Rural social welfare practice: stories from the western region of Victoria

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This study explored rural welfare practice issues with six welfare professionals working in contentious fields of practice such as child welfare, family violence and the justice system in the western region of Victoria. Participants were selected on the basis of difference to provide a range of experiences. The six participants completed a questionnaire and were subsequently interviewed in depth about their own experiences.

The study asked participants about issues of concern to them and strategies that they find useful in their professional practice in small communities. Issues of concern included: risk and experience of violence and harassment, managing confidential information gathered from formal and informal sources, providing services that are non stigmatising, managing dual and multiple roles and lack of anonymity and privacy. Participants were concerned about the dilemmas of personal privacy versus community “right to know” particularly when they had privileged information about perpetrators of violence and child sexual assault within their communities. Participants shared their practical solutions and personal survival strategies, as well as their concerns. Many employing organisations did not recognise these factors effectively in work practices, and supervision was focused on agency accountability rather than professional development and support. On a broader level, workplaces and educators need to recognise the impact of the occupational demands and stressors relevant for rural practitioners, where anonymity and privacy are frequently compromised, and respond sensitively to these issues. This paper includes a number of recommendations for educators and organisations employing welfare staff in rural areas.

The author sincerely thanks the six welfare professionals for sharing their stories in such rich detail and with such honesty and frankness. Identifying details have been altered to protect their privacy.

INTRODUCTION

Rural welfare practice is different to urban practice. The rural context of practice influences the styles of welfare practice utilised, service delivery, and has professional and ethical implications for workers, agencies and clients (York, Denton et al. 1989; Sturme and Edwards 1991; Puckett and Frederico 1992; Cheers 1998; Briskman and Lynn 1999; Green and Mason 2002). This project explored rural practice issues with six rural welfare workers in the western region of Victoria, using a questionnaire and an in-depth individual interview. Participants working in family violence, child protection, criminal justice, and child and family welfare services were chosen as these fields of practice provoke debates and sometimes extreme reactions around individual rights and the role of the welfare state (Mendes 2001). Participants were selected on
the basis of difference to provide a range of experiences. To protect their privacy, all identifying details have been changed. Their ages ranged from 24–55. I have named them George, Betty, Gina, Brenda, Susan and Grace.

While only six interviews were conducted, this approach is supported by many researchers in the social sciences (Steedman 1991; Denscombe 1998; Lincoln and Guba 2000; Stake 2000). Using a case study approach, it is possible to take a holistic view, looking at the intertwining of personal and professional factors. It is also possible to take into account lifestyles and the individualised and socially constructed meanings which are key factors in this type of research.

This study provides a small “snapshot” of the experiences of rural practitioners, and provides insights for other rural workers, and opportunities for discussion and clarification of their own experiences of rural practice.

**SUMMARY OF PARTICIPANTS**

<table>
<thead>
<tr>
<th>Position</th>
<th>Type of agency</th>
<th>Family</th>
<th>Qualifications and experience.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Betty</td>
<td>permanent</td>
<td>statutory agency</td>
<td>has partner, no children now at home</td>
</tr>
<tr>
<td>Brenda</td>
<td>multi service agency, (welfare) permanent part time</td>
<td>family welfare</td>
<td>has partner, school age children</td>
</tr>
<tr>
<td>George</td>
<td>multi service agency (health) permanent part time</td>
<td>health related</td>
<td>no partner, adolescent children</td>
</tr>
<tr>
<td>Gina</td>
<td>in multi service agency (welfare) permanent</td>
<td>family violence</td>
<td>no partner, no children now at home</td>
</tr>
<tr>
<td>Grace</td>
<td>sole worker, permanent part time</td>
<td>health related</td>
<td>has partner, older children</td>
</tr>
<tr>
<td>Susan</td>
<td>permanent</td>
<td>statutory agency</td>
<td>no partner, no children</td>
</tr>
</tbody>
</table>

While most of the work was with individuals and families, four of the participants commented on wider roles in community development. All work in townships of less than 55 000 residents, two work in towns of around 10 000, and two in towns of 3 500 or less. Three lived in slightly different communities (two larger, one smaller in population) to where they worked, and chose to travel to work, with time spent travelling varying from 20 minutes to an hour. Some had outreach responsibilities attached to their role, so travel between communities was essential.

**PERSONAL/PROFESSIONAL SATISFACTION**

Participants motivating factors included a strong desire to work in the particular field of practice, preferring a rural life style, potential career advancement, and the nature of the job as one that suited their skills, and because of partner/family commitments.
Betty and Gina recently moved residences because of unwanted and unwelcome contact with clients and their families, and were somewhat negative about rural practice and how it had impacted on their lives. The remaining four, while indicating there were difficulties, were enthusiastic about living and working in rural areas. Most made statements that indicated they felt valued by their communities, saw themselves as providing a vital and helpful service, and were able to make a real and positive difference in their communities.

Many commented that they could see gradual, small changes come to fruition with larger changes to community attitudes, or service provision.

The benefits of rural practice identified by the participants included:

- having a casual atmosphere at work, lots of space, fresh air and views
- a reduction in stress levels compared to urban practice because of a supportive environment
- knowing the community, and understanding the needs and issues of the community and its members
- belonging to a network of practitioners
- taking on many roles (generalist practice), and having opportunities to develop new skills
- being recognised as important to the community and being “a professional”
- flexibility.

The disadvantages were identified as:

- lack of anonymity and personal privacy
- safety issues, for workers and their family members
- lack of debriefing opportunities
- lack of professional supervision
- lack of organisational support
- lack of training opportunities
- work role not being valued by the community.

Few identified professional isolation as an issue, though for Betty this had been a critical issue, and her work role had led to her being personally, socially and professionally isolated.

Distance and travel was seen by some participants to be a benefit and by others as a disadvantage.
IMPACT OF THE CONTEXT ON PROFESSIONAL PRACTICE

High profile/lack of anonymity

Participants had varying degrees of comfort with the high profile/ lack of anonymity in their personal life due to their work roles. Betty and Gina had moved residences to avoid the lack of anonymity.

.....high visibility and lack of anonymity is a fact of rural life, and though you can use strategies, people will still know who you are, and the type of work you do. This has both positive and negative sides. —Gina

Gina believes she is changing attitudes by modelling different behaviour to the traditional female role, and developing community projects around gender issues and attitudes. She is a public figure. However, her personal life is compromised by threats and abuse because of her challenge to attitudes about women’s roles in family and community.

George laughs when he says he is often “cornered” by people in the local supermarket, or when working in his garden, but generally finds this not to be invasive. Often these contacts concern community issues, and he uses the opportunities to promote ideas and get people engaged in projects. Occasionally, clients approach him and then he makes “a judgement call”: if urgent, or life threatening, he acts, if not, he brings in the protocol of contacting him at the office. Most people, he believes, respect his privacy, and recognise professional boundaries.

Effective networks were seen as important, and assisted by lack of anonymity/high profile. George noted that informal and formal networks offer opportunities for excellence in practice, and facilitate community development.

...a lot is achieved by seizing opportunities as they arise, rather than contriving situations, and that if you turn your back on these opportunities it is detrimental overall to your initiatives.…….as a worker you needed to be fairly consistent as you’re there for the long haul. As networks and key players don’t change very much it is important to establish professional relationships properly. — George

George commented that you need a broad understanding and knowledge of community dynamics, key players, and resources to work effectively.

Strategies

For some workers the high profile and lack of anonymity was not seen as a major problem. Others felt their personal life “invaded”. Being comfortable with flexible boundaries seems to be a key here, as is being clear about the professional role. Good supervision, particularly for newer workers around these issues is imperative.

Building and maintaining supportive professional and informal networks is often assisted by having a high profile.

Personal and family safety

The workers were asked about their experience of work-related violence, which was defined as any incident where an employee is threatened or assaulted by a member of the public in circumstances arising out of the course of their work, whether or not they
are on duty. It includes behaviour which produces damaging or hurtful effects, physically or emotionally, on employees.

Participants working in family violence and child protection rated the risk most highly, but all participants reported high frequency of episodes of monthly or less, and described very threatening events.

Throwing the furniture around, threatening duty staff, punching or pushing, or making derogatory and threatening verbal assaults were common, and seemed to be accepted as “just part of the job”. Mostly these occurred at the workplace, or when workers were out socialising or shopping, but some events happened in the client’s home (while on home visits) and on the telephone. One participant related how she was stalked for some months by an ex-partner of a client. Frequency of work-related violence for two participants was high, with episodes occurring every week or so.

While some agencies had protocols for managing these events, and some incidents were reported to the police, many of the participants saw it as an expected part of the job.

Susan talked about the need to physically protect herself, and told how she had personal belongings stolen, her hair pulled, and experienced insults and threats quite regularly.

... If you’re located in a small town, there is an increased chance of contact outside of work, and this is why I think that this is a problem for rural workers in statutory positions. I am seen as someone with power to remove children and never give them back. This role is particularly threatening to many in the community. I have experienced a lot of verbal and physical abuse coming from my work. —Susan

Participants reported being concerned about family members as a direct result of their work role. While those with children commented on this strongly, it had also impacted on other family members for some workers (eg grandchildren, sisters, partners, parents). Some family members had directly experienced threats and abuse.

... My work mostly relates to a client group where violence and harassment is pretty much part of the work……mostly emotional and mental abuse and verbal harassment. While there is a threat of physical violence, this is far less threatening to me than these other forms of violence which I face on a daily basis. —Betty

Grace maintains a “healthy level of paranoia” about large bags being brought into the office, doing solo home visits, and potential dangers. She always plans an escape route, and advises office staff of her whereabouts, and when she is due back in the office. She never divulges home address or phone numbers, “though both my home address and phone is easily found if someone cared to look”. She does not keep family photos in her office, doesn’t talk about her family to clients, and is concerned about her teenage daughter being victimised because of her work role. She is “hypervigilant” about her daughter’s security and safety. These strategies were similarly explained by other participants.

In addition to actions outlined by Grace, Brenda parks her own car some distance from the agency in which she works (and laughs at herself when saying this) and uses her agency’s car for any work business.
Two participants expanded the discussion to workplace bullying and lack of support from fellow workers or managers. Both felt isolated and had a distrust of the organisation’s practices in following up these matters.

**Strategies**

Avoidance strategies aimed at minimising contact were generally used. Participants curtailed their personal practices, such as shopping, recreation and leisure for example, to minimise opportunities for clients, ex-clients or aggrieved others to approach them. Caution such as where cars are parked, shopping in another town, avoiding social events in the town where work was conducted, using other surnames and unlisted personal phone numbers, referring any clients who live nearby to another worker or service. Two workers had moved from the local community as the stress of living and working in the same locality had become too great.

To protect families, workers had instructed relatives to never divulge personal details to unknown callers and to be cautious even with known callers, and never talking about own circumstances, relationships or family members with clients. Alerting family members or key others to concerns, but not breaking confidentiality was a real issue. For family members, participants identified the need to “train” responses to ensure their safety. Relaxation pursuits centred around private places rather than in public space.

On home visits and while travelling, satellite positioning and the use of mobile phones may assist in providing some level of safety. However, it must be noted that the latter do not always have reception, and the former only provides positioning, not safety. Organisations should provide support and discussion about these issues, and be aware of the effects of both real and vicarious trauma, and the personal stress associated with these positions. Protocols to protect welfare workers and their families should be reviewed.

**Managing confidentiality**

Participants believe the rural context can compromise client confidentiality, and gave examples such as the worker already knowing, or knowing of, the client outside the work relationship, meeting clients, ex-clients or partners down the street, or at the same church or recreation group. Privacy for clients seeking help was also cited as a problem.

... I am concerned about administrative and other staff “hearing the stories and making judgements” before they refer... and that for country people confidentiality is often compromised. For many people ... this is not a surprise and is almost expected as part of the deal. .....there are issues around confidentiality every day..... there is immense power of “rumours” and “labels” that operate in this small country town ie “he is a nut” “she is a slut”, he has a “past”.... —Grace

Brenda’s agency, offers a wide range of services. Because of the wide range, she believes clients are not easily “labelled” when they come in through the door, but

... this only goes so far....the community knows the kind of issues we are most likely to deal with here and that child protection and family violence are core issues for us. —Brenda

Brenda believes this is not of great concern to clients, as the service is well used, and home visits can be arranged. She related a story about the extra security put in place
when a well-known local identity used the service but commented that indeed this was a dilemma for all locals, and wondered why this person got extra measures.

Participants spoke of the problems of balancing their ethical responsibility of confidentiality with protecting vulnerable members of their communities, and cited knowledge of violent individuals, including child sex offenders, residing in their communities. Most had taken proactive steps to provide safety strategies to schools and groups, but were anxious about what would happen if a crime was committed by this offender, and they had not divulged to family, friends or the community that they knew of the risk. This was one issue most participants discussed without prompting and seemed to be the single most stressful issue.

Betty and Susan commented that when socialising with people from work-related networks, work matters tended to dominate, including conversations about clients, agencies, other staff and management. They believe these conversations constitute breaches in confidentiality and no longer socialise with work colleagues.

Participants also highlighted problems of attending leisure or recreational groups where clients or ex-clients are present. Betty stated that her agency has strict protocols, and workers are not to mix, under any circumstances, with clients or ex-clients outside work hours, thus leading to her severely compromising her leisure activities. She recognises these multiple relationships can be difficult for clients and their families.

The clients and their families live and work in the community in which I lived. I am sure it is just as uncomfortable for them when we find ourselves in the same group or club or church...they must wonder about what I will say, and how to react. —Betty

**Strategies**

To protect clients’ confidentiality, workers do not publicly address clients until clients speak to them, except for a smile or a nod. They ensure clear boundaries (with some flexibility). It was recognised that redirecting people to the agency rather than counselling “on the footpath” should be done in a caring way. Supervision, which deals with such ethical dilemmas, was important. Community development strategies were used to “warn without exposing” potentially dangerous situations. Education and training about confidentiality should include the implications that arise in rural practice.

**Workplace resources**

The organisational climate varied for each worker. In several organisations, there were indications that the welfare role was not taken as seriously as other roles. For example, when nurses went on leave they were automatically replaced, when the welfare worker went on leave, they were not replaced even when leave was taken for several months. Comment that pay scales did not reflect the importance of the role, or the competence needed to effectively work in this type of field, or in rural areas, were also made.

Two welfare workers commented that their agencies were unsupportive, and that agency “politics” added to stress in this job.

Supervision and debriefing is seen as very important, however, only two participants received effective professional supervision, one in their agency, and one outside which
she paid for herself. Participants talked about “supervision” offered in agencies as being concerned with “accountability and what was done” rather than providing supportive, developmental, professional supervision. For most, managers not qualified in welfare or social work reviewed their work.

The provision of equipment to staff varied. Grace has no access to computer facilities at work (although other members of staff have access), no provision of mobile phone and little administrative support. She works across several workspaces, and calls her car “her mobile office”. She worries about carrying confidential material in her car, but no lockable cabinet has been provided for her.

Brenda’s situation is very different. She works in an outreach centre of a larger agency, and has regular professional development and supervision, and debriefing is a daily occurrence. Resources such as computers and mobile phones are provided.

**Strategies**

A review of workplace management and salaries for rural welfare workers is needed, and organisations should be asked to provide effective resources and supervision. Replacement staff for periods of recreation or other should be considered essential.

**CONCLUSIONS**

The experiences of these six welfare workers highlight many of the issues, in a personal way, that have been reported in the literature about rural practice. The case studies bring to life the problems of managing confidentiality, personal and family safety, workplace issues and living and working in the same community and the implications for individuals of lack of anonymity.

The case studies have also highlighted major issues, which need to be addressed by professional bodies and unions. For example, little or no allowance is made for these factors in conditions of employment, and many organisations minimise the level and extent of the impact of workplace harassment and violence experienced by rural social welfare workers. Funding for replacement staff during periods of recreation or other leave is not customary. Further training or staff development was often completed in the participants’ own time and at their cost.

Education, training, recruitment and retention strategies need to consider not only individual attributes such as ability to be resilient, mature and independent, but organisational factors such as resourcing, supervision and debriefing, and funding for replacement staff during periods of leave. Educational institutions should include appropriate training for the complex personal and professional issues arising from rural practice. The relevant unions and professional bodies such as the Australian Association of Social Workers (AASW) and the Australian Institute for Welfare and Community Workers (AIWCW) must become involved in advocating for better workplace conditions and protection of rural social welfare workers. Strategies such as allocating funding at a rate that allows for replacement of staff during recreational or sick leave, improvement in pay scales for rural welfare practice in acknowledgment of the high level of complexity, and protocols for effectively managing the real and vicarious trauma experienced by workers and their families when undertaking these important roles for the community must be developed.
REFERENCES


PRESENTER

Rosemary Green is a social worker with many years’ experience working in rural and remote areas of Australia. She developed the BA (Rural Social Welfare) course at the University of Ballarat, which provides relevant preparation for graduates to work in rural areas. Rosemary is now Head of School of Behavioural and Social Sciences and Humanities at the University of Ballarat. Her research interests continue to be rural welfare issues, and include training, recruitment, retention, and support of rural professionals working in human service delivery.