

# BUILDING COMMUNITY RESILIENCE TO MEET FUTURE CHALLENGES

## Project Partners:

- State Recovery Office
- Rural Communities affected by Pinery Fire
- Wellbeing and Resilience Centre

Australian Disaster Resilience Conference  
Perth 2018  
Presented by Ronnie Faggotter and Linda Black



# PRESENTATION FORMAT

## PART 1:

THE SAHMRI WELLBEING AND RESILIENCE CENTRE – AN INTRODUCTION

## PART 2:

PINERY FIRE – MENTAL FITNESS INTERVENTIONS TO BUILD RESILIENCE

## PART 3:

FINDINGS FROM OTHER WELLBEING AND RESILIENCE TRANSLATION RESEARCH PROJECTS





“

# ITS A HUMAN STORY

”







WE BELIEVE IN  
PEOPLE.



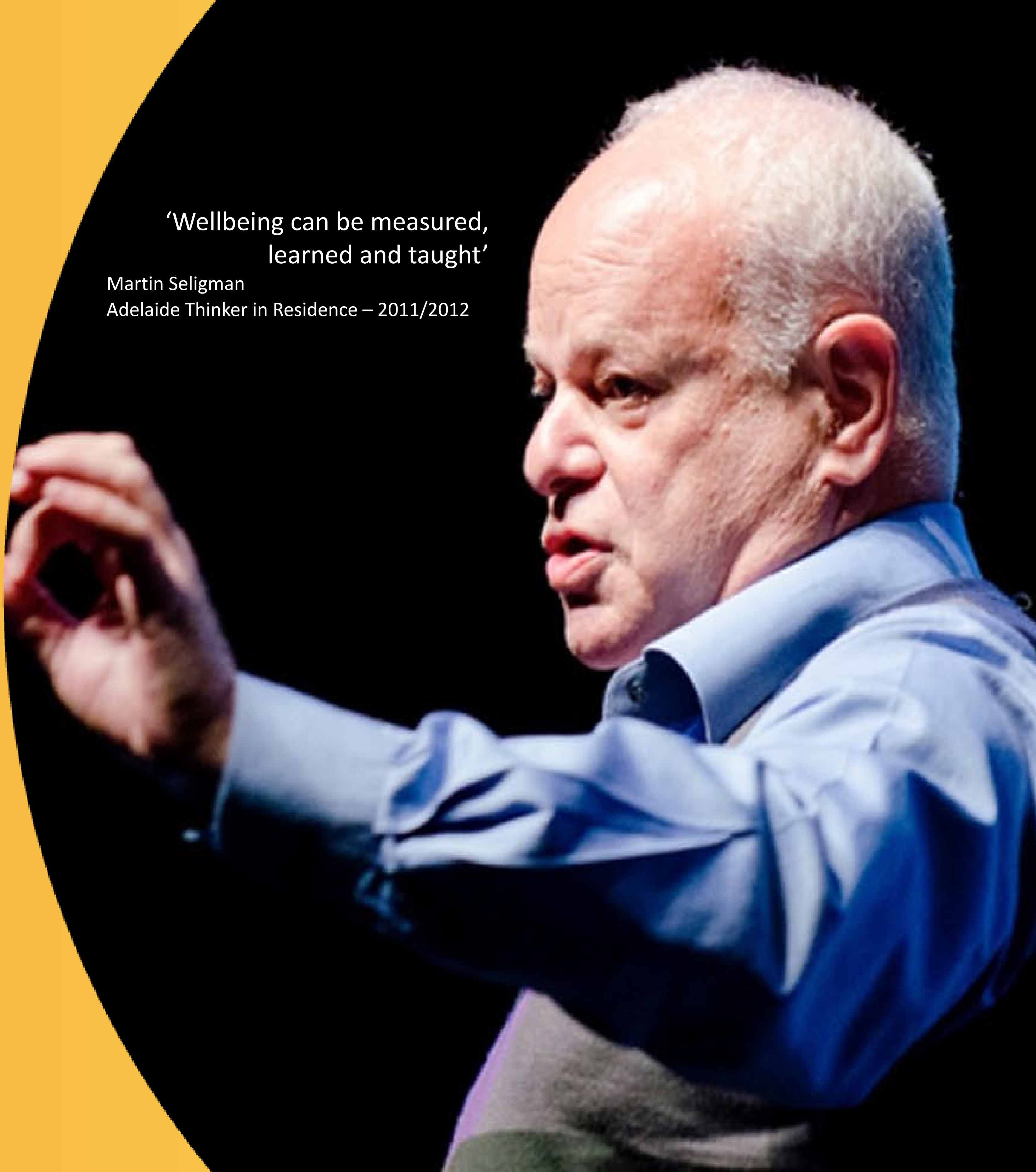


# MARTIN SELIGMAN

“Being in South Australia opened the question .. how do you go from individual wellbeing to an entire community or an entire state?”

‘Wellbeing can be measured,  
learned and taught’

Martin Seligman  
Adelaide Thinker in Residence – 2011/2012





# GABRIELLE KELLY



## Founding Director SAHMRI Wellbeing and Resilience Centre

- Global leader in the implementation of a life-course building of wellbeing at scale
- Global speaker on wellbeing at scale and the ever-expanding body of research knowledge

### Profile Background:

- Global Health Technology and Media
- Social Care Entrepreneur
- Director Adelaide Thinkers in Residence Innovation program
- Commonwealth and SA Board appointments





# OUR VISION

An evidence-based architecture for  
building, maintaining and re-building  
psychological health, wellbeing and  
resilience

LOCAL  
NATIONAL  
GLOBAL



# OUR MISSION

To translate the science of psychological health, wellbeing and resilience into systemic real world practice

Individual  
Family  
Community  
Society



Copyright © Wellbeing And Resilience Centre 2018, All rights reserved; Commercial in confidence



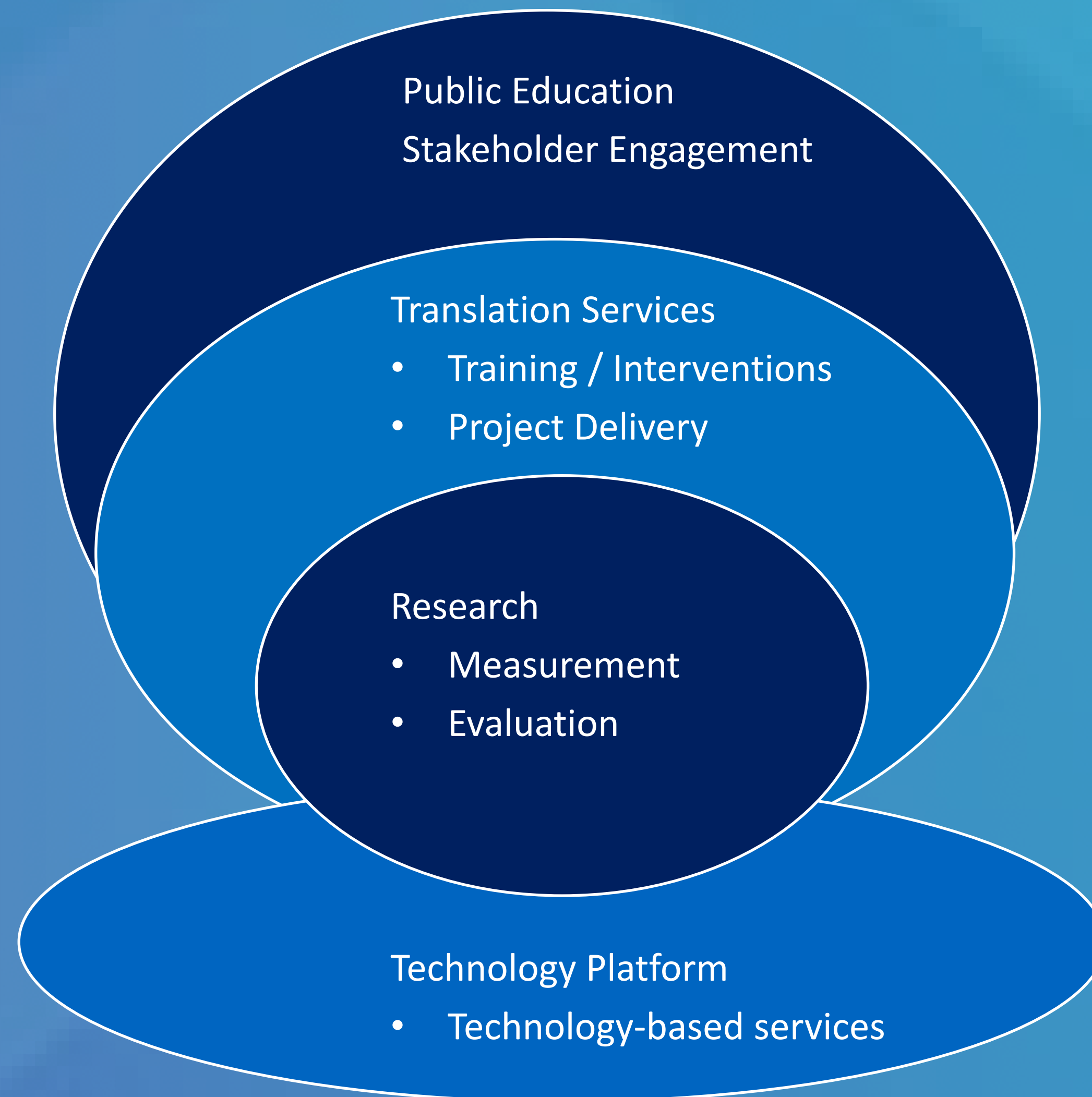
# OUR AIMS

- Activate individual action to improve and manage mental health
- Drive society wide appetite and capacity for improved mental health and mental ill health prevention
- Align mental fitness with physical fitness – and promote at individual, family, community and society level
- Coordinate large scale collaborative research and translation service delivery
- Apply methodology across the life course
- Enable wellbeing at scale





# INTEGRATED FUNCTIONS OF THE CENTRE





# BUILDING PSYCHOLOGICAL HEALTH contributes to:

- Improved overall wellbeing
- Improved resilience
- Reduced mental illness\*
- Improved general health
- Improved productivity

*\* at the population level*





# THE SCIENCE

- Psychology
- Positive Psychology
- Neuroscience
- Health and Medical
- Organisational Psychology
- Behaviour Change
- Behavioural Economics





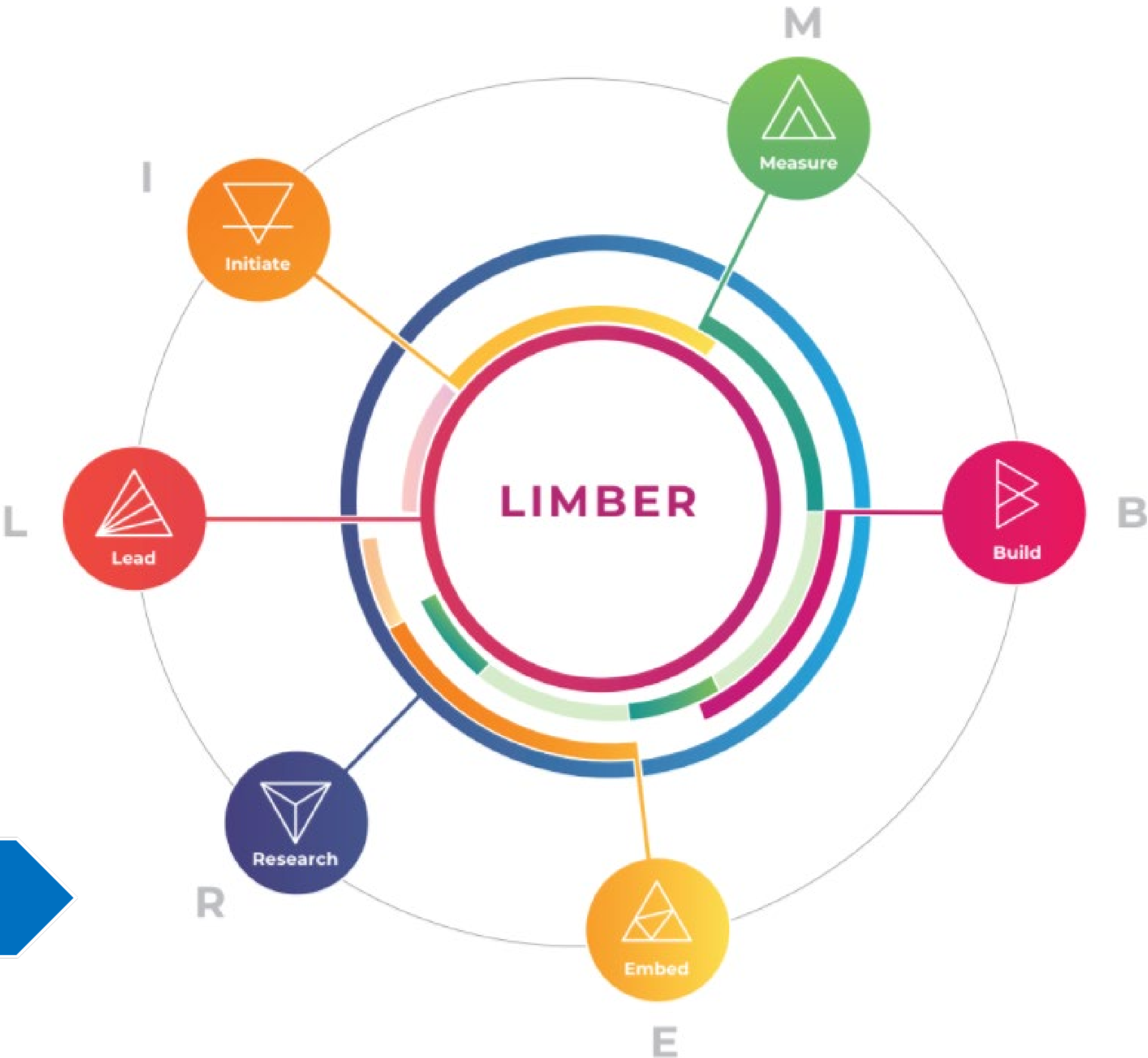
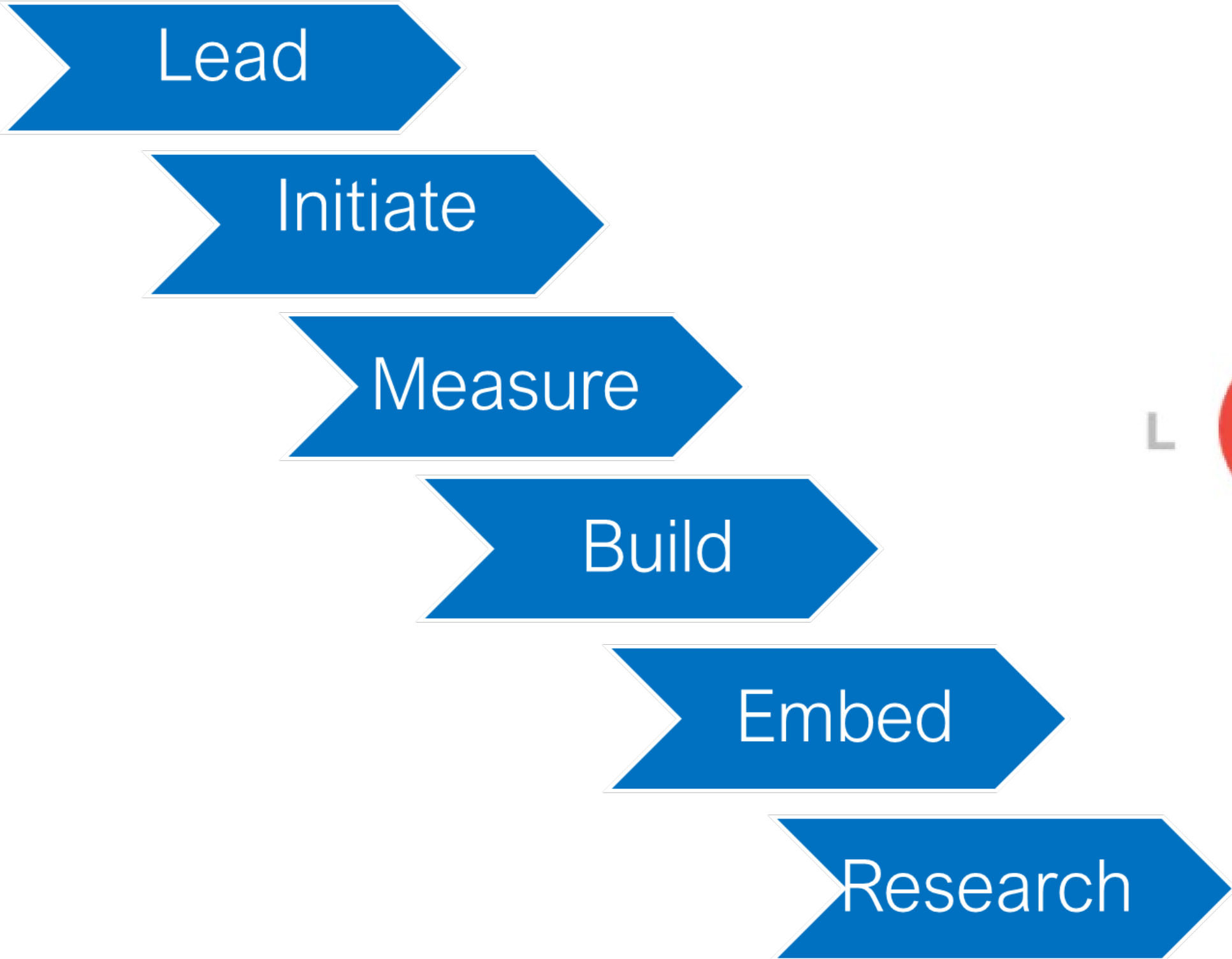
# ME WE US



Jarden and Jarden 2016



# LIMBER







Life scope



Societal  
Vectors

Emergency  
Services

Community

Government

Health

Workforce

Education

Disadvantaged  
Youth

Justice

Disability

Distributed  
Network





# TOOL KIT: 10-RESILIENCE SKILLS\*

- 0 Growth Mindset (Foundation Concept)
- 1 Event-Thought-Reaction (ETR)
- 2 What's Most Important
- 3 Balance Your Thinking
- 4 Mindfulness
- 5 Gratitude
- 6 Meaning Making
- 7 Interpersonal Problem-Solving
- 8 Active Constructive Responding
- 9 Strengths
- 10 Value-based Goals

\* *Licensed from 49North*





# RESILIENCE SKILLS PROGRAM\*

The wellbeing and resilience skills in this 16 hour program offer a combination of:

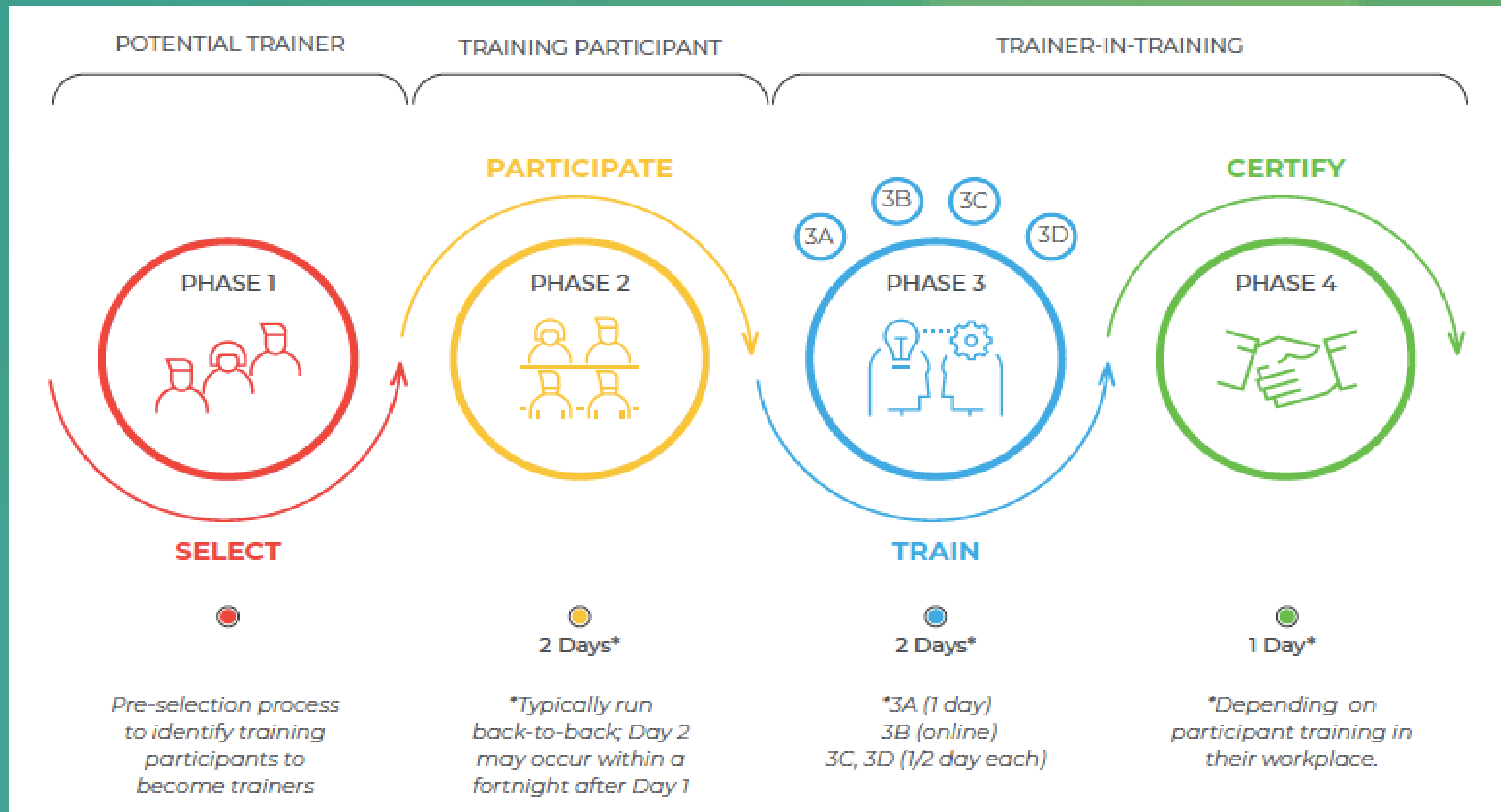
- Psycho-social education;
- Reflection and personal insight
- Skills acquisition; and
- Immediate contextual application for personal management of adversity and pursuit of optimal functioning

- *\*The Resilience Skills Training program's curriculum and design from 49North\* (a division of TechWerks).*





# TRAIN-THE-TRAINER PROGRAM





Positive emotion  
Engagement  
Relationships  
Meaning  
Accomplishment



Physical activity  
Nutrition  
Sleep  
Optimism  
.....

Iasiello, M., Bartholomaeus, J., Jarden, A., & Kelly, G. (2017).  
Measuring PERMA+ in South Australia, the State of  
Wellbeing: A comparison with national and international  
norms. *Journal of Positive Psychology & Wellbeing*

*Dr Martin Seligman Flourish( 2012)*



**WELLBEING  
AND RESILIENCE  
CENTRE**



# MEASUREMENT



The WRC already has in place a custom-built online wellbeing measurement tool that provides individuals with real-time insights into their wellbeing and resilience.

The Centre is currently advancing the application of the Complete State Model of Mental Health, as a core element of the Centre's measurement, with Professor Cory Keyes

- Keyes' model describes mental ill-health and wellbeing not as opposite ends of the same spectrum, but instead as two distinct, dynamic but interactive axes
- It is a framework for mapping complete mental health, reflecting the distinct but interactive constructs of mental ill-health and wellbeing
- It has the potential to support a logical evidenced-based service triaging system - a new way of more effectively targeting the delivery of intervention to build wellbeing and mental health over the life course, within a stepped care system.
- Our intended application of this framework as part of our next generation measurement will offer individual citizens the opportunity to engage in safe self care and while retaining agency about their personal complete mental health



# PINERY FIRE – SUMMARY OF DETAILS

25 Nov 2015	Pinery Fire
25 Nov 2015	Recovery operations commenced The State Emergency Centre (SEC) was activated Coordinated resources to support the Country Fire Service
26 Nov 2015	The Minister for Human Services was appointed Duty Minister
27 Nov 2015	Formal transition from response to recovery



# COMMUNITY IMPACT

## Human Impact:

Two deaths occurred

31 people injured

Five severely injured

Caused damage across seven community areas:

Freeling	Hamley Bridge	Owen	Wasleys
Greenock	Kapunda	Tarlee	



# INFRASTRUCTURE IMPACT

## Infrastructure losses:

82,600	hectares of land burnt
97	houses destroyed
10	houses with major damage
39	houses with minor damage
546	sheds and outbuildings destroyed or incurred major damage
34	sheds and outbuildings incurred minor damage
413	vehicles/pieces of machinery destroyed or incurred major damage
2	businesses (other than farms) and the bowling club destroyed
18,000	sheep confirmed lost
600	other stock confirmed lost
54,000	poultry confirmed lost
\$30 m lost crops, hay and straw (plus paddock feed of \$0.25 million)	

*As at 3 May 2016, 2,030 insurance claims totalling \$172 million had been lodged*



# SOCIAL AND PSYCHOLOGICAL CARE

- Community meetings
- Regular speaking engagements at community group forums
- Hosted afternoon tea meetings at six schools in the fire area for parents and staff
- Co-hosted with local farmers, five barbecues for men (over 300 men attending) with mental health professionals in attendance
- On-the-spot advice through the recovery centre and hotline
- Telephone and field outreach (conducted by SRO staff, Red Cross and Pastoral Care)
- Deployment of disaster recovery psychologist
- Clinical service provision
- De-brief session conducted for staff who dealt with people with disaster-related psychological impacts
- Facilitated debrief session with senior staff from public schools in the area
- Commencement of dedicated Health Recovery Coordinator
- Regular liaison with other counsellors and recovery centre staff
- Two types of first aid courses offered to people in the region: 'Physical First Aid' and 'Mental Health First Aid'



# PILOT PROJECT DESCRIPTION

**Goal of Project:** To embed wellbeing and resilience strategies seamlessly into the community ethos.

# PILOT PROJECT DESCRIPTION

**Activity:** Measure and build the wellbeing and resilience of the community members affected by the Pinery Fire using the SAHMRI Wellbeing and Resilience Centre *Resilience Skills training program*\*

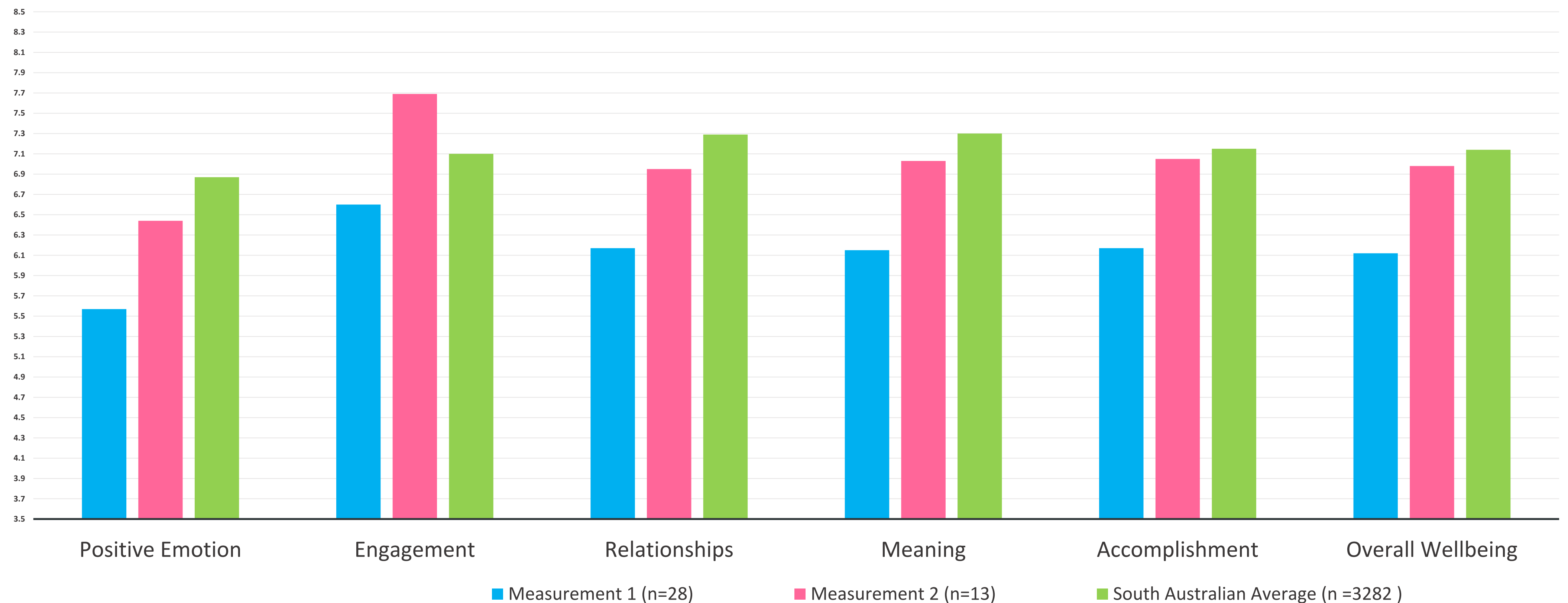
**Goal of Training:** Provide a suite of practical skills that residents can have easy and ready access to, beyond the initial training.



# PILOT PROJECT RESULTS

## QUANTITATIVE - WELLBEING

Figure 1. Overall PERMA score comparison between measurement one and two and SA norms.



# PILOT PROJECT RESULTS

## QUANTITATIVE - RESILIENCE

Resilience scores are bigger at measure 2. compared to baseline

The average scores at both time-points indicates that the respondents have low resilience.



# PILOT PROJECT RESULTS

## QUANTITATIVE – MENTAL HEALTH

Psychological distress on average was reduced between baseline and measure 2.

This result however points to a great likelihood of the group having a high proportion of respondents with a mental health issue.

# PILOT PROJECT RESULTS

## QUANTITATIVE – PLUS ELEMENTS

Satisfaction with Plus-components, that is physical activity, sleep, nutrition and optimism, was markedly up.

The community participants markedly improved in relevant outcomes.



# PILOT PROJECT RESULTS

## QUALITATIVE

Feedback provided back to the State Recovery Office, both from the community trainers and participants, deemed the skills training highly successful.

Their subjective view was that it had achieved the desired outcome of helping the recovery process, while in turn building resilience for future adversity in life.

# PILOT PROJECT RESULTS

## QUALITATIVE

So looking forward to using these skills as I move forward.

*Thank you very much.*

WELL WORTH ATTENDING. GRATEFUL FOR THE EXPERIENCE

*Plenty to go home, think about and practice.*

I'm so happy I made the time to do this course and so glad you accepted Kathy and I to complete this. My life is so complicated atm and now you have given me the tools and insight to my values to cope with all of this. Thanking you heaps.




# PILOT PROJECT RESULTS SUMMARY

- The pilot provides promising results
- Needs replication with adoption of a prospective research design
- Opportunity for a collaboration across government, community and research
- Robust exploration of the impact of pre-disaster mental fitness interventions

# FUTURE PROJECT GOALS

- Invest in a preventative approach
- Build on strong sense of purpose and create a common language
- Embed learned wellbeing and resilience skills
- Increase literacy of positive mental health, wellbeing and resilience



A photograph of two men in an office environment. One man is seated at a desk, looking at a computer monitor, while the other man stands behind him, pointing at the screen. The image is partially covered by a large blue diagonal overlay on the left side.

# FINDINGS FROM ADDITIONAL SAHMRI W+R CENTRE TRANSLATION RESEARCH PROJECTS



WELLBEING  
AND RESILIENCE  
CENTRE



THE IMPACT OF WELLBEING  
AND RESILIENCE  
INTERVENTION -  
SA DEPARTMENT OF  
CORRECTIONAL SERVICES







- The average wellbeing score across the whole organisation consistently increased year on year;
- Sick leave overall reduced by 12%;
- Sick leave for Custodial staff reduced by 22% (June 2016-17). Savings of approx. \$500k;
- Gross expenditure for mental stress claims reduced by 80% (June 2016-17). Savings of \$1.1m.
- Total savings for DCS over 12 months \$1.6m.
- Preliminary review of data at March 2018 shows the above findings have been sustained.



# SES THREE YEAR PARTNERSHIP TO BUILD WELLBEING ACROSS 120 STAFF AND 2,000 VOLUNTEERS

## LIMBER

Lead

Top Down: Bottom Up approach (Steering Committee and Work Group)  
Ongoing Change Management Strategy  
Developed Project Plan, Communication Plan and materials

Initiate

Baseline measurement with Individual and Organisational reports 53 SES staff, 33 SAFECOM staff and 173 Volunteers completed baseline questionnaire. Years 2 and 3 repeat measurement

Measure

Build

May – June 2018: Staff attended 2-day (16 hours) skills training, at SAHMRI. 10 in-house SES trainers trained (out of expected 20) due to deliver skills to Volunteers (first volunteer training session due Aug 2018)

Embed

July 2018: Staff Embed Action Planning Workshop. Ongoing development / monitoring of strategies to integrate the skills into their workplaces and lives. Volunteer embed strategy due next

Research

Evaluation against agreed KPIs



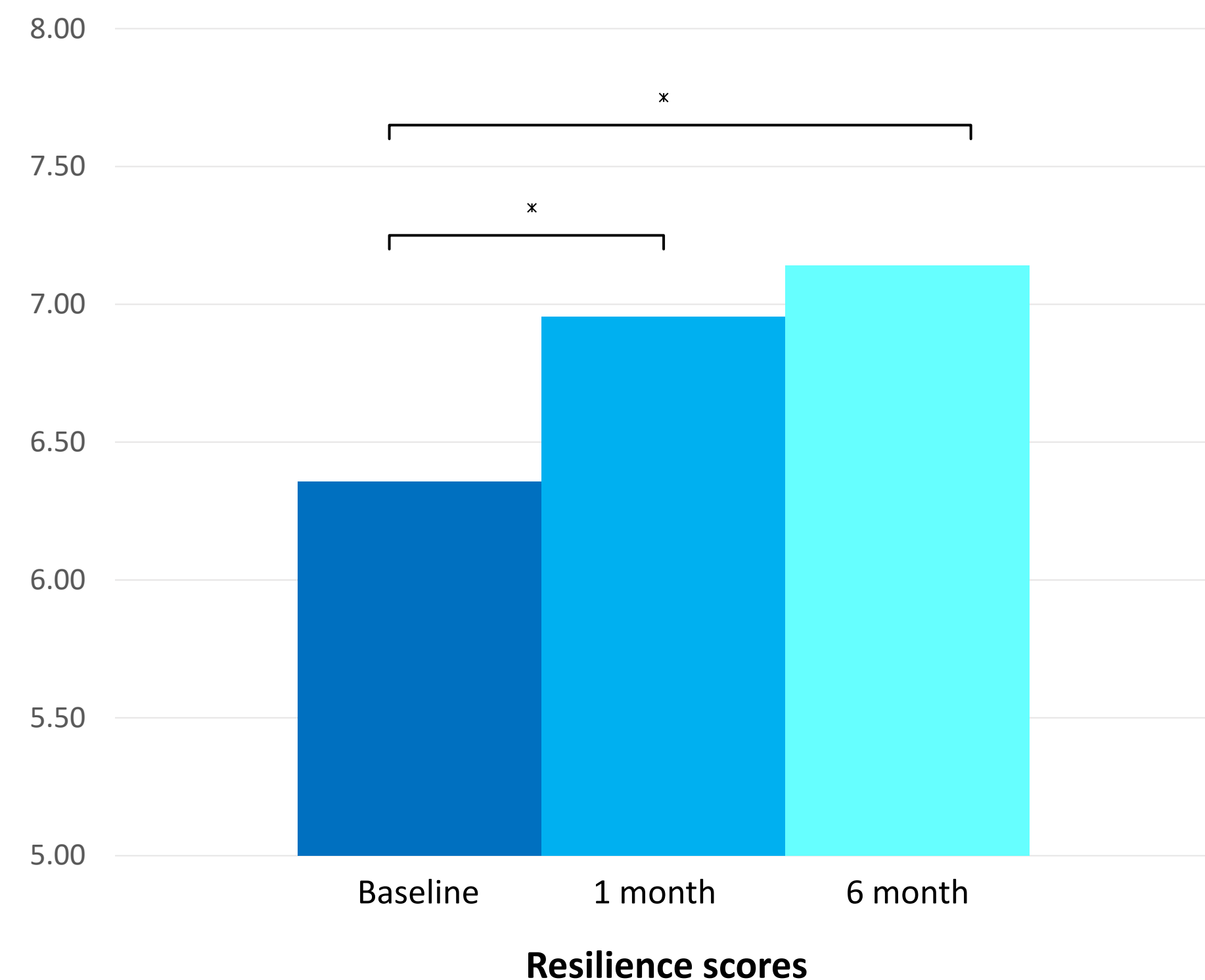
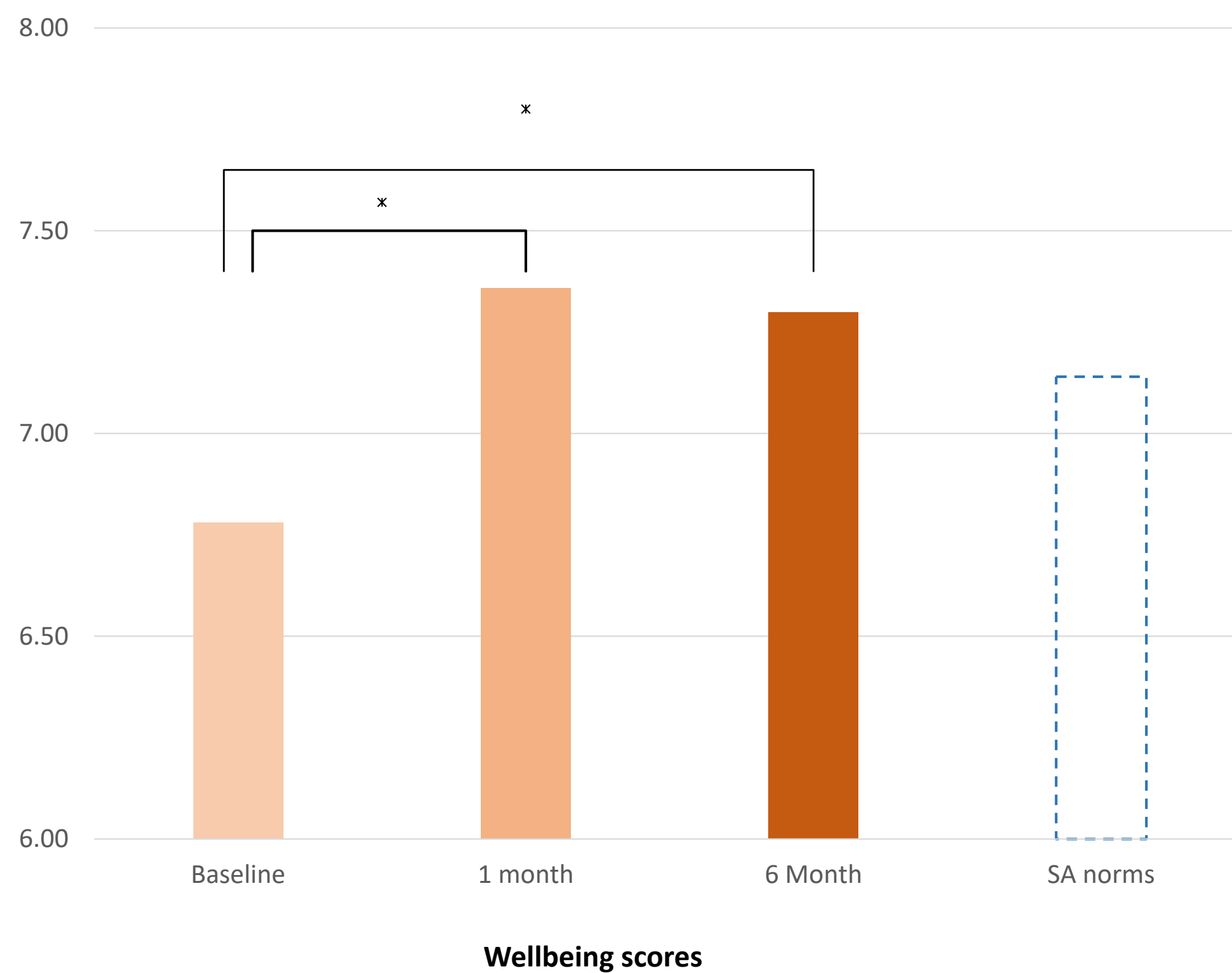
# CASE STUDY: INDUSTRY IN TRANSITION

- Absenteeism ↓ 43%
- Performance management ↓ 27%
- Lost time to injury ↓ 20%
- ↑ Productivity
- Wellbeing ↑ 12%



# WORKFORCE PARTNER - PRIVATE

- The project found an overall increase in wellbeing from pre- to post training, at 1 month ( $p=.00$ ,  $d=0.39$ ) and 6 month ( $p=0.00$ ,  $d=0.32$ ) follow-up
- Similarly the project found an overall increase in resilience from pre- to post training, at 1 month ( $p=.00$ ,  $d=0.36$ ) and 6 month ( $p=0.00$ ,  $d=0.44$ ) follow-up
- Effect sizes were significantly higher for those with baseline wellbeing and resilience,  $d=0.55$  and  $d=0.75$  respectively





# WORKFORCE PARTNER - PRIVATE



- The project found an overall increase in wellbeing from pre- to post training,  $p=.00$ ,  $d=0.34$
- Similarly the project found an overall increase in resilience from pre to post,  $p=.00$ ,  $d=0.30$
- Effect sizes were significantly higher for those with baseline wellbeing and resilience,  $d=0.55$  and  $d=0.75$  respectively
- The project also measured indicators of distress due to symptoms of depression, anxiety and stress; findings, a significant result for all three outcomes, see figure below



# BUILDING COMMUNITY RESILIENCE TO MEET FUTURE CHALLENGES

SUMMARY AND CONCLUSION

QUESTIONS WELCOMED



**WELLBEING  
AND RESILIENCE  
CENTRE**



# BUILDING COMMUNITY RESILIENCE TO MEET FUTURE CHALLENGES

PLEASE FEEL FREE TO MAKE CONTACT

[Ronnie.Faggotter@sa.gov.au](mailto:Ronnie.Faggotter@sa.gov.au)

[Linda.black@sahmri.com](mailto:Linda.black@sahmri.com)



**WELLBEING  
AND RESILIENCE  
CENTRE**