ACU Blackfriars Lecture 2nd November 2021

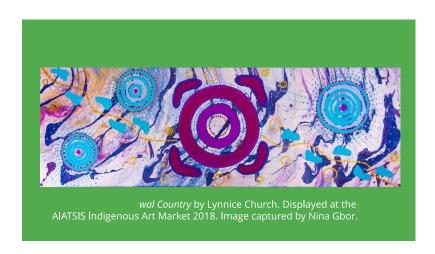
Ursula Stephens

How does social capital enhance health and wellbeing?

Thank you and acknowledgements



I acknowledge our indigenous ancestors, the Ngunnawal people, on whose land we are meeting this evening, I honour them and pay respects to Aboriginal and Torres Strait Islander people who are taking leadership roles today, and whose enduring culture connects us all in a journey of reconciliation.



This beautiful image is by local Ngunnawal artist. Lynnice Church.

How are people feeling on Day 2 out of lockdown? – the restrictions of the last 18 months have taken their toll.



The theme of this lecture is how social capital enhances health and well -being. What do we mean by Social capital?



We all know about **political capital** - it refers to the trust we have in our politicians to make decisions that are in our best interests.

We all understand **economic capital** – the basis of our transactional society.

We are hearing more about **environmental capital** – what are we prepared to do be stewards of the planet?

We sometimes hear about **cultural capital** - where our ability for creativity and celebration of cultural diversity is acknowledged.

We recognise **social capital** more by its loss, than by its influence— even if we don't articulate that — like Joni Mitchell "you don't know what you've got til its gone".

Social Capital is the glue that holds society together. Robert Putman's seminal work *Bowling Alone: The Collapse and Revival of American Community.* explored how Americans have become wealthier but their sense of community has withered. Cities and traditional suburbs have given way to "edge cities" and "exurbs" – vast, anonymous places where people sleep and work and do little else.

As people spend more and more time at work, commuting to work and watching streaming services like Netflix and Apple TV, there's less time for joining community groups and voluntary organisations, and socialising with neighbours, friends and even family.



The OECD defines social capital as "networks together with shared norms, values and understandings that facilitate co-operation within or among groups".

In this definition, we can think of networks as real-world links between groups or individuals. Think of networks of friends, family networks, networks of former colleagues, and so on.

Our shared norms, values and understandings are less concrete than our social networks. Sociologists sometimes speak of norms as society's unspoken and largely unquestioned rules. Norms and understandings may not become apparent until they're broken.

An adult who abuses a child breaches the norms that protect children from harm.

Values may be more open to question; societies often debate if and their values are changing – marriage equality, climate change and VAD are three contemporary examples.

And yet values – such as respect for people's safety and security – are an essential linchpin in every social group.

Put together, these networks and understandings engender trust and so enable people to work together.

So, - Social capital refers to the resources available to individuals and communities through their social connections.

Social Capital describes two key aspects of social relationships:

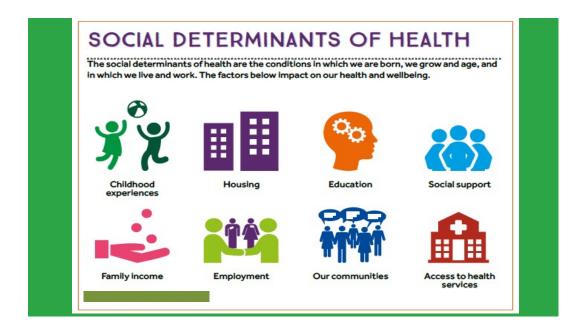
- (i) a structural aspect such as the extent and intensity of relationship links and activity in the community; and
- (ii) a cognitive aspect such as people's perceptions of trust, reciprocity and sharing.

Characteristics of social capital include:

- community and personal networks;
- civic engagement and participation;
- local identity with a sense of belonging,
- solidarity and equality with other members;
- reciprocity and cooperation;
- with a sense of obligation to help others and confidence in return of such help; and
- trust in the community.

Research by the Australian Institute of Health and Welfare High indicate that levels of social capital are considered a protective factor for mental health and well- being in general.

Communities high in social capital are likely to promote healthy behaviour and social cohesion or connectedness has a positive effect on health and well-being.



What shapes us as individuals? What shapes us as a community? What shapes us as a nation?

The social determinants of health connect our experiences across a range of domains with our capacity to maintain health and well-being.

the conditions in which we are born, we grow and age and in which we live and work.

- Childhood experiences
- Housing
- Education
- Social support
- Family income
- Employment
- Our Communities
- Access to health services.

You may have read the opinion piece by Pru Goward last week in the AFR which received scathing reviews - the timing during Anti=poverty week was deliberate I'm sure. It says so much more about her, than about those she is scathingly critical of:

She wrote we need to "harness" the poor.

"They are damaged, lacking in trust and discipline, and highly self-interested. But the poor are still a force that Australia needs to properly harness,"

She describes her "lifelong fascination with the underclass" in a scathing attack on the poor, specifically welfare recipients.

"Government agencies view them with alarm as huge cost centres; they are overrepresented in their huge use of government crisis services and are always the last to give up smoking, get their shots and eat two servings of vegetables a day," she continues, citing precisely zero evidence to back these claims.

She then doubles down by asserting that welfare recipients display "appalling housework, neglect of their children and, notably, [a] sharp and unrepentant manner when told to lift their game by the patronising do-gooder."

"So as long as we keep looking at the billions of dollars they cost us, we will continue to dislike them, reject them and write them off,"

It's a reminder that the capacity for empathy does not come naturally.

But enough of Pru – reflect for a moment on how much has happened in the world in the last two years – on every level it has been quite overwhelming –.

Will we ever get back to what we thought was normal?



You will all recall that COVID-19 landed upon us in the aftermath of the devastating bushfires of the summer of 2019. Those fires had been burning since August 2019, but we weren't directly impacted here until those dark, choking, smoky days of early January 2020.

Have you been watching the ABC series Fires? I have friends who couldn't watch – because it triggered too many bad memories and consequences of that devastating fire period. There were many Canberrans at the coast during those frightening days – for the rest of us the smoke hung like a pall over the landscape for weeks.

The statistics are awful -

As of March 2020, the fires burnt an **estimated 18.6 million hectares** 186,000 square kilometres; destroyed almost 6000 buildings (including 2,800 homes) and killed at least 34 people. People were left only with what they were wearing – others were only to grab a few precious things before the fires were upon them.

After initial devastation of the fires, the impacts were ongoing. Over a billion animals, and many more bats, birds and insects, are estimated to have perished as a result of lost habitat and food sources.

Did you know that it is estimated that more than 4,000 people were admitted to hospital due to the smoke?

80% of Australians, or about 20 million people, were affected by smoke from the fires?

And the cost to the health system was estimated to be more than \$2billion?

And the respiratory distress experienced by some made many more susceptible to what was about to come.



Asked on radio to describe their responses to the bushfires during those awful days, many Canberrans said they were shocked, angry, anxious, frustrated, helpless, depressed, hopeless, worried, frightened and pessimistic.

However, when ABC TV interviewed people who survived the fires their responses were very different:

While they were shocked, exhausted and anxious, they expressed relief, gratitude, admiration, stoicism, determination and optimism. Their bodies were pumping adrenaline that pushed them into survivor mode

When we don't feel a sense of control it can be hard to be optimistic. Its part of the fight or flight response. If Canberrans were heeding the health advice, staying indoors, and following the rolling media coverage – many were, in fact, experiencing what we call collective trauma.

The concept of collective trauma has its roots in the work of French sociologist <u>Émile</u> <u>Durkheim</u>. He suggested that our norms, values and rituals are the foundations of social order. They provide the basis for <u>connectedness</u> and social cohesion, pillars of what we now call social capital and resilience.



Collective trauma occurs when an unexpected event damages the ties that bind community members together. Not only are communities physically destroyed, but the social ties that bind them together are also damaged.

Devastating natural disasters aren't the only source of collective trauma. Wars and conflict have challenged established ways of living and fractured community bonds.

We know events like these can challenge the way we think about the world, undermine our perceptions of safety, and rupture social bonds. – Look at Afghanistan.

"People get tired, their creativity dies, they shrug off social events, struggle to make good long-term decisions and their relationships break down. People have tremendous capacity to endure and recover, but they do need support and to have services available when they really need them."



Trauma Psycholigist Dr Rob Gordon

Australian trauma expert Rob Gordon believes social disconnection or "debonding" causes profound disruptions to community life . This undermines the social fabric of the community, which is one the most important recovery resources we have. The 'after' is often worse than the disaster itself, he discovered.

After the Ash Wednesday bushfires, Rob Gordon witnessed discord and rifts grow in communities that were initially bonded by their experience. He put this down to the fact that people had failed to work through lingering stress and trauma.

He observed at the time "People get tired, their creativity dies, they shrug off social events, struggle to make good long-term decisions and their relationships break down. People have tremendous capacity to endure and recover, but they do need support and to have services available when they really need them."

We've experienced significant traumatic events: the Port Arthur Massacre, the Black Saturday bushfires Sydney's Lindt Cafe Siege attacks on pedestrians on Melbourne's Bourke Street

After each of these events, mental health professionals and community organisations have played a crucial role in providing support. They empower people to identify and meet their basic needs and promote a sense of safety and social connectedness.

We know that connection to community matters, just like connection to country matters, for those who have experienced trauma. We recognise that disasters affect local

communities in many ways, generating human, physical, economic, social and emotional impacts.

The bushfires displaced populations, damaged and destroyed thousands of properties left hundreds of thousands without income, impacted public infrastructure – roads, telecommunications, power and transport.



Recovery implies rebuilding infrastructure and re-establishing telecommunication and other public services needed for a society to function. Recovery is also about revitalizing people's livelihoods that have been disrupted and the local and or national economy. Recovery involves attention to community wellbeing. Recovery is about reducing risk and preventing other disasters from occurring.

The Catholic response to the 2019 bushfires was comprehensive - Vinnies played a very important role: they have a designated role in Disaster Response plans at State and national levels and were in affected communities providing emergency relief, supplies and pastoral care and support alongside Bush Chaplains and religious.



Behind the scenes, Vinnies also provided a leadership role within government - coordinating the national emergency relief program and roll out of bushfire relief funding across the country. They had demonstrated their capacity to do what the government couldn't - by rolling out Millions of dollars to people in need, in drought ravaged communities, and stepped up again in the bushfire response – using their call centre, their network of conferences and their thousands of volunteers.

Our social services too provided counselling and referral services, working with mental health professionals, financial counsellors and our parishes to respond to the emerging needs of individuals and families who were impacted. They lent staff and shared counselling capacity, to relieve local workers who couldn't counsel and support others when they themselves were traumatised.



The Church conducted a national financial appeal and recognised its responsibility to work alongside governments to help where possible in the aftermath, by creating CERA – Catholic Emergency Relief Australia, and developing a whole of church response plan for future disasters.

Parishes and schools established nurseries to nurture replacement trees for devastated landscapes. Families donated school bags and supplies for children who had lost everything. We can all remember the outpouring of support from across the world - everyone wanted to do 'something'.

Slowly over January and February Australia began to put in place recovery strategies to start the long process of rebuilding.



And then the Ruby Princess arrived The impact on the bushfire affected communities was immediate.

By March we were forced to make immediate decisions about how to protect ourselves and our families from the mysterious, fast-spreading, sometimes deadly pathogen.

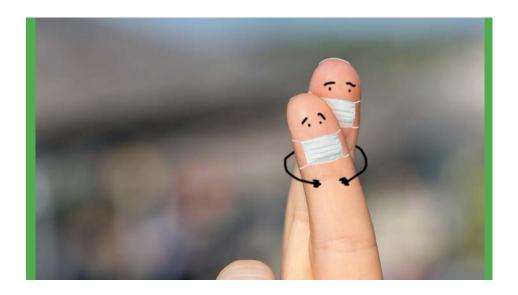


We were asked to wear masks and PPE, to adopt best hygiene practices and submit to testing.

The government developed health monitoring and reporting apps and cranked up the purchase of ventilators, ordered vaccinations, and put us into lockdown.

We were sent home to work and to home -school. All but essential travel was curtailed.

In short, governments quickly acted on the social determinants of health by adapting policies and physical environments to protect our well-being. There were a lot of fingers crossed.



However, many of those decisions had compounding impacts for the people whose lives had already been turned upside down by the bushfires - services established to support recovery, were suddenly unable to continue. Recovery workers couldn't travel, community

meetings couldn't happen, counselling sessions couldn't continue – in effect the community connections were often broken – hindering personal and economic recovery and increasing the collective trauma.



The pandemic certainly upped the stakes.

Community recovery has been threatened by the prospect of contracting the virus, by reduced job security in an uncertain economy, and by challenges posed by remote work and online learning for schools.

Social-distancing s has aggravated social isolation and there are reports of increased domestic and family violence.

Across the country COVID-19 intensified the urgency for government and community collaboration because beyond directly threatening our health, the pandemic aggravated many touchpoints that are critical for well-being.



We saw this in the behaviours that we witnessed in those early days and since, as people are so tired of the lockdown uncertainty – supermarket shelves empty, the rise of preppers and survivalist outfits, civil disobedience, vaccine resistance, and protests all demonstrate how fragile social capital can be.

But we also so people rallying to support those who were unable to support themselves – those left out of government stimulus measures., people isolating, international students, asylum seekers, refugees.

The pandemic coincided with the emergence of the alt -right, buoyed by Trumpism.

I defined political capital as the trust we have in our politicians to make decisions that are in our common best interests. We are now witnessing a massive loss of trust in governments perceived to have failed to keep the community safe, or who are seen to have over-reached in their emergency powers, because of the impact on the economic security of businesses and families.

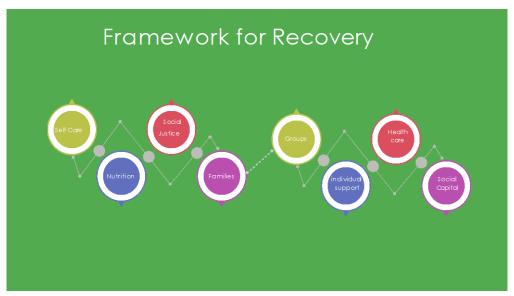
All this fuels self-interest and disregards the common good.



So what do we need to do?

We're now in the next stage of the pandemic – recovery - so what we need is a reference framework for that recovery

It starts with each one of us:



• **SELF-CARE**: Self concept, Self Esteem, Self confidence, Doing things to care for oneself- self connect, integration of experiences



• **NUTRITION**: Including mental health friendly foods, tweaking our eating habits and patterns – get back to meals around the table.



 SOCIAL JUSTICE: thinking beyond self – engaging about issues of violence, stigma, neglect, injustice

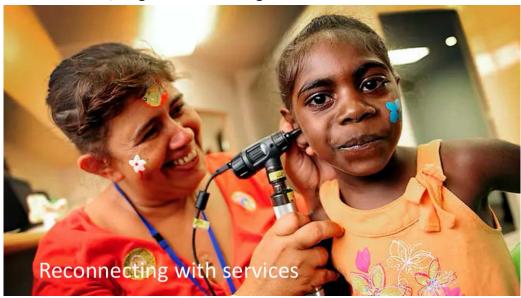


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- **FAMILIES** connecting and re-connecting with families, building care giving and support skills, negotiation, routines.
- GROUPS reconnecting with peer groups, support groups, therapy groups, volunteers groups



- Seeking out the INDIVIDUAL SUPPORT to nourish our souls Befriending, counselling, spiritual support, arts-based therapy, music, choirs, concerts,
- **HEALTH CARE** Overall health needs vaccinations, health checks, exercise, cutting back on alcohol, binge screen watching.



 Slide: 26 SOCIAL CAPITAL - Expanding one's circle of care- reconnecting to networks, peoples, systems, services



We understand the relationships between social factors and their impact on our health and well-being. These are well documented.



We know which groups in our society are most vulnerable and who is excluded:

particularly Aboriginal and Torres Strait Islander peoples, whose life expectancy lags so far behind the rest of the population:

- Where incarceration rates are higher than for any other group
- Where children as young as 10 are being locked up for minor offences creating another generation of stolen childhoods.

- Where the government refuses to agree to the sentiments expressed in the Uluru statement from the heart.
- Where the Closing the Gap initiatives are continuing to fail our first nations people.

We know what needs to be done.

Catholic Social services around Australia provide more than 300 different services to individuals, families and communities - our services are often the anchor services in rural and remote communities. Some are contracted services on behalf of government others are led by the engagement of parishes and local groups determined to emulate Mary MacKillop

"never see a need without doing something about it"

What differentiates our Catholic services from most others is their origins. Our earliest services were established by lay women and men of good will, supported by priests, and religious to support the most vulnerable – the sick, the homeless, the destitute, the abandoned, the frail, the dispossessed. – their efforts were grounded in Catholic Social Teachings - the preferential option for the poor, subsidiarity, solidarity and the common good.

Their foundations were never in profiting from the misery and misfortune of others – rather to improve their lives.

Across Australia the Catholic sector in health, aged care, community services, and education represents the largest non-government sector in the country

And with that size – comes influence. That's why Catholic Social Services, Catholic Education, Catholic Health, Catholic Mission, Caritas, Vinnies, Catholic Employment Relations, ACU, and representatives of our PJPs, the services of our Religious Institutes, are invited to the tables of influence with Ministers, politicians, department heads, advisory bodies, industry groups - using their networks and direct connection to communities to speak truth to power. We shouldn't underestimate our capacity to influence.

Here is a question for you: it's the suitcase question....

I was very moved by a documentary about Fukushima. One man combing among the ruins of his home, searching for anything that was evidence that his daughter had existed. He cried with joy when he found her wet, smelly, rotting shoe.

That image took me back to the Mary Mackillop Family Services Museum, and the display of orphans suitcases that held their life's possessions, and to the Jewish Museum in Sydney – where victims of the Holocaust were repatriated to Australia, with nothing but what they could carry in a suitcase.

So, here is your suitcase - if you had to leave your old life tonight, with no idea of what was ahead - what would you put in it?

And if you lost your life tonight – what evidence would we have that you ever existed?



I will finish by reflecting on the notion of reciprocity, which I believe underpins social capital - simply put

"-it is in giving that we receive"

Australia is on all accounts a privileged nation – our hardships and challenges are first world problems - We consume far more than we need, we are not good international citizens, we don't act for the common good – our greed is self-serving, with no thought for others.

To rebuild social capital in Australia, we have to shake off the malaise and reticence that many are experiencing after this long lockdown – a genuine reluctance to get back to 'the

new normal', the phenomenon of 'the great resignation' and step up our activism around that issues that should really matter to us all:

The big issues:

- Cop26 the climate crisis that confronts our world.
- That more than 46 million displaced people wandering around the world.
- That more than 1 billion children around the world were abused during this pandemic.
- That our governments have used the pandemic to diminish accountability and transparency.

We can all find an issue we can relate to and step up and give to that cause: – time, money, talent, advice, expertise, advocacy, activism.

"It's in the giving that we receive."

The world needs us to step up!

Speaking at the Mission One Heart Many Voices 2021 – earlier this year I said:

"We're often told that our main Christian responsibility at work is to act ethically – but...... Is that enough?

What if we aren't in the world just to maintain ethical systems, but to repair systems that have become corrupt, or at least parts where we see there is risk of corruption?

To think this way is to shift from individual choices to systemic responsibility, and it's also to shift from thinking ethically to thinking and acting redemptively.

Redemptive thinking goes beyond being honest individuals to the kinds of actions that can restore trust in whole systems.

Wherever there is loss, brokenness, unfairness, injustice, waste, or harm—and someone willingly comes into the situation by bearing a cost, or taking a risk to help the person, to be restored or repaired—that's redemptive action.

And, I believe in this time, we are being called to redemptive leadership

. "Redemption" is an economic term. It means to buy back (something (or someone), to make good, to restore it to its rightful place.

For Christians it is full of great theological meaning, referring to Jesus' act of becoming human and sacrificing his life so that we could be restored to a right relationship with God and his creation.

Redemptive leadership brings creative restoration through sacrifice—to bless others, to renew culture, and to give of ourselves.

The motivating force behind Redemptive leadership is fundamentally other-centred: to love and serve.

We rarely expect to encounter the Redemptive leader; although whenever we do, we're fundamentally changed.

And in our lifetimes – we have one – we have Pope Francis.

"... all is not lost. Human beings, while capable of the worst, are also capable of rising above themselves, choosing again what is good and making a new start, despite their mental and social conditioning. No system can completely suppress our openness to what is good, true and beautiful. I appeal to everyone throughout the world not to forget this dignity which is ours."

Laudato Si (p. 134-5)



Thank you!