

Improving the resilience of Australia's rural communities

a proposal by Catholic Social Services Australia



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 Catholic Social
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Rural Community Resilience Programme

Current issues

Individuals and families in Australia's rural and remote communities experience unique ongoing challenges such as geographic isolation, economic stress, lack of access to services and the impacts of natural disasters. These are challenges that most people living in cities just don't face.

In addition to the day to day stressors of living in more isolated areas, people and families in rural and remote communities, especially men, are at increased risk of suicide.¹

Unfortunately people living in rural and remote areas have less access to specialised mental health services relative to people living in major cities. This lack of access to care is reflected in Medicare data. Medicare expenditure on mental health services in major cities is 6-7 times greater (74 per cent) per person than that spent on people living in regional and very remote areas (11 per cent).²

This low rate of accessing services arises not only because there are fewer mental health services in these areas, but people in small communities are often reluctant to seek help through identified counselling and health services.

There are therefore unique challenges in providing mental health, counselling and support services to the communities who most need them. Fortunately, we know what works.

In light of the drought, and responding to the call of local communities, the Federal Government in 2014 initiated what has become a highly successful community mental health and family and relationship counselling services programme in drought affected communities.

This programme has begun to break through the social and cultural barriers to people in need of support, linking people in to the services they need, supporting families who are trying to cope in the face of an ever worsening drought, and building more resilient and cohesive communities. Unfortunately the 2016 Federal Budget did not provide funding to extend this programme beyond 30 June 2016.



Our proposal

In light of the initial successes that have been made so far, Catholic Social Services Australia (CSSA) proposes that the community mental health and family and relationship counselling services programme be continued for a further 3-5 years.

Traditional one on one mental health counselling services cannot replace a community mental health model that develops community support networks and builds resilience, enabling rural communities to withstand the challenges of life in rural and remote settings. This delivery model has a proven record of supporting the unique needs, culture and circumstances of individuals and families living in rural and remote communities. Through outreach to individuals, families and communities, this programme takes support to people, offering counselling, community development initiatives, and referrals which are personal, readily available and accessible to people doing it tough in regional Australia. The engagements began as social events bringing communities together for their wellbeing and developed into education programmes and therapeutic counselling to benefit the diversity of the rural communities.

The **Rural Community Resilience Programme** represents a more sustainable model than the short-term focus of the previous model that was funded on an annual basis only. The initial funding was discontinued in the 2016 Federal Budget leaving rural and remote communities facing an ever-worsening drought without the support services they had come to trust and rely on.

CSSA members work extensively with communities in 52 of the 69 drought affected local government areas across Australia. Each day, we see the need experienced by individuals and families for continuing support services, and community development programmes that will sustain people over the longer term. We therefore call on the Federal Government to commit to a sustainable solution to support people in need.

The value of community mental health, and family and relationship counselling services

While we have the data to demonstrate the effectiveness of this model of service delivery, hearing the voices of those who have been assisted by the services already provided is evidence for the relationship of trust and change that has been created in people's lives.

These services are unique as they provide an outreach service and help build resilience in individuals and families:

“Isolation and the effects of financial pressure due to drought continue to impact families on properties and in the remote communities. Having services that are able to provide outreach support to these individuals and families makes a significant difference in their lives – the focus on building resilience, connections and strength to support remote families and individuals to remain in these locations and grow and thrive, rather than simply survive through struggle and hardship. The majority of those people engaged are isolated and live an hour or up to 4 hours from these services.”

Centacare Wilcannia Forbes, working with communities in Bourke and Brewarrina LGAs

“It takes time and a lot of effort to create credibility and sound relationships with the community, the farming community in particular. To pull out of these communities after building trust and credibility would be unfortunate. The programme has assisted in coordinating a lot of services and facilitated a consolidated service delivery. If the programme is pulled out, this will revert back to disparate and sporadic services to these communities.”

Centacare Bathurst, working with communities in Gilgandra and Warrumbungle LGAs

The types of services are tailored to the communities:

“The support services included hosting and contributing to recreational and social events where people could relax and temporarily be distracted from thinking about the drought; outreach such as going to people and talking face-to-face and supporting them in spaces in which they feel comfortable, safe and connected, and following up; and Informal talking – ‘chatting’ to people in a way that they don’t feel they are ‘asking’ for help or are receiving ‘counselling’.”

CentacareCQ working with communities in Barcaldine, Blackall/Tambo, Barcoo, Longreach, Issac (part), Central Highlands (part) LGAs)

The traditional counselling model is not effective in these communities:

“This service found that initially calling support services ‘counselling’ really put people off as locals do not see their concerns as needing ‘counselling’ or wanting to be seen as not coping to the extent that they need ‘counselling’.”

CentacareCQ working with communities in Barcaldine, Blackall/Tambo, Barcoo, Longreach, Issac (part), Central Highlands (part) LGAs)

Our solution

The **Rural Community Resilience Programme** proposed by CSSA offers a similar model of service to that provided under the community mental health and family and relationship counselling services but on a longer term basis. We believe that, in the longer term, this programme could be extended to other rural communities experiencing economic or social stress. The **Rural Community Resilience Programme** will provide an innovative opportunity to engage communities as a whole by working with partners across all layers of government, business, community groups, and organisations that serve and operate within the rural community.

People in need of support should be able to have long term certainty. Support services that rely on a year to year basis for their funding struggle to build the trust and reliability with communities that is needed to be effective.

For this reason we propose a commitment to a minimum of three years, and preferably a five year period of funding to enable communities to develop resilience over the long term.

For the same number of Local Government Areas funded in 2015-16, this proposal would cost \$60M over three years. Allocated across the current 69 drought affected Local Governments Areas this would be a modest investment of approximately \$290 000/year per area.

Funding mental health services is a sustainable social and economic investment. A PWC 2014 report showed that organisations can on average, expect a positive return on investment in mental health of 2.3. That is, for every dollar spent on successfully implementing an appropriate action there is, on average, \$2.30 in benefit. Notwithstanding the different contexts, an investment of \$60M in this programme has the potential to return \$138M in benefits to the community.

1 ABS 2008 <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4102.0Main+Features30Mar+2011>

2 Mental Health in Rural and Remote Australia – NRHA Fact Sheet <http://www.ruralhealth.org.au/factsheets/thumbs>

CASE STUDY

A family was experiencing issues of financial pressure due to low rainfall, unpredictable weather patterns and planning for the diversification of their farming business.

Counselling with this family in their home enabled the case worker to engage with family members in a way which may not have been possible in any other setting. Face to face outreach counselling created a climate of trust and respect, both of which were necessary to effect positive change in the life of this family.

The culture of agriculture and country life was evident in meeting with this family in their own home. Whilst on home visits the case worker had the opportunity to meet and chat with eight other people (all involved in agriculture) in an informal setting. This facilitated opportunities to introduce the drought assistance programmes, offer support and referrals to other relevant services such as financial counselling, and provide this from a non-invasive and respectful position.

The high rates of depression and suicide in rural communities is evidence of the need for counselling support in these areas. It takes time to build trust and therefore programmes and case workers need continuing engagement to have any real long term impact.

Centacare Catholic Family Services, Adelaide working with communities in Adelaide Hills, Alexandrina, Mount Barker and The Coorong LGAs

About Catholic Social Services Australia

Catholic Social Services Australia is a national network representing 56 members that provide direct support to hundreds of thousands of people in need each year on behalf of the Catholic Church. Our agencies provide a diverse range of support from assisting women and children escaping family violence, housing and homelessness support, to mental health and disability services. Our agencies work in partnership with Indigenous people, and offer support and services to people seeking asylum and those who are refugees.

Catholic Social Services Australia members deliver community based mental health services and family and relationship counselling services to communities in 52 Local Government areas in NSW, Qld, Vic, WA, SA and Tasmania.

CSSA NETWORK

Our network is extensive

The CSSA network is comprised of **56 organisations** delivering services from **more than 650 sites** across Australia



CLIENTS

We help hundreds of thousands of people

Our social services network directly assists close to **450,000 people** each year

