



Hazelwood

HEALTH STUDY

Community Wellbeing in the Latrobe Valley since the Hazelwood Mine Fire

Community Wellbeing Stream Year 10 report

October 2024



This report has been prepared for the Hazelwood Health Study by the **Community Wellbeing Stream**.

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Disclaimer

This report presents a preliminary analysis which has not been submitted to independent peer review. Subsequent scholarly manuscripts which undergo independent peer review may vary in their findings or interpretation.

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List of acronyms

ABS	Australian Bureau of Statistics
AIDR	Australian Institute of Disaster Resilience
EPA	Environment Protection Authority
GPHN	Gippsland Public Health Network
HHS	Hazelwood Health Study
HMF	Hazelwood mine fire
LGA	Local government area
RTA	Reflexive Thematic Analysis
SEC	State Electricity Commission
SEIFA	Socio-Economic Indexes for Areas
WHO	World Health Organization

Document History

Version Number	Date	Approved By	Brief Description
1.0	22 October 2024	HHS Senior Project Manager	Submitted to the Department of Health
1.1	12 March 2025	HHS Senior Project Manager	Minor edits and formatting

Executive summary

Context, aims and scope

In 2014 the Latrobe Valley experienced a mine fire and smoke event (the Hazelwood mine fire) which lasted for about six weeks. Smoke and ash from the burning coal affected nearby communities, particularly the town of Morwell, with community members reporting a range of health symptoms. An inquiry, the Hazelwood Mine Fire Inquiry, was commissioned by the Victorian State Government to investigate the handling of the disaster which found various shortcomings in planning and communication (Teague et al., 2014). The Hazelwood Health Study (HHS) was commissioned by the Department of Health to investigate the impacts of the mine fire on the health and wellbeing of the community.

For the past ten years the Community Wellbeing Stream within the HHS has been investigating community wellbeing, recovery and resilience since the Hazelwood mine fire (HMF). Our research is focused on the Latrobe Valley, a region in Gippsland (Victoria) with the Latrobe City local government area (LGA) located at its centre. This is one of the most disadvantaged areas of the country (Australian Bureau of Statistics [ABS], 2021b), both in health outcomes and socioeconomic indicators.

In the first five years, our focus was on the impact of the HMF on the Latrobe Valley community. In years 6-10 of the study, our focus has broadened to consider the range of events that have occurred since the mine fire. This has included other disasters such as local bushfires and floods, the smoke from the Black Summer bushfires, and the COVID-19 pandemic. There have also been initiatives, whether delivered by government or initiated by the community, which have arguably enhanced wellbeing. The community has also been facing challenges including recent and anticipated future closures of local coal-fired power stations and other local employers, in the transition away from carbon-based power generation, amidst uncertainty around possible replacement industries in a region which formerly based its economy and identity primarily on power generation.

We investigate how community wellbeing has been affected by events since the mine fire, as well as considering the impact of other social, environmental and economic factors. We aim to determine the strengths and capacities of this community as well as the areas of vulnerability which may need further investment and support. Our research questions are:

RQ1 - How has the community's wellbeing and recovery from the Hazelwood mine fire been impacted by subsequent events?

RQ2 - What factors are indicative of current and future changes in community wellbeing?

RQ3 - What is the relationship between community wellbeing and personal wellbeing? (in conjunction with the HHS Psychological Impacts Stream).

The findings and conclusions presented in this report are based on 60 interviews with 42 community members and key stakeholders who live and/or work in the Latrobe Valley. These interviews were transcribed and analysed to identify key themes in response to the three research questions. In addition, the research team have produced a separate report on the development of a Latrobe Community Wellbeing Barometer which uses quantitative data analysis of publicly available measures to show trends in community wellbeing over time (Morgan et al., 2024). In conjunction, the two reports aim to provide a detailed picture of community wellbeing in the Latrobe Valley.

Key findings of this report

The community members and stakeholders we interviewed defined community wellbeing in terms of: social connection; social, physical and mental health; life satisfaction; engagement and participation; and economic and social inclusion. Our interviewees told us that a strong community is one where people: have opportunities to connect with the community and experience a sense of connection; are happy, healthy and satisfied with their lives; are engaged with and participating in the community; and are included (not just socially but economically).

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In addition, community members need to: feel safe; feel seen and heard; feel resilient and empowered; have pride of place; and show respect and care for others.

Based on our interviews, perceptions of the wellbeing of this community vary, with differences in wellbeing mainly attributed by interviewees to ‘pockets of socioeconomic disadvantage’. Many in the community are doing well, however, others are experiencing considerable disadvantage. As well as being divided in terms of levels of socioeconomic disadvantage, the Latrobe Valley experiences other forms of division: division between the towns that make up the Latrobe LGA; between different age groups; and between recent arrivals and those with long-term family roots in the area. There are also divergent attitudes to the transition away from coal-fired power generation.

Analysis of stakeholder interview material also informed the focus of the Community Wellbeing Barometer. This tool uses objectively and subjectively derived publicly available data to measure a range of factors affecting community wellbeing. The Barometer’s aim is to present an overall picture in quantitative terms and potentially track changes in community wellbeing over time (see separate report by Morgan et al., 2024, for more detail).

The research team drew on relevant literature to propose a model of community wellbeing which was then confirmed through discussions with our interviewees and through focus groups with key stakeholders. The five domains that impact community wellbeing, according to this model, are:

- health;
- the economy;
- the environment;
- services and infrastructure; and,
- social connections.

To address our **first research question (RQ1)**, we asked our interviewees how the community’s wellbeing and recovery had been impacted by events since the HMF. There was considerable agreement on the main adverse events. These included closures of the Hazelwood Power Station and associated Morwell coal mine, along with other large employers, resulting in job losses (totalling more than 1400 jobs between 2017 and 2023),¹ natural disasters (2019 Yinnar bushfires, 2021 Latrobe Valley floods, smoke from the Black Summer fires in early 2020) and the COVID-19 pandemic. The approval of a controversial new industrial development in 2020 (the Hazelwood lead acid battery recycling plant) was also seen by many as a negative event. However, we note that there can be a diversity of opinions and perceptions within the community; some events or initiatives can polarise opinion and be valued by some and not others. The battery recycling plant is an example of an initiative generating conflicting viewpoints.

Interviewees pointed to the cumulative impact of experiencing multiple adverse events which is fatiguing for this community. Nevertheless, some interviewees highlighted that this was also building some resilience, for example, experiencing the Hazelwood Power Station closure has prepared the community to navigate predicted future early closures of power stations.

Other events and initiatives were seen as having more positive impacts (although again, some attracted criticism or doubt as to their benefits). Several initiatives seen primarily as positive arose from the Victorian State Government’s response to the HMF and subsequent inquiry (namely, the establishment of the Latrobe Health Innovation Zone, the Latrobe Health Assembly, and the role of Latrobe Health Advocate). Following the announcement that the Hazelwood Power Station was closing the State Government responded by providing a \$266 million funding package and establishing the Latrobe Valley Authority, to assist with economic recovery from this event and aid in the transition towards a net-zero carbon economy. This initiative was also viewed positively.

¹ Latrobe City 2021a, ABC 2017, Spencer 2023.

Two other state government announcements were viewed as bringing potential benefits to the Latrobe Valley: Gippsland as one of the regional sites to host the next Commonwealth Games (subsequently cancelled); and ‘bringing back’ the State Electricity Commission. It is not clear (at the time of writing) whether the latter initiative will bring any specific benefits to the region. Local grassroots initiatives, along with locally driven projects supported by the Latrobe Health Assembly and Latrobe Valley Authority, were also mentioned as contributing positively to the community’s wellbeing.

To address our **second research question (RQ2)**, we asked our interviewees what other factors were affecting community wellbeing. Two overarching themes raised here were the COVID-19 pandemic and the transition away from coal. Both were seen primarily in negative terms, although some positives were noted. The pandemic had predominantly negative impacts on health (especially mental health), the economy, services, and social connection. Moreover, its negative impacts were more severely experienced by disadvantaged groups within the community, while those who were relatively advantaged experienced some positive consequences.

Given how closely the community’s economy and identity has been tied to coal fired power generation, and the historical and ongoing impacts of the privatisation of the SEC, transition away from carbon is of great concern for this community. Interviewees discussed fears for the economic future of the Latrobe Valley, especially in terms of the future for young people, and concerns regarding general impacts on mental health. Yet for some community members, it is viewed as an opportunity to build a different basis for economic prosperity without sacrificing the health of the community and the local environment. Some are seeing positive signs of engagement and participation on this issue.

Other areas of wellbeing that were of concern among those we interviewed were health, services and infrastructure, and social connections. Topics relating to health and health services included adverse health statistics, rates of mental ill health post-pandemic, and the need to improve the connectedness and inclusivity of services. Social issues were of great concern, particularly those issues impacting the ability to connect, participate and flourish in the community (e.g., family violence, drug use, poverty, intergenerational disadvantage, community safety).

Yet the community also has a range of strengths and assets, according to our interviewees. These include increasing collaboration and innovation among organisations, a strong community spirit, a ‘revival in caring’, many vibrant local community groups, a strong volunteer workforce and exceptional leaders in service organisations.

To address our **third research question (RQ3)**, we asked our interviewees questions about the relationship between community wellbeing and personal wellbeing. This was not found to be a straightforward relationship. Events in the life of a community can affect individual wellbeing but a single event like the HMF can impact individuals differently. Some people told us their personal wellbeing was negatively impacted by the HMF, while other people experienced positive impacts or were unaffected. Individuals draw some of their resilience in coping with adverse events from the community, but also from within themselves and from their family and friends. Experiencing a traumatic community-wide event can also strengthen community bonds, which can in turn enhance personal wellbeing.

The quality of conditions within the five domains of community wellbeing can also impact individual wellbeing. In the Latrobe Valley, the main impacts of these community-level conditions came from social connections. This entailed both negative impacts due to social problems (unemployment, family violence, drug use, poverty) and positive impacts, in terms of friendliness, inclusion and pride of place. Other community-level factors were economic (e.g., the lack of a vibrant local economy), environmental (e.g., access to beautiful natural places) and relating to services and infrastructure (e.g., difficulty accessing health services, pride in sporting and cultural facilities).

Ongoing qualitative and quantitative data collection regarding community wellbeing after the HMF contributes to a better understanding of community recovery and resilience after major adverse events. This is of increasing relevance and significance not only to the Latrobe Valley community but more widely on a national and

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international level, as many communities deal with crises arising from pollution events, bushfires and other natural disasters, pandemics and a range of impacts from climate change, including the need to transition towards net-zero. Exploring the relationship between individual and community wellbeing is of significance in better understanding how these may interact to promote overall wellbeing at both levels. This is crucial in the context of the recent COVID-19 pandemic as it should give important insights into how communities rebuild their social fabric after crises. The collection of place-based data in a region experiencing significant social and economic disruption offers specific benefits for informing targeted and localised interventions while contributing important insights to the broader knowledge base on community wellbeing in vulnerable communities. Continuing to collect detailed data on community wellbeing in the Latrobe Valley needs to be a policy priority.

The following are key findings of this study with significant policy implications:

1. There is some evidence that government initiatives to assist with the HMF recovery and transition to net-zero (Hazelwood power station closure) have had beneficial impacts on community wellbeing.
2. There is deep awareness of the variability of community wellbeing due to “pockets of socioeconomic disadvantage” within the Latrobe Valley, and that this is a problem for the community overall to address. Key to addressing this inequality is a holistic view of community wellbeing in which the community, as a whole, is not doing well if some groups are not doing well.
3. There is evidence of an increase in the community’s ability to voice its views to government and industry regarding its future. This is also indicated by the emergence of new community groups since the HMF which have advocated on specific issues or provided support for vulnerable groups (taking collective responsibility as in the second finding).
4. The negative impact on personal wellbeing of the HMF is decreasing with time. There is an increase in its positive impacts (such as a stronger commitment to the area related to positive changes in the community as a consequence of the HMF).

The above findings are suggestive of posttraumatic growth at both the individual level and at the level of the community.

Recommendations

Based on this report we recommend that:

1. The findings of this report be disseminated to the community, to stakeholders (including local government, health and transition authorities) and more widely to the relevant research and policy communities.
2. Further research be undertaken to unpack the variations between sub-groups within the Latrobe Valley, especially vulnerable communities, in order to ensure their voices are heard and their experiences are made visible.
3. Community wellbeing in the Latrobe Valley continues to be tracked (e.g., through interviews and the Community Wellbeing Barometer – outlined in our companion report, Morgan et al., 2024) in order to ensure continuous learning and feedback about how to promote wellbeing, trust, pride and resilience in this community.
4. These findings be used to guide policy and program initiatives aimed at improving community wellbeing after adverse events, and to inform strengths-based approaches to supporting community resilience.

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1 Introduction and study aims

This report presents the findings of work carried out by the Community Wellbeing Stream within the Hazelwood Health Study (HHS) in years 6-10 (2019-2024). The HHS is a longitudinal study, funded by the Victorian Department of Health, identifying health and wellbeing effects of the 2014 Hazelwood mine fire (HMF) and associated smoke event. Within the Community Wellbeing Stream, Federation University researchers collaborated with researchers from Monash Rural Health, James Cook University and the University of Newcastle to undertake this project.

1.1 Previous work

In years 1-5 (Phase 1), the Community Wellbeing Stream’s focus was on the impact of the 2014 HMF on the Latrobe Valley community. The mine fire burnt for about six weeks in February and March 2014, beginning as a bushfire which then spread into the nearby Morwell open cut coalmine adjacent to the Hazelwood Power Station. Smoke and ash from the burning coal affected local communities, particularly the nearby town of Morwell, with community members reporting a range of health symptoms. An inquiry, the Hazelwood Mine Fire Inquiry, was commissioned by the Victorian state government to investigate the handling of the disaster which found various shortcomings in planning and communication (Teague et al., 2014).

Specifically, the Community Wellbeing Stream investigated community perceptions of:

1. the impact of the smoke event on community wellbeing,
2. the elements that were important for effective communication during and after the smoke event, and
3. the effectiveness of community rebuilding activities.

Our findings were published in two volumes:

Volume 1: Community perceptions of the impact of the smoke event on community wellbeing and of the effectiveness of communication during and after the smoke event (March 2019).

https://hazelwoodhealthstudy.org.au/_data/assets/pdf_file/0018/2052540/CW-Report-Volume-1_v2.0.pdf

Volume 2: Community perceptions of the effectiveness of community rebuilding activities (August 2019)

https://hazelwoodhealthstudy.org.au/_data/assets/pdf_file/0009/2059236/CW-Report-Volume-2_version-1.0.pdf

The primary significance of the work carried out in years 1-5 lay in informing the community, local government, and various community and health agencies about the way the community’s resilience was affected by the HMF and how the community perceived its capacity to respond effectively to any similar event in the future.

This Stream’s findings to date have revealed the significance of past impacts on current community wellbeing; more specifically, that the health of the Latrobe Valley community is intimately linked to the power industry. Privatisation of the State Electricity Commission (SEC) in the 1980s was devastating. Retrenchment, unemployment and population decline engendered a sense of hopelessness, while the state government’s delayed response to the 2014 HMF reinforced the Valley’s historical sense of abandonment (Duffy & Whyte 2017). Intergenerational trauma and the challenges of shifting socio-economic disadvantage are evidence of the significance of this history. The Latrobe Valley’s future is closely tied to a transition away from coal-fired electricity generation and the reduction of carbon emissions. This context has important implications for the community in terms of economic and employment prospects, environmental, community and mental health, and development and planning for the region, all of which contribute to quality of life. A fuller understanding of the ways in which disadvantage arising out of past circumstances (such as privatisation, changing community demographics, and longer-term health concerns associated with exposure to carcinogens) continue to have significant and ongoing impacts on the community in the Latrobe Valley is needed.

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1.2 Current focus

In years 6-10 (Phase 2) of the study, our focus has broadened to consider the range of events that have occurred since the mine fire. In the ten years since the mine fire, the community living in this region has also experienced other disasters including local bushfires and floods, the smoke from the Black Summer bushfires, and the COVID-19 pandemic, each of which has had adverse impacts. There have also been positive initiatives, whether delivered by government or driven by the community. Community initiatives include the formation of the Gippsland Pride Initiative, the development of the Morwell International Rose Garden Festival and Morwell Neighbourhood House's People's Kitchen, to name just a few. In line with the Hazelwood Mine Fire Inquiry's recommendations, the state government has designated Latrobe a Health Innovation Zone, established a Latrobe Health Assembly and appointed a Latrobe Health Advocate (although this latter role was terminated in June 2024). The Latrobe Valley Authority was established to mitigate economic and employment impacts of mine closures (after the closure of the Hazelwood Power Station in 2017) and, in conjunction with local government (Latrobe City Council), steered major infrastructure grants from the state government resulting in new sporting and cultural facilities being built, among other projects and initiatives. However, in 2024, it was also announced that the Latrobe Valley Authority would be discontinued and its work folded into Regional Development Victoria.

1.3 Research questions, scope and methods

Our work in years 6-10 continues to investigate community wellbeing and resilience in the light of such events and initiatives. It aims to determine the strengths and capacities of this community as well as its areas of vulnerability which may need further investment and support. Accordingly, our research questions are:

RQ1 - How has the community's wellbeing and recovery from the HMF been impacted by subsequent events?

RQ2 - What factors are indicative of current and future changes in community wellbeing?

RQ3 - What is the relationship between community wellbeing and personal wellbeing? (in conjunction with the HHS Psychological Impacts stream).

We adopt both quantitative and qualitative methods to answer the three research questions. This report primarily uses a qualitative approach. We analyse data gathered from 60 interviews with 42 key informants, conducted between late 2020 and 2023. Thematic analysis is used to identify key themes, complemented by content analysis to identify trends and shifts in perception over time that might indicate progress in recovering from the HMF and subsequent adverse events.

A separate report, *A Latrobe Community Wellbeing Barometer* (Morgan et al., 2024) uses a quantitative lens to address research question 2 (RQ2). That report presents quantitative data relevant to factors impacting on community wellbeing, drawn from publicly available datasets from sources including the Australian Bureau of Statistics (ABS) Census, the Victorian Department of Health, the Environment Protection Authority (EPA) and local government. It bases its analysis on five domains of wellbeing:

- health – measures associated with physical and mental health and wellbeing;
- the economy – measures associated with money or financial transactions;
- the environment – measures associated with physical surroundings and their quality;
- services and infrastructure – measures associated with support or facilitation that meets community needs; and,
- social connections – measures associated with social connection, engagement and participation.

These five domains are also referred to in our qualitative analysis (see section 4, Methods).

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Our research is focused on the Latrobe Valley, a region in Gippsland (Victoria) with the Latrobe City LGA located at its centre.

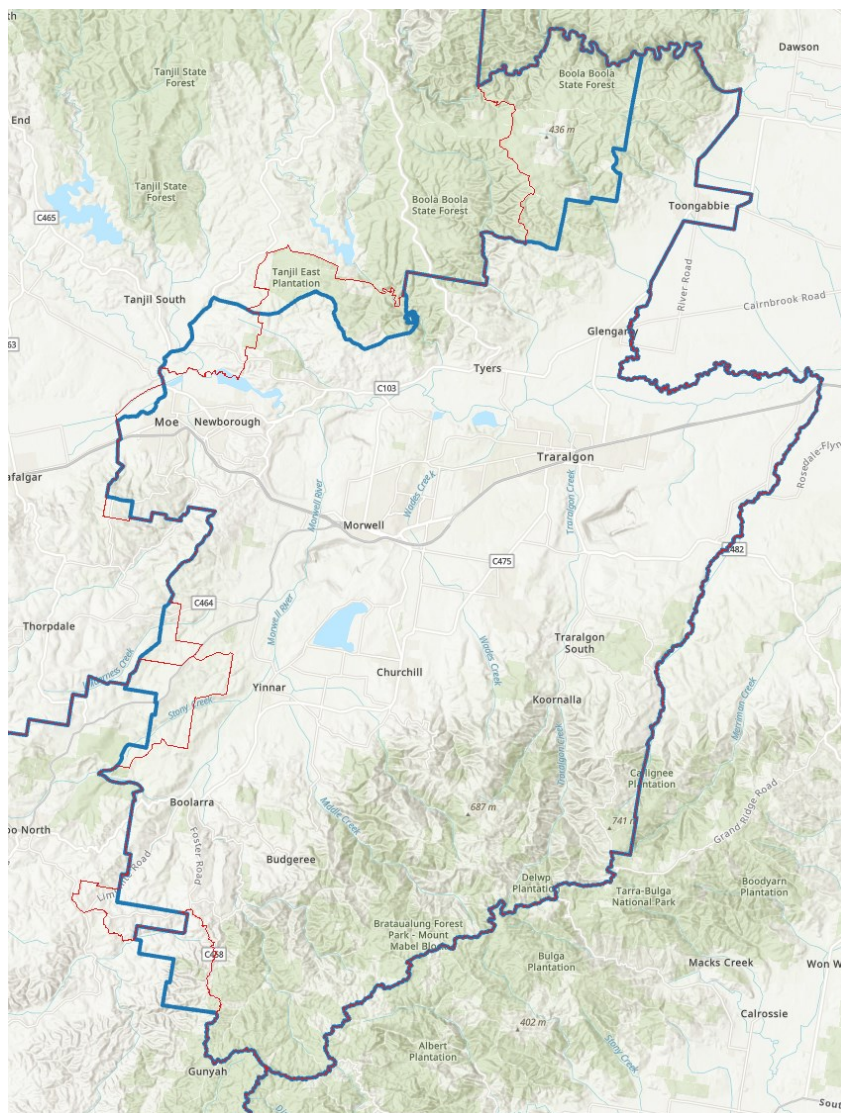


Figure 1: Map of Latrobe (showing the Latrobe Valley (SA3) and Latrobe City (LGA) regions (red and blue boundaries respectively from ABS Maps <https://maps.abs.gov.au/>)

1.4 Relevance to current research

This project contributes to research on community resilience and wellbeing (Davis et al., 2005; Kim, 2016; Norris et al., 2008; Poortinga, 2012). This is a key concern in any region which experiences economic and social challenges, such as the Latrobe Valley. It draws on prior work on indicators of community wellbeing (Atkinson, et al., 2017; Atkinson et al., 2020; Morton, 2013).

2 Context

2.1 Socioeconomic profile of Latrobe City

According to the ABS's Socio-Economic Index for Areas (SEIFA), the Latrobe City LGA is one of the most disadvantaged areas in the country (ABS, 2021b). Latrobe City has an ageing population, with a higher proportion of people 65 years and over (21.1%) than the state average (16.8%) (Gippsland Primary Health Network [GPHN], 2022). A high proportion of the population (28%) experience very high disadvantage (GPHN, 2022), with highest disadvantage located in Morwell relative to other towns in the LGA.

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The 2014 Hazelwood Mine Fire Inquiry quoted Department of Health statistics showing Latrobe LGA's residents have a lower life expectancy than the state average, higher number of emergency and mental health presentations, fewer GP's and higher unemployment (Teague et al., 2014, p.254). In 2021 unemployment remained high in Latrobe LGA (6.6%) compared to a state average of 5.0% (ABS, 2021a).

Data from the 2021 Census indicates that the LGA continued to experience poorer health compared to the state of Victoria overall. For example, there were more people living with long-term health conditions (9.5% compared to 8%) and a much higher proportion of people suffering from three or more long-term health conditions (5.1% compared to 2.9%) in Latrobe LGA compared to the Victorian average (ABS, 2021a). According to the 2020 Victorian Population Health Survey (VPHS), 29% of the Latrobe LGA residents reported that they perceived themselves to have poor or fair health, the highest proportion of all 80 Victorian LGAs (Victorian Agency for Health Information [VAHI], 2020). Around 18% of residents reported that they did not feel valued by society (4th highest ranking), and 25% of people rated their life satisfaction as low or medium (11th highest ranking) (VAHI, 2020). The events listed below, including the HMF, therefore impacted upon an already disadvantaged community.

2.2 The Hazelwood mine fire

The HMF burnt from 9 February until approximately 25 March 2014 (Teague et al., 2014). It began as a grass fire, then spread into the Morwell open cut coal mine adjacent to the Hazelwood Power Station. Smoke and ash from the burning coal affected nearby communities, particularly the adjacent town of Morwell, with community members reporting a range of health symptoms. During the 45-day period, local communities within the Latrobe Valley, particularly Morwell, were impacted and at times "overwhelmed" (Teague et al., 2014, p.257) by smoke, ash and raised carbon monoxide levels. Local communities became increasingly concerned about the perceived health risks of exposure to the smoke and gas emissions from the burning coal, with residents reporting ill health in themselves, family members, neighbours and friends (Yell et al., 2017). This fire, initially treated as a fire emergency, "evolved into a chronic technological disaster ... and a significant and lengthy environmental and health crisis" (Teague et al., 2014, p.28; see also Yell et al., 2017; Duffy & Whyte 2017).

2.3 Narrative of significant events and initiatives

Any account of the events affecting the wellbeing of this community needs to acknowledge the ongoing impact of the privatisation of the State Electricity Commission (SEC) in the late 1990s (Duffy & Whyte, 2017). Privatisation of the coal mines and power stations resulted in economic decline, high unemployment levels, increased socioeconomic disadvantage and associated poor health indicators in the Latrobe Valley (as outlined above). There is also a long history of asbestos-related diseases associated with working in power stations (Teague et al., 2014, p.253).

In presenting this narrative, we note that there can be a diversity of opinions and perceptions within the community, leading to different evaluations of a particular event or initiative. Some events or initiatives can polarise opinion and be valued by some and not others. This division and polarisation can impact community wellbeing. This will be discussed in detail below (Section 5.3).

There have been a number of events that have shaped this region prior to and following the HMF (see Figure 2). The events selected for inclusion below have been noted as significant for the community's wellbeing prior to and following the mine fire, whether in a positive or negative way, as verified by the key informants we interviewed for this study. For example, prior to the 2014 mine fire, a significant event that is still referenced by community members is the **2009** Black Saturday bushfires, which affected large areas of Victoria, including Gippsland. One of the main fires started near Churchill and spread to neighbouring localities, resulting in the loss of 11 lives and 145 properties. Two weeks earlier the Delburn fire had also caused significant damage (Australian Institute of Disaster Resilience [AIDR], n.d.).

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TIMELINE

**LATROBE
COMMUNITY**

**A TIMELINE OF EVENTS IMPACTING THE
LATROBE COMMUNITY**

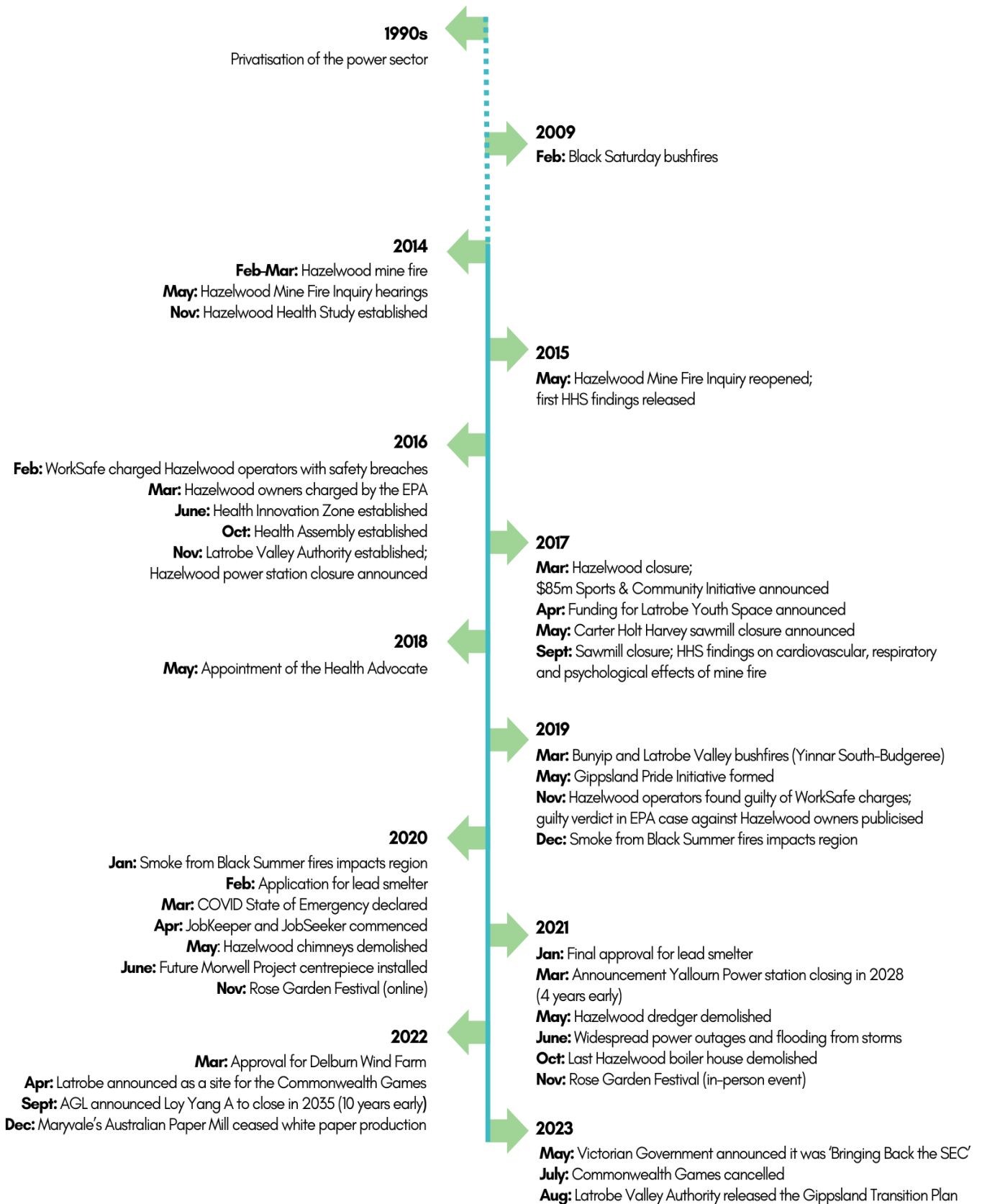


Figure 2: Timeline of events impacting the Latrobe Valley community

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As discussed above (Section 2.2) the HMF burnt for approximately six weeks in late summer **2014** (Teague et al., 2014). It began as a grass fire then spread into the Morwell open cut coal mine adjacent to the Hazelwood Power Station. Smoke and ash from the burning coal affected nearby communities, particularly the adjacent town of Morwell, with community members reporting a range of health symptoms.

In March **2014**, the Victorian state government announced an official inquiry, the Hazelwood Mine Fire Inquiry, into the handling of the mine fire emergency. Public hearings were held from May and the Inquiry's report was released in September. The report made a number of criticisms of the emergency response and a series of recommendations, including endorsing the establishment of a long-term health study into the impacts of the fire and recommending it be extended to 20 years to capture long-latency outcomes like cancers (Teague et al., 2014).

In May **2015**, the first findings from the HHS were released, providing preliminary estimates of smoke exposure from the mine fire undertaken by the CSIRO. These findings confirmed that Morwell, and particularly the southern part of Morwell closest to the mine, had received the highest exposure levels during the event compared to other locations in the Latrobe Valley and the wider region (CSIRO, 2015).

In May **2015**, the Inquiry was reopened, to investigate issues including health impacts and whether there was an increase in deaths due to the fire (Teague et al., 2015/16). This was in response to pressure from community group Voices of the Valley, who had commissioned an independent study into post-fire mortality rates.

In February **2016**, the operators of the Hazelwood power station and Morwell mine (GDF Suez) were charged with workplace safety breaches over the mine fire. The following month, the owners were charged by the Environmental Protection Agency (EPA) with breaches of pollution law relating to the fire (Kolovos & Hope, 2019; ABC, 2016a; ABC, 2016b).

In September **2016**, initial HHS findings were released indicating there was an increase in ambulance call outs for cardiac and respiratory conditions in the Latrobe Valley during the mine fire (HHS, 2016a).

In November **2016**, initial HHS findings regarding increased distress levels in school-aged children in the Latrobe Valley were released online and mailed to families participating in the HHS Schools Study. They included the suggestion that concerned parents contact their general practitioners (HHS, 2016b).

In late **2016**, acting on a recommendation from the Hazelwood Mine Fire Inquiry, the Victorian Government designated Latrobe City as a Health Innovation Zone, beginning with the establishment of the Latrobe Health Assembly. The role of the Latrobe Health Advocate was announced in early **2017** (Premier of Victoria, 2017a).

The closure of the Hazelwood Power Station was announced in November **2016**, and took effect in March **2017**. This resulted in 750 direct job losses and 350 indirect job losses (Latrobe City, 2021a). In anticipation of the closure, the Victorian state government announced a \$266 million "rescue package" for the Latrobe Valley in November **2016**. The Latrobe Valley Authority was set up to assist mine workers in transitioning to other employment and to support economic growth of the region (Gordon & Preiss, 2016).

In February **2017**, a HHS review of the impact of the mine fire on older people was released which provided recommendations for policy development and program planning (Walker et al., 2017).

In March **2017**, the state government announced that \$85 million of the "rescue package" would fund the Latrobe Valley Sports and Community Initiative, to develop community sports infrastructure and events (Premier of Victoria, 2017b). The centrepiece of this initiative was the Gippsland Regional Aquatic Centre, to be built in Traralgon. Construction commenced in March **2019**, however, the opening was delayed due to the COVID-19 pandemic (Premier of Victoria, 2019).

In May **2017**, the closure of the Carter Holt Harvey sawmill in Morwell was announced, and took effect in September, with the loss of 160 jobs (ABC, 2017).

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In September **2017**, HHS results were released showing increased emergency department presentations and hospital admissions during the mine fire (Dennekamp et al., 2017). In addition, the first report on results from the HHS Adult Survey was released, which examined respiratory, cardiovascular and mental health outcomes resulting from exposure to the mine fire (Abramson et al., 2017). The HHS has continued to release results from its various study streams over subsequent years up until the time of writing (i.e., 2024), with over 100 reports, journal articles and other publications. These have included findings on increased use of medications (Johnson, Dipnall et al., 2019) and general health services (Johnson, Gao et al., 2019), increased mental health-related presentations (Carroll, Campbell, Smith et al., 2024), and excess deaths (Dimitriadis et al., 2021).

After an announcement in April **2017**, the Latrobe Youth Space was established in **2018** through Victorian state government funding, as a hub providing services to young people (Glibanovic, 2024). Its funding was due to expire at the end of **2023**, but in mid-2024 it secured ongoing funding from the State Government (Tierney, 2024).

In May **2018**, an appointment was made to the role of Latrobe Health Advocate (Premier of Victoria, 2018) - the role ceased in June 2024.

In September **2018**, Latrobe City received a \$1 million state government grant to fund the Future Morwell Streetscape Upgrade (often referred to as the beautification of Morwell by our interviewees). This was part of a council plan, the Future Morwell plan, under development since 2016 (Eishold, 2018). Work commenced in October **2018** and was completed by September **2020**.

In March **2019**, lightning strikes ignited bushfires in Bunyip and the Latrobe Valley (specifically Yinnar South-Budgerree). Over 20 schools were closed due to the Yinnar South fire and two homes destroyed (AIDR, n.d.; ABC, 2019).

In May **2019**, the Gippsland Pride Initiative was formed out of the Gippsland Ranges Roller Derby community group. They held three events including a Pride Gala in June, and in October it became a formally incorporated association with the goal of supporting the LGBTQI+ community in Gippsland (Gippsland Pride Initiative Inc., 2024)

In November **2019**, the operators of the Hazelwood Power Station were found guilty of WorkSafe charges relating to the 2014 mine fire. At the same time the guilty verdict was revealed for the May-July trial of the mine owners over EPA charges, which was finalised in July but could not be reported until the WorkSafe trial had concluded (Asher et al., 2019; Kolovos & Hope, 2019).

From December **2019** until January **2020**, the Latrobe Valley experienced the effects of smoke from the Black Summer bushfires, particularly those burning through extensive parts of East Gippsland. The bushfire smoke affected air quality across Victoria, reaching a peak in early January 2020 (AIDR, n.d.; Slater, 2021). It was found to have caused 120 excess deaths across the state as well as hospitalisations for cardiovascular and respiratory problems (AIDR, n.d.).

In early **2020**, the COVID-19 pandemic reached Australia and in March a state of emergency was declared in Victoria. Over the next two years the state had a series of lockdowns and varying restrictions on movement, mask wearing and social contact. Regional areas of Victoria generally had less stringent controls, however, in September **2021** the Latrobe Valley was subjected to a targeted seven-day lockdown due to a spike in local cases (Morgan & Pearson, 2021). The economic hardships associated with the pandemic were offset in the Latrobe Valley (and across Australia) by the introduction of two Federal Government initiatives: JobKeeper, supporting businesses; and for individuals, a supplementary payment to those on JobSeeker (replacing Newstart). JobKeeper was announced in March **2020** and ended in March **2021**. It provided economic support to businesses so they could retain their employees (Australian Government, 2021). In response to the pandemic the Federal Government also relaxed some eligibility requirements for JobSeeker payments (and other social supports) and added a supplementary COVID-19 payment. This supplementary payment was initially \$550 a fortnight, which was then reduced to \$250 in September **2020** and \$150 a fortnight in January **2021**, ending in March **2021** (Klapdor, 2020; Australian Government, 2020).

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In May **2020**, the eight iconic Hazelwood Power Station chimneys were demolished (Kolovos, 2020), with the last boiler house destroyed in October **2021** (Slater, 2021).

In August **2020**, the EPA approved an application from Chunxing to construct a plant to recycle lead acid (car) batteries at Hazelwood North in the Latrobe Valley (EPA, 2022). After months of community protests due to fears of health impacts from the factory and concerns about another “dirty industry” in the Valley, Latrobe City Council refused to grant a planning permit for the plant. However, in January **2021** the State Planning Minister intervened to override the council decision and give final approval for the plant to go ahead (Whittaker, 2021a).

Due to the COVID-19 pandemic the annual Morwell International Rose Festival, normally held as a live event, was held successfully as an online event in November **2020**, garnering an international profile (Morwell International Rose Garden Festival, 2020). In November **2021** it resumed as an in-person event.

In March **2021**, the Gippsland Regional Aquatic Centre was opened (Premier of Victoria, 2021).

Also in March **2021**, Energy Australia announced that the Yallourn Power Station would be closing in mid-2028, four years earlier than originally planned, and that they would build a 350-megawatt battery elsewhere in the Latrobe Valley by the end of 2026 (Whittaker, 2021b).

In June **2021**, the Latrobe Valley was hit by widespread flooding (Latrobe City, 2021b). The storms associated with the heavy rainfall also caused widespread power outages across Gippsland. A report by Emergency Management Victoria found that the flood warnings to the Traralgon residents were issued too late, as the community only received the evacuation notice after the flood had already peaked and the Traralgon Creek had broken its banks (Pope, 2022).

In March **2022**, the Delburn Wind Farm was approved by the state Planning Minister, but without onsite battery storage. Community concerns had been expressed about the increased risk of fire due to the wind farm’s location among pine tree plantations in the Strzelecki Ranges (Davis, 2022).

In April **2022**, the Victorian Premier announced that the 2026 Commonwealth Games would be hosted by Victoria in regional areas, with one of the five sites in Gippsland. The state government said it would invest in community infrastructure including housing and “world-class” sports facilities (Kolovos & Ore, 2022).

In September **2022**, it was announced that Loy Yang A power station, owned by AGL, would close ten years earlier than expected, in 2035. This will leave Loy Yang B as the only remaining coal-fired power station in the Latrobe Valley (ABC, 2022).

In December **2022**, the Australian Paper Mill (APM) at Maryvale paused production of white paper and approximately 120 workers were stood down. In February **2023** APM confirmed that it would permanently close white paper production, leading to the loss of about 200 jobs by late **2023** (Spencer, 2023).

In May **2023**, the Victorian state government announced as part of its 2023/24 budget that it would be “Bringing back the SEC” (Premier of Victoria, 2023). The purpose of this initiative was to invest in renewable energy projects, creating jobs in these projects and training young people in the trades needed. There was no specific link in the announcement between the proposed new SEC and the Latrobe Valley, home of the original SEC.

In July **2023**, the Victorian state government announced its decision to cancel the Commonwealth Games due to projected cost overruns. The Deputy Premier confirmed that a \$2 billion support package would be provided to regional communities affected by the announcement (Carmody & Eddy, 2023).

In August **2023**, the Latrobe Valley Authority released the Latrobe Valley and Gippsland Transition Plan, which sets out a vision for the region’s transition away from its traditional carbon-based industries and towards the development of sustainable industries (Latrobe Valley Authority, 2023).

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3 Literature review

3.1 Introduction

An initial literature review was undertaken for inclusion in *Hazelwood Health Study Community Wellbeing Stream Report Volume 1* (Yell et al., 2019), which mapped research underpinning then current knowledge of the impact of disaster on community wellbeing. This earlier work focused on determining the factors that contribute to community wellbeing in the context of disaster, given the focus was on the impact of the HMF on the community. Analysis of research examining disaster led to a literature review focused on factors that contribute to or hinder resilience and the processes of recovery. Key themes included trust particularly in the context of disaster communication, resilience in terms of capital (including financial, human, and social capital), and recovery as a complex and ongoing series of processes.

This current literature review provides an updated summary of community wellbeing which draws on the Community Wellbeing Stream’s research over the last five years and includes an additional overview of significant factors that contribute to community and individual wellbeing. The key themes that this project’s recent research indicates are significant are:

- Community wellbeing in places in transition
- Resilience
- The significance of community identity
- Trust

3.2 Defining community wellbeing

Atkinson et al. (2020) point out that community wellbeing “comprises two terms, both of which are highly contested with no or little agreed consensus on their definition” (p.1904). Yet the term is widely used to inform policy development and strategies concerned with wellbeing, happiness and living a ‘good life’. The framing of community wellbeing in policy and strategy therefore can be problematic as it may fail to capture the complex combination of factors that enhance or are detrimental to the lives of community members.

Wellbeing is understood as a state of flourishing, life satisfaction or happiness. The concept of wellbeing is somewhat contested, with debate occurring within the wellbeing literature, especially frameworks drawing on perspectives from psychology. Using a distinction dating back to Aristotle, psychologists have debated whether wellbeing stems from hedonic (pleasure-based) or eudaimonic (meaning and purpose-based) ways of living (Henderson & Knight, 2012). More recently, studies such as that of Atkinson et al. (2020) argue that “achieving an acceptable and adaptive level of wellbeing requires both forms” (p.1913). In keeping with these themes, the World Health Organization (WHO) defines wellbeing as “encompass[ing] quality of life, as well as the ability of people and societies to contribute to the world in accordance with a sense of meaning and purpose” (WHO 2021).

The concept of community is also somewhat disputed. **Community** can be understood as either geographical and functional, with both forms of community sharing the common characteristic that people are engaged in face-to-face communication (Fellin, 2001). Yet new forms of digital interaction enable the formation of virtual communities at different scales, independent of geography. Moreover, individuals within a geographic community may be participating within multiple other communities, in addition to their place-based community (Atkinson et al., 2020). When considering community wellbeing as a policy construct, the geographical definition commonly prevails, as policy and governance primarily focus on communities defined by region.

Community wellbeing models recognise that wellbeing arises out of the close relationship between people’s health and the living and working conditions which form their social environment (Baum, 2018; Saha et al., 2020). Historical, social, cultural and economic contexts are fundamental to wellbeing, as Wiseman and Brasher (2008) acknowledge in their definition:

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Community wellbeing is the combination of social, economic, environmental, cultural, and political conditions identified by individuals and their communities as essential for them to flourish and fulfil their potential (p.358, our emphasis).

Another area of contention is whether community wellbeing should be researched and measured based on individual or collective wellbeing factors. Previous research on wellbeing talks about wellbeing as a combination of individual and social factors, as community wellbeing is more than merely the sum of individual wellbeing of the people in the community (Sirgy, 2011). Atkinson et al. (2017) argue that community wellbeing may refer to “living well together at a community scale” or it may refer to the “role that community scale aspects have in facilitating local individual wellbeing” (p.5). Morton (2013), in a review of community wellbeing indicators for local government, writes that “personal wellbeing measures people’s experiences of their positive and negative emotions, satisfaction, vitality, resilience, self-esteem, and sense of positive functioning in the world” whereas “social wellbeing measures people’s experiences of supportive relationships and sense of trust and belonging with others” (p.174). Generally, the most popular approach is to consider community wellbeing from both individual and collective levels. This makes sense as arguably a community cannot be flourishing if its members are not flourishing (VanderWeele, 2019).

Assessments carried out for the purposes of improving community wellbeing adopt various frameworks. These frameworks examine the social determinants of health, that is, how factors such as socioeconomic position, educational attainment, conditions of employment, the distribution of wealth, empowerment, security and social support can act to strengthen or undermine the health of individuals and communities (Atkinson et al., 2017; WHO, 2021). Data on community wellbeing can include a mix of objective and subjective measures. Subjective data on individuals (such as survey responses on individual life satisfaction) and objective data (on income and educational attainment of individuals), aggregated at population level, can be employed alongside data on aspects of life at community level such as crime rates (objective measure) or feelings of safety (subjective measure) (Atkinson et al., 2017).

However, as Atkinson et al. (2017) point out, “Capturing subjective aspects of local life that are not simply individual but reflect the ways in which people function and feel together is more challenging” (p.5). Nevertheless, this is important in order to examine community wellbeing as something that is not merely the outcome of individual wellbeing of members of a community but includes the collective and subjective sense of wellbeing of the community as a whole; in particular, the ways that community functions, sees itself and talks about itself (Atkinson et al., 2017).

3.3 The relationship between community wellbeing and individual wellbeing

As discussed above, the relationship between community wellbeing and individual wellbeing depends on the applied conceptual definition of community wellbeing. Based on the literature, we argue that community wellbeing is indeed greater than the sum of its parts (i.e., the sum of individuals’ wellbeing), while the relationship between collective (community) and individual wellbeing is complex and yet to be fully understood.

Clearly, individual wellbeing and community wellbeing interact with one another to varying degrees and there are several factors that influence this relationship. Yet, this is not as simple as a graded relationship in which if an individual’s wellbeing improves, so does that of the community, or vice versa. Individuals within a community can vary in their subjective perception of their community’s wellbeing, and a key aspect of this variation can be their own personal wellbeing and outlook (Sung & Phillips, 2018). The individual’s own circumstances and need for specific resources can also shape their views on their community. For example, an individual who has greater health needs is more likely to rate community wellbeing based on whether health and social supports are available and functioning well for them (Giraldez-Garcia et al., 2013).

Community wellbeing could be poor according to objective indicators (such as employment or health statistics), yet an individual member of that community may have positive overall wellbeing and feel satisfied with their community. This is particularly prominent in rural communities that, despite scoring lower in economic domains (e.g., less job opportunities), provide residents with a strong sense of social connectedness. This may lead to

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individuals experiencing high satisfaction with their community compared to urban areas and therefore an improved individual wellbeing (Lau et al., 2005).

Finally, perceptions of wellbeing at the individual or community level are not static. Rather these are dynamic and affected by both individual and collective circumstances which change according to personal life events and larger scale events such as disasters, economic and industrial changes and climate change.

3.4 Community wellbeing in places in transition

Regional Australian communities face complex environmental, social, and economic changes that impact livelihoods, and which “bear distinctive inflections for non-metropolitan regions” (Gibson, 2022, p.1). Research on community wellbeing therefore needs to take into consideration the impacts of large-scale events such as fast-onset disasters including flooding and bushfires that have devastated both human and non-human communities, alongside the slower changes playing out such as drought and sea level rise due to climate change, as well as the impacts of housing affordability, post-COVID-19 recovery, population variation and concerns for a just transition as we move towards a low or zero carbon economy. The impacts of such events are not restricted to the time at which they occur. Rather, historical challenges continue to shape current concerns, and thus contribute to compounding impacts on communities (Duffy & Whyte, 2017). Therefore, it is important not to neglect consideration of what Atkinson et al. (2020) call the “multiple temporalities of wellbeing” (p.1909). These involve:

The intimate flow of life-courses, inter-generational relations, processes of stability and sustainability, the longer trajectories of history, change and cultural heritage and the relationships between them. (Atkinson et al., 2020, p.1909)

These arguments surrounding temporal change are particularly relevant to the study of community wellbeing in the Latrobe Valley region and resonate with themes emerging from our interviews. In addition to a past history of collective economic and social trauma after the privatisation of the state-owned power industry (Duffy & Whyte, 2017), the region is now faced with a new set of challenges. A major component of a plan for the Valley’s future is a transition away from coal-fired electricity generation in the context of mitigation of climate change. There is a growing body of research examining the implications of this transition for the community in terms of economic and employment prospects, environmental and community health and quality of life (Goedegebuure et al., 2020; Reeves et al., 2021; Snell, 2018; Weller, 2012, 2019).

3.5 Resilience

Resilience has been defined as the capacity of an individual or community to cope with stress, overcome adversity, or adapt positively to change (Carpenter et al., 2001; Hunt et al., 2011; Luthar et al., 2000; Maguire & Cartwright, 2008). As noted in Volume 1 (Yell et al., 2019), community wellbeing relates closely to community resilience (Davis et al., 2005; Norris et al., 2008; Poortinga, 2012). Arguably, the goal of resilience is to ensure the wellbeing of a community and its members (Miles, 2015).

There has been considerable research on resilience in relation to disaster recovery (see Miles, 2015), and this was the focus in our earlier research. Disasters provide a clear-cut set of circumstances in which to consider resilience. Their impacts can include immediate physical danger, income loss, economic and productivity losses, infrastructure damage, housing loss, health impacts including psychological trauma, loss of social connectedness, a loss of a sense of belonging and a decline in community wellbeing. A particular impact of prolonged or chronic disasters is that “people can be left feeling ‘in limbo’ when danger, risk and health effects are being considered” (Teague et al., 2014, p.386), not knowing when the danger is over or how the impact may manifest. A community’s resilience lies in their ability to recover and potentially embrace change for the better.

Various frameworks have been put forward to explain the factors underpinning disaster resilience. For example, Miles (2015) proposes a framework that brings together wellbeing, identity, services and capitals, arguing that each of these are in dynamic relations with one another. Access to resources and services supports are needed by a community to restore or improve its wellbeing after a disaster, but which resources and services are valued is shaped by a community’s identity. Miles (2015) gives the example of the community responses following

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earthquake-related damage to a nuclear power plant. Some members of a community may value the opportunity to replace this with solar power generation, while others may prefer to see the existing plant restored. This highlights a link between resilience and community identity as being particularly important for a community navigating change, not just after a disaster, but in response to a range of adverse events, such as the transition away from carbon-based power generation being faced by the Latrobe Valley.

Resilience is therefore an important concept for communities who have experienced repeated adverse events. Since resilience is about identifying the source of a community's adaptability to change, it is important to factor into models of community wellbeing, so that they are dynamic rather than static (Atkinson et al., 2020).

3.6 The significance of community identity

Recent research has focused on the ways in which the social and political values of the community need more careful examination because of the ways in which these values shape the quality of social relationships (Michalski et al., 2023). In addition, frameworks for assessing community wellbeing frequently lack attention to intangible cultural heritage and sense of place or community 'that goes beyond ... individual emotional attachments' (Atkinson et al., 2020). A sense of belonging arises out of social capital and relations of trust, and recent studies propose that diversity, inclusion, and inclusiveness are the building blocks to high levels of community wellbeing (Talmage & Knopf, 2017).

Community identity also plays a part in community resilience, as it constitutes a foundation for humans' ability to feel, act and think as members of a social group and to intergroup behaviours, such as discrimination, confrontation and cooperation (David & Bar-Tal, 2009). Identity has also been shown to be important to resilience as it plays a key role in place-based improvements and planning (Manzo & Perkins, 2006). Resilience depends on affected communities being empowered to participate in reconstructing their collective identity (Miles, 2015).

Not identifying with a community can have negative effects on wellbeing and resilience (Miles, 2015). Community wellbeing is adversely impacted where there is inequality or social injustice due to differential access to resources, and therefore measures used to assess community wellbeing should aim to identify sub-groups experiencing socioeconomic disadvantage, even though this is challenging (Atkinson et al., 2020). These concepts of community identity, sense of place and inequality due to socioeconomic disadvantage have all emerged as significant themes in our interviews.

3.7 Trust

While trust is often considered a subjective and intangible concept, it influences levels of social involvement and, ultimately, community wellbeing (Salehi et al., 2014). It is defined in many studies as a form of social capital (Appau et al., 2022; Di Napoli et al., 2019; Putnam, 1994). Social capital is about the relationships that connect individuals through meaningful exchanges formed through blends of social and virtual ties, and therefore a significant factor in the formation of healthy and resilient communities (Yell et al., 2019). Trust, then, is often used as an alternative proxy for social capital as it "plays an important role in promoting social ties and networks, especially because it acts as a vehicle for information flow and health interactions" (Appau et al., 2022, p.555; see also Weeranakin & Promphakping, 2018). This in turn suggests that the issues and challenges of trust are already embedded within everyday social relations. In our interviews, trust has emerged as another significant theme in relation to community wellbeing in this region.

4 Methods

4.1 Approach

In this report our focus is on perceptions of community wellbeing, changes in this since the mine fire and how community and personal wellbeing shape one another. The methods used to collect and analyse data have been chosen to support these aims. In order to capture the narratives, ideas and themes that community members use to describe and explain this community's wellbeing, and document sentiment around key events and initiatives, we gathered data from interviews with key informants. Semi-structured interviews with key stakeholders and community members offer a nuanced understanding of community wellbeing from the perspectives of those within the community and those working to ensure their health and wellbeing. Thematic analysis of this interview material draws out insights into what factors and events may be influencing and impacting current and future community wellbeing, from the perceptions of the community. Content analysis of interview data is also used to measure the prevalence of specific themes and to track shifts in themes over time, in order to show changes in wellbeing that may indicate how the community is recovering from adverse events.

The analysis uses a constructionist approach which does not attempt to find an objective reality. Instead, this approach accepts that drawing out the meanings of participants (from what people say in interviews) is context-dependent and a process of interpretation (Flick, 2007). It is inevitably shaped by the analyst's own subjectivity and experiences (we address this limitation below). We are seeking the meanings that our interviewees are making from their experience. However, our goal is not to develop an account of individuals' personal experiences, but of an intersubjective experience of community wellbeing. Therefore, our emphasis is on finding themes across the data (Braun & Clarke, 2021). We are also interested in the wider socio-cultural context, consistent with our emphasis on community wellbeing as a collective concept shaped by history, culture, and socioeconomic factors (Atkinson et al., 2020).

There are many ways to assess community and personal wellbeing, and the choice of methods for a framework for assessing wellbeing will depend on its purpose. Atkinson et al. (2017) note that both objective and subjective forms of data can be gathered, and that capturing the intersubjective nature of community wellbeing can be achieved through quantitative analysis (e.g., of service provision, crime statistics, available green space) or qualitative analysis (e.g., of individual stories, narratives, group discussions, local media and social media). Both are necessary for capturing subjective and objective data on the factors shaping community wellbeing. Quantitative analysis provides specific and defined categories that can be enumerated and therefore provides results that describe population characteristics, investigate possible relationships between different variables, show trends over time, or make predictions for a population. Qualitative analysis provides insights into the perceptions, opinions and experiences of research participants.

To complement our quantitative analysis measuring community wellbeing in Latrobe City using the Barometer (see Morgan et al., 2024), in this current report we use qualitative forms of analysis to explore collective themes and narratives provided by our participants. This enables us to capture subjective aspects of local life (referred to by Atkinson et al., 2017) in more depth and detail. This includes exploring subjective perceptions of how well the community is doing in relation to five domains that impact community wellbeing, as theorised in our model for the Community Wellbeing Barometer (see Morgan et al., 2024):

- health – measures associated with physical and mental health and wellbeing;
- the economy – measures associated with money or financial transactions;
- the environment – measures associated with physical surroundings and their quality;
- services and infrastructure – measures associated with support or facilitation that meets community needs; and,
- social connections – measures associated with social connection, engagement and participation.

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4.2 Data sources

Two rounds of interviews were held, to gather data on the topics of:

- perceptions of community wellbeing and impacts of major events on wellbeing;
- individual wellbeing and its relation to community wellbeing.

These were individual semi-structured interviews with key informants (stakeholders from community organisations in the fields of health and wellbeing, and community members), lasting 60-90 minutes. The first round commenced in late 2020 and concluded in early 2021. As this round of interviews took place during the COVID-19 pandemic when government regulations were in force, limiting face-to-face social contact, interviews were held online (using the videoconferencing app Teams) or by telephone.

A second round of interviews was conducted from early to mid-2023, with the aim of describing any changes in community wellbeing since the first round. These interviews were held face-to-face, by online videoconferencing or by telephone (whichever best suited the interviewees).

Interviews were audio-recorded and the recordings transcribed by a professional transcription service.

4.3 Recruitment

Key informants over the age of 18 were recruited from those involved in previous rounds of interviews (in years 1-5 of this research project). Efforts were made to ensure representation across various categories (health, social and community services, disability services, multicultural services, education, the media, local government, transition authorities, sporting groups and community/volunteer/advocacy groups). Efforts were also made to achieve representation from young adults (18-25 years old), older people, those from culturally and linguistically diverse backgrounds and Indigenous people.

The target was 30 key informants in each round, a number deemed to provide sufficient data saturation. We reached this target in both rounds (Table 1). The aim was to retain the same informants over the two rounds, and this was largely achieved. However, if this was not possible then new participants were recruited from similar categories. In the case of informants representing organisations/community groups, we approached the same organisation/group for someone in an equivalent role or approached another similar organisation. In the case of individual community members, we used a snowball technique to recruit informants in the same category (e.g. young adults). Eighteen participants participated in both rounds. Three new community groups were included in Round 2, based on their relevance as advocacy groups in a key area, and the two education representatives in Round 2 came from a different school. Three organisations represented in Round 1 were not represented in Round 2, however, they were replaced by informants from organisations and groups working in the same areas (i.e. social and community services, disability services, multicultural services).

The stakeholders representing organisations and community groups were interviewed to draw on their broader knowledge of the community through their role. Seven of these stakeholder interviewees did not live or work in the Latrobe Valley at the time of the HMF. However, in their role they represented community services and groups providing support to community members impacted by the HMF and subsequent events. Despite living or working outside the region at the time, they had strong connections with the Latrobe Valley through family, social and/or professional networks. Table 1 indicates participant recruitment categories and whether living/working in the Latrobe Valley at the time of the HMF (working includes volunteering and/or attending education).

Table 1: Participants in Round 1 and Round 2 interviews

Participant No.	Category	R1 2020-2021	R2 2023	Living in Latrobe Valley	Working in Latrobe Valley
Participant 1*	Community/volunteer/advocacy group	✓	✓	✓	✓
Participant 2*	Social & community services	✓	✓	✓	✓
Participant 3*	Local government	✓			✓
Participant 4*	Community/volunteer/advocacy group	✓	✓	✓	✓
Participant 5*	Social & community services (disability)	✓		✓	✓
Participant 6	Health communications	✓	✓	✓	✓
Participant 7	Social & community services	✓	✓	✓	✓
Participant 8	Aboriginal community-controlled organisation	✓	✓	✓	✓
Participant 9	Community sport	✓	✓		✓
Participant 10	Youth services/multicultural services	✓			
Participant 11	Youth services	✓			
Participant 12	Community health/multicultural services	✓			
Participant 13	Local government	✓		✓	✓
Participant 14	Community health/transition initiatives	✓	✓	✓	✓
Participant 15	Social & community services	✓	✓	✓	✓
Participant 16	Community/volunteer/advocacy group	✓	✓	✓	✓
Participant 17	Transition initiatives	✓		✓	✓
Participant 18	Local government	✓	✓	✓	✓
Participant 19	Youth advocacy	✓		✓	✓
Participant 20	Young adult (18-25)	✓		✓	✓
Participant 21	Community/volunteer/advocacy group	✓	✓	✓	✓
Participant 22	Community/volunteer/advocacy group	✓			
Participant 23	Community sport	✓	✓	✓	✓
Participant 24	Education	✓		✓	✓
Participant 25	Youth services/ Community health	✓	✓		
Participant 26	Media	✓	✓	✓	✓
Participant 27	Community health/transition initiatives	✓	✓	✓	✓
Participant 28	Youth advocacy	✓		✓	✓
Participant 29	Social & community services/youth services	✓	✓		✓
Participant 30	Community/volunteer/advocacy group	✓	✓	✓	✓
Participant 31	Education		✓	✓	✓
Participant 32	Youth services		✓	✓	✓
Participant 33	Community/volunteer/advocacy group (multicultural)		✓	✓	✓
Participant 34	Young adult (18-25)		✓	✓	✓
Participant 35	Community/volunteer/advocacy group		✓	✓	✓
Participant 36	Education		✓	✓	✓
Participant 37	Transition initiatives		✓		
Participant 38	Young adult (18-25)		✓	✓	✓
Participant 39	Social & community services (disability)		✓	✓	✓
Participant 40	Community/volunteer/advocacy group		✓	✓	✓
Participant 41	Community/volunteer/advocacy group		✓		
Participant 42	Community/volunteer/advocacy group		✓	✓	
Total participants		30	30	32	34

* Recruited based on participation in 2015 Community Wellbeing Stream interviews.

4.4 Data collection

To gather contextual data informing our three research questions, we asked our informants:

- What does community wellbeing mean to you? What is important for creating a sense of wellbeing in the community?
- What are your perceptions of the current state of community wellbeing in this area?

In keeping with our first key research question, we asked:

- Do you think there have been events, initiatives or developments since the Hazelwood mine fire that have impacted on community wellbeing, either in a positive or a negative way? Can you tell me more about that?

Relating to the second key research question, we asked:

- Are there other factors you can identify that you think are currently affecting community wellbeing?
- Do you think the wellbeing of this community will get better or worse into the future? Why do you think this?

In relation to the third key research question, we asked interviewees:

- Do you think that the Hazelwood mine fire event has changed how you feel about living in the Latrobe Valley?
- Which characteristics of the community do you think have the biggest impact on your personal wellbeing - either in a good or bad way?
- What helps you the most when you are dealing with events like the Hazelwood mine fire, the recent [2019-2020 Black Summer] bushfires and the current impacts of the Coronavirus pandemic? For example, is it:
 - Personal characteristics
 - Support from family and friends
 - Local services. Can you explain?
 - Other broader community factors. Can you explain?

4.5 Data analysis

Interviews were analysed using Reflexive Thematic Analysis (RTA; Braun & Clarke, 2021). RTA is a method of analysing qualitative data which involves identifying categories or themes in the dataset and is suited to answer research questions about people's experiences, view and perceptions (Brulé, 2020). Three of the researchers carried out the analysis, after conducting an initial intercoder reliability process. Interview transcripts were analysed for material relevant to each question. Relevant narratives, arguments and themes were summarised for each interview and each question. These were then collated into an overall summary for each question. Finally, they were organised into categories of themes relating to our conceptual framework for community wellbeing, enabling comparisons between the first and second round of interviews.

In addition to qualitative analysis using RTA, some quantitative analysis was conducted using content analysis, which involves counting instances of coded meaning. Deacon et al. (2007) explain that content analysis is used "to quantify salient and manifest features of a large number of texts" in order to make broader inferences (p.119). Topics in interviewee responses were assigned to a theme by the analyst and instances of that theme in responses were counted. This method was used to show the prevalence of specific themes in interview responses and to track shifts in their prevalence over time.

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4.6 Limitations

Thematic analysis is a subjective process and so may be influenced by the analyst's background. To minimise coder bias and inconsistency among coders, we conducted intercoder reliability checks. Before proceeding to code independently, all three analysts coded a sample of the same interview data (three interviews) to check for coding consistency.

The sample of interviewees may not be representative of the full diversity of groups and views in the Latrobe Valley. Many of our interviewees were stakeholders whose role relates to community support and their professional involvement in improving community wellbeing may have influenced their expressed views. However, the analysis includes both frequently expressed perspectives and alternative/minority viewpoints which emerged from our data, in order to include as comprehensive a range of views as possible.

4.7 Ethics approval

Approval to conduct this research was provided by the Federation University's Human Research Ethics Committee (approval numbers A20-045 and 2022/173). This Human Research Ethics Committee reviews all research involving humans at Federation University to ensure it is compliant with the *2007 National Statement on Ethical Conduct in Human Research* (National Health and Medical Research Council, 2015).

5 Findings

In this section we present the content and thematic analysis of interview data to respond to the main research questions.

5.1 What was our interviewees' understanding of community wellbeing?

In 2020-2021 and again two years later (in 2023) we asked our interviewees to define what community wellbeing meant to them. Community wellbeing may not mean the same thing in different communities, as different places and regions have varying profiles, histories and needs. Understanding this community's perspective on wellbeing can inform what is needed to promote wellbeing in this region in the future. As one of our interviewees expressed this:

I think community wellbeing, first of all, is determined by what the community wants to be well so I think it needs to be determined by the local community, in the context in which they're living their lives. I think wellbeing for Latrobe could be different from wellbeing of people in Perth.² (R2 – P14: community health/transition initiatives)

Consistent across both rounds of interviews were three main themes:

- connection;
- engagement and participation; and
- wellbeing (physical, mental, social and emotional).

In addition, there were a number of less prominent themes:

- inclusion;
- satisfaction with life;
- having a voice;
- empowerment and resilience;

² Quotes are identified as from either Round 1 (R1) or Round 2 (R2) interviews. Interviewees are assigned a participant number (P1, P2, etc.) and a category, as per Table 1 (above).

- respect and care for others;
- feeling safe; and
- pride of place.

A further theme unique to Round 2 related to a collective and cohesive approach to wellbeing.

Figures 3 and 4 present a visual interpretation of these main themes and minor themes, as described by our interviewees. The themes were broadly similar between Rounds 1 and 2, however some gained or lost prominence between rounds. Connection was especially prominent in the first round of interviews, which took place in late 2020 and early 2021 when COVID-19 pandemic restrictions limiting social contact were still fresh in people’s minds and some restrictions were still in place. This suggests interviewees were placing additional emphasis on aspects that, when absent or reduced, adversely impacted community wellbeing (i.e., a deficit model). In Round 2, some themes became less prominent and others more prominent, showing a more equal emphasis on the major themes, and giving them similar significance in their contribution to wellbeing.

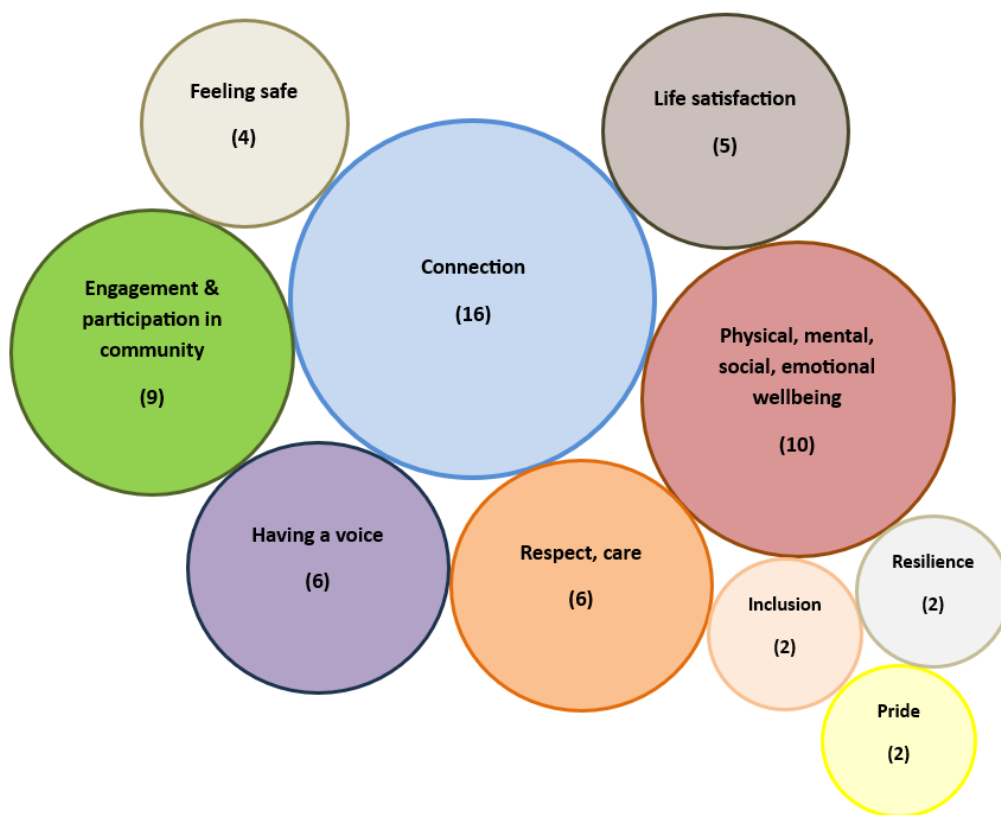


Figure 3: Community wellbeing themes (Round 1)

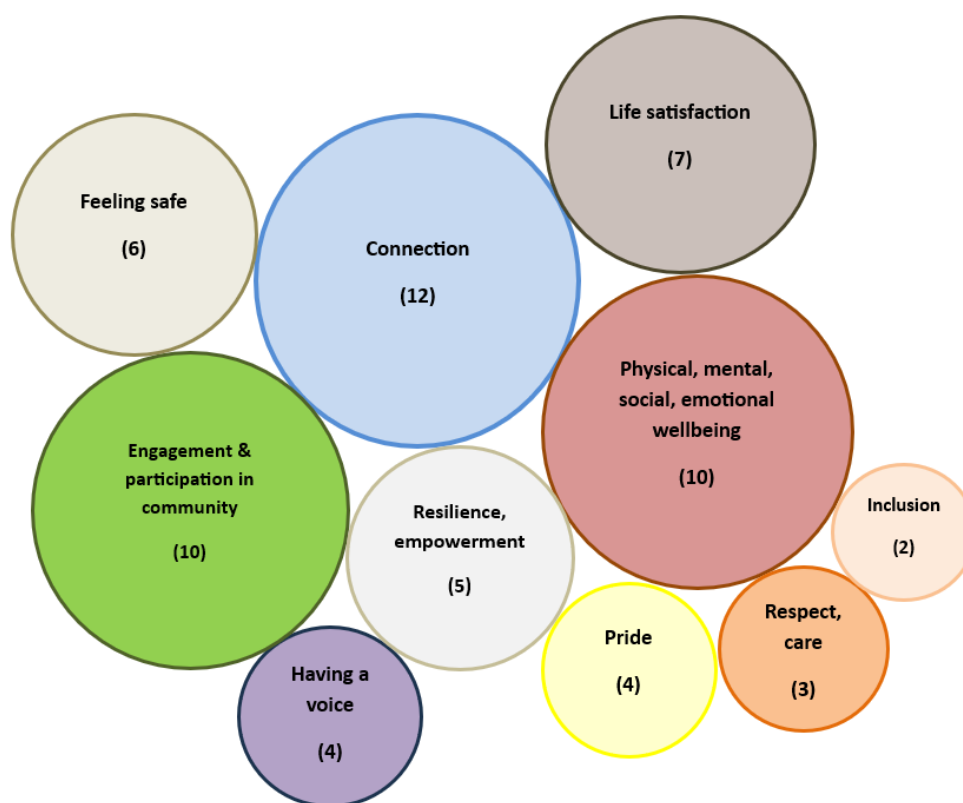


Figure 4: Community wellbeing themes (Round 2)

The theme of *connection* was explained in terms of feeling connected to other people, whether to the community broadly or via friends and support networks. Some interviewees noted that both the feeling of connection and opportunities to connect were important elements of being connected. Recent direct experience of the adverse effects on wellbeing of social isolation and unequal digital connectivity possibly explains the greater importance attributed to social connection in defining community wellbeing in Round 1. Nevertheless, it was still a dominant theme in Round 2.

Community connectedness is all of those groups whether you've got disabilities or gay, whatever, ... all of that, but having everybody connected into the one space and knowing where to access supports and being able to support each other (R2 – P1: community/volunteer/advocacy group)

Overall people who are using the facilities in the community, who are having good, genuine conversations and things like that, that to me is community wellbeing, when we can all come together and enjoy each other's company, enjoy each other's - and share our life and share our stories and all have something in common too. (R2 – P38: young adult)

So, it's not necessarily that you need to have involvement in every aspect of the community, but your community and your tribe, and so people that you can connect to and feel there's a relationship, which is really important for wellbeing, because even with the adversity there is – wellbeing can be improved by connectivity. (R2 – P15: social and community services)

As one person argued, social connection is a “linchpin” on which a range of wellbeing-promoting elements depends:

Community wellbeing means a lot of different things to me. I think. It's an element of social wellbeing, connectedness, as well as the health of the local community. It's also of businesses, of schools, of aged care facilities, how everything's interconnected, works together and impacts each other. When something's not quite right, then it throws the whole system out. So, community wellbeing, in my mind, is that global approach

to all elements of community, with social connectedness, I think, being the linchpin for a lot of those, those wellbeing measures. (R2 – P32: youth services)

The second major theme defining community wellbeing concerned *physical, mental, social and emotional wellbeing*. This theme was expressed by many people in both rounds of interviews. While some interviewees emphasised health (physical and mental) others included social, emotional and spiritual elements within their definition of wellbeing and one interviewee talked about a “holistic approach” to the health of the community (R1 – P6: health communications). Another expressed it as a connection of all aspects of wellbeing:

A connection of your physical and your mental, your social, environmental, you know, spiritual, all of it together. So, it just means that you are well but together, so as a community you put all those parts together and you get what you need from a community. (R1 – P27: community health/transition initiatives)

This demonstrates the link between individual and community wellbeing; when individuals are doing well, they can meet the needs of others:

When people are happy and healthy, physically and mentally, that they’re able to express themselves and do their activities in a way that’s good for them and for others in their family and other community members. (R2 – P8: Aboriginal Community Controlled Organisation)

A number of interviewees were clear in explaining that these forms of wellbeing were about community members being “well together” (R1 – P27: community health/transition initiatives) and “looking after everyone’s needs” (R2 – P33: multicultural community/volunteer/advocacy group).

The third theme which emerged as important to many interviewees was *engagement and participation* in the community. Interviewees talked about the conditions required to enable community members to participate. In a clear link to the previous theme, several people noted that the ability to participate depended on being well enough to do so:

But for me it’s around people being well enough to feel that they can connect and can participate in community life ... It’s making sure we’ve got lots of different options that suit different people and their needs. (R1 – P13: local government)

Being encouraged and supported to participate and feeling included were also noted by this community member, who mentioned:

... the availability of community organisations, the willingness of those organisations to embrace people outside their membership and encourage people to come and join with them and feel secure in that environment. (R1 – P16: community/volunteer/advocacy group)

Feeling part of something (R1- P12: community health/multicultural services) and having a sense of vision and purpose, where “people that actually believe they're part of something rather than just imposed on” (R1 – P4: community/volunteer/advocacy group) were also important for enabling engagement and participation.

A less prominent but still important theme was *inclusion*. Feeling included was mentioned in connection with the three main themes, as it means community members feel able to connect with others, are encouraged to engage and participate, and are not excluded from access to health and other services. One interviewee explained that inclusion gives everyone the opportunity to do well:

I think community wellbeing is that overarching everybody in your community is doing well or has the opportunity or equity to do well... I think, inclusion is a big part of that. I think that sometimes in rural communities, a lot of cohorts [don’t] get ... the same space at the table, if that makes sense. So, I do a lot of work in the LGBT area and I think that that's definitely – considering the mental health issues and things like that that come – the statistics that come to play with that, I don't think that there's enough space at all the tables in community for inclusion. (R2 – P40: community/volunteer/advocacy group)

An overall sense of *satisfaction with life* was mentioned by various interviewees in each round, as perhaps the distillation of all the components of community wellbeing when they are in place and working well. One person expressed this as:

People are satisfied with their lifestyle, professionally or recreationally or their leisure time and professional time. They get a sense of achievement and [feel] positive about their place in the world. (R2 – P23: community sport)

Other themes that were less prominent but nevertheless consistent across both rounds of interviews were related to *having a voice, feeling empowered and resilient, feeling safe, respect and care for others, and pride of place*.

Having a voice is important to this community. The ability to be heard, seen and understood by others in the community means the community can advocate for itself to address problems.

I think the other aspect for community wellbeing is the community being empowered to feel as though it's having a voice, to feel as though it's contributing to changes and being able to influence decision making. (R1– P14: community health/transition initiatives)

This in turn relates to a sense of *empowerment and resilience* to work through issues.

I suppose we're in an area which has had a lot of experience of government intervention and sense of powerlessness and programs or decisions imposed upon the community. So, it's about building up the strong advocacy voice and the capacity to feel in control of their life and to make decisions. (R1 – P3: local government)

As another interviewee argued: "if they don't feel like they have power or control or input into the community, they're not going to feel well, that their community is a good place for them" (R1 – P18: local government).

But in any community, there are people who are not doing well, so a hallmark of a strong community is that it reaches out to those people to help them "heal and recover" (R1 – P11: youth services). *Respect and care* need to be extended to diverse groups across the community.

If community is doing well in terms of wellbeing, there is capacity to hold members who are not doing well compassionately through the process where they're not doing well with the view and the ability to help them to heal and recover from that. (R1 – P11: youth services)

It [community wellbeing] means a lot of respect for all ages and everybody [in] ... LGBTIA+ communities and just coming together as a community. (R1 – P28: youth advocacy)

This theme is also connected to *feeling safe*. Safety relates to feeling physically secure from threatening behaviour (a concern expressed by several of the older people we interviewed), but also feeling safe from judgement.

Community wellbeing is about feeling safe to walk down the street, or to talk to people without worrying about judgment or not fitting in (R2 – P39: social and community services [disability]).

Thus, a sense of safety is key for connection and inclusion. For example, one interviewee spoke of the isolation her mother was experiencing because she did not feel safe using public transport:

Mum now lives with a disability and she can't drive... So, she's become very isolated ... She lives where I grew up in a very low [SES] part of Morwell. She now uses the buses, but finds it frightening to use the buses because of the people who catch the buses with her... That's been a real struggle for her. To me, that's a real sign of the overall wellbeing of everybody not being that great. So, it means that there is – you don't have that connection because something as simple as a bus – anybody should be able to go on a bus service and it should be promoted as something that's good, rather than just for people who are disabled and people who don't have drivers' licences because they've lost it from drunk driving or whatever. (R2 – P26: media)

Finally, *pride* in the place you live was noted by some of our interviewees as a strong indicator of "a good, strong, healthy community" (R2 – P7, social and community services):

Community wellbeing means that you have a connected community, and I think it thrives through many different ways. It's a community that feels that social cohesion and belonging, you feel proud of where you live, and there's many opportunities to engage in community, with community and I guess prosper as a community. I think that when you feel like you belong somewhere, then you feel like you want to contribute and you want to give. (R2 – P27: community health/transition initiatives)

If you don't have that pride of place as a fundamental underlying pillar, I guess it's hard to live well and be part of something that you're proud of, and happy to contribute to, as well. (R2 – P9: community sport)

5.2 What has happened to shape community wellbeing since the mine fire?

In the ten years since the HMF, much has happened. In Section 2 of this report, we provided a narrative history of significant events, initiatives and developments affecting the Latrobe Valley. The events selected for inclusion in that narrative were noted as significant for the community's wellbeing by the key informants we interviewed for this study.

Our interviewees mentioned a wide range of events, including state government policy initiatives and infrastructure investment, power station and business closures, natural disasters (floods and bushfires), the global COVID-19 pandemic, and local grassroots projects and initiatives. Table 2 summarises these events and initiatives mentioned across both rounds of interviews (i.e., 2020-2021 and 2023). Events mentioned by only one person have been excluded from this summary table. In addition to showing how many people mentioned the event (combined total across both rounds) the table indicates the number of positive or negative (or neutral) mentions.³

The COVID-19 pandemic clearly had the most significant impact on the wellbeing of this community, according to our interviewees (discussed in 51 out of 60 interviews). The pandemic had mainly negative impacts (e.g., on people's health, on social connection and on the economy) but there were also some positives, including an increased sense of community spirit and, for some, a beneficial rise in flexible working conditions or the acquisition of new online networking skills. Because the pandemic was not a discrete event, but rather became an ongoing set of health, economic and social conditions, it is discussed more fully in the next section, dealing with factors impacting community wellbeing.

The designation of Latrobe City as a Health Innovation Zone (2016), the establishment of the Latrobe Health Assembly (2016) and the appointment of a Latrobe Health Advocate (2018) were collectively mentioned by 43 people. These state government initiatives attracted mixed comments, with some uncertain of their function and benefits, although the role of the Health Advocate was more widely understood. However, a number of people could name specific projects supported by the Health Assembly and commented favourably on these, and the Advocate was praised for assisting the community to feel heard. A major criticism of the Health Innovation Zone was that it had no legislative power; for example, it did not have any power to block the controversial Hazelwood lead acid battery recycling plant.

³ These two columns may add up to a greater number than the number of interviewees, as they include instances where one person may have commented both negatively and positively on an event.

Table 2: Events and initiatives impacting community wellbeing (Round 1 and Round 2 interviews)

Year	Event/initiative	Number of interviewees who referred to this	Positive mentions in interviews	Negative mentions in interviews	Summary of views expressed by interviewees
2014	Hazelwood mine fire, Hazelwood mine fire inquiry	8	7	1	Positive: Investment and government attention since the mine fire was mentioned as beneficial for the community in broad terms. (Specific positive and negative comments relating to initiatives such as the Latrobe Health Innovation Zone, Health Assembly and Health Advocate are noted below.)
2016-2017	Hazelwood Power Station closure announced – took effect March 2017	25	5	20	Discussed either as a discrete event or along with the projected closures of other Latrobe Valley power stations and the transition away from coal-fired power. Positive: Health benefits of getting rid of polluting power stations; going through the experience with some success has built resilience for future closures; a ‘useful shock’ that has stimulated important changes. Negative: Fears around job losses and the economic impact. Loss of identity, history and pride of place. Neutral: Minimal impact on those who were already unemployed and very disadvantaged. Impact of this had dissipated by 2023 (according to one Round 2 interviewee).
2016	\$266 million ‘rescue package’ for the Latrobe Valley; Latrobe Valley Authority established	12	12	-	Positive: Latrobe Valley Authority seen as effective because it has the ability to allocate funding to community groups who can achieve their goals. Seen as innovation. Positive views of its Transition Plan and its assistance to, and re-skilling of, workers affected by the Hazelwood Power Station closure.
2016	Latrobe Health Innovation Zone and Latrobe Health Assembly established	43	38	5	Positive: Some interviewees singled out the Health Advocate or the Health Assembly/Latrobe Health Innovation Zone for positive mention. Specific Health Assembly initiatives received favourable comments (Hello Campaign, Street Games, We are Latrobe, Nurses in Schools, Reach for the Stars). Interviewees reported that people are feeling seen and heard by the Health Advocate. Negative: Perception that the Latrobe Health Assembly and Latrobe City were not well coordinated (Round 1 interviewee). Some saw these initiatives as ineffective (or were unsure of their effectiveness) or a waste of money. Frustration that the Health Advocate can represent community views but can only make recommendations to government. Some unsure of effectiveness of Advocate role. Concern that Latrobe Health Innovation Zone lacked legislative power.
2017-2018	Latrobe Health Advocate role announced 2017; appointment made in 2018				

Year	Event/initiative	Number of interviewees who referred to this	Positive mentions in interviews	Negative mentions in interviews	Summary of views expressed by interviewees
2017-2021	\$85 million to fund Latrobe Valley Sports and Community Initiative, incl. Gippsland Regional Aquatic Centre (opened in 2021)	7	7	1	Positive: Instilling pride of place, bringing community together. Negative: Concerns about accessibility.
2017-	Latrobe Youth Space announced (established 2018)	4	4	-	Positive: Seen as an important initiative giving young people a voice.
2017	Closure of Carter Holt Harvey sawmill in Morwell	3	-	3	Negative: Added to existing concerns about employment and job losses due to business closures in the Latrobe Valley.
2018-2020	Future Morwell streetscape upgrade (AKA the beautification of Morwell)	9	8	1	Positive: Instilling pride of place. Negative: Some unsure whether this had the desired effect.
2019	Bushfires at Yinnar South-Budgerie, in the Latrobe Valley	3	1	3	Positive: Enabled some people who came to respite centres to be connected to appropriate services, who wouldn't otherwise have received help. Negative: Disruption to people's lives.
2019	Gippsland Pride Initiative formed	5	5	-	Positive: Advocates for LGBTIQ+ community members; seen as making a difference to inclusion.
2019-2020	Smoke from Black Summer bushfires burning in East Gippsland affected air quality in the Latrobe Valley	6	-	6	Negative: Smoke was triggering for some – a reminder of previous bushfires and/or the mine fire.
2020-	COVID-19 pandemic	51	18	39	Positive and negative impacts discussed below in Section 5.3.
2020	Demolition of Hazelwood Power Station (blowing up of dredgers and boiler houses)	2	-	2	Negative: Concerns re safety; one explosion caused a fire.
2020-2021	Lead acid battery recycling plant approved (2020).	14	2	14	Positive: Community was not afraid to speak out and advocate against the proposal.

Year	Event/initiative	Number of interviewees who referred to this	Positive mentions in interviews	Negative mentions in interviews	Summary of views expressed by interviewees
	Latrobe City refused to grant planning permit. State Planning minister overruled council decision in 2021.				Negative: Division in the community as to whether this should be welcomed as bringing new jobs or opposed due to the fears around health impacts. Handling of the proposal reinforced existing mistrust in government. Theme of Latrobe as a 'dumping ground for dirty industries' argued to be at odds with the creation of Latrobe as a Health Innovation Zone.
2020-	Rose Garden festival held online during COVID-19 pandemic then resumed as a face-to-face event in 2021.	8	8	-	Positive: Online Rose Festival garnered international interest and attention; instilled pride of place.
2022	Gippsland (including Latrobe Valley) announced as one of 5 regional sites hosting the Commonwealth Games	3	3	-	Positive: Good for Latrobe Valley's profile, economic stimulus. (NB: these interviews took place before the announcement re the cancellation of the Games.)
2022-2023	Australian Paper Mill ceased production of white paper, leading to job losses	5	-	5	Negative: Added to existing concerns about employment and job losses due to business closures in the Latrobe Valley.
2023	State Government announced it would bring back the SEC	2	2	-	Positive: Potential to re-invest in power generation in the Latrobe Valley.

The Hazelwood lead acid battery recycling plant (2020-2021) was raised by 14 people. The proposal to build this plant at Hazelwood North was opposed by a local community advocacy group on the grounds of claimed potential adverse health impacts on the community. Latrobe City Council refused to grant a planning permit for the plant but was overruled by the state Planning Minister. Our interviewees explained that the handling of this issue fed into existing mistrust in government’s ability to listen to the community and some felt the proposal was reinforcing the idea that the Latrobe Valley was a “dumping ground” for dirty industry, a notion the community advocacy group No Lead Smelter in Latrobe argued was contrary to the aims of the Latrobe Health Innovation Zone. However, opinions within the community were divided, with some welcoming this as a new industry bringing much-needed jobs. More positively, it was noted that this divisive issue nevertheless showed that the community was not afraid to speak out and advocate for their needs, and that the capacity of the community to do so has improved since the HMF.

In 2016 the impending closure of Hazelwood Power Station was the catalyst for the state government to respond with a \$266 million economic “rescue package” for the Latrobe Valley. The government also established the Latrobe Valley Authority to assist Hazelwood workers to find other employment and to support economic growth in the region. The Latrobe Valley Authority was mentioned by 12 people and its impact on the community was seen as positive; it was seen as effective in reskilling and transitioning mine workers into other employment and also in funding practical community projects. Part of the wider investment package went towards building new sports infrastructure for the Latrobe Valley (mentioned by seven people), also viewed positively as contributing to pride of place, although one person raised accessibility concerns.

The actual closure of Hazelwood Power Station in 2017 was discussed by 25 interviewees, both as a discrete event and also in the context of the transition and other projected power station closures. The closure announcement caught the community by surprise. Views in the community were divided according to our interviews; some were happy it was closing, and others thought “the world was going to end” (R1 – P26: media). Our interviewees noted that for those who had lived in the Latrobe Valley for generations, the power industry was deeply interwoven with local identity, history and pride of place. Despite fears of the economic impact, in our 2023 interviews we heard the view that the impacts were less than feared. As one interviewee expressed there was “anticipatory anxiety”, but people “have now lived through a closure, and they’ve developed resilience around it” (R1 – P22: community/volunteer/advocacy group). Another pointed out that it had been a “useful shock” that had stimulated important conversations; that had “helped that broader conversation [that] we absolutely have to have people invested in” (R2 – P2: social and community services).

Other events which had negative impacts, but were less prominent in our data, were job losses relating to other business closures (e.g., the APM paper mill, the sawmill), natural disasters (Latrobe Valley floods, Yinnar bushfires, Black Summer smoke) and the demolition of the Hazelwood dredgers and boiler houses. The more positive events noted were primarily local community-driven initiatives that were widely seen as important and successful (e.g., the Rose Garden Festival, Youth Space, the Gippsland Pride Initiative, and Morwell Neighbourhood House’s People’s Kitchen).

Several interviewees expressed the point that repeated adverse events were draining for the community: “disaster after disaster does impact, ... we know the compounding impacts of that plus COVID on top of that” (R1 – P13: local government). Yet there were also signs of positive changes. Interviewees said that there was “a resilience that can come from that [repeated adverse events]” (R1 – P11: youth services), and this was shown particularly through the development of community-based groups involved in advocacy (e.g. VOTV, No Lead Smelter in Latrobe). Interviewees noted that the community was more willing to be part of a conversation about the costs to people’s health and the environment of keeping so-called “dirty industries” such as coal-fired power stations running, or bringing in new ones such as the lead smelter. As one interviewee expressed, there is “increased environmental awareness, but also ... health impact awareness. I think the mine fire did that, and the Mine Fire Inquiry did that” (R1 – P22: community/volunteer/advocacy group). There is a desire for new industries and economic prosperity in the Latrobe Valley, but not at the expense of the environment and community members’ health.

5.3 What other factors are impacting on community wellbeing?

In late 2020/early 2021 and again in 2023 we asked our interviewees what factors were affecting community wellbeing at that time (other than the events discussed above). Themes evident in their responses were linked to the five domains theorised to influence community wellbeing: health, including mental health; the economy; the environment; services and infrastructure; and social connections (Atkinson et al., 2017; Morgan et al., 2024). This approach enabled us to build a picture of the conditions which were perceived as having adverse or positive impacts. In addition to a diverse range of factors that could be grouped into themes relating to the five domains, there were two overarching themes: the COVID-19 pandemic and the transition away from carbon (as it is manifesting locally in the Latrobe Valley). Each of these themes impact multiple domains. Comments from interviewees showed COVID-19 had impacts on the economy, health (including mental health), services and infrastructure and social connections, while transition had economic, environmental, mental health and social impacts.

Figures 5 and 6 (below) depict the number of negative and positive comments relating to each theme in each interview round. The two most mentioned themes across both rounds were social issues/connections (42 mentions) and the COVID-19 pandemic (43 mentions). Mentions of negative impacts outnumbered mentions of positive impacts for both these themes, although there was an increase in positive mentions in 2023. The other theme that received a relatively high number of comments (both negative and positive) was services and infrastructure (34 mentions), indicating that this was perceived as having a significant impact on community wellbeing. The economy (23 mentions) and transition (17 mentions) were also prominent themes in both rounds with a slight shift away from negative mentions and towards positive mentions in 2023. Negative comments outnumbered positive comments for all of these themes, which may indicate either that these were seen as presenting more problems than solutions, or that interviewees were more likely to mention factors that needed to be addressed and improved.

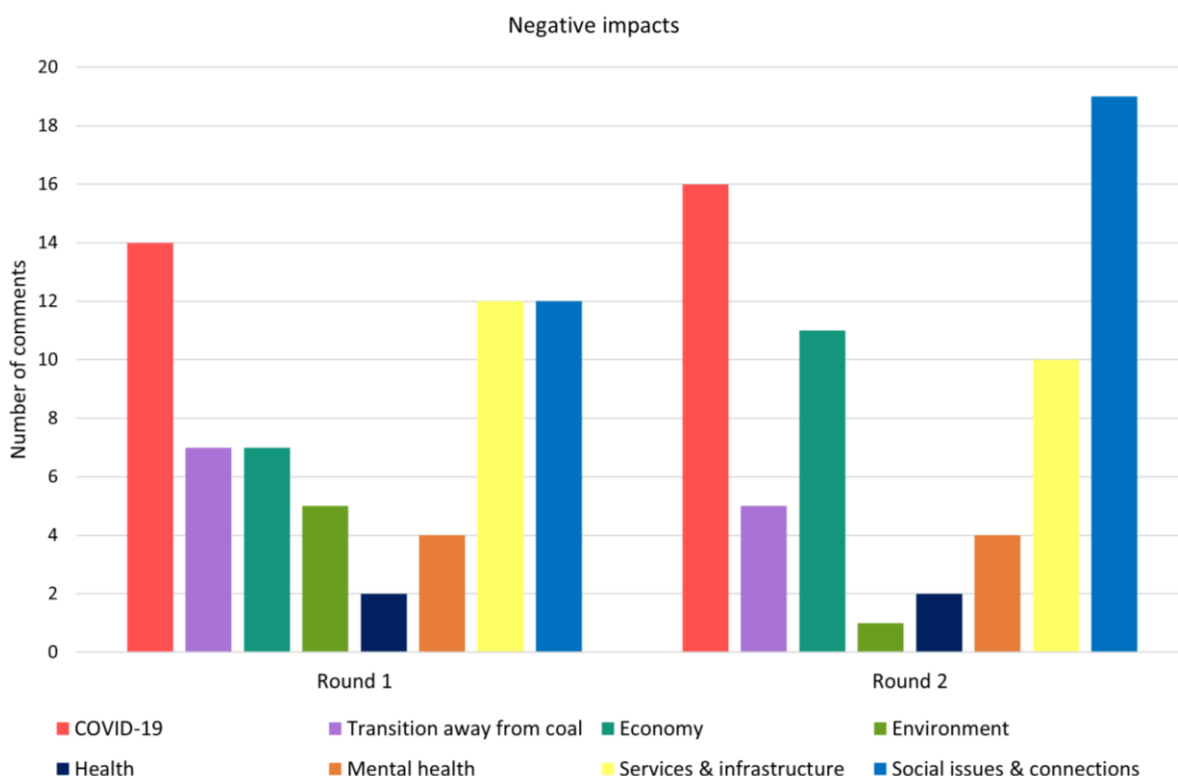


Figure 5: Factors impacting community wellbeing negatively (Rounds 1 and 2)

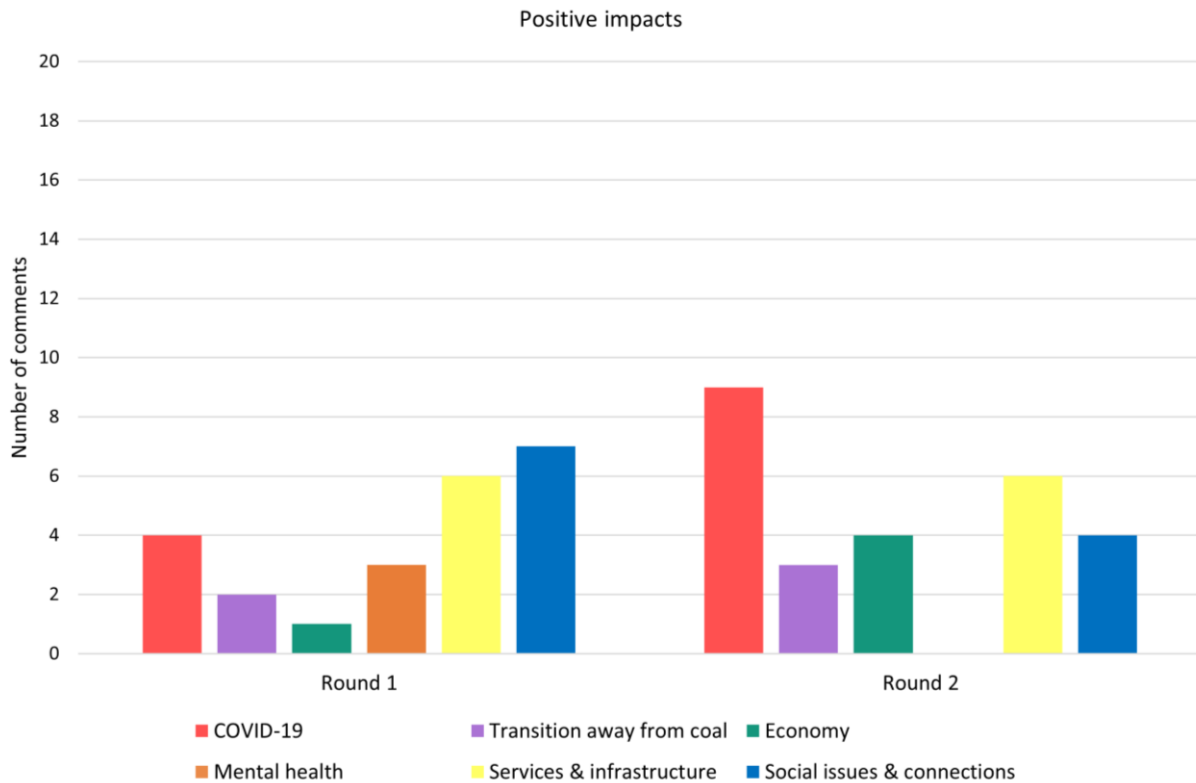


Figure 6: Factors impacting community wellbeing positively (Rounds 1 and 2)

In Round 1 (2020-2021) the COVID-19 pandemic dominated the responses, with most interviewees noting negative impacts and a small number of interviewees mentioning some positive outcomes. Negative impacts included financial hardships and psychosocial impacts such as social isolation, fear and uncertainty about the future, and a disrupted sense of normality. Interviewees noted that the pandemic exacerbated existing social inequities.

The domestic violence, the drug use, all of that, has gone through the roof. Those families who were not functioning well before COVID, and with all the other things that we already had going on, they have deteriorated to a whole new level, because of that disconnection. (R1 – P1: community/volunteer/advocacy group)

People struggled with isolation. People struggled with not being able to see other family members that live in different towns or on the other side of Melbourne. ... That's a major layer for Aboriginal community with the kinship networks and how close the families are. I think that's – especially elders and vulnerable community members, I think that isolation has impacted them far greatly. (R1 – P8: Aboriginal community-controlled organisation)

The pandemic has been like another hit to the community and I think for some in small business, especially, who have been – were just getting by are probably looking at not being able to continue. A lot of services that are reliant on office-based staff have really been hit extremely badly. (R1 – P3: local government).

Nevertheless, the pandemic was also perceived to have contributed positively to wellbeing, at least for some people. Reasons given were that it had prompted increased sense of neighbourliness, increased resilience, had promoted a public discourse around not prioritising the economy over health protection, flexible work leading to better work/life balance and a greater focus on mental wellbeing and physical health. Some also argued it had led to organisations building stronger partnerships as they worked together to respond to the pandemic.

Well, I mean COVID's the main one isn't it, that's going to be the main one for quite a while unfortunately. It's an ongoing factor, but I think there's opportunity from that as well. There's been a lot of opportunity for strength in partnerships and strength in work, so it's not all bad even though the health risk is real. (R1 – P27: community health/transition initiative)

People are now so much more aware of their health and their personal hygiene ... Also, I think COVID has given the medical profession and doctors an opportunity to talk to people and reiterate the need to keep safe and keep healthy if you have a heart condition or a respiratory condition. (R1 – P6: health communications)

In Round 2 (2023) the topic of impacts of COVID-19 was still prominent, with some new pandemic-related issues emerging. Again, the negative psychosocial impacts were discussed, such as anxiety, depression and social isolation. Responses elaborated on the unequal impacts of the pandemic on specific groups such as the elderly, young people, Indigenous people and those who are already disadvantaged (such as those with unstable employment). COVID-19-related income support provided some economic assistance, but the loss of this then impacted this group:

JobSeeker, JobKeeper ... they're all being reduced. So, for those that are on JobSeeker, they're going to go back ... to \$100 and then it will go... I think in March - I can't remember the date - so then it will be gone completely. They're probably our most vulnerable members of the community (R1 – P2: social and community services).

Many older people had not resumed participation in clubs and social activities. The strain on the health system, the impact of loss of income on local businesses and tourism were discussed, as was a perception of increased distrust in government information and a rise in 'alternative' beliefs. School disengagement and social and development delays in children who had missed out on classroom learning during the pandemic were noted. School staff also experienced strains on their mental health:

The other part I see is staff. I've got 170 staff and lots of them have had mental health challenges, and a couple [are] pretty severe. But all on that lower to medium level, they've felt symptoms of anxiety and they've never had that before in their life. That's come out of the back of COVID. We've seen a lot more anxiety than depression from COVID, but there is a bit of both. But I think it was the fear that led to the anxiety and the lack of control. (R2 – P36: education)

What I've heard from young people, through work stuff, is around those pressures of anxiety and poor mental health and access to support around that, wanting support around that but not being able to get it. How do we support them? How do we support individuals? They have experienced COVID. They've lost two years of development in a social setting and all that sort of stuff. (R2 – P42: community/volunteer/advocacy group)

Some Round 2 interviewees noted positive impacts and repeated some of the points made in the previous round; that inter-agency cooperation had increased, and that the pandemic had enhanced community spirit. Learning new digital skills, such as older people learning to use online media to connect and socialise, was also seen as a positive, along with changes in people's lifestyles as they chose to work more flexibly or work less, having experienced flexible work during the COVID-19 pandemic. Again, these advantages and opportunities were acknowledged as not being available to all equitably.

I think that there's some really good changes happening in community and in different cohorts, so that things will get better. I like to hope things will get better. I've seen improvements over the years. Despite COVID and the mine fire and all of that, there is that want for people – people wanting things to be better, people wanting to be involved and – yeah. So, I think that it will get better. I just wish it would get better at a quicker pace. (R2 – P40: community/volunteer/ advocacy group)

The second overarching theme related to the transition away from the coal-generated power industry. This was not mentioned as frequently as the pandemic but nevertheless featured in many responses. In 2020-2021 interviewees spoke of the uncertainty and fear in the community about the closure and demolition of the Hazelwood Power Station and the future closure of remaining coal-fired power stations. Job losses from the closure of Hazelwood and the need for former employees to retrain fed into anxiety about employment and the

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local economy. This was linked to the ongoing mistrust felt by many due to perceived poor communication from those making these decisions. There was a sense that there was a pattern of decision-making that was out of the control of the community (including the more recent state government approval of the lead-acid battery recycling plant, against the ruling of Latrobe City Council) that contributed to this suspicion and distrust. On the other hand, one interviewee expressed some hope regarding the possible renewable energy future, while acknowledging the uncertainty within the community about this.

I think unemployment is one thing that is weighing down on people in the region. We've had a lot of coal-fired power stations closing down and a lot of people have lost jobs and those people were earning a lot of money per hour ... Some of them have failed to adjust to picking up local jobs with their much lower pay rate per hour and I think, obviously, that will have a negative impact on their mental wellbeing because of the way they were perceived in the society. Probably the way they were highly perceived in the first place and now they just feel like they're just nobodies. (R1 – P10: youth services/multicultural services)

In 2023 many of the same concerns were expressed around transition, particularly regarding job losses, employment prospects (especially for young people) and the loss of job security. Interviewees felt that government promises about replacement industries were not being fulfilled and argued that government decisions to bring forward the closure of other power stations will not only impact employment, but also identity, morale and pride of place.

When you then think about the socioeconomic area that we live in, people – the level of unemployment and also just the under-employment I think are too that doesn't enable people to aspire and able to make the changes that they may want to do, to be, to reach their goals because the rigours of work and the rigours of cost of living doesn't enable you to kind of say, I'm going to take this six months off and do this extra course and then know that you'll get something. There's certainly a huge amount of investment from the state government in workforce development but the immediate needs are not met. (R2 – P15: social and community services)

It was clear that many saw transition away from carbon as taking benefits from the region without replacing them with new developments. One interviewee pointed out that people were still living with the legacy of privatisation of the SEC, in terms of intergenerational trauma and pessimism. Young people were being told by their parents that renewables are not going to work and won't provide them with jobs: "that's never going to work and that's never going to be a thing and we won't have jobs" (R2 – P4, community/volunteer/advocacy group).

The damage that was done in the '90s to this community, people just have never recovered from. So, they remember that damage and then they sort of go, well, this is just going to happen again and there is no future, there is no hope. (R2 – P4: community/volunteer/advocacy group)

We have to actually shift an entire generation of people, so we've got a whole cohort of 15 to 25-year-olds that are unemployed, not in the workforce, not learning in any formal setting, not participating in any meaningful way in community and I'm determined not to define them as the lost generation. But we have to make sure that the children – so the kids that are from three through to 15 actually don't get caught up in that same spiral. (R2 – P37: community health/transition initiative)

There were some positive notes sounded. The view was expressed that the community had mostly accepted that transition was happening, and discussing what that might look like was featuring more in community conversations.

I think there's a very clear understanding in the community that – I use the word advisedly, that transition is the thing. But that we've got to think about where we're going to, rather than what's going to happen to us next ... So, what are we going to do next? Are we just going to blame other people or actually look at each other and go, well, how are we going to navigate our way out of this mess? I reckon there's a growing movement of people [who] are just going, actually we're much better off having good quality conversations around what's possible. (R2 – P37: community health/transition initiative)

Another comment was that the push to make the Valley a centre for renewable energy was positive, but not everyone in the community knew what was happening.

I think renewable energy in particular is an area which has great potential. But I think there is a disconnect there. There are people who know about these sorts of things ... We do get consulted, we do get asked to come and be on working parties and consultative committees and so on. So, we hear about things and we have the interests and people who share that interest know about things. But there is the feeling I think that you have to go hunting for that information, so it's not necessarily getting to all the people. (R2 – P35: community/volunteer/advocacy group)

Beyond the pandemic and the transition, interviewees expressed other concerns relating to the economy, services and infrastructure, and social connections. There was an increase in negative mentions of the economy in 2023, reflecting increased employment concerns and cost of living stresses. However, there was also an increase in positive mentions, with interviewees noting job losses from industry closures had not had the feared catastrophic impacts, and that government infrastructure investment had created some new employment.

Many people in both rounds of interviews remained concerned about how well services and infrastructure were functioning, particularly around whether services were meeting the needs of the community, were inclusive, were adequate in high demand areas such as mental health and domestic violence, as well as noting the shortage of GPs. More positively, there was praise for innovation coming from some organisations, pride in new sports and cultural infrastructure and acknowledgement of increased collaboration, growth and change among established organisations.

In both interview rounds there were many mentions of negative social issues affecting the community, with an increase in mentions of these in Round 2. In Round 1, responses focused on intergenerational disadvantage, sexual and family violence, entrenched racism and discriminatory attitudes, a history of dependency on the SEC and subsequently on government services, and town-based parochialism. In Round 2 the list of social issues mentioned included family violence, drug use, visible homelessness, perceptions of a lack of public safety, anti-social behaviour on the streets, rise in inappropriate social media use among young people, and concerns about safety and inclusivity for women and LGBTIQ+ community members. Positives in Round 1 focused on community initiatives and exceptional community workers and leaders, and emphasised that activities and shared experiences from community events were building trust, pride, agency and resilience. Round 2 echoed these themes and noted that work being done by some community groups is addressing entrenched negative attitudes and making the community safer for diverse groups. The Appendix provides a table summarising the negative and positive impacts mentioned by participants in each round.

5.4 What is the current state of community wellbeing?

In late 2020 and early 2021, when we asked our key informants about the current state of community wellbeing in the Latrobe Valley, we received varied responses. Just under half of the interviewees said that community wellbeing varied over time and between different groups, ebbing and flowing based on current individual and community circumstances. Many interviewees were more optimistic and thought community wellbeing was 'OK' or improving, while a smaller number said it was not good or getting worse (see Figure 7). When we conducted our second round of interviews in 2023, there was less optimism around the community's wellbeing. A significant proportion said that community wellbeing was not good or getting worse, some saw it as varying between different groups and a few said that it was improving or 'OK'. Confidence in community wellbeing declined between Round 1 and Round 2.

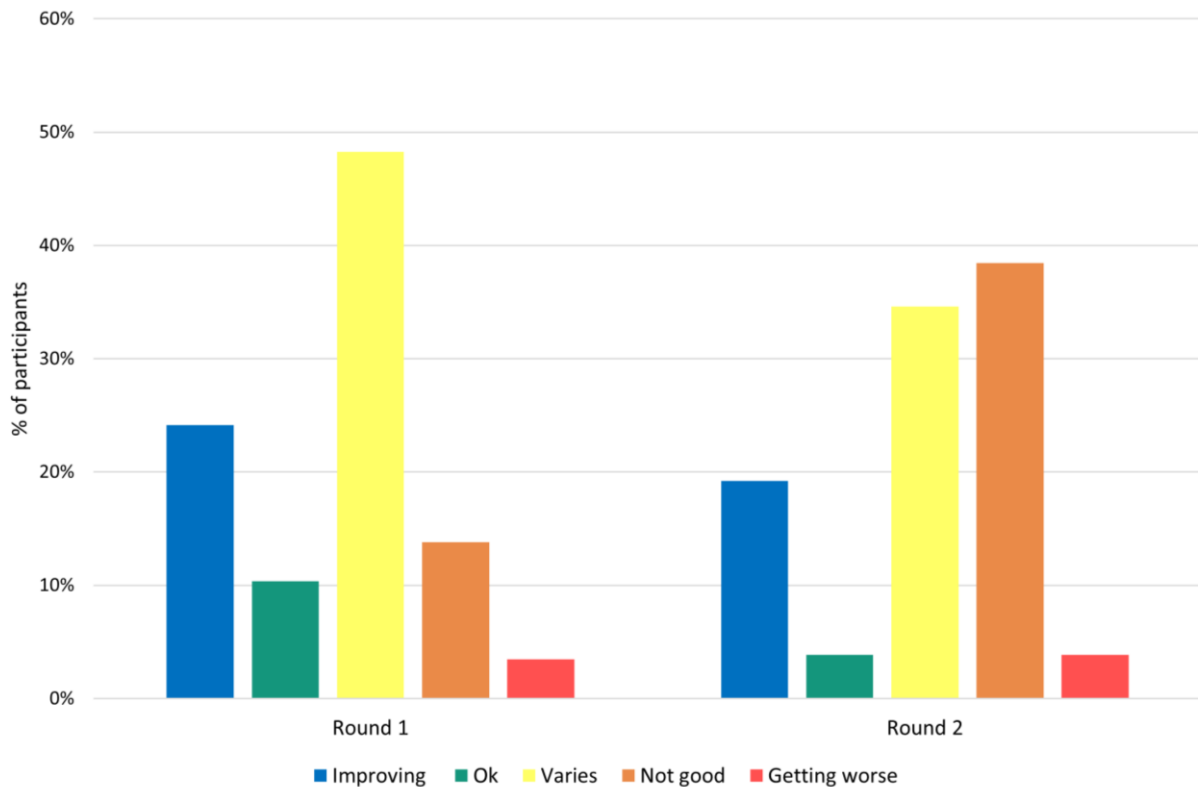


Figure 7: Current (2020-2023) state of community wellbeing (Rounds 1 and 2)

Those who said community wellbeing varied gave a number of explanations for their response. One explanation was that while there were “pockets” of social and economic disadvantage, others in the community were doing well (a theme repeated throughout our interviews).

We’re not one community... I think that different people’s experience is different, that there [are] pockets of disadvantage, social and economic disadvantage... There are also pockets of extreme advantage as well. (R1 – P18: local government)

There’s a sense of there are the haves who are doing quite okay and there’s the have nots [who] are struggling and there’s a huge sort of cavern in between. (R1 – P3: local government)

Those who are employed are perceived to have better outcomes and remain connected to their community. However, for those living with socioeconomic disadvantage, our interviewees working in social and community services noted that there were often co-occurring problems such as alcohol and drug abuse, and domestic violence. A number of interviewees suggested that growing inequality and division was exacerbated by in-migration of those who had been living in Melbourne:

[Community wellbeing] is different for different groups, so particularly, the low socioeconomic group, what I see at school the kids that are affected by the alcohol and drug and domestic violence, they are so disconnected and just trying to survive. They’re a whole dysfunctional group on their own. That group is growing, that’s the problem. That again comes back to unemployment, so, the lack of jobs in the area, a lot of people are coming in here, and have been coming in over the years from Melbourne, because of the cheap accommodation, and that’s giving us a very - particularly Morwell, giving us a very disjointed community. (R1 – P1: community/volunteer/advocacy group)

There were also differences between older and younger people. Young people were less likely to feel confident about a job and a future in the Valley and were less likely to be members of service clubs (seen as a “training ground for a lot of people to participate in the community”, R1 – P16: community/volunteer/advocacy group). On the other hand, older people weren’t facing many of the stresses younger people had and were therefore “more relaxed” (R1 – P21: community/volunteer /advocacy group). They had established community connections through their work and membership of community organisations and were less concerned about the future. Some of our interviewees also noted a division along town lines, even amounting to “inter-town rivalry” which our interviewees felt was fuelled by perceptions that some towns within the Latrobe Valley were receiving more resources and new infrastructure than others:

I still think that our community wellbeing is based on the boundaries around our towns. Obviously, the demographic and the type of people and the services in Traralgon differ to Morwell ... there’s Traralgon people that would absolutely love that vibrancy and the café culture and the services and all that sort of thing that goes on in that town. But for me it’s probably a little bit beige. It’s all kind of the same sort of stuff, whereas downtown Morwell we don’t have that much (laughs) down there. It’s just an interesting – more interesting space for me and I think Moe is a little bit different again. (R1 – P6: health communications)

I ... see that intertown kind of rivalry and you see if Traralgon gets something, then the Morwell and the Moe people have an uproar and vice versa. (R1 – P27: community health/transition initiatives)

The sense that the towns are not all thriving was expressed; Traralgon was viewed as doing well, Moe as improving, but Morwell was seen as getting worse, combined with a lack of pride in the town (especially compared to its heyday during the SEC era). Intertown rivalries can impact on the sense of inclusion which our interviewees have told us is a key element in community wellbeing.

Some interviewees also argued that conservative views tended to prevail and that the needs of diverse groups (e.g., those with disabilities, different cultural, ethnic or religious groups) were not always considered. As one interviewee expressed this, the community is “less aware of concepts like white privilege and exclusion” (R1 – P11: youth services), and this hindered inclusivity.

I think there are a number of cohorts within our community and diverse groups that are probably not taken into consideration as well as they could be. So, I think, as a community in Latrobe - yeah, we’ve got a long [way] to go. (R1 – P5: social and community services [disability])

Despite these issues, our Round 1 interviewees told us that the Valley had a strong sense of community, and several interviewees felt that the 2014 mine fire and the recent experience of the COVID-19 pandemic had strengthened the community’s voice and taught people to work together.

Generally, I think people have seen the other side of some of those things and we’ve adjusted. When I hear people talking now, they talk about the future and talking about the opportunities we’ve got and we’re starting to see the other side now and getting engaged with the future. I think that’s really positive. That’s the language I hear now. (R1 – P17: community health/transition initiatives)

The perception of our interviewees was that there has been an increase in grassroots community support for vulnerable members of the community and many organisations were trying to improve community wellbeing, but accessibility remained an issue, along with the perceived lack of a coherent and collaborative approach between different organisations.

There’s so many organisations all having a crack at working with the community to improve overall community wellbeing as well so, you know, I think there is a significant concerted effort in that space, which is really pleasing and good. (R1 – P9: community sport)

The forms of division and polarisation noted in Round 1 were still evident in Round 2. Additional layers of community division were revealed by interviewees who commented on Morwell in particular as a town whose community was divided between “those who wear lanyards and those who don’t” [R2 – P37, community

health/transition initiatives], lanyards being a visible marker of people employed in health and community services organisations. Another division highlighted was between long-term residents of the Valley with 'pride in place' versus more recent residents perceived to have moved for cheap housing or access to services.

I think there's also attention around those that have lived here for a long time, who are really proud of their town and those who have been here for a short time and they're here because the services are here. So, there's another division there and I reckon some work could be done recognising this effectively has become a commuter town, or a town where people commute to work. (R2 – P37: community health/transition initiative)

One interviewee pointed out that there was also a "conflicted self-identity" (R2 – P37: community health/transition initiatives) in the community regarding the coalmining and power industry. There were split views in the community between those who still see this industry as largely beneficial or at least necessary for economic prosperity and part of the history and identity of this place, and those who have never received the benefits, or may be suffering health impacts linked to the industry (such as asbestos-related lung disease or mine-fire related health problems). As this interviewee explained:

There's also the conflict between big business and the needs of the community, the fact that big business, whether it was in the form of the SEC or in the form of large corporations, have dominated the regional development, indeed therefore the economic and therefore the social landscape of the region over many, many years, to a point where a hunger and desire, for example, for well-paid jobs, subverted health outcomes for the community and therefore those that are not direct beneficiaries of those well-paid jobs, employment opportunities are even further disadvantaged than they would be if those jobs hadn't existed in the first place. (R2 – P37: community health/transition initiatives)

After the closure of Hazelwood Power Station and the impending early closure of other power stations in the Latrobe Valley, divisions were also evident around the transition away from coal, with some in the community fearful of change while others were more open to talking about transition. The impacts of cost of living, under-employment and unemployment are factors affecting community optimism about these changes, particularly for those already on low incomes. Participants observed increased levels of people in crisis and needing emergency help due to domestic violence, food insecurity and housing insecurity. "More people are trying to deal with their immediate needs, and their immediate needs are food, housing, pay their utilities" (R2 – P2: social and community services). For low socioeconomic status groups within the community, connecting with the community and being involved in wider issues is not an option:

There's a lot more people that are connected and supportive of each other and I think that's all part of wellbeing. But there's some people that just aren't connected at all and are just ... They're doing what they need to do daily. (R2 – P4: community/volunteer/advocacy group)

Interviewees noted the significant government investment in new infrastructure that has taken place in the Valley, but some argued that this was not making a difference for all. The loss of shops and businesses from Morwell and Mid-Valley Shopping Centre were not only signs of economic downturn but also impacting the ways people connect. As one interviewee expressed: "You walk around and look at the shops that are empty and remember the services that they used to provide and it feels like the world is withdrawing from us" (R2 – P35: community/volunteer/advocacy group). Others felt that the renewal of community infrastructure was helping improve community pride, at least for some in the community.

Economic worries combine with a history of distrust in government in this region, based on past events (in particular the privatisation of the SEC and the economic hardships that ensued). Many of our interviewees in Round 2 voiced the perception that the economic solutions offered to this region involved "dirty industries" and when the community protests, they are overruled by government (as occurred in relation to the lead acid battery recycling plant, discussed above). Echoing views expressed by several interviewees, one person said:

Latrobe Valley [feels] like they're the dumping ground, we get the dirty industry... If you're closing the power stations then what are you going to dump on us next? We've already got the lead battery and that's going to poison our kids. There's already awful kind of reputation around, well, what are we going to get in that heavy industry zoning, what's next that's going to pollute us and make us unwell? (R2 – P27: community health/transition initiatives)

Despite one optimistic assessment that “the world is in a happier place than we were two years ago with COVID” (R2 – P23: community sport), most interviewees felt that the post-COVID-19 era remained challenging for this community.

I still think people’s mental health was affected by it and I think a lot of the young people probably spent more time on screens, rather than going out and playing with their friends and that, so I think that’s probably impacted people’s wellbeing and mental health. (R2 – P8: Aboriginal community-controlled organisation)

One interviewee suggested that the progress being made towards improving community wellbeing has been set back due to the COVID-19 pandemic.

COVID has absolutely taken us back a couple of years in regards to progress that we were experiencing pre-COVID. 2017 to 19 there was some really good progress that was happening and really good positivity, and then everything has just stalled. (R2 – P9: community sport)

In Round 2 some themes expressed by our interviewees were indications of positive changes already occurring, changes that should contribute positively to community wellbeing in the future. One common theme was the argument that people felt their voices were being listened to (although this view was not shared by all, as already noted). Others pointed to a “revival of caring within the community” (R2 – P37: community health/transition initiatives), similar to the Round 1 observation of a revival in grassroots support for the vulnerable. Several interviewees felt that the disconnection between services and agencies (noted in Round 1) was no longer such an issue, with more collaboration and willingness to work together. As one interviewee observed, the community was still “fragmented but there’s some really good stuff happening”, citing the work being done by the Health Assembly as an example (R2 – P4: community/volunteer/advocacy group). However, some informants remained unsure of the role or effectiveness of the new structures funded by the government (such as the Health Assembly and Health Advocate).

5.5 Will community wellbeing improve in the future?

We asked our interviewees whether they thought the wellbeing of this community would improve or worsen in the future. There was a high degree of uncertainty about the future in their responses, but also many interviewees who felt optimistic. Some responses displayed unqualified optimism, while others were more cautiously optimistic, stating that they felt improvements depended on positive trends continuing. Those who said that community wellbeing would worsen, or worsen before improving, were in the minority in both interview rounds compared to the proportion who said it would improve or who were uncertain (see Figure 8).

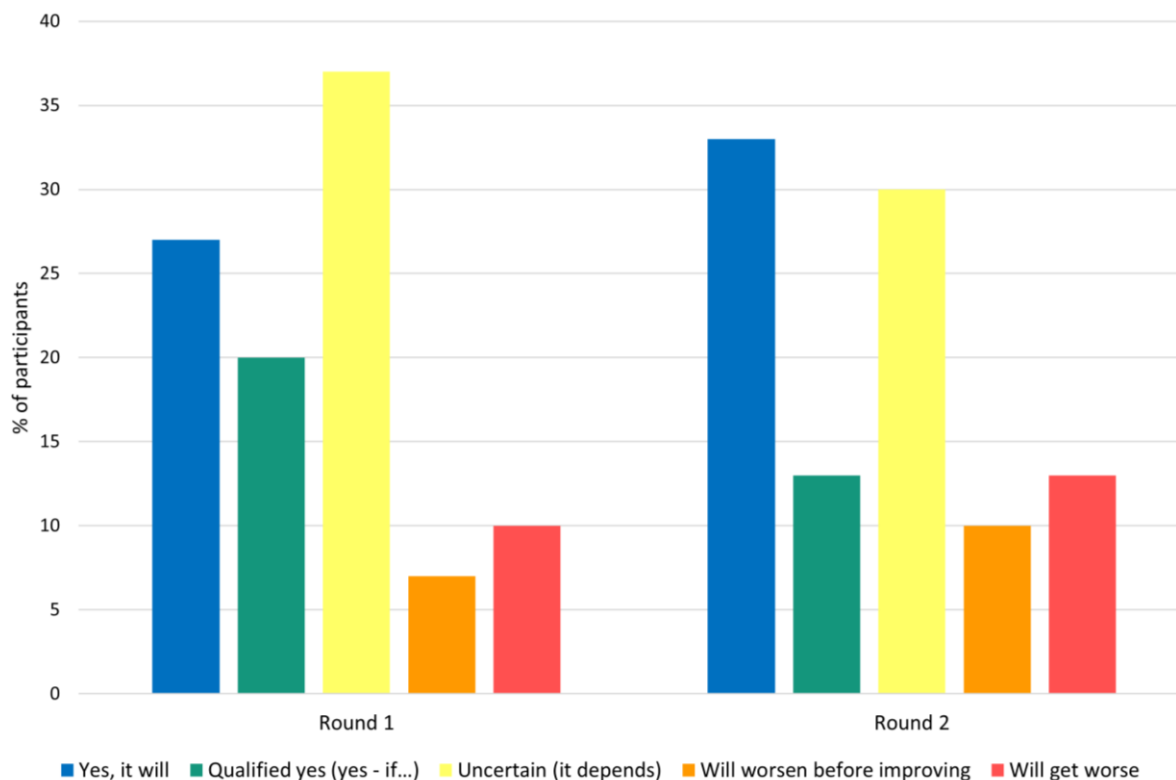


Figure 8: Expectations of future community wellbeing (Rounds 1 and 2)

As noted in our Methods section, we did not interview all the same people in both rounds, as some were unavailable or had moved to other roles. However, there were eleven interviewees who participated in both rounds, and therefore it was possible to look at their responses to see whether their views had shifted between 2020-2021 and 2023. Of this group, four had become more optimistic about community wellbeing in the future and seven had become less optimistic. Overall, there was stability in the proportions of those who expected improvement (fourteen in both rounds), those who found it hard to predict (eight in Round 1, nine in Round 2) and those who expected it to deteriorate (five in Round 1, seven in Round 2).

As discussed above, there was confidence among some of our interviewees that community wellbeing will improve. They based this on the increased government investment in the region, increased collaboration to address challenges, a collective commitment to improving health and wellbeing and promising signs of system change. Interviewees felt that the community was more empowered, that new infrastructure was building pride of place, and that there was an opportunity to ‘change the narrative’.

Several interviewees talked about this idea of ‘changing the narrative’. One interviewee expressed this as “we’re going to have to reinvent ourselves as a community or continue to reinvent ourselves” (R2 – P23: community sport). Another felt that “we’ve made really wonderful inroads and there has been great work done” (e.g., by the Health Assembly, Health Advocate and Health Innovation Zone) but there were dangers in losing the momentum of this work and “losing control of the [positive] narrative” (R2 – P2: social and community services). Successful transition away from coal, and more broadly away from disadvantage and towards a brighter future, was necessary for this new narrative to become a reality:

If we get this transition right, which I know there's a lot of people working on ..., it's an opportunity for us to rebrand and really emerge from something. People from an external perspective see us as, oh, the dirty Latrobe Valley. Why would you live there? ... I think this for us is a chance to now change from the caterpillar to the butterfly or whatever we want to do, it's our opportunity to create the change that we want to see, and really own Latrobe Valley. (R2 – P27: community health/transition initiatives)

For those who were more cautious in their optimism, there were a number of caveats:

- if transition goes well;
- if COVID-19 recovery (economically and socially) goes well;
- if new industries and investment come to the region; and
- if the right decisions are made to foster strong communities.

Other provisos mentioned related to the need to improve service accessibility and citizen participation, the need for continuing system change, concern about pathways for young people and an increase in violence statistics. As one interviewee pointed out, change is “hard work” and doesn’t happen quickly (R2 – P40: community/volunteer/advocacy group), so building community capacity is important. Short-term funding cycles where projects producing positive change were shut down due to loss of funding also impacted on our interviewees’ sense that work to improve community wellbeing could maintain traction.

Some of those who were more pessimistic about community wellbeing improving, acknowledged that there has been significant investment in the Valley and felt that the government was trying to address disadvantage. However, a number of interviewees pointed to growing division and inequality, the lack of trust in authorities, and the challenges of addressing intergenerational poverty and trauma. They pointed to the closure of power stations and other large employers, impacting employment opportunities and the sense that young people have a future in the Valley. These interviewees felt that without long-term investment and planning, particularly in primary intervention (health promotion, resilience building) nothing in the Valley would change.

5.6 What is the relationship between individual wellbeing and community wellbeing?

Our third research aim was to investigate the relationship between individual and community wellbeing. As noted in the literature review, this relationship is complex. We teased this out by asking our interviewees:

- Has the mine fire changed how you feel about living in the Latrobe Valley?
- What characteristics of the community have positive or negative impacts on your personal wellbeing?
- What helps you deal with adverse events like the HMF, bushfires, COVID-19, etc. (i.e., what do people draw on for their resilience?)

5.6.1 Has the mine fire changed how people feel about living in the Latrobe Valley?

Our interviewees were divided in their responses to this question. Of those interviewees residing in the Latrobe Valley during the mine fire, slightly more than half said that the mine fire had changed how they felt about living in the area, and this proportion was similar in both interview rounds. For those interviewees who said that their attitude did change, in Round 1, this was primarily in a negative way. However, in Round 2 there was an increase in the number of people who expressed a positive change of attitude and a corresponding decrease in those who felt more negative (see Figure 9). This suggests a weakening of the negative impacts of the HMF over time on individual attitudes to living in the area.

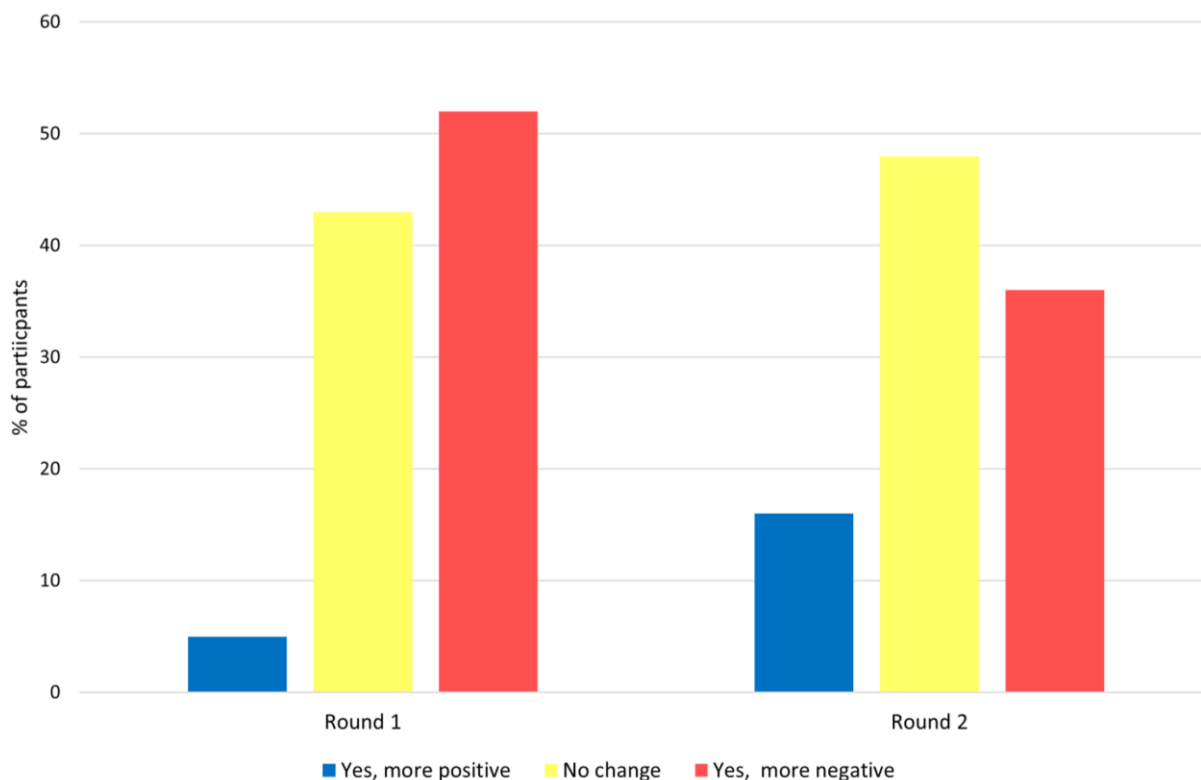


Figure 9: Changes in attitude to living in Latrobe Valley, since the HMF (Rounds 1 and 2)

Note: Only responses from those interviewees who were living in the Latrobe Valley at the time of the HMF were analysed (21 in Round 1, 25 in Round 2).

Similar reasons for feeling that the Valley had a negative impact on personal wellbeing were given across both rounds. The main impact described was an increased concern about the environmental and health effects on themselves and their families, especially their children. This was linked specifically to the health risks of air pollution.

Yeah, I would say, because then you think, well, is this the right environment to bring up my children? You do hear the respiratory related outcomes; the air quality, is it any good anyway because we're right near coal mines, the coal dust and the implications of that. (R1 – P27: community health/transition initiatives)

But it's such a bad place, physically, to live in. ... in terms of health, with all the Yallourn [Power Station], Hazelwood [Power Station], all of them, it's pretty horrible when you think about how much air pollution there could be. (R2 – P34: young adult)

It made me have a more heightened awareness of the air pollution. Before that, I always knew – my grandfather was like coal royalty, so I always knew that there were ... coal mines there. But I had no idea there was air pollution relating to that or that that was even a problem. (R2 – P26: media)

Also mentioned was the negative impact of a poor external image of the region, where outsiders saw the Latrobe Valley as a place for dirty industry, and a disadvantaged area populated by 'whingers', with interviewees frustrated by the inaccuracy and narrowness of these perceptions of the region.

It made me more aware of the perceptions of the Valley, maybe of others, just that I really felt that we're that dumping ground. I really could see it. (R1 – P24: education)

I think at the time, yeah definitely, because I think it was about perceptions of Latrobe Valley from outside of Latrobe Valley. Some of those perceptions around 'you're the whingey Latrobe people'. (R2 – P14: community health/transition initiative)

Another theme mentioned by a couple of people in each round was the level of distrust for authorities in the community, which they felt had been exacerbated by the mine fire response.

Well, the fire itself, it shocked me and it made me worried and I no longer trust as much in what I hear (R2 – P42: community/volunteer/advocacy group).

More positively, there was an increase from Round 1 to Round 2 in those who felt a stronger commitment to the area and linked this to the mine fire. Common themes across both rounds, but articulated more fully and by more interviewees in Round 2, were: a positive increase in activism around social and environmental issues; greater awareness of community spirit; and a stronger commitment to advocating for the area (either in themselves, or observing this in others). This result is suggestive of posttraumatic growth within the community.

I would actually say that it has strengthened my commitment to Latrobe Valley. I think it's that experience where there is something that has threatened or challenged and it has brought us closer together. (R1 – P14: community health/transition initiative)

I think it gave me some different perspectives on how the community responds when things aren't going well... I feel like it was one of those times where things could have gone pear-shaped, but people did band together and they did check on each other, and they did try and share information and make sure people were safe. (R2 – P39: social and community services [disability])

I just think it's made me really understand the reason and yeah, that opportunity, that I am part of this community and that I have that responsibility to actually do something, so it's made me stronger towards my community. (R2 – P4: community/volunteer/advocacy group)

In both rounds, there were interviewees who simply affirmed that the mine fire hadn't affected their commitment to living in the Latrobe Valley. There was a higher proportion of interviewees who expressed this view in Round 2. Family connections and a strong sense of attachment to this community were key factors for these interviewees. Some simply said they "love living here". Others acknowledged that there were negatives about living in the area but were philosophical about these. Several argued that they were aware of the risks of living near a coal mine before the fire, or that disasters can happen regardless of where you live, or that there have been adverse events since the mine fire that have had greater impacts.

I think my family and my memories growing up will always make this my home. Again, I'm not sure that I would ever pick Morwell [off a map]. But it's familiar and the opportunities and life I've had so far, I'm forever grateful for. (R1 – P20: young adult)

Oh, now there's a good one. I love the Latrobe Valley. I do. I love the Valley. I think it's the most prettiest place, and generally the people that live here are really lovely people and quite generous with their time and their consideration of others (R1 – P30: community/volunteer/advocacy group)

The Valley is a lovely place. It's a pretty place. It's just [it's had] its fair share of terrible things that have gone on here. (R2 – P30: community/volunteer/advocacy group)

... so was my whole neighbourhood who are like old-school or old-time Morwell residents that we just didn't even really talk about it. Just yeah, another smoky day blah, blah, blah. (R1 – P6: health communications)

5.6.2 What characteristics of the community have positive or negative impacts on personal wellbeing?

We asked our interviewees which characteristics of the community had the most impact on their personal wellbeing, either in a good or a bad way. In both Round 1 and Round 2 interviews, most of our interviewees identified both negatives and positives to living in this community, with a few mentioning only positives (while a single person in Round 1 mentioned only negatives). There was also a wider variety of positive characteristics identified than negative ones. This indicated that, overall, those interviewed could see many benefits to their personal wellbeing from living in the Latrobe Valley.

In Round 1 interviews, there were three main themes relating to the positive aspects of living in the Latrobe Valley: strong social connections, the qualities of the people in the community, and appreciation of the local natural environment (see Figure 10). These themes were also present in Round 2, along with an additional theme, which related to the services and facilities available to the community (see Figure 11).

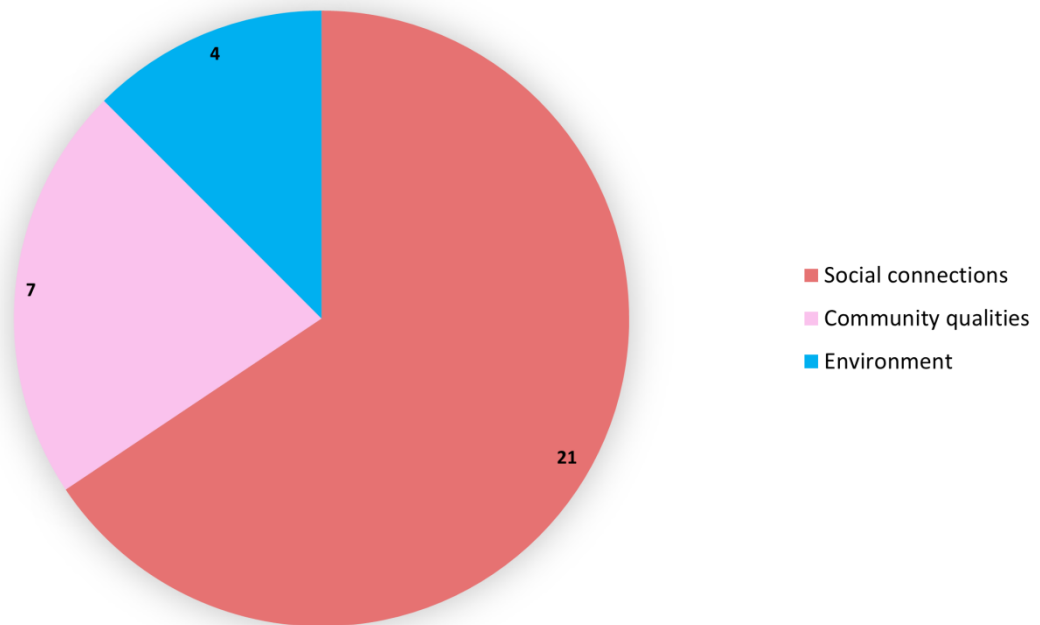


Figure 10: Community characteristics with positive impacts on personal wellbeing (Round 1)

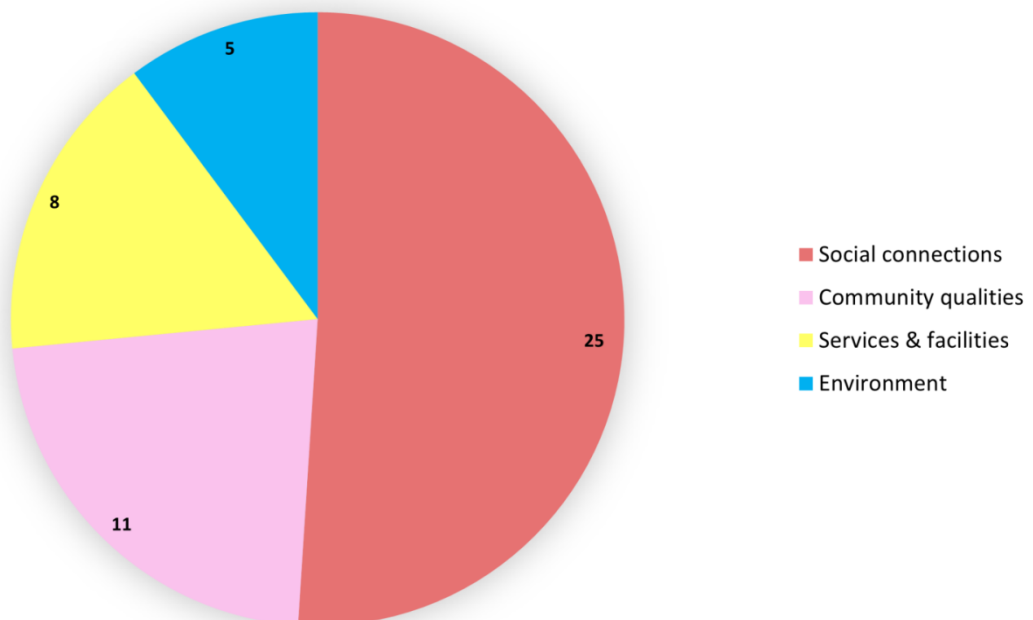


Figure 11: Community characteristics with positive impacts on personal wellbeing (Round 2)

Strong social connections and an involvement with the community were most often mentioned (in both rounds of interviews) as supporting our interviewees' personal wellbeing. People mentioned their sense of familiarity with the community, the presence of long-term family or friends, and having great neighbours. Some expressed this simply as "it feels like home". For those interviewees whose professional role brought them into contact with community members, many expressed a strong commitment to bringing about positive change in the region, and that this was personally rewarding. Community members who had a role as volunteers or activists also felt privileged and proud to work to support disadvantaged people or tackle other important issues and felt "lifted up" by the leadership of others they saw undertaking this work.

Oh, I think I love living here, so I guess I am a community person though I have a lot of different community families, I think. So, I believe our real strength is we're so friendly and welcoming (R1 – P27: community health/transition initiative)

One thing I noticed moving to Melbourne was you'd walk into a cafe or a shop, and no one knows who you are. No one says hello. You don't have a chat with people, or the chance of you bumping into someone you know is next to impossible. Whereas at home, you're always engaging with people, and it's those short hellos, those smiles and those nods and things that make you feel really good, make you feel like you belong. (R1 – P19: youth advocacy)

I think the sense of connection and personability amongst people here probably contribute a lot to my wellbeing. Even if you go to Coles, like the people at the checkout talk to you, or you might not every time, but you might strike up a conversation over like a can of tuna or something trivial like that – people aren't afraid to have those incidental conversations with you. (R1 – P25: youth services/community health)

I think I would have to answer that in terms of my wellbeing is significantly tied to my sense of being in the world and I guess I live by that advocacy or work to contribute to communities and pay for living on the planet. That's how my wellbeing is impacted most, is whether - is like that underlying sense of meaning that I get from life. So, that's very positively impacted by working here. (R1 – P11, youth services)

The things that lift me up are the ... people who are prepared to act, people who are prepared to lobby ... And that they're continuing to do that, that's really encouraging and the other community groups that are doing things related to this, that's really encouraging. (R2 – P35: community/volunteer/advocacy group)

The second most prominent theme in both rounds related to the people living in the Latrobe Valley and the qualities of the community, such as diversity, friendliness, authenticity and community spirit. According to our interviewees, the people living in the region have a down-to-earth friendliness, openness and honesty that is valued. Other qualities that contribute to personal wellbeing were the community spirit and sense of responsibility for others, and the resilience of the community. Several interviewees appreciated the diverse population and some felt growing up in the region had given them the ability to connect with people regardless of their background, a useful personal asset.

I do like the grittiness. I do like it because it keeps me in touch with a broader public base or community base. To see people who might be affluent or middle class or without a job and of a lower socioeconomic background, to be able to see all types of people all the time to me is important. Because it keeps me connected to understand that ... there are people doing quite well and there are people not doing quite well ... What new residents or people who are new to the area might find unusual or scary or odd or concerning to me is just kind of normal ... Yeah ... for me it's ... interesting. Because otherwise it just would be just another boring country town [laughs]. (R1 – P6: health communications)

It gave me the ability to relate to people ... Going to church every Sunday with Mum ... It gave me the ability to relate to the older people in the community. So, when I became an adult, I already had those connections. Those were people who were doing really good things in the community... I'm a bit of a chameleon. (R1 – P26: media).

A theme absent from Round 1 but expressed by more than a quarter of Round 2 interviewees was their appreciation of the sporting and cultural facilities available in the Latrobe Valley. Major government investment in sports and community infrastructure had been announced in 2017 (refer to narrative of events in Section 2.3) but the new facilities had not been completed at the time of the Round 1 interviews. The responses of interviewees indicated that these new facilities were having a positive impact on their personal wellbeing by Round 2.

We've got the best aquatic centre around the corner... [and] the arts centre is fantastic. (R2 – P15: social and community services)

Finally, in both rounds a small number of people mentioned the beautiful natural environment. In particular, the area's natural beauty and its proximity to the snow, the beach and the city were seen as contributing to their personal wellbeing. Interestingly, this theme was more prominent in relation to personal wellbeing, and rarely mentioned in relation to community wellbeing.

I think our sense of location as well is a good characteristic. We're two hours from the city, we're an hour and a bit from a beach... We're just over an hour from snow. So, I think our proximity is good. (R1 – P5: social and community services [disability])

When it comes to the characteristics that impact negatively on personal wellbeing, there were again common themes but also some differences between Rounds 1 and 2 (see Figures 12 and 13). Broad themes across both rounds were social problems within the community, concerns about the region's economic outlook, negative community attitudes and lack of access to services. In addition, in Round 1 a couple of interviewees had concerns about pollution and poor environmental decision-making. However, there was a difference in the prominence of these themes between Rounds 1 and 2.

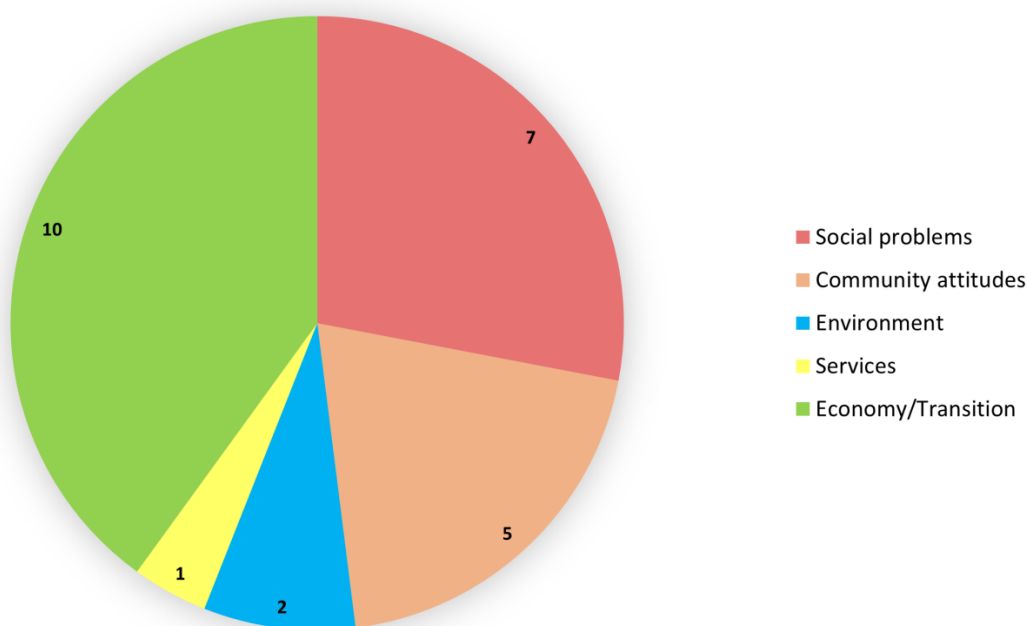


Figure 12: Community characteristics with negative impacts on personal wellbeing (Round 1)

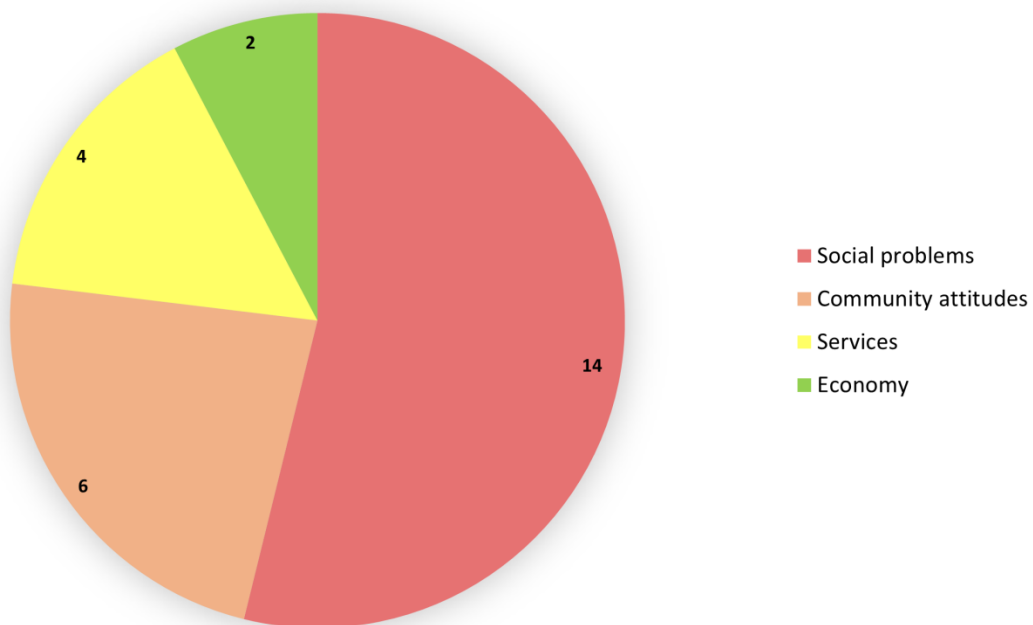


Figure 13: Community characteristics with negative impacts on personal wellbeing (Round 2)

In Round 1, the most prominent concern was the economic outlook, and this was linked to concerns about insecurity of jobs in the transition away from coal mining and power generation. Interviewees felt that their personal wellbeing was affected by living in a community where the future was uncertain and there was a perceived polarisation in the community around transition. Unemployment and a lack of optimism about jobs to keep young people in the region were also discussed. People were also concerned about the need for more investment to address distinct pockets of socioeconomic disadvantage.

What are the employment opportunities for young people? So, I've got two boys, they're both employed but what's their future employment? (R1 – P7: social and community services)

That frustrates me, that so many young people feel that they have to leave the area to find opportunities that they find fulfilling in their lives. (R1 – P23: community sport)

In Round 2 only a couple of people raised concerns about the economy as affecting their personal wellbeing. Those that did mentioned the fear of a poor economic outlook and the loss of vibrant commercial activity (specifically in Morwell).

This is my small hometown and I love coming back to it, but it's not necessarily something that I want to live in, which is hard and it's really conflicting and I don't want it to become a small hometown that goes economically under or whatever (R2 – P38: young adult).

Social problems were cited in both rounds as having an adverse impact; in Round 2 these were the most prominent set of concerns, while in Round 1 they were second to economic concerns. In both rounds community safety was a major issue.

There's always been sort of drunk people, or homeless people, around the traps, but what's accompanying now is violent behaviour, aggressive behaviour. So, there's a lot of behaviours of concern ... which is impacting community safety, or the ... perception of what is safe and what is not. (R2 – P6: health communications).

Other social issues mentioned were the burden of dealing with social problems that were beyond the individual's power to solve (expressed by those in professional or volunteer roles supporting vulnerable groups), a perceived lack of action to solve community problems, and sensing the anger, trauma and conflict in the community. This indicates that there is a direct connection for many community members between the collective wellbeing (or lack of wellbeing) in a community, and their own sense of personal wellbeing.

I personally get really distressed and frustrated when I hear some of the stories ... of my clients. When I can see those people in my town struggling, I get really personally quite distressed about that because I know a lot of the solutions are not hard (R2 – P39: social and community services [disability]).

The third theme in both rounds related to impacts of negative attitudes and behaviour from others in the community. This was cited by a relatively small number of interviewees. Interviewees talked about being impacted by a general sense of scepticism (either from others in the community or in some instances, themselves) including a loss of trust towards government. Others mentioned conservative and discriminatory attitudes, negative and ill-informed talk, and negative external perceptions of the region.

Negatively I think the conservative approach that people have here it just worries me a bit and I do feel that it's not maybe a choice that they're making. It just may be the lack of awareness or lack of knowledge about things (R1 – P12: community health/multicultural services).

What I sense is it's hard for the community to move forward because of that mistrust. It's great that the government wants to put the SEC out here or Fujitsu or Toshiba or whatever it is that's going on, but it's just always met with such scepticism (R2 – P25: youth services/community health).

Finally, one or two people in each round mentioned that difficulty accessing health care services affected their sense of personal wellbeing.

5.6.3 What helps people deal with adverse events? (i.e., what do people draw on for their resilience?)

In both rounds of interviews, most participants said that they drew on different kinds of support to help them cope with adverse events, including their own personal traits, support from their family and/or friends, and connections through wider community networks. Local support services such as counselling or psychological support were mentioned by only a small number of people in each round, however, there were also some who acknowledged that they hadn't used this kind of support but would do if needed (see Figure 14).

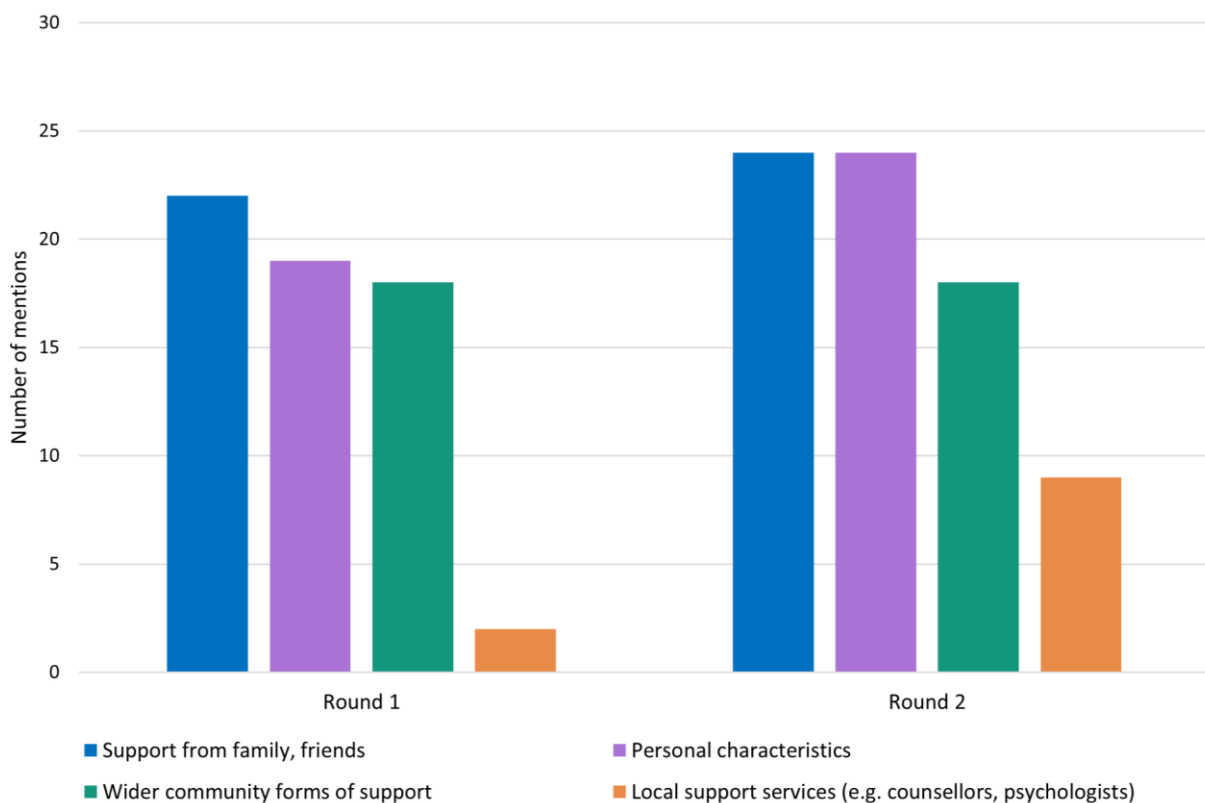


Figure 14: Types of support interviewees draw on to cope (Rounds 1 and 2)

Many interviewees in each round attributed some of their ability to cope with adverse events to their own personal characteristics and resources. Some mentioned innate qualities such as optimism, resilience, self-reliance, positivity, toughness and tenacity. They spoke about knowing how to read their own signals that they are not doing well and making use of self-care strategies that worked for them, such as exercise, massages, positive self-talk, spending time alone, hobbies, going to the gym or going out for a coffee. Limiting exposure to negative media content and being able to tune out negative commentary or criticism on social media were also mentioned by a couple of respondents in Round 1.

Support from their partner, family or friends was also very important to most interviewees in dealing with challenging times. Being around good people, debriefing with a partner, having friends that they can ring up and chat to, and knowing there are people in their life that they can count on are all sources of support. Beyond the social networks of family and friends, professional peers/colleagues provided an important support network, according to several of the participants in each round.

You know, my colleagues in equivalent positions whom I've mentioned a few times, we talk often, just have a small informal peer support network ... which is great. We bounce ideas off each other, things like that. (R1 – P9: community sport)

Conversely, one Indigenous participant mentioned that if her family members were not doing well, this affected her personal wellbeing:

Then I guess I also have that unique perspective of being Indigenous, a mob mind, I guess, of community wellbeing also linking into the wellbeing of my mum and my aunties. If they're not feeling well, then it sort of branches down into generational status, that sort of thing. Yeah. I don't know if that gets talked about much, though, Indigenous people, how the mob, if they're affected, everyone's affected. [It's a] cultural norm to accept that if your family has health issues, then you also carry the burden of that, I guess. (R2 – P34: young adult)

At the broader community level, having a sense of connection to, and familiarity with, the wider community provided a sense of security for many of our interviewees. Belonging to community groups, playing community sport or participating in community initiatives gave interviewees support through social connection. Some noted that these types of activities were also beneficial in giving a sense of purpose or a common purpose.

So, at that time [during COVID], I found there was no social connection, nothing for my kids to do. So, I was involved with the parent committees and the united district community associations, I put my hand up to organise an event, and so through that, I sort of found a bit of purpose. (R2 – P32: youth services)

I suppose running an organisation for the last 22 years, you're needed all the time, so you don't have time to think about anything. You're too busy, and I suppose that's part of your being. (R2 – P30: community/volunteer/advocacy group)

Having agency and being in a position to directly support the response to major events (through volunteering roles with the CFA or other organisations) helped numerous interviewees to cope with their impact.

So, I'm in the CFA as a way of me being able to go when there's a bushfire, I can do something, that I have some level of ability to influence. I think there's the professional aspect of that as well in my work. Especially in the committee team that I work in, we respond to this stuff. COVID happens, we go, okay, our community needs something, what are we going to do? Okay, we're going to set up a helpline, so I think that sense of agency and ownership and power – ultimately, it's power to do something. (R1 – P18: local government)

Some interviewees also noted the importance of being able to access accurate and transparent information (e.g., on COVID-19) through government channels. This theme was more prominent in Round 1, which took place in 2020-2021 when the COVID-19 pandemic was a recent (and ongoing) event. Conversely, if this type of information was not available, it had a negative impact.

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Finally, a couple of participants in Round 2 offered important insights into the resilience that can be gained through a community's collective experience of a disaster. One young participant argued that there was a sense of power and strength gained through that shared experience.

I feel like when a community together goes through a traumatic experience or a natural disaster or anything like that, that's when real community comes together and that's when we really feel the power of a community and the power of how important it is (R2 – P38: young adult).

Another participant spoke about the value of talking through a shared experience of a traumatic event with others to gain alternative perspectives that can help you process your own narrative.

Another factor is that communal factor, so being with other people. It also helps you to contextualise your story as well sometimes, being with other people...If I've had this traumatic or I've had this experience, and it was really bad for me, but then you talk to other people who have had similar - because no one's experience is the same - but had a similar experience and they're okay with it, or they can contextualise it in a different way. You hear that, and it helps you reflect on your own experience (R2 – P18: local government)

6 Discussion

This section presents the key findings in this report, in order to answer the three key research questions (see Section 1.3). We summarise what community wellbeing means for the Latrobe Valley and explain which events since the HMF have affected community wellbeing, from the perspective of our interviewees. We discuss the factors perceived to have most influence on current and future wellbeing. Finally, we summarise what we have learnt from our interviewees about the relationship between community wellbeing and personal wellbeing.

6.1 What does strong community wellbeing look like for this community?

Community wellbeing is a concept that describes the way a community functions, sees itself and talks about itself. It has been defined as “the combination of social economic, environmental, cultural and political conditions identified by individuals and their communities as essential for them to flourish and fulfil their potential” (Wiseman & Brasher, 2008, p.358). As noted in the Findings section of this Report, it is important to take note of how a community defines its own wellbeing, as what constitutes wellbeing may differ between communities. Regional communities, in particular, have unique identities which affect what wellbeing looks like for each of them.

From the perspective of our interviewees, a strong community enjoying positive wellbeing would be one in which its members experience:

- *social connection*: have opportunities to connect with the community, and feel connected;
- *social, physical and mental wellbeing*: are happy and healthy, physically and mentally; and
- *engagement and participation*: are engaged with, and participating in, the community.

Other aspects supporting positive community wellbeing, according to our interviewees, are:

- feeling *included* not just socially but economically (“everyone having the opportunity to do well”);
- a sense of *satisfaction with life*;
- feeling *safe*;
- having a *voice*;
- *resilience and empowerment*;
- *respect and care* for others;
- *pride of place*.

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These seven aspects support the three main themes of connection, social/physical/mental wellbeing, and engagement and participation, and are closely interwoven with them. Inclusion and feeling safe enable social connection, engagement and participation and also support social/physical/mental wellbeing. Having a voice and feeling heard enable engagement and participation and empower community members to address local problems and find local solutions. Being resilient and empowered comes from good social/physical/mental wellbeing and receiving support and care from others, which in turn enables engagement and participation, and social connection. Showing respect and care for others assists in bringing a community together and bridging division and inequality. It facilitates social connection and enables support of others' social, physical and mental wellbeing. Having pride of place is linked to a strong local identity, and supports connection, engagement and participation, and social/physical/mental wellbeing.

As noted in the literature review, community identity and a sense of belonging (including pride of place) promote resilience. Community wellbeing, as defined by our interviewees, has a strong emphasis on those aspects that can empower this community to reconstruct its collective identity, thereby becoming more resilient (Miles, 2015). Values such as respect and care for others and having a voice reflect their aspirations for overcoming division and disadvantage. Collectively these aspects represent the community's aspirations for wellbeing as it navigates the challenges of transition towards net-zero and recovery from multiple adverse events. The following discussion reports against the key themes (*italicised*) in the lists above.

6.2 Current state of community wellbeing in the Latrobe Valley in 2020-2023

How does the community match up to its own description of what would constitute strong community wellbeing? Based on our interview analysis, subjective assessments of community wellbeing in the Latrobe Valley varied, reflecting the diversity within this community. The variability in wellbeing within the community was attributed by several of our interviewees to what they described as "pockets of socioeconomic disadvantage". The number of people who gave a positive assessment of community wellbeing declined between Rounds 1 and 2, while those who gave a negative assessment increased. However, most interviewees in both rounds referred to both positive and negative factors in giving their overall assessment, indicating that even when community wellbeing was in need of improvement, both strengths and vulnerabilities were present.

While many in the community are doing well, some are experiencing considerable hardships. Those within the community experiencing severe socioeconomic disadvantage are often living with mental health issues, drug and alcohol abuse, domestic violence, food insecurity and housing insecurity. They struggle to meet day-to-day needs and have little capacity to engage and participate in community activities. This group is frequently described as lacking a voice, "hard to reach" or as one interviewee prefers to describe them, as "the hardly reached and the unheard" (R2 – P2: social and community services). Their socioeconomic disadvantage not only has adverse impacts on social/physical/mental wellbeing but also on social connection.

Social connection is also impacted by other forms of division within the Latrobe Valley community, including divisions between the towns, between different age groups, and between those whose families have lived in the area for generations, and those who have recently moved to live in the area. The social isolation caused by the COVID-19 pandemic has had ongoing effects on social connection for older people still hesitant to resume group activities or return to participating in clubs and community organisations. Those with pre-existing health conditions have similar concerns. Social connection is also affected by increased concerns about *safety* in public spaces, an often-repeated theme.

Aspects of *social, physical and mental wellbeing* were raised frequently as concerns in interviews. Physical and mental ill health and social problems such as drug and alcohol abuse, rates of children in out-of-home care, and rates of domestic violence in the community were raised as issues needing to be addressed through better service provision as well as primary interventions. On a more positive note, interviewees spoke of an increase in grassroots community support for vulnerable members of the community and a "revival of caring" within the community (which some attributed to the experience of COVID-19 when people looked out for their neighbours).

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These claims of increased *care for others* indicate this is one of the community's strengths in relation to community wellbeing.

Inclusion was flagged as an issue in some interviewees, with one criticism being that there are entrenched conservative views both within the general community and from some healthcare providers. These particularly impact on feelings of inclusion and safety for those from different cultural, ethnic or religious groups and for LGBTIQ+ community members. Women and LGBTIQ+ people do not always feel *safe* or *included*, and this also hinders social connection. More positively, local grassroots organisations (e.g., Youth Space, the Gippsland Pride Initiative, Morwell Neighbourhood House) are working to promote *respect*, change attitudes and run inclusive events and services.

Engagement and participation are key to community wellbeing for this community, and this was often expressed in terms of the community *having a voice*. A repeated theme in interviews was that this community had found its voice (or voices) since the HMF. Interviewees argued that people were feeling seen and heard, *empowering* them to work together and have their say on decisions affecting them. However, not everyone agreed that the community was listened to on certain issues and some felt that, too often, the community was overruled by government (e.g., the lead acid battery recycling plant proposal). More negatively, some felt that prior distrust in government, already exacerbated by the way the mine fire was managed (Yell & Duffy, 2017), was increasing. Some attributed this to a rise in misinformation during the COVID-19 pandemic.

Finally, returning to the divisions in the community, our interviewees noted the divisions evident around the transition away from coal, although some felt that community members were becoming more open to talking about transition. The power industry was seen as a source of the region's "conflicted self-identity". While it has brought economic prosperity for some, the economic benefits have been uneven, and there is increasing awareness of the health costs. The transition is seen by some as a catalyst for the community developing *resilience*, "reinventing" its identity and creating a "new narrative", in which economics is not prioritised over health. This new narrative would be a necessary element in fostering *pride of place*. New sporting and cultural infrastructure and the beautification of Morwell were also cited as helping to improve community pride.

6.3 How has the community's wellbeing and recovery from the HMF been impacted by subsequent events? [research question 1]

Major events since the HMF, as identified in our interviews, have had both positive and negative effects on the community's wellbeing and recovery. Events perceived to have had mainly negative impacts include:

- Hazelwood Power Station closure, 750 direct job losses and 350 indirect job losses (2017); its demolition in 2020.
- Closure of local sawmill, loss of 160 jobs (2017).
- Natural disasters, including the Yinnar bushfires (2019), smoke from the Black Summer fires (2019-2020), widespread flooding across the Latrobe Valley (2021).
- COVID-19 pandemic (2020-2023).
- Lead acid battery recycling plant approved (2020).
- Australian Paper Mill ceased white paper production, loss of 200 jobs (2022-2023).

These events were primarily seen as adversely impacting the local economy or the health and safety of the community. In addition, some of these events have been polarising for the community, welcomed by some and not others. For example, some saw the closure of the Hazelwood Power Station as the necessary first step towards a healthier and greener future, while others were directly affected by the job losses, or experienced the closure as a blow to the Valley's proud history in powering the State. Similarly, some welcomed the proposed lead battery recycling plant as a new employer, while others organised to lobby against it on the grounds of health concerns, rejecting the perceived external view of the Latrobe Valley as a "dumping ground" for "another dirty industry".

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According to some interviewees, the economic impacts of Hazelwood’s closure were not as severe as expected, while nevertheless raising much “anticipatory anxiety”. This also related to the impending closure of the remaining power stations in the Valley and transition more generally.

Interviewees did, however, stress that the community was experiencing fatigue from repeated adverse events. Some suggested this was building community *resilience*; for example, having gone through the closure of Hazelwood, the community was better prepared to navigate future power station closures.

Events perceived to have had mostly positive impacts included:

- \$266 million state government funding package, establishment of Latrobe Valley Authority (2016).
- Designation of Latrobe as a Health Innovation Zone, establishment of Latrobe Health Assembly (2016).
- Appointment of Latrobe Health Advocate (2018).
- \$85 million (of \$266 million) allocated to fund the Latrobe Sports and Community Initiative, including Gippsland Regional Aquatic Centre (announced 2017, Aquatic Centre opened in 2021).
- Latrobe Youth Space established (2018).
- Latrobe City’s Future Morwell streetscape upgrade (2018-2020).
- Gippsland Pride Initiative formed (2019).
- Rose Garden Festival (online in 2020, then resumed as a face-to-face event 2021).
- Gippsland announced as one of the regional hosts for the Commonwealth Games (2022) [subsequently cancelled].
- State Government announced it would bring back the SEC (2023).

While most of these initiatives were regarded positively, some expressed scepticism or uncertainty about the value of some of the new structures designed to support the economy (Latrobe Valley Authority) or health (Latrobe Health Innovation Zone, Latrobe Health Assembly, Latrobe Health Advocate) of the community. Some mentioned accessibility concerns related to new sports infrastructure. Overall, most initiatives were seen as beneficial, especially those local grass-roots initiatives (Gippsland Pride, International Rose Garden Festival, Youth Space) and there was recognition of the increased collaboration between the new structures, local government and other service providers. It remains to be seen whether changes that have occurred since the interviews were completed, such as the loss of the Advocate role and of the Latrobe Valley Authority as a distinct entity, and the cancellation of the Commonwealth Games, will impact the positive momentum towards community wellbeing in Latrobe.

6.4 What factors are indicative of current and future changes in community wellbeing? [research question 2]

We put the following list of domains to our interviewees, who confirmed them as factors underpinning community wellbeing:

- health;
- the economy;
- the environment;
- services and infrastructure; and
- social connection.

When we asked interviewees which factors were impacting on community wellbeing, these domains were evident as themes in their responses. In addition, there were two overarching themes, relating to the COVID-19 pandemic and the transition away from coal. The impacts of both these overarching themes were experienced across multiple domains with mainly negative consequences, but also some positives were seen to be emerging. The *pandemic* negatively impacted physical and mental health, the economy, services, education, social connection and trust in government. Its impacts were experienced unevenly, with disadvantaged groups suffering the most. Of interest is that our companion report on the Community Wellbeing Barometer (Morgan et al., 2024) does not show a worsening of the economic indicators during the COVID-19 pandemic, which indicates that subjective perceptions of community wellbeing and objective economic data may not always correspond, and the insights from qualitative research may be needed to provide a more complete picture, especially in relation to variations across sub-groups in a community.

The negative impacts of *transition* to net-zero on community wellbeing related to the economy, mental health, engagement and participation, identity and pride of place, and trust (loss of trust in government). However, there was a sense that transition does provide positive opportunities for the Latrobe Valley in terms of the potential for a new economic basis for future prosperity. Some interviewees saw positive signs for the economy, new forms of identity and pride, and conversations providing a basis for participation in the future direction of the Valley.

The *environment* did not feature prominently in interviews as a factor influencing community wellbeing, apart from the ongoing tension between the need for new industries and the rejection of proposed “dirty industries” that pollute the environment and have a negative impact on health. While there was some discussion of the positive benefits of efforts to beautify towns through infrastructure development, the beauty of the natural environment only appeared as a theme in relation to personal wellbeing, and was not cited by interviewees as a positive factor in community wellbeing.

Health was recognised as a factor impacting community wellbeing in this region, with interviewees citing adverse health statistics and noting the need to work on specific public health challenges (e.g., child nutrition) and improve the inclusiveness of health services. *Mental health* was a distinct sub-theme of health, adversely affected by both the COVID-19 pandemic and the transition, but where positive work was being done, including important community conversations about mental health.

Services and infrastructure attracted a lot of commentary, both positive and negative. Providing appropriate and inclusive health and social services was seen as an important factor in improving wellbeing, while other types of infrastructure (sporting and cultural) were seen as positive drivers of pride of place. Challenges noted were achieving ‘joined-up’ services, increasing collaboration and addressing shortages of services in key areas such as family violence, GPs, aged care and quality mental health professionals.

Social connections featured very prominently in the discussion of factors impacting community wellbeing. Our interviewees perceived many social issues (family violence, drug use, poverty, intergenerational disadvantage) impacting negatively on social connection in the community, as well as noting positive work that is improving social connection. Perceived challenges include a history of dependency (on the SEC and on government services), social divisions and parochialism, entrenched discriminatory attitudes impacting inclusivity, and a rise in public anti-social behaviour leading to safety concerns. More positively, the Latrobe Valley is also seen as having a strong community spirit, opportunities to participate in many different community groups, a strong volunteer workforce and exceptional leaders in service organisations. These individuals and groups are involved in grassroots projects that are advocating for the community and are running events that inspire pride and facilitate connection.

6.5 What is the relationship between community wellbeing and personal wellbeing? [research question 3]

Events affecting the broader community (such as the HMF) affected most of our interviewees as individuals, specifically in terms of their attachment to place. More than half said the mine fire affected the way they felt about living in the Valley. Whether this was a positive or negative influence varied; for some it increased their

concern about the impacts on their health of living in the Latrobe Valley, while others said it increased their commitment to living in the region. Those who had lived in the Valley for a longer period were more philosophical about the risks of living near potentially polluting coalmines, and less likely to say the mine fire had affected their personal wellbeing. An increased awareness of (and in some cases, participation in) activism and advocacy around social and environmental issues contributed positively to our interviewees' sense of belonging. Based on shifts between Round 1 and Round 2 interviews, the negative influence of the event on personal wellbeing is decreasing over time while its positive effects are increasing. These findings indicate a level of posttraumatic growth in the community since the HMF, which is consistent with the findings of the Psychological Impacts Stream's research (Carroll, Campbell, Gao et al., 2024).

Our interviewees acknowledged that various characteristics of the community impacted on their personal wellbeing. Most of our interviewees expressed both beneficial and adverse impacts, with beneficial impacts outnumbering the adverse ones. Strong social connections, the qualities of other people within the community (i.e., friendliness, authenticity, diversity and community spirit), and the beautiful natural environment in the region all contributed positively to personal wellbeing. On the other hand, our interviewees stated that their personal wellbeing was affected by negative aspects of this community, particularly wider social problems, the uncertain economic outlook, and community attitudes and behaviour (such as those impacting a sense of personal safety or feeling included). These positive and negative influences on personal wellbeing were similar to the factors impacting community wellbeing, suggesting that improvements in these areas will have benefits both at the personal and community level.

When coping with adverse events like the mine fire, COVID-19 or bushfires, our interviewees drew on various sources of support. Resilience came from within the individual (their own personal qualities such as optimism, tenacity and self-reliance) as well as from their own self-care strategies. Support from their family, social circle or work colleagues was also a source of strength for many. Many also gained a sense of security from their connection to, and familiarity with, the wider community. Participation in community sport or other activities with a communal goal, having agency and doing volunteer work supporting disaster response, were also noted as important. Only a few interviewees identified professional mental health services as a resource they drew upon. One participant made the point that when a community shares a traumatic experience (e.g., a natural disaster) this forms a powerful bond that brings the community together. While participants varied in whether their source of resilience was mainly personal, mainly drawn from their intimate social circle, or came from the broader community, more than half nominated community connections or activities as contributing to their resilience in coping with adverse events.

The relationship between personal wellbeing and community wellbeing is complex. Personal wellbeing and community wellbeing were strongly linked for some individuals in our study but less so for others. How well a community is doing can impact individual wellbeing beneficially or adversely or not at all. Community wellbeing domains that most impacted personal wellbeing (whether positively or negatively) were:

- the economy (e.g., concerns about transition, the lack of a vibrant local economy);
- the environment (e.g., fears regarding pollution, appreciation of the ability to access beautiful natural places);
- services (e.g., poor access to health services) and infrastructure (e.g. excellent sporting and cultural facilities); and
- social connections (e.g. social problems in the community and negative social attitudes, but also friendliness, community spirit, pride of place).

Our interviewees told us that experiencing a local disaster such as the mine fire can impact their health, lead to increased pride of place, or make no discernible difference to their wellbeing. If the community is not doing well socially or economically, this can impact individual wellbeing for some, particularly feelings of connection, safety

and inclusion. On the other hand, community attributes like positive social connections, the friendliness of the community, and the natural environment supported individual wellbeing. However, individuals did draw some of their resources for dealing with adverse events from the community, and for some the shared community experience of supporting one another through a traumatic event contributed to a strong bond and enhanced their resilience.

6.6 What is the future wellbeing of this community?

As discussed above, the majority of our interviewees said, at the time of interviewing, that community wellbeing in the Latrobe Valley varied. Approximately a third said it was 'not good' and a smaller number said it was either 'OK' or 'improving'.

When we asked our interviewees whether they expected it to improve, the majority felt that it would, about a third were uncertain, and a minority expected it to worsen. There was little change between rounds 1 and 2 in the proportions of those who were optimistic, pessimistic or uncertain about future community wellbeing. Although their predictions for the future varied, there was considerable commonality in their discussion of the conditions necessary for improving future wellbeing, including both challenges and opportunities.

Some of the challenges included community divisions, inequality and a lack of trust in government, as well as the need to address intergenerational poverty and trauma in some sections of the community. Improving employment opportunities (especially for young people) and long-term investment in social services and healthcare initiatives were also seen as necessary to sustain improvements. There is an opportunity to build on current community strengths to build community capacity and improve resilience and social connection. Our interviewees stressed that there is currently valuable work being undertaken but ongoing funding and support is needed to maintain momentum. We expand on these points in the final section of this report.

7 Conclusion and recommendations

This research report, in conjunction with the companion report on the Latrobe Community Wellbeing Barometer, provides qualitative and quantitative evidence mapping community wellbeing in the Latrobe Valley. The evidence presented shows that all five domains of wellbeing – health, the economy, the environment, services and infrastructure, and social connections – interact together and all need to be supported to facilitate strong communities. It provides insights into the overarching strengths and capacities within the community that contribute to community wellbeing, which will be of value to local and state government in planning and allocating resources to further enhance these capacities.

7.1 Challenges and opportunities

In discussing community wellbeing in the Latrobe Valley, the focus is often on deficits and disadvantage. Our interviewees clearly articulated the challenges and opportunities they perceived in order to improve wellbeing for all in this community (and many are already involved in that work). The challenges include:

- short-term funding cycles;
- overcoming intergenerational trauma and disadvantage;
- recovering from the impacts of repeated adverse events;
- bringing together the disparate, disconnected and sometimes polarised groups within the community, including within and between the towns in the Latrobe Valley;
- inequality and unequal access to the resources that promote community wellbeing (health, economy, environment, services and infrastructure, social connections);
- ongoing economic, social and health impacts of the COVID-19 pandemic;

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- the “skills gap” and “brain drain”;
- negative external perceptions of this community; and
- levels of current mistrust in government and authorities.

Nevertheless, our interviewees also highlighted opportunities to build on existing strengths. These include:

- empowering the community to work together;
- encouraging citizen participation in decision-making;
- forging a new identity for the area in order to “change the narrative” and “reinvent ourselves as a community”;
- listening to local voices in order to generate local solutions for local problems;
- building on community strengths, such as friendliness, community spirit, the “revival of caring”, and pride of place;
- improving service provision through collaboration and through investment in human capital;
- planning and investment in primary health intervention;
- attracting new industries/employers while balancing the competing demands of the economy and health;
- promoting social inclusion and inclusivity, in services and in the wider community; and
- ensuring ongoing viability of organisations and projects with proven local impact.

We note that many of these opportunities, if acted upon, have potential benefits for supporting the wellbeing of individuals, by assisting in strengthening their capacity to participate in positive ways.

Exploring the relationship between individual and community wellbeing is of significance in better understanding how these two levels of wellbeing interact to promote overall wellbeing. This is particularly crucial in the context of the recent COVID-19 pandemic as it gives important insights into how communities rebuild their social fabric after crises. The collection of place-based data in a region experiencing significant social and economic disruption offers specific benefits for informing targeted and localised interventions while contributing important insights to the broader knowledge base of community wellbeing in vulnerable communities. Continuing to collect detailed data on community wellbeing in the Latrobe Valley needs to be a policy priority.

7.2 Implications

The Latrobe Valley has experienced multiple adverse events since the HMF, has a history of socioeconomic disadvantage and intergenerational trauma, and is facing challenges to its economic fabric and sociocultural identity as it transitions away from the coal-fired power industry. While there is evidence that the negative effects of the HMF on both community wellbeing and personal wellbeing are diminishing with time, it is also clear that other factors continue to underpin perceptions of poor wellbeing. Policy interventions are needed to assist this community in ongoing recovery and improvements to community wellbeing.

The following are key findings of this study with significant policy implications:

1. There is some evidence that government initiatives to assist with the HMF recovery and transition to net-zero (Hazelwood power station closure) have had beneficial impacts on community wellbeing.
2. There is deep awareness of the variability of community wellbeing due to “pockets of socioeconomic disadvantage” within the Latrobe Valley, and that this is a problem for the community overall to address. Key to addressing this inequality is a holistic view of community wellbeing in which the community, as a whole, is not doing well if some groups are not doing well.

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3. There is evidence of an increase in the community’s ability to voice its views to government and industry regarding its future. This is also indicated by the emergence of new community groups since the HMF which have advocated on specific issues or provided support for vulnerable groups (taking collective responsibility as in the second finding).
4. The negative impact on personal wellbeing of the HMF is decreasing with time. There is an increase in its positive impacts (such as a stronger commitment to the area related to positive changes in the community as a consequence of the HMF).

The above findings are suggestive of posttraumatic growth at both the individual level and at the level of the community.

7.3 Recommendations

Based on this report we recommend that:

1. The findings of this report be disseminated to the community, to stakeholders (including local government, health and transition authorities) and more widely to the relevant research and policy communities.
2. Further research be undertaken to unpack the variations between sub-groups within the Latrobe Valley, especially vulnerable communities, in order to ensure their voices are heard and their experiences are made visible.
3. Community wellbeing in the Latrobe Valley continues to be tracked (e.g., through interviews and the Community Wellbeing Barometer – outlined in our companion report, Morgan et. al, 2024) in order to ensure continuous learning and feedback about how to promote wellbeing, trust, pride and resilience in this community.
4. These findings be used to guide policy and program initiatives aimed at improving community wellbeing after adverse events, and to inform strengths-based approaches to supporting community resilience.

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9 Appendix - Factors impacting community wellbeing, grouped by theme

Theme	Round 1 (2020-2021)		Round 2 (2023)	
	Negative impacts	Positive impacts	Negative impacts	Positive impacts
COVID-19 pandemic	<ul style="list-style-type: none"> • Equity (disproportionate impact on disadvantaged people, those from diverse backgrounds/disabilities) • Economic (impact on small businesses) • Mental health (psychosocial impacts, loneliness, social isolation) • Social connection (loss of community events, fear of catching the virus, uncertainty about the future, disrupted sense of normality) • Services (increased demand for domestic violence, mental health services) 	<ul style="list-style-type: none"> • Social connection (increased neighbourliness, learnt to work and socialise differently, online) • Resilience (increased, for some people) • Health (greater focus on mental wellbeing and physical health) • Economy/Health (tension between them well managed, economic development not prioritised over health) • Services (opportunities for organisations to build stronger partnerships) • Work/economy (COVID-19 showed professionals can work flexibly from the regions) 	<ul style="list-style-type: none"> • Mental health (anxiety, depression) • Physical health (illness, mortality) • Social disconnection and disengagement (esp. from school) • Economic (unstable work, impact on businesses, tourism) • Services (demands on health system) • Equity (disproportionate impact on disadvantaged people) • Education (social and developmental delays) • Trust (rise in distrust in government, 'alternative' beliefs) 	<ul style="list-style-type: none"> • Health policies (prioritising health, making people feel they were looked after) • Services (increased inter-agency cooperation) • Social connection (new ways of maintaining connection through online/social media; rise in community spirit) • Work/economy (positive changes made building on experience of flexible work)
Transition away from coal-based power generation	<ul style="list-style-type: none"> • Economy (uncertainty and fear about the future, unemployment, job losses and loss of high-paying jobs) • Mental health (uncertainty and fear about the future) • Trust (loss of trust in government – decisions made out of the control of the community) 	<ul style="list-style-type: none"> • Hope re the possible renewable energy future. • Pride that other mining communities transitioning away from coal want to learn from the Latrobe Valley's experience. 	<ul style="list-style-type: none"> • Economy (loss of employment, need for retraining, uncertainty and fear about the future, esp. for young people, uncertainty about renewable industries) • Trust (government promises about replacement industries are not eventuating) • Engagement/participation (not everyone knows what's happening or is included in the conversation about transition) • Pride/identity (government decision to bring forward closure of other power stations will impact identity, morale, culture, pride of place) 	<ul style="list-style-type: none"> • Economy (push to make the Valley a centre for renewable energy is positive, there are opportunities with energy investment in the region – but will the benefit flow to the broader community?) • Engagement/participation (the community has mostly accepted that transition is happening)

Theme	Round 1 (2020-2021)		Round 2 (2023)	
	Negative impacts	Positive impacts	Negative impacts	Positive impacts
Economy	<ul style="list-style-type: none"> Lack of work and employment opportunities (esp. after closure of Hazelwood & other large employers) Proposals for new industries/employers that haven't gone ahead Skills gap and 'brain drain' (loss of 'bright kids' to Melbourne, difficulty attracting graduates to region) Empty shops – lack of vibrant local economy Food insecurity Housing/rental shortage 	<ul style="list-style-type: none"> New employment opportunities (200 jobs) with new call centre in Morwell 	<ul style="list-style-type: none"> People still living with the legacy of privatisation of the SEC Lack of investment in human capital Cost of living stress Unemployment and under-employment 	<ul style="list-style-type: none"> Government investment in infrastructure and jobs (but mostly benefiting those already getting such opportunities). Job losses from industry closures have not had the feared catastrophic impacts, some new businesses have opened. Optimism around Commonwealth Games announcement [cancellation not yet announced at time of interviews].
Environment	<ul style="list-style-type: none"> Ongoing issues with dirty industries, pollution (Hazelwood lead acid battery recycling plant, Maryvale paper mill) Need for evidence-based information about risks Smoke from Black Summer bushfires was triggering (mental health) 		<ul style="list-style-type: none"> Fires and floods 	
Health	<ul style="list-style-type: none"> High burden of chronic illness Poor health statistics in the region Poor child nutrition HHS asthma finding didn't reflect community's experience 		<ul style="list-style-type: none"> Work needed to improve children's nutrition (impact of cost of living stress on this). Vaping an increasing problem. 	
Mental health	<ul style="list-style-type: none"> Fatigue from repeated adverse events/disasters Compounded by insecurity re the energy transition 	<ul style="list-style-type: none"> Starting to talk more about mental health. Good work being done in youth mental health. Strong in-person community engagement. 	<ul style="list-style-type: none"> Continual narrative about mental health is keeping people stuck in this space Cluster of suicides in the Aboriginal community Increase in young people with suicidal ideation or who are self-harming 	

Theme	Round 1 (2020-2021)		Round 2 (2023)	
	Negative impacts	Positive impacts	Negative impacts	Positive impacts
Services and infrastructure	<ul style="list-style-type: none"> • Over-investment in facilities and infrastructure not matched by investment in social capital (programs and people). • Lack of coordination and integration between different organisations. • Complex service arrangements. 	<ul style="list-style-type: none"> • Health Assembly, Latrobe Valley Authority, Health Advocate and Youth Space getting community's ideas off the ground, leading to increased innovation and action. 	<ul style="list-style-type: none"> • Shortage of housing and crisis accommodation. • Funding insecurity on programs in the not-for-profit sector. • Short-term funding for long-term problems. • Shortage of GPs, lack of continuity of care. • Not enough aged care, quality of care decreasing. • Health services are disconnected, gatekeeping is inhibiting access • Services (esp. healthcare) are not meeting the needs of the community (esp. for LGBTIQ+ and multicultural communities) • Shortage of good quality mental health support. • Not enough services for family violence. • Job security and retention is an issue for the services. 	<ul style="list-style-type: none"> • Koori Court working well. • Some good programs for youth. • Formation of a Suicide Prevention network for the Gippsland Aboriginal community. • Positive impacts of new infrastructure (aquatic centre, performing arts centre, cricket centre, Moe library). • Growth and change in the health services, including Latrobe Regional Hospital. • State government is investing in programs to tackle inequality.
Social issues and social connections	<ul style="list-style-type: none"> • Social issues (unemployment, family violence, drug use, poverty, intergenerational disadvantage). • Longstanding history of social inequity. • Media reporting of recent family violence deaths • Increase in children reporting sexual violence, family violence. • History of dependency (on SEC) and on govt services and welfare. • Town-based parochialism 	<ul style="list-style-type: none"> • Community events which inspire pride and create opportunities to connect. • Lots of community groups (social connection, participation). • Exceptional people who are community workers and leaders in service organisations (asset to the region). • Existing organisations with trusted relationships with the community. 	<ul style="list-style-type: none"> • Lack of investment in human capital ('soft infrastructure'). • Schools experiencing problems such as disengagement, non-attendance, rise in inappropriate social media use. • Social issues (drug use, family violence). • Lack of things to do for young people, leading to involvement in drugs, anti-social behaviour. • Concerns about diversity, safety of women and LGBTIQ+ community. 	<ul style="list-style-type: none"> • Positive work on gender being done by Gippsland Pride – improving safety an inclusion for all. • More effort is being put into social events and initiatives like the Rose Garden festival and the Traralgon food truck festivals. • Active community organisations and a strong volunteer workforce. • Work being done by the environmental movement to build communities.

Theme	Round 1 (2020-2021)		Round 2 (2023)	
	Negative impacts	Positive impacts	Negative impacts	Positive impacts
	<ul style="list-style-type: none"> Entrenched attitudes (around diversity, racism) and resistance to change. Lack of inclusivity or understanding of cultural difference, people with disabilities, LGBTIQ+ communities. 	<ul style="list-style-type: none"> Increased sense of agency after the mine fire. Grassroots groups have emerged that can advocate for the community. Experience of repeated adverse events has built resilience (alongside negative impacts/fatigue). 	<ul style="list-style-type: none"> Lack of attention to stigma – inhibits social inclusion. Perception of a high crime rate, lack of a sense of safety on the streets due to anti-social behaviour, public drinking, visible homelessness. Visible homeless also has negative impacts on pride of place. Perceived low aspirations of low SES demographic. Financial pressures impact on young people's ability to afford to socialise. 	