

QUEENSLIFFE REGION PROFILE

JULY 2019



G21 IS THE FORMAL ALLIANCE
OF GOVERNMENT, BUSINESS
AND COMMUNITY ORGANISATIONS,
WORKING TOGETHER TO IMPROVE
THE LIVES OF PEOPLE WITHIN THE
GEELONG REGION ACROSS
FIVE MUNICIPALITIES – COLAC OTWAY,
GOLDEN PLAINS, GREATER GEELONG,
QUEENSCLIFFE AND SURF COAST.

This document was prepared by Civic Collective for
the G21 - Geelong Region Alliance



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Please refer to data tables in appendix for
detailed data, at www.g21.com.au/region-profile-data-tables



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1.0 INTRODUCTION

The *Queenscliffe Region Profile (2019)* has been prepared to provide an evidence-based resource for planning, priority project identification and implementation and advocacy for regional growth, health and wellbeing in the G21 region and the Borough of Queenscliffe. The G21 region comprises five local government areas (LGAs): Colac Otway, Golden Plains, Greater Geelong, Queenscliffe and Surf Coast.

The *Queenscliffe Profile (2019)* represents an update of the previous Region Profile undertaken in 2014 and forms part of a series of region profiles being prepared for the G21 region.

A broad range of demographic, socio-economic, health, community and economic data is presented in the Region Profile, as well as information contained in key strategic documents relevant to Queenscliffe and the broader G21.

While there are considerable interconnections between each data domain, the profile has been arranged into 4 key sections:

PLACE

A broad description of the physical assets of the region, including information about the region's housing, facilities and services.

PEOPLE

Demographic information about the current population and examines population change and projections. It also includes information about the population's socio-economic status, income, education, employment, and health and wellbeing status.

ECONOMY

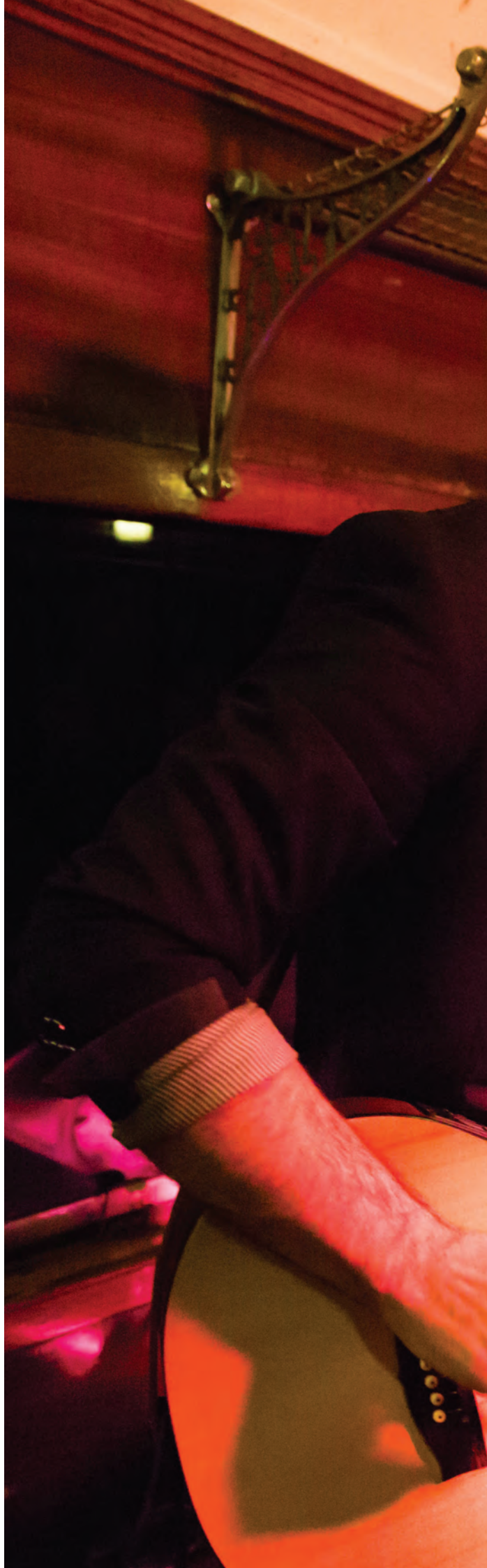
Information about industries of employment and trends in this area, labour force characteristics, Gross Regional Product and identifies emerging industries and priority projects.

ENVIRONMENT

Information about natural environmental features, climate, water and climate change.

Note: Arts and Culture is also important to the region however a dearth of data exists at the Local Government Area (LGA) level. Please refer to the G21 Region Profile for regional level data.

This profile is supported by an extensive series of data tables provided in the *Queenscliffe Region Profile - Data Tables*. References to relevant tables are provided at the end of each Chapter.





2.0 STRENGTHS & CHALLENGES

Strengths

Low level of unemployment

High-value natural environment and landscapes including the Queenscliffe foreshore, nature reserves, marine national parks, beaches, and Ramsar-listed Swan Bay

Coastal living which underpins the Borough's appeal for new residents and visitors, and is a significant factor that drives investment in local development and tourism

Idyllic location for citizens to relocate for retirement

Rich in cultural and built heritage, a vital feature of the Borough's urban landscape that contributes to a sense of place and tourism industry

High level of self-reported health, including lower incidences of heart disease, osteoporosis, arthritis, anxiety and depression and type 2 diabetes compared to Victorian average

Outstanding tourism assets attracting domestic and international visitors through the region's broad offering of food and wine, nature, walking/cycling experiences, culture and events

Accessibility to the regional city of Geelong

High level of innovation and entrepreneurship compared with the rest of Victoria

Low crime rate

Low levels of socio-economic disadvantage, with Queenscliffe being among the lowest decile of socio-economic disadvantage within Victoria



Challenges

Planning for and adapting to climate change

Minimising the impacts of future residential population growth and increase in visitor numbers on the natural environmental and valued landscapes

Planning for an ageing population and the reduction of working-aged persons within Queenscliffe and growth of the local economy

Improving digital connectivity in specific areas where it is very poor



Managing impacts of high levels of unoccupied dwellings

Accommodating the 'sea change' phenomenon without negatively affecting the unique character of Queenscliffe

Reducing dependence on cars and increasing public transport access

Improving and promoting housing diversity

Addressing limited opportunity for urban expansion and redevelopment due to physical and heritage constraints

Managing peak populations and substantial increases in temporary populations during holiday seasons causing strain on community facilities, utilities and services

Minimising impacts of extreme heat on the older population in Queenscliffe



PLACE

3.0

3.0 PLACE

3.1 ABOUT THE BOROUGH OF QUEENSLIFFE

The Borough of Queenscliffe is located in regional Victoria, at the South-Eastern tip of the Bellarine Peninsula. The traditional inhabitants of the area are the Wadawarrung people.

Queenscliffe encompasses an area of 8.6 square kilometres, primarily consisting of urban areas bounded by rich landscapes that include beaches, marine and coastal conservation. The Borough of Queenscliffe is the smallest Local Government Area (LGA) in Victoria with a population of 2,934 persons in 2017. The Borough is located 105km from Melbourne by road and approximately 35 kilometres east of central Geelong - its closest regional centre. The Borough of Queenscliffe is known for its rich history, quaint coastal lifestyle, and as the only port providing transport between the Bellarine and Mornington Peninsula via the Queenscliffe-Sorrento Ferry operated by SeaRoad Ferries.

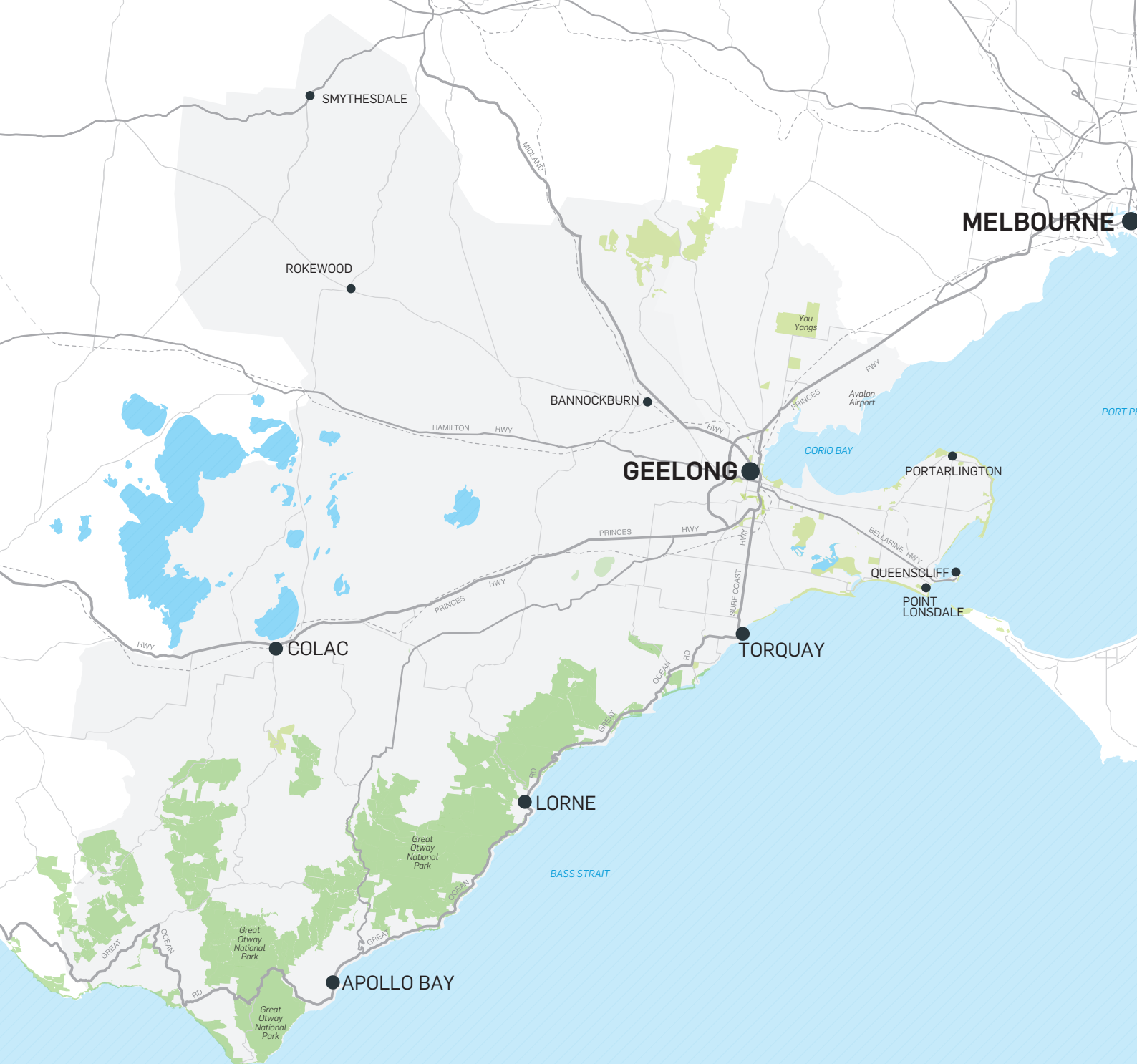
The Borough contains two settlements; Queenscliff and the eastern parts of Point Lonsdale. Queenscliff is the main town centre in the Borough and provides a limited range of convenience retailing, professional services and tourism-related services. In addition, Swan Island is located to the north of the Queenscliff township and incorporates the Department of Defence Swan Island Complex - an active military presence that has been part of the fabric of the community since the construction of Fort Queenscliff in 1860.

Rich in history, the Borough of Queenscliffe was first formed in 1863 when Queenscliff was originally built for a range of Government purposes including military, postal, customs and lighthouse and signal services. The 1880s saw Queenscliffe undergo a 'seaside resort boom' attracting many people from Melbourne by paddle steamer and train. The development of the Palace Hotel (now the Queenscliffe Brewhouse), the Baillieu Hotel (now the Ozone Hotel), Vue Grand Hotel and Queenscliff Hotel were all constructed during this period.

SNAPSHOT

MEASURE	QUEENSLIFFE	VICTORIA
HOUSING		
▶ NUMBER OF DWELLINGS (2016)	2,800	
▶ OCCUPANCY RATE (2016)	46.4%	88.9%
▶ FULL HOME OWNERS	55.6%	30.7%
▶ RENTERS	16%	26.7%
▶ MEDIAN MORTGAGE REPAYMENTS (PER MONTH, 2016)	\$1,620	\$1,700
▶ MEDIAN RENT (PER WEEK, 2016)	\$300	\$325
▶ MORTGAGE STRESS	9.3%	10.2%
TRANSPORT		
▶ PEOPLE WHO LIVE WITHIN 400M OF A PUBLIC TRANSPORT NETWORK	66.9%	73.9%
▶ HOUSEHOLDS OWNING TWO OR MORE VEHICLES	50.6%	56.2%
▶ TRAVEL TO WORK BY TRAIN	1.3%	5.8%
▶ TRAVEL TO WORK BY BICYCLE	1.4%	1.3%
▶ TRAVEL TO WORK BY WALKING	6.2%	3.2%

Note: Data collected from a range of sources



MAP OF G21 REGION

Noted in the Queenscliff Planning Scheme, the unique combination of civic, military, maritime, economic and social activities from the mid to late-nineteenth century and later, survive in the form of urban planning, buildings, monuments and associated infrastructure within the Borough. These heritage elements contribute to the sense of place in the Borough and perform an important role in attracting visitors to the area.

Queenscliff is now a popular location for visitors, holiday home owners and retirees with more than 18% of the permanent population aged 75 years or over in 2016, which is significantly higher than the average for regional Victoria of nearly 9%.

Queenscliff is largely developed with only limited opportunities for urban expansion. Consequently, the level of population growth in the Borough has remained relatively stable in recent years.

Today, Queenscliff's old historical character is balanced by a new and vibrant contemporary cultural scene. Grand Victorian facades house a range of contemporary art galleries and award-winning restaurants, while a wide range of community markets, cultural events such as the Queenscliff Music Festival and the Queenscliff Blues Train bring visitors to the region.

3.0 PLACE

3.2 URBAN SETTLEMENT PATTERN

Queenscliffe is Victoria's smallest LGA and contains two major towns; Queenscliff and Point Lonsdale. Facing Port Phillip Bay to the east, Bass Strait to the south and Swan Bay to the north, these towns are located on a series of dunes and sandy limestone ridges and are separated by 'The Narrows'. The Narrows is a narrow dune that separates Port Phillip Bay from Swan Bay and the township of Queenscliff and Point Lonsdale.

Noted in the *Queenscliffe Planning Scheme*, Queenscliff's character is formed by its historic buildings and formal streetscapes while Point Lonsdale's unique character is formed by its vegetation, coastal environment and informal streets.

The *Queenscliffe Planning Scheme* identifies numerous issues and challenges relating to the Borough's urban settlement, activity centre and housing, including the following:

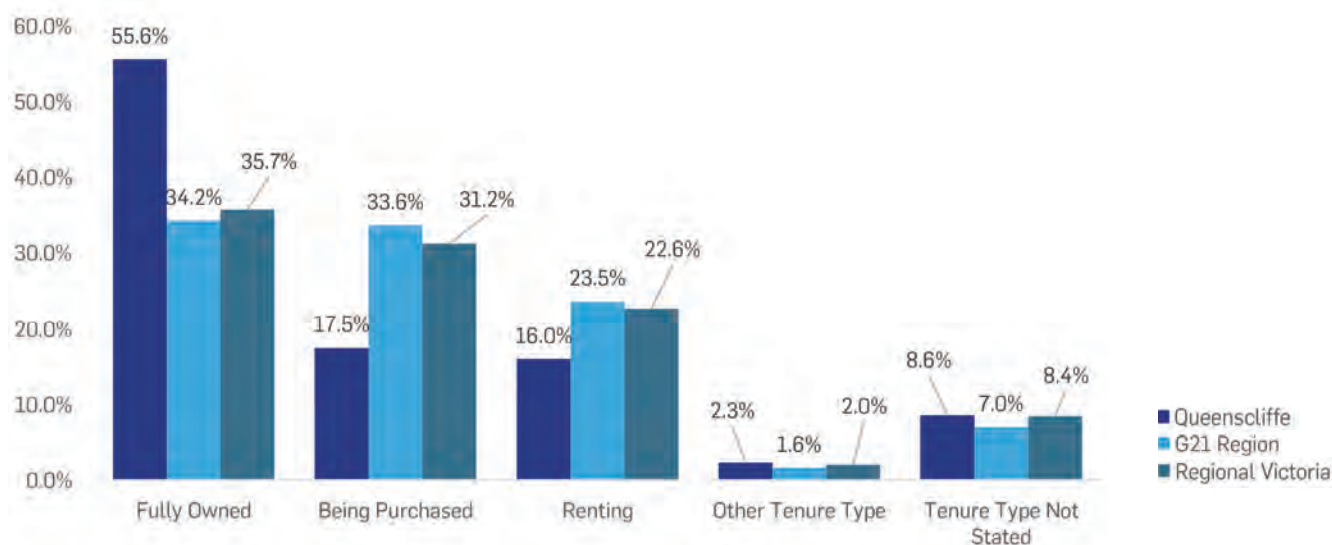
- Minimising the impact of urban development on the natural environment.
- Limited opportunity for urban expansion and urban redevelopment, as the Borough is constrained by the coast and the municipal boundary with the City of Greater Geelong.

- Managing seasonally fluctuating population from tourists and part-time residents.
- Managing demographic changes and demand for variety in housing choice for existing and future households.
- Queenscliff Harbour, as a valuable tourism and recreation asset providing significant economic activity opportunities, including boat accommodation, marine and boating commercial uses, and tourism.
- Maintaining the scale and vitality of both the Queenscliff and Point Lonsdale activity centres.
- Retaining Queenscliff's distinct heritage character.
- Maintaining the coastal village character of the Point Lonsdale township, including green vistas, vegetated character and unspoilt coastal views.



3.0 PLACE

HOME OWNERSHIP (2016)



3.3 HOUSING

HOME OWNERSHIP

Householders in Queenscliffe are more likely to fully own their own home compared to the regional Victoria average (Queenscliffe: 55.6%; Regional Vic: 35.7%) and less likely to be purchasing their home with a mortgage (Queenscliffe: 17.5%; Regional Vic: 31.2%) and to be renting (Queenscliffe: 16.0%; Regional Vic: 22.6%).

HOUSING COST

Median mortgage repayments in Queenscliffe were approximately \$1,620 per month in 2016, which was 25% above the median mortgage for regional Victoria (\$1,300 per month).

Median rents in Queenscliffe were approximately \$300 per week which was 30% above the median rent for regional Victoria (approximately \$230 per week).

An estimated 9.3% of Queenscliffe households experienced mortgage stress in 2016 which was in-line with the regional Victorian benchmark of 9.5%. Households experiencing rental stress in Queenscliffe accounted for 35.1% of renting households in 2016 which was above the average for regional Victoria of 30.4%. High rental rates and rental stress can be largely affected by the Borough's identity as a holiday and tourism destination during on-peak periods and low occupancy during off-peak periods where rental rates follow seasonal fluctuation trends.

DWELLING OCCUPANCY RATES

In 2016 Queenscliffe had an estimated 2,800 private dwellings including approximately 1,500 dwellings (or 53.6%) that were unoccupied. This share of unoccupied private dwellings was significantly higher than the regional Victorian average of 16.1%. This rate has been increasing over the last ten years wherein 2006, 1,330 of dwellings were unoccupied. This reflects the prevalence of holiday homes in the Borough.

While the dwelling occupancy is shown to be typically low during off-peak periods, the Borough often experiences seasonal fluctuations in population over the peak holiday periods (school holidays and long weekends) with the population of Queenscliff and Point Lonsdale increasing by an estimated 316% and 383% respectively. This pattern is relatively common for non-metropolitan coastal areas.

The Borough of Queenscliffe's 2017 *Economic Development Strategy* identifies that seasonal fluctuations in the population can have several implications on both residents and local businesses, and are listed below:

1. A large proportion of the rate-paying population for the Borough are not usual, or year-round residents.
2. The large number of empty dwellings can impact on community cohesion, wellbeing in the low season.
3. It poses a challenge for local businesses, as managing year-round cash flow becomes more challenging.
4. During peak periods, there is substantially greater pressure on services, facilities and infrastructure in the area.

3.0 PLACE

DWELLING STRUCTURE

In 2016 separate houses accounted for 88.5% of occupied dwellings in Queenscliffe which is significantly higher than the Victorian average of 72.3%. This dwelling structure reflects the largely low-density form of development throughout Queenscliffe. By comparison, flats, units and apartments accounted for just 2.3% of occupied dwellings while semi-detached dwellings accounted for only 7.0% of dwellings. The lack of housing diversity, along with providing suitable housing for an ageing population, has been identified as both an issue and opportunity for the development of smaller dwellings in the *Queenscliffe Planning Scheme*.

In 2016 dwellings in Queenscliffe were more likely to contain three-bedrooms compared to the Victorian average (Queenscliffe: 48.7%; Vic: 41.8%). In Queenscliffe 0.5% of dwellings are considered to require an additional bedroom which is below the State average (Vic: 3.9%); however 91.1% of dwellings are considered to have bedrooms spare which was higher than the State average (Vic: 75.5%).

SOCIAL HOUSING

Social housing is made up of two types of housing, public housing and community housing. It is for people on low incomes who need housing, especially those who have recently experienced homelessness, family violence or have other special needs. Public housing is a form of long-term rental social housing managed by the State Government. Community housing is secure, affordable, long term rental housing managed by not-for-profit organisations for people on low incomes or with special needs.

An estimated 13 dwellings were occupied through the public housing system in the Queenscliffe in 2016, representing a 5.8% share of all rental dwellings. This share was lower than the regional Victorian average of 14.0%.

3.4 FACILITIES & SERVICES

Community access to facilities and services in Queenscliffe is measured by community strength indicators sourced from the *DHHS LGA Profiles* (Department of Health and Human Services, 2014). This information indicates that Queenscliffe residents view their local communities as having a level of access to good facilities and services that is above the Victorian benchmark.

Selected community strength indicators are discussed below:

- **Access to community services and resources:** Access to good or very good community services and support groups was higher in Queenscliffe (95.3%) compared with the Victorian average (85.2%).
- **Community support groups:** A much greater share of Queenscliffe residents stated they had access to 'good' or 'very good' community and support groups than the Victorian average (Queenscliffe: 84.8%; Vic: 61.3%).
- **Pleasant environment rating:** Residents of Queenscliffe rated their community as having a 'pleasant environment', which was higher than the Victorian benchmark of (Queenscliffe: 98.6%; Vic: 95.1%).
- **Valued by society:** A higher share of residents felt valued by society compared to the Victorian average (Queenscliffe: 60.8%; Vic: 52.9%).

Due to its relatively small size Queenscliffe provides a limited range of local and regional community, health and educational facilities and services to the community and its visitors. Queenscliffe residents are also served by community, education and health facilities and services provided in Geelong which is approximately a 25-minute drive from Queenscliffe. These services can be accessed via 10 bus services a day that operates between Queenscliffe and Geelong.

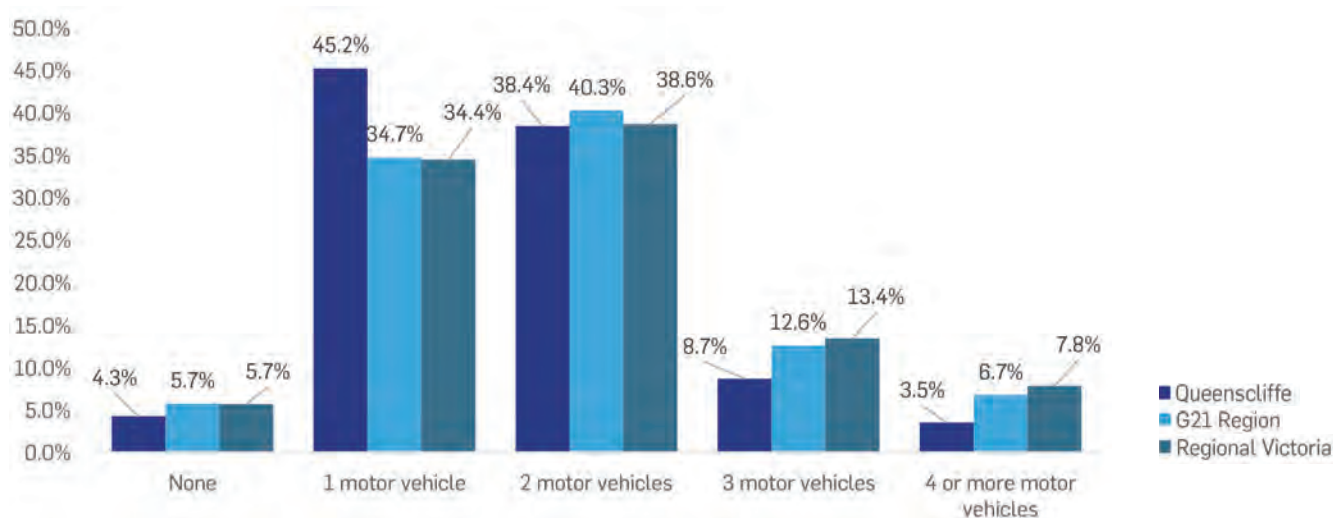
PUBLIC TRANSPORT ACCESS

The *DHHS LGA profiles (2015)* provides an estimate of the proportion of a residential population who live within 400m of a public transport network. Throughout Queenscliffe 66.9% of people live within 400m of public transport and this is below the Victorian benchmark of 73.9%.

One of the four strategic objectives set out in the *G21 Region Public Transport Strategy (2014)* is to achieve a base level of service for all residents across the region.

3.0 PLACE

MOTOR VEHICLE OWNERSHIP (2016)



PRIVATE MOTOR VEHICLES

Motor vehicle ownership in Queenscliffe in 2016 was significantly lower than the average for regional Victoria. For instance, 49.5% of Queenscliffe households own one or fewer motor vehicles compared to the regional Victorian average of 40.1%.

Queenscliffe residents primarily use motor vehicles as a driver or passenger as their mode of transport to work according to the ABS 2016 Census. This form of transport accounted for 61.4% of employed persons which was below the regional Victorian average of 74.1%.

Compared to the regional Victorian average, employed residents were more likely to travel to work by train (Queenscliffe: 1.3%; Regional Vic: 0.8%), bicycle (Queenscliffe: 1.4%; Regional Vic: 0.7%) or walk to work (Queenscliffe: 6.2%; Regional Vic: 4.0%).

RELEVANT DATA TABLES

NO. DESCRIPTION

1.1	Population density (2017)
1.2	Median monthly housing loan repayment (2006-16)
1.3	Monthly housing loan repayment (2016)
1.4	Households experiencing mortgage stress (2016)
1.5	Median weekly rent (2006-16)
1.6	Weekly rent (2016)
1.7	Affordable rental housing (March 2017)
1.8	Households experiencing rental stress (2016)
1.9	Occupied private dwellings by dwelling structure (2016)
1.10	Bedrooms in occupied private dwellings - number (2006-16)
1.11	Bedrooms in occupied private dwellings - proportion (2006-16)
1.12	Unoccupied private dwellings - change 2006-16
1.13	Unoccupied private dwellings (2006-16)
1.14	Tenure type (2006-16)
1.15	Landlord type (no.) - rented occupied private dwellings (2016)

NO. DESCRIPTION

1.16	Landlord type (%) - rented occupied private dwellings (2016)
1.17	Population aged 70+ in residential aged care (June 2016)
1.18	Population aged 70+ in community aged care (June 2011)
1.19	Housing suitability (2016)
1.20	Indicators of community strength (%) (2008-15)
1.21	More indicators of community strength (%) (2008-15)
1.22	Access to services summary data (2015)
1.23	Internet connection (2006-16)
1.24	Method of travel to work (2006-16)
1.25	Number of persons living* in G21 LGA's and working in Greater Melbourne (2016)
1.26	Number of persons living* in Greater Melbourne and working in G21 LGA's (2016)
1.27	Population who live near public transport (2015)
1.28	Number of motor vehicles per dwelling (2006-16)



PEOPLE

4.0

4.0 PEOPLE

KEY STATISTICS

MEASURE	QUEENSLIFFE	VICTORIA
POPULATION		
▶ 2017 ESTIMATED RESIDENT POPULATION	2,930	
▶ ANNUAL POPULATION GROWTH RATE (2006-17)	-0.5%	
▶ MEDIAN AGE	60	37
▶ % POPULATION AGED 65 YEARS OR OVER (2016)	40.4%	15.6%
▶ MEDIAN WEEKLY PERSONAL INCOME (2016)	\$671	\$644
▶ SAME-SEX COUPLES	0.5%	1.0%
▶ FAMILIES WITH CHILDREN	29%	47.0%
▶ COUPLES WITH NO CHILDREN	60.2%	36.0%
▶ ONE PARENT FAMILIES	9.6%	15.1%
▶ INDIGENOUS PERSONS	0.3%	0.8%
▶ NEW SETTLERS TO AUSTRALIA (PER 100,000 PERSONS, 2015)	NA	683
▶ POPULATION BORN IN AUSTRALIA	83%	64.9%
SOCIO-ECONOMICS		
▶ SEIFA SCORE (IRSD)	1075	
▶ YEAR 12 COMPLETION RATE	60.4%	59.4%
▶ POST-SCHOOL QUALIFICATIONS	56.5%	50.5%
▶ UNEMPLOYMENT RATE (DECEMBER 2017)	3.1%	6.0%
▶ LABOUR FORCE PARTICIPATION RATE	46.5%	64.5%
▶ HOMELESSNESS SA3 GEOGRAPHIC AREA (2016)	0.1%	0.4%
SAFETY		
▶ PERCEPTION OF SAFETY DAY	97.8%	92.5%
▶ PERCEPTION OF SAFETY NIGHT	78.1%	55.1%
▶ FAMILY VIOLENCE INCIDENT RATE (PER 100,000 PERSONS, APRIL 2018)	268	1,165
HEALTH		
▶ EXCELLENT/VERY GOOD SELF-REPORTED HEALTH	66.0%	40.2%
▶ PREMATURE DEATHS (PER 100,000 PERSONS)	183.5	259
▶ CURRENT SMOKER (2014)	14.6%	13.1%
▶ CONSUMES ≥ FIVE SERVES OF VEGETABLES & FRUIT PER DAY	12.6%	7.4%
▶ TAKES SUFFICIENT PHYSICAL ACTIVITY	54.9%	41.4%
▶ CONSUMES ALCOHOL AT RISKY OR HIGH-RISK LEVELS – SHORT TERM	59.9%	42.5%
▶ CONSUMES ALCOHOL AT RISKY OR HIGH-RISK LEVELS – LONG TERM	80.1%	59.2%
▶ DAILY CONSUMPTION OF SOFT DRINK	7.9%	12.4%
▶ OVERWEIGHT MALES	36.7%	38.4%
▶ OVERWEIGHT FEMALES	16.8%	24.3%
▶ OBESE MALES	21.3%	20.4%
▶ OBESE FEMALES	6.6%	17.2%

Note: Data collected from a range of sources

4.0 PEOPLE

4.1 POPULATION GROWTH TRENDS & FORECASTS

POPULATION GROWTH

In 2017 Queenscliffe had an estimated resident population of 2,935 persons which accounts for 0.9% of the G21 region's population. In broad terms, the population is evenly distributed between the settlements of Queenscliff (1,370 persons in 2017) and Point Lonsdale (1,565 persons in 2017).

Queenscliffe has experienced a slight decline in its permanent resident population over the past decade or so, from 3,085 persons in 2006. The latest 2016 census indicated that between 2011 and 2016 Queenscliffe's population decreased by approximately 155 persons which was most likely due to the relocation of Army personnel from Fort Queenscliff, previously an Army residence formally vacated in 2012. Limited opportunities for new housing development and a trend of dwellings being used as holiday homes as opposed to dwellings for permanent residents are also factors contributing to the stabilisation, or slight decline in Queenscliffe's population.

Simultaneously, between 2011 and 2016 the population for the broader 3225 postcode has seen a steady increase of growth by 4.5%, reflecting ongoing housing and aged care developments on the North-West side of Fellows Road in Point Lonsdale, which forms part of the City of Greater Geelong. While this development is not within the Borough's boundary, it nonetheless impacts the Borough due to increased demand on services due to its close proximity to the township of Point Lonsdale.

POPULATION PROJECTIONS

The Victorian State Government prepares populations projections through to 2031 via the *Victoria in Future* series. The latest release of this data was in 2016 which indicates minimal growth for the LGA as the population in Queenscliffe is forecast to stagnate over the period 2016 to 2031, experiencing average annual population growth of only 0.1% per annum. Based on *Victoria in Future 2016*, Queenscliffe's population will be approximately 3,060 persons in 2031 compared to 2,905 persons in 2016.

It should be noted however that since the *Victoria in Future* projections has under-estimated the recent rate of population growth throughout the G21 region, this data may represent a relatively conservative estimate of projected population growth for Queenscliffe.

4.2 AGE STRUCTURE

Queenscliffe has a significantly older population than the regional Victorian benchmark, and the population is ageing at a faster rate. The median age of Queenscliffe residents was 60 years in 2016, significantly above the medians for regional Victoria and G21 of 43 years and 41 years respectively. Furthermore, the median age in Queenscliffe has increased by 7 years, from 53 years in 2006; this compares to an increase in the median age throughout regional Victoria of 3 years and the G21 region of 2 years over the same period.

QUEENSLIFFE ESTIMATED RESIDENT POPULATION TRENDS (2006-17)

Region	2006	2011	2016	2017p
Estimated Resident Population				
Queenscliff	1,450	1,450	1,340	1,370
Point Lonsdale	1,635	1,610	1,565	1,565
Queenscliffe LGA	3,085	3,060	2,905	2,935
G21 Region	264,190	285,320	315,240	322,970
Regional Victoria	1,300,510	1,368,450	1,453,930	1,472,870
Average Annual Growth				
Queenscliff		0.0%	-1.6%	2.2%
Point Lonsdale		-0.3%	-0.6%	0.0%
Queenscliffe LGA		-0.2%	-1.0%	1.0%
G21 Region		1.6%	2.0%	2.5%
Regional Victoria		1.0%	1.2%	1.3%

4.0 PEOPLE

A comparison of the Queenscliffe age structure in 2016 with the regional Victoria average is provided below:

- **0-19 years:** Queenscliffe had a **lower** proportion compared to the regional Victorian average (Queenscliffe: 16.4%; Regional Victoria: 24.2%).
- **20-34 years:** Queenscliffe had a **lower** proportion compared to the regional Victorian average (Queenscliffe: 6.9%; Regional Victoria: 18.1%).
- **35-54 years:** Queenscliffe had a **lower** proportion compared to the regional Victorian average (Queenscliffe: 18.8%; Regional Victoria: 25.8%).
- **55-74 years:** Queenscliffe had a **higher** proportion compared to the regional Victorian average (Queenscliffe: 39.1%; Regional Victoria: 23.2%).
- **75+ years:** Queenscliffe had a **higher** proportion compared to the regional Victorian average (Queenscliffe: 18.7%; Regional Victoria: 8.2%).

4.3 GENDER DISTRIBUTION

Queenscliffe had a greater proportion of females and lower proportion of males compared to the regional Victorian average. In 2016 53.5% of the Queenscliffe population were females and 46.5% were males. This compares to 49.1% males and 50.9% of females throughout regional Victoria. A significantly older demographic and longer-life spans of females contribute to a greater share of females in Queenscliffe.

4.4 LESBIAN, GAY, BISEXUAL, TRANS/ TRANSGENDER & INTERSEX (LGBTI) PEOPLE

In 2016 the ABS Census recorded 7 same-sex couples in Queenscliffe which accounted for 0.5% of all couples (Regional Victoria: 0.6%; G21: 0.7%).

This data takes into account same-sex couples within the same household and does not account for same-sex couples living in different households.

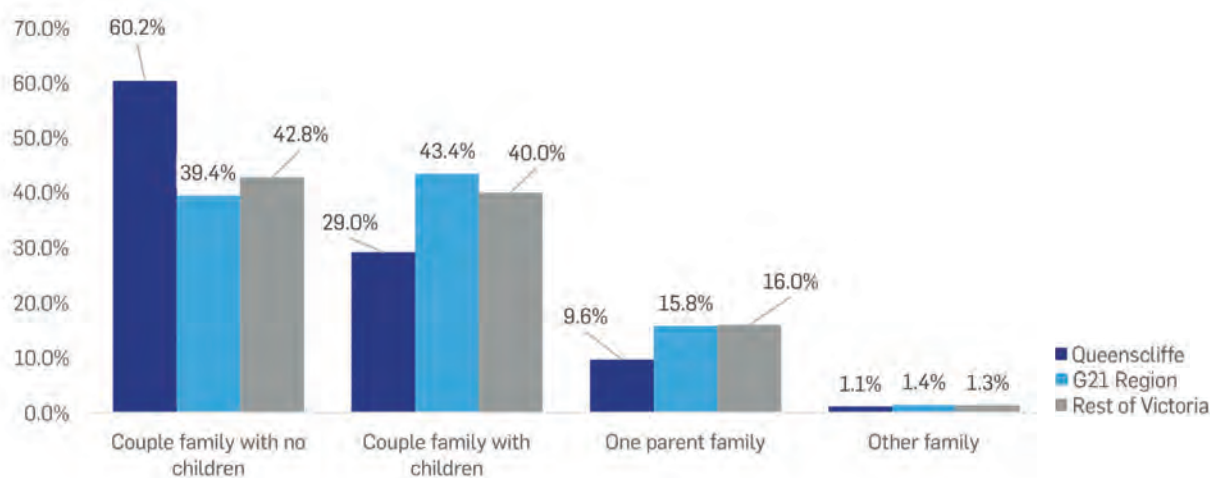
4.5 FAMILY STRUCTURE

In 2016 families with no children accounted for the highest share of families in Queenscliffe, accounting for 60.2% of families; this share is significantly higher than benchmarks for regional Victoria and G21 (Regional Victoria: 42.8%; G21: 39.4%) illustrating the popularity of Queenscliffe for families with no children. Older couple families whose children no longer live in the family home are likely to comprise a large proportion of families without children.

Families with children accounted for 29.0% of families in Queenscliffe which was lower than the averages for regional Victoria and the G21 region (Regional Victoria: 40.0%; G21: 43.4%).

The remaining families in Queenscliffe in 2016 comprised one-parent families (Queenscliffe: 9.6%; Regional Victoria: 16.0%; G21: 15.8%) and other families (Queenscliffe: 1.1%; Regional Vic: 1.3%; G21: 1.4%).

FAMILY STRUCTURE (2016)



ABS, Census of Population and Housing, 2016

4.0 PEOPLE

4.6 INDIGENOUS POPULATION

The traditional Aboriginal people of the Queenscliffe area are the Wadawarrung people. In 2016 Queenscliffe had an Indigenous population of approximately 9 persons, having decreased from approximately 18 persons in 2011. Queenscliffe had the lowest Indigenous share of the total population at 0.3% of all G21 LGAs. Throughout regional Victoria 1.6% of the population were Indigenous in 2016.

4.7 CULTURAL DIVERSITY

The majority of people who live in Queenscliffe were born in Australia, with Australian-born residents accounting for 83% of the population in 2016; this figure is similar to the regional Victorian average of 80.7%.

In 2016, after Australia, the next most common country of birth for Queenscliffe residents was the United Kingdom (4.9%). No other country of origin contributed more than 1.5%. Understandably, the majority of Queenscliffe residents speak English, with only 0.5% stating they did not speak English well or not at all in 2016.

RELIGION

Christianity is the most common religious affiliation among Queenscliffe residents (53.1%), followed by Buddhism, Islam and Hinduism (all under 1%), and with 34.6% of people stating they had no religion.

4.8 INDEX OF RELATIVE SOCIO-ECONOMIC DISADVANTAGE (IRSD)

The *Socio-Economic Indexes for Areas (SIEFA)* index of relative socio-economic disadvantage (IRSD) summarises a range of information about the economic and social conditions of people and households within an area. It provides a useful snapshot of the area's relative socio-economic disadvantage.

IRSD scores for 2016 indicate Queenscliffe (1075) has relatively low levels of socio-economic disadvantage, with Queenscliffe being at the 93rd percentile in Victoria. The two settlements of Point Lonsdale (1071) and Queenscliff (1074) are also considered to have relatively low levels of socio-economic disadvantage, with their scores being in the 89th and 88th percentiles in Victoria, respectively.

4.9 INCOME

In 2016 Queenscliffe residents had high median income figures compared to regional Victoria, as illustrated below:

- **Median personal income (weekly):** Median personal income of Queenscliffe residents was approximately \$670/week which was above with the median for regional Victoria of \$580/week.
- **Median household incomes (weekly):** Median household incomes of Queenscliffe households at \$1,180/week were 5% above the median for regional Victoria of \$1,120/week.
- **Higher levels of income growth:** Both median personal and household incomes experienced average annual growth rates between 2006 and 2016 which were well above regional Victorian averages. Queenscliffe's median personal incomes increased by 4.4% per annum between 2006 and 2016 (Regional Vic: 3.8% per annum) and median household income increased by 4.0% per annum (Regional Vic: 3.4% per annum).

4.10 EDUCATION

Queenscliffe has a well-educated population with a high share of the population having completed Year 12 as well as obtaining post-school qualifications.

In 2016 60.4% of the Queenscliffe population (aged 15 years and over) reported Year 12 as their highest level of secondary school completed which is significantly higher than the average of 50.6% for the G21 region and 43.5% for regional Victoria.

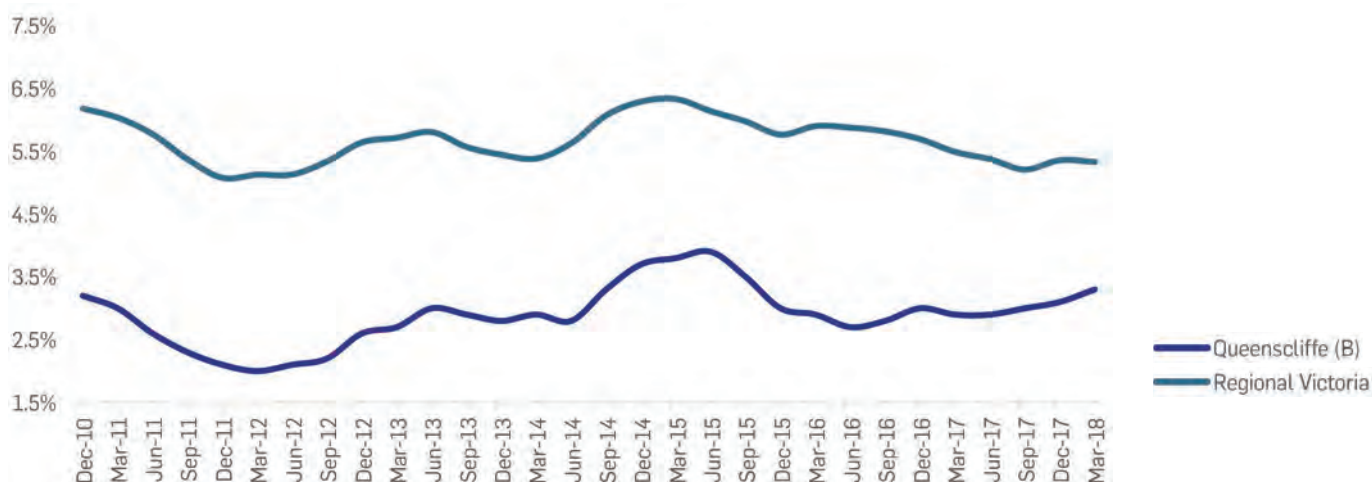
In regard to post-school qualifications, 56.5% of Queenscliffe residents stated they had Certificate level or higher compared with 49.8% for the G21 region and 45.0% for regional Victoria. This includes the following share of the Queenscliffe population with a Bachelor's degree level of education or higher:

- Bachelor's Degree: 20.6% compared to 13.3% for the G21 region and 10.2% for regional Victoria
- Postgraduate Degree: 6.4% compared to 3.2% for the G21 region and 2.2% for regional Victoria.

By gender 59.2% of Queenscliffe males indicated they held a Certificate level or higher qualification compared with 54.2% of Queenscliffe females. Both these shares were above regional Victorian averages for males (47.0%) and females (43.1%).

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UNEMPLOYMENT RATE



Department of Jobs and Small Business, Small Area Labour Markets, Quarterly

4.11 EMPLOYMENT CHARACTERISTICS

UNEMPLOYMENT

In December 2017 Queenscliffe had approximately 40 unemployed persons and an unemployment rate of 3.1% which is well below the regional Victorian average of 5.4%. The number of unemployed persons remained constant over the 12-months since December 2016 and the unemployment rate increased slightly from 3.0%. This data is based on information contained in the Small Area Labour Market (SALM) publications prepared by the Department of Jobs and Small Business.

LABOUR FORCE PARTICIPATION

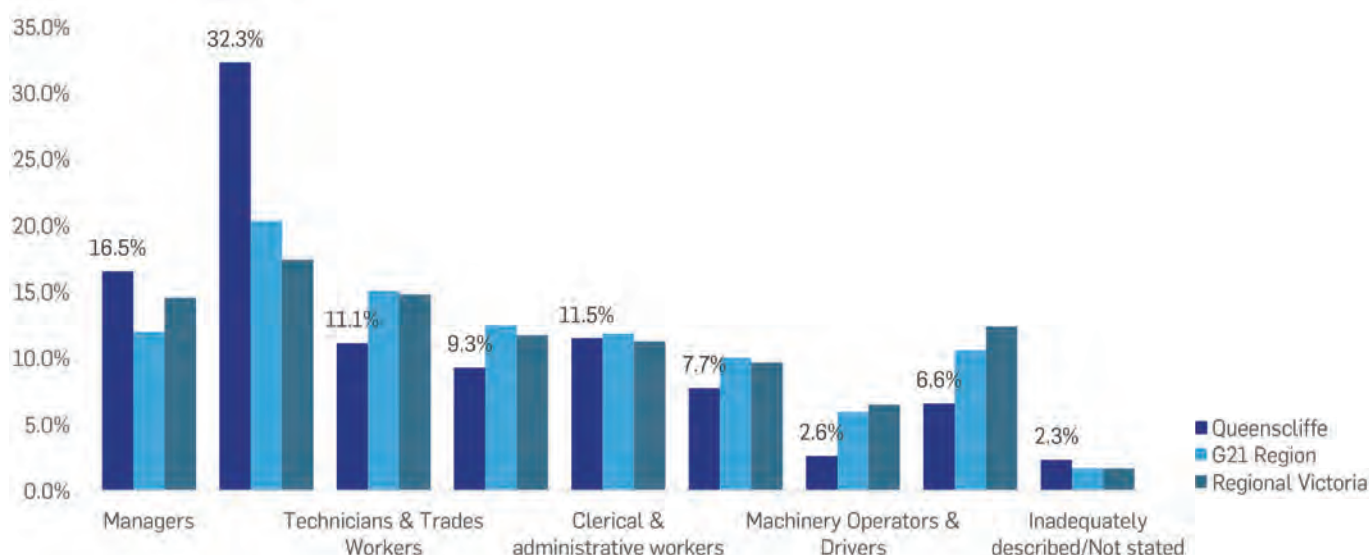
The labour force includes those persons currently

employed and those looking for work (or unemployed), while the labour force participation rate is the share of the labour force as a percentage of the total population aged 15 years or over.

Based on ABS Census data for 2016, the labour force participation rate for Queenscliffe was 46.5% which is significantly lower than the average for the G21 region of 62.3% and the regional Victorian average of 60.5%. An older demographic in Queenscliffe contributes to the low labour force participation rate.

However, the labour force participation rate in Queenscliffe has increased by 0.3 percentage-points since 2006 from 46.2%; this compares to a 1.3 percentage-point decline in the labour force participation rate throughout regional Victoria.

OCCUPATION OF EMPLOYED PERSONS (2016)



Department of Jobs and Small Business, Small Area Labour Markets, Quarterly

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OCCUPATION

Queenscliffe has a high proportion of residents employed as Professionals (32.3%) and Managers (16.5%). Combined, these occupations account for almost half (48.8%) of employed residents which is significantly higher than the average for regional Victoria of 32.0% (Professionals: 17.4%; Managers: 14.6%) and 32.3% for the G21 region (Professionals: 20.3%; Managers: 12.0%).

Queenscliffe residents are less likely to be employed as Labourers (Queenscliffe: 6.6%; Regional Victoria: 12.4%; G21: 10.6%) and Machinery Operators and Drivers (Queenscliffe: 2.6%; Regional Victoria: 5.9%; G21: 6.5%).

4.12 HOMELESSNESS

Queenscliffe has a very low number of homeless persons. According to ABS estimates based on the 2016 ABS Census, less than 10 homeless persons are located within the Borough.

More detailed analysis of homelessness is available at the SA3 level, with sub-categories that include not just homelessness but near-homelessness such as persons in supported accommodation for the homeless; persons in other temporary lodgings; and persons living in overcrowded dwellings. The SA3 relevant to Queenscliffe is the Surf Coast- Bellarine Peninsula SA3 which encompasses Queenscliffe.

Based on ABS data for Surf Coast-Bellarine Peninsula, the overall level of homeless and the extent to which people are considered to be at risk of homelessness are below the Victorian benchmarks. For instance, an estimated 100 persons are considered to be either homeless or at risk of homelessness, and this represents just 0.1% of the population compared to 1.2% for Victoria.

4.13 GAMBLING

Queenscliffe had one gaming machine venue in 2017, having decreased from two venues in 2013. The number of Electronic Gaming Machines (EGM) also fell over this period from 47 to 30 machines. The provision of EGMs per 1,000 persons is more than double the Victorian average (Queenscliffe: 11.9; Victoria: 5.5).

Net gaming machine expenditure in Queenscliffe for 2017 was \$1.28 million which represents an average of approximately \$510 per adult aged 18 years or over, slightly below the average for Victorian of \$540 per adult.

4.14 CRIME & SAFETY

CRIME

Crime levels vary considerably throughout the G21 region however the Borough of Queenscliffe has the fourth lowest crime rate of all Victorian local government areas, making Queenscliffe one of the safest communities in the state. Queenscliffe had crime rates (crimes per 100,000 persons) well below the Victorian average for the following categories:

- Crimes against the person: Queenscliffe: 532; Vic: 1,301
- Crimes against property: Queenscliffe: 3,390; Vic: 4,707
- Drug Offences: Queenscliffe: 66; Vic: 458.
- Other crime: Queenscliffe: 432; Vic: 1,721.

Crime rate declined in all categories in Queenscliffe between 2016/17 and 2017/18, except for 'crimes against the person'.

PERCEPTION OF SAFETY IN THE COMMUNITY

Having regard for findings in the 2015 *VicHealth Indicators Survey*, Queenscliffe residents have a positive perception of safety, with 78.1% of respondents stating they felt safe walking alone at night and 97.8% of respondent stating they feel safe walking alone during the day; averages for Victoria were 55.1% and 92.5% respectively.

FAMILY VIOLENCE

Family Violence is defined in the Victoria Police *Code of Practice for Investigation of Family Violence* in accordance with the Family Violence Protection Act (2008). In the Code, family violence is defined as "any behaviour, whether a criminal offence or not, that in any way controls or dominates a family member and causes them to feel fear for their own, or other family members' safety or well-being. It includes violent, threatening, coercive or controlling behaviour that

OVERVIEW OF ELECTRONIC GAMING MACHINE PROVISION AND EXPENDITURE, 2012/13 AND 2016/17

Region	No. of EGMS			Total Net Expenditure			Net EGM Expenditure per Adult		
	2012/13	2016/17	Change	2012/13	2016/17	Change	2012/13	2016/17	Change
Queenscliffe	47	30	-36.2%	\$1.5m	\$1.3m	-15.2%	\$539.30	\$508.11	-5.8%
G21 Region	1,591	1,519	-4.5%	\$119.7m	\$125.8m	5.1%	\$542.62	\$555.50	2.4%
Victoria	26,068	26,365	1.1%	\$2,490.5m	\$2,609.5m	4.8%	\$549.50	\$541.86	-1.4%

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occurs in current or former family, domestic or intimate relationships. Family means any family or family-like relationship, including current and former intimate partners, relatives, same-sex partners and carers”.

In its statistical reports, Victoria Police use the term “Family Incident” while the Victorian Family Violence Database (which uses Victoria Police data) uses the term “Family Violence Incident”. These terms refer to the same incidents (as defined above). The statistics that follow are for any family violence incidents attended by Victoria Police and may or may not involve violence and may not result in charges being laid.

The Family Violence incident rate in Queenscliffe was 268 incidents per 100,000 persons for the 12 months to April 2018 which was below the average rate for Victoria (1,165 incidents per 100,000 persons). The rate at which Family Violence incidences have occurred has slightly increased from 194 incidents per 100,000 persons in 2012/13.

Note: Due to Queenscliffe’s small population, in actual terms, this increase is the equivalent of one reported incident of family violence.

4.15 HEALTH BEHAVIOURS

Apart from high rates of smoking and alcohol consumption, Queenscliffe performs well in relation to the extent of unhealthy behaviours or chronic disease risk factors. An overview of these behaviours and risks factors is provided below:

- **Smoking:** Rates of smoking in Queenscliffe were recorded at 14.6% of the population in 2014 which was above the State average of 13.1%.
- **Alcohol Consumption:** High or risky levels of alcohol consumption related to short-term harm was significantly higher in Queenscliffe than the Victorian average (Queenscliffe: 59.9%; Vic: 42.5%). Long-term alcohol consumption related to risky behaviour was also higher for Queenscliffe than Victoria (Queenscliffe: 80.1%; Vic: 59.2%).
- **Drug & Alcohol Patients:** In 2014 2 persons per 1,000 population in Queenscliffe region were engaged in some form of a treatment program. This was well below the state average of 5.0 per 1,000 population and was the lowest in the G21 region.
- **Nutrition:** Daily consumption of soft drink was lower in Queenscliffe compared to the average for Victoria (Queenscliffe: 7.9%; Vic: 12.4%). Queenscliffe residents were also more likely to consume at least three serves of fruit and vegetables a day compared with the average Victorian (Queenscliffe: 50.6%; Vic: 33.9%).
- **Physical Activity:** The proportion of people that

undertook sufficient physical activity was higher in Queenscliffe than the state average (Queenscliffe: 54.9%; Vic: 41.4%).

- **Obesity:** In 2014, obesity in the Queenscliffe male population was more prevalent than the State male average (Queenscliffe: 21.3%; Vic: 20.4%). However, a significantly lower prevalence of obesity existed among the female population (Queenscliffe: 6.6%; Vic: 17.2%).
- **Sun Protective Behaviour:** Queenscliffe residents were more likely to wear hats (Queenscliffe: 67.1%; Vic: 52.6%) and to usually wear sunglasses (Queenscliffe: 85.5%; Vic: 74.0%).

4.16 SCREENING, HEALTH CHECKS & ACCESS

In general terms, the prevalence of health checks among Queenscliffe residents is below the State averages in most types of health checks, although the screening for cervical and bowel cancers is undertaken at a greater rate than the Victorian average. An overview of the prevalence of health checks and screening for Queenscliffe is described below:

- **Breast cancer screening:** The breast cancer screening rate in Queenscliffe was below the Victorian average for females aged between 50-69 years (Queenscliffe: 82.4%; Vic: 83.8%).
- **Cervical Cancer Screening:** The participation of Queenscliffe residents in cervical cancer testing in the two years to 2015 was greater than the state average (Queenscliffe: 78.2%; Vic: 57.9%).
- **Bowel Cancer Screening:** Queenscliffe residents were more likely to have undergone bowel cancer testing in the two years prior to 2015 than the Victorian average (Queenscliffe: 43.5%; Vic: 37.2%).
- **Other Health Checks:** For a selection of other health checks, the results for Queenscliffe were less prevalent in comparison to the Victorian average. For instance:
 - Blood pressure checks were less common (Queenscliffe: 69.2%; Vic: 79.9%) in the two years to 2014
 - Cholesterol checks were less common (Queenscliffe: 47.5.1%; Vic: 59.5%) in the two years to 2014
 - Blood glucose checks were less common (Queenscliffe: 46.3%; Vic: 53.1%) in the two years to 2014.
- **GP Attendance:** Queenscliffe had a low rate of GP services delivered to males (4.0 GP attendances per persons) and females (5.4) compared state averages (males: 4.6; females: 6.3).

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4.17 HEALTH STATUS

SELF-REPORTED HEALTH

The *Victorian Population Health Survey* provides estimates of self-reported health. Queenscliffe has a relatively high level of self-reported health with 66% of survey respondents reporting that they were in 'Excellent/Very good' health and this is well above the regional Victorian average of 41.2% and the Victoria average of 40.2%.

SELECTED CHRONIC DISEASES

The 2014 *Victorian Population Health Survey* provides the latest data at the LGA level for chronic diseases. A comparative overview of the Queenscliffe prevalence of selected chronic diseases in 2014 compared to the Victorian average is described below:

- **Heart Disease:** Queenscliffe had a **lower** incidence compared to the Victorian average (Queenscliffe: 6.6%; Vic: 7.2%).
- **Stroke:** Queenscliffe had a marginally **higher** incidence compared to the Victorian average (Queenscliffe: 2.6%; Vic: 2.4%).
- **Cancer:** Queenscliffe had a **higher** incidence compared to the Victorian average (Queenscliffe: 9.0%; Vic: 7.4%).
- **Osteoporosis:** Queenscliffe had a **lower** incidence compared to the Victorian average (Queenscliffe: 4.4%; Vic: 5.2%).
- **Arthritis:** Queenscliffe had a **lower** incidence compared to the Victorian average (Queenscliffe: 17.0%; Vic: 19.8%).
- **Anxiety or Depression:** Queenscliffe had a **lower** incidence compared to the Victorian average (Queenscliffe: 22.2%; Vic: 24.2%).

- **Sought help for a mental health problem in the previous year:** Queenscliffe had a **higher** incidence compared to the Victorian average (Queenscliffe: 23.0%; Vic: 16.0%).
- **Type 2 Diabetes:** Queenscliffe had a **lower** incidence compared to the Victorian average (Queenscliffe: 1.9%; Vic: 5.3%).

The 2014 Victorian Population Health Survey data showed that Queenscliffe had the lowest prevalence of Type 2 Diabetes and the highest prevalence of Cancer of all LGAs within the G21 region.

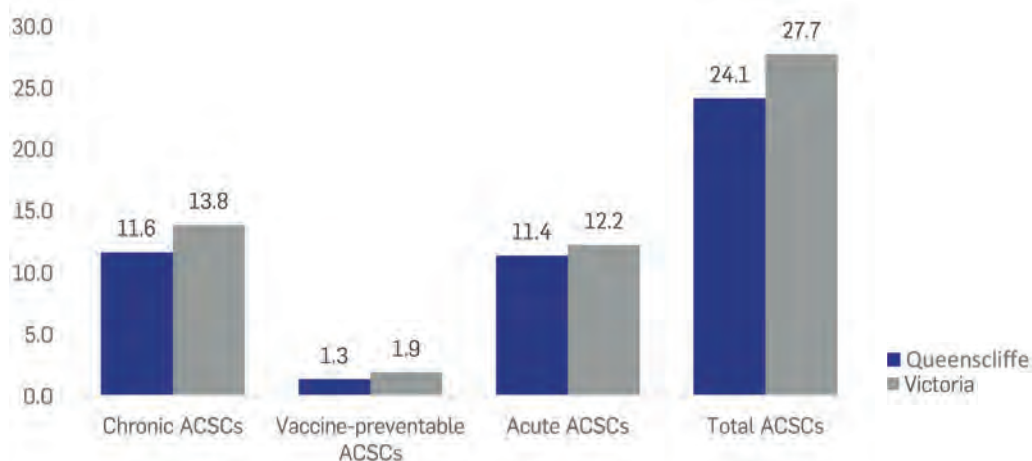
Interestingly, Queenscliffe also had the highest percentage of persons who sought professional help for a mental health problem compared to all G21 LGAs, however, had the second lowest prevalence of Anxiety or Depression in the G21 region.

ADMISSION FOR AMBULATORY CARE SENSITIVE CONDITIONS (ACSC)

Ambulatory Care Sensitive Conditions (ACSCs) are those for which hospitalisation is considered to be avoidable with the application of public health interventions and early disease management, usually delivered in ambulatory setting such as primary care. High rates of hospital admissions for ACSCs may provide indirect evidence of problems with patient access to primary healthcare, inadequate skills and resources, or disconnection with specialist services (Department of Health, Victoria Health Information Surveillance System, 2014).

Acute ACSCs include diseases such as dehydration/gastro, kidney infection, perforated ulcer, cellulitis, pelvic inflammatory disease, ear, nose and throat (ENT) infections and dental conditions. Chronic ACSCs include diseases such as selected chronic

ADMISSIONS FOR AMBULANCE CARE SENSITIVE CONDITIONS (RATE PER 1,000 PERSONS)



Ambulatory care sensitive conditions (ACSCs) 2015-16, Victorian Health Information Surveillance System (VHISS)

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diseases such as diabetes, asthma, angina, hypertension, congestive heart failure and chronic obstructive pulmonary disease (COPD).

In 2015-16, ACSC's in Queenscliffe were lower than the Victorian average for all categories.

PREMATURE DEATHS

Premature death (i.e. death prior to reaching life expectancy) is measured by the Social Health Atlas for Australian LGAs and broader regions. Queenscliffe had the second lowest rate of premature deaths among all G21 LGAs for males (225.7 premature deaths per 100,000 persons aged 0-74 years) and the third lowest for females (144.4). The average rate of premature death at the State Level was 318.1 per 100,000 males (aged 0-74 years) and 197 per 100,000 females (aged 0-74 years).

ROAD ACCIDENTS

Over a four-year period to 25 June 2018, a total of 71 road accident fatalities were recorded in the G21 region, comprising 58 males (82%) and 13 females (18%). Queenscliffe had zero fatal accidents over this period. Five hospitalisations resulting from road accidents were recorded between June 2014 and November 2017 in Queenscliffe.

4.18 HEALTH SERVICES

In general terms, Queenscliffe is reasonably well serviced by general practitioners (GPs) and aged care facilities. However, the provision of medical and health specialities is generally below the benchmark for Victoria.

GENERAL PRACTITIONER PROVISION

A total of 10 GPs were in practice in Queenscliffe in 2015, at a rate of 3.43 GPs per 1,000 persons, and this rate was nearly three times the Victorian rate of 1.21 GPs per 1,000 persons.

EMERGENCY DEPARTMENT PRESENTATIONS

In 2015, emergency department presentation rates in Queenscliffe were 198 per 1,000 persons, which was below the Victorian average of 263 per 1,000 persons.

RESIDENTIAL AGED CARE

At June 2016, the estimated provision of residential aged care places in Queenscliffe (117 per persons aged 70 years and over) was above the Victorian average of 85. In 2016, Queenscliffe accommodated a total of approximately 90 residential aged care beds.

4.19 DISABILITY

The Core Activity in Need for Assistance concept was developed by the ABS to give an indication of the prevalence of the population with a severe disability. This approach identifies the proportion of the population who require assistance to conduct routine activities such as self-care, movement or communication. Analysis of this data for 2016 shows the following key features for Queenscliffe:

- In 2016 4.5% of the Queenscliffe population had a Core Activity Need for Assistance and this was below the regional Victorian average of 6.0%.
- Persons aged 65 years or over accounted for 83.5% of the population who had a Core Activity Need for Assistance and this share has increased from 76.4% in 2006. Conversely, the share of the younger population (64 years and younger) requiring assistance decreased from 23.6% in 2006 to 16.5% in 2016.
- A low share of the Queenscliffe population aged 65 years or over had a core need for assistance compared to the average for regional Victoria (Queenscliffe: 9.2%; Vic: 15.4%).
- 1.2% of the population aged 0-64 years in Queenscliffe had a core need for assistance, and this figure is lower than the average for regional Victoria of 3.6%.

The proportion of the population aged 15-64 years receiving the Disability Support Pension is also an indication of the level of disability within an area. In March 2018, 3.6% of the Queenscliffe population were receiving the Disability Support Pension, below the Victorian average of 4.7%. Queenscliffe had the second lowest share of the population receiving the Disability Support Pension of all G21 LGAs, behind Surf Coast (3.1%).

4.20 MENTAL HEALTH

According to data modelled by the Social Health Atlas, persons in Queenscliffe with mental health and behavioural problems were estimated to occur at a rate of 11.4 per 100 males and 13.5 per 100 females. The equivalent rates for regional Victoria were 12.0 for males and 16.0 for females.

Measures of psychological distress presented in the Social Health Atlas indicate that Queenscliffe has a relatively low proportion of its population experience high levels of psychological distress (2.7% compared to 12.6% for Victoria). Furthermore, based on available data, Queenscliffe did not record any premature deaths from suicide or self-inflicted injuries in the 2010 to 2014

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period. This compares to 12.4 per 100,000 persons aged 0-74 years for regional Victoria and 9.6 throughout Victoria.

SOCIAL CONNECTIONS AND PARTICIPATION

Community and civic engagement, whether through joining a local club, volunteering or attending a local event is associated with better mental and physical health. An overview on community and civic engagement for Queenscliffe is provided below:

- **Sports:** Queenscliffe adults are **more** likely to participate in a sports group than the Victorian average (Queenscliffe: 38.1%; Vic: 25.7%).
- **Religious:** Queenscliffe adults are **less** likely to participate in a religious group than the Victorian average (Queenscliffe: 14.3%; Vic: 18.6%).
- **School:** Queenscliffe adults are **more** likely to participate in a school group than the Victorian average (Queenscliffe: 15.1%; Vic: 13.7%).
- **Professional:** Queenscliffe adults are **more** likely to participate in a professional group than the Victorian average (Queenscliffe: 38.8%; Vic: 23.7%).
- **Local Community Event:** 79.7% of Queenscliffe residents attended a local community event in 2014.

It is hypothesised that volunteering improves health by raising self-esteem, increasing the number of social relationships and improving self-care behaviours. In Queenscliffe in 2016, approximately 960 persons were engaged in some type of volunteering; this represented, 37.9% of the total population and increased slightly from 36.0% in 2011. Volunteering rates in Queenscliffe were also significantly higher than the Victorian average of 20.8% in 2016.

By gender, females (40.5% in 2016) were more likely to volunteer than males (35.1%) in Queenscliffe, with both of these rates well above the Victorian averages (Female: 22.5%; Male: 19.1%).

Queenscliffe residents have a strong sense of community, were more likely to be involved in local issues and could lean on family, friends and neighbourhoods in times of need. This was a finding in the information contained in the Department of Health and Human Services LGA Profiles (2014). Based on these sources, compared to the Victoria average, Queenscliffe residents were identified as follows:

- More likely to agree that their community was good or very good for community and support groups, with 85% of Queenscliffe residents of this view compared to the Victorian average of 61% (2014).
- More likely to agree that they lived in an active

community, with 95% of residents of this view compared to the State average 82% (2014).

- More likely to be able to get help from friends, family or neighbours when needed (94%) than the Victorian average (91%).

4.21 INFANTS & CHILDREN'S HEALTH

An overview of health-related statistics for infants and children in Queenscliffe is provided below:

- A low proportion of births were recorded between 2012 and 2014 where babies were categorised as having 'low birth weight' compared to the average for regional Victoria (Queenscliffe: 4.9%; Regional Vic: 6.3%).
- Immunisation rates of Queenscliffe children were as follows:
 - For children aged 12 to 15 months, the rate was 85.7% in Queenscliffe, below the state average of 92.2%.
 - For children aged 24 to 27 months, the rate was 82.6% in Queenscliffe, below the state average of 89.7%.
 - For children aged 60 to 63 months, the rate was 97.5% in Queenscliffe, above the state average of 93.0%.

CHILDHOOD DEVELOPMENT

The Australian Early Development Census (AEDC) records developmental 'domains' of childhood growth, designed to measure all dimensions of wellbeing for children beginning primary school. These domains are: 'Physical Health and Wellbeing', 'Social Competence', 'Emotional Maturity', 'Language and Cognitive Skills', and 'Communication Skills' and 'General Knowledge'. These factors were identified as effective predictors of future outcomes in many areas, notably health and education. Developmental vulnerability and risk are determined based on the score distribution, with children in the lowest decile of results for a domain considered 'developmentally vulnerable', and those in the bottom quartile considered 'developmentally at risk'.

Due to the low number of children within the Borough of Queenscliffe, there is insufficient data to conclude Developmentally Vulnerable and At-Risk children in 2018.

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RELEVANT DATA TABLES

NO.	DESCRIPTION	NO.	DESCRIPTION
2.1	Estimated resident population by LGA (2006-17)	2.38	Type of educational institution attending - population aged 18-25 years (2016)
2.2	Population distribution in the G21 region by LGA (2017)	2.39	Average absence days in government schools (2009)
2.3	Population change and distribution (2006-16)	2.40	Highest year of school completed - population aged 15+ years (2006-16)
2.4	Population who lived in the same LGA 5 years ago (2016)	2.41	Highest year of school completed by gender - population aged 15+ years (2016)
2.5	Internal migration past 5 years - most common LGA (or overseas) of origin (2016)	2.42	Post school qualifications - population aged 15+ years (2016)
2.6	Median age (years) (2006-16)	2.43	Post school qualification by sex - population aged 15+ years (2016)
2.7	Population by age (2016)	2.44	Youth engagement (2011-16)
2.8	Population age group proportions (2006-16)	2.45	Selected labour force statistics (2006-16)
2.9	Population by gender (2006-16)	2.46	Labour force participation - population aged 15+ years (2006-16)
2.10	Gender distribution by age group (2016)	2.47	Working hours by gender - employed persons (2006-16)
2.11	Projected population (2011-31)	2.48	Unemployment by LGA - Dec quarter (2016-2017)
2.12	Average household size (2006-16)	2.49	Unemployment by sa2 - Dec quarter (2016-2017)
2.13	Family structure (2016)	2.50	Industry of employment by part time or full time status - persons (2011-16)
2.14	Lone parents by gender (2016)	2.51	Industry of employment by part time or full time status - males (2011-16)
2.15	Members of same-sex couples (2006-16)	2.52	Industry of employment by part time or full time status - females (2011-16)
2.16	Indigenous population by gender (2006-16)	2.53	Occupation of employed labour force - persons (2006-16)
2.17	Indigenous population (2006-16)	2.54	Occupation of employed labour force - males (2006-16)
2.18	Population born in Australia (2016)	2.55	Occupation of employed labour force - females (2006-16)
2.19	Country of birth (2016)	2.56	Top 10 locations of work (LGA) for Queenscliffe residents (2016)
2.20	Country of birth - proportion (2006-16)	2.57	All homeless persons by place of enumeration (2011-16)
2.21	New settler arrivals (2015)	2.58	Homelessness sub-categories by sa3 geographic area (2016)
2.22	Population that speaks English not well or not at all - number (2016)	2.59	Gaming machine expenditure (2012-13 to 2016-17)
2.23	Population that speaks English not well or not at all - proportion (2016)	2.60	Green space and safety (2011/15)
2.24	Religious affiliation (2016)	2.61	Support for smoking ban in outside dining areas (2011)
2.25	Religious affiliation (2006-16)	2.62	Social attitudes (2011/15)
2.26	Index of relative socio economic disadvantage (IRSD) scores (2016)	2.63	Community engagement (2011)
2.27	Median weekly personal income - total population (2006-16)	2.64	Crime rates (Mar 2017-Apr 2018)
2.28	Individual gross weekly income less than \$400 by age - males aged 15+ years (%) (2006-16)	2.65	Crime rates % change (2016/17) (Mar 2017-Apr 2018)
2.29	Individual gross weekly income less than \$400 by age - females aged 15+ years (%) (2006-16)	2.66	Recorded family incident rates (Mar 2017-Apr 2018)
2.30	Estimates of personal income sources (selected) (2015)	2.67	Motor vehicle impoundments by police service area (2016), vehicle impoundment statistics 2007-16
2.31	Median weekly household income - all population (2006-16)	2.68	Alcohol-related assaults by location where assault occurred (Apr 2017- Mar 2018)
2.32	Age pension recipients (Mar 2018)	2.69	Motor vehicle impoundments by police service area (2016)
2.33	Carer allowance recipients (Mar 2018)	2.70	Prevalence of smoking in population aged 18+ years (2014)
2.34	Newstart allowance recipients (Mar 2018)		
2.35	Disability support pension recipients (Mar 2018)		
2.36	Single parenting payment recipients (Mar 2018)		
2.37	Partnered parenting payment recipients (Mar 2018)		

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RELEVANT DATA TABLES

NO.	DESCRIPTION	NO.	DESCRIPTION
2.71	Alcohol consumption at risky/high risk for alcohol related harm in the short term (2014)	2.104	Sexually transmissible infections by age in BSW (2017)
2.72	Alcohol consumption at risky/high risk for alcohol related harm in the long term (2014)	2.105	Vaccine preventable diseases (2017)
2.73	Alcohol purchasing (2011)	2.106	Vaccine preventable infections by sex in BSW (2017)
2.74	Drug and alcohol clients (2015)	2.107	Premature deaths from road traffic injuries - ages 0-74 years (2010-14)
2.75	Alcohol-related hospital admissions rates by place of residence (2009-10 and 2014-15)	2.108	Road accident hospitalisations by length of stay (1 Jun 2014 - 30 Nov 2017)
2.76	Alcohol-related serious road injuries by location of accident (Jun 30 2017)	2.109	Road accident hospitalisations by sex (1 Jun 2014 - 30 Nov 2017)
2.77	Fruit and vegetable consumption (2014)	2.110	Road accident hospitalisations by age (1 Jun 2014 - 30 Nov 2017)
2.78	Physical activity levels (2014)	2.111	Road accident hospitalisations by road user (1 Jun 2014 - 30 Nov 2017)
2.79	Healthy eating and sedentary behaviour (2011)	2.112	Medical specialists by area (2016)
2.80	Overweight and obese population 18+ years (2014)	2.113	Type of cancers by gender modelled estimated 2017 (data from 2006-10)
2.81	Sun protective behaviour	2.114	Core activity need for assistance by LGA and year - total population (2006-16)
2.82	Had a mammogram in the past two years - females aged 50-69 years (2014)	2.115	Core activity need for assistance by age group and gender (2006-16)
2.83	Estimated two-year cervical screening rates by LGA (2013-14 and 2014-15)	2.116	Work life and time (2011)
2.84	Test to detect bowel cancer in the last two years (2015)	2.117	People suffering high or very high levels of psychological distress (2014)
2.85	Other health checks (% participated) (2014)	2.118	People suffering high or very high levels of psychological distress (2014-15)
2.86	GPs and GP sites per 1,000 population (2015)	2.119	Premature deaths from suicide and self-inflicted injuries - 0-74 years (2010-2014)
2.87	Selected chronic diseases snapshot G21 LGAs (% participated) (2014)	2.120	People with mental and behavioural problems - modelled estimate (2011 - 2012)
2.88	Emergency department presentations (2015)	2.121	Registered mental health clients per 1,000 population (2014)
2.89	Self-reported prevalence of type-2 diabetes (2014)	2.122	Volunteering by sex - population aged 15+ years (2011-16)
2.90	Premature mortality due to cancer at ages 0-74 years per 100,000 persons (2010-14)	2.123	Volunteering by sex and age (%) (2016)
2.91	Average annual number of diagnoses of the leading cancers in Victoria (2007-11)	2.124	Life expectancy at birth (2003-7)
2.92	Premature deaths from circulatory system diseases - ages 0-74 years (2010-14)	2.125	Self reported health (%) (2014)
2.93	Prevalence of heart disease - self-reported (2014)	2.126	Self reported health by sex (%) (2014)
2.94	Premature deaths from respiratory system diseases - ages 0-74 years (2010-2014)	2.127	Subjective wellbeing score (2015)
2.95	Blood-borne diseases by sex in BSW (2017)	2.128	Premature deaths (all causes) population 0-74 years (2010-14)
2.96	Enteric diseases (2017)	2.129	Total fertility rate (2016)
2.97	Enteric diseases by sex in BSW (2017)	2.130	Low birth weight babies (2012-14)
2.98	Other infectious or notifiable conditions (2017)	2.131	Immunisation rates (2015)
2.99	Other infectious or notifiable conditions by sex in BSW (2017)	2.132	Teenage births (2005-8) (rate per 1,000 teenage women)
2.100	Vector-borne diseases by sex in BSW (2017)	2.133	Women aged 15 to 19 years that have given birth to at least one child (rate per 1,000)
2.101	Zoonotic conditions by sex in BSW (2017)	2.134	Children who are developmentally vulnerable (%) (2018)
2.102	Sexually transmissible infections (2017)	2.135	Children who are developmentally at risk (%) (2018)
2.103	Sexually transmissible infections by sex in BSW (2017)		



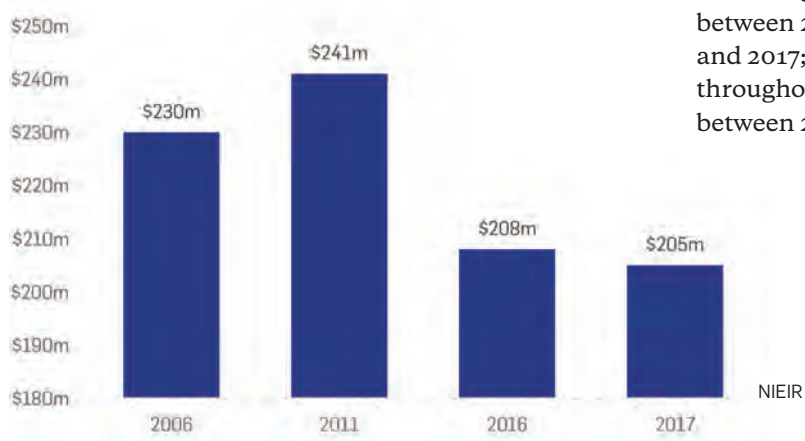
ECONOMY

5.0

5.0 ECONOMY

As the smallest LGA in Victoria, the Borough of Queenscliffe has a small local economy. Economic activity in the Borough is highly seasonal and reflects the large population increases during peak periods making the visitor and tourism economy an important driver of the Borough's economy.

GROSS REGIONAL PRODUCT

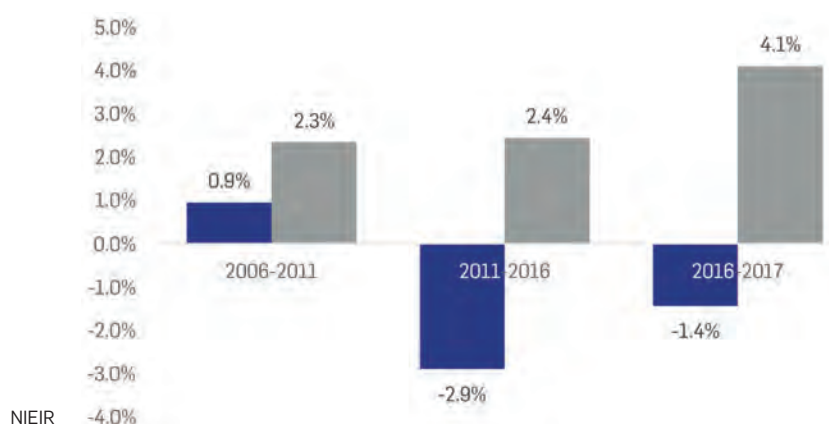


5.1 GROSS REGIONAL PRODUCT

The Gross Regional Product (GRP) is a net measure of wealth generated by a region. Modelling of GRP for Queenscliffe has been undertaken by the National Institute of Economic and Industry Research (NIEIR) and presented by economy.id. Based on this modelling, the GRP for Queenscliffe has declined in recent years from \$241m in 2011 to \$205m in 2017.

GRP in Queenscliffe has declined by 2.9% per annum between 2011 and 2016 and by 1.4% between 2016 and 2017; this compares to average growth of 2.4% throughout Victoria between 2011 and 2016 and 4.1% between 2016 and 2017.

AVERAGE ANNUAL CHANGE IN GROSS REGIONAL PRODUCT



KEY STATISTICS

MEASURE	QUEENSLIFFE	VICTORIA
► GROSS REGIONAL PRODUCT (2017)	\$0.2B	\$398.8B
► GROSS REGIONAL PRODUCT GROWTH 2011-2017	-2.7%	2.6%
► GROSS VALUE ADD	NA	
► REGIONAL EXPORTS	NA	

Note: Data collected from a range of sources

5.0 ECONOMY

5.2 INDUSTRY OF EMPLOYMENT

In 2016 the primary employment industries of Queenscliffe residents were:

- Health Care and Social Assistance (12.4%);
- Education and Training (11.9%);
- Accommodation and Food Services (10.1%); and
- Construction (9.3%).

Between 2011 and 2016, Public Administration and Safety experienced the largest decline in the share of local residents employed, declining from 9.3% in 2011 to 6.3% in 2016. Retail Trade was another industry that experienced a decline in its share of employment declining from 9.7% in 2011 to 8.0% in 2016.

In 2016 the major employing industries of males in Queenscliffe were Construction (accounting for 16.1% of employed male workers), followed by Professional, Scientific and Technical services (8.1%) and Manufacturing (7.9%). For females, Health Care and Social Assistance (accounting for 19.6% of employed female workers), Education and Training (17.1%) and Accommodation and Food Services (11.8%) were the major employing industries in 2016.

TOURISM

Queenscliffe is situated at the south-eastern tip of the Bellarine Peninsula and with its ferry connection to the Mornington Peninsula via Sorrento, it is a popular holiday destination of domestic visitors.

Queenscliffe is situated in the Geelong and Bellarine tourism region which includes Geelong, Bellarine Peninsula and Golden Plains. Geelong and Bellarine tourism region has experienced strong growth in total visitor numbers in recent years, increasing by 5.7% per annum between 2013 and 2018 (year ending March) according to data sourced from Tourism Research Australia. In the year ending March 2018, the Geelong and Bellarine tourism region attracted 5.1 million visitors and generated 4.2 million visitor nights.

Tourism Research Australia also produce tourism profiles for selected LGAs. An overview of the profile for Queenscliffe is provided below. The data is based on a four-year average from 2013 to 2016.

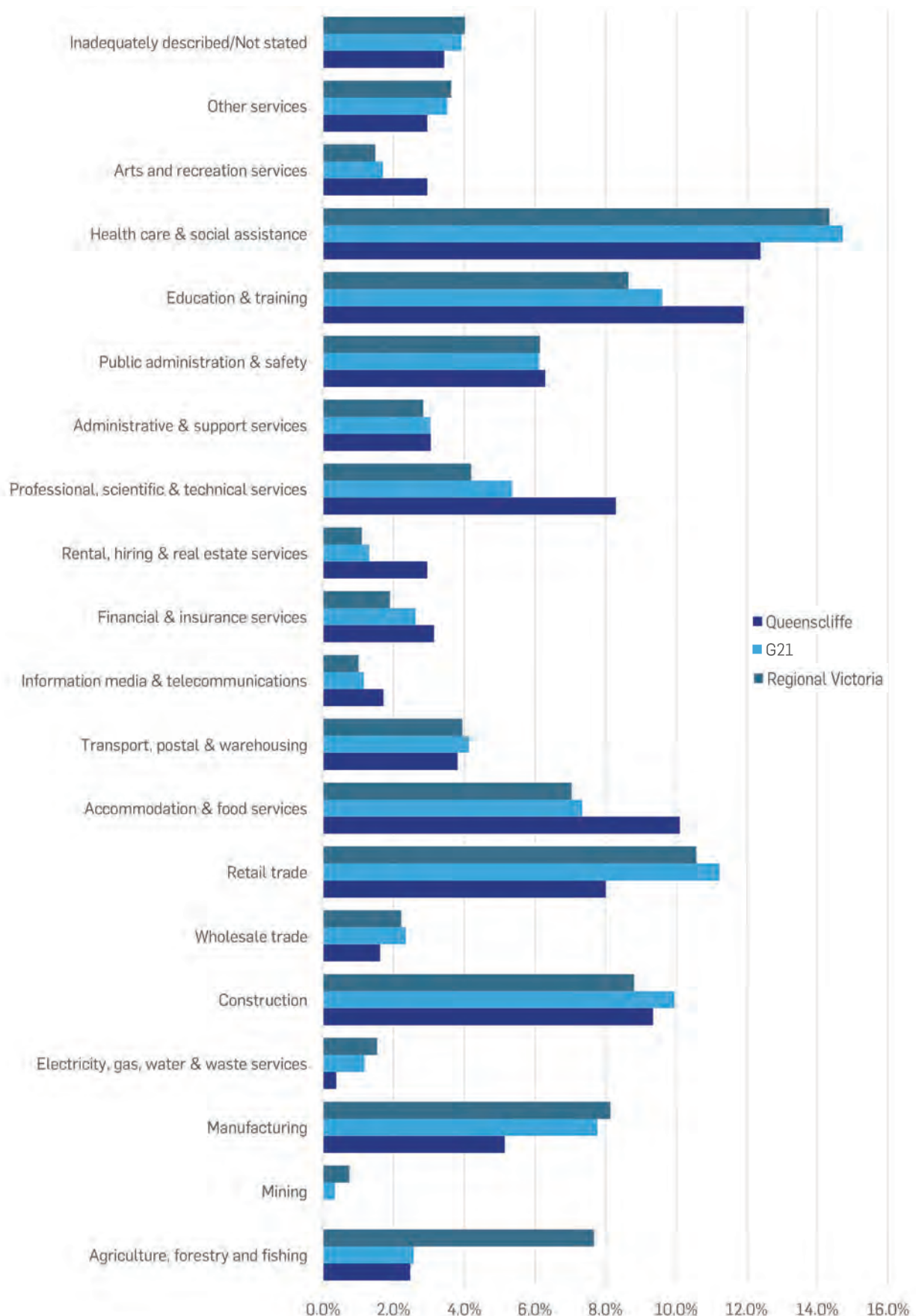
KEY TOURISM METRICS - QUEENSCLIFFE

Measure	International	Domestic overnight	Domestic day	Total
Visitors ('000)	3	159	233	395
Nights ('000)	14	447	-	461
Average stay (nights)	4	3	-	3
Spend (\$m)	1	66	14	81
Average spend per trip (\$)	383	414	61	205
Average spend per night (\$)	90	147	-	145
Average spend (commercial accommodation) per night (\$)	116	220	-	217

Tourism Research Australia, Local Government Area Profiles, 2016

5.0 ECONOMY

INDUSTRY OF EMPLOYMENT (2016)



5.0 ECONOMY

VALUE OF BUILDING APPROVALS



ABS, Building Approvals, quarterly

VALUE OF BUILDING APPROVALS

Building approvals data is a good proxy for current and future levels of economic investment and employment within specific areas and is produced by the ABS on a monthly basis.

The total value of building approvals in Queenscliffe was \$22.1m in 2017/18. The value of building approvals has declined since a peak in 2015/16 but has consistently been over \$20m per year over the past five years. As shown below, the majority of building approvals are associated with residential construction, with very little investment occurring in non-residential buildings over the past decade.

PROPERTY VALUES

Queenscliffe is considered an in-demand housing location within the broader G21 region. Holiday and weekend homes make up a large proportion of the housing stock in Queenscliffe. The median house value in 2017 was \$800,000 in Queenscliffe; this compares to \$480,000 in Greater Geelong and \$343,000 in regional Victoria.

Queenscliffe's median unit price in 2017 was \$530,000 which is significantly higher than the median for regional Victoria of \$275,000.

Between 2012 and 2017 median house prices increased by an average of 2.7% per annum which was below the rate of growth throughout regional Victoria (4.1% per annum) and Victoria (7.4% per annum).

MEDIAN HOUSE, UNIT AND VACANT LAND PRICES

Location	Year	Houses		Unit/Apartment		Vacant Land	
		Median	Count	Median	Count	Median	Count
Queenscliffe	2012	\$700,000	83	\$430,000	11	NA	NA
	2017	\$800,000	101	\$527,500	22	\$550,000	9
	Change % pa	2.7%	4.0%	4.2%	14.9%	-	-
Regional Victoria	2012	\$280,000	20,373	\$240,000	4,233	\$130,000	7,507
	2017	\$343,000	27,447	\$275,000	4,561	\$150,000	8,908
	Change % pa	4.1%	6.1%	2.8%	1.5%	2.9%	3.5%
Victoria	2012	\$415,000	67,990	\$416,500	38,413	\$181,000	17,722
	2017	\$593,000	86,207	\$500,000	38,161	\$204,900	18,377
	Change % pa	7.4%	4.9%	3.7%	-0.1%	2.5%	0.7%

PriceFinder.com.au

5.0 ECONOMY

5.3 ECONOMIC CHALLENGES

The Queenscliffe: Economic Development Strategy (2017) identified the following economic challenges facing Queenscliffe's economy:

- **Ageing population:** The expected ageing population in Queenscliffe (and universally) will contribute to a reduction of working-age persons, providing a shortfall in labour supply.
- **Diversification:** Small economies, such as Queenscliffe, are difficult to diversify. Queenscliffe is one of the smallest LGA's in Australia.
- **Seasonality:** High levels of seasonality exist in Queenscliffe, with occupancy rates of short-term private rentals fluctuating between 20% in winter up to 98% in peak summer periods.
- **High housing costs:** Limited opportunities for new residents and increased accommodation expenses.

5.4 PRIORITY PROJECTS

Destination Queenscliffe is one of the Borough of Queenscliffe's major projects which seeks to ensure the precinct comprising Shortland's Bluff, Fort Queenscliff and Ocean View is recognised as one of the most magnificent coastal locations in Victoria.

The main elements of the project are the construction of a new kiosk/café and public toilets; five new high-quality accommodation lodgings; cultural landscaping and paths in the Queenscliff Lighthouse Reserve; ship viewing platforms; upgrades to the car park and the southern end of Hesse Street; improvement of public open space areas; and lighting of the historic Fort Queenscliff wall.

RELEVANT DATA TABLES

NO.	DESCRIPTION
3.1	Gross Regional Product (\$2016)
3.2	Selected economic indicators
3.3	Selected economic indicators by LGA
3.4	Growth factor: economic diversity
3.5	Growth factor: innovation
3.6	Growth factor: human capital
3.7	Total visitors to LGA tourism region (four-year average, 2013-2016)
3.8	Visitor average expenditure profile (four-year average, 2013-16)
3.9	Peak overnight population (2014/15)
3.10	Building approvals (2013/14-17/18)
3.11	Median residential property prices (\$) (2012-17)
3.12	Number of tourism businesses (four year average to 2016)
3.13	Patent data by SA3 (2009-15)
3.14	Industry of employment (2011-16)
3.15	Industry of employment by sex (2016)

6.0

ENVIRONMENT



6.0 ENVIRONMENT

This Chapter looks at some of the key environmental characteristics of the Queenscliffe region. In this document, the term ‘environment’ is used in a broad sense, encompassing natural and built environs as well as climate, water and air quality.

6.1 NATURAL FEATURES & LAND USE

KEY ENVIRONMENTAL FEATURES

Queenscliffe encompasses a total land area of 8.6 square kilometres, and a key attribute of the Borough is its proximity to coastal areas and its valued natural environment.

The *Queenscliffe Planning Scheme* notes that:

The Borough’s beaches, foreshores and marine environments contribute significantly towards valued urban and landscape character and are a major attraction for their tourism value. The natural environment:

- *Provides the Borough with its unique setting, character and natural landscape beauty;*
- *Provides important habitat for flora and fauna;*
- *Possesses scientific and natural heritage value for present and future generations;*
- *Contributes to the health and well-being of the Borough’s residents and visitors; and*
- *Is economically valuable as a tourism asset.”*
(Clause 21.03)

The uniqueness of Queenscliffe’s natural environment is reflected in the areas within the Borough that are of local and international significance. For instance, Queenscliffe is located at the southern end of Swan Bay which contains marine and terrestrial environments, islands and foreshore areas that are protected areas under numerous treaties include Ramsar, Chinese-Australia Migratory Birds Agreement and the Japan-Australia Migratory Birds Agreement. It includes heritage listed sites and endangered species.

The Heads, in Point Lonsdale, is also considered to be of state significance.

POPULATION GROWTH AND THE NATURAL ENVIRONMENT

The *Geelong Region Plan* has identified concerns relating to the impact residential population and visitor growth have on the natural environment and valued landscapes throughout the G21 region. The *Victorian Coastal Strategy* reinforces these concerns when describing the various pressures on fragile coastal areas from development. Constrained by natural coastal boundaries, development in Queenscliffe is slow, with future opportunities being limited to infill of vacant lots and potential redevelopment of existing sites. There has been in recent times development along the western municipal boundary within Greater Geelong which should be accounted for when assessing planning services within the Borough.

LAND USE

In 2016 around 58% of land in Queenscliffe was identified as national parks, conservation areas, forest reserves and natural water reserves. The balance of land in Queenscliffe (around 42%) comprises intensive urban uses – residential; commercial; industrial; infrastructure & utilities; unclassified private land; and sport, heritage and cultural uses.

6.0 ENVIRONMENT

6.2 CLIMATE & RAINFALL

RAINFALL

The Bureau of Meteorology does not record rainfall data for Queenscliffe; however, the closest area of long-term recording is Barwon Heads which recorded 520mm annual average.

PREDICTED SEA LEVEL RISE

The mainland of Queenscliffe has approximately 20km of (mainland) coastline, which in time will be vulnerable to predicted sea-level rise. This will pose a challenge for populated areas in Queenscliffe and will also impact low-lying environmentally sensitive areas along the coastline. Predicted sea-level rise maps produced by the Australian Government are available at the link provided below:

http://www.ozcoasts.gov.au/climate/sd_visual.jsp

CURRENT HIGH TIDE - A CLOSE UP OF QUEENSLIFF



PROJECTED HIGH TIDE 2100 - CLOSE-UP OF QUEENSLIFF



6.0 ENVIRONMENT

CURRENT HIGH TIDE - QUEENSLIFF AND POINT LONSDALE



PROJECTED HIGH TIDE 2100 - QUEENSLIFF AND POINT LONSDALE (+.74M)



Coastal Risk Australia 2100

RELEVANT DATA TABLES

NO. DESCRIPTION

- 4.1 VLUIS land use areas - hectares (2016)
- 4.2 Land use zoning by LGA (2014)
- 4.3 ABRES Australian land use profiles - hectares (2017)
- 4.4 Water use by purpose and key location (2012)
- 4.5 Projected total demand for drinking-water (2012 - 2060)
- 4.6 Regional metered water consumption (megalitres)
- 4.7 Average annual rainfall (2017)

NO. DESCRIPTION

- 4.8 Seasonal and annual average temperatures and rainfall in the Corangamite region (1961-1990)
- 4.9 Mean maximum temperatures at G21 weather stations* for Jan
- 4.10 Days exceeding 37°C in Geelong (Jan 2012-Mar 2018)
- 4.11 Consecutive days exceeding 34°C in Geelong (Dec 2015-Feb 2018)
- 4.12 Projected climate change in Corangamite region (2030-70)
- 4.13 Summary of the impacts a changing climate can have on coastal areas

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8.0 GLOSSARY

AMBULATORY CARE SENSITIVE CONDITIONS (ACSC)

Ambulatory care sensitive conditions (ACSCs) are conditions for which effective treatment may be delivered on an outpatient (ambulatory) basis.

VACCINE-PREVENTABLE ACSCS (REDUCING THE INCIDENCE OF PREVENTABLE DISEASE)

Good access to health care services can virtually prevent the occurrence of disease in this group. This includes hospitalisation for influenza, bacterial pneumonia, tetanus, measles, mumps, rubella, pertussis, and polio-conditions for which vaccination is available.

For these conditions, it is the actual condition that is deemed preventable rather than the hospitalisation.

ACUTE ACSCS (REDUCING MORBIDITY AND PAIN THROUGH TIMELY AND APPROPRIATE TREATMENT)

The personal health care system can provide symptomatic relief to patients for certain acute conditions that would be resolved independent of any medical intervention. In some situations, lack of attention to symptoms in a timely fashion can lead to acute medical problems requiring hospitalisation. Mild cases of this group of conditions should theoretically be managed in ambulatory care settings, preventing the disease from becoming more severe and necessitating hospitalisation. This category includes avoidable hospitalisation for acute disease, for example, dehydration/gastro, kidney infection, perforated ulcer, cellulitis, pelvic inflammatory disease, ear, nose and throat (ENT) infections, dental conditions.

These conditions may not be preventable in themselves but theoretically should not result in hospitalisation if adequate and timely primary care is received.

CHRONIC ACSCS (REDUCING THE EFFECT OF CHRONIC DISEASE AND PROLONGING LIFE)

Chronic conditions are usually not self-limiting and can lead to extensive use of medical services. Adverse consequences of disease can occur with or without medical care, but negative consequences are more common when regular care is absent. An advanced stage of a chronic disease requiring hospitalisation may indicate the existence of one or more access barriers to personal health care services. This category includes avoidable hospitalisation for selected chronic disease, for example, diabetes, asthma, angina, hypertension, congestive heart failure, chronic obstructive pulmonary disease (COPD).

In this case, although these conditions may be preventable through behaviour modification and lifestyle change, they can also be managed effectively through primary care in order to prevent deterioration and hospitalisation.

AVERAGE ANNUAL GROWTH RATE

A growth rate that is the annual geometric mean across a designated period. This variable is sometimes referred to as 'Compound Annual Growth Rate' or 'CAGR'.

AVOIDABLE MORTALITY

Avoidable mortality covers those causes of death that are potentially avoidable at the present time, given available knowledge about social and economic policy impacts, health behaviours, and health care. (The Public Health Information Development Unit).

CORE ACTIVITY NEED FOR ASSISTANCE

The Core Activity Need for Assistance variable was developed by the Australian Bureau of Statistics (ABS) to measure the number of people with a profound or severe disability, with a definition of: "those people needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication, because of a long-term health condition (lasting six months or more), a disability (lasting six months or more), or old age".

8.0 GLOSSARY

FAMILY INCIDENTS & FAMILY VIOLENCE

Family violence is defined in the Victoria Police Code of Practice for Investigation of Family Violence in accordance with the Family Violence Protection Act (2008). Family violence is defined as any behaviour, whether a criminal offence or not, that in any way controls or dominates a family member and causes them to feel fear for their own, or other family members' safety or well-being. It includes violent, threatening, coercive or controlling behaviour that occurs in current or former family, domestic or intimate relationships. Family means any family or family-like relationship, including current and former intimate partners, relatives, same-sex partners and carers. In its statistical reports, Victoria Police use the term Family Incident, while the Victorian Family Violence Database (which uses Victoria Police data) uses the term Family Violence Incident. Each of these terms is based on the definition above.

TOTAL FERTILITY RATE

The ABS defines the Total Fertility Rates as "the sum of age-specific fertility rates (live births at each age of mother per 1,000 females of the estimated resident population of that age) divided by 1,000. It represents the number of children a female would bear during her lifetime if she experienced current age-specific fertility rates at each age of her reproductive life".

G21 REGION WEIGHTED AVERAGE

In some incidences, raw data is not available and therefore cannot be aggregated to form statistics for the region as a whole; in several of these cases a weighted average has been used. For the purposes of this report, G21 weighted average refers always to a *population-weighted arithmetic mean of LGA-level data*. The appropriate population weights are sourced from the LGA-level Estimate Resident Populations (ERPs) from the same year the relevant dataset was collected. In gender-base cases, the total population weight is used as an approximation.

INDEX OF RELATIVE SOCIO-ECONOMIC DISADVANTAGE (IRSD)

A measure which summarises variables that indicate relative disadvantage. The IRSD is used to rank areas from most to least disadvantaged. A very low score indicates a large proportion of people experienced relative disadvantage in the area. Notably, a high score cannot be used to conclude that an area has a high prevalence of advantaged individuals; only a *lack of disadvantage* can be indicated.

LABOUR FORCE

Labour force refers to population aged 15 years and over who are either employed or seeking employment.

LLEN (LOCAL LEARNING & EMPLOYMENT NETWORK)

LLENs comprise a range of groups and organisations including education and training providers, business and industry, community agencies, and parent and family organisations. The goal of each LLEN is to support young people, 10 - 19 years old, within its geographical boundaries by improving their participation, engagement, attainment and transition outcomes. Victoria has a total of 31 Local Learning and Employment Networks, or LLENs.

MEDIAN

The median is the middle value of an ordered set of values.

MODELLED ESTIMATE

Some data in the profile refers to modelled estimates from the Public Health Information Development Unit (PHIDU). These estimates were developed by the PHIDU using modelled survey data collected in the 2007-08 ABS National Health Survey (NHS) and known characteristics of the area. Note that numbers are estimates for an area, not measured events, and should be used only as indicator of likely levels of a condition or risk factor in an area. Further information about the description of modelled estimates is available at www.publichealth.gov.au.

8.0 GLOSSARY

MORTGAGE STRESS	Mortgage stress is where a household in the bottom 40% of income distribution spends 30% or more of household income on mortgage repayments.
RENTAL STRESS	Rental stress is where a household in the bottom 40% of income distribution spends 30% or more of household income on rent.
NOTIFIABLE INFECTIOUS DISEASES	Notifiable conditions are specified in Schedule 4 of the Public Health and Wellbeing Regulations 2009. In Victoria, the Department of Health conducts surveillance on infectious diseases to pinpoint outbreaks and to prevent the spread of infection. Notifications of conditions from medical practitioners and laboratories are the fundamental component of the surveillance. (Victorian Government Department of Health website, 2014).
PER CAPITA	For all variables designated “per capita”, the aggregate value is divided by the <i>total population</i> of the relevant area.
REGIONAL VICTORIA	The part of Victoria not included in the Greater Melbourne area. This is also described as Non-Metropolitan Victoria, Rural Victoria, Rest of Victoria, and balance of Victoria in various source documents. Boundaries may vary slightly between source agencies. Current Australian Statistical Geography Standard (ASGS) notation for this area is “Rest of Victoria”.
STATISTICAL AREA (SA)	Statistical Areas (with four numbered, stratified levels of ascending sizes) are the standard geographical areas used and recommended by the ABS for statistical analysis; these areas aggregate to cover all of Australia’s land mass and are standardised to improve data reliability.
HOUSING SUITABILITY	<p>‘Housing suitability’ (HOSD) is a new derived item for 2016 from the ABS Census of Population and Housing. It is a housing utilisation measure based upon a comparison of the number of bedrooms in a dwelling together with a series of household demographics such as the number of usual residents, their relationship to one another, their age and sex. There is no single standard measure for housing suitability. However, the Canadian National Occupancy Standard (CNOS) is widely used in Australia and internationally. The HOSD variable is based on this standard.</p> <p>The CNOS for housing appropriateness is sensitive to both household size and composition. The measure assesses the bedroom requirements of a household by specifying that:</p> <ul style="list-style-type: none"> • there should be no more than two persons per bedroom; • children less than five years of age of different sexes may reasonably share a bedroom; • children less than 18 years of age and of the same sex may reasonably share a bedroom; • single household members 18 years and over should have a separate bedroom, as should parents or couples; and • a lone person household may reasonably occupy a bed sitter.

9.0 ABBREVIATIONS

ABS	AUSTRALIAN BUREAU OF STATISTICS
ACSC	AMBULATORY CARE SENSITIVE CONDITION
AEDI	AUSTRALIAN EARLY DEVELOPMENT INDEX
ASGS	AUSTRALIAN STATISTICAL GEOGRAPHY STANDARD
CALD	CULTURALLY AND LINGUISTICALLY DIVERSE
CCF	CONGESTIVE CARDIAC FAILURE
COPD	CHRONIC OBSTRUCTIVE PULMONARY DISEASE
CSA	CRIME STATISTICS AGENCY (STATE GOVERNMENT)
DEECD	DEPARTMENT OF EDUCATION AND EARLY CHILDHOOD DEVELOPMENT (STATE GOVERNMENT)
DELWP	DEPARTMENT OF ENVIRONMENT, LAND, WATER AND PLANNING (STATE GOVERNMENT)
DHHS	DEPARTMENT OF HEALTH AND HUMAN SERVICES (STATE GOVERNMENT)
DOH	DEPARTMENT OF HEALTH (FEDERAL GOVERNMENT)
ERP	ESTIMATED RESIDENT POPULATION
GCP	GENERAL COMMUNITY PROFILE
GP	GENERAL PRACTITIONER
GRP	GROSS REGIONAL PRODUCT
GVA	GROSS VALUE ADDED
IRSD	INDEX OF RELATIVE SOCIO-ECONOMIC DISADVANTAGE
LGA	LOCAL GOVERNMENT AREA. E.G. SURF COAST SHIRE
LGBTI	LESBIAN, GAY, BISEXUAL, TRANSGENDER AND INTERSEX
LLEN	LOCAL LEARNING AND EMPLOYMENT NETWORK
SALM	SMALL AREA LABOUR MARKETS
SEIFA	SOCIO-ECONOMIC INDEX FOR AREAS
TAC	TRANSPORT ACCIDENT COMMISSION
TSP	TIME SERIES PROFILE
UCL	URBAN CENTRE AND LOCALITY
VHIS	VICHEALTH INDICATORS SURVEY
VIF	VICTORIA IN FUTURE

10.0 DATA NOTES

The most current and readily available data has been included in the profile.

Demographic, health and community wellbeing data with gender and age bracket break-down has been used where it was available and statistically reliable. It is recommended that data contained in this report should be used in combination with other research and consultation, including consultation with local and regional health and community agencies.

Data for locations and population groups with smaller population numbers should be interpreted with particular caution, along with data collected from small-run localised surveys with small sample size. In many instances, actual observed numbers are very low and/or data has been aggregated over several years. Numerous agencies, including the Australian Bureau of Statistics, use random errors for small numbers to ensure privacy of individuals is protected. For this reason, small numbers (e.g. under 20) should be treated as an approximate guide only.

Time-series trend data in this profile was used where this was prudent, as methodology, geographic boundaries, indicator description or data availability have changed in some cases.

Data was correct and current at the time of writing; however, much of the information contained in this profile is subject to regular change and review by the relevant agencies. When interpreting data, readers are urged to refer to the original source of the data where possible.

11.0 DATA RESOURCES

TOOL	DESCRIPTION	PUBLIC ADDRESS
Queenscliffe Community Profile (Provider: Id Consulting)	An online resource providing demographic information for the Borough of Queenscliffe.	https://profile.id.com.au/queenscliffe
Borough of Queenscliffe Economic Profile (Provider: Id Consulting)	An online resource providing economic information on local employment, local workers, journey to work and market profile for the Borough of Queenscliffe.	https://economy.id.com.au/queenscliffe
Borough of Queenscliffe Fact Sheets	The Borough of Queenscliffe Council provides a suite of Council fact sheets.	http://www.queenscliffe.vic.gov.au/council/the-borough/fast-facts



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