The Central West Queensland Mental Health

Project

ore Than Normal rucing families experiencing the nerational impacts of traumatic stress mind | Retame | Rebuild | Re-empower

A community-directed, family-focused innovative response to domestic & family violence, suicide and mental health in the Australian Outback.

"Getting the Outback Back In Front"

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Executive Summary



This report is intended to form the basis of a funding application that meets the strategic requirements for the Queensland Government Mental Health Commission's **Stronger**Community Mental Health and Wellbeing Program 2017-18.



From May 29th to June 2nd 2017 the Central Western Queensland Region hosted its inaugural summit for domestic and family violence, suicide and mental illness in Longreach. Across these days several residents of the region and local Non-Government Organisations (NGOs) and Government Agencies (GAs) attended and had representatives provide presentations on their perspectives of the issues faced by local families and the greater Central Western Queensland community.

On June 2nd 2017 a community workshop was facilitated by Dr Ken O'Brien in the Longreach Regional Council Civic Centre to hear the community respond to three critical answers to the significant issues of domestic and family violence, suicide and mental illness in the region. These questions are:

- 1. What is/has been working?
- 2. What does not/has not worked?
- 3. What do we need?

This report presents the analysis of data gathered at this workshop. It will serve to inform policy-developers, funding managers, business and philanthropic enterprises of the true lived-experience of these issues and the way they impact on families and individuals in the Central Western Queensland Region.

Strategic Positioning

With the intended roll-out of the National Disability Insurance Scheme (NDIS) this project is ideally timed to gather an indication of the response of the Central Western Queensland Region towards community support services.

While few contributions to the data were from families directly experiencing suicide, domestic and family violence and mental illness it provides an initial snapshot of the fundamental issues that will impact on the effectiveness of the roll-out in the Region. As the NDIS will empower users with the option of choosing their service provider, it is imperative for NGOs to optimise the quality of their services and (critically) of their relationships with users. The data illuminates the barriers to effective and efficient roll-out, indicating areas for growth and opportunity for the Central Western Queensland Regional Council, local NGOs and the NDIS.

The findings of this report support those of several existing National, State and Local Government reports and recommendations.

Data Collection

Data was collected from a recorded audio of the workshop and from notes made on sheets of butchers' paper that responded to the three research questions:

Data Analysis

Data was analysed using an Ethnomethodological approach of Grounded Theory and Constant Comparative Method. This was chosen to allow common themes in the data to emerge. The themes are presented in the very terms and language used by the participants. As such the findings remain faithful to the lived experiences of the people and families of the Central Western Queensland Region rather than adhere to a pre-established agenda.

Findings

The significant findings of this workshop are:

- 1. Central Western Queensland residents are reluctant to engage with service providers and their staff who live long distances away as they do not understand the needs of families in the Central Western Queensland Region. This is based on an extensive history of irrelevant, inappropriate or meaningless policies and programs that have affected the attitudes of families and people in the Central Western Queensland Region.
- 2. Services must respond to, and be informed directly by the lived experience.
- 3. NGOs are struggling to implement the programs and services due to cultural irrelevance.
- 4. There is an expressed need for specialized services to be located in the Region.
- 5. There is a need for more collaborative events to be run for and by the community.
- 6. Effective work is done by the community, for the community, because they know what they need.
- NGOs need to communicate with each other.

These findings should form the basis of further funding applications and work done for families in the Central Western Queensland Region that struggle with suicide, domestic and family violence and mental health issues.

Recommendations

The recommendations derived from the data give a clear description of a community in crisis through neglect and inappropriate strategies that are ignorant of their issues and needs. The community has thus shut-down and expresses reluctance to engage with service providers, government agencies and officials who are not from the region. This serves as a form of institutionalized and systematic abuse and neglect that is resonating in the participants' comments at the workshop and throughout the four-day convention.

Executive Summary

The future of mental health in the Central Western Queensland Region is an ongoing investment in optimizing the capacities of the entire region. This project is anticipated to be one of many that follows the same intent and strategy.

Statistics

Geographic Profile

The Central West Region covers 396 650.2 km² in the remote areas west of Rockhampton in Queensland, Australia and supports around 12,400 residents with a population of transient tourists that is difficult to find exact details on.

It comprises 12 statistical local areas that all have a classification of "RA4-Very Remote" (using the Australian Bureau of Statistics' Socio-Economic Indexes for Areas) and 7 local government areas (Australian Bureau of Statistics, 2011).



Population Profile

In 2011 the population of the Central West Queensland Region was roughly 12,391 which was around 0.3% of the total population of Queensland. The estimated Aboriginal and Torres Strait Islander population count was roughly 1000 people, just over 8% of the Region's total population and more than twice the average of 3.7% of the total population of Queensland.

The Region was also classed as socio-economically disadvantaged in relation to other regions in Queensland and Australia. Indeed, 5 of the 12 areas were considered the most disadvantaged in the country.

The projected is a decline in population from 2011- 2026 across the Region, with some communities likely to experience a small growth, but a decline overall. The lack of critical services may be one contributing factor (Central West Hospital and Health Service, 2014).

Tables 1 and 2 illustrate the numbers of residents in the CWQR by age group and locality. They demonstrate that there are disparities between Indigenous and Non-Indigenous residents in all the areas. It was more common to find 25-64yr old Non-Indigenous residents in the Region, while it was more common to find Indigenous young people (0-14yrs) and young adults (25-44yrs). It was less common to find Indigenous people aged 15-24yrs and 65yrs and over. Therefore the supports and services need to cater to these statistics and account for these variances. Fundamentally, it means that appropriate and meaningful community responses must target these vulnerable groups where most need exists. For example, it would be utterly meaningless to provide a service

targeted at young Indigenous adults aged 25-44 in Isisford while it could benefit around ¼ of the same population age-group of Non-Indigenous residents.

Table #1: Estimated population of the Central West Queensland Region by age group and local area.

SLA	Age Group					Total
	0-14	15-24	25-44	45-64	65+	All ages
Aramac	147	71	189	184	99	690
Barcaldine	327	200	371	445	268	1,611
Jericho	222	104	289	241	129	985
Barcoo	62	45	98	109	51	365
Blackall	303	178	396	458	290	1,625
Tambo	150	53	167	189	70	629
Boulia	115	77	159	112	33	496
Diamondtina	39	61	74	98	22	294
Infracombe	92	34	122	93	18	359
Isisford	37	19	58	79	29	222
Longreach	914	464	1,051	874	424	3,727
Winton	269	132	331	424	232	1,388
Central West	2,677	1,438	3,305	3,306	1,665	12,391
All Queensland	887,487	625,429	1,264,341	1,119,056	577,785	4,474,098
% of all Queensland	0.3	0.2	0.3	0.3	0.3	0.3

Source: (Central West Hospital and Health Service, 2014)

Table #2: Estimated Aboriginal and Torres Strait Islander population of the Central West Queensland Region by age group and area.

SLA	Age Group					Total
	0-14	15-24	25-44	45-64	65+	All ages
Aramac	21	4	23	0	4	52
Barcaldine	49	33	28	20	6	136
Jericho	7	3	3	0	0	13
Barcoo	6	6	9	5	3	29
Blackall	14	14	18	5	6	57
Tambo	16	8	12	7	3	46
Boulia	73	21	67	18	5	194
Diamondtina	8	14	11	32	4	69
Infracombe	9	2	5	0	4	20
Isisford	10	2	0	0	2	14
Longreach	112	44	64	27	0	247

Winton	42	13	32	27	8	122
Central West	367	164	272	151	45	999
All Queensland	2,667	1,438	3,305	3,306	1,165	12,391
% of all Queensland	13.7	11.4	8.2	4.6	2.7	8.1

Source: (Central West Hospital and Health Service, 2014)

Industry Profile

The Region boasts a multi-million dollar agriculture industry that includes beef, fruit, grain and cotton with some mutton and emerging goat livestock industries that contributes almost ¼ of Queensland's \$13 Billion primary industry sector (Business and Skilled Migration Queensland, 2016). In 2011 the Region contributed \$687 Million to the nominal Gross Regional Product (Regional Development Australia Fitzroy and Central West Inc, 2014).

Figure #1 illustrates the number of cattle per Natural Resource Management Region. As can be seen the Central West Region falls within the Desert Channels Region and contributed to producing over 1.4 million head of cattle to the Australian meat and livestock statistics. This equates to 4.16% of the national total and 10.1% of the Queensland total.

Figure #1: Number of cattle per Natural Resource Management Region.

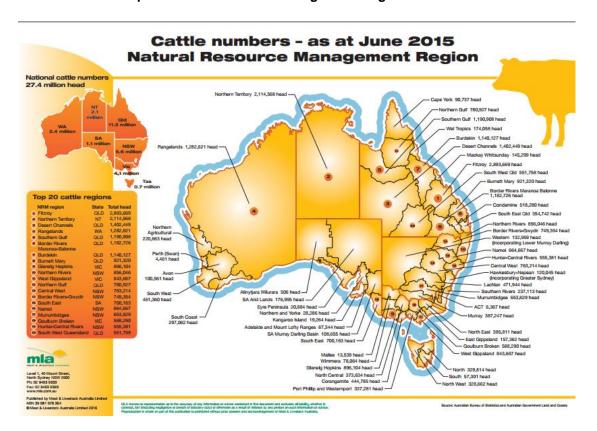


Figure #2 illustrates the number of sheep per Natural Resource Management Region. As can be seen the Central West Region falls within the Desert Channels Region and contributed to producing over 661,473 head of sheep to the Australian meat and livestock statistics. This equates to only 0.93% of the national total and 3% of the Queensland total.

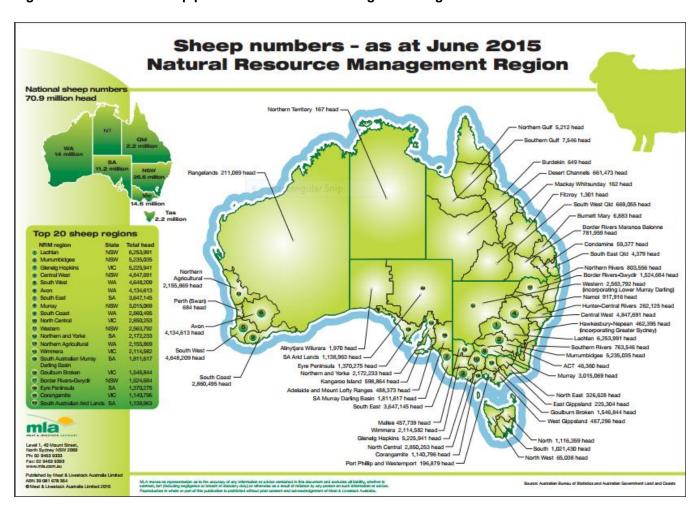


Figure #2: Number of sheep per Natural Resource Management Region.

Agricultural production in the Central West was valued at \$486.5 million in 2010–11, with \$414.6 million contributed from the slaughter of cattle. Wool was worth about \$42.3 million and slaughtered sheep were worth \$21.5 million. This was the second most productive contribution to the Region's economy with goat production also contributing on a small scale.

With such a significant impact on the State's economy it is reasonable to assume a proportionate amount of resources are invested in this are to ensure long-term productivity and viability of this sector. However this does not seem to be the case.

Further statistics demonstrate the impacts of suicide, domestic and family violence and mental health (psychological distress) and disability.

Suicide, Domestic & Family Violence and Psychological Distress

Suicide

It is well-established that the statistics on suicide, domestic and family violence, and mental illnesses are higher per capita in remote and isolated communities in Australia than other regional and metropolitan centres (Milner, Spittal, Pirkis, & LaMontagne, 2013). Milner and colleagues continue to state that farmers, graziers and agricultural workers have enhanced means of suicide and more complicating factors than the general population, such as isolation and paucity of support services.

The Australian national statistics on suicide, domestic and family violence and psychological distress apply to this project as it positions it centrally in the literature. Suicide is well represented in the data from the Australian Bureau of Statistics (Australian Bureau of Statistics 2016c).

- In 2015, preliminary data showed a total of 3,027 deaths by suicide. This is up from 2,864 deaths in 2014 and demonstrates an average of 8.3 deaths by suicide in Australia each day.
- Males over the age of 85 were considerably more likely to have died by suicide than other age groups while women aged 45-49 were most likely. In 2015 75.6% of suicide deaths were males. Over the past 10 years three times as many males than females have consistently died by suicide.

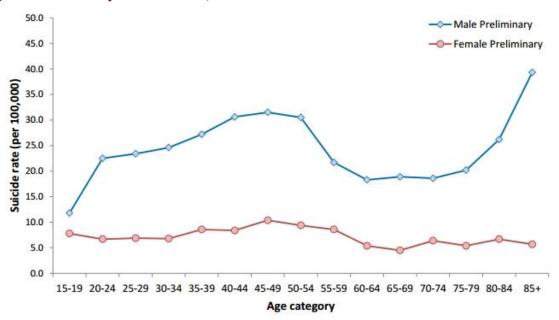


Figure 1: Preliminary Suicide Rates, 2015

Source: Hunter Institute of Mental Health (http://www.mindframe-media.info/ data/assets/pdf_file/0011/13124/ABS-2016-Suicide-figures-2015_Final.pdf)

Domestic & Family Violence

The Australian Bureau of Statistics recently released its newly researched data relating to Family and Domestic Violence. The results were:

- The number of victims of Family and Domestic Violence (FDV)-related Sexual assault increased by 7% (503 victims) in Australia between 2014 and 2015 to 7,464 victims.
- The number of female victims of FDV-related Sexual assault increased by 8% (480 victims) between 2014 and 2015. In contrast, the number of male FDV-related Sexual assault victims was stable over the same time period (1,138 in 2014 compared to 1,148 in 2015).
- Females comprised 85% of all victims of FDV-related Sexual assault, with those aged 0-19 years making up more than half of these victims (59% or 3,730 victims).

(Australian Bureau of Statistics 2016b)

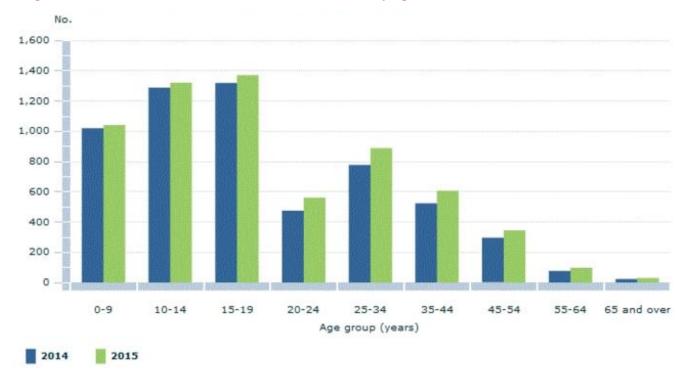


Figure 2: Female victims of DFV related sexual assault, by age, 2014-5

Psychological Distress

Figures from the Australian Bureau of Statistics (2016a) demonstrate that in 2014-15, 11.7% or 2.1 million Australians aged 18 years and over report they experienced high or very high levels of psychological distress. Around two thirds (68.0%) of adults experienced a low level of psychological distress. 13.5% of these were women and 9.9% were men.

Women aged 18-24 years had the highest rate of any age group or sex in 2014-15 up from 13.0 % to 20.0% from 2011-2015 (Australian Bureau of Statistics 2016a).

In 2014-15, adults living in areas of most disadvantage across Australia were more than twice as likely to experience high or very high levels of psychological distress than adults living in areas of least disadvantage (Australian Bureau of Statistics 2016a).

Disability

The Australian Bureau of Statistics also states that in 2012 7% of all children aged 0-17 years and 15% of those aged 18-64 years reported having a disability in Australia (Australian Bureau of Statistics, 2012). The ABS report continues to define the higher proportion of children and young people with disabilities come from single parent

families and those in long-term financial distress. 57% participated in community sporting events and 86% attended mainstream schools while 43% reported experiencing learning difficulties and 35% reported difficulty fitting in socially (Australian Bureau of Statistics, 2012).

Relationships and the Community.

This project is all about relationships. It is about the intricate web of relationships that each person and family has with others in the Central Western Queensland Region. It is also about the relationships that Central Western Queensland has with its neighbouring regions and with the Rockhampton, Brisbane and Townsville regions. These three major metropolitan centres are where much of the services, programs and frameworks for support originate for the people of the Central Western Queensland Region. Early theorists and researchers have examined how the family responds to, and determines social institutions (Giddens, 1991; Johnson-Hanks, 2002) and demonstrated how members of a society interact with the institutions that both govern and respond to the needs of those members.



Rationale

There are many reasons this document came into being. Firstly it was driven by an acute alarm regarding the withdrawal of essential funding for critical services to people of the Central Western Queensland region. The impact of natural disasters (such as cyclone Marcia, Debbie and decades of drought - that are still ongoing) take their toll on the mental and emotional wellbeing of men, women and families who struggle to put beef and mutton products on the dinner tables of all Australians. The critical drought-assistance funding ceased with the first brief, short-lived shower that fell, with no adequate follow-up rainfall. Recovery funding was also ceased and funding for the essential suicide support service; "Stand-By", also ceased. This funding was intended to relieve some of the torment and anguish experienced by graziers and families in the region.

Secondly it was driven by an acute alarm regarding the reported withdrawal of critical funding for essential youth services in the Central Western Queensland Region. This funding was to be used for mental health services including suicide intervention and domestic and family violence intervention and prevention (such as that for "Stand-By").

This emerging trend of removing critical funding from remote and isolated communities opposes data from the Australian Bureau of Statistics (2016c) and (Milner et al., 2013) who state that graziers and pastoralists are at greater risk of suicide due to economic, natural and political prejudice, placing them at disadvantage. A large proportion of families in the Central Western Queensland Region are graziers and pastoralists. Families are the lifeline of the Australian Outback and Central Western Queensland is a significant tourism attraction as it represents the iconic, hard-working, battle-drawn, dry-witted Australian Stockman. These families contribute to the large proportion of meals at family dinner tables around Australia and overseas. This lifeline is fraying, and families are falling apart in this region. We need to support these iconic Australian families.

Further support for this study comes from the Regional Development Australia Fitzroy and Central West Inc which claims that, despite its small population and remoteness, the CWQR supports a number of sustainable communities.

"The sustainability of these communities is closely tied to the responsible stewardship of the natural environment, the residents' spirit, pride and sense of community, and the innovation of small businesses to provide required services. Not only are many communities suffering with social infrastructure that is unable to meet current needs, but these same infrastructure inadequacies also represents a major blockage for these communities in attracting and retaining further regional development initiatives that are so desperately needed to ensure their diversification and ultimately, their longevity." (2014, p. 5).

Other government and quasi-government reports claim the detrimental impacts of removing socio-economic and socio-emotional supports further isolates and disadvantages already struggling communities.

The Queensland Mental Health Commission's Mental Health Drug and Alcohol Strategic Plan 2014-2019 (2014), states.

"The wellbeing of people living in rural and remote communities can be challenged by social, financial and environmental factors such as limited employment or education opportunities, social and geographic isolation, and economic hardship and uncertainty, as well as the hardship and stress of extreme weather conditions. Lack of information and accessible, quality services in some cases can make people living in rural and remote areas less likely to seek or receive treatment or support" (p. 8)

People and families with disabilities will begin voting with their feet and selecting products and services that both meet their needs and provide complimentary services (ie, provide an enjoyable, productive experience). This can effectively make or break a service provider. Not only will this empower people with disabilities, but it will enable their family to begin influencing the quality of service delivery by changing service providers. This will further expand out to the community where NGOs that have a reputation for providing positive experiences will be favoured over all others. Therefore this study has focused fundamentally on the exploration of experiences from the perspective of those who will be voting with their feet – the members of the community itself.

Participants in this study informed the research that attempts to deliver supports have failed previously. They cite the primary reason for failure is lack of cultural awareness, understanding and connection between the policy, program content and the needs of the community. This has resulted in a community attitude of resentment and skepticism towards any attempt to address the issues.

Therefore this study is inverting the paradigm and its approach to the exploration and understanding of mental health, domestic and family violence and suicide in remote and isolated communities by putting them in the position of expert and redefining the issue from the ground up.

Previous studies that purport they are "evidence-based" may fail to acknowledge where that evidence originates and how the bias of interpretation can waiver the faithfulness of the final data from the original, raw data. A researcher's own history of experiences and perspectives can unknowingly and unintentionally infer an undetectable bias into the interpretation of the data and the language that is used to present it.

Therefore it is vital that the raw essence of the lived experience be both captured and embedded into the data as it evolves throughout the analysis and presentation stages of this study. This will be described in detail in the Data Analysis section of this document.

O'Brien (2011) claims that the family is the location for the invention and distribution of social roles, community engagement and careers. This is critical for the younger members of every family. Each generation can have a variety of roles, depending on the needs of society at that time, forcing changes in the nature and structure of family units to comply with these social needs as they evolve over time and generations. According to McGoldrick

and Carter (2003) families are experiencing increasing difficulties due to rising social and economic demands that are impacting significantly on their constitution and functioning forcing these changes. These pressures have reportedly resulted in the rise of single-parent families and father-frequently-absent-away-at-work families.

Neubourg and Weigand (2000) state that the family is the environment where risk is assessed, planned and managed in ways that extend to broader social policy. Therefore social policy relating to risk is shaped by the attitudes and beliefs of families. Families experiencing stress assess the risk and respond by voting or choosing a product or service that can be assumed to reduce their stress and risk.

Capturing the lived experiences of families in the Central Western Queensland Region demands a methodological approach that allows the data to guide the analysis, rather than forcing it to comply with pre-established paradigms that serve a pre-existing agenda. This ensures the data and findings remain faithful to the experiences of those who live them on a daily basis. To do so we must step out of the institutional perspective and into that of the participant in collecting the data that is relevant, appropriate and meaningful to the lived experience.

Data Collection

This study examines the issue from the perspective of the participant's perspective. Therefore it is fundamentally critical to apply a methodology that would remain faithful to the lived experiences of the residents of the Central Western Queensland Region.

While this exercise facilitates data from individuals contributing to the workshop, it illuminates the issues and problematics experienced by families in the region, for each participant is a representative of a family. One such participant has been a foster parent for many years and claims to have fostered over fourteen children, not including three of his own. This participant represents quite a large family in the Central Western Queensland Region.

This data is merely the precursor to deeper examination and analysis of community opinions, attitudes and perspectives towards mental health and the institutional response. While fundamentally a basis study, the data should be used to frame further study.

Participants self-selected. They were invited/encouraged to participate by the conference MC throughout the previous three days of events, presentations and activities. The workshop was conducted in the final session of the final day.

Participants were requested to form groups of four and each group was issued pens to write with and three sheets of Butchers' paper each. They were then asked to discuss their responses to the research questions.

The three research questions were:

- 1. What works?
- 2. What doesn't work?
- 3. What do we need?

The raw data was obtained in the form of:

- 1. written notes on sheets of Butchers' paper, and
- 2. an audio recording of the workshop.

Data Analysis

Method

As this workshop was designed to collect first-hand, unique data directly from the source of the lived experience the method selected for data collection needed to enable it to evolve and emerge into themes that remained faithful to the lived experiences of residents and families in the Central Western Queensland Region. This demanded no preconceived concepts or opinions on what the data *should* illustrate, but rather an utterly unbiased, uninformed perspective that located the participant as the expert. The method must be able to build the concepts from the ground up. Therefore Grounded Theory is applied.

Grounded Theory is the study of experience from the perspective of those who live it (Charmaz, 2006). It enables the examination of data that is grounded in the lived experience. Constant Comparative Method was developed by Glaser and Strauss in 1967 (Hallberg, 2006) and enables the data to evolve into themes and categories through structured, yet flexible frameworks while avoiding preset agendas. It is a form of Grounded Theory.

Data evolved and emerged to clearly illuminate the core issues troubling residents and families that NGOs and government agencies should be aware of. The data is presented in its original form as it emerged into themes and accounts of participants' lived experiences. Figure #3 illustrates this data.



Discussion

This project represents an introduction into further investigation of the lived experiences of residents and families in the Central Western Queensland Region concerning the problematic issues of suicide, domestic and family violence and mental health.

Relationships Australia and the National Disability Insurance Agency facilitated a four-day conference in Longreach on the significant issues of suicide, domestic and family violence and mental health. This was conducted in response to the rise in statistics from the area and the growing concerns of NGOs and the Central Western Queensland Regional Council.

This study aimed to raise enquiry for participants to encourage them in developing strategies and responses appropriate to their needs as they see and experience them. The Central Western Queensland Project has identified numerous critical barriers between service providers and the community. These are by no means limited to:

- Tyranny of distance. A large proportion of residents in the Central Western Queensland Region live on remote cattle and sheep stations and are thus isolated from accessing critical services.
- Costs of travel. With the rising costs of fuel and vehicle maintenance, having the financial means to access services is increasingly restrictive. Graziers and their families are choosing to go without.
- Attitude towards NGOs. As stated elsewhere in this document there is a history of neglect and ignorance from well-intentioned service providers that has impacted on the attitudes of local families towards the effectiveness and cultural relevance of mental health services provided by NGOs.

The three-hour workshop was participated by twenty two representatives of the Central Western Queensland Region. The twenty two participants in the workshop was a representative, self-selecting sample of the population of the Central Western Queensland Region. Each participant's contribution was indicative of a wider community attitude. Each was either a community service provider, teacher, parent, young person, police or ambulance officer, church minister or any combination of these. Fundamentally, each was a recognized resident of the community. During the workshop it was evident that these community representatives were highly unsatisfied with the response from the Federal Government to withdraw funding for vital services. The withdrawal of the funding, and subsequent withdrawal of the critical services this funding was to provide, has done more long-term damage to families in the Region than any short-term good it did when in operation. This has left the community reeling and even more skeptical towards future supports proposed. This makes it increasingly difficult for existing services and those with good intentions to do good work in the Region. This particularly applies to the NDIS.

Figure #3 illustrates the common themes that emerged from the data. It demonstrates the most urgent need as expressed by participants, is the need for NGOs and providers to share information and listen to each other.

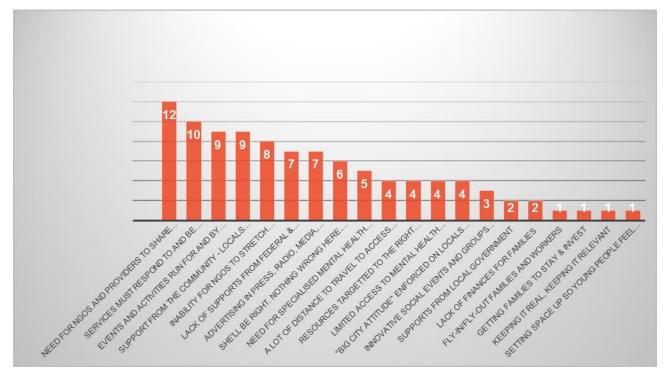


Figure 3: Data Themes from the Lived Experience

Limitations

Although representative of a wider population, twenty two participants is a relatively small sample size. Feedback from participants suggests that locals may have been most likely reluctant to attend the workshop due to the fear of stigma, labeling and ridicule. A few participants indicated that just being seen walking into a venue that is known to be hosting a suicide, domestic violence and mental health workshop can have negative impacts and consequences on individual and family social standing, esteem and identity. Put simply by one participant, "People are quick to label out here".

Another limitation that restricted the number of potential participants was the timing of the workshop. It was held from 1pm-4pm. This is not a likely suitable time for many working parents or station owners/operators who get the bulk of their work done during business hours or daylight hours.

Recommendations

Data remained faithful to the lived experiences and demonstrates the following recommendations should be met to improve NGO relationships with residents and families in the Region. These recommendations are illustrated in a concept map (figure 4) with NGO engagement being central and pivotal to the healing process for the Region.

1. NGO engagement

It is recommended that a forum be established and facilitated by an impartial person or organisation that aims to bring NGOs together on a regular, frequent basis to discuss critical matters pertaining to users, community issues and optimally servicing the needs of families and people in the Central Western Queensland Region. Impartiality is critical to ensure no NGO exerts its agenda over others, or its perspective in favour of others. The location selected must facilitate a safe space for all NGOs to discuss client issues. New legislation enables this without breaching Codes of Confidentiality or Information Security. This point has been pertinently and explicitly identified by workshop participants as a significant barrier to service satisfaction and engagement. It is recommended that Relationships Australia provides such a safe space with all NGOs formally agreeing to a documented, professional code of ethical conduct.

2. Central West Community Health & Wellbeing Group

It is recommended that a Central West Community Health & Wellbeing Group be established and facilitated by the community itself to provide optimal guidance to NGOs and local government agencies on the concerns and issues of the residents of the Central Western Queensland Region. The same word can have very different meanings in different contexts and locations depending on the history of the culture that is embedded in the meaning of the word. For example, the word "Strict" will be understood differently by someone who has experienced child abuse compared to someone who has served in the military. Therefore there are many terms and words that are understood differently by families in the Central Western Queensland Region than families anywhere else, because of the history that is embedded in the understanding of the term.

Community support workers therefore need to be mindful of the terms and descriptions that are used to explain their lived experiences. Workers who may be well-meaning in their compassionate approach to people in their communities can cause disharmony through misunderstanding. This document illuminates this disparity in cultural histories that creates problems for rural, remote and isolated communities. If community workers are to develop strong therapeutic relationships with families in these communities they must be mindful of this fundamental difference in understanding.

This forum will be a vital link for families to access local support services and to gain informed feedback about the quality and nature of the services being provided.

3. Community Visitor Program

It is recommended that a Community Visitor Program be established that enables two key people (one male, one female) who will be funded to visit remote and isolated cattle stations for casual visits. It is further recommended this program be auspiced by the Country Womens' Association (CWA) in partnership with the Royal Flying Doctor Service.

4. Advertising and Promotion

It is recommended that extensive advertising and promotion be ensured to optimal exposure and dissemination of information about the event be broadcast to the residents and families of the Central Western Queensland Region, not just the people who visit the Longreach town centre. Flyers were seen in shop windows and participants commented that they had heard through word-of-mouth about the conference. Representatives of NGOs stated they had been informed through email. This severely restricts the abilities for local families to be aware of the event and its intended purpose. Thus, the following strategies are encouraged:

- The local radio station (4LG) be recruited to broadcast promotional information from at least one calendar month from the date of launch of the 2018 conference.
- The local radio station should host a regular talk-back session at least once a week where a local NGO
 representative, or mental health service/specialist can discuss options and opportunities with callers. This
 should be an ongoing event.
- Local press and popular media (newspaper and television Impala) be recruited to broadcast community information and notices from at least one calendar month from the date of launch of the 2018 conference.
 This should also include a profile of a local representative from a local NGO. The NGO receives the mutual benefit of public advertising.
- A familiar, popular public figure (such as Tanya Kernigan already on Impala and on the Board of Queensland Rural Mental Health) be recruited as a spokesperson, presenter, keynote speaker and MC for the 2018 conference.
- A special event be organized that brings families in from their remote locations to interact with other locals. A suggestion is a weekend of cattle and sheep events. The Great Western Hotel in Rockhampton has been approached as well as a representative of the PBR (Professional Bull-Riding Association) and Tanya Kernigan herself and all are keen to support this public event. The Longreach Agricultural College should be an ideal facility to hold this event, with the Stockman's Hall of Fame involved. IT IS CRITICAL THAT THE COMMUNITY BE ENABLED AND EMPOWERED TO ORGANISE AND RUN THIS EVENT. It is strongly recommended that a Steering Committee be established that includes mums and dads and young people from the Central Western Queensland Region. If the committee is top-heavy with members who are focusing on tourism, profit or personal promotion, the event will lose its purpose and the families of Central Western Queensland will again withdraw from the event over time. This event allows the authorities to learn from previous mistakes.

5. Community Services Map

It is recommended that local NGOs cooperate and collaborate to develop, publish and share a document that illustrates the mapping of services each NGO and staff member contributes too in the Central Western Queensland Region. This map will form the foundation of inter-service cooperation and a Community of Practice, driven by locals.

6. Awards Ceremony

It is recommended that the 2018 conference include an Awards Ceremony to showcase and recognize the valued efforts of NGO staff, Council officials, and, most importantly, members of the community to go to lengths to help others. While this may already occur, it would be optimal to include it at this conference as it will bring it all together for families and the community as a whole, rather than segment it. This creates segregation and separation.

7. Follow up

It is recommended that a regular scheduled follow up be conducted by the workshop facilitator and the NDCO to ensure the NGOs are communicating effectively and efficiently as well as to examine and explore the evolving community attitudes and levels of engagement.

8. Evening sessions

It is recommended that future events related to this theme include evening sessions held at a convenient location for the community to attend and contribute. This will enable working parents, school-aged children and other interested parties access to information and services. It further avoids costly repetition and provides a location and time for families to come together.

9. Post-workshop support

It is strongly recommended that a system for emotional support be developed and implemented for locals (including NGO staff and council officials) in the wake of the workshop as it may illuminate difficulties and personal issues for many. Again, this is a growth and cooperation opportunity for local community services to interact and unify for the benefit of the Central Western Queensland Region.



Figure #4: Concept map of recommendations.

As can be seen in this Concept Map the Community Visitor Program (CVP) is separated from the other projects that are recommended in this report. This is because the CVP is intended to be developed and run as a separate program, yet still a recommendation of the current project.



Summary

The Central Western Queensland Project represents a snapshot of the attitudes, beliefs and responses of the residents and families in the Central Western Queensland Region to the growing problematics of suicide, domestic and family violence and mental illness. Each are considered closely related.

The data used in this document was collected from 22 participants in a three-hour workshop conducted during the final session of a four-day conference facilitated by Relationships Australia and the National Disability Insurance Agency for the Central Western Queensland community. The data pertained directly to the lived experience of these social and personal problematics that impacts differently on rural, remote and isolated communities to communities in metropolitan and regional areas.

To develop a true understanding of the history, culture and ideology of mental health, domestic and family violence and suicide in these "forgotten" communities the data must be collected directly from the source and analysed in a way that guarantees and ensures this data remains faithful to that lived experience of the community and its members. Therefore Grounded Theory was used to derive a *sincere snapshot* of the situation as it exists within the homes, streets, shops, cattle and sheep stations of the Central Western Queensland Region. This will greatly assist in developing and providing realistic services that provide meaningful responses.

The recommendations arising from the analysis of data are:

- 1. NGO engagement,
- 2. Community Advisory Forum
- 3. Community Visitor Program,
- 4. Advertising and Promotion,
- 5. Community Services Map,
- 6. Awards Ceremony,
- 7. Follow-up,
- 8. Evening Sessions, and
- 9. Post-workshop Support.

These recommendations and the methodology chosen for this report are intended to meet the strategic requirements for the Queensland Government Mental Health Commission's **Stronger Community Mental Health and Wellbeing Program 2017-18**.

This project has also been conducted with the intent of meeting many of the strategic supports for the effective and efficient roll-out and perpetual management of the National Disability Insurance Scheme (NDIS). The exploration and understanding of the lived experiences of people with disabilities is fundamental and critical to the survival of all and any NGO that provides support services to people, families and communities that live with one or more disabilities.

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- Longreach Regional Council
- "Big Al" Central Western Queensland Police Dept
- Relationships Australia
- National Disability Insurance Agency

And

• The residents and families of the Central Western Queensland Region



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