

LGBTIQ+ SUICIDE PREVENTION TRIAL

Community Wellness Grants I

Evaluation Report



Disclaimer

Impact Co. is committed to delivering quality service to its clients and makes every attempt to ensure accuracy and currency of the data contained in this document. However, changes in circumstances during and after time of publication may impact the reliability of the information provided.

ACKNOWLEDGEMENT

We wish to acknowledge Aboriginal and Torres Strait Islander Peoples as Traditional Custodians of the lands, waters and winds across Australia and pay our respects to Elders past and present, and emerging young leaders.

We acknowledge the sorrow of the Stolen Generations and the impact of colonisation on Aboriginal and Torres Strait Islander Peoples. We recognise the ongoing pain and trauma inflicted to this day on Aboriginal and Torres Strait Islander Peoples.

We also would like to pay our respects to those amongst the Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and other gender and sexually diverse communities who have contributed towards promoting equality and improving the health and wellbeing of their peers, children, families, friends, and Country. We honour the Elders in the diverse communities of which we are a part of and we celebrate the extraordinary diversity of people's bodies, genders, sexualities, relationships and other forms of identities that they represent.

Finally, we would like to acknowledge and recognise the contributions from individuals and communities who have generously shared their lived experience, knowledge, and wisdom to inform this evaluation.



TABLE OF CONTENTS

Acknowledgement	3
Table Of Contents	4
Glossary of Terms	5
Executive Summary	8
1. Purpose	12
2. Context	12
3. Trial Overview	15
3. Grant Program Overview	18
4. Evaluation Methodology	20
5. Learn To Skate: Rainbow Series	23
6. Best Day Worst Day Podcast	31
7. Consultation With LGBTIQ+ Communities And Stakeholders	37
8. Building Affirmative Healthcare For LGBTIQ Community Members	43
9. LGBTIQ+ Youth Peer-Led Scoping Project	50
10. Queer Refuge	56
11. Visual Arts Program	62
12. Recommendations	67
Appendix A: Learn To Skate Program	71
Appendix B: Best Day Worst Day Podcast	76
Appendix C: Consultation With LGBTIQ+ Communities And Stakeholders	81
Appendix D: Building Affirmative Healthcare For LGBTIQ Community Members	86
Appendix E: LGBTIQ+ Youth Peer-Led Scoping Project	94
Appendix F: Queer Refuge	99
Appendix G: Visual Arts Program	104

GLOSSARY OF TERMS

Bisexual	A person who is romantically and or/sexually attracted to more than one sex or gender. Sometimes termed multi-gender attraction.
Gay	A person who primarily experiences romantic and/or sexual attraction to people of the same sex and/or gender. Historically gay has been a term used to describe men who are attracted to other men, but some women and gender-diverse people choose to describe themselves as gay.
Gender identity	One's personal sense of their own gender. The physical features one is born with (sex assigned at birth) does not necessarily define their gender. Gender is complex and there are a diverse range of gender identities.
Intersectionality	Intersectionality is a framework that recognises the multi-dimensional nature of human existence. It recognises that people can have multiple, co-existing identities that shape how they perceive and relate with the world around them and at its core, fosters inclusion and promotes diversity. ¹
Intersex	People who are born with a broad range of physical or biological sex characteristics that do not fit medical norms determined for female and male bodies. There are many different variations of sex characteristics, for some these include chromosomes, hormones and anatomy. There are many different terms used by individuals that help to describe their identities and bodies.
Lesbian	A woman who primarily experiences romantic and/or sexual attraction to other women.
LGBTIQ+	Abbreviation of Lesbian, Gay, Bisexual, Transgender, Intersex, Queer and other gender and sexually diverse individuals. Other acronyms such LGBTIQ and LGBTIQA+ are used throughout this evaluation with the same intent where it forms part of the name of an organisation, service or resource.

¹ Reynolds V. Intersectionality [Internet]. Intersect; 2010. Available from: http://www.lgbtiqintersect.org.au/learning-modules/intersectionality/

Mental ill- health/mental illness	A clinically diagnosed health problem affects how a person feels, thinks, behaves, and interacts with other people
Peer support	Peer support refers to support that is delivered based on shared lived experience to provide care and support others. Peer workers in the mental health space can use their own experiences of mental illness and recovery to engage and support people accessing mental health care. In the context of peer LGBTIQ+ workers, the specific experiences that one can have due to their sexuality and/or gender identity can help to provide a safer, more open environment for other LGBTIQ+ individuals. Due to these common life experiences, peer workers can foster authenticity, safety, advocacy, inclusion and community within their work.
Postvention	Activities and intervention related to supporting and helping people bereaved by suicide. This may include counselling, support groups, support from medical professionals etc. This aims to reduce the heightened risk of those bereaved by suicide and promote healing.
Queer	A term to broadly describe diverse gender identities and sexual orientations, particularly where someone feels other terms do not fully encapsulate all parts of their own gender and/or sexual identity. In the past 'queer' was used as a derisive term and for some, particularly among older LGBTIQA+ people, may still conjure hurtful associations.
Sexual orientation	Describes the romantic and/or sexual attraction that a person feels toward other people.
Suicidal ideation	A state of extreme anxiety or pain in which a person is seriously contemplating or planning to end their life.

EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

The National Suicide Prevention Trial is a suicide prevention initiative funded by the Commonwealth Government across 12 different sites (referred to as 'trial sites') across Australia over a 4-year timeframe. Each of the trial sites are led by a local Primary Health Network (**PHN**) and aims to improve the current evidence base around effective suicide prevention strategies. The trial site led by North Western Melbourne PHN (**NWMPHN**) has now concluded and was focused on LGBTIQ+ communities in the North West of Melbourne. The trial site led by NWMPHN comprised of 8 individual interventions.

One of these interventions was the Community Wellbeing Grants (the **Grant Program**). The Grant Program – which was made up of seven separate projects (each being funded by a **Grant**) – aimed to achieve the following objectives:

- Encourage and promote intersectionality
- Build inclusive communities and strengthen community resilience
- Address stigma and discrimination
- Raise awareness of effective suicide prevention practices.

Impact Co. did not evaluate the Grant Program as a whole against the objectives listed above. Instead, these objectives informed the design of the seven project logics in collaboration with NWMPHN and each of the grant recipients. These project logics formed the basis of how each Grant was evaluated. Individual project logics are appended to this report.

Each of the grant recipient organisations and their corresponding Grant is described below:

- 1. Learn to Skate: Rainbow Series (delivered by the Victorian Roller Derby League)
- 2. Best Day Worst Day Podcast (delivered by Sam Elkin)
- **3.** Consultation with LGBTIQ+ Communities and Stakeholders (delivered by Jesuit Social Services)
- **4.** Building Affirmative Healthcare for LGBTIQ Community Members (delivered by Sunbury Cobaw Community Health Services)
- **5.** LGBTIQ+ Youth Peer-led Scoping Project (delivered by Orygen headspace locations in Glenroy, Sunshine and Werribee which were evaluated together)
- 6. Queer Refuge (delivered by Bridgemeals)
- 7. Visual Arts Program (St Vincent Mental Health)

The Grants were delivered during the end of 2020, and early 2021, and each Grant was required to navigate the challenges that COVID-19 brought with it. Despite these challenges, the Grants reached a wide number of people from a range of backgrounds:



Table 1 - Program Impact

This report brings together the separate evaluations of each Grant, informed by a range of inputs, including surveys, interviews and data provided to Impact Co.

Evaluation findings

Impact Co. was engaged to undertake an evaluation of each of the Grants. This evaluation (which was conducted June to July 2021) identified that the Grants had varying levels of impact and uptake from members of LGBTIQ+ communities. Each evaluation section within this report contains insights on a per-Grant basis. For more information, please see sections **5-11**.

The key insights observed across the seven different Grants are set out below:

- Community participation in individual Grants varied considerably, driven largely by the existing networks and reach of individual organisations. Whilst the Learn to Skate program was well attended, a number of other programs including the Visual Arts Programs and LGBTIQ+ Youth Peer-led Scoping Project reported low participation. The challenges relating to attendance and the importance of leveraging existing networks to maximise attendance and engagement in activities is discussed throughout this report.
- COVID-19 and other challenges required the content and approach of some Grants to be adapted, particularly for in-person, non-clinical environments. Grant recipients were able to re-direct funds, or amend timelines, to ensure value was provided to the target communities. Whilst variance from intended project plans in some cases meant that some Grants moved away from their intended objectives, the Program as a whole was reported to be a welcome funding stream at a time which was particularly challenging for small community-led organisations. In the context of the changes required to the Grants as a result of COVID-19, most of the Grant recipients reflected that NWMPHN was a flexible partner that supported activities to be tailored to meet the needs of the target communities.
- Not all of the Grants delivered outcomes against all Trial-wide objectives, or the objectives of the Grant Program. For example, the Roller derby did not directly raise awareness of mental health challenges; and survey respondents reported that the Peer-led Scoping Project did not enhance mental health of CALD people, or increased understanding of how to deliver supports to them.
- The long-term impact of the Grant Program is unclear given its short-lived nature and the limited funding envelopes allocated to each of the Grants. However, NWMPHN has reported that it has aligned some of the Grant Recipients and projects to its Strategic Framework, portfolio areas, and broader network to connect LGBTIQ+ and CALD communities to healthcare providers. As a result, there is an indication that there may be further positive outcomes that will emerge in the future as a result of the Grant Program. These, however, could not be evaluated during this evaluation.

Evaluation recommendations

The key recommendations of this evaluation are summarised below

- 1. Support and supplement the networks of smaller organisations to maximise reach and impact of individual Grants and the Trial as a whole
- 2. Partner with commissioned organisations (particularly smaller organisations) to address capacity and capability limitations (e.g., in project management, communications or evaluations)
- 3. Ensure objectives are achievable and measurable to ensure the full value of the program is delivered for all parties

The recommendations are detailed further in Section 12 of this document.

INTRODUCTION

1. PURPOSE

The purpose of this document is to outline the evaluation findings and recommendations for future consideration from Impact Co.'s evaluation of the Grant Program. The Grant Program was delivered by a range of organisations (and individuals) (**Grant Recipients**), each delivering their own projects as part of the Lesbian, Gay, Bisexual, Transgender, Intersex and Queer (**LGBTIQ+**) Suicide Prevention Trial (the **Trial**) being implemented by the NWMPHN.

2. CONTEXT

LGBTIQ+ people are at a higher risk of self-harm and suicidality compared to the general population.² There are significant limitations that exist in Australia to determine how many LGBTIQ+ people die by suicide each year. However, a large survey of Trans and Gender Diverse (**TGD**) young people in Australia, aged 14-25, found that almost half (48.1%) had attempted suicide and 79.7% had self-harmed.³ This compares to a rate of attempted suicide within the general population of approximately 3.6%.⁴ In addition, recently published data from the US reports that LGBTIQ+ young people aged 12-29 accounted for 24% of all people nationally who died by suicide.⁵ This rate is more than seven times the estimated proportion of the population who are LGBTIQ+ in the US. These rates have been attributed to everyday and systemic and institutionalised experiences of discrimination, violence and harassment.^{6,7,8,9} The higher rates of suicide among LGBTIQ+ communities discussed above is exacerbated by a higher prevalence of mental ill-health and psychological distress. According to the Private Lives 3 survey, bisexual and pansexual participants had poorer mental health and higher levels of psychological distress compared to lesbian or gay participants. Conversely, cis-gendered participants had overall better mental health than those who identify as trans or non-binary.¹⁰

Having a sexual orientation, gender identity or intersex status that goes beyond the cis-gendered and heteronormative narrative in itself is not a risk of suicide or poorer mental health.¹¹ The drivers

² QLife. Suicide prevention: A QLife guide for health professionals [Internet]. Suicide prevention and LGBTI people. Available from: https://qlife.org.au/uploads/17-Suicide-Prevention.pdf

³ Strauss P, Cook A, Winter S, Watson V, Wright Toussaint D, Lin A. Associations Between Negative Life Experiences and the Mental Health of Trans and Gender Diverse Young People in Australia: Findings from Trans Pathways. Psychol Med. 2019:1-10.

⁴ Johnston AK, Pirkis JE, Burgess PM. Suicidal Thoughts and Behaviours Among Australian Adults: Findings from the 2007 National Survey of Mental Health and Wellbeing. Australian & New Zealand Journal of Psychiatry. 2009;43(7):635-43.

⁵ Ream GL. What's Unique About Lesbian, Gay, Bisexual, and Transgender (LGBT) Youth and Young Adult Suicides? Findings From the National Violent Death Reporting System. J Adolesc Health. 2019;64(5):602-7.

⁶ Leonard W, Pitts M, Mitchell A, Lyons A, Smith A, Patel S, et al. Private Lives 2: The second national survey the health and wellbeing of GLBT Australians. Melbourne, VIC: Australian Research Centre in Sex, Health & Society & La Trobe University; 2012.

⁷ Leonard W, Lyons A, Bariola E. A Closer Look at Private Lives 2: Addressing the mental health and well-being of lesbian, gay, bisexual and transgender (LGBT) Australians. Melbourne, VIC: Australian Research Centre in Sex, Health & Society & La Trobe University; 2015.

⁸ Perales F. The health and wellbeing of Australian lesbian, gay and bisexual people: a systematic assessment using a longitudinal national sample. Aust N Z J Public Health. 2019;43(3):281-7.

⁹ Kay B. Lesbian, gay, bisexual, and transgender health issues, disparities, and information resources. Med Ref Serv Q. 2011;30(4):393-401.

¹⁰ Hill A, Bourne A, McNair R, Carman M, Lyons A. Private Lives 3 The health and wellbeing Of Lgbtiq People in Australia. Melbourne: La Trobe University; 2020.

¹¹ QLife. Suicide prevention: A QLife guide for health professionals [Internet]. Suicide prevention and LGBTI people. Available from: https://qlife.org.au/uploads/17-Suicide-Prevention.pdf

behind the increased risk relate to societal factors including stigma, prejudice, and discrimination.¹² In a healthcare setting, LGBTIQ+ people face significant barriers when accessing services, which may lead to delays in seeking medical help and decreased use of services. A recent mixed methods study was conducted by Australian Research Centre in Sex, Health and Society (ARCSHS) in partnership with Lifeline Australia to explore the needs of LGBTIQ+ people during a time of personal or mental health crisis. This research (which included 472 participants) highlighted key barriers to accessing safe crisis support services as well as counselling and mental health support services. These barriers primarily revolved around experiences of discrimination and perceptions of lack of safety, as a result of widespread 'heterosexism' that is common within healthcare practices.¹³ The environment (the institutional micro-climate) of mainstream healthcare delivery, where medical models of sex and gender prevail and assumptions regarding sexual orientation are founded on heteronormative paradigms, increase the reluctance of LGBTIQ+ patients to disclose their sexual or gender identities and reduce help-seeking behaviour.¹⁴ Consequently, failures to screen, diagnose and treat important medical problems may arise and the inhibition of providing whole-of-person care, in itself a form of discrimination, perpetuate the discrepancies in health outcomes and general wellbeing.¹⁵ Overall, mainstream medical services were the most frequently type of health service visited by LGBTIQ+ people.¹⁶ However, this type of service was associated with lowest proportions of people who felt that their sexual orientation or gender identity was 'very or extremely' respected. This was compared to other forms of health services including those that cater exclusively for LGBTIQ+ communities and mental health services. It is worth noting that the experience of discrimination and safety concerns varied substantially between different gender identities, sexual orientations and individuals with an intersex variation within LGBTIQ+ communities. Overall, gender identity was less respected in mainstream health services than sexual orientation; people who identified as transgender or intersex reported higher incidences of unconscious and unintentional bias and discrimination and fewer reports of acceptance.¹⁷

It is important to recognise that experiences of discrimination and lack of safety in healthcare settings, may also be influenced by other factors including (but not limited to) patient age, race, location, and whether they have a disability.¹⁸ Intersectionality is a framework that recognises the multi-dimensional nature of human existence.¹⁹ It recognises that people can have multiple, co-existing identities that shape how they perceive and relate with the world around them and at its core, fosters inclusion and promotes diversity. It allows for understanding that a person may

¹² QLife. Suicide prevention: A QLife guide for health professionals [Internet]. Suicide prevention and LGBTI people. Available from: https://qlife.org.au/uploads/17-Suicide-Prevention.pdf

¹³ Victorian Department of Health. Community health pride: A toolkit to support LGBTIQ+ inclusive practice in Victorian community health services. Melbourne: Victorian Government; 2021. Available from: https://www.vgls.vic.gov.au/client/en_AU/search/asset/1301510/0.

¹⁴ Gay and Lesbian Rights Lobby. In their own words: Lesbian, gay, bisexual, trans* and intersex Australians speak about discrimination. Department of Prime Minister and Cabinet; 2013.

¹⁵ Australian Medical Association. AMA Position statement: Sexual diversity and gender identity [Internet]; 2002. Available from: https://www.ama.com.au/media/ama-position-statement-sexual-diversity-and-gender-identity.

¹⁶ Palotta-Chiarolli M, Sudarto B & Tang J. Navigating intersectionality: Multicultural and multifaith LGBTIQ+ Victorians talk about discrimination and affirmation. Melbourne: AGMC/MASC/DPC; 2021.

¹⁷ Hill A, Bourne A, McNair R, Carman M, Lyons A. Private Lives 3 The health and wellbeing Of Lgbtiq people in Australia. Melbourne: La Trobe University; 2020.

¹⁸ Hughes M. Health and well being of lesbian, gay, bisexual, transgender and intersex people aged 50 years and over. *Australian Health Review*. 2018;42(2):146.

¹⁹ Reynolds V. Intersectionality [Internet]. Intersect; 2010. Available from: http://www.lgbtiqintersect.org.au/learning-modules/intersectionality/

experience multiple forms of overlapping oppression or challenges and how these may vary across different contexts such as in healthcare or workplace settings.²⁰ LGBTIQ+ people who also identity as youth, culturally or linguistically diverse, Aboriginal and Torres Strait Islander as well as those who have a disability, live in remote or rural areas, or are experiencing homelessness are some examples where concurrent identities shape the experience of being a LGBTIQ+ person in Australia.²¹ People at the nexus of multiple identities have higher risks of psychological distress and discrimination may require extra support protect their mental and physical health and wellbeing.²²

Developmental stressors including the disclosure of identity are also known to contribute to a higher suicide risk, particularly in younger LGBTIQ+ people. Research has highlighted that young LGBTIQ+ people aged 16-27 years are more than five times more likely to report attempting suicide.²³ This age group encompasses the late adolescent and early adulthood period where the development of multiple identities arise and distress surrounding 'coming out' occurs.²⁴ At this time, young LGBTIQ+ people may experience feelings of low self-worth, isolation, shame and internalise homophobia.²⁵ It is important to recognise that many young people have a history of attempting suicide prior to disclosure.²⁶

Compounding the impact of a higher prevalence of psychological distress and history of suicide attempts by people within LGBTIQ+ communities, a majority of people do not seek help in a crisis.²⁷ The reasons for this are complex and multifaceted. Low rates of help seeking behaviour may reflect systemic issues relating to service access, which includes the anticipation of discrimination, as well as the impact of prior experiences with crisis or non-crisis support services (mainstream and LGBTIQ+ inclusive), and other physical, financial and technological factors. According to an Australian-based survey of LGBTIQ+ people, perceptions around being 'queer enough' and concerns about safety, confidentiality, and difficulties regarding seeking support from someone with a similar background or lived experience are additional contributors to low crisis support use.²⁸

²³ Suicide Prevention Australia. Fact Sheet: LGBTIQ+ suicide prevention [Internet]; 2021. Available from: https://www.suicidepreventionaust.org/wp-content/uploads/2021/02/Fact-Sheet-LGBTIQ-Populations.pdf

²⁰ Palotta-Chiarolli M, Sudarto B & Tang J. Navigating intersectionality: Multicultural and multifaith LGBTIQ+ Victorians talk about discrimination and affirmation. Melbourne: AGMC/MASC/DPC; 2021.

²¹ Hill A, Bourne A, McNair R, Carman M, Lyons A. Private Lives 3 The health and wellbeing Of Lgbtiq people in Australia. Melbourne: La Trobe University; 2020.

²² Victorian Government. Intersectionality [Internet]. Delivering the reform for Victoria's diverse communities. Victorian Government; 2020. Available from: https://www.vic.gov.au/family-violence-reform-rolling-action-plan-2020-2023/reform-principles/intersectionality

²⁴ Skerret DM, Kolves K & De Leo D. Suicidal behaviours in LGB populations: A literature review of research trends. Brisbane: Australian Institute for Suicide Research and Prevention; 2012.

²⁵ LGBTIQ+ Health Australia. A snapshot of mental health and suicide prevention strategies for LGBTIQ+ people [Internet]; 2021. Available from:

https://d3n8a8pro7vhmx.cloudfront.net/lgbtihealth/pages/549/attachments/original/1620871703/2021_Snapshot_of_Mental_Health2.pdf ?1620871703

²⁶ QLife. Suicide Prevention: A QLife guide for health professionals [Internet]. Suicide prevention and LGBTI people. Available from: https://qlife.org.au/uploads/17-Suicide-Prevention.pdf

²⁷ Suicide Prevention Australia. Fact Sheet: LGBTIQ+ suicide prevention [Internet]; 2021. Available from: https://www.suicidepreventionaust.org/wp-content/uploads/2021/02/Fact-Sheet-LGBTIQ-Populations.pdf

²⁸ Waling A, Lim G, Dhalla S, Lyons A & Bourne A. Understanding LGBTI+ lives in crisis. Australian Research Centre in Sex, Health & Society Lifeline Research Foundation. La Trobe University & Lifeline Australia; 2019.

3. TRIAL OVERVIEW

The Commonwealth Government has funded the implementation of twelve suicide prevention trial sites across Australia as part of the National Suicide Prevention Trial, which spanned a 4-year period (2016-17 – 2019-20). Each trial site was led by the local Primary Health Network (**PHN**) and aimed to improve the current evidence base around effective suicide prevention strategies for general population and priority population groups.

NWMPHN was leading the only trial site in Victoria, which focused on LGBTIQ+ communities. The objectives of the Trial were to:

- Understand and address the factors that contribute to suicide within LGBTIQ+ communities;
- Increase the available evidence base on effective suicide prevention strategies for LGBTIQ+ communities; and
- Share relevant insights and information gathered from the trial with other community organisations and commissioning agents to enable them to better support local LGBTIQ+ communities.

NWMPHN worked closely with a LGBTIQ+ people, people with a lived experience of mental ill-health and suicide and representatives from the mental health and suicide prevention service system (referred to as the '**Taskforce'**) to co-design the Trial in order to meet the objectives above and designed the individual interventions that collectively make up the Trial.

The trial comprises a total of 8 interventions, which are identified below along with the organisation that has been commissioned by NWMPHN to deliver the intervention:

Intervention	Commissioned organisation
Aftercare – Providing support to a person after a suicide attempt or someone who is experiencing suicidal ideation	Mind Australia
Postvention – Developing a Suicide Postvention Response Plan for LGBTIQ+ communities to support the broader community and/or organisations that have experienced the loss of an LGBTIQ+ person to suicide	Switchboard
LGBTIQA+ Mentoring Projects – Providing mentoring and peer support to LGBTIQ+ individuals, groups and their families	drummond street services
Capacity Building – Delivering LivingWorks Start, safeTALK and ASIST training to individuals across the North Western Melbourne region that play a role in suicide prevention and intervention for people who are LGBTIQ+	LivingWorks
LGBTIQ+ Affirmative Practice – Delivering training to first responders and frontline health and social service	Thorne Harbour Health

providers to build their capacity in providing gender affirming care	
Peer and Community Leaders – Researching the role of peer and community leaders in providing mental health crisis support to LGBTIQ+ communities and identifying ways to better support them	Australian Research Centre in Sex, Health and Society (ARCSHS) at La Trobe University
Campaign – Conducting a marketing campaign within the North Western region of Melbourne to encourage the mainstream community to take action against discrimination towards LGBTIQ+ communities	The Shannon Company
Wellness Grants – Offering small grants to encourage local organisations to implement initiatives that (i) support greater inclusion for LGBTIQ+ communities, (ii) address stigma/discrimination and (iii) raise the awareness of effective suicide prevention initiatives	Various* <i>Note:</i> * 9 separate organisations have been awarded grants as part of this intervention.

Figure 1 - Description of Trial interventions

Impact Co. was engaged to undertake an evaluation of the 8 interventions that are part of the trial.

This evaluation report specifically relates to the Community Wellness Grants (Grant Program).

PROGRAM OVERVIEW

3. GRANT PROGRAM OVERVIEW

The objective of the Grant Program was to strengthen protective factors, including personal or environmental characteristics, that help to reduce the risk of poor mental health and suicidal ideation for LGBTIQ+ people. The Grant Program targeted higher at-risk LGBTIQ+ groups of poorer mental health and suicidality outcomes such as, trans and gender diverse, bisexual and intersex people, with a strong focus on regional areas within the NWMPHN catchment across all age groups.

Discrimination is a high-risk factor for LGBTIQ+ communities, as they commonly experience discrimination in the form of personal rejection, hostility, harassment, bullying, and physical violence²⁹. The Grant Program sought to address discrimination and encourage acceptance in places where historically LGBTIQ+ people have faced increased barriers to inclusion including a wide variety of clubs and community groups, ranging from sports, arts, recreational, support groups, youth groups.

The Taskforce identified that the Grant Program could provide creative and innovative ways to benefit the LGBTIQ+ community and promotion of suicide prevention activities. In consultation with the Taskforce, activities that sought to address the following outcomes were identified for the Grant Program:

- Encourage and promote intersectionality
- Build inclusive communities and strengthen community resilience
- Address stigma and discrimination
- Raise awareness of effective suicide prevention practices.

Evaluations for each project forming part of the Grant Program contain detailed information on:

- Commissioned organisations
- Target cohorts
- Individual grant objectives
- Further context (e.g., impact of COVID-19).

²⁹ Therapeutic risk management of the suicidal patient: safety planning, Matarazzo et al., (2014)

EVALUATION CONTEXT AND APPROACH

4. EVALUATION METHODOLOGY

The evaluation of each project funded by the Grant Program was approached consistently, whilst also being adapted where necessary to the unique nature of each project. The following list identifies the common approach used to evaluate each of the programs forming part of the Grant Program:

1. **Project Manager surveys** were distributed to the leaders of each of the projects. Each project would have a unique group of individuals who would be responsible for completing these surveys. Generally, these were people tasked with delivering projects, and not the target cohort or participant. For most projects, these individuals were often facilitators, coordinators, managers, and / or the person responsible for designing the projects.

Project Manager surveys, by virtue of the individuals completing them, are limited in number and often reflect a positive bias (i.e., a Project Manager may rate their own project highly even where it was not fully delivered). For this reason, the results of these surveys are reported in distinct categories within evaluation reports to ensure they are read in context. Impact Co. has highlighted the total number of Project Manager survey responses in each individual project evaluation.

2. **Participant surveys** were distributed to target cohorts – the individuals or end-users of the project. In some cases, participants were surveyed by the grant recipients as part of the funded projects.

Impact Co. has flagged where grant recipient-delivered participant surveys were conducted and how the information was used to inform the evaluation. Where a grant recipient has conducted its own detailed evaluation and provided a report to NWMPHN, Impact Co. has highlighted that these reports should be read in full (and has not sought to independently validate the findings in these reports). In other cases, survey data has been provided to Impact Co. to analyse and interpret.

Even where Impact Co. has designed its own Participant survey, distribution of it was guided by Grant Recipients. Some participant surveys have low response rates and are likely positively biased (i.e., a small number of individuals closely associated with the Grant Recipients have completed the survey). On other occasions, very few people have completed the survey at all, limiting the validity of results. Impact Co. has highlighted the total number of Participant survey responses in each individual project evaluation.

- 3. Other relevant information has been provided to Impact Co. on a project-by-project basis this information has been reviewed by Impact Co. and noted in individual evaluations
- 4. **Individual Grant objectives** informed separate Program Logics that have been used to guide the analysis of data sources (1-3 above). A copy of each program logic and evaluation approach have been appended to this report.
- 5. **Individual evaluation reports** have been drafted and are the subject of this document (see sections 5-11 of this report).

Evaluation Approach

The diagram below depicts Impact Co.'s approach to evaluating individual projects within the Grant Program.

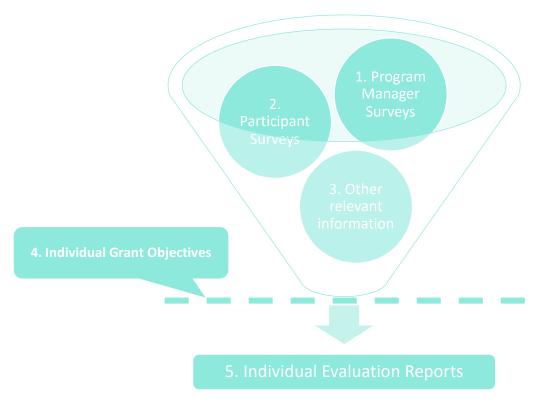


Figure 2 - Evaluation Approach

The remaining sections of this report reflect the evaluation of each of the programs that were funded by the Grant Program.

EVALUATIONS FINDINGS

(STRUCTURED ACCORDING TO EACH GRANT)

5. LEARN TO SKATE: RAINBOW SERIES

Project Summary

Category	Detail	
Project title	Learn to Skate: Rainbow Series	
Grant Recipient	Victorian Roller Derby League Inc. (VRDL)	
Target cohort	LGBTIQ+ community and allies (with preference will be given to the members of the LGBTIQ+ community) in proximity to the VRDL's facility.	
Project Objectives source: grant application	 Increase participation pathways to roller derby Reduce barriers through use of VRDL's loan library Reduce the stigma and discrimination faced by many LGBTQI+ people 	
Project Design source: grant application	VRDL will expand its existing beginner entry program to target the LGBTQI+ population during Term 1, 2021. Note: The forum, which focussed on discussing LGBTIQ+ mental health issues, was postponed because of COVID-19 restrictions. As a result, this activity was not delivered during the evaluation period and has not been considered as part of this report. A media strategy was also originally designed to support the project.	
Timeframe	The project was designed to be delivered during Q1 2021, as a result of some limitations noted in this evaluation (including a death by suicide and COVID-19) some changes to timing were made.	
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 1 person A participant survey completed by 12 people 	
Further notes	An online event is scheduled to be delivered after the delivery of this evaluation and is consequently out of scope.	

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Category 1: Marketing	Insight 1.1: There was strong interest in the project, demonstrated by the rate of sign- ups following word-of-mouth and social media campaigns
	Insight 1.2: Some participants believe that the sign-up process could be made simpler

Category 2: Project Delivery	Insight 2.1: The project would benefit from enhanced opportunities for engagement, including longer training sessions and an extended delivery timeline	
Category 3:	Insight 3.1: Management were satisfied with the delivery and impact of the project	
Management perspectives	Insight 3.2: COVID-19 negatively affected the project	
Category 4: Project Impact	Insight 4.1: The project effectively built networks and connected members of the LGBTIQ+ community into roller derby in a safe way	
	Insight 4.2: The project did not directly raise awareness of mental health challenges or interventions available specifically relating to individuals identifying as LGBTIQ+	

Category 1:

This category explores what attracted participants to the project

Insight	Detail
Insight 1.1: There was strong interest in the	Participants indicated that they felt the advertising for the project was effective, with none responding that it was ineffective.
project, demonstrated	Of the participants that responded to a survey question asking them to rate how they found the advertising for the project:
by the rate of sign-ups following word-of- mouth and	 4 found it extremely effective 6 found it very effective 2 found it somewhat effective
social media campaigns	A combination of social media advertising and word of mouth (via those connected through social media and / or established roller derby groups) led participants to the project:
	 4 mentioned hearing about the project through Roller Rangers or Bush Rangers
	 3 mentioned hearing about the project through social media 3 mentioned hearing about the project through someone they knew, who saw it on social media
	• 2 mentioned hearing about the project through someone they knew
	The above indicates that VRDL was effective in attracting participants within its own network and within the broader community to the Project. While not explicitly tested, this indicates that there is interest among community members for such activities. However, it is unclear how many participants joined the project from outside this community and network.

Insight	Detail
Insight 1.2: Some participants believe that the sign-up process could be made simpler	When asked how advertising, information and recruitment could be improved, respondents noted sign-up and insurance for the project was complex or confusing.

Category 2: Project Delivery

This category explores how participants enjoyed the project.

Insight	Detail		
Insight 2.1: The project would benefit from	Participants indicated that the lessons would be improved by being extended, enabling a better learning experience and a greater opportunity to network and share knowledge.		
enhanced opportunities for engagement, including longer training sessions and an extended delivery timeline	did not provide the optimal learning environment. To this point, participants noted that with more time, the Project would have better delivered on the following:		
	A summary of the ways participants identified the project could be improved are detailed in the table below		
	Opportunity	Mentions	
	Lessons could have gone on longer / were too fast paced	8	
	More opportunities to be social	2	
	Too many people	1	
	Providing a review document to take home	1	
	Connect project directly to mental health	1	
Table 2 - Improvement opportunities			
	When asked to nominate how the Project could be improved, the manager of the Project also highlighted that the Project would benefit from more lessons throughout the year:		
	<i>"I think consistency is key. it would be great to be able to deliver for 1 year, rather than 1-2 terms." – Project Manager</i>	⁻ our projects	

Category 3: Management Perspectives

This category explores the reflections of the Project Manager.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

Insight	Detail	
Insight 3.1: Management were satisfied with the delivery and impact of the	Project management indicated broad satisfaction with the in in particular how it connected people to VRDL.	npact of the project,
	A summary of the survey completed by the Project Manager of table below.	can be found in the
project	Question	Rating (out of 10)
	How satisfied are you that the Initiative(s) increased participation (including ongoing participation) of the LGBTIQ+ community in the roller derby project?	8
	How satisfied are you that the Initiative(s) increased awareness and celebration of people identifying as LGBTIQ+ in sport?	7
	How satisfied are you that the Initiative(s) increased your awareness of the support services that are available for the LGBTIQ+ community?	7
	How satisfied are you that the Initiative(s) increased awareness and understanding of key issues relevant to the LGBTIQ+ community (including around mental health)?	9
	How satisfied are you that the Initiative(s) increased access to the roller derby project and connections with other members of the LGBTIQ+ community?	10
	How satisfied are you that the Initiative(s) will increase understanding of strategies to improve mental health and enhance resilience?	9
	How satisfied are you that the Initiative(s) increased the likelihood that attendees will seek help or support their own mental health and wellbeing?	9
	How satisfied are you that the Initiative(s) increased the sense of belonging and community amongst people identifying as LGBTIQ?	9

Insight	Detail		
	How satisfied are you that the Initiative(s) improved attitudes and behaviours towards the LGBTIQ community?	8	
	How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative(s)?	8	
	Table 3 - Management responses		
Insight 3.2: COVID-19	COVID-19 negatively affected the project by causing delays in some lessons and other activities		
negatively affected the project	Due to the 'non-essential' nature of the roller derby league, and its reliance on groups of individuals exercising together, several initiatives which were attempted to be delivered were delayed, postponed or cancelled.		
	Project management indicated that the impact of the pandemic was a major challenge, but, at the same time, were appreciative of NWMPHN's support:		
	<i>"Thank you for helping us set up such a lovely community group at a time when we all needed authentic peer connection." – Project Manager</i>		

Category 4: Project Impact

This category explores the impact of the Project. As identified in the program logic in Appendix A, the identified short-term outcomes were as follows:

- Increased participation (including ongoing participation) of the LGBTIQ+ community in the roller derby project
- Increased awareness and celebration of people identifying as LGBTIQ+ in sport
- Increased access to the roller derby project and connections with other members of the LGBTIQ+ community
- Increased awareness and understanding of key issues relevant to the LGBTIQ+ community (including around mental health)
- Increased understanding of strategies to improve mental health and enhance resilience.

Note: The forum that was initially planned to focus on discussing LGBTIQ+ mental health issues was postponed because of COVID-19 restrictions. As a result, this activity was not delivered during the evaluation period and has not been considered as part of this report.

Insight 4.1: The project effectively	Participants felt that the project connected them to members of LGBTIQ+ communities and to the sport in a safe way.		
built networks and connected people into the sport in a safe way	When asked to describe how the Project has supported LGBTIQ+ individuals and awareness of related issues, popositively.		
Sure way	Question	Rating (out of 10)	
	Will this initiative increase participation (including ongoing participation) of the LGBTIQ+ community in the roller derby project?	8.4	
	Will the initiative increase awareness and celebration of people identifying as LGBTIQ+ in sport?	9.3	
	Will the initiative increase access to the roller derby project and connections with other members of the LGBTIQ+ community?	9.7	
	Table 4 - Participant responses (connection to LGBTIQ+ communitie.	5)	
	Table 4 - Participant responses (connection to LGBTIQ+ communitie. When asked to describe the strengths of the Project, mo to the creation of a safe, community building space in w	any of the themes rela	
	When asked to describe the strengths of the Project, mo	any of the themes rela	броі
	When asked to describe the strengths of the Project, mo to the creation of a safe, community building space in w	any of the themes rela which to learn a new s Mentions	spoi
	When asked to describe the strengths of the Project, mo to the creation of a safe, community building space in w Strengths	any of the themes rela which to learn a new s Mentions	броі
	When asked to describe the strengths of the Project, mo to the creation of a safe, community building space in w Strengths The lessons were run in a safe and welcoming space	any of the themes rela which to learn a new s Mentions e 10 9	броі
	When asked to describe the strengths of the Project, mo to the creation of a safe, community building space in w Strengths The lessons were run in a safe and welcoming space The coaches ran the lessons well	Mentions e 10 nection 7	броі
	When asked to describe the strengths of the Project, me to the creation of a safe, community building space in w Strengths The lessons were run in a safe and welcoming space The coaches ran the lessons well The lessons fostered a sense of community and com	Mentions e 10 nection 7	броі

Insight 4.2: The project did not directly raise awareness of	Whilst participants enjoyed the lessons, they did indicate that it only moderately increased their awareness and understanding of issues, support services and strategies to support members from the LGBTIQ+ community.	
mental health challenges or interventions available specifically relating to	Question	Rating (out of 10)
	Did the initiative increase your awareness and understanding of key issues relevant to the LGBTIQ+ community (including around mental health)?	6.8
individuals identifying as LGBTIQ+	Did the initiative increase your awareness of the support services that are available for the LGBTIQ+ community?	6.9
	Did the initiative increase your understanding of strategies to improve mental health and enhance resilience?	7.4
	Table 6 - Participant increase in awareness of mental health challe	nges
	In addition, one participant, when asked to describe he improved, answered in part:	ow the lessons could be
	"I will say that I didn't really know it was a goal of the awareness of support services for LGBTIQ+ mental he could have been made more obvious – that said it cer mental health being able to get out, move my body a new with an incredible supportive group of people." –	alth, so, if it was, that tainly improved my nd learn something
	Notwithstanding the above feedback provided by part that all of the participants who specified their sexuality that they were part of the LGBTIQ+ community. Given the importance of community connection and social co- it can be inferred that the Project likely benefitted the participated (although it is not clear that this activity w outcome any more than any other communal or group people).	y in the survey indicated other survey results, and onnection on mental health, mental health of those who yould have achieved this

6. BEST DAY WORST DAY PODCAST

Project Summary

Category	Detail		
Project Title	Best Day Worst Day Podcast		
Grant Recipient	The Gender Whisperers (Sam Elkin)		
Target Cohort	The Broader LGBTIQ+ community		
Project Objectives source: grant application	 The project aimed to support LGBTIQ+ Victorians in the following ways: Provide an opportunity for socially isolated LGBTIQ+ people (both metro and regional) to hear inspiring stories and develop resilience by hearing how other people overcame significant personal hurdles. Provide an opportunity for LGBTIQ+ advocate and mental health practitioners to share their stories, providing an important mental health benefit to the interview participants. Provide an opportunity to foster a conversation about mental health and suicide prevention amongst volunteer organisations who will promote and utilize the podcast such as Transgender Victoria, Joy 94.9, Bent TV, the Victorian Pride Lobby and the Lesbian and Gay Archives. Create a permanent repository of freely available LGBTIQ+ community history for social organisations that addresses the mental health challenges our community faces, and what we've done to overcome these. 		
Project Design source: grant application	A 12-part podcast series where LGBTIQ+ community advocates are asked to recount their worst day and best day to date in their life.		
Timeframe	The original project design targeted all podcasts to be released by Q1 and Q2 2021. However, due to a change in family circumstances, there was a delay in producing a number of podcasts – as of 26 July 2021, 5 of 12 podcasts were released.		
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 1 person A listener survey completed by 6 people An interviewee survey completed by 1 person Please note: Sam Elkin distributed the listener survey and interviewee surveys to their contacts at Impact Co.'s request 		
Further notes	Not applicable		

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Category 1: Marketing	Insight 1.1: Awareness of the Podcast was largely as a result of personal connection to the Producer
Category 2: Podcast	Insight 2.1: Listeners and interviewees appreciated the Podcast
quality	Insight 2.2: Some opportunities exist to improve the experience for listeners
Category 3:	Insight 3.1: Management were satisfied with the Podcast
Management perspectives	Insight 3.2: Personal circumstances of the Podcast Manager and Producer negatively affected the Podcast release schedule
Category 4: Project Impact	Insight 4.1: Survey responses indicate that podcast listeners believe the project delivered against its objectives

Category 1: Marketing

This category explores how listeners heard about the Podcast.

Insight	Detail
Insight 1.1: Awareness of the Podcast was largely as a result of personal connection to the Producer	Listeners largely heard about the Podcast from the Producer. When surveyed, listeners indicated that they heard about the Podcast from the Producer and Grant Recipient, Sam Elkin. All the participants responded to the survey prior to the release of the third Podcast in the series. Of the six participants:
	 2 indicated they had not seen any advertising for the Podcast 2 gave neutral responses 2 gave other feedback (described in category 2).

Category 2: Podcast quality

Insight	Detail
Insight 2.1: Listeners and interviewees	Listeners and others were supportive of the Podcast and thought that overall, it is a good initiative
appreciated the Podcast	A selection of quotes below from the survey show that listeners thought the interviewer, guests and the overall delivery were strengths:
	"Excellent guests Excellent editing Excellent concept"- Listener
	<i>"Fresh approach to queer/trans history and community to ask the best day/worst day questions, really brought out new stories and angles." - Listener</i>
	<i>"Gives a forum to the voices and experiences of LGBTIQ+ people"- Listener</i>
	<i>"Flexible, inclusive, thoughtful" - Interviewee</i>
	<i>"Interesting guests, nice sound, cool website"- Listener</i>
Insight 2.2: Some opportunities exist to	When asked to provide feedback as to how the Podcast could be improved, in relation to the content of the Podcast itself listeners commented on the need for additional resources or information about the conversation topics, and a greater role for the host.
improve the experience for listeners	<i>"More links to movements/literature/groups mentioned by the participants"</i> - <i>Listener</i>
	"Bigger audience, quicker output, more interviews" - Listener
	"Sound quality" - Listener
	"More from Sam to contextualise what is being discussed." - Listener

This category explores how listeners and others enjoyed the project.

Category 3: Management Perspectives

This category explores the reflections of the Project Manager (who was also the producer of the podcast and interviewer) of the Podcast.

Dlagaa mata limpitatiama a	of Management Perspectives	autling ad in (Evaluation	Mathadalawy' abaya
- Please note limitations c)) IVIANAAPMENI PEISDECIIVES	oullinea in Evaluation	IVIELNOAOIOAV ADOVE.

Insight	Detail		
Insight 3.1: Management	The Project Manager (who was the producer and host), when asked to rate its effectiveness, indicated broad satisfaction with the impact of the Podcast.		
were satisfied with the Podcast	A summary of the survey completed by the Manager of the Pod in the table below.	lcast can be found	
	Question	Rating (out of 10)	
	How satisfied are you that the Podcast increased understanding of key issues relevant to the LGBTIQ+ community (including around mental health)?	10	
	How satisfied are you that the Podcast increased understanding of strategies to improve mental health and enhance resilience?	10	
	How satisfied are you that the Podcast increased connections with other members of the LGBTIQ+ community?	10	
	How satisfied are you that the Podcast increased the overall knowledge and history base of the LGBTIQ+ community?	10	
	How satisfied are you that the Podcast increased help seeking behaviour by listeners (i.e., likelihood to seek help)?	10	
	How satisfied are you that the Podcast increased confidence to seek help or support one's own mental health and wellbeing amongst listeners?	10	
	How satisfied are you that the Podcast increased empathy and understanding amongst (and between) members of the LGBTIQ+ community?	10	
	How satisfied are you that the Podcast has increased the sense of belonging and community among people identifying as LGBTIQ+?	10	
	Table 7 - Management satisfaction with Podcast		

Insight 3.2: Personal circumstances of the Podcast	The delivery of the Podcast relied on a single individual who was not able to commit sufficient time to deliver the Podcasts in line with the defined schedule
Manager and	
Producer	
negatively	
affected the	
Podcast release	
schedule	

Category 4: Podcast Impact

This category explores the impact of the Podcast. The identified short-term outcomes of this Project (per the program logic depicted in Appendix A) were as follows:

- Increased understanding of key issues relevant to the LGBTIQ+ community (including around mental health)
- Increased understanding of strategies to improve mental health and enhance resilience
- Increased connections with other members of the LGBTIQ+ community
- Increasing the overall knowledge and history base of the LGBTIQ+ community

Insight	Detail	
Insight 4.1: Survey responses indicate that podcast listeners believe the project delivered against its objectives	Listeners indicated that the Podcast largely achieved its objectives The table below shows the average rating respondent listeners gave to each question. However, as noted above, all the listeners were known to the Podcast Producer, meaning that the listeners (and the feedback that they provided as part of the evaluation) cannot be viewed as independent. As a result, the responses provided by the listeners respondents must be viewed as informative only. In addition, there were only a limited number of responses provided (6) to an even smaller sample of Podcasts (5) were released at the time of the evaluation. Because of this, it is difficult to rely too heavily on the data that has been captured via the survey.	
	Question How satisfied were you that the Podcast will increase understanding of key issues relevant to the LGBTIQ+ community (including around mental	Average Rating (out of 10) 9.5
	health)? How satisfied were you that the Podcast will increase understanding of strategies to improve mental health and enhance resilience?	9.2
	How satisfied were you that the Podcast will increase connections with other members of the LGBTIQ+ community?	8.8
	How satisfied were you that the Podcast will increase the overall knowledge and history base of the LGBTIQ+ community?	9.7
	Table 8 - Listener satisfaction with Podcast	

7. CONSULTATION WITH LGBTIQ+ COMMUNITIES AND STAKEHOLDERS

Project Summary

Category	Detail	
Project Title	Consultation with LGBTIQ+ Communities and Stakeholders	
Grant Recipient Source: grant application	Jesuit Social Services Limited (JSS)	
Target Cohort	LGBTIQ+ community within the NWMPHN region	
Project Objectives <i>source: grant</i> <i>application</i>	 The consultation process explored issues relating to what makes a mental health service of choice for an LGBTIQ+ person, and how Support After Suicide and Connexions can be specifically enhanced, in relation to: What makes a service feel welcoming and safe for an LGBTIQ+ person? What criteria is essential for an organisation or service to meet for an LGBTIQ+ person to consider accessing it? 	
	 What are the common barriers to accessing a service and how might these be overcome? What services are people from the LGBTIQ+ community accessing and why? What are the current service gaps/where is the current priority need? What are the most common social issue intersections for LGBTIQ+ people who are experiencing mental health issues and suicidality? What would help an LGBTIQ+ person take the step to come forward and seek help? What easy to access information and resources would be useful for the LGBTIQ+ community? 	
Project Design source: grant application	JSS intended to evaluate and improve, through extensive consultation, two existing projects within JSS, Support After Suicide and Connexions, with a view to increasing their cultural responsiveness and inclusiveness, further aligning them to meet the specific needs of members of the LGBTIQ+ community and to contribute to addressing the inequalities in outcomes that currently exist.	
Timeframe	The original design of the project intended to undertake consultations between Q4 2020 and Q2 2021.	
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 6 people (only 4 of which answered each question) A participant survey completed by 4 people (only 2 of which answered all questions) 	

	Please note the project interacted with 40 individuals and 25 different agencies – the survey responses reflect a small sample. JSS was responsible for distributing survey links to relevant stakeholders at the request of Impact Co.
Further notes	Not applicable

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight	
Category 1: Marketing	Insight 1.1: Participants heard about the project from their own networks or through social media	
Category 2: Project Delivery	nsight 2.1: Of the limited participants that engaged in the evaluation survey, participants rated the project well	
Category 3: Management perspectives	Insight 3.1: Reponses from Project Managers were mixed about the efficacy of the Project	
	Insight 3.2: The nature and scope of the project attracted criticism	
	Insight 3.3: The results of the project could be informative	
Category 4: Project Impact	Insight 4.1: The impact of the project in the short term is not clear	

Category 1: Marketing

This category explores how JSS connected to participants

Insight	Detail
Insight 1.1: Participants heard about the project through their own networks or through social media	Participants heard about the project through Qlife or twitter. The two participants that responded to this question noted that the advertising for the project was either somewhat, or very, effective. In response to how the marketing and advertising of the Project might be improved, one participant responded that,
	"Posters in the office, emails sent to all volunteers in QLife, gay groups on Facebook [would be helpful]" – <i>Participant</i>

Insight	Detail
	While the low response rate means that very little insight can be gleaned from the response, the comment noted above does indicate that the approach to marketing was not well directed and not reflective of the best engagement platforms for the LGBTIQ+ community.

Category 2: Project Delivery

This category explores how participants felt about the Project

Insight	Detail
Insight 2.1: Participants rated the Project well	Participants indicated that they were broadly satisfied that project will improve the way JSS delivers its projects. Both participants who completed the survey were positive about the project, and its impact (see category four below). However, and as noted above, this finding should be considered in the context of low response rates from participants, meaning that the findings are not reflective of the total cohort engaged in the Project.

Category 3: Management Perspectives

This category explores the reflections of Project Managers.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

Insight	Detail	
Insight 3.1: Reponses from Managers were mixed	Managers had mixed views about the efficacy of the Project, as sh ratings in the survey.	nown in their
	A summary of the survey completed by the Project Managers can be found in the table below. Interestingly, the responses identified indicate that there was only moderate recognition that the project was effective and will have an impact in the medium-to-long-term.	
	Question	Average rating (out of 10)
	How satisfied are you that the findings from the Project will increase awareness of the needs of the LGBTIQ+ community?	7.8
	How satisfied are you that the findings from the Project will increase understanding of how organisational services,	7.5

	practice and operations need to be designed to effectively meet the needs of the LGBTIQ+ community?	
	How satisfied are you that the findings from the Project will increase the understanding of service gaps that exists for the LGBTIQ+ community?	6.5
	How satisfied are you that the findings from the Project have enabled the LGBTIQ+ community to provide input into research and service design?	8.0
	How satisfied are you that the findings from the Project have increased the awareness of services by JSS and strengthened the connection between the LGBTIQ+ community and JSS?	7.3
	How satisfied are you that the Project has empowered the LGBTIQ+ community?	5.3
	How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the initiative?	8.0
	Table 9 - Management perspectives on effectiveness of the Project	
Insight 3.2: The nature and scope of the project attracted criticism	The project timelines, budget and inherent value of the project attract comments questioning the efficacy and benefit of the Project amongs Managers who completed the survey <i>Respondents believed short timeframes and a limited budget negative</i> <i>the delivery of the Project. This is best demonstrated by the following of</i> <i>were provided by Managers in the Project Manager Survey.</i>	t the Project <i>ly affected</i>
	"The short timeframes did not allow JSS to approach this area of worl their relational way, which is going where they're wanted and taking time that is needed to build genuine relationships and trust with the community" – Project Manager	
	"Short timeframes meant it was difficult to establish stronger relation with LGBTIQ+ communities and service providers. These relationship critical to the distribution of the consultation survey. To provide a qu consultation process, the resources allocated were limiting, resulting significant amount of in-kind input for the project to be successful" – <i>Project Manager</i>	s were ality in a
	"[] this project [was] reliant on some key figures who have a passion advocacy in this particular area driving it forward. It is difficult to sust	

	this long term. Dedicate resources to ensuring the implementation of the recommendations []" – <i>Project Manager</i>
	In addition, the absence of a relationship with a community partnership, and the nature of JSS as a religious organisation, was identified as presenting challenges to the Project. This is reflected by the following quotes that were provided by Managers in the Project Manager Survey.
	"a lot of lessons were learnt along the way in relation to the perception of faith-based organisations by the LGBTIQ+ community, the importance of being a good ally to the community, and the importance of partnering with LGBTIQ+ specific organisations to have real links with the community" – Project Manager
	<i>"I was disappointed that there was less than a page on overcoming barriers with faith-based organisations as that's the only area JSS could have had unique insight on over and above trained researchers" – Project Manager</i>
Insight 3.3: The results of the	Although Project Managers did highlight a number of challenges with the project, some comments indicate the project may have a positive impact in the future.
project could be used to positively enhance the way that JSS works with and engages members from the LGBTIQ+ community	The following quotes provided by Project Managers indicate that the project may have delivered some useful insights to JSS that could inform future practice.
	<i>"The output of the project is a report which will be used by JSS to improve its own projects going forward." – Project Manager</i>
	"The project was very useful; well implemented; findings are genuinely useful; informative; and will continue to have a role in the organisation making meaningful change. Well worth it." – Project Manager
	<i>"A fantastic initiative shining light on mental health and suicide prevention support needs of LGBTIQ+ communities. Thoroughly enjoyed the project and outcomes from the project." – Project Manager</i>

Category 4: Project Impact

This category explores the impact of the project. The identified short-term outcomes of this project (per the program logic depicted in Appendix A) were as follows:

- Increased representation and input from the LGBTIQ+ community in research and service design
- Increased awareness of the needs of the LGBTIQ+ community and capacity to address these needs
- Increased understanding of how organisational services, practice and operations need to be designed / refined to effectively meet the needs of the LGBTIQ+ community
- Increased understanding of service gaps that exist for the LGBTIQ+ community
- Increased awareness of services offered by JSS and strengthening of connections between LGBTIQ+ community and JSS.

Insight	Detail		
Insight 4.1: The impact of the project in the short term is not clear	Respondents were positive, but response rates, and the comments of Project Managers (above) indicate the impact of the Project is uncertain.		
	Both individuals who completed the participant survey we project, and its impact (see table below). The impact of th be driven by JSS applying the reports' insights into its ongo delivery, meaning that the impact of the findings on practi- this stage.	is project, however, will ping practice and project	
	The table below shows the average rating respondent participants gave to each question		
	Question	Average Rating (out of 10)	
	How satisfied were you that the Project will increase awareness of the needs of the LGBTIQ+ community?	9	
	How satisfied were you that the Project will increase the understanding of how organisational services, practice and operations need to be designed to effectively meet the needs of the LGBTIQ+ community?	9	
	How satisfied were you that the Project will increase the awareness of the needs of the LGBTIQ+ community?	9	
	How satisfied were you that the Project will increase the understanding of service gaps that exists for the LGBTIQ+ community?	9	
	Table 10 - Participant perspectives on the impact of the Project	·	

8. BUILDING AFFIRMATIVE HEALTHCARE FOR LGBTIQ COMMUNITY MEMBERS

Project Summary

Category	Detail	
Project Title	Building Affirmative Healthcare for LGBTIQ+ Community Members	
Grant Recipient	Cobaw Community Health Services Limited	
Target Cohort	General practitioners, health and aged care professionals in the Macedon Ranges	
Project Objectives <i>source: grant</i> <i>application</i>	The project supported mainstream health and aged care services to build their capacity to provide inclusive and affirmative health and aged care service, supporting LGBTIQ+ people across the lifespan, championing LGBTIQ+ visibility and inclusion. As services work together, the program contributed to better mental health, health and wellbeing outcomes for LGBTIQ+ people, and a more inclusive rural and regional community. The project intended to build protective factors for the mental health and wellbeing of LGBTIQ+ community members by:	
	 Provision of capacity building for regional health and aged care professionals to provide inclusive and affirmative care for LGBTIQ+ community members and remove access barriers Strengthening of relationships with mainstream health and aged care providers to support a whole of organisation approach to affirmative care 	
Project Design source: grant application	The project planned, promoted, delivered and evaluated three different workshops for health and aged care professionals to build their capacity to work affirmatively with LGBTIQ+ community members. Training was delivered to general practice staff, psychologists, psychiatrists, emergency services staff, pharmacists, and aged care workers.	
	The workshops focussed on the following subject matter areas:	
	 Trans and gender diverse (TGD) healthcare (in partnership with Thorne Harbour) Healthcare for people with intersex variation (in partnership with Intersex Peer Support Australia) LGBTIQ+ aging and mental wellbeing (in partnership with Val's LGBTI Ageing and Aged Care) 	
Timeframe	The original delivery timeline of this project was Q1 to Q2 2021.	
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 4 people A participant survey completed by 58 people 	
	 Please note: The Grant Recipient ran its own evaluation of the workshops through an online survey (analysed by Impact Co.) 	

	Impact Co. issued its own survey of project managers
Further notes	Not applicable

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Category 1: Marketing	Insight 1.1: Participants largely heard about the project from their own professional networks
Category 2: Project	Insight 2.1: The content and delivery of the project was effective
Delivery	Insight 2.2: Opportunities may exist to improve the format and timing of the project
Category 3: Management perspectives	Insight 3.1: Project Managers thought it was worthwhile; however, they could not comment on the impact to the LGBTIQ+ community
Category 4: Project Impact	Insight 4.1: The project improved participants subject knowledge and confidence in providing affirmative care.

Category 1: Marketing

This category explores how participants learnt about the opportunity to participate in the workshops.

Insight	Detail	
Insight 1.1: Participants	Most participants heard about the project through work, via emain other work-related channels	il, colleagues or
largely heard about the project from their own	The table below illustrates the frequency of themes expressed by asked about how they heard about the Project (open-text response Impact Co. thematically).	
professional networks	How participant heard about Project (theme)	Frequency (mentions/ overall mentions)
	Email (incl. email from manager)	37%
	Colleague (including coordinator)	25%

Insight	Detail	
	Work	9%
	PHN newsletter	7%
	PHN	5%
	Social Media (including work social media)	5%
	Sunbury Cobaw	4%
	Radio	4%
	Flyers	2%
	Google	2%
	Staff room	2%
	Table 11 - How participants found out about the Project	
	Note: Open-source responses can cause variability in how individu source, and can create under/over-representation of certain them email may come from a colleague, from 'work' or contain the PHN However, the overall finding that professional networks were the r	es. For example, an I newsletter.

information / advertising about the Project remains valid.

Category 2: Project Delivery

This category explores how participants felt about the Project

Insight	Detail			
Insight 2.1: The content and delivery of the	Participants surveyed indicated that t the workshops, and how it was direct The table below illustrates the percer statements (as a total proportion of re	ed towards ntage of par	the age and ticipants who	health care sectors.
workshops was effective	Category	LGBTI Ageing	Intersex	Trans and Gender Diverse
	The instructors content knowledge was of a high standard	90%	86%	79%
	The content provided me with new insight about intersex	90%	86%	79%
	The training content was appropriate for my line of work	75%	86%	75%
	This training is highly relevant for people work in the health sector	85%	79%	71%
	Table 12 - Participant satisfaction with training	g		
Insight 2.2: Opportunities exist to improve the format and	Participants identified opportunities t content was delivered during the vari Participants identified that more inter especially as it was delivered through	ous worksh ractivity wo	ops forming	part of the project:
timing of the workshops	"The quality of the information was a listen, especially at this time of day. some on-line polling" — Participant	-		• •
	Participants also noted that the pace professional expertise (not all particip		•	•

"Being unfamiliar with the topic, use of medical/clinical language without describing plainly what they referred to made it harder to understand what they actually were." – Participant

For the intersex workshop specifically, there is significantly lower approval for the way the instructor performed as against the other workshops forming part of the Project. No participants indicated why specifically this was the case, however.

Each of these insights is reflected by the responses participants provided to a survey following each of the workshops that formed part of the Project.

Category	LGBTI Ageing	Intersex	Trans and Gender Diverse
The mix of presentations and activities was appropriate for my line of work	40%	50%	42%
The training had the right balance between presenting and interaction	50%	64%	58%
The speed of delivery was suitable for my learning needs	55%	57%	67%
The instructor's organisation and preparation was highly professional	75%	57%	67%
The training content met my expectations	70%	79%	67%
I felt highly engaged by the instructor's enthusiasm	85%	57%	75%
The training was of a high standard	90%	64%	83%

Category 3: Management Perspectives

This category explores the reflections of the Project Managers.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

Detail	
Project Managers noted that they were satisfied with the project. noted they could not speak to the various intended impacts of the LGBTIQ+ community. A summary of the results of the survey completed by Project Mana found in the table below.	e project for the
Question	Average rating (out of 10)
How satisfied are you that the Initiative increased referral rates from general practitioners, health and aged care professionals to LGBTIQ+-specific services?	6.3
How satisfied are you that the Initiative increased the proportion of LGBTIQ+ community members feeling that healthcare is delivered in a safe and inclusive manner?	6.3
How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative?	8.0
How satisfied are you that the Initiative improved attitudes and behaviours towards the LGBTIQ+ community?	8.3
How satisfied are you that the Initiative increased confidence to provide inclusive and safer healthcare to the LGBTIQ+ community?	8.3
How satisfied are you that the Initiative improved understanding of the needs of the LGBTIQ+ community?	8.5
How satisfied are you that the Initiative increased awareness of approaches to provide inclusive and safe healthcare to the LGBTIQ+ community?	8.8
How satisfied are you that the Initiative improved knowledge of LGBTIQ+-specific services?	8.8
	Project Managers noted that they were satisfied with the project. noted they could not speak to the various intended impacts of the LGBTIQ+ community. A summary of the results of the survey completed by Project Mana found in the table below. Question How satisfied are you that the Initiative increased referral rates from general practitioners, health and aged care professionals to LGBTIQ+-specific services? How satisfied are you that the Initiative increased the proportion of LGBTIQ+ community members feeling that healthcare is delivered in a safe and inclusive manner? How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative? How satisfied are you that the Initiative improved attitudes and behaviours towards the LGBTIQ+ community? How satisfied are you that the Initiative increased confidence to provide inclusive and safer healthcare to the LGBTIQ+ community? How satisfied are you that the Initiative improved understanding of the needs of the LGBTIQ+ community? How satisfied are you that the Initiative increased awareness of approaches to provide inclusive and safe healthcare to the LGBTIQ+ community?

One manager commented as to why they could not speak to the impact of the community, but were nonetheless optimistic about the success of the project. <i>"It's difficult to comment on whether there have been increased referrals to</i> <i>LGBTIQ+ specific services as a result of the training, but we certainly shared</i> <i>referral information with attendees at each of the sessions, so we can</i> <i>confidently say that this would have increased their awareness of LGBTIQ+</i> <i>specific services to whom they can refer." – Project Manager</i>
"Re the question on whether community members feel that they are receiving a more inclusive service - this is also difficult to say, but strategies we have built in to help increase the likelihood of this are providing participants with a certificate of completion for the training, which they may choose to display in their clinic spaces to indicate to patients their commitment to inclusivity. We have also purchased rainbow lanyards and pronoun badges for participants, which are further visual queues to patients of the individual health providers' commitment to inclusivity." – Project Manager

Category 4: Project Impact

This category explores the impact of the project. The identified short-term outcomes of this project (per the program logic depicted in Appendix A) were as follows:

- Increased awareness of approaches to provide inclusive and safe healthcare to the LGBTIQ+ community
- Improved knowledge of LGBTIQ-specific services
- Improve understanding of the needs of LGBTIQ communities.

Insight	Detail		
Insight 4.1: The Project improved the subject	Following the training, it was identified and confidence improved.	I that participants	s' self-reported
knowledge and confidence		Increase in Knowledge	Increase in Confidence
amongst	Intersex	300%	250%
participants in providing	LGBTI Ageing	111%	25%
affirmative care	Trans and Gender Diverse	109%	50%
	Table 15 - Increase in knowledge and	d confidence	1

9. LGBTIQ+ YOUTH PEER-LED SCOPING PROJECT

Project Summary

Category	Detail
Project Title	LGBTIQ+ Youth Peer-led Scoping Project
Grant Recipients	 Three Orygen – headspace locations received funding from NWMPHN 1. Glenroy 2. Sunshine 3. Werribee
Target cohort	Culturally and Linguistically Diverse (CALD) LGBTIQ young people and their families
Project objectives source: grant application	 The project aimed to: Increase the CALD inclusivity of headspace's LGBTIQ+ services and resources for young people and their friends and families so that CALD LGBTIQ+ people can build more positive and supportive social and family connections Inform and shape community awareness strategies to help increase engagement of the most prevalent CALD communities within Moreland (e.g., Italian, Greek, Arabic) and address the stigma that might prevent help seeking Enhance LGBTIQ+ youth participation through establishing a LGBTIQ+ youth leadership group that can exist beyond the life of the project and which can continue to work alongside the centre staff to improve LGBTIQ+ young people's safe and accessible access to care
Project design source: grant application	The Project will create an LGBTIQ+ youth peer-led scoping project that seeks to identify the needs of CALD LGBTIQ+ young people and their families. The project will produce a report highlighting important focus areas and peer-led solutions that help to reduce the risk of poor mental health and suicidal ideation for LGBTIQ+ people.
Project Timeline	The original delivery timeline of this project was between Q4 2020 and Q2 2021.
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 2 people A participant survey completed by 13 people Please note: The evaluation did not include a detailed review of the final report produced by headspace.
Further notes	Not applicable

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Category 1: Marketing	Insight 1.1: Most participants heard about the project through social media, or the headspace network
Category 2:	Insight 2.1: The strength of the project was that it was led by young people
Project Delivery	Insight 2.2: A higher number of participants involved in the project would have been beneficial
Category 3: Management perspectives	Insight 3.1: Project Managers agreed it achieved certain objectives
Category 4: Project Impact	Insight 4.1: Participants broadly agreed that the project would be impactful

Category 1: Marketing

This category explores how headspace connected to participants.

Insight	Detail	
Insight Insight 1.1: Most participants heard about the project through social media, or the headspace network	Social media, and d project Participants' response below. Channel Social Media Headspace Website	h headspace, attracted participants to the about the project is noted in the table

Insight	Detail	
	When asked to rate how noted broad satisfaction.	
	Response	Count
	Extremely effective	4
	Very effective	6
	Somewhat effective	3
	Table 17 - Participants' views c	on effectiveness

Category 2: Project Delivery

This category explores how participants felt about the project.

Insight	Detail		
Insight 2.1: The strength of the project was that it was led by	The strength of the project was that it was led by the target group (i.e., young, CALD, LGBTIQ+ people), and was coordinated in a safe, welcoming way that encouraged discussion. The table below outlines the responses of participants, grouped by theme.		
young people	Strength of the Project	Number of Mentions	
	Led by target group (i.e., young, CALD, LGBTIQ+)	5	
	Having a place to talk	4	
	Safe and welcoming environment	3	
	Good co-ordinators	3	
	Regular meeting	1	
	Table 18 - Strengths of the project		
	Note: as one response may note more than one theme, number of responses	total will not equal total	
Insight 2.2: A higher number of participants	The primary opportunity for improvement identified by the participants was increasing the number of people engaged		

involved in the Project would have been beneficial	In response to how the marketing / advertising could be improved, as well as the opportunities to improve the Project, a key theme emerging from the participant survey was that the number of participants involved could have been increased. This is illustrated by the table below.		
	Opportunities to improve Number of Mentions		
	More people recruited into the project	4	
	More effective questions	2	
	More First Nations people	1	
	More time in the project	1	
	Table 19 - Opportunities to improve		

Category 3: Management Perspectives

This category explores the reflections of the Project Manager.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

(The content is continued on the following page.)

Insight	Detail		
Insight 3.1: Project Managers	The Project Managers broadly agreed that the project was impactful. However, the same individuals were less confident that the project enhanced their ability to deliver supports, or improved service delivery to CALD people.		
agreed it achieved certain objectives	The average response of the two Project Managers indicates bro the effectiveness of the project. However, the responses from th individuals also indicate that they were less confident that the pr the services delivered by headspace to meet the needs of the tar improved their own understanding of how to deliver appropriate	ne same roject enhanced rget group, or	
	A summary of the survey completed by the Project Managers can table below.	n be found in the	
	Question	Average rating (out of 10)	
	How satisfied are you that the Project increased confidence and capabilities within the young people in the leadership group?	8.5	
	How satisfied are you that the Project will enhance, or has enhanced, inclusion in headspace's services for all LGBTIQ+ people?	8.0	
	How satisfied are you that the Project increased awareness of the unique issues and needs of CALD LGBTIQ+ young people and their families?	8.0	
	How satisfied are you that the Project increased your understanding of how to deliver appropriate and effective supports to CALD LGBTIQ+ young people and their families?	6.0	
	How satisfied are you that the Project increased agency and empowerment amongst LGBTIQ+ youth?	8.5	
	How satisfied are you that the Project has empowered the LGBTIQ+ community?	8.0	
	How satisfied are you that the Project has enhanced mental health and LGBTIQ+ services to meet the needs of individuals from a CALD background?	6.0	
	How satisfied are you that the Project has improved attitudes and behaviours towards the LGBTIQ+ community (particularly those with a CALD background)?	7.5	
	Table 20 - Management perspectives on impact		

Category 4: Project Impact

This category explores the impact of the Project. The identified short-term outcomes of this Project (per the program logic depicted in Appendix A) were as follows:

- Increased confidence and capabilities of the young people in the Leadership Group
- Enhanced inclusion in headspace's services for all LGBTIQ+ people
- Increased awareness of the unique issues and needs of CALD LGBTIQ+ young people and their families
- Increased understanding of how to deliver appropriate and effective supports to CALD LGBTIQ young people and their families

Insight	Detail		
Insight 4.1: Participants broadly agreed that the project	Project participants were positive about the project when surveyed about its impact – from its impact on the way headspace designs and delivers its services for the target cohort, to the effectiveness of the Leadership Group (who participated in the project).		
would be impactful	Respondents primary feedback in relation to improving the impact of the project related to increasing the total number of participants (see insight 2.2 above).		
	The table below shows the average rating respondent part question	icipants gave to each	
	Question	Average Rating (out of 10)	
	How satisfied were you that the Project will increase the confidence and capabilities of young people contributing to the Leadership Group?	8.7	
	How satisfied were you that the Project will enhance inclusion in headspace's services for all LGBTIQ+ people?	8.8	
	How satisfied were you that the Project will increase headspace's awareness of the needs of CALD LGBTIQ+ young people and their families?	9.4	
	How satisfied were you that the Project will increase headspace's understanding of how to deliver appropriate and effective supports to CALD LGBTIQ+ young people and their families?	8.8	
	Table 21 - Participants' perspectives on impact		

10. QUEER REFUGE

Project Summary

Category	Detail
Project title	Queer Refuge
Grant Recipient	Bridgemeals
Target cohort	LGBTIQ refugees and asylum seekers
Project objectives source: grant application	This Project intended to provide a safe space for LGBTIQ+ refugees and asylum seekers to seek comfort and support from each other. The project also intended to provide the space for participants to discuss the issues that impact them as LGBTIQ+ refugees and asylum seekers since there are very few spaces available for them to discuss the intersections of being both LGBTIQ+ and refugees/asylum seekers.
Project design source: grant application	Bridgemeals partnered with Queer Refuge to create a support group that will meet fortnightly to discuss the issues that impact them as refugees and asylum seekers; as LGBTIQ+ people and as People of Colour. The support group was facilitated by a person with lived experience as a refugee/asylum seeker and will be supported by individuals trained in mental health support.
Timeframe	The original delivery timeline of this project was between Q4 2020 and Q2 2021.
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 1 people A participant survey completed by 10 people
Further notes	Not applicable

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Cotogon (1)	Insight 1.1: Participants heard about the Project through a variety of channels
Category 1: Marketing	Insight 1.2: Participants had mixed views of the effectiveness of the advertising of the Project
	Insight 2.1: Participants appreciated the environment that was created as part of the Project's delivery

Category 2: Project Delivery	Insight 2.2: The sessions could be improved with more structure and better time management from the facilitator
Category 3: Management perspectives	Insight 3.1: The Manager who responded to the survey was broadly satisfied with the Project and would like to see it continue.
Category 4: Project Impact	Insight 4.1: Participants had mixed views of the impact of the Project

Category 1: Marketing

This category explores how Bridgemeals connected to participants.

Insight	Detail
Insight 1.1: Participants heard about the Project through a variety of	Word of mouth, and referring organisations, were the primary channels through which participants heard about the Project. Participants' responses to how they learned about the Project is noted in the table below.
channels	Channel Number of responses
	Word of mouth 4
	Relevant organisations 3
	Social Media 1
	Referral 1
	Table 22 - How participants heard about the Project
Insight 1.2: Participants had mixed views of the effectiveness of the	Participants thought that using social media would improve the effectiveness of the advertising of the Project. Participants had mixed views of the effectiveness of the advertising for the Project when asked to rate it in the survey, as illustrated by the table below.
advertising of the Project	Rating Number of responses
	Very effective 4
	Extremely effective 2

Insight	Detail		
	Somewhat effective	2	
	Not so effective	1	
Table 23 - Participants' views on the effectiveness of the Project			
	When asked to describe how to improve the effectiveness of the advertising of Project, four out of five suggested social media, while a fifth suggested better targeting of vulnerable groups.		•

Category 2: Project Delivery

This category explores how participants felt about the Project.

Insight	Detail		
Insight 2.1: Participants appreciated the	Participants appreciated how the project created welcoming environment and delivered informative sessions. The table below outlines the responses of participants, grouped by theme.		
environment that was	Strength of the Project	Number of Mentions	
created by the	Providing an understanding and safe environment	4	
project	Effective communication from facilitator	3	
	Content of discussions (e.g., visas, information)	2	
	Connecting with peers	2	
	Good catering	1	
	Good Speakers	1	
	Table 24 - Participants' views on the strengths of the Project		
	Note: As one response may note more than one theme, to number of responses	he total will not equal total	
Insight 2.2: The sessions could be improved with	Participants noted that the sessions could be improved with more structure and better time management from the facilitator.		

more structure and better time	Responses to how to improve the project, grouped by	/ theme, are illu	istrated below
management from the	Theme	Responses	
facilitator	More structure and improved time management	3	
	More / ongoing sessions	1	
	More activities	1	
	Table 25 - Participants' views on opportunities to improve the Proj	iect	

Category 3: Management Perspectives

This category explores the reflections of the Project Manager of the Project.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

Insight	Detail	
Insight 3.1: The Project Manager who responded to the survey was broadly	The manager of the project, who is from the target demographic supportive of it. A summary of the survey completed by the Project Manager of the found in the table below.	
satisfied with the project and would like to see it continue	Question	Average rating (out of 10)
see it continue	How satisfied are you that the Initiative helped to create new connections between members of the LGBTIQ+ community?	10
	How satisfied are you that the Initiative helped to create new connections among people identifying as LGBTIQ+ that are refugees or asylum seekers?	10
	How satisfied are you that the Initiative built the capacity and confidence of personnel in coordinating and facilitating community projects?	10
	How satisfied are you that the Initiative increased attendees' awareness of their rights?	10
	How satisfied are you that the Initiative increased attendees' awareness of the support services that are available for the LGBTIQ+ community?	10

How satisfied are you that the Initiative increased the confidence of facilitators and coordinators to undertake similar work and contribute to the future development of responses for the community?	10
How satisfied are you that the Initiative increased attendees' confidence when navigating the broader health and social service systems?	10
How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the initiative?	6
Table 26 - Management satisfaction with the project	
In addition to the responses noted above, when asked about the challenges and strengths of the Project, the responding manager noted that COVID-19 added ever more stress to an already marginalised group that was relied upon to run the project. Despite this, the manager was hopeful that the Project can build over time to better support this group.	

Category 4: Project Impact

This category explores the impact of the Project. The identified short-term outcomes of this Project (per the program logic depicted in Appendix A) were as follows:

- Build the capacity and confidence of personnel in coordinating and facilitating community projects
- New connections with other members of the LGBTIQ+ community
- Increased awareness of rights
- Increased awareness of the support services that are available for the LGBTIQ+ community
- Increased understanding around issues impacting LGBTIQ+ refugees and asylum seekers

Insight	Detail		
Insight 4.1: Participants had mixed views of the impact of the project	Respondents did not indicate that the sessions significantly helped them build new connections or increase their knowledge of their rights or issues facing asylum seekers.		
	As the table below indicates, project participants identified that there are various opportunities to increase the efficacy of the project. The principal opportunities relate to increasing knowledge of the personal rights of participants and delivering a better understanding of issues impacting LGBTIQ+ refugees and asylum seekers.		
	The table below shows the average rating respondent part question about the impact of the project	icipants gave to each	
	Question	Average Rating (out of 10)	
	How satisfied are you that the Project session that you attended helped to create new connections with other members of the LGBTIQ+ community?	6.3	
	How satisfied are you that the Project session that you attended increased your awareness of your rights?	7.4	
	How satisfied are you that the Project session that you attended increased your awareness of the support services that are available for the LGBTIQ+ community?	8.0	
	How satisfied are you that the Project session that you attended increased your understanding of issues impacting LGBTIQ+ refugees and asylum seekers?	7.3	
	Table 27 - Participants' views on the impact of the Project	·	

11. VISUAL ARTS PROGRAM

Project Summary

Category	Detail		
Project Title	Visual Arts Program		
Grant Recipient	St Vincent's Mental Health (SVMH)		
Target Cohort	Case managed SVMH consumers		
Project Objectives source: grant application	This project aimed to reduce stigma and discrimination and promote acceptance and inclusivity for the LGBTIQ+ community on both an individual level via a group project and at a population level via a visual art display developed in the group project and exhibited across the service.		
Project Design source: grant application	Design and delivery of a 10-week group project to collectively create a visual art display that will be displayed across the mental health service and the SVMH campus. The project will be designed in consultations with key stakeholders and organisations and facilitated by a SVMH mental health clinician and LGBTIQ+ peer support workers to ensure that it is inclusive and appropriate for the LGBTIQ+ community.		
Timeframe	The original delivery timeline of this project was between Q1 and Q2 2021		
Evaluation Notes	 The data sources for this evaluation included A Project Manager survey completed by 3 people An evaluation summary completed by SVMH A project summary form completed by SVMH 		
	 Please note: This evaluation does not purport to summarise reporting from SVMH. Separate documentation provided to NWMPHN, which details strengths, challenges, and opportunities to improve the project should be read in full and in conjunction with this evaluation. 		
Further notes	Due to patient confidentiality, Impact Co. was unable to connect with the participants in the project.		

Evaluation Findings

A summary of the key evaluation findings is outlined in the table below. Each of these are outlined in more detail on the following pages.

Category	Insight
Category 1: Project Delivery	Insight 1.1: Low participation in the project indicates opportunities to improve the design and delivery of the project
Category 2: Management perspectives	Insight 2.1: The project demonstrated potential to deliver positive impact
	Insight 2.2: More time and flexibility would have attracted more participants and provided a better experience for participants
Category 3: Project Impact	Insight 3.1: Participants who provided feedback indicated satisfaction with the project

Category 1: Project Delivery

This category explores how the project was delivered.

Insight	Detail		
Insight 1.1: Low participation in the Project indicates opportunities	The project aimed to have 15 regular participants. However, this did not occur, with there being only 3 enrolled participants and with most sessions attended by 1 participant (who attended 8 out of 10 sessions). The below table details how often each of the three participants attended sessions		
to improve the design and	Participant	Number of Sessions attended	
delivery of the	Participant #1	4	
Project	Participant #2	8	
	Participant #3	2	
	Table 28 - Attendance of participants		
	The possible reasons for the attendance were noted by the Project Managers of the project, which is explored further below in Category 2.		

Category 2: Management Perspectives

This category explores the reflections of Project Managers.

Please note limitations of Management Perspectives outlined in 'Evaluation Methodology' above.

(The content is continued on the following page.)

Insight	Detail		
Insight 2.1: Managers thought the	When surveyed, managers indicated that the project was beneficial in various ways. However, this finding must be considered in the context of the limited participants in the project itself.		
project was valuable, but that its impact was limited	When identifying the benefit and / or impact of the project, the Project Manager survey respondents noted that the greatest benefit was that it increased the participant's understanding of strategies to improve mental health and enhance resilience using creative modalities. By contrast, the same respondents noted that the impact of the project would be most limited in changing the practice, behaviours and culture of SVMH.		
	A summary of the survey completed by the Project Managers of the found in the table below.	he project can be	
	Question	Average rating (out of 10)	
	How satisfied are you that the project increased understanding of strategies to improve mental health and enhance resilience using creative modalities?	9.7	
	How satisfied are you that the project increased help seeking behaviour (i.e., likelihood to seek help) amongst participants?	8.7	
	How satisfied are you that the project increased the profile of people with lived experience to support recovery?	8.3	
	How satisfied are you that the project increased participants' confidence to seek help or support their own mental health and wellbeing?	8.3	
	How satisfied are you that the project increased sense of belonging and community among people identifying as LGBTIQ+?	8.0	
	How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the project?	8.0	
	How satisfied are you that the project increased understanding of key issues relevant to the LGBTIQ+ community (including mental health)?	7.7	

Insight	Detail	
	How satisfied are you that the project increased connections7.7with other members of the LGBTIQ+ community?	
	How satisfied are you that the project made SVMH a more7.0safe and inclusive space for the LGBTIQ+ community?	
	How satisfied are you that the project improved attitudes and6.0behaviours towards the LGBTIQ+ community?	
	How satisfied are you that the project increased6.0understanding and capacity of SVMH staff to create safer and more inclusive environments?6.0	
	Table 29 - Management satisfaction with the Project	
Insight 2.2: More time and flexibility would have attracted more	Respondents to the Project Manager survey indicated that more flexible referral criteria, a more appropriate space, and longer timelines would have made a material difference to participant experience and project success. Of particular note, the Project Manager survey respondents that the project could have been improved via the following:	
participants and provided a better experience for participants	 Working with a broader cohort: With the project's target cohort, there were unexpected discharges and relapses into poor mental health which contributed to low and inconsistent attendance. Broadening the referral criteria: Respondents noted that potential participants were not allowed to participate in the project and that the Project would benefit more people if it was opened to all groups including SVHM HOPE, BETRS, PARCS and non-case managed consumers of PARCS Identifying a more suitable venue to deliver the Project: Respondents noted that the venue was situated next to the case managers' and the staff room, which contributed to frequent interruptions. Employing more flexible timing to align to the cadence of potential participants: Respondents noted that the 'strict' timeline meant that it was challenging to promote, run and evaluate the project within the limited timeframe. 	
	Despite the above themes, respondents credited the project as being worthwhile and well managed even though it faced a number of challenges.	
	Note: These themes closely reflect those detailed in the Evaluation Summary, facilitators reflections (pages 8-10)	

Category 4: Project Impact

This category explores the impact of the project. The identified short-term outcomes of this Project (per the project logic depicted in Appendix A) were as follows:

- Increased understanding of key issues relevant to the LGBTIQ+ community (including around mental health)
- Increased understanding of strategies to improve mental health and enhance resilience using creative modalities
- Increased connections with other members of the LGBTIQ+ community
- Greater recognition of SVMH as a safer and inclusive space for the LGBTIQ+ community

Insight	Detail
Insight Insight 3.1: Participants who provided feedback indicated satisfaction with the project	DetailAn evaluation conducted by SVMH indicates that, where feedback was provided, its participants benefitted from the project.As noted above, there was one participant that attended the project regularly. As a result, this individual would have received an experience that was very different from that envisaged in the original design (and form the other participants). Instead of 15 participants working collaboratively under the guidance of three facilitators, this individual received the attention of all three facilitators.When asked about the project, the participant that attended most sessions agreed or strongly agreed with the following statements:• The sessions were relevant and met their expectations • The facilitators were supportive and helpful • They gained new knowledge to support their wellbeing • They felt they could implement the learnings into their life • They enjoyed being part of the group
	• They would recommend the group to others Whilst these results are encouraging, they reflect the views of only one participant that received a unique experience and, therefore, cannot be relied upon to draw firm conclusions about the success of the project.

EVALUATION RECOMMENDATIONS

12. RECOMMENDATIONS

The Program, whilst being significantly challenged by the COVID-19 pandemic, supported a wide variety of initiatives in line with its stated intention to:

- Encourage and promote intersectionality
- Build inclusive communities and strengthen community resilience
- Address stigma and discrimination
- Raise awareness of effective suicide prevention practices.

The small scale of the grants (i.e., \$10,000) inherently constrained the program and its impact. Whilst it enabled a wide variety of activities from podcasts, to roller-skating lessons, building social connection for refugees and asylum seekers who identify as LGBTIQ+, Impact Co. has identified three key opportunities for a future program of this type to get better outcomes for individual funded initiatives, as well improve the chances of permanently improving capacity and capability amongst small organisations operating in or working with LGBTIQ+ communities.

The following recommendations should be considered for future similar programs. These recommendations have been grouped into the three categories below:

- Engaging with the community: enabling the program to engage and attract target cohorts
- Project delivery: ensuring funded initiatives can be delivered effectively
- **Project impact**: designing initiatives to ensure they are achievable and can be effectively evaluated

Category	Recommendation
Engaging with the Community	Recommendation 1: Support and supplement small organisations' networks to maximise reach and impact
	A common theme amongst survey responses was the importance of networks (social media and word of mouth) to encourage uptake of commissioned projects. Smaller organisations have smaller and less influential networks when compared to larger, more established organisations and individuals.
	When commissioning similar programs in the future, this limitation should be considered in the design of the program. This could be done, for example, by ensuring smaller organisations are connected into the networks of larger organisations who are able to promote commissioned projects to a wider audience. The PHN, as an honest broker, is the ideal stakeholder to play this connecting role.
Project Delivery	Recommendation 2: Partner with small commissioned organisations to address capacity and capability limitations
	NWMPHN took several steps to consider small organisations' limited capacity, including simplifying the application and evaluation processes, and being flexible to their needs as they adapted to the pandemic environment.
	In the future, commissioning organisations should take proactive steps to build the capacity of smaller organisations (in addition to supplementing their networks as described in recommendation 1). For example, NWMPHN may have provided project management, evaluation, or communications expertise to smaller organisations through

	a variety of methods and channels (e.g., ongoing mentoring or one-off learning sessions). By taking a partnership approach, grant projects can be delivered more effectively and capability can be built in grant recipients.
Project Impact	Recommendation 3: Ensure objectives are achievable and measurable to ensure the full value of the program is delivered for all parties.
	Those interviewed by Impact Co. indicated that the Wellbeing Grants were designed to fill a need identified by the Taskforce to support specific cohorts within the general LGBTIQ+ population (e.g., CALD), as the majority of Trial spending was directed to either health practitioners, research institutions, or the public at large. The Wellbeing Grants were also designed to support smaller organisations which would not normally gain access to traditional funding streams. The one-off nature of the small grants inherently limited the length of any impact and the ability of any organisation to meet the intentions described above.
	In the future, commissioning bodies should reflect on the possible impact and constraints of a similar program and design objectives (and expectations) accordingly. For example, aiming to build capacity in a specific way, pilot a new project, or improve an existing service are measurable within the context of a small grants program. By being explicit about these aims upfront, commissioned initiatives can be appropriately designed, delivered, and evaluated with their impact measured, even within a short-term and lightly funded program.

APPENDICES

APPENDIX A: LEARN TO SKATE PROGRAM

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **1** person
- A Participant survey completed by **12** people

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question	
Арргоасн	consulted	Q1	Q2
Online surveys with Program participants	A total of 12 participants completed the survey	Х	Х
Online survey with the Project Manager	A total of 1 Project Manager completed the survey	Х	Х

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

The timeframe of the data gathering occurred in July 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
	Procure 7 additional sets of		Short-term	Medium-term	Long-term
National Suicide Prevention Trial Funding	skating gear (incl. wrist, knee and elbow padding – including inclusive size padding) and helmets	Expanded Roller Derby beginner program	Increased participation (including ongoing participation) of the LGBTIQ community in the roller derby program	Increased help seeking behaviour (i.e. likelihood to seek help)	Improved mental health wellbeing and resilience among the LGBTIQ
	Co-design expanded		Increased awareness and celebration of people	Increased confidence to seek help or support	community
	beginner program, media strategy and LGBTIQ suicide		identifying as LGBTIQ in sport	one's own mental health and wellbeing	More inclusive communities Reduced stigma and discrimination of LGBTIQ community
Input from the Victorian Derby	prevention forum	Media strategy	Increased access to the roller derby program and connections with other	Increased sense of belonging and	
League Inc	Implement expanded beginner program targeting		members of the LGBTIQ community	community among people identifying as	
	the LGTIQ community		Increased awareness and	LGBTIQ	
Participation by the LGBTIQ community in program activities	Implement media strategy		understanding of key issues relevant to the LGBTIQ community (including around mental health)	Improved attitudes and behaviours towards the LGBTIQ community	,
	Implement LGTIQ suicide prevention forum	LGBTIQ suicide prevention forum	Increased understanding of strategies to improve mental health and enhance resilience	Improved organisational sustainability	Reduced suicidal ideation and rates of suicide

Figure 3: Learn to Skate program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation.

Survey Questions - Participants

Background

- 1. Age: [Free Text Response]
- 2. Gender: [Free Text Response]
- 3. Sexuality: [Free Text Response]
- 4. Faith: [Free Text Response]
- 5. Culture: [Free Text Response]

Process Evaluation

- 1. How did you find out about the Learn to Skate: Rainbow Series initiative: [Free Text Response]
- 2. How effective did you find the advertising/information/recruitment materials for the initiative:
 - o Extremely effective
 - o Very effective
 - o Somewhat effective
 - Not so effective
 - o Not at all effective
- 3. How might the advertising/information/recruitment materials for the initiative be improved: [Free Text Response]

Experience

- 1. How satisfied are you that this initiative will increase participation (including ongoing participation) of the LGBTIQ community in the roller derby program: [Rating between 1-10]
- 2. How satisfied are you that the initiative will increase awareness and celebration of people identifying as LGBTIQ in sport: [Rating between 1-10]
- 3. How satisfied are you that the session that you attended increased your awareness of the support services that are available for the LGBTIQ community: [Rating between 1-10]
- 4. How satisfied are you that the initiative will increase awareness and understanding of key issues relevant to the LGBTIQ community (including around mental health): [Rating between 1-10]
- 5. How satisfied are you that the initiative will increase access to the roller derby program and connections with other members of the LGBTIQ community: [Rating between 1-10]

- 6. How satisfied are you that the initiative will increase understanding of strategies to improve mental health and enhance resilience: [Rating between 1-10]
- 7. What were 3 strengths of the initiative: [Free Text Response]
- 8. Identify 3 ways in which the initiative could have been improved: [Free Text Response]

Survey Questions – Project Manager

Experience

- 1. How satisfied are you that the Initiative(s) increased participation (including ongoing participation) of the LGBTIQ community in the roller derby program: [Rating between 1-10]
- 2. How satisfied are you that the Initiative(s) increased awareness and celebration of people identifying as LGBTIQ in sport: [Rating between 1-10]
- 3. How satisfied are you that the Initiative(s) increased your awareness of the support services that are available for the LGBTIQ community: [Rating between 1-10]
- 4. How satisfied are you that the Initiative(s) increased awareness and understanding of key issues relevant to the LGBTIQ community (including around mental health): [Rating between 1-10]
- 5. How satisfied are you that the Initiative(s) increased access to the roller derby program and connections with other members of the LGBTIQ community: [Rating between 1-10]
- 6. How satisfied are you that the Initiative(s) will increase understanding of strategies to improve mental health and enhance resilience: [Rating between 1-10]
- 7. How satisfied are you that the Initiative(s) increased the likelihood that attendees will seek help or support their own mental health and wellbeing: [Rating between 1-10]
- 8. How satisfied are you that the Initiative(s) increased the sense of belonging and community amongst people identifying as LGBTIQ: [Rating between 1-10]
- 9. How satisfied are you that the Initiative(s) improved attitudes and behaviours towards the LGBTIQ community: [Rating between 1-10]
- 10. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative(s): [Rating between 1-10]
- 11. What were the greatest challenges to the delivery of the Initiative(s): [Free Text Response]
- 12. How can the VRDL initiatives be improved in the future: [Free Text Response]
- 13. Do you have any further comments you would like to make for the purposes of this evaluation: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

APPENDIX B: BEST DAY WORST DAY PODCAST

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **1** person
- A listener survey completed by **6** people
- An interviewee survey completed by **1** person

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question	
Арргоаст	consulted	Q1	Q2
Online survey with the	A total of 1 Project Manager	V	V
Project Manager	completed the survey	~	Х
Online survey with	A total of 6 listeners	Х	v
listeners	completed the survey	^	^
Online survey with	A total of 1 interviewee	V	v
interviewees	completed the survey	~	^

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

Data gathering occurred between March and July 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
			Short-term	Medium-term	Long-term
National Suicide Prevention Trial Funding	Identify individuals to be part of the podcast		Increased understanding of key issues relevant to the LGBTIQ community (including around	Increased help seeking behaviour (i.e. likelihood to seek help)	Improved mental health wellbeing and resilience among the LGBTIQ community
		mental health)	Increased confidence to		
Input from the Gender	Interview relevant individuals and record podcasts	12-part podcast series where LGBTIQ community advocates are asked to recount their	Increased understanding of strategies to improve mental health and enhance resilience	seek help or support one's own mental health and wellbeing	More inclusive and empathetic communities
Whisperers	Promote podcast series	asked to recount their worst day and best day to date in their life	Increased connections with other members of the LGBTIQ community	Increased empathy and understanding amongst (and between) members of the LGBTIQ	Reduced stigma and discrimination of LGBTIQ community
			community		
Participation by LGBTIQ community advocates	Creation of a visual art display		Increasing the overall knowledge and history base of the LGBTIQ community	Increased sense of belonging and community among people identifying as LGBTIQ	Reduced suicidal ideation and rates of suicide

Figure 4 - Best Day Worst Day program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation

Survey questions – project manager

- 1. How satisfied are you that the initiative increased understanding of key issues relevant to the LGBTIQ community (including around mental health): [Rating between 1-10]
- 2. How satisfied are you that the initiative increased understanding of strategies to improve mental health and enhance resilience: [Rating between 1-10]
- 3. How satisfied are you that the initiative increased the overall knowledge and history base of the LGBTIQ community: [Rating between 1-10]
- 4. How satisfied are you that the initiative increased confidence to seek help or support one's own mental health and wellbeing amongst listeners: [Rating between 1-10]
- 5. How satisfied are you that the initiative increased empathy and understanding amongst (and between) members of the LGBTIQ community: [Rating between 1-10]
- 6. How satisfied are you that the initiative has increased the sense of belonging and community among people identifying as LGBTIQ: [Rating between 1-10]
- 7. What were the greatest challenges to the delivery of this initiative: [Free Text Response]
- 8. Do you have any further comments you would like to note for the purposes of this evaluation: [Free Text Response]
- 9. How satisfied were you with the support from NWMPHN: [Rating between 1-10]

Survey questions – listener survey

Background

- 1. Please provide your age: [Free Text Response]
- 2. Please describe your gender: [Free Text Response]
- 3. Please describe your sexuality: [Free Text Response]
- 4. Please describe your faith: [Free Text Response]
- 5. Please describe your culture: [Free Text Response]

Process evaluation

- 1. How did you find out about the 'Best and Worst Day' podcast: [Free Text Response]
- 2. How effective did you find the advertising and information about the podcast:

- o Extremely effective
- Very effective
- o Somewhat effective
- Not so effective
- o Not at all effective
- 3. How might the advertising and information materials for the podcast be improved: [Free Text Response]

Experience

- 1. How satisfied were you that the podcast will increase understanding of key issues relevant to the LGBTIQ community (including around mental health): [Rating between 1-10]
- 2. How satisfied were you that the podcast will increase understanding of strategies to improve mental health and enhance resilience: [Rating between 1-10]
- 3. How satisfied were you that the podcast will increase the overall knowledge and history base of the LGBTIQ community: [Rating between 1-10]
- 4. Identify 3 strengths of the podcast: [Free Text Response]
- 5. Identify 3 ways in which the podcast could have been improved: [Free Text Response]

Survey questions – interviewees

Background

- 1. Please provide your age: [Free Text Response]
- 2. Please describe your gender: [Free Text Response]
- 3. Please describe your sexuality: [Free Text Response]
- 4. Please describe your faith: [Free Text Response]
- 5. Please describe your culture: [Free Text Response]

Process evaluation

1. How did you find out about the 'Best and Worst Day' podcast: [Free Text Response]

Experience

- 1. How satisfied were you that the podcast will increase understanding of key issues relevant to the LGBTIQ community (including around mental health): [Rating between 1-10]
- 2. How satisfied were you that the podcast will increase understanding of strategies to improve mental health and enhance resilience: [Rating between 1-10]
- 3. How satisfied were you that the podcast will increase connections with other members of the LGBTIQ community: [Rating between 1-10]
- 4. How satisfied were you that the podcast will increase the overall knowledge and history base of the LGBTIQ community: [Rating between 1-10]
- 5. Identify 3 strengths of the podcast: [Free Text Response]
- 6. Identify 3 ways in which the podcast could have been improved: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

APPENDIX C: CONSULTATION WITH LGBTIQ+ COMMUNITIES AND STAKEHOLDERS

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **6** people
- A Participant survey completed by **4** people

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question		
Арргоасн	consulted	Q1	Q2	
Online survey with the Project Manager	A total of 6 Project Managers completed the survey	Х	Х	
Online surveys with Program participants	A total of 4 participants completed the survey	Х	Х	

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

Data was gathered between June and July 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output	Outco	me	
			Short-term	Medium-term	Long-term
National Suicide Prevention Trial Funding	Design scope and focus of consultation process (including identifying key issues to explore during the consultation)	Final report that identifies the following for the LGBTIQ community: • Service needs (i.e.	Increased representation of input from the LGBTIQ community in research and service design	Increased agency and	Improved mental health wellbeing and resilience
	Identify individuals to participate	needs of the LGBTIQ community) • Desired service	Increased awareness of the needs of the LGBTIQ community and capacity to address these needs	empowerment among the LGBTIQ community	among the LGBTIQ community
Input from locuit	Desuit rvicesConduct 4 x focus groups and alternative forms of consultations (including telephone interviews and surveys)parameters to that a service is engaging, welc and safe for the community)m the QSynthesise findings from consultations. Service availab (i.e. services th LGBTIQ commu and gaps that e . Service and practice is . Service is 		Increased understanding of how organisational services, practice and	,	More inclusive
Input from Jesuit Social Services				Enhanced mental health and LGBTIQ services	communities
			operations need to be designed/refined to effectively meet the needs of the LGBTIQ community		Reduced stigma and discrimination of
		• Service availability/gaps (i.e. services that the	Increased understanding of service gaps	(through the	LGBTIQ community
Input from the LGBTIQ community		LGBTIQ community use	that exists for the LGBTIQ community	refinement of existing services	
		 Service and practice recommendations for 	Increased awareness of services offered	and establishment of	Reduced suicidal ideation and rates
	Collate insights in a final report	existing work for JSS	by JSS and strengthening of connections between LGBTIQ community and JSS	new ones)	of suicide

Figure 5 - Consultation with LGBTIQ+ communities and stakeholders program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation

Survey questions - project manager

- 1. How satisfied are you that the findings from the Initiative will increase awareness of the needs of the LGBTIQ+ community: [Rating between 1-10]
- 2. How satisfied are you that the findings from the Initiative will increase understanding of how organisational services, practice and operations need to be designed to effectively meet the needs of the LGBTIQ+ community: [Rating between 1-10]
- 3. How satisfied are you that the findings from the Initiative will increase the understanding of service gaps that exists for the LGBTIQ+ community: [Rating between 1-10]
- 4. How satisfied are you that the findings from the Initiative have enabled the LGBTIQ+ community to provide input into research and service design: [Rating between 1-10]
- How satisfied are you that the findings from the Initiative have increased the awareness of services by JSS and strengthened the connection between the LGBTIQ+ community and JSS: [Rating between 1-10]
- 6. How satisfied are you that the findings from the Initiative has empowered the LGBTIQ+ community: [Rating between 1-10]
- 7. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the initiative: [Rating between 1-10]
- 8. What were the greatest challenges to the delivery of the Initiative: [Free Text Response]
- 9. How can the Initiative be improved in the future: [Free Text Response]
- 10. Do you have any further comments you would like to make for the purposes of this evaluation: [Free Text Response]

Survey questions – participant

Background

- 1. Please provide your age: [Free Text Response]
- 2. Please describe your gender: [Free Text Response]
- 3. Please describe your sexuality: [Free Text Response]
- 4. Please describe your faith: [Free Text Response]
- 5. Please describe your culture: [Free Text Response]

Process evaluation

- 1. How did you find out about the 'Making Change! Improving Mental Health services for LGBTIQ+ Communities' initiative: [Free Text Response]
- 2. How effective did you find the advertising/information/recruitment materials for the initiative
 - o Extremely effective
 - o Very effective
 - o Somewhat effective
 - Not so effective
 - Not at all effective
- 3. How might the advertising/information/recruitment materials for the initiative be improved: [Free Text Response]

Experience

- 1. How satisfied were you that the survey findings will increase awareness of the needs of the LGBTIQ+ community: [Rating between 1-10]
- 2. How satisfied were you that the survey findings will increase the understanding of how organisational services, practice and operations need to be designed to effectively meet the needs of the LGBTIQ+ community: [Rating between 1-10]
- 3. How satisfied were you that the survey findings will increase the awareness of the needs of the LGBTIQ+ community: [Rating between 1-10]
- 4. How satisfied were you that the survey findings will increase the understanding of service gaps that exists for the LGBTIQ+ community: [Rating between 1-10]
- 5. What were some of the strengths of the survey: [Free Text Response]
- 6. In which areas could the survey have been improved: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

APPENDIX D: BUILDING AFFIRMATIVE HEALTHCARE FOR LGBTIQ COMMUNITY MEMBERS

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **4** people
- A participant survey completed by **58** people

Please note:

- The Grant Recipient ran its own evaluation of the workshops through an online survey (analysed by Impact Co.)
- Impact Co. issued its own survey of project managers

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question	
Approach	consulted	Q1	Q2
Online survey with the	A total of 4 Project Managers	V	v
Project Manager	completed the survey	~	^
Online surveys with	A total of 58 participants	V	v
Program participants	completed the survey	X	~

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

Impact Co gathered data from Managers in March 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
National Suicide Prevention Trial Funding	Design capacity building workshops around the	Three capacity building workshops targeting health and aged care workers in the Macedon Ranges (estimated 90 participants across 3 workshops)	from general	Increased referral rates from general	Long-term Increased capability to provide inclusive and
Input from Sunbury and Cobaw Community Health	 following topic areas: Trans and gender diverse (TGD) healthcare Healthcare for people 		Increased awareness of approaches to provide inclusive and safe healthcare to the LGBTIQ community	practitioners, health and aged care professionals to LGBTIQ-specific services	safe healthcare to the LGBTIQ community Improved mental health wellbeing and resilience among the LGBTIQ community in a regional and rural context
Support to promote the workshops by	with an intersex variation • LGBTIQ aging and mental wellbeing		LOBING community	Increased confidence to provide inclusive and safer healthcare to the LGBTIQ community	
relevant organisations in the Macedon Ranges	Engage relevant		participants across 3	Improved knowledge of LGBTIQ-specific services	Improved attitudes and behaviours towards the LGBTIQ community
Participation from	organisations within the Macedon Ranges to promote the workshops		Improved	Increased proportion of LGBTIQ community members feeling	discrimination of LGBTIQ community
health and aged care workers	Evaluate the effectiveness of the workshops		understanding of the needs of the LGBTIQ community	healthcare is delivered in a safe and inclusive manner	Reduced suicidal ideation and rates of suicide

Figure 6 - Building affirmative healthcare for LGBTIQ community members program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation

Survey questions – project manager

- 1. How satisfied are you that the Initiative increased awareness of approaches to provide inclusive and safe healthcare to the LGBTIQ+ community: [Rating between 1-10]
- 2. How satisfied are you that the Initiative improved knowledge of LGBTIQ+ specific services: [Rating between 1-10]
- 3. How satisfied are you that the Initiative improved understanding of the needs of the LGBTIQ+ community: [Rating between 1-10]
- 4. How satisfied are you that the Initiative increased referral rates from general practitioners, health and aged care professionals to LGBTIQ+ specific services: [Rating between 1-10]
- 5. How satisfied are you that the Initiative increased confidence to provide inclusive and safer healthcare to the LGBTIQ+ community: [Rating between 1-10]
- 6. How satisfied are you that the Initiative improved attitudes and behaviours towards the LGBTIQ+ community: [Rating between 1-10]
- How satisfied are you that the Initiative increased the proportion of LGBTIQ+ community members feeling that healthcare is delivered in a safe and inclusive manner: [Rating between 1-10]
- 8. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative: [Rating between 1-10]
- 9. What were the greatest challenges to the delivery of the Initiative: [Free Text Response]
- 10. How can the Initiative be improved in the future: [Free Text Response]
- 11. Do you have any further comments you would like to make for the purposes of this evaluation: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

Survey questions - participant

Intersex awareness training

- 1. What is your profession/job title: [Free Text Response]
- 2. How did you find out about the Intersex Awareness workshop: [Free Text Response]
- 3. Rate your knowledge about intersex before the training

- Not at all knowledgeable
- o Slightly knowledgeable
- o Moderately knowledgeable
- Very knowledgeable
- o Extremely knowledgeable
- 4. Rate your knowledge about intersex after the training.
 - o Not at all knowledgeable
 - o Slightly knowledgeable
 - o Moderately knowledgeable
 - o Very knowledgeable
 - o Extremely knowledgeable
- 5. Rate your confidence in providing affirmative healthcare to people with an intersex variation before the training
 - Not at all confident
 - o Slightly confident
 - o Moderately confident
 - o Very confident
 - Extremely confident
- 6. Rate your confidence in providing affirmative healthcare to people with an intersex variation after the training
 - o Not at all confident
 - o Slightly confident
 - o Moderately confident
 - o Very confident
 - o Extremely confident
- 7. Rate your confidence in successfully connecting people with an intersex variation who use your service to intersex peer support
 - o Not at all confident
 - o Slightly confident
 - Moderately confident
 - o Very confident
 - Extremely confident
- 8. Please select all of the following statements that reflect your experience of the training:
 - The training content met my expectations
 - The training was of a high standard
 - The training content was appropriate for my line of work
 - \circ $\;$ The mix of presentations and activities was appropriate for my line of work
 - The instructors content knowledge was of a high standard
 - o The training had the right balance between presenting and interaction
 - The speed of delivery was suitable for my learning needs
 - o The instructor's organisation and preparation was highly professional
 - I felt highly engaged by the instructor's enthusiasm
 - The content provided me with new insight about intersex
 - This training is highly relevant for people work in the health sector
 - o Other (please specify)
- 9. What, if anything, do you plan to use from this workshop: [Free Text Response]

- 10. How could this workshop be improved to make it a more effective learning experience: [Free Text Response]
- 11. What part of this workshop was most helpful to your learning: [Free Text Response]
- 12. Are there any particular areas of intersex informed healthcare (in your current role) that you would like to learn more about: [Free Text Response]
- 13. Any other feedback: [Free Text Response]

LGBTI Ageing Training

- 1. What is your profession/job title: [Free Text Response]
- 2. How did you find out about the LGBTI Aging and Healthcare workshop: [Free Text Response]
- 3. Rate your knowledge about LGBTI and aging before the training
 - o Not at all knowledgeable
 - o Slightly knowledgeable
 - o Moderately knowledgeable
 - o Very knowledgeable
 - o Extremely knowledgeable
- 4. Rate your knowledge about LGBTI and aging after the training
 - o Not at all knowledgeable
 - o Slightly knowledgeable
 - o Moderately knowledgeable
 - o Very knowledgeable
 - o Extremely knowledgeable
- 5. Rate your confidence in working with aging LGBTI community before the training
 - o Not at all confident
 - Slightly confident
 - o Moderately confident
 - o Very confident
 - o Extremely confident
- 6. Rate your confidence in working with aging LGBTI community after the training
 - Not at all confident
 - Slightly confident
 - o Moderately confident
 - o Very confident
 - o Extremely confident
- 7. Please select all of the following statements that reflect your experience of the training:
 - The training content met my expectations
 - The training was of a high standard
 - The training content was appropriate for my line of work
 - o The mix of presentations and activities was appropriate for my line of work
 - o The instructors content knowledge was of a high standard
 - o The training had the right balance between presenting and interaction
 - o The speed of delivery was suitable for my learning needs
 - o The instructor's organisation and preparation was highly professional
 - o I felt highly engaged by the instructor's enthusiasm
 - o The content provided me with new insight about LGBTI aging
 - This training is highly relevant for people who work in the health and aged care sector

- o Other (please specify)
- 8. What, if anything, do you plan to use from this workshop: [Free Text Response]
- 9. How could this workshop be improved to make it a more effective learning experience: [Free Text Response]
- 10. What part of this workshop was most helpful to your learning: [Free Text Response]
- 11. Are there any particular areas of LGBTI aging and healthcare (in your current role) that you would like to learn more about: [Free Text Response]
- 12. Any other feedback: [Free Text Response]

Trans and Gender Diverse Training

- 7. What is your profession/job title: [Free Text Response]
- 8. How did you find out about the Trans and Gender Diverse Healthcare workshop: [Free Text Response]
- 9. Rate your knowledge about Transgender and Gender Diversity before the training
 - Not at all knowledgeable
 - o Slightly knowledgeable
 - Moderately knowledgeable
 - o Very knowledgeable
 - Extremely knowledgeable
- 10. Rate your knowledge about Transgender and Gender Diversity after the training
 - o Not at all knowledgeable
 - o Slightly knowledgeable
 - Moderately knowledgeable
 - o Very knowledgeable
 - o Extremely knowledgeable
- 11. Rate your confidence in providing affirmative healthcare to Trans and Gender Diverse community before the training
 - o Not at all confident
 - o Slightly confident
 - Moderately confident
 - o Very confident
 - Extremely confident
- 12. Rate your confidence in providing affirmative healthcare to Trans and Gender Diverse community after the training
 - o Not at all confident
 - o Slightly confident
 - o Moderately confident
 - Very confident
 - Extremely confident
- 13. Please select all of the following statements that reflect your experience of the training:
 - The training content met my expectations
 - The training was of a high standard
 - The training content was appropriate for my line of work
 - The mix of presentations and activities was appropriate for my line of work
 - The instructors content knowledge was of a high standard
 - o The training had the right balance between presenting and interaction
 - o The speed of delivery was suitable for my learning needs

- o The instructor's organisation and preparation was highly professional
- I felt highly engaged by the instructor's enthusiasm
- The content provided me with new insight about transgender and gender diversity
- This training is highly relevant for people who work in the health and aged care sector
- The Q&A session was engaging
- Other (please specify)
- 14. What, if anything, do you plan to use from this workshop: [Free Text Response]
- 15. How could this workshop be improved to make it a more effective learning experience: [Free Text Response]
- 16. What part of this workshop was most helpful to your learning: [Free Text Response]
- 17. Are there any particular areas of Trans and Gender Diverse healthcare (in your current role) that you would like to learn more about: [Free Text Response]
- 18. Any other feedback: [Free Text Response]

APPENDIX E: LGBTIQ+ YOUTH PEER-LED SCOPING PROJECT

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **2** people
- A participant survey completed by **13** people

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question	
Арргоасп	consulted	Q1	Q2
Online survey with the	A total of 2 Project Managers	×	Х
Project Manager	completed the survey	^	^
Online surveys with	A total of 13 participants	V	v
Program participants	completed the survey	^	~

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

The timeframe of the data gathering was between February and May 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
			Short-term	Medium-term	Long-term
National Suicide Prevention Trial Funding	Identify young people to be part of the LGBTIQ Leadership Group	LGBTIQ Leadership Group	Increased confidence and capabilities of the young people in the Leadership Group	Increased agency and empowerment among LGBTIQ youth Enhanced mental health and LGBTIQ services that meet the needs of individuals from a	Improved mental health wellbeing and resilience among the LGBTIQ community
	Establish LGBTIQ Leadership Group (approx. 8 participants)				
Input from headspace	Define scope and key activities of the LGBTIQ Leadership Group Conduct community consultation and research, with a focus on CALD LGBTIQ young people and their	Final report that identifies: Insights around the unique needs of CALD LGBTIQ			
			Enhance inclusion in headspace's services for all LGBTIQ people		
					More inclusive communities
Input from the	families	young people and their families		CALD background (e.g. in the form of	communities
young people involved in the Leadership Group	Synthesise findings from consultations and research	across 3 Headspace sites covering Glenroy, Sunshine and Werribee	Headspace sites covering Glenroy, Sunshine and	improved service access and reduced barriers)	Reduced stigma and discrimination of LGBTIQ community
	Co-design strategies to reduce the				
Input from CALD LGBTIQ young people and their families	risk of poor mental health and suicidal ideation for LGBTIQ people	 Strategies to reduce the risk of 		Improved attitudes and behaviours	Reduced suicidal ideation and rates of suicide
	Collate insights and strategies in a final report	poor mental health and suicidal ideation for CALD LGBTIQ people	Increased understanding of how to deliver appropriate and effective supports to CALD LGBTIQ young people and their families	towards the LGBTIQ community (particularly those from a CALD background)	
	Ongoing mentoring and guidance provided by headspace team				

Figure 7 - LGBTIQ+ youth peer-led scoping project program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation.

Survey Questions - Project manager

- 1. How satisfied are you that the Initiative increased confidence and capabilities within the young people in the leadership group: [Rating between 1-10]
- 2. How satisfied are you that the Initiative increased awareness of the unique issues and needs of CALD LGBGTIQ+ young people and their families: [Rating between 1-10]
- 3. How satisfied are you that the Initiative increased your understanding of how to deliver appropriate and effective supports to CALD LGBTIQ+ young people and their families: [Rating between 1-10]
- 4. How satisfied are you that the Initiative increased agency and empowerment amongst LGBTIQ+ youth: [Rating between 1-10]
- 5. How satisfied are you that the Initiative has empowered the LGBTIQ+ community: [Rating between 1-10]
- 6. How satisfied are you that the Initiative has enhanced mental health and LGBTIQ+ services to meet the needs of individuals from a CALD background: [Rating between 1-10]
- 7. How satisfied are you that the Initiative has improved attitudes and behaviours towards the LGBTIQ+ community (particularly those with a CALD background): [Rating between 1-10]
- 8. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative: [Rating between 1-10]
- 9. How can the Initiative be improved in the future: [Free Text Response]
- 10. What were the greatest challenges to the delivery of the Initiative: [Free Text Response]
- 11. Do you have any further comments you would like to make for the purposes of this evaluation: [Free Text Response]

Survey questions - participants

Background

- 1. Please provide your age: [Free Text Response]
- 2. Please describe your gender: [Free Text Response]
- 3. Please describe your sexuality: [Free Text Response]
- 4. Please describe your faith: [Free Text Response]
- 5. Please describe your culture: [Free Text Response]

Process evaluation

- 1. How did you find out about the 'LGBTIQ Youth Peer-led Scoping Project': [Free Text Response]
- 2. How effective did you find the advertising/information/recruitment materials for the initiative
 - Extremely effective
 - Very effective
 - Somewhat effective
 - Not so effective
 - Not at all effective
- 3. How might the advertising/information/recruitment materials for the initiative be improved: [Free Text Response]

Experience

- 1. How satisfied were you that the project will increase the confidence and capabilities of young people contributing to the Leadership Group: [Rating between 1-10]
- 2. How satisfied were you that the project will enhance inclusion in headspace's services for all LGBTIQ people: [Rating between 1-10]
- 3. How satisfied were you that the project will increase headspace's awareness of the needs of CALD LGBTIQ young people and their families: [Rating between 1-10]
- 4. How satisfied were you that the project will increase headspace's understanding of how to deliver appropriate and effective supports to CALD LGBTIQ young people and their families: [Rating between 1-10]
- 5. What were some of the strengths of the project: [Free Text Response]
- 6. In which areas could the project have been improved: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

APPENDIX F: QUEER REFUGE

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **1** person
- A Participant survey completed by **10** people

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	Evaluation question	
Арргоасн	consulted	Q1	Q2
Online surveys with Program participants	A total of 10 participants completed the survey	Х	Х
Online survey with the Project ManagerA total of 1 Project Manager completed the survey		Х	Х

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

The timeframe of the data gathering was between May and July 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
National Suicide Prevention Trial Funding	Identify appropriate person with a lived experience as a refugee/asylum seeker to facilitate support groups		Short-term New connections with other members of the LGBTIQ community	navigate the broad wellbeing and resil	Improved mental health
Input from people with a lived experience		Fortnightly support group meetings to discuss issues that impact them as	Increased awareness of rights		wellbeing and resilience among the LGBTIQ community
Input from BridgeMeals	Design support groups (including identifying specialist speakers)	refugees and asylum seekers that identify as LGBTIQ, targeting individuals	the support services that are available for the LGBTIQ community	Increased sense of	Reduced suicidal ideation and rates of suicide
Participation from LGBTIQ refugees and asylum seekers			Increased community a understanding around people identify	belonging and community among people identifying as LGBTIQ	

Figure 8 - Queer Refuge program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation.

Survey Questions - Participants

Background

- 1. Age: [Free Text Response]
- 2. Gender: [Free Text Response]
- 3. Sexuality: [Free Text Response]
- 4. Faith: [Free Text Response]
- 5. Culture: [Free Text Response]
- 6. What is your current migration status
 - I am currently seeking asylum (on bridging visa, have lodged the protection visa application)
 - I have a temporary protection visa (TPV or SHEV)
 - I have a permanent protection visa
 - I am a citizen (was on a protection visa before)
 - I am a migrant
 - Other
- 7. Which session did you attend as part of the Queer Refuge initiative? If you attended multiple sessions, please note how many you attended: [Free Text Response]

Process Evaluation

- 1. How did you find out about the Queer Refuge initiative: [Free Text Response]
- 2. How effective did you find the advertising/information/recruitment materials for the initiative:
 - Extremely effective
 - Very effective
 - Somewhat effective
 - Not so effective
 - Not at all effective
- 3. How might the advertising/information/recruitment materials for the initiative be improved: [Free Text Response]

Experience

- 1. How satisfied are you that the session that you attended helped to create new connections with other members of the LGBTIQ community: [Rating between 1-10]
- 2. How satisfied are you that the session that you attended increased your awareness of your rights: [Rating between 1-10]
- 3. How satisfied are you that the session that you attended increased your awareness of the support services that are available for the LGBTIQ community: [Rating between 1-10]
- 4. How satisfied are you that the session that you attended increased your understanding of issues impacting LGBTIQ refugees and asylum seekers: [Rating between 1-10]
- 5. What were 3 strengths of the session: [Free Text Response]
- 6. How could the session have been improved: [Free Text Response]

Survey Questions – Project Managers

- 1. How satisfied are you that the Initiative helped to create new connections between members of the LGBTIQ+ community: [Rating between 1-10]
- 2. How satisfied are you that the Initiative helped to create new connections among people identifying as LGBTIQ+ that are refugees or asylum seekers: [Rating between 1-10]
- 3. How satisfied are you that the Initiative built the capacity and confidence of personnel in coordinating and facilitating community programs: [Rating between 1-10]
- 4. How satisfied are you that the Initiative increased attendees' awareness of their rights: [Rating between 1-10]
- 5. How satisfied are you that the Initiative increased attendees' awareness of the support services that are available for the LGBTIQ+ community: [Rating between 1-10]
- 6. How satisfied are you that the Initiative increased attendees' understanding of issues impacting LGBTIQ+ refugees and asylum seekers: [Rating between 1-10]
- 7. How satisfied are you that the Initiative increased the confidence of facilitators and coordinators to undertake similar work and contribute to the future development of responses for the community: [Rating between 1-10]
- 8. How satisfied are you that the Initiative increased attendees' confidence when navigating the broader health and social services systems: [Rating between 1-10]
- 9. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the initiative: [Rating between 1-10]
- 10. What were the greatest challenges to the delivery of the initiative: [Free Text Response]
- 11. How can the Intervention be improved in the future: [Free Text Response]
- 12. Do you have any further comments you would like to note for the purposes of the evaluation: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.

APPENDIX G: VISUAL ARTS PROGRAM

Evaluation Scope and Methodology

The data sources for this evaluation included:

- A Project Manager survey completed by **3** people
- An evaluation summary completed by SVMH
- A project summary form completed by SVMH

Evaluation questions

The agreed evaluation questions that form the focus of this evaluation are identified below. They have been grouped according to questions that relate to the process of designing and implementing the Program and questions that relate to the outcomes achieved.

Element	Evaluation questions
Process	1. Was the project designed and implemented effectively?
Outcomes	2. Did the project achieve its intended outcome?

Data gathering

Approach

To support this evaluation, Impact Co. developed a mixed-methods approach to data collection. The matrix below highlights the various methods utilised to address each of the evaluation questions outlined previously.

Approach	Number of stakeholders	umber of stakeholders Evaluation questi	
Approach	consulted Q1		Q2
Online surveys with Program managers	A total of 3 participants completed the survey	Х	Х
Review of SVMH evaluation and project summary	n/a	Х	Х

Note: 'X' indicates the data gathering approaches that seeks to address the respective evaluation questions

Timeframe

The timeframe of the data gathering occurred in May 2021.

Program Logic

The program logic below describes the potential long-term, medium-term and short-term outcomes that Program could achieve and identifies the corresponding outputs, activities and inputs of the Program. It provides the framework that underpins the design of this evaluation.

Input	Activities	Output		Outcome	
National Suicide Prevention Trial Funding	Design of group program in consultation with key stakeholders and organisations 10 v		Short-term Increased understanding of key issues relevant to the LGBTIQ community	Medium-term Increase the profile of people with lived experience to support recovery	Long-term Improved mental health wellbeing and resilience among the LGBTIQ community
		10 week group program	(including around mental health)	Increased help seeking behaviour (i.e. likelihood to seek help)	
Input from SVMH	Identify existing case managed consumers to participate in the group		Increased understanding of strategies to improve mental health and enhance resilience using creative modalities	Increased confidence to seek help or support one's own mental health and wellbeing	More inclusive communities
	program	Visual art display across		Increased sense of belonging and community among people identifying as LGBTIQ	Reduced stigma and discrimination of LGBTIQ community
			Increased connections with other members of		
Participation from case managed SVMH consumers	Delivery of group program	the mental health service and the St Vincent's Hospital Melbourne	the LGBTIQ community	Improved attitudes and behaviours towards the LGBTIQ community	
	Creation of a visual art display	campus	Greater recognition of St Vincent's as a safer and inclusive space for the LGBTIQ community	Increased understanding and capacity of SVMH staff to create safer and more inclusive environments	Reduced suicidal ideation and rates of suicide

Figure 9 - Visual Arts Program program logic

Survey

Responses to the survey was collated in Microsoft Excel for further analysis to be conducted.

Insight validation

The evaluation findings were validated with NWMPHN in consultations and a draft copy of this evaluation report was provided to NWMPHN prior to finalisation.

Survey Questions – Project Manager

- 1. How satisfied are you that the Initiative increased understanding of key issues relevant to the LGBTIQ+ community (including mental health): [Rating between 1-10]
- 2. How satisfied are you that the increased understanding of strategies to improve mental health and enhance resilience using creative modalities: [Rating between 1-10]
- 3. How satisfied are you that the Initiative increased connections with other members of the LGBTIQ+ community: [Rating between 1-10]
- 4. How satisfied are you that the Initiative made St Vincent's a more safe and inclusive space for the LGBTIQ+ community: [Rating between 1-10]
- 5. How satisfied are you that the Initiative increased the profile of people with lived experience to support recovery: [Rating between 1-10]
- 6. How satisfied are you that the Initiative increased help seeking behaviour (i.e., likelihood to seek help) amongst participants: [Rating between 1-10]
- 7. How satisfied are you that the Initiative increased participants' confidence to seek help or support their own mental health and wellbeing: [Rating between 1-10]
- 8. How satisfied are you that the Initiative increased the sense of belonging and community among people identifying as LGBTIQ+: [Rating between 1-10]
- 9. How satisfied are you that the Initiative improved attitudes and behaviours towards the LGBTIQ+ community: [Rating between 1-10]
- 10. How satisfied are you that the Initiative increased understanding and capacity of SVMH staff to create safer and more inclusive environments: [Rating between 1-10]
- 11. How satisfied are you with the support from NWMPHN throughout the entire lifecycle of the Initiative: [Rating between 1-10]
- 12. What were the greatest challenges to the delivery of the Initiative: [Free Text Response]
- 13. How can the Initiative be improved in the future: [Free Text Response]
- 14. Do you have any further comments you would like to make for the purposes of this evaluation: [Free Text Response]

Note: rating between 1-10 where 1 is not satisfied at all, and 10 is very satisfied.