



Loddon Mallee Public Health Unit Population Health Plan

2025-2029



We acknowledge the First Peoples of Australia who are the Traditional Custodians of the land and water where we live, work and play. We celebrate that this is the oldest living and continuous culture in the world. We are proud to be sharing the land that we work on and recognise that sovereignty was never ceded.



We welcome all cultures, nationalities and religions. Being inclusive and providing equitable healthcare is our commitment.



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Cover image: Redesdale Bridge, Heathcote

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Executive Summary

The Loddon Mallee Public Health Unit (LMPHU) Population Health Plan outlines a strategic, place-based approach to improving health and wellbeing across Victoria's largest region. Spanning nine local government areas (LGAs) and home to over 330,000 residents, the Loddon Mallee region faces unique challenges shaped by geographic isolation, socioeconomic disadvantage and environmental pressures. The plan responds to these complexities with a focus on equity and place-based collaborative action.

Established in 2020 in response to the COVID-19 pandemic, the LMPHU operates as a regional centre for public health leadership, translating state policy into local action. The LMPHU have two intersecting teams, the Health Protection and the Prevention and Population Health team, who work with stakeholders to develop and implement this plan.

The plan is guided by a population health approach that prioritises place-based prevention to reduce the burden on healthcare and support a sustainable service system. It emphasises the importance of addressing health where people live, work, study, and play, while recognising that no single organisation can achieve these goals alone. Cross-sector collaboration is central, involving health services, local government, community organisations and priority populations in co-designing and implementing initiatives.

Equity is the cornerstone of the plan. It acknowledges that systemic barriers, such as poverty, racism, and geographic isolation, disproportionately affect priority populations, including Aboriginal and Torres Strait Islander peoples, multicultural groups, LGBTIQ+ individuals, people with disabilities and rural residents.

The plan commits to amplifying lived and living experiences, supporting Aboriginal and Torres Strait Islander self-determination and embedding climate justice across all actions.

Three priority areas, climate change and health, wellbeing, and healthy food systems, were identified through extensive stakeholder engagement. These priorities reflect both regional needs and alignment with the Victorian Public Health and Wellbeing Plan 2023–27. Climate change poses significant risks to agriculture, food security and community resilience, particularly in rural areas. Wellbeing is impacted by disasters, economic stress, and social isolation, while poor nutrition and food insecurity contribute to chronic disease and health inequities.

To support place-based implementation, the LMPHU region is divided into three sub-regions, Loddon, Mallee, and Murray, each with dedicated place-based LPHU teams and cross-sector advisory sub-committees. These structures ensure that strategies are tailored to local contexts and informed by community voices.

System strengthening enablers, collaboration, communication, and capacity building, underpin the plan's delivery. These interconnected elements foster shared ownership, improve information flow and empower stakeholders to lead sustainable public health change. The agreed goals and objectives for each priority area are summarised on page 5.

An evaluation framework and plan to measure the progress and success of the Population Health Plan has been developed and will continue to evolve in response to emerging environmental and social changes, as identified by stakeholders and shifts in government policy.

The LMPHU Population Health Plan represents a commitment to building healthier, fairer communities across the Loddon Mallee region. By centring equity, embracing local knowledge, and fostering cross-sector partnerships, it lays the foundation for long-term improvements in health outcomes and resilience.

LMPHU Population Health Plan 2025-2029 Summary

The **LMPHU Population Health Plan 2025-2029** guides equitable, place-based health promotion and primary prevention, informed by population health needs. The plan identifies local priorities, aligned efforts across the region and initiatives tailored to the local context. It defines the LMPHU's role in driving system change and incorporates measures to monitor progress and improve health outcomes for all, with a focus on those experiencing systemic disadvantage.

OUR APPROACH

Place-based

We will work with stakeholders to tailor prevention initiatives to local contexts, ensuring strategies reflect community needs and strengths.

Equity

We will address systemic disadvantage with a focus on climate justice, engagement of people with living and lived experience, Aboriginal and Torres Strait Islander self-determination and apply an intersectional gender lens.

System Strengthening

We are committed to a value-based system that improves community outcomes by optimising resources through collaboration, communication and capacity building.

OUR GOALS



Climate Change and Health

To embed, support, and promote localised climate mitigation and adaptation strategies that build resilient and healthy communities in the Loddon Mallee region.

To build a climate-resilient health and social service system with enhanced capacity to protect and promote health and wellbeing from the impact of climate change.



Healthy Food Systems

Build a more resilient, equitable and healthier food system by supporting and promoting evidence-informed programs and initiatives, to improve access to affordable, healthy food.

Support the availability of healthy, locally grown, plant based fresh food to enable our region to improve planetary health, whilst also supporting climate mitigation.



Wellbeing

Embed respect and inclusion in communities and settings to increase cultural safety, connection and belonging.

Promote relationships that reduce adversity and enhance wellbeing and resilience within individuals, families, communities and settings. Foster mental health and wellbeing awareness and acceptance where all people feel safe and supported.

OUR OBJECTIVES

Collaboration

Support and strengthen cross-sector collaboration with stakeholders and people with lived experience to build trust, share knowledge and support collective action to progress public health priorities.

Communication

Build stakeholder understanding of system challenges and opportunities by strengthening capacity to enhance public health outcomes across LMPHU priorities.

Capacity Building

Develop and promote accessible, consistent, tailored and appropriate communication that is timely and relevant to support LMPHU priorities, with a focus on priority populations.

Section 1: Our Context



Murray River, Mildura

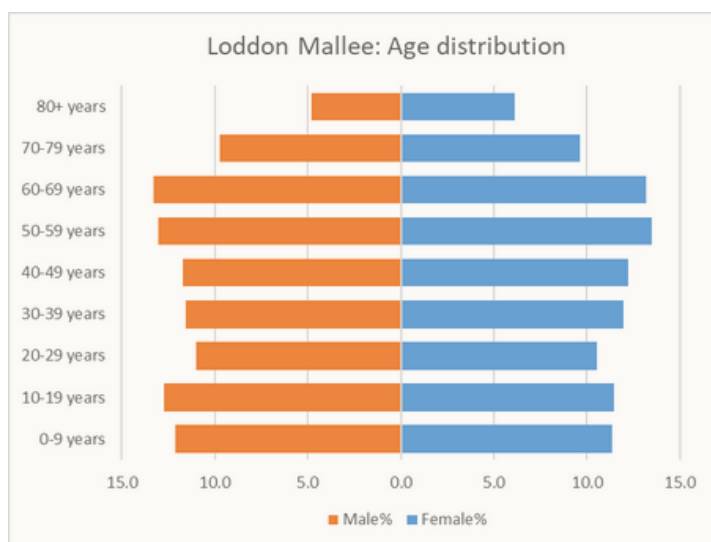
Loddon Mallee Regional Snapshot

The Loddon Mallee region (LMR) is expansive and diverse, spanning just under 59,000 square kilometres, the largest region in Victoria. The LMPHU region encompasses nine LGAs stretching from the outskirts of Melbourne to far north-western Victoria, bordered on the northern edge by the Murray River. It has areas of high population density to very low density that is associated with less community assets and services.

As one of the most consistently warm climates in Victoria, the Loddon Mallee is a flourishing food and wine production region and enjoys tourism to waterways and the Murray River, acclaimed restaurants and wineries and heritage towns. In the northern part of the region the main industry is agriculture, with an increased number of itinerant and migrant workers which brings a diversity of language and culture. In the southern part of the Loddon Mallee region the largest industry is health care and retail.

The LMR, home to 334,911 people, is Victoria's largest Public Health Unit by area, encompassing both urban centres and remote rural communities. The population is older than the state average, with 21.5% aged over 65, creating increased demand for health and aged care services (see Figure 1, Table 1).

Figure 1. Loddon Mallee Population Pyramid, 2021



Source: Australian Bureau of Statistics, 2021

The region experiences notable socioeconomic disadvantage, with lower educational attainment, low household income, rental stress, food insecurity and high rates of family violence and homelessness. Health risk behaviours are more common than state averages, including smoking, alcohol consumption, poor diet, physical inactivity, and poor dental health, contributing to chronic disease. Developmental vulnerability in children and high levels of loneliness are also widespread.



334,911 people reside in the Loddon Mallee PHU region (2021)

Chronic health conditions such as asthma, arthritis, cancer and mental illness are prevalent across the region, with multiple long-term conditions common. Avoidable deaths from circulatory disease, cancer, and transport accidents exceed state averages. Despite these challenges, the region's strong sense of community and collaboration provides a foundation for building healthier, more resilient futures.

Table 1. Loddon Mallee Population Pyramid

LGA	Mean Age (2021)
Victoria	38
Swan Hill	39
Mildura	40
Greater Bendigo	40
Macedon Ranges	43
Campaspe	47
Gannawarra	51
Mount Alexander	51
Loddon	52
Buloke	52

Source: Australian Bureau of Statistics, 2021

Loddon Mallee Regional Data



Birth rate for women 15-19 yrs is 1.9 (Vic 0.8), 2022 [1]



2.6% of population identify as Aboriginal and Torres Strait Islander peoples [Highest in Vic (1.0%)] [2]



Mandarin is the top non-English language spoken at home [2]



8.8% of people have severe to profound disability (Vic. 6.1%) [2]



The level of disadvantage (IRSD*) 940 (Mildura) - 1063 (Macedon Ranges) [2]



10.2% completed year 12 or equivalent (Vic. 14.9%) [2]



3.7% unemployment (Vic. 4.7%), 2021 [1]



22.9% of adults feel lonely (Vic. 23.7) [3]



20.3% of adults report high/very high psychological distress (Vic. 19.6%) [3]



48.6% of adults feel valued by society (Vic. 47.8%) [3]



8.1% of adults ran out of food & could not afford to buy more (Vic. 8.2%) [3]



2.7% of adults are compliant with vegetable and fruit consumption guidelines (Vic. 3.4%) [3]



43.1 /100,000 hospitalisations due to assault (Vic. 41.3/100,000), 2023/24 [1]



236.8/100,000 premature deaths (Vic. 187/100,000), 2018 [1]

Sources: [1] Victorian Public Health and Wellbeing Outcomes dashboard. [2] Australian Bureau of Statistics, 2021. [3] Victorian Population Health and Wellbeing Survey, 2023. *IRSD: Index of Relative Socio-economic Disadvantage, the lower the index score the higher the disadvantage.

Loddon Mallee Public Health Unit

The LMPHU works to keep our regional community healthy, safe and well. We use local knowledge and community-based relationships to effectively tailor and deliver public health initiatives and respond to incidents and issues within the Loddon Mallee region.

The LMPHU, as part of Bendigo Health, plays a crucial role in supporting the health, safety, and wellbeing of communities across the region. At the regional level, Local Public Health Units translate state policy into local action, ensuring that strategies are relevant and responsive to community needs.

Established in 2020, in response to the COVID-19 pandemic, the LMPHU operates as a regional centre for public health leadership and action. Drawing on strong local knowledge, trusted relationships, and active stakeholder engagement, the unit delivers tailored responses to public health challenges and supports initiatives that reflect the unique needs of people living in the Loddon Mallee region.

The LMPHU team supports the Loddon Mallee community to be healthy, safe and well through a focus on partnerships, health equity, place-based prevention and health promotion, community engagement and evidence-informed practice.

To maintain a place-based approach, the LMPHU region has been divided into three sub-regions that align with the Loddon Mallee Health Services (Advisory Sub-Committees), supported by the sub-regional PPH teams. The purpose of the Advisory Sub-Committees is to provide formal advice to the Bendigo Health Primary Care and Population Health Advisory Committee (sub-committee of the Bendigo Board) to ensure local approaches to improving primary prevention and population health are recognised and leveraged.

To support local relationship building and local intelligence, LMPHU offices are located in each LMPHU sub-region.

Figure 2. LMPHU map depicting geographical boundaries and office locations

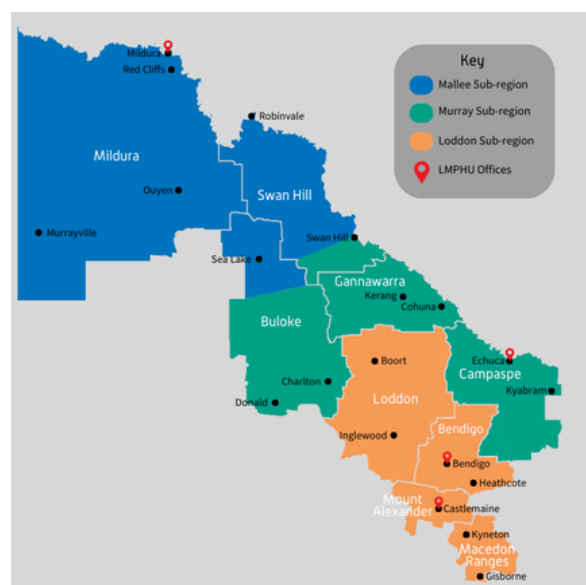
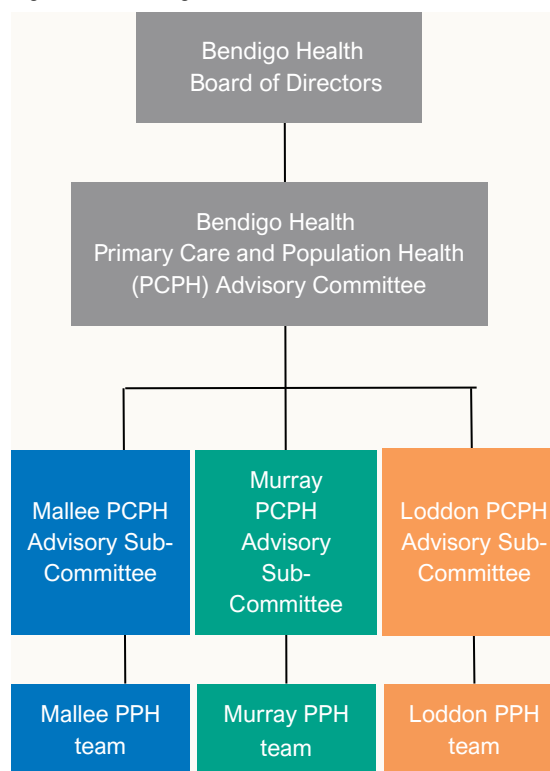


Figure 3. LMPHU governance structure



Population Health

A population health approach is about improving health and wellbeing outcomes within and across a defined population, while reducing health inequalities. A key to this approach is not waiting for people to access the health system to manage chronic illness. Instead, it seeks to promote and improve health and wellbeing in the community, where people live, work, study and play, while also providing proactive and accessible pathways for people to get support when needed.

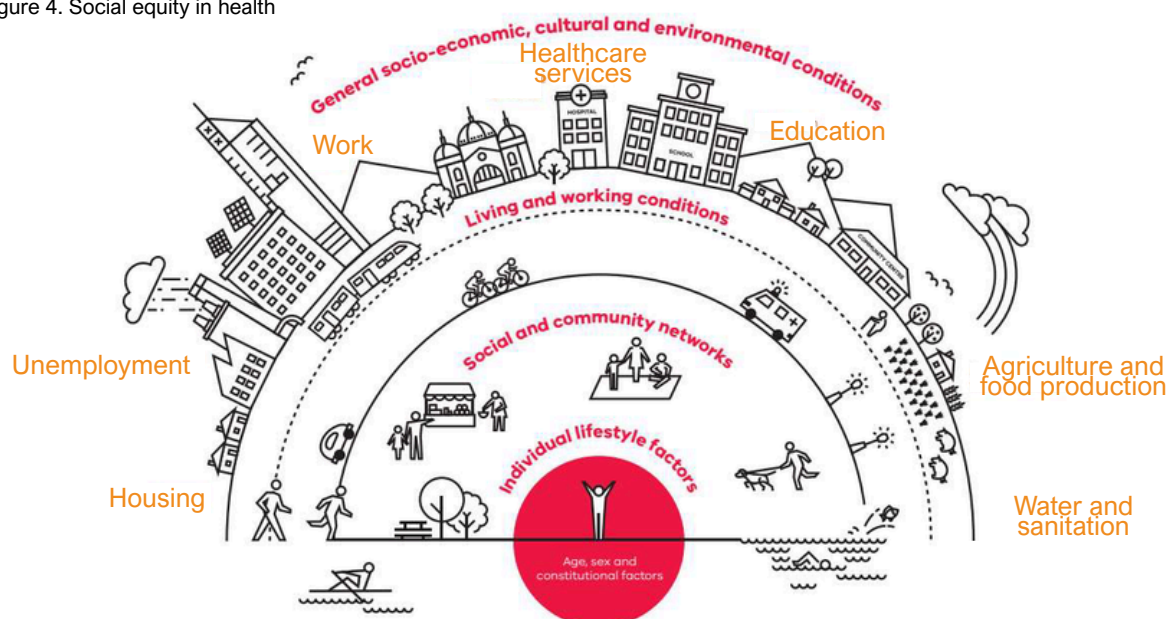
A population health approach also acknowledges that no single organisation, sector or level of government can achieve these goals alone. Collaboration is central: health services, local government, community organisations, schools, workplaces and communities must work together to design, implement and evaluate initiatives. By aligning efforts and pooling expertise, resources and perspectives, collaborative action ensures that strategies are more effective, sustainable, and responsive to the needs of diverse communities.

Equity is a core principle of this approach. It recognises that some groups in the population face greater barriers to good health due to

social, economic, cultural and environmental factors, including poverty, racism, discrimination, housing insecurity and geographic isolation. Reducing health inequities requires a deliberate focus on addressing these structural drivers of disadvantage and ensuring that all people, especially those most affected by inequities, have fair and just opportunities to achieve their highest level of health. This includes engaging with and amplifying the voices of priority populations to shape policies, services and supports that reflect their lived and living experience.

The Victorian public health and wellbeing outcomes framework provides an evidence-based approach to monitoring and reporting progress of collective efforts to achieve better health and wellbeing. Drawing on a statewide set of indicators from multiple data sources, the framework enables the Victorian Government to track whether our shared actions are delivering improvements over time. Importantly, it allows us to measure the extent to which avoidable gaps in health status between different groups are being closed, helping to hold the system accountable to the principle of equity and the collective vision of a healthier, fairer Victoria.

Figure 4. Social equity in health



Source: Adapted from: Dahlgren G, Whitehead M. 1991. Policies and Strategies to Promote Social Equity in Health. Stockholm, Sweden: Institute for Futures Studies.

Section 2: Our Approach



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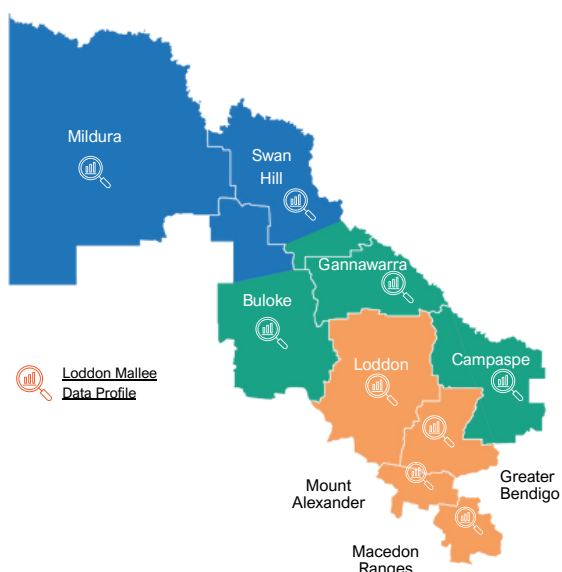
Planning Approach

Quantitative Data

Demographic, social and health data was collected and analysed across the nine LGAs of the Loddon Mallee region to guide population health planning. This information provides valuable insight into local strengths and gaps, supporting the identification of LMPHU priorities. This data also supports the work of partner organisations to develop their strategic plans, deliver services and secure funding for local initiatives.

Click on data icons to view local government area data profiles

Figure 5. Interactive map of Loddon Mallee community profiles



Stakeholder Engagement

In 2022, the LMPHU undertook extensive stakeholder consultations to inform the 2023–25 LMPHU Population Health Plan. This process included meetings with organisations, sub-regional workshops, surveys and reviews of Municipal Public Health and Wellbeing Plans and Community Health Plans. Combined with demographic, social and health data, the consultations identified three priorities: climate change and health, healthy food systems and wellbeing.

Given the long-term nature of prevention work and the relatively limited changes in population health outcomes over short timeframes, LMPHU recommended continuing these priorities into the 2025–29 plan. This approach, endorsed by the Primary Care and Population Health Advisory Sub-Committees, allows the unit to build on the foundation established through the 2023–25 plan.

To refine the 2025–29 objectives, regional workshops were convened across each priority area, involving more than 120 participants from over 60 organisations. Expert presentations provided evidence and context before facilitated discussions explored local opportunities, system challenges and potential roles for LMPHU in supporting future strategies.

The insights gathered, along with state-wide frameworks, informed high-level goals, objectives and strategies. Sub-regional engagement then ensured these directions aligned with local priorities and strengthened support for ongoing work.

STAKEHOLDER WORKSHOP REPORTS



[Climate Change and Health](#)



[Healthy Food Systems](#)



[Wellbeing](#)



Priority Alignment

Shared priorities enable organisations to align resources, expertise and efforts toward common goals, achieving greater impact than working alone. Place-based organisations ensure diverse community needs guide action. By reducing duplication and coordinating strategies, partners address public health priorities more efficiently, strengthen collaboration, foster trust, amplify community voices and support equitable improvements in population health outcomes.

The Public Health and Wellbeing Act 2008 highlights the role of councils in promoting health and wellbeing, requiring them to develop a Municipal Public Health and

Wellbeing Plan every four years. Since the introduction of the Climate Change Act 2017, climate change is now a mandatory focus. Similarly, Community Health services prepare health promotion plans in line with the Community Health – Health Promotion Guidelines, which recommends healthy eating.

Local governments and Community health services have submitted their plans to the Department of Health for approval. To strengthen alignment across the Loddon Mallee region, LMPHUs have confirmed their priorities remain unchanged and advised local governments and Community health services accordingly. The proposed shared priorities are outlined below. Women's Health Loddon Mallee priorities also align with the LMPHU.

Table 2. Shared priorities with LMPHU

 Shared priority with LMPHU

Local government area	Municipal Public Health and Wellbeing plans			Health promotion funded organisations	Community Health - Health Promotion plans		
	Climate change	Healthy food Systems	Wellbeing		Climate Change	Healthy food systems	Wellbeing
Buloke				East Wimmera Health Service			
Campaspe				Echuca Regional Health			
				Kyabram District Health			
Greater Bendigo				Bendigo Community Health Service			
				Bendigo Health			
Gannawarra				Northern District Community Health			
Loddon				Northern District Community Health			
				Inglewood and District Health			
Macedon Ranges				Sunbury and Cobaw Community Health			
				Macedon Ranges Health			
Mildura				Sunraysia Community Health Service			
Mount Alexander				Dhelkaya Health			
Swan Hill				Swan Hill District Health			

LMPHU Prevention Approach

The LMPHU aims to support communities to lead healthier lives through place-based prevention and population health initiatives, delivered in partnership with local organisations. This approach proactively promotes health where people live, work, study, and play.

This work is guided by the Victorian Public Health and Wellbeing Plan 2023-27 using a population health approach, which focuses on improving overall health and wellbeing across defined populations, while reducing health inequities.

Place-based

LMPHU applies a place-based approach by working with stakeholders to tailor prevention initiatives to local contexts, ensuring strategies reflect community needs and strengths.

Public Health System Strengthening

LMPHU is committed to transitioning to a value-based system that improves community outcomes while driving greater efficiency. Achieving this requires a whole-of-system approach, underpinned by key enablers such as collaboration, communication and capacity building. These elements help optimise resources, minimise duplication and strengthen impact.

Health Equity

Equity is central to LMPHU's work, aiming to reduce avoidable health inequalities and improve outcomes for those experiencing systemic disadvantage. Addressing these inequalities benefits the whole population by improving overall health, reducing service demand and fostering stronger, more resilient communities.



Childcare Centre, Bendigo

Place-based

A place-based approach recognises that people and places are inter-related and the conditions where people live, work, learn and connect shape health outcomes. In rural areas, geographic isolation, workforce shortages, and limited services require solutions built around local assets, strong social capital and challenges.

Equity demands tailored strategies to address systemic barriers faced by priority populations, ensuring everyone has fair opportunities for good health.

In the Loddon Mallee region, where there is a large economic reliance on agriculture, climate change poses significant risks to livelihoods, food security, and community resilience. Heatwaves, drought, floods, and shifting seasonal patterns affect agricultural productivity, economic stability and access to healthy food, directly influencing wellbeing.

Healthy food systems must be adapted to local availability, affordability and cultural relevance to improve nutrition and food security.

Wellbeing is closely linked to community connectedness, access to services and resilience, but disasters, economic pressures and stigma can intensify risks in rural communities.

Cross-sector networks play a vital role by bringing together the expertise and knowledge of local stakeholders and diverse perspectives, enabling more innovative, inclusive and effective solutions. By embedding public health action within the context of each place and harnessing local expertise and lived and living experience, responses can be more effective, culturally safe and sustainable. This approach addresses the intertwined social, environmental, and economic determinants of health.



System Strengthening Enablers

The LMPHU approach to prevention is focused on driving system change at a regional level, translating state policy into local action. To achieve this the LMPHU leverages system strengthening enablers to design, deliver and sustain effective public health initiatives. Through a comprehensive consultation process, the Loddon Mallee stakeholders identified three key system enablers: collaboration, communication and capacity building.

Each key enabler includes secondary elements (outer circle of figure below) that work together and rather than acting as linear tools, enablers operate as an interconnected web that strengthens the public health system. These system strengthening enablers are grounded in our equity lenses of Aboriginal and Torres Strait Islander self-determination, climate justice and lived and living experience. Defining the system enablers supports clearer roles and responsibilities and provides a foundation for measuring their effectiveness in improving the public health system.

Collaboration

Cross-sector collaboration fosters shared ownership of health outcomes, leverages diverse expertise and creates opportunities to align efforts, reduce duplication and mobilise collective action contributing to value-based prevention initiatives.

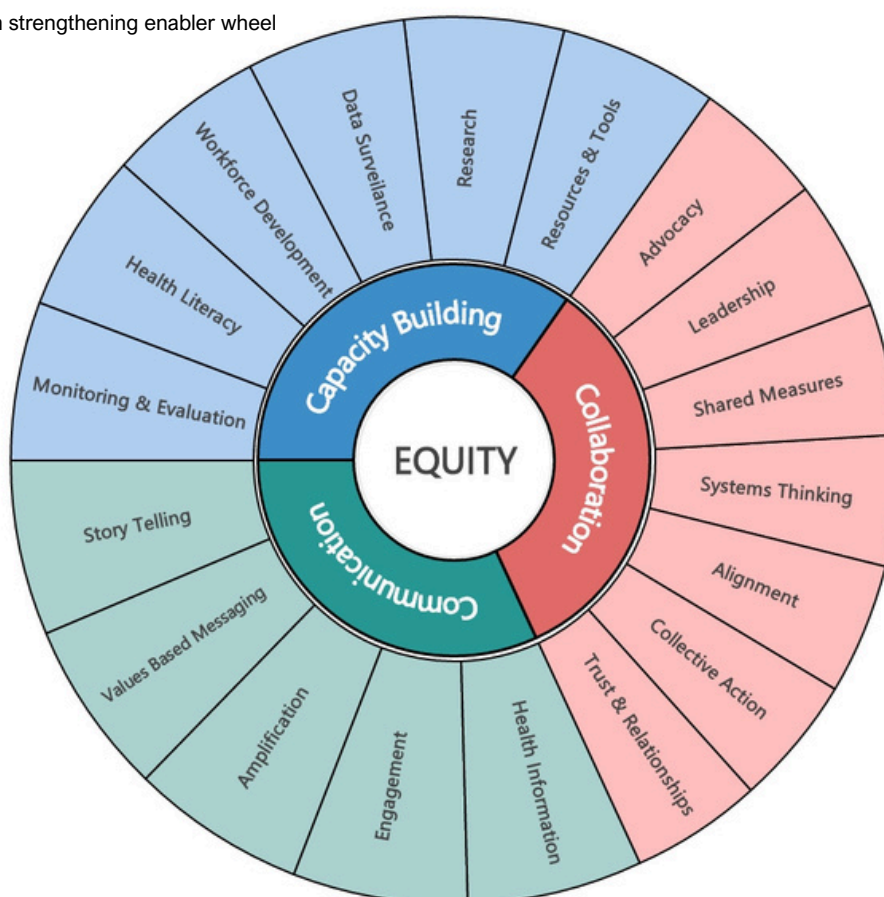
Capacity Building

Capacity building of the workforce strengthens the system's ability to design, implement and evaluate effective prevention initiatives while empowering stakeholders with the skills, resources and knowledge to lead and sustain public health change.

Communication

Clear and consistent communication enhances the flow of evidence and practices across the public health system, ensuring timely and relevant information is shared to enable informed decision-making while strengthening transparency and trust with stakeholders and communities.

Figure 6. System strengthening enabler wheel



Collaboration

- **Advocacy Collective** effort to support health equity and improved outcomes through shared voices and coordinated actions.
- **Leadership** Cultivating skilled leaders to drive and sustain public health efforts whilst leading by example ourselves.
- **Shared Measures** Utilising common indicators and evaluation tools across our partners to align goals, track progress and collectively assess the impact of public health initiatives in our region.
- **Alignment** Coordinated effort of partners to align strategies, actions, and resources toward shared public health goals, reducing duplication and enhancing our collective impact.
- **Trust & Relationships** Mutual confidence and respect among stakeholders that enables open communication, shared decision-making, and sustained collective action to improve health outcomes.
- **Collective Action** Guiding the unified efforts of a diverse range of stakeholders working together toward a common goal to address complex public health issues more effectively than any one organisation could alone.
- **Systems Thinking** Considering the complex interconnections between people, policies, environments, and institutions within the prevention system. Through understanding of the system drivers, we can collaborate with others to achieve coordinated, co-designed and sustainable solutions to public health challenges.

Capacity Building

- **Resources & Tools** Practical materials, frameworks, and resources that supports individuals and organisations to strengthen their skills, enhance performance, and deliver effective public health interventions.
- **Workforce Development** Providing opportunities for public health professionals and stakeholder organisations to develop and enhance the necessary skills, knowledge and abilities for effective practice and organisational development.

- **Monitoring & Evaluation** Systematic tracking and assessment of public health initiatives to measure effectiveness, inform improvements, and ensure accountability towards outcomes.
- **Health Literacy** Ability of individuals and communities to access, understand, and use health information and services to make informed and autonomous decisions about their own health and wellbeing.
- **Research** Systematic study of health patterns, determinants and interventions to generate evidence that improves health outcomes.
- **Data & Surveillance** Continuous collection, analysis, and interpretation of health-related information to inform decision-making, detect emerging issues, and guide effective public health responses.

Communication

- **Story Telling** Utilising personal or communities' narrative which captures the lived experience. These stories are used to create engaging, relatable health messaging in a way that inspires action and builds understanding.
- **Engagement** Facilitating active involvement of individuals, communities and stakeholders in shaping, understanding and informing health initiatives and decision making.
- **Amplification** Elevating tailored key health messages to reach appropriate audiences, influence behaviours, and strengthen public awareness and impact.
- **Health Information** Accurate, timely and accessible sharing of data and messages which empower our stakeholders and communities to make informed health decisions.
- **Values Based Messaging** Framing health messages in ways which align with beliefs, priorities and cultural values of the target audience to build trust, relevance and meaningful engagement.

Equity

Equity sits at the centre of our system strengthening enablers wheel. Equity is depicted in this way to highlight that it is central and embedded across all aspects of our work by applying the guiding lenses of Aboriginal and Torres Strait Islander self-determination, climate justice and lived and living experience.

We will implement this by ensuring Aboriginal and Torres Strait Islander self-determination remains central, respecting the rights of First Nations peoples to make decisions that affect their lives and supporting their continued strength and leadership. Our commitment to climate justice will see us prioritise those most affected by systemic disadvantage and climate change, embedding fairness and sustainability in public health initiatives. We will also elevate lived and living experiences, recognising them as powerful enablers that shape culture, inform decision-making and ensure services and programs are relevant, inclusive and responsive.

In practice, this means co-designing initiatives with communities, building accountability mechanisms into planning and evaluation and aligning resources to reach those with the greatest need, so that equity is not just an aspiration, but a measurable outcome of our collective action.



Lived and Living Experience

The LMPHU uses 'lived and living experiences' to describe people who face or have faced barriers to wellbeing, participation and inclusion, including their families, carers and supporters.

We aim to support our stakeholders to embed voices of lived and living experience across all aspects of their work. Lived and living experiences are powerful enablers that shape attitudes and culture, influencing how people participate in and engage with communities, health services and programs. By placing lived and living experience at the forefront, we can ensure our work aligns with the needs of the people and communities it serves.

Climate Justice

Climate justice sits at the intersection of social justice and climate change. It is about ensuring responses to climate change are fair. People experiencing systemic disadvantage are most affected, despite contributing the least to the problem. Climate justice focuses on protecting their rights and ensuring the costs and benefits of action are shared equitably.

The LMPHU advances climate justice by prioritising people and communities most impacted in our region, along with the organisations that represent them. We aim to support stakeholders to embed climate justice considerations across all areas of work.

Climate justice begins with recognising that we live and work on Aboriginal and Torres Strait Islander Country, where sovereignty was never ceded. We are guided by First Nations' practices of caring for and connection with Country, forming a foundation for climate justice.

Aboriginal and Torres Strait Islander Peoples Self Determination

The right of Indigenous peoples to self-determination recognises long-held traditions of 'independent decision-making, self-government, and institutional self-reliance'. [1] This includes Aboriginal and Torres Strait Islander peoples, who practised self-determination and self-government for tens of thousands of years before colonisation began. [2]

We acknowledge that Aboriginal and Torres Strait Islander self-determination is a human right as enshrined in the United Nations Declaration on the Rights of Indigenous peoples [3] and we commit to working towards a future of equity, health and continued strength. Self-determination is an ongoing

process of ensuring that First Nations peoples are able to make decisions about matters that affect their lives. Essential to the exercise of self-determination is choice, participation and control. [4]

LMPHU is committed to supporting Aboriginal and Torres Strait Islander self-determination across the LMPHU priority areas to ensure we are responsive to Aboriginal and Torres Strait Islander needs, priorities and aspirations. We plan to build the capacity of the LMPHU workforce to understand and enable Aboriginal and Torres Strait Islander self-determination across our priority areas of work including building our anti-racism skills, cultural humility and accountability along with our capacity to support truth telling as a path to amplify the voices of First Nations peoples.

Goal	Support Aboriginal and Torres Strait Islander self-determination across the LMPHU areas of work by ensuring First Nation peoples guide how we respond to their needs, priorities and aspirations
Activities	Build the capacity of the LMPHU workforce to understand and enable Aboriginal and Torres Strait Islander self-determination across our priority areas of work
	Work with First Nation stakeholders to develop strategies that provide opportunities for participation, choice and control on how LMPHU aligns with needs and priorities
	Guided by the Bendigo Health Strategic Plan reconciliation action (yet to be published) area supporting partnerships based on Aboriginal and Torres Strait Islander self-determination, truth-telling and treaty

[1] Asia Pacific Forum of National Human Rights Institutions and the Office of the United Nations High Commissioner for Human Rights (2023), *The United Declaration on the Rights of Indigenous Peoples: A Manual for Human Rights Institutions*.

[2] Australian Human Rights Commission (2002), *Social Justice Report 2002: Self-determination - the freedom to 'live well'*

[3] United Nations (n.d), *United Nations declaration on the rights of Indigenous Peoples*, <https://social.desa.un.org/issues/indigenous-peoples/united-nations-declaration-on-the-rights-of-indigenous-peoples>

[4] Australian Human Rights Commission (n.d), *Self-determination and Indigenous Peoples*, <https://humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/self-determination-and-indigenous>

Priority Populations

The Loddon Mallee region is home to diverse communities that face distinct health challenges influenced by social, structural and environmental factors. The LMPHU has identified priority populations who require focused strategies to improve health equity and wellbeing across the region.

Compared to metropolitan areas in Victoria, rural communities experience poorer health outcomes, higher rates of chronic disease, reduced access to specialist healthcare and greater barriers to social and economic participation. Rising living costs and the COVID-19 pandemic have deepened these inequalities. Rural communities whose livelihoods depend on agriculture (45% of Loddon Mallee land used for agriculture) face additional challenges from climate change, volatile markets, and natural disasters, contributing to stress and poor mental health. These overlapping disadvantages highlight the compounding effects of geography, socio-economic status and environmental pressures.



The Zookeeper & Drapl, Sealake

Loddon Mallee has the highest proportion of First Nations peoples (2.6%) compared to the rest of Victoria (1%). First Nations peoples experience disproportionate health burdens resulting from colonisation, systemic racism and dispossession from land. They have higher rates of communicable and chronic diseases, poverty and homelessness, with many conditions occurring earlier in life compared to non-Indigenous populations. Four Aboriginal Controlled Community Health Organisations (ACCHOs) operate across the region, delivering culturally safe health, education, and social programs. Together they form the Loddon Mallee Aboriginal Reference Group.

Our multicultural communities, refugees and seasonal workers, enrich the region but face barriers such as racism, marginalisation, financial hardship, insecure work, language differences and limited access to healthcare. Refugee groups are concentrated in Bendigo, Castlemaine, Mildura and Swan Hill while agricultural and meat processing industries rely heavily on seasonal migrant labour. Multicultural services provide critical culturally appropriate support.

The early years of a child's life are critical for shaping their health, development and wellbeing. Data from the [Australian Early Development Census](#) indicates an increase in developmental vulnerability among children starting school. Experience of child maltreatment can contribute to mental health conditions and social disadvantage across their life-time. Young people (12–24 years) have been disproportionately affected by the pandemic, experiencing increased rates of mental health conditions, alcohol and drug-related harm, adolescent pregnancy, family violence and school disengagement.

People with disabilities are more prevalent in the Loddon Mallee than the state average, with higher NDIS participation rates. Many local governments have disability and access plans, creating opportunities for collaboration to address inequities and ensure inclusive service delivery. Consideration of neurodiversity and responding to accessibility needs are also essential to building environments and systems that enable full participation. Similarly, the growing population of older people (65+) face service gaps that risk premature entry into residential aged care, often away from local social supports.

LGBTIQA+ people encounter multiple barriers, including stigma, discrimination and limited data on health outcomes. While some local services provide tailored support, gaps remain

in understanding and addressing their needs.

The LMPHU applies an intersectional gender lens to ensure gendered health disparities are addressed. LMPHU is an active member of the Collective Action for Respect and Equality in the Loddon Mallee, led by Women's Health Loddon Mallee (WHLM). WHLM has published a gender analysis of the LMPHU priorities impact on women. A gender impact assessment of this plan has been completed and recommendations implemented.

Opportunities exist to strengthen data collection, reduce intersecting disadvantage and ensure that priority populations remain central to the region's focus on climate change and health, healthy food systems and wellbeing.



Section 3: Our Priorities



PS Alexander Arbuthnot, Echuca

Climate Change and Health

Why is it a Priority?

Climate change is interlinked with the social determinants of health and amplifies existing inequalities. Tackling climate change and its impact on health is a key priority in the Victorian Public Health and Wellbeing Plan (2023-27). Climate change threatens health, wellbeing, and safety through extreme weather events like heatwaves, storms, floods and bushfires and reducing the capacity of community to respond due to compounding impacts over time.

The Loddon Mallee region is particularly vulnerable due to its geographical, social and economic factors. Rising temperatures and extreme weather events are expected to increase waterborne, foodborne and vector-borne diseases, worsen chronic illnesses and reduce food nutrition and availability. Aboriginal and Torres Strait Islander communities face unique risks but also provide leadership in climate adaptation through cultural knowledge and Aboriginal and Torres Strait Islander self-determination.

Long-term effects include worsening air, water and soil quality, shifts in disease patterns, food and water insecurity, threats to safety, economic impact and mental health challenges. These impacts disproportionately affect already at risk populations, exacerbating systemic disadvantage.

Working with our partners through a climate change informed intersectional approach, we seek to amplify climate actions that improve health and reduce inequality. Investments in affordable accessible renewable energy, energy-efficient housing and sustainable food and transport can lower living costs, enhance air quality and improve wellbeing.

The Loddon Mallee Climate Change and Health Framework supports cross-sector action to build climate resilience, benefiting both people and the environment.

Sector Networks

As part of its place-based approach, the LMPHU engages in climate change cross-sector networks, where there is local expertise, lived and living experience, and diverse perspectives. These collaborations strengthen organisational connections, foster innovative, tailored solutions and ensure responses reflect each community's social, cultural and environmental context.

Sector Networks	
Statewide - Loddon Mallee Climate Change Leaders - VCOSS Climate Community of Practice - VCOSS health and energy nexus project - Jesuit Social Services Resilience Community of Practice	Loddon - Greater Bendigo Climate Collaboration - Greater Bendigo Community Resilience project - Loddon Shire Keeping Cool in Summer, Warm in Winter Network - Loddon subregion health services COP - Macedon Ranges Shire Keeping Cool in Summer, Warm in Winter Network - Castlemaine Institute Whole Of Home Resilience project - Mount Alexander Shire Keeping Cool in Summer, Warm in Winter Network
Mallee Climate Emergency Community Advisory Group (MRCC)	
Murray - Campaspe Climate Partnership - Disability Emergency Preparedness project working group	

Climate Change and Health Goals

1 To embed, support and promote localised climate mitigation and adaptation strategies that build resilient and healthy communities in the Loddon Mallee region.

2 To build a climate-resilient health and social service system with enhanced capacity to protect and promote health and wellbeing from the impact of climate change.

OUR APPROACH

Place-based

Tailored strategies across the Loddon Mallee region.

Equity

Climate justice, lived and living experience, Aboriginal and Torres Strait Islander self-determination

System Strengthening

Collaboration, capacity building, communication

Objectives	Activities
Collaboration Support and strengthen cross-sector collaboration with stakeholders and people with lived experience to build trust, share knowledge and support collective action to progress public health priorities	- Establish/participate in local cross-sector networks to drive, coordinate, and guide place-based climate change and health initiatives for adaptation and mitigation - Enhance collaboration with emergency management networks to support preparedness, response and recovery efforts to support community resilience from climate emergencies and public health impacts - Collaborate with organisations to develop and implement local heat health plans (e.g. cool spaces, energy efficiency literacy and housing)
Capacity building Build stakeholder understanding of system challenges and opportunities by strengthening capacity to enhance public health outcomes across LMPHU priorities	- Build stakeholder capacity to understand the links between climate change and health, and adaptation and mitigation through education, engagement and resource development - Build community knowledge and skills in energy efficiency and literacy to support safe, cool housing during extreme heat events - Share data and surveillance insights, including for priority groups to drive informed decision-making, inspire public health action and strengthen climate resilience - Support and promote research opportunities to strengthen understanding of the local impacts of climate change and inform place-based strategies - Support stakeholders in planning and monitoring and evaluation

Objectives	Activities
Communication Develop and promote accessible, consistent, tailored and appropriate communication that is timely and relevant to support LMPHU priorities, with a focus on priority populations	• Create targeted place-based messaging that acknowledges varying levels of English and digital literacy, engages priority groups and promotes cultural safety to address climate risks and opportunities for resilience and adaptation • Use a multimedia approach to communicate capacity building opportunities, emerging reforms, innovative strategies and new tools for climate change adaptation and mitigation • Develop and share place-based case studies to demonstrate the impact of climate change on priority groups, highlighting lived experience and showcase successful adaptation strategies



Healthy Food Systems

Why is it a Priority?

Healthy eating is a key priority in the Victorian Public Health and Wellbeing Plan. In the Loddon Mallee region, poor diet is the second highest modifiable risk factor contributing to disease burden with overweight and obesity accounting for 8.3% of the total disease burden. Our stakeholders have identified food security, particularly access and affordability, and the need for healthy, sustainable, and equitable food systems as a regional priority.

Six of the nine LGAs in the Loddon Mallee have significantly higher obesity rates than the state average. Food insecurity affects 7.6% of Loddon Mallee residents and only 5.3% of adults consume enough vegetables, highlighting a significant gap in nutrition. Cost-of-living pressures, climate-related events such as flooding and limited access to fresh produce, particularly in rural and remote areas, make healthy food harder to obtain. Fast food outlets and home delivery services are often more accessible than fresh food markets, influencing poor dietary choices. These health and access challenges intersect with climate change, as current dietary patterns contribute substantially to greenhouse gas emissions. Without action, the combination of poor nutrition, environmental stress and socio-economic barriers will continue to worsen chronic disease rates and health inequities.

resilience, and environmental sustainability, a healthy food system is essential to reducing disease burden, addressing inequities and protecting long-term wellbeing in the Loddon Mallee region.

Sector Networks

As part of our place-based approach, the LMPHU is working with local organisations to enhance policy understanding, promote food systems leadership and build capacity towards healthier food systems. LMPHU engages in healthy food systems cross-sector networks, where there is local expertise, lived and living experience and diverse perspectives to strengthen organisational connections, foster innovative and tailored solutions. This collaborative effort reflects and acknowledges that food systems are complex and impacted by environmental, economic, cultural and societal influences.

LMPHU will continue to support implementation of the Healthy Loddon Campaspe (HLC) initiative across the five southern LGAs (Campaspe, Loddon, Bendigo, Mount Alexander, Macedon Ranges) within the LMPHU catchment. This includes active membership in the LGA local project action groups and the HLC regional reference group. LMPHU's Murray and Mallee teams will continue to implement the agreed Healthy food systems action plans prepared in 24-25.

Sector Networks	
Statewide Sustain Food First project - Victorian Food Systems Network of Networks	Loddon - Greater Bendigo Prevention Network - Healthy Communities Network: Healthy Loddon Campaspe - Healthy Greater Bendigo partnership and Stewardship group - Healthy Loddon Campaspe: Regional steering group, Macedon Ranges, Mount Alexander, Loddon, Greater Bendigo - Healthy Mount Alexander - Macedon Ranges Food Network - Mount Alexander Food Network Development Working Group - Mount Alexander Food Relief Network
Mallee - Mallee Health Promotion Network - Sunraysia Local Food Movement	
Murray - Gannawarra Local Agency Meeting including the bush tucker garden working group - Healthy Loddon Campaspe: Campaspe Project Group & Campaspe Sustainable Food Network - Murray Prevention Network - Swan Hill Food for All working group	

Healthy Food Systems Goals

1 Build a more resilient, equitable and healthier food system by supporting and promoting evidence-informed programs and initiatives, to improve access to affordable, healthy food.

2 Support the availability of healthy, locally grown, plant based fresh food to enable our region to improve planetary health, whilst also supporting climate mitigation

OUR APPROACH

Place-based

Tailored strategies across the Loddon Mallee region.

Equity

Climate justice, lived and living experience, Aboriginal and Torres Strait Islander self-determination

System Strengthening

Collaboration, capacity building, communication

Objectives	Activities
Collaboration Support and strengthen cross-sector collaboration with stakeholders and people with lived experience to build trust, share knowledge and support collective action to progress public health priorities	• Collaborate with community and health services in supporting Aboriginal engagement and embedding native produce items eg. utilising bush tucker/native produce at health services • Partner with LGAs to implement the Local Food-EPI+ assessment; collaborate with agencies to identify priority populations and areas of need in developing an LGA action plan • Support local sustainable food networks to enact food systems priorities at the local level • Connect Loddon Mallee LGAs to Sustain's Victoria wide Network and Community of Practice
Capacity Building Build stakeholder understanding of system challenges and opportunities by strengthening capacity to enhance public health outcomes across LMPHU priorities	• Develop and facilitate region-wide capacity building to boost stakeholder understanding and knowledge of food systems. With a focus on Healthy Food Systems Goals 2025-2029, provide a mix of workshops, webinars, networks or Communities of Practice/peer-to-peer learning to facilitate. Link CoP/Network with statewide initiatives) • Develop food systems data profiles for each LGA that indicates access and availability of healthy and unhealthy foods in conjunction with LGAs and Community Health. Disseminate findings with key stakeholders to support healthy eating policy and advocacy • Enhance awareness and knowledge of food security ◦ Undertake food security mapping ◦ Produce discussion paper to stimulate food relief equity ◦ Promote social supermarket model/dignity of choice with local food agencies • Engage with community health services and LGAs to undertake fast food/unhealthy food environmental scans based on rural/regional townships. Work with stakeholders to develop advocacy key messages and/or action plan • Undertake Food Price comparison study based on partnership with Sustain research project

Objectives	Activities
Communication Develop and promote accessible, consistent, tailored and appropriate communication that is timely and relevant to support LMPHU priorities, with a focus on priority populations	• Prepare in conjunction with stakeholders, regional social marketing campaigns; ◦ Focus on creating positive impact on health and environmental outcomes ◦ Support food literacy to promote locally grown, plant-based in order to improve planetary health systems, include key messaging on cultural and systemic barriers ◦ Promote food relief equity strategy findings ◦ Amplify key messages from state-based programs



Nyah West Community Garden, Nyah West

Wellbeing

Why is it a Priority?

Improving wellbeing is a priority in the Victorian Public Health and Wellbeing Plan. Each year, one in five Victorians experiences a mental health condition and 45% are affected at some point in their lifetime. In 2022, wellbeing was identified as the top priority across the Loddon Mallee during stakeholder consultations.

The region has been significantly impacted by multiple disaster events over the last five years, including the 2022 floods and the COVID-19 pandemic. Both direct and indirect exposure to floods can negatively affect mental health, making prevention and early intervention essential for affected communities to heal and recover.

COVID-19's impact on wellbeing has been substantial, with measures to prevent virus spread exacerbating social, economic and health disparities. These effects are particularly felt in regional and rural areas, increasing psychological distress among people experiencing systemic disadvantage.

Mental health conditions often overlap with chronic diseases such as diabetes, cardiovascular disease and cancers, as well as alcohol and substance misuse and problem gambling. These issues share common risk factors, can act as risk factors for one another and frequently co-occur.

Wellbeing is shaped by the local community context. Individuals from minority groups, such as those who are culturally and racially marginalised, LGBTQIA+, neurodiverse and/or living with a disability, often face stigma and barriers to accessing the support needed to feel included. Addressing these inequities is essential to creating inclusive, connected communities where wellbeing can flourish.

Sector Networks

As part of our place-based approach, the LMPHU engages in wellbeing cross-sector networks, where there is local expertise, lived and living experience and diverse perspectives. These collaborations strengthen organisational connections, foster innovative, tailored solutions and ensure responses reflect each community's needs. Below is a list of wellbeing cross-sector networks in each LMPHU sub-region.

Sector Networks	
Mallee - Culturally Significant Events Committee - Northern Mallee Integrated Mental Health Leadership Network - Rainbow Ready Community of Practice - School Focused Wellbeing Network - Robinvale Our Place Early Years Collaborative - Robinvale Euston Suicide Prevention Network - CARE Connector Community of Practice - Mallee Family Violence Executive	Loddon - Buloke Loddon Gannawarra Partnership group - BULORTJ children and youth network - Mount Alexander Connectors Network - Healthy Communities Network - Loddon Healthy Minds Network - MAZN, Bendigo - Macedon Ranges Suicide Prevention Action Group - Get Connected Working Group - Mount Alexander Alcohol Harm Prevention Action Group - Strong Children, Strong Families - Greater Bendigo Rainbow Coalition - Greater Bendigo Prevention Network - Macedon Ranges Family Violence Coalition - Mount Alexander Family and Gendered Violence Network
Murray - Aboriginal Social and Emotional Wellbeing Working Group - Buloke Loddon Gannawarra Partnership Group - Swan Hill Early Years Collaborative - Campaspe Murray Mental Health and Wellbeing Network - Buloke, Gannawarra, Swan Hill Healthy Minds Network - Gannawarra Wellbeing Framework project - Campaspe Multicultural Connections Network - Murray Prevention Network	

Wellbeing Goals

- 1 Embed respect and inclusion in communities and settings to increase cultural safety, connection and belonging.
- 2 Promote relationships that reduce adversity and enhance wellbeing within individuals, families, communities and settings.
- 3 Foster mental health and wellbeing awareness and acceptance where all people feel safe and supported.

OUR APPROACH

Place-based

Tailored strategies across the Loddon Mallee region.

Equity

Climate justice, lived and living experience, Aboriginal and Torres Strait Islander self-determination

System Strengthening

Collaboration, capacity building, communication

Objectives	Activities
Collaboration Support and strengthen cross-sector collaboration with stakeholders and people with lived experience to build trust, share knowledge and support collective action to progress public health priorities	• Continue to facilitate and/or support local cross-sector wellbeing networks to support information sharing and guide place-based wellbeing initiatives • Embed primary prevention and advocate for lived and living experience voices in our collaborative work • Supporting collective action and advocacy to improve navigation and accessibility of mental wellbeing supports and activities • Support the place-based implementation of the Victorian Wellbeing Strategy
Capacity Building Build stakeholder understanding of system challenges and opportunities by strengthening capacity to enhance public health outcomes across LMPHU priorities	• Coordinate cross-sector capacity building opportunities, such as workshops, webinars, and communities of practice • Support improved access to meaningful intersectional data for mental wellbeing • Share and develop resources to advance inclusive and culturally safe organisations

Objectives	Activities
Communication Develop and promote accessible, consistent, tailored and appropriate communication that is timely and relevant to support LMPHU priorities, with a focus on priority populations	• Create awareness and promote acceptance by amplifying and supporting local celebrations of significance and highlighting issues of importance for priority populations • Develop and deliver wellbeing communications and education to promote help-seeking, Aboriginal and Torres Strait Islander self-determination and supportive environments



Lake Tyrrell, Sealake

Evaluation Summary

OUR GOALS



CLIMATE CHANGE AND HEALTH

To embed, support, and promote localised climate mitigation and adaptation strategies that build resilient and healthy communities in the Loddon Mallee region.

To build a climate-resilient health and social service system with enhanced capacity to protect and promote health and wellbeing from the impact of climate change.



HEALTHY FOOD SYSTEMS

Build a more resilient, equitable and healthier food system by supporting and promoting evidence-informed programs and initiatives, to improve access to affordable, healthy food.

Support the availability of healthy, locally grown, plant based fresh food to enable our region to improve planetary health, whilst also supporting climate mitigation.



WELLBEING

Embed respect and inclusion in communities and settings to increase cultural safety, connection and belonging.

Promote relationships that reduce adversity and enhance wellbeing and resilience within individuals, families, communities and settings. Foster mental health and wellbeing awareness and acceptance where all people feel safe and supported.

COLLABORATION	OBJECTIVES Support and strengthen cross-sector collaboration with stakeholders and people with lived experience to build trust, share knowledge and support collective action to progress public health priorities	ACTIVITIES • Cross-sector networks, inclusive of priority population representation, are established and functioning effectively to advance LMPHU priorities. • Cross sector networks collaborate on public health initiatives.	INTERMEDIATE OUTCOMES Local stakeholder networks are actively engaged, operating with high trust, clear roles and responsibilities and active sharing of information and collaborate on public health priority initiatives. Local networks have priority population and living and lived experience representation to embed inclusion and cultural safety to support health equity.
CAPACITY BUILDING	OBJECTIVES Build stakeholder understanding of system challenges and opportunities by strengthening capacity to enhance public health outcomes across LMPHU priorities.	ACTIVITIES • Data and evidence is collected, analysed and accessible to stakeholders to build understanding and inform decision making. • Workshops, forums and webinars are co-designed with and tailored for targeted priority populations. • Resources to support workforce capacity building are developed and tailored to targeted audience. • LMPHU are engaged in research opportunities to build local evidence.	INTERMEDIATE OUTCOMES Stakeholders have shared knowledge, skills and confidence to address and drive LMPHU goals. Resources and activities are tailored to engage and inform priority populations. LMPHU and stakeholders have the local intelligence and data to inform priority setting, planning and advocate for the needs of their communities.
COMMUNICATION	OBJECTIVES Develop and promote accessible, consistent, tailored and appropriate communication that is timely and relevant to support LMPHU priorities, with a focus on priority populations.	ACTIVITIES • Communication is timely, accessible and aligns with values based messaging. Communication is co-designed and tailored to priority populations. • Communication is shared via multi-modal platforms, social media, website, newsletter and local newspapers. • New reforms, guidelines, strategic plans/frameworks, resources and training opportunities are shared. • Case studies of public health initiatives are developed and shared to promote public health initiatives, support upscaling.	INTERMEDIATE OUTCOMES Stakeholders have practical insights and proven strategies through case studies, enabling the successful scaling of effective interventions and fostering cross-sector collaboration that address the needs of priority populations. Stakeholders receive and understand public health information to keep informed of reforms, workforce capacity building opportunities, place-based events and respond to public health risks. Communication is timely, accessible and reflects lived and living experience and is tailored for priority populations to support LMPHU goals.

Long term outcomes

Aligns With The Victorian population health and wellbeing outcome framework

[LMPHU population health evaluation plan](#)



Reference Documents

Foundational Documents

1. Victorian public health and wellbeing plan, 2023-27
2. Victorian public health and wellbeing outcomes framework
3. Community Health – Health promotion program guidelines, 2025-2029
4. Municipal public health and wellbeing planning Municipal public health and wellbeing planning
5. Loddon Mallee community profiles

Priority Populations

Aboriginal and Torres Strait Islander Peoples

1. The Victorian government Aboriginal Affairs report 2019
2. Korin Korin Balit-Djak Aboriginal health, wellbeing and safety strategic plan 2017-27
3. Victorian Government self-determination reform framework

LGBTIQA+

1. Pride in our future: Victoria's LGBTIQA+ strategy, 2022-32
2. Rainbow Health Pride in Prevention Program Guide
3. Research matters: Trans and gender diverse health and wellbeing
4. Queer youth Now 2025 report
5. National action plan for the health and wellbeing of LGBTIQA+ people 2025-2035

People with Disability

1. Inclusive Victoria: State disability plan, 2022-2026

Gender and Intersectionality

- Applying a gender lens to public health priority issues, WHLM
- Collective action for respect and equality (CARE), 2023-27, WHLM

Rural Communities

1. Rural health in Australia snapshot, 2025, National Rural Health Alliance

Climate Change and Health

1. National climate resilience and adaptation strategy, 2021-25
2. National health and climate strategy, 2023
3. Victoria's climate change strategy, 2021
4. Health and Human Services climate change adaptation action plan, 2022
5. Building Victoria's climate resilience, 2022
6. Tackling climate change and its impacts on health through municipal public health and wellbeing planning guidance for local government, 2024
7. The Climate justice toolkit

Healthy Food Systems

1. Roadmap to reshape Australia's food systems - CSIRO
2. Towards a healthy, regenerative, and equitable food system in Victoria: A consensus statement
3. HLC Flourish regional food system framework, 2024

Wellbeing

1. Wellbeing in Victoria: A strategy to promote good mental health, 2025-35
2. Victorian suicide prevention and response strategy, 2024-34
3. Lived experience governance framework (2024)
4. Lived experience workforce guidelines

Reference Documents

The LMPHU commissioned Gender Impact Assessment (GIA) training from Women's Health Loddon Mallee to support the evaluation of how our planning documents meet the needs of women, men and gender-diverse people. The GIA toolkit and template were used to identify key issues, understand the policy context, and develop recommendations. The GIA has been completed and is currently undergoing the Bendigo Health approval process.

Abbreviations

CSIRO	Commonwealth Scientific and Industrial Research
IRSD	Index of Relative Socio-economic Disadvantage
LGA	Local government area
LMPHU	Loddon Mallee Public Health Unit
LMR	Loddon Mallee region
LGBTIQ A+	Lesbian, gay, bisexual, transgender, intersex, queer, asexual and other sexually or gender diverse people
PPH	Prevention and population health
VCOSS	Victorian Council of Social Service
WHLM	Womens Health Loddon Mallee



LODDON MALLEE
PUBLIC HEALTH UNIT