

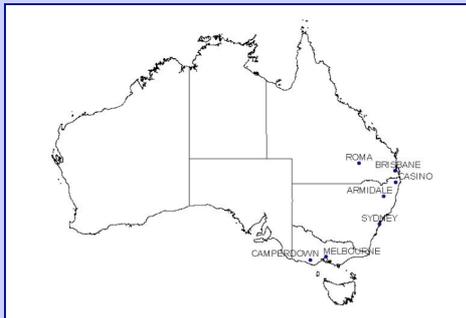


INSTITUTE FOR **Rural Futures**

# Biosecurity In Rural Communities



For a nation like Australia, which is so dependent upon the rural sector for its prosperity, the risk of a serious Emergency Animal Disease (EAD) outbreak is a major concern. While the Federal and State Governments are very well prepared to quickly and effectively deal with such an outbreak through strict quarantine measures and national disease control strategies, the purpose of this study was to examine the effectiveness of these strategies at the small community level. Focus groups were held with residents of four rural communities to discuss the potential social impact of an EAD upon their community and explore ways to better safeguard the community against disease. The study sought to identify social factors within each community that may facilitate or inhibit the implementation and maintenance of disease control plans and community recovery programs. The communities participating in the study were Casino and Armidale in New South Wales, Roma in Queensland, and Camperdown in Victoria.



## The findings

A community's experience and resilience to a disease outbreak will be dependent upon its unique geographic, economic, and social profile, degree of social cohesion, effectiveness of community leadership and history of overcoming crises. Understanding these differences at the small community level will be important in planning for community recovery.

The participants in the focus groups were asked to list what they considered to be the greatest risks to their community for an EAD. Roma residents identified breaches of quarantine such as swill feeding; feral pigs and goats; or imported livestock. In Casino, it was international tourists and the district's proximity to the coast where boats could land or dump waste offshore. Armidale residents cited bio-terrorism; breakdown in quarantine procedures; peri-urban hobby farmers not recognising disease symptoms in stock; and international students to the local university bringing in contaminated foodstuffs.

Armidale participants believed the main social impacts of an EAD outbreak would be isolation, crime, economic decline and division within the community. In Casino, it was the loss of employment and income, isolation, the loss of community and psychological stress. Roma participants talked about social

isolation, economic loss, unemployment and people leaving the district. In Camperdown, potential consequences were unemployment, economic loss, decline in tourism, disruption to normal life and a loss of innocence with contamination.

When asked how their community would cope with a disease outbreak, all groups talked about community resilience, strong social networks and past experiences of residents uniting to support each other in times of crisis. To Casino participants, the potential barriers to the community's ability to cope with a crisis, identified were: the dependency of the local economy on the livestock industries; apathy, ignorance or denial within the community about the effects of a disease outbreak; a large number of unemployed or low income populations lacking resources to cope; and a lack of cooperation and distrust of officials. In Armidale, barriers included a lack of funding and resources; the lack of cohesion between 'the townies and the rurals' that would create a 'them and us' problem; and the number of absentee landowners in the district, which can be a problem for emergency services. Roma participants cited distance; a lack of funding, resources and manpower; and a lack of experience in EADs combined with a culture of independence that may limit requests for outside assistance.

The workshop discussions focused upon the following key social impacts of a possible EAD outbreak.

## Communication

There was concern that the flow of information may be 'top down' and the needs of local communities may not be considered in the management of the control and recovery response. A National Communications Network would prepare and authorise all official media releases. A website will be used during an event ([www.outbreak.gov.au](http://www.outbreak.gov.au)) and Centrelink's National Hot Line will roll out immediately a disease outbreak is confirmed. While it will be important that information is consistent and reliable, there will be a need for some local variation on that information. It is only when the community has a clear appreciation of the processes that will eventuate that they will be able to anticipate their role and the role of other organisations and what they can do to effectively participate in the control process in the short and long-term.

Communities should be contacted at first sign of a disease outbreak and be provided with as much information as they require. Communities should be asked how they would prefer to be informed. A Media Plan attached to a Community Disaster Management Plan would enable the effective flow of information between government agencies and local communities and disseminate information through a variety of mediums that is locally relevant but originating from a primary source. Farmers will require access to accurate and reliable information on disease locations and control measures, and what they should be doing to protect their properties.

Radio, newspapers, flyers delivered in letterbox drops and information delivered through schools appear to be the most agreeable ways of disseminating information for farming communities. Magnets for refrigerators containing basic emergency information have proven to be successful. It is suggested that procedures for emergency hot lines be revised to initiate calls to people to check on their welfare rather than wait for contact from the public.

### Impact upon farm families

It is likely that farm families will suffer significant financial, social and psychological stress in the aftermath of an EAD outbreak. Farmers typically find it difficult to ask for help. It was suggested that rather than financial support being handed out to individuals, it would be better for governments to support local businesses who are likely to suffer significant losses as a result of the downturn in the local economy.

During the drought, networks of support services comprised of government and non-government agencies, facilitated support for farm families. There is a need to ensure that these types of community support networks remain available to provide support in the event of a disease outbreak. Alternatively, self-help groups should be encouraged within a community. There will also be a need to establish support networks for families of emergency workers.

### Community Division

The likelihood of division within the community in the event of a disease outbreak created animated discussion within the workshops. Divisions may arise from some people not realising the importance of control measures. Some farmers would be declared exclusion and destroy zones and would receive compensation while others would not. There can be gossip and blaming about the source of infection. While most participants acknowledge such divisions would occur, in Camperdown, one of the local farmers strongly believed that such division would not occur in his district. The experience of individual communities will differ significantly according to the nature and structure of the community, and degree of social cohesion. Communities with strong social support networks and social cohesion are more likely to have residents unite and support each other through the crisis while other communities that are less cohesive may see more division. One participant noted that it was important to raise awareness amongst farmers that they are likely to experience feelings of anxiety, depression, loneliness and aggression due to the incredible stress they will be under, but that there will be people they can talk to.

### The non-reporting of disease

The non-reporting of diseased stock by farmers, farm employees or employees of associated livestock industries is a concern. As one participant noted, the potential slaughter of a property's livestock may lead some farmers to decide it would be better to 'shoot, shovel and shut up'. One Roma participant noted that the size and isolation of properties in that region would mean that no one would ever know about it.

Participants questioned what were the moral, ethical, and legal obligations of professional people for reporting a client for such actions. While professionals would be legally bound to report such incidents to authorities, it may be necessary to provide advice and policy guidelines for counsellors, general practitioners and other professionals who may be confronted with the dilemma of breaking the confidentiality of a client. The public will need to be educated regarding the consequences of not reporting diseased stock.

## Unemployment

Unemployment in the aftermath of a disease outbreak due to the probable closure of the saleyards, abattoirs, dairy factories and other associated agricultural industries along with the restriction of the movement of rural contractors was a major concern for participants. While some unemployed workers would be coopted to assist with the cull of infected livestock, once that work was completed, many people would leave the district to seek employment elsewhere. Communities need to explore possible options for community-based projects that would sustain the displaced workforce throughout the downturn in local agricultural industries to prevent the potential loss of people and skills from the community. Options may need to be industry driven, eg. a local abattoir could source supply from outside the community to keep local people employed.

## Community Education

It was suggested that awareness campaigns should be extended across the community with emphasis given to the direct social impact on individuals and communities, particularly the financial loss as this may encourage responsiveness amongst the general public and ultimately increase community preparedness.

Exercises conducted by Local Emergency Management Committees to increase preparedness would be greatly improved by the inclusion of local farmers, representatives of other agricultural industries and small businesses, and local service providers who would be affected by an EAD outbreak. Interaction between emergency services and these groups would enhance preparedness in all sectors of the community. The involvement of farmers may lead to greater levels of biosecurity on individual and neighbouring farms. It is also suggested that a person within the community who has an understanding of social issues, facilitate community discussions as there can be a tendency to dwell upon the technical aspects of a disease response rather than the social impacts.

Many community organisations, for example, schools, small businesses and local community groups may be unaware that they could be significantly affected by an outbreak and should be encouraged to revise their existing disaster management and community recovery plans to include EADs. Communities need to be made aware that community recovery must begin with the disease control response.

It was also recommended that Local Emergency Management Committees seek a level of consistency in biosecurity preparedness as there is no point in one shire having certain plans in place when a neighbouring shire does not.

The promotion of industry liaison officers for various industries (including farmers) appears to be a worthwhile program for encouraging awareness and the flow of information about biosecurity between government and the community.

It can be concluded that a higher level of participation of producers and other stakeholders in risk assessment and biosecurity planning at all levels will improve communication and awareness which may increase the level of biosecurity preparedness at the community and individual farmer level.

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