



# ***Farmer Health, Social Connection and Community Resilience: Bohemians or Bedfellows?***

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# Overview

- Farmer Health, Social Connection and Community Resilience: Why bohemians or bedfellows?
- My involvement with the SFF program
- Other farmer research which informs my view
- Sustainability thinking in rural health
- What are the sustainability choices for rural health in your community?
- Implications for rural health policy: farmers and rural communities





# Farmer Health, Social Connection and Community Resilience

- Bohemian = living or behaving like artist or writer. Living or behaving in an informal way that is considered typical of artists and writers
- Bedfellows = someone or something connected with another. Someone or something that is connected with another person or thing in some way, often unexpectedly
- Do these characteristics help us understand how to frame a valid rural health policy?





# My involvement with the SFF program

- Director RMIT Centre for Rural and regional Development Hamilton 2002-05
- Board member WDHS
- Early discussion with SB and SW about the state of farmer health, well being and safety
- Application with SB and SW to RIRDC
- Interest in the facilitated process/industry connections/evidence-based approach
- Numerous subsequent conference presentations and publications with SB and SW
- Chair the SFF Advisory Committee





# Other farmer research

- J. Martin, M. Rogers and C. Winter (2010) *Climate Change in Regional Australia: Social Learning and Adaptation*, Ballarat, VURRN Press.
- B. Pritchard, N. Argent, S. Baum, L. Bourke, J. Martin, P. McManus, A. Sorensen and J. Walmsley (forthcoming) 'Local – If Possible: How the Spatial Networking of Economic Relations amongst Farm Enterprises Aids Small Town Survival in Rural Australia' *in Regional Studies*.



# Local – If Possible

- The research was based on face-to-face interviews with 115 Australian farmers in agriculture-dependent regions to investigate how the spatial pattern of farm expenditure affects these processes.
- It concluded that in these spatial contexts, stability, attachment, and reliance on ‘the local’ remain vital components in farm–town economic links, notwithstanding substantial adaptation by farmers to restructured economic and community circumstances.



# Sustainability thinking in rural health

- Sustainability and Sustainable Development
- Ubiquitous and contestable meanings
- Is it possible to find in the conception of Sustainability and Sustainable Development some useful general features?
- Broad normative idea of Sustainability and SD is difficult to live up to
- It is morally commendable and can provide a **standard by which we can position ourselves**



# The Politics of Sustainability

- Contestability= **consensual** versus **contentious**
- Conceptions, implementations and outcomes are widely shared = **consensus** (the ends?)
- Disagreement between different interests = **contentious** (the means?)
- What is the context that gave rise to SD policy via the UN's Brundtland Commission?
  - Population growth, deterioration of the human environment and depletion of non-renewable resources and their impact on social, economic and political development (after Varley et al 2009)

# Sustainable Development: from the general to the specific

- We encounter questions such as:
- ‘Whose sustainability?’
- ‘Sustainable for whom?’
- ‘What is sustainable and unsustainable?’
- ‘What are the different interests?’
- ‘Where is the common ground?’
- What is the nature of the conversation in your rural health service about Sustainable Development?

# Whose version of Sustainability?

- It is important:
- In initially deciding what is to be understood by Sustainable Development
- In moving to give effect to what has been decided; and
- In reflecting on and assessing the outcomes of what has been achieved?



# Ways of thinking and acting

- Linearity versus non-linearity:
- Linearity: 'give us more health professionals'
- Non-linearity: 'can we develop a nurse practitioner in our rural health service?'
- Non linear transitions reshape our society
- Let's look at a the SFF as an example.....

# Sustainable Farm Families

- Participants enter the program with information on their health; which becomes the basis for their action over time
- Presents evidence on the state of rural (farmer?) health; and engages farmers in a non-judgemental discussion of why this is so
- Values participant knowledge and understanding through interaction with others through small group and plenary discussion

# Sustainable Farm Families (cont)

- Follows up via participant health record to ensure appropriate matters are dealt with
- Enables continuous learning via provision of web-based information and direct (e)mailing
- Presents information on the state of farmer health at ag industry sector conferences
- Champions policies and strategies to improve the health and well being of farming and rural communities across Australia



# What if?

- Evidence-based health promotion became the norm
- Rural health professionals developed holistic strategies for improving health and well being
- Health promotion was a central part of the rural health budget
- Industry and community partnerships were the basis for health promotion planning

# What will catch you out

- Centralised planning and control (has no real appreciation of local circumstances and creates dependent cultures in our rural health services)
- Poor attention by rural health services to the local context (what is driving change in our ag industries?)
- Not making the connection between action and outcomes

# The Dutch Government approach to Sustainable Development

- ‘To solve these problems [climate change, loss of biodiversity, overexploitation of natural resources, threats to health etc] and to reach the objective of a sustainable society the Dutch govt identified 4 **transition** areas:
  1. Sustainable energy
  2. Sustainable use of biodiversity and natural resources
  3. Sustainable agriculture
  4. Sustainable mobility



# Think about non-linear transitions in your rural health service

- As you reflect on your career can you identify the transitions you have experienced?
- Can you identify such transitions (policy, technical, institutional, professional etc)?
- ...
- ..
- .

# What are the sustainability choices for rural health in your community?

- Identify the (non linear) transition points
- Engage those impacted and entertain diverse criteria
- Recognise consensus and contentious issues
- Survival vs balance
- Move to implementation and manage
- Always with an eye on transition opportunities towards more sustainable outcomes

# Bohemians of Bedfellows?

- Farmers are creative, they associate informally and are connected socially and culturally in their common quest of farming (bonding?)
- Farmer networks carry them through the tough times. It is with each other they celebrate the good times reaffirming the social ties that bind them (bridging?)

# Implications for rural health policy: farmers and rural communities

- Do your rural health policies:
  - Include health promotion as a core business; are they funded and staffed accordingly?
  - Build on 'social learning' opportunities for health promotion in rural communities?
  - Encourage the development of an evidence base to guide service provision for individuals?
  - Facilitate partnerships with local, regional and state wide industry and community groups?



Good luck!

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