

Supporting the community after bushfires

The Service provides: support for children, families and communities across a regional setting. Counselling, case work and case management, group programs.

Disasters in the region: drought, fire, floods, COVID. The major impact has been from 2020 Black Summer Bushfires.

Responding

The Service never limits the way it provides support to families in the community. It is defined by its responsiveness to needs, and that need may be recovering from disaster. Family support is one of those streams of services that can have slightly broader focused outcomes, because the Service is always seeking to support families to deal with whatever challenges they are facing, and across a wide range of risk factors and vulnerability. The Service interprets that very widely and takes that to mean that they can support families with whatever that adversity is.

After the 2020 bushfires, and prior to that with the drought, local residents knew they could get that immediate responsive support and they came to the Service for all manner of support, because it's got a very deep footprint across the region, and the staff are based in the small communities. While recovery centres were set up in the area with the Salvos and Red Cross and the Council, the Service's staff were in their offices, responding to people's concerns, and needs - anything from needing support with finding out information or getting supplies out or just to allay concerns. The Service also applied a strong outreach model, always going to where families are rather than waiting for them to come to seek help in the office.

The Service advocated for ground-up recovery rather than it being imposed on the community. The Manager notes that they had to "be fairly forceful, to actually get your voice heard in that space. We really had to elbow our way in." This was a cause for frustration as the community turned to the Service as they are known and trusted and have been in the area for many years and therefore seemed the obvious choice to provide disaster recovery support.

The Service was finally able to finalise their own recovery support contract supplemented with other small contracts, such as Primary Health Network funding. As the Service is part of the community and aware of where communities are at in their recovery, it is able to tailor recovery support to communities, delivering a very active program of recovery such as community preparedness plans, women's and men's social events and community events.

Local services' *secondary consultation* role

When the local council recruited a recovery coordinator, the Service started to work very closely with her. The Service was also a very active and dynamic player in the Health & Wellbeing

Recovery Subcommittee meetings when they started. The Service was looked to in those meetings as the go to organisation to reflect what the community was thinking and feeling. The Service was a conduit into the community because they already have that very strong relationship community champions that they've worked with for many years in small local communities.

This local connection became even more important as, in early 2020, bigger, external “stranger organisations”, who had no footprint in our area, received large amounts of funding to come into the area to provide recovery support. The Manager highlights that these organisations “had no idea how to do it, who to do it with, where to get an office, how to get staff - any of those things.”

The Service played a very active facilitation role in guiding external organisations so that the community could get the services that they needed. For example, a large service was given a very big contract to do bushfire trauma counselling but struggled to find staff and a place to deliver the service from. The Service supported them to find a worker, gave them a space in their office, and assisted them to establish connections.

The Manager notes that this ‘secondary consultation’ for external recovery services - giving them information, opening doors for them, talking about needs - is important but not recognised or funded, despite the additional burden on local services.

A state government agency was commissioned to provide the Recovery Support Service (RSS). Again, the Service facilitated connections with the community which was again unfunded as the RSS was not able subcontract services. The Service, therefore, had to draw on their business-as-usual funding. The Manager commented that the Service was still able to support families but supporting other agencies came with the risk of not being able to deliver on their core funding as well as they normally would. She estimates that about 80% of her time in that in 2020 was spent on advocacy for the needs of the community, facilitation and secondary consultation for other services coming in to deliver recovery and wellbeing support.

Funding and service development

After the fires, the Service was able to provide more intensive support to the core target group of families that they were funded for. When they received additional funding from a different source they were able to provide intensive case management work with individuals like adults, for example, who didn't have a dependent family or dependent children.

The Service found Bushfire Community Recovery & Resilience Fund (BCRRF) funding useful for organisational strengthening to ensure that the community knew that they were the go-to organisation for disaster, recovery, and resilience. The consultancy part of the funding was used to project manage a merger with another organisation to strengthen their position in the community. The Service's leadership role through the fires, raised its profile because it did so much advocacy for the needs of the community and the funding created the opportunity to progress the merger.

The Service also received surge funding from Department of Families & Justice (DCJ) through the Social Sector Support Fund to support COVID recovery. However, the Manager notes, in a regional location, it is impossible to source staff for a short period (such as six months for this funding), especially in such a specialised industry. She suggests it would be more valuable if core funding was commensurate with the breadth and the diversity of what the Service does and what it has the ability to do. The Manager notes that building coping skills and broader resilience in the people in communities are core purposes as an organisation.

Local services this one understand community needs and are trusted by the community. They can scale up depending on need as they work across that spectrum of vulnerability and intensity. Staff at the Service are able to gauge the broader impacts that result from a disaster and provide support to build resilience over the long-term. For example, there are escalating mental health issues, and as a result, there have been suicides in one of the small rural areas. The Service has been able to work with families long-term.

The Service's core funding has not changed, and all of the bushfire funding, about 30%, is time-limited. The Service is now considering how they continue the momentum their support has created. They are having conversation with funders, such as the Primary Health Network, who have the ability to direct commission.

Planning & preparedness

The Service created an overarching community recovery and resilience plan, which mapped their ongoing work and reflected the ongoing recovery needs and wellbeing support with particular target groups and small communities. It also mapped out what they wanted to do in terms of preparing and planning and co-designing with fifteen small local areas in the region.

The work with communities, in partnership with the Council, was funded through several lots of funding that was 'cobbled together'. Depending on the readiness of each community, they would develop their own action plan, or preparedness plan. They mapped all of the local existing assets and strengths in the small local communities as well as needs and skill, gaps or infrastructure. The use of a SIM table at some of these workshops helped to see the community mapped in 3D and understand risks better.

The Service also work with individual clients and with families to develop preparedness plans at the micro level. Developing an emergency preparedness plan with clients became part of core case management, so that coming into the summer, every family and every child and every individual were clear on their role in the event of another disaster.

The Service and Council have also linked with the Regional Joint Organisation (RJO) as they are responsible, and have resources for, emergency preparedness at the macro, regional level. In this

way, the Service is linking smaller, local initiatives back into government emergency management structures.

The funding for the community preparedness work is coming to an end so the Service has had to apply for other funding in order to continue.

Integrating disaster recovery & preparedness into service delivery

The recovery and preparedness work that the Service has undertaken is important as it highlights the breadth of different activities and services that they provide as an organisation, working with groups such as schools and preschools and children with a disability and their families. For example, the Stormbirds program is being delivered in schools as some of the younger children who didn't participate in the program in 2020/21 still have some fears post-fires.

The Service also developed programs outside traditional counselling therapies. It partnered with an organisation who provided hay and had a strong profile in the community to deliver some equine assisted learning, supporting bushfire-affected families using a different modality. This was very beneficial for those who were overwhelmed with the stress and trauma from the fires. The Service is still providing this support alongside traditional 'talking therapies', according to the client's preferences.

The Service also received some directly commissioned funding from the Primary Health Network (PHN) about a year after the fires. This was a great recognition of the value of the disaster recovery work the Service was doing. With this funding it was able to deliver work based on consultation with local stakeholders and a needs analysis which pointed to the wellbeing of children under twelve and the need for non-clinical mental health work. The Service was able to hire a therapeutically-trained staff member an additional three days a week to work in schools and with the families. The Service was also able to offer rural men's wellbeing activities and engagement.

Wellbeing

About a third to a half of the Service's staff lived in places where there were active fire fronts and were very much in it and responding on the ground to their own immediate concerns. The Manager notes that in a regional area "you're always known, and your work capacity and your personal cross over. And so, people turn to us."

The Service has a very strong model of internal supervision. The team all access internal supervision regularly with a very experienced practitioner. This is essential to manage the stress that the staff have experienced during this time. Staff can also access external supervision, if necessary. The Service has offered staff various types of team wellbeing support such as in-house Pilates.

The Manager emphasises that regular check-ins are critical. Also, being flexible to meet the needs created by the last couple of years, such as accommodating workers with working from home or flexible working arrangements.

What does disaster recovery done well look like?

Engaging in community consultation should be written into contracts. Consultation should be meaningful, not just 'tick-a-box'. Receipt of funding should be based on productive consultation undertaken. The Manager suggests that secondary consultation needs to be resourced, such as a fee-for service model. She also noted that in international development contexts large organisations work in partnership with the local NGOs on the ground, resourcing them and building their capacity through the partnership. The same approach in the Australian context would work well.

The Manager questions why there was no asset mapping process that took place initially to look first at what the assets on the ground were and who could have done the work as well as identifying who is in the role of secondary consultant. The process of asset mapping could identify particular skills, accreditation or experience that need to be established in order to be recognized as the provider of disaster recovery services. It would also inform holistic, wrap-around service delivery, with a range of different intensities of services depending on the readiness of the local area.