

2021 Community group health survey report



Report back to the ACF Community

Executive Summary

Organising as a local group during a global pandemic is no small task.

In a year without big national moments to galvanise local groups and having to navigate a global pandemic, the Group Health Report offers *a chance to pause and reflect on how ACF's community groups are functioning in these uncertain times*. It also offers a chance to celebrate the strengths of local groups and identify possibilities for strengthening and diversifying the movement.

This year's report includes new sources of data (including from people no longer involved with ACF) and new or refined questions, all of which attempt to strengthen our understanding of perspectives of Group Health.

In short, this year's survey found:

Group health summary table

	Group Health Area	2020	2021	Change
1	Psychological Safety	Very high	Very high	↑ slight improvement
2	Dependability	High	High	○ consistent
3	Structure & Clarity	Moderate	Moderate	○ consistent
4	Meaning of Work	Very high	Very high	○ slight improvement
5	Impact of Work	Moderate to high	Moderate	↓ slight decline
6	Sustainability of work	Moderate	Moderate	↓ slight decline
7	Growth & retention	Moderate	Moderate	○ consistent
8	Diversity	Poor	Poor	↓ slight decline
9	Leadership Development	Moderate	High	○ slight improvement
10	Support	Very high	High	↓ slight decline

The consistently **high scores of psychological safety, dependability and meaning of work are to be celebrated** in this precarious year without big national moments to galvanise local groups. In addition, the **improvements we have witnessed in leadership development over the last 12 months**, with an increased uptake of the Network Team Structure among survey respondents, and **growth in member lists**, is also something to be celebrated. These findings encouragingly suggest that local groups are seeing the value in distributing the work and leadership of the group according to functions and are taking these up in their own groups, and that groups continue to reflect largely safe, dependable and meaningful spaces of connection and support.

At a glance, these indicators paint a picture of psychologically safe, dependable teams working together to build the capacity of leaders within their group. Perhaps this is so for many ACF groups. However, looking more closely, the data suggest something more complex. While the COVID-19 context might help explain some of the reported changes in various indicators since last year (e.g. **slight declines in perceived impact, sustainability, support, and retention**), **there is one indicator that has remained consistently low** across the past two survey periods and hence requires examination, **that is, diversity**.

We are approaching a period of *action* as we head towards a Federal Election and ramp up our Renew Australia campaign. With a wealth of skills and strengths among ACF local groups, it is time to support and connect with one another to cultivate a stronger, more diverse and inclusive community that delivers tangible wins. With that in mind, I would like to emphasise the following key findings from this year's survey:

- Time and capacity are among the most consistent reasons people are no longer involved in local groups, and also among the many reasons current members are not accessing the full suite of resources and support on offer through ACF.

Therefore, to ensure we offer an inclusive and accessible space for people from diverse backgrounds to become and stay active and therefore build an impactful and healthy movement, we need to prioritise working towards a more sustainable and equitably distributed workload. This means being sensitive to (and respectful of) peoples' commitments, responsibilities and roles outside of ACF. It means adjusting expectations and roles accordingly. This is why we measure Group Health in a holistic way because we acknowledge that health is inherently tied to the sustainability, impact, meaning, diversity, growth and retention, dependability, structure and clarity, leadership development, and support of/within the movement.

Through this year's report, I have developed the following recommendations for ACF local groups:

1. Empower and involve people from all walks of life to be part of the movement. This is crucial to the success of our movement. It is therefore imperative that local groups prioritise this recommendation and engage with relevant (Equity) training and activities to ensure groups are safe and welcoming spaces for all.
2. Prioritise supporting one another within and across local community groups by offering your skills and learnings, and by actively connecting with other groups in network spaces. This might include learning from other groups about how they have engaged with new audiences or creatively re-engaged lapsed members.
3. Make more use of non-staff/Organiser support already available to solve simpler challenges. This might include the Community Hub, Fellows' coaching, available training, Slack, and SupportBase.
4. Engage with Organisers and Fellows to understand the significance and impact of your work in the broader community and in ACF campaigns.
5. Work with Organisers to clarify your group's priorities and roles, so your group can continue to thrive.
6. Create and participate in forums that name, acknowledge and encourage groups to emotionally process the work of activism.

7. Foster a culture of self-reflection, cultural humility and personal development in your group.
8. Re-engage lapsed members and engage with new audiences.

We encourage the ACF Community to consider this report (as well as their Individual Group Report) when planning their own group priorities. These results and (corresponding) recommendations have been delivered to the Organising Team for their consideration and will direct further reporting, upcoming Group Health Workshops and will help shape the work of the Organising Team's efforts. This action plan will be distributed to local groups for feedback by the end of July.

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1. Introduction to the report

The Group Health Report is a chance to pause and reflect on how ACF's community groups are functioning. What's working? What needs improvement? What can ACF do to improve the community group experience?

We measure group health because we believe that **group health is the single biggest indicator of whether a group will be impactful** and achieve their and ACF's people power objectives.

'Group health' can mean different things to different people, and it is important to define what group health means for the purposes of this report. We define group health as "the conditions that enable groups to effectively function and achieve impact."

We measure group health in part based on Google's [re:Work principles](#) on team health. Extensive research found healthy teams weren't a collection of the best-qualified or most highly-skilled. Rather, the best functioning teams were ones where team-members felt safe to suggest new ideas, admit to mistakes, work through issues together and had a clear idea of how their work contributed to overarching goals and strategies. Google found the number one influence on team health was [psychological safety \(1\)](#), followed by [dependability \(2\)](#), [structure & clarity \(3\)](#), [meaning of work \(4\)](#) and [impact of work \(5\)](#). We also measure group health based on what indicators help ACF ascertain whether people power is contributing to ACF's organisational goals such as group [growth & retention \(6\)](#), [diversity \(7\)](#), [leadership development \(8\)](#) and [sustainability of the work \(9\)](#). We have based the report on these indicators, which we call our [Framework of Group Health](#).

This report will measure the **indicators** of group health, and the **effects** of these indicators will help us to understand the impact and value of these indicators. We will end the report discussing potential **interventions** that could help us to improve the health of ACF Community Groups. We have also taken the opportunity to measure [how well supported \(10\)](#) members feel both from their group (effect) and ACF (intervention), which helps us more quickly identify potential recommendations.

This report is based on a few inputs:

- **Feedback from the ACF Community:** We surveyed 137 community group members, and provided respondents with a chance to give honest feedback. The survey aims to accurately assess group sentiment against key health indicators, and identify key areas for improvement. Respondents are also given an option to be contacted for further discussion by the Group Health Coordinator, which is a chance to discuss issues confidentially with an independent "outsider" (that is, an unpaid volunteer).
- **Feedback from people no longer active within the ACF community:** We surveyed 16 people who have either previously been involved or never have been involved with ACF. Ultimately, we want to better understand the ways ACF can support our local groups to cultivate diversity and a welcoming space for members.
- **People Power Metrics:** ACF regularly tracks how groups are doing on a few quantitative measures. This data collection and analysis is in its infancy, but is still informative for our reporting.
- **Training Metrics:** ACF collects regular data on the uptake and impact of ACF training.
- Reports for other audiences will also include **Feedback from the Community Organising Team** as they are uniquely placed to give reflections on the progress and challenges groups are facing. Following digestion of this report, the Organising Team contributed new insights and recommendations.

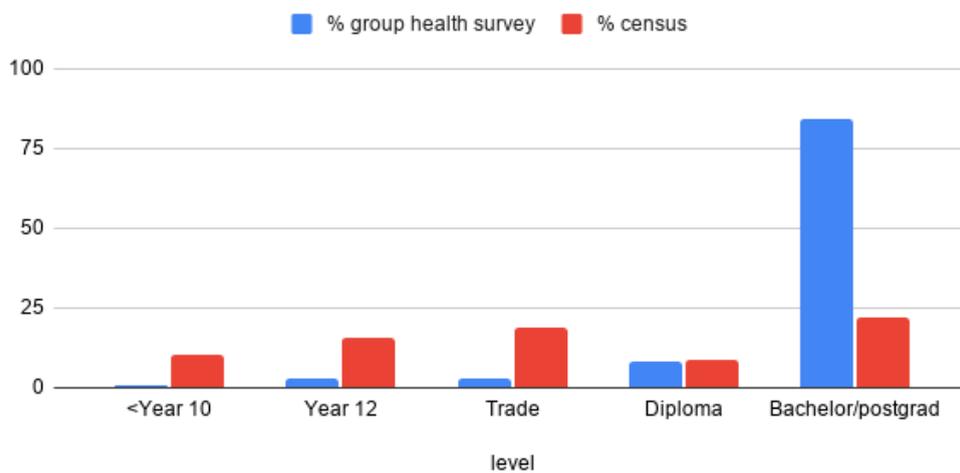
The [discussion section](#) will interpret the results and what this suggests about the *indicators* of the ACF Community group health and its effects. The [recommendations section](#) will suggest *interventions* that could be applied by both the Community Organising team and the ACF Community to improve group health.

2. Findings

Before offering insight into the Group Health Framework that informs this Report, it is important that we first contextualise these findings by considering *whose voices are being represented* in this Report. This year, for the first time, we asked the ACF community a variety of demographic questions to allow us to better describe the vibrant community who make up ACF and who respond to this survey.

As detailed in the [Methodology](#), the survey results (Group Health and Retention, respectively) are informed by the perspectives of mostly female, Caucasian, English speaking, able-bodied, retired or in some level of paid work, and ‘well educated’ (postgraduate qualifications or Bachelor’s degree). It is in looking at education where we see a stark difference compared to the broader Australian population. Compared to 2016 Census data, almost a quarter have a higher education, almost three-quarters of the respondents to the Group Health survey are tertiary educated.

Highest education level - group members vs Australian population



For our movement to be successful, we need to involve and walk alongside people from all backgrounds. It is important that we reflect on whose voices make up the findings of this Report, so that we can better understand how to support a diverse and thriving movement.

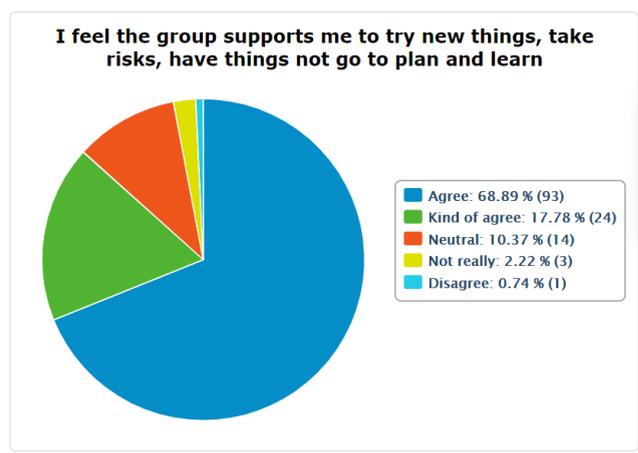
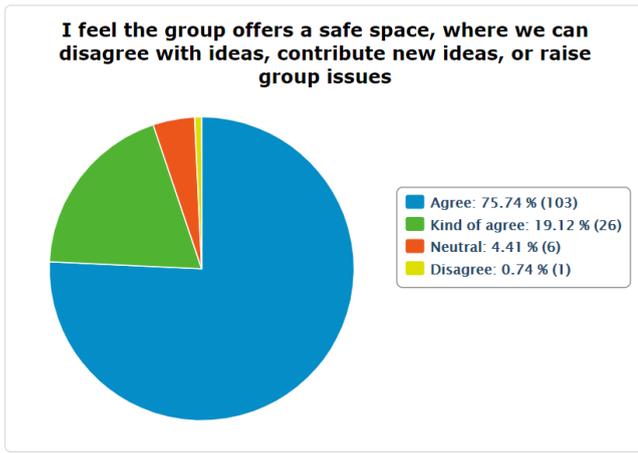
3.1 Psychological Safety

2020	2021	Change
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Can people take risks in the group without feeling insecure or embarrassed? Do people feel safe to be vulnerable with one another? Is it okay if things don't go to plan? Is it okay to ask questions, seek clarification or raise issues? Google found that psychological safety was the number one influence on team health and effectiveness.

Very high Very high ↑ slight improvement

Group members reported a high level of psychological safety in their community groups across the two main questions (safe space and support to develop new skills). In terms of safe spaces, we found a slight increase in respondents' sense of safety to disagree, contribute new ideas or raise group issues compared to 2020 data (last year 67% reported 'agree' compared to 76% this year). There was also an increase in feeling supported to take on new things/risks (last year 53% compared to 69% this year).



These results measure two aspects of psychological safety: both whether there is safety to raise issues without repercussions, and whether there's safety to take risks. As psychological safety is the [number one metric](#) on Google's team health principles, this result is encouraging.

It is worth noting that given the survey sample reflects mostly those who are currently actively involved in a local group, this finding may be self-fulfilling: i.e. those who are already actively involved/engaged members feel psychologically safe and therefore respond to a survey about 'Group Health'.

It is also worth reflecting on the extent to which psychological safety may be unknowingly afforded to certain people in the group, based on shared culture, values and group dynamics (e.g. group norms and agreements). For instance, one group member who responded "disagree" to both statements about psychological safety foregrounded the lack of clarity and purpose within the group at multiple points in the survey, and also noted the dominance from a select few members.

Psychological safety, as the other indicators of Group Health, is an important yet subjective experience. For example, for one particular member safety is in fact tied to other constructs within the Group Health Framework, namely clarity and structure, and diversity. The interconnections within this Framework will continue to be visited, in an attempt to thicken our understanding of Group Health, as we move through the Report.

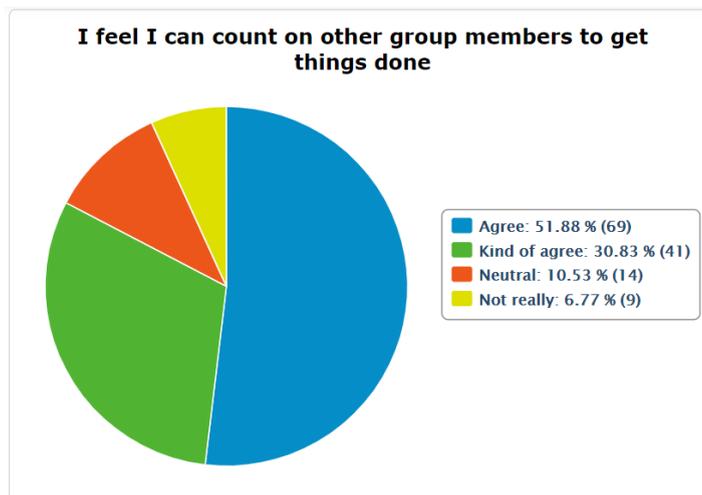
3.2 Dependability

2020	2021	Change
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Can other group members be relied upon to get things done well and on time? When we can't depend on one another, resentments can build, work doesn't get shared equitably and we end up not achieving our goals. However, when group members can depend on each other, trust builds, work gets done and people feel more fulfilled in their contributions.

High	High	o consistent
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More than half of respondents agreed that they can count on other group members to get things done. Compared to 2020 data, reports of dependability have remained consistently high, with over 80% reported a level of dependability within their group ('kind of agree' and 'agree').



While these initial data are encouraging and suggest that there is a felt sense of being part of largely dependable functioning groups, the free-text data offered further perspective. In particular, one of the consistent themes that emerged from the question about “barriers to improving group health” (and among other survey questions) was the concept of *capacity*. In particular, respondents reflected on the need for a core, committed and dynamic group of people to hold the core roles and tasks. There was an understanding of the challenge of finding time amongst peoples’ everyday “competing responsibilities and activities”. For instance, one respondent reflected:

“This is a new group so struggling to get enough members active - relying on the enthusiasm of a few (one in particular, but not me) who are doing all the work. This makes me cautious to take on more as I have many other commitments.”

Capacity, in so far as respondents explained it, protected groups from being spread too thin and inevitably being ineffective. Many noted gratitude to active leaders holding large parts of the workload, with brief explanations of why they themselves were not doing more. For instance, one respondent acknowledged this using the term an “unfair load”:

“I am not one of the members taking on an unfair load. I am thankful to the few who do much more than I or others.”

Given these are the perspectives of mostly active group members, who have been involved for various lengths of time, these responses offer insight into what dependability in local groups might mean in a covid-19 context. Many respondents acknowledged the shift to online as challenging in many respects, but in so far as how this might have impacted groups’ workloads the free-text responses become an important source of contextual data - something that will be explored in the subsequent indicators of Group Health.

3.3 Structure & Clarity

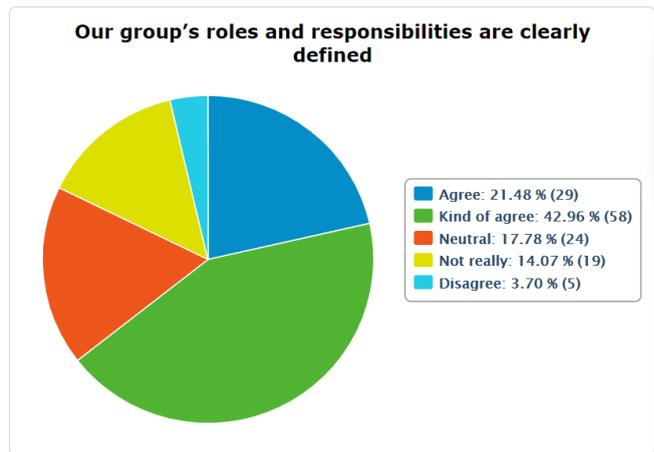
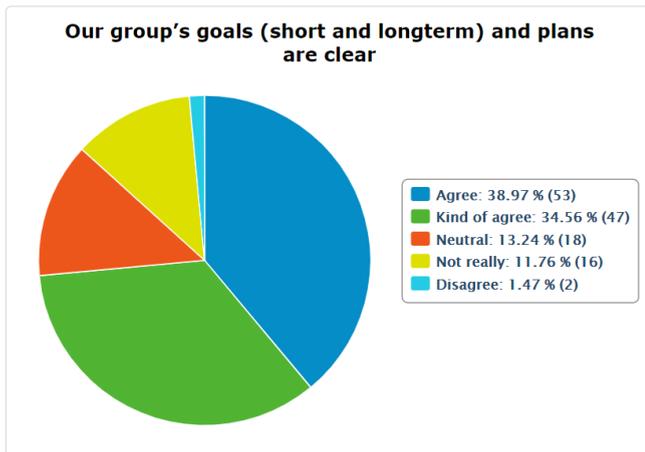
Effective teams also need clarity about what their shared vision is, what their goals are and how they plan to get there. Teams also need clarity about what is expected of them in contributing to those goals. When people in the group are unclear about what the group’s for, or what they’re meant to be doing, it is common that group members will be moving in different directions. A lack of clarity around roles and responsibilities can result in frustration and assumptions being made that they’re not valued or needed.

2020	2021	Change
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Moderate	Moderate	○ consistent
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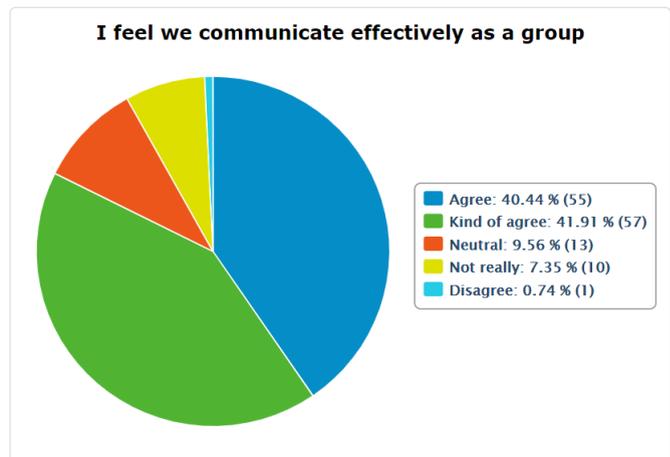
Last year, groups indicated some improvement in their structure and clarity, with 67% indicating some level of clarity ('agree' and 'kind of agree'). However, last year's results indicated some unexplained complexity, with almost a third of respondents indicating disagreement or neutrality to a question about the clarity of goals, roles and execution plans. In response to this complexity, we refined the question by disentangling clarity in goals and plans, from clarity in roles and responsibilities.

We found that most respondents indicated some level of clarity in their group's goals and plan (73% 'agree' and 'kind of agree') and their group's roles and responsibilities (64% 'agree' and 'kind of agree'). This finding is largely consistent with last year's single item for measuring structure and clarity (67% indicated some level of clarity).



Based on the assumption that structure and clarity are influenced by the frequency of group meetings and the effectiveness of communication, we measured these two items again this year. We found that groups largely still met monthly or more (90%, compared to 92% last year), with a slight increase in changeability of meeting regularity (6% fluctuating compared to 3% last year). This latter increase may be a function of navigating the uncertainty of group activities or actions during covid-19.

In terms of communication, we found most respondents indicated some level of agreement about their capacity to communicate effectively as a group (82% 'agree' and 'kind of agree'), a slight increase from last year (77%).

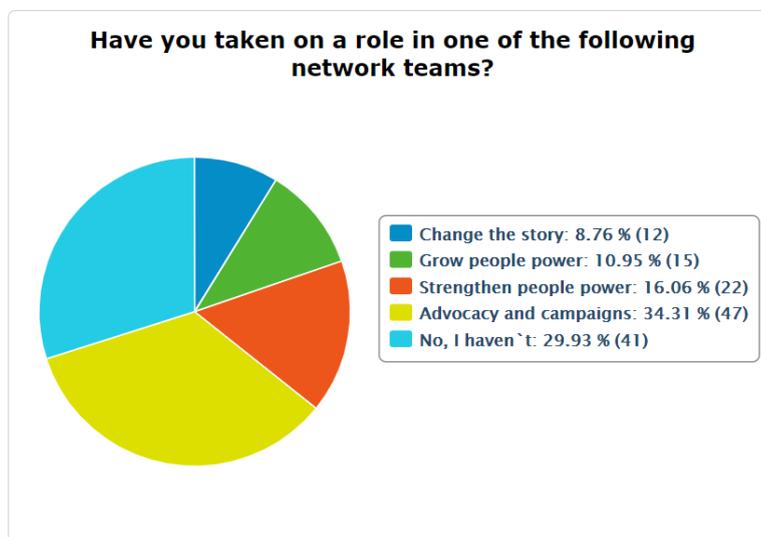


It is clear that reports of regular group meetings and perceptions of effective group communication do not appear to neatly explain the somewhat mixed views around clarity and structure (specifically, clarity of group goals and plans, and group roles and responsibilities). This notion of *clarity* was prevalent throughout the free-text responses to the question about 'barriers to group health'. For example:

“Covid has limited the opportunities for meeting, but hopefully that will improve now that restrictions are being lifted. Regular in person meetings would be a good start. A clear understanding of teams and roles and finalising short and long term goals would be very beneficial.”

“Lack of leadership- it has had a few meetings but seems to have lost momentum and stalled. The key roles haven’t been allocated yet. People will come to one event then not appear again. I’m not sure what is planned to happen next at the moment.”

To capture uptake and implementation of the ACF Network Team Structure, we asked a variety of questions. This year’s data indicate that 70% of respondents (n=96) have taken on a defined Network role. This is a substantial increase since last year, where we found just over half of respondents had taken on a new role (55%). In order from most taken up (role) to least, we found strong growth in the Advocacy and Campaigns roles (34%), followed by Strengthen People Power (16%), Grow People Power (11%) and then Change the Story (9%). Encouragingly, almost half (45%) of the respondents last year had either not taken on a role or were unsure what the roles mean, compared to this year where only 30% had not yet taken on a role. This indicates continued effort from groups to develop leadership and distribute work along the lines of the Network Team Structure.



We also offered people the space to describe, in their own words, the role they have taken up. This produced a rich account of the unique ways in which people find a meaningful contribution to the group. Respondents’ descriptions of their roles ranged from:

“I’m in charge of making sure members feel welcomed, included in the decision-making process and have opportunities to contribute/participate in tasks that are meaningful to them”

“I’m learning Using action centre to welcome and contact expressions of interest in our group. Send out a welcome pack to new members. This role suits me as I enjoy engaging with new members learning where their comfort zone is and discovering their strengths. I take part in webinars to learn new skills, alliance building and community mapping.”

Respondents also indicated some caution ought to be exercised when it comes to ACF central being overly prescriptive, as clearly indicated by the following respondent who responded to the question about ‘barriers to group health’:

“People’s available time, other priorities, people experiencing overload, people for various reasons not being responsive to emails, it’s difficult to define people’s responsibilities too clearly because it may sound as though we are being prescriptive. Need to give volunteers a bit of wriggle room, unless they are particularly keen to be involved”

It appears that there is a careful balance in providing and supporting a national structure and allowing group's to have autonomy over how they operate and define roles. The important and complex task of the Organising Team is finding that careful balance with a group, despite the reality that these Network Team Structures are intended to make the work more sustainable and impactful for both the local group and Organiser.

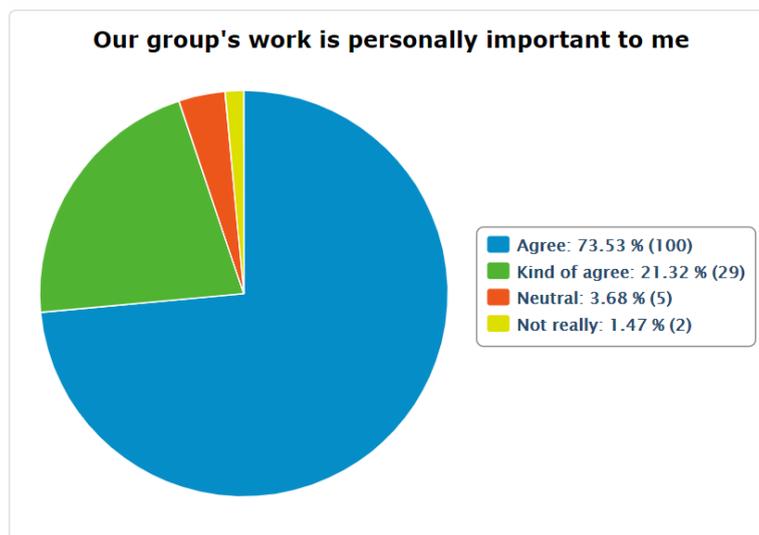
3.4 Meaning

2020	2021	Change
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Google's research showed that effective teams are made up of people who personally care about the work - they draw meaning from it. When working together for a thriving planet, what could be better?! When a group is ambivalent or disillusioned about the work, they can stagnate.

Very high	Very high	○ slight improvement
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Despite the challenges of organising during a pandemic, the majority of respondents agreed to some extent that their group's work is personally important (95% responded 'agree' and 'kind of agree'). Only two respondents disagreed with this statement, and five were 'neutral' about their group's work. This is an encouraging result and is slightly higher than last year (which found 93% agreement).



In response to the question about who is most well represented in their local group, a common theme was *people who are committed and concerned* about nature, social justice, and future generations. According to FiftyFive5's Climate Pulse (2020) research, nearly 1 in 4 Australian's can be classified as 'concerned', seeing climate change as important given the strong scientific consensus and believing it will impact future generations. This suggests that there is scope to actively recruit the untapped potential of 'concerned' Australian (one of the largest segments: 24%), who have been found to be largely open to engaging in more advocacy behaviours (e.g. signing a petition or voting for a particular political party). However, this same segment are less likely to initially engage in campaigning behaviours (e.g. join an environmental organisation or meet with their local MP), so may need more support and encouragement compared to the more concerned segments (labelled 'alarmed' or 'alert'). Either way it is encouraging that while many of us care deeply about this work, we are far from alone in this desire to protect the places we love.

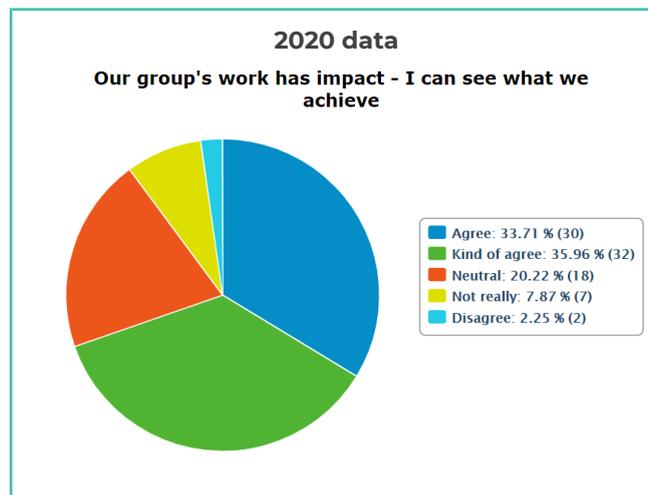
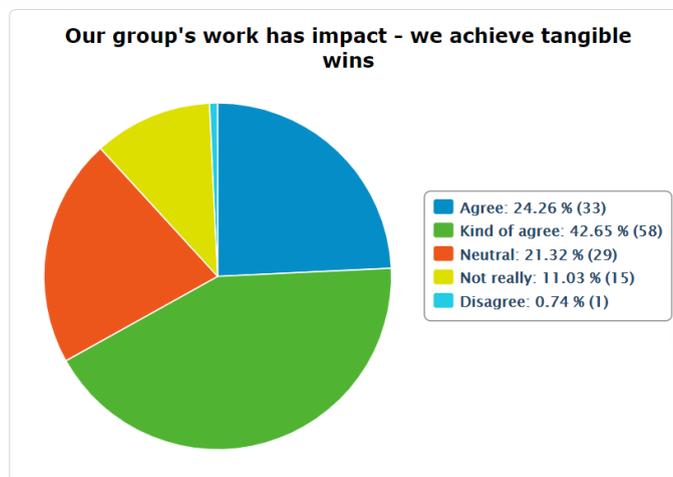
3.5 Impact of Work

2020	2021	Change
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For groups to be effective, they need to feel like their work matters and will create the change that they're hoping for. When groups don't feel like they're achieving much or that the work they're doing won't achieve change, then people can get disillusioned and become less motivated.

Moderate to high Moderate ↓ slight decline

Having an impact on climate and nature goals is why many of us are here. The impact we are all having on our main goals can sometimes be difficult to measure causality. Developing measures for our impact is something ACF are prioritising so we know when we're being effective. Still, it is important that we understand not only if we are having an impact in reality, but also whether we *think and feel* that we are having an impact. In short, we found that the overall level of agreement with perceived impact has not shifted dramatically (70% last year, to 67% this year - this includes 'agree' and 'kind of agree'). However, the strength of this agreement has declined from 34% last year to 24% this year ('agree').



It is also worth noting the potential external influences to perceived impact. In previous years there have been climate elections and school strikes, yet in the last 12 months there has been no 'big moment' for local groups to experience alignment with local and national campaigns and to therefore witness their 'wins'. The difficulty to see their impact may be further heightened by the influence of covid in shaping what was possible in terms of advocacy and campaigning during the last 12 months. It is interesting though that perceived meaning has remained consistent over this time and only perceived impact has slightly declined. This potentially increasing gap is worth watching over time.

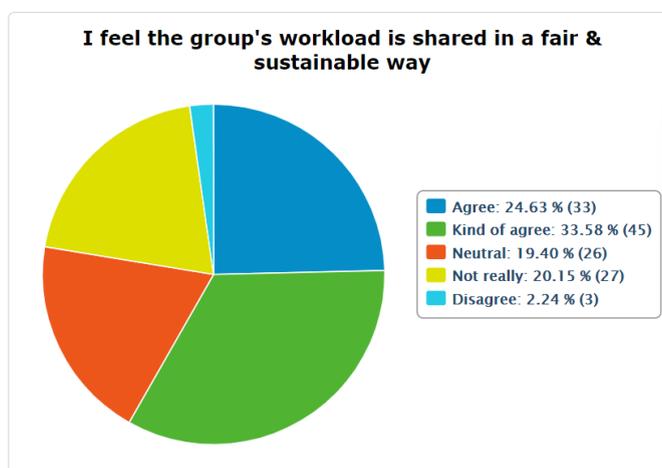
3.6 Sustainability of the Work

2020	2021	Change
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Moderate Moderate ↓ slight decline

The work of solving the climate and extinction crisis is a marathon, not a sprint. It is work that involves setbacks, frustrations, and plenty of challenges. But it is also incredibly rewarding work and it has the power to connect us more deeply to one another and to our planet. For these reasons, taking care of ourselves and each other to ensure our work is fairly distributed and sensitive to peoples’ capacities and responsibilities, and ultimately is not leading to burnout or overstretching people.

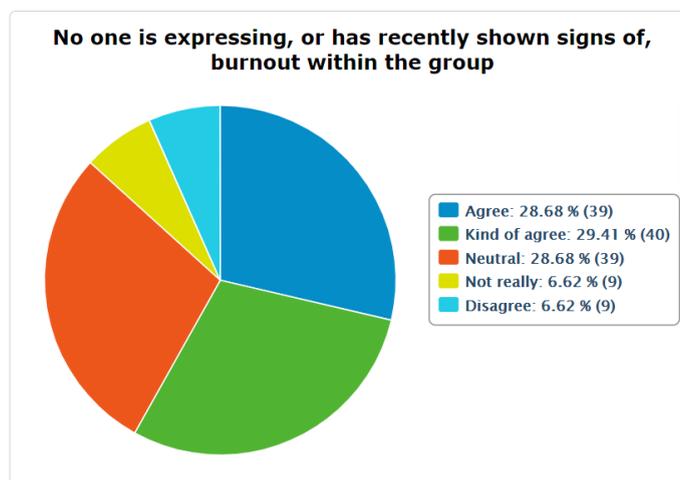
In a similar vein to perceived impact, we found that perceived sustainability of the work had also *slightly declined* since last year. This decline was evident in the data in two ways, the level of agreement with the statement about fair and sustainably allocated workload declined (from 61% to 58% who were responding ‘agree’ and ‘kind of agree’), and the level of *disagreement* with this same statement increased (from 17% to 22% who were responding ‘not really’ and ‘disagree’).



It is important to acknowledge the influence of covid in terms of shaping the group’s workload and move to a primarily online modality and how this may have impacted groups’ sustainability. Many groups spoke about the influence of covid and online delivery in their free-text comments, noting how this is occurring within an already stretched context where there are few active members or leaders within the group. As one respondent put it:

“The group has many people listed as members but only a handful are active. Of course COVID has had a major impact on our capacity to meet in person. But lack of clear goals, clear modes of participation, and clear systems of communication are all barriers”

Despite the uptake of defined roles (with 70% taking on a new role, as described earlier), the sheer *amount* of work that is asked of local groups (and that local groups are taking on) may be what is being reflected in survey findings of a very active sample. On that note, we also added two new items to this year’s survey to tap into perspectives of burnout within the group and opportunities for socialising. We found that there were equal proportions of respondents indicating ‘agree’, ‘kind of agree’ and ‘neutral’ to the statement about no group members expressing or showing signs of burnout. This suggests that perhaps there are no clear indicators of burnout among group members, but that there is some caution in stating plainly (or in full agreement) that “no one” is expressing or showing signs of burnout. However, it could also be a lack of literacy around burnout in activism, and hence the somewhat hesitancy in reporting (‘neutral’ and ‘kind of agree’).



Looking closely at the free text comments showed some awareness of burnout, with reflections such as:

“No one is expressing, or has recently shown signs of, burnout within the group - do what we did: put in extra time with that person, be open about giving them permission to take time off, talk openly about the tough stuff within our group.”

Only one respondent alerted us to their experience of current burnout, which prompted direct email contact from the Group Health Coordinator. This was in response to a question about “of all the support ACF provides, the things I most value are...”:

“Not so much at the moment. I’m so burnt out I feel physically sick.”

They explained at another point in the survey (in response to their ‘vision’ for the group):

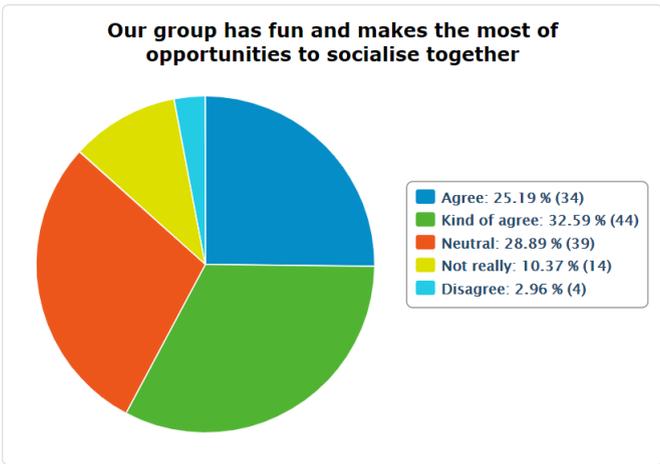
“I’m about to step away from being so involved with the group because I’m exhausted, but will probably come back in a few months time once I’ve had a chance to regroup.”

It is likely that within groups members are potentially privately or quietly stepping aside when the workload becomes too much, or their capacity to contribute changes. It is highly possible that given the highly active nature of this sample, we are not hearing from people who have stepped back from their roles or experienced burnout over the last 12 months.

We are also aware that many of our local members are volunteers with multiple organisations, and that while we do not measure or ask directly about this it is likely to impact not only burnout but also sustainability of the work. The balance between meaning, impact and sustainability is tricky. Ideally, we want people to be highly engaged in work that is meaningful to them and for them to see that their work is having an impact, however, we cannot create processes or a culture of advocacy/campaigning that burns people out in the process. An important part of finding this balance may involve acknowledging the amount of work that ACF local groups do, and that Organisers support them to do. Many respondents to the Group Health Survey acknowledged the potential lack of time and capacity that young people, working people or families have to contribute to groups and the movement. There are also questions raised within the Retention survey about who should bear the burden of the (unpaid) workload of protecting the environment, and the fairness of ‘diversifying’ the movement. This is a perspective we will return to this point in the [Diversity](#) section of the report.

The final new question this year was about socialising and fun as a group. More than half of respondents agreed on some level that their group has fun and makes opportunities for socialising

(58%, including 'agree' and 'kind of agree'). A substantial proportion of respondents reported 'neutral' which indicates some room for improvement in terms of designing actions or meetings.



3.7 Growth and Retention

2020	2021	Change
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For groups to be effective, it is just as important to have a steady stream of new members joining the group, as well as cultivating strategies to support new members to feel connected and valued as they gradually take on responsibilities within the group. At the core of ACF's organisational goals is growing the movement. To nurture a diverse and robust people-power movement, we need local groups to be welcoming, safe and inclusive spaces that bring in and retain new folk.

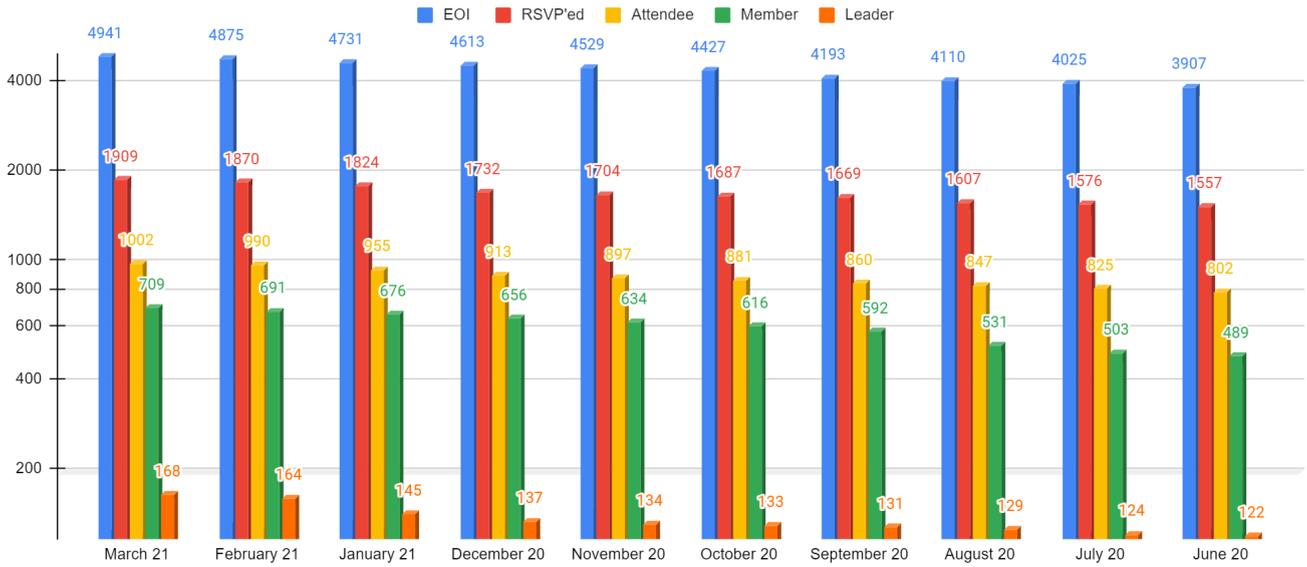
Moderate	TBC	TBC
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ACF's goal is to have 3% of the Australian community part of the ACF community by 2022, and in terms of local groups, to increase the size and capacity of groups to 50 healthy and impactful groups.

As of April 4th 2021, we have 9 566 people who are connected to ACF groups. Looking over time, since 2018, there appears to be a strong trend of local groups growing their lists of people who are 'expressing interest' and "RSVP-ing" to events. However, this attendance or interest does not seem to be translating into active membership, with a steady but small number of 'members' and 'leaders'. However, we are assuming that groups are up-to-date with their data management, in terms of tracking attendance and new member data.

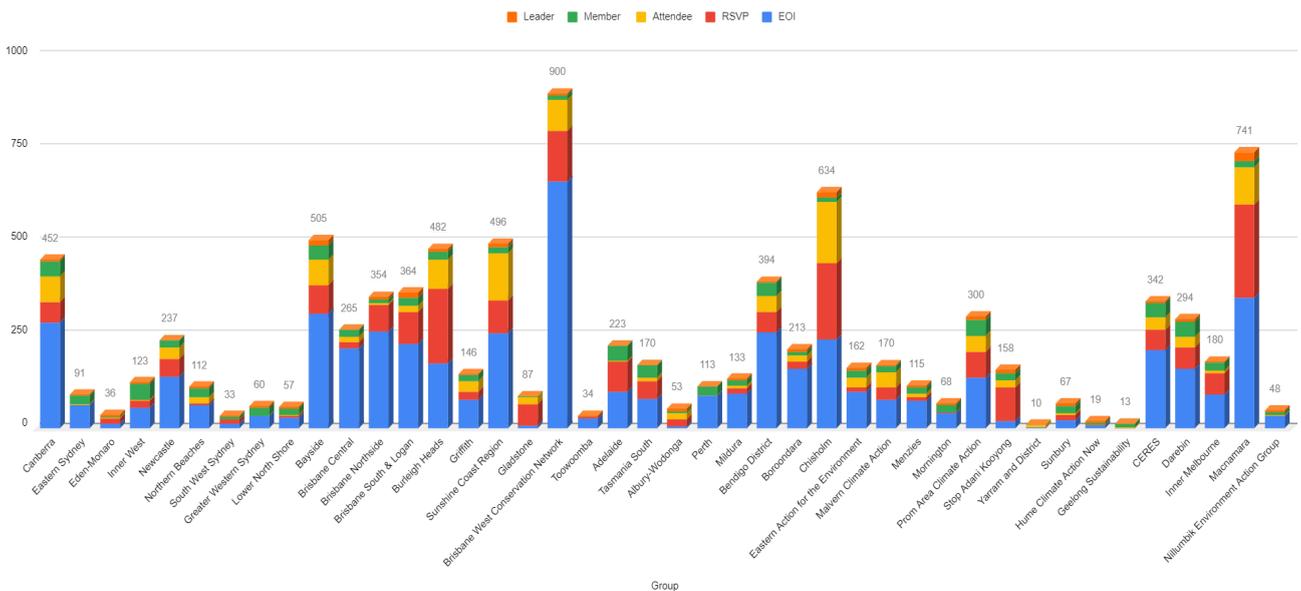
Looking closely at the graph below (with June 2020 on the further right hand side) gives us some insight into the way in which local groups are growing their numbers. These data suggest that community groups' ladder of engagement has been steady since June 2020, despite COVID restrictions across States and Territories.

ACF Supporter Growth June 2020-April 2021



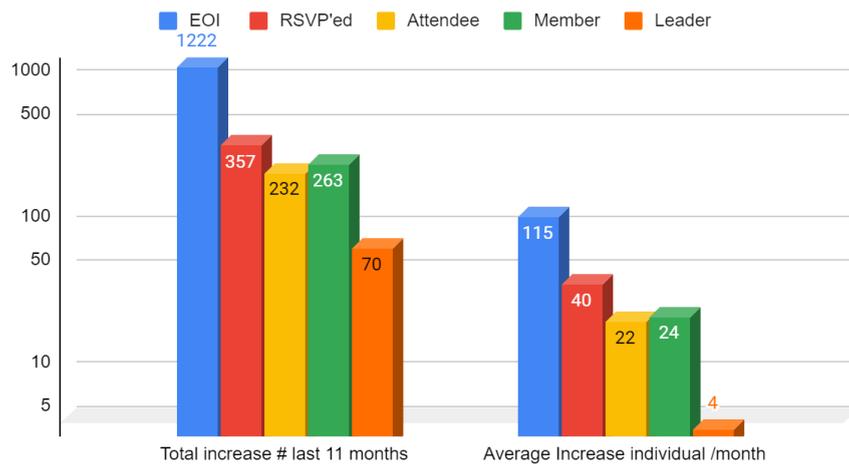
In looking at the five steps ladder of engagement, we can see this broken down by community group in the figure below:

5 Steps Ladder of Engagement



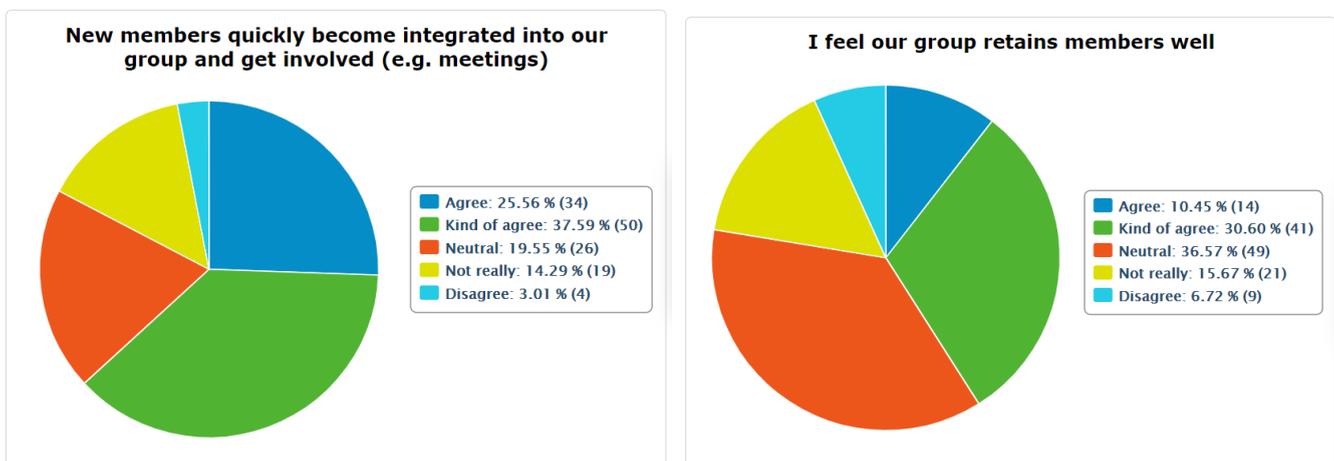
Drawing on an internal report (coordinated by the Impact & Evaluation Analyst Fellow, Fia Hamid-Walker), it is important to note that as of 16/6/21, a total of 10,054 supporters have engaged with local community groups. The average increase of the number of supporters each month is shown in the Figure below. On average, community groups recruited 115 new supporters each month with a retention ratio of less than 1% to step up to higher commitment.

Average Growth of New Supporters



In terms of *perceptions* of growth in the open text responses, there was concern that groups are not successful in translating expressions of interest in the group into turnout at activities. However, 63% respondents agreed on some level that people who attend group activities (i.e. new members) are quickly integrated and become involved in group activities (including 'agree' and 'kind of agree').

Perceptions of retention, on the other hand, suggest that less than half (41%) agree on some level that their group retains members well (including 'agree' and 'kind of agree'). Given these are new questions, we have no data from last year to compare perceived growth and retention. This data suggests that at a group-level there are only small numbers of (active) members who perceive retention to be an issue. In reality, 66 people abandoned the ACF Community Group master path in the past year (compared to 23 from the previous year), and while negligible could be misleading as it is suspected that there may also be people no longer active or interested in being connected to a community group who are still sitting on their list.



ACF has a goal to grow the ACF Community to 770,000 by 2021, but we have not specified how much of this growth we want attributed to ACF Community Groups. Since October 2018 when the last survey was done, the ACF Community Group cohort has grown from 2175 to 6822 people. This is a 68.1% increase in overall growth but there are other factors that must be considered.

Throughout the free-text comments, we found the following issues with retention were raised:

- engagement from members
 - e.g. difficulty getting people to multiple meetings
 - e.g. getting people to take on new tasks/responsibilities
- group norms and expectations, particularly around capacity

- e.g. realistic deadlines in light of peoples' commitments outside of ACF
- the group lacks a clear goal or focus
- no clearly defined roles and responsibilities within the group
- online only communication limits socialising and ease of relationship building

There are also challenges with both the data governance and analysis. There are significant challenges with groups tracking attendance at their events (which would trigger movement on the ladder of engagement) and also the manual trigger required by a staff member to move people to higher levels of engagement. There is also a challenge that we only track the upwards movement on the ladder of engagement, which may not reflect reality. For example, if someone attends one meeting, but never again, we may misinterpret this as meaning that they are more engaged than someone who has RSVPed for an event but has not yet attended. Likewise, those that have expressed interest once before remain on that EOI step even if they don't remain interested. It is worth stating that there will be changes within ACF that will impact groups' data governance, one of which is the move from Action Centre to Supporter Base. This new platform will allow groups to more easily move people up and down the ladder of engagement, enabling more nuanced and accurate data analysis.

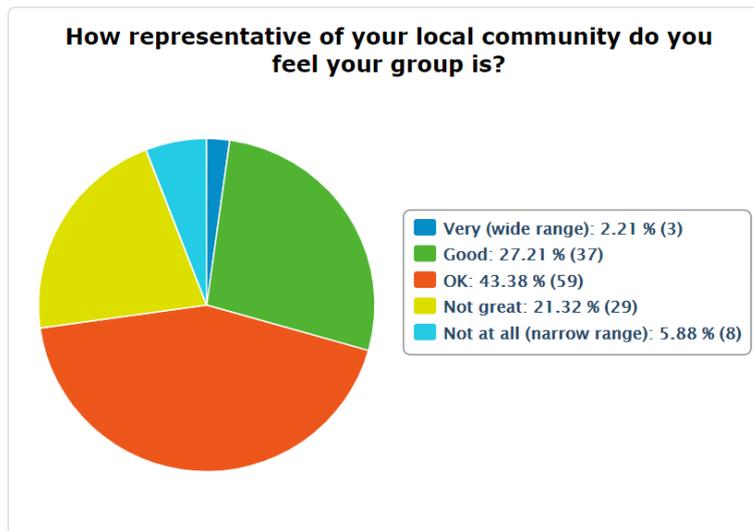
3.8 Diversity

Is the group made up of people from a range of ages, genders, backgrounds and cultures? Does the group reflect the demographic make-up of the local area or electorate? Are people in positions of leadership within the group also reflective of this diversity? These are important questions for local groups to sit with. It is the task of individual group members (and the group as a whole) to integrate the strengths and capacities of people from all walks of life, and to ensure everyone is supported equally.

2020	2021	Change
Poor	Poor	↓ slight decline

ACF has a goal to move towards reflecting the cultural diversity of the Australian Community by 2022. This includes an internal goal to reflect cultural diversity in our top two leadership levels on our ladder of engagement. Diversifying the movement, like any cultural change, is slow but important work. It is for this reason that we measure *perceptions of diversity* within local groups alongside *demographics*. This latter measure is a new addition to this year's survey and allows us to better describe and reflect on who makes up the ACF community. The ability to sit perceptions alongside the (self-defined) demographic makeup of the ACF community is an important first step in working towards this broader goal of cultural diversity, and indeed to being able to have more robust conversations about the culture of the movement.

We found perceptions of diversity within local groups have declined since last year. In particular, last year, 7% of respondents indicated that their group is "very" representative of the local community (i.e. wide range of people), compared to 2% this year. When looking at those who indicated "good" representation, we found a less noticeable drop from 29% last year compared to 27% this year. It is also worth noting that a similar proportion (27%) indicated a "not great" or "not at all" representation of the local community in their group.



This broader pattern of perceptions shifting begs the question: *have local groups become less representative of their local community (and hence less diverse), or has awareness about diversity increased (and hence perceptions are reflecting that shift)*. Given the recent work within ACF led by the Equity team, and the recently commissioned First Nations Report, it is perhaps unsurprising that there is growing recognition throughout ACF of the exclusionary reality of the environmental movement within which ACF sits. But the question still holds, are groups themselves lacking diversity?

This year a comprehensive set of demographic questions were asked of survey respondents, so that we could extrapolate the relative diversity of the ACF community based on self-identification. As noted earlier in the report, respondents of the Group Health Survey were:

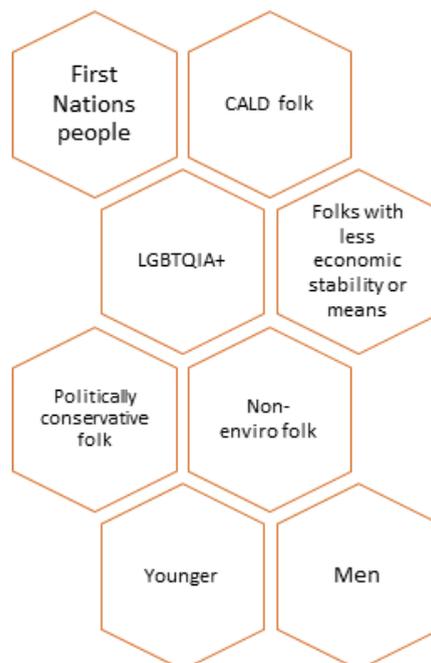
- mostly female (66%),
- self-identified as Caucasian (87%),
- spoke English at home (85%),
- do not currently live with a disability (87%),
- retired (35%) or in some level of paid work (51%)
- and hold either a postgraduate qualification (50%) or Bachelors degree (34%).

These sample characteristics are similar to the characteristics of those who responded to the Retention survey (and hence are no longer involved with ACF). What is perhaps most striking is that this pattern of demographics are reflected back to us in the question “what kinds of people do you think are well represented in your group”, in which respondents painted the following demographic picture:



It is worth noting that these descriptions of who is well-represented in a local ACF group does not appear to differ much from the accounts provided last year. It seems as though survey respondents - who are self-defined as 'very' or 'somewhat' actively involved - are aware that it is people 'like them' who mostly make up local groups.

When asked "what kinds of people do you think are under-represented in your group", we found the following demographic portrayals, which also did not appear to differ too much from last year:



Given that *capacity* and *time* were recurring themes within respondents' reflections around "barriers to group health", it is perhaps unsurprising that those with a range of material privileges (i.e. education, middle-class 'status') are most active in the ACF community. In particular, those who are not facing structural and systemic barriers may be able to commit unpaid time to advocate for causes that matter to them. The question then becomes, if diversifying the movement is a key goal, how do we equip groups (who are moving towards this goal) to be fluent in, and respond to, the equitable

distribution of the group's workload, and therefore the relative capacities and responsibilities (paid and unpaid) people have outside of their volunteering/ACF role.

We can learn from one respondent in the Retention survey who explained why they are no longer active with their local ACF group:

“I was at University and at that point felt very niche for me to be involved in. Additionally, it also felt like there were a lot of older people and not enough youth represented. Further, I felt like we were targeting local communities when we should have been looking at more top down approaches. Lastly, it felt like I needed to give a lot of time, whereas I would have liked to give a few hours and volunteer at different places and not just ACF.” (female, born 1995, non-English speaking)

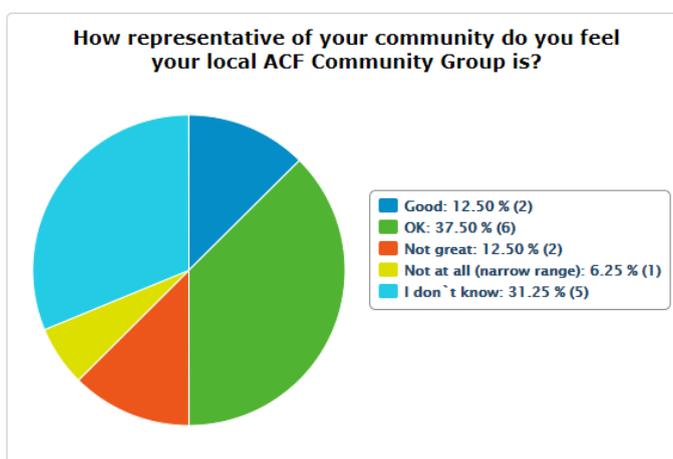
This same participant later acknowledged the burden on volunteers, and questioned the fairness of this when there are people with financial means to do this work. While it was not clear if this participant meant paid staff within ACF or volunteers who have the financial capacities to be able to contribute their time. This participant then explained the self-fulfilling cycle that volunteering creates for people with less capacity or resources who might feel they cannot give enough and are therefore not good volunteers within the movement, creating a cycle of low retention of people with less means to be as involved and contribute in a way that feels meaningful.

This sentiment was echoed by a local member who recently left their group, explaining (via email to the Group Health Coordinator) that the various commitments they held in their life were not respected or appreciated in light of the expectations of the Organiser and ACF processes:

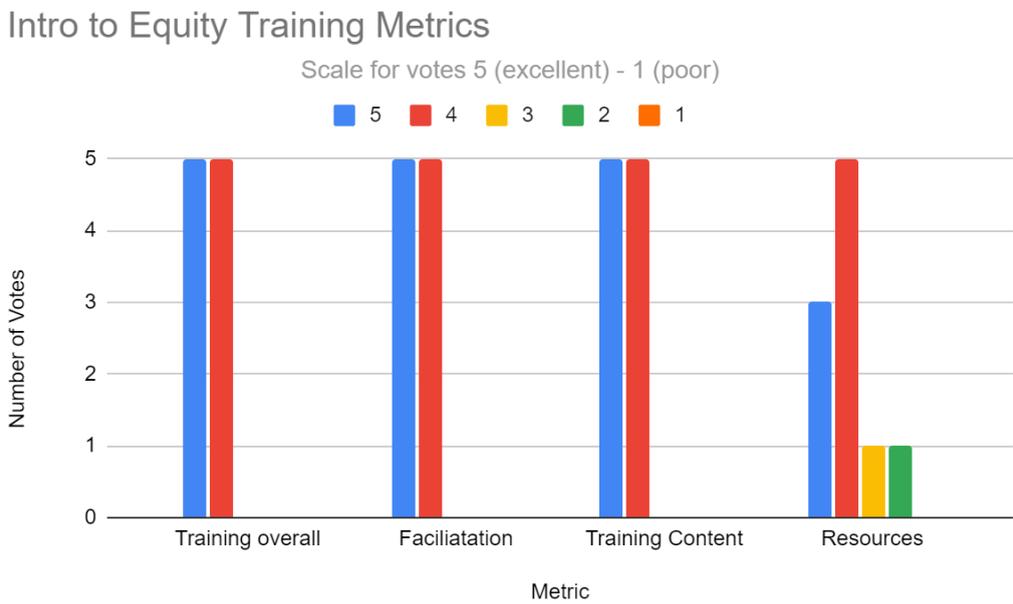
“Between university commitments and ongoing [name of treatment], life can get very busy, something that [Organiser] failed to understand with their persistent demands on our time as volunteers. Everyone in the group led very busy lives. Several work full-time and others have pretty much full-time caring responsibilities for frail elderly parents. In addition to uni and my ongoing health needs, I was also volunteering at [name of community space] and continue to provide on-line support to other [name of illness] survivors as well as advocate for refugees...”

While the context around this particular situation is important, the intention of sharing their data (with their permission) is to reflect on the persistent theme of *time and capacity* as implicating the extent to which people are able to contribute and remain active in a group. This participant was contacted due to a disclosure of burnout in the Group Health Survey. For this particular respondent, despite being involved with ACF since the 1970s, leaving their local group because they felt their capacity was not respected or understood was the decision they eventually made.

As part of the Retention survey, we also asked about perceived representativeness of the local group they were previously connected to. The findings indicated that almost a third “did not know”, and most indicated that representation was “OK” (37%).



This past year the Equity Team has been working to understand and develop a set of more specific objectives to support this three year diversity goal. This has included the roll-out of the first Equity Training module (March 2021), which was the culmination of 2 years' research and development work. Some of that research included the ACF Supporter Survey (in 2019), which surveyed 2440 ACF community members and found 91% believed it was important for ACF to involve culturally diverse communities. Based on the Equity Training conducted in May this year, with 24 attendees, zoom polling data suggests that the training was received positively:



Given this is the first Equity training, the consistently positive scores for the facilitation, training content and training overall suggest that this work is well received by the local ACF community. It appears as though the resources may be an avenue for future improvement, with mixed indications of perceived quality.

These preliminary data show that the work of cultural change (i.e. diversifying the movement) begins *within* the movement, and that this approach is being well received, particularly given the participatory design of these trainings. This is something for the Equity Team and ACF as a whole to celebrate and continue working prioritising and refining in order to meet the 2022 Diversity Goal.

3.9 Leadership Development

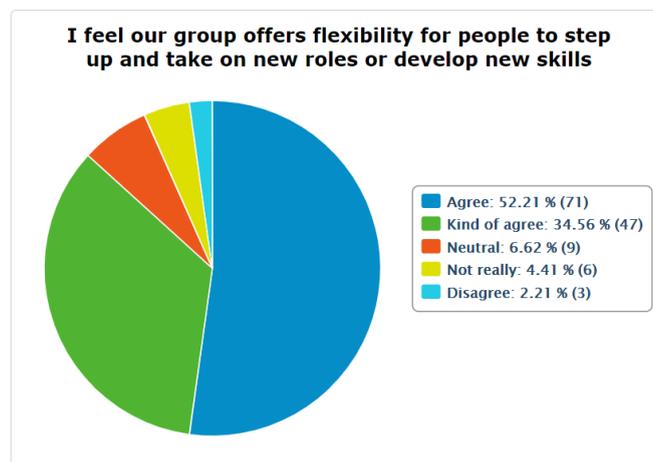
Healthy people-power movements are developing leaders all the time to support the growth of the community. Developing leaders is not easy, and requires planning and commitment from all members, especially those who may be in leadership roles. For groups to function effectively it is important that there are opportunities for group members to learn new skills and cultivate leadership qualities. At ACF, we believe leaders take responsibility for helping others get where they need to go. They do this not by claiming their own power and position, but by investing in other people's leadership development by building genuine relationships, training, and coaching. Leaders provide others with meaningful opportunities to act and increase their commitment, involvement, and skills. In this context, leadership is earned by consistently

2020	2021	Change
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Moderate High ○ slight improvement

demonstrating these qualities and taking these actions. It is not claimed by the individual and not necessarily designated by title.

Last year, 83% agreed on some level that they have opportunities to take on new tasks. This year, we refined the question to ask more specifically about leadership development. With this, we found an encouraging 87% agreed, on some level (including 'agree' and 'kind of agree'), that the group offers flexibility for people to step up and take on new roles or develop responsibilities. In the context of covid-19 this is a finding worth celebrating, that in the midst of upheaval and change groups were perceived to be adaptive and flexible for other members' growth - rather than restrictive and stagnant.



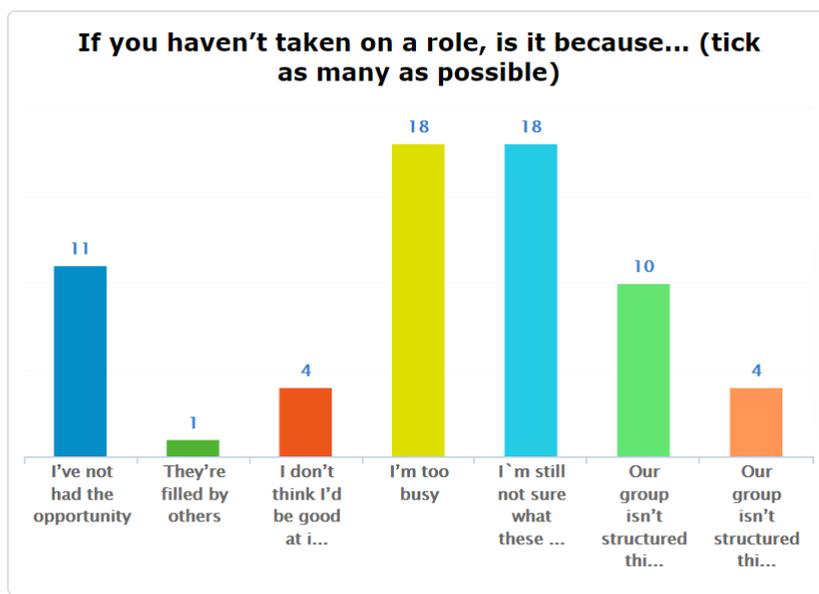
While this is an encouraging finding, alongside the fact that only three people disagreed with this statement, it does invite careful reflection on the sample responding to this survey. As noted this was a highly engaged sample with 70% having recently taken on a new role, and 89% considering themselves 'very' or 'somewhat' active. Similar to the reflections shared about psychological safety, this finding raises many questions, including: *who is the group supporting in a leadership capacity?* This question seems pertinent given concerns about the sustainability of the work, the capacity required to contribute to the group and the lack of diversity within groups.

It became clear in the free-text comments that work within the group (including leadership roles) requires significant capacity of a person. Some respondents offered their own sense of caution in taking up a leadership role because of their concern about sufficiently contributing to the group, while others reflected on having only a small number of active members which then limited the (perceived) potential impact or sustainability of the work. This latter reflection, included the capacity required to upskill new members:

"A lot of the leadership workload is being handled by [names], which they handle capably and is hugely appreciated. I do worry about them experiencing eventual burnout (not that they are displaying signs at the moment), which would be very problematic for the group. That being said, it would be personally difficult for me to step up my own contributions to take some of the load off for at least the next few months."

"I think people are busy. Perhaps the small size of the group leaves people feeling that there would be too much expected of them. In reality the more people we have the less each of us has to do."

In digging deeper into leadership development, let us turn our attention back to the uptake of the Network Teams Structure, where we asked some additional questions that are relevant to reflect on here. In particular, of the 41 respondents (almost a third of the sample) who explicitly indicated that they have not yet taken on a role, a follow-up question asked why they have not yet taken on a role. The most common responses were being too busy, and uncertainty about what the team roles mean. The next two most common reasons were that people had not yet had the opportunity, and that the group is not structured this way but they have taken on a different role.



Response options: I've not had the opportunity; They're filled by others; I don't think I'd be good at it; I'm too busy; I'm still not sure what these teams mean!; Our group isn't structured this way but I've taken on a different role; Our group isn't structured this way but I am yet to take on a role.

Acknowledging the legitimacy of “I’m too busy”, it is also worth reflecting on the equally common response of “I’m not sure what these teams mean!”. This knowledge gap suggests that there is potentially more work to be done in demystifying ACF language to enable leadership development to be a smooth and seamless process. However, the question of responsibility for this task of demystifying language is an interesting one.

The data suggest that groups themselves still have a lot of work to do in clarifying internally (within the group) *who does what*, and therefore how to grow their leaders. There seems to be some fluency of ACF roles and structures among this sample, which is to be expected given their self-reported levels of ‘active’ engagement in the group and their uptake of roles. However, even among this active sample, the 18 respondents who are uncertain about the Team Structure indicates that there may be an opportunity for ACF central to promote the Network Team Structures, with the assumption that more opportunities to learn about (and talk about the implementation of) ACF structures will increase literacy and by implication increase the potential for leadership development within a group.

It is important to note that this focus has previously been the work of the Group Health Workshops - a defined and annual ‘pause’ for groups to step back from the busy work of campaigning and advocacy, and have space to potentially flesh out defined roles and visions (including potential leadership) for the group. Given the eligibility requirements for a Group Health Report and subsequent Workshop (minimum 5 responses per group), this is perhaps unintentionally creating a scenario where the already engaged groups are responding to the survey and then being able to receive further support, while the less engaged groups who are potentially struggling are being left out of this processes. Particularly groups who are losing members and struggling to gain momentum, as one respondent reflected in response to the question about “barriers to group health”:

“Lack of leadership- it has had a few meetings but seems to have lost momentum and stalled. The key roles haven't been allocated yet. People will come to one event then not appear again. I'm not sure what is planned to happen next at the moment.”

If leadership development is fundamentally about capacity building within the movement, it is important to also look at the training data ACF regularly collects. Based on NationBuilder data (as at 28/4/21), a total of 111 people have been trained in 2021, 68 of whom were newly trained (i.e. had not been trained in the previous year). This is compared to the 250 in total who were trained in 2020. This suggests that ACF training uptake is potentially on the increase for 2021, particularly among

members who did not access training last year. This is encouraging and suggests that there is a continued appetite for training - something that will be explored further in the next section.

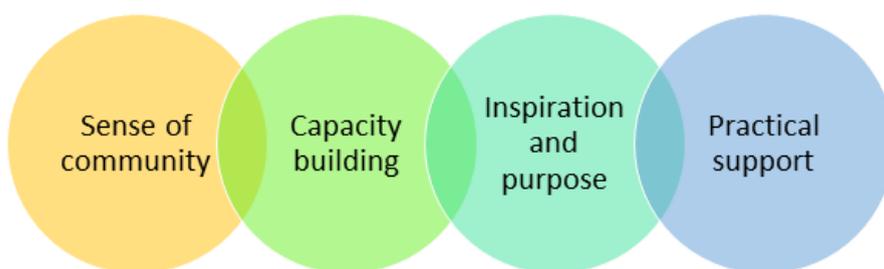
3.10 Support

2020	2021	Change
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While this is not formally an indicator within the [Group Health Framework](#), we explore support in a variety of ways to more fully understand what supports group health.

Very high High ↓ slight decline

We asked “of all the support ACF provides, the things I most value are...” and identified the following sources of support:



The emotional support and connection respondents felt from being part of a community of like-minded people was commonly reported. Respondents referenced “making friends”, having “fun” and “like-minded contact with people who care and show up” as part of this sense of community that ACF groups, Organisers, staff and Fellows collectively provide. For instance, one respondent described appreciating:

“The people! Everyone has been super lovely and supportive and have been great in inclusivity on projects.”

There were also mentions of specific Organisers, with gratitude expressed for their personal coaching and capacity building activities with local groups. Specific names were mentioned and appreciation was expressed for all the emotional and skill building work that Organisers do. ACF training, the website, monthly webinars and breakout rooms, coaching calls and resources were also referenced repeatedly as part of the capacity building that ACF offers community members. For example, one respondent noted:

“I really enjoy the fortnightly leadership meetings. We have gotten a lot from goal setting sessions. Monthly meetings are fantastic. Training sessions have been invaluable.”

There was also an appreciation for the inspiration and purpose that being part of ACF provided for respondents. The sense of working together on a shared purpose that has tangible wins was described as “inspirational” and “motivating”. This theme was articulated in many ways, with some examples: “Opportunities to make a difference” and “Working towards a better environment.”

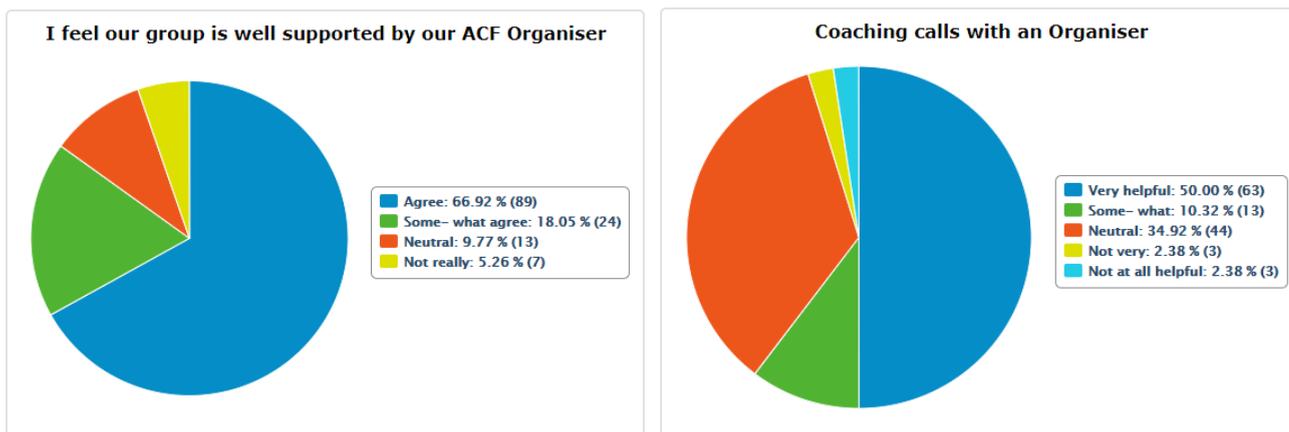
In terms of the practical support that ACF offers, respondents were particularly grateful for infrastructure/resources for their local actions or events, group funding, as well as materials for how to

respond to national or local issues (e.g. write submissions), and updates on campaigns. For instance, one respondent acknowledged the practical support as:

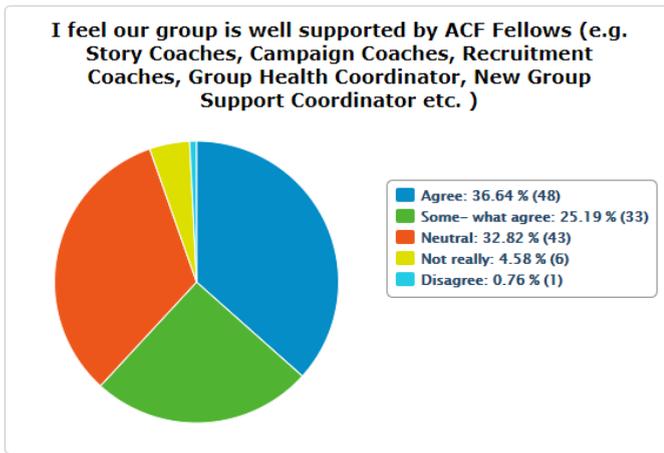
“Info packs on submission writing (in particular, the EPBC Act submission info pack). The ability to organise and provide spaces (physical) for us to meet in.”

Despite these glowing reports, we found slight declines in perceived support based on two key indicators of support. First, compared to last year, there was a slight decline in perceived support from ACF Organisers (85% this year, compared to 89%). While this decline may not necessarily be problematic, given the suite of support available through training, Community Hub, Slack, Fellows, Network Structures and tech platforms. Perhaps it is to be expected that groups are getting less support from Organisers this year compared to last year, particularly if group independence is the reason for a perceived decline in support.

Second, we also asked about the helpfulness of coaching calls with Organisers, with 60% indicating this is either “very” or “somewhat” helpful. These slight declines in perceived support and perceived helpfulness of coaching calls needs to be interpreted within the context of organising within a global pandemic, navigating intermittent border restrictions and lockdowns, and as a result groups likely having increased needs for practical and emotional support from their Organiser. This context is likely to have stretched the Organising team (as well as local groups - as indicated by decreases in perceived sustainability), and invites reflection into the extent to which the health of Organisers has also potentially declined over the period of the pandemic - if we assume that group health is influenced by the health of the Organiser.



With the growth of the Fellowship Program, we asked, for the first time, about the support group members feel they are receiving from Fellows. In short, more than half (62%) agreed on some level to feeling well supported by Fellows, and almost a third (33%) felt “neutral” about the support from Fellows. Respondents were also asked specifically about ‘coaching calls with a Fellow’, and similarly there was some agreement (43%) that these were helpful, but mostly a neutral response (56%).



It is worth noting that these data were collected in March, in which a new cohort of Fellows were still in the early stages of their Fellowship role, and so may likely reflect the extent to which they felt supported over the last 12 months - rather than currently. Perhaps specifying a time period for these questions may help with interpreting these data (e.g. "In the last 12 months..."). It is also worth noting that not all group members may be expected to have a direct relationship with Fellows, as this support is more regularly offered by members in specific roles or members doing certain activities (meeting with MPs, using ActionCenter, etc).

Based on the free-text responses to the question "Can you tell us more about how (if at all) the Fellows have supported your group?", those who had interacted with Fellows found this a helpful process, but many did not know about the role/work of Fellows, or did not have the time to take up their offered support.

"I'm not really sure I know what a Fellow is."

"The fellows are always there to help us and they have made this kindly clear within the group! Through their messages on the community slack channel, we all understand how we can contact them if we need any assistance. [Name of Fellow], has especially helped me so far with a new role in the [name of group]. During one-on-one training, she was calm, kind and very helpful with her feedback and advice."

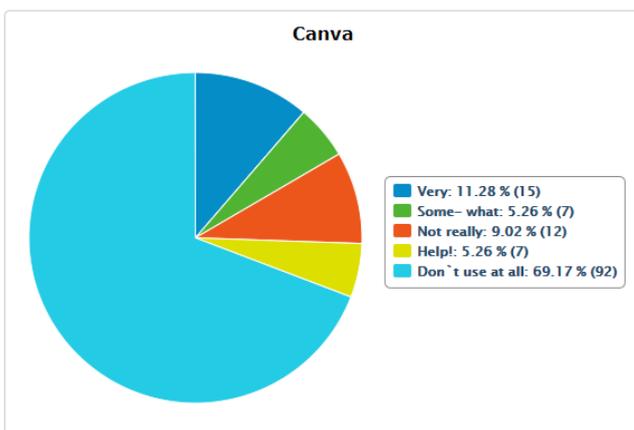
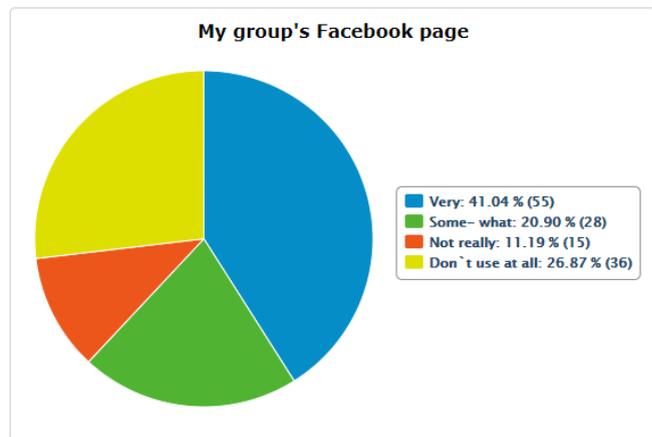
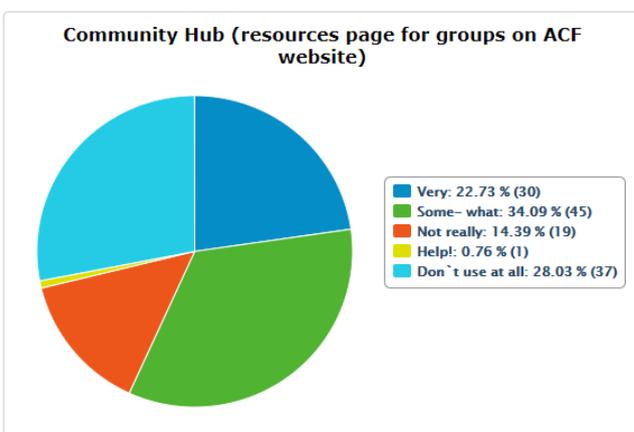
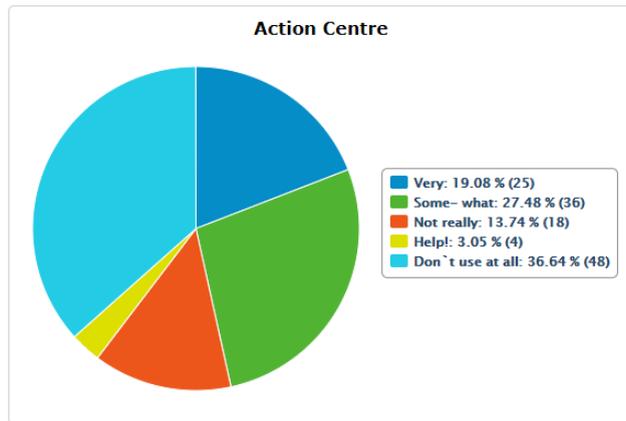
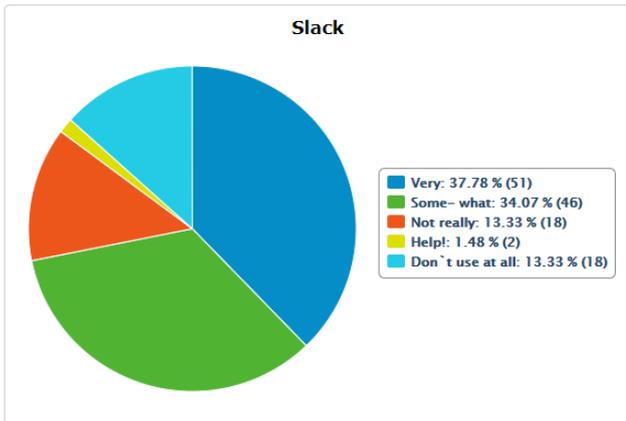
"I met two of the fellows at Activate training and have had email correspondence with others. They have been very willing and able to offer support and ideas. Unfortunately I haven't been able to utilise their advice and help due to other personal commitments, but believe them to be a really valuable resource."

As an exception to this general pattern of 'knowing and appreciating Fellows', 'not knowing the work of Fellows', and 'knowing but not having capacity to take up Fellow support', one respondent reflected:

"On the RRR campaign we were afforded a 45 min session with a Fellow to run through the campaign material which the Fellow completed adequately and with knowledge. However when delving deeper for knowledge and suggestions regarding questions there was little more they could provide. I believe this boiled down to lack of experience in the campaigns space and a lack of direction from ACF campaigns team. If we had someone with more experience or someone they could liaise with regarding our questions that would have been helpful. It did appear they were very much on their own in supporting us. I do feel there was then a disconnect afterwards in what we were meant to achieve to what we actually did. I even weighed up whether I wanted to continue with ACF community groups altogether."

We also asked about confidence in accessing the range of tech support that ACF offers. These are summarised below in visual pie charts, and on the whole suggest that Facebook group pages and

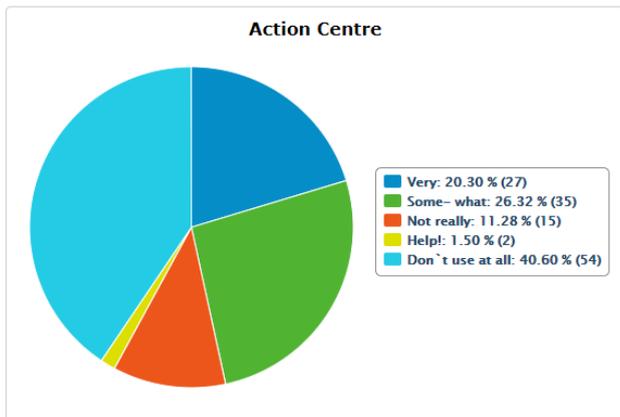
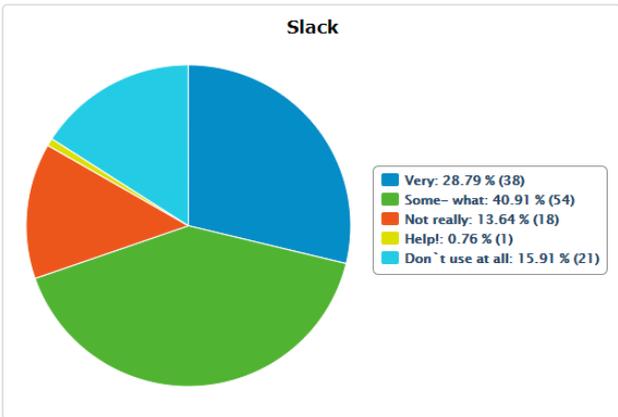
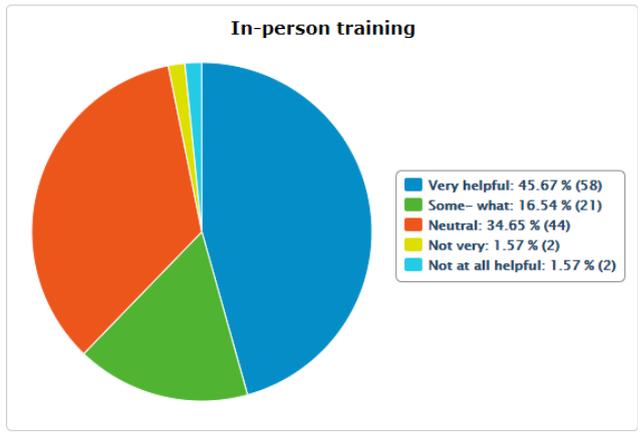
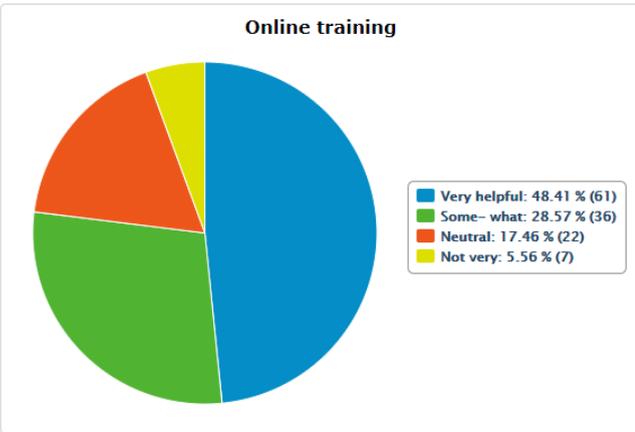
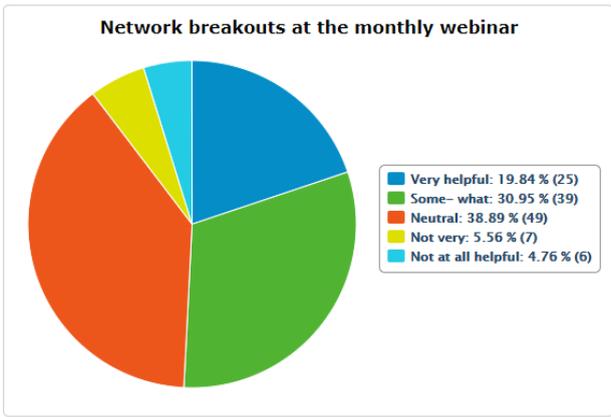
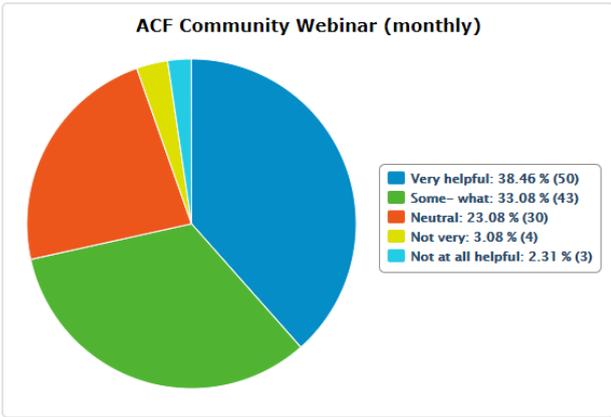
Slack are most confidently used, but a large proportion of people do not use Facebook at all. Canva is the least used tool (69% indicating “do not use at all”), followed by Action Centre (37%) and then the Community Hub (28%). Given the sample, this information gives a good indication of what active members are confident in using and what technology they are not accessing. Confidence in using Slack, Action Centre and Canva have not changed since last year.

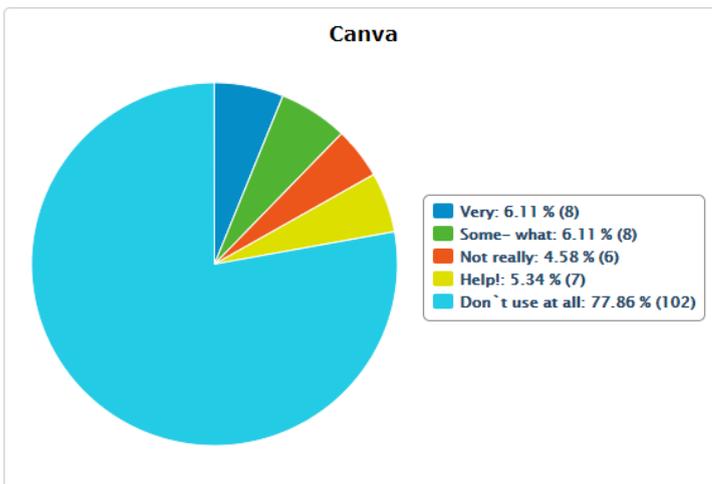
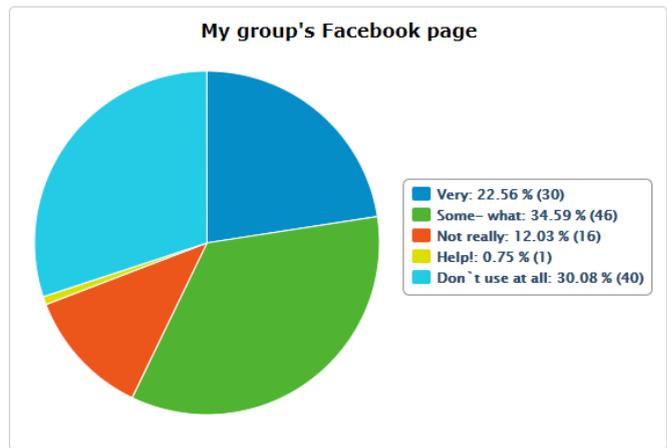
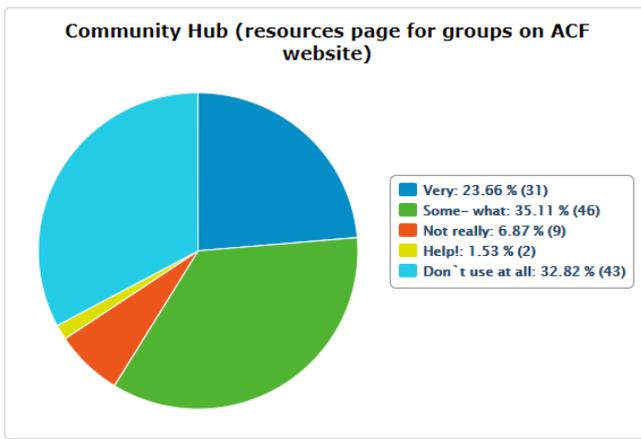


In terms of the perceived helpfulness of various types of support and tools offered by ACF, a new set of questions this year, we found the following was seen to be 'very helpful' (in order from most helpful to least):

- Online training (48%)
- In-person training (46%)
- ACF Community Webinars (38%)
- Slack (29%)
- Community Hub (24%)
- Group Facebook Page (23%)

- Action Centre (20%)
- Network breakouts (20%)
- Canva (6%)





In response to the question about future training that would support groups, some respondents expressed an interest in social media training (e.g. Slack, Facebook, TikTok, IG) and online tools such as Action Centre, Google docs and Zoom. However, there was a concern for the time required to practise these tools as well as attend the training on offer - again this issue of *time and capacity* of group members. As one respondent put it:

“I think we need to get our own act together to be in a better position to draw on ACF support.”

Other respondents expressed a disinterest in social media, and preferring that this work is held by other members of the group. Several indicated that a Group Health Workshop would support their group, where, as one respondent put it, “where we come in for a grease and oil change sort of event”.

Some respondents offered future ideas of support:

- Access to written guides for using electronic tools (e.g. Slack)
- Network role position descriptions (broad task roles)
- Being involved in the design stage of ACF campaigns
- Short films or written briefings from staff on campaign updates for groups to use at meetings

It is worth noting that some of these ideas for support already exist. This suggests that groups are either not aware of these resources or they may not have the time or capacity to access them.

While training is a necessary part of capacity building and shaping the culture of ACF, there seems to be a balance required - as mentioned in the previous section regarding the need for the group ‘process’ work offered by the Group Health Workshop. This sentiment was captured by one respondent answering the question “Looking into the future, what support does your group need from ACF?”

“This is a vexed question. At times it feels like we're being really overloaded with training/coaching etc. It feels like a lot of the work within the group at the moment concerns encouraging attendance at these things, with comparatively little time being spent on actually completing tasks. I think what the group needs right now is more experience working together on projects so that our roles, and strengths become more obvious to each other, and our trust and ability to work as a team increases. I'm not sure that more training sessions are really what we need. A group workshop could be helpful for us growing more connected, and written guides on how to complete tasks could also be useful.”

A similar sentiment was offered rather succinctly by another respondent, also responding to this question of future support:

“Seems like lots of support and training from the ACF. We just need to organise ourselves a little better.”

3. Vision responses summary

We asked Community Groups what their long-term vision was for their group. Here are some of the themes that emerged with examples of the visions survey respondents expressed:

Growth and diversity of the movement

“I'd like to see the group grow and be recognised as the main source of advocacy and information on environmental, conservation and climate change issues in the local community”

“Grow our capacity and expand our network and alliances.”

“My overall vision for the group is that we are united in our commitment to address climate change by every means possible - abandon fossil fuels, shift to clean energy, save forests and biodiverse habitats, transition employment for people in environmentally damaging industries, promote a circular economy, eliminate single-use plastics. That's the big picture. To achieve any of this I want the group to grow, especially with young people and people from culturally diverse backgrounds; I want members to feel engaged in something immensely worthwhile and to be able to see the difference they're making.”

“I would like to grow the group locally so that we will have the numbers to spread the load and have the capacity to start new projects.”

Meaningful advocacy and action at local and national levels

“We need to pressure the federal government to LISTEN rather than surround themselves with fossil fuel advisors.”

“That we work to raise awareness of climate and environment issues in our area. That our activities are well targeted to be effective and within the capacities of the people in the group. That involvement in group activities is enjoyable and fun and workload agreed upon and shared.”

“To respond to systematic environmental problems and climate emergency through solution focussed advocacy, education, social media, events and collaborative endeavours.”

“I want Adani's mine to be stopped for starters as this is originally why we formed the group. I would also like to see the government actually do something to help our environment, wildlife and climate change.”

Healthy and impactful groups aligned with ACF

“Represent the values and strategy of the national ACF organisation, connected also with some relevant local community projects.”

“I would like it to be more structured with the network teams. I would like more community participation and members coming to meetings. I would like the group to have an impact on getting more policy change and initiatives within our area.”

“To engage with ACF campaigns; contribute to the community conversation about protecting our environment and grow the group.”

4. Discussion

ACF is committed to cultivating a diverse, impactful and thriving movement where people from all walks of life are working together to protect Country, creatures big and small, and our future on this beautiful planet. It is with that vision in mind that it is important that we look to the findings in this Report as clues for the ACF community to (re)align ourselves with this vision. Sometimes this requires difficult questions as a way in to look at what we do, how we do it, and how we might be able to cultivate a culture that supports this vision.

Many questions arose during the writing of this Report, several of which stemmed from reflecting on the question of *whose voices are being represented* and by implication whose are not being heard. First, let's return to a point that was weaved throughout the Report was the characteristics of survey respondents. We found that the Group Health survey respondents reflected highly involved or active ACF community members, and based on their own self-identification were mostly female, Caucasian, spoke English at home, do not currently live with a disability, were highly educated, and were either retired or in some level of paid work. The respondents of the Retention Survey shared a similar demographic profile. While this is the first time the Group Health Report is collecting and reporting on this level of demographic data, it offers some important points to reflect on and continue to revisit in future years.

With this sample context in mind, and the consistently high scores of perceived psychological safety, dependability, and meaning, we might ask *for whom are ACF local groups safe, dependable, and meaningful for*, and inversely, *who are they not safe, dependable or meaningful for*? Similarly, with the increase in uptake of leadership roles, we might ask: *who is being supported to become a leader within a group*? Further, we might ask *what does it take to become a leader*, in terms of capacity and time, and how much of that workload is considered in light of peoples' non-ACF commitments, roles and responsibilities? This is particularly pertinent given *capacity and time* were raised as key barriers to group health, and also in light of the persistent issue of perceived diversity within ACF groups - issues which will be unpacked further. Before we do, let's take another look at the overview of the Group Health constructs:

Group health summary table

	Group Health Area	2020	2021	Change
1	Psychological Safety	Very high	Very high	↑ slight improvement
2	Dependability	High	High	○ consistent
3	Structure & Clarity	Moderate	Moderate	○ consistent
4	Meaning of Work	Very high	Very high	○ slight improvement
5	Impact of Work	Moderate to high	Moderate	↓ slight decline
6	Sustainability of work	Moderate	Moderate	↓ slight decline
7	Growth & retention	Moderate	Moderate	○ consistent
8	Diversity	Poor	Poor	↓ slight decline
9	Leadership Development	Moderate	High	○ slight improvement
10	Support	Very high	High	↓ slight decline

There was a strong desire among respondents for a *more diverse community* within their local groups. Creating an inclusive and supportive space necessarily requires looking at how group dynamics and norms shape the culture of the group and how these in turn shape the movement (and are shaped *by* the movement). Given the consistent themes of *capacity* and *time* underpinning survey responses, it is important that **groups prioritise working towards a more sustainable and equitably distributed workload**. Indeed, there needs to be supported group processes that make these conversations and points of reflection possible (e.g. Group Health Workshops can be one such space). Training such as the Equity Team are leading are important cultural change processes that we found are being well received by local members and that link to broader goals for diversifying for the movement.

Another related point that arose during the writing of this Report involved reflecting on the extent to which ACF's approach to organising might shape *who is involved* in and part of the movement. In this year's survey, we found an interesting culmination of people taking on more leadership roles than in the previous year, however, reporting less impact, less sustainability, less support and an expressed sense of being asked to do 'a lot' and in some instances 'too much'. The increase in leadership and the high reports of meaning are to be celebrated, but also cautioned in light of the persistent theme of *capacity and time* threaded throughout respondents' free-text comments (and throughout the Retention survey as common reasons people are no longer involved or active).

There is important information to digest here about the sheer amount of work local ACF members, and arguably leaders in particular, are responsible for in their groups. As expressed in this Report, the issues of sustainability, impact and diversity are intimately connected, and are not separate from

ACF's organising model. To explore this further, let's return to the question of whose voices are not being heard in this Report, and indeed may not be represented in the movement itself. Survey respondents described the following communities as being least represented in their local groups: Aboriginal and Torres Strait Islander people, people from working class, culturally and linguistically diverse communities, younger people and families. And therefore, it might be timely for local groups to consider **what a fair and sustainable workload for group members looks like, in light of peoples' varied capacity, commitments and roles outside of ACF.**

Related to this issue of diversity is the subtle and perhaps unintentional ways in which ACF processes may shape the flourishing of certain groups, and leave behind those groups who may be struggling, losing momentum, or at risk of dissolving. In particular, the eligibility requirements for a Group Health Report and subsequent Workshop (minimum 5 responses per group, for anonymity reasons) may unintentionally create a scenario where the already engaged groups are responding to the survey and then being able to receive further support (through a tailored Report and then invitation to a bespoke Workshop), while the less engaged groups who are potentially struggling are being left out of this processes. These are the groups who may not have the sample of highly active members with capacity to fill out this survey as well as hold leadership positions within a group.

Also on the note of supporting all local groups - not just those who are highly engaged - is the question of time and capacity to access available support. One of the main findings of this Report was that **despite gratitude for ACF's comprehensive support tools available**, which was acknowledged as an important part of building the capacity of local groups, **respondents indicated lacking the time and capacity to fully engage with the available training, coaching or resources.** This begs the question of *what support tools are groups consistently accessing* (beyond this highly active sample surveyed here), and *what support groups actually need to be 'healthy' and impactful.* It would be worth, in future surveys, including a question around groups' first point of contact when they need help with something.

In short, these findings offer much to reflect on and sit with over the course of 2021. It is worth acknowledging that these findings offer a *partial* perspective of what is happening on the ground with local groups and how to best support these groups thrive in the coming year. While the Retention Survey has offered us additional insights into the *time and capacity* required of volunteers (the main reason many were no longer involved with ACF local groups), the small sample size (n=16) means that future data collection from this sample is a priority.

5. Recommendations

Where can ACF local groups improve Group Health?

The following are recommendations I have tailored to ACF local groups:

1. Empower and involve people from all walks of life to be part of the movement. This is crucial to the success of our movement. It is therefore imperative that local groups prioritise this recommendation and engage with relevant (Equity) training and activities to ensure groups are safe and welcoming spaces for all.
2. Prioritise supporting one another within and across local community groups by offering your skills and learnings, and by actively connecting with other groups in network spaces. This might include learning from other groups about how they have engaged with new audiences or creatively re-engaged lapsed members.
3. Make more use of non-staff/Organiser support already available to solve simpler challenges. This might include the Community Hub, Fellows' coaching, available training, Slack, and SupportBase.
4. Engage with Organisers and Fellows to understand the significance of your work in the broader community and in ACF campaigns.

5. Work with Organisers to clarify your group's priorities and roles, so your group can continue to thrive.
6. Create and participate in forums that name, acknowledge and encourage groups to emotionally process the work of activism.
7. Foster a culture of self-reflection, cultural humility* and personal development in your group.
8. Re-engage lapsed members and engage with new audiences.

*Cultural humility can be understood as a personal commitment to self-examination and redressing injustice and power imbalances within one's relationships and ways of relating to people.

(Informed by Tervalon, M., Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9, 117-125.)

These recommendations have been approved by the Organising Team, who have received their own corresponding set of recommendations to action over the course of the year. The Organising Team will collectively make decisions about defined interventions to be resourced and implemented that address their role in actioning these recommendations. This action plan will be sent to community groups for feedback by the end of July.

In Conclusion

We measure group health because we believe that Group Health is the single biggest indicator of whether a group will be impactful and achieve their objectives. But this is a joint effort. ACF as an organisation will continue to prioritise Group Health and we also encourage individual groups to digest these recommendations, identify potential interventions and make a plan of how your group can improve its function and impact.

In prioritising the recommendations above, we will see the ACF Community continue to grow and diversify their groups to be safe communities where people from all walks of life feel welcomed in, skilled up and share leadership responsibility in sustainable ways, and where the group takes meaningful action that results in real world impact.

6. Appendix: Methodology

6.1 Group Health Survey

Improving how we measure group health at ACF remains a priority for us. More about the Group Health Survey can be found [here](#). In line with previous years', the Group Health Survey incorporated the following aspects:

- i) direct assessment of Google's measures of healthy teams (psychological safety, dependability, structure & clarity, meaning, leadership, sustainability, growth and impact);
- ii) a self-assessment of the group's diversity;
- iii) the respondent's feedback on the support they receive both from their group and ACF (including feedback on digital tools).
- iii) an opportunity to pass confidential feedback to ACF's Community Organising Program Manager ("Message in a Bottle");
- iv) and space for the respondent to outline their own personal vision for the group.

In addition, we collected the following sources of **new** data:

1. A new survey (Retention Survey) was developed to learn from people who have recently interacted with ACF but are no longer involved. This survey is intended to help us understand why people are no longer involved or active in ACF local groups.
2. In-depth demographic questions were included in both surveys to better describe the ACF community.

We continue to collect data on the various ways in which ACF supports local groups, including digital tools, online training, coaching calls and under the scope of the ACF Fellowship Program. Measuring engagement and the reported usefulness of these support structures, alongside new avenues of support ACF group members envision, is crucial to building a well-resourced and impactful people-powered movement.

In light of last year's data, we have continued to develop questions around cultural diversity within ACF groups. This year, we have added more specific demographic questions about survey respondents to provide more robust measures of diversity within ACF groups. These data will supplement existing measures of perceived diversity within groups and free-text questions about who is most and least represented in local groups.

Finally, respondents were offered a Group Health Workshop (2.6). The Group Health Survey data continues to shape the design and delivery of the Group Health Workshops. These workshops offer a safe space for groups to work with a neutral person (Group Health Coordinator) to problem-solve and develop actionable plans around what they have learned about their group from this process.

6.2 Recruitment

We invited nearly 715 individuals to participate in the Group Health Survey based on whether they were on one of two levels of engagement on ActionCentre: (1) active group member or (2) active group leader. We promoted the survey twice via email blasts, regularly on Slack, via emails with particular active or leading group members, and regularly in coaching sessions between Community Organisers and groups.

With a new objective of seeking to understand the perspectives of people no longer involved with ACF, we also recruited non-active ACF community members to complete a separate survey about their experiences with ACF. We invited 2078 individuals to participate based on whether they were according to the following levels of engagement on ActionCentre: (1) Expressed Interest in the local

group, (2) RSVPed for a group’s event or (3) attended a group’s event. We promoted the survey twice via email blasts. We received a total of 16 responses to this survey.

To ensure representativeness of the data (in reflecting as many ACF groups as possible), we tracked participation by ACF Groups. With a total of 42 ACF groups, only groups who have been active for a minimum of 6 months were eligible to participate in the survey. Through conversations with the respective Organiser, **four groups were excluded***: two were deemed too ‘new’ (active for less than 6 months), one was no longer active with ACF, and another (only active for 6 months) had established active members only in the last 2 months after core members left the group. This meant a total of 38 groups were eligible to participate in the survey.

6.3 Survey respondents

The surveys were open for a total of 5 weeks, over which we received a total of 153 responses (16 of which were for the Retention survey). Last year, the Group Health Survey had a more open-ended data collection timeframe. In short, 89 responses were analysed for the major reports. However, to increase eligibility for the Group Health Workshop, the survey remained open over the course of the year, enabling a total of 137 responses. In an effort to standardise the research process this year, our brief window for data collection encouragingly produced a higher response rate (see Figure 1).

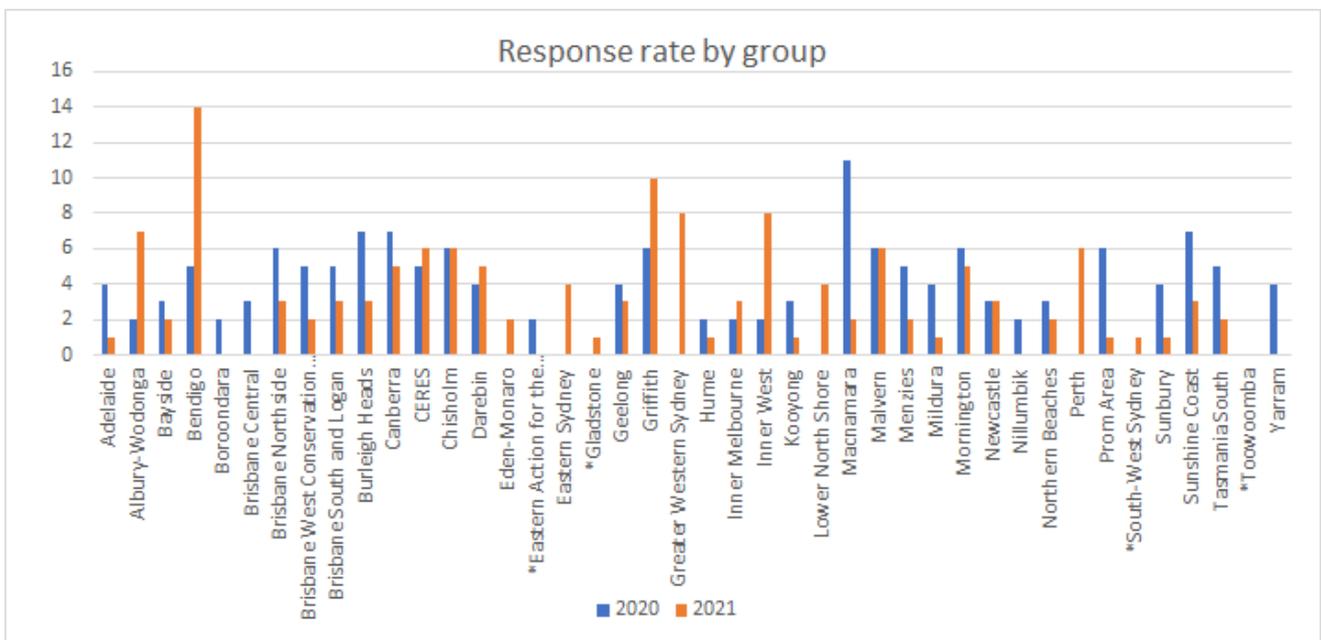
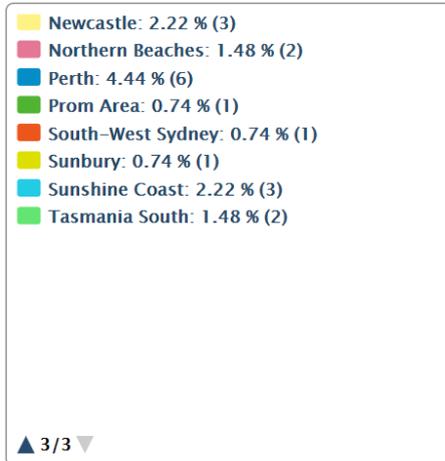
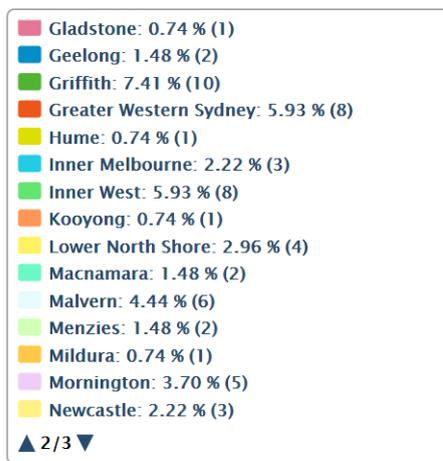
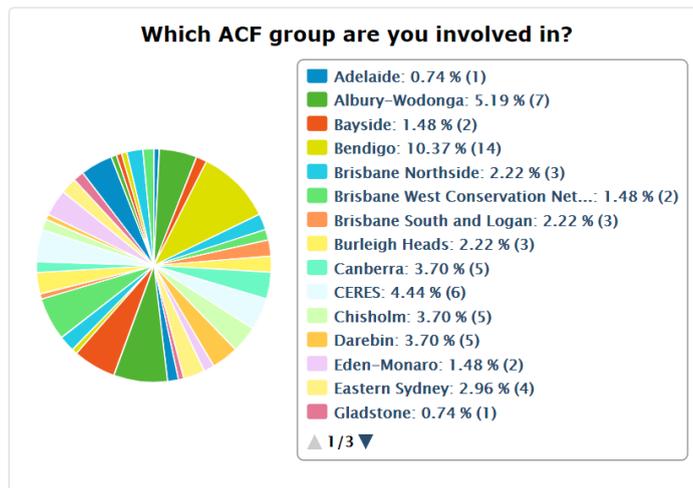
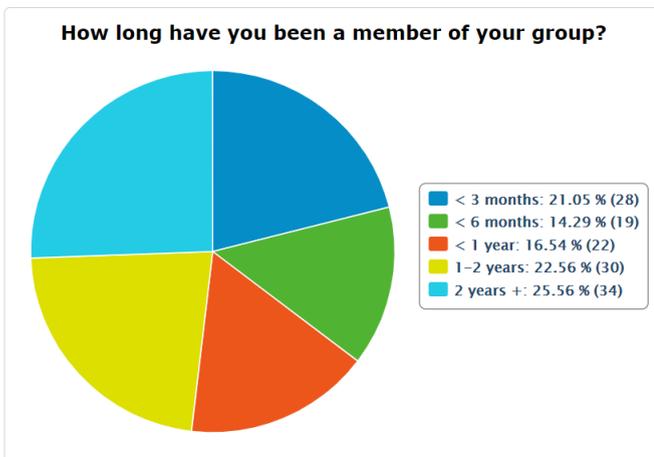


Figure 1. Response rate by group.

Looking closely at 2021 response rates suggest an overall good spread across groups, with **a response from a total of 36 groups** (NB: four groups were not eligible) compared to 34 groups from last year. However, this year, we have **only 12 groups eligible** for a Group Health Workshop (having reached the minimum 5 responses to ensure anonymity is maintained), compared to 16 eligible last year.

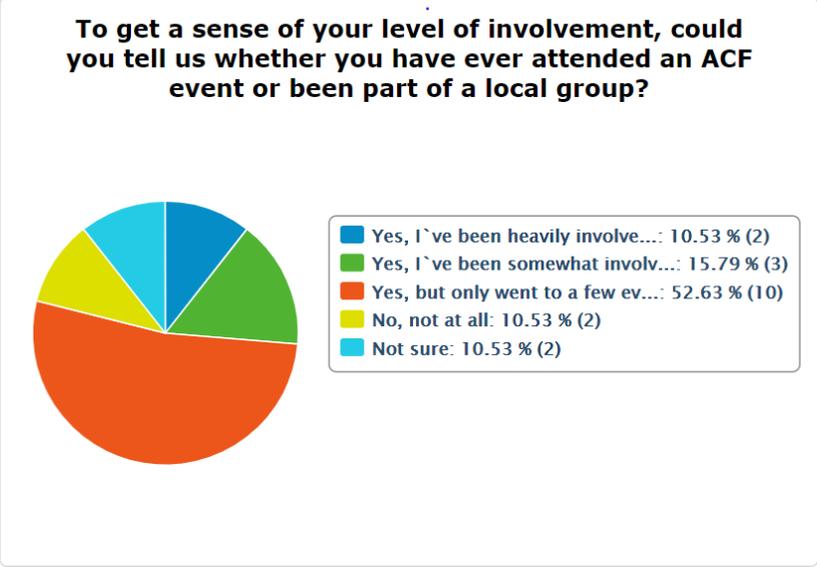


Compared to 2020, this year, survey respondents represented a more even spread of community members in terms of how long they have been a group member. For example, last year, almost two-thirds of survey respondents had been involved in an ACF group for less than 1 year (65%) compared to about half this year (52%).

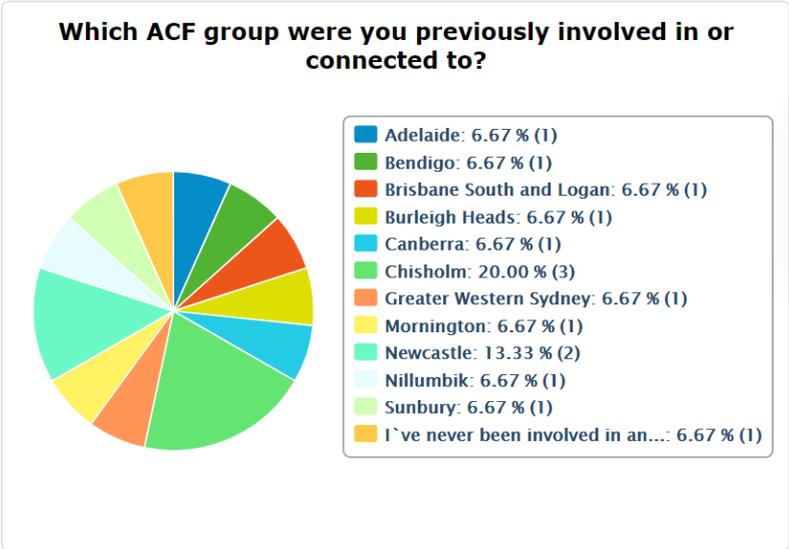


Similar to last year, survey respondents were actively involved in their groups (>88% very or somewhat active). This suggests that their responses will largely be reflective of their experience (not lack of experience) of their involvement in a group.

To supplement the views of highly active respondents, this year is the first time we have also collected data from people who are no longer involved or engaged with ACF local groups. Of the 16 respondents, most had only ever attended a few events, meetings or actions (53%).



Of the 14 respondents who had indicated they were previously involved in or connected to a group (but are no longer), this was mostly evenly spread across 11 of the ACF groups (with the exception of Chisholm and Newcastle, with 3 and 2 respondents respectively).

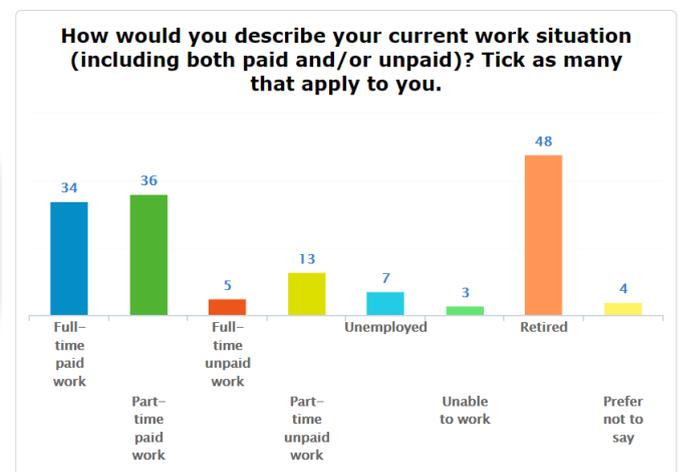
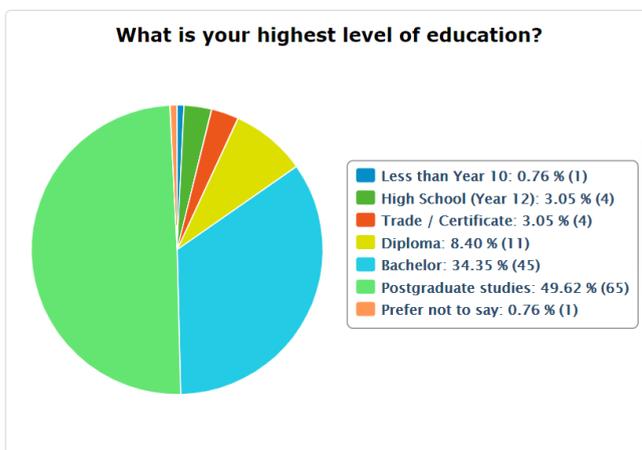
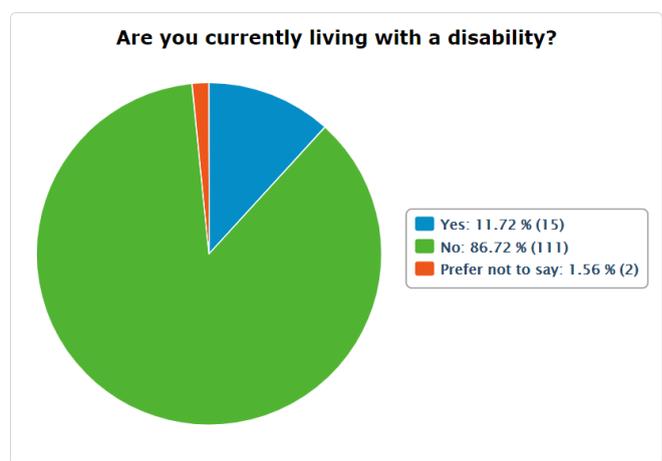
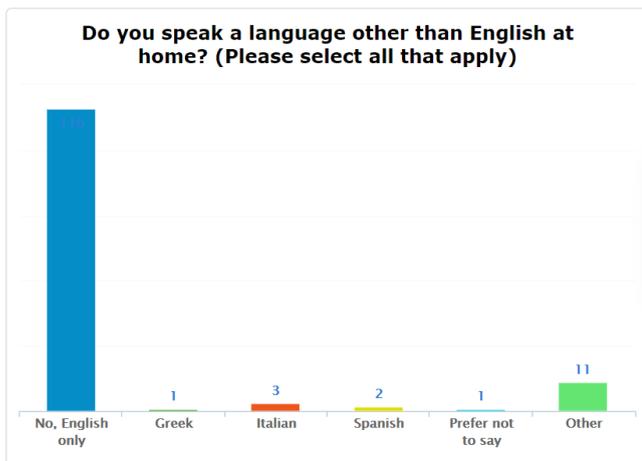
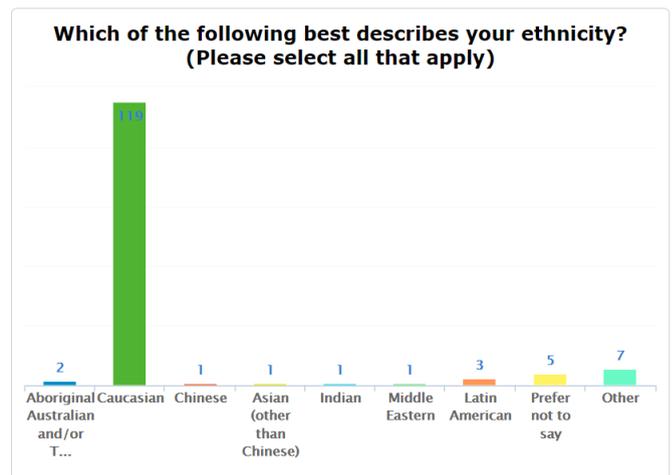
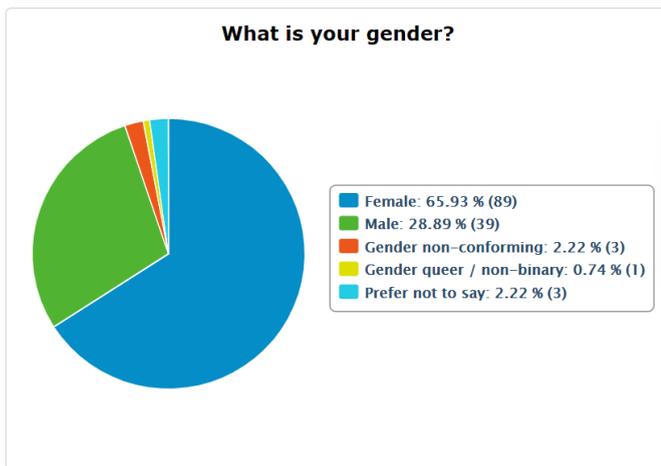


This year, for the first time, we asked the ACF community a variety of demographic questions to allow us to better describe the vibrant community who make up ACF and who respond to this survey.

To summarise, survey respondents who identified as being active community members and therefore responded to the full Group Health survey self-identified as:

- mostly female (66%),
- Caucasian (87%),
- spoke English at home (85%),
- do not currently live with a disability (87%),
- retired (35%) or in some level of paid work (51%)
- and hold either a postgraduate qualification (50%) or Bachelors degree (34%).

This pattern of demographics is illustrated in the figures that follow:

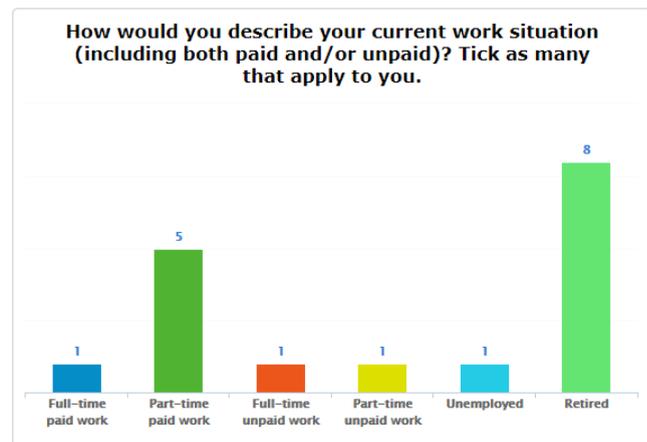
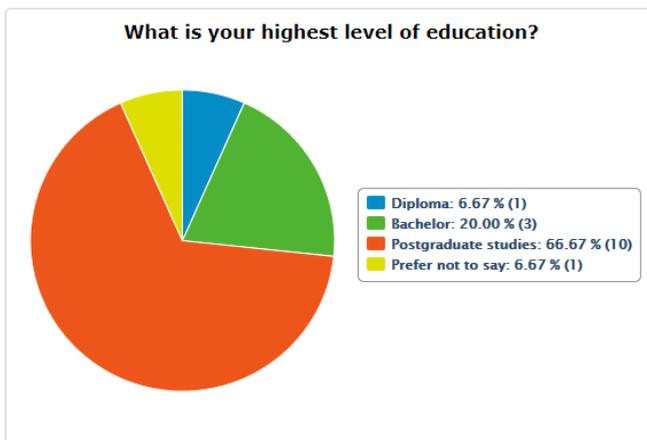
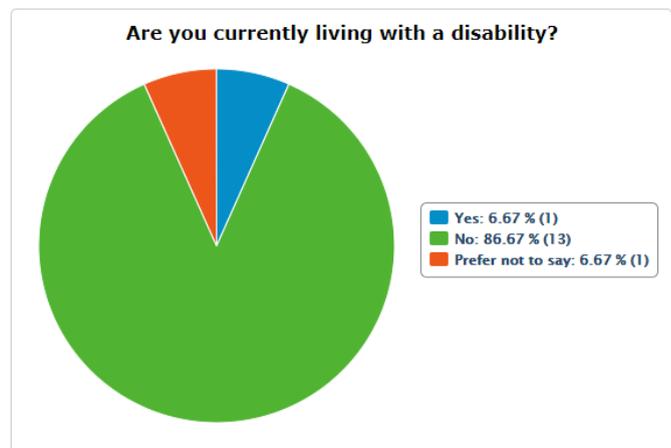
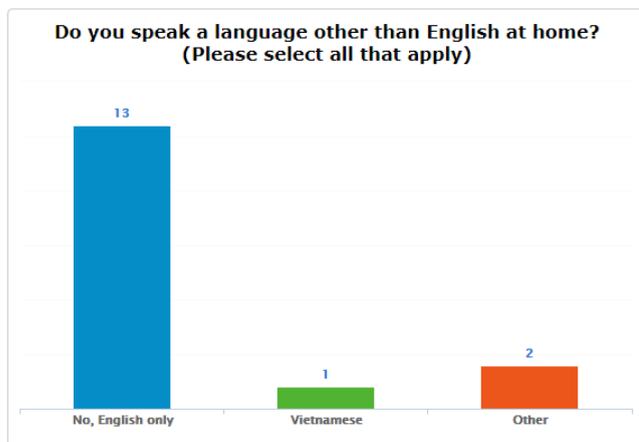
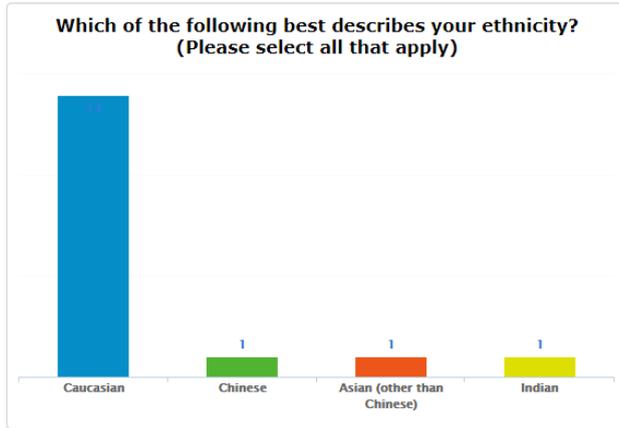
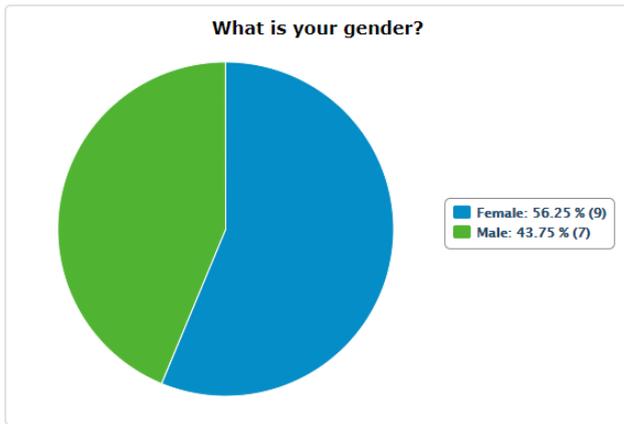


In terms of the respondents of the Retention survey, they self-identified as:

- mostly female (56%),
- Caucasian (87%),
- spoke English at home (81%),
- do not currently live with a disability (87%),
- **retired (50%) or in some level of paid work (37%)**
- and hold either a **postgraduate qualification (67%) or Bachelors degree (20%)**.

The characteristics in bold font above indicate some variation in participant demographics compared to the Group Health Survey. Overall, the samples are similar with slightly more retired and postgraduate educated respondents compared to the Group Health survey, and slightly less people in

paid work or with a Bachelor's degree. However, none of these are statistically significant given the sample size differences. The figures below depict the Retention survey respondent demographics:

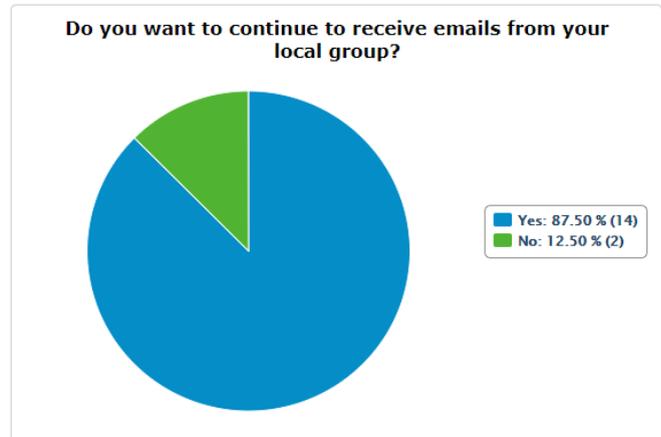
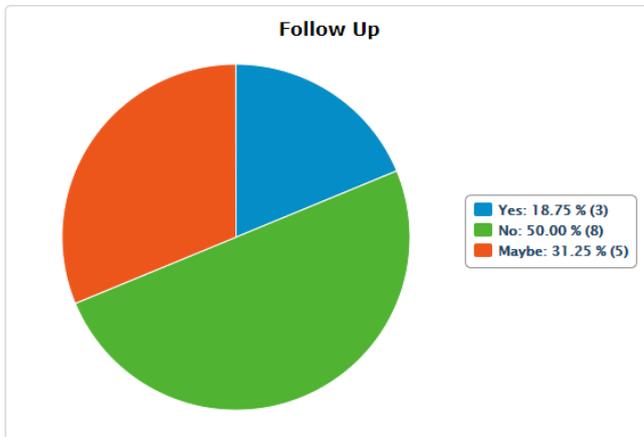


6.4 Follow up interviews

Last year, a total of 45 interviews were undertaken and were on average 30 minutes long. The calls were unstructured (ie. no standard set of questions) but were instead directed by the interviewee and their feedback. Extensive notes were taken. This year, the invitation for a follow-up discussion was unintentionally omitted from the final Group Health Survey. However, Retention respondents were asked whether they would like to be followed up. A total of three indicated they would like to be followed up, with an additional five responding 'maybe'. Together with the Organising Manager select respondents were identified and followed-up. One respondent from the Group Health Survey

who was followed up via email by the Group Health Coordinator, because of a disclosure of burnout, explained that they had recently left their ACF local group. Further email correspondence ensued to further understand this respondent's experience with their local group.

Retention respondents were asked whether they are interested in continuing to receive emails from the local ACF group they are connected to, and we found most respondents were in favour of this (87%). This latter finding indicates that people may receive some benefit from being kept informed with the activities and priorities of a local ACF group, without needing to be directly involved.



6.5 People Power Metrics

ACF have begun the process of methodically determining which aspects of our people power work we will track and report on, and how this can be done.

The key People Power metrics we used in this report include:

- **Group growth along the Ladder of Engagement.**

ACF measures not only how many people are 'in' the ACF Community, but their level of engagement with the ACF Community. These steps on this ladder of engagement are:

1. Expression of interest
2. RSVP to a group event
3. Attendance at a group event
4. Active member
5. Active leader

This data is collected and tracked when:

- A group does a manual upload of physical sign-ups (e.g. from a market stall) into ActionCentre.
- An individual digitally signs up to the group on their sign-up page.
- An individual RSVPs digitally to a group or specific group events
- Event hosts mark the attendance of any given event on ActionCentre Community Organisers manually move individuals onto a different step on the path.

It should be noted that:

- We have varying levels of confidence in the credibility of some of these metrics, as there is an additional data governance piece of work needed to better collect and store data. As you can imagine, the data collection is dependent on events being set up correctly, group members marking attendance, and manual progression. Where the metrics provided insight into group

health, we have included them in this report, but we should take caution in drawing too many conclusions from this data at the moment. In the future this will be an incredibly valuable contribution to group health reporting, but it is still in its infancy at the moment.

- We have recently introduced SupporterBase to replace ActionCentre. This should result in the group more easily being able to maintain the accuracy of their group's data.

2.4 Analysis & Recommendations

Analysis of the above inputs was as follows:

- Examine the aggregated results for each individual construct/indicator of group health;
- Thematically organise the responses of open text questions;
- Compare data across the two time points (2020 and 2021 data);
- Add relevant quantitative data from people power and training metrics;
- Integrate qualitative data throughout to further contextualise each individual indicator;
- Read the Group Structure Review data as an independent data source for further context for this Report.

6.6 Organising Team Consultation

The consultation within ACF involves::

- Presenting draft results for input to the Strengthen People Power Team;
- Getting input from team members who hold specific responsibility for group health inputs to get their advice on process;
- A group consultation session following receipt of this report;
- Individual consultation sessions between the Group Health Coordinator and the relevant Organiser following receipt of draft individual group health reports.

We will use this process to inform the results and recommendations of the reports.

6.7 Reporting

Google's *re:Work* principles study found that the [reporting back](#) of results was found to be as important as the solicitation of input. We will prioritise reporting as a dynamic process that allows both staff and community groups to digest the results and recommendations and identify solutions.

The Group Health Coordinator will be informed by each of the above inputs in preparing reports, but not solely directed by any of them. It is important that the Group Health Coordinator maintain a degree of neutrality and distance in analysing and reporting the results.

The reports being produced include:

- A national report for the Community Organising Team
- A summary report for all ACF staff
- A national report for the ACF Community (this report), the results of which will be presented to all respondents at the national ACF Community webinar and discussed in detail with the Strengthen People Power Network.
- Individual reports for each community group where there were five or more respondents (and active for at least 6 months). This will be distributed to all "Active Members", "Active Leaders" and other survey respondents.
- Individual reports for each Organiser based on the aggregate results of the groups they support.

6.8 Group Health Workshops

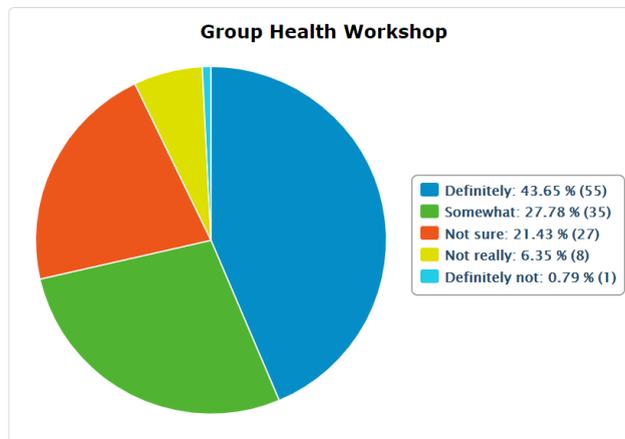
In 2020, a total of 7 Group Health Workshops were delivered via zoom (with two in person) by the Group Health Coordinator. Based on the eligible 16 groups, a 44% uptake of Workshops indicate some level of 'buy in'. In this year's survey, we collected some preliminary data to evaluate the usefulness of

these Workshops. When asked how helpful they found the Group Health Workshop, most reported 'neutral' (62%), with roughly a third suggesting it was either somewhat or very helpful. The prevalence of 'neutral' as a response, may well be due to the fact that most participants did not attend a Workshop last year.



Of the seven groups who received a Workshop last year, a total of four reached the minimum response rate to be eligible for a Workshop this year. This may indicate some additional insight into the perceived usefulness of the Workshop with low response rates from the other three groups this year. This low response rate may be because these groups have completed their Workshop recently and therefore may have felt they have already been doing the introspective/process work that another Workshop would offer. Among the four groups who are eligible again this year, two attained the highest response rates by group overall (see Figure 1: n=14, and n=10). This may indicate an overall high level of engagement with ACF processes as a whole, and less about the perceived benefit of an individual on-off activity.

The largely 'neutral' response to last year's workshop did not appear to deter interest in the Group Health Workshops for 2021. Approximately 70% indicated that their group would (definitely or somewhat) benefit from a Workshop. Compared to last year, there appears to be an increase in the number of respondents who see value in the Group Health Workshop for their local group (42% reported "not sure" or "not really" in 2020, compared to 28% in 2021). This increase may be a result of internal discussion and promotion of the Workshop, including, for instance, at the March 2021 community webinar promoting the survey.



We will be offering Workshops again this year for (eligible) groups to digest and translate their individual group results into an actionable plan to agree on as a group in consultation with their Organiser. It will also be a space to celebrate and acknowledge the contributing factors to their strengths and identify potential opportunities for improving group functioning. At this stage, a total of

12 groups will be eligible for a Workshop after the receipt of their tailored Individual Group Health Report.

The workshops will be facilitated by the Group Health Coordinator with prior advice from the relevant Community Organiser. The workshop itself will not have the Community Organiser present to allow the opportunity for frank and honest discussion about the group's experience of ACF support. At the Workshops the Group Health Coordinator will introduce exercises and activities groups can undertake to improve on each idea, largely socialising what has been identified in this process as being effective for other groups.

Following the workshops the Group Health Coordinator will then do a thorough debrief with the relevant Organiser, noting:

- the draft priorities the group identified as areas of group health they wish to work on in the coming year.
- any feedback the group has that they wish communicated to ACF about our support of the group.