The Psycho-Social Impacts of Equine Influenza (EI) Outbreak in South-East Queensland: Lesson Learnt from Sunshine Coast and Cooloola Community Recovery Partnerships.

Neil Mellor
Lecturer in Counselling & Social Work
Faculty of Arts and Social Sciences
University of Sunshine Coast
Aims

• Deconstruct the social-psychological impacts of a bio-security emergency on a regional community.
• Reflect on issues of engagement and partnership.
• Identify key responses for improvement of community recovery service and partnership responses.
• Discuss the outcome of USC involvement in supporting partnerships.
Methodology

• This paper used a case study design (Yin 1989).
• Data collection period from August 2007 until January 2008.
• Data source non-government community support organisation’s service contact and referral data, individual worker case notes and field reports.
Background

- EI spread rapidly to South East Queensland from New South Wales.
- On 26th August 2007 and embargo on the transport of horses and strict quarantine measures introduced.
- The Federal and Queensland State Governments declared that EI was a disaster and activated emergency management plans (AUSVETPLAN) and the Queensland State Emergency Management Plan (EMP).
Queensland the Sunshine State
Disaster Response

• Resulted in the activation of Queensland State Community Recovery Plan (CRP) and partnerships with government and non-government agencies.
• Partnership was mobilized to provide a range of financial, veterinary and psycho-social support services.
• Involved setting up “One Stop Shops” and smaller “Outreach Centres” with Dept of Primary Industries & Fishing, Dept of Communities, Lifeline and Red Cross.
Community Recovery

- Community recovery provides for a wide range of psycho-social, financial and material support to community members affected by (natural) disasters.
The Area

• Greater Sunshine Coast includes the Sunshine Coast (270,000 people) and hinterland extending from Shires of Caboolture in the South to Cooloola in the North, with a combined population of approximately 475,000 people.

• Contains diverse population centres with a mix of properties including high rise apartments, housing estates and small and medium landholdings in rural and coastal areas.

• Features of the region include variability of socio-economic status, the lack of public transport between rural townships and the larger population centres.
Case Study

- Coordination
- Location of Services delivery
- Staffing
- Communications
- Client Feedback
- Discussion
- Recommendations
Coordination

- The structure central State Disaster Management Group (SDMG) and State Disaster Coordination Group (SDCG) plus a State Community Recovery Committee (SCRC), which had representatives of government and NGO agencies.

- This sequentially feeds down to the District Disaster Management Group (DDMG) and the District Disaster Recovery Committees (DDRC) and Local Disaster Management Committees (LDMC).
Reality

• In practice the regional Department of Communities was instructed to enact the directives with NGO partners, which effectively made the DDMG at best an information exchange rather than decision making forum.

• Facilities were inadequate for the task at hand e.g. the lack of telephone and computer capability, lack of access to public transport, co-location with other sites providing non related services and questionable public location issues such as the use of the recreational reserve at Landsborough which lacked privacy.
Staffing

- There was a specific initial request at the State Government level for financial counsellors and psychologists and this had resource and business continuity implications for Lifeline Sunshine Coast given that there was only one EFT financial counsellor and only one practising counselling psychologist in the regional organisation at that time.

- In addition both members of the team were engaged in service provision for existing government-funded programs of Lifeline and in the case of financial counselling there was a waiting list of over 3 weeks.
Staffing

- Problems for Lifeline and other partners centred on the urgency associated with the rapid procurement and deployment of suitably-qualified staff.
- Lifeline Greater Sunshine Coast had a number of staff who were trained in both human service delivery and as members of community recovery teams, having gained experience with cyclone and flood relief.
- Additional funds were not provided for this at the time for staff, however partners were reimbursed for direct service delivery sometime months after staff were deployed.
Service Demand

- It became apparent early on after the establishment of the outreach centres in September 2007 that the level of servicing was going to be variable in respect to the client demand across centres and for the times of peak demand at respective centres.
Issues with Service Delivery

• Out of the 639 contacts that were made at the outreach centres, Lifeline staff on 2 clients followed up referrals.

• During psychological first aid training, community recovery support workers expressed concern that many distressed clients were not necessarily offered either personal or financial counselling or even referred to the on-site support workers for ‘a chat’.

• Data collected was of little use (see Table 1).
### Total Contacts Sunshine Coast and Cooloola Districts:
Friday 24 August 2007 - Thursday 30 Jan 2008

#### Referrals

<table>
<thead>
<tr>
<th>Location</th>
<th>TOTAL CONTACTS</th>
<th>Information Only</th>
<th>DPI&amp;F</th>
<th>QRAA</th>
<th>DET</th>
<th>Lifeline (financial counselling)</th>
<th>Lifeline (personal counselling)</th>
<th>St Vincent de Paul</th>
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<tr>
<td>Caboolture</td>
<td>113</td>
<td>46</td>
<td>9</td>
<td>4</td>
<td>0</td>
<td>2</td>
<td>5</td>
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<tr>
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<td>61</td>
<td>33</td>
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<td>35</td>
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<td>Gympie</td>
<td>205</td>
<td>58</td>
<td>56</td>
<td>33</td>
<td>2</td>
<td>23</td>
<td>35</td>
<td>32</td>
</tr>
<tr>
<td>Nambour</td>
<td>41</td>
<td>18</td>
<td>0</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>639</strong></td>
<td><strong>259</strong></td>
<td><strong>126</strong></td>
<td><strong>75</strong></td>
<td><strong>2</strong></td>
<td><strong>77</strong></td>
<td><strong>76</strong></td>
<td><strong>102</strong></td>
</tr>
</tbody>
</table>

Communications

• Several issues began to surface over the 5 months of the EI recovery process.
Communication Issues

• No established community recovery reporting format
• Without formal client satisfaction, follow up and feedback measures it remains unknown how well the outreach centre staff fulfilled their roles.
• Qualitative issues reported at the district level were neither acknowledged nor apparently acted on at the central level e.g. a major issue identified early on by clients was the lack of awareness of the existence of the outreach centres.
Effectiveness of Promotion/Education

- Other efforts to educate those associated with the horse industry such as the Queensland Racing Association forums and education sessions did not necessarily engage the disparate and marginalised workforce which supported the industry.
Branding and Promotion

- Staff reported that poor advertising and branding of the outreach centre in regional and state newspapers and on radio stations contributed to a lack of knowledge about the centres and the emergency support available.

- Lack of awareness of the outreach centres was perceived as resulting in a decreased uptake of the services offered.

- Staff responded to this frustration by contacting radio stations and local information services directly and encouraged clients to spread the word.
Reports on Client Feedback

• Woman from .... works for ..., has 15 horses & 6 dogs. Usually agists them on neighbouring properties for free, but unable to since August till now. Increased feed costs caused financial hardship and disharmony at home. Feeling guilty and upset about not being able to provide Christmas presents or holidays for her boys, 11 and 14. Can’t get away from property because of commitment to animals.
Male

- Man, aged pensioner, long time local from ... wanted ‘help with feeding his horses’. Daughter’s horses have got EI (not in QLD). Complained about race horses allowed to move when mustering isn’t allowed. Found out by Word Of Mouth. When asked if he wanted any financial counselling, he said he has two ambitions in life: to die before he needed advice and before he couldn’t afford to feed himself any longer.
Female

- Married woman, ....was working ..., business and home both affected by dam & highway bypass, now unemployed. Flooded in August. Her 2 showhorses died of ‘toxic shock’ after a visit from vet earlier this year. She bought 2 yearlings for her birthday present on Aug 22, but couldn’t collect them. Horses have only just been delivered along with bill for $2,500 for feeding them. Feeling too stressed to work but worried about the financial strain on her husband. Disclosed she had suicidal thoughts.
Male

- Man, 30’s, from ..., owns ...produce store, huge overheads usually takes $600,000 per month, down to $120,000. 4 trucks & 6 employees, much higher phone bills now as they need to keep checking with individual clients. Because they can’t enter premises, have to meet clients at gate and transfer feed deliveries into utes, etc. Very distressed about the enormity of his situation and how long EI crisis might go on.
Discussion

- There is an increasing body of literature related to the psycho-social implications of individuals and social group responses to particular situations, including natural disasters (Freedy, Shaw, Jarrell & Masters 1992).

- In relation to EI, the bulk of the literature is veterinary, livestock, economic and risk management issues associated with the prevention, management and mitigation factors of the disease (Callinan 2008).

- The most substantive and comprehensive research available on the psycho-social impact on EI biosecurity outbreak in Australia is the work undertaken by Taylor, Agho, Stevens and Raphael, (2008)
Outcomes

- The general outcomes from the study found significant indicators of social and emotional distress across all zones and particularly in Amber and Red buffer and quarantine zones in Queensland. These zones also indicated high/very high levels of psychological distress (Taylor, Agho et al. 2008).
- These findings support the testimonies that emerged from the community recovery workers’ reports which indicated that there were many clients exhibiting high levels of distress associated with lockdowns in the Red Zone that covered the Sunshine Coast and Cooloola regions.
Implications for Partnerships

• Whether participation in a joint partnership associated with service delivery is meaningful or tokenistic, needs to be unpacked in the context of each collaborative arrangement.

• Compounding issues associated with the development of effective partnerships between organisations are the tensions associated with the overlay of bureaucratic structures associated with central government models of service delivery.
Recommendations

• Location of outreach centres prior to disasters occurring.

• Services should have local communications budgets or support to facilitate marketing, promotion and information provision.

• The training of service delivery teams should be improved to facilitate role clarification and effective inter-disciplinary team working arrangements in outreach centres.
Recommendations (cont.)

- Service provision in community recovery centres should be developed to include case management systems.

- Emergency staffing capacity and payment for organisations which are a party to the MoU for community recovery activities.

- Routine public health style screening should be undertaken to identify high risk populations and to inform future research.
Recommendations (cont.)

• Reporting systems at all levels need to be reviewed to ensure a vertical and hierarchical communication loop that facilitates responsiveness to the needs of disaster victims and to support community recovery service delivery.

• State, district and local partnership arrangements should be reviewed using a mechanism such as the VicHealth Partnership Analysis Tool (2005) to enhance the development of future collaborations.
Implications for the University

• In this case the critical analysis accepted by “lead” partners and acted on.
• Advocacy for disempowered stakeholders – partners, clients.
• Broker partnership facilitation.
• Research effectiveness of interventions.
• Practice base evidence research.
References