

Pubs, pipes, pills and place: the experience of change in a semi-rural place.

Katrin Oliver, PhD Candidate, Monash University

Effective Strategies for Working with Involuntary Clients: International Perspectives, Prato Italy, May 2018

I'm a social worker and drug and alcohol counsellor with a community health agency in the Yarra Valley, a semi-rural area about 60 kilometres east of Melbourne, Australia. This land belongs to the Australian Indigenous people, the Wurundjeri, who, having been here for over forty thousand years, are part of the world's oldest living culture. The Yarra River, the Birrarung, as the Wurundjeri call it, flows from its source high in the mountains, winding over 200 kilometres out to the sea. To the Wurundjeri, it is a songline, a path of the Dreaming, which is a narrative of the ancestors who mapped the land in song. To this day it defines the landscape and the lives of many who live here.

This land is part of the Yarra Ranges Shire, one of ten interface municipalities that circle Melbourne, defined by its 70% rural/30% urban mix and high population dispersion (Yarra Ranges Council, 2012). Common to interface municipalities are difficulties with providing adequate infrastructure and services to their constituents, partly due to population dispersion but also because of varying topography that creates geographic divisions and physical barriers. Exacerbating the situation, interface municipalities receive less State funding than wholly rural or wholly urban areas despite being the main population growth corridors of Victoria (Yarra Ranges Council, 2012). I've chosen to use the term semi-rural to describe this area to capture the meld of rural/urban space.

The Yarra Valley is a place of contrasts; there are social and health issues such as high rates of family violence, mental illness, road trauma, drug and alcohol problems, housing insecurity and economic disadvantage. There's a very high density of licensed venues and packaged liquor stores per capita, (Yarra Ranges Council, 2017a, 2017b) and it's an 'end of the line' place infiltrated by the suburban drug trade where small-time dealers ply their wares to support their habits. It's a place of summer dance festivals where the surrounding bushland becomes the place of secret 'bush doofs', flush with city folk, party drugs and methamphetamine. It's a place where bored school kids, busy tradespeople and stressed professionals are equally vulnerable to substance abuse.

In contrast, the Yarra Valley is also a 'tree change' destination with exurban migration drawn to open spaces, sweeping vistas and small-town country life, a place located far enough out of the city for people to afford a slice of land yet close enough to commute for work (Yarra Ranges Council, 2012); it's a tourist destination, renowned for cool climate wines, boutique microbreweries, distilleries, hot air balloons and the gastronomic delights of the Yarra Food Trail.

This beautiful place is harsh for those with less, for those with illness and trauma as well as those caught in a cycle of keeping up appearances. I know these things because of empirical evidence provided by health and local government statistics (Yarra Ranges Council, 2012, 2017a, 2017b; Department of Primary Health, 2017), my own practice knowledge, my research participants and also because I have lived and raised my family in the Yarra Valley for the past seventeen years. This is my place as well as the place of my study. I am showing you images of the Valley because in a conversation about place, I feel it's important for you to have a visceral sense of the place that I am talking about, particularly because we are here, in this place, on the other side of the world.

When I started my PhD, I was interested in exploring how place affects substance use change efforts. I was curious about how people attempt to change their use in a semi-rural place such as the Yarra Valley. I sensed that this setting might create unique circumstances for people wanting to change their substance use behaviour. It's an area that's particularly under-resourced, with many services located in urban hubs that are difficult to access for people who live in the rural areas, creating a 'so near and yet so far' experience for people who are unable to travel. What I mean by this is that the services are generally located in the towns closest to the urban fringe; they are technically situated within the Valley and there is a political argument that people can access them because they exist (Yarra Ranges Council, 2017a). However, the 'possibility' of access does not always translate into 'actual' or 'real' access because people can't get there; maybe they don't have their licence (common with my clients) or they have mental health issues that prevent them from being able to catch the one bus per hour (also common) or their childcare responsibilities prevent them from travelling long distances, or they live in the hills and can't get to the bus stop on the main highway.

I know that our service only sees the tip of the iceberg in relation to people impacted by substances. I also know that substance use problems are not discerning, that they cut across all sections of the community without discrimination. I hope that my exploration of how people experience change in this place might help me improve my practice as well as inform our service of new ways to engage the community.

To date, I have spoken with twenty people about what it's like to try to change their substance use in this place. These people have self-defined that substances are a problem for them. My early analysis of this sample shows that:

- both SU and change are isolating, but in different ways;
- small-town intimacy does stop some people from reaching out for help;
- there are limited local alternative friendship groups and activities;
- the natural beauty of the area is therapeutic for some;
- distance from services and poor public transport is an issue;
- help is available if you have the volition to find it and are willing to *do something different*

- the experience of the Valley is different depending upon how long a person has lived here and why they are here - those who have been here for less time and actively chose to be here have a brighter perspective of their home;
- and the finding that I am most interested in is that the local and everyday lived experience of a place becomes enabling or disabling because of what happens *within* it and there can be randomness about what happens within a place that influences the experience of change.

While looking broadly at the experience of substance use change in the Yarra Valley, I became fascinated with the stories of small moments where people *chose to do something different*. These micro-moments of enacted change happened in surprising places, and instigators of change were at times random opportunities that provided a positive disruption to old patterns of behaviour. I saw that change occurred in physical, relational and internal places and these washed together like ripples in the river, each with their own energy and direction but coming together as one force, indistinguishable from one another.

People's experiences of places are important. Understanding a person's experience can help begin a productive conversation about changing problematic behaviour. Linking place and change together is important because change happens somewhere; it is situated, acted, felt and dependent on others. It doesn't happen in a vacuum but rather is located in time and space.

Working with people who want or need to change their behaviours, how much do we consider the place in which they are trying to do this?

Can we talk with them about their everyday lived experience of trying to change within their place?

If we were able to do so, how might this affect the quality of our work and therefore people's lives?

Social researcher Cameron Duff (2007) argues that while drug policy research has, for some time, considered the context of drug use, this research is generally concerned with describing the different contexts that drug use occurs in rather than theorizing about *how* such contexts shape patterns of use. Drawing on the work of French philosopher Gilles Deleuze, Duff (2014) sees contexts as an *assemblage of relations* or a *constellation* of experiences of space, embodiment and social practices that can explain how contexts influence behaviours. Deleuze argues that recovery as a conceptual model describes a set of possible or generic experiences rather than the real or actual experience of change. Referencing Nigel Thrift (1996), Duff argues that it is important to move beyond the

structural context of drug use and the *possibility* of change and this can be done by taking a post-structural perspective that considers the local and everyday, the lived experience of being and becoming in a contextual space that is active, alive and ever changing. From this perspective, drug use, and one could argue, change, is *a practice of the body in space* that is shaped by larger structural forces. Space itself is seen as something that is continually constructed by the people and forces within it.

Duff (2011) also considers enabling places and resources and *actor-networks* that facilitate access to such resources. Bringing together the concepts of the therapeutic landscape (Williams, 2007), restorative places (Milligan & Bingley, 2007), and enabling environments (Steinfeld & Danford, 1999), Duff argues that enabling places are constructed by the people embodied within them, that they are enabling more because of what happens *within* the place rather than because of the setting itself. There is a temporal nature to enabling, a consideration that the same place can be therapeutic or harmful at different times and may be experienced as one or the other at the same time by different people. This demonstrates the relational element of the co-construction of place.

My study is qualitative and uses a grounded theory and post-structuralist approach to explore the micro-moments of change in the everyday place. Today I would like to share with you some examples of my early analysis of conversations with six people who have a strong volition to change their substance use. Not all have been able to achieve abstinence, but they do have a clear focus on reducing harm from substances. They were able to identify clear moments of change, and this is why I have chosen them as examples.

Several were mandated to treatment, and two had been incarcerated. In relation to the terms involuntary or voluntary, I find that in my work, a person can be either resistant or engaged regardless of their status; voluntary clients may be ambivalent about change, resistant because others want them to seek help or there is something about their use that is still serving them. On the other hand, those who are mandated may have high levels of volition to change and actively engage in the process. I believe that the consideration of place and change is important regardless of this status.

The people that I spoke with have provided rich accounts of their lives, their heartaches and their repeated attempts to improve their circumstances, sometimes against enormous odds. Their strength of spirit lies deep in their honesty and pain. They speak of the isolation that drug use brings, how small it makes their world and how hard it is to be someone else, a different version of themselves, in a small place. Here I want to share with you some stories of enacted change in place because stories help us to connect and learn in a way that abstract theories can't.

Ben

A geographical shift from the community to gaol provided a positive experience of change for Ben who went from 34 years of daily poly-drug use to complete abstinence after he was incarcerated for a family violence matter. Even after a month in the police cells in a state of stress-induced psychosis and a further five months of medium security gaol, he still believes that his imprisonment was the best thing that ever happened to him. He deeply regrets the event that led him to be arrested but strongly feels that he would have never changed his drug use otherwise:

I was never a fan of detox, I've always refused it, never done it, but it actually works, if you go somewhere and you get out of your environment and go to one of those places where you are taught during the day, you know, good things, and you are around good people you know, it works. I would never have got better if I hadn't gone to gaol.

Gaol became an enabling place for Ben not only because it physically separated him from substances but also because he connected to others in a way that he never had before. A victim of bullying from a young age, he had never experienced positive affirmation from a peer group. He recognized that his drug use was linked to low self-esteem and despite marrying and having had a family who loved him, he could not vision for himself a way of changing these feelings. Identifying himself as an introverted man, gaol provided structure and round-the-clock immersion in a social group that, to his surprise, validated him:

I had to be around so many people constantly, I always had a bit of a buzzing, a bit of anxiety, but I had a feeling it was doing me a lot of good, being there. I was lucky enough that after the first month I got a job that I REALLY liked, in the laundry. I have always worked hard; I was a chef, I like working hard. This job was really hard, it was a small team and we all liked each other...and for the second two and a half months I was with a cellmate that I REALLY liked and he really liked me and I had never had that...I had a peer group in the laundry and people respected me and because I worked hard they thought geez, this guy just doesn't stop!

Spaces within the gaol such as the laundry and his cell became therapeutic places for Ben not only because he was away from drugs and *doing* something different, but because of the relationships within these places. These places came to hold special meaning for him because of what happened within them, feeling camaraderie and respect in a way that he never had before. The validation he received not only made him think of himself differently but also made him feel different, right down to the core of his being. Ben recognises that there was randomness linked to his positive experience:

These guys were really easy going and cruisy and the guy that was my cellmate worked there too so we were together 24/7 and that was really good...I had had other cellmates that were VERY difficult, I had over ten and three that were neurotic to the point that it didn't matter what you did, you couldn't please them...so it was very dependent on the circumstance, it was just my particular situation.

Ben came home with a positive sense of self, evidenced by his ability to connect with various groups arranged by his mental health worker. Attending his gym and walking groups are highlights of his week, and he particularly enjoys gathering together afterwards:

I go to the groups and everything keeps cycling up...I sit and have coffee afterwards at the Mustard Tree, I sit and I laugh so I feel good about myself, people validate me and it just gets better and better so I don't think I will ever get sick again, I mean, I'll always be vulnerable.

This continued ability to meet with others and be active and to talk and laugh is evidence of real change embodied in the place that it occurs. These everyday experiences in the street, the gym and the café help Ben to manage his symptoms, cultivate social networks and build hope. These small, situated moments happen with others and build up over time where the repeated ability to do something different accumulates into larger more observable achievements:

I would call myself happy. I have lots of moments of happiness, a lot of moments of levity, I laugh, I went to one of my groups yesterday and I was laughing the whole time.

Ben's world is larger and richer because of his incarceration and the subsequent disruption to his substance use, the experience of a positive peer group was a random happening and the positive benefits of both are filtering well beyond the prison walls.

Liam

Unsurprisingly, the most problematic forms of relationships to navigate in a small place are those that people sense will compromise them in some way. Living in a caravan park, Liam spent five years isolating himself in his cabin, understanding that the place he called home was also a place of high risk:

I had made a stern decision to stick to myself and concentrate on my thing. I didn't want to get involved. I'd done away with my old phone contacts and all that sort of thing so I was very careful not to associate. I was still doing the same thing but I didn't want the riff-raff knocking on the door and attracting attention to myself and

also I was on the tail end of a corrections order which I'd done really well...and I didn't want anything to compromise that.

A horrific car accident after five days of methamphetamine use brought Liam to the realisation that using alone behind closed doors was as dangerous as in the open but in different ways. His so-called safe place was enabling him to continue to behave in ways that were detrimental to him, and this realisation brought about significant change as he sought help with his addictions, finding a counsellor and through her, a support group. Attending the group has been a game changer for him:

A massive thing that I have taken away from the group that I have joined is the power of talking about it, sharing it, listening to others and how it's affected them, and it's extremely important, I think, to most, if not all, to be able to talk about it. I don't care how strong a person anyone is, you can't walk this planet on your own and succeed.

The positivity that he gains from allowing himself to be vulnerable with others in a group space flows into other moments of his day, almost without him realising it. Learning from a friend who had attended the group earlier in the week despite having 'fallen off the wagon', the words of encouragement he offered to her in her moment of vulnerability were the same ones he told himself the morning of our interview when he was going to cancel his appointments for the day:

I had said to her, "it's all right, it happens, bet ya kicked yourself didn't ya, but hopefully not too hard?" She'd been clean nearly twelve months. And she said, "Yeah, I went through the 'I can't do this, I'm so ashamed and disappointed with myself, I'm gonna cancel, but you know what, here I am'. I thought, "wicked mate". I took a lot from what she said because I nearly pulled the same punch this morning. I woke up and the thoughts were there, there were flags all over the place, and the gears were grinding, and my head was starting to spin, and I thought this is not healthy. So I got out of bed and said, "alright, I've got twenty minutes to get ready, fifteen minutes to get to Warburton, well, we don't get to have a shower this morning, we'll have a wash, get your clothes on, and off we go"...and I'll be thanking my friend for showing up the other day and showing me that I could do it too.

The micro-moments of choosing to get out of bed, out of the house and to appointments is change embodied and enacted. It is change situated in a personal space that then flows out into the world with meaning and influence in ways that perhaps are not fully understood until later when someone else mirrors back how that moment changed them also. Positive

disruptions to old patterns occur in tiny moments such as this, and as practitioners, we would do well to notice these and applaud them.

Tom

Positive disruptions to Tom's substance use came unexpectedly in less-than-ideal circumstances. He moved to the area already connected to the local creative arts scene and feels that this set him up because he didn't seek new friendships or experiences at the time. Drinking and smoking cannabis were par for the course and four years on Tom was enmeshed in this community and the lifestyle with no thoughts of changing. He had become particularly good mates with a man with whom he appeared to have a lot in common, although Tom was unaware of his mental instability. When this man became psychotic and suicidal, Tom cared for him. Tom felt loyal to him and wanted to give all that he could because he had lost another in similar circumstances. After many months, he tried to pull back from the friendship because his own health was suffering, but in response he was subjected to violent assaults and death threats. Substance use had originally brought them together, as they connected '*over an innocent drink*' at local music gigs and now this relationship brought Tom's substance use to a rapid halt. There is a randomness and unexpected nature to Tom's experience, illustrating the relational nature of change, how a shift in one person reverberates through to others in complex and far-reaching ways.

For Tom, who'd bought a house here and can't easily leave, the energy that originally attracted him to the town has changed. He doesn't recognise it as the same place that he fell in love with, and he barely recognises himself within it. He feels powerless to affect change, with local politics and history preventing anything from being done about the violence because, Tom believes, this man is an ex-police officer and his father a high-ranking detective:

Everything just gets swept under the carpet, slides off him, and he's not just a problem to me he's a problem to the whole community, we're all dealing with it.

Tom has his own private experience of difficulty and is achingly isolated in it yet his experience is also shared with others within the town, making the private public. His alcohol and drug use has all but stopped because intoxication would make him vulnerable to attack. Tom has isolated himself locally, the main street a danger zone not just from meeting the man who is unwell but also because passing '*the old crew*' constitutes a risk of being drawn back into a world that he believes many in the town will never leave:

It's just a sort of "how ya going?" and keep on walking. You don't stick around long enough to give them a chance to feel like they need an explanation because a lot of these people will take it to their grave...I still care about them and wish them well

but I just don't have any desires to, it's too chaotic, too much hard work and it seems to take away from what life should be about.

Even though change was forced upon him in a way that he is still coming to terms with, Tom's experience has created growth that has moved him beyond the desire to use substances. For him, the problems that come with substance use are not worth the fleeting pleasure it may bring. His future hope is to connect into the local permaculture scene, a group of people he sees as far tamer than his early associates. For Tom, change is enacted daily by avoiding risky people, physically moving past them quickly in the street and laying low in his own home until he feels ready to reach out to new social networks:

If I stay mindful and around safe people sooner or later they are going to be mates and then bang, you've got a new circle.

Despite some now serious mental health issues of his own, his optimism and self-efficacy are evident in his confidence that he can make new friends, even in a small place where he has gathered a lot of history already. Interestingly, Tom was the only person in this sample who had experienced a healthy childhood, which is perhaps why he has the resilience that he does.

Mick

Mick recognises that his shift from what he calls a '*nefarious lifestyle of alcohol-fueled violence*' to a place of sobriety came in response to being placed on a corrections order for seriously assaulting his brother at a family event. Mick acknowledges that he didn't have to stop drinking because of the order but:

I knew something had to change. There were only a couple of options with what I was doing.

A few weeks after being placed on the order, Mick was alone in his room on New Year's Eve with no friends and no money. Drunk and battling both a gambling and alcohol addiction, desperation made him decide to give sobriety a go. Several days later he went to his doctor to ask for help and bought medication and groceries with his last fifty dollars. Over the next few months, his bedroom in a share house shifted from having been a place where he drank alone, to being a sanctuary from where he reached out to the world of sobriety. YouTube became the path to motivation and inspiration, a conduit to a different way of being. The virtual space of the Internet became an important place where Mick felt affirmed and where he could safely build a new identity. He created an Instagram page about his sobriety, and from his room, he beamed himself across the world as a sober person:

Being sober, I had lost my identity, I lost my confidence, I'd lost everything. I had to find that again. Fifteen months into it sometimes I still feel like a fucking idiot you know, but in the beginning the Internet was all I had. It was a start.

Mick feels that the most significant shift happened for him when, through watching a video on YouTube, he was inspired to try yoga. There was a class running at the local gym and he decided to call and enquire and then go along:

It was profoundly moving for me, that first time class...it's a beautiful thing, a lot of the breathing, the meditation, the group environment, the other people there, significantly different to the rooms that I had been hanging around in...my instructor was the first person I opened up to.

Mick was deeply touched by the energy embodied within the yoga space, created by the shared experience of doing something life affirming. He felt the differences between old places and new, not only because the activities held within were vastly different but also because the yoga space made him feel connected to himself and that he mattered, things he had never felt before.

Mick finds it hard to articulate the change that has occurred within him over the past fifteen months, not having the words available to describe his internal shift. *It's something I'm interested in, how to articulate the change, going from what I was doing to what I am doing now. I can't find the words...but I know what I **do**, making the small changes necessary to get me where I want to be... it's baby steps, one day at a time*

Despite not having the words, he recognises what he has **done** that has made a difference, understanding that the change in him has manifested in repeated small moments of doing something different to his old pattern. Enabling and therapeutic places came in the form of his bedroom, his local gym and the appointment rooms of those who were there to help him. One of these people was his gambling counsellor:

I trust her, she's someone like I have never had in my life, and she's a very special person to me, that's for sure, sitting in this room with her...

Along with small daily activities regularly enacted, building a solid relationship with one person that he can trust has been critical for Mick, helping him to manage his symptoms and keep him connected to his long-term sobriety.

Jade

After years of heavy drug use, Jade feels the time has arrived for her to live differently:

I'm too old for all of this. Well, you know, I'm in my fifties, I'm past it. What, am I going to do this and get brain damage?

From her late teens, Jade spent fifteen years in Melbourne, 'I came because of the drugs', before fleeing family violence with her young daughter, drawn to the Yarra Valley because it reminded her of her New Zealand home. She hoped for change to her drug use but:

Of course, I just attracted the people who smoked because I still had, you know, we attract who were are to a certain degree, and I still wanted to.

Over a nineteen-year period Jade has experienced the Valley as particularly disabling because of her longstanding resistance to being there. She felt forced to remain in Australia because of her daughter's health needs and her resentment and anger about the situation contributed to ongoing cannabis use. The opportunity to return to New Zealand when her daughter was a teenager brought with it a positive disruption to her drug use. She experienced three years of abstinence and an embodied happiness that came from being home, being in a place where she didn't have to try to be herself; she just *was* because she was part of the story of New Zealand in a way that she could never be in Australia.

But her daughter's unhappiness about being in New Zealand saw them return to the Valley, and Jade's relapse followed soon after. Four years later, with her daughter grown and living in the city, Jade has found herself being able to move, at last, towards change. With subtle shifts of focus and activity, she has for the first time, found places within the Valley that are enabling of positive disruption, discovered partly because she has a greater volition to live:

I had a death wish and now I feel like, no, I want to live, I do want to live which is huge because I never did...I never thought I'd make thirty...I still don't see the point of it but that's not my place, I mean it just goes on as it goes on and I just have to stay on my side of the street as they say and do what I've got to do...all you have to do is the next right thing.

For her, right now, the next right thing is being beside the river, going to Dhama talks at the Buddhist monastery, immersing herself in nature around her secluded rental home that's away from the social pressures of the town, doing yoga and allowing herself quiet, solitary time to reflect on her life. These activities are acts that she feels '*rehab*s' her, puts her '*in something*', a place that has helped her to understand that she needs to go home:

I want to build some bridges with my family, I've been gone a long time and also because I was an addict, that didn't help things, but I do feel restrained here, I do

feel like there is nowhere else but New Zealand for me to grow, there are things I want to explore that aren't here ...I've spent my whole life running...I don't think I could keep going here; I'm just at that place.

Jade's longing to be home is experienced as a physical ache, described to her by an Australian Indigenous elder as the pain of energetic cords pulling her to her place of Dreaming. When she needed to stay in Australia she was drawn to the Valley, the Yarra River and Mount Donna Buang. Now Jade's next right thing will take her home to her own land, to her own river and mountain, to her people and ultimately to herself.

These are stories of suffering and hope, showing how substance use and place influence each other in ways that can facilitate change. Suffering and hope co-exist in an internal place unique to each person where hope is nurtured in small moments that are sometimes linked to other people or within the previously unknown self. Whether the goal is for abstinence or a reduction of harm, points of positive disruption to drug and alcohol use can be found in geographic, social or psychological relocation. Everyday micro-moments layer upon each other, sometimes acted consciously, sometimes in faith that a small act will one day make a big difference, even though it doesn't feel that way in the moment. It's the getting out of bed every day, leaving the house, walking quickly past an old friend and then tolerating the loneliness that this brings, showing up for appointments, being vulnerable in a group and being open to novel experiences despite feeling uncomfortable, these are the things that matter.

For these people, change was born from unexpected moments: a violent assault, incarceration, a daughter's absence, a car accident, a friend's mental illness. Once sparked, change continued to grow in small, everyday acts of life and the repeated ability to do something different, thus replacing old destructive patterns with something else.

As practitioners we need to be open to exploring the everyday moments of people's lives. While change can begin with big psychic shocks, sustainable change is enacted and embodied in small moments. Our job is to be open to novel possibilities and help people to see that what they do today literally creates their tomorrow. Places do not stay static but alter with what is relationally happening within them, creating endless opportunities for positive disruption. The Valley was enabling and disabling for different people at different stages and sometimes both at the same time. Place is important because change is always located somewhere and it is always relational. People need us to be able to help them do the next right thing, to act in a situated moment. Action has to be real, available and manageable in the split second of vulnerability. Our job is to help people notice the small stuff because this is where their future lies.

These stories offer a snapshot of my early results. From here, I will continue to collect and analyse stories, focusing on micro-moments of change in place, looking for common threads in how people enact and embody change that provide positive disruption to the experience of substance use. I hope that this knowledge will help inform practice; guiding us to help the people we work with to find 'real' moments of change rather than abstract ones. I thank you for being here in this place with me today.

References

Department of Health, Primary Health Network. (2017). *Eastern Region PHN Needs Assessment* retrieved 1st May 2018 from https://www.emphn.org.au/images/uploads/files/Needs-Assessment-_Nov-2017-FINAL.pdf

Duff, C, (2007). Towards a theory of drug use contexts: Space, embodiment and practice. *Addiction Research & Theory*, 15(5), 503-519

Duff, C. (2014). *Assemblages of health: Deleuze's empiricism and the ethology of life*. Dordrecht: Springer International.

Milligan, C., & Bingley, A. (2007). Restorative places or scary spaces. The impact of woodland on the mental wellbeing of young adults. *Health and Place* 13(4), 799-811.

Steinfeld, E., & Danford, G.S. (Eds.). *Enabling environments: Measuring the impact of environment on disability and rehabilitation*. Springer Science & Business Media.

Thrift, N. (1996). *Spatial formations*. Sage. London.

Williams, A.M. (2007). *Therapeutic landscapes*. John Wiley & Sons, Ltd.

Yarra Ranges Council. (2012). *Creating liveable communities in the Interface*. Retrieved 16th October 2017 from https://www.yarraranges.vic.gov.au/files/assets/public/webdocuments/corporate-services/governance/policies-strategies-governance/hwb_heathy_interface_yarra_ranges_profiles.pdf

Yarra Ranges Council. (2017a). *Gender equity: the evidence in the Yarra Ranges*. Retrieved 18th November 2017 from <https://www.yarraranges.vic.gov.au/Community/Gender-equity/The-evidence-in-Yarra-Ranges>

Yarra Ranges Council. (2017b), *Yarra Ranges Health & Wellbeing Profile 2017*. Retrieved 18th November 2017 from https://www.yarraranges.vic.gov.au/files/assets/public/webdocuments/corporate-services/governance/policies-strategies-governance/hwb_health_profile_2012-13.pdf