

Aftershocks

A Scoping Report for Mental Health Promotion in Hurunui & Kaikoura following the earthquakes of 2016

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For the All Right? campaign team

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Introduction

Natural disasters magnify divisions. When disaster strikes, everybody is affected, nobody is immune. Every individual will experience impact of some sort, many more so than others. It follows that each individual will progress along a recovery trajectory that is unique to them and each will have different ideas about priorities for funding, resources, support and effort. This will inevitably bring to the fore various agendas and frameworks, models and policies, and will throw into sharp relief divisions and inequities that pre-exist in the community as each person endeavours to drive forward 'their' recovery from their own perspective.

Yet severe challenges also offer the opportunity, through that very hardship, to reassess our priorities and reconsider our assumptions about the map of our lives. As the land shifts, often values shift too.

"When you're in the midst of this you actually keep focus on what gives your life value and meaning.....and protect that." (Dr Rob Gordon, "Understanding the stresses of recovery in the second and third years; protecting health, lifestyle and relationships" Forum held in New Brighton, Christchurch).

"People who are well supported and able to plan and manage their recovery with a view to their whole situation, report gaining new or increased wisdom or understanding, positive shifts in priorities for their lifestyle and value system, and new or strengthened coping skills." (State Government of Victoria. 2014. Psychosocial Support: a framework for emergencies.)

Natural disasters *can* also be transformative.

On 14th November 2016, residents in North Canterbury (and beyond) experienced a massive 7.9 magnitude earthquake centred near Waiau on the Amuri Plain. Approximately twenty faults ruptured during the event (a possible world record) and the shaking was felt widely across New Zealand, with even offices in the capital left empty in its wake.

The implications of the earthquake (and subsequent tsunami alert and evacuation) reverberate throughout the country, yet it is anecdotally considered to be something of an 'unsexy' event. Much of the major physical damage is hidden (with the notable exception of the road damage north of Kaikoura) and there is therefore less fodder for sensational and sustained media reporting. At this stage, there is lack of clarity about what mid and short term government funding might be made available for dealing with another disaster so soon after the devastating sequence of earthquakes that wrought widespread damage in Greater Christchurch.

Yet the two events cannot easily be separated out. Most people in New Zealand know somebody who was affected by the Christchurch earthquakes and many in the Hurunui and Kaikoura region were directly affected at the time (both by proximity to the event itself and

by consequences such as a population flight from the city into the hinterland). Now, many are experiencing a re-traumatising effect from an event that was so recent and from which recovery, for many, is incomplete. The two events are intricately and inextricably linked and the mental health and wellbeing implications for the psychosocial recovery from both are now equally intertwined.

It is even arguable that there is a pressing need for a *national* conversation following these events (and those in Marlborough in 2013) that raise profound questions about our capacity to deal with further natural (or otherwise) disasters and about the very nature of our communities, in particular their wellbeing and their mental health literacy.

There are huge opportunities for the team working on All Right? and for mental health promotion as a discipline to move to 'the next level'. Much has been learned and new ground broken in the five years since All Right? was launched. The conversation about 'Flourishing' is happening in unexpected places and an understanding of the value of mental health as a resource is widespread across multiple sectors. Even the NZ Rugby Union recently launched a website, 'HeadFirst', promoting better understanding of mental health and distress for players, supporters and volunteers, and offering a range of tips for 'mental fitness'.

Bearing that context in mind, but also careful that the primary focus of this piece of work is on the Hurunui and Kaikoura region, this report attempts to address issues across three main questions and make a series of associated recommendations for the All Right? campaign team:

1. Is there need for and interest in a mental health promotion campaign (similar to All Right?) in response to the Hurunui and Kaikoura Earthquake and Tsunami Event?
2. What would such a campaign look like?
3. What role can, and should, All Right? take in the delivery of any mental health promotion activity in the region?

The report draws from a number of sources in the post-disaster literature but is fundamentally informed by the Briefing Paper written by the Prime Minister's Chief Science Advisor, Sir Peter Gluckman ("*The Psychosocial Consequences of the Kaikoura Earthquakes*", 6 December 2016).

Limitations

This report does not represent a comprehensive piece of *formal* social research. It is, rather, a series of reflections based on conversations and networking carried out across the region in the months of December 2016 through March 2017, as communities come to terms with the long-term implications of the November event.

Many of the conversations are the result of targeted meetings with key stakeholders working primarily in the psychosocial recovery space or, more broadly, in health, community and social development. Many more are the result of informal exchanges with members of the community gathered across three months 'on the ground' in the affected region: business owners, hospitality staff, road workers, campground residents, whitebait fishermen, trampers, to name just a few. As a result, this report embodies both a framed understanding of community needs following a disaster and an assortment of non-professional reactions to concepts such as 'mental health', 'community' and 'recovery'.

All these conversations have been filtered through the lens of years of experience in community development and mental health promotion in order to develop a series of informed recommendations but the report remains, at its core, an *opinion*. For a more robust picture of mental health literacy, language and framing across the region's communities, a more in-depth piece of market research – such as those that have consistently informed the All Right? campaign – may be indicated.

Te Tiriti O Waitangi

Given the relatively short timeframes for preparing this report and the workload the earthquakes have created for mana whenua, this report has not been able to fully explore issues for Māori so cannot be said to give a strong voice to mana whenua in the region. It is a priority to resource some Māori Health Promoters to engage 'kanohi ki te kanohi' with whanau in order to gauge whether there is interest in developing a stream of Māori health promotion in the area.

Recommendation: Funding needs to be identified to ensure that Māori-to-Māori connections can be activated on the ground in the region. The development of the Te Waiorotanga stream of All Right? work in Christchurch has given a powerful voice to tangata whenua and has the potential to become more widely perceived, like All Right?, as a vanguard piece of health promotion work. But this work must be led by Māori and even, potentially, resourced through entirely different avenues than All Right?

Key Findings/Discussion

All Right?

There has undoubtedly been some swift and vocal interest in All Right? following the events in Hurunui and Kaikoura. The campaign has extraordinary reach, even outside of its target population and there is strong brand recognition and a huge amount of goodwill associated with the name and the messages. It is articulated in the 'Community in Mind' document

(Community in Mind: What is needed for effective psychosocial recovery of individuals and communities in greater Christchurch? Canterbury Earthquake Recovery Authority. 2013) that All Right? has become a “trusted voice” in the Christchurch Recovery and represents a strongly grassroots and community-centred approach. Remarkably, although the campaign is nominally only funded for the CERA/Greater Christchurch area (Christchurch City, Selwyn and Waimakariri Districts, *Canterbury Earthquake Recovery Act 2011*), the reach and credibility clearly extend much further. Among those professionals spoken to in Hurunui and Kaikoura, knowledge of the campaign is almost total and many hold the campaign in high regard for its approach, its tone and its impact. Even among ‘non-attached’ community members, there is widespread awareness of the name and messages.

As a result of this awareness and the good standing of the campaign, there is extensive interest in the delivery of All Right? (or something comparable) across the Hurunui/Kaikoura region. Indeed, this report is a direct consequence of requests for a “roll-out” of All Right? in the area, which began to be received almost immediately following the November event. Those requests show no sign of abating – if anything, expressed need for the work continues to put pressure on the campaign team. At the level of the Psychosocial Lead and Social Recovery Managers for Hurunui and Kaikoura, there is a strongly communicated wish for mental health promotion activity to be a key part of psychosocial recovery planning and this desire is echoed widely around networks. The supposition is that All Right? is best placed to take a lead role in this.

The ‘splash’ effect of All Right? outside of greater Christchurch that is noted above, did not extend to Marlborough/Nelson to the same extent. It may be worth asking why there has not been similar motivation and interest.

Recommendation: As a matter of strategic interest, further investigation should be carried out in areas recently affected by earthquakes or other natural disasters to establish how widespread knowledge of, and interest in, the All Right? campaign messages really is. In addition to Seddon and Ward and the communities of Marlborough, this might also usefully include Wellington City, where many buildings had to be evacuated after the 2016 event.

It has been suggested by those involved in the campaign that All Right? is “a victim of its own success”. The notion that resources developed for Christchurch and specific to the Christchurch experience can simply be “rolled-out” anywhere as needed presents a challenging dichotomy. It is, of course, gratifying and humbling for the team that a project borne of unique and pressing circumstances should have garnered such interest and authority beyond its target population cohort, but it is also understandable that they might express resistance to a one-size-fits-all reflex, a ‘quick-fix’ solution that is contrary to Health Promotion practice, for issues that are, in reality, more complex and which will, therefore require a more considered response.

It is worth unpicking this further. Why is All Right? viewed so highly? What are the key components of its success?

All Right? evaluation

*This section draws, in large part, from a robust independent evaluation of the All Right? campaign, recently reported in international literature. (*Kristi Calder, Lucy D'Aeth, Sue Turner, Ciaran Fox & Annabel Begg (2016) Evaluation of a well-being campaign following a natural disaster in Christchurch, New Zealand, International Journal of Mental Health Promotion*).

The evaluation noted the following significant markers of success:

- Key stakeholders were involved from the beginning and felt ownership of the campaign
- The campaign was not perceived to be 'top down'
- The campaign was not marketed as a government message
- Strategic partnerships with non-government and government organisations
- No existing organisational branding associated with the campaign
- Framing of the campaign as a conversation: *"All Right? is the question that begins a conversation."*
- The first phase of All Right?, 'normalising experiences', was a means of reflecting back to the population the variety of emotions which had been highlighted in local research, as a means of connecting with the population and reflecting back to them, in their own idiom, the experience and emotional reactions they had described.
- The campaign was conceived as being, and has remained, grounded in health promotion theory rather than simply good marketing

As the summary report states:

"All Right? has become a powerful champion for well-being in Canterbury. This has been partly due to the success of not being associated with the 'big players' of the recovery but also because of the willingness of All Right? to share their research with the local population, giving the population an overview of how their collective well-being is going during the recovery."

So, All Right? has developed into a vanguard and highly-regarded mental health promotion campaign by following a model of practice that is well-established by the Ottawa Charter (World Health Organisation 1986) and reaffirmed in the Jakarta Declaration (World Health Organisation 1997):

"People have to be at the centre of health promotion action and decision-making processes for them to be effective."

This model is further indicated for psychosocial recovery from disaster and is well-supported in national and international literature:

“The community’s participation and involvement during ongoing recovery is integral to building trust and engagement.

[...]

Community resilience can only be supported through meaningful engagement that enables a community to work together to understand and manage the risks that it faces; feel supported to take ownership of psychosocial recovery plans and activities; and to care for each other.” (Ministry of Health. 2016. Framework for Psychosocial Support in Emergencies.)

Unquestionably, the discipline of Mental Health Promotion is not just reducible to social marketing and the provision of resources. Public-facing collateral is valuable, of course, in ensuring that messaging reaches a wide audience, but for any messaging to be effective, this must be realised as just one component of a multi-level approach that engages with key stakeholders, policy-makers and with the community themselves.

Another key factor in the success of All Right? is its history, its *whakapapa*. The campaign is a project specific to Christchurch (by Christchurch people and targeted towards Christchurch people) but it is developed on the back of national work led by the Mental Health Foundation of New Zealand to advance a conversation about Flourishing/He Puāwaitanga at a strategic level and to promote the Five Ways to Wellbeing (REF) at a practical, individual level.

It is clear that this work, recently exemplified by the All Right? campaign in Christchurch, has shifted the landscape considerably in the wider conversation about the importance of mental health and wellbeing. There is an increased understanding of the value of psychological and emotional ‘capital’ and in ways that activate and cultivate it and this understanding has spread across multiple sectors.

Motivated to share its model of best practice – its “recipe” – where appropriate resourcing is made available, will extend the ‘thought leadership’ into new and important areas of influence. Yet, because of this success, All Right? runs the risk of getting drawn into strategic work that might act as a distraction from its core purpose: that is, to provide a mental health promotion campaign in response to the Christchurch earthquakes.

***Recommendation:** It is imperative that All Right? holds fast to its core work and must, in the first instance, continue to operate as a vanguard mental health promotion project in Christchurch, based on best practice. In the absence of further funding to extend the campaign into other areas, or explore other areas of concern, this could weaken the core campaign in Christchurch.*

Recommendation: Bearing this in mind, there will still be potential value in All Right? continuing to explore opportunities to engage at a more strategic level to promote best practice in mental health promotion. Much has been learned through the delivery of this campaign and there will be opportunities to work with key strategic partners to stimulate a national conversation about wellbeing and resilience in communities and their relationship to pre-disaster preparedness and, more broadly, social capital-building.

All of which leads into considerations about the potential for All Right? (or other mental health promotion activity) in the affected areas:

Applicability outside Christchurch

Clearly, there is a consistent identified interest in Hurunui and Kaikoura in some sort of All Right? involvement or, at least, in some mental health promotion activity that mirrors and builds on the success of All Right? The campaign team are being pressed to do something ... and to do it swiftly.

In simplistic terms, this might be thought of as a “roll-out” but, as noted above, the success of All Right? is fundamentally due to its adherence to best practice models. All Right? is, importantly, much more than its collateral:

“I like the way the campaign gives a real voice to everyday experience. Our voice.” (NGO Manager)

Because All Right? is a Christchurch-specific campaign, developed by a team of Christchurch residents and based on Christchurch research, there exists a two-fold danger in a simple “roll-out” of All Right? resources into any other area.

Firstly, it is possible to do as much damage to the brand reputation by placing resources in a location or community where people use a completely different idiom. Many of the messages refer to ‘Canterbury’ and would, at the very least, have to be edited to target the affected regions. But the problem is deeper than that. Different populations use different vernacular, and resources that rang true in Christchurch and environs may fall flat in Hurunui or Kaikoura. People may not ‘get’ the message, may be resistant to the message, or might even feel insulted in how they perceive the tone. Best practice suggests that messages are not simply *edited* to accommodate a replacement name but are totally reconceived to speak to a new population.

Secondly, it is equally risky sending a campaign into a region that does not have the capacity to follow up in ways that reflect the overall kaupapa of the campaign, framed, as it is, as a conversation. Some capacity-building and workforce development may be indicated to ensure that the core messages are delivered consistently by each individual working throughout the community. All Right? had a sizeable, active campaign team in Christchurch with existing functional relationships across a wide range of organisations and community

groups. By being available and visible they were able to build a network of champions for the messages. This network is not yet well-established in North Canterbury and would require time and commitment to develop.

It is worth remarking that most of the suite of All Right? resources (posters and postcards from many of the phases of the campaign) are openly available from the website or from Community and Public Health for anyone to download, yet they do not appear to have proliferated across the region in the immediate aftermath of the earthquake. In contrast, the Mental Health Foundation's Five Ways to Wellbeing 'speech bubble' campaign – which was, in effect, a proto-All Right? in that the format and messages were developed in response to the Christchurch earthquakes – has resonated well outside of Christchurch and the earthquake experience. In fact, these resources now form a core part of national Mental Health Foundation branding and can be found widespread throughout New Zealand, including in Hurunui and Kaikoura.

What is the difference?

The Five Ways to Wellbeing is an internationally-developed and well-established evidence-based framework, offering simple, practical tools for improving mental health and wellbeing (*Five ways to wellbeing. London: The New Economics Foundation. 2010*). Work to promote the framework pre-dates the Christchurch earthquakes and the conversation is one that has been continuing for some time. The resources have a generic feel for a national audience and, as such, are widely applicable.

In contrast, All Right? is Christchurch-specific. While it is constructed around the Five Ways to Wellbeing framework, it is entirely in response to an urban event and the particular circumstances of that event. The campaign was developed using urban mores and adapting to the landscape as presented by the series of events. A number of the All Right? resources simply do not resonate with the populations in North Canterbury, particularly in terms of where they are 'at' in terms of their current experience. Later iterations of the campaign, developed, as they were, years into the Christchurch recovery, are simply irrelevant to the situation only four months after the November earthquake. The population of North Canterbury is still reeling from the immediate trauma of the event and only beginning to come to terms with the long-term implications of it. All Right? took a phased approach to the campaign and there are no good reasons to expect that anything else would be appropriate for the psychosocial recovery in North Canterbury. For too many people, this is the *beginning* of a journey.

In the midst of all this, it is worth noting that the All Right? process evaluation, based on key informant interviews in 2013 suggested strongly that it would have been beneficial if the campaign was able to start sooner after the earthquakes. Two reasons were identified as to why this would have been valuable: firstly, that all the post-quake well-being messages would have been consistent and come from the same trusted source (all branded with All Right?) and it was thought that this in turn would make the affected population 'feel safer'.

Secondly, starting the campaign earlier may have enabled people to 'give voice to their experiences' earlier and helped to avoid people becoming 'stuck'.

Experience suggests that, to a certain extent, this is already happening as people seek out the resources that are resonant with them right now. All Right? is not a new 'player'. With some groundwork done, the campaign team have the opportunity to guide the appropriate use of early phase materials and steer the conversation with a mind to where the community is currently placed. Having direct experience of the phases of recovery offers a huge amount of insight for those currently navigating the early reactions to the November event.

Indeed, where resources and collateral *have* proved to be resonant, they are the ones that sit perfectly in that space:

The Phase 1 messages ("It's All Right to feel....."), which acted to 'normalise' the early psychological reactions to the earthquake, have been well-received. This type of messaging was well indicated by post-disaster literature and proved to be a key early marker of the success of All Right? Experience suggests that, for people in North Canterbury, they have made a similar impression.

Supplementary to these resources is the "Aroha from Cantabrians" set, which was swiftly developed by the campaign team in the immediate aftermath of the November earthquake. The messages operate to take the real, grassroots, 'trusted voice' aspect of the campaign to offer simple words of support – from people who have 'been through it' to people who are now 'going through it'.

This has proved to be a shrewd move that bridges the perceived gap between the regions, cementing a *human* connection that is not limited by geography or culture. There is an unpretentious, peer support element to these messages that is very powerful, very rich and which skilfully engineers the *beginning* of a conversation.

Recommendation: There will be some value in 'drip-feeding' some early-phase resources into the affected region. Simple messages that 'normalise' the immediate experience and operate by way of facilitating the early stages of a conversation will both a) show a willingness to work in those communities, and b) bridge the gap between the many different aspects of the events, bringing into focus stories of recovery that offer hope going forward.

Given all this, what do people mean when they say they want All Right? in their community? Clearly, they want more than a hasty, ill-conceived "roll-out" of collateral. Resources can be valuable, but to reduce the response to simply that, could be damaging and insulting in the long-run.

What people appear to be responding favourably to are *attitude* and *approach*. Understanding that psychological and emotional functioning will be impacted by the

experience, and cognisant that they will need to pay heed to their mental health and wellbeing as the recovery grinds on, they are embracing a conversation about the subject in a style that is non-pathologising, strengths-based, and which offers hope for the future.

Significantly, as Sir Peter Gluckman puts it, *“[there] needs to be normalisation of the responses to people’s varied psychological reactions – that is, for there to be a wide understanding that most emotional reactions are usual reactions to abnormal or difficult situations and are not a reflection of being mentally unwell or weak.”*

All Right? was always conceived to be a practical application of this. To do it well in a new area requires an investment of people and time.

Rural communities value, above anything else, relationships.

Within relationships, human beings are hardwired to teach and learn through story-telling. While ‘experts’ bring a particular form of conception, we also value the authority of lived experience. Back and forth, we share our unique stories and perspectives to offer hope and support. This is the All Right? conversation: giving a framework (The Five Ways to Wellbeing) to understand mental health and wellbeing; celebrating the many aspects and expressions of resilience; and putting people at the heart of the recovery to build better, stronger communities.

A community worker in Kaikoura said it perfectly:

“[We should] tell stories of local people doing it [Five Ways to Wellbeing] but we also want to hear stories from others who have been there. It would be great to see a picture of who we could be.”

All Right? is a trusted voice precisely because it provides multiple platforms for people to tell their stories. Each piece of collateral represents a human story, a real experience. Importantly, the voices of people are always promoted as looking forward: beyond merely ‘coping’ and actually growing through the experience.

Social media is a powerful tool for bringing people together in a community of support and sharing. Properly modified as a channel for discussion, reflection, and questions, Facebook, in particular, has been a potent two-way source of information, a medium for the conversation. Some of the statistics regarding engagement and reach of the All Right? Facebook page are remarkable.

As the All Right? evaluation says:

“Social media provided a means of continuing the All Right? conversation, including the opportunity for people to contribute to the campaign in real time.”

The All Right? Facebook page has seen an increase in interest and activity since the November earthquake and offers a further opportunity to continue to engage the communities of Christchurch and now North Canterbury in cross-border conversations about our shared experience of loss and change and the ways we can navigate the challenges.

Recommendation: Social media can be a powerful tool for promoting conversations and story-telling and there has already been an increase in interest in the All Right? Facebook page in North Canterbury. Targeted use of this page (and other social media platforms) may be an effective way to breach the perceived divide between urban and rural experiences and impacts by sharing common human accounts which represent, in practice, the Five Ways To Wellbeing.

Recommendation: All Right? should explore other potential avenues and formats for story-telling that will further extend the peer support/education tone of the campaign. Stories of hope and recovery from Christchurch could be positioned alongside stories of people in Hurunui and Kaikoura who are adopting strategies that express the Five Ways To Wellbeing in their own ways.

It is continually stressed in national and international literature and research and in the All Right? evaluation itself, that local research and identification of community need would be essential if All Right? were to be replicated in other areas. As has already been made clear, for subsequent phases and more nuanced messages that continue the conversation that has been started thus far, it will be important to drill down into the unique experiences of the region.

Nothing should be taken for granted.

Messaging outlets will be different: there are, after all, no urban buses or bus shelters and, outside of major towns, no huge advertising hoardings on which to place striking images. Many possibilities have been suggested in conversations with locals who know their communications landscape. Suffice to say that these will all require the forming of new relationships from the ones that have facilitated such effective communications strategies in Greater Christchurch.

Any new collateral will have to be different: in design, in language, in very concept. It may even be that local designers need to be engaged, or at least designers who have experience in developing style and content for a rural audience.

As Hurunui District Mayor Winton Dalley has articulated:

“There is a danger in trying to translate an urban event into a rural context.” (Hurunui Social Recovery Network, January 2016)

And:

"We are very keen to have it and very appreciative, but we would need to have it tailor-made for our community." (The Press, February 24 2017)

These are, unquestionably, very different communities and they have experienced different events that are played out in ways that are unique to them. There is the manifest difference between the urban environment and the rural, between city and small town. There is the fact that Christchurch lost hundreds of buildings and had its city centre irreparably damaged and irreversibly changed by a repeating sequence of events that kept the experience in the national consciousness over a protracted period. The physical damage in North Canterbury, by contrast, is somewhat 'hidden', with much of the 'photogenic' damage restricted to the high country and therefore to land, not buildings. It is possible to drive around the district and see very little obvious damage ... but that does not mean that it isn't there. And the human reactions to the damage are just as palpable.

Even more importantly, there are major differences *within the region*: Kaikoura is a world apart from Amberley, and Cheviot is fundamentally different from Hanmer Springs. Tiny Waiau and Mt Lyford, sitting at the epicentre, appear to have been largely starved of attention yet contain small populations of profoundly-affected people. It is hubristic to think that one can simply walk into a community from outside and negotiate all of its complexities and its history in a misguided attempt to wield 'expertise'.

Yet this is precisely how communities around the world experience their engagements with agencies leading recovery efforts. It is something of a trope of the international recovery literature that local communities report deep resentments at experiences of bureaucratic red tape, slow progress, lack of respect for local knowledge and initiatives, and rigid systems dominating where flexibility and innovation are suggested. Frustration and anger at these are inevitable consequences of a lack of authentic engagement that serves to dishonour the wisdom of the expertise located *within* communities.

All Right?, based as it is on a different model of practice, has the potential to open doors. Working to build relationships and establish trust, and being open about a desire to be led by the community themselves, has already paid dividends in the region. The good standing of All Right?, as seen from a distance, is reinforced locally by demonstrating all the components and attitudes on the ground in the communities of North Canterbury that made it successful in Christchurch.

***Recommendation:** All Right? should continue to actively engage the community in conversation and build networks of local 'champions' for the work. Identifying key stakeholders with local knowledge and understanding will assist in establishing trust with the wider population in this work and ensure that further phases are relevant to the communities across North Canterbury by reflecting their unique experience, using their vernacular and using outlets for messaging that are available and suitable*

Recommendation: As with the earliest development of the All Right? campaign in Christchurch, funding should be sought for an in-depth and robust piece of market research in the affected area. The “Taking the Pulse” research was fundamental to understanding the key issues in Christchurch and the language that was being used to give voice to people’s experiences in the early phases of the campaign. Given the population of the North Canterbury region, though it is spread out, this may prove to be a smaller piece of work but it will be equally instructive in grounding any work in regional relevance

Mental Health Promotion and Literacy

When asked, at a recent Social Recovery Forum in Hurunui, about the difference between urban and rural areas and how they respond to disasters, Dr Rob Gordon, a Psychologist with 30 years of experience working in disaster-affected communities, suggested the following:

- Agencies need to work across networks as people in rural communities have a multiplicity of roles and interests
- There are ready-made strong connections to build upon
- But there are often divisions that are magnified or brought to the surface following a disaster
- It is important to support the development of self-awareness and allow people to heal themselves
- Rural people value, above all, conversations and relationships

There is a stoicism in rural communities that is often at pains to present the community as ‘ok’. This is understandable. Small, close-knit communities display strong elements of social capital that don’t require artificial activation. They are well-connected and have robust support networks across (perhaps even *despite*) sector boundaries. As one informant succinctly put it, “*we look out for each other.*”

But natural disasters offer a unique set of challenges. Everybody is affected and will experience a variety of impacts on their psychosocial functioning. What this can operate to do is to throw certain aspects of community life into sharp relief, particularly around mental health literacy, knowledge and use of services, and in regard to historical divisions.

Geographically isolated communities suffer from a lack of services which, while life ticks along as ‘normal’, is just an accepted part of rural living. There is simply not the range or number of services that one might approach for information, advice or support, particularly at the more subtle end. Many services end up being ‘all things to all people,’ with GPs the main, often sole, point of contact for any concerns about health (in its widest sense). Alternative or supplementary services are few. Choice is limited.

Dr Gordon describes the situation as something in the order of 80% of the population not being 'enrolled' in services, or having a self-perception as 'users' of services. The disaster and its many-fold impacts places them in an entirely alien situation where their health is affected but they have little or no experience of coming forward to seek help. This is true of urban disasters but is exacerbated in rural communities. Even where services might be 'stepped up' in response to psychosocial recovery needs, rural people are more likely to show stress and talk about concerns to close community, not outside urban-based services and unknown individuals.

When it comes to mental health, the 'disconnect' is even more pronounced.

While in urban settings discussions about mental health and mental illness have developed significantly in recent years, the stigma associated with mental health and distress is still a major issue and is one that remains much more present in smaller, isolated communities.

It was described, rather bluntly, by one informant in Waiau:

"We know what normal looks like and so we can see clearly any aberration from the norm."

To sensitive ears, this might sound rather disquieting. Using words like "aberrant" always suggests a level of 'othering' that raises alarm bells. But this is not intended to be viewed as a rush to judgment. What it represents is a consequence of the structure of rural communities. Everything is, essentially, seen as 'fine' – daily life continues up to the point at which it is undeniably *not fine*. Mental health is skewed to extremes: 'normal' and 'very unwell'.

If the whole population is forced, by circumstances, to address issues of mental health and wellbeing head on, then clearly this narrative has to be shifted.

Sir Peter Gluckman describes the combination of these circumstances thus:

"Stigmatisation of mental health issues, including post-traumatic stress disorder and related conditions, can lead people to suppress symptoms and make healing more difficult. Additionally, some people may not come forward for help if they perceive the support resources to be scarce – they may discount their experience, saying that others need the help more than they do. Therefore, continuous efforts need to be made to reach out to those who may need help, and to validate the act of coming forward."

Again, approach and manner in this are paramount. All Right? places an open conversation about mental health and wellbeing right at the core of a community where it will have most impact. Importantly, the campaign guides the narrative in ways that are normalising and non-clinical, that promote mutuality and reciprocity, and which attempt to soften the skew to extremes that too often characterises the discussion. With a simple, evidence-based framework and a conversational style led by the experiences of 'real' people, much can be done to cut through the stigma of mental illness and bring about, instead, an open dialogue about mental health and the ways to support it. It will also validate the act of coming

forward for those not used to doing so, so that they are able to take up early interventions where these are indicated.

This is the fundamental proposition of health promotion, backed by an increasing body of evidence in international literature: a whole population approach that has benefits across the continuum.

As Gluckman has it:

“The majority of the population may 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. The most severely affected minority will require efficient referral systems and sufficient specialised care. Insufficient attention to the first group is likely to increase the number represented in the second group.”

Specific Populations

As previously highlighted, working across multiple networks is a vital approach in geographically diverse communities. There are some key audiences that All Right? need to consider:

Farmers

Farming is a complicated and ever-changing business and this is not the place for an in-depth assessment of a sector fraught with complexities and historical perspective. What goes without saying is that farming and the whole agricultural sector are woven throughout the communities of North Canterbury.

In many places across the region, land has sustained major damage and is no longer considered safe or even understood in the ways it has been for generations. One informant emotionally relayed a story that epitomises the situation for many farmers in the high country. One particular family farmhouse is oriented, as would be expected, to afford the best view of the mountains that surround it but since the earthquake that view now looks out onto a scene of a massive slip: a daily and visceral reminder of the damage wrought by the shifting of tectonic plates. If that is a view that can barely be avoided, the sadness and grief that it evokes must be ever-present.

That is demonstrably a mental health issue.

However, this earthquake is widely seen as a “distraction from everyday living”, which has been hard for some time. North Canterbury is experiencing the fourth year of a drought that has had a major impact on the economic and social fabric of the region and a Drought Relief Committee exists to navigate the challenges. Yet, the ‘double-blow’ that is often spoken of as a consequence of a disaster is a palpable new reality for the sector. Damage to land is

one thing. Damage to irrigation systems, machinery and farm buildings are all even more significant when it remains unclear how much will actually be covered by insurance.

Farmers stress the need for practical support: fixing infrastructure, shifting stock, dealing with the ongoing realities of a sector under stress. But there are echoes of a common thread in disaster recovery, whether urban or rural: while attention is focussed on the tangible and concrete – dealing with insurance, fixing damage etc. – who is paying heed to psychosocial needs? A vital component is too often disregarded, for insufficient attention to the latter erodes the capacity to deal with the former as critical cognitive capacity is diminished.

So there is a pressing need for support. Statistics relating to rural mental health, particularly among farmers, paint a disturbing picture. Yet talk is of farmers being *“sick of people coming up the drive and asking how they are doing.”*

Digging deeper into such a direct statement suggests that when farmers talk of “people”, what they mean is *outsiders*, people who are unknown and untrusted. What is absolutely clear is that any support must come from a trusted source and be delivered directly through established relationships. If All Right? is to have any impact on rural mental health it will, again, be through effective use of partnerships with people and organisations who ‘have the ear’ of farmers.

The Farmstrong project, developed as an initiative of the Mental Health Foundation and funded by Movember and Farmers Mutual Group, has some established credibility on the ground. In recent years, they have put on events such as ‘Healthy Thinking’ workshops facilitated by Tom Mulholland, which have been well attended by farmers. They have plans for more workshops as well as a music/comedy ‘night out’, *The Woolshed Sessions* with Mel Parsons and have also been facilitating some practical support, *The Handy Landies*, from Lincoln University. What is powerful is that they are minded to ensure that these workers are also equipped to have conversations while ‘doing’, that touch on emotional and psychological concerns.

As a Mental Health Foundation work-stream, Farmstrong is founded upon the Five Ways To Wellbeing framework, so there is already consistency in approach and framing. Their website is full of useful information developed in the rural idiom and they have become a well-regarded source of information and support.

However, by their own admission, Farmstrong is a national project with a broad scope and tends to take a hands-off, issues-based approach to providing information, mainly through their website. With limited capacity for ‘on the ground’ work, they focus on relationships with other players in the sector, most importantly with the Rural Support Trusts across the country.

It is the Rural Support Trusts who have long-standing relationships at regional and local levels and they are striving to work through their networks to promote psychosocial aspects

of recovery. They know the sector well and would be key informants should All Right? choose to be led by their undoubted expertise.

Recommendation: All Right? should develop a closer working relationship with Farmstrong to ensure that there are strong synergies in the work that each develops in Hurunui and Kaikoura. Sharing resources and work plans will make sure that any messages conveyed are consistent and complementary, and having an All Right? presence at Farmstrong events (and vice versa) would assist in reinforcing this.

Recommendation: All Right? needs to extend its working relationship with the Rural Support Trust for the region and be led by their knowledge and relationships. They are the singularly most important social support network with established relationships with farmers and they will be important advisors as to best ways to reach their core constituency.

Recommendation: All Right? might consider approaching key strategic players to build relationships and to seek funding for specific pieces of work where new constituencies such as the agriculture sector are represented. Ministry of Primary Industries have already expressed an understanding of the value of wellbeing in their wider conversations and this interest may have the potential to develop into further partnership work

Business Owners

Across the region, business (aside from farming) has taken a major hit. Towns like Kaikoura and Cheviot rely on passing traffic for a huge amount of trade and now that SH1 north of Kaikoura is closed (and will be for some time) this tourist trade is diminished significantly. Some businesses are operating at as low as 20% of pre-earthquake business. In a seasonal market, this raises challenging implications for the coming winter and uncertainty in the months and years beyond. Some businesses have already closed their doors.

Enterprise North Canterbury has been given the lead in the Economic Recovery. Initial investigations have been carried out in those communities and they have already been inclined to direct their clients to the All Right? and Mental Health Foundation websites for further information and advice about the emotional and psychosocial impacts of the situation. Given that level of awareness of the importance of supporting good mental health and wellbeing to buoy people in the face of the economic implications of the earthquake, it would be valuable to establish a closer working relationship with Enterprise North Canterbury to investigate the possibility of using their established networks and credibility to convey the All Right? messages to their constituency.

Recommendation: All Right? should seek to develop a working relationship with Enterprise North Canterbury (and other organisations working in the economic recovery) to ensure that messaging about good mental health is circulated throughout the business community in a way that expresses their unique situation and uses their own language and concepts.

Maori

*See 'Te Tiriti O Waitangi' section, earlier

Children

A clear picture of issues relating to children and parents is not easy to establish. Emotions run strongly and sensitivity is high. Principals have certainly reported that some children returned to school after the summer break (which was timed in the immediate aftermath of the November event) displaying symptoms of extreme anxiety and attachment issues. Other people have suggested that, as in Christchurch, much of the anxiety is a mirroring of parental stress. More work needs to be done to get a better picture of the ongoing needs.

Fortunately, All Right? has some excellent working relationships from which to build, particularly through the long-standing relationship with S.K.I.P. The book (and associated resources) 'Maia and the Worry Bug' has been widely taken up and provides a unique platform for promoting conversations in school and in the home about the emotional impact of the earthquake.

Furthermore, there is strong interest in the forthcoming 'Sparklers' set of tools that are the result of some robust developmental work with key partner agencies. The final roll-out of these resources should now take into account the need in North Canterbury schools, should they be viewed as appropriate and should funding be forthcoming, but further investigation, as with all other resources, should engage the key partners to establish whether they will be a 'fit'.

Recommendation: All Right? should build on the enduring relationship with S.K.I.P. to investigate the needs specific to children in the affected communities, to investigate whether resources developed for Christchurch are relevant in small, rural schools.

Editor's note: Although S.K.I.P.'s capacity is now limited, All Right? has developed new partnerships with the CDHB School-Based Mental Health Team and Health Promoting Schools Team and a ground-breaking, classroom-based tool for teachers and parents – Sparklers.

Youth

Rural youth, like their older counterparts, have very different sets of priorities and it is not easy to compare their experience to those of young people in urban areas. In Christchurch, the city lost a huge number of social centres for young people among the widespread damage and this has had long-term impact among young people in their adolescent years. In Hurunui and Kaikoura these are much more limited.

Youth workers in the effected region speak positively about how well the young people they engage with are dealing with the November earthquake. Young people in Kaikoura appear

to be literally 'riding a wave': as the coastline has changed, so have the surf breaks, and many will describe that it is for the better. There will be plenty of employment in the town for young people willing to work for roading contractors as they fix SH1 north towards Picton.

There are active youth leadership groups in both Hurunui District and in Kaikoura and attempts to engage them with existing post-disaster mental health promotion resources (such as the *Bounce* website) have met with resistance or lack of interest. These groups have a strong, unique identity and it seems that resources developed by and for urban youth do not 'hit the mark' with those living in small towns.

But do these expressions of positivity represent an expression of the 'honeymoon' phase of recovery, with the associated risk of deterioration into later 'disillusionment' and fatigue? Further research into the experiences and help-seeking behaviours of rural young people in regard to their health and wellbeing is indicated.

Recommendation: All Right? (perhaps working with Bounce) should consider opportunities to explore and track the experiences of young people in the region through partnerships with youth workers already active in developing youth leadership in the rural towns. Where there are potential work streams, these should be led by young people.

Recovery Workers

It was identified after the Christchurch earthquakes that more could have been done to support the people working on the ground in recovery. No matter what role a person may inhabit, they are firstly a human being who will be living with their own consequences of the disaster – in broken homes, strained relationships, and with the psychological impact of trauma, lost sleep, and fear. This has important implications for their ability to keep up the energy required for the role and to maintain objectivity in their work.

"It is all about the people. They're the ones who get things over the line. If we didn't look after them there would be practical losses. But if you look after them through recovery you create resilience in them. If they can get through these things and come out the other end they will become natural leaders, if they come out of the last episode with fuel in the tank for the next thing. If we lose them, we lose them forever." (Fiona Leadbeater – Volunteer, Kinglake Ranges, quoted in "Supporting the supporters in disaster recovery". Winston Churchill Fellowship. Jolie Wills, New Zealand Red Cross)

All Right? worked closely with a number of service providers ranging from NGOs and community groups through to organisations such as EQC and Fletchers to offer soft guidance around self-care. These proved to be important avenues for spreading wider understanding of the Five Ways to Wellbeing and the All Right? messages, and may be a significant contributor to the wide reach established by the campaign.

Across North Canterbury, there is already some energy for this work to begin in a much timelier manner. It is understood that, even more pressingly, key community providers and supporters in small communities are often not willing to attend their GP to ask for help for themselves, as they feel too exposed and have a certain investment in being seen to be 'well' (however misguided and self-stigmatising this might be). But locals supporting earthquake-affected locals require support themselves and this is a well-understood cornerstone of recovery planning:

"[...] train and support all staff and volunteers involved in planning and delivering psychosocial interventions to give them the awareness, understanding, skills and knowledge they need to fulfil their roles. Monitor and support service providers for possible secondary traumatisation and burn-out symptoms and provide information about self-care. Ensure they are aware of their responsibility of doing no harm and understand the idea of normal reactions to abnormal events." (Ministry of Health. 2016. Framework for Psychosocial Support in Emergencies.)

Wellbeing North Canterbury have been given a mandate to advance work in this area and have secured Lotteries funding for a 0.5FTE role to offer clinical supervision and broader support to anyone working across the region in earthquake support roles, recognising that they will also be impacted by the disaster. They have expressed an interest in exploring further the opportunities for collaboration with All Right?

***Recommendation:** Now that a role has been created in North Canterbury to support the people working at the front line in recovery, it would be productive for All Right? to work in close partnership. While some focus will be on robust clinical supervision, there will also be a strong element of promoting self-care. By developing a good mutual working relationship, this aspect of the work could be centred around increasing knowledge of the Five Ways To Wellbeing (and other All Right? messages), thereby supporting ownership of the framework and growing new champions for a way of viewing mental health and wellbeing.*

Business as usual? - Conclusion

Clearly, if All Right? is to extend into the North Canterbury region this has to be seen as more than “business as usual”. Arguments about funding, scope, coverage etc. are reductive and unhelpful. Best practice suggests strongly that work in a region so manifestly different *must* be considered as new work requiring new approaches, new networks and completely new forms of delivery. Stakeholders are different, language and framing is different, the experience and the issues are different.

Certainly, there is some value in using the shared, human nature of the experiences as a way to engage the community in a conversation. Indeed, this already happens naturally – New Zealand is a small country, with its oft-parodied ‘two degrees of separation’. It can be further facilitated through clever use of social media, communications and collateral. But that simply cements the connection and establishes credibility. For real ground to be made in the conversation about wellbeing and psychosocial recovery, any intervention must be targeted at the specific populations. This is simply best practice and cannot be reiterated too often or too strongly. As Sir Peter Gluckman has stated:

“Many aspects of what has been implemented for Christchurch may have broader applicability, but it is also clear that very local responses are often necessary.”

Following the best practice model, if All Right? is to extend into Hurunui and Kaikoura, it needs to, at the very least, carry out the following work:

- Identify and build relationships with key stakeholders in the region
- Build relationships of trust and reciprocity in local communities
- Develop strategic partnerships with non-government organisations
- Frame the campaign as an ongoing conversation
- Adopt a story-telling approach that bridges the gap between communities (intra- and extra-regional)
- Carry out local research to identify local issues, language, understanding
- Reflect this research back directly to those communities
- Mentor and promote best practice in health promotion with those communities that express a desire to drive their own campaign

To suggest that this level of work can be achieved out of ‘business as usual’ as the campaign is currently resourced would be to undermine and cheapen delivery, both in the North Canterbury region and in Christchurch itself.

Of course, if one is to be hard-headed, there is a population-based numbers game to consider. The Greater Christchurch area consists of over four hundred thousand people, whereas the Hurunui and Kaikoura Districts’ populations number only something in the region of sixteen thousand. But does that mean we should not do right by them, that we can respond to their psychosocial needs in a reduced or diluted manner?

There is a sense among the community that they are being abandoned, that decisions are not being made and resources are not being directed where they are needed. Real 'grassroots-led recovery', effective as it is demonstrated to be, still needs to be enabled and it is the responsibility of government to be the engine of this, yet many organisations are relying on philanthropic funding to ensure that they have people on the ground to deliver work that they have identified as necessary, work that is indicated by post-disaster best practice.

All Right? is stuck in just such a stasis: motivated to bring all the experience and learning into a new area and to extend campaign work to areas now reeling from their own disaster, yet being given no resources to do this work in the very way that made the campaign so successful and highly-regarded in the first place.

What is required is smart, lateral thinking that supplements 'business as usual' in a way that maximises capacity. For All Right? a small injection of personnel might allow for further extensions of the work to bring together new need with old in clever ways. Working across sectors is advised to be most effective in this regard and therefore funding diversity representing multiple networks will also be a key strategy. There are major players in the region who might not automatically be seen as obvious partners for All Right? (who have been traditionally funded from Health and Social Development streams). Without in the slightest abrogating the responsibility of those two Ministries to take a lead in embedding mental health promotion into psychosocial recovery, there may be additional opportunities for developing new strategic partnerships that better reflect the breadth of take-up of messages of wider Flourishing work.

As detailed above, this new earthquake event is intertwined with the Christchurch earthquakes and recovery in ways that have only begun to be understood. Work that smartly straddles the border and that brings together the two very different experiences and communities will be the most effective spend. If the campaign team, creative and vanguard as they have proved to be, are willing to see their work as multi-faceted, it is only adhering to outdated funding 'silos' that jeopardises their capacity to deliver.

Recommendation: All Right? needs to seek appropriate funding to support and mentor local communities to drive their own mental health promotion and community conversations about wellbeing. Given that working across sectors is advised to be most effective, funding diversity representing multiple networks will also be a key strategy.

Key Recommendations:

1. At minimum, a single FTE role would supplement the current Christchurch campaign team and enhance work in both regions at this critical stage. The role could be match-funded from multiple sources, representing a commitment to working across sectors and could offer a selection of work streams from the following scope:

- Presence ‘on the ground’ in Hurunui/Kaikoura – building networks, establishing relationships with key stakeholders and potential partners
- Mentor and advise the development of locally-led mental health promotion activity
- Promote best practice and the All Right? ‘recipe for success’
- Coordinate locally-based focus groups, where indicated and where funding is sourced for this
- Oversee local market research, where this is undertaken
- Operate as an interface between work in Hurunui and Kaikoura and the Christchurch campaign (seeking alignments, maintaining awareness of difference) to maximise the use of resources, both existing and yet-to-be-developed
- Strategic research and exploratory work (Nelson/Marlborough, Wellington, South Island-wide, national) to extend a mental health promotion approach into a ‘pre-disaster’ context.

2. As with the earliest development of the All Right? campaign in Christchurch, funding should be sought for an in-depth and robust piece of market research in the affected area. The “Taking the Pulse” research was fundamental to understanding the key issues in Christchurch and the language that was being used to give voice to people’s early experiences. Given the population of the North Canterbury region, though it is spread out, this may prove to be a smaller piece of work.

In addition to testing the Five Ways to Wellbeing resources, as was previously done in Christchurch, research in North Canterbury would also provide the opportunity to test in more depth the All Right? campaign resources for applicability in the region. It is suspected that many will not ‘fit the bill’ for communities in North Canterbury and new resources will need to be developed and new pathways and outlets identified for their circulation.

Any research carried out should be made available to any key partners who may be considering their own mental health promotion activity in the region.

3. Funding needs to be identified with some urgency to ensure that Māori-to- Māori connections can be activated on the ground in the region. The development of the Te Waioratanga stream of All Right? work has given a powerful voice to tangata whenua and has the potential to become more widely perceived, like All Right?, as a vanguard piece of health promotion work. But this work must be led by Māori and even, potentially, resourced through entirely different avenues than All Right?

This role could come with scope that is broadly similar to 1. above

Table of Recommendations

All Right?

Recommendation: As a matter of strategic interest, further investigation should be carried out in areas recently affected by earthquakes or other natural disasters to establish how widespread knowledge of, and interest in, the All Right? campaign messages really is. In addition to Seddon and Ward and the communities of Marlborough, this might also usefully include Wellington City, where many buildings had to be evacuated after the 2016 event.

Recommendation: It is imperative that All Right? holds fast to its core work and must, in the first instance, continue to operate as a vanguard mental health promotion project in Christchurch, based on best practice. In the absence of further funding to extend the campaign into other areas, or explore other areas of concern, this could weaken the core campaign in Christchurch.

Recommendation: Bearing this in mind, there will still be potential value in All Right? continuing to explore opportunities to engage at a more strategic level to promote best practice in mental health promotion. Much has been learned through the delivery of this campaign and there will be opportunities to work with key strategic partners to stimulate a national conversation about wellbeing and resilience in communities and their relationship to pre-disaster preparedness and, more broadly, social capital-building.

Applicability outside Christchurch

Recommendation: There will be some value in 'drip-feeding' some early-phase resources into the affected region. Simple messages that 'normalise' the immediate experience and operate by way of facilitating the early stages of a conversation will both a) show a willingness to work in those communities, and b) bridge the gap between the many different aspects of the events, bringing into focus stories of recovery that offer hope going forward.

Recommendation: Social media can be a powerful tool for promoting conversations and story-telling and there has already been an increase in interest in the All Right? Facebook page in North Canterbury. Targeted use of this page (and other social media platforms) may be an effective way to breach the perceived divide between urban and rural experiences and impacts by sharing common human accounts which represent, in practice, the Five Ways to Wellbeing.

Recommendation: All Right? should explore other potential avenues and formats for story-telling that will further extend the peer support/education tone of the campaign. Stories of hope and recovery from Christchurch could be positioned alongside stories of people in Hurunui and Kaikoura who are adopting strategies that express the Five Ways to Wellbeing in their own ways.

Recommendation: All Right? should continue to actively engage the community in conversation and build networks of local ‘champions’ for the work. Identifying key stakeholders with local knowledge and understanding will assist in establishing trust with the wider population in this work and ensure that further phases are relevant to the communities across North Canterbury by reflecting their unique experience, using their vernacular and using outlets for messaging that are available and suitable.

Recommendation: As with the earliest development of the All Right? campaign in Christchurch, funding should be sought for an in-depth and robust piece of market research in the affected area. The “Taking the Pulse” research was fundamental to understanding the key issues in Christchurch and the language that was being used to give voice to people’s experiences in the early phases of the campaign. Given the population of the North Canterbury region, though it is spread out, this may prove to be a smaller piece of work but it will be equally instructive in grounding any work in regional relevance.

Specific Populations – Farmers

Recommendation: All Right? should develop a closer working relationship with Farmstrong to ensure that there are strong synergies in the work that each develops in Hurunui and Kaikoura. Sharing resources and work plans will make sure that any messages conveyed are consistent and complementary, and having an All Right? presence at Farmstrong events (and vice versa) would assist in reinforcing this.

Recommendation: All Right? needs to extend its working relationship with the Rural Support Trust for the region and be led by their knowledge and relationships. They are the singularly most important social support network with established relationships with farmers and they will be important advisors as to best ways to reach their core constituency.

Recommendation: All Right? might consider approaching key strategic players to build relationships and to seek funding for specific pieces of work where new constituencies such as the agriculture sector are represented. Ministry of Primary Industries have already expressed an understanding of the value of wellbeing in their wider conversations and this interest may have the potential to develop into further partnership work.

Specific Populations – Business Owners

Recommendation: All Right? should seek to develop a working relationship with Enterprise North Canterbury (and other organisations working in the economic recovery) to ensure that messaging about good mental health is circulated throughout the business community in a way that expresses their unique situation and uses their own language and concepts.

Specific Populations – Children

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Specific Populations – Youth

Recommendation: All Right? (perhaps working with Bounce) should consider opportunities to explore and track the experiences of young people in the region through partnerships with youth workers already active in developing youth leadership in the rural towns. Where there are potential work streams, these should be led by young people.

Specific Populations – Recovery Workers

Recommendation: Now that a role has been created in North Canterbury to support the people working at the front line in recovery, it would be productive for All Right? to work in close partnership. While some focus will be on robust clinical supervision, there will also be a strong element of promoting self-care. By developing a good mutual working relationship, this aspect of the work could be centred around increasing knowledge of the Five Ways To Wellbeing (and other All Right? messages), thereby supporting ownership of the framework and growing new champions for a way of viewing mental health and wellbeing.

Conclusion

Recommendation: All Right? needs to seek appropriate funding to support and mentor local communities to drive their own mental health promotion and community conversations about wellbeing. Given that working across sectors is advised to be most effective, funding diversity representing multiple networks will also be a key strategy.

Final Thoughts

In the end, we remain challenged by a significant question, both for regional delivery in this instant, but also for wider social policy in regard to disasters: How do we, as a national community, resource and educate people to deal with the possibility, indeed likelihood, of future disasters? If we continue to “chase our tails” every time a disaster occurs and, as a consequence, consistently find our response systems wanting – not just financially but in will and in conception – then we learn nothing from our experiences.

Perhaps it is time to build from the success of All Right? and advance a conversation about mental health and wellbeing in a pre-disaster context. If community wellbeing is vital to the wider trajectory of recovery from natural disasters, what does that tell us about how we educate people to “Get Ready, Get Through”?

Many people have informed the content of this report and to single out any individual as more important or more relevant than anybody else undermines the principle that primarily guides this author: that *all* experiences of disaster are, essentially, human ones. We are all impacted differently and we all react differently to disaster situations and the ‘double-blow’ that often plays out as a consequence, but we are *all* affected in some way. Significantly, we can all be part of the recovery, regardless of our ‘roles’ ... indeed, that is the best way for the recovery to progress: A community drawing on all its variety of strengths and working together towards progress.

As Sir Peter Gluckman has articulated,

“A feeling of self-efficacy and community efficacy assists the population in reactivating their coping mechanisms. Local governance, empowerment and ownership have been shown to facilitate recovery.”

This is not a mandate to abandon communities to their own devices but, rather, an appeal to direct spending where it will be most effective: to enable communities to be the drivers of their own wellbeing.

As a community, we understand that fault-lines exist as a natural phenomenon that is fundamental to the experience of living in The Shaky Isles, but we often fail to comprehend that the fault-lines that exist between us, as individuals and communities, are created by us and therefore are in our capacity to dismantle.

Perhaps in our common experience of extreme challenge we might find our common humanity and seize the opportunities that are presented to us to reconceive our communities in ways that leave them stronger, closer and more resilient.

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