

End of Program Survey

You are receiving this survey because you attended at least one of Healthy Land and Water (formerly SEQ Catchments) Land Management Training events in the last three years.

Your feedback is important to us so we can continue to deliver practical, relevant training activities and information to you.

Since 2015, the National Landcare Programme (NLP) has enabled the delivery of a range of workshops and demonstration sites on sustainable land management, soil health and water quality.

This survey aims at assessing how valuable those events are to you.

The survey will take approximately 15-20 minutes to complete.

If you have any questions about this survey, please contact Vanessa Durand at Healthy Land and Water (Vanessa.d@hlw.org.au or 0457 106 252).

This program is supported by Healthy Land and Water through funding from the Australian Government's National Landcare Programme.

PART 1/7: Your feedback on events you attended

The following questions ask you to think about events (workshops, field days and demonstration sites) you have attended in the last three years that were run or supported by Healthy Land and Water (formerly SEQ Catchments).

1. Thinking about the last three years, did you participate in any of the following types of events run or supported by Healthy Land and Water (formerly SEQ Catchments): *Tick all that apply*

- Training event (*workshops, presentation, etc.*)
- Demonstration Site (*this will have involved a site visit*)
- I do not recall attending any events →

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2. Which of the following training events did you participate in?

	Training themes	Yes (Tick all that apply)
Grazing	Grazing management (<i>eg. pasture identification, land type fencing, grazing rotation, spelling, stocking rates</i>)	<input type="checkbox"/>
	Horse grazing management	<input type="checkbox"/>
	Fencing waterways	<input type="checkbox"/>
Soil and waterways	Soil management (<i>eg. fertiliser application, soil testing</i>)	<input type="checkbox"/>
	Water quality training (<i>eg. water monitoring, calibration</i>)	<input type="checkbox"/>
	Erosion control	<input type="checkbox"/>
Environmental Management	Biodiversity assessment (<i>eg. Koala Mapping, Glossy Black Birding Day</i>)	<input type="checkbox"/>
	Weed control	<input type="checkbox"/>
	Fire management	<input type="checkbox"/>
	Fish habitat	<input type="checkbox"/>
	Other (please specify): _____	<input type="checkbox"/>

3. How satisfied are you with the skills you gained at the training event(s) you participated in? *Tick one option only*

- Not at all
 Very little
 Somewhat
 Quite a bit
 A great deal

4. What aspects, if any, did you find particularly helpful? (optional)

5. Which demonstration sites presentation did you participate in:

Demonstration Sites	Yes (Tick all that apply)
Sustainable grazing - Dunkley	<input type="checkbox"/>
Roadvale Salinity	<input type="checkbox"/>
Pimpama River Riparian Rehabilitation	<input type="checkbox"/>
Polymer Demonstration on Pineapples	<input type="checkbox"/>
I did not attend any demonstration sites	<input type="checkbox"/>
Other (please specify): _____	<input type="checkbox"/>

6. How satisfied are you with the skills you gained visiting the demonstration site(s) (field days)? Tick one option only

- Not at all Very little Somewhat Quite a bit A great deal

7. What aspects, if any, did you find particularly helpful? (optional)

8. Reflecting on the event(s) you attended, have they assisted you in dealing with challenges you have been faced with on your property or business?

- Not at all Very little Somewhat Quite a bit A great deal

9. If you attended both demonstration site field days and training events, which of these were the most useful in making change around your property or business?

- Training event
- Demonstration site visit
- Not Applicable

10. Did the training event(s) provide the following benefits to you/your property/your business?

	Yes (Tick all that apply)	How beneficial was this to you?		
		Somewhat → A great deal		
Increase business profits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improve awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improve management skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keep up to date with your skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improve the long-term sustainability of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deal with extreme events (floods, droughts, fire)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learn about best management practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
See where you sit against industry standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find funding and other resources available to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meet your neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Networking with other participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learn from expert speaker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No benefits received from training event	<input type="checkbox"/>			
Other (please specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 2/7: Your sector

11. Which of the following sector do you belong to?

Tick one option only. If you associate with more than one of the sectors listed, select the one that is most strongly associated with the reason why you attended the training event(s).

Landholder or land manager

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Government

University

Private Sector

Volunteer

Not-for-profit

Other: (Please specify): -----

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PART 3/7: Land Management Practice Changes

As a landholder or land manager, in this section you are asked to think about changes you have made on your property(ies) since attending this event(s).

The questions in this section apply to all the properties you manage.

12. What is the approximate total area of the property(ies) you manage?

Note: 1 acre = 0.4 hectares

Area (Hectares)

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13. What are the primary land uses of the property(ies) you manage and their respective area (%) ?

Example: If your property is 50 hectares, and there are crops on 10 hectares and plantation forestry on 40 hectares, then tick:

- "Cropping" and enter 20% in the approx. area column.
- "Plantation forestry" and enter 80% in the approx. area column

	Tick all that apply	Approx. area (%)
Nature conservation	<input type="checkbox"/>	-----
Grazing	<input type="checkbox"/>	-----
Forestry	<input type="checkbox"/>	-----
Cropping	<input type="checkbox"/>	-----
Horticulture (incl. tree crops)		
<i>Perennial</i>	<input type="checkbox"/>	-----
<i>Seasonal</i>	<input type="checkbox"/>	-----
Lifestyle	<input type="checkbox"/>	-----
Other (please specify): _____	<input type="checkbox"/>	-----

14. Which of the below statement(s) apply the best to the management practices on your property(ies):

Tick all that apply

- I have made changes
- I am planning to make (more) changes
- I have not made changes and I am not planning to make changes



Go to Part 4

15. If you have or are planning to undertake changes, could you select the specific changes:

Please add the approximate area (%) of property that was or will be modified using the below sustainable land management practices

	Sustainable Land Management Practices	Completed		Planning to do in future	
		YES	Approx. area (%)	YES	Approx. area (%)
Grazing	Grazing management <i>(eg. pasture identification, land type fencing, grazing rotation, spelling, stocking rates)</i>	<input type="checkbox"/>		<input type="checkbox"/>	
	Land condition monitoring	<input type="checkbox"/>		<input type="checkbox"/>	
	Fencing waterways	<input type="checkbox"/>		<input type="checkbox"/>	
Soil and waterways	Improved nutrient management <i>(fertilizer/compost application, timing, soil tests)</i>	<input type="checkbox"/>		<input type="checkbox"/>	
	Crop rotation	<input type="checkbox"/>		<input type="checkbox"/>	
	Erosion control <i>(streambank, gully, hillslope)</i>	<input type="checkbox"/>		<input type="checkbox"/>	
Environmental Management	Wildlife habitat area enhancement <i>(eg. Koala Mapping, nesting boxes. etc)</i>	<input type="checkbox"/>		<input type="checkbox"/>	
	Revegetation	<input type="checkbox"/>		<input type="checkbox"/>	
	Weed and/or pest control	<input type="checkbox"/>		<input type="checkbox"/>	
	Improved fire management or fire planning	<input type="checkbox"/>		<input type="checkbox"/>	
	Enhance Fish habitat	<input type="checkbox"/>		<input type="checkbox"/>	
	Other (please specify): _____	<input type="checkbox"/>		<input type="checkbox"/>	

16. Did your attendance at the event(s) assist with your actual and/or planned land management practice change:

Not at all
 Very little
 Somewhat
 Quite a bit
 A great deal

17. The changes you have undertaken have noticeably increased and improved your property's:

	Not at all	Very little	Somewhat	Quite a bit	A great deal	Too early to tell	NA
Business profits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soil health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Productivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water quality – dams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water quality – creeks and streams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife habitat condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native wildlife and plant numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 4/7: Barriers to Land Management Practice Changes

The following questions ask you to think about the things that may prevent you from making any changes to your land management practices.

18. Please rate the influence of the following barriers that may prevent you from making changes to your land management practices?

Barriers to implementation	Not a barrier	Moderate barrier	Major barrier
Lack of time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not profitable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack the financial resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack the right equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of practical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My neighbours are not doing it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of real life examples	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough long-term financial support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of long-term technical support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doubts about likely success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Risks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 5/7: Property Knowledge

The following question asks you about your knowledge of your property

19. How would you rate your current knowledge and technical skills to effectively do the following on your property:

	None or limited	—————▶	Good	Not applicable
Grazing management (eg. pasture identification, land type fencing, grazing rotation, spelling, stocking rates)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Grazing management for horses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Fencing waterways	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Soil testing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Improved nutrient management (fertiliser/compost application, timing)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Monitoring land condition	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Water quality testing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Crop rotation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Erosion control (streambank, gully, hillslope)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Wildlife habitat management	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Revegetation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Weed management	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Pest management	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Weed and pest management planning	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Improved fire management planning	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>
Enhance fish habitat	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/>

PART 6/7: Recommendations for future events

Thinking again about the workshops that you attended:

20. Would you recommend these events to your neighbours or other land managers?

Not encourage	_____	▶	Strongly encourage	
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

21. Are there any other sustainable land management topics that are of interest to you that you would like to see more information/training on? (Optional)

22. Do you have a story of land management practice change you would like to share with us?

23. Do you have any other comments?

Thank you for your feedback, we just have some final questions that are just about you (Optional)

PART 7/7: Personal Details (Optional)

The information you provide will be used for specific reporting purposes of the National Landcare Program and it will inform the design of future events. None of the information that you provide will be described or portrayed in a way that would identify you. Your personal information will not be shared with any other party or used for other marketing purposes.

24. Preferred Contact Details (Required if you do wish to take part of the Prize draw)

Name:
Phone number:
Email:
Postal address:

25. Would you be willing to be contacted in future regarding?

- An interview or one-on-one chat to assist us with further information

26. Are you a financial member of a Landcare group or other environmental group? (optional)

- Yes, please specify : _____
- No

27. Are you of Aboriginal or Torres Strait Islander heritage? (Optional)

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander
- Yes, both Aboriginal and Torres Strait Islander

28. Property address of all the properties you manage (Optional):

Address of properties you manage
1.
2.
3.
4.

29. How many years have you managed and/or owned this property for? (Optional)

1.
2.
3.
4.

Thank you for your time and feedback!

At Healthy Land and Water we are continuously working towards bringing you information that is relevant and useful so we can continue to deliver practical, relevant training activities and information to you.

Please return filled in survey to :

Email: Vanessa.d@hlw.org.au

or

**Mail: Healthy Land and Water
PO Box 13204 George St,
Brisbane QLD 4003**