

The farmer's phoenix—engaging with farm families after natural disasters

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Catherine Mercer-Grant is the Sustainable Farm Families™ program manager at the National Centre for Farmer Health (NCFH) based in Hamilton, Victoria. Cate has a background in marketing, finance and project management across a broad range of sectors.

Cate is a graduate of Royal Melbourne Institute of Technology and University of Western Sydney, and a Fellow of the Australian Institute of Management, Associate of the Australian Marketing Institute and Member of the Australian Institute of Company Directors.

Although commencing her career in a metropolitan setting she demonstrated strong empathy and commitment towards rural communities. Overtime this priority translated into her career choices.

Cate started her research career with the Greater Green Triangle University Department of Rural Health undertaking projects in regional workforce planning. Projects included addressing workforce shortages in podiatry and dentistry. She was also involved in the development of allied health recruitment and retention models. In 2007 she was selected to scope the recruitment of overseas-trained health professionals for the Victorian Department of Human Services.

On joining the NCFH Cate was tasked with rolling out the successful Sustainable Farm Families™ (SFF) program across Victoria. Her expertise in project management ranges from risk management, governance, strategic planning through to program implementation and evaluation. She also has a high capacity to engage and develop partnerships with agricultural industry groups, health agencies and government agencies.

Her current research focuses on farming families, social networking, health behaviours and conditions and alcohol misuse. She has developed strong interest in wider determinants of health and their relationship with farmer health. She is also keen to act as a catalyst for improving the health, wellbeing and safety of Australian farming families.

She is passionate about Australian agriculture and maintains strong links with the farming community. She is currently undertaking postgraduate studies in agricultural health and medicine.

Their work and home landscape of a farming family is moulded very much by the environment and the elements it presents to them, for all the challenges the environment puts to them – eventually it will reward them.

This paper focused on the challenges of the environment and in particular natural disaster, which is the effect of a natural hazard (e.g. flood, tornado, volcano eruption, earthquake, or landslide) that affects the environment, and leads to financial, environmental and/or human losses. (EMA 2011) This paper will use bushfire recovery as the case study, the five recovery keys and the three key leanings from the program.

Bushfires are an integral component to the Australian landscape. In terms of monetary cost they rate behind the damage caused by drought, severe storms, hail and cyclones^{*1}. Severe bushfires have been occurring in Australia since as early as 1851 – Black Thursday in Victoria (which claims to be the largest area burnt 5 million has burnt), 1983 Ash Wednesday and 2003 Canberra bushfires to name a few. During the second week of February 2009 Victoria experienced the worst bushfires in Australian history, resulting in over 173 deaths, destroying thousands of properties and forcing thousands of residents to flee their homes. The immediate impacts of these fires were devastatingly obvious, however for many of the surviving farming families there are a range of long-term impacts with which specialist assistance was and still is required to overcome. This is the story of farming families in Kinglake and the surrounding region and how we can take the learning's from this program and apply it to other natural disaster recovery programs.

But before I introduce the farming families of Kinglake and their response to bushfire, let me introduce you to the program we took to Kinglake – Sustainable Farm Families™.

Sustainable Farm Families™ (SFF)

Sustainable Farm Families™ (SFF) is an evidence based program that aims to address the health, wellbeing and safety issues facing farming families. It is a program backed by solid research and intersectoral collaboration. It is a model of extension that engages farming families as active learners where they commit to healthy living

and safe working practices. It commenced in 2003 with funding from the Joint Research Venture on Farm Health and safety managed by the Rural Industries Research Development Corporation. (Brumby, Wilson, Willder 2009)

Better health

Yearly no fuss workshops that focus on health – BGL, BCL, eyesight, height, weight, blood pressure and respiratory. One on one time with a health professional and discussions on a range of health, wellbeing and safety issues

Better understanding

Information is presented in a practical manner with farmer appropriate analogies– for example the heart is likened to a water pump and SFF team members are there at every stage to assist you throughout the program

Better business

SFF aims to enhance the farming business. It is run with the farming way of life in mind and with farmers’ priorities foremost.

The program has proved life-changing for many participants.

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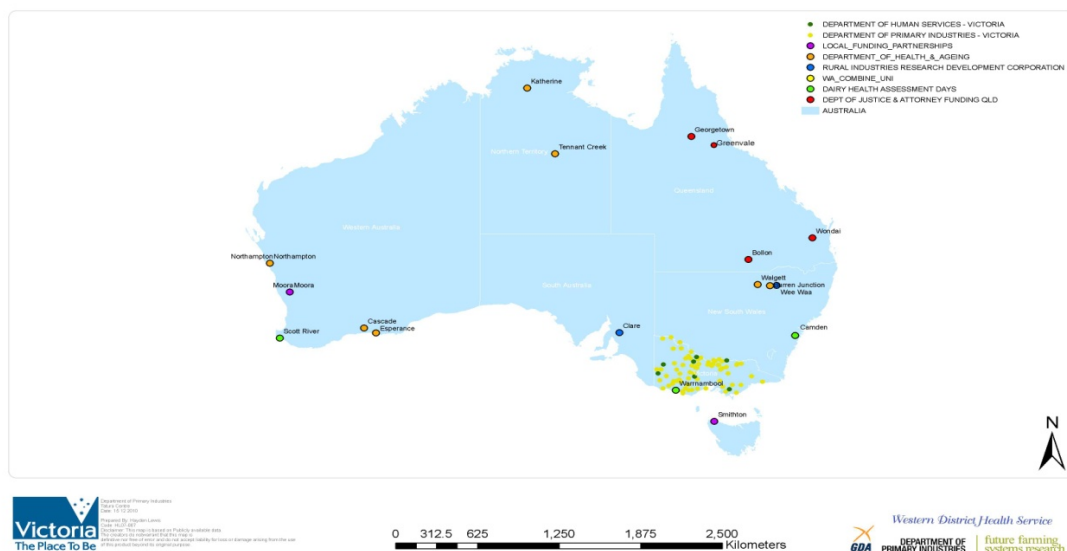


Figure 1 Map of SFF programs

Since 2003, SFF been delivered in all states of Australia except the ACT. It has been delivered to over 2,300 farming families in 130 locations

Sustainable Farm Families™ as a program and its trained health professionals and facilitators are used to dealing with farmers in crisis and dealing with natural disasters. Western District Health Service has run programs to assist farmers during drought recovery in Victoria 2007 – 2010, and flood recovery in Queensland 2010 – 2011. We have also started to address dealing with a climate of change in recent Victorian and Queensland programs.

The major difference between the drought and flood recovery programs that we have previously run was that the disasters were slow and insidious and allowed the farmers to respond, react and adapt their management behaviors’ and practices – for example the Victorian drought in some areas occurred over a nine year period,

whereas the bushfire was instantaneous and left little opportunity to respond, even in the event of some of the farmers being prepared for bushfire.



Figure 2 Phases of natural disaster recovery

In the delivery of the SFF natural disaster programs we fit into the recovery phase of disaster response – that is the rebuilding and restoring of what has been lost. The SFF program as part of the recovery phase is characterised by:

- assisting farmers in the healing process
- restoring if not improving their general health, wellbeing and safety noting that we focus on health as a whole rather than exclusively mental health
- promote coping and resilience
- ensure safety and comfort within the group and also the connections with social supports
- provide a range of interventions – short term, medium term and long term.

It is also important that the SFF team link in with local and collaborative services and understand that the recovery process is a long term process and support from SFF on an ongoing basis is critical.

As part of the recovery phase, our recovery 'keys' relate to:

- collaboration
- coordination
- flexibility
- professional
- learning.

The farmers in Kinglake were from a range of farming enterprises, from blueberry growers, sniffer dog breeders, grape-growers, stud cattle breeders to large scale prime lamb operations, they ranged in age, gender and nationality – there one commonality was that as farmers they had survived the Black Saturday bushfire in varying degrees.

Collaboration key

It was essential for Western District Health Service to create and sustain broad and sincere partnerships among individuals and organisations prior to the program so that we advocated a smooth program – which in turn would encourage both trust and advocate a team atmosphere of working together to help the group of farmers improve their health, wellbeing and safety. Our partnerships also enabled us to have a real time situational awareness of what was happening to farming families in Kinglake and surrounding issues – this was absolutely vital.

Coordination key

The timing of the delivery of the first workshop was very important, too early and the SFF program would be duplicating some of the immediate responses or emergency recovery phase and too late we would lose the impetus of the program. The first workshop was delivered in April 2010 – 14 months after the bushfire event, which we believe was good timing.

Some of the services were starting to withdraw, the participants had told us that they couldn't bear any more 'mental health' help they were fine and didn't need it and they had also remembered the event at the first anniversary. Rebuilding and development of the community had also begun.

Flexibility key

After assessing the vulnerability of the group, the SFF team made some changes to the program:

- adapted the program
 - included after effects of bushfire impacts on health – i.e. respiratory
 - removed some graphic images throughout the presentations
- changed the intervention
 - from twelve monthly interventions to six monthly intervals
- creative and innovative locations / catering
 - health assessments in hotel rooms
 - program was held in a construction hut
- involved the community
 - team stayed locally
 - local caterers.

Throughout the entire program we remained flexible and adaptable – we were able to provide alternative solutions to any issues presented to us and this was a key formula to the program success

Some things aren't flexible – originally we were asked to just deliver on mental health; however the SFF program focuses on health as whole rather than specific areas which are often addressed by local and other services. Note that being a general program helped with recruitment, but we did end up dealing with lots of mental health issues but when we see the health outcomes they are positive in so many other aspects.

Professional key

We sent a senior team to the program with very experienced health professionals and a facilitator, experienced in engaging with farming communities.

The team had been well-briefed on what had been happening in Kinglake in terms of health service delivery, the literature had been reviewed and put into context of what the team was going to address. Considerable time had also been spent in engaging with the local community.

Learning key

The learning from delivering this program reinforced the four earlier keys of intersectoral collaboration, coordination, flexibility and professionalism– with a particular emphasis on flexibility. It is also a timely reminder that we are dealing with people, people in crisis and they each have their own compelling story that needs to be heard by us at the SFF programs. The delivery of this program further developed the evidence base on working with farming families dealing with natural disasters. The program had been successful in drought recovery, flood recovery and it can now demonstrate the evidence that it is a successful program as part of bushfire recovery. It is also important to recognise that the lessons we learn from this program are included in future planning and development of natural disaster recovery programs.

Outcomes

The participants in the program had positive changes in health behaviours and conditions:

- 63.6% of participants reduced BMI
- 72% reduced their blood pressure
- 21.8% decline in number of participants drinking at a rate that falls in the short term high risk drinking category at least monthly
- from workshop 1 to workshop 2 both areas of moderate to severe levels of depression and anxiety have decreased – with depression decreasing by 15.4%.

The participants are taking what they have learnt at these workshops and are not only applying it themselves, but are sharing it with community members who were not able to attend, such as friends, families and employees. The importance of healthy eating and exercise appears to be the most commonly passed on information, usually to family members. The manuals are important in this process as it means correct information can be passed along and participants can easily access health information relevant to their friends, family and most importantly, themselves.

Occupational health and safety is a recurring theme throughout the focus group responses, with a lot of important changes being instigated because of information given at the workshop such as purchase of protective equipment for spraying, carrying a mobile phone whilst working remotely and signage on the property in areas of danger. The participants have also self-reported that their three most important learning's related to:

- greater awareness of health
- changes in attitude
- improving mental health.

The farmers phoenix; the SFF team may not have left Kinglake with a beautiful song but we left with amazing stories of resilience and recovery. We also, have the evidence the participants from the program are emerging with improved health behaviours and conditions.

Post note: the farmer's phoenix

A phoenix is a mythical bird that is a fire spirit with a colourful plumage and a colourful tail. It has a 500 to 1000 year life-cycle, near the end of which it builds itself a nest of twigs that then ignites; both nest and bird burn fiercely and are reduced to ashes, from which a new, young phoenix or phoenix egg arises, reborn anew to live again. The new phoenix is destined to live as long as its old self. It is said that the bird's cry is that of a beautiful song.

References

- EMA Disasters Database, Emergency management Australia, www.ema.gov.au, accessed February. 2011
- Brumby S, Wilson B, Willder S. Living longer on the land –sustainable farm families in broadacre agriculture. Canberra, ACT: Rural Industries Research Development Corporation, 2008; 6.