A review of the literature identified social, cultural, and work-related issues that may affect the retention and selection of qualified human services staff in rural areas. A survey of 60 rural professionals and follow-up interviews examined attitudes toward living in rural areas, skills required by rural human services organizations, and gaps in the skills of current staff. Respondents overwhelmingly saw aspects of lifestyle and community as the main attraction for remaining in rural areas. Work-related issues that might be factors in deciding to leave rural areas included isolation, distances travelled for job, lack of career path, availability of work, lack of resources, and lack of access to inservice training. Qualifications sought by human services organizations included professional requirements, personal attributes and life skills, and generalist skills. High motivation and morale were observed in organizations committed to staff networking, peer review, and staff utilization of inservice courses. Regarding educational needs, respondents had generally obtained their initial qualifications in their twenties and now had little time and energy to devote to study. They had difficulties in accessing reference materials and felt that coursework lacked relevance. Most areas surveyed lacked qualified social workers, with community nurses providing social work services. Suggestions are offered for recruitment and retention of professional staff and for development of rural-oriented undergraduate degrees and courses in human services. Contains 24 references. (SV)
SKILLS AND REQUIREMENTS OF RURAL HUMAN SERVICE ORGANISATIONS.

Marise Sacco — Australia

The selection and retention of staff is of concern to all rural health service providers. The present study involved interviews (n=25) and survey data (n=60) to obtain a profile of human service providers. Interviews revealed that a number of strategies have been developed to offer support to workers. Lack of access to supervision and networks are factors which contribute to the low retention rate of rural human service workers. Life-style factors in rural communities are important reasons for practitioners to remain in rural areas. Strategies which encourage people who are already familiar with rural life style to obtain qualifications are discussed.

This study is a response to requests from Catholic welfare agencies operating in rural areas of Australia who are faced with difficulties in attracting and retaining professional human services staff to rural communities.

Rural areas of Australia tend to have a distinct culture. There are a number of issues a new worker will be confronted by whilst adapting to a new environment. Apart from cultural differences, rural human service workers are also confronted with differences in service delivery in relation to organisational models and general lack of higher order services. Workers in rural areas need to have multiple skills yet many are confronted by the lack of quality professional supervision.

SKILLS AND REQUIREMENTS

Collier (1984) argues that the models used by urban trained professionals are inappropriate and that city—trained welfare workers bring urban values to rural practice. They then attempt to "convert, patronise, communicate and finally colonise rural dwellers". Instead, workers need to see and understand what is happening and then construct ways of dealing with the realities. In this way appropriate models of service delivery can be developed.

Myths and Realities

Factors of isolation, distance and the need to be self-reliant have given rise to a number of different characteristics within rural communities. These factors have created a community with a common language and respect for each person's pride in their ability to "go it alone." A mutual understanding of what constitutes the 'last straw', an appreciation that there is no one else to help except the community and a belief that any one may need help at any time if disaster strikes, creates a close-knit social fabric in local communities (Lynn 1990, p. 17). It has been said by some social commentators that rural communities look after their own people and that they are suspicious and unaccepting of outsiders who do not understand local ways (Dallen 1987).

One of the biggest hurdles for a welfare worker employed in a rural area faces is gaining community acceptance. In communities where family lineage can be traced over many generations and everyone knows everyone else, it is difficult to accept someone whose background is unknown. Alienation can be severe if the practitioner does not find "like minded" people with whom to associate (Stirney 1992). For workers who have relocated away from friends and family networks, the isolation and the costs of telephone calls can be unbearable. Many have to cope with personal stress alone. Where family members have relocated with the worker, adjustment problems of family members add further stress. Trust is important in any setting, but it is more pronounced in rural areas where there is generally less acceptance by clients of seeking help and a greater suspicion of "outsiders". People living in rural and isolated areas tend to keep their problems to themselves or call on friends or the family doctor or solicitor. Professionals who are newcomers are distrusted and therefore kept at a distance resulting in a stand-off between the human service professional and locals (James 1989).

Within a small community these new community members will be faced with a loss of anonymity which may be a different experience compared to that experienced in urban areas. The differentiation between work and private life inevitably becomes obscured as within a small community they will encounter clients in social settings. People react differently to meeting a councillor or social worker in the local supermarket. Some will pretend not to know the worker, others will avoid contact and others will want to continue the consultation right there and then. In urban areas these problems can be avoided by living in a different suburb to the one in which people work. In rural areas the loss of anonymity is unavoidable, requiring specific strategies on behalf of the worker to cope.

Attitudes

A common myth attributed to people living in rural areas is that they hold more conservative views than their urban counterparts. This conservatism is given expression through higher rates of marriage in rural areas, greater importance being placed on family life and attitudes towards traditional gender roles (ABS, 1992).

Another attitudinal study conducted by the Australian Institute of Family Studies found some difference between urban and rural attitudes. Discussion stressed that there could be a number of explanations and that in some cases differences were slight. Attitudes towards premarital sex and gender roles were found to be slightly more conservative than urban counterparts (Kelly 1989).

Health and welfare services are female dominated industries and a woman from an urban area who moves to a rural area, may find conservative attitudes towards gender roles problematic. Dealing with female rural clients also requires an awareness of rural culture.

Women in Rural Areas

Farm ownership is generally passed to the male side of a family. Women's contribution to the operation of farms often remains unacknowledged. In the event of separation or divorce, legal decisions tend to favour the viability of the farm, resulting in women usually being disadvantaged in terms of the settlement (Chan 1983; Coorey 1988; Dempsey 1989).

For rural counsellors and human service workers, this may mean that women face great difficulty in escaping a violent marriage. Alston (1990) argues that rural counsellors must also be aware that rural women are often antagonistic to feminist ideology. Their conservatism towards the division of labour and support for the family are founded on a strong tradition of working in partnership with their husbands. Although such attitudes may be widespread, they are not universal (James, 1989).

Within their personal and professional lives, welfare workers would also be subjected to these gender-related values. Practitioners from urban areas may be attracted to rural life by the slower pace of living and the community spirit that exists in many communities.
rural areas. Clearly, there are benefits in living in an unpolluted environment where one can feel secure in raising children. Problems are more likely to occur, however, if the practitioner is unaware of the impact a different culture and expectations will have upon their lifestyle.

The normative model described in this section is not static. Therefore, a question arises whether or not a person from an urban culture faces greater difficulty in becoming accepted into a rural culture or whether the culture is sufficiently different within rural areas to mean that anyone non-local would experience difficulties.

**HUMAN SERVICE ORGANISATIONS**

People in urban areas are accustomed to demanding social services. They also have access to a greater range of services to satisfy their needs. In rural areas people are less accustomed to expressing their needs. Within a closed or tightly knit community, fear of community sanction can prevent people from expressing their needs, let alone seeking help from a professional welfare worker.

Research findings and think-tank discussions and conference proceedings indicate a number of factors which interact to produce difficulties in providing human services to rural areas of Australia. The main factors identified are: the lack of a critical mass resulting in limited service provision and therefore problems in the availability of qualified, experienced staff; government funding for fractional positions requiring staff with very broad-based skills; and the use of inappropriate models of service delivery.

**Government Funding**

Current Government funding practices at the Federal and State/territory level, have contributed to the inequitable nature of welfare service delivery in rural and remote areas. An extensive review of the available literature concurs with service providers' experiences that existing government funding practices encourage a service delivery system which is suited to addressing needs in an urban context (Rural and Remote Areas Unit, 1991; McKenzie, 1987; Greaney & Lees, 1989; Cheers, 1992). These practices do not take into account the unique conditions that exist in a rural context.

Existing funding programs are narrowly defined and highly specialised to meet the vast array of needs that exist in our predominantly urban society. This focus means that unless potential service providers can show that their service conforms to specified guidelines, (eg: child protection, domestic violence prevention, or marriage and family counselling services), they will not obtain funds for rural and remote regions. The specialist orientation also means that scarce funds are used to target only specific community needs, often leaving fundamental issues unaddressed (Greaney & Lees 1989; Cheers 1992).

In practice the smaller populations in rural areas mean that a town may be eligible for funding for a domestic violence worker for 10 hours a week and a community worker for 5 hours a week, etc. This presents three problems. First, there is a shortage of specialist trained people in rural areas. Second, working in fractional positions may be unsuitable. Third, if an organisation was able to employ a specialist on a part-time basis it is unlikely there would be another practitioner to relieve the worker during annual or sick leave, etc.

Funding should be flexible to enable the rural human service worker to adapt programs to local requirements and circumstances. It is necessary for the welfare worker to be in tune with the local community so that they can respond to their needs. Where decisions are made by a remote central body, funding is likely to remain tied to inappropriate rural models. The requirement to satisfy funding specifications often works to inhibit the development of more appropriate service models.

**Models of Service Delivery**

Urban models of service delivery rely heavily on their ability to refer clients to specialist services in the local area. The concentration of population within a relatively small area enables people to specialise in different areas of service provision. These patterns are not available in less populated areas. Outlined below are models used by rural human service organisations. The need to utilise alternative service delivery models also has implications for the tertiary education system. New graduates are often ill equipped to cope with the requirements of rural service delivery and often apply for such positions as a last resort.

Existing service organisations tend to be concentrated in regional centres and service a wide catchment area. Clients are required to travel to the town. Alternatively service providers travel out to clients and/or establish satellite services in smaller towns.

Specialist services may also be provided by visiting service providers from out of town.

Much research, coupled with the experience of service providers, point to the advantages of generic service provision in rural/remote areas (Puckett & Frederico 1992; Lynn 1990; Greaney & Lees 1989). A generalist worker is able to make more contacts, has greater freedom to respond to the diverse needs that exist within a community, and can clarify demands, thus utilising specialist services more appropriately and effectively (McKenzie 1987). Such a worker is also able to more fully utilise existing community networks.

Where there are a limited number of services available in rural areas service organisations may employ multi-skilled practitioners or a number of specialist practitioners on a part-time basis. In recent years there has been an increased use of 008 or "free call" telephone services to provide information and counselling services. Another model used by human service organisations to deliver services in rural areas is the use of a mobile service. This entails moving personnel, equipment and resources between communities.

Where resources are scarce, there is a tendency to encourage the formation of community self-help groups and the use of informal friendship networks to provide some of the services that would be the domain of professional staff in urban areas. Alternatively, organisations may attempt to use multi-purpose facilities and share premises with other service organisations. An advantage in these arrangements is that clients may freely enter the building without the purpose of their visit being publicly known.

The above models and the need to be multi-skilled in rural areas raise questions about the appropriateness of tertiary education courses to equip new graduates to undertake employment. Most tertiary education institutions are located in capital cities and offer highly specialised training, which may not include any rural content.

**Professional Problems**

An important issue for new staff is the lack of debriefing sessions, supervision and professional support from experienced staff. This is due to a number of reasons:

- the worker being a lone practitioner especially in the case of a Community source — the need to travel out to visit clients in surrounding areas may mean that the worker spends a great deal of time travelling between clients and so receives minimal peer review or contact with other workers in the same organisation; and — the limited availability of services results in a paucity of qualified supervisors or appropriate people with whom to network.

Setting up strong supportive networks is an essential element of rural work. This may require being highly creative and energetic in creating local networks. Welch, McKenna and Bock (1992) emphasize the usefulness of maintaining professional networks in metropolitan areas and in being a member of professional associations.

Access to further education and resource materials is often problematic (Weker 1991). Information sent through the mail may take a long time and, when received, may be inappropriate or
no longer relevant. The result is that rural workers may be isolated from developments in their own profession.

EDUCATION SYSTEM

The above discussion highlighted a range of potential difficulties faced by human service professionals, particularly those with previous employment backgrounds in urban-based services, in adapting to a rural environment. Research by Wise and Hays (1992) into problems of attraction and retention of medical practitioners highlights the need for both undergraduate and postgraduate courses to contain material specific to the needs of rural practitioners. Rural practitioners ought to be consulted in the formation, content and design of such courses and the courses periodically revised to remain relevant.

Tertiary courses should also offer units which enhance the generalist skills of those people intending to take up positions in rural Australia. A review of the course outlines currently used in social work, social welfare and psychology schools in Australian tertiary institutions was undertaken to ascertain the rural content of courses available.

The results indicated that many of the courses cover aspects of welfare work in rural areas in their curriculum. These courses include subject areas such as alternative value systems, community development in different social settings, cross-cultural comparisons and stress management in rural services. Social work Degrees and Diplomas, in general, place emphasis on developing self-knowledge and encouraging students to explore their own stereotypical views and values.

However, it is argued that specific factors of rural lifestyle should be explicitly examined in light of the challenges of rural settings. Problems were also noted in that practical placements within a number of Degrees precluded rural placements relating to the fact that placements are divided into blocks of one to two weeks which would make travel to rural areas prohibitive due to time and cost.

People residing in rural areas are also confronted with the tyranny of distance in the form of extended travel time, additional costs in undertaking travel and living close to campus if they are to access educational facilities. These issues play an important role in determining whether people take up tertiary study. Decentralising training facilities is one of the most effective means of overcoming this problem (Concliffe 1991; Sturmey & Edwards 1991; Sturmey 1992).

In summary, the literature has identified a number of problems which may affect the retention and selection of qualified experienced staff in rural areas. It can be categorised on the basis of social or cultural aspects and work related issues. Questions arise relating to identifying the factors which attract people towards working in rural areas and whether or not having a rural background is an advantage. Discussion of employment issues raise rise to questions about the level and type of qualifications employees have or skills they have obtained but which are not recognised through formal qualifications. Finally, employers faced with problems in attracting and retaining personnel may have initiated specific strategies to alleviate the problems associated with the models of service delivery and unique stresses of working in rural areas.

The aim of this study was to examine the level and type of skills required by employers in human service organisations in rural areas and to identify strategies aimed at overcoming the problems associated with the selection and retention of personnel. Other aims were to identify gaps in the skills of employees currently providing human services and to seek opinions from respondents relating to reasons to remain in or to leave rural areas.

METHODOLOGY

a. Survey Design

The triangulation method was employed in this study. Initial contact was made with organisations and questionnaires sent to all employees within the organisation. A response rate of 57 per cent was achieved from the 110 questionnaires distributed. Three of the questionnaires were returned incomplete giving a total of 60 questionnaires for analysis. Structured interviews based on the practical and theoretical considerations raised in the review of existing literature were also conducted in situ with organisation managers.

b. Selection of Statistical Local Areas (SLAs)

Aboriginal communities have not been included in this research project due to limitations on time, finances and the researcher's inexperience with Aboriginal communities.

A total of five service towns were sampled from New South Wales, Queensland and Tasmania. These towns are classified as 'Rural Other' i.e. 'as being within a few hundred kilometres of a capital city or major urban centre...' (DCSH, 1991).

The size of the town's population was controlled for by selecting the SLAs with a standard score of between -0.5 and 0.5 and a population density of two or fewer people per kilometre squared. For each of the selected SLAs the number of hectares, kilometres from the provincial town (ranges from 64 to 90 km); and index of remoteness (range is 9.56 to 9.67) was obtained (Arundell, 1991). Finally five SLAs were randomly selected from the 14 which had previously been selected.

c. Selection of Service Organisations

Local Shire Councils were contacted and local telephone directories consulted to locate services. This revealed that all survey services in the selected SLAs with the exception of one community nurse, were provided from a larger centre within an adjoining SLA.

The four types of service organisations selected were: Community Health; Family Counselling; Family day care; and Home Care. Taped interviews with organisations' managers or directors took approximately one hour and were carried out during the months of March and April 1993.

RESULTS

The 60 questionnaires were coded and analysis was carried out using SPSS - . Outlined below is a profile of the sample population based on mean scores in each variable. This is followed by an analysis of work-related issues. A profile of professional qualifications is provided and finally a summary of responses concerned with working in rural areas.

a. Profile of Workers

Respondents were mostly likely to be a qualified nurse (37%), to be working with children (28%) or to be a counsellor (18%). There were few social workers (8%) in the areas surveyed. On average they had been working in rural areas for nine years and had been in their present position for four years. Respondents had been living in rural areas, on average, for 26 years.

26% of respondents were between 41 and 45 years of age, a further 26% under 35 years of age and 17% were over 51. 47% of respondents who were 35 years old or younger, had been living in rural areas for 15 years or less, (of these 27% had lived in rural areas for less than 5 years) while 40% had lived in rural areas for over 16 years. 24% of the sample had been living in rural areas for between five and 20 years.

Of the 50 respondents who provided data on both their age and the number of years they have lived in rural areas, 22% had spent all their lives in rural areas. A further 8% spent up to 10 years away from rural areas.

The sample population was predominantly female (88%) with males (8%). 4% omitted the question. 12% of the sample were not married and 83% were or had been married. Respondents with five or more children represent 4% of the sample, 38% had three or four children while 37% had two children. 21% of respondents either did not have children or did not answer the question.
68% of the sample population stated that their present employment status was the most preferred. On average they worked 33 hours per week and earned between $25,000 and $30,000 per annum. 53% worked full-time while 33% worked part-time. 12% had worked in rural areas for a year or less, 38% for between 1 and 8 years and 25% for between 8 and 15 years. Of the total respondents, 63% had had a previous job in a rural area, 43% had held at least three jobs in rural areas and 38% had been working and living in rural areas for an equal number of years.

When giving multiple responses to the location and length of service of previous jobs 55 people replied giving 107 responses. In rural areas, 35% had spent less than five years and 11% had spent more than 11 years in each of their last two jobs. In urban areas the corresponding figures were 28% less than five years and 4% more than 11 years.

47 people listed their present job title and their previous job titles. In 42% of these cases the title remained within the same category for all three positions. 47% had two jobs in the same and one in a different category. The remaining 4% had held jobs in three different categories.

c. Practical Experience and Formal Qualifications

Respondents were asked to make multiple responses to formal qualifications and practical expertise. Only one person stated they had no formal qualifications and eight people declined to answer the question.

The high number of Certificates (43%) reflected the high proportion of nurses in the sample. Nursing Certificates accounted for 20% of the certificates undertaken. Bachelor of Arts (6%) and Social Work or Social Studies (4%) were the most common Bachelor Degrees. 15% of the sample had undertaken Bachelor degrees.

Types of courses undertaken were predominantly in-services. Respondents reported that courses in counselling (4%) and child care (4%) were the most frequently undertaken.

On average, the 43 people who stated the dates they completed or were to complete their course of study had been formally qualified for twelve years. This average reflected courses taken to update qualifications rather than original qualifications. In general however, qualifications were obtained whilst the respondents were in their twenties. Three of the respondents stated that they were presently studying.

Multiple responses were made in relation to respondents' education. The most frequent responses were related to the need for ongoing education and in-service courses (10%) were useful in this respect. 8% of respondents stated that their education and training had been inappropriate. An equal number emphasised life skills (8%) and previous work experience rather than commenting directly on their education.

Counselling courses (4%) invoked comments in relation to the lack of practical content and group work experience. 4% of comments related to the lack of specific rural content in courses.

Access to educational facilities was not a frequently mentioned problem.

Comments on practical expertise mentioned management issues (8%) in the context of the need for training. Expertise was obtained through in-service or trial-and-error learning following promotion into a supervisory or management position. Few comments were made on issues relating specifically to rural experience. Mention was made of those skills relating to working with people (8%), e.g., counselling skills (7%).

d. Comments on Working in Rural Areas

Respondents were asked to comment on why they chose to work and why they choose to stay in rural areas. Comments can be divided into aspects of rurality (26%) and into employment factors (17%). Comments about rural life emphasised the sense of community and a more relaxed, simpler lifestyle. Appreciation of the environment in general was mentioned as an important factor. Family relationships (5%), often the fact that a spouse worked in the area and that the respondent had a rural background, were recorded.

Factors relating to employment included satisfaction with the level of autonomy and the generalist nature of the work. Respondents commented that they enjoyed the challenge of coping with the variety of problems associated with rural areas and they felt there was a need to be met. Access to in-service was also mentioned.

A comparison of the nature of the comments and the number of years each respondent had been living in rural areas, revealed that lifestyle and community issues remained important regardless of how many years the person had lived in rural areas. Family issues appeared to be important in the first ten years and were then less frequently commented upon.

Fewer comments were given in relation to the reasons as to why their would decide not to continue working in rural areas. Changes in circumstances related to work (18%) and family or personal issues (8%) were the most frequent comments. Emphasis on these issues remained fairly constant when related to the number of years the respondent had lived in rural areas. Only 6% of the comments indicated that respondents could think of no reason or would not choose to leave. Comments on issues relating to education were more frequent in the earlier years of living in rural areas.

Lack of career path and the need to expand skills were work-related concerns. Others were an increasing work load, the declining level of skills of potential referral sources; the amount of travelling on a daily basis which was tiring; the sense of isolation from work colleagues; and the lack of replacement staff.

Retirement, the desire to be closer to children now living in urban areas and changes in spouses' job were amongst family or personal reasons to no longer work in rural areas. Illness and age were other sources of concern.

e. Interview Data

Five interviews were conducted in each of the areas visited. A further three interviews were conducted with service providers. This section contains a summary of the main issues discussed under the general headings used during the interviews.

(i) Organisational Structure

In discussing organisational structure attention was paid to models of service delivery. The nature of services such as Family Day Care and Home Care Services meant that field workers and coordinators spent time travelling away from the main centre. For the purpose of fortnightly regional play groups, school halls, church halls or a carer's home were utilised. The major difficulty occurred with transportation and installation of equipment. Much of the Home Care was co-ordinated through the local nursing services.

It was found that counselling services used a variety of models of service delivery. All but one of the services operated from major centres. Two of the counselling services did not have a outreach or satellite service which the other three had. Personnel in two cases travelled to the outreach centre whilst in the third a local person was employed on a fractional basis. None of the outreach services had full-time staff.

Another model used was for specialist services to visit local areas. These service providers may travel between Shires, or may come from a larger town or city. Within the counselling organisations this was not deemed to be a problem because the desire for confidentiality meant that local residents preferred to speak to an outsider. Where there were no visiting specialists many people travelled to a neighbouring town to receive services. In all cases the satellite services were by no means meeting demand.

There was little interaction between the community nurse and local hospital in three of the Shires. The community nurse...
therefore generally a sole practitioner responsible for the development of their own position.

The wide geographical coverage of each organisation necessitated a great deal of travelling by service providers and/or clients. In the survey data, a distribution of hours worked per week, disclosed that 17% of the sample population spent between 10 and 18 hours travelling per week. 28% spent 5 hours travelling per week and on average the sample population spent 6 hours travelling per week.

(ii) Staffing Requirements

This section entailed discussion on present positions vacant and understaffing. The clear and universal response was the need for relief staff. In larger agencies where there were a number of employees, it was possible to spread the work load of a colleague who was absent. This was impossible for smaller organisations e.g. in the case of lone practitioners the service generally had to be closed. In three instances staff had accumulated up to two years annual leave and in a third, used annual leave to go on a trip with local residents. All the services surveyed with the exception of three, either had positions vacant, were in the process of interviewing applicants or had recently employed new staff.

(iii) Selection and Retention of Staff

Experience in selection and retention of staff and issues relating to advertising and interviewing applicants were discussed. Experience in attracting new staff was varied across the organisations. In one situation, 4 positions were advertised, statewide, but received only 7 applications. Out of 57 expressions of interest, 26 applications were received in another situation. All the applicants except one were new graduates. Another experience entailed local advert receiving 30 responses of which 5 were interviewed for one position.

Local people were sought in that adverts were usually placed only in local newspapers. Many positions were part-time and it was reasoned that it would be difficult to attract workers from further afield. Problems were also experienced in finding someone with both qualifications and experience. Most of the organisations found that they had to choose between one or the other. Within nursing, the problems related to clinical versus community experience.

(iv) Qualifications Sought and Specific Skills Required to Work in Rural Areas

Discussion on this topic fell into the following three areas: legal or professional requirements; personal attributes; and generalist skills. Nursing, counselling and family day-care co-ordinators fell into the first category. Emphasis was then placed on personal attributes. Life skills were seen to be important in providing a worker with an empathy for their clients. Intuition and credibility could be built up through life experiences.

Life experience was also seen to be important in relation to developing a self-knowledge. Welfare workers who are isolated from other workers need a clear understanding of their own professional and personal needs. Through knowing these needs limits can be set in relation to the blurring of work and personal lives. This is important in avoiding burn-out.

Being married and having children was mentioned by a number of managers. It was suggested that the experience of raising children provides women, in particular, with numerous skills as well as a sense of identification with the community.

Important general skills discussed were communication, listening, observation, adaptability and the ability to maintain confidentiality. Motivation, willingness to participate and an openness to rural life, dedication and hard work were also important factors in rural work.

Practitioners working in rural areas do not generally have access to help from a wide range of specialist or higher order services. Practitioners may frequently find themselves in a situation where they require skills and knowledge well beyond their basic education. In this way they require well-developed generalist skills from within a number of disciplines.

(v) Further Education; Conferences; In-Service Training

Questions were related to access to courses and any specific strategies used in updating skills. Time, access and costs were the main concerns voiced relating to education. Problems were created by the unavailabilty of relief staff to cover for workers taking study leave particularly for six-week residentials. Study time for workers with families and the travelling cost of attending courses were also problematic. Where courses were undertaken, motivation dwindled because there were few relevant post-graduate courses.

Access was a problem in the obvious sense of being removed from University campuses and facing a limited number of places in distance education courses. A further problem was related to obtaining reference material beyond the references supplied in course packs.

A number of strategies were suggested to alleviate these problems. It was suggested that workers should be given credit for practical experience and expertise to reduce the number of units required to complete a course of study and so make it more attractive. A call was made to decentralise educational institutions, either by taking individual courses to rural areas or by creating satellite campuses.

Being in a rural area and adopting models used by service providers would heighten awareness of issues related to servicing rural areas.

Currently greater emphasis is placed on in-service and attending conferences. During informal discussions with staff members in a number of organisations, the importance of in-service was emphasised. In some organisations managers emphasised the availability rather than the utilisation of in-services. All organisations stipulated availability of in-service which may have been half a day per month, two courses per year or one seminar a year. In two instances a great deal of effort was put into utilising community resources to create courses to satisfy organisation requirements.

(vi) Availability and Utilisation of Support Networks

Discussion revolved around networking within and between other human service agencies. Networks fulfil a number of functions on both a professional and community basis and are also essential for client referral. The necessity for many workers to spend time travelling between clients requires specific strategies to overcome lack of contact between colleagues.

Within agencies time was set apart for workers to discuss issues relating to specific cases, with co-workers. Where possible two people do visits together so that one could review the case management of a peer and provide opportunity to discuss alternative strategies. For sole practitioners, this approach was not possible. Their contacts had to be obtained through visiting practitioners or networks extended beyond the local area.

Emphasis was placed on the value of community networks by a number of interviewees. They found that sitting on local committees developed their knowledge of the area. In smaller communities this was also a mechanism by which to establish friendship networks.

Inter-organisation politics and 'power plays' sometimes prevent inter-agency networking. This may result in some service duplication whilst other needs are unmet.

(vii) Strategies Used in Servicing Rural Areas

Employers were interviewed on specific strategies employed to overcome difficulties related to working in rural areas. Most of the organisations had implemented strategies to assist workers. Other comments were made in relation to personal strategies used.

Three organisations used defensive driving courses as a strategy to assist workers who travelled extensively and were expected to know how to change tyres and to drive safely.

Isolation can be dangerous for workers entering a farm to confront a violent situation. One organisation insisted that workers contact police for assistance and also call home to confirm their safety.
was not always possible as there may be no access to a telephone. An expensive but useful tool would be a mobile phone. This would also be helpful in terms of being late returning from a visit or in the event of an accident or car trouble.

Larger organisations were able to rotate duties or areas covered by workers. This may alleviate stress, provide an opportunity for peer review of case work and prevent dependency relationships developing.

A supportive partner can be important in answering the phone or simply ‘pulling it out of its socket’. On a personal basis, it is often up to the worker to set the limits of what is achievable, what is not and develop strategies to alleviate stress from lack of anonymity.

The issue of confidentiality and small town gossip led to two services choosing to operate from multi-service buildings to preserve clients’ privacy. A similar problem was reported regarding identification of the car used by the financial adviser. In some instances people refused to allow ‘the car’ onto their premises.

Particular strategies caused disagreement, e.g., two organisations stated that they preferred not to create a distance between themselves and clients by wearing a uniform. Another organisation believed that the uniform enabled workers and clients to differentiate between work and leisure and provided greater community acceptance and entry into people’s lives.

(viii) Strategies in Obtaining Community Support and Acceptance

The experience of interviewees was sought regarding community support for services and adaptation to cultural differences.

The reputation and social standing of the larger, established human service organisations enhanced community acceptance and support. Individuals who became identifiable through these organisations were reported to be more readily accepted into a community.

A strategy used to get community funding for the purchasing of motor vehicles was to place the name/logo of the sponsor on the car. The organisation found that people responded with a sense of responsibility and took delight in discussing ‘their’ car. Clearly, this situation was the reverse of the effect of the rural counsellor’s car. It therefore illustrates the need to be adaptable and to use different strategies in different circumstances.

Parenthood and participating in local committees were seen as a means of getting to know local hierarchies and obtaining access to key figures. Warnings were given that at times, such involvement meant that maintaining client confidentiality was put under pressure.

Finally, there was little agreement as to whether or not having a rural background or a partner on the land helped workers to obtain community support and acceptance.

**DISCUSSION**

The factors raised in the literature related to problems in attracting and retaining qualified human service workers. Discussion emphasised cultural and professional differences between urban and rural areas.

Respondents to this study overwhelmingly saw aspects of lifestyle and community as the main attraction for remaining in rural areas. It is necessary for newcomers not only to be prepared for the challenges of a rural community but also to appreciate the rural lifestyle.

a. Importance of Rural Lifestyle

Thirty-eight per cent of the sample population had worked and lived in rural areas for the same number of years, the average age of respondents was 40-45 years; and the average number of years spent living in rural areas was 26. It would seem that having a rural background is not essential to living and working in rural areas. Wanting to live there and being attracted or challenged by rural life does, however, seem to be an important factor.

Despite an average age of respondents of 40-45, generally they had worked in rural areas for only 9 years and lived in rural areas for 26 years. This may relate to several factors:

(i) When comparing age and years lived in rural areas, it was found that on average, respondents spent 20 years not living in rural areas. The remaining 78% appeared to move to rural areas in their thirties or forties.

(ii) Generally, respondents obtained qualifications in their twenties, from major cities. This corresponds with ABS statistics showing a fall in the rural teenage population (1992).

(iii) Some qualified women may have remained at home to raise the children and enter or returned to the workforce once the children were at school.

(iv) For 38% of the sample, the number of years that they had been living and working in rural areas corresponded. The data did not provide explanations for this coincidence but it would seem feasible that they moved to rural areas to take up a job.

In the interviews, emphasis was placed on the need for rural workers to be highly motivated and dedicated. Practitioners needed to possess an openness and willingness to learn and to adapt to a rural life style. Working in a rural area had to be their first choice not their last. It was suggested that these characteristics have as much validity as a rural background. A rural background might help but it was not considered to be essential.

Positive promotion of rural lifestyle and community need to be utilised to attract qualified, experienced practitioners to rural areas.

b. Working in Rural Areas

Once attracted to living in rural areas, employment becomes an important factor in the decision to remain in rural areas.

Regarding reasons for leaving rural areas, work-related issues were the most frequently mentioned and represented 15% of responses. A diverse range of issues were raised including isolation, distances travelled, lack of career path, availability of work, lack of resources and the importance of access to in-house. Strategies need to be developed within each work place to minimise the stress or burnout of staff.

High levels of motivation and enthusiasm were observed within organisations, where attention was paid to developing strategies to assist workers. Interviews with managers within these organisations revealed a high level of commitment to staff networking, peer review and staff utilisation of in-service courses.

Low energy levels and ‘brown-out’ were most likely to occur in very small organisations or where the worker had little or no access to relief staff, supervision, in-service or peer support. Brown out was described by a person interviewed, as a state of collapse. Over time the worker begins to feel indispensable. There is a gradual convergence of their needs and client needs to the extent that all sense of objectivity is lost.

Professional input from peers and supervisors was seen as essential, especially within counselling areas. A couple of organisations provided formal supervision to workers outside of their organisation. Concern was expressed by the managers of these and one other organisation in relation to the time and costs involved. They stated that they could arrange the capacity to supervise lone workers but would require extra funding.

An area which received mixed response was the use of part-time workers. This did not seem to be a problem within nursing as there were often a number of registered nurses living within the area. For other organisations, the availability of qualified local staff was more restricted and filling part-time positions was problematic. They found that few people were willing to relocate for a part-time position. A positive aspect of employing part-time workers for some organisations was the fact that this provided a pool of workers whose hours could be increased to provide relief work positions e.g., moving from teaching to counselling or nursing to child care. The survey data provided no clues as to why such dramatic occupation changes had occurred therefore this
funding requires further research. These changes may reflect an under-utilisation of skills or a mechanism for multi-skilling if the person's skills are adequately updated.

Education

The educational needs of rural human service workers give rise to two problems: the needs of people presently working in rural areas and alleviating the problems experienced in recruiting qualified, experienced staff.

For people already working in rural areas, there were four important factors. Firstly, on average respondents obtained initial qualifications in their twenties. Secondly, combining a demanding job and a family left little time and energy for study. Thirdly, difficulties were experienced in accessing reference material and there was a sense that course work lacked relevance. Finally, 10% of respondents preferred in-service to formal education.

The absence of qualified social workers in most of the SLAs surveyed is an indication of the deprivation of social work skills in rural areas. Presumably community nurses develop and provide social work services.

It was concluded that a rural background was not essential for successful work in rural areas, however it is an advantage and a love of the lifestyle would seem to be a necessary factor. Therefore, it is suggested that high school students in rural areas should be encouraged to continue into tertiary education, particularly into the human services sector, the presumption being that at some stage they will return to work in rural areas.

Because farmers tend to be relatively asset-rich, regardless of their actual financial position, this precludes many prospective rural students from obtaining AUSTUDY. This barrier would need to be removed to encourage students to continue their education.

Encouraging qualified people into positions in rural areas does not overcome the problem of lack of experience. This would require offering incentives to employers, in either urban or rural areas, to hire graduates on fixed-term contract to gain general experience.

Supervision for isolated workers is another possible strategy to increase retention of rural human service workers. This would best be achieved by loosening funding guidelines to enable larger organisations to provide such services.

The development of a tertiary Degree which specifically targets the generalist skills required by human service workers would be ideal. The prevalence of nurses in rural areas makes nursing schools the most appropriate provider of such a course.

Undergraduate Degrees in Social Work and Psychology need to develop courses which encourage students to work in rural areas. Emphasis needs to be placed on the challenges, as well as the benefits and problems of working in rural areas. If any lasting effect is to be achieved, a first step is to encourage and enable students to undertake a rural placement.

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