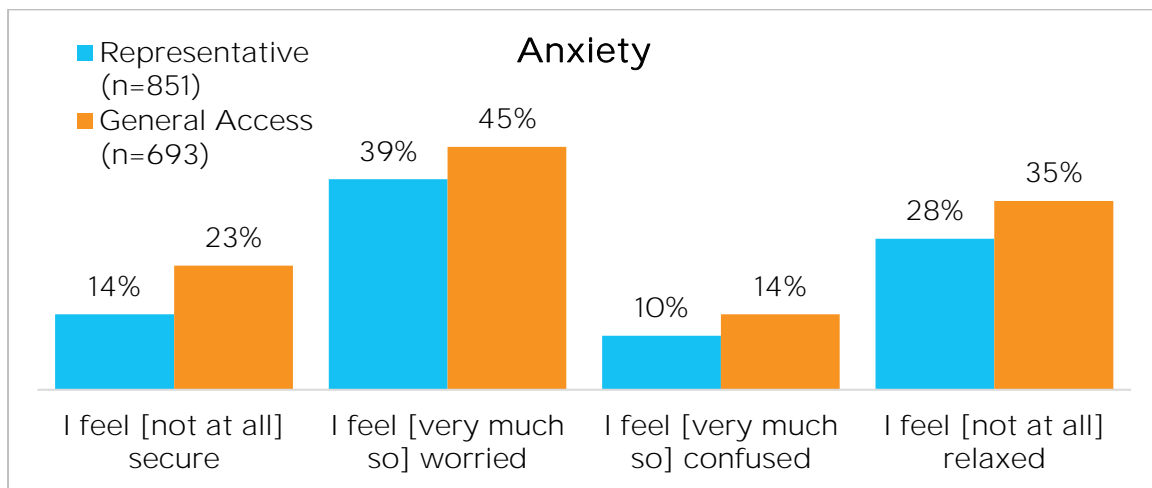
Please rate your feelings at the moment.

Base: All Respondents

Grid question, rating of each statement. Single answer per statement.

To help understand anxiety within the community we ask respondents to provide ratings for four measures from the State-Trait Anxiety Inventory³. This helps understand current mental health amongst the community, as well as providing the ability to track anxiety levels across time, as the pandemic situation changes. The state-wide comparison data which has been collected since March 2020 shows that anxiety levels fell during the easing of restrictions in June, yet since the second lockdown in July they have spiked to higher levels than the start of the pandemic.

The following chart compares the key anxiety measures across the representative survey and the general access survey. This highlights the importance of keeping the two samples separate for analysis designed to understand incidence, as the general access survey is clearly being conducted by those with higher anxiety levels.



Based on the representative data, some segments of the community show higher instances of reporting anxiety measures.

Not at all secure	Very much so worried	Very much so confused
20% Language other than English (11% English only)	45% Females (33% males)	27% Knoxfield & Scoresby (2% Ferntree Gully)
14% home owners (5% renters)	52% Language other than English (34% English only)	
20% below the poverty line (10% above the poverty line)	52% Rowville (29% Boronia & Bayswater, 21% Hills)	
	46% Below the poverty line (33% above the poverty line)	

³ <https://www.apa.org/pi/about/publications/caregivers/practice-settings/assessment/tools/trait-state>

In what ways has the Coronavirus impacted on your mental health?

Base: Representative

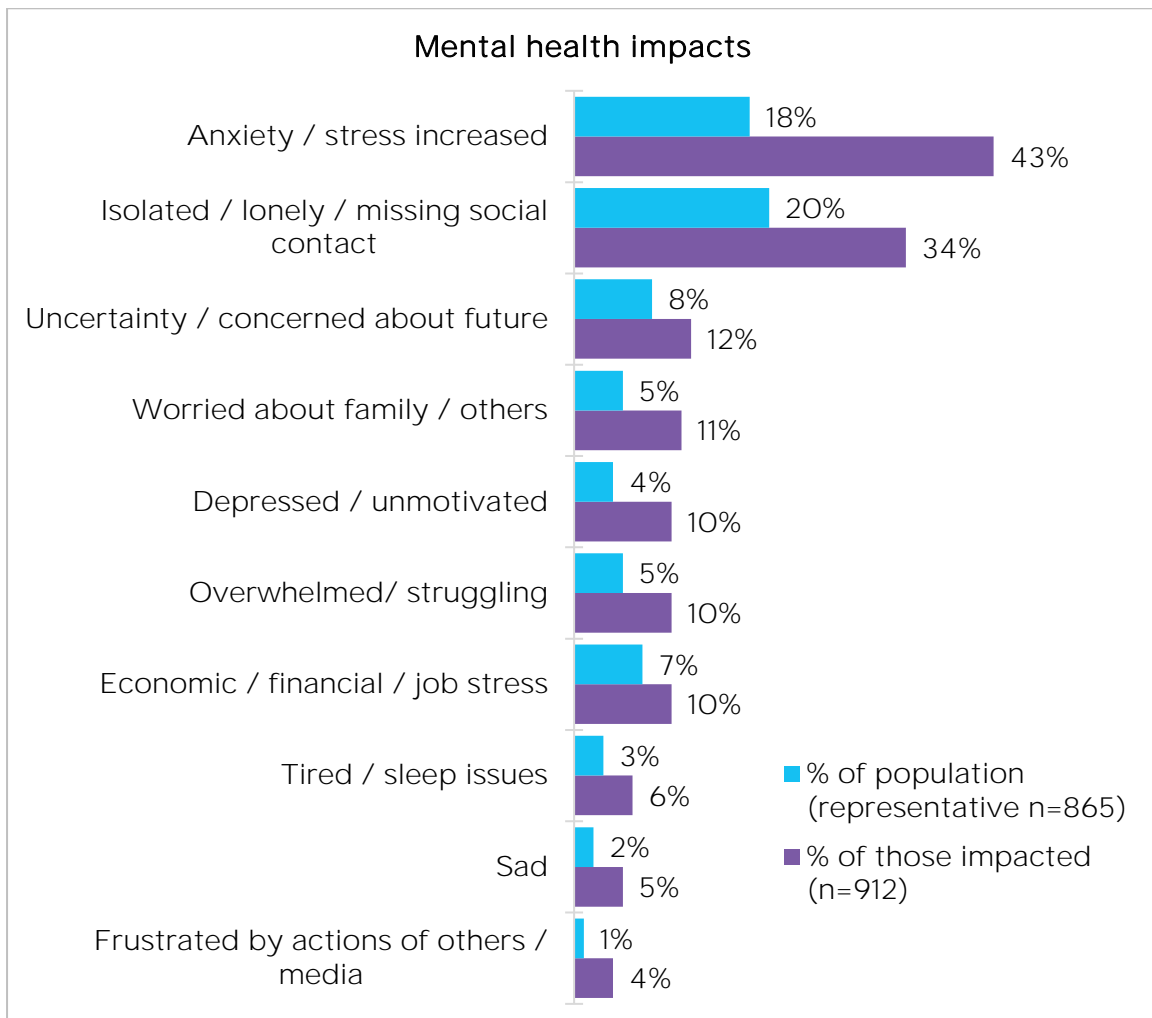
Free-text question. Responses recorded as written text and later coded for ease of analysis.

Base: All respondents

The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population.

Stress, anxiety and isolation are the primary mental health issues faced by the community at the current stage of the pandemic.

Figure 3.5.1 Mental health impacts



Mental health impacts due to isolation are more commonly reported by females (24%, 17% males), 18-29 year olds (29%, compared to 13% 65+ year olds) and renters (30%, compared to 18% owners).

Anxiety and stress was named as a mental health issue by over a quarter of 30-39 year olds (27%) and a notably high 13% of 40-49 year olds indicated they felt overwhelmed or were struggling.

3.6 PHYSICAL HEALTH

Covid-19 is impacting on a range of aspects of physical health. Restrictions are limiting exercise opportunities for many, and reducing healthy eating, which increases the risk of obesity and associated health issues.

In what ways has the Coronavirus impacted on your physical health?

Base: Representative

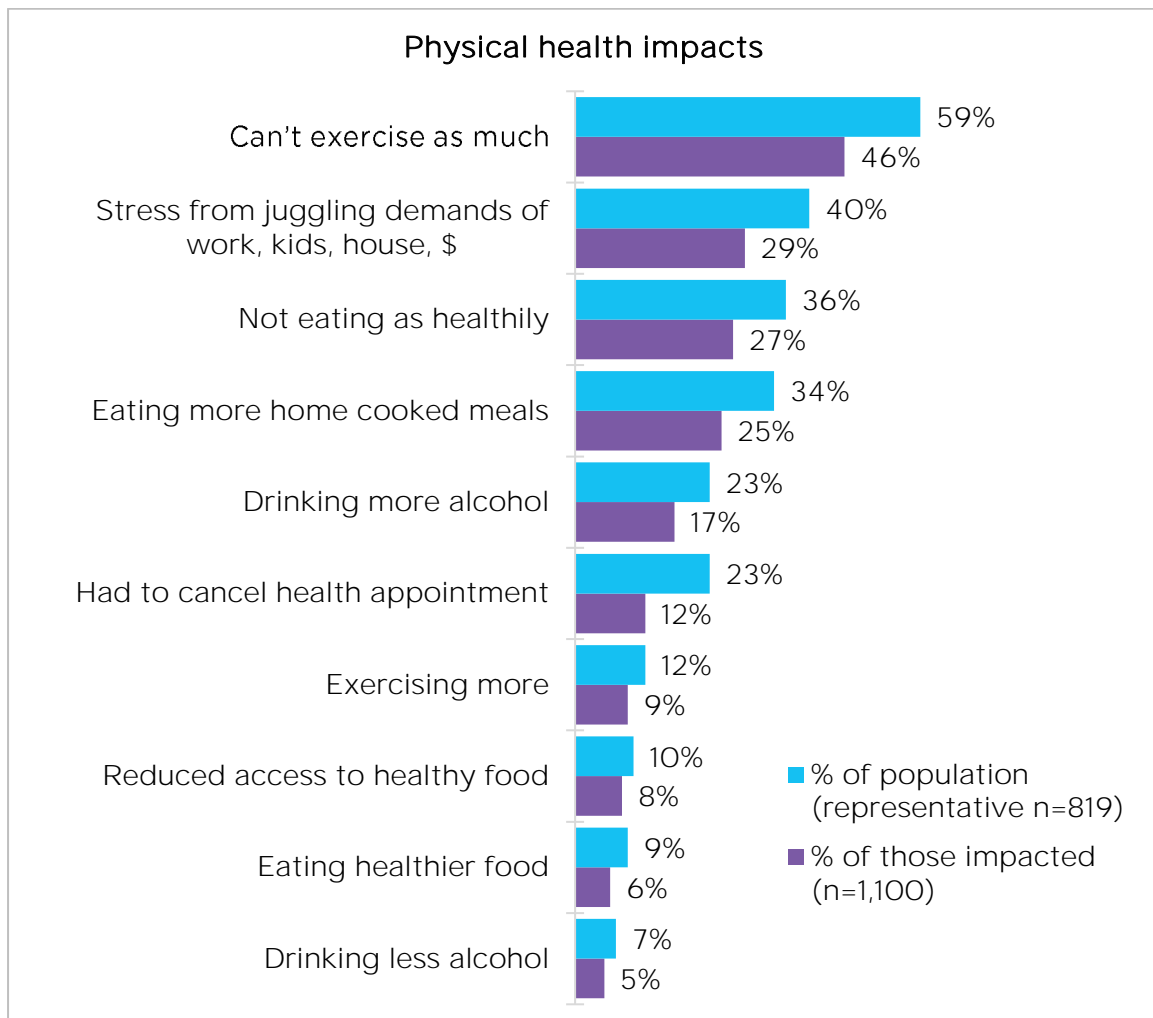
Base: All respondents

Multiple response question.

The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population.

A reduction in the ability to exercise is clearly the primary physical health impact, which has been explored further in the next section.

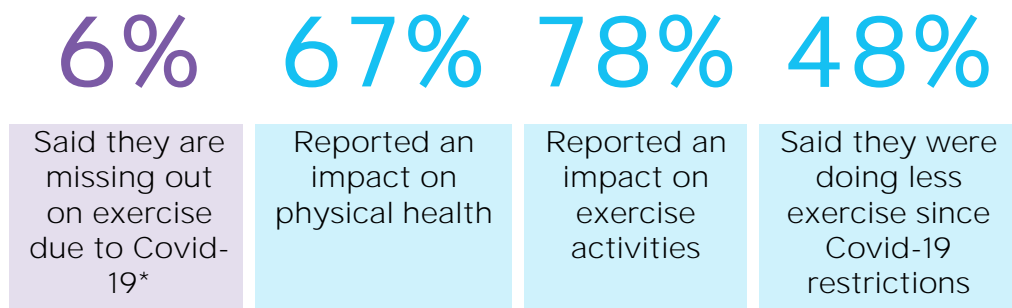
Figure 3.6.1 Physical health impacts



Of concern is the proportion who have cancelled a health appointment (12%), meaning that other health concerns may be unaddressed. This is a more common issue for females (15%, 8% males).

Other, less commonly mentioned physical health impacts (less than 5%) include not being able to buy food, not being able to source medicines and not being able to access normal fitness routine.

3.6.1 EXERCISE



**This represents unprompted mentions, it does not indicate the proportion of the population experiencing this.*

Those **under the age of 40** show higher incidences of doing less exercise (53% 18-29 year olds, 57% 30-39 year olds).

Meanwhile, 17% are doing more exercise. The incidence of doing more exercise is particularly high amongst:

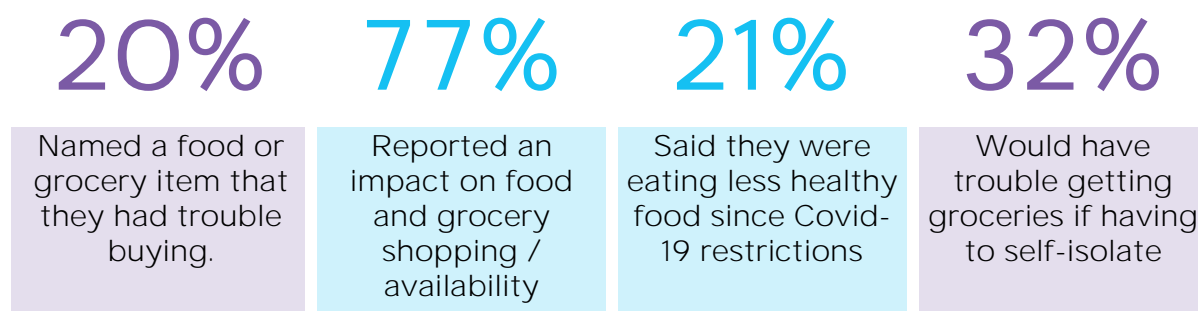
- 40-49 year olds (25%, compared to 13% 65+ year olds);
- Those with children at home (22%, compared to 13% of those with no children); and
- Those living below the poverty line (23%, compared to 16% of those living above the poverty line).

Almost a third (30%, base all respondents, n= 1,607) expect to increase their exercise in the 6 months subsequent to interview.

Males more commonly report not being able to exercise as an issue (50%, compared to 41% females), as do those aged 18-39 (55%, compared to 35% 65+ year olds)

3.6.2 HEALTHY EATING

Access to food and groceries is a basic need at times of emergency.



The incidence of reporting an impact on food and grocery shopping / availability is higher amongst:

- 30-39 year olds (27% said big impact, compared to 12% 50+ year olds);
- Those who speak a language other than English (28%, compared to 16% of those who speak English only);
- Those with children at home (24%, compared to 9% lone person and 13% couples without children);

- Those who live in Rowville and Ferntree Gully (25%, compared to 13% amongst those who live in Boronia and Bayswater; and
- 25% amongst those who live below the poverty line (compared to 15% of those above the poverty line).

A reduction in eating healthy food is more prominent amongst:

- Those under the age of 40 (25% 18-29 year olds, 38% 30-39 year olds);
- Renters (28%, compared to 18% owners); and
- Those who live in Boronia & Bayswater (26%) and Ferntree Gully (25%, compared to 11% Wantirna & Wantirna South).

Meanwhile 19% of 40-49 year olds are eating more healthy food (12% average).

A notable proportion of respondents are preparing more meals at home (34%), however many of these also reported they are not eating as healthily (31% of those who prepare meals at home), suggesting that some people may not have healthy food preparation knowledge or resources.

Whilst overall 32% report that they would have trouble getting groceries if they contracted Covid-19, lone person households are particularly susceptible to this risk, with 44% said they wouldn't be able to get groceries if they caught Covid-19.

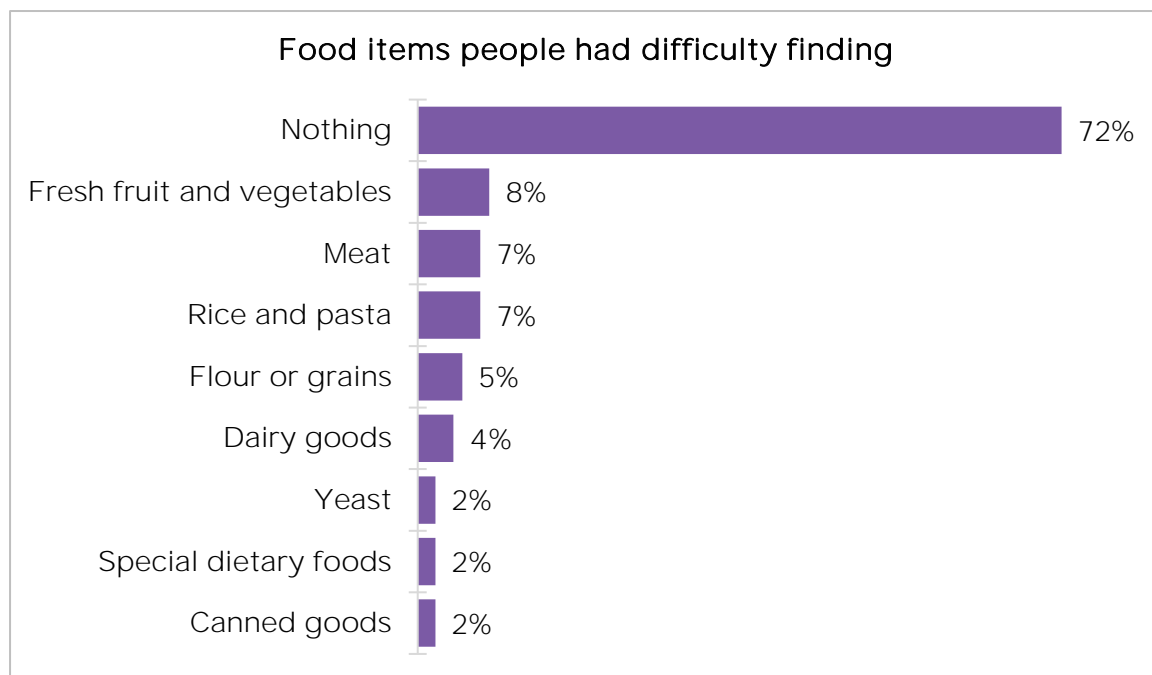
Are you currently having trouble finding any food or groceries?

Base: All respondents

Includes multiple responses
n=1,587

The main food items people were having difficulty obtaining at the time of interview were fresh fruit and vegetables. Quite a few commented that they had more difficulty finding items during the first lockdown but it had since resolved.

Figure 3.6.2 Food items people had difficulty finding



3.6.3 ALCOHOL CONSUMPTION

When assessing the alcohol consumption results it should be considered that the survey fieldwork occurred during July, which coincides with the 'Dry July' program / fundraiser (abstaining from alcohol for the duration of the month of July).

21%

Reported an increase in alcohol consumption

A range of segments indicated they had increased their consumption of alcohol since the Covid-19 restrictions.

- 30-39 year olds (31%) and 40-49 year olds (32%) compared to 15% 18-29 year olds and 11% 65+ year olds; and
- Families with children at home (27%, compared to 15% of lone person or couples without children).

Some more commonly reported drinking less since the Covid-19 restrictions:

- Males (16%, compared to 10% females);
- 18-29 year olds (21%, compared to 7% 30-39 year olds); and
- Lone person households (17%, compared to 7% couples with no children).

3.6.4 CONTRACTING COVID-19

At the time of analysis less than 5 responses had been collected from individuals who had contracted Covid-19, and 22 were awaiting test results. Almost one in ten (9%) said they were self-isolating due to being high risk; these were mostly people aged over 65 years (20% of 65+ year olds self-isolating).

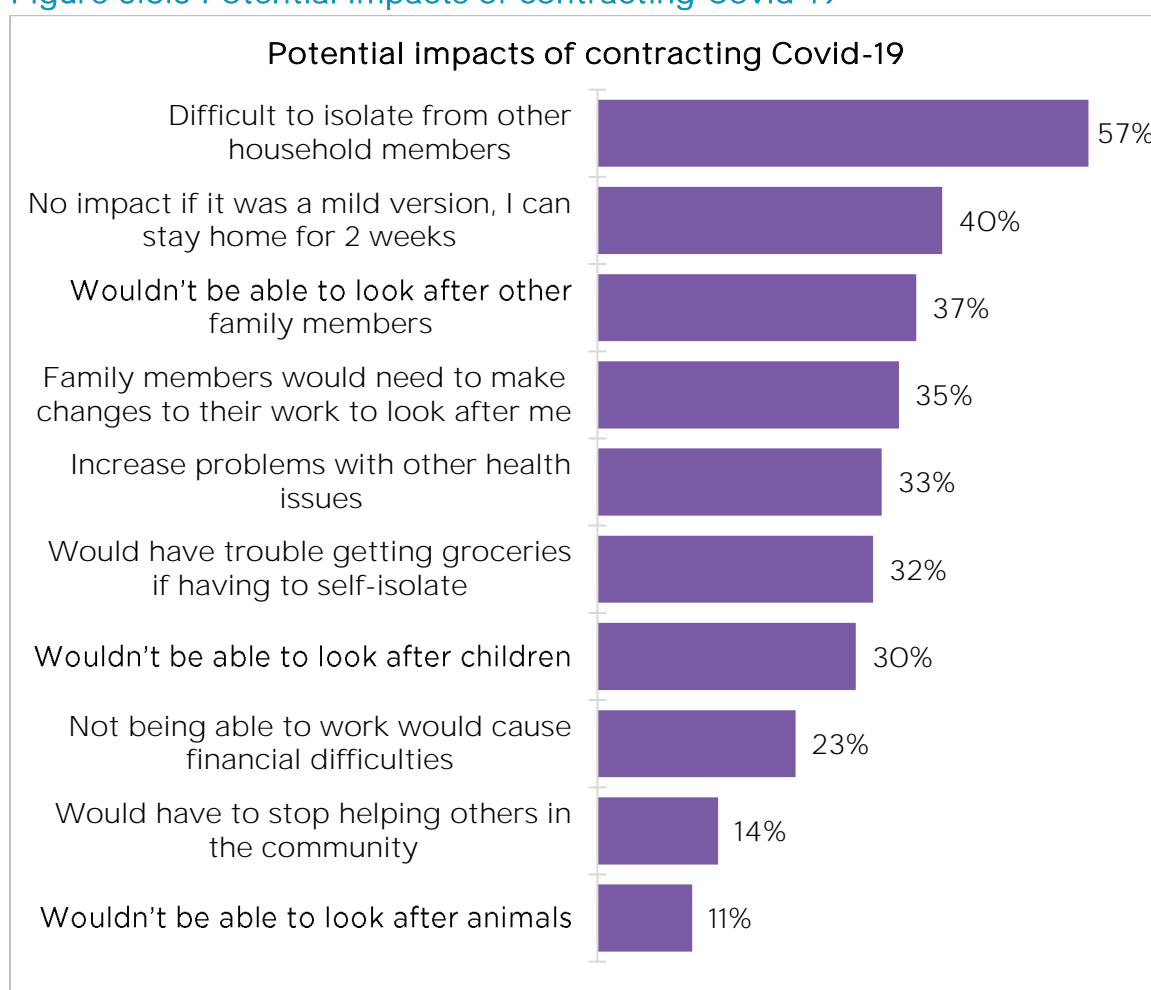
What impact would testing positive to Coronavirus have on you?

Base: All respondents

Includes multiple responses
n=1,600

Four in ten don't foresee any major impacts from contracting Covid-19 if they have a mild version. However, many would have difficulty isolating from family members (particularly those with children, 78%) and a third have concerns that it could increase problems with other health issues.

Figure 3.6.3 Potential impacts of contracting Covid-19

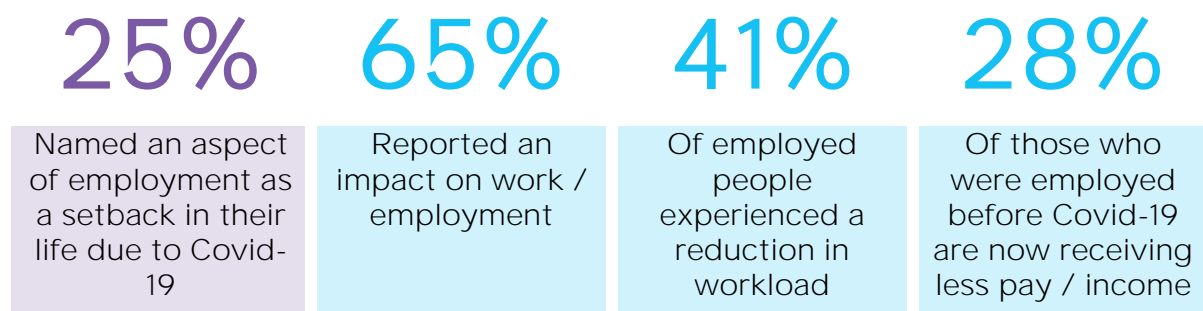


The perception that contracting Covid-19 could increase problems with other health issues was more common amongst 65+ year olds (43%). Older respondents (65+ year olds) show a particularly high incidence of perceiving that contracting Covid-19 would have little impact if it was a mild version (51%).

Other potential impacts mentioned in the free-text box (each by less than 20 respondents) include underlying health issue, Impact on their workplace and not having anyone to care for them.

3.7 EMPLOYMENT

Two thirds (65%) of the community have had their work impacted in some way by Covid-19.



There are no notable variations in specifying an impact in work when comparing across demographics (other than expected variations due to labour force characteristics).

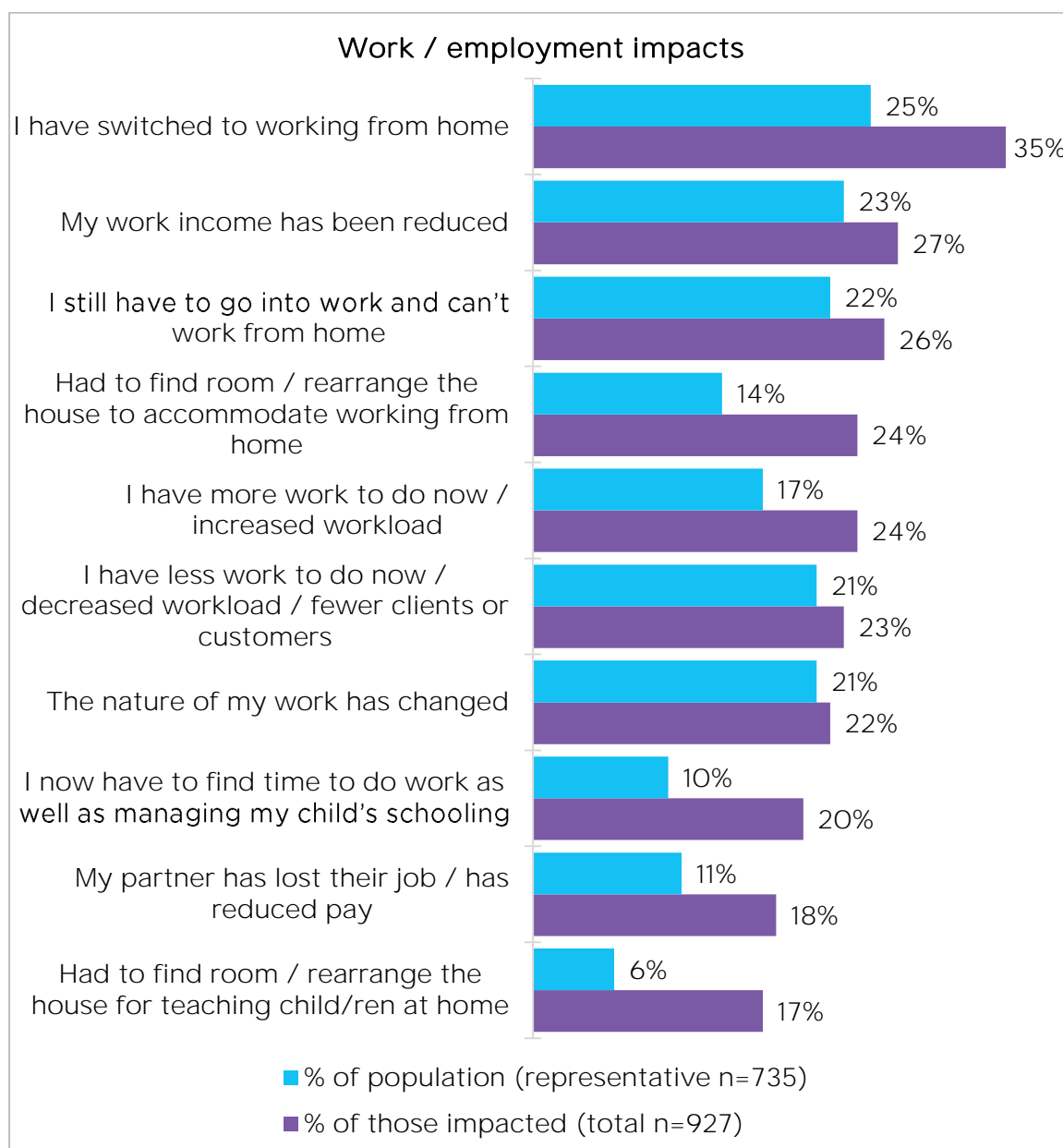
In what ways has the Coronavirus impacted on work/employment?	
Base: Representative	Multiple response question. Only shown to those who had experienced work/employment impacts.
Base: All respondents	The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population. Data has been filtered by those for whom this is applicable (removed 'not applicable' rating).

People are experiencing a broad range of impacts on their work and employment, with the most common being switching to working from home, a reduction in work income, and still having to go into work. 6% (representative survey) mentioned that they had lost their job.

People who answered this question selected, on average, 2.8 impacts. Common pairings include:

- 63% of those who said they have less work to do said their income had been reduced;
- 28% of those who said their partner had lost their job/had reduced pay reported that their own workload had increased; and
- 35% of those who have switched to working from home report an increased workload and 52% said they had to find room / rearrange the house to work from home.

Figure 3.7.1 Work / employment impacts



There were some clear variations in work impacts by demographics:

- 18-29 year olds show a higher incidence of having less work to do / decreased workload (36%, 20% or lower for other age groups) and the nature of my work has changed (42%, 30% or less for other age groups);
- A higher proportion of males indicated that they have switched to working from home (30%, compared to 20% females), have had reduced income (29%, 16% females), and the nature of their work has changed (35%, 17% females);
- 30-29 year olds more commonly report having to adapt their house to accommodate working from home (23%, 8% 18-29 year olds) and find time to help with their child's schooling as well as work (22%, compared to 5% or less for other age groups);
- Those who speak a language other than English show a higher incidence of reporting having lost their job (11%, 6% English only) and switching to working from home (32%, 23% English only), whilst those who only speak

English show a higher incidence of still having to go into work (can't work from home, 24%, 16% languages other than English); and

- Those living below the poverty line show higher instances of losing their job (11%, compared to 4% above the poverty line), having less work to do (30%, 17% above the poverty line), and still have to go to work / can't work from home (34%, 19% above the poverty line).

Over a quarter (28%) of employed people (base: all respondents, n=1.035) expect to be working from home for the next 6 months while 15% expect to go back to working in the office.

3.7.1 CHANGES IN WORKLOAD

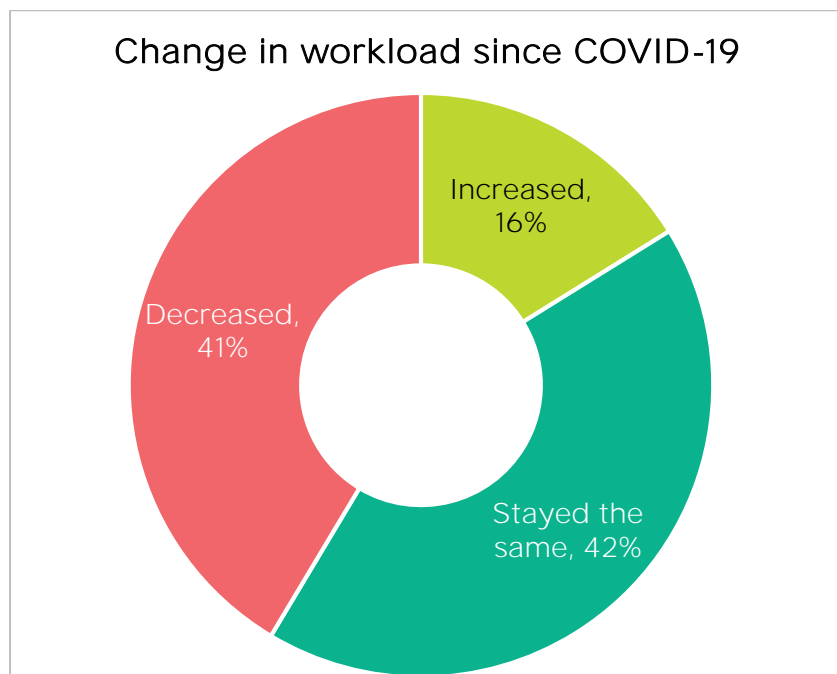
As a result of the Coronavirus pandemic, has your number of working hours / workload...?

Base: Representative

Calculated as percentage of those in employment.
n=603

Those who indicated they were in paid employment prior to Covid-19 were asked if their work hours / workload had increased, decreased, or stayed the same as a result of the pandemic. Four in ten (41%) reported a decrease, with this figure being skewed by a high incidence of decrease amongst 18-29 year olds (56%); the rate of decrease amongst other age groups was between 35% and 37%. One in six (16%) reported an increase.

Figure 3.7.2 Change in workload since Covid-19



When asked how they expect their life to change in the 6 months subsequent to interview (base: all respondents), 13% of employed people (n=1,035) said they expect a decrease in workload and 18% indicated they expect an increase in workload.

A third of all respondents (35%, n=1,600) anticipate that their partner would have to make changes to their work to look after them if they contracted Covid-19. This is more commonly cited as a potential risk by females (38%, compared to 26% males), 30-39 year olds (48%), and those with children (48%, compared to 24% amongst those without children).

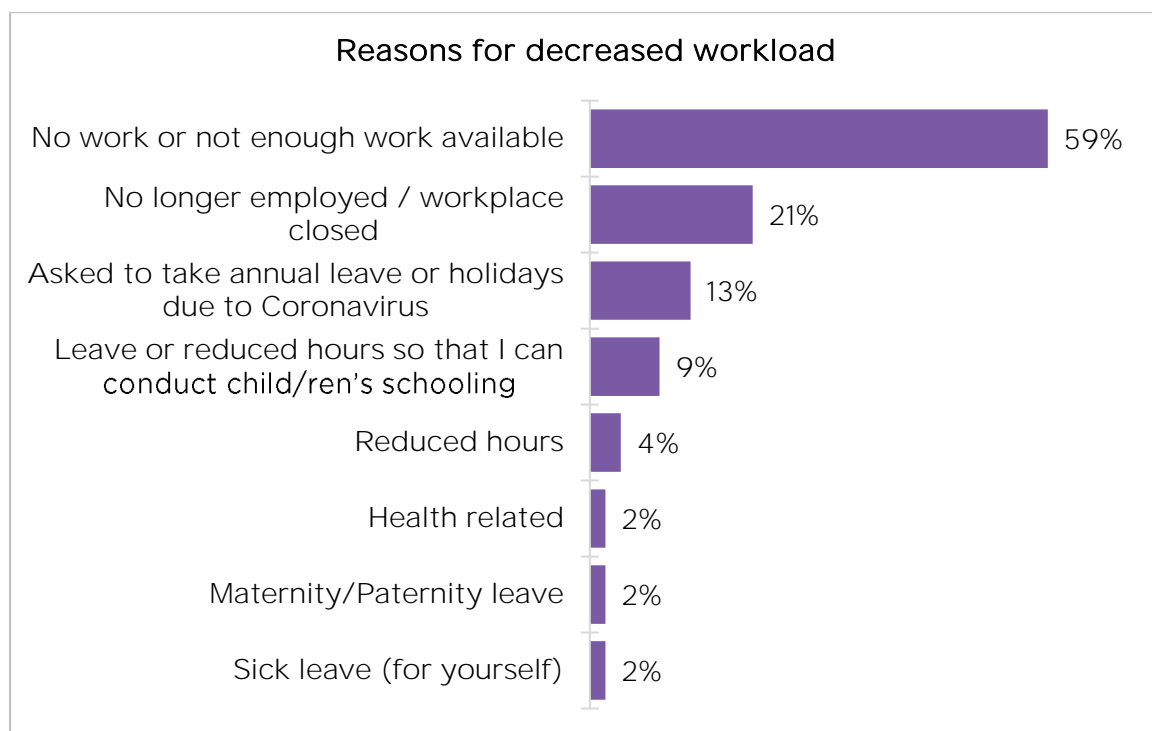
What is the reason for your decreased work hours / workload?

Base: All respondents

Calculated as percentage of those experiencing a decrease in workload.
n=350

The main reason cited for decreased workloads were there not being any work available. Around one in ten of those with reduced work hours said they were asked to take their annual leave, and a similar proportion took leave to home-school children.

Figure 3.7.3 Reasons for decreased workload



3.7.2 BUSINESS CHANGES

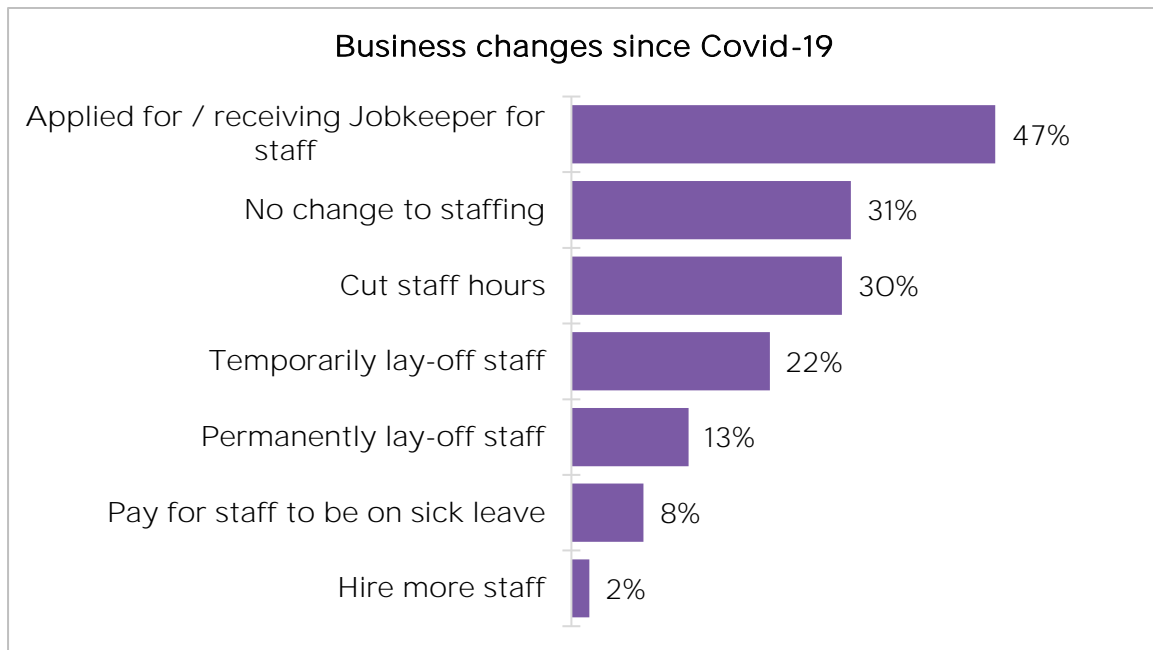
What is the reason for your decreased work hours / workload?

Base: All respondents

Calculated as percentage of those who own a business with staff (n=88)

Half of respondents who said they own or manage a business with staff (n=88) said they had applied for JobKeeper for their staff. Only 31% reported no changes to staffing since the start of the pandemic.

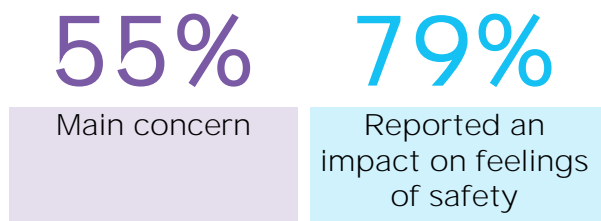
Figure 3.7.4 Business changes since Covid-19



State-wide data collected since March 2020 shows very little change in employment and work experience over time, suggesting that these impacts occurred early on in the pandemic and are continuing unabated.

3.8 SAFETY

The majority of safety concerns stem from fear of contracting Covid-19, however there is also a concerning number reporting anger and violence at home. The most salient safety concerns relate to behaviours of others increasing the risk of Covid-19 transmission, rather than typical public safety issues (violence and theft).



Almost four in five respondents (79%) said that Covid-19 had impacted on their feeling of safety. Segments who more commonly report a big impact on safety include:

- Females (27%, compared to 18% males);
- 30-49 year olds (29%, compared to 12% 18-29 year olds); and
- Those who speak a language other than English (34%, compared to 19% of those who speak English only).

Q6. In what ways has the Coronavirus impacted on your feelings of safety?

Base: Representative

Multiple response question. Only shown to those who had experienced feelings of safety impacts.

Base: All respondents

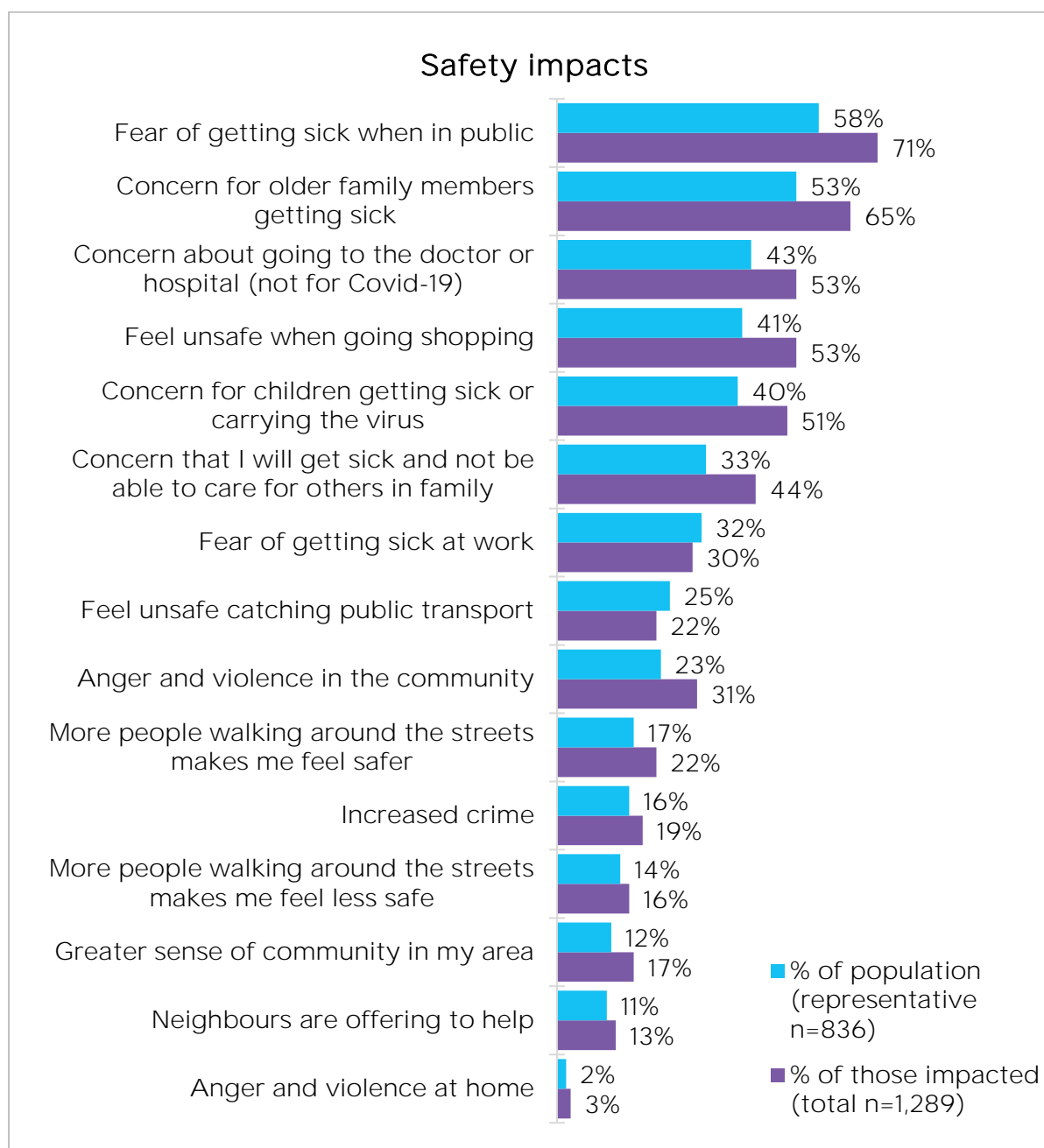
The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population.

There are three common themes within the responses provided for impacts on safety. Almost all of those who said there had been an impact on safety mentioned an impact relating to the fear of getting sick (net 92%). Furthermore, 72% of those who said they had experienced a safety impact mentioned something to do with concerns about safety in public spaces (including work and public transport).

When extrapolating as an incidence across the whole community (representative sample, whole sample, not just those who specified safety impacts) findings suggest that while many have a fear of themselves or family members getting sick (76%), over half (58%) have safety fears when in public, and around a quarter (26%) reported improvements to their safety (neighbours offering to help, greater sense of community, more people in the streets feels safer).

Fear of getting sick was particularly common amongst households with children (83%), employed people (80%), and those under the age of 40 (81%). Specifying a fear relating to a public space was more common amongst those living in Wantirna and Wantirna South (69%), and those who speak a language other than English (66%). Selecting an answer relating to improved safety was more common amongst residents in the Rowville (31%) and Hills (42%) regions, and those who only speak English (28%).

Figure 3.8.1 Safety impacts



The incidence of indicating that Covid-19 has had an impact on feelings of safety concerning anger and violence in the community is higher amongst:

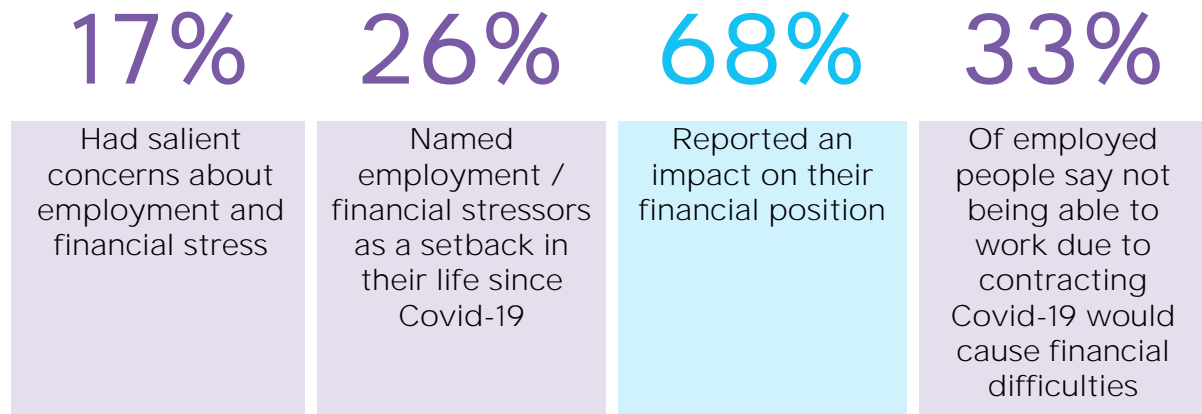
- Those who live in the Hills region (40%, compared to 18-22% of those in Boronia, Bayswater, Rowville and Ferntree Gully); and
- 30-39 year olds (32%, compared to 17% 65+ year olds).

Of the 44 respondents who selected the 'anger and violence at home' safety impact (family violence measure):

- 75% were female;
- 57% were aged 40-64;
- 84% only speak English at home;
- 70% were from households with children at home; and
- 66% were owner occupiers.

3.9 FINANCIAL VULNERABILITY

Financial vulnerability is a primary impact of Covid-19 on the community, stemming from loss of jobs and reduced work hours.



A higher proportion of big impact on financial position was reported by:

- 18-29 year olds (37%, compared to 16% 65+ year olds);
- Renters (38%, compared to 23% owners); and
- Those below the poverty line (33%, compared to 19% above the poverty line).

A number of segments showed higher incidences of being likely to encounter financial difficulties if they contracted Covid-19 **and couldn't work**:

- Those with children (30%, compared to 16% of those without children); and
- Renters (30%, compared to 22% owners).

3.9.1 CHANGES IN RENUMERATION

Has your pay/wage changed?

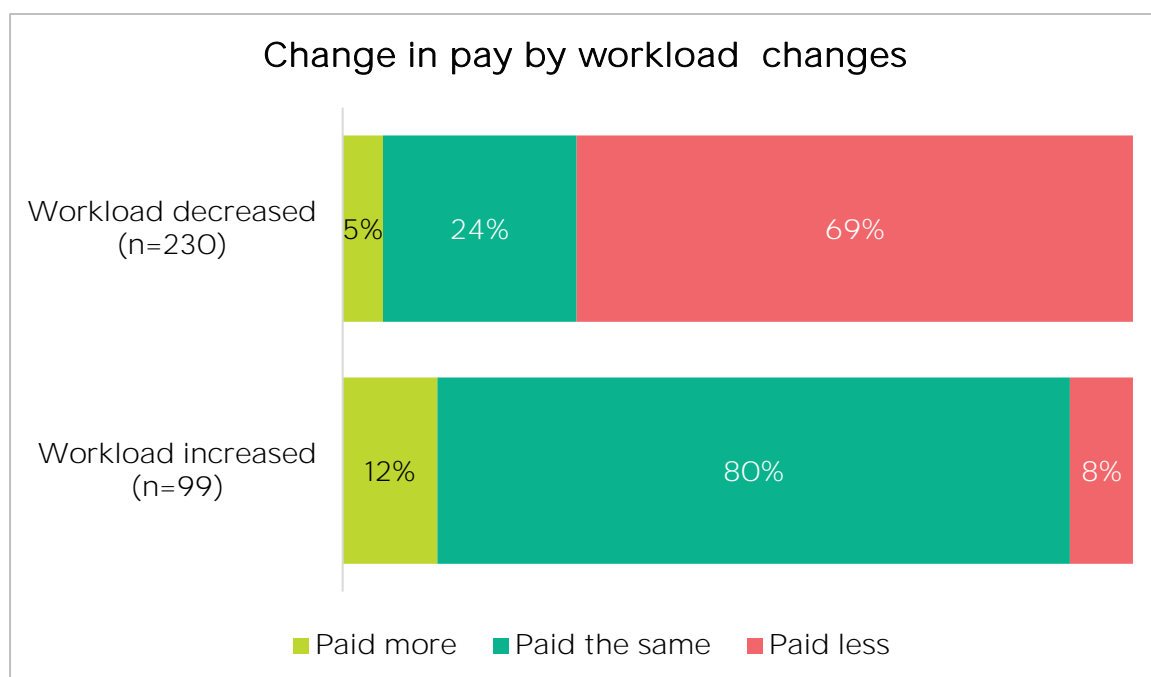
Base: Representative

Calculated as percentage of those experiencing a change in workload.

n=348

Those who said their workload had decreased or increased were asked if their pay rate had changed. One in ten (12%) of those who reported an increase in workload said they were being paid more, whilst 8% were being paid less. Most of those who reported a decrease in workload also reported that they were being paid less (69%), although 24% were still receiving the same amount of pay. When extrapolated across all employed people (n=597), 28% are earning less and 5% are earning more.

Figure 3.9.1 Change in pay by workload changes



A reduction in pay was reported by significantly higher proportions of those in the construction, repairs and maintenance industry (56%).

3.9.2 FINANCIAL SUPPORT

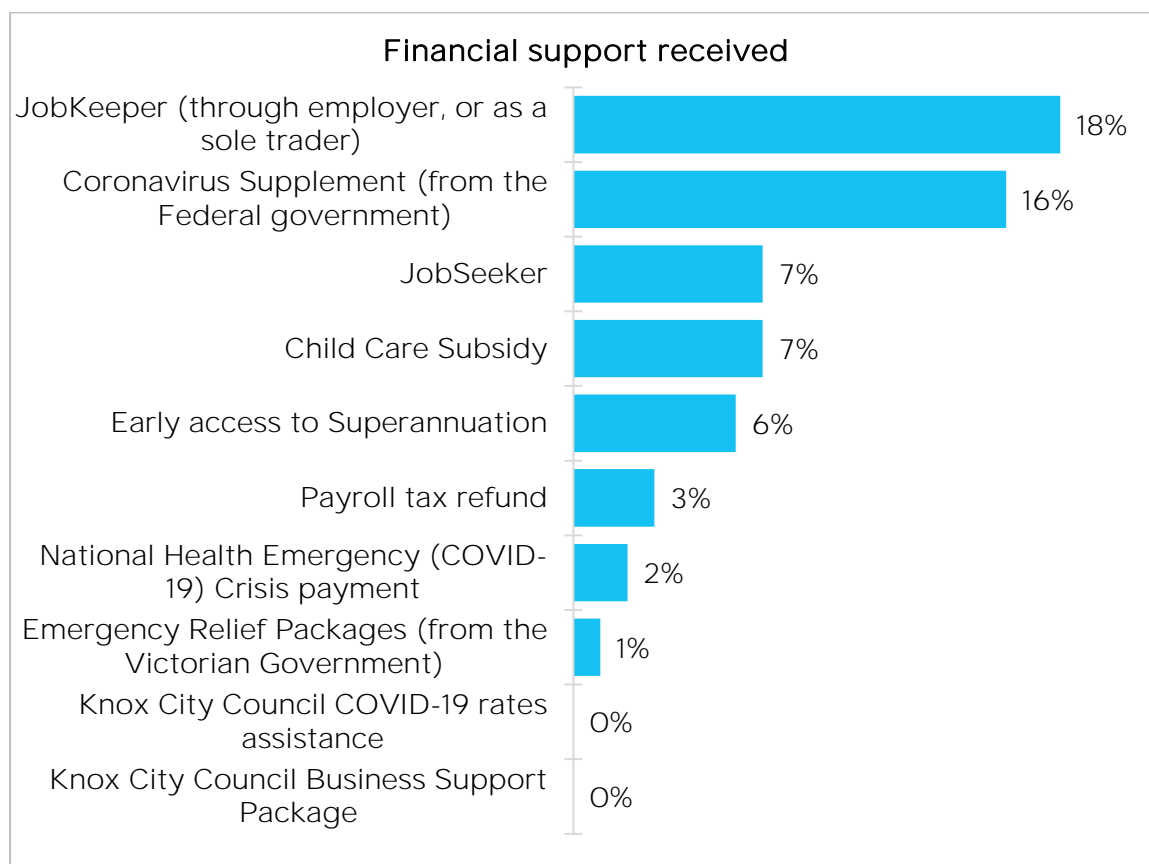
Have you applied for / received any of the following Coronavirus support?

Base: Representative

Each item was promoted with yes, received; applied but not received; no; and not applicable. Representative data is used to show the incidence of receiving support across the broader community. n=812

At the time of writing there had been a high level of uptake of JobKeeper/Jobseeker (net 23%) and the Coronavirus supplement, but very little utilisation of the Knox assistance and support packages.

Figure 3.9.2 Financial support received



Of those who said they had lost their job in the impacts question (total sample), 56% indicated they were receiving JobSeeker or JobKeeper, and 15% said they had applied but not received it.

Four in ten (43%) of those who said they were on JobKeeper or JobSeeker indicated in a later question that they expect to stop receiving it in the next 6 months, and 39% anticipate more financial difficulties.

Other segments showing high incidences of expecting financial difficulties in the 6 months subsequent to interview were those with children at home (28%, 16% without children), and those living below the poverty line (31%, 20% above the poverty line), while relatively few 65+ year olds anticipated financial difficulties (8%, compared to 24%- 29% for other age groups).

3.9.3 GAMBLING

1%

Reported an
increase in
gambling

7%

Reported a
decrease in
gambling

Despite very few reporting an increase in gambling, the data shows that this increase is mostly occurring within key segments of the community:

- Males (3%, 0% females); and
- Those below the poverty line (5%, 0% those above the poverty line).

3.10 PARENTING AND CARER RESPONSIBILITIES

Parents are facing greater pressures during Covid-19 restrictions as a result of the closure of schools and childcare, resulting in parents having to facilitate their child's schooling at home, often juggling work commitments at the same time.

67%

Of those with children reported an impact on parenting responsibilities

56%

Of those with children said they wouldn't be able to look after their children if they contracted Covid-19

37%

Said they wouldn't be able to look after other family members if they contracted Covid-19

28%

Provide unpaid care or assistance to an older person and/ or someone with a disability

3.10.1 PARENTING RESPONSIBILITIES

Covid-19 having an impact on parenting responsibilities is more common amongst those with children aged 0-4 years (93%), and 5-11 years (91%).

Over half of those with children (56%) said they wouldn't be able to look after their children if they contracted Covid-19, which highlights a potential childcare risk if transmission levels increase. The incidence of people perceiving that they wouldn't be able to look after their children if they caught Covid-19 was higher amongst females (34%), employed people (36%) and renters (41%, compared to 29% of home owners).

Have your children stayed home from school or childcare due to Coronavirus?

Approximately what proportion of childcare / schooling responsibilities do/did you personally undertake?

Base: All respondents

To maximise understanding (larger sample size) all respondents were included in the analysis of these questions.

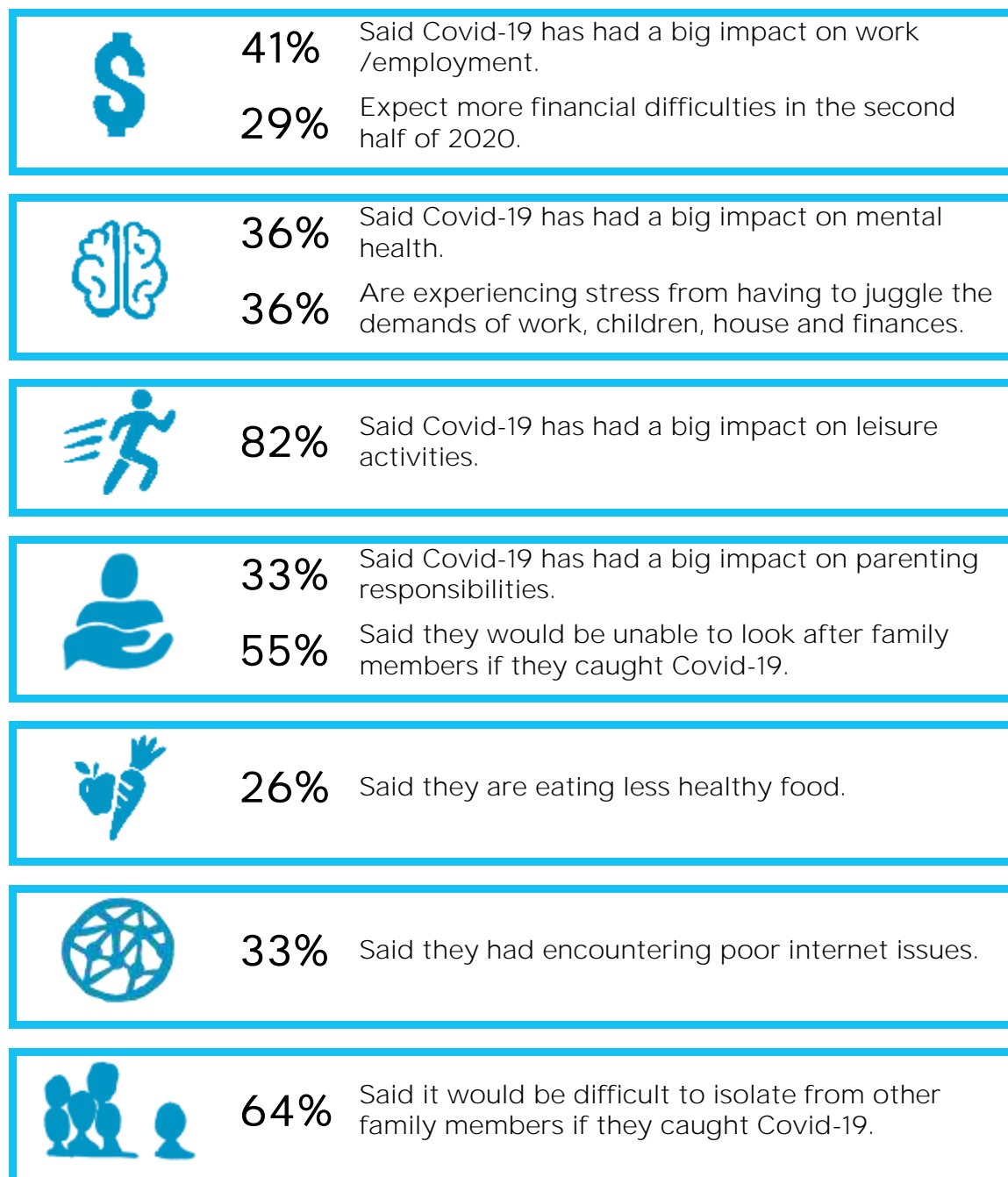
Of those with children aged 5-17 years old (all respondents, n=433) 94% said their children had been home-schooled at some stage during the pandemic, with 77% saying they were home-schooled at the time of completing the survey.

On average, 72% of females reported doing 60% or more of the home schooling, compared to 28% males (representative sample, n=421).

Amongst couples with children living at home, 66% of employed females said they do 60% or more of the home schooling, compared to 27% of employed males.

3.10.2 UNPAID CARE

Over a quarter (28%) of all survey respondents indicated that they provide unpaid care to an older adult or person with a disability. The data reveals a number of challenges that are disproportionately experienced by those who provide unpaid care:



3.11 HOUSING

The incidence of reporting an impact on housing is relatively small, and when people are impacted it is primarily through utilisation of space. However there is a small segment who are at high risk of homelessness.

18%

Reported an impact on housing / accommodation

The incidence of reporting an impact on housing / accommodation (big or slight impact) was significantly higher amongst:

- 18-29 year olds (25%);
- 30-39 year olds (29%);
- Renters (26%); and
- A higher proportion of those living in Knoxfield and Scoresby (12%) report a big impact, compared to just 2% in Boronia, Bayswater and 1% in Rowville.

Housing impacts are seldom reported by those aged over 65 years (7%).

In what ways has the Coronavirus impacted on your housing / accommodation?

Base: Representative

Multiple response question. Only shown to those who had experienced housing impacts.

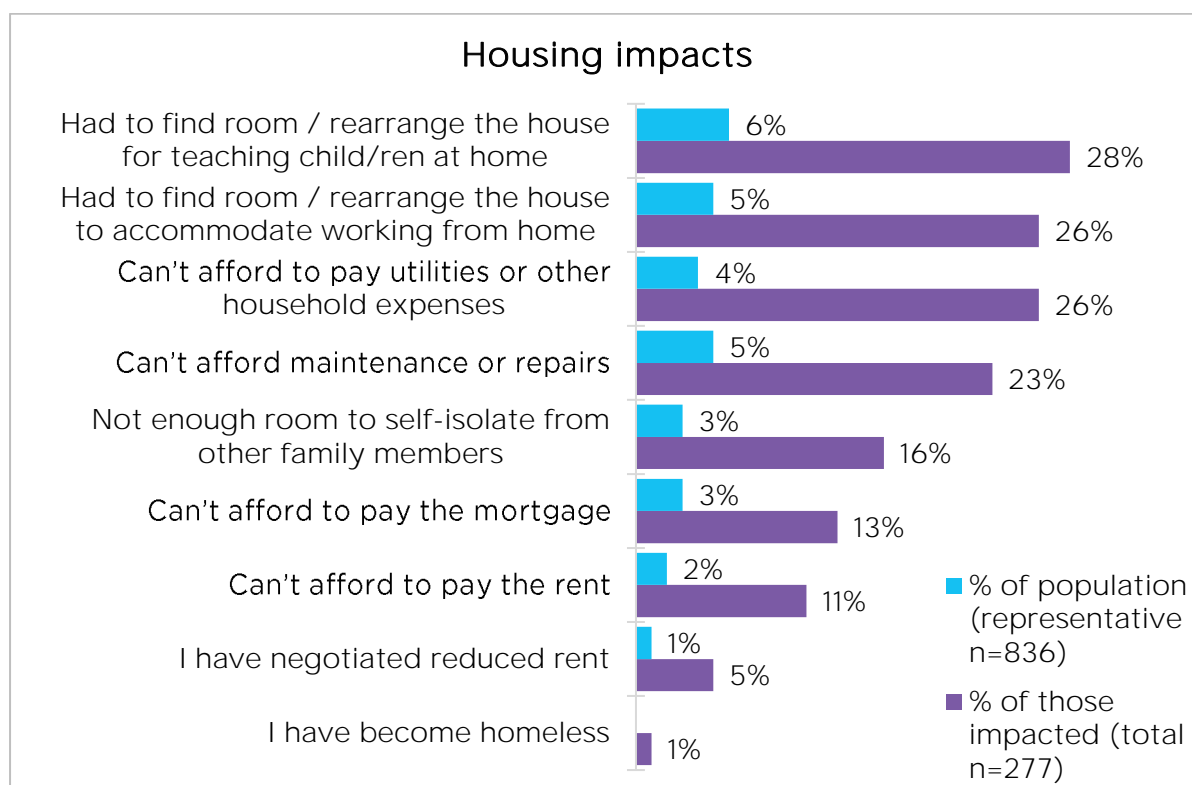
Base: All respondents

The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population.

Those who said they had experienced an impact relating to housing / accommodation were then asked to indicate what that impact has been. Of those experiencing an impact across the entire research database (purple bar in following figure) over a quarter reported rearranging their house for home schooling, rearranging the house to work from home, and/or being unable to afford household expenses.

Using the representative sample to extrapolate across the whole population (blue bar in following figure), research findings suggest that a net of 10% had to find room in their house for work, school and/or isolation, while a net of 8% indicated one or more items relating to not being able to afford household upkeep (maintenance, mortgage, rent).

Figure 3.11.1 Housing impacts



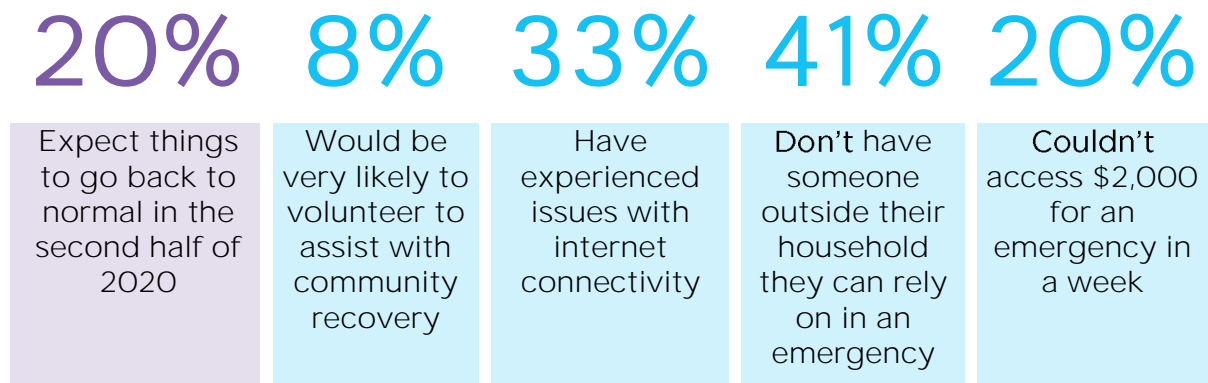
Being unable to afford household upkeep is more common amongst (incidence using representative sample):

- 30-39 year olds (17%);
- Lone person households (11%); and
- Households below the poverty line (12%).

Overall, 4% of the representative sample (representing the overall population) indicated that **can't afford mortgage or rent**, and therefore may be at risk of homelessness. The incidence of not being able to afford mortgage or rent is higher amongst those who speak a language other than English (8%) and renters (8%),

Renters (19%), 30-39 year olds (18%), females (13%), and families (13%) more commonly have space issues (have to rearrange their house for work, childcare or would have trouble isolating).

3.12 RESILIENCE



There were 53 respondents in the whole sample who indicated that they have a disability where they need help with self-care, body movement or communication activities. In most cases findings for this segment were similar to overall results, with the exception of:

- 17% indicated they had difficulties accessing services or assistance due to internet connection problems (compared to 5% of those without a disability);
- 58% perceive that contracting Covid-19 could cause problems with other health issues (compared to 32% of those without a disability); and
- 70% said there is someone outside their household they can rely on in an emergency (compared to 56% of those without a disability).

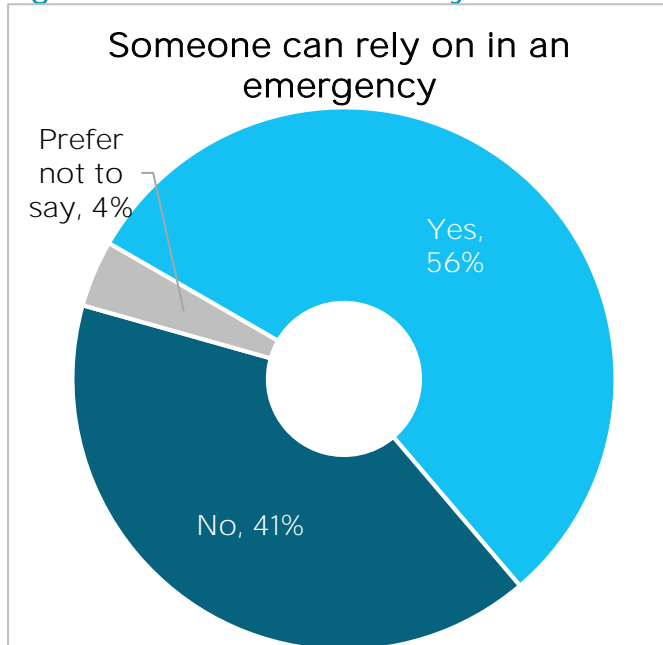
Is there someone outside your household you can rely on to regularly care for you or your children in an emergency?

Would your household be able to find \$2,000 for something important within a week?

Base: Representative

Representative sample used to provide incidence measures across the whole community.
n=849/858

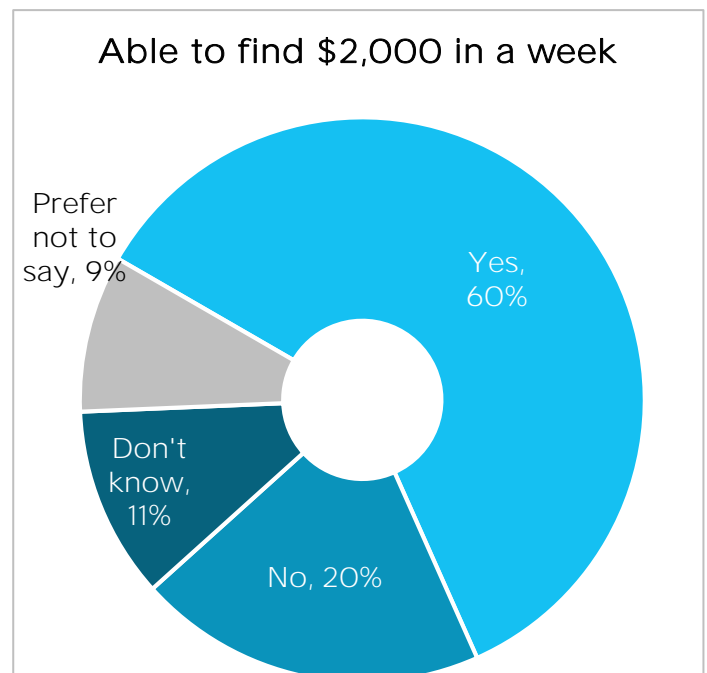
Figure 3.12.1 Someone can rely on in an emergency



Over half of households (56%, representative sample, n=849) said there was someone outside their household they could rely on in an emergency, leaving 41% with no one they can rely on. Not having someone that they can rely on is more common for employed people (43%), males (47%), 40-49 year olds (51%), and those with children (45%).

Figure 3.12.2 Able to find \$2,000 in a week in an emergency

Over half of households (60%, representative sample, n=858) said their household would be able to find \$2,000 for something important within a week, leaving 20% who couldn't and 11% who didn't know (9% chose not to provide an answer). Not being able to access \$2,000 is more common for those on JobSeeker or JobKeeper (29%), 40-49 year olds (27%), lone person households (24%), renters (32%) and those who live below the poverty line (39%).



How do you expect your life will change in the next 6 months?

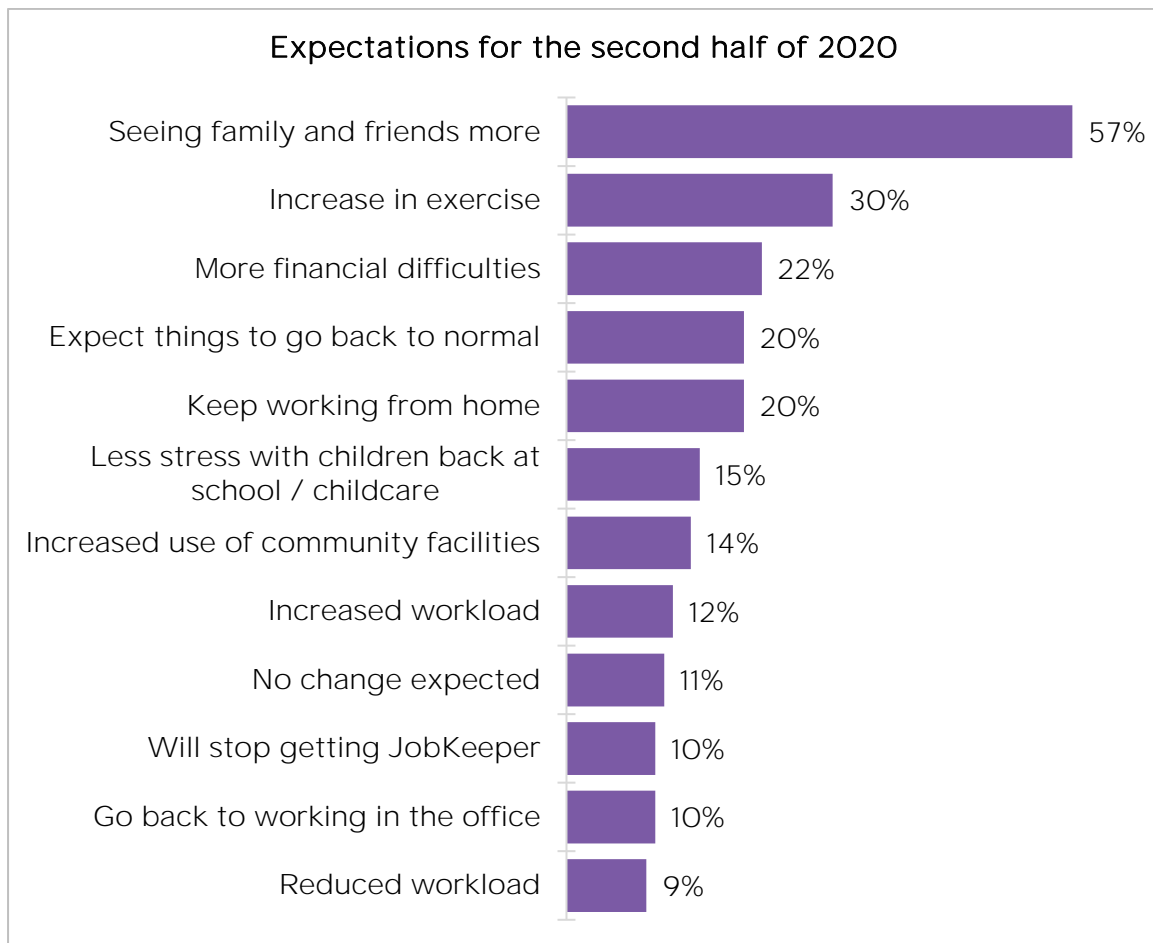
Base: All respondents

Multiple responses allowed.
n=1,607

There are widespread beliefs in the community that things will start to return back to normal in the latter half of 2020. Should restrictions continue it is important to consider the flow-on effects on people's mental health if their expectations for lifestyle improvements are not met.

There are also many who anticipate a range of changes that could impact on resilience, such as more financial difficulties (22%) and no longer getting JobKeeper (10%).

Figure 3.12.3 Expectations for the second half of 2020



3.12.1 VOLUNTEERING

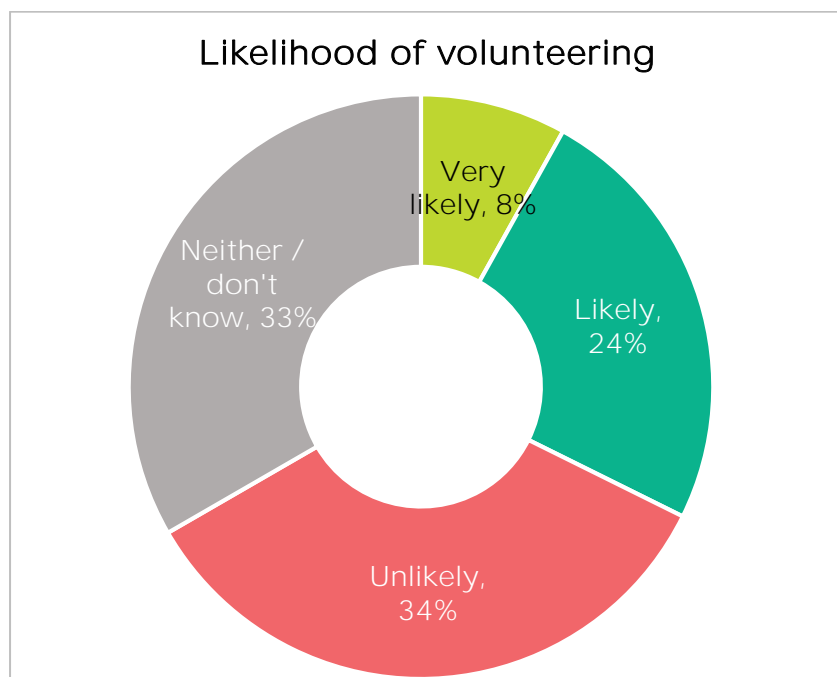
How likely or unlikely would you be to volunteer to assist with community recovery from Coronavirus?

Base: Representative

Representative data used to understand likely incidence.
n=862

When asked if they would volunteer to assist with community recovery, almost one in ten said they would be very likely to do so. The very likely component of the rating scale is a more accurate measure of potential action, as 'likely' people often mean well, but don't end up acting.

Figure 3.12.4 Likelihood of volunteering



The only sub-group to show a notably higher incidence of saying they would be very likely to volunteer was those who live under the poverty line (15%).

Notably high instances of indicating they would be unlikely to volunteer occurred amongst 65+ year olds (44%).

3.12.2 INTERNET CONNECTIVITY

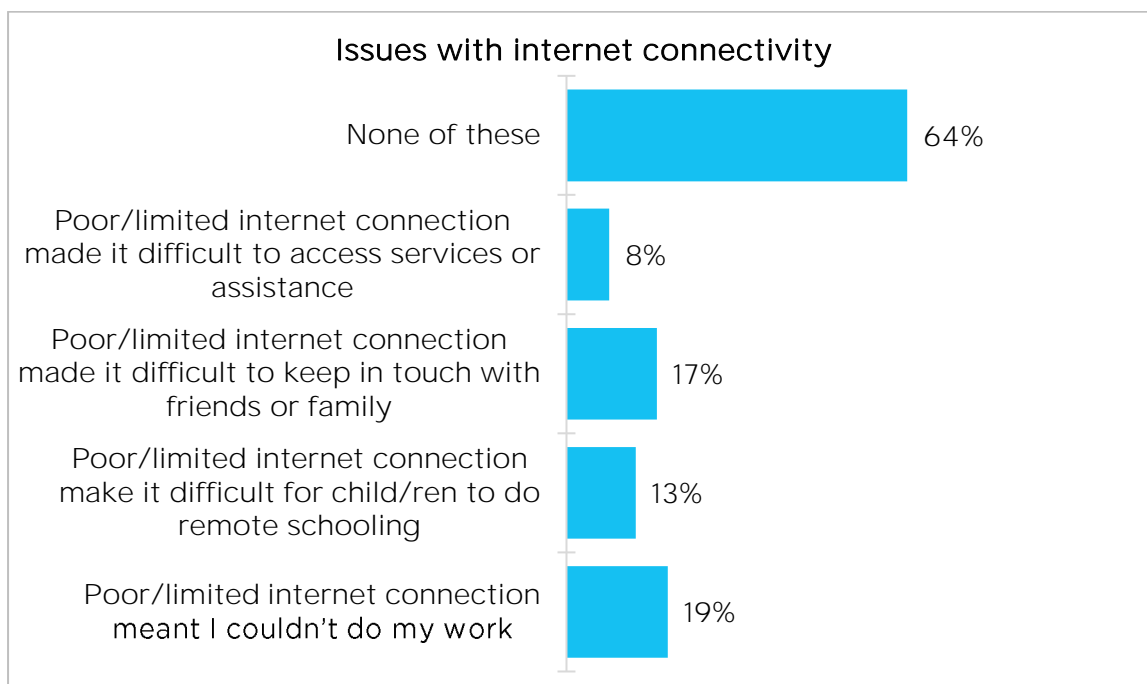
Have you encountered any of the following technical difficulties since the Coronavirus pandemic started?

Base: Representative

Representative data used to understand likely incidence. Includes multiple responses.
n=851

A third of the community reported issues with their internet that impacted on their work, home-schooling, socialising, and/or access to services (Net 33%).

Figure 3.12.5 Issues with internet connectivity



Incidence of experiencing internet connectivity issues is higher amongst those who are employed (36%), 18-29 year olds (55%), those who live below the poverty line (40%), those with children at home (42%), and those who live in the Hills (51%) and Ferntree Gully (41%) regions.

3.12.3 SUPPORT SERVICES

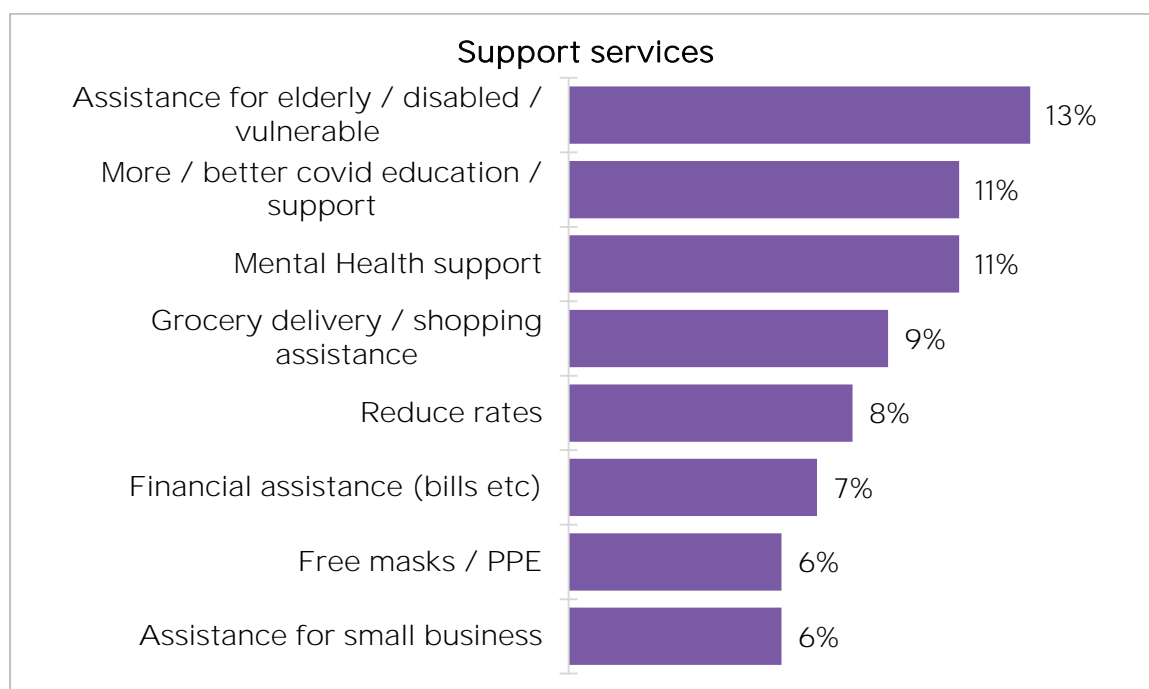
Please tell us about any services you would like to see provided by service providers or Councils to help respond to life changes due to the Coronavirus

Base: All respondents

Responses recorded as written text then coded into themes.
n=618

When asked to write in any services they would like to see provided by service providers or Councils to help respond to life changes due to Covid-19, the most common ideas put forth related to assisting vulnerable members of the community, better communication specific to Covid-19 and mental health support.

Figure 3.12.6 Support services



There was an extensive list of themes (each with 5 or more comments). The full list is as follows:

Assistance for elderly / disabled / vulnerable	13%
Mental health support	11%
Provide more / better Covid education/ support	11%
Grocery delivery /shopping assistance	9%
Reduce rates	8%
Financial assistance (bills etc.)	7%
Assistance for small business	6%
Free masks / PPE	6%
Support for socially isolated	5%
Cleaning / waste management / litter	5%
Further enforcement of lockdown	4%
Support for homeless / those in need	4%

Covid testing improvements / expansion	4%
More kinder / child care	4%
Provide jobs / training	4%
Create safe spaces for activity	3%
NBN / internet improvement	3%
More detailed location info about outbreak	2%
Social connections	2%
Open playgrounds / less enforcement of lockdown	1%
More MCH services	1%
Provide Ipads	1%
Help / promote / sports / clubs	1%
Transport services	1%

3.12.4 FUTURE FOCUS

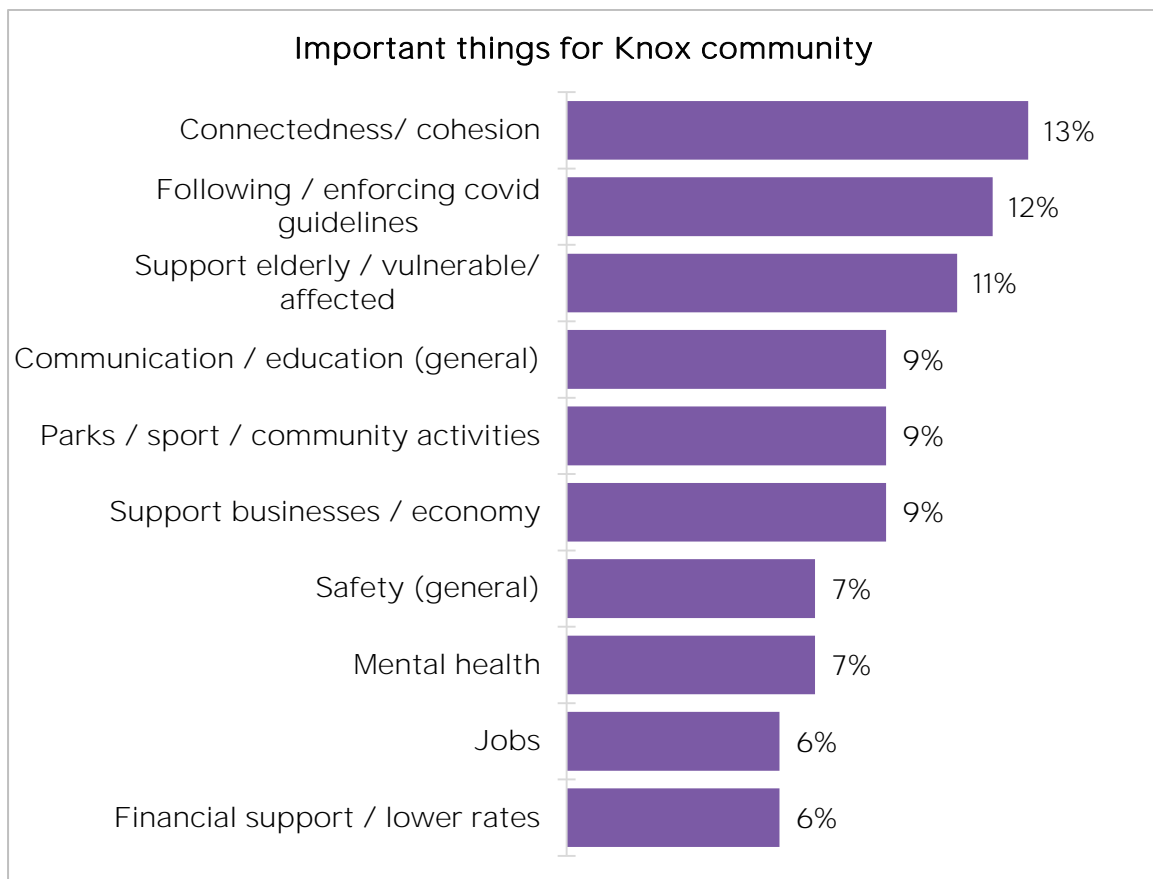
What is the one most important thing for the Knox community to focus on for the future?

Base: All respondents

Multiple responses allowed.
n=976

When asked to write in the one most important thing for the Knox community to focus on for the future, the most common ideas put forth related to community connections and encouraging the community to act responsibly to control the Covid-19 outbreak. Many also mentioned the need for support for the elderly and vulnerable, businesses, mental health services, and financial support.

Figure 3.12.7 Important things for Knox community



There was an extensive list of themes (each with 5 or more comments). The full list is as follows:

Connectedness/ cohesion	13%
Following / enforcing Covid guidelines	12%
support Elderly / vulnerable/ affected	11%
Support businesses / economy	9%
Parks / Sport / Community Activities	9%
Communication / education (general)	9%
Mental Health	7%
Safety (general)	7%
Financial Support / lower rates	6%
Jobs	6%
Health (general)	4%

Vaccine / getting rid of virus/ getting back to normal	4%
Environmental	3%
Hygiene / cleaning	3%
Roads / Transport / PT	3%
Improved pandemic preparedness / prevention	2%
Housing	2%
Lower density / no high-rises	2%
Bike & walking paths	1%
Waste / Litter management	1%
Focus on crime	1%
Internet	1%

3.13 TRANSPORT

44%

Reported an impact on transport / getting around

In what ways has the Coronavirus impacted on transport?

Base: Representative

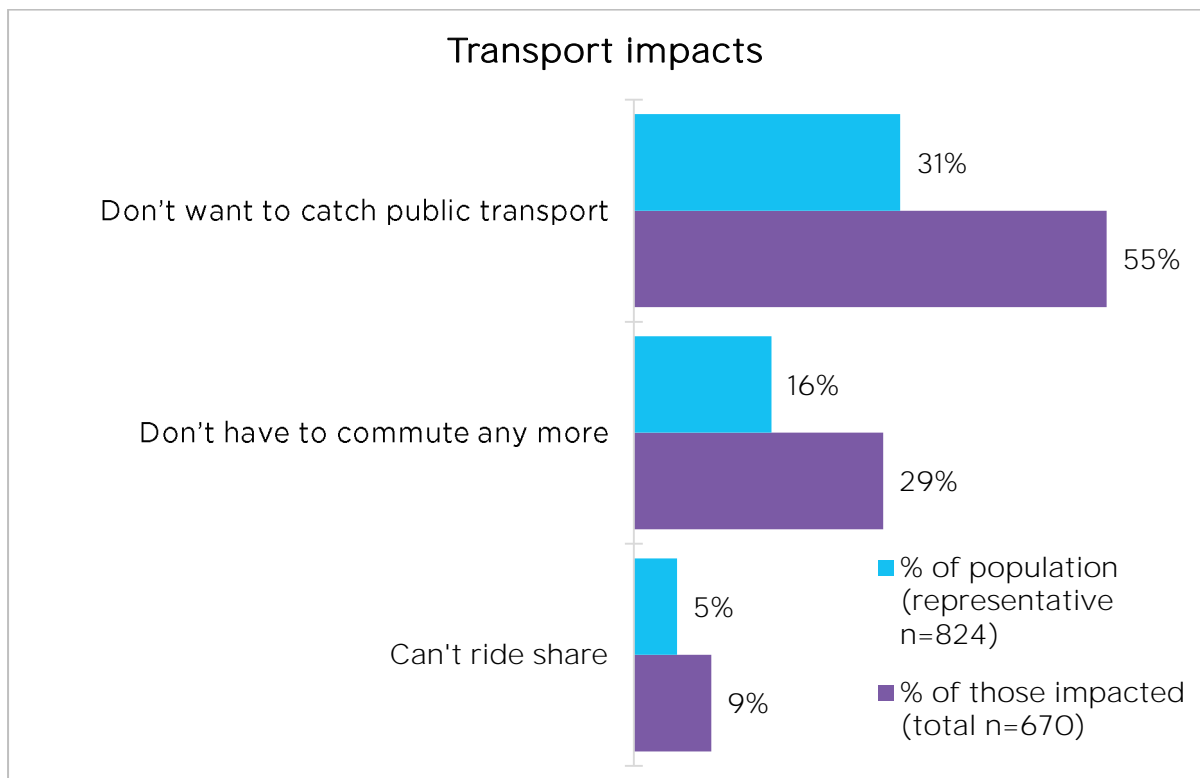
Multiple response question. Only shown to those who had experienced transport impacts.

Base: All respondents

The base of all respondents has been used to understand impacts, whereas the representative sample shows the incidence of each impact across the Knox population.

The main impacts on transport are not wanting to catch public transport and no longer having to commute.

Figure 3.13.1 Transport Impacts



Other impacts commonly mentioned in the free-text field included lockdown travel restrictions, less travel in general and less traffic.

3.14 COMMUNICATIONS

3.14.1 WHERE PEOPLE GO FOR COVID-19 INFORMATION

People source Covid-19 information from a wide variety of sources. This complicates efforts to foster consistency in messaging. However, the data can provide some useful information to assist with targeting communications to particular sub-groups of the community.

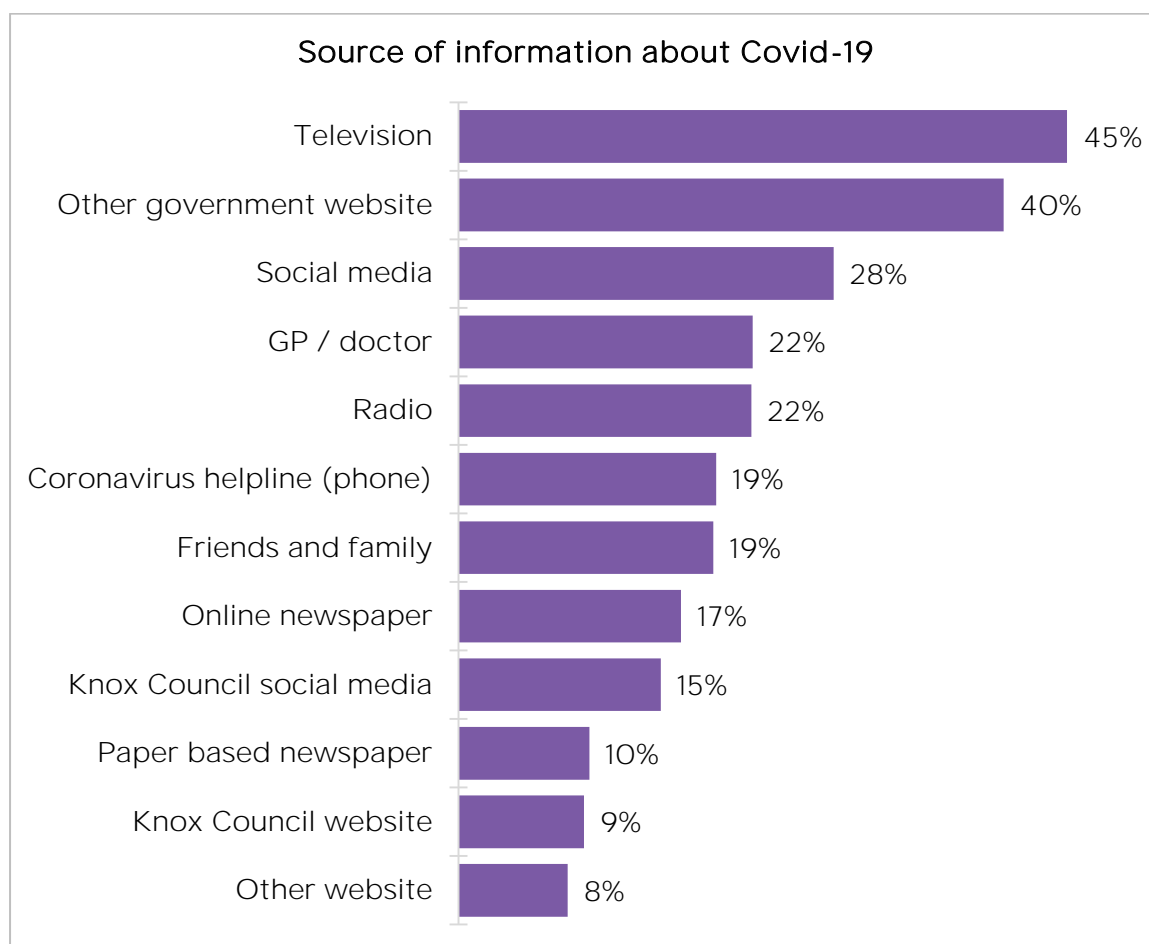
Where do you look for Coronavirus health information and information on what to do if you or a family member feels unwell?

Base: All respondents

Multiple responses allowed.
n=1,575

Most people seek information about Covid-19 through television and non-Council government websites.

Figure 3.14.1 Source of information about Covid-19



Specific insights by demographics include:

- **Young people** (18-29 year olds) more commonly use social media (49%) and friends and family (30%);
- **Males** more commonly use television (50%), radio (27%), online newspapers (21%) and paper based newspapers (12%);
- **Females** more commonly use social media (31%);

- **Older adults** (65+ year olds) more commonly use television (59%), radio (30%) and paper based newspapers (24%)
- **Those with children at home** more commonly use non-Council government websites (47%), social media (33%) and a GP (25%).

A follow-up question asked people to write in the specific sources for television, radio, newspaper and websites. The following were the most common:

Paper newspaper	Online news	Government website	Television	Radio
Herald Sun	The Age	DHHS	ABC	3AW
The Age	Herald Sun ABC News	Victorian Government Coronavirus App	News (general) Nine Seven	ABC

Have you downloaded the COVIDsafe App?

Base: Representative

Representative data used to provide an incidence across the whole community.
n=857

More than half (57%) of the community indicated they have downloaded the CovidSafe app, with most of these having activated it (54% of the population).

Almost a quarter (23%) indicated that they have no plans to install the app.

Rates of installing the app are higher amongst those who are employed (57%) and those with children (61%).

30-49 year olds show higher incidences of stating they are unlikely to install it (29%), as do renters (32%), whilst a quarter of 65+ year olds say they don't have a suitable phone to install it.

4 APPENDICES

4.1 APPENDIX 1 - SURVEY FORM

Q1. What are your main concerns at the moment regarding Coronavirus? [OPEN ENDED]

Q1a. If there have been any changes due to Coronavirus that have resulted in setbacks and/or improvements in your life, please tell us about them below.

Setbacks: [OPEN ENDED]

Improvements: [OPEN ENDED]

Q2. Please rate your feelings at the moment. *Please select one answer per row. This will help us understand how feelings change as the situation changes.*

[ARRAY, RANDOMISE ROWS, STATE TRAIT ANXIETY INDEX]

		Not at all	A little	Moderately	Very much so	Don't know
a	I feel secure	1	2	3	4	9
b	I feel worried	1	2	3	4	9
c	I feel confused	1	2	3	4	9
d	I feel relaxed	1	2	3	4	9

Q3. In what ways, if any, has the Coronavirus impacted on you? *These could be positive or negative impacts. There will be a chance to provide more detail for some of these later in the survey. Please select one answer per row* [ARRAY, RANDOMISE ROWS]

		No impact	Slight impact	Big impact	Not applicable
a	Work / employment	1	2	3	9
b	Housing / accommodation	1	2	3	9
c	Food and grocery shopping / availability	1	2	3	9
d	Physical health	1	2	3	9
e	Mental health	1	2	3	9
f	Spending time with family and friends	1	2	3	9
g	Leisure activities and events	1	2	3	9
h	Feelings of safety	1	2	3	9
i	Exercise activities	1	2	3	9
j	Religious / faith based activities	1	2	3	9
k	Parenting responsibilities	1	2	3	9
ka	Financial position	1	2	3	9
kb	Transport / getting around	1	2	3	9

Q4. If there are other significant positive or negative impacts not covered by this list, please tell us about them below. [OPEN ENDED]

[IF HOUSING IMPACTS, Q3b=2 OR 3] Q5. In what ways has the Coronavirus impacted on your housing / accommodation? *You can choose more than one* [MULTIPLE RESPONSE]

Can't afford to pay the mortgage
Can't afford to pay the rent
Can't afford to pay utilities or other household expenses
I have become homeless
Can't afford maintenance or repairs
Had to find room / rearrange the house to accommodate working from home
Had to find room / rearrange the house for teaching child/ren at home
Not enough room to self-isolate from other family members
I have negotiated reduced rent
Other (please specify)
Don't know

[IF SAFETY IMPACTS, Q3h=2 OR 3] Q6. In what ways has the Coronavirus impacted on your feelings of safety? *You can choose more than one* [MULTIPLE RESPONSE]

Fear of getting coronavirus when in public
Fear of getting coronavirus at work
Increased crime
Anger and violence in the community
Anger and violence at home
Concern for older family members getting sick
Concern for children getting sick or carrying the virus
Concern that I will get sick and not be able to care for children / other family members
Don't feel safe catching public transport
Feel unsafe when going shopping
Concern about going to the doctor or hospital for medical purposes not related to coronavirus
Greater sense of community in my area
Neighbours are offering to help
More people walking around the streets makes me feel safer
More people walking around the streets makes me feel less safe
Other (please specify)
Don't know

[IF WORK IMPACTS, Q3a=2 OR 3] Q7. In what ways has the Coronavirus impacted on work / employment? *You can choose more than one* [MULTIPLE RESPONSE]

- I have lost my job
- I have switched to working from home
- My partner has lost their job / has reduced pay
- I have less work to do now / decreased workload / fewer clients or customers
- My work income has been reduced
- I have more work to do now / increased workload
- I still have to go into work and can't work from home**
- Had to find room / rearrange the house to accommodate working from home
- Had to find room / rearrange the house for teaching child/ren at home
- The nature of my work has changed
- I now have to find time to do work as well as managing my child's schooling
- Applied for Jobseeker
- Other (please specify)
- Don't know

[IF HEALTH IMPACTS, Q3d=2 OR 3] Q8. In what ways has the Coronavirus impacted on your physical health? *You can choose more than one* [MULTIPLE RESPONSE]

- Can't exercise as much
- Reduced access to healthy food
- Can't afford to buy food
- Can't buy / source required medicines
- Had to cancel health appointment
- Not eating as healthily
- Unwell due to contracting coronavirus (there will be further questions about this later)
- Stress from trying to juggle the demands of work, children, house, finances etc.
- Drinking more alcohol
- Exercising more
- Eating healthier food
- Eating more home cooked meals
- Drinking less alcohol
- Other (please specify)
- Don't know

[IF MENTAL HEALTH IMPACTS, Q3e=2 OR 3] K1. In what ways has the Coronavirus impacted on your mental health? [OPEN ENDED]

[IF TRANSPORT IMPACTS, Q3m=2 OR 3] K2. In what ways has the Coronavirus impacted on transport / getting around? *You can choose more than one*
 [MULTIPLE RESPONSE]

- Don't want to catch public transport
- Can't ride share
- Don't have to commute any more
- Other (please specify)
- Don't know

Q10. Since the restrictions, have you been doing the following more, about the same, or less? [ARRAY, RANDOMIZE ROWS]

	More	About the same	Less	Not applicable
a Exercising	1	2	3	9
b Eating healthy food	1	2	3	9
c Drinking alcohol	1	2	3	9
d Gambling	1	2	3	9
e Talking to neighbours	1	2	3	9

Please note that this survey is for the purpose of understanding the community. Your responses are anonymous, therefore it will not be used to provide you with direct assistance. If you need support or assistance please contact your local Council or service providers.

Q11. What was your employment status before the Coronavirus outbreak?

- Full time
- Part time
- Casual
- Not employed
- Retired
- Home duties
- Other (specify)
- I'd prefer not to say

[IF Q11 = EMPLOYED] Q12. As a result of the Coronavirus pandemic, has your number of working hours / workload...?

- Increased
- Stayed the same
- Decreased
- I'd prefer not to say

[IF Q12 = INCREASED OR DECREASED] K3. Has your pay/wage changed?

- No, being paid the same amount
- Yes, being paid more
- Yes, being paid less
- Other (specify)
- Don't know

[IF Q12 = DECREASED] K4. Was is the reason for your decreased work hours / workload?

- Pre-planned annual leave or holidays
- Asked to take annual leave or holidays due to Coronavirus
- Sick leave (for yourself)
- Maternity/Paternity leave
- Leave or reduced hours so that I can conduct child/ren's schooling from home
- No work or not enough work available
- No longer employed
- Seasonal work/end of season
- Other (specify)
- Don't know

Q13. Do you own or manage a business?

If you have closed your business or changed staff numbers due to the Coronavirus, please select the option that best describes your business before the pandemic, say in December 2019

- No
- Yes - sole trader (no staff)
- Yes - small business (2-5 staff, including sole traders with staff)
- Yes - medium business (6-49 staff)
- Yes - large business (50+ staff)
- I'd prefer not to say

[IF OWN A BUSINESS WITH STAFF] Q14. Have you had to make any changes to staff numbers or schedules as a result of the Coronavirus?

- Permanently lay-off staff
- Temporarily lay-off staff
- Cut staff hours
- Pay for staff to be on sick leave
- Hire more staff
- Applied for / receiving JobKeeper for staff
- Something else (please specify)
- No change to staffing

[IF Q11 = EMPLOYED OR Q13 = OWN A BUSINESS] Q15. In which industry is your work?

- Retail
- Hospitality (Cafés, restaurants etc)
- Accommodation
- Government
- Entertainment and events
- Personal services
- Business services
- Education and training
- Transport
- Health services
- Community services
- Manufacturing
- Real estate
- Accounting, legal and finance
- Construction, repair and maintenance
- Primary production / agriculture / farming
- Other (specify)

[IF SPECIFIED A TYPE IN Q15] Q16. What type of [INSERT ANSWER TO Q11] business is it? [OPEN ENDED]

K5. Have you applied for / received any of the following Coronavirus support?

	Yes, received	Applied but not received	No	Don't know
a JobKeeper (through employer, or as a sole trader)	1	2	3	9
b Early access to Superannuation	1	2	3	9
c Child Care Subsidy	1	2	3	9
d JobSeeker	1	2	3	9
e National Health Emergency (COVID-19) Crisis payment	1	2	3	9
f Coronavirus Supplement (from the Federal government)	1	2	3	9
g Emergency Relief Packages (from the Victorian Government)	1	2	3	9
h Knox City Council Business Support Package	1	2	3	9
i Payroll tax refund	1	2	3	9
j Knox City Council COVID-19 rates assistance	1	2	3	9

Q17. Which of the following best describes you with regards to Coronavirus / COVID-19? *Remember, your answers are anonymous, we will not be able to identify you* [MULTIPLE RESPONSE]

- I had Coronavirus (confirmed by a test) but have recovered
- I currently have Coronavirus (confirmed by a test)
- I may have Coronavirus (not yet tested / waiting for test results)
- I am currently in 14 day quarantine (returned from overseas, been in contact with someone who tested positive, instructed by health department)
- I am self-isolating due to being high risk of Coronavirus
- None of these
- Other (please specify)
- Don't know

[IF Q17 NOT HAD CORONAVIRUS] K6. What impact would testing positive to Coronavirus have on you? [MULTIPLE RESPONSE]

- Would have trouble getting groceries if having to self-isolate
- Increase problems with other health issues
- Not being able to work would cause financial difficulties
- Wouldn't be able to look after children
- Wouldn't be able to look after other family members
- Wouldn't be able to look after animals
- Difficult to isolate from other household members
- Would have to stop helping others in the community
- Family members would need to make changes to their work to look after me
- No impact if it was a mild version, I can stay home for 2 weeks
- Other (please specify)
- Don't know

If you are concerned about COVID-19 or are distressed because you are in self-quarantine or sick go to <https://headtohealth.gov.au/> or call MindSpot on 1800 61 44 34.

Q22. Where do you look for Coronavirus health information and information on what to do if you or a family member feels unwell? *You can choose more than one* [MULTIPLE RESPONSE]

- Don't look for this type of information
- Coronavirus helpline (phone)
- GP / doctor
- Hospital
- Social media (Facebook, Twitter, Reddit etc.)
- Online newspaper (which ones?)
- Knox Council website
- Knox Council social media
- Other government website (which ones?)
- Other website (which ones?)
- Paper based newspaper (which ones?)

Friends and family
Television (which programs?)
Radio (which programs)
Somewhere else (specify)

K7. Have you downloaded the COVIDsafe App?

No, never heard of it
No, don't have a suitable phone
No, and I don't plan to
No, I haven't yet but I plan to
Yes, but I haven't set it up / turned it on
Yes, and I have it turned on
Other (specify)

Q26. What sort of things are you doing to stay in touch with family and friends who don't live with you? [OPEN ENDED]

Q27. Are you currently having trouble finding/accessing any food or groceries?
Please select all that apply [MULTIPLE RESPONSE]

Toilet paper
Fresh fruit and vegetables
Canned goods
Pet food
Medications
Personal items (deodorant, soap, sanitary items, makeup etc.)
Rice and pasta
Meat
Flour or grains
Dairy goods
Special dietary foods (e.g. (diabetes, coeliac)
Other (*please specify*)
Nothing

Please note that this survey is for the purpose of understanding the community. Your responses are anonymous, therefore it will not be used to provide you with direct assistance.

If you need support please contact your local services. Your local Council should be able to advise you who to contact for assistance.

K8. How do you expect your life will change in the next 6 months? *Please select all that apply* [MULTIPLE RESPONSE]

- Expect things to go back to normal
- Keep working from home
- Go back to working in the office
- Reduced workload
- Increased workload
- Seeing family and friends more
- Increase in exercise
- More financial difficulties
- Will stop getting JobKeeper
- Less stress with children back at school / childcare
- Increased use of community facilities
- Other (*please specify*)
- Nothing

K9. How likely or unlikely would you be to volunteer to assist with community recovery from Coronavirus?

- Very likely
- Likely
- Neither
- Unlikely
- Very unlikely
- Don't know

K10. Have you encountered any of the following difficulties since the Coronavirus pandemic started? *Please select all that apply* [MULTIPLE RESPONSE]

- Poor/limited internet connection meant I couldn't do my work
- Poor/limited internet connection make it difficult for child/ren to do remote schooling
- Poor/limited internet connection made it difficult to keep in touch with friends or family
- Poor/limited internet connection made it difficult to access services or assistance
- Other (specify)
- None of these
- Don't know

Q29. Please tell us about any services you would like to see provided by service providers or Councils to help respond to life changes due to the Coronavirus.

[OPEN ENDED]

K12. What is the one most important thing for the Knox community to focus on for the future? [OPEN ENDED]

Now some questions to help group your responses with other people for analysis. Remember, your responses are completely anonymous. This information helps us understand how experiences differ across different parts of the community.

D1. What is your gender?

- Male
- Female
- Non-binary
- Self-described
- I'd prefer not to say

D2. What is your age? [DROP-DOWN]

- | | |
|-------|-----------------------|
| 14-17 | 55-59 |
| 18-24 | 60-64 |
| 25-29 | 65-69 |
| 30-34 | 70-74 |
| 35-39 | 75-79 |
| 40-44 | 80+ |
| 45-49 | I'd prefer not to say |
| 50-54 | |

D3. Do you speak a language other than English at home?

- No, English only
- Yes - please specify language.
- I'd prefer not to say

D4. Are you an Australian citizen or permanent resident visa holder?

- Yes
- No - please specify country you are a citizen of.
- I'd prefer not to say

D5. Do you have a disability where you need help with self-care, body movement or communication activities?

- Yes
- No
- I'd prefer not to say

K13. Have you provided unpaid care or assistance during the Coronavirus pandemic for...?

- A family member or relative aged 65 or over
- A family member or relative aged less than 65 who has a disability or long-term health condition
- An unrelated person aged 65 or over
- An unrelated person aged less than 65 who has a disability or long-term health condition
- Other unpaid care or assistance (specify)
- None of these
- I'd prefer not to say

D6. Is there someone outside your household you can rely on to regularly care for you or your children in an emergency?

- Yes
- No
- I'd prefer not to say

D7. Which of the following best describes your household structure?

- One person
- Couple with children living at home
- Couple without children living at home (2 person household)
- Single parent
- Group household
- Other
- I'd prefer not to say**

[IF D7 = CHILDREN] D8. How old are the children who live at home? [MULTIPLE RESPONSE]

- 0-4 years
- 5-11 years
- 12-17 years
- 18 years or over
- I'd prefer not to say**

[IF D8 = 5-17] K14. Have your children stayed home from school or childcare due to Coronavirus? *At any stage since the start of the pandemic.*

- Yes, they are still at home
- Yes, they were at home but they are back at school / childcare now
- No
- Not applicable
- Don't know**

[IF D7 = COUPLE AND K15 = YES] K15. Approximately what proportion of childcare / schooling responsibilities did you personally undertake?

- All of it (100%)
- Most (60%-99%)
- Around half (40%-59%)
- Some (15%-39%)
- A small amount (1%-15%)
- None
- Don't know**

D9. At this point in time, what is your approximate monthly household income (after tax)?

- <\$1,860 per month (\$430 per week or less)
- \$1,861-\$2,800 (\$451-\$650 per week)
- \$2,801-\$3,900 (\$651-\$900 per week)
- \$3,901-\$8,670 per month (\$901-\$2,000 per week)
- \$8,671-\$17,300 per month (\$2,001-\$4,000 per week)
- More than \$17,300 per month (\$4,000+ per week)
- Don't know**
- I'd prefer not to say**

K16. Would your household able to find \$2,000 for something important within a week?

- Yes
- No
- Don't know

D10. Is the place where you live...?

- Owned outright
- Owned with a mortgage
- Rented
- Social / public housing
- Other
- Don't know
- I'd prefer not to say

D13. What is the suburb where you live? [DROP-DOWN]

- Bayswater
- Boronia
- Ferntree Gully
- Lysterfield
- Knoxfield
- Rowville
- Scoresby
- The Basin
- Upper Ferntree Gully
- Wantirna
- Wantirna South
- Other (specify)

[IF Q11 = EMPLOYED OR Q13 = OWN A BUSINESS] D14. What is/was the postcode of your work? [NUMERICAL]

D13. Please share any final comments you have about this survey. [OPEN ENDED]

4.2 APPENDIX 2 - GENERAL ACCESS SURVEY DISTRIBUTION

Distribution Channel	Number Distributed/ Number of Times Viewed/clicked
Council Newsletters (Multicultural, Disability, Community Partnerships)	120 Multicultural 1,100 Accessing Knox (Disability) 645 Community Strengthening (Community Partnerships) (20 individual clicks on the survey) Total - 1865
Knox Library Distribution	39 mobile library users
	50 retirement facilities
	unknown number of surveys and envelopes in library boxes
Knox City Council Website	unknown
Knox City Council Social Media	341 clicks from FB
Knox City Council Intranet (eRIC)- staff	25 Complete
Knox Infolink	60 paper forms provided
Various Council Departments (may have distributed them through their channels)	Councilors Community Wellbeing (<i>of which line 1 is part</i>) Family and Children's Services Active Ageing and Disability Services Youth Leisure and Cultural Services Business Improvement- Community Services Emergency Management, City Safety and Health <i>*Number of channels of distributions from these departments can't be quantified</i>

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Mental Health

Covid-19 Survey 2020

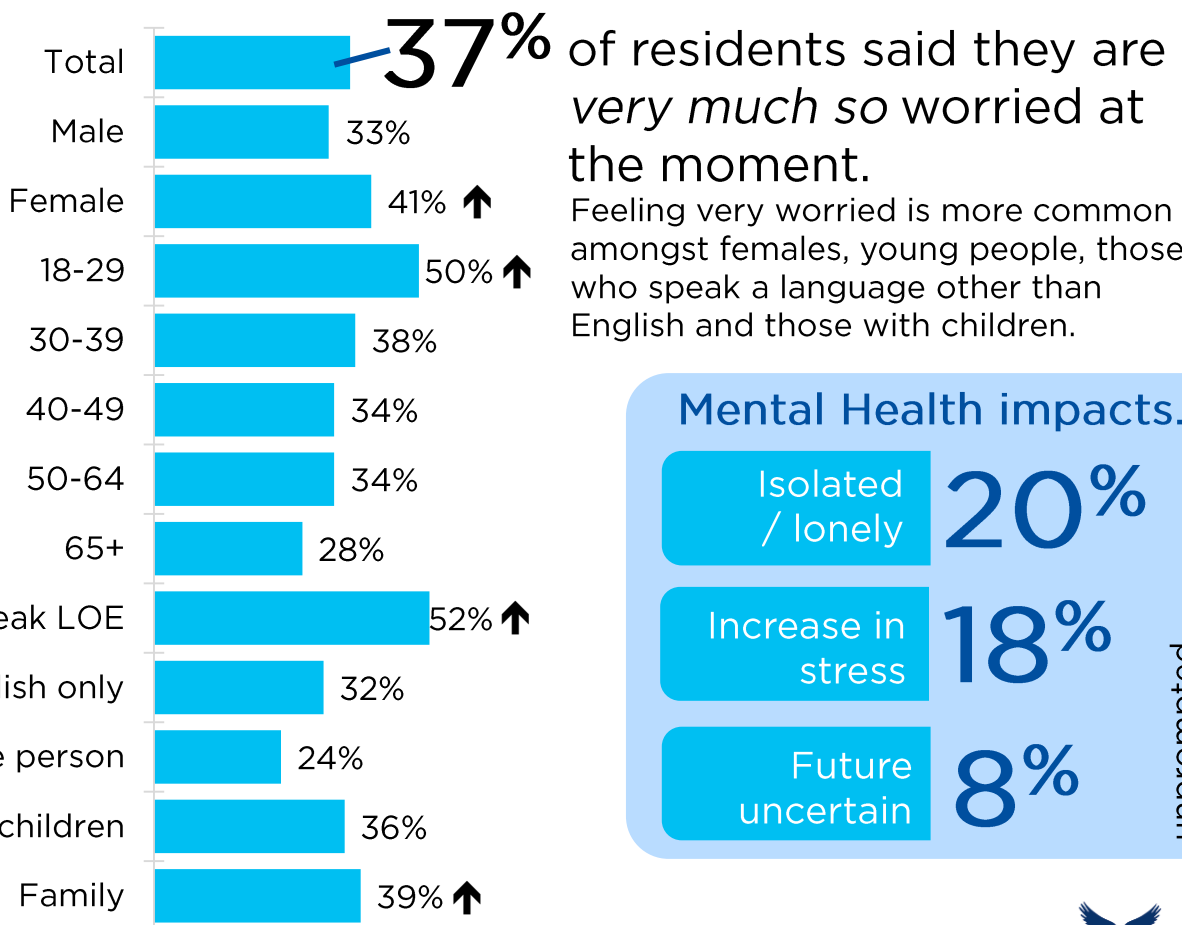
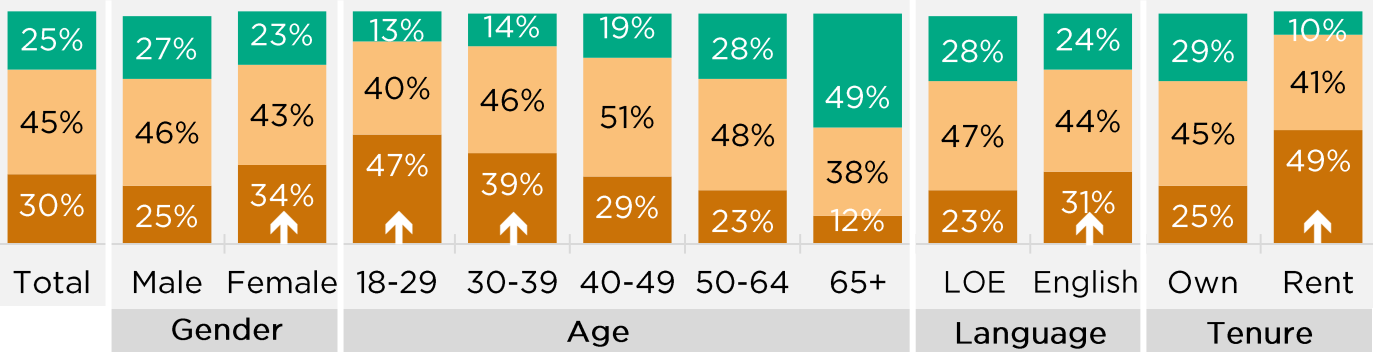
n=854

The mental health impacts being experienced by the Knox community primarily revolve around anxiety, stress and loneliness. Mental health challenges can have significant impacts on both personal wellbeing as well as family safety.

75% of residents say COVID-19 has impacted on their mental health...

Mental health impacts are more commonly experienced by females, young people and renters.

Big impact Slight impact No impact



37% of residents said they are *very much* so worried at the moment. Feeling very worried is more common amongst females, young people, those who speak a language other than English and those with children.

Mental Health impacts...

- Isolated / lonely **20%**
- Increase in stress **18%**
- Future uncertain **8%**

unprompted

↑ Significantly higher

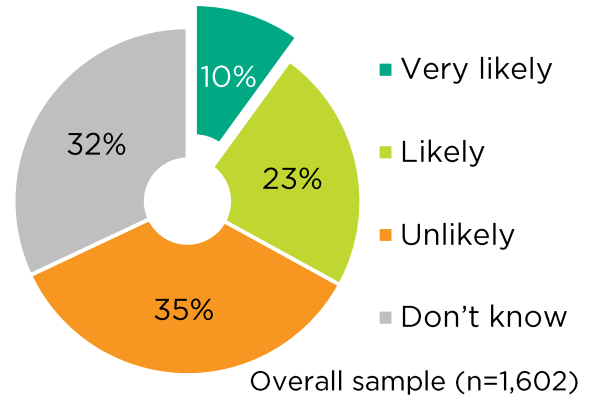
Representative data used in this analysis



Volunteering is a key aspect of community and civic engagement. The Australian Government recognises that volunteering has a range of benefits including bringing meaning and purpose to life, increasing self-esteem and wellbeing, relieving stress, alleviating symptoms of depression, having a positive impact on the community, and improving relationships*.

The survey asked **how likely or unlikely would you be to volunteer to assist with community recovery from Coronavirus?** Whilst almost a third said very likely or likely, it is the 'very likely' segment which gives the most accurate picture of actual likelihood; therefore it is estimated that around 10% of the community may volunteer to help with recovery.

Segments of the community who more often indicate they would be **very likely** to volunteer were:



Very likely



14%

Those who speak a language other than English



14%

Renters

Analysis of the demographics of those who show a notably high instance of stating they would be **unlikely** to volunteer shows there is a large segment of older retired adults who are not engaged with volunteering for Coronavirus community recovery:

Unlikely



44%

65+ year olds



41%

Couples with no children



45%

Not employed

Opportunities for conversion

18-24 year olds show a high instance of being just 'Likely' (40%). It is recommended that further research be conducted amongst this age group to help identify what this group needs to convert to 'Very likely'.

Those with children and employed people also show a higher instance of assigning a 'likely' rating (26%). Given that these people would have schedules to work around, their likelihood may increase if volunteering activities don't clash with child minding and work commitments.










*<https://www.healthdirect.gov.au/benefits-of-volunteering>

Those who speak a language other than English at home (LOE) more commonly experience COVID-19 prompted challenges with exercise, social interaction, feeling worried and not having help outside the household in an emergency. However, they are faring a little better than English only households in terms of income and alcohol consumption.

 **31%** go to a GP/doctor for COVID-19 info
20% English only

 **65%** Use the COVIDsafe app
57% Knox overall

 **8%** Very likely to Volunteer
8% Knox overall













	Measure	LOE	English	
 Social isolation	Mentioned as a main concern	11%	15%	
	Mentioned as a setback	20%	22%	
	COVID-19 has impacted on spending time with family and friends	89%	97%	
	Talking to neighbours less	53%	28%	
 Safety	Mentioned as a main concern	53%	48%	
	COVID-19 has impacted on safety	80%	78%	
	Concerned won't be able to care for others if get sick	45%	36%	
	Concern for older family members getting sick	44%	56%	
	Feel unsafe catching public transport	28%	17%	
 Exercise	Mentioned as a setback	3%	5%	
	COVID-19 has impacted on exercise	84%	76%	
	Doing less exercise	53%	46%	

Key:

Statistically significant - Segment worse off:

 English only
 LOE

 Whole sample  Representative sample

	Measure	LOE	English	
 Financial vulnerability	Mentioned as a main concern	21%	17%	
	Mentioned as a setback	8%	16%	
	COVID-19 has impacted on financial position	72%	66%	
	COVID-19 has impacted on work/employment	64%	66%	
	Receiving less pay due to COVID-19*	22%	30%	
	Experienced a reduction in workload due to COVID-19*	38%	42%	*Of those employed pre-COVID
 Mental health	Mentioned as a main concern	6%	13%	
	Mentioned as a setback	7%	8%	
	COVID-19 has impacted on mental health	70%	75%	
	Very much so worried at the moment	52%	32%	
 Food and alcohol	Had trouble buying food or groceries	18%	20%	
	COVID-19 has impacted on food and grocery shopping / availability	80%	76%	
	Eating less healthy food	20%	21%	
	Would have trouble getting groceries if had to self-isolate	37%	30%	
	Drinking more alcohol	14%	24%	
 Caregiving	COVID-19 has impacted on parenting [#]	60%	69%	
	Couldn't care for children if caught COVID-19 [#]	54%	56%	[#] Of those with children
	Providing unpaid care or assistance	20%	31%	
 Resilience	Wouldn't be able to care for others if caught COVID-19	39%	37%	
	Experienced internet connectivity issues	36%	31%	
	No one to rely on in an emergency	56%	36%	
	Couldn't find \$2,000 in a week in an emergency	22%	20%	

Youth (18-29yo)

n=93

n=57









Covid-19
Survey
2020

The survey didn't capture any responses from people under the age of 18. However there were 93 respondents aged 18-29 (57 in the representative survey), which have been considered to be part of the 'Youth' category. Despite the small sample size results suggest that youth more commonly experience challenges during COVID-19 relating to fear of getting sick, reduced exercise, reduced mental health, and increased financial vulnerability. They are experiencing fewer impacts on parenting and resilience.

 **49%** use Social media for COVID-19 info
28% Knox overall

 **65%** Use the COVIDsafe app
57% Knox overall



 **8%** Very likely to Volunteer
8% Knox overall




















	Measure	Youth sample	Knox overall	
 Social isolation	Mentioned as a main concern	17%	14%	
	Mentioned as a setback	15%	21%	
	COVID-19 has impacted on spending time with family and friends	92%	96%	
	Talking to neighbours less	20%	33%	
 Safety	Mentioned as a main concern	50%	49%	
	COVID-19 has impacted on safety	73%	79%	
	Fear of getting sick in public	72%	59%	
	Concern for older family members getting sick	69%	54%	
	Fear of getting sick when shopping	53%	44%	
 Exercise	Mentioned as a setback	8%	4%	
	COVID-19 has impacted on exercise	80%	78%	
	Doing less exercise	53%	48%	

Key:

Statistically significant - higher/lower than other age groups:

 Whole sample  Representative sample

 Better off
 Worse off

	Measure	Youth sample	Knox overall	
 Financial vulnerability	Mentioned as a main concern	25%	17%	
	Mentioned as a setback	30%	14%	
	COVID-19 has impacted on financial position	74%	68%	
	COVID-19 has impacted on work/employment	87%	65%	
	Receiving less pay due to COVID-19*	32%	28%	
	Experienced a reduction in workload due to COVID-19*	56%	41%	
				*Of those employed before COVID-19. n=48
 Mental health	Mentioned as a main concern	16%	12%	
	Mentioned as a setback	9%	8%	
	COVID-19 has impacted on mental health	87%	75%	
	Very much so worried at the moment	50%	37%	
 Food and alcohol	Had trouble buying food or groceries	30%	20%	
	COVID-19 has impacted on food and grocery shopping / availability	82%	77%	
	Eating less healthy food	25%	21%	
	Would have trouble getting groceries if had to self-isolate	30%	32%	
	Drinking more alcohol	15%	21%	
 Caregiving	COVID-19 has impacted on parenting [#]	22%	67%	
	Couldn't care for children if caught COVID-19 [#]	40%	56%	
	Providing unpaid care or assistance	25%	28%	
				[#] Of those with children n=35 n=21
 Resilience	Wouldn't be able to care for others if caught COVID-19	22%	37%	
	Experienced internet connectivity issues	55%	33%	
	No one to rely on in an emergency	32%	41%	
	Couldn't find \$2,000 in a week in an emergency	16%	20%	

Older adults

	60-64	65-69	70-74	75-79	80+	60+ OPH
n=	134	159	131	82	60	128
n=	80	117	95	75	56	97

Covid-19 Survey 2020

The following snapshot shows results for 5 year age groups over the age of 60 years, as well as 60+ year olds who live alone (one person household - OPH).

Adults aged over 60 years less often experience COVID impacts relating perceptions of safety, fear of getting sick, financial vulnerability, mental health, alcohol consumption and resilience. This is likely due to there being limited changes to retirement income, and therefore fewer stressors. The major impact for older adults is not being able to see family and friends.

Older adults who live alone are slightly more likely to mention reduced exercise as a setback of COVID-19, but other than that they don't show any increased vulnerabilities when compared to the average impact across the municipality.



Social isolation

Measure	60-64	65-69	70-74	75-79	80+	60+ OPH	Knox overall
Mentioned as a main concern	18%	24%	18%	11%	19%	21%	14%
Mentioned as a setback	26%	38%	28%	24%	18%	29%	21%
COVID-19 has impacted on spending time with family and friends	97%	99%	97%	100%	97%	93%	96%
Talking to neighbours less	38%	29%	40%	42%	31%	32%	33%



Exercise

Mentioned as a setback	2%	6%	2%	4%	12%	9%	7%
COVID-19 has impacted on exercise	73%	78%	64%	67%	68%	65%	78%
Doing less exercise	44%	42%	38%	33%	49%	49%	48%

Key: Statistically significant - higher/lower than other age groups:

Whole sample Representative sample

Better off
Worse off





Safety

Measure	60-64	65-69	70-74	75-79	80+	60+ OPH	Knox overall
Mentioned as a main concern	43%	55%	45%	45%	47%	53%	49%
COVID-19 has impacted on safety	81%	78%	63%	73%	60%	74%	79%
Fear of getting sick in public	68%	51%	41%	32%	33%	38%	59%
Concern for older family members getting sick	52%	49%	24%	20%	29%	21%	54%
Fear of getting sick when shopping	42%	40%	34%	28%	33%	32%	44%



Financial vulnerability

Mentioned as a main concern	13%	10%	9%	1%	8%	10%	17%
Mentioned as a setback	12%	10%	2%	2%	2%	5%	14%
COVID-19 has impacted on financial position	62%	59%	57%	44%	41%	44%	68%
COVID-19 has impacted on work/employment	59%	20%	15%	8%	4%	20%	65%
Receiving less pay due to COVID-19*	50%	N/A	N/A	N/A	N/A	N/A	28%
Experienced a reduction in workload due to COVID-19*	34%	N/A	N/A	N/A	N/A	N/A	41%



Care

Providing unpaid care or assistance	38%	28%	25%	15%	18%	22%	28%
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N/A: < n=20



Mental health

Measure	60-64	65-69	70-74	75-79	80+	60+ OPH	Knox overall
Mentioned as a main concern	6%	8%	6%	4%	2%	3%	12%
Mentioned as a setback	4%	6%	2%	2%	0%	5%	8%
COVID-19 has impacted on mental health	61%	55%	45%	48%	49%	50%	75%
Very much so worried at the moment	32%	31%	25%	27%	28%	25%	37%



Food and alcohol

Had trouble buying food or groceries	13%	10%	11%	16%	7%	10%	20%
COVID-19 has impacted on food and grocery shopping / availability	72%	78%	70%	76%	62%	72%	77%
Eating less healthy food	16%	12%	7%	10%	7%	13%	21%
Would have trouble getting groceries if had to self-isolate	26%	31%	29%	40%	41%	36%	32%
Drinking more alcohol	19%	16%	12%	6%	3%	14%	21%



Resilience

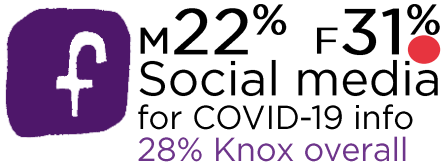
Wouldn't be able to care for others if caught COVID-19	36%	32%	26%	16%	18%	13%	37%
Experienced internet connectivity issues	15%	13%	17%	8%	5%	11%	33%
No one to rely on in an emergency	41%	25%	32%	27%	27%	28%	41%
Couldn't find \$2,000 in a week in an emergency	19%	13%	16%	16%	12%	17%	20%
Very likely to volunteer	10%	10%	6%	4%	5%	9%	8%
Don't have a suitable phone for COVIDsafe app	1%	12%	26%	30%	48%	18%	8%
Get COVID-19 information through TV	56%	61%	56%	60%	61%	57%	45%

Gender

Male	n=372	n=461
Female	n=517	n=1,112

Covid-19
Survey
2020

When analysing the data with a gender lens it is clear that females more often experience COVID-19 related challenges with perceptions of safety, reduced exercise and reduced mental health. Males more commonly experience reduced pay and work hours, and have no one to rely on in an emergency. Childcare is also disproportionately undertaken by females, with 59% of females saying they do more than 60% of the childcare / schooling responsibilities when children stay home, and 45% of males say their partner does 60% or more.



		Measure	Male	Female	
 Social isolation		Mentioned as a main concern	14%	14%	
		Mentioned as a setback	18%	23%	●
		COVID-19 has impacted on spending time with family and friends	94%	96%	
		Talking to neighbours less	35%	31%	
 Safety		Mentioned as a main concern	43%	51%	●
		COVID-19 has impacted on safety	74%	84%	●
		Fear of getting sick in public	56%	60%	
		Concern for older family members getting sick	44%	58%	●
		Fear of getting sick when shopping	39%	46%	●
 Exercise		Mentioned as a setback	5%	4%	
		COVID-19 has impacted on exercise	76%	81%	●
		Doing less exercise	46%	50%	






Key:

Statistically significant - Gender worse off:

● Males
● Females

Whole sample

Representative sample

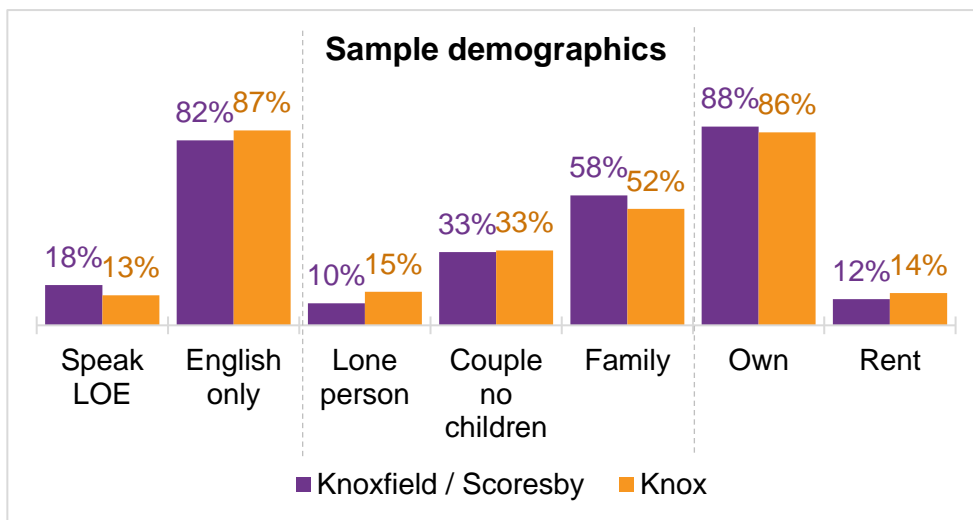
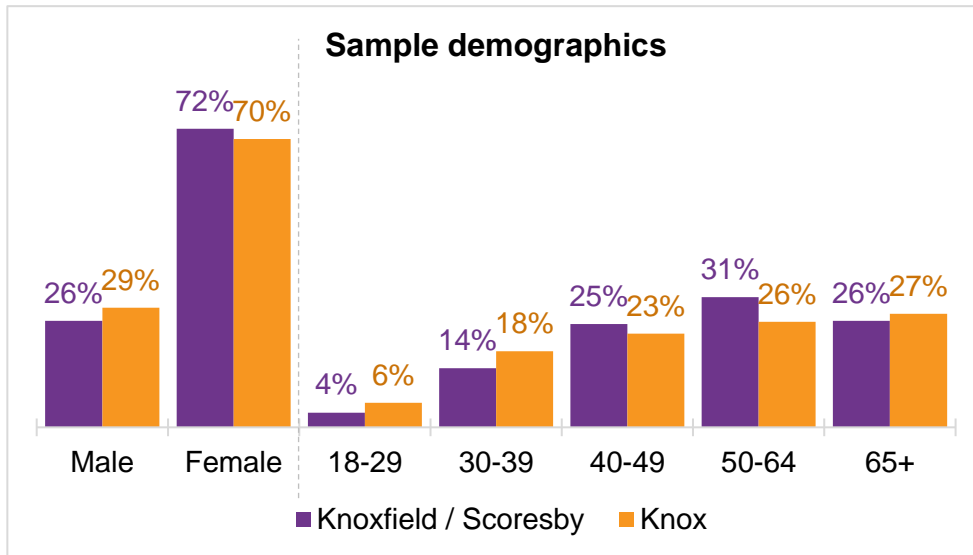
	Measure	Male	Female	
 Financial vulnerability	Mentioned as a main concern	19%	17%	
	Mentioned as a setback	11%	16%	●
	COVID-19 has impacted on financial position	71%	65%	
	COVID-19 has impacted on work/employment	71%	61%	●
	Receiving less pay due to COVID-19*	34%	22%	●
	Experienced a reduction in workload due to COVID-19*	45%	37%	*Of those employed pre-COVID
 Mental health	Mentioned as a main concern	7%	14%	●
	Mentioned as a setback	4%	10%	●
	COVID-19 has impacted on mental health	71%	77%	●
	Very much so worried at the moment	33%	41%	●
 Food and alcohol	Had trouble buying food or groceries	18%	20%	
	COVID-19 has impacted on food and grocery shopping / availability	75%	78%	
	Eating less healthy food	20%	21%	
	Would have trouble getting groceries if had to self-isolate	35%	30%	
	Drinking more alcohol	23%	19%	
 Caregiving	COVID-19 has impacted on parenting#	68%	65%	
	Couldn't care for children if caught COVID-19#	42%	60%	●
	Providing unpaid care or assistance	26%	30%	#Of those with children
 Resilience	Wouldn't be able to care for others if caught COVID-19	30%	40%	●
	Experienced internet connectivity issues	31%	35%	
	No one to rely on in an emergency	47%	34%	●
	Couldn't find \$2,000 in a week in an emergency	19%	21%	

Report for Knoxfield / Scoresby

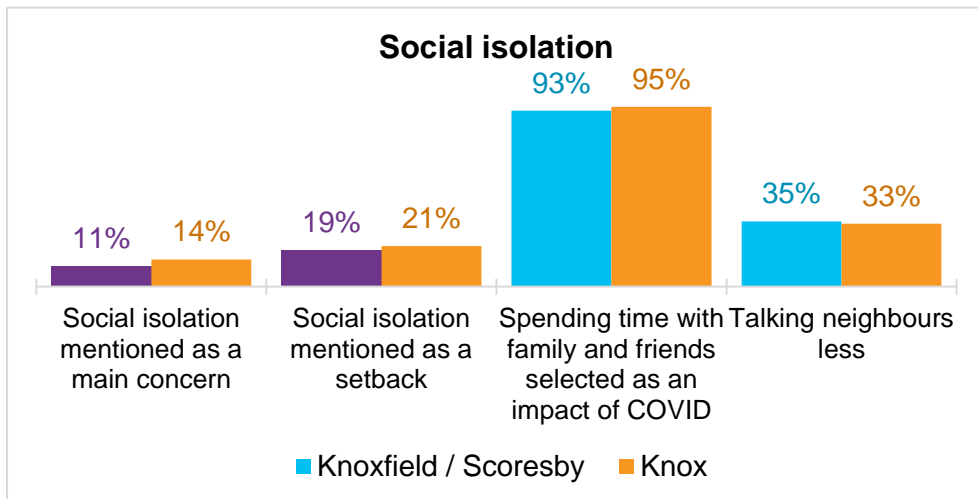
Compared to Knox

	Knoxfield / Scoresby	Knox
Total sample =	140	1596
Representative sample =	74	865

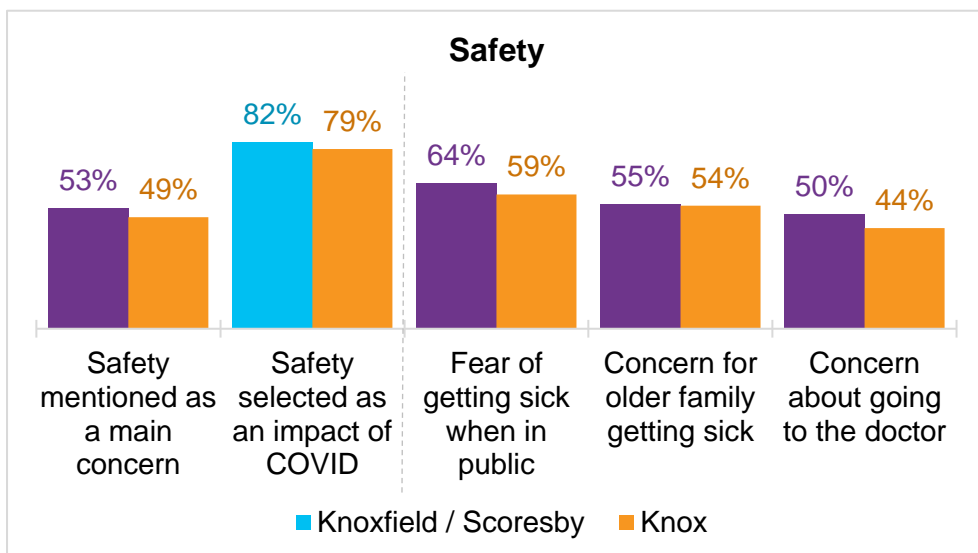
■ Overall sample
■ Representative sample



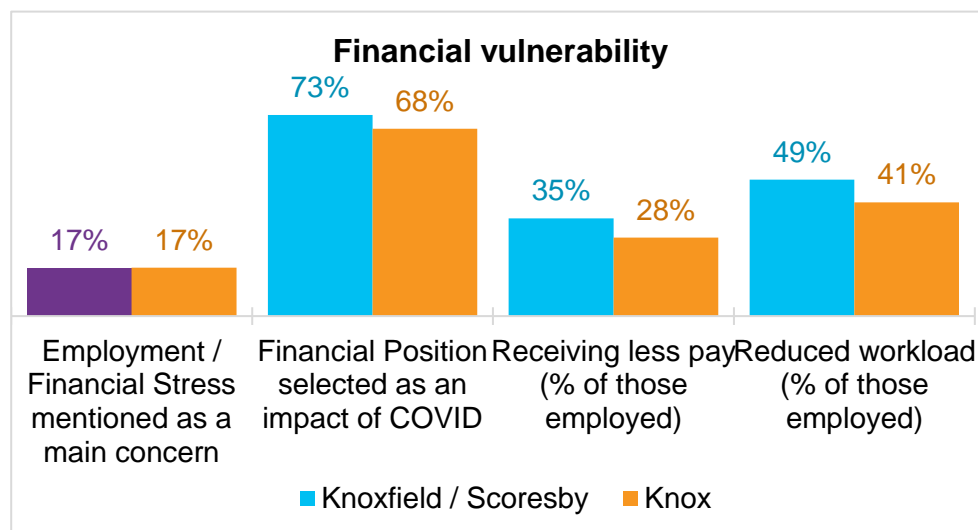
Social Isolation



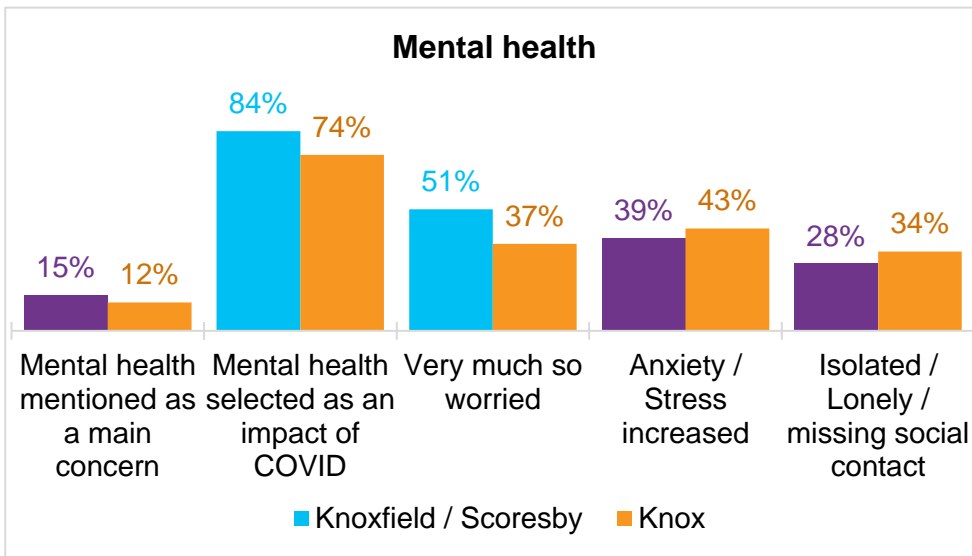
Safety



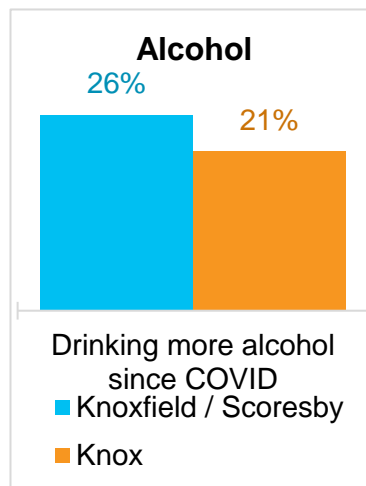
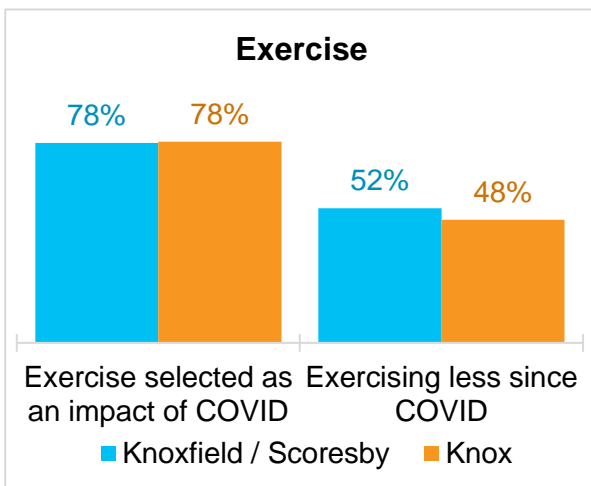
Financial vulnerability



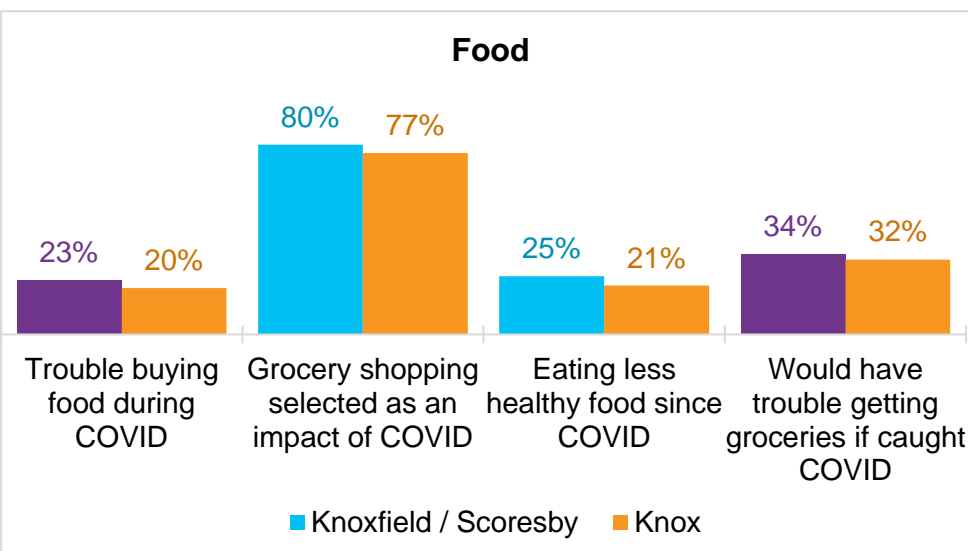
Mental health



Exercise & Alcohol



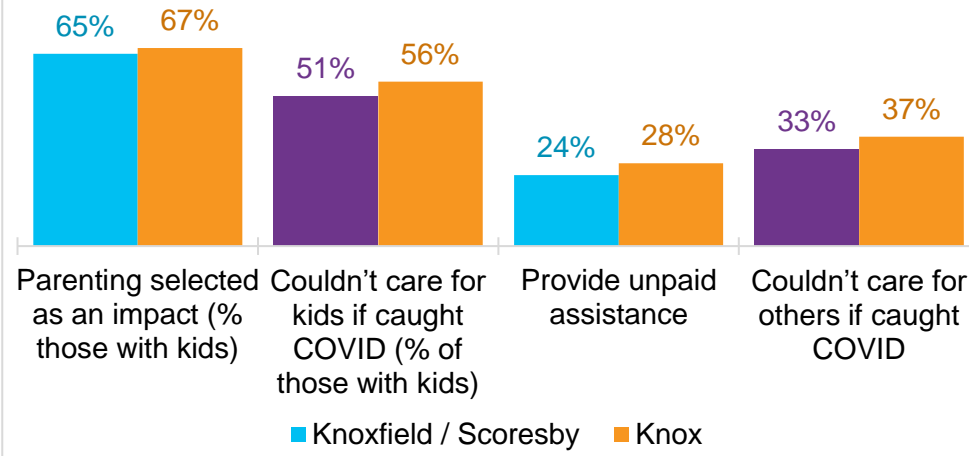
Food



Parenting & caregiving



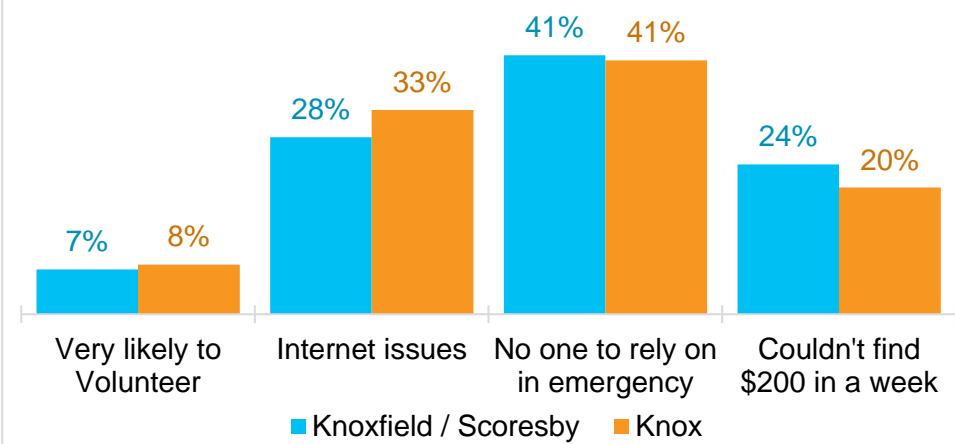
Parenting & caregiving



Resilience



Resilience

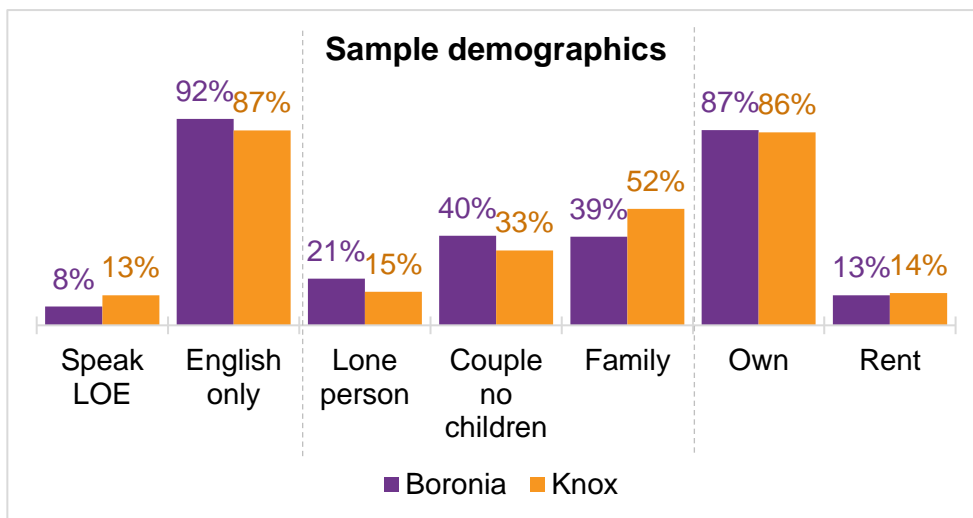
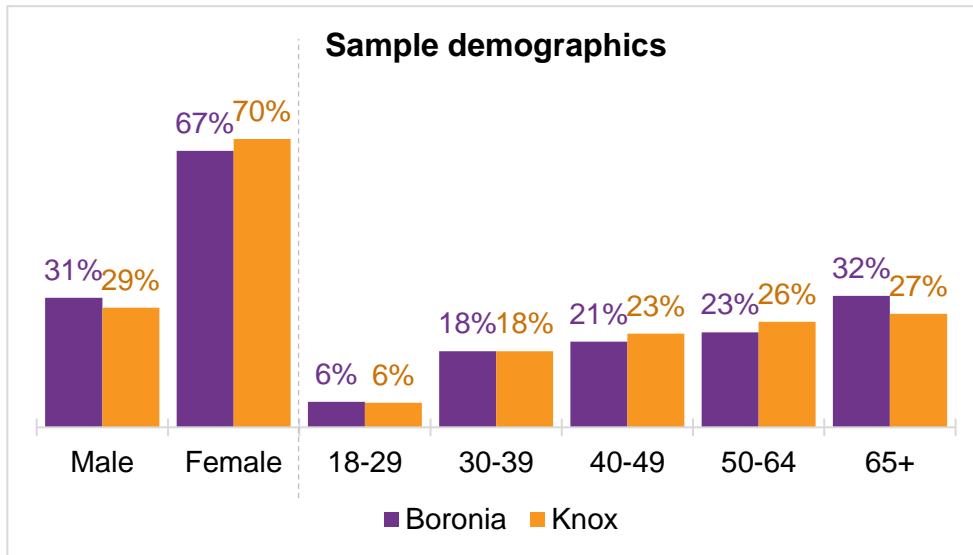


Report for Boronia

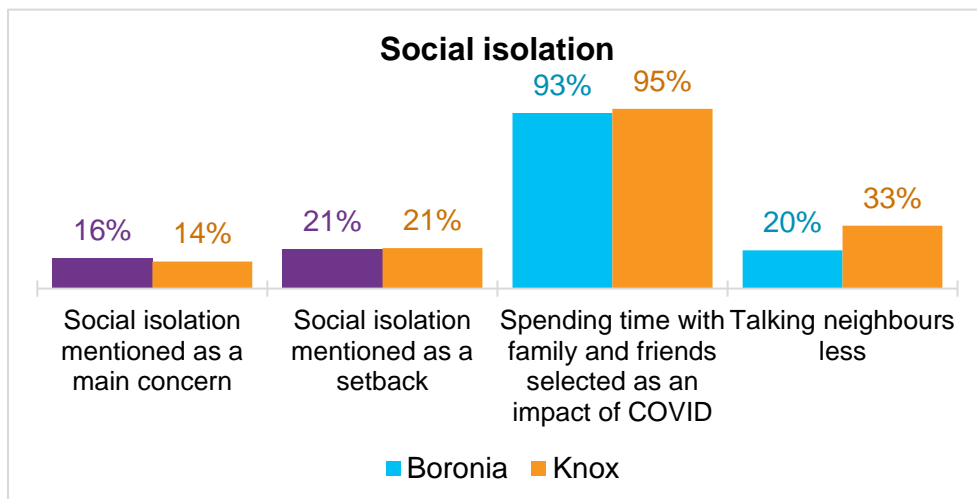
Compared to Knox

	Boronia	Knox
Total sample =	268	1596
Representative sample =	134	865

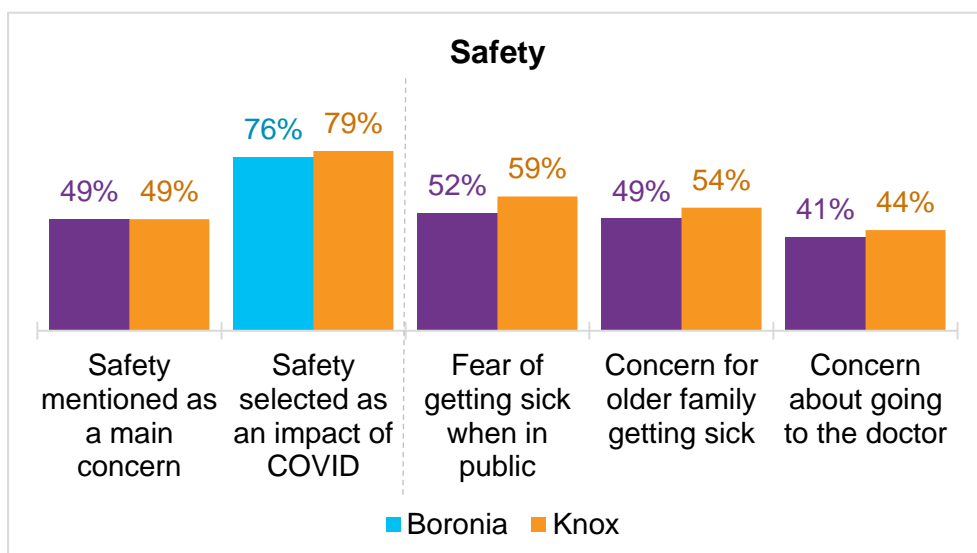
■ Overall sample
■ Representative sample



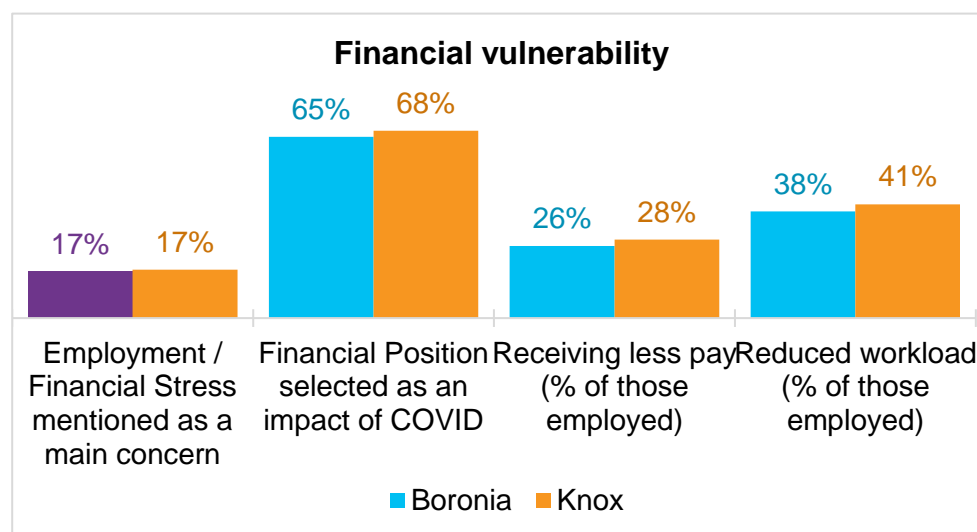
Social Isolation



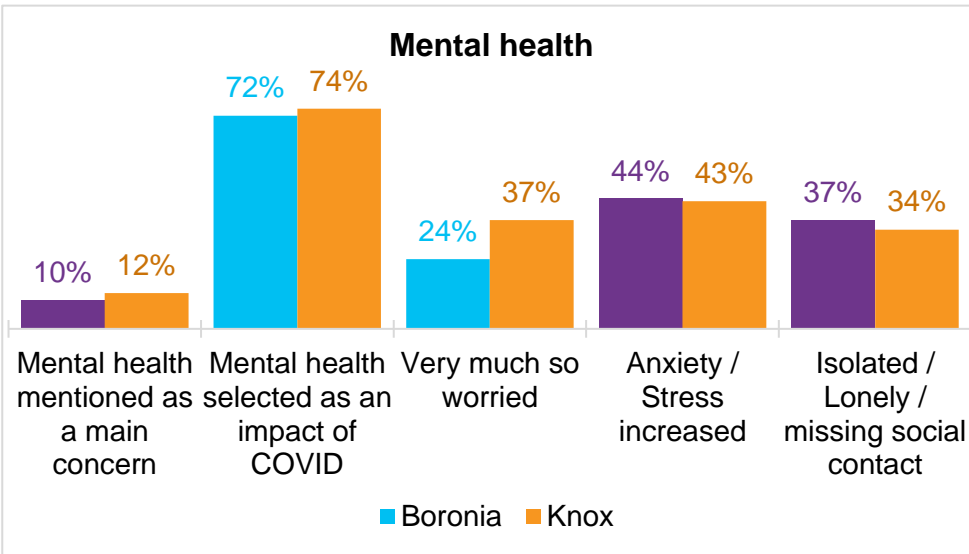
Safety



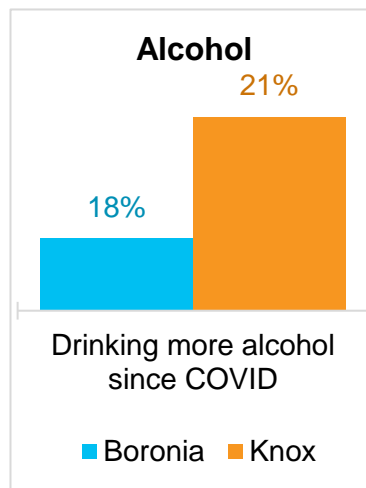
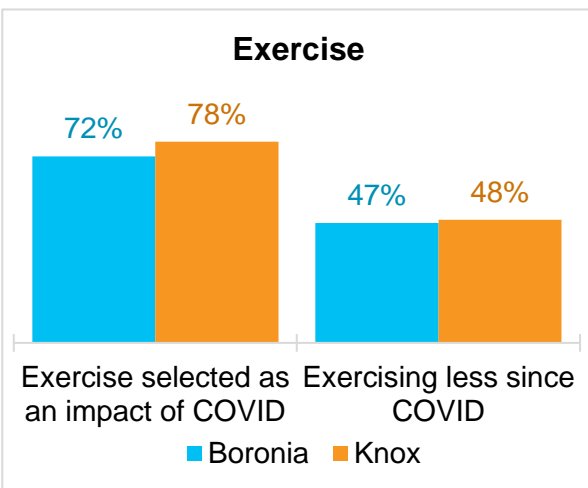
Financial vulnerability



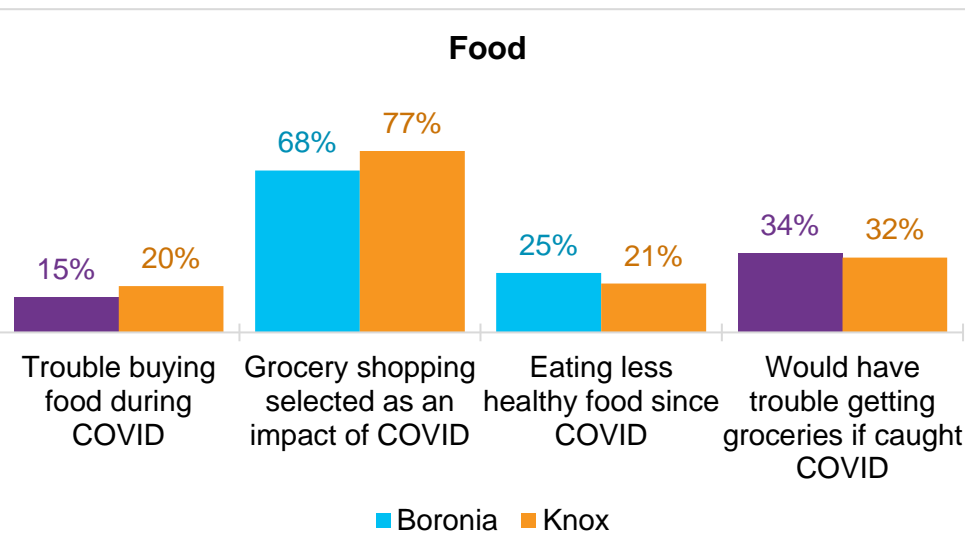
Mental health



Exercise & Alcohol



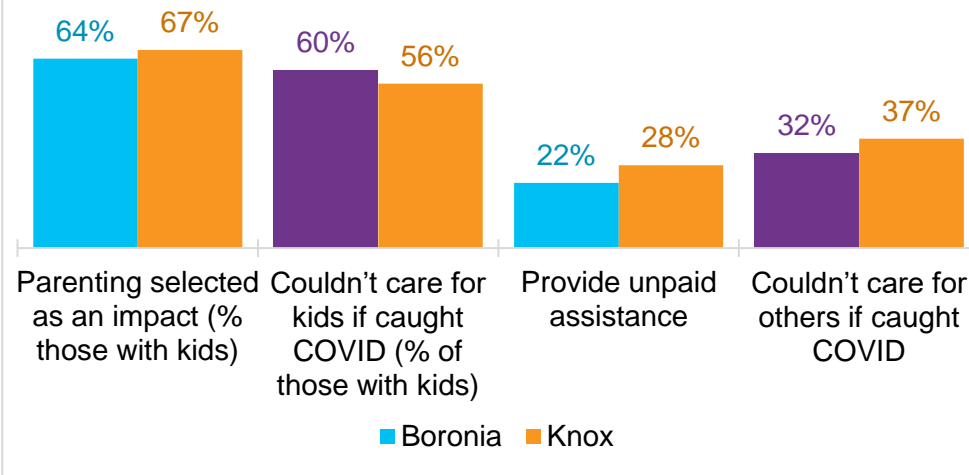
Food



Parenting & caregiving



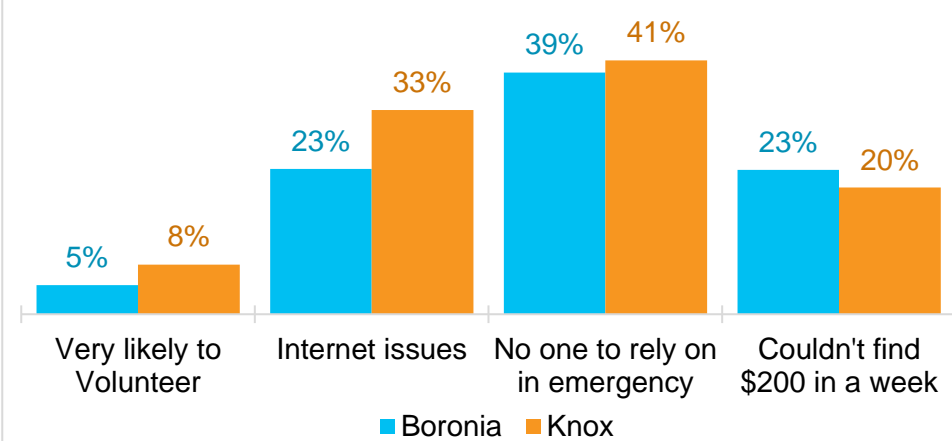
Parenting & caregiving



Resilience



Resilience

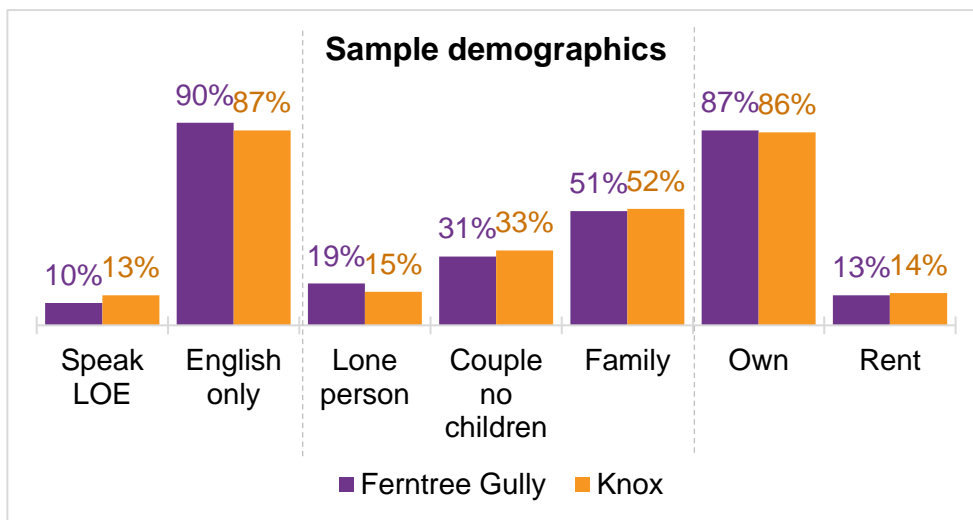
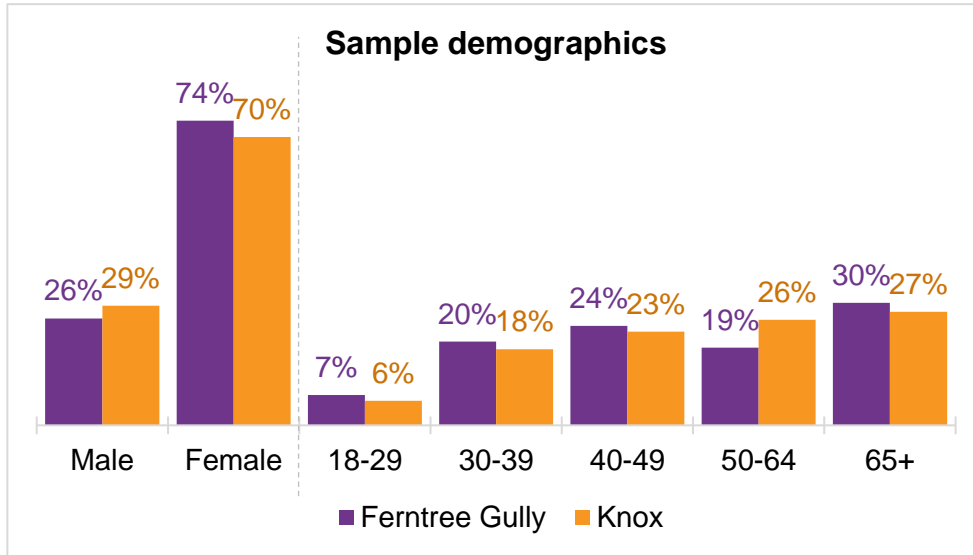


Report for Ferntree Gully

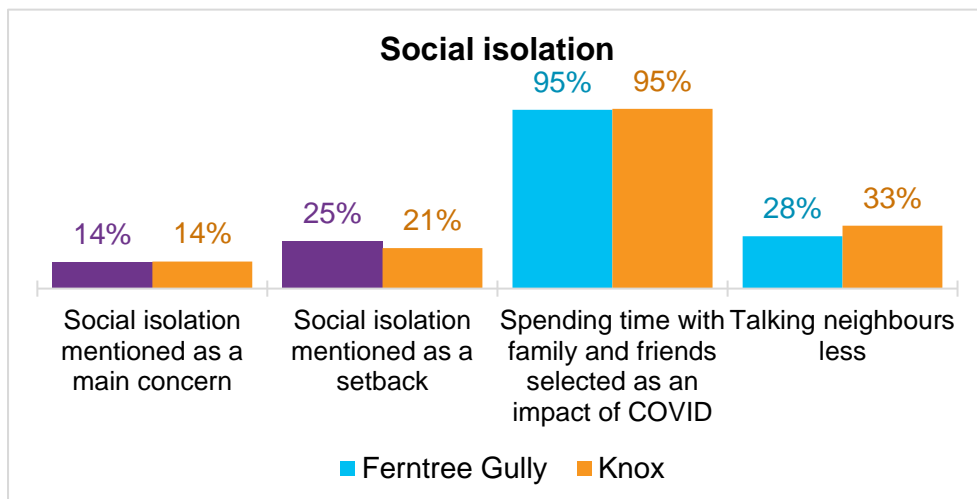
Compared to Knox

	Ferntree Gully	Knox
Total sample =	345	1596
Representative sample =	147	865

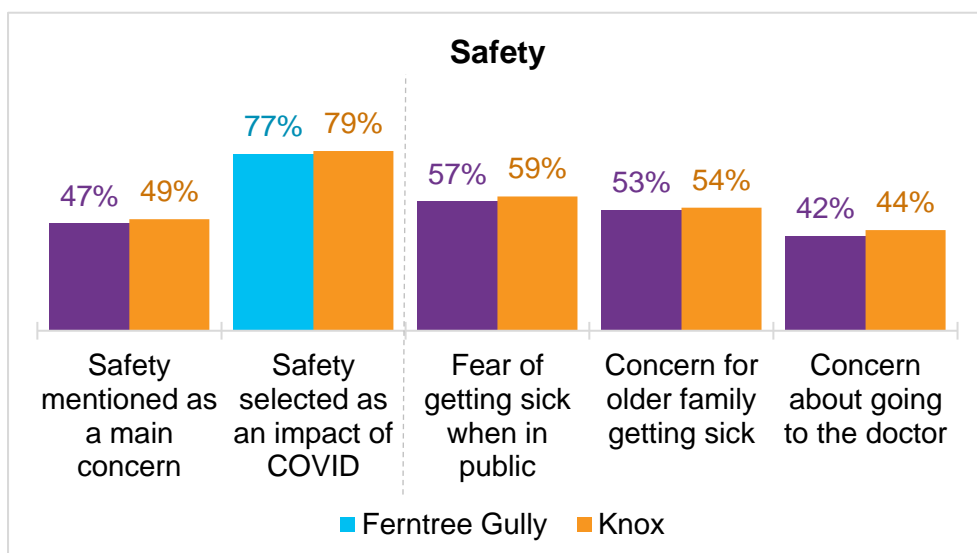
■ Overall sample
■ Representative sample



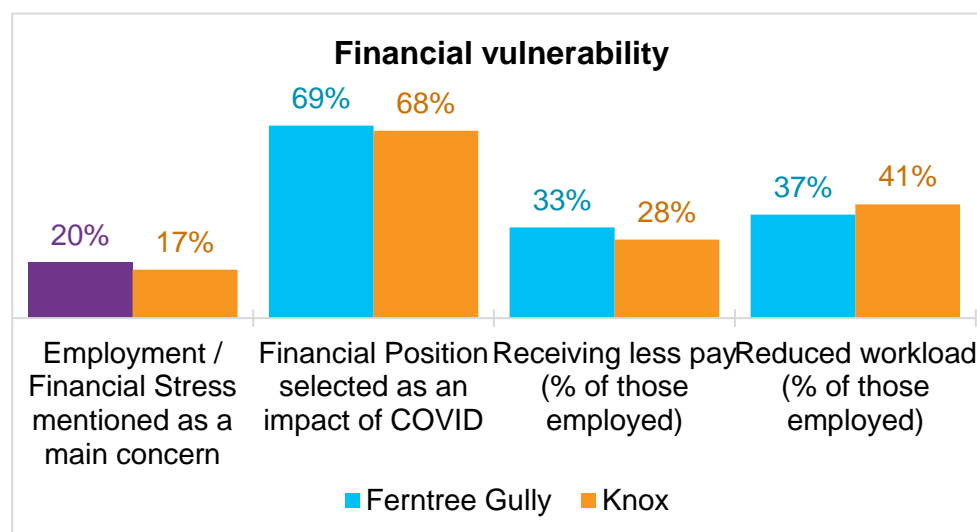
Social Isolation



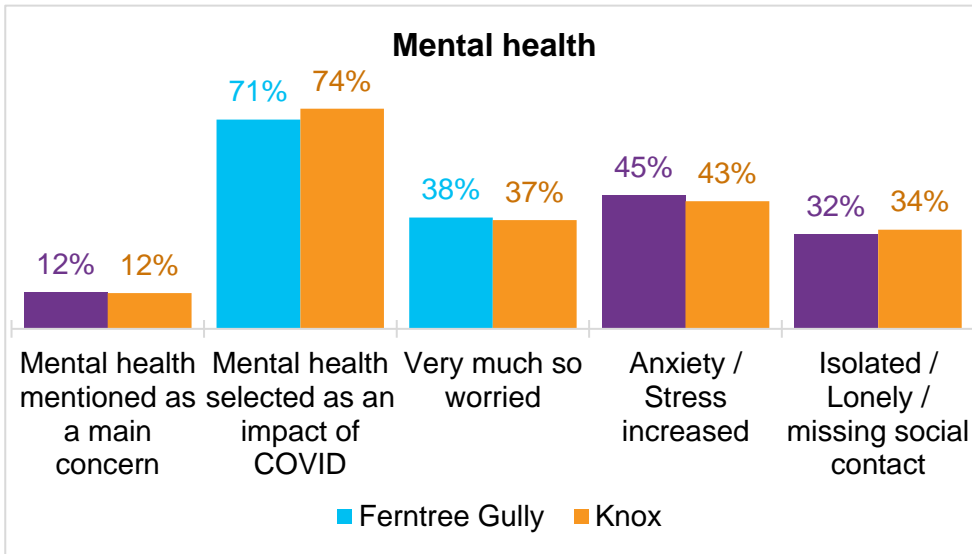
Safety



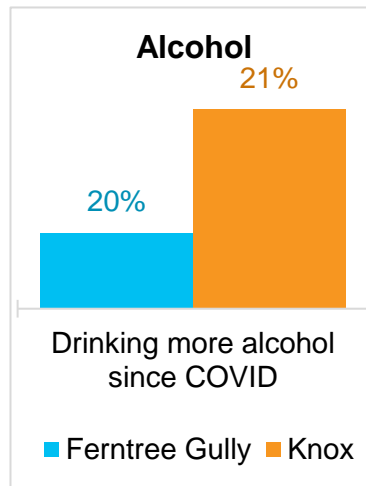
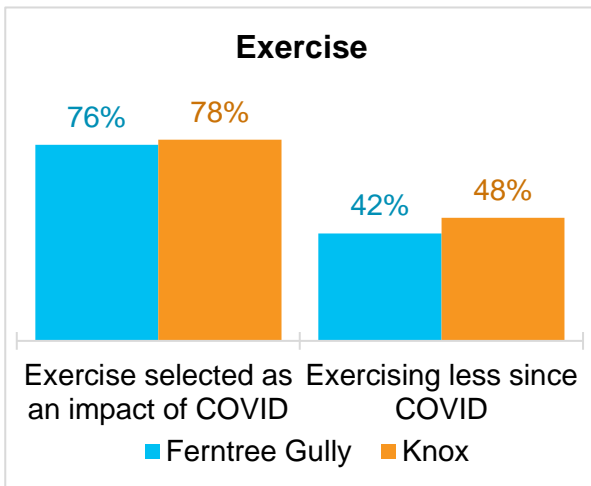
Financial vulnerability



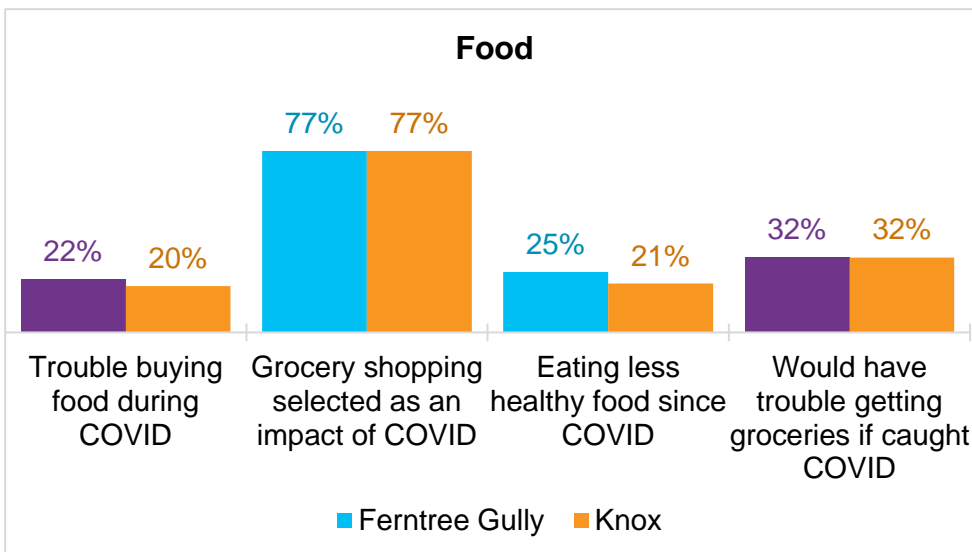
Mental health



Exercise & Alcohol



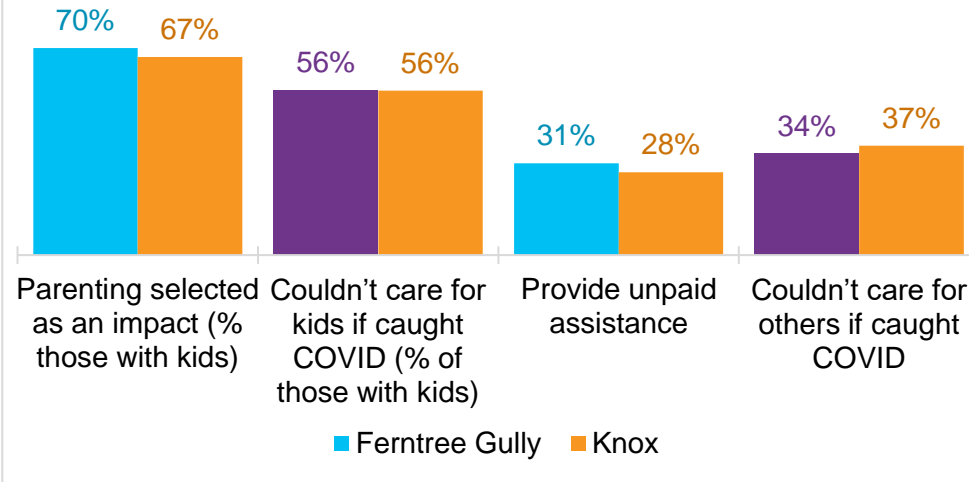
Food



Parenting & caregiving



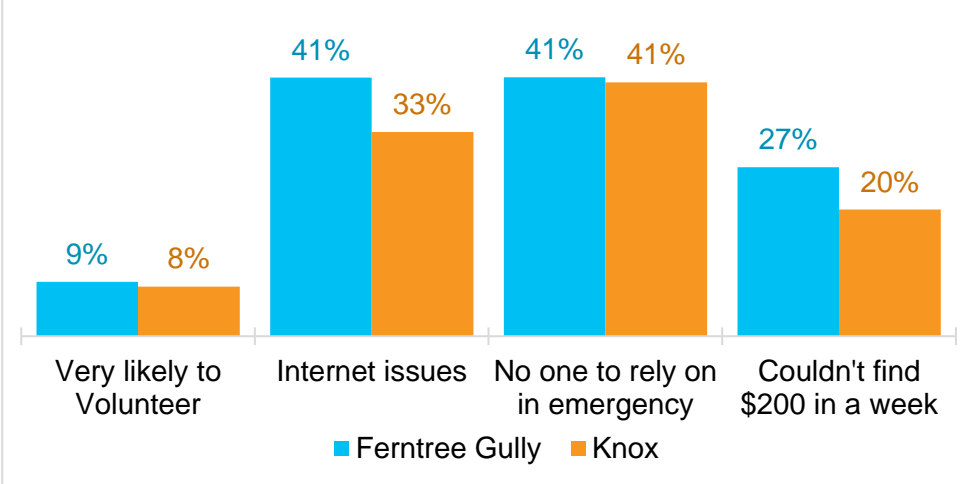
Parenting & caregiving



Resilience



Resilience

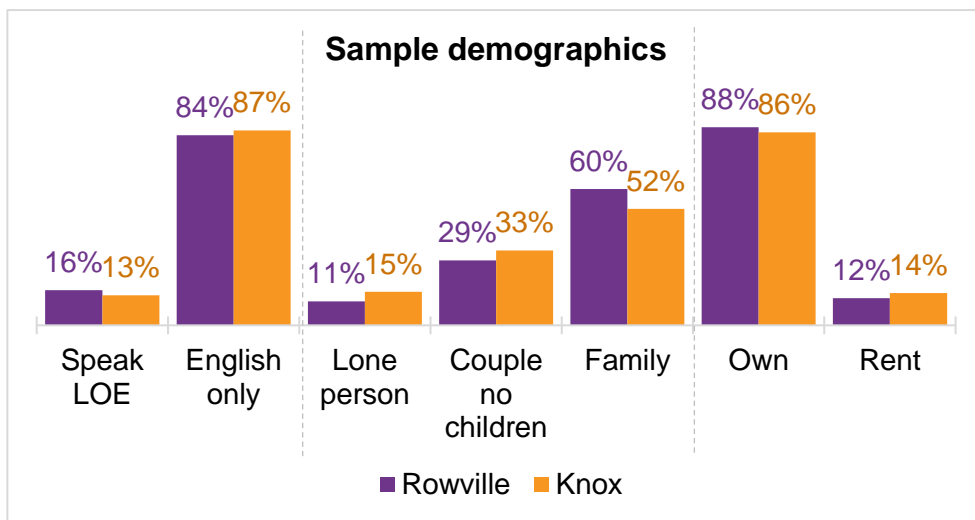
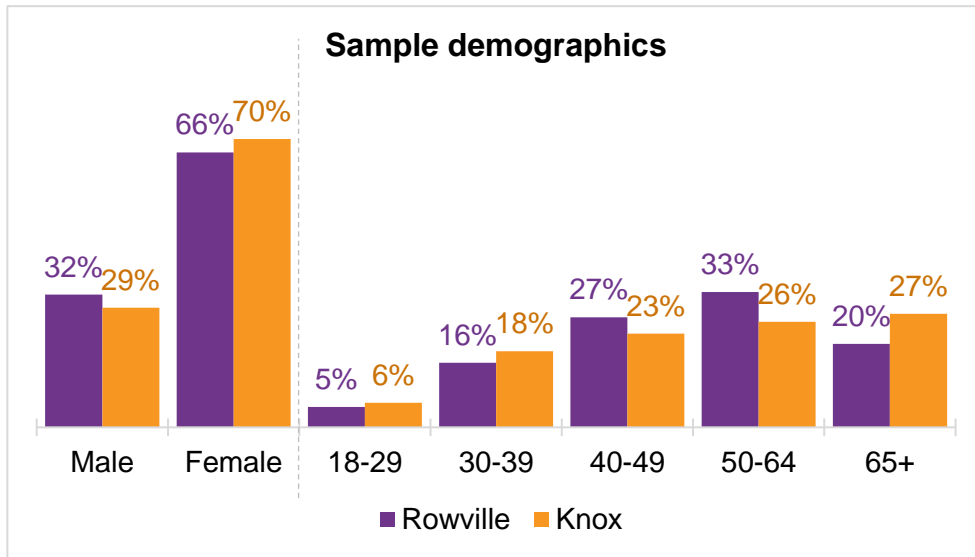


Report for Rowville

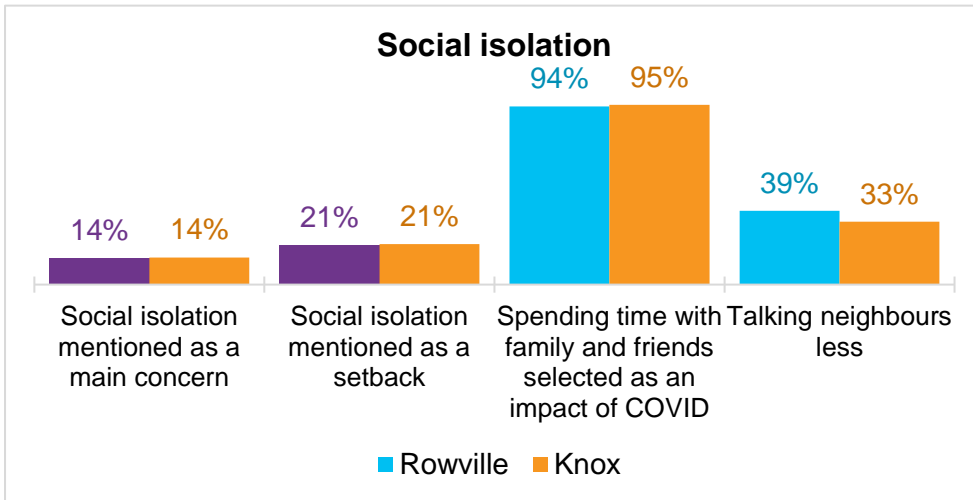
Compared to Knox

	Rowville	Knox
Total sample =	262	1596
Representative sample =	184	865

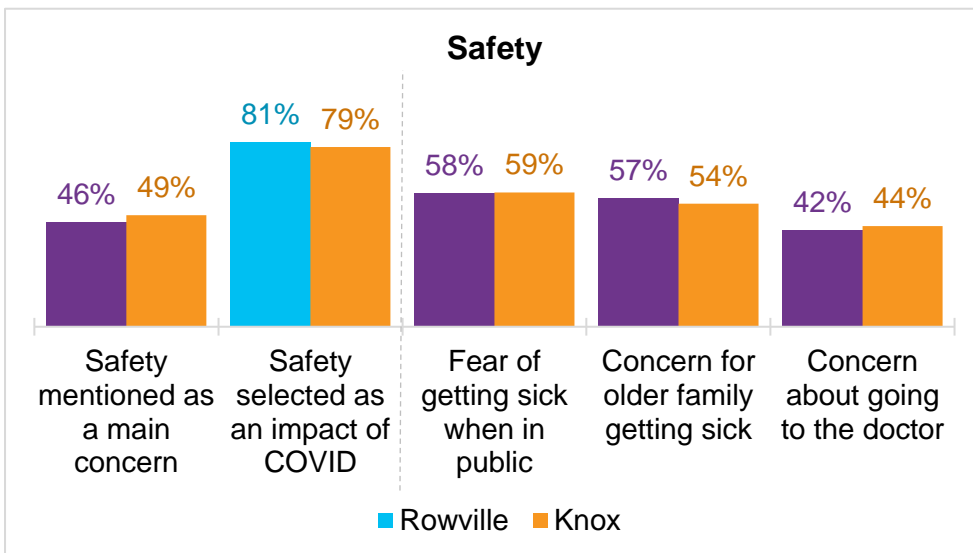
■ Overall sample
■ Representative sample



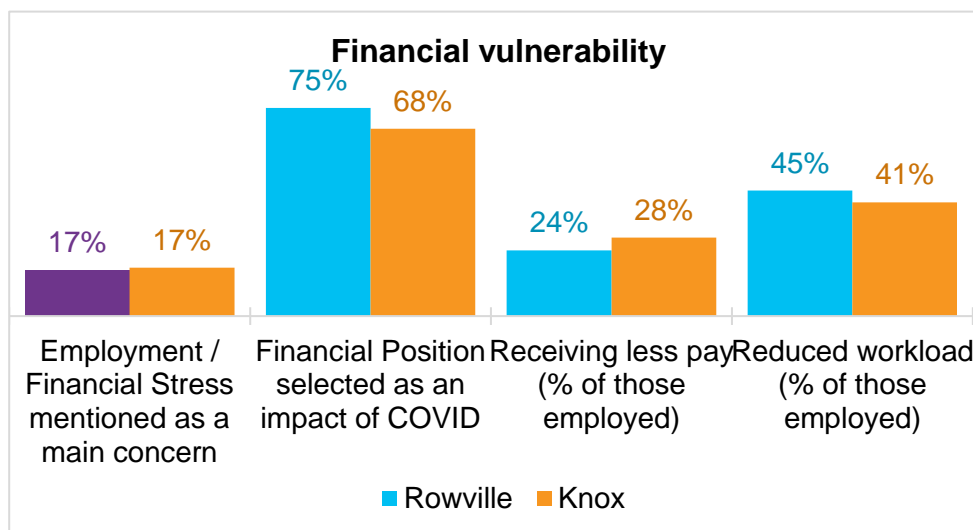
Social Isolation



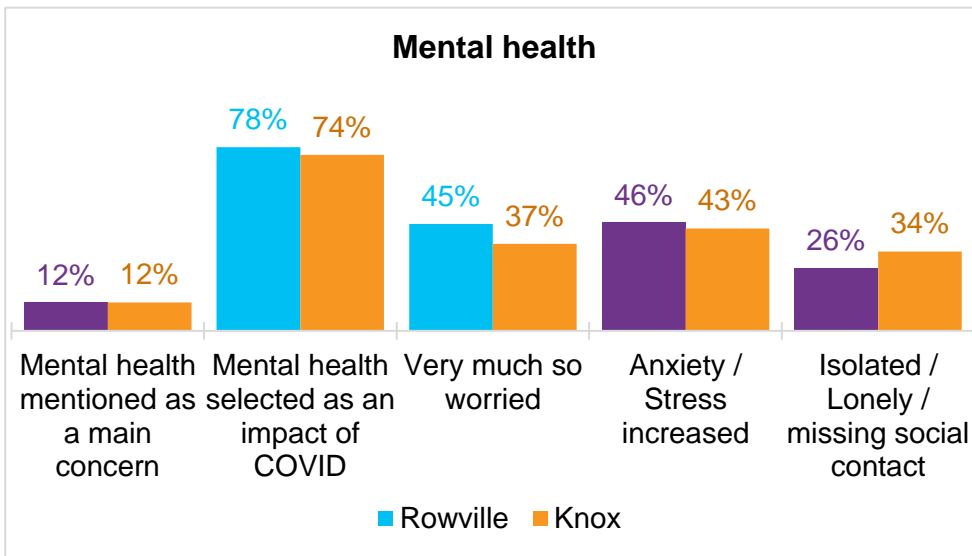
Safety



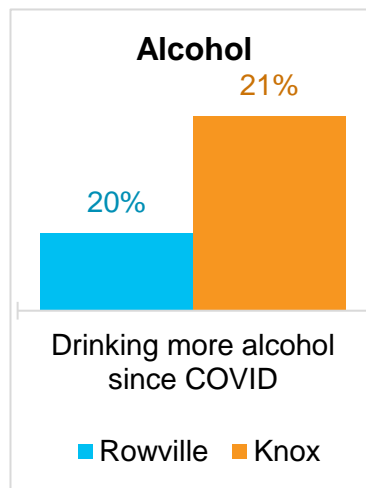
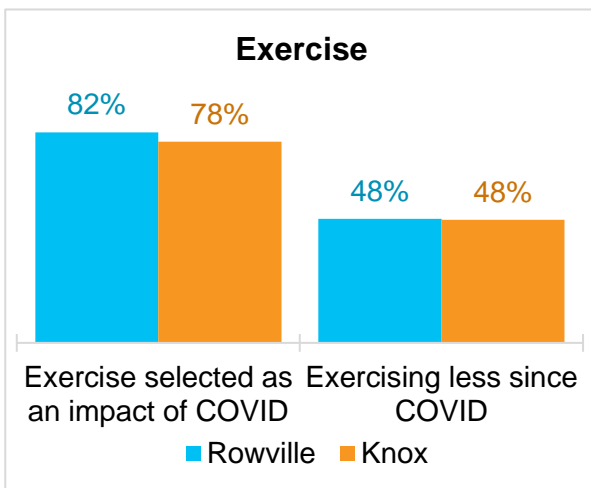
Financial vulnerability



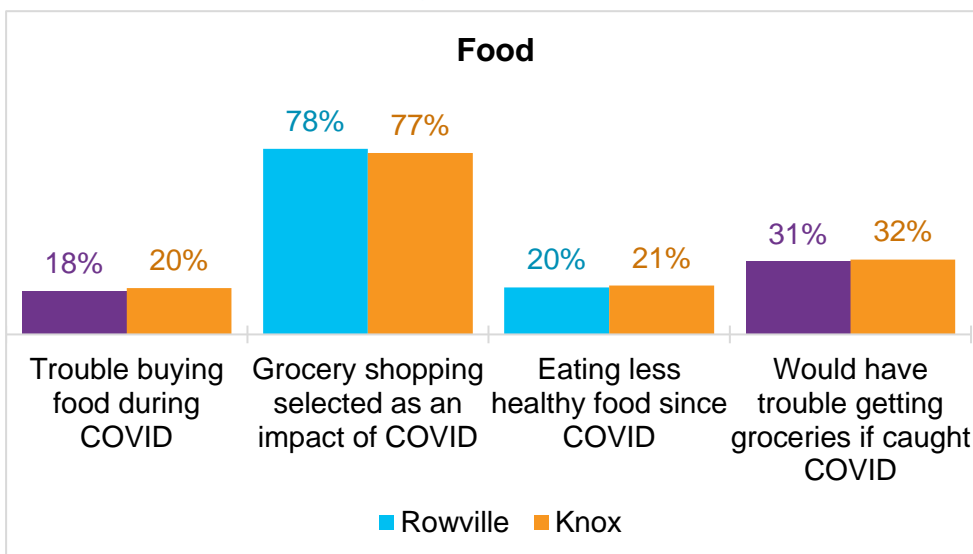
Mental health



Exercise & Alcohol



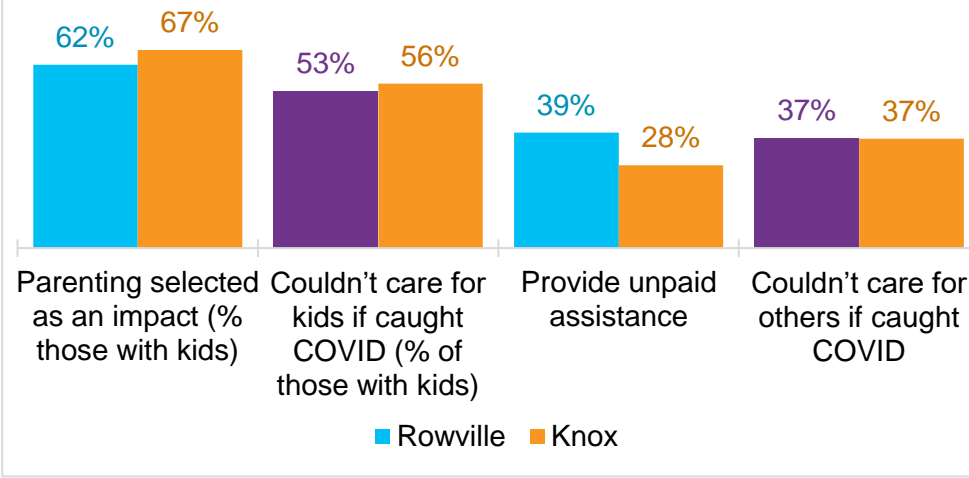
Food



Parenting & caregiving



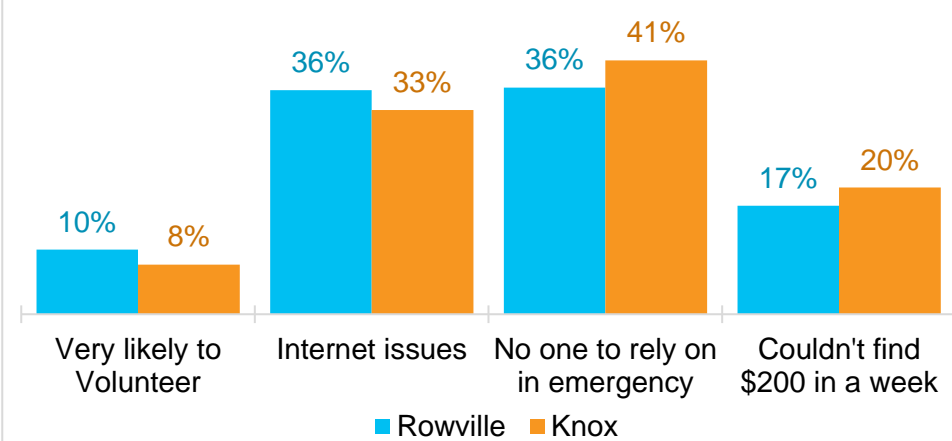
Parenting & caregiving



Resilience



Resilience

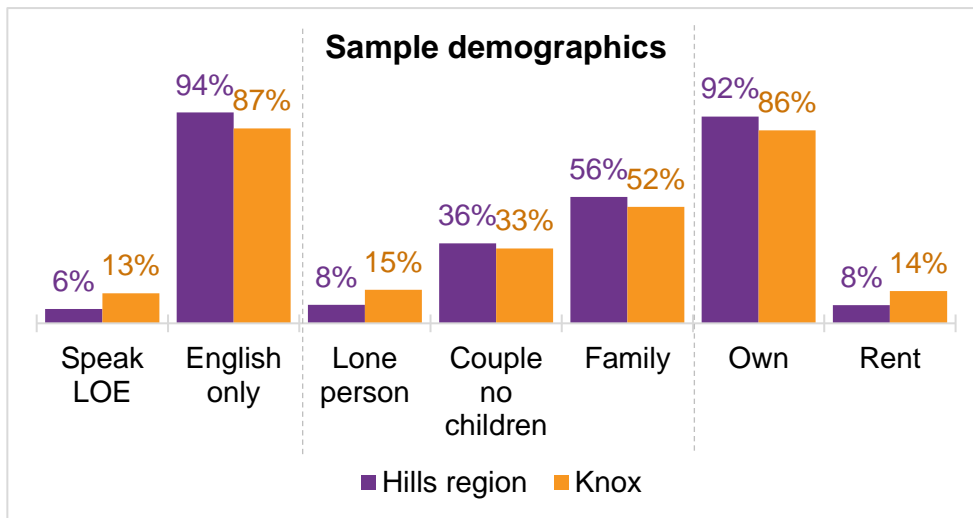
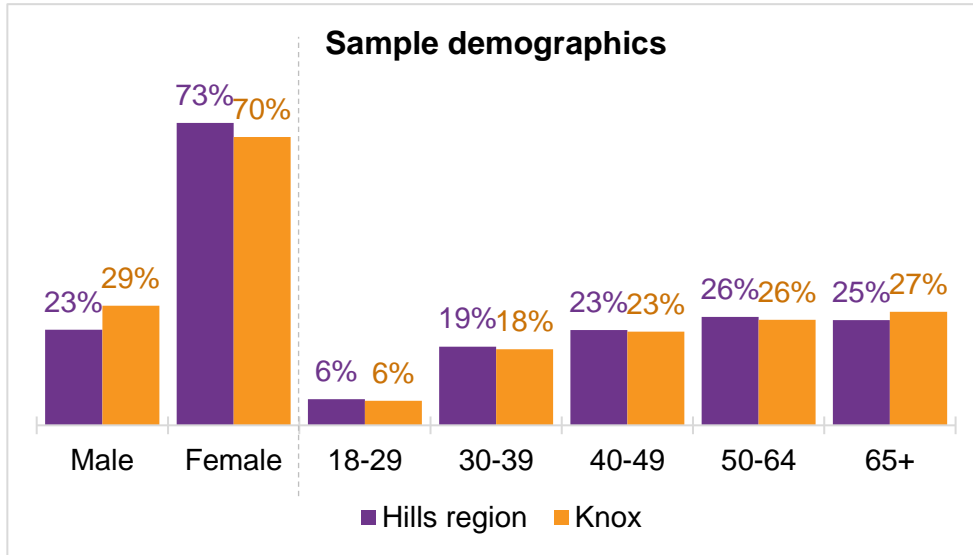


Report for Hills region

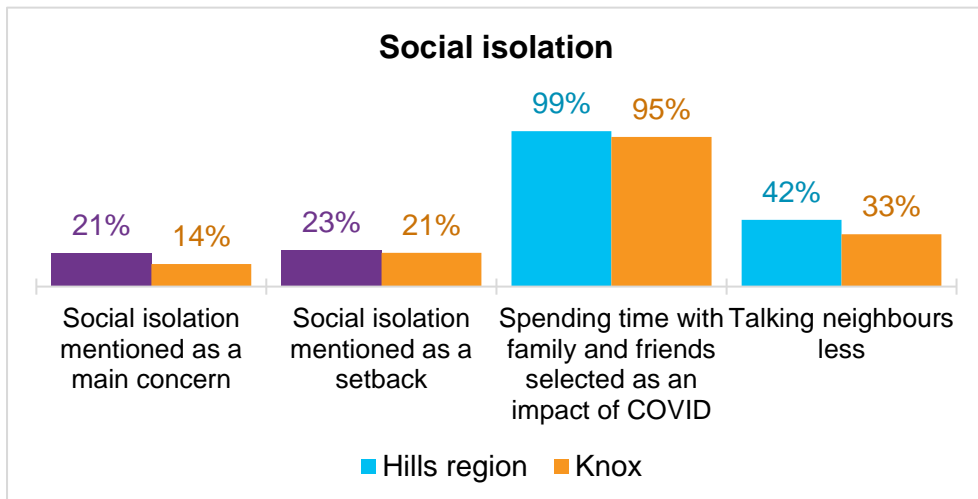
Compared to Knox

	Hills region	Knox
Total sample =	130	1596
Representative sample =	79	865

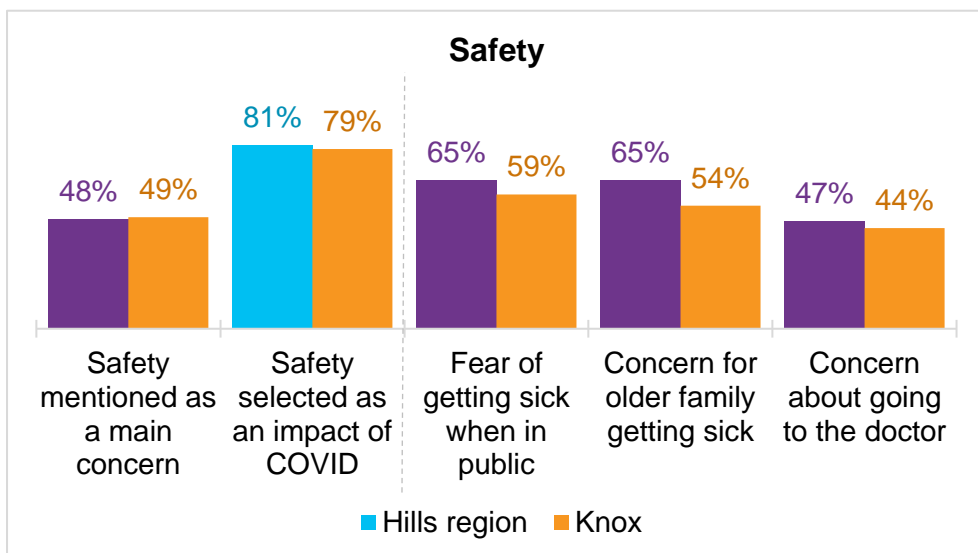
■ Overall sample
■ Representative sample



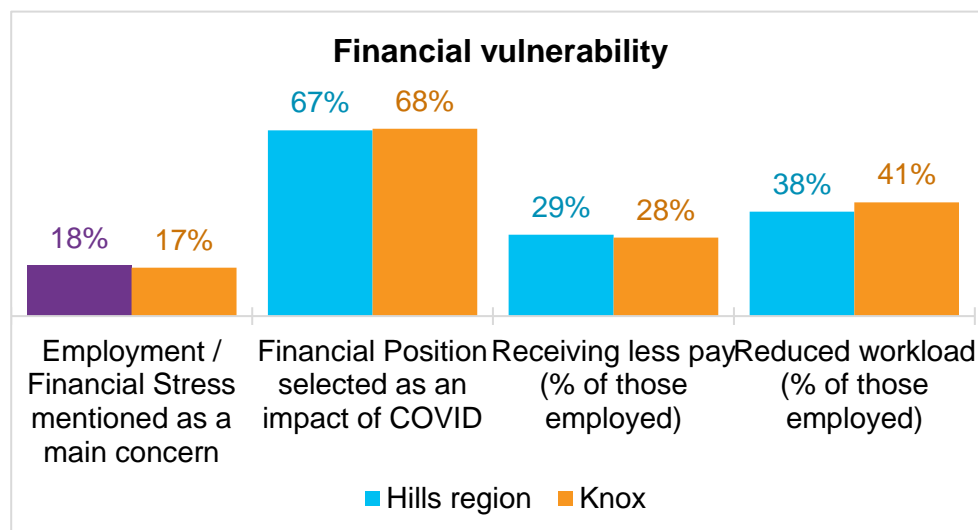
Social Isolation



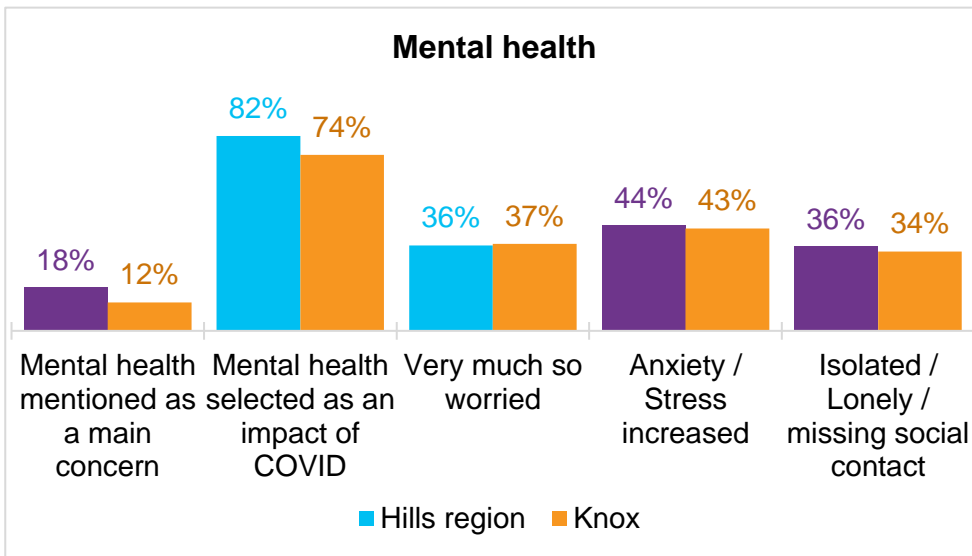
Safety



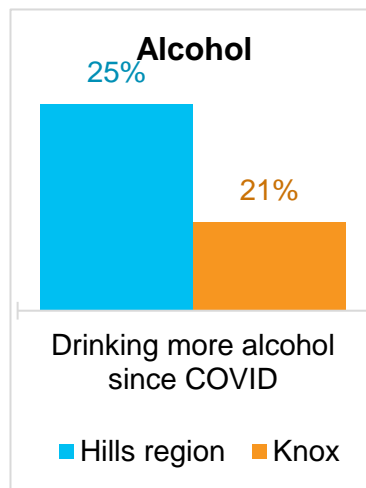
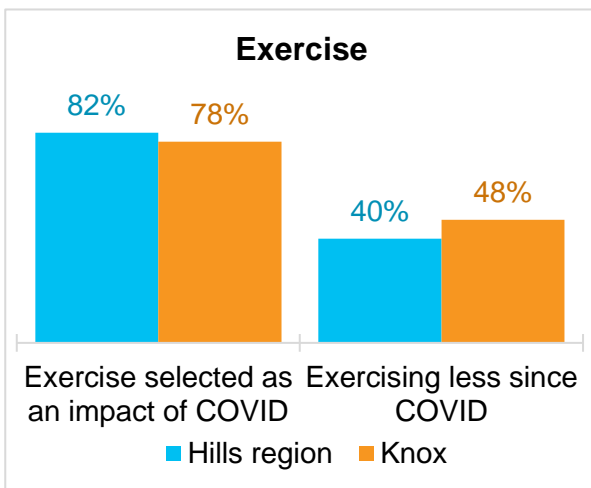
Financial vulnerability



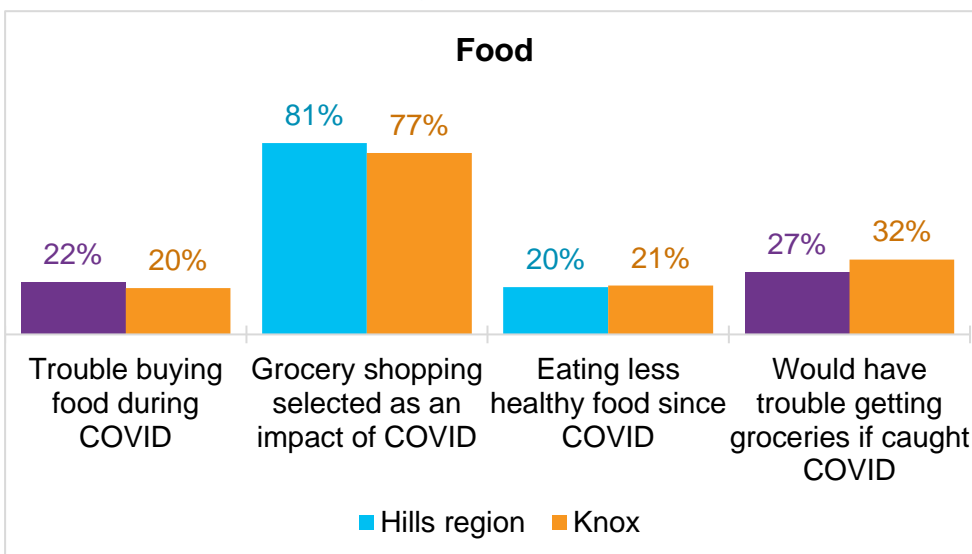
Mental health



Exercise & Alcohol



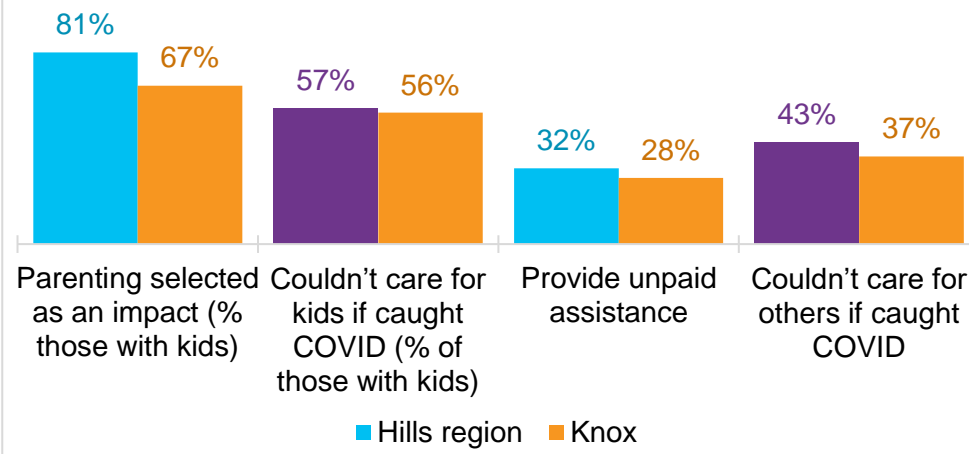
Food



Parenting & caregiving



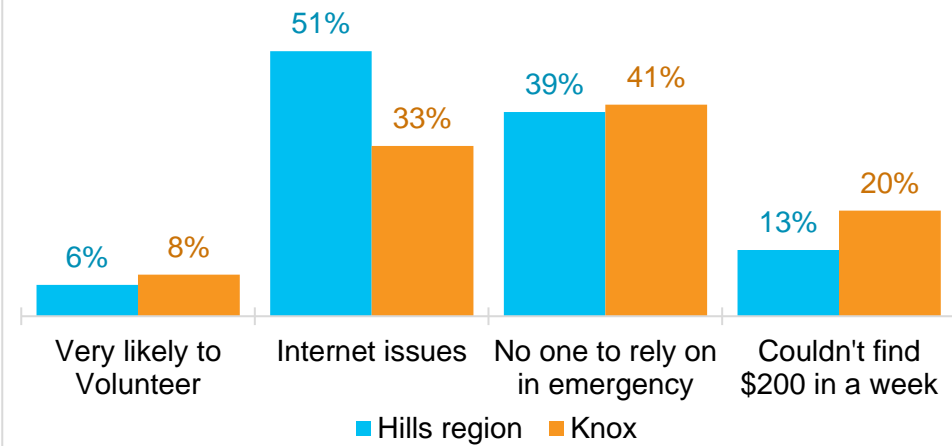
Parenting & caregiving



Resilience



Resilience

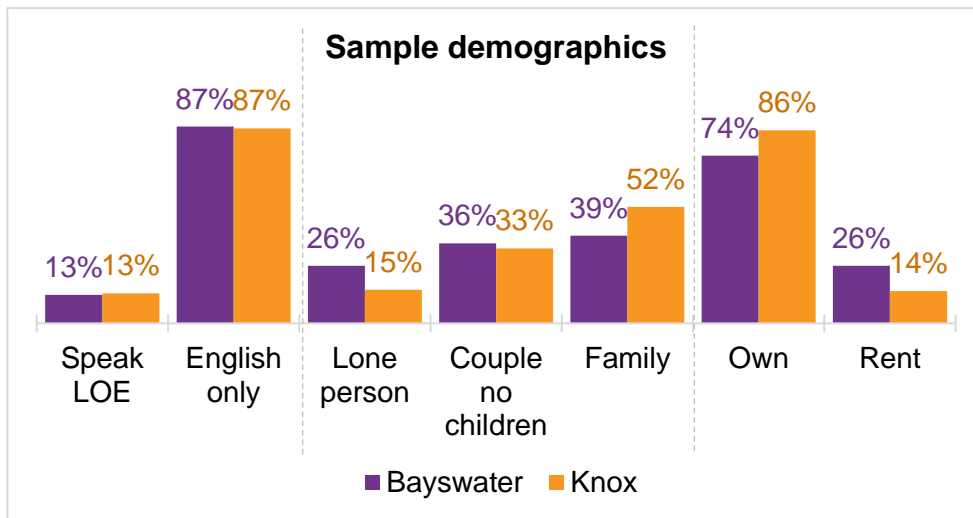
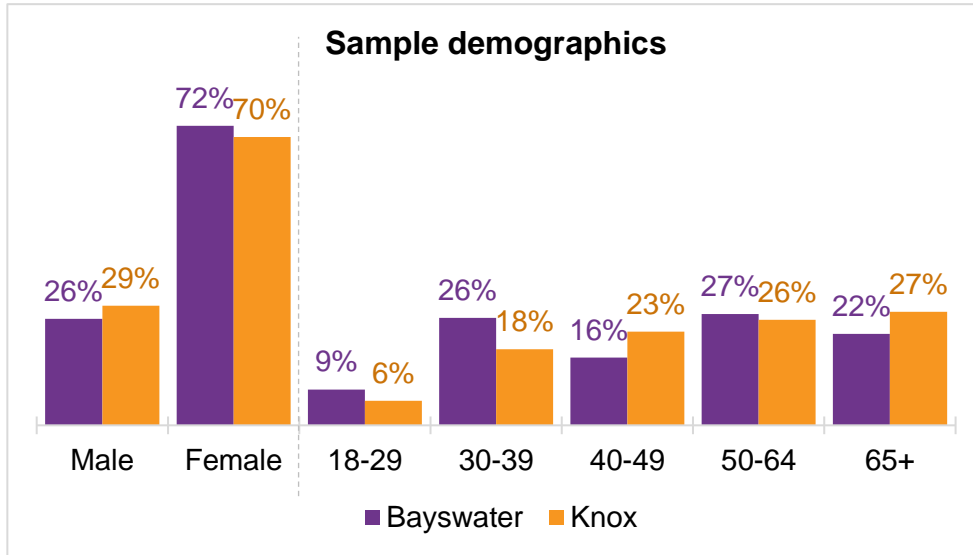


Report for Bayswater

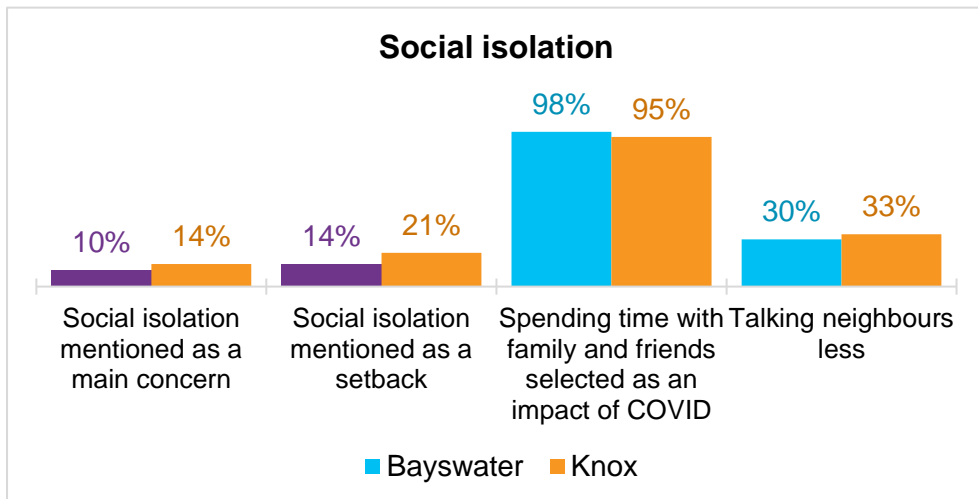
Compared to Knox

	Bayswater	Knox
Total sample =	105	1596
Representative sample =	59	865

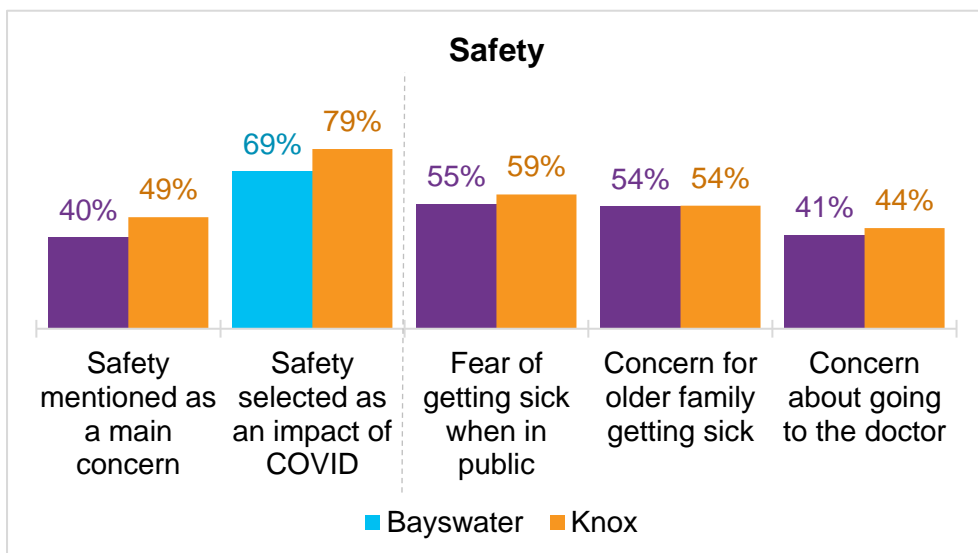
■ Overall sample
■ Representative sample



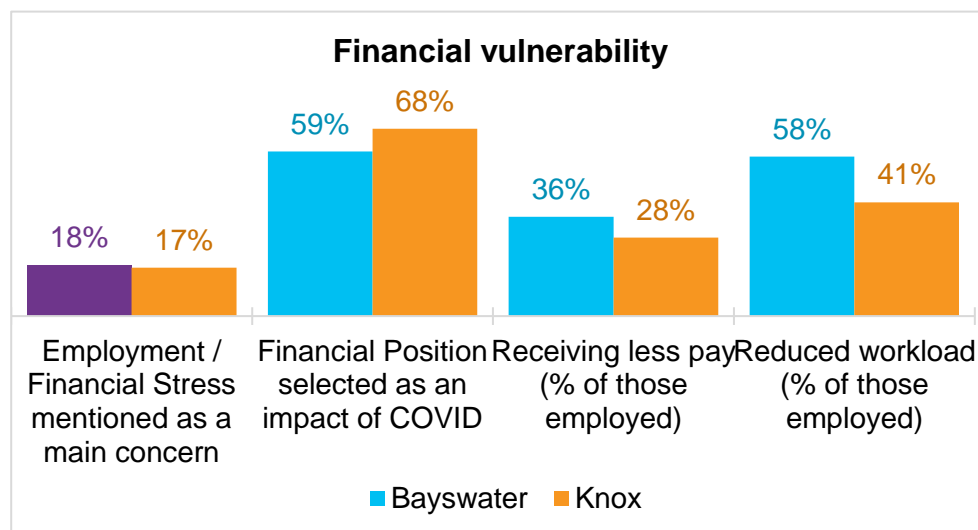
Social Isolation



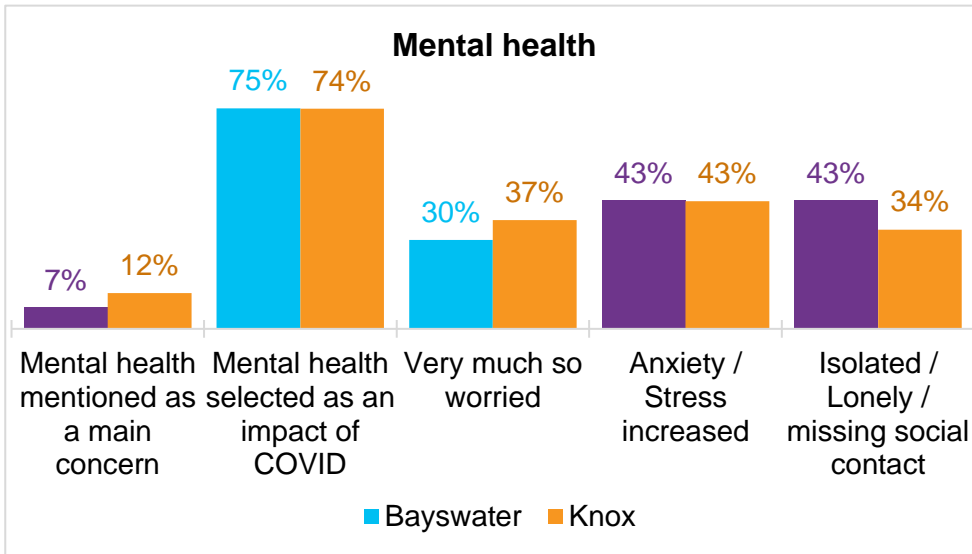
Safety



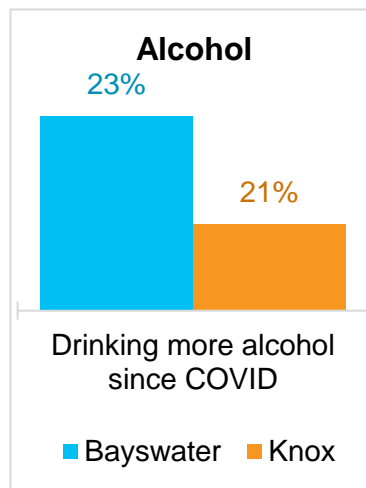
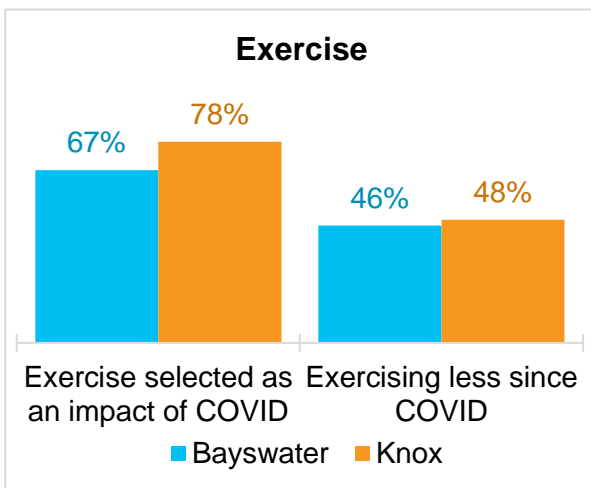
Financial vulnerability



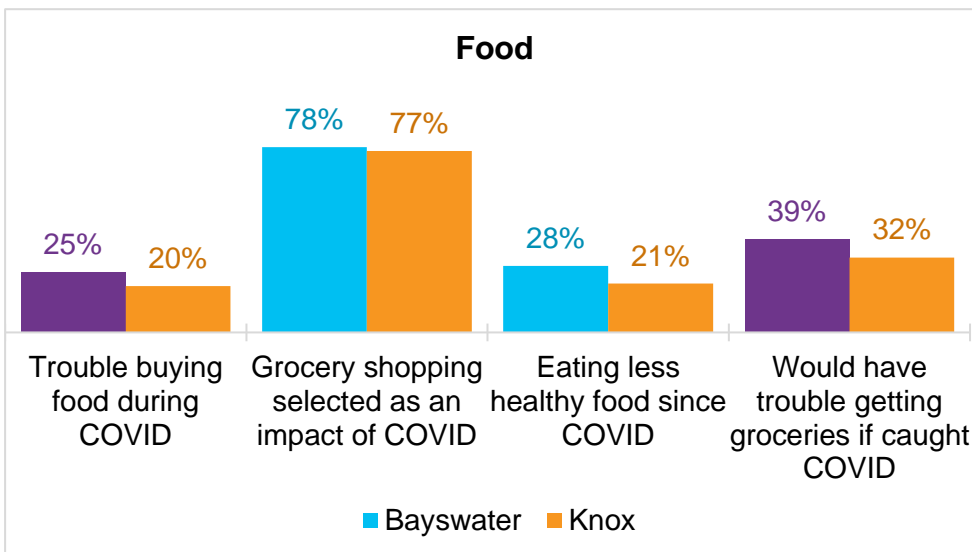
Mental health



Exercise & Alcohol



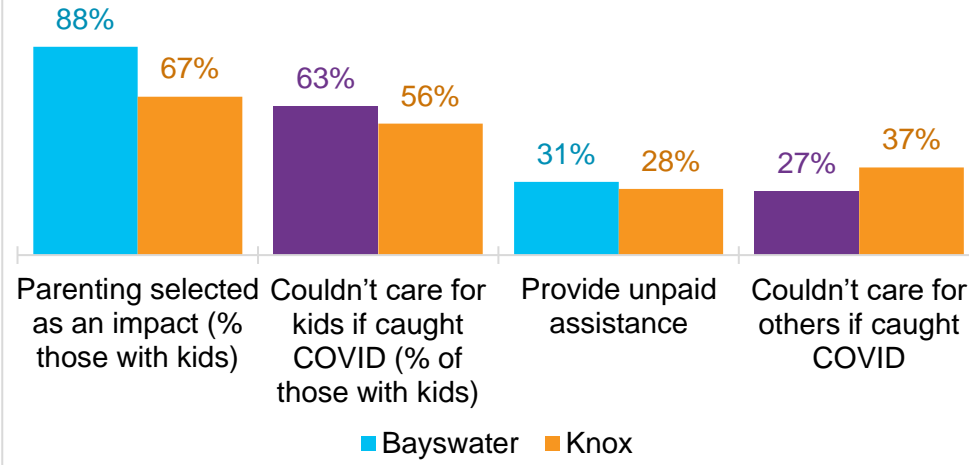
Food



Parenting & caregiving



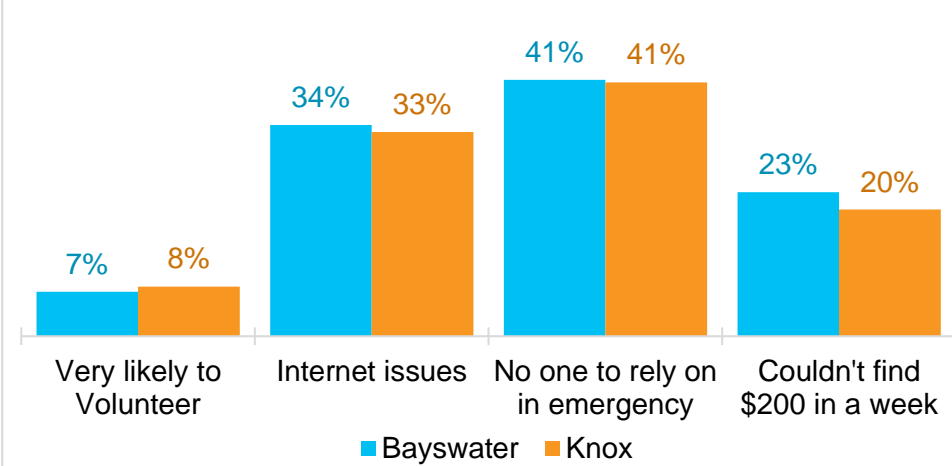
Parenting & caregiving



Resilience



Resilience

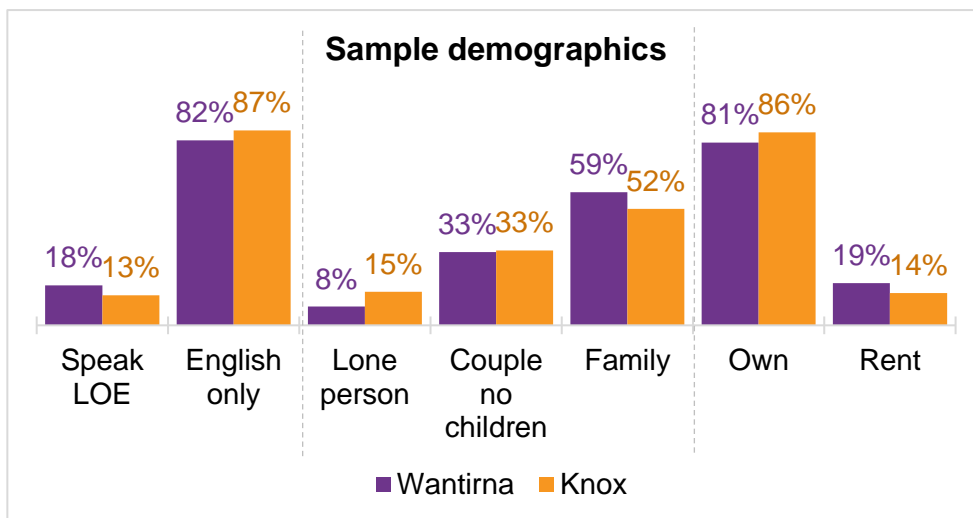
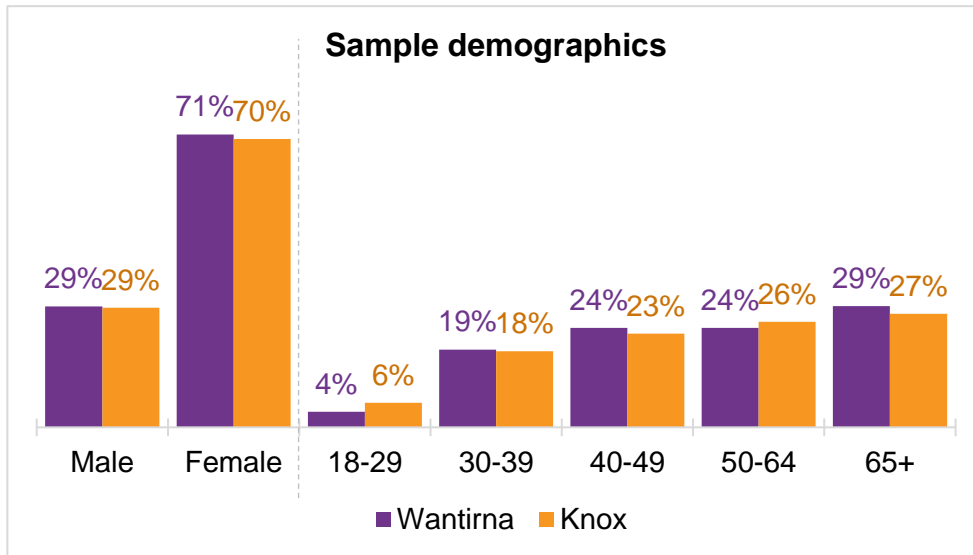


Report for Wantirna

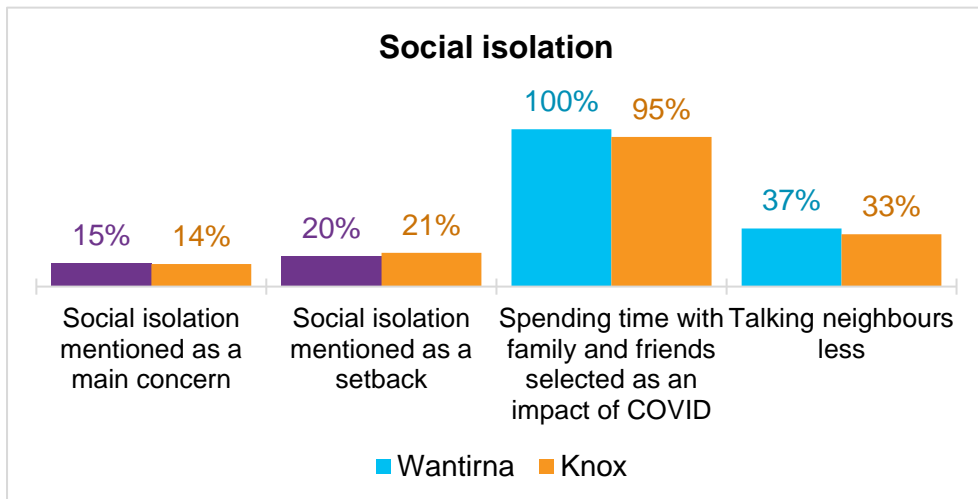
Compared to Knox

	Wantirna	Knox
Total sample =	137	1596
Representative sample =	69	865

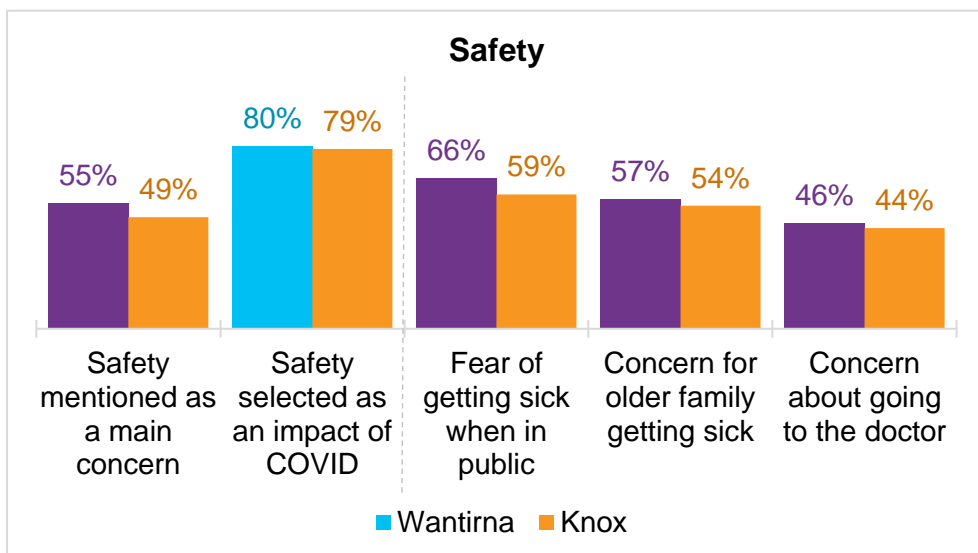
■ Overall sample
■ Representative sample



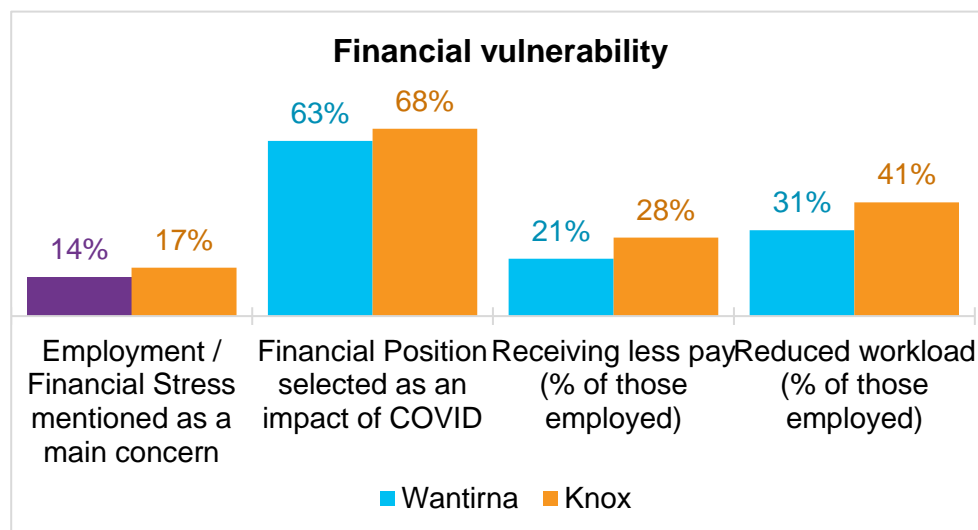
Social Isolation



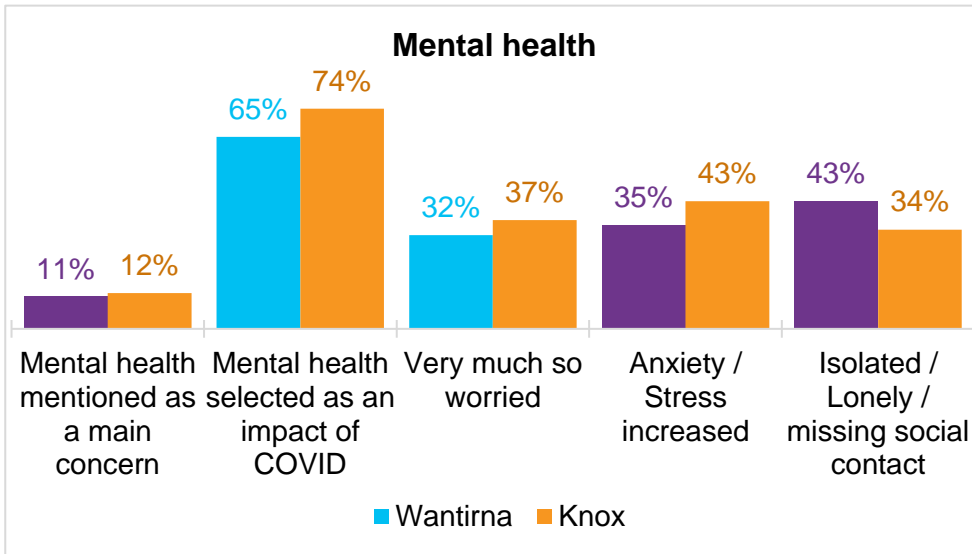
Safety



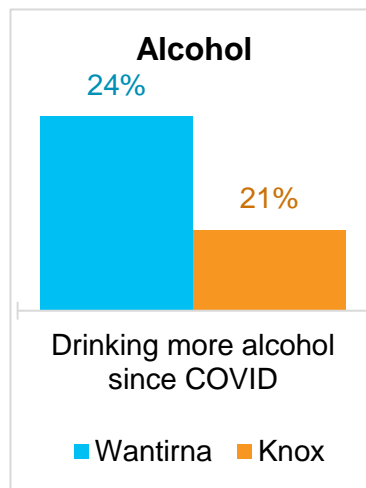
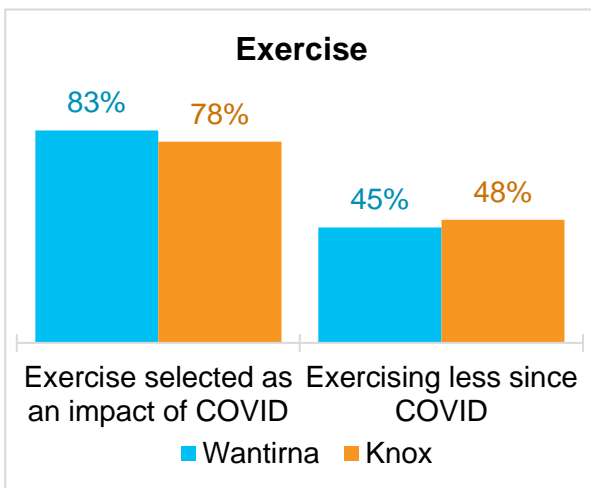
Financial vulnerability



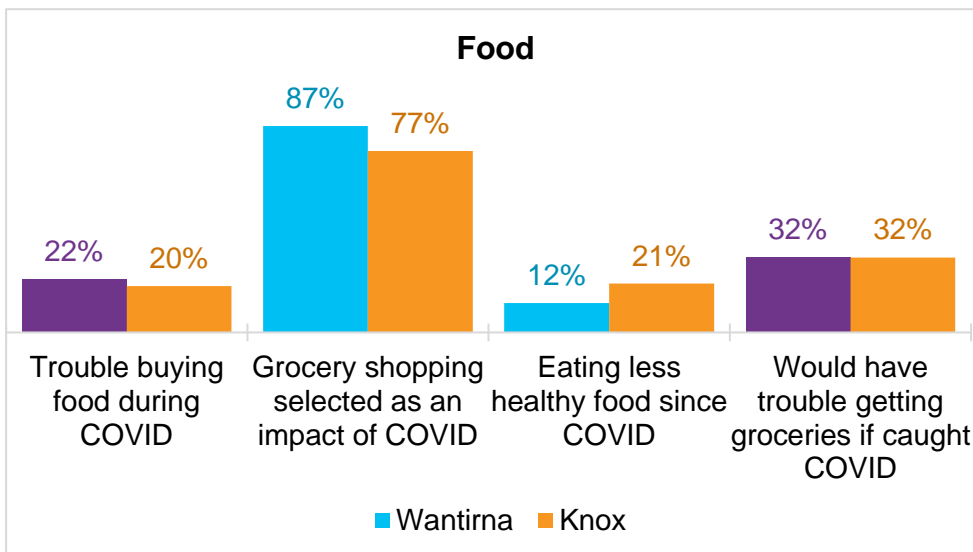
Mental health



Exercise & Alcohol



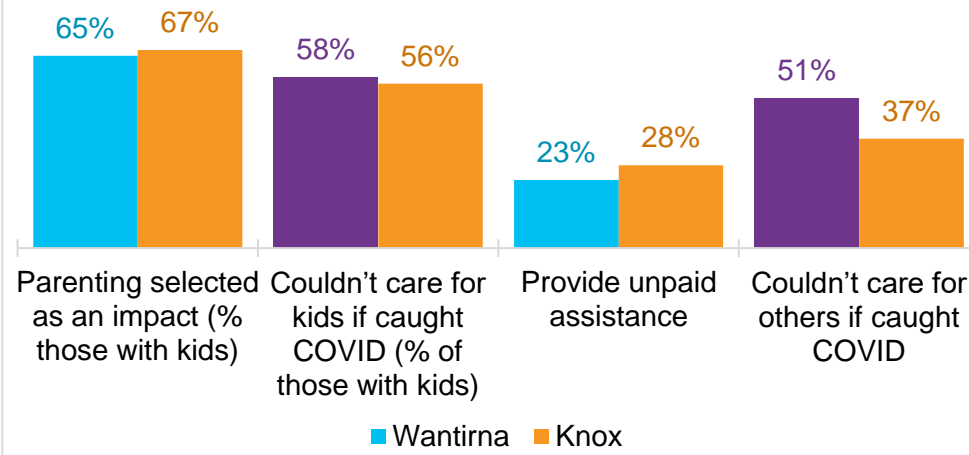
Food



Parenting & caregiving



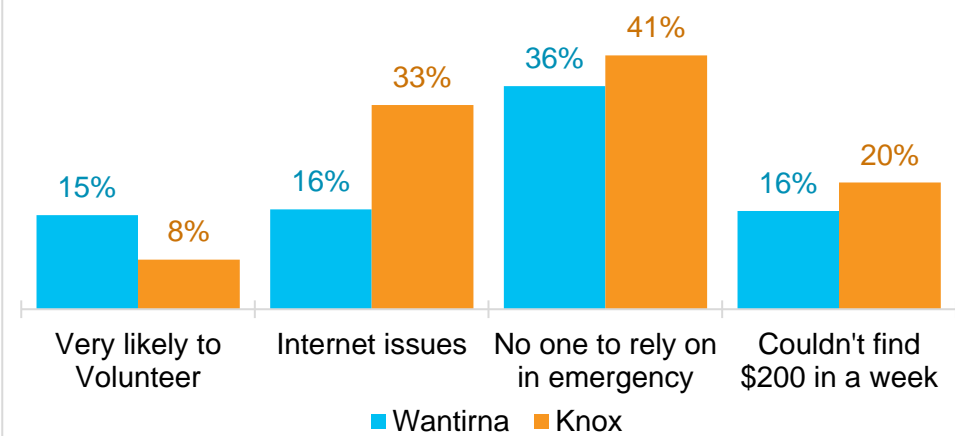
Parenting & caregiving



Resilience



Resilience

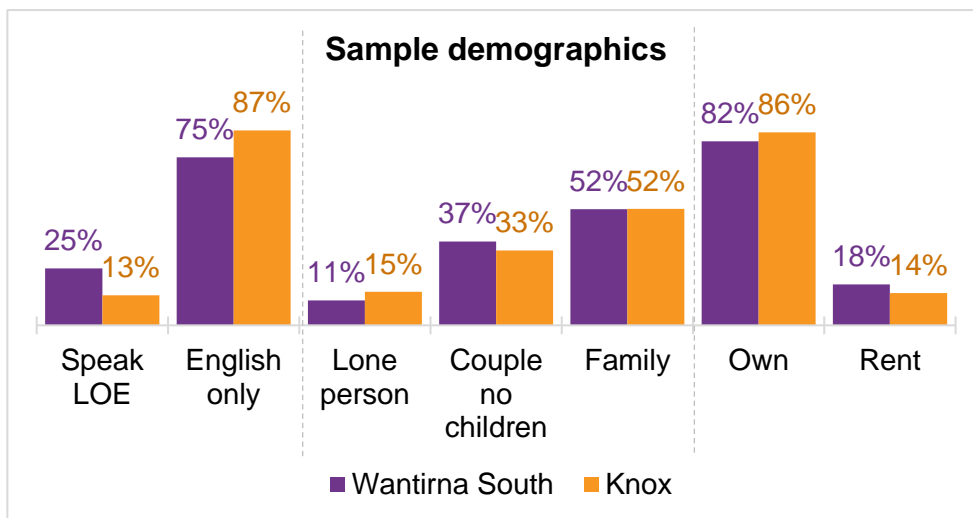
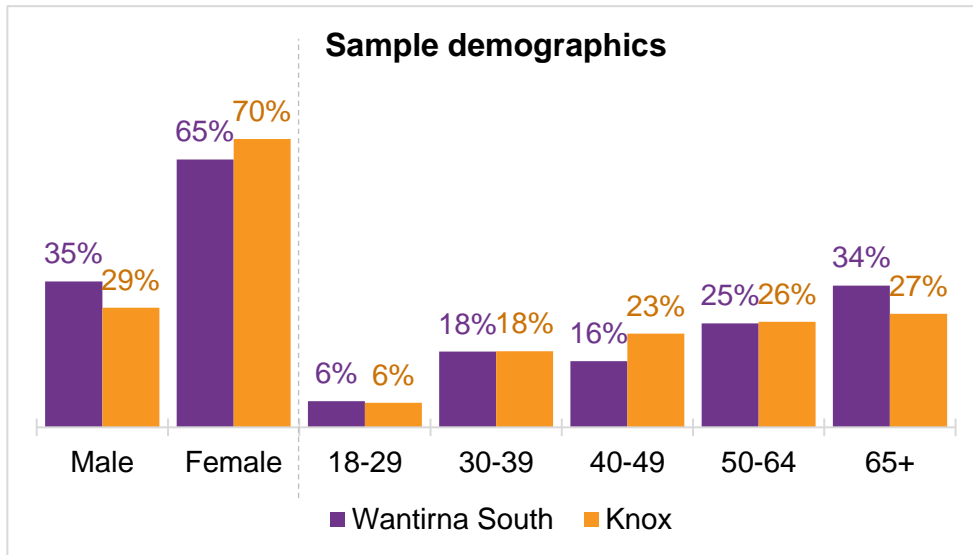


Report for Wantirna South

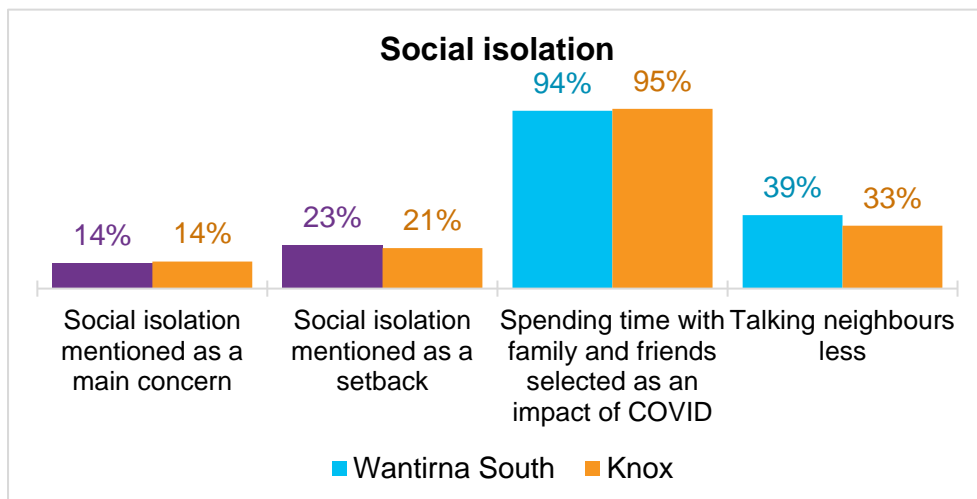
Compared to Knox

	Wantirna South	Knox
Total sample =	176	1596
Representative sample =	120	865

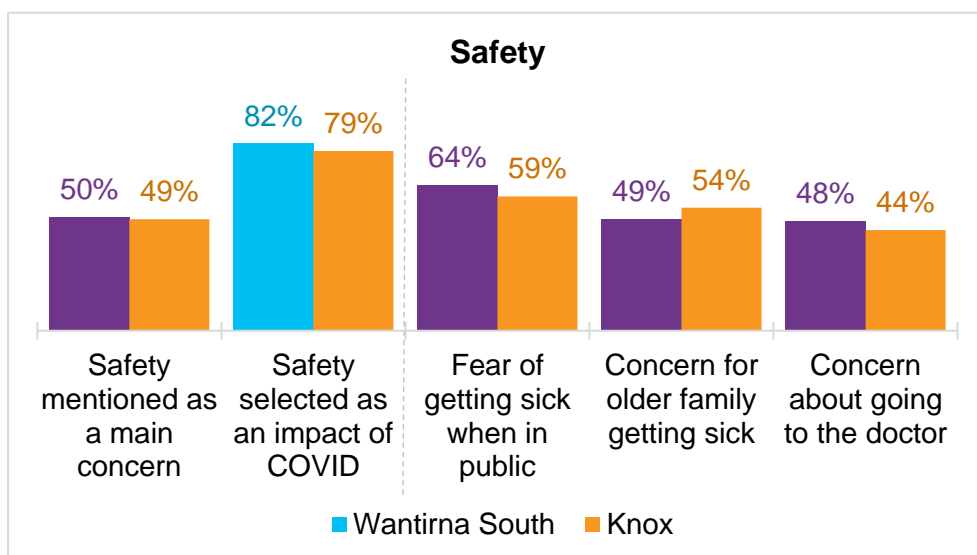
■ Overall sample
■ Representative sample



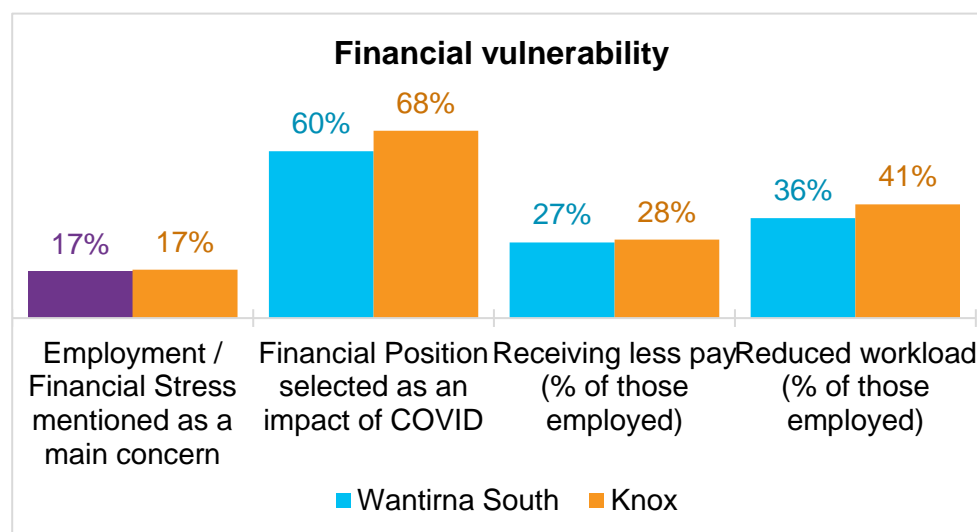
Social Isolation



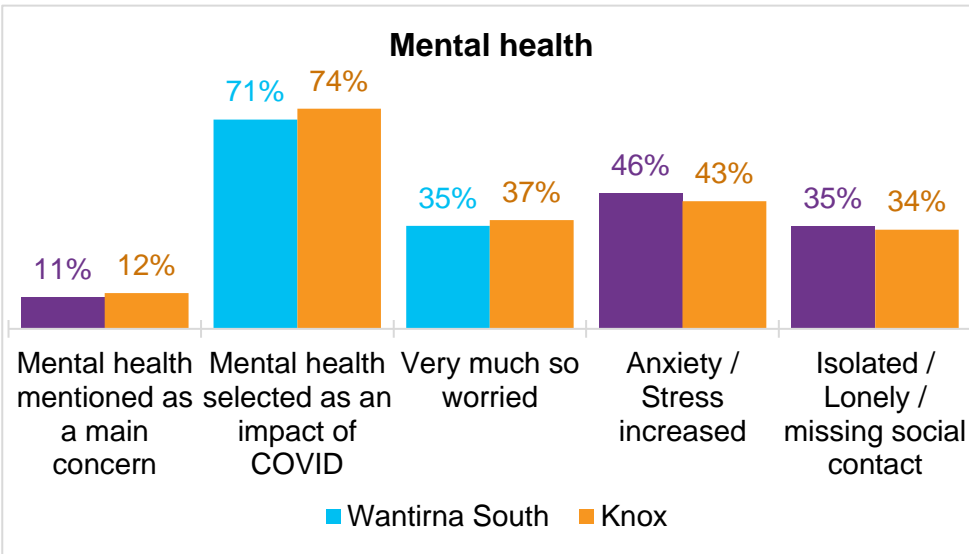
Safety



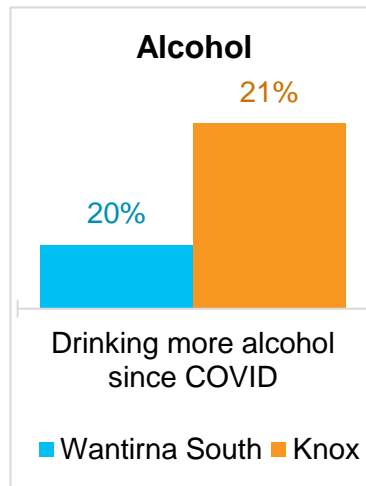
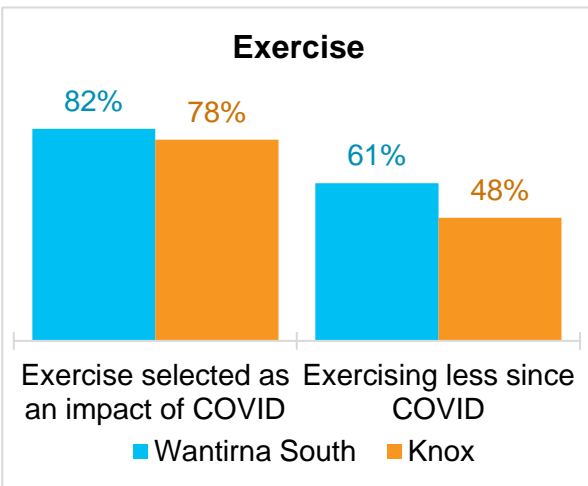
Financial vulnerability



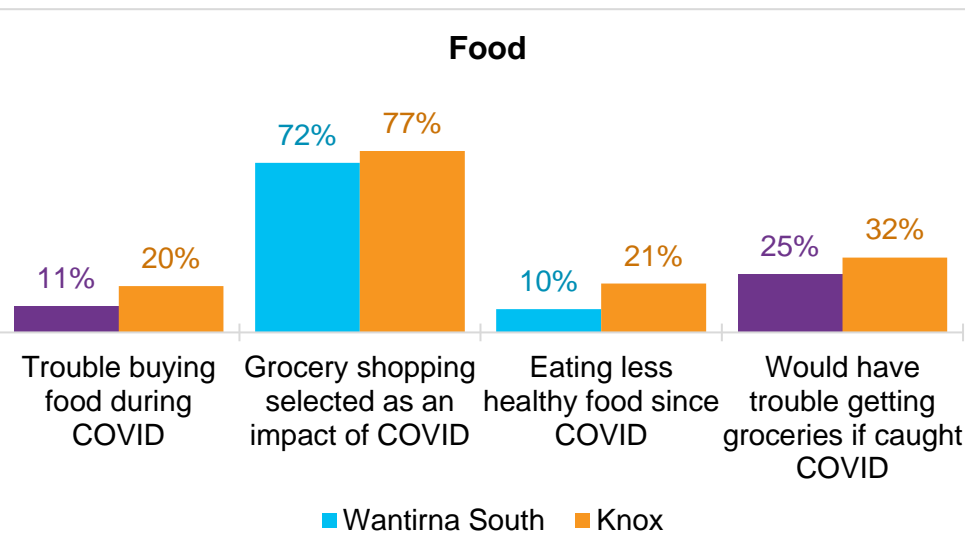
Mental health



Exercise & Alcohol



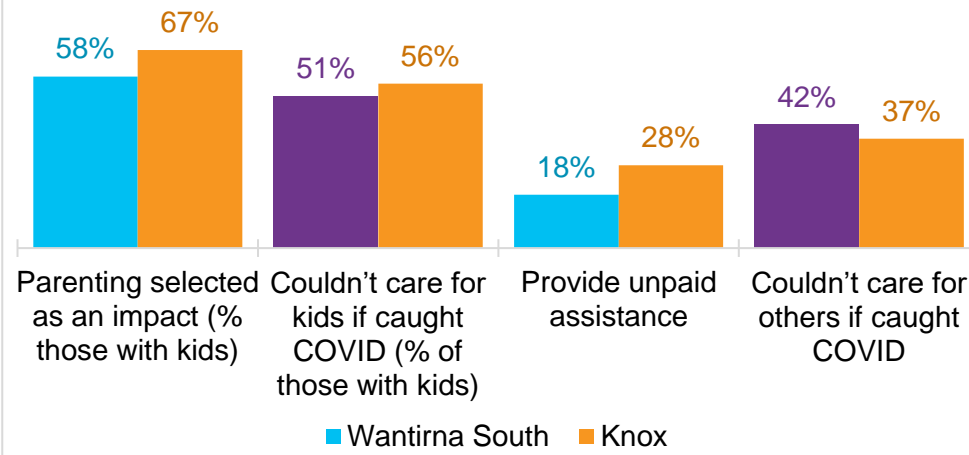
Food



Parenting & caregiving



Parenting & caregiving



Resilience



Resilience

