Case studies exploring community-led recovery and coordination

Companion to the literature review ‘Government’s role in supporting community-led approaches to recovery’ and the SRRG discussion paper ‘Considerations for governments supporting community-led recovery’
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The broader project

The 2018–2020 Social Recovery Reference Group (SRRG) project exploring how government can best enable and support community-led recovery has a number of phases identified, this being Phase 2, part B: Case studies. The phases of this project include:


ii. Output 2:
   a. Report for the SRRG: ‘Considerations for government supporting community-led recovery’
   b. Case studies exploring community-led recovery and coordination.

The SRRG convened the Community-led Project Reference Group to guide the project and literature review and progress how we use of community-led approaches while enabling coordinated approaches to service delivery. The reference to ‘we’ throughout refers to the deliberations of the Project Reference Group.

Acknowledgements

Thanks to those from Australia and New Zealand who generously shared their insights by contributing to the gathering of information and reflections on these case studies including: Maddy Bourke, Howard Colvin, Kim Dean, Sarah Dean, Judith Dowling, Justine Drew, Maree Ellis, Ronnie Faggottier, Julie-Ann Ford, Ciaran Fox, Helen Goodman, Annie Ingram, Lorraine Jones, Sally McKay, Blythe McLennan, Cheryl Matthews, Tammy Myles, Lyndal Scobell, Helen Scott, Mark Stratton, Jac Taylor, Sue Turner, Miriam Rose Ungunmerr, Kezia Vonarx, Leonie Whiting, , and staff from the Department of Health and Human Services.

The case studies that rely heavily on existing reports include case studies 1, 6, 7 and 9. These sources are referenced in each case study.

Disclaimer

The opinions, findings and views expressed in this compilation have been compiled from a variety of sources including material available on the public record, reputable specialist sources and original material. Care has been taken to verify accuracy and reliability. The findings and recommendations are the interpretation of the author and should not be attributed to the attitudes or opinions of contributors to the case studies or members of the Social Recovery Reference Group. No warranty is provided nor, to the extent lawful, liability accepted for loss resulting from reliance on the contents of this report or from its use, by the author. Readers should apply their own skill and judgment when using the information contained herein.
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Introduction

This paper reports on nine case studies set in different communities at various times after a specific disaster affected their community. The goal of researching these case studies was to understand how governments might have supported the community to collectively lead aspects of their recovery through community action and/or community leading, collaborating on or influencing the decision making.

The case studies were chosen based on Social Recovery Reference Group (SRRG) member recommendations to focus on strengths and ‘successes’, including the strengths of the interaction between governments and community in different contexts around Australia and New Zealand.

The case studies relate specifically to:

- the responsibilities of human and social recovery functional agencies (five case studies)
- the aspects of participative governance, decision making and engagement in community recovery more broadly (four case studies).

Recovery challenges in these case studies include rebuilding houses, partnering with community organisations, cultural safety in an evacuation centre, appeal distribution, public health psychosocial wellbeing, community development and involving community in governance and decision making.

The broad parameters of each case study are detailed in Table 1, with a companion Table 2 summarising what enabled the community voice to be heard and responded to and community action supported in the particular community and disaster context, along with sound coordination and government prudential control.

Figure 1 pinpoints the location of each case study.

**Figure 1: Location of case studies used to explore government’s role in community-led and coordinated recovery**
The research in the literature review and the SRRG report brought to light a number of ways community-led approaches could be viewed. They could be viewed as:

- participation processes
- sharing responsibility
- co-production
- citizen self-organising.

We have chosen in this exploration to look at how government and communities work together by sharing responsibility (McLennan & Handmer 2012) for the risks faced by communities before, during and after the disaster. The report written for the SRRG further explores the other approaches, particularly co-production.

The risks (from the short through to the long term after recovery and in preparedness) might be to:

- community safety
- a community’s health and wellbeing
- an individual living a life they value
- community having a sense of self-efficacy
- community connectedness.

McLennan & Handmer’s (2012) work examined the mechanisms by which responsibility sharing for these risks is shaped in preparedness for and response to disasters and came up with seven broad types. The work recognises that responsibility sharing has occurred among multiple parties. In our case studies this has occurred between governments, non-government organisations (NGOs) and communities.

While each of the case studies follow in full, Table 3 summarises the mechanisms for shaping the sharing of responsibility for short through to long-term risk to community wellbeing that emerged from the case studies. These mechanisms can be considered as some of the catalysts or raising agents that might be used to support community-led approaches. In all case studies, each of these mechanisms were used in combination with other mechanisms, not as a sole response.

In summary, the mechanisms that enabled the shaping of the sharing of responsibility for recovery outcomes in the case studies included:

1. Soft interventions (influencing decision-making behaviour or access to services and resources):
   - communications to and between communities and government agencies
   - case (navigator) services provided to whole populations
   - the community development/recovery officer function for the community
   - grants for community recovery initiatives.

2. Organisations and associations (changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing):
   - emergent associations/committees specific to a task
   - existing community groups that set up gatherings and services
   - regular informal information sharing to suit community cultural preferences and context
   - recovery-specific coordinating committees as part of an overarching governance structure.

3. Contracts and agreements (establishing relationships and clarifying what is expected of the parties involved):
   - between governments and NGOs or community-based organisations
   - community development/recovery officer/workers – state or local government initiated
   - community-funded and agreed (through grants or fundraising by NGOs)
• government-funded through collaborative of private providers and governance in place
• grants programs between governments and community.

4. Collective enquiry and decision making (collectively querying and/or deciding where responsibility lies and/or how to share it):
• hearing from community and/or community-based agencies
• formal and informal exploration through community development workers
• co-designing the best approach
• strategic guidance and decision making.

5. Social norms (establishing formal shared rules of engagement to share responsibility and/or impose social incentives and sanctions):
• influencing new social norms or ways of being in the challenging recovery environment
• social norms among community members and community-based organisations
• social norms (organisationally agreed codes) developed in the recovery
• social norms among workers in government organisations.

6. Vision statements (steering and mobilising responsibility sharing by outlining what it should achieve or look like):
• community level – pre-existing
• community level – introduced
• local government, state and national level for various aspects of community outcomes/impacts.

The full case studies are presented in this document. The approximate timeframes and relationship to the relief or recovery phases of each of the case studies are indicated loosely in Figure 2.
Figure 2: Different phases that individuals and communities might experience post disaster

1. Bundaberg Community Rebuild Group, 2013
2. Communities’ of Yarloop and Cookernup recovery from Waroona Complex Fire, 2016
3. Nauyav Evacuation Centre
4. Ravenshoe Community Appeal Committee, 2015
7. Gippsland Asset Based Community Development, Victoria, 2013–14
8. Sherwood Fires, 2018

<table>
<thead>
<tr>
<th>Setting</th>
<th>Settlement type</th>
<th>Hazard</th>
<th>Main hazard event</th>
<th>Public service area</th>
<th>Initiator(s)</th>
<th>Main co-producers</th>
<th>Primary data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bundaberg, Queensland</td>
<td>Peri-urban</td>
<td>Flood</td>
<td>Cyclone Oswald, leading to flooding</td>
<td>Disaster recovery (housing) (short-term)</td>
<td>State government Department of Community Services, Child Safety and Disability Services (DCCSDS), which then moved to the community leader from the Combined Churches Group and later others</td>
<td>CSOs: Uniting Care, St Vincent de Paul Volunteers: Uniting Care, Combined Churches Group, Salvation Army, St Vincent de Paul, Global Care and service clubs EMOs: DCCSDS CSOs: Church of Christ, Lions Clubs, St Vincent de Paul, Salvation Army Volunteers / local managers: community members, corporate volunteers, Country Women’s Association EMOs: DOCs CSOs: Red Cross board member Volunteers: Tablelands Recovery Program Committee CEO, GIVIT, director of nursing from the regional hospital, independent local accountant EMOs: Red Cross CSOs: Mental Health Foundation, community and public health, Red Cross EMOs: Waimakariri District Council and Christchurch City Council CSOs:自然灾害恢复管理，DHHS (Tas.), Treasury (Tas.), community representatives on CRRG EMOs: Red Cross Emergency Management, DHHS (Tas.), Treasury (Tas.), community representatives on CRRG Evaluation: RMIT Volunteers: key community leaders (representing landholders) EMOs: Tatiara District Council, Primary Industries and Regions, Natural Resources South East, Coorong and Tatiara Local Action Plan, Health SA, Department of Communities and Social Inclusion, Country Fire Service, Red Cross, MacKillop Farm Management Group CSOs: 社会服务 agencies, the collective Social Service Waimakariri Volunteers: residents associations (e.g. Pines Beach/Kairaki Residents Association Earthquake Committee), Waimakariri Community Board EMOs: Waimakariri Council, Canterbury Earthquake Recovery Authority</td>
<td>Two key informant interviews (two public officials and government reports) Four key informant interviews (two community, two public officials) and government reports Five key informant interviews or written responses (one community member, two NGO managers, two public officials) Four key informant interviews (one NGO manager, three public officials local and state level) Two key informant interviews (one public official, one not-for-profit foundation and government reports Two key informant interviews (both NGO, NGO report and other unpublished documentation Three key informant interviews (one public official at state level, one university, one local government) Three key informant interviews (from public officials, one locally based) Government report</td>
</tr>
</tbody>
</table>
Table 2: Ways in which community and government shaped the sharing of responsibility for the risks from the disaster

<table>
<thead>
<tr>
<th>Human and social recovery</th>
<th>Community recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Aim:</strong> To minimise the risks after disaster impact on the health and wellbeing of communities and individuals, especially the most disadvantaged and at risk, through:</td>
<td><strong>Aim:</strong> Ensuring participative governance, decision-making processes and engagement. Coordinating regional relief and holistic recovery by working with local governments, other government departments and non-government agencies and communities.</td>
</tr>
<tr>
<td>• administering financial assistance in the form of personal hardship assistance payments</td>
<td></td>
</tr>
<tr>
<td>• supporting housing and accommodation of displaced individuals, families and households whose primary residence is destroyed or damaged</td>
<td></td>
</tr>
<tr>
<td>• leading psychosocial support through information, practical assistance, emotional support, assessment of immediate needs and referrals to other support agencies</td>
<td></td>
</tr>
<tr>
<td>• coordinating regional human and social recovery by working with local governments, other government departments and non-government agencies along with communities.</td>
<td></td>
</tr>
<tr>
<td><strong>1. Bundaberg Floods, Queensland, 2013:</strong> Rebuilding flooded homes so people who otherwise couldn’t afford their repairs get back into their homes in a time of limited funding through:</td>
<td><strong>6. East Coast Bushfires, Tasmania, 2006:</strong> Locally led project prioritisation and funding allocation was facilitated through:</td>
</tr>
<tr>
<td>• government initiation of a process of collective enquiry with active community members/groups around the problem and potential solution</td>
<td>• criteria for recovery projects jointly agreed between the Affected Area Recovery Committee (at state level) and the Community Recovery Reference Group (at the regional level incorporating representatives from several communities)</td>
</tr>
<tr>
<td>• establishment of a community-driven association linking in with case coordination groups using a process of action learning and support by government.</td>
<td>• independent partnership broker/mediator, the disaster recovery coordinator, hosted by an affected local government.</td>
</tr>
<tr>
<td><strong>Aspect of recovery:</strong> Rebuilding</td>
<td><strong>Aspect of recovery:</strong> Locally led project prioritisation</td>
</tr>
<tr>
<td><strong>2. Waroona Complex Bushfires, 2016, Yarloop, Western Australia:</strong> Community leaders from community resource centres working with the Department of Communities to facilitate community involvement in district human and social recovery through forging connections, gathering intelligence about the values and networks in the community and advocating for presenting community needs.</td>
<td><strong>7. Gippsland Recovery Adaptation Project, 2013–14 fires, Victoria:</strong> Application of Asset Based Community Development approaches to different communities across a large geographic area. This was a strategic approach to recovery assistance and funding, coordinated by a single agency and assisting the communities to ride and survive change and carry these capacities into the future. It featured partnerships with local professionals, skilled and appropriate facilitators. It embedded the project impact by facilitating the transition from an emergency management focus to development of the social infrastructure – ‘in-place’ community development.</td>
</tr>
<tr>
<td><strong>Aspect of recovery:</strong> NGO and government partnering</td>
<td><strong>Aspect of recovery:</strong> Asset Based Community Development</td>
</tr>
<tr>
<td>Human and social recovery</td>
<td>Community recovery</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>3. Relief/Evacuation Centre Planning with Nauiyu Community, Daly River, Northern Territory:</strong></td>
<td><strong>8. Sherwood Fires, south-east South Australia, 2018:</strong></td>
</tr>
</tbody>
</table>
| Improving the cultural considerations for evacuation centre design for the community of Nauiyu between 2016 and 2018. The process hinged on:  
  • a growth learning mindset and relational trust  
  • the presence of a community leaders able to ‘walk in two worlds’.  
This was facilitated by a community development worker funded by an NGO with trusted relationships in the community and connections into the same NGO’s emergency management program workers. | While recovery arrangements were not ‘triggered’ because it was not a ‘declared’ disaster, government provided facilitative scaffolding for a community that showed the signs of a level of individual, business and community resilience, indicating a low level of support was required. Information was provided about the pros and cons of setting up a recovery committee coordination purposes after the event, and the community decided to set one up and invite in assistance from agencies. |
| Aspect of recovery: Evacuation centre cultural safety                                        | Aspect of recovery: Community-led recovery committee                                |

| Ensuring good governance and local voices (independent and competent) in appeal fund management (Appeal Fund Committee) of an event that didn’t ‘trigger’ a disaster declaration. A collaborative coordinated approach saw the decisions made by the appeal fund informed also by the case management team and the Community Recovery Group. | Waimakariri Council, recognising the ongoing dynamic change facing a community and the capacity of the community to respond to this, worked with a strengths-based partnership approach with residents associations, social services and the Canterbury Earthquake Recovery Authority. The active and well-funded community board in existence prior to the earthquake played a key role. |
| Aspect of recovery: Appeal distribution                                                     | Aspect of recovery: Local government partnering                                      |

| **5. Christchurch Earthquakes, 2010–2011, New Zealand – All Right?**                     |
| The Social Recovery Wellbeing Committee (consisting of community members) implemented a communication campaign platform to empower communities to take up their role to re-establish population-wide health and wellbeing. The campaign was aligned to the universal supports in the recovery authority’s Framework of psychosocial support and led by both government and NGOs, nearly all of whom were from the locally impacted communities.  
The campaign had a clear mandate, ongoing funding, research and evaluation components based on established practice models and theories, used a diverse multidisciplinary team, action research based to be responsive and adaptable, carefully designed for community involvement and trust, and harnessed tools to promote engagement. | |
| Aspect of recovery: Psychosocial wellbeing                                                  | Aspect of recovery: More... |
Table 3: How the mechanisms for shaping the sharing of responsibility for risk were employed (case study indicated)

**Human and social recovery examples from the case studies:**
1. Bundaberg Floods Community Rebuild Group, Queensland, 2013
2. Waroona Complex Bushfires, Western Australia, 2016
3. Nauiyu Community, Northern Territory, 2018
4. Ravenshoe Café Explosion, Queensland, 2015
5. Christchurch Earthquake, New Zealand, 2010–11

**Participatory governance focus examples from the case studies:**
6. East Coast Bushfires, Tasmania, 2006
8. Sherwood Fires, South Australia, 2018
9. Christchurch Earthquake, Waimakariri, New Zealand

<table>
<thead>
<tr>
<th>Type</th>
<th>Influence on responsibility sharing is through ...</th>
<th>Example from the case studies</th>
<th>Actor who held the power to pull the lever for this mechanism (initially and this may change over time)</th>
</tr>
</thead>
</table>
| ‘Soft’ interventions | ... influencing decision making, behaviour or access to services and resources. | Communications to and between:  
- Communications regarding available grants for access by individuals in the community (4)  
- Listening to the community ‘have a say’ (5)  
- Communications about nominations for community recovery committee (7) | State and local government and NGO partners  
Private business (place-based)  
Local government |
| | | Case (navigator) services:  
- A network of case managers to support those impacted was employed and the appeal committee worked closely with this network to understand the immediate and longer term needs of people and allocate funds appropriately (4) | State government Department of Communities |
| | | Community development/recovery officer function:  
- Employment of community recovery/resilience development officers to assist with practical needs, community connections and work to optimise the social fabric of the communities (2, 4)  
- Red Cross Communities program with an embedded community development officer in the community for a period of years prior to the flood (3)  
- Recovery facilitators for distinct geographic areas: starting 14–18 months after the fires (7)  
- Contract for funding an auspiced community recovery officer position hosted by local government by means of Commonwealth Natural Disaster Relief and Recovery Arrangements funding starting five months after the fires (6) | State government funding collaborating with NGO and local government |
| Organisations and associations | ... changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing. | Emergent associations/committees specific to a task:  
- Community Rebuild Group formed two months after the floods (1)  
- Ravenshoe Café Explosion Appeal Committee formed (9 June 2015, 1 day after the explosion) (4)  
- Steering group initially – The All Right? Champions’ Group (5) | State government Department of Communities  
Department of Health, NZ |
| | | Existing community groups set up gatherings and services:  
- Yarloop Connect established to gather people for a meal weekly (2)  
- Cookernup Hall supported meals and donated good distribution with some Department of Communities support (2) | Community, with the support of state or territory communities/welfare |
| | | Regular informal information sharing to suit community/cultural preferences and context:  
- The involvement of the Elders in meetings with coordinating agencies at different times was informal rather than a formal committee set-up (3)  
- Government touching base with existing community representative organisations and associations in their meetings (9) | Territory Families and Red Cross |
<table>
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</thead>
</table>
| Contracts and agreements | … establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty) | Governance structure through an overarching recovery specific coordinating committee:  
- Community representation committee or inclusion in higher level coordinating committee e.g. Community Recovery Committee – note this means different things in different jurisdictions (6, 7, 8). For example: The coordination and governance with the presence of the Community Recovery Reference Group, established five months on, was to ensure a community-centred approach that built the capacity of local community members to continue the developmental approaches to recovery over the long term (6)  
- Community Recovery Committee established (with terms of reference and recovery plan). The chair of this committee was the CEO of the Tatiara District Council, and the council agreed also to service the committee, while actions were shared among all members. Included key community leaders and a community liaison (a landholder whose property was not affected). Kaiapoi and the Pines Beach/Kiaraaki residents associations set up earthquake committees and met with the council and the Canterbury Earthquake Recovery Authority (9)  
- State government was responsible for setting up the Affected Area Recovery Committee, which set up the Community Recovery Reference Group (6) | Local and state government agencies (apart from Sherwood where the community drove this)  

| | Between government and NGO or community-based organisation partners: | State government  

- Service agreements were put in place in the second year – for example, taking the lead in running the centre (evacuation centre management handled by Red Cross; Territory Families was director of the centre) (3)  
- At the state level, agreements were in place with the Department of Communities, Liteline and Red Cross. In fact, DCCSDS after Cyclone Yasi (2011) had funded some of the ongoing preparedness for recovery response in the form of first aid skills, through Red Cross, which contributed to the effective community first aid response to this event (4)  
- Council has a memorandum of understanding with GIVIT, originally to manage donated goods and services. They stepped in, in a voluntary capacity, to be on the board to manage the appeal funds (4)  
- Disaster recovery coordinator (facilitator/partnership broker) in support of community recovery was contracted under a memorandum of understanding between DHHS, Red Cross, Break O’Day and Sorrell councils and came through Natural Disaster Relief and Recovery Arrangements funding (state and Commonwealth). NGO (Red Cross): Responsible for meeting the contract terms. Break O’Day Council: Responsible for providing the accommodation, administrative support and relational legitimacy for the position (6)  
- Waimakariri District Council commissioned a report through the Social Service Waimakariri to build an understanding of the need and capacity of services to meet that need (9) | Local government |
| | State or local government-initiated: | State or local government  

- Community recovery officer, community development officer (2, 3, 6, 7) – for example, funding for Department of Communities, through WA Natural Disaster Relief and Recovery Arrangements to supply four community resilience officers – place-based for two years (2)  
- Department of Communities and local government together funded a 12-month community development position (4)  
- East Gippsland Shire Council contracted recovery facilitators for each of the two geographic areas: Glenaladale (two days/week starting six months after fires) and Mountain Rivers (Goongerah and Bonang/Tubbut), two days/week starting 14–18 months after the fires. East Gippsland Shire Council: Responsible for contract, accommodation or liaison with other agency support for this (Orbost Regional Health offices) and relational legitimacy for the position (7)  
- Grants program direct to community groups (6) |  

Community-funded and agreed to lead the rebuild:  
- The Salvation Army funded a retired builder and the Combined Churches Group engaged a worker to support the community to recover from the disaster (1)  
- The community used business as usual processes to seek grants and other financial contributions to ongoing issues such as native vegetation recovery (8) | NGO and community churches group connected to a broader Australian network for fundraising Community Recovery Group  

Federal health funding with private providers (5):  
- Full-time campaign manager appointed | The state/federal government |
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<tr>
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<th>Example from the case studies</th>
<th>Actor who held the power to pull the lever for this mechanism (initially and this may change over time)</th>
</tr>
</thead>
</table>
| **Collective enquiry and decision making** |  ... collectively querying and/or deciding where responsibility lies and/or how to share it. | • Creative agency contracted  
• Research and evaluation was separately contracted using an independent market researcher  
• A public health analyst at Community and Public Health facilitated a process evaluation of the campaign  
• Contracts also exist for the full-time campaign manager, a public health specialist, mental health promoters, communication advisors and administration staff, and later on mental health promoters for Māori, Pacific and culturally diverse communities, in addition to a family advisor | State government Community leaders |
| |  | Hearing from community and/or community-based agencies:  
• Initial community needs survey, interviews and forums (6)  
• Critical to the success along with an action-learning approach and sincere and open conversations with community stakeholders and other agencies (1)  
• Community meetings led by legitimate and authentic community leaders with skill sets enabling open discussion (8)  
• Meetings between Kaiapoi and the Pines Beach/Kiaraki residents associations’ earthquake committees and met with the council and the Canterbury Earthquake Recovery Authority (9) | Facilitator/partnership broker that was independent, NGO or local government aligned (depending on context) |
| |  | Formal and informal exploration through community development worker:  
• The work that Red Cross is doing over the long term in embedding a community development officer as part of this community assists the support community leaders have in ‘walking two worlds’ and the communication required to work with agencies, with and on behalf of the community. Deliberative decision making with Elders (3)  
• Community consultations on recovery projects led by community development officer (4)  
• Recovery facilitator with the support of the East Gippsland Shire Council enabled: community brief; appreciative enquiry approach using Asset Based Community Development; and evaluation approach developed collaboratively with East Gippsland Shire Council, key stakeholders, community representatives and the recovery facilitators | State government initial offer to community |
| |  | Co-designing the best approach:  
• State Recovery Office met with interested agencies locally to discuss need for a recovery committee. The community decided to establish this as a mechanism for community to tap into the information, resources and insights of agencies at the local level with links to the state government (8)  
• The CRC mechanism allowed for discussion with partners about the best approach to issues, meeting community needs, communications and included discussion on the role and function, representation and future of the CRC (8) | Committee/group chair – from various organisations (local government, state government, community) |
| |  | Strategic guidance, suggestions and decision making:  
• Community Recovery Reference Group (6, 7, 8, 9) – for example: The Community Recovery Reference Group used collective enquiry and decision-making processes to determine prioritisation of the recovery actions identified by the community for recommendation to the Affected Area Recovery Committee for approval. The community consultations and engagement processes used to determine the community needs and check in on actions from the beginning of the recovery process to the detailing of the recovery plan  
• Affected Area Recovery Committee (6, 7, 8, 9)  
• A high-level group was established at the beginning of the campaign to provide All Right? with strategic oversight and expert guidance. It comprised academics, social marketing experts, clinicians and representatives from local iwi Ngai Tahu, and met quarterly (5)  
• Disaster recovery coordinator and Professional Reference (Supervision) Group for the community development/recovery officer/worker (6) | Independent, NGO or local government-based workers Community leaders |
| **Social norms** |  ... establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions. | Influencing new social norms/ways of being in the challenging recovery environment:  
• The role of the facilitator/community development officer in each of the communities was to emphasise the building of relationships, modelling and utilising approaches, dialogue and collaborative skill sets (1, 2, 3, 6, 7, 8, 9) – for example, Asset Based Community Development professional practice philosophy and methodology  
• The All Right? campaign was established to normalise the conversations around wellbeing, which had a flow-on effect of creating champions for community initiatives, which were then supported where possible by All Right? (5)  
• Social norms among community members and community-based organisations: | Community members |
Case studies exploring community-led recovery and coordination

<table>
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<th>Type</th>
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<th>Actor who held the power to pull the lever for this mechanism (initially and this may change over time)</th>
</tr>
</thead>
</table>
| Vision statements | steering and mobilising responsibility sharing by outlining what it should achieve or look like (not strongly enforced or formally agreed to by the parties involved) | Community level – pre-existing:  
- Draw on local government community strategies across social, economic, built and natural environments (6, 7, 8)  
Community-level introduced (6):  
- Community accountability frameworks  
- Quality standards for community engagement  
| Committee set up to coordinate an aspect of the recovery |
| 'Hard' laws and regulations (not so common in supporting community-led recovery) | prescribing and compelling responsibility through the use of legal obligations and authorised sanctions/penalties. | This mechanism was not found to be used in the case studies of supporting the use of 'community-led' approaches examined. Inclusion and representation may be supported by police checks, Working with Children checks and so on | Federal or state government |

- The social norm of justice and equity was a strong driver for those involved in the Community Rebuild Group (1)  
- Linked to this is a philosophical stance that ‘we’re all in this together’, which is a norm of these service organisations (1)  
- Cultural values in communities: Legitimate community leaders and level of trust in relationships, depth of relationships between agency workers and community leaders enabled the communication of issues or else a reticence to risk the communication (3)  
- The social norm of justice and equity and the organisational expectations of accountability and transparency coupled with privacy for individuals were a strong driver for the community and the Appeal Distribution Committee (4)  
- The commitment from community members to participate based on a strong sense of altruistic meaning, a willingness to volunteer and an ideology that people needed their community, and people in that community needed to step up (4, 5, 6, 7) – for example: individuals from community stepping up into leadership roles after the event (7) and the ABCD approach assisting communities to identify their own priorities and contributing strengths (assets) builds impetus for ownership and action. Another example of a sense of giving (5) was the participation of people in the first aid skills learned (Cyclone Yasi recovery funding for future preparedness), which greatly assisted the first response (4)

Social norms (organisational agreed codes) developed in the recovery:  
- Bundaberg Rebuild Group Volunteer code of conduct (in the July 2013 Volunteer Guide) (1)  
- Code of conduct in operating terms of reference (6)

Social norms among workers in government organisations:  
- Cultural values in organisations – for example, norms of response agencies in involving community in decision to return. Repatriation decision making all happened in the Ops Centre. More notice required for the community around the return buses. In fact, could involve the community in this as they bring their extensive knowledge of place, and this would be less ‘do to’ than ‘do with’ (3)  
- People from government were strongly committed to helping communities and in some cases while they worked for state-based organisations because they lived in the affected community (warning: this ‘need’ to help can interfere with communities supporting themselves) (6, 8)  
- Professional standards for quality community engagement – for example, IAP2 and values statements such as the Red Cross fundamental drivers for the participatory practices and developmental approach (6)  
- Professional codes of practice: public service values and code of conduct (1, 6)

Committee set up to coordinate an aspect of the recovery

Committee set up to coordinate an aspect of the recovery

Government agency and workers
Case study 1: Bundaberg Floods, Queensland, 2013

Building a future together – supporting community agency and action on the rebuild

Summary
One of the priorities to enable the community of Bundaberg to recover equitably was to get people back into homes. In their role as lead for human and social recovery, the then Department of Community Services, Child Safety and Disability Services initiated a process of collective enquiry, the establishment of an association that was community-driven and supported by government agencies and a process of action learning to address the identified gaps in the funding available. The context in this situation was a catalyst for a different approach.

Data sources
This case study is based on the then Department of Communities, Child Safety and Disability Services Case 13 – Supporting community self-determination along with the Bundaberg Regional Council Local Disaster Recovery Group, final report, 5 December 2012, along with interviews with two public officials.

The flood and tornado event – January 2013:

- Bundaberg and North Burnett communities were impacted by Cyclone Oswald, creating the biggest flood event in Bundaberg’s recorded history. This was on the back of a flood event experienced in 2010–11, so parts of the community were already more vulnerable to the impacts. Psychologically, no one in Bundaberg imagined this occurring so soon after the floods that occurred only two years before.
- Thousands of homes were damaged, displacing around 6,000 people and affecting hundreds of businesses. The natural disaster has been described as brutal and terrifying for many and as an event that caused trauma and emotional scarring to local residents.
Initial response

Starting to realise the enormity of the task ahead, several community support agencies associated with the human and social recovery response started meeting on the first day after the flood peak. They then met on a daily basis each afternoon for quite some time. The meetings eventually became weekly, monthly and then bi-monthly.

The Human and Social Recovery Group (HSRG) provided agency staff and volunteers over the first 18 months, including the government departments of Communities, Human Services, Housing, Police, Education, Health, Q-Build, Queensland Reconstruction Authority, Emergency Management Queensland, Medicare Local and Mental Health Services. There were also a number of community and volunteer organisations including Red Cross, Uniting Care Community/Lifeline, Centrecare, Wide Bay Volunteers, Salvation Army, Global Care and the Combined Churches of Bundaberg. Bundaberg Regional Council’s Community Development Branch took responsibility for coordinating the HSRG committee and one of the councillors chaired this group.

The Department of Community Services, Child Safety and Disability Services (DCCSDS), through its community recovery functions, provided support to many eligible, impacted people who were unable to recover by their own means through the Personal Hardship Assistance Scheme. In terms of re-establishing housing that was fit for habitation, for those who were uninsured and with limited financial means, the huge gap between the available grant and the ‘scope of works’ required may have left them without homes.

The DCCSDS led the case coordination services and determined a need to establish case coordination, particularly for vulnerable people. Working with some of the different human services groups in the area such as the Combined Churches Group of Bundaberg, Uniting Care and others, they identified each person/family’s need, the social, psychosocial, practical supports and other supports required, and the agency that would lead the support in each case. Through this case coordination and partnership, the large numbers of families requiring assistance to return to their homes were identified.

The identified need

- The most vulnerable members of the community had no insurance, little or no funds and low incomes and were struggling to return to their homes.
• There were also a number of young families who could not afford insurance and did not qualify for assistance because the mother and/or father worked.

There were more than 150 families in the region that needed assistance to return home. For example, the original assessment of the costs to make one person’s house safe and habitable was $41,476, which was $31,271 more than the grants available to this person. The component to remove asbestos alone was $18,000. A solution for this family seemed impossible.

Figure 1.2: Flooding of the Burnett River, 2013

Collective problem solving

The HSRG director discussed the issue and options for assisting these vulnerable individuals and families with the local mayor, the appointed state recovery coordinator, the Queensland Reconstruction Authority and the Local Disaster Management Group. The outcome of these discussions was for the department to explore community-based solutions. The HSRG director and the regional operations manager from DCCSDS organised initial meetings to enable a collective response to the problem, bringing key community groups including the Combined Churches Group, Uniting Care, the Salvation Army, St Vincent de Paul, Global Care and service clubs together with government agencies.

Community meetings, uncertainty and emotion

At these meetings some people were showing high levels of stress and anxiety. Others were concerned that a new approach would be risky and outside of what they were ‘authorised’ to do. Comments such as ‘We can’t do that’, ‘I don’t have permission’ and ‘There’s no money’ indicated that people were unsure of what was possible and felt there were many rules and constraints that prevented them from doing what was necessary. The anxiety was understandable because many group members, staff and management were also badly affected by the floods. Others in the group were keen to try a new approach but were looking for direction and support but were not sure how to get it off the ground.

Authority to use a community-led approach

From these meetings, a loose strategy and model emerged that involved tapping into the case coordination and referral mechanisms, sourcing volunteers and donated goods and services and matching these with government rebuild grants. The Salvation Army also offered to provide funding to engage a retired builder who could provide expertise and support the rebuild effort. The HSRG director moved position at this time and a then retired public servant (who was travelling around Australia at the time) agreed to take over as the local director. He recognised the excellent foundation for collaborative work that had been established including the ‘case coordination groups’. He was keen to look at innovative solutions and received support and encouragement from the appointed state recovery coordinator from the Queensland Reconstruction Authority to continue with a community-driven approach. A number of key Queensland Police Service
officers also provided essential support. Instructions to enable the community to heal and to support local capacity became the guiding principles.

**Working out possibilities together**

A series of ‘coffee meetings’ took place. These were small, informal face-to-face meetings where ideas could be safely raised and tested, and fears and concerns safely and sensitively aired and dealt with. Upon reflection the local HSRG director commented that his approach was strongly influenced by his experience while ‘retired’ – mixing with ‘grey nomads’ and gaining an appreciation of the significant experience, expertise and resource that populations represent.

The people who attended these informal meetings were able to spread the word and search out who had materials they could donate and which of these grey nomads might be able to assist. Drawing on people with individual building skills, donated construction materials and cash donations, disadvantaged community members were assisted to get back into their homes. Psychosocial and practical support was provided to the builders to ensure they were prepared for the circumstances. DCCSDS staff were there when builders visited homes and were able to address other needs and escalate any particular circumstances as appropriate.

**Community capacity, ownership and leadership**

Although the initial concept was put forward by departmental staff, local community members quickly responded with enthusiasm and energy. Out of this collaborative learning approach strong and trusting relationships developed. There was a smooth transition of leadership to the community sector, which quickly took control of the rebuilding response efforts, including the Community Rebuild Group.

But it wasn’t all plain sailing. At the start there was some conflict, a lack of procedures, role confusion and, in this crisis situation, some community members went off and did things on their own, and sometimes in an uncoordinated way. However, the ‘coffee meeting’ approach worked well to use influence and persuasion behind the scenes. This was accompanied by good listening, empathy and exchange of trust, and a willingness to consider non-standard opportunities and solutions.

Documented terms of reference and guidelines developed as part of the rebuild model provided the foundation that helped resolve conflicts, prioritise the focus of the group and minimise uncoordinated activity.

There were many community organisations and volunteers involved. The key initial participants included the Salvation Army Tom Quinn Centre, a retired school principal who acted as chair and project coordinator, a retired builder who became the building coordinator, the Combined Churches Group, which led the client liaison, and advisors from DCCSDS, Queensland Police Service and the Queensland Reconstruction Authority. Many staff from Bundaberg and North Burnett Regional Councils contributed their effort and expertise.

**Retirees form a volunteer tradies ‘army’**

The successful rebuild strategy included use of a ‘grey army’ of retired tradespeople as volunteers. Some of these retirees were also travelling Queensland’s road system in their caravans, bringing with them something in short supply – a home for the rebuilders. Others were local retired people keen to give their time and effort to their communities.
Action learning (adaptation) approach

Because there were no ready answers, an action-learning approach was taken that allowed for answers to develop through cycles of identifying problems or opportunities, generating possible solutions, trying them out in a small way to test the idea, reflecting on the results together to learn about what work and what didn’t and to learn about the situation as a whole. This collaborative thinking, action, learning and adapting allowed for the complex task to be broken into smaller achievable components.

Support and capacity

The unique circumstances of the right people from the community and government, the right dynamics in the group, the action-learning approach and the broader context (there was a change to the state government the year prior resulting in a reduction in the public service, in budgets and a loss of corporate knowledge) all contributed to enable this. The critical ingredient was the Combined Churches Group and their willingness, indeed eagerness, to support their own community with the rebuild.

The outcome for the community and the Community Rebuild Group

The family with the shortfall of $31,271 had their house completed and they moved back in. The asbestos work was completed at 4 per cent of the quoted costs. In total, 64 home refurbishments were completed and more than $750,000 in funds was raised or provided in kind for the rebuilds. The Community Rebuild Group ceased operations in June 2014 due to a decline in referrals. Any new referrals were serviced through the Salvation Army Tom Quinn Centre.

Key lessons – not just for disasters

The Bundaberg 2013 flood was a disaster that many are still recovering from. The people involved have learned lessons that apply in daily life:

- Community ownership and leadership releases a wealth of knowledge, skills and other assets that are particularly relevant to that local community and can’t be imported.
- There are many retired people who are keen to continue contributing their knowledge, wisdom, skills and compassion.
- Solutions don’t have to be known at the start; they can be developed in a collaborative, trial and testing approach, especially if the right people and processes are on board. Start small and grow.
Mechanisms for sharing responsibility

The Community Rebuild Group was established to provide a solution to a whole-community issue, that of some members of the community being unable to afford repairs to make their homes habitable. They assisted victims of the flood to return to their homes by assisting with volunteer labour and donated materials to meet the gap between the cost of repairs and available funds. But it didn’t just happen. The process of the tending to the social infrastructure that would enable this was a critical enabler.

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, to an individual living a life they value or to a community having a sense of self-efficacy and capability. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Five of these are considered relevant to this case study and are captured in Table 1.1.
Table 1.1: Mechanisms for supporting community agency and action on the rebuild – Bundaberg Floods, Queensland, 2013

<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong></td>
<td>DCCSDS as designated functional lead agency for human and social recovery</td>
<td>The Community Rebuild Group was formed approximately two months after the 2013 floods.</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.</td>
<td></td>
<td>Initially, DCCSDS with their approach to leading the collaborative identification of the issue and then the co-design of the solution with the community.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Once an approach was agreed for trialling, the community leader from the Combined Council of Churches, and later others.</td>
</tr>
<tr>
<td></td>
<td>Not applicable</td>
<td>Case coordination groups</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong></td>
<td>Not applicable</td>
<td>The Salvation Army funded the retired builder.</td>
</tr>
<tr>
<td>DCCSDS funded some of the ongoing community activity of Uniting Care Queensland.</td>
<td></td>
<td>The Combined Churches Group engaged a worker to support the community to recover from the disaster.</td>
</tr>
<tr>
<td>Local and district human and social recovery plans underpin the understanding of general roles and responsibilities following a disaster; however, this arrangement went above and beyond these.</td>
<td></td>
<td>There was no funding for this aspect of the recovery apart from agencies that DCCSDS funded into the longer term – for example, Uniting Care Queensland.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>New terms of reference and roles needed to be negotiated between parties, with stakeholders self-funding the arrangements. The Community Rebuild Group’s July 2013 Volunteer guide contains roles and responsibilities.</td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong></td>
<td>Not applicable</td>
<td>This occurred both informally and formally as the Community Rebuild Group was formed, established and then as it undertook the action learning to try and then refine the approach taken.</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through</td>
<td></td>
<td>The actors involved included DCCSDS leading the process to begin with and then handing over the reins to local community organisations and individuals.</td>
</tr>
</tbody>
</table>
Mechanism for responsibility sharing (McLennan & Handmer 2012) | Lead prior to the event: Whose hand was on the lever to make this happen? | Lead in the recovery from the event: Whose hand was on the lever to make this happen? |
---|---|---|
collectively querying and/or deciding where responsibility lies and/or how to share it. | | Sincere and open conversations with community stakeholders and other agencies were combined with an action-learning approach that acknowledged there were no ready answers or standard solutions. Answers would have to develop through collaborative thinking, action, learning and adapting. |
Social norms: The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions. | As above in ‘Collective enquiry and decision making’. The social norm of justice and equity was a strong driver for those involved in the Community Rebuild Group. Linked to this is a philosophical stance that ‘we’re all in this together’ – that is, a norm of these service organisations. |
Vision statements: The influence of this mechanism on sharing responsibility is through steering and mobilising responsibility sharing by outlining what it should achieve or look like (not strongly enforced or formally agreed to by the parties involved). | Federal, state and local government staff Professional codes of practice: public service values and code of conduct | Federal, state and local government staff |

Bundaberg Rebuild Group volunteer code of conduct (in the July 2013 Volunteer guide)
Case study 2: Waroona Complex Bushfires, South East Western Australia, 2016

Collaborative public management – state and local government working beside local community people and organisations

Summary

Yarloop’s Community Resource Centre (CRC) manager provided support to the local community, enabling the remaining residents to sustain themselves through the period they lived in a closed town (due to contamination). The CRC supported local residents and the community as a whole, in partnership with the local government, the Department of Communities and Red Cross, through providing personal support services including hardship payments, advice, coordination and advocacy. This case study highlights the relationship between state government contracted service delivery, local government and the people in local community organisations and how this was managed in what was a complex recovery compounded by uncertainty that extended for eight months after the fire.

Data sources

The information in this case study is sourced from Summary report as at July 2017 (external), Waroona Complex Bushfires January 2016, Department of Communities, Government of Western Australia and supplemented with data from interviews with two public officials and two CRC managers (one from Yarloop and one from Cookernup), recovery newsletters and background notes on recovery projects.

Figure 2.1a: Location of Yarloop and surrounding towns
The fire event – 6 January 2016

A lightning strike at 7.25 am on Wednesday 6 January 2016 ignited the bushfire in the Lane Poole Reserve in the Shire of Waroona. High temperatures and strong winds with gusts reaching up to 80 kilometres per hour created an unpredictable and out-of-control bushfire that spread to the Shire of Harvey.¹

The fire impacted both the Shire of Harvey and the Shire of Waroona. The town centres of Waroona, Yarloop and Cookernup (which is 5 km from Yarloop) were situated in the fire footprint and all were very different towns. Yarloop, in the Shire of Harvey, is close to the border of the Shire of Waroona. When people evacuated, they didn’t necessarily stay in the Shire of Harvey; some people travelled north because that was where their family or connections were. For those who did not have family or other connections to go to, the local government worked alongside the Department of Community Services staff in establishing evacuation centres and managing these. Both levels of government provided staff at evacuation centres, which were located in Harvey, Australind and Pinjarra. They liaised with and provided support, guidance, information and assistance for community members affected by the fire, agencies and volunteers. The evacuation centre at the Leschenault Leisure Centre in Australind, for example, was established on 7 January 2016 and remained open until 13 January 2016 when all evacuees had either returned to their homes or been able to find alternative accommodation.

Figure 2.1b: Fire footprint

The ‘all clear advice’ from the control agency was issued on 23 January 2016. The prolonged threat to lives and homes lasted for 17 days, and the communities in both shires were impacted by this devastating bushfire with:

- two people tragically losing their lives
- a Western Power employee dying while working to restore power
- the fire affecting an area of 69,000 ha with a perimeter of 398 km
- 181 residential properties and businesses as well as many farm buildings and sheds destroyed in both shires, many in the townsite of Yarloop²

¹ WA Office of Emergency Management WANDRRA Activated Events website
Regionsof%20WA%20-%20(6%20January%202016)v2.pdf>

² WA Department of Premier and Cabinet website
• many residents of both shires impacted by the fear of losing their lives, loved ones, communities and properties.

In the initial stages it is often difficult for agencies that haven’t experienced disaster previously to work out the various roles and responsibilities of the many agencies involved, so there is a period where it is critical for these agencies to work collaboratively and with communities. Different parties identified shortcomings in the initial stages. These haven’t been reported on here, focusing instead on what went well.

First days and weeks – recovery hubs led by local government

The Shire of Harvey, local community organisations and the state government provided welfare support for all affected residents during and in the aftermath of the bushfires. Shire staff members and/or shire councillors also attended the notification interviews with Department of Fire and Emergency Services officers and affected residents, where people were informed about the fate of their home or other assets.

The Shire of Harvey worked alongside the Department of Communities to coordinate two welfare (evacuation) centres including finding the buildings, equipment and staff to work there. These were located in the neighbouring Shire of Murray’s Murray Leisure Centre in Pinjarra and the Shire of Harvey’s Leschenault Leisure Centre in Australind and provided a broad range of welfare support services. Due to the location this was a remote recovery.

Residents needed local government assistance to navigate local laws, building regulations and waste management in the first instance. The Shire of Harvey recovery centre and Waroona CRC were invaluable one-stop-shop resources for the impacted residents, with many services in one location such as Shire of Harvey recovery staff, four staff from the then Department for Child Protection for welfare support services, a Red Cross recovery officer who was available in the community through to January 2018 and the Salvation Army financial counsellor, available until 2018. Recovery activities were held in the centre and other community services having access to the meeting rooms to provide Recovery services to the communities. The Shire of Harvey recovery centre was open for 20 months – from April 2016 to December 2017.

The shire’s focus then shifted from evacuation to the recovery phase and staff coordinated the establishment of a recovery centre at the Leschenault Leisure Centre from 14 to 18 January 2016. The recovery centre provided a ‘one-stop shop’, with up to 16 government agencies and partners3 including charitable organisations available to assist people who had been affected by the fire. The shire’s role included setting up the centre and ensuring that all appropriate agencies were in attendance and encouraging interagency cooperation and support. Two shire officers attended the recovery centre at all times to assist and support community members, liaise with agencies and provide information. Other shire staff attended when additional support was required.

The recovery centre was moved to the Harvey Town Hall on 19 January 2016 and remained open until 29 January 2016. The shire’s role was similar to that performed at Leschenault Leisure Centre, and two staff members were in attendance at all times to assist fire-affected residents with a range of queries and linking them with other agencies that could offer assistance. In the initial period the recovery centre was extremely busy and a large number of fire-affected people were able to access services and support. Towards the end of the second week the number of people attending had reduced and the centre was relocated to the Harvey CRC.

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3 Key partners included: Western Australian Local Government Association and the shires of Harvey and Waroona as the local lead agencies; Department of Communities and other government departments; non-government agencies and local community organisations and groups – many of which are volunteers such as the Australian Red Cross, Salvation Army, Country Women’s Association, Lions and Rotary Service Clubs, church and community groups and new groups that were formed as part of the recovery process. The CRCs in Waroona, Harvey and Yarloop (whose physical building burnt down) were all key community partners.
Shire officers continued to support the recovery centre from the Harvey CRC site and to visit the Cookernup Community Hall outreach centre on a regular basis. They opened a dedicated recovery centre on 13 April 2016.

Shire officers have also assisted with:

- collecting and distributing donations
- distributing bushfire relief payments on behalf of the state government
- collecting information from residents
- referrals to appropriate agencies for continued support.

In partnership with Red Cross, officers from neighbouring local governments provided outreach to rural properties and outlying areas to assist and support affected community members and volunteers. Shire staff continued to provide support in the following ways:

- liasing with support agencies to ensure ongoing support to affected residents
- identifying available assistance and disseminating this information to affected residents and the wider community
- providing welfare support to affected residents and volunteers in the form of access to information, referrals and advocacy
- assisting with the collection and distribution of donated goods to affected residents
- attending weekly morning teas for affected residents at the Cookernup Community Hall and liaising with agencies to encourage their attendance
- organising monthly morning teas at the recovery centre in Harvey in conjunction with other agencies based at the recovery centre
- working with the Harvey Lions Club to organise a series of monthly ‘farmers breakfasts’
- coordinating the six-month and one-year anniversary events in conjunction with other recovery support staff and the local community
- identifying the needs of affected community members and providing advocacy to ensure that, where possible, their needs were met
- working with the community to identify and develop community development programs and projects to promote and enhance recovery
- working closely with community organisations and other councils to disseminate donated funds
- providing advocacy, advice and distributing vouchers (e.g. the WA Farmers Federation, Lions Foundation, Foundation for Rural and Regional Renewal, Lord Mayors Appeal).

During the early recovery, contracts were established through the WA Natural Disaster Relief and Recovery Funding through the Department of Communities to provide four place-based community resilience officers for 18 months. This facilitator role assisted with practical needs, community connections and working on the social fabric of communities.

The community resilience officers were based at the Shire of Harvey’s recovery centre and the Waroona CRC. The team also provided an outreach service by visiting displaced residents in their often temporary and/or new homes. While the fire swept through on 7 January, the staff were not allowed into the impacted areas of Yarloop until August 2016 because of health and safety concerns due to substance (asbestos, arsenic and cyanide) contamination. They did, however, open the town for the Anzac Memorial on 25 April 2016. People lived there during this time and many were extremely reluctant to leave, even though they had permits for re-entry, in case they weren’t allowed back in. Department of Communities workers met them at roadblocks to work with them. Eight months was a long time to sustain the level of visual devastation in the town they remained in.
Community-initiated action

The contextual overlay is important to cover as we look to what was community-led. As well as the impact of two of their residents dying in the fire, Yarloop was contaminated by asbestos, cyanide and arsenic from the built structures that burnt down. Roadblocks were in place and only about 50 people remained in town, with the remainder relocating more than an hour away to other towns. Having evacuated during the fires, Julie-Ann Ford, the manager of the CRC in Yarloop, managed to get back into town before solid checkpoints on the roads were established. Given the animals she had she couldn’t stay away for too long. While she hadn’t been involved in recovery previously, people looked to her from the beginning, when they weren’t sure what was going to help them, and together they would come up with a plan.

They held the first community meeting on 18 January. A small community with dongas was established for those who had no homes. Julie-Ann Ford commented: ‘The community and business worked toward this as a solution, but facilitation from government in regard to this wasn’t forthcoming because of concern for people’s health due to the asbestos contamination’.

The daily pattern for the community at this point was for a number of the women to go down to the club each day and cook for people. There were a lot of donations coming in at the roadblocks – fuel for the generators for the weeks without power, meat from a nearby donor. ‘It felt like a war zone, stuck in here for a month, which was my first time out’. They built up a good relationship with the private security company the state government hired for the roadblocks, taking out soup and firewood to them, particularly over the cold winter months.

The CRC was run out of Julie-Ann’s house immediately after the fires. They then moved to the Masonic Lodge and 18 months later found the CRC a home in the sporting facility in Yarloop.

While Julie-Ann had to travel to get services for her community, once the town was de-contaminated eight months later, most of the services, still needed, would come to the town. Red Cross and the Department of Communities would ‘come and be at an event and people did like seeing them; they had formed bonds with the community, who felt cared for’.

Government contractual flexibility

The Department of Primary Industries and Regional Development contracted the CRC as part of a network of around 105 CRCs in Western Australia. These are set up for isolated towns to provide community development activities, digital literacy education, computers and, for some, a doctor’s room for periodic visits. They are all contextualised to the needs of the community. The Yarloop CRC had an op shop, was a government/community information access point and was a community hub. Twice a week they hosted a morning tea, which was important to people.

After the fires, the department spoke to Julie-Ann about the situation and offered to cancel the contractual obligations of the current contract so that, as the manager, she didn’t have to comply with the reporting, the required business and community development events and workshops, and offer the video conferencing services, which they couldn’t possibly offer at the time.

These services were altered to providing support services to the community, and community development and the CRC worked together with the Department of Communities and Red Cross to do some of this. The CRC set up weekly sausage sizzles to get everyone together and talking; they held men’s days, art recovery (for people to make a new house number) and put on events to bring people together to make sense of what they’d been through and what was happening now.

Community members who hadn’t returned to Yarloop also contributed to community-led recovery. In Harvey, regular morning teas were organised by a local Yarloop resident who was living there. There

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were always local community members on the working groups initiating action that brought people together to achieve a purpose or simply get together.

Relationship with the shire and governance

As a CRC, before the fires they had little relationship with their shire council due to geography, as they were at the furthest point on the footprint from the shire offices. The first time Julie-Ann met the councillors was when she went to Cookernup, the drop off point for donations, weeks after the fire.

When the recovery group (committee) was being set up through the shire, the fire chief from Yarloop was nominated and he suggested they invite the CRC manager to be involved. Over time a great relationship has evolved between the shire and the CRC manager and the importance of knowing who the leaders are within the different local communities and having a relationship with the shire has been recognised. The committee consisted of the shire president, the community development officer from the Shire of Harvey, Department of Communities, Red Cross, a financial counsellor, the fire chief from Yarloop and the CRC manager.

In terms of community involvement in governance, the local recovery group had representatives from the community in the form of the fire chief and Julie-Ann as manager of the CRC, as well as a farming representative who was seconded for their networks in the community – he used to live in Yarloop and still lived close. This local recovery group would make decisions that went to the broader Local Recovery Coordinating Group consisting of state agencies (Agriculture, Communities, Environment, Premier’s department), community members, the shire council and Red Cross.

An observation from one of the informants reflects the findings in the literature review: ‘We had representatives from the community at the highest level; it takes it’s toll on them and you have to look after them, allow them the opportunity to debrief as they feel the weight of the responsibility representing their community’. For the broader community, recognising the diversity and the different avenues for responses and people to come together is important.

Information sharing was critical. ‘People will rort the system, or they will fall through the cracks. All the cross-agency staff would share information to sort out a problem’.

Dislocation

It was reported that residents who left after the disaster were unable to participate in a lot of what was happening throughout the initial recovery. When they came back eight to 10 months later, many re-established in another town. This highlights the challenge around involving dislocated residents in the recovery and in a continued sense of belonging to their town, and also potentially reflects the nature of the population and the reasons people lived there.

The community resource centre now

It is now four years after the fires, and with funding from insurance through the Shire of Harvey, Lotterywest and the state government, the Yarloop Town Development Committee has overseen the rebuild of the Town Hall (the façade remained standing). This is a purpose-built community building with a function area that can fit 100 people, along with a second function area that will house the op shop and a commercial kitchen. There will be doctor’s rooms, a laundromat, a computer room, two offices to hire out, a reception area and an office for the CRC manager. They will be anchor tenants.

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5 Maree Ellis, personal communication, 20 August 2019
Local government

One observation regarding local government representing ‘community-led’ is that local government has to depend on working with local people and the local networks: ‘People think local government know everything and everyone and have their names and addresses, and they don’t.’

Shire staff observed that local organisations don’t always have the energy and capacity to continue to carry the support for their communities in relief and recovery on for weeks and months. Being local residents, some also had to protect their own properties. Done properly, the right agencies will come in and sustain the work. ‘The local community burn out – this is what you have to watch out for – for any of the working groups you pull in’.

How the Department of Communities supported community-led approaches

Initial recovery response

Key features of the recovery service provided by the Department of Communities team were enabled by the team being:

• ‘on the ground’ from the beginning, both in the response and recovery phases holding weekly and then fortnightly meetings in the communities
• available, flexible, adaptable, resourceful, listeners and willing to learn
• respectful and developing trusting relationships with service providers, local groups and organisations and residents
• clear and honest communicators and not raising expectations or making commitments the team and other services couldn’t deliver: ‘Recovery staff and the community have to resist pressure to “have the answers” and be willing to learn as they go’ (Leadbeater 2013, p. 45).

Some residents called the team the ‘Purple Angels’ – this was humbling for the team, who felt privileged helping impacted people who faced so much adversity.

Figure 2.2: Community resilience officers David, Lori and Patrick (Anna absent)

The team was chosen based on experience, availability and ability to work in the affected area (geographic considerations). Some workers were driving an hour north to Harvey and others 2.5 hours each way from locations near Perth. Workers speak of it as one of the most humbling jobs they've ever done, and some are still connected to the towns.

A community-led approach was also supported by:

• working collaboratively with individuals and communities by engaging with them as early as possible through community recovery activities and events and listening to the communities about their needs and, where possible, addressing these, such as establishing a counselling service in Yarloop when the town re-opened

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6 Maree Ellis, personal communication, 20 August 2019
• engaging with existing service providers during the early stages, which built collaboration and integrated the recovery efforts with existing services, rather than the recovery teams being seen as ‘outsiders or experts’ and used the services’ local knowledge and resources
• balancing support and not getting in the way of community initiatives. Examples of this include:
  – The local Cookernup (between Harvey and Yarloop) community initiatives, led by two locals. Cookernup hall opened up the day after the fires passed through and provided meals and support to the firefighters. They remained in the community and provided food for people and received donations. They received and distributed donated goods five days per week, moving to four days per week as the need reduced and, to this day, they still have a ‘watch out’ Wednesday where people gather together and keep an informal eye on how everyone is faring. The Department of Communities was there to build relationships and trust with a view to providing further support as required to people and the communities.
  – Yarloop Connect was established by the existing Yarloop CRC manager (Julie-Ann Ford). Once a week they have a meal get-together for people to connect. Some go every week; some go once a month. People know that they can just drop in.

Working collaboratively to build resilience

Working collaboratively to build resilience by working with and alongside impacted communities, groups, families and individuals included:
• encouraging community groups, formal and informal, to initiate community activities and supporting them through the process
• providing personal support such as a listening ear, disseminating accurate information, advocating on their behalf with other services, referring and linking to other agencies, assisting with planning for the immediate and longer term, exploring problem-solving options, assisting with numerous paperwork requirements and sourcing practical assistance
• assisting with access to temporary accommodation and housing
• establishing and coordinating free counselling services
• farmers breakfasts, held monthly and sponsored by the local Lions Clubs, in both the shires of Harvey and Waroona at a local farmer’s property
• assisting with access to financial assistance such as assistance programs, insurance, public appeals and donations. One group that worked closely with the Department of Communities was the Church of Christ, whose Australia-wide members raised $55,000. Together we worked out a grant amount of $2,000 per eligible person to enable people to cover basic essential items not covered by the other assistance available.7 Some of the decisions that landed on the Community Resource Committee’s remit were donations from corporates such as Bunnings to distribute to affected people.

Recovery for the long term

Knowing that recovery is a long-term process and will vary between individuals, professional counselling services were sought for a minimum of two years, without cost to impacted residents. Not atypically, the Department of Communities counselling referrals started to increase in November 2016 – 10 months after the bushfires.

Mechanisms for sharing responsibility

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, an individual living a life they value or a community having a sense of self-efficacy. These are all considerations as community recovery evolves. The mechanisms are the

ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan and Handmer’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Three of these are considered relevant to this case study.
Table 2.1: Mechanisms for supporting community agency and action after the Waroona Complex Fires, Western Australia, 2016

| Mechanism for responsibility sharing  
(McLennan & Handmer 2012) | Lead in the recovery from the event: Whose hand was on the lever to make this happen? |
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<tr>
<td><strong>Soft interventions:</strong></td>
<td>Contracts – through Western Australia Natural Disaster Relief and Recovery</td>
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<td>Arrangements funding for the Department of Communities to supply four community</td>
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<td>resilience liaison officers – place-based for 18 months. This facilitator role was</td>
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<td>to assist with practical needs, community connections and working on the social</td>
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<td>fabric of communities.</td>
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<tr>
<td>**Organisations and</td>
<td>The Yarloop CRC manager modified the CRC’s services to better support a community</td>
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<td>associations:**</td>
<td>that was locked down for eight months (roadblocks to determine entry because of</td>
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<td>safety concerns (asbestos, cyanide, arsenic)).</td>
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<td>The Department of Primary Industries and Regional Development was flexible with the</td>
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<td>contractual arrangements to allow the CRC in Yarloop to provide the support</td>
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<td>services required by the community in the recovery period.</td>
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<td>The Department of Communities sought agreement through a business proposal</td>
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<td>through the WA Natural Disaster Relief and Recovery Arrangements to provide four</td>
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<td>community resilience officers who could offer individual and whole-of-community</td>
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<td>support.</td>
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<td><strong>Contracts and agreements:</strong></td>
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Case study 3: Evacuation Centre Experience and Planning, Nauiyu Community, Northern Territory, 2018

‘Making sure people are walking that comfortable walk, in there, with you’

Summary
This case study offers the perspective of one well respected Aboriginal community leader’s experience of working with agencies and her community, alongside other leaders, in the 2016 and 2018 floods experienced by the Nauiyu community in the Northern Territory. We recognise that there are other leaders in this community. Naming this a community doesn’t reflect the complexities in the history of Nauiyu, the coming together of different Aboriginal mobs from different nations and country to be based in one locality in recent history and also the presence of the Traditional Owners.

Data sources
The information in this case study is primarily sourced from interviews with five key informants, comprising one community leader, two non-government organisation managers and two public officials. Other data was from the Red Cross Daly River Flooding Jan 2018 After Action Review final report.

In this case study we examine the Nauiyu community’s experience of the evacuation centres in urban centres. The key enabler and perspective on how it went for everyone in the evacuation centre was the relationship focus: (i) a sense that being listened to and responded to can prevent issues developing; and (ii) approaching it all with a learning mindset. Learning from each other about how to ‘be’ with each other as a community in its diversity in the different cultural setting (the evacuation centre, not on country) and learning while taking care with the relationships between the community and agencies. ‘Your mob’ and ‘my mob’ are referred to, with no distinction in ‘your mob’ between agencies, demonstrating a compelling case for seamless coordination and communication between emergency services and relief and recovery agencies for the benefit of community facing interactions and partnering on decisions. The issues around representation from the community (for government agencies to talk to), the role of community leaders as mediator or ‘walking in two worlds’ in the experience of dislocation (for this community) are explored along with the importance of appropriate communication promoting calm, connectedness and hope and the continuity of relationship and learning.

Reflections on the question of how government can support and enable community-led approaches in the culturally diverse context of the Northern Territory with its extensive area and small population of around 250,000 centred in Darwin, Alice Springs and Katherine and limited resources are also provided.
Flooding 29 January 2018 – 9 February 2018 – Daly River, Northern Territory

Nauiyu is mostly a Kriol-speaking community located south of Darwin on the banks of the Daly River. The Daly River has a large catchment area that covers approximately 52,600 square meters. The river is prone to flooding in the monsoon season, and this seasonal flooding has had a significant impact on the Nauiyu community over the past century. In more recent times, on 29 January 2018, the Nauiyu community and surrounds experienced flooding, and subsequently 348 people were evacuated to Darwin. Road closures due to flooding meant that evacuees were initially transported by boat, road and helicopter, with upwards of 40 private helicopters chartered to assist with the evacuation. The helicopters ranged in size from two-seaters to 15-seaters, which meant families were often separated. They were flying amid storm fronts, creating a situation of high psychological arousal. The staging post was at Batchelor where they were received by Territory Families and Red Cross staff, given blankets, water and a snack, and registered before boarding buses for a further two-hour journey to Foskey’s Evacuation Centre at Darwin Showgrounds. About 190 people were in the evacuation centre each night for 15 days, closing on 12 February, and in that time Red Cross was contracted to provide evacuation centre management and staffing as well as well as Register.Find.Reunite.

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8 Medically vulnerable people such as pregnant women, older people and people with ongoing medical assistance needs were evacuated earlier. As flooding started, the health services made this risk-based decision.
The Department of Territory Families is the lead agency that coordinates the welfare function under the Territory emergency plan. There are a number of other territory government departments and not-for profit organisations that provide welfare services in a declared event. One such not-for-profit is Red Cross. Red Cross is contracted to provide evacuation centre management expertise, services and training to the Welfare Group. This management includes running the evacuation centres. Under this arrangement, for this case study exploration, we have considered Red Cross as a part of the government services that are there to support community-led approaches.

The Red Cross After Action Review indicated that their goals included the following:

- ‘Consultation with the people affected by an emergency is at the forefront of Red Cross response processes and communication plans.’
- ‘Communities are empowered to lead their own resilience building and decision-making in an evacuation centre environment.’

More broadly than the evacuation centre management, of interest is the Red Cross Emergency Services program, which has completed a project named Reimagining Resilience,9 across three different communities. Having been evacuated twice recently, once in 2016 and then again in 2018, the Nauiyu community was one of these communities. As part of this project Red Cross organised cultural immersion weeks where Territory Families and other emergency management lead agencies spend time on country finding out about deep cultural practices. It was during one of these weeks that Red Cross interviewed community leader Miriam Rose Ungunmerr

What is key in this case study is the Red Cross’ investment through its Community Programs division. Since August 2013, Red Cross has invested in a community development officer, an Aboriginal woman, who lives full-time as part of the Nauiyu community. One of the learnings for Red Cross here is how this allows them to work more collaboratively within the organisation, between the community programs and the emergency services. The sustained commitment to a community development presence in this community has enabled emergency services outcomes to be integrated into the ongoing community development work. Maddy Bourke, a Red Cross community development officer, attributes the outcomes to the quality of the relationship:

‘During the past six years the relationship between Red Cross and Nauiyu community has been crucial to the smooth response to emergencies. The community has embraced the training provided [psychological first aid and emergency services training] and every year we can refresh the training, which is always well attended by the community members. Also, in times of great stress such as the loss of a community member or Elder and major accidents which effect the community, Red Cross has

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9 Other Red Cross projects with Aboriginal communities include Art Across Recovery (looking at whether it helps people dealing with trauma) and defining who is in their leadership team.
provided psychological first aid and has been available seven days because I've been living in the community.\textsuperscript{10}

Some changes to this have recently occurred involve Maddy living in the community for only one week a month. Maddy is hoping that what has been built in terms of trust and respect will continue despite the fact that she won't be a constant presence:

‘Now I no longer live and work exclusively in the community and will only be there for a few days a month it may be difficult to maintain those relationships. Community members trust those people they work with and see every day. The role will become just one more organisation that comes in and tells them what to do without spending time with the community.’

‘I have over this period built up the trust of the community Elders and as a result been able to effect change in the way community responds to situations of emergency and great sorrow or stress … Trust is built from the community getting to know you and know they can rely on you in both the good and the bad times. I have tremendous respect for the community and their resilience in times of adversity … As a result of this I was included in many of the decision-making committees and was relied upon to help in many various situations. I was also able to establish a good rapport the young people of the community gaining their trust over the years I have been there.’

Over the period of preparing for and rolling out evacuation centre operations, support also came from the Welfare Group of agencies, and this included 110 personnel. Welfare recovery centres in Nauiyu were subsequently open for two weeks after the repatriation of community members, and 86 homes were visited as part of outreach activities in partnership with other Welfare Group members. Hardship payments continued until 27 April.

This case study captures the experience of the community through a frame of ‘community-led’ recovery from one of its community leaders, Miriam Rose Ungunmerr, and also from the perspective of both the Red Cross and Territory Families from the Welfare Group. It explores the Red Cross work with the Nauiyu community after previous flooding events in planning for a culturally appropriate set-up for the evacuation centre.\textsuperscript{11} Territory Families has also contributed reflections on the unique challenges of this work in their context. Questions focused on exploring the support of community-led approaches and relating these to the evacuation centre experience and repatriation.

Community leader perspective: Miriam Rose Ungunmerr, June 2019

During the June 2019 cultural listening week, Red Cross sought and received permission from Miriam Rose Ungunmerr to have her thoughts recorded and incorporated into this case study. The following are some of the findings from this hour-long conversation. We have been intentional about not changing the language Miriam Rose used. She has since confirmed that what is written below about the conversation is true to her intent.

Some of the themes relevant to how government can best support community-led recovery are expanded on below under the headings:

1. A relationship focus,
2. Representation,
3. Role of community leader as mediator,
4. Appropriate communication,
5. Continuity of relationship and learning,

\textsuperscript{10} Personal communication with Maddy, Community Development Officer, Community Programs, Red Cross, 5 July 2019.

\textsuperscript{11} Where appropriate other perspectives should be sought to cross-check findings in this case study.
1. A relationship focus – learning from each other, learning how to be with each other

Integral to her perspective on working with agencies, with and on behalf of her community, was Miriam Rose viewing the bigger process of ‘learning to be with each other’. This related to both the community with the agencies in this situation, and to the community in its diversity.

**Learning between the community and the agencies there to support the community**

- ‘The first time we went out [2016] we were all in learning mode in how to deal with each other.’
- Regarding the excellent response of agencies for the people who were ill – ‘… and everyone’s [Nauiyu community and agencies] still learning how to be with each other and they were good in that sense.’
- Community leader as mediator – when a charity offered a quiet place away from the community for Miriam Rose – ‘We can book a room for you all in the city to get some quiet time – ah, thank you, but look, I want to be there just in case something happens and that you’re not understanding what the needs are in the people as we go through this process of learning from each other.’

**Learning within the community**

- Regarding behaviours that weren’t acceptable in the evacuation centre – ‘… and that’s all learning, knowing how to deal with these things.’
- In relation to climate change – ‘This is happening one too many times because of the climate and stuff and we’ve got to go with the flow and learn and be good with each other and just with our people too that run amok.’

In terms of the evacuations centre and how the design of the 2018 centre was improved over the 2016 centre, Miriam Rose reflected on how it came about:

‘I think there was that thing of them not knowing how to do things with us and us not knowing what their expectation was. I think that brought it to a head (a live and learn thing). It was picked up and noted when we were there the first time … It made it feel better for the second time because we knew at least if we were going there again; at least they have a little bit of an understanding of how we are going to react, you know, towards each other.’

Miriam Rose commented on what made the 2018 evacuation centre better than the previous one:

‘There was things I suppose put in place from the previous time we’d been with you. Listening to us – what it was – two people [community leaders Miriam Rose and Mark] that was there – that is happening this is happening, this has to be corrected somehow… Just little things like that that we brought to their attention.’

‘For example, we got evacuated twice. The first time and the second time there were people that were visited from across the river and we’d all get rounded up and chucked on and taken to you and we’d say those guys there are not from Daly – they’re from across the river. Can something be done about sending them back to where they’ve come from? They just got stuck because the water come up too far and they can’t get back to their communities across the river and just little things like that because in some cases they were trying to cause havoc with us, with people from our side that were in Darwin, because there might have been issues with people back here with the people that travelled in with us across the river and it was still brewing and it wasn’t our doing; it was them.’

‘And we’ve heard that you can’t get too agro in shafting people out of the place, but if there are things in place and we’re aware of it, that we’ve brought up with you, and if that’s in place, we can still educate people in saying that’s not accepted in here and you have to go and if you want to go home to wherever you’ve come from, we can … hatch a plan or something, that’s like a gentle way instead of causing more humbug.’
Relationships with security and night patrol and the community

‘The gate people are good and you’ve got people here … sitting with them at the gate and the security people they’re now much more friendly, sitting and talking, just wandering around. People walk up to them, start talking to them and they’re very approachable.’

In relation to the design of the evacuation centre with particular places for different family groups:

‘That still needs a bit of tidying up because you’ve got the unmarried fellas, and sometimes that can be a bit of an issue, and because of ceremony or other reasons as well.’

And for the older people who were housed in the suburbs, Miriam Rose checked in with Bridget (an elder in the community sitting with Miriam Rose during the interview), asking if she likes the idea of being separated from everyone else. Miriam Rose told the story:

‘We’ve got the health workers and nurses that stayed with us in the pavilion, but at their place they’ve got aged care workers from here [Nauiyu] that they are familiar with, they know. The shire puts people in place to be with them at all times. They organise buses for them if they want to travel around places or want to sit with us for half a day, connect with family … shopping … and it’s always really happy. The people that we’ve got at the pavilion are always really happy to see them too … and you’ve organised a priest to come in at different intervals and they’ve come and done services at the showgrounds.’

‘I thought they’d feel uncomfortable just being away from us, but knowing that they can come and go, whatever, if everything is put in place for them to visit during the day before they get too tired sitting around. It’s good that they enjoy being in another place in Darwin because then they’re away from all the humbug and the noise and then there’s all the great grandchildren, but, yes, she’s happy … She’s got a swimming pool there, but she forgot her bikini.’

Regarding coordination, as a community leader Miriam Rose spoke of what she knew of the multi-agency coordination meetings and the value again of the human connection in the relationship rather than the transactional:

‘Every now and then they’d have meetings with all the service providers here, and it was different from what we were having with you [Red Cross coordinating the evacuation centre at the pavilion]. Catholic system and state government that have got schools out here, just updating the people there that have people working on the ground here, about what’s happening, and it was separate gathering from what we had with you when we were in town [Darwin].’

‘And then we’d get feedback from whoever the bosses belonging to the service providers here like Ironbark, Catholic Education and Department of Health and [they’d] say “it’s OK, we’re aware of what’s happening at home and with you guys there”. And some of them made efforts to come in and catch up with us. The long socks from those departments, which is good too, not just come here [Nauiyu] or in town [Darwin], because for things that they want or things they want us to do for them, knowing that they just come, and it left a really good feeling in saying they still care for us and worry for us, to be there for you, and because of the water as well.’

In relation to the future, Miriam Rose reflected:

‘Nature’s funny and she does things in her own way, and if there was going to be a time when we’ve got to come again to be with you [I] think that would be almost even better than the last time.’

2. Representation

Miriam Rose was one of the two key community leaders that agencies decided to talk to about finding out what the community wanted. The other one was Mark Casey. Miriam spoke of her relationship with Mark:

‘We get on like wildfire, he speaks my mother’s language, he [has a] police background, me, a teaching background. He can be really, really heavy with people playing up. It’s good – we’ve got different ways of talking to people … whether they’re kids or adults.’
Miriam Rose reported that their role was to talk, update on things that were happening and if there were any things that the Elders wanted to update agencies on, that was their opportunity. This was separate from the general meeting that they’d have with the community every day.

This is how she saw the process in 2016 for agencies connecting in with the community:

‘They were having problems with us in finding one or two spokespeople for the group – I suppose almost 500 people – and they couldn’t spread themselves out to go individually to speak to all the people there and so decided to have two people to talk to.’

‘Also wanted to make it into something to use in the future, me and another person, also get other Elders from other language groups. Sometimes it was just the two of us and sometimes they/we got the other language groups to come in, so we’d have sessions in the centre, as often as.’

One of the impacts of being a community leader is limited time to yourself:

‘You’ve got the community coming to you and all the agencies as well … sometimes that’s an issue with me personally and I just get away from inside the pavilion and go and sit in the kitchen area. It’s not just our mob, it’s people from that side too, government bods, or other offices or businesses.’

3. Role of a community leader as mediator in the collective experience of dislocation (for this community)

Every community will have a unique experience of being dislocated from home depending on their connection to country, previous experience of evacuation and what this meant, their history and many other contextual factors. The quotes below demonstrate this:

The 2018 experience of having left Nauiyu was unsettling for people in the community:

‘It’s not a nice thing for you to be picked up and taken to a place and you feel uncomfortable about leaving things behind.’

It was important that there was information about the reasons behind the decisions that were made. The ‘why’ is important to the sense of self and community efficacy (e.g. the quote below about a house being out of the water):

‘The other thing was worrying, because not all of the houses were in water and they were questioning why should we go when our house is out of the water, because they can isolate some of the houses with power and things, when they are out of the water. But they said, no, everyone has to go, if your house is in the water or not because we got to turn all the power off.’

There was also a gratefulness for the care from agencies and people from the community who volunteered for the elderly, the children and others. While some elderly and sick members of the community needed to be accommodated in houses separate from the evacuation centre, arrangements were made for visits to the evacuation centre (pavilion), ensuring continued connectedness with the community:

‘… people that had to go earlier than the general population of the community – the elderly and sick. People that needed our support and some of the aged care centres were notified in taking up people that needed one-on-one, that was good, either here in Darwin or in Katherine. Even just setting up a house for the older people in a suburb for that time that they were with you (the agencies), it was good in a way, the setting up. We had issues this time (in the 2018 evacuation), that arrangement had to be made and they feel uncomfortable in not having family with them, in the other house and others have volunteered and gone and said we can help them, and stayed with them, helped them with their meals which is good. And good in the sense that everyday they’d come and sit with us for an hour at the pavilion, from whatever suburb they were at, and that made them feel good too to break the monotony of being away from family and being alone.’

As a community leader, Miriam Rose was keeping a keen eye one how the more vulnerable were able to access the support they needed:
‘And the people that had fallen ill, and needed attention, you were like a lightning bolt in getting help for them even. You know even if they had to go to hospital, St John’s ambulance would pick up … that’s how I knew you were on the ball with that sort of thing even. Even if they wanted to see a doctor, you had all that set in place, they goes to Palmerton Health Centre, which was good, and there was no issue with people waiting around to be seen to, which was excellent, in setting all of those things up.’

Some of the children and young people who were about to leave for boarding school weren’t allowed to bring what they needed through the evacuation and agencies were able to find a work around for this:

‘… we were only supposed to take a small bag with us to come with you and leave a lot of our good things back here – we weren’t able to take the cases and stuff and the bags for the kids that would look to go for boarding down south. Territory Families were really good in that sense that they took the kids shopping and got everything they needed – bathroom stuff, bags, warm clothes, shoes. And just with the shoes – too for the kids that were there with us all the time – you organised for shoes as well to wear to go to school.’

She was also keeping an eye on the security and policing that was occurring, essentially, the manner in which it occurred:

‘Security would come round and they’d [community members] sneak round and jump over the fence. We’d talk to them later. Police were there too. They were just as good and not really hard-and-fast kind of thing with people because I think they had an understanding too because this is the first time that we’d been with them and everyone’s still learning how to be with each other, and they were good in that sense.’

In the 2018 evacuations, the community leadership were involved in setting up the cultural expectations of people in the community:

‘… when we went the second time I think the people had got the message because we’d talked to them too and said, “Hey, look, we’re not here for a party; we’re here because we’ve got issues at home with water and stuff and these people are trying to look after us and make sure that we’re comfortable”.

‘… and managing people who might ‘run amok’:

‘… sometimes we go there and there’s been unrest here [in the Naiyu Community] and people are still unsure if everything’s going to be OK when everyone’s altogether in each other’s face. And that’s even just a big experience for us … I wonder how people are going to get on when people are back there [evacuation centre] when we’ve had issues here, are they going to rip up the room or … but no they were good and I know you don’t want to be hard on people but we’ve always come up and said I think these people have got family in the suburbs, maybe they go and have a bit of a rest there for a day or two because that’s not accepted in here – the carry on and stuff like. They got the message in that sense too. And that’s all learning, knowing how to deal with these things.’

One of the roles of community leader was to keep the communications between the agencies and the community flowing:

‘… when we were leaving – some of the people were saying, “Oh my god, there’s only two buses. We don’t want to be travelling with that mob that we’re fighting with”. And I said to Annette in charge, “Can you put it across the PA system that there’s more than just one bus because people are feeling uncomfortable in travelling with people that they don’t really want to travel back home with in the bus”? So they made an announcement so that everybody was aware. But I’d gone back and said, “It’s OK, there are other buses coming, you don’t have to travel with people” because there was unrest or culturally sensitive. “With this other bus you can be peaceful or at least at peace with yourself in being able to travel with just your immediate mob”.

Case studies exploring community-led recovery and coordination
4. Appropriate communication, promoting calm, connectedness and hope

Some of the methods used to communicate, particularly video updates of where the water was around the community, and the welfare of the animals, promoted a connection back to country and a sense of hope that all was well:

‘There’d be posters around about what was happening and your mob would come out to the community, while we were there with you getting videos and they’d bring it up at dinner time and put it on with the recordings that they’d made of the community (the water) and the animals and they’d be looking forward to the updates of what was happening in the community … instead of you kind of … I mean, sure your mob spoke, you spoke to us saying this is what happened, this is what we saw and you brought some pictures back to us and you might be able to see your animals, dogs, pigs … and that made people feel really excited about it, that all was well.’

Regarding Centrelink visits to the evacuation centre and the communication required to ensure everyone was included in this even if they had self-evacuated and were not staying at the pavilion, Miriam Rose said:

‘The community leaders had taken their names and where they are going and we don’t see those guys until everything’s all clear – we send messages to them and say, “Hey …” or they come and visit us at the pavilion and if there’s things that they’ve got to fill out like Centrelink and whatever else that you’ve set up for us in there for IDs and stuff and whoever else that we can send messages out to them and say, “Come. This is all set up here. This thing’s at a certain time. You’re included”. Centrelink were really good, trying to do things right there.’

When people were able to return home, if people were missing from the bus:

‘… we also say, “Hey, we’re going home now, so if you miss the bus you find your own way home now”. But I’ve made a point of being the last person to leave [in 2018 and 2016], just in case and there’s room in the car for if I had to chuck someone on to bring back here. And people are aware that I do that before everyone leaves and I’ll be there until such and such a time and I’ve got to go too … And the health mob go last.’

5. Continuity of relationship and learning

The conversation turned to what needs to happen outside of the emergency time and the importance of relationships and the changeover in staff that occurs in agencies that work with the Nauiyu community.

There was no expectation that things would remain continuous, rather a compassionate recognition that ‘you have to have a rest and go be with your mob/family’. The impact of this relational trust was significant in terms of what the Nauiyu community leaders could expect and what they know is expected of them, as indicated by this part of the conversation:

‘… then another person comes in and there are changeovers in the place at times, and we go looking for somebody and then they say this one here’s in their place and you’re dealing with another new person that you’re not familiar with … sometimes that’s hard … should I or shouldn’t I, or should I just leave it? A lot of the time it it’s not really serious stuff but thinking, “Oh, how do we do this, change that, or how do the people do whatever it is that’s happening here?”’. And sometimes I’m standing off because I don’t know that person well – the people that I’ve now met, they’ve been exposed to us and we’ve what is expected of us.’

The relationships that Nauiyu community leaders and other have with the police also featured, demonstrating the importance of being known and having credibility either by office or relationship and community standing:

‘It’s good that some of the policeman that come to support the coppers here [in Nauiyu] are some of the policemen that we know from previous times when they’ve been stationed here. And that’s good for us.

12 Hobfoll et al. (2008) developed the five essential elements of immediate and mid-term mass trauma intervention, which include promoting (i) a sense of safety, (ii) calming, (iii) a sense of self and community efficacy, (iv) connectedness, (v) hope.
So you’re not kind of “what’s he gonna say”, and just the way they talk to us, some of them are kind of heavy, and when we’re coming back, the same thing they wait for everybody on the highway, tip people out if there’s drink and grog in private cars and that has to be “Don’t take anything back because there’s gonna be copper’s there”. It was just by accident that we ran into them on the highway and they looked and said, “Oh, it’s you…”.

A couple of days before the majority of people we’re ready to come home, people were invited to travel on a bus to pick up the cars from Five Mile and get organised:

‘… there’s a big clearing and we leave all our cars at Five Mile … and the emergency services boats pick us up to take us up to Five Mile and jump on the choppers there.’

The gates, which Miriam Rose agrees are necessary for the security of the community, were closed at Five Mile and they wouldn’t let them in:

‘… so I rang Berimah Police Station because I was talking to [current Police Commissioner Reece Kershaw]. “Are you going to tell your fellas to let that mob in because they want to get their cars?”’. And the guy from Berimah rang them and they let them in.’

As a community leader, Miriam Rose was encouraging agency people, be they volunteers or paid, to come back and deepen the relationships and knowledge of their culture and country:

‘It’s not overnight that we’re going to get to know each other.’

Community-led evacuation centre plan update

The set-up of the evacuation centre to become a more culturally appropriate design evolved from the learnings from the 2016 evacuation. Maddy, the community development officer said:

‘Certain problems during that evacuation came to light due to the culturally inappropriate way families and community members were lumped together. In the aftermath of this event I and other emergency staff sat down with the community Elders and asked how we could set the evacuation centre up in a more culturally appropriate way.’

‘I worked with the community Elders to begin with as they direct the various family groups in community, and once the Elders understood what we were trying to achieve, … the wider community members, the community, understood how things would be set up in the evacuation centre and felt more at ease around the 2018 event because they knew that each family group would be together and not on top of another family group. An evacuation centre can be daunting for people from community; knowing they would have their own space made this situation less daunting.’

‘The result was then used as the blueprint for the 2018 evacuation and worked well … There were less altercations and escalations and the community members were more at ease in the surroundings … I believe with the climate changes that are occurring there will be more major events, and for remote communities, preparation will be the key to smooth evacuations and stays in the evacuation centres.’

The process of reviewing the evacuation centre after the 2018 evacuations happened organically over many visits to Daly River and informally during the first cultural awareness workshop that Red Cross organised. During the second cultural awareness workshop, there was a more formal review and update of the evacuation centre plan scheduled into the itinerary. This was completed by local leaders and participating emergency services providers and gave an opportunity for learning and feedback on both sides. This case study is a part of capturing these learnings.
Practical enablers and challenges from the agencies’ perspectives in supporting a community-led approach to recovery

The relationship focus and continuity of relationship to build relational trust and enable communication is a key enabler. Others that relate to this include:

- Local community leaders and workers from NGOs or government agencies can be a conduit or facilitator, providing key contacts in and communications to and from the community.
- Information sessions are improving, with community members sitting alongside our workers, police and the department director. If the agencies managing the recovery centre have messages about behaviours on site, they will have had discussions with the Elders prior to the meeting and they will take the microphone themselves and give messages to the community about this or particular meetings or activities the next day.
- One of the learnings from Cyclone Trevor, which occurred in 2019, was working with the Larrakia Nation organisation (Saltwater people and Traditional Owners from the Darwin area). Their Elders welcomed the Boroloola community, saying, ‘You are welcome here. You will respect our land and we will show you respect. You won’t get any trouble from our mob and we expect you to show respect’. This also linked the Larrakia Nation organisation’s resources with night patrols, interpreter services, cultural connections and connections with elderly services and programs.
- The ‘volunteer’ model for government workers being involved in this work means that no one is made to do it. The people who volunteer to do this are people who have an interest in this field and genuinely like people.
- Leadership across partner agencies is important – they are experienced, trained, understand psychological first aid and have community ownership. Joint meetings of leadership teams enhance the potential for the seamless delivery of services, and the one face that the community sees – ‘your mob’.
- Support for the services in repatriation is vital. While welfare support workers were supposed to go back to the community for two days, they ended up staying for two weeks, and this was of great benefit to the community.
- Continuity of staff and forming relationships from the beginning through to the repatriation was important, including the relationship with the Victoria Daly Shire, which employs a lot of people.

There are a number of practical challenges for government agencies that are required to be agile enough in these situations, build relational trust and enable a community-led approach to recovery:

- the particular operating context of the Northern Territory, a low-resourced jurisdiction with a broad range of population and large land area
- increasing numbers of disasters that are putting the strain on business as usual
- ensuring inclusion and representation in decisions owing to the number of kin groups in one community (due to its history as a mining camp and a mission)
- knowing how to support the community leaders and representatives without putting added strain on them
- safeguarding cultural safety so as to better respond to the holistic needs of the community
- the public holiday phenomena – flooding in 2016 was on Christmas Day, then in 2018 on Australia Day; this, along with the lower numbers of staff working over this period, poses particular challenges for staffing and calling on private (e.g. for additional amenities) and not-for-profit resources, which are similarly, if not more, depleted.

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13 Judith Dowling, personal communication, 1 August 2019.
14 In 2018 one family was in ‘sorry business’ and so tarped-off a section to allow the family to continue this. (Note in the evacuation centres after Cyclone Trevor they implemented cultural liaison officers (one male, one female). Their role was to work between the people evacuated and the Larrakia Nation organisation if needed. They were able to establish relationships and have sensitive conversations. These are senior workers in Territory Families. It was only through the relationships they formed days in to the evacuation that they found out the sorry business and men’s business had been interrupted.)
15 Agencies such as Corrections are called on when there are no other options to assist with food.
The role of Territory Families was to have the facilities and equipment in place so that Red Cross and other agencies could set up the evacuation centre – things such as barriers, areas for mums and bubs, feeding stations and young men’s quarters – so that when the community come in they were able to work with Red Cross to set up the evacuation centre.

While Territory Families have a memorandum of understanding with Red Cross and agreements in the plan with other partners, the staff from Territory Families augment this, particularly given the centre is running 24 hours, seven days a week. So, Territory Families is able to surge up where needed. Providing quick induction training, which includes how to be a custodian of cultural safety, to staff is critical and challenging.

The workers in the evacuation centre from the local community (government or NGO employees) have just been through the event themselves and are such an asset to maintaining community cohesiveness. It is challenging to balance the care of the person (any personal trauma they may have over the floor) and the overall care of the community.

The repatriation saw a forward contingent days before the whole community went back to their houses (clean up with Housing). Ensuring the 15 community members in the advance party could travel together involved getting community leaders to talk to Elders who could convince some of the younger people of the importance of their help with this.

It is worth highlighting one worker’s comments about the work and partners:

‘I was fortunate enough and I feel very privileged to be involved in this work.’

‘Our partnership with, like, Red Cross is important because [they are] able to pull in surge staff from interstate. Challenges arise when their staff are already deployed, for example, this year when TC Trevor occurred there were simultaneously deployments in Queensland and WA.’

The longer term recovery, post-vention and prevention work

The repatriation from the evacuation centre, back to country, was seen as equally important in the recovery of the community. On the ground, the Welfare Group staff played a significant role, working with the lead recovery agency, the Department of the Chief Minister. Following concerns raised by community members around the recovery effort after the 2015–16 evacuation, one agency from the Welfare Group advocated strongly to Northern Territory government agencies for a more extensive and community-led recovery program. Through consultation with community members, Red Cross advocated for the recovery program to involve:

- Red Cross team members accompanying evacuees on their return to the community to provide psychosocial support
- a pop-up welfare Recovery centre on site in Daly River in the week following repatriation
- extended outreach services conducted within the region from 10 to 20 February
- ongoing social and psychological support offered to community members
- follow-up outreach conducted in September 2018
- continued delivery of preparedness sessions with community members (the ‘Pillowcase Project’, psychological first aid and RediPlan).

During and after the 2018 event, local leaders indicated that the response was much improved compared with the 2015–16 evacuation and praised the higher level of community involvement in decision making. As a sign of the improved effort, the Red Cross Emergency Services NT team was invited to partake in a Water Blessing Ceremony in Daly River as a way of saying thank you for the support and assistance provided during the evacuation. Through the ceremony, the Emergency Services team was welcomed as part of the Daly River community and surrounding lands (Australian Red Cross 2018).

16 Judith Dowling, personal communication 1 August 2019.
The next phase of the recovery program that Red Cross put in place as an auxiliary to the Northern Territory Government was designed to empower the community and minimise the social and psychological impact on community members. Red Cross continued to support the Daly River community with outreach during September 2018 and by delivering preparedness sessions during November (Australian Red Cross 2018).

One remaining question is what else governments might do to support long-term recovery, particularly with the increasing numbers of disasters. The word ‘post-vention’ was used to complement the ‘pre-vention’ work that is done. ‘Post-vention’ might be particularly concerned with community health wellbeing and connectedness or may extend further to conversations about the future, involving and empowering communities in shaping this.

Mechanisms for sharing responsibility

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, an individual living a life they value or a community having a sense of self-efficacy. These are all considerations as community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan and Handmer’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Four of these are considered relevant to this case study.
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
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</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong> The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.</td>
<td>Evacuation Centre Planning through Territory Families and Red Cross Partnerships with the Nauiyu community</td>
<td>Evacuation Centre Management: The involvement of Elders in meetings with coordinating agencies at different times was informal rather than a formal committee set-up. It was simply 'known' that informal collaboration with community leaders is most effective. One of the learnings was to incorporate Elder meetings each day after the community meetings (which happened later in the day) to enable some proactive actions.</td>
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<td><strong>Whole of Government Welfare Coordination including non-government and community service organisations.</strong></td>
<td></td>
<td>Evacuation and Welfare Coordination: The community sees ‘your mob’, so having a coordinated whole-of-government or NGO community-facing presence was important to the 2018 evacuation centre response. In the debrief, agencies commented on the teamwork and collaboration, role clarity/continuity/correct assignment of people in the roles, commitment to 15-hour days, preparation time and false starts and how energising it was to be there and work with everyone. This included the training and preparation, which was facilitated through exercises with Territory Families so that they knew each other and there was goodwill between agencies. It also included the support of CEOs of agencies for this all to occur.</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong> The influence of this mechanism on sharing responsibility is through establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these</td>
<td>Territory Families Service Agreements</td>
<td>Territory Families: Service agreements were in place in the second year regarding who would take the lead in running the centre (Red Cross managed the centre; Territory Families was director of the centre).</td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Lead prior to the event: Whose hand was on the lever to make this happen?</td>
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<td>may be binding and subject to penalty or non-binding and without penalty).</td>
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<td><strong>Collective enquiry and decision making:</strong></td>
<td></td>
<td></td>
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<tr>
<td>The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>Red Cross Community Programs</td>
<td>The work that Red Cross has been doing over the long term in embedding a community development officer as part of this community assists the support community leaders have in ‘walking two worlds’ and the communication required to work with agencies, with and on behalf of the community. Territory Families and Red Cross: Deliberative decision making with Elders.</td>
</tr>
<tr>
<td><strong>Social norms:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions.</td>
<td>All partners developing relationships with the community and community leaders.</td>
<td>• Legitimate community leaders with a dependence upon the level of trust in relationships, depth of relationships between agency workers and community leaders enabled the communication of issues or else a reticence to risk the bother of the communication. • Creating cultural safety. • Response Agencies: involving community in decisions to evacuate and return, bringing with this their extensive knowledge of and connection to place</td>
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Case study 4: Ravenshoe Café Explosion, Queensland, 2015

Managing an appeal fund within a community-led recovery framework

Summary

A community-led recovery process was implemented following the Ravenshoe Café Explosion, which was a tragic event that affected a large proportion of a small population in a rural community. The local government, Tablelands Regional Council, hosted the state government funded community development officer – disaster recovery who led the recovery and also provided significant administrative support to what became the Appeal Distribution Committee (a board of management for distributing the funds raised). The effective management of appeal funds and building public confidence in the Appeal Distribution Committee required all committee members to voluntarily work with a range of stakeholders including the case management team and the Ravenshoe Café Explosion Recovery Group. The members’ professional expertise and boundaries helped to build public confidence. The committee’s governance included role-based community members from both the local area and region, as well as government representatives. This committee was carefully considered to minimise potential social harm where the distribution of money was involved and yet enable authentic local involvement, listening to and responding to individual and community needs.

Data sources

The information in this case study is primarily sourced from interviews with four key informants comprising one non-government organisation, one local government and two public officials from state government. The then Department of Communities, Child Safety and Disability presentation at the 2016 Australian New Zealand Disaster Management Conference features heavily in this write up, complemented by data and information from media releases and newsletters from the recovery.

The context

At midday on 9 June 2015 an out-of-control four-wheel-drive vehicle hit and punctured a 450 kg gas cylinder attached to the Serves You Right Café in the main street of the small town of Ravenshoe in Far North Queensland. A release of gas caused an explosion and subsequent fire. Twenty-four people were injured because of the accident, some critically. Two local women later died from their injuries. This event was Queensland’s largest mass casualty burns disaster and required an aeromedical response.

Ravenshoe is a small rural town on the Atherton Tableland in Far North Queensland. It is located approximately 120 km, or two hours’ driving time, south west of Cairns. Perched 920 metres above sea level, it is known for being the highest town in Queensland, and it is adjacent to World Heritage rainforest. Its temperate climate and location make for a picturesque and popular day-trip destination for Far North Queenslanders and a popular stop-off point for road travellers crossing the vast savannah lands of northern Australia.
Ravenshoe has a population of approximately 1,500 residents, around 900 of whom live within the township (QGSO 2016, (ABS Consultancy)). It is a quiet, rural community with a unique character that reflects its rich history as an important timber town. The town’s economic mainstays are now agriculture and tourism, alongside the more recent socioeconomic influences of ‘tree-change migrants’ and ‘alternative lifestylers’. The community experiences a number of economic and social challenges and is defined as a low socioeconomic area with a high level of relative disadvantage, significant unemployment and a median household income around half that of Queensland’s (SEIFA, ABS 2011 Census).

Impact and initial response
A significant multi-agency operation ensued in which various emergency services, Queensland Government agencies, local government, community organisations and volunteers responded on that day or in the days and weeks immediately following.

Figure 4.2: Spontaneous floral tributes in the days following the Ravenshoe café explosion
The impact on the broader community was substantial considering that nearly 10 per cent of the population had been impacted directly (physically impacted or hospitalised) or witnessed the incident. Many in the vicinity became involved in the immediate response. The ambulance service had never seen a response to an incident like that before, with bystanders conducting first aid. This can be credited to the recovery and preparedness work done after Cyclone Yasi (2011), with recovery funding. Community members requested courses to assist them and other people in the event of a disaster. More than 800 people across the Tablelands region were trained in different courses such as first aid and how to safely use a chainsaw. After the café explosion, the community recognised the benefits that this had resulted in and credited the local council for this community capacity-building program.

On the day, emergency services quickly determined that the café explosion was an ‘incident’ that did not require the declaration of a disaster or the activation of any disaster management coordination arrangements. Although not declared a disaster and eligible for state-level financial assistance (through Queensland or National Disaster Relief and Recovery Arrangements), support for a community recovery position came through the Department of Communities, Child Safety and Disability Services within weeks.

**Background context: tensions in expectations of recovery leadership**

The Tablelands Local Disaster Management Group understands its legislated role under the Queensland Disaster Management Arrangements is to coordinate community-led recovery. This means the local government (as the lead agency) consulting with its community to determine their recovery needs, priorities and aspirations and to use community input to shape recovery programs while capitalising on community strengths and resources.

The day after the explosion, the Minister for Police, Fire and Emergency Services visited the Ravenshoe Community Centre and received a strong message that the community wanted to lead its own recovery. The Ravenshoe Community Centre was the only state government funded social service provider in Ravenshoe. This caused some initial tension because, while local and state government were keen to support this approach, a key community recovery challenge and priority identified at the time was the level of impact on many of the staff and clients of the community centre (which also houses the Yabu Mija Aboriginal Corporation) who had been in the café that day and experienced significant trauma. In total, around a third of the casualties were staff, volunteers or clients of the centre’s respite service. Despite this or perhaps because of this, once the last of the casualties had been evacuated, the Ravenshoe Community Centre unhesitatingly took up their role as a community support provider and became the ‘one stop shop’ for recovery service delivery.

Community-led recovery rightly stands as one of the foundation principles of disaster recovery. However, so too does the need for a coordinated approach to service delivery (including information gathering and dissemination) across multiple agencies. It was recognised by local government that collaborative governance structures needed to be quickly activated, particularly in a period when a traumatised community and local service systems are overwhelmed.

After the explosion, various individuals and organisations established several appeals (e.g. Go Fund Me accounts, the Lions Club Appeal, the Cairns Diocesan Appeal). In the setting up of the official Ravenshoe Café Explosion Appeal Fund, Tablelands Regional Council knew that the best way to manage an appeal fund of this nature was to provide a robust governance framework with appropriate authority and representation, hence the reason for a decision to establish an independent committee to essentially provide a robust governance framework for collecting and distributing publicly donated appeal funds.

**Community appeal**

The official Ravenshoe Café Explosion Appeal, which was established on 10 June 2015 in partnership with GIVIT, Tablelands Regional Council, Bendigo Bank, National Australia Bank and the Ravenshoe Chamber...

The appeal committee comprised a chairperson from the Red Cross Queensland divisional board, a representative from the GIVIT board, the regional director of the Department of Communities, Child Safety and Disability Services, the Tablelands Regional Council CEO, the director of nursing from the Herberton Hospital and an independent local accountant. There was a deliberate decision not to have community representatives (as a role on the committee) to reduce the community angst about how the money was to be managed and spent and the potential repercussions for any representatives. While a number of these members were from the broader Tablelands community, they had a specified committee role associated with representation of their profession or organisational remit in the context of the appeal fund terms of reference.

Managing the appeal fund was complex for the following reasons:

- Significant cash donations were received in a short time.
- Public accountability and transparency were crucial, and funds had to be disbursed as quickly as possible to meet the needs of the beneficiaries.
- The committee undertook a rigorous process to ensure a fair and equitable distribution of the publicly donated funds by acquiring expert advice from medical practitioners, social service providers and others working closely with those directly impacted to determine a methodology for disbursement that reflected the various degrees of impact and likely long-term recovery needs.
- The committee also sought legal advice to ensure that disbursement would not prejudice any compensation claims for those who decided to pursue this.
- The confidentiality and privacy of the beneficiaries was honoured, which was critical in this small community where people generally know each other. For example, at one public meeting, people were requesting access to the names of those affected. This wasn’t disclosed.
- People who had been impacted by the explosion but who were not originally known to the Appeal Distribution Committee emerged over time.
- Criteria for expending the funds in the short-term recovery phase to meet the identified needs of those affected included that it was a preference that suppliers be local to the Tablelands and Far North Queensland. As an example, the committee purchased special mattresses and other household aids for those affected.
- $41,963 (5 per cent) of the appeal funds were allocated for community projects. This caused some community angst, but on the whole these projects were well supported by local residents and the broader community. Some of the activities that were funded through this included running a volunteer support program to assist the survivors with house cleaning, yard maintenance and driving them to occupational and physiotherapy appointments, presentation of the cards in tribute books retained from the flowers left at the site of the explosion, a community recovery barbecue, presentations from Carol Mayer (a burns survivor) to those affected, remote and basic first aid training, psychological first aid information sessions and grant writing workshops. The management and delivery of these projects was through the community development officer.

All members undertook the work on this committee in a voluntary capacity, and 100 per cent of donations to GIVIT were given directly to the beneficiaries. GIVIT incurred significant administration costs in performing its role, which they met them through their organisation. Other representatives also incurred costs that their organisations absorbed.
Key facts about the appeal, the distribution process and the committee

- Nineteen per cent of the fund’s total at the time was distributed to meet short-term needs over the first 31 days following the explosion; a further 7 per cent was distributed from month 2 to 4. By November 2015, 69 per cent had been distributed to assist with long-term recovery. The entire fund was disbursed in six months.

- Five per cent of the appeal funds went to longer term community recovery projects as identified by the community and supported by the Ravenshoe Café Explosion Recovery Group.

- The community development disaster recovery officer position for the Ravenshoe Café Explosion was funded by the Queensland Government and hosted by Tablelands Regional Council, which provided financial and in-kind support for the position.

- All funds from the Ravenshoe Café Explosion GIVIT Appeal went directly to those impacted by the explosion. This then relied on administration of the appeal being a voluntary endeavour. One recommendation from this experience is that ‘adequate resources need to be allocated to cover the cost of administering the appeal funds including secretariat support, postage, travel and merchant fees. How these costs will be covered needs to be communicated to the wider community at the beginning of the appeal.’ 18 Pre-planning for appeals is critical.

- The Appeal Distribution Committee was an independent committee. The member biographies were on Tablelands Regional Council website and promoted to the community via various means (media releases, community newsletters, radio). Membership strove to be apolitical and protect the interests of locals by striking the correct balance between those who understood the community and had the professional skills required to fulfil committee roles.

- Payments from the appeal were not considered compensation, rather an expression of sympathy and support by society at large, of which the committee was at all times mindful.

- The committee worked closely with the network of case managers at the time who were supporting those impacted.

One of the recommendations from this experience was that the legal head of power for local appeal distribution committees relating to disaster events should be under the local government's Local Disaster Management Group structure.

Longer term recovery

Recovery funds were used to support an event for the one-year anniversary. It was well received by many people in the community and was a well-attended event, with more than 150 people taking the opportunity to gather, remember what had happened, thank the people who had been involved over the previous 12 months, acknowledge the generosity of the wider community during the recovery and to collectively heal. A video on this can be viewed on the Tablelands Regional Council website <https://www.trc.qld.gov.au/disaster-management/disaster-management-videos/>.

Ravenshoe community recovery update (media release, 14 August 2015)

A case coordination group has been established as part of the recovery process for the Ravenshoe café explosion. This group consists of representatives from Ravenshoe Community Centre, Yabu Mija Aboriginal Corporation, St Teresa’s Catholic Church, Uniting Care Community, Community Services Tablelands and other organisations who are providing case management to the injured, their families and the families of the deceased in their recovery. Ravenshoe Community Recovery Group Chairperson, Councillor Shaaron Linwood said, ‘the agencies assist with identifying support needs as well as preparing submissions and providing advice on their clients’ behalf to the Ravenshoe Appeal Distribution Committee (RADC) for financial assistance from the official Ravenshoe GIVIT appeal’.

The Ravenshoe Appeal Distribution Committee is the independent body responsible for distributing the official GIVIT appeal fund and for providing the appropriate checks and balances to ensure that appeal funds are distributed in an equitable, transparent and accountable manner. Following the RADC meeting

18 Sarah Dean, personal communication, 10 June 2019.
on 12 August, committee chair and Australian Red Cross Board member Lyndal Scobell confirmed the total raised through the official GIVIT Ravenshoe Appeal had reached $530,575.20. ‘This will provide much needed support and resources to enable the injured to rehabilitate over the longer term,’ Ms Scobell said. ‘Approximately 30 per cent of the GIVIT Ravenshoe Appeal Fund has already been distributed and is reaching those affected by the café explosion that left 18 injured and two fatalities’. ‘We are now getting into the phase of recovery where some of the longer term needs – such as specific home modifications – are being identified, with some of these expenses being met through the Appeal fund,’ she said. This is in line with the decision taken by the RADC to allocate up to 15 per cent for immediate assistance, 80 per cent for longer term assistance and up to 5 per cent for wider community recovery.

As part of the wider community recovery, Cairns burns victim Carol Mayer, who sustained burn injuries to more than 80 per cent of her body in a house fire in February 2000, will give a presentation to the community later this month (August). This event is being funded from the 5% of the appeal fund allocated to wider community recovery. Details are available on Tablelands Regional Council website.

Cr Linwood advised that a number of community members had volunteered to assist the injured in their recovery. ‘To date, a number of volunteers have been secured to assist with cleaning, household removal, yard maintenance, painting and driving.’ Cr Linwood said. ‘People who wish to volunteer to help those affected by the Ravenshoe café explosion are urged to register their offers of assistance with the Emergency Volunteering (EV) CREW service provided by Volunteering Queensland, who is working in partnership with the TRC to manage all offers of volunteer assistance.’ Register by visiting www.emergencyvolunteering.com.au, download the Ready QLD App or call Volunteering Queensland.

Ongoing support for community members affected by this event is available through the Ravenshoe Community Centre on 4097 6726. The Community Centre has been funded through the Department of Communities to provide counselling and support to assist with the recovery from the event which is still at the forefront of many residents minds.

**Seeking initiatives to assist community recovery (media release, 10 September 2015)**

Everyone is invited to a community engagement meeting on Friday 25 September at 10am in the Ravenshoe Town Hall to capture the needs and aspirations of the wider community with regards to the recovery process following the café explosion in June.

‘It's a forum for sharing information on what initiatives, projects or ideas will support the wider community recovery,’ outlined Divisional Councillor Shaaron Linwood.

‘If you have a great idea, this is an opportunity to share it with others and to determine what might be available to make ideas a reality.’

Members of the Ravenshoe Recovery Group and Appeal Distribution Committee will be attending, and the new Ravenshoe Community Centre Counsellor will give a presentation.

Lunch will be provided and there is no cost to attend. Please RSVP to Council by calling 1300 362 242. As at 9 September the GIVIT Ravenshoe Appeal is $577,277.59 with $180,760.67 distributed to date.

**Local garden club creates colour out of tributes (media release, 22 February 2016)**

Floral tributes left at the site of the Serves You Right Café explosion have been mulched and used to fill a beautiful pot in the Grigg Street garden bed at Ravenshoe, providing a fertile base for geraniums planted by the Ravenshoe Garden Club.

The pot and plants were funded through a donation from The Gap Garden Club in Brisbane and the Community Recovery funding through GIVIT.

The Ravenshoe Garden Club played an important role in the care of floral tributes left at the site of the café explosion in June 2015, ensuring they were kept fresh and the cards and messages collated for longevity.

‘We have an extremely hard-working group of community members in Ravenshoe who volunteer as part of the Garden Club to beautify Ravenshoe. They do a tremendous job, along with our Parks and Gardens crew.'
Mechanisms for sharing responsibility

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, to an individual living a life they value or to a community having a sense of self-efficacy and capability. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Four of these are considered relevant to this case study and are captured in Table 4.1.
### Table 4.1: Mechanisms to shape support for community voice in appeal fund distribution – Ravenshoe, Queensland, 2015

<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong></td>
<td>A number of organisations worked together as coordinating groups or committees to facilitate the recovery:</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.</td>
<td></td>
</tr>
<tr>
<td>Ravenshoe Café Explosion Recovery Group</td>
<td>• Ravenshoe Café Explosion Recovery Group</td>
</tr>
<tr>
<td>the independent Appeal Fund Distribution Committee was set up by Tablelands Regional Council to manage the donated funds</td>
<td></td>
</tr>
<tr>
<td>Case Coordination Group.</td>
<td>• the independent Appeal Fund Distribution Committee was set up by Tablelands Regional Council to manage the donated funds</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong></td>
<td>The Department of Communities and local government together funded a community development officer to lead the recovery. The Department of Communities funded the majority of the position for 12 months. This was not a declared disaster. However, Tablelands Regional Council authentically listened and responded to individual and community needs and worked directly with the Department of Communities, Child Safety and Disability Services to secure funding. At the state level, the Department of Communities, Child Safety and Disability Services had agreements in place with Lifeline, Red Cross and other agencies that could assist with providing human-social support. In fact, after Cyclone Yasi, funding had been obtained through the Community Development and Engagement Initiative through the department for ongoing preparedness and resilience in the form of psychological first aid and first aid skills, which contributed to the effective community response. Council had a memorandum of understanding with GIVIT to manage donated goods and services. GIVIT agreed to be the face of the appeal and on the committee to manage the appeal funds without charge.</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty).</td>
<td></td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong></td>
<td>Following the initial public meeting held in Ravenshoe, the Tablelands Regional Council community development officer was the lead for recovery and consequently responsible for collective enquiry and decision making, which happened at:</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through</td>
<td>• public meetings</td>
</tr>
<tr>
<td></td>
<td>• community barbecues and follow-up</td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| collectively querying and/or deciding where responsibility lies and/or how to share it. | • consultations on recovery projects.  
A key project included sensitively managing the disposal of flowers with the Ravenshoe Garden Club, creating mulch that was used to plant a vibrant centrepiece in the centre of Grigg St.  
The cards of condolence were used to create tribute books – one for each of the families of the deceased.  
Gatherings were arranged for people directly impacted, with the intention of providing a social network for offering emotional support to one another. |
| **Social norms:**  
The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions. | The social norm of justice and equity was a strong driver for the community and the Appeal Distribution Committee.  
The social norm of aid – people helping each other – was assisted through practical first aid skills learned (Cyclone Yasi recovery funding for future preparedness for recovery). |
Case study 5: Canterbury District ‘All Right?’ campaign, New Zealand, 2010–11

Creating a platform for community-led initiatives for psychosocial recovery

Summary

Realising the long-term mental resilience that Cantabrian’s would require after the ongoing uncertainty of their earthquake situation and recovery, the Social Recovery’s Wellbeing Committee mandated the implementation of communication campaigns aimed at helping individuals and families to cope with the after-effects of the earthquakes individually and collectively. They incorporated the use of community-led interventions in this in a deliberate strategy to empower communities in their role in working to re-establish population-wide health and wellbeing after the series of disasters. This is a program designed and delivered for a population-wide level of change, with a combined public health and positive psychology approach.

Data sources

The information in this case study is primarily sourced from research material on the All Right? website <https://allright.org.nz/our-research/>, along with two key informant interviews – one with a public official and the second with a non-government organisation partner on the initiative.

Background

The Christchurch earthquakes of 2010–11 on the South Island of New Zealand, also known as the Canterbury earthquakes, were a series of tremors that occurred within and near the city and the Canterbury Plains region from early September 2010 through to late December 2011. The most severe of these events occurred on 4 September 2010 (magnitude 7) and the large and destructive aftershock on 22 February (magnitude 6.3). The official response phase continued until 30 April 2011 when the recovery process was taken over by the Canterbury Earthquake Recovery Authority (CERA). Christchurch has a population of about 400,000 people.
The broader psychosocial context

Canterbury Earthquake Social Recovery Services and Support have a framework called the psychosocial pyramid model [<https://www.eqrecoverylearning.org/environments/social/resource/5447>](https://www.eqrecoverylearning.org/environments/social/resource/5447) (Figure 5.2) that CERA and partner agencies used to ensure psychosocial services and supports met diverse recovery needs as they emerged and changed over time. This model describes the relationship between universal supports, family and community supports, targeted services, and specialist services. At the tip of the pyramid, specialised services are available to those who require support to address severe recovery needs, at the next level targeted services address specific recovery needs among affected populations, next level down community supports assess the recovery of families within their communities. At the base of the pyramid, universal supports provide community level messages and information enabling communities to lead their own recovery and support their friends and families. Community-led recovery is relevant to the universal supports provided, and early and ongoing responsive intervention, here at the base of the pyramid, is intended to reduce demands for services at the top of the pyramid.

After the earthquakes it was easy to see what was happening in terms of building roads infrastructure and businesses. Initial market research indicated that people thought that ‘buildings were the recovery’\(^1\). It was

\(^1\) Ciaran Fox, personal communication, 18 July 2019.
not easy to see what’s going on in people’s minds, their health and the health of their families and the robustness of their communities. So a long-term strategy and shared commitment to what a number of people were doing across the social sector and within communities was devised that was also balanced, meaning as well as individual and targeted support that there was also community-led activity going on. In a disaster, the type of people who are affected are not people normally known to agencies, not used to asking for support, not used to receiving it, but absolutely needing it, so the universal supports were seen as critical in the response.

The psychosocial response

In response to the initial earthquake, the Greater Christchurch Psychosocial Committee was originally convened in September 2010 under the emergency legislation as a subgroup of the Welfare Advisory Group. Its purpose was to plan, deliver, coordinate, promote and monitor the psychosocial recovery and wellbeing of the population of greater Christchurch using a cross-sectoral model.20

With the compounding effects of the ongoing tremors and associated uncertainty, the Prime Minister’s Chief Science Advisor prepared a briefing paper on The psychosocial consequences of the Canterbury earthquakes (Gluckman 2011). It recommended:

‘A comprehensive and effective psychosocial recovery programme needs to support the majority of the population who need some psychosocial support within the community (such as basic listening, information and community-led interventions) to allow their innate psychological resilience and coping mechanisms to come to the fore’ (Gluckman 2011, p. 2).

Professor Gluckman’s paper went on to state that insufficient attention to population psychosocial recovery could lead to increasing numbers needing specialist care (Gluckman 2011). He cited the recovery literature that suggests there are four stages people go through after a disaster:

1. heroic phase
2. honeymoon phase
3. disillusionment phase
4. reconstruction phase.

Professor Gluckman preferred to refer to phase 3 as the ‘long-term recovery and rehabilitation phase’ rather than the disillusionment phase.

Heroic and honeymoon phases

The Mental Health Foundation developed five ways to wellbeing within three months of the earthquake – it was a low-budget project that was initiated after people began noticing in the city centre that posters were out of date, cracked and peeling off. A street poster campaign that responded to this need.

The Greater Christchurch Psychosocial Committee did some market research and found a great need for something to be done about mental health and wellbeing. They developed the Community in mind strategy and a Shared program of action plan based on the collective impact of the 2012 tremors, practically putting

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20 The lead agency for the planning and delivery of psychosocial support after national-level events is the Ministry of Social Development, with support from the Ministry of Health. In Christchurch, the Ministry of Social Development chaired the Psychosocial Response Committee, a cross-government committee including representatives from the Ministry of Health, Canterbury District Health Board, Christchurch City Council and numerous other agencies. The committee followed evidence-based principles of disaster planning and planning for the medium- and long-term phases of recovery. In particular they looked to ensure that psychosocial support was incorporated into other recovery initiatives, such as providing temporary accommodation and rebuilding school communities. As per the pyramid model of psychosocial support, counselling and psychosocial support was made available to affected people in Christchurch and to those who moved to other parts of the country. Demand for psychosocial support and mental health care at the primary level increased and was met by a variety of methods and monitoring and provision for the capacity and functionality of specialist mental health services, alcohol and other drug services. This communication campaign and program sat at the universal and community supports level along with other campaigns to help individuals and families to cope with the after-effects of the earthquakes.
in place collaborative public management. The contractual arrangements that articulated goals but allowed the program the freedom on how to get there assisted this.

Disillusionment phase

The ‘All Right?’ campaign was launched two years after the main aftershock, in February 2013 (cited as early phase 3 – disillusionment), when people were realising how long the recovery was going to take and starting to feel frustrated, tired, overwhelmed and a sense of grief. The aim of the program was to grow wellbeing literacy, pre-disaster as well as post-disaster, and build the capacity of individuals to contribute to the collective conversation and encourage community capacity building and leading in this space.

All Right? branding and design

All Right? was intentionally not branded. It came out looking like Gorilla advertising because the team wanted it to be seen as a creative response by their own community (the professionals involved were from Christchurch). It was distanced from the look and feel and techniques of traditional public service and government health messaging because market research demonstrated that this was not going to have impact. The organisations involved placed trust in the All Right? multi-organisational team to create the branding that was community-facing. The design:

- incorporated a warm, hand-written question mark, placed on flags, road cones and elsewhere
- started with messages of validation
- moved on to gentle questions
- encouraged people to tap into their own wisdom and share ideas
- provided collective listening and feedback so that is was ‘a conversation we are hearing here’.

From the beginning the project team, which was a cross-disciplinary team of local people, all of them going through this at the same time as the population, talked about how to embed this work. They had one-year contracts, followed by a three-year contract from 2016 to 2019. From the beginning, because the funding did not have assured continuity, they saw that ‘champions’ were going to be an important part along with the partner agencies.

Champions

The All Right? group curated a Champions Network. They noticed the organisations (corporate, education, local business, health services) who had power users. These users were ordering pamphlets and asking All Right? to come and speak to groups.

In time the All Right? team organised for them to meet each other and they opened up the meeting to hear from them what they were doing. Each of them had taken it upon themselves to become wellbeing advocates. From this they co-developed a strategy to collaborate and they still meet. In fact, 60 people from this ‘champions for wellbeing’ group came together again shortly after the mosque attacks.

The dream of All Right? was that people feel empowered to be these champions and did not see the All Right? team as the experts, rather as peers in the work and a conduit to collaborating.

‘The recipe’

The key ingredients to Canterbury’s Wellbeing campaign included the following.

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21 For more information see the All Right? website: <https://allright.org.nz/media/documents/ART122_RecipeDocument_A5_2_FINAL_Booklet.pdf>.
1. **A clear mandate**

The campaign was mandated by the Greater Christchurch Psychosocial Committee, was led by the Canterbury District Health Board and the Mental Health Foundation of New Zealand and sat within the Community in Mind Strategy (CERA 2014) for rebuilding health and wellbeing in Greater Christchurch.

2. **Ongoing funding**

Funding came from the Ministry of Health, and the project also had support from the Ministry of Social Development and many other organisations including Red Cross, SKIP, the Christchurch City Council and the Waimakariri District Council.

3. **Research and evaluation**

The program completed regular, ongoing, in-depth action research into how Cantabrians were to obtain up-to-date knowledge about how people were feeling and the hurdles they were facing. The research informed all the actions in the campaign from raising awareness among community groups, organisations and businesses, to creating tools that promoted the things individuals and communities could do to improve their wellbeing. To do this they contracted an independent market researcher. A public health analyst at Community and Public Health facilitated the process evaluation of the campaign.

4. **Established practice models and theories**

All Right? used a mental health promotion approach – the process of enhancing the capacity of individuals and communities to take control of their lives and improve their mental health while showing respect for culture, equity, social justice and personal dignity (Joubert & Raeburn 1998, p. 19). Guiding documents for this included the Ottawa Charter, the Perth Charter and the Social determinants of mental health. Their messaging was based on the NZ Mental Health Foundation’s *The five ways to wellbeing* [https://www.mentalhealth.org.nz/home/ways-to-wellbeing](https://www.mentalhealth.org.nz/home/ways-to-wellbeing) and incorporated Maori cultural models of health promotion [https://www.health.govt.nz/our-work/populations/maori-health/maori-health-models](https://www.health.govt.nz/our-work/populations/maori-health/maori-health-models).

5. **A diverse, multidisciplinary team**

This encompassed an advisory group working at the strategic level for the campaign, the agency responsible for the creative ideas, independent market research and a government public health analyst working together on research and evaluation and an operations group with a variety of specialists including public health, mental health promotion, communications and administration. This group evolved to include also mental health promoters for Māori, Pacific and culturally diverse in addition to a family advisor.

6. **A responsive, adaptable approach**

The program’s ongoing market research was an action/reflection method within an environment where it was safe to disagree, take risks and be creative in the development of resources for different audiences. This included refreshing the brand in 2016. Facebook and the campaign website provided an outlet for sharing people’s own ideas, building positive engagement. Social media has also proven a key platform for personal, nimble and sensitive messages after large aftershocks, anniversaries and other upsetting events.

7. **Community involvement and trust**

The design of All Right? took time and came from working alongside and listening to the local community. The All Right? brand became trusted and accepted by the community by:

- using a conversational tone
- not telling people how to feel or what to do
- positioning itself as independent from other agencies and not using logos and sponsor information.
8. Tools to promote engagement

i. Relationships and partnerships

ii. A creative approach:
A range of creative and inclusive methods to communicate its messages, including advertising, public relations and media editorial, co-created content with partners, digital conversations, on-the-ground conversations, and activation in work places, at events, and in particular communities. All of the All Right? campaign’s physical resources are available free of charge to people in Canterbury. However, to reach a wider audience, several of the campaign’s latest resources are now available as digital tools – for example, the campaign’s App and Gift Generator. All Right? continues to make hard copies of resources where possible (e.g. whānau activity pack) to ensure they are accessible to all.

The All Right? campaign’s resources have been popular with a range of audiences, including individuals, families, workplaces, schools, hospitals and shops. Contributing to this success have been the bright colours of the resources, simple and fun messaging, and their interactivity (e.g. tear-off complement posters). The campaign is cognisant that people are at different stages of the recovery, and the campaign’s website has a range of articles to support people at different stages of the process, from practical tips following an aftershock, to character strengths questionnaires.

iii. Targeted resources and collaboration
A whole-population health campaign does not mean a one-size-fits-all approach. All Right? has developed several streams in an effort to reach a wider range of audiences.

All Right? supports the wellbeing of Māori, Pacific and culturally diverse communities with culturally appropriate messaging and approaches, and by using appropriate models and frameworks. The aim is to give people a sense of ownership of All Right? by working alongside them and empowering leaders to share the messages and tools in their own communities, boosting the wellbeing of individuals and their families.

How does this illustrate the support of community-led approaches?

- The action-based research, listening and responding to community voice, focus on engagement and ensuring the tone was right to create trust were all ingredients that meant people became involved and engaged.
- They provided tools for people to get practical and invited them to use them and contribute their own initiatives.
- At a language level, they used questions in order to be invitational, reinforce autonomy and capitalise on place-based calls to action.
- Sustainability of the program had to be factored in because the funding was not assured to continue the program indefinitely. One way to embed the program was through the use of champions and partners.

What sort of community-initiated activities have occurred that have involved/collaborated with All Right?

The community-led activities have included those born from community action and not initiated by government. These have been supported by local government and, in some cases, they sought out the involvement of All Right? for help to amplify their reach. These community groups have included:

- River of Flowers – an annual commemoration at 12.51 on 22 February, with two minutes of silence for formal remembrance. The sites are local and a flower company donates all the flowers, which form a river of flowers that wash out on to Brighton Beach. Local government helps to fund this and All Right? helps to find the resources to design and create the signage.
Considerations for government supporting community-led recovery

- Gap Filler – creates responses that involve local neighbourhoods and place-making networks
- Greening the Rubble – landscaping
- Temple for Christchurch (burning man).

The campaign enabled community to decide to act through the use of gratitude, appreciation and kindness. It established an initiative that let people nominate other people for ‘A little burst of All Right?’ This initiative saw the All Right? team team up with The Eastern, a band, to bring singing telegrams to people nominated for doing something good or in need of a little bit of joy. View A little burst of All Right...The Eastern’s Singing telegrams <http://www.youtube.com/watch?v=cHDcBmYu8_s> on YouTube.

The champions and the partners of All Right? in the community were the eyes and ears on the ground to enable collaboration. These networks are like the nerve endings that enable a sensing of what is happening in the community as a whole. Interestingly, organisational research about community capital showed that those with more capital (six communities across the city) fared better.

Has it been successful?

Independent market research took the pulse of the city every 12 months, and All Right? reported public health analysis of this data for five years running. This has continually demonstrated that the campaign is helping people in greater Christchurch to become more aware of their mental health, normalise conversations around mental health and improve awareness of the actions they can take to improve it.

The sorts of questions asked included: How did the campaign resonate?; How can we make the campaign meet the needs of communities?; and What might we need to put in place to assist the specifics of communities? Separate research on evidence was conducted for Maori communities, young people, older people, culturally diverse populations, parents and Rainbow Connect. They knew ‘one size wouldn’t fit all’.22 Both qualitative and quantitative data was gathered about how the community was going and what had changed.

In April 2017, All Right? released its latest survey on Cantabrians’ mental health as the region recovered from the earthquakes. The research showed improvement in how people are feeling since the survey was first carried out in 2012:

- Fewer respondents reported that their current living conditions were getting them down (18 per cent in 2016, 24 per cent in 2012).
- More respondents reported that their life was better now than before the earthquakes (34 per cent in 2016, 19 per cent in 2012).
- There is a lot of hope and optimism in the region, with 72 per cent of those surveyed saying they feel lucky, 89 per cent happy and 74 per cent excited about the future.

Significantly, one figure didn’t change – that 64 per cent of people are grieving for the old Christchurch; that is the intangible psychosocial aspect.

The research also showed that unsettled insurance claims are having a negative impact on how people feel:

- More than a third of those with an unsettled claim say their living situation is currently getting them down – nearly three times as many as those with settled claims (11 per cent).
- Almost half of those with an unsettled claim say they’re struggling to deal with things that have happened as a result of the earthquakes, compared with people with settled claims (24 per cent).

22 All reports are available on the All Right? website <https://www.allright.org.nz/>.
Has All Right? made a difference?

What is the right measure to tell this story? The campaign used reach (Have you seen the campaign?) and impact or acquisition of strategies and knowledge and uptake of this in terms of actions and behaviour (What have you done or taken on?). They also used a validated mental wellbeing measure; however, there was no base-line measure, so they were unable to draw a causal link from this.

The difference the All Right? team has observed is an increase in emotional competence, creating a safer environment in a city where talking about feelings is normal. They have noticed that when things now happen, they hear the language that they have been promoting being used.

Figure 3: Research on mental health awareness and actions resulting from the All Right? campaign

98% considered All Right? messages to be helpful
96% said All Right? messages gave them ideas of things they can do to help themselves

Research on the impact of the campaign’s social media activity shows that 85 per cent of respondents to an online survey had taken action as a result of what they had seen on the All Right? Facebook page. Almost all respondents agreed that the All Right? Facebook posts:

- were helpful (98 per cent)
- made respondents think about how they are feeling (97 per cent)
- gave respondents ideas of things they can do to help themselves (96 per cent)
- regularly made them think about their wellbeing (93 per cent).

The research shows that All Right? has helped to open up and normalise conversations about health and wellbeing and has led to actual behaviour change that is improving the wellbeing of people in Canterbury.

Mental health promotion is important and while social marketing can never replace specialist mental health services, these findings demonstrate that it can play an important role, as a universal support, in building resilience and promoting mental health and wellbeing across communities.

Sir Peter Gluckman identified in his briefing paper to the psychosocial committee in May 2011:

‘No set of recovery measures can entirely prevent the emotions of distress, be they anger, numbness, despair or frustration — rather, the broader community needs to accept that they have a role in supporting people through this process. The agencies involved cannot ignore, and indeed have not been ignoring, these likely responses and need to ensure the availability of an appropriate range of support services for those affected. This has been shown to take some time, and responses need to be in place over a considerable period.’

Where to from here for Christchurch’s psychosocial wellbeing

Before the earthquakes of 2010–11 the people of Canterbury had mental health problems well below the national average. In five years, as at 2016, Dr Alistair Humphrey reported that ‘mental health problems have climbed steadily in all age groups and at all levels of severity and these are continuing to climb’. Since the quakes of 2010–11, chronic stress has impacted people in the area, resulting from circumstances like

24 Dr Alistair Humphrey, Medical Officer of Health, Canterbury District Health Board <https://www.youtube.com/watch?v=DTAVgJbSdqI>, 14 August 2016
multiple moves and dealing with insurance companies. Many people in the region have been struggling with mental health issues related to the earthquakes and indicators include:

- the problems presenting to hospitals continuing to climb
- diagnosed mood or anxiety disorder – 25 per cent increase
- people entering mental health services – 37 per cent increase
- attempted suicides (police callouts) – 60 per cent increase
- rural mental health presentations – 65 per cent increase
- acute alcohol-related admissions to hospitals – 25 per cent increase
- emergency department mental health presentations – 104 per cent increase
- psychiatric emergency assessments – 124 per cent increase
- 5,614 rebuild migrant workers on temporary work visas presenting regularly to emergency departments not eligible for healthcare funding because they’re on short-term visas
- children and youth presenting to mental health services – 69 per cent increase (possibly because their support systems are not coping as they used to).

When the terrorist attacks in Christchurch occurred in 2019, people responded immediately, engaging on the All Right? social media page with conversations. The work of this campaign has been funded for another year and will broaden to the national level.

**Mechanisms for shared responsibility**

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, to an individual living a life they value or to a community having a sense of self-efficacy and capability. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Six of these are considered relevant to this case study and are captured in Table 5.1.
Table 5.1: Mechanisms for Supporting community-led approaches to psychosocial recovery – Canterbury Region, New Zealand, 2013

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<tr>
<td><strong>Soft interventions</strong></td>
<td>Government funding brought to life the All Right? campaign.</td>
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</table>

**Organisations and associations:**

The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.

- The operational arm of All Right? continued to evolve as the campaign matured.
  - A steering group was established at the beginning of the campaign to oversee operations. Originally comprising people from the Mental Health Foundation and Community and Public Health, the group expanded to include representatives from Red Cross, Waimakariri District Council and Christchurch City Council. Several of the members were already actively promoting wellbeing.
  - The steering group was replaced by subgroups focused on marketing and communications, research and stakeholder engagement.
  - The appointment of a full-time campaign manager contributed to the creation of the current Operational Group. In addition to the campaign manager, this group includes a public health specialist, mental health promoters, communication advisors and administration staff. As the need for the campaign has grown to respond to different population groups, the operational team has expanded to include mental health promoters for Māori, Pacific and culturally diverse communities, in addition to a family advisor.
  - All Right? works in partnership with a wide range of stakeholders, and over time it has nurtured a strong and growing group (or informal and named association) of champions and advocates. The All Right? Champions' Group play an integral part in the roll out of the campaign to workplaces and communities. The Champions’ Group consists of people who have spontaneously come forward advocating for wellbeing in their own workplace, including Inland Revenue, Statistics New Zealand, Ministry of Social Development, Red Cross, Westpac, Ara Institute of Canterbury, University of Canterbury, Lincoln University, Canterbury Resettlement Service, Christchurch City Council, Christchurch City Libraries, Plains FM, The Christchurch Migrant Centre, Pacific Trust, Te Pūtahitanga (the Whānau Ora Commissioning agency) and the Stronger Christchurch Infrastructure Rebuild Team.

**Contracts and agreements:**

The influence of this mechanism on sharing responsibility is through establishing relationships for

- Creative agency – At the outset of the campaign discussions were held with several creative agencies about what a population-wide psychosocial campaign could look like. Armed with the 2012 Taking the Pulse research, the selected creative agency developed the campaign’s question-based name and a unique concept for the brand.
- Research and evaluation was separately contracted for All Right? using an independent market researcher.
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<tr>
<td>responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty).</td>
<td>A public health analyst at Community and Public Health in the Canterbury District Health Board facilitates a process evaluation of the campaign.</td>
</tr>
<tr>
<td>Contracts also exist for the full-time campaign manager, a public health specialist, mental health promoters, communication advisors and administration staff, and later on mental health promoters for Māori, Pacific and culturally diverse communities, in addition to a family advisor.</td>
<td></td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong>&lt;br&gt;The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>A high-level group was established at the beginning of the campaign to provide All Right? with strategic oversight and expert guidance. It comprised academics, social marketing experts, clinicians and representatives from local iwi Ngāi Tahu, and met quarterly.</td>
</tr>
<tr>
<td><strong>Social norms:</strong>&lt;br&gt;The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions.</td>
<td>The All Right? campaign was established to normalise the conversations around wellbeing, which had a flow-on effect of creating champions for community initiatives, which were then supported where possible by the All Right? team.</td>
</tr>
<tr>
<td><strong>Vision statements:</strong>&lt;br&gt;The influence of this mechanism on sharing responsibility is through steering and mobilising responsibility sharing by outlining what it should achieve or look like (not strongly enforced or formally agreed to by the parties involved).</td>
<td>The vision of the Social Recovery Wellbeing Committee was to re-establish population-wide health and wellbeing after the series of disasters.</td>
</tr>
</tbody>
</table>
Case study 6: East Coast Bushfires, Tasmania, 2006

Listening to and responding to the voice of the communities

Summary
The governance structures initially set up for the recovery from the East Coast Bushfires in Tasmania were led by agencies as part of the Affected Area Recovery Committee (AARC). This case study demonstrates how the committee structures and supports in the state’s recovery arrangements adapted to enable the voice of the community to be heard and responded to through involvement and collaboration. An independent partnership broker, the disaster recovery coordinator (DRC), was appointed to work using developmental approaches in the ‘space of possibilities’ formed through the Community Recovery Reference Group (CRRG). The DRC represented the CRRG on the AARC, a voice for the communities. The governance and coordination are represented in Table 6.1. The governance processes in the recovery demonstrated the use of five of the seven types of mechanism identified by McLennan et al. (2012) for sharing responsibility. These are summarised in Table 6.2. Government listening to and responding to the community through processes for collective enquiry and decision making were crucial to this adaptation.

Data sources
The information in this case study is primarily sourced from the Australian Red Cross publication ‘Report on the Tasmanian East Coast Fires, community recovery, December 2006–2007 and the Break O’Day Council’s East Coast Fires community recovery plan, February 2007, along with key informant interviews with two non-government organisation workers.

The fire – December 2006
From Sunday 10 to Thursday 21 December 2006 fires blazed along the east coast of Tasmania. Twenty-six homes were lost, with 50 properties damaged across two municipalities.

The communities of Scamander, St Marys, Cornwall, Four Mile Creek, Falmouth and St Helens bore the brunt of the bushfires (Figure 6.1).

The initial recovery response and assistance programs were appreciated by many of the affected residents. These included establishing recovery centres, the efforts of recovery staff from Break O’Day Council, Department of Health and Human Services (DHHS) and Red Cross, emergency financial assistance payments, state-based support arrangements to assist low-income impacted families, donated goods and services and the establishment of the East Coast Bushfire Appeal fund managed by Red Cross.

The context for the community
While statistically, on a national or international scale, these fires were not that big, in the Tasmanian context these fires were the first with such a high level of community impact for a generation (it was 40 years since the 1967 fires and there was still a populace that carried trauma from these fires). This area has a history of fires, but not this level of impact and perceived threat. There was collective community

25 Definitions of ‘involve’ and ‘collaborate’ in the IAP2 Spectrum of Public Participation
shock and outrage that meant that the impact was significant. It wasn’t the absolute impact of the fires, rather the ‘norm-referenced’ impact – what the community was used to and might have expected.

Figure 6.1: Location in Eastern Tasmania

January 2007

- In January 2007, the Affected Area Recovery Committee was appointed.
- Also in that month, community consultations for developing recovery programs for the longer term recovery of the communities were established (see Figure 6.2 for a diagrammatic representation of the timeframes).

The community engagement process for the recovery plan

DHHS, through the DRC, provided advice to the ARRC regarding how to most clearly identify the key challenges facing the bushfire-affected communities and develop recovery programs for the longer term recovery. DHHS released experienced personnel from their normal roles to work with Break O’Day Council staff, and with the support from Red Cross, they cooperatively developed a community engagement process. This process identified how community consultations would be utilised to develop a community recovery plan.
Working through the local government, interviews, community meetings and forums

The cooperation and support from Break O’Day Council staff was essential to vouch for the other workers from participating agencies. The Break O’Day Council staff introduced these new workers to local people, small businesses and groups as trustworthy workers. This was important in the small or remote communities with high levels of bonding social capital. The pre-existing relationships in the community meant that these introductions enabled trust. Council staff phoned all the people who had lost their homes or had been significantly impacted by the bushfires to ask if they would like to participate in an interview. If so, the workers could visit them, or they were welcome to come into the council. A range of questions were developed to prompt reflections, opinions and input into future community recovery needs. Teams of two workers (comprising staff from Break O’Day Council, DHHS, Red Cross and the University of Tasmania’s Department of Rural Health) undertook these interviews with individuals, families, small businesses, community groups and services who had agreed to participate. Workers also attended many community meetings and posed the same questions to those meetings. More than 75 separate interviews were conducted. A database was developed to capture this information following the interviews.

Simultaneously seven small local community forums were held, which provided an opportunity for the communities to debrief with Tasmania Fire Services and Tasmania Police regarding the fire scenario. The forums also provided an information exchange regarding recovery assistance available, as well as posing the key questions (the same as used in the interviews) to gauge the opinions and input from those present. All the information and proposed community recovery initiatives (more than 100) gathered through this consultation process were used to inform the community recovery plan. As the affected communities were closely involved in the development of the community recovery plan, its broader acceptance and potential to be effectively implemented was strengthened.

April 2007: community recovery plan endorsed

The community recovery plan is structured around 10 overarching recovery objectives:

- coordination of the recovery effort
- strengthen community participation and ownership of recovery
- enhance communication and information
- ongoing assessment, planning and evaluation of community recovery strategies
- increase community preparedness for emergencies
- focus on personal and community support
- focus on environmental recovery and development
- focus on economic recovery and development
- focus on infrastructure restoration and development
- focus on future development.
Table 6.1: Governance and coordination of the East Coast Tasmania Bushfires, December 2006 – December 2007

<table>
<thead>
<tr>
<th>Recovery governance operational structures</th>
<th>Roles and responsibilities</th>
<th>Consultation and support arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affected Area Recovery Committee (AARC)</td>
<td>This committee approved:</td>
<td>This committee comprised:</td>
</tr>
<tr>
<td>Established: January 2007 as per state emergency management arrangements</td>
<td>• the employment of the DRC</td>
<td>• Break O’Day Council mayor</td>
</tr>
<tr>
<td></td>
<td>• the establishment of the CCRG</td>
<td>• council’s community recovery officer</td>
</tr>
<tr>
<td></td>
<td>• the community recovery plan</td>
<td>• council’s general manager</td>
</tr>
<tr>
<td></td>
<td>• the process to assess applications and distribute assistance under the Natural Disaster Relief and Recovery Arrangements Community Recovery Fund</td>
<td>• Tasmanian Government SES, Department of Premier and Cabinet, DHHS, police</td>
</tr>
<tr>
<td></td>
<td>• all final decisions regarding the allocation of funds.</td>
<td>• Australian Government</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Red Cross</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• community representative</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• DRC (on behalf of CRRG).</td>
</tr>
</tbody>
</table>

| Recovery plan (approved by AARC)          | Community engagement process used to develop the plan: | The position requirement was identified, negotiations between all parties (state AARC – Natural Disaster Relief and Recovery Arrangements funding brokerage, Break O’Day Council to host and Red Cross to employ and manage) occurred, the position was advertised, support provided through a professional reference group (Tasmanian DHHS, Tasmanian Red Cross and National Red Cross and |
| Approved: April 2007                      | • introductions of ‘outside agency staff’ through the local council staff |                                      |
|                                            | • impacted residents asked if they would like to participate in an interview |                                      |
|                                            | • interviews – phone or visits, individuals, families, small businesses and community groups and services |                                      |
|                                            | • community meetings |                                      |
|                                            | • seven small local community forums. |                                      |

| Disaster recovery coordinator (DRC)       | The coordinator worked with the affected communities and in particular supported the work of the CRRG throughout the critical initial 12 months to implement the community recovery plan through community development processes, developing and monitoring the communications strategy, engaging stakeholders, ensuring adaptive change management addressed emerging community | |
| Approved by AARC and appointed by Red Cross, May 2007 | | |

Case studies exploring community-led recovery and coordination 68
<table>
<thead>
<tr>
<th>Recovery governance operational structures</th>
<th>Roles and responsibilities</th>
<th>Consultation and support arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Recovery Reference Group (CRRG)</td>
<td>The CRRG members supported the recovery process as an advisory group to the AARC, specifically through: • providing a communication channel between the AARC, the council and the community • undertaking to closely engage with their communities in all aspects • developing and prioritising recovery projects to achieve actions in the community recovery plan and assisting with implementation • providing the AARC with an understanding of the level of support among and capacity of the community and council to work in partnership • fostering community ownership and leadership.</td>
<td>Criteria were developed to select community representatives and the nomination process was widely advertised through local media and newsletters. CRRG membership included community representatives from each of the following areas where there has been a major impact: • Scamander • St Marys / Cornwall • Four Mile Creek / Falmouth • St Helens. Community representatives selected to participate in the Community Recovery Reference Group were required to demonstrate that they: • were involved in community activities and are prominent members of their community or an established community group • have the ability to interact with community members and are articulate.</td>
</tr>
<tr>
<td>Established: May 2007</td>
<td>needs, assisting local group to seek funding for initiatives, reporting and evaluation.</td>
<td>Break O’Day Council), equivalent to professional supervision and separated from line management.</td>
</tr>
</tbody>
</table>
May 2007: disaster recovery coordinator appointed

The process to appoint the DRC took five months and involved Council understanding the need for support, the process to allocate funding, and the auspicing of the position by an independent organisation, in this case, Red Cross. By this time there were significant community questions regarding the lack of visibility of whole-of-community recovery efforts. To this point much of the funding was going to individuals and not community projects. So when the DRC was appointed, there had already been significant community involvement in suggesting ideas for the recovery plan and, with the facilitator role in place, community involvement in prioritisation could occur. Just as the recovery started, with introductions through known and trusted locals, the same occurred for the DRC. Critical to the establishment of legitimacy of this brokerage position was the perceived and actual independence of the position (through an NGO). Although located at the Break O’Day Council, the position was line-managed through Red Cross, and separately supported by a professional reference group (similar to professional supervision that health professionals access) consisting of Break O’Day Council, National Red Cross, Tasmanian Red Cross and DHHS.

May 2007: Community Recovery Reference Group appointed

The process to appoint a Community Recovery Reference Group was in response to a number of factors – people expressing a lack of understanding about available recovery services, knowing how to have community input into the recovery processes, a new bushfire-affected support group that was emerging and the need to undertake a broad community consultation process to identify the challenges for the community and develop a community recovery plan.

AARC decision

Options for achieving greater community engagement in the governance arrangements were explored in a discussion paper titled Options for strengthening community involvement with the AARC. This was then presented to the AARC for its consideration with the following options:

- option 1: integrating community recovery with existing community groups
- option 2: establishment of a formal local community recovery reference group, or
- option 3: ongoing community recovery forums with open community invitation.

At its February meeting the AARC selected option 2 as its preferred approach and approved the establishment of a CRRG.

Criteria were then developed for selecting community representatives and the nomination process was widely advertised through local media and newsletters. Nominated representatives were selected on their ability to represent bushfire-affected communities and to provide effective two-way communication between the AARC and those communities.

CRRG composition and role

The CRRG was made up of nine residents representing the four communities that were significantly affected by the fires. These were: Scamander (three reps), St Marys / Cornwall (three reps), Four Mile Creek / Falmouth (one rep) and St Helens (two reps). The CRRG was initially convened in May 2007 and they immediately worked on and finalised its terms of reference, which were then approved by the AARC. The CRRG was to be an advisory group to the AARC and to specifically:

- assist their communities to identify emerging recovery needs and plan appropriate recovery actions
- develop and prioritise recovery projects to achieve the actions identified in the community recovery plan
- assist with implementing and coordinating recovery projects being undertaken in the community
• use local networks to share information with the community about the recovery process, resource allocation and decisions and projects planned
• foster community ownership of recovery projects and support for individuals to become involved in local initiatives and leadership roles.

CRRG and the recovery plan
The DRC worked with the CRRG and the 10 overarching recovery objectives. While time didn’t allow for them to engage directly with the community, they went back to transcripts of the public forums and used this as a starting point, with 110 actions the community had suggested. Together they prioritised these using criteria agreed to by both the CRRG and the AARC. The CRRG members went back to their individual communities to seek any further input on the prioritisations. The CRRG very much appreciated the methodology for wading through all the options that were suggested by the community and being able to prioritise (broad scale or local benefit, timeframe to realise benefit, etc).

Preference weighting principles were given as follows:
• projects that have strong community support (endorsements and/or implementation partnerships) and that enhance local capacity
• recovery planning should consider environmental, economic and social recovery needs.

Then:
• The first priority for further recovery resource allocation was to ensure effective preparedness for future fire events (e.g. residents preparedness skills, firefighting infrastructure).
• The second order of priority was for replacing infrastructure/assets (social, economic and environmental) directly lost in the fires (e.g. priority regeneration areas, public amenities, social structures, small businesses directly affected by the fires).
• The third order of priority was in developing new infrastructure not directly lost in the fire (e.g. new public amenities).

Initially, 50 suggested recovery actions were taken to the ARRC. The process is outlined in Figure 6.2. Only one-third of the recommended recovery actions involved spending money. Many of the requests involved changes in process or regulation and placing signage for public awareness. At least half of the requests for approval from the CRRG to the AARC related to feeling more secure for future events.

After further development, the remaining proposed projects were prioritised through a rating system, which considered how well a project would:
• improve public amenity value
• improve community wellbeing and harmony
• be widely supported
• increase local social capacity
• provide a visible or tangible outcome
• improve fire preparedness
• offer value for money.

The CRRG were supported by the DRC as an advocate for their communities throughout the eight months that the DRC was in the position. The person who took over leading the group after the DRC left (May 2008) was a great informal community leader from the region, the regional volunteer fire chief, and to some the ‘unofficial’ mayor.

Key factors that enabled this model:
• The DRC was someone the community could trust to articulate its concerns to the AARC (the DRC position selection criteria and process enabled this).
The DRC came from outside the region so was less likely to be perceived to represent one locality within that particular local government area.

The DRC brought community development experience to enable a valuing of what was there before and collective visioning of what could be. This person was able to access further disaster recovery expertise through the professional reference group.

The DRC was established early in the recovery operation and then transitioned out of the role using a process that enabled local facilitation of the CRRG and the recovery process.

The localisation of decision making through community engagement to prioritise projects and allocate recovery funding was of critical importance. The CRRG implemented the endorsed priority projects through its communities but were not involved in the administration or delivery of funding.

The CRRG and AARC agreed on the criteria that would be used for determining the priority projects/programs/services.

This case study provides an example of a governance framework and its connection through community engagement to project prioritisation and funding, supported through a partnership broker, so that affected communities could manage their own recovery processes and lead in the decision making concerning their community. It demonstrates how the partnership broker, the non-government organisation sector and all three levels of government worked together to respond to the call from community for greater representation and then worked with the community to combine their resources and efforts to assist individuals, families and the community’s recovery.

**Mechanisms for sharing responsibility**

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, an individual living a life they value or a community having a sense of self-efficacy. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Five of these are considered relevant to this case study and are captured in Table 6.2.
Table 6.2: Mechanisms for listening to and responding to the voice of the communities – East Coast Bushfires, Tasmania, 2006

<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
</table>
| **Organisations and associations:**                           | State government legislation in the Emergency Management Act determines state-level responsibility for supporting recovery. State government departments write the state emergency management plan and this refers to the support of an Affected Area Recovery Committee. | The state government was responsible for setting up the AARC through the Department of Premier and Cabinet. Affected Area Recovery Committee (AARC):  
  - The AARC was formed under the guidance of the Tasmanian emergency management plan under the stewardship of the then State Emergency Management Act.  
  - Once established, the AARC was chaired by the mayor and membership consisted of state government departments. There is nominally 50/50 local/state government ability to use this lever. |
| **There was no CRRG described or prescribed prior to the event.** | Community and local government dynamics provided the context for community representation for routine decision making prior to the event. | The establishment of the CRRG was an AARC decision. AARC enabled the CRRG through a genuine partnership approach and by continuing to refine the purpose of the recovery (i.e. not simply to spend the funds but to approve all projects, whether or not they required funding). The partnership approach was evident through the requirement that all AARC-endorsed/adopted recovery activities must have come through CRRG endorsement. While this may not have been formalised in the governance documentation it was achieved in the way the parties respected each other’s role. Community Recovery Reference Group (CRRG):  
  - Community recovery representation roles were taken on by established community leaders to form the CRRG (under the auspices of the AARC) as a coordinating body with terms of reference to give more voice to impacted communities to influence decision making. The DRC role was integral to this as an enabler. |
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contracts and agreements:</strong> The influence of this mechanism on sharing responsibility is through establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty).</td>
<td>Funding: Tasmanian Department of Premier and Cabinet along with Commonwealth Attorney-General’s Department. Terms and conditions for the position: Negotiated with NGO and Break O’Day Council.</td>
<td>To adequately determine the need and negotiate the terms for the appointment and hosting of the DRC (facilitator/partnership broker) in support of community recovery, a memorandum of understanding was signed between DHHS, Red Cross and the Break O’Day and Sorrell councils and came through Natural Disaster Relief and Recovery Arrangements funding (state and Commonwealth).</td>
</tr>
<tr>
<td>Not applicable</td>
<td>Memorandum of understanding between the AARC and the CRRG – terms of agreement between these two coordinating committees was established.</td>
<td></td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong> The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>Not applicable</td>
<td>State and local government within the AARC – this occurred formally within the AARC, made up of different state and local government representatives, as the group determined its functions, role and responsibilities.</td>
</tr>
<tr>
<td>Not applicable</td>
<td>Break O’Day Council and DHHS Tasmania conducted the consultations and gathered the feedback for actioning. The community consultations and engagement processes were used to determine the community needs and check in on actions from the beginning of the recovery process to the detailing of the recovery plan.</td>
<td></td>
</tr>
<tr>
<td>Not applicable</td>
<td>Community members – the coordination and governance with the presence of the CRRG, established five months on, was to ensure a community-centred approach that built the capacity of local community members to continue the developmental approaches to recovery over the long term. The CRRG used collective enquiry and decision-making processes to prioritise the recovery actions identified by the community for recommendation to the AARC for approval.</td>
<td></td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Lead prior to the event: Whose hand was on the lever to make this happen?</td>
<td>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Social norms: The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions.</td>
<td>Individuals from the community in voluntary or paid leadership roles</td>
<td>Individuals from the community stepped up into leadership roles after the event. There was a commitment from community members to participate based on a strong sense of altruistic meaning, a willingness to volunteer and an ideology that people needed their community, and people in that community needed to step up.</td>
</tr>
<tr>
<td>Vision statements: The influence of this mechanism on sharing responsibility is through steering and mobilising responsibility sharing by outlining what it should achieve or look like (not strongly enforced or formally agreed to by the parties involved).</td>
<td>Break O'Day Council</td>
<td>Break O'Day Council – Strategic statements about this community were developed with and held by local government on behalf of the community.</td>
</tr>
<tr>
<td>Federal, state and local government staff</td>
<td>Federal, state and local government staff followed professional codes of practice including public service values and codes of conduct.</td>
<td></td>
</tr>
<tr>
<td>Not applicable</td>
<td>DRC and professional reference (supervision) group – professional standards for quality community engagement (e.g. IAP2 and values statements – Red Cross had fundamental drivers for the participatory practices and developmental approach).</td>
<td></td>
</tr>
</tbody>
</table>
Figure 6.2: Recovery planning for East Coast Tasmania Bushfires, December 2006 – August 2007

Planning Overview - East Coast Fires Community Recovery Program

Dec-06
Fires

Feb-07
Forums and Consultation >> 110 recovery suggestions

Mar-07
Recovery Plan

May-07
CRRG appointed; filters recovery suggestions
Urgent actions - no further consultation
AARC endorsement May meeting

Jun-07
CRRG prioritises & filters remaining projects / activities
Draft list to June AARC for feedback

Jul-07
CRRG works up final projects list
Community consultation
Delivery partnerships
Project development and budgeting

Aug-07
AARC considers final projects list

Implement

Source: Recovery planning flow chart, June 2007, unpublished.
Case study 7: Recovery Adaptation, Gippsland, Victoria, 2013–14

Asset Based Community Development applied to recovery

Summary

During the summer of 2013–14 the East Gippsland region was impacted by two large and damaging bushfire events: the Snowy complex fire, which impacted the communities of Goongerah, Bonang, Bendoc, Deddick and Tubbut; and the Mount Ray fire, which impacted on the Fingerboards, Walpa, Iguana Creek, Glenaladale and Fernbank communities (see Figure 7.1).

To help these communities recover from the fires, the East Gippsland Shire Council (EGSC) implemented the innovative Adaptation for Recovery project using the Asset Based Community Development (ABCD) framework as the delivery model.

Figure 7.1: Location of impacted towns in Gippsland

Data sources

Most of the information and graphics in this case study are drawn or replicated from two reports:


The context and summer 2013–14

EGSC is frequently exposed to and has experienced numerous natural hazard-related disasters in the past. After the significant 2014 bushfires in the municipality, EGSC implemented a new approach to disaster recovery. The Adaptation for Recovery project aimed to address immediate needs and also to address the cumulative impacts of disasters on communities. It aimed to support resilience building and development of individual and collective adaptive capacity across the diverse, fire-affected communities of Glenaladale (including nearby communities of Iguana Creek and Fernbank), Bonang, Tubbut and Goongerah (the latter three areas will be referred to collectively as the Mountain Rivers area where relevant) using an ABCD approach (Figure 7.2 shows the components of this approach).

The ABCD approach and its impact

Significant and diverse activity was generated in each area. An array of initiatives was undertaken that targeted individual capacity needs, as well as broader community preparedness concerns. Activities attracted participation from across the affected communities. Attendance varied from a few people at targeted workshops to more than 150 people at the Glenaladale Emergency Services Day held in October 2015.

Figure 7.2: Components of the ABCD approach

![Components of the ABCD approach](image)

Source: Future Creation 2016, p. 5

The philosophical underpinnings of the ABCD approach mean that the community built its own definition of resilience, and resilience, as defined and evaluated by each of the communities, was found to have improved through the project. The ingredients for resilience proposed by the community working groups were:

- access to resources – financial, physical, facilitated assistance and emotional
- accessible, engaged, responsive organisations – such as the Department of Environment, Land and Water, Country Fire Authority, VicRoads and EGSC
- good communications – internal and external to the community
- strong community connections – across and between communities
- effective leadership – internal to the community and externally from agencies
• sense of self-reliance – collectively for the community
• community commitment and participation
• sense of a future direction
• practical preparedness – at individual and community levels.

In addition to improvements in resilience, community-level preparedness for natural hazards was perceived to have improved:

• Communities in Bonang/Tubbut and Glenaladale actively sought to improve the collective practical preparedness of their communities for future fire events. Community members also felt that many of the project activities enhanced their sense of connection with the broader community and improved awareness of what steps should be taken in an emergency.
• Individual preparedness for natural hazards was perceived to have improved for some people, but not for all. Some project participants reported increased clearing on their properties and feeling more prepared. However, organisational stakeholders noted they had not seen evidence of individuals changing their behaviour to be more prepared in the lead up to the summer fire season, and concern was expressed over the lack of incident management training and skills. Additionally, some community members conveyed that they felt unprepared and fearful in the lead up to summer.

Third, there was a perceived change in individual attitudes for some community members:

• Community members reported having more positive, confident outlooks and greater willingness to participate. They noted feeling empowered and a sense of pride in their achievements and felt more connected to their community as a result of participating in the project.
• Relationships and capacity to engage with some government agencies was reportedly enhanced. Community members and stakeholders noted that healthier relationships were established with the Department of Environment, Land and Water in Bairnsdale. Glenaladale and District Emergency Management Group (GDEMG) members expressed more confidence engaging with government departments in general.

Levels of participation from the communities

Varying levels of participation occurred, as per Figure 7.3, from the very active core working groups, to those connected to them, then the broader community who were occasional participants and finally non-participants.

Figure 7.3: Levels of participation in the project

Source: Scott 2018, p. 17

Evaluation of the approach

Project participants were the central focus of the ABCD evaluation, reporting on the quality of the activities organised by the agency and by community members within the project. The evaluation found
that it delivered both immediately tangible outputs for the affected communities, as well as longer term, less easily quantifiable outcomes that will have a positive ripple effect on community resilience. The modified ABCD project model, underpinned by community-directed recovery, contributed strongly to the community resilience outcomes. This project has many insights for government supporting community-led approaches as outlined in the evaluation document that the local council commissioned (Scott 2017) and the report on lessons from the implementation of the Adaptation for Recovery project (Future Creation 2016).

Of interest also are the factors that might have limited inclusive engagement and led to community members choosing not to engage in the processes used:

- In Bonang/Tubbut, the initial meeting to launch the project still displayed anger about how the fire was managed, which was perceived to have alienated some people from attending later project meetings.
- Bonang and District Emergency Group (BADEG) and GDEMG meetings were not perceived as open to broader community attendance, which may have limited engagement by some people. However, attendance was also influenced by existing internal tensions in the community.

The Adaptation for Recovery report suggests a modified approach to ABCD that can be applied in a disaster recovery situation (see Figure 7.4).

Several elements of the project delivery model were recognised as having positively influenced the outcomes and were therefore included in the suggested model. These were:

- facilitator role
- community-directed recovery
- flexibility of project delivery
- tangible outputs
- untied project funds
- length of time spent in the community
- cooperative approach with other projects.

Findings from the evaluation included the following:

- The ABCD approach can be used as a vehicle to assist communities to ride and survive change. It is an approach that enables the learnings to become embedded and create a more responsive system or community. However, it needs to be implemented with thought and planning, involve the relevant agencies and organisations and be implemented over a timeframe that permits change (minimum of two years).
- ABCD is flexible and it allows multiple agencies to support community effectively and can deliver tangible outcomes. The approach allows the community to identify what’s important to them and can involve activities not regarded as part of a traditional recovery approach.
- In the past when recovery projects finished all recovery process finished or stopped. The ABCD model can create momentum and interest in the process and prepare the community to continue/maintain the work that was initiated.
- Leadership and communication skills within communities can be enhanced using this approach, allowing active engagement with agencies and own communities, which builds resilience (emergency context). This was demonstrated through:
  - an improvement in optimism and positive approach
  - improved communication with agencies
  - improved perception of community preparedness for fire events.

Key recommendations from the experience of this approach to recovery and resilience are:
• ‘Establish a strategic approach to recovery assistance and funding, coordinated by a single agency such as the Department of Health and Human Services. Different agencies can still provide recovery funds for a variety of targeted projects, but coordination by a single entity is likely to enhance impact.
• Incorporate a modified ABCD approach within local recovery plans, incorporating the elements identified above.
• Establish a recovery partnership with local mental health professionals and integrate mental health expertise in the recovery project design.
• Undertake a local community assessment soon after an event, to adequately tailor recovery efforts.
• Recruit appropriate facilitators, including consideration of professional skills, personality traits and local context. Provide training in the ABCD approach if needed, prior to the project commencing.
• Undertake a structured, post-event debrief with impacted communities to diffuse anger and address issues of immediate hurt and concern.
• Facilitate the transition from emergency management to community development and resilience towards the end of the project to further embed project impact, enabling the community to carry new capacities into the future.’ (Scott, 2017, p7).
Some further options identified from the project include:
• exploring the longevity of the outcomes in each of the communities
• identifying how best to negotiate community divisions during recovery and resilience building
• understanding how best to alleviate emotional trauma through recovery and resilience projects
• exploring how participatory evaluation of recovery and resilience projects could enhance project learning and outcomes.

Mechanisms for sharing responsibility
In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, an individual living a life they value or a community having a sense of self-efficacy. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities.
McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Five of these are considered relevant to this case study and are captured in Table 7.1.
Figure 7.4: Underpinnings of the Asset Based Approach to Recovery and Resilience in East Gippsland

Source: Scott 2017, p. 11
Figure 7.5: An ABCD approach for application in community recovery from

Source: Scott 2017, p. 48
Case studies exploring community-led recovery and coordination

Figure 7.6: Project logic map (informed the evaluation)

Source: Scott 2017, p. 57
## Table 7.1: Mechanisms for sharing responsibility in community recovery through ABCD, East Gippsland, summer 2013–14

<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Examples</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong></td>
<td>Glenaladale: After the bushfire, the community self-organised to form a committee that successfully demanded a review of the fire suppression tactics applied at the fire. At the time, there was a lot of anger and frustration from community members about the fire management tactics used by government agencies. The project did not commence fully in the Glenaladale district until some six to eight months after the fire and a subsequent review was well underway. A new group, the GDEMG, comprising some members of the committee that successfully negotiated for the fire inquiry along with additional community members, was established.</td>
<td>GDEMG, which was community-initiated</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.</td>
<td>The Mountain Rivers recovery facilitator did not work with an ‘association’ but with the individual communities in the different ways they wanted to approach their recovery.</td>
<td>Recovery facilitator</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong></td>
<td>EGSC contracted recovery facilitators for each of the two geographic areas: Glenaladale (two days/week starting six months after fires) and Mountain Rivers (Goongerah and Bonang/Tubbut), two days/week starting 14–18 months after the fires.</td>
<td>EGSC: responsible for contract, accommodation, or liaison with other agency support for this (Orbost Regional Health offices) and relational legitimacy for the position</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty).</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong></td>
<td>A community debrief was conducted to help the community process their anger, pain and grief, along with an independent review of the disaster management approach. This debrief process can also assist in getting community input into the rolling out of the recovery project.</td>
<td>Recovery facilitator with the support of the EGSC</td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Examples</td>
<td>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
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<tr>
<td>The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>Appreciative enquiry approach for Glenaladale – using ABCD with the GDEM. Cultural capital in this regard included some established formal groups and networks within the community including cricket club, recreation reserve committee, Landcare group and local Country Fire Association brigade. Community members have a wide range of skills, experiences and interests.</td>
<td>Recovery facilitator with the support of the EGSC</td>
</tr>
<tr>
<td></td>
<td>Appreciative enquiry approach for Mountain Rivers communities, working separately with each with ABCD approach.</td>
<td>Recovery facilitator with the support of the EGSC</td>
</tr>
<tr>
<td></td>
<td>Evaluation approach developed collaboratively with EGSC, key stakeholders, community representatives and the recovery facilitators.</td>
<td>EGSC</td>
</tr>
<tr>
<td><strong>Social norms:</strong></td>
<td>The ABCD approach in assisting communities to identify their own priorities and contributing strengths (assets) builds impetus for ownership and action.</td>
<td>Individuals from community stepping up into leadership roles after the event</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose social incentives and sanctions.</td>
<td>The role of the facilitator in each of the communities was to emphasise the building of relationships, modelling and utilising approaches, dialogue and collaborative skill sets.</td>
<td>Recovery facilitator</td>
</tr>
</tbody>
</table>
| **Vision statements:** | Each community was involved in determining what their community wanted to focus its efforts on. | Community representative groups:  
• Glenaladale  
• Mountain Rivers |
<p>| The influence of this mechanism on sharing responsibility is through steering and mobilising responsibility sharing by outlining what it should achieve or look like (not | ABCD professional practice philosophy and methodology. | Recovery facilitators |</p>
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Examples</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td>strongly enforced or formally agreed to by the parties involved)</td>
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</tbody>
</table>
Case study 8: Sherwood Fires, south-east of South Australia, 2018

‘Supporting community leaders to lead community recovery’

The fire – Saturday 6 through to Sunday 7 January 2018

In January 2018 a fire in the Sherwood district burnt 12,000 hectares of agricultural land on 19 properties, destroying two homes. Losses included 3,000 animals, houses, sheds, machinery and fencing. Land was exposed to soil erosion and the total estimated damage was $7.1 million.

This was a relatively small event that did not meet the criteria for the Natural Disaster Relief and Recovery Arrangements, but it did trigger the state’s recovery arrangements.

The relative level of support required from government agencies was considered low due to the preparedness and self-reliance of the affected community. This community has successfully withstood a number of adverse events in recent times and is well connected through strong local networks. It has a long history of working with governments and has established relationships with financial institutions.

Figure 8.1: Location of Sherwood area

Data sources

The information in this case study is sourced from interviews with three key informants, all public officials and one of which is based in the local community. This data was supplemented by the report *Case studies on resilience and recovery needs, 2018*, by Justine Drew, Primary Industries and Regions, South Australia.
Community meetings

A community meeting hosted by the Country Fire Service was held on 11 January with around 100 people attending. At this meeting the SA Police spoke about what they did and why they did it. At one stage a leading community member stood up and spoke to the people gathered with words such as: ‘It’s not the first fire we’ve had and it’s not going to be the last and we’ve got to work together…’. He received a round of applause and those agencies that came from outside the community immediately knew he had credibility with those who were there and was a legitimate and authentic community leader, speaking to the heart of things for many in this community.

The community meeting was followed by a meeting of affected farmers from Sherwood on 12 January.

Since then, community leaders have organised a range of community gatherings, set up displays of field days and theatre events. The Country Fire Service, made up of local community, also ran an environmental day.

Recovery committee

The community demonstrated high capacity and capability and set up an informal recovery committee to engage with the government agencies involved in the recovery. The purpose of the committee was to coordinate all recovery activities and ensure that all affected people are supported. This was a ‘light touch’ from the perspective of the state; however, it did provide support, information and assistance on aspects the community may not have been aware of or where community efforts stalled. These relationships also enabled the navigating of state matters and linking in with all the relevant agencies (e.g. heritage buildings, asbestos removal), providing the community with the connections to get things done. As government service providers, the agencies have not been able to deliver everything sought by the community; however, there is a genuine effort to provide practical support, continuing with sourcing grants for the environment, and the symbolism generated when people from government agencies walk alongside community cannot be underestimated in recovery.

The initiation of this committee was through a partnership process whereby the State Recovery Office, SA, met with interested agencies locally on 11 January to discuss the need for a recovery committee despite the fact that state arrangements were not triggered. The first meeting took place on 18 January, followed by another on 1 February, then 19 February and then monthly, with all partners undertaking the work they were responsible for outside of meetings.

The committee consists of the Tatiara District Council CEO as chair (new to the community six weeks prior), along with representatives from Primary Industries and Regions (PIRSA), Natural Resources South East, Coorong and Tatiara Local Action Plan, Health SA, Department of Communities and Social Inclusion, Country Fire Service, Red Cross and the MacKillop Farm Management Group. Critically, affected landholders are represented by key community leaders and another as landholder liaison (whose property was not directly impacted). The committee will be in place for as long as required and at the time of publication the committee was still active. While a ‘trial by fire’, the District Council CEO who chairs this committee is now 12 months into her role and has well and truly established her place in the local community.

The key roles of this committee included communication (four newsletters: 23 January, 9 February, 28 February 2018 and 22 March 2018), a damage assessment, a needs assessment and to drive some of the recovery activities. The landholder liaison was integral, effective, efficient and appropriate in the role of interviewing affected people to collect information about damage and for a needs assessment. The committee at all times sought local knowledge to keep across who was doing what in the community and to offer options to coordinate and avoid duplication where possible. For example, offers of support, volunteering and donations were coordinated by the Keith APEX Club, the Keith
Lions Club, Bordertown Vehicle Restorers Club and Keith Elders. Each club worked with specific affected landowners to determine the best way to support them.

Impacts, issues and needs

While this was a relatively small event, there were impacts, issues and needs across the community, so having government assisting with the infrastructure for a coordinated response oiled the machinery of the community’s recovery. Key coordination issues included:

- impacts – livestock loss, soil exposure and erosion, asbestos removal, wellbeing
- issues – coordination of volunteers and donations, loss of heritage area fencing
- needs – soil stabilisation assistance, asbestos removal, advice on de-stocking and livestock welfare, fodder

Levels of community resilience

Table 8.1 outlines what might be considered contributions to this community’s resilience immediately prior to and during the adversity they experienced, in generalised terms of their human capital, social capital, physical capital, natural capital, financial capital and political capital as outlined in the Australian disaster resilience community recovery handbook (Australian Institute of Disaster Resilience 2018). This information was compiled by PIRSA and based on observations gleaned while working with the community.

Table 8.1: Resilience assets of Sherwood community in South Australia, 2017–18

<table>
<thead>
<tr>
<th>Human capital – labour power, health, social wellbeing, nutritional status, education, skills and knowledge. Highly skilled, knowledgeable and experienced farmers; understand and anticipate hazards; previous experience of fires. Access to and sharing of knowledge and information through industry networks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social capital – social trust, interconnectedness, norms, social and economic networks, mediated through networks and group membership. Homogenous cultural and enterprise mix. Very strong local community connections through industry group and Country Fire Service membership. Wider industry and regional community connections such as farming systems group, Apex Club. Similar commodities / industry connections. Long association with locality. Community leaders easily identified and mobilised</td>
</tr>
<tr>
<td>Physical capital – houses, vehicles, equipment, infrastructure, information technology, communications. High stocks of physical capital, with insurance cover. Several able to access machinery or equipment through family and friends’ networks, and fodder donated by farmers in other areas coordinated by locals. Mobile phone coverage poor</td>
</tr>
<tr>
<td>Natural capital – access to land, water, wildlife, flora, forest. All land owned by occupier. Reliant on rainfall for crop production. Area subject to drought conditions in recent times</td>
</tr>
<tr>
<td>Financial capital – savings, tradeable commodities, access to regular income, insurance, net access to credit. All farm businesses family owned and operated; most very productive and profitable; most with savings, off-farm income sources, and/or access to credit. Most with insurance cover. Good relationships with banks</td>
</tr>
<tr>
<td>Political capital – ability to influence policy and processes of government, mutual communication between government and citizens. Long history of working with PIRSA; leaders or members of regional industry groups; experienced in working with local, state and national government policies and processes; strong community governance</td>
</tr>
</tbody>
</table>

Source: Drew 2018

26 Courtesy of PIRSA. Case studies on resilience and recovery needs courtesy of Justine Drew, Team Leader, Rural Solutions SA, PIRSA. PIRSA reviewed a number of scenarios to demonstrate how the pre-existing community context and resilience...
Clearly, this community is self-determining, self-organised and they looked after each other. They checked in with government and asked from different things at different times. Government checked in with the community and asked if they’d caught everyone in the network, especially those who might not turn up for community meetings. Notably, a lot of government workers live in or have established associations with this community, contributing to their understanding of government processes and experience in working across vertical structures.

The local community provided support for immediate needs such as livestock welfare and locally donated fodder. Volunteers helped clean up debris and reinstate fences. Farmers collaborated to deal with soil erosion.

On 17 October 2018 community members and the recovery committee worked together to run the ‘Lessons Learned from the Sherwood Fire and Preparing for the Fire Season’ session for the local community, with 70 people attending. They covered how the Sherwood Fire event unfolded, what the locals experienced and learnt, business continuity, fire insurance, asbestos in buildings and clean up, farm firefighting and preparation for bushfire. On Monday 19 November a local community recovery debrief was held to identify any lessons for recovery in the future.

Suggested preparation to enable greater coordination of community efforts, particularly regarding volunteering and donations early on, includes a maintained social or community profile for all towns so that likely leaders and service groups could be identified ahead of time and included in exercises or discussions about activation.

**Mechanisms for sharing responsibility**

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and wellbeing, an individual living a life they value or a community having a sense of self-efficacy. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Five of these are considered relevant to this case study and outlined in Table 8.2.
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Examples</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong></td>
<td>Community recovery committee (CRC): The State Recovery Office encouraged establishment of this as a mechanism for the community to tap into the information, resources and insights of agencies at the local level with links to the state.</td>
<td>There was no CRC existing prior to the event. Community and local government dynamics provided the context for community representation for routine decision making prior to the event. There is a local farming group, of which many affected people are members and the three landholders on the CRC are leaders. The community has a long history of working with government and understanding processes and resources.</td>
<td>The establishment of the CRC (with terms of reference and recovery plan) was a collective decision of those agencies that wanted to support landholder leaders who were ‘doing it for themselves’. The chair of this committee was the CEO of the Tatiara District Council, and the council agreed also to service the committee, while actions were shared among all members. What assisted the success of the formation of the CRC were the pre-existing relationships between the collective of agencies and landholder/farming groups.</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong></td>
<td>Generally, activities happened through goodwill from agencies and volunteering from community members rather than contractual agreements, apart from some collective contracts that emerged. SafeWorks SA investigated the most effective means of removing asbestos from damaged houses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Examples</td>
<td>Lead prior to the event: Whose hand was on the lever to make this happen?</td>
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<td>penalty or non-binding and without penalty.</td>
<td></td>
<td></td>
<td>The soil protection and fencing grants program was led by the Coorong and Tatiara Local Action Plan. Used pre-existing processes to seek grants and other financial contributions to ongoing issues such as native vegetation recovery.</td>
</tr>
<tr>
<td>Collective enquiry and decision making:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>Community meetings</td>
<td>Not applicable</td>
<td>This occurred within the community from the first community meeting – with strong legitimate and authentic community leaders enabling open discussion.</td>
</tr>
<tr>
<td>Collective enquiry and decision making:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td>CRC</td>
<td>Local government with support from the State Recovery Office</td>
<td>The CRC mechanism allowed for discussion with partners about the best approach to issues, meeting community needs, communications and included discussion on the role and function, representation and future of the CRC.</td>
</tr>
<tr>
<td>Social norms:</td>
<td></td>
<td></td>
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</tbody>
</table>
| The influence of this mechanism on sharing responsibility is through establishing informal, shared rules of engagement to share responsibility and/or impose | There was a commitment from community members to participate based on a strong sense of altruistic meaning, a willingness to volunteer and an ideology that people needed their community, and people in that community needed to step up. | The affected community has a history of making things happen for themselves and had been affected by fires several times previously, so were prepared and practised. Given they are a ‘remote’ area with poor telecommunications they are used to | • Individuals from the community stepping up into leadership roles after the event.  
• Individuals and groups volunteering to assist in the recovery effort in a variety of ways. |
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Examples</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
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<tbody>
<tr>
<td>social incentives and sanctions.</td>
<td></td>
<td>keeping in contact and checking on each other. While the social network in this area had waned over the years, it was renewed by the recovery activities emerging from the fire impact.</td>
<td>• Community members are very respectful and effective in working with support agencies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>People from government were strongly committed to helping communities and in some cases while they worked for state-based organisations in the affected community.</td>
<td></td>
</tr>
<tr>
<td>Vision statements:</td>
<td></td>
<td>Strategic statements about this community developed with and held by local government on behalf of the community, including plans and arrangements for recovery.</td>
<td>Tatiara District Council</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through steering and mobilising responsibility sharing by outlining what it should achieve or look like (not strongly enforced or formally agreed to by the parties involved).</td>
<td></td>
<td>Professional codes of practice: public service values and codes of conduct</td>
<td>State and local government staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Professional standards for quality community engagement (e.g. IAP2 and values statements such as Red Cross – fundamental drivers for the participatory practices and developmental approach).</td>
<td>CRC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>National Principles for Disaster Recovery are the foundations from</td>
<td></td>
</tr>
<tr>
<td>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</td>
<td>Examples</td>
<td>Lead prior to the event: Whose hand was on the lever to make this happen?</td>
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<tr>
<td></td>
<td>which the recovery support was provided by government.</td>
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Case study 9: Canterbury Waimakirri District Earthquakes, New Zealand, 2010–11

Council engaging and being enabled by the community

Summary

Recognising the importance of recovery being led by the community and valuing Council leadership for clarity about who was in charge, the Waimakariri Council worked hard to put the community at the centre of the recovery program by supporting and encouraging local leadership, initiatives, resilience and ensuring sound communication. This included community-based organisations providing social support. As a result, the recovery was responsive and flexible and genuinely engaged communities and empowered them to move forward. Three case studies appear below, taken from the Waimakariri Council's document Social Recovery 101.27

Data source

While endeavours were made to connect with local recovery workers, the information in this case study comes directly from Waimakariri District Council’s Social Recovery 101, documentation of the recovery from the 2010–11 series of earthquakes, which was written as a guide after a large disaster for integrated social recovery efforts.

Background

Throughout the Waimakariri Council’s publication Social Recovery 101, the centrality of community is integrated.

The examples below, from this document, illustrate the primary importance of the organisations that exist in the space of possibilities, or co-production to enact community-led recovery.

In the chapter on Community focused recovery, the strategies and aligned case studies include:

- Supporting community-focused decision-making structures – hearing the communities voice – case studies: Residents associations important role; and Gathering data from social service agencies to understand the changing community and its capacity to respond
- Supporting effective committees.

Brookie (2011) reports that from the outset, the Waimakariri District Council placed community engagement at the core of all decision-making and communication. Prior to the quake this council had an active and well-funded community board. Shortly after the earthquake, a hub office for Waimakariri (the Kaiapoi Earthquake Recovery Assistance Centre) was set up, with agencies involved in the recovery process invited to establish offices there. This had the advantage of the recovery agencies knowing the situation on the ground and residents being able to come and get information. Community engagement in Waimakariri District was seen as very successful (Brookie 2011, p. 261)

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Mechanisms for sharing responsibility

Social Recovery 101 captures what was required through the lens of a council collaborating with pre-existing structures in the community.

In this paper we are using the notion of responsibility sharing as it applies to the risks faced by communities before, during and after a disaster. Those risks might be to community safety or to a community’s health and well-being, to an individual living a life they value or to a community having a sense of self-efficacy and capability. These are all considerations as the rapid change process that is community recovery evolves. The mechanisms are the ways that responsibility sharing has occurred among multiple parties, in particular in this example between governments, non-government agents and communities. McLennan’s (2012) work examined the mechanisms by which responsibility sharing is shaped and came up with seven broad types. Three of these are considered relevant to this case study and are captured in Table 9.1.

Waimakariri case studies

<table>
<thead>
<tr>
<th>Residents associations important role</th>
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<tbody>
<tr>
<td>Residents Associations played an important role in the Waimakariri Recovery. The Pines Beach/Kairaki Residents Association was over 100 years old and well established within the community. The Kaiapoi Residents Association was established post-earthquake and no longer exists. Both very different groups, who had similar aims – to unite their community’s voice, and work with the recovery agencies to ensure their communities needs and issues were heard. The Kaiapoi Residents Association was a good example of a leader stepping up to advocate for his community. Regular meetings were an opportunity for residents to share their experiences and support one another and to feel that they weren’t alone in their recovery. Local MPs and Council staff and elected members were in attendance at all meetings so that there was relevant and up to date information being shared and residents’ issues and concerns were being heard and addressed. The meetings were important for the resilience and wellbeing of the impacted residents. The Pines Beach/Kairaki Residents Association set up an earthquake focused committee which was led by one...</td>
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</table>
of the impacted residents. This played a vital role in ensuring this community's unique needs were heard and understood.

Council and CERA representatives met with all Residents Association representatives every two weeks initially to share information and provide updates and also to hear issues and concerns from residents. Other agencies/groups would be brought in as necessary (e.g. insurance). These meetings continued for 2½ years and they worked extremely well as a vehicle for exchanging information and discussing issues and solutions and communicating next steps. Good working relationships developed and trust was built.

*Excerpt from Social Recovery 101.*

**Understanding the changing community and its capacity to respond**

The Waimakariri District Council commissioned a report to collect data from social service agencies working in the Waimakariri District post September 2011. The aim of the mapping project was to identify the key current and anticipated social needs in Waimakariri and develop a guiding document for the local social service response moving forward into recovery. The study found:

- Mental health particularly with regard to increased level of stress and anxiety, across all age groups was the key impact of the earthquake.
- Social isolation especially for older people and those displaced was a primary concern for what was traditionally a tight-knit community.
- Schooling placed a significant strain on parents, students, teachers through the need to catch up on study and exams in what had been almost a year of disrupted schooling.
- Domestic violence and abuse increased across all sectors of the community and was a particular concern.

**Recommendations from the study:**

- The importance of Social Service Waimakariri in bringing organisations together.
- The need for increased social work support.
- The need to focus on community facilities for men since the social displacement of the things like the league club and the bowling club.
- Resources be put into developing community events and community spaces.
- Consideration should be given to the further development of support to parents and teachers in the Waimakariri, possibly in the form of speakers or a course.
- Further resources are needed for preventative mechanisms in domestic violence especially education and training.
- No agency was identified as working with migrants and refugees so this needs to be addressed.

**Social recovery readiness – preparation for the disaster**

**Collaboration – understanding our community**

Social Service Waimakariri had been in place in the community for several years prior to the disaster. This unique collaboration brought together key social service providers, Council and Central Government agencies to plan and focus on key issues throughout the district.

In addition a wider network of grass roots agencies and groups also met regularly to share information, discuss and plan solutions for district wide social priorities. Through these meetings and forums there was a good understanding of the community strengths and vulnerabilities pre disaster. In addition a wider network of grassroots agencies and groups also met regularly to share information, discuss solutions and plan for district wide social priorities.

In addition these existing strong and trusted relationships were invaluable post disaster for effective collaboration and coordination.

See the [Social Service Waimakariri website](http://www.sswaimakariri.co.nz/).
<table>
<thead>
<tr>
<th>Mechanism for responsibility sharing (McLennan &amp; Handmer 2012)</th>
<th>Lead prior to the event: Whose hand was on the lever to make this happen?</th>
<th>Lead in the recovery from the event: Whose hand was on the lever to make this happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisations and associations:</strong></td>
<td>Kāiapōi and the Pines Beach/Kiaraki residents associations</td>
<td>Kāiapōi and the Pines Beach/Kiaraki residents associations set up earthquake committees and met with Council and with CERA</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through changing or strengthening relationships among parties to facilitate responsibility sharing or create authority to influence responsibility sharing.</td>
<td>Social Service Waimakariri</td>
<td>Social Service Waimakariri</td>
</tr>
<tr>
<td><strong>Contracts and agreements:</strong></td>
<td></td>
<td>Waimakariri District Council commissioned a report through the Social Service Waimakariri to find out more information about the impacts</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through establishing relationships for responsibility sharing and clarifying what is expected of the parties involved (these may be binding and subject to penalty or non-binding and without penalty).</td>
<td></td>
<td>Kāiapōi and the Pines Beach/Kiaraki residents associations set up earthquake committees and met with Council and with CERA</td>
</tr>
<tr>
<td><strong>Collective enquiry and decision making:</strong></td>
<td></td>
<td>Social Service Waimakariri mapping project with the Waimakariri District Council</td>
</tr>
<tr>
<td>The influence of this mechanism on sharing responsibility is through collectively querying and/or deciding where responsibility lies and/or how to share it.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Figure descriptions

Figure 2: Different phases that individuals and communities might experience post disaster

This diagram has been adapted from an adaptation in the *Community recovery handbook* (p. 22) from Cohen and Ahearn 1980 and DeWolfe 2000. It shows what the recovery literature suggests about the four stages people go through after disaster:

1. heroic phase
2. honeymoon phase
3. disillusionment phase (some call this the ‘long-term recovery and rehabilitation phase’)
4. reconstruction phase.

This diagram shows that relief generally occurs in the first one to three days during the heroic and honeymoon phases (and can occur before if there is a prolonged or campaign event). Recovery defined as community systems (social/business/environmental) adaptation for continuity (which includes before disaster activity) begins once the disaster has begun and continues on throughout all the phases. It frames the whole process as transition or adaptation through co-production with communities before and during relief and recovery.

Figure 6.2: Recovery planning for East Coast Tasmania Bushfires, December 2006 – August 2007

This figure shows the timeline for the recovery planning for the East Coast Bushfires between December 2006 and August 2007. The fires occurred in December 2006. In February 2007 forums and consultations were held, producing more than 110 suggestions for recovery. In March 2007 a recovery plan had been drafted. In May 2007 the Community Recovery Reference Group was appointed. They identified some urgent actions that needed endorsement at the May Affected Area Recovery Subcommittee and were subsequently implemented. Then the Community Recovery Reference Group prioritised and filtered the remaining suggested projects and activities. In June 2007 a draft list of proposed projects were tested with the Affected Area Recovery Subcommittee for feedback and in July 2007 the final projects list was worked up through a process of community consultation, delivery partnerships and project development and budgeting. The Affected Area Recovery Committee considered the final projects list in August 2007 and the approved projects were implemented.

Figure 7.4: Underpinnings of the Assets Based Approach to Recovery and Resilience in East Gippsland

This figure outlines the underpinnings of the application of the Assets Based Approach to Recovery and Resilience used in East Gippsland (taken from Scott 2017). The recovery program consists of working in partnership and development of relationships and trust; it is community-directed and flexible. The foundation was the recovery facilitator, who works in a participatory and inclusive way throughout the journey.

- Step 1 – resource and support recovery facilitators
- Step 2 – the facilitator helps community to identify issues, set priorities, set long- and short-term goals
- Step 3 – the community draws on its skills, strengths and support systems to deliver priority actions, organise activities
- Step 4 – the facilitator brokers access to external resources
- Step 5 – the facilitator continually reviews, builds morale, celebrates success.

There is a dual focus on long- and short-term tangible wins. The potential process change that can occur due to this is a community that takes on responsibility, leads its own change process and draws on its own and external
resources to act. The potential outcomes include ownership, community connections, self-esteem, self-reliance, confidence, participation and hope.
References

Introduction


All case studies

Case study 1


Case study 2
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Case study 6


Case study 7

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Case study 9
