Australian Government

National Mental Health Commission

National Disaster
Mental Health and
Wellbeing Framework

Priorities in Action:
Examples from Experience

Supporting Australians' mental health through disaster

Contents

Introduction

The Australian Government announced the development of a National Disaster Mental Health and Wellbeing Framework on 12 January 2020, as part of a package of mental health measures responding to the widespread and destructive 'Black Summer' bushfires. As in many parts of the world, Australia is experiencing an increased frequency, severity, and impact of climate-influenced disasters.

The Framework intends to guide how Australian governments and recovery partners can consistently support mental health and wellbeing before, during and after disasters in this changing environment.

The National Disaster Mental Health and Wellbeing Framework is supported by three documents: *Our Stories: Beyond the Disaster*, *Informing the Framework: Supporting Evidence,* and this document: *Priorities in Action: Examples from Experience*.
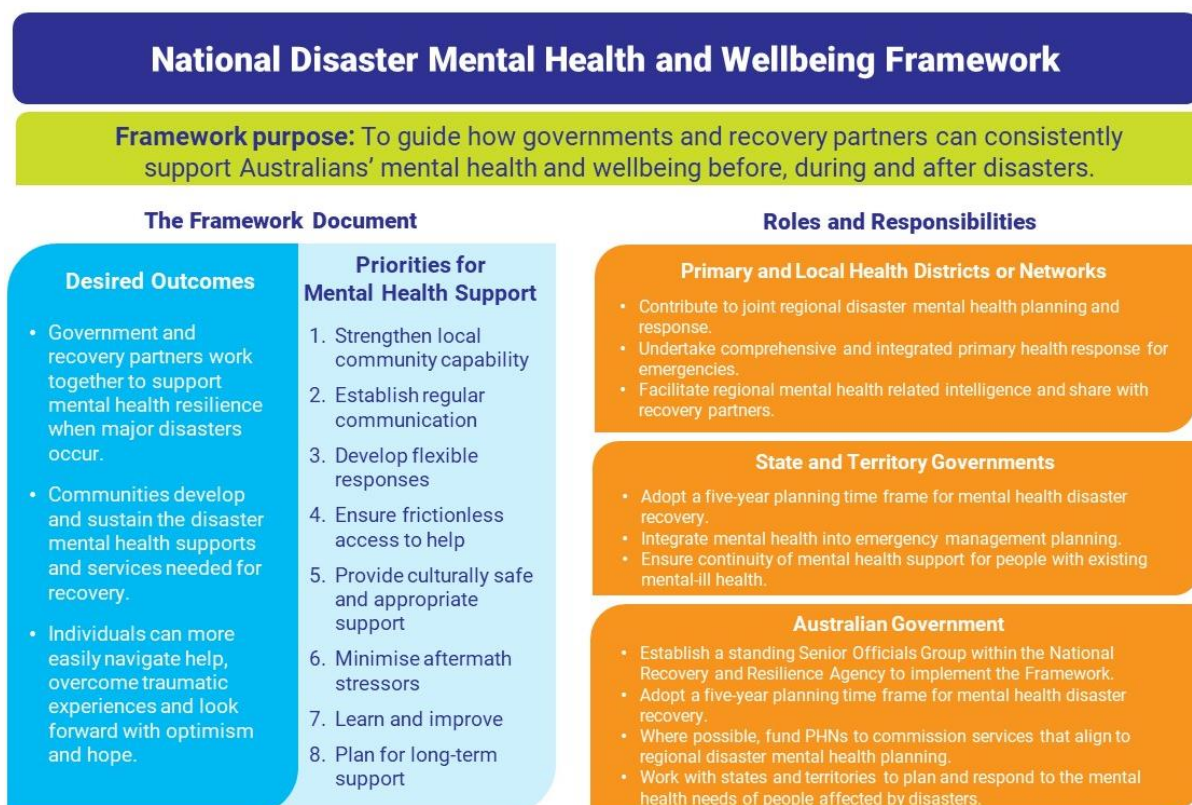

National Disaster Mental Health and Wellbeing Framework

Framework purpose: To guide how governments and recovery partners can consistently support Australians' mental health and wellbeing before, during and after disasters.

The Framework Document

Desired Outcomes

- Government and recovery partners work together to support mental health resilience when major disasters occur.
- Communities develop and sustain the disaster mental health supports and services needed for recovery.
- Individuals can more easily navigate help, overcome traumatic experiences and look forward with optimism and hope.

Priorities for Mental Health Support

1. Strengthen local community capability
2. Establish regular communication
3. Develop flexible responses
4. Ensure frictionless access to help
5. Provide culturally safe and appropriate support
6. Minimise aftermath stressors
7. Learn and improve
8. Plan for long-term support

Roles and Responsibilities

Primary and Local Health Districts or Networks
- Contribute to joint regional disaster mental health planning and response.
- Undertake comprehensive and integrated primary health response for emergencies.
- Facilitate regional mental health related intelligence and share with recovery partners.

State and Territory Governments
- Adopt a five-year planning time frame for mental health disaster recovery.
- Integrate mental health into emergency management planning.
- Ensure continuity of mental health support for people with existing mental-ill health.

Australian Government
- Establish a standing Senior Officials Group within the National Recovery and Resilience Agency to implement the Framework.
- Adopt a five-year planning time frame for mental health disaster recovery.
- Where possible, fund PHNs to commission services that align to regional disaster mental health planning.
- Work with states and territories to plan and respond to the mental health needs of people affected by disasters.

Figure 1 The Framework Summary Overview

As well as the 2021 National Disaster Mental Health and Wellbeing Framework, all states and territories have either stand-alone disaster mental health plans or refer to mental health in broader disaster plans and frameworks. These important examples of contemporary practice across Australia are detailed in *Appendix A*.

This report

Examples from Experience shares examples of innovative initiatives from across Australia that reflect the Framework's Key Priorities, which are shown below. Their selection was guided by the Commission's consultations with stakeholders and advisers including health services, disaster response and recovery agencies, governments, charities, experts and academics, along with people with lived experience and people from disaster affected communities. Other innovative, effective and instructive initiatives can be found at the following sites:

- Australian Institute of Disaster Resilience www.knowledge.aidr.org.au
- Creative Recovery Network www.creativerecovery.net.au/resources

Alignment to National Principles for Disaster Recovery	National Mental Health and Wellbeing Framework Key Priorities
Acknowledge and build capacity	1. **Strengthen local community capability:** Develop and strengthen local community capability for mental health and wellbeing preparedness, response and recovery. Workers and community leaders with local knowledge and strong inter-personal relationships are vital to this.
Communicate effectively	2. **Establish regular communication:** Regular communication (via multiple means) from a trusted source of information is essential to reduce confusion. Information and resources that can be adapted locally should be provided in a coordinated way for tailoring by each community. Both physical and mental health needs should be considered to ensure an integrated approach. Exaggerated and emotive imagery should be avoided in public communication.
Use community-led approaches	3. **Develop flexible mental health and wellbeing responses:** Mental health and wellbeing responses must be adapted to local and emerging conditions and be able to integrate flexibly with the wide range of businesses and services people use.
Coordinate all activities	4. **Ensure frictionless access to help:** Services should be welcoming and easy to access, particularly for those unsure of where to go. Eligibility should be clear and simple, and cross-service collaboration adopted widely to minimise the need for repeat story-telling and to ensure people can seamlessly access the most appropriate service for them.
Understand the context	5. **Provide culturally safe and appropriate support:** Recognise the cultural diversity within communities and prepare responses that are understandable, relatable and culturally respectful. Recognise the cumulative trauma and cultural impact of disaster on Aboriginal and Torres Strait Islander peoples, and ensure culturally safe and appropriate support is available.
Recognise complexity	6. **Minimise the impact of aftermath stressors:** Reducing the impact of aftermath stressors on people's mental health and wellbeing helps to improve recovery outcomes and reduce a person's risk of experiencing long-term mental ill-health. Coordination functions are essential to mitigate stress, duplication and practical difficulties in service delivery.
Acknowledge and build capacity	7. **Learn and improve:** What has been learned from previous disasters should guide community preparedness ahead of, during and after disasters. Ways to record lessons and share experiences with broad community involvement need to be agreed and publicised.
Recognise complexity	8. **Plan long-term following the disaster:** Planning and funding for the preparation, response and recovery from disasters needs a long-term horizon, that is, over five to ten years. Health and service agency budgets should address this.

We have included a handful of examples that align with, and helped inform, one or more of the key priorities. Some initiatives have ended or changed but remain good examples to learn from. All were effective at building community resilience and improving mental health and they offer effective ways to engage a range of people including people who typically experience barriers to help-seeking because of service scarcity in regional or rural areas, stigma or the absence of services that meet specific needs and preferences. The examples highlighted aim to:

- build whole of community wellbeing
- build local response capacity

- improve disaster resilience, connection and individual and community strengths.

Some examples focus on support for Aboriginal and Torres Strait Islander people, young people and children, families and people from culturally and linguistically diverse communities.

Key Priority 1: Strengthen Local Community Capability

Develop and strengthen local community capability for mental health and wellbeing preparedness, response and recovery. Workers and community leaders with local knowledge and strong inter-personal relationships are vital to this.

Developing and strengthening community capabilities builds local capacity to respond to disasters, improves local workforce skills and enhances the ability for local support services to meet the needs of the community. Building local capacity enables communities to be better prepared for future disasters and increases local confidence by enabling a more effective locally led disaster response.

Example 1.1: Bushfire Mental Health Project, Wellbeing SA

Recognising the need for community co-design and stakeholder partnerships to assist recovery, Wellbeing SA's Bushfire Mental Health Project is providing targeted community supports over four years to communities on Kangaroo Island, in the Adelaide Hills and in Yorketown and surrounding areas.

The project commenced with a community conversation phase, working in close partnership with bushfire affected communities to identify local mental health and wellbeing needs, challenges and solutions that suit each community.

Through a grants program funding locally based organisations, the project is supporting innovative, community-led solutions that build social connectedness, resilience and improve mental health and wellbeing. The grants are being offered over three years and, in the first rounds of grants awarded in 2020, 10 community organisations were funded to run community-based wellbeing programs in Kangaroo Island and Adelaide Hills.

Funded projects included support for people who cared for animals impacted by the fires, first aid sessions for children inclusive of tailored mental health content and art therapy workshops for men.

To assist community groups to apply, the grant guideline suggested organisations that could be approached to assist with grant writing and encouraged non incorporated organisations to consider auspicing through incorporated non-government organisations, schools or councils.

In addition to the local grant program, Wellbeing SA is working in partnership with other organisations to deliver partnership co-investment supports. This involves unique solutions where multiple agencies contribute funding and/or in-kind support to respond to community identified mental health and wellbeing needs.

One of the first partnership activities to be funded in the Bushfire Mental Health Project supports young people to co-design a series of social connection and wellbeing activities with a funded non-government organisation, to reduce social isolation, build connections with other young people recovering from bushfires and improve mental health and wellbeing. The partnership co-investment approach will continue over four years to respond to community identified recovery needs.

To find out more about the Strengthening Community Wellbeing after bushfires grants visit: www.openyourworld.sa.gov.au/bushfiregrants

Example 1.2: Tackling Regional Adversity through Integrated Care program—Queensland Health

The Queensland Government's Tackling Regional Adversity through Integrated Care (TRAIC) program started in 2015. TRAIC was set up to better integrate mental health community support and clinical care across rural and regional areas of Queensland which had been affected by drought, disasters and community crisis.

It has:

- a service arm which funds senior clinicians in nine Hospital and Health Service regions
- annual grants for mental health and wellbeing programs that support community resilience.

The TRAIC program focuses on building local capacity and resilience through investing in local services and better connecting people to the most appropriate care. Through increasing mental health awareness and building community resilience, TRAIC equips local communities with the skills and services to better cope with the impact of drought and disasters.[1]

The TRAIC program priorities are to:

- Connect people to the right care at the right time and place to ensure that people who have been impacted by drought, natural disasters and other crisis receive the most appropriate care to support a full recovery.
- Connect people to information and programs to increase mental health awareness, overcome stigma and encourage help-seeking behaviour.
- Ensure frontline workers are trained to recognise the early signs of distress and refer clients to the care that they need. Mental health clinicians work with frontline workers in the agricultural and community sector, as well as first responders and emergency services workers, to coordinate referrals following an adverse event.
- Prepare communities to deal with drought, natural disasters, and community crisis. Mental health clinicians inform and train communities to mitigate the impact of disasters on vulnerable populations, and respond to and effectively cope with their consequences.

The TRAIC grants program provides approximately $600,000 to community organisations to support local ideas that boost mental health and improve community wellbeing in areas affected by drought and other disasters. The program utilises a co-design procurement approach to encourage rural and regional communities' involvement in developing ideas. Local councils, non-government organisations, people with a lived experience of mental-ill health, and community members work together on the development of the projects to boost the mental health and wellbeing of their community.

In 2019-20, the TRAIC funded 16 organisations across Queensland with $1 million in funding provided to community organisations. The 2019-20 programs provided a range of community mental health programs to disaster affected regions, such as those that build resilience, raise awareness of mental health issues, bring people together, break down stigma, and encourage people to seek help if needed.

Find out more

To find out more about Tackling Regional Adversity through Integrated Care visit: www.clinicalexcellence.qld.gov.au/priority-areas/service-improvement/tackling-regional-adversity-through-integrated-care-traic

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[1] The Queensland Government Tackling Regional Adversity through Integrated Care (TRAIC) Program. Accessed 12 April 2021. https://clinicalexcellence.qld.gov.au/priority-areas/service-improvement/tackling-regional-adversity-through-integrated-care-traic

Example 1.3: Regional Outreach Events—National Recovery and Resilience Agency

Engaging the community before, during and after disaster can assist with building community knowledge, prepare communities for disaster and provide an opportunity for knowledge sharing. Engagement events help drive service development, and are a valuable tool in educating the community about how and where to find help following a disaster.

To assist communities affected by disasters, the National Recovery and Resilience Agency (NRRA)[2] conducts regular regional community outreach events across Australia. The events are an approach to support communities formerly affected by drought, bushfires and other disasters by improving regular communications, and provide an opportunity for services to get together, share knowledge and offer support. The NRRA partners with local services to ensure they are engaged and each region's needs are met. Rotary Australia is a key partner for the regional drought outreach events, and the agency works closely with local communities, and state and local governments, to ensure that all events are promoted and meet the needs of the local community. The events are an opportunity for the NRRA and partners to meet, listen and help address the local capability development needs of communities affected by drought, bushfire and other disasters.

Events are usually held in town halls or similar style venues and are organised by the NRRA working closely with local community services, charities and local government.

Find out more

To find out more about the support offered and learn when events are scheduled in each region, visit: www.recovery.gov.au/events

Example 1.4: Resilient Communities—North Coast NSW

Over the last two years, the North Coast of NSW has experienced severe bushfires and floods and, like the rest of Australia, the COVID-19 pandemic. As a result, the cumulative impact of disaster has been felt in this area and has highlighted the need for a collective approach to better support community mental health and wellbeing.

Working across the preparedness, response and recovery space in new and innovative ways, *Resilient North Coast* is a hub established by the Healthy North Coast PHN. The hub works to drive collaboration across the community service, health and emergency management sectors, and paves the way for communities to identify and address their needs. With the goal of enhancing self-reliance and resilience, Resilient North Coast uses a collective impact framework that puts national and international evidence into practice by walking alongside communities and supporting them to build their connections and capacity. Investing in communities over a 3 to 5 year period, the initiative combines locally-led social change with government and NGO-led investment and supports, and aims to move beyond short-term recovery to achieve the shared goal of resilient, connected communities who are able to effectively respond and adapt to adverse events. It takes a collaborative approach to commissioning projects that support the mental health and wellbeing of disaster affected communities. Resilient North Coast works directly with local councils to identify key community issues, co-designs place-based initiatives with trusted local organisations, and has a measurement and evaluation framework to help deeply understand initiative success factors.

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[2] Prior to July 2021, these events were led by the predecessor agencies to the NRRA; namely the National Drought and North Queensland Flood Response and Recovery Agency and the National Bushfire Recovery Agency.

Through collaboration, local coordination and resource sharing, Resilient North Coast's collective approach enables an improved joint response to disasters in the local region, while improving cross agency collaboration.

Find out more

The website for Resilient North Coast is currently in development and will be available soon.

Key Priority 2: Establish regular communication

Regular communication (via multiple means) from a trusted source of information is essential to reduce confusion. Information and resources that can be adapted locally should be provided in a coordinated way for tailoring by each community. Both physical and mental health needs should be considered to ensure an integrated approach. Exaggerated and emotive imagery should be avoided in public communication.

Finding help during and following a disaster can at times be challenging. For some, seeking disaster support and mental health support may be something they have never needed to do before. The traumatic experience of the event can sometimes affect decision-making while for many, looking after their own wellbeing can be something that falls to the bottom of their priority list given the number of issues they need to deal with.

People will often look for a trusted source to gain information on where to get help, and are more likely to access support if it's easy to find, navigate, consistent and up-to-date.

Example 2.1: Local contact information—National Recovery and Resilience Agency

For an individual wanting mental health support after a disaster, it can be hard to know where to start—particularly if you've never needed to access those services before. A range of services exist or arrive in communities following disasters, from many government and non-government sources. Although the landscape is rich with information, there are many contrasting sources that can add to people's confusion, with different organisations promoting different service pathways. While people will access information in different ways, the information they access should be the same.

To make it easier for people to find mental health support in their local area, the National Recovery and Resilience Agency (a National Bushfire Recovery Agency led project developed prior to move to new agency) trialed locally specific resources to show the services available in areas badly affected by the Black Summer bushfires. The resources included a factsheet, a discrete wallet card and a fridge magnet, which all helped people to recognise common responses to trauma, steps they can take to feel better and the local services that can assist them. In each location, the NBRA worked closely with councils, state governments (particularly Resilience NSW as a key partner) and local services to list simple and locally relevant information in one resource.

These products are a key example of collaboration across different levels of government, showing the benefits that can flow from national leadership and strategic coordination. This approach to co-designing information with local partners ensured information was accurate, trusted and targeted in the right way to meet community needs, and was a key driver in the effectiveness of the products.

 Find out more

To find out more about NRRA mental health support programs visit: www.recovery.gov.au/recovery-support/mental-health-and-wellbeing

Example 2.2: Recovery Connect

Following the Black Summer bushfires, Recovery Connect was developed as a solution to assist help seeking. Recovery Connect provides an easy-to-use location based directory where people can find a full range of disaster support, and aims to assist people affected by disaster across Australia access help and find assistance in their local area. Recovery Connect has recently been expanded to include support for people impacted by other disasters including drought, floods, cyclones and the COVID-19 pandemic. Recovery Connect uses a location-based search function to find local support in the persons region based on suburb or post code. The search function allows the user to search by type of disaster, service type and address, and provides a list of available supports to meet the person's individual needs.

Recovery Connect also provides a range of factsheets and general information on disasters including bushfires, floods and cyclones, and has recently added COVID-19 information. These resources can also help people increase their understanding, and better prepare for and respond to disasters.

A snapshot of use of recovery connect demonstrates that the website is widely used and is proving valuable for people wanting to find help in their local region. An average of 1000 to 2000 people visited the Recovery Connect website per week during this time 2021.

Find out more

To find out more about Recovery Connect and try the location based service visit:
www.recovery.serviceconnect.gov.au/

Example 2.3: a trauma-informed guide to bushfire related mental health events— University of South Australia

Community events can be a valuable communication strategy to inform, educate and support people affected by disasters. Regular events like the outreach events run by NRRA, and other local community groups, provide an opportunity for information sharing with the community. Such events highlight available support in the local region with information on how to access, as well as providing an opportunity to share experiences in an informal environment. However, discussing disasters, their impact and sharing personal experiences has the potential to trigger a trauma experience which can impact on individual mental health and wellbeing if not managed well.

The University of South Australia (UniSA) Mental Health and Suicide Prevention Research and Education (MHSpre) group encourages community events as a valuable tool to maintain regular communication and support people affected by disaster. However, it is important to recognise the potential for events to adversely affect people who have experienced recent trauma such as living through a disaster. UniSA developed a guide to trauma informed bushfire talks to assist organisations and individuals hosting community events. The guide provides guidance for running community events in a trauma informed way, practical tips to assist people with talking about their experience and the experience of disaster, and guidance on conducting supportive trauma informed community events. The tip sheet provides simple do's and don'ts, helps people recognise the signs of trauma, and provides advice to assist hosts with talking about mental health and wellbeing in a safe and empowering way.

Find out more

To find out more about trauma informed events and download a copy of the fact sheet and visit: www.unisa.edu.au/contentassets/b22e10ffbe314f1f8637577ec0483632/trauma-informed-bushfire-talks-guide.pdf

Example 2.4: the Mateship Manual—RUOK

Disasters and emergencies can disrupt lives and routines, and can impact the mental health and wellbeing of many people in the community. Regular communication with friends and family offering emotional support and discussing shared experiences can be helpful as an informal support. However, some people may be unsure of what to ask or how they can best support their friends and family.

To help people support their friends and family, RUOK has collaborated with the University of South Australia's Mental Health and Suicide Prevention Research and Education (MHSpre) group to develop *The Mateship Manual*. The manual provides simple and practical advice on how to keep up regular communication and support friends and family through disasters or emergencies.

RUOK describes The Mateship Manual as 'practical advice on how you can help someone who's doing it tough because of natural disaster or emergency'. It combines lived experience lessons with research and clinical expertise to provide guidance on how to have these tough yet compassionate conversations if someone we know is struggling.

The guide includes a ranges of tips and conversation starters, educates people to assist in the recognition of signs of distress or mental ill-health, and provides simple strategies to help people support their mates. Guides like The Mateship Manual provide valuable advice to people providing informal support to friends and family, and such support can be a helpful first step in supporting mental health and encouraging help-seeking.

Find out more

To find out more about the RUOK Mateship Manual and download the manual visit: https://irp-cdn.multiscreensite.com/22b3e3c9/files/uploaded/RUOK_DisasterEmergency_MateshipManual_WebVersion.pdf

Example 2.5: After the Fires Guide—Government of Western Australia, Department of Fire and Emergency Services

Sometimes following bushfires and other disasters, communities can be unsure where to get help, what services are available, and what the long-term impact on their wellbeing and their families' wellbeing will be. Regular communication and guides that assist people with gaining perspective on their experience can help people recover.

Western Australia, like many areas of Australia, experiences regular bushfires. The WA Department of Fire and Emergency Services has developed a practical guide called *After the Fires*. After the Fires provides practical advice to individuals and communities highlighting what to do in emergency, the stages of recovery, how to assess the damage to properties, where to find help and the potential impact on a person's wellbeing. After the Fires aims to provide an integrated communication tool to guide recovery highlighting the experience of disaster, important support services and practical advice to assist people with understanding their experience The guide is valuable tool for communicating practical advice to the community and can help people to understand the steps to beginning their disaster recovery.

Find out more

To find out more about disaster support in WA and download the guide visit:
https://www.dfes.wa.gov.au/safetyinformation/fire/bushfire/BushfireManualsandGuides/DFES-Bushfire-After-the-fire-bushfire.pdf

Key Priority 3: Develop flexible mental health and wellbeing responses

Mental health and wellbeing responses must be adapted to local and emerging conditions and be able to integrate flexibly with the wide range of businesses and services people use.

Mental health and wellbeing support for disaster affected communities should be tailored to the needs of a community's local population and different groups to be effective. For example, children affected by disaster have different requirements than adults, and people who haven't accessed support before may need a different approach compared to people who are already linked to services. By providing flexible mental health and wellbeing responses, programs are able to provide broader support across the community.

Example 3.1: Rural Adversity Mental Health Program (RAMHP)

Rural areas of Australia are more frequently impacted by disasters and often have less access to health services. These rural areas continue to be affected by drought, with many areas also experiencing recent bushfires and floods. The ongoing impact of drought and other natural disasters can lead to mental ill-health; building on the capacity of rural areas and providing support that addresses the needs of the local community can assist with help-seeking and link people into mental health support when needed.

To better support rural communities in NSW, the Centre for Rural and Remote Mental Health with the support of NSW Government developed *The Rural Adversity Mental Health Program (RAMHP)*. RAMHP has funded 20 coordinators based across regional, rural and remote NSW. The coordinators provide additional mental health support to local regions and inform, educate and connect individuals, communities and workplaces with appropriate services. The RAMHP program links people to local mental health services and resources, educates workplaces and communities about mental health and wellbeing and responds to rural community needs in times of natural disasters and severe adversity.[3]

RAMHP coordinators help identify communities and individuals who are at risk of – or who are experiencing – mental health issues. Through community engagement, education and support, RAMHP coordinators use a flexible approach to help people in rural areas access assistance in their community. The RAMHP program also helps to raise awareness of mental health and wellbeing, and aims to better address the short and long term mental health needs of people living in rural areas.

Find out more

To find out more about the Rural Adversity Mental Health Program visit: www.ramhp.com.au/

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[3] Rural Adversity Mental Health Program (RAMHP). Accessed 9 April 2021. https://www.ramhp.com.au/

Example 3.2: NSW Drought Support Workers

To support NSW rural drought affected communities, the NSW Government introduced Drought Support Workers—often known as Farm Gate Counsellors. The Drought Support Workers come from a variety of professional health backgrounds including nursing, allied health and peer workers who have a lived experience of mental health. The Drought Support Workers have firsthand experience of the challenges that can come with living on the land in rural areas of Australia, and are employed in the local regions.

The NSW Government funds 27 Drought Support Workers in NSW, located across eight Local Health Districts. The Drought Support Workers work directly with farmers, meeting them at their properties or farm gates to provide mental health support to people in their own homes, and promote mental health and wellbeing through improving health literacy and encouraging help seeking. Drought Support Workers focus on building connection and relationships with farmers and people affected by drought, providing a consistent form of support that is easily accessible for people living in drought affected rural communities.

"By having authentic conversations wherever it works for the person can improve mental health and wellbeing linking people into the right help at the right time, right place".[4]

Find out more

To find out more about the about the NSW Health Drought Support Program visit:
www.droughthub.nsw.gov.au/wellbeing/drought-support-program

Example 3.3: Beyond Blue Coronavirus Mental Wellbeing Support Service

The current COVID-19 coronavirus pandemic has challenged every Australian, and has led to significant changes and at times restrictions to daily living. The pandemic's impact has changed the way many people live over the last 12 months. For some, this has meant increased isolation and changes to their working life, and for others it has affected pre-existing health issues and meant disconnection from family and loved ones. To support Australians during the pandemic, Beyond Blue has been funded to provide the Coronavirus Mental Wellbeing Support Service.

Beyond Blue introduced a variety of supports across a range of delivery mediums to engage a broad section of the community and offer support that meets a variety of needs. These include a web chat support provided by mental health workers at Beyond Blue, as well as an online community forum (moderated by Beyond Blue staff), which provides a safe environment to seek mental health advice and discuss the mental health impact of the pandemic. Beyond Blue also offers a dedicated phone support line (1800 512 348) as well as online resources for people who may not feel ready to reach out, but would like to know more about their experience and how to access help.

Supported by both desktop and mobile devices, people can access the support service from within their own homes or away, at a time and in a way that feels most comfortable for them. The Beyond Blue Coronavirus Mental Wellbeing Support Service also provides much of its content in multiple languages, and has links to access interpreter services for people from culturally and linguistically diverse backgrounds. Providing a flexible variety of support to meet the needs of the community can increase the likelihood of people seeking help to improve their mental health and wellbeing.

Find out more

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[4] Bronnie Taylor MP Minister for Mental Health, Regional Youth and Women. Support workers reach out over the farm gate in Hunter New England [Media Release] 23 June 2020 Available from: https://www.health.nsw.gov.au/news/Pages/20200623_01.aspx

To find out more about Beyond Blue's Coronavirus Mental Wellbeing Support Service call 1800 512 348 or visit: www.coronavirus.beyondblue.org.au/

Example 3.4: ACT Health Wellbeing Officers

During and following disaster many people across the community feel the impact disasters have on their mental health and wellbeing. During this time, basic emotional support and psychological first aid can make a big difference in helping people understand their experience, and when needed link them into additional mental health support.

To assist people with accessing immediate wellbeing support and identify people who may need additional support, ACT Health deployed trained allied health staff as Wellbeing Officers during the Black Summer bushfires. Wellbeing Officers worked in the disaster evacuation centres, and continued on following the disaster to assist people's initial recovery. The Wellbeing Officers provided psychological first aid to people in need and linked people into mental health services as required, and were available in the local community during and following the disaster to provide additional support for people who needed it. ACT Health has also sent Wellbeing Officers to Queensland to assist with recent disaster.

Find out more

To find out more about the ACT Health's Wellbeing Officers, contact the Office of the Director of Allied Health, Mental Health, Justice Health, Alcohol and Drug Services, Canberra Health Services, ACT Health at DAH.MHJHADS@act.gov.au

Example 3.5: Australian Government, Counselling and psychological support services

Providing flexible mental health support following disasters includes consideration of delivery mediums to identify how people can best access support in their region. Providing psychological support through private mental health professionals that is subsidised and available in the local area via a variety of mediums including face to face, telehealth, and online can help people experiencing distress, poor wellbeing and mental ill-health get support from a professional.

Bushfire Counselling and Psychological Support

Following the Black Summer bushfires in 2019-20, the Australian Government made it easier for individuals, families and emergency services workers to access counselling and psychological support therapy sessions.

The Australian Government funded Primary Health Networks (PHNs) to commission services to provide distress and trauma counselling support. Individuals impacted by the 2019-20 bushfires can access up to 10 free immediate counselling sessions through their local PHN.

In addition, the introduction of new MBS items enabled people affected by bushfires access to Medicare rebates for up to 10 face-to-face or telehealth psychological support sessions without the need of a referral, GP mental health plan or diagnosed mental health condition. This change allowed people to self-refer and access support directly from local eligible mental health professionals.

COVID-19 Psychological Support

Acknowledging the impact of COVID-19 on the mental health and wellbeing of Australians, the Australian Government has expanded the mental health supports available under the Better Access initiative by:

- ensuring Better Access services can be delivered by phone or telehealth (where safe and clinically appropriate), in line with the whole population telehealth model of care, until 31 December 2021;
- increasing the number of individual Medicare-subsidised sessions available each year from 10 to 20 until 30 June 2022; and
- expanding access to individual sessions to aged care residents until 30 June 2022 in response to a recommendation from the Royal Commission into Aged Care Quality and Safety's *Aged Care and COVID-19: A Special Report*.

This means all Australians experiencing psychological impacts as a result of the COVID-19 pandemic have access to extra mental health support through Medicare.

Find out more

To find out more about the about the Australian Government's psychological support for people affected by bushfires visit: https://www.servicesaustralia.gov.au/individuals/subjects/how-get-mental-health-support

To find out more about the additional psychological support offered for the COVID-19 pandemic visit: https://www.health.gov.au/initiatives-and-programs/better-access-initiative

Key Priority 4: Ensure frictionless access to help

Services should be welcoming and easy to access, particularly for those unsure of where to go. Eligibility should be clear and simple, and cross-service collaboration adopted widely to minimise the need for repeat story-telling and to ensure people can seamlessly access the most appropriate service for them.

Following disaster, there are a range of services available to support people's mental health and wellbeing. Being able to access support that is clear, simple and easy to navigate is as important as the type of support provided. Research has shown that when people are looking for help, their experience of accessing support makes a big difference.[5] Services that are welcoming, offer clear referral pathways and eligibility requirements, and provide a collaborative approach to working with other services are seen as the most beneficial. Collaboration across services, and services that are able to offer multiple support functions, can also reduce the need for people to retell their story.

Example 4.1: Lifeline bushfire recovery support line—13HELP

Telephone and online support that is accessible when the person needs it, and from a trusted source, can help to enable frictionless access to help.

Lifeline is a trusted name in crisis support within the Australia community. Following the 2019-20 Black Summer bushfires, Lifeline provided a new dedicated phone support service for people affected by the fires — 13HELP (13 43 57) – which provided additional mental health support. 13HELP was professionally staffed 24 hours a day, seven days a week, and has been continued beyond the bushfire season to provide ongoing support for people affected by bushfire.

Lifeline's bushfire support page also provides additional information, highlighting some of the common impacts disasters can have to mental health and wellbeing, practical ways to cope, and specific information on how to help children better cope and understand their experience of disaster.

Find out more

For immediate crisis support for people affected by bushfires call13HELP (13 43 57). To find out more about Lifeline's bushfire recovery support visit: www.lifeline.org.au/get-help/information-and-support/bushfire/

Example 4.2: MindSpot

Existing nationally funded mental health programs are also beneficial for people who have been affected by disasters. Programs that offer a range of mental health support and are accessible digitally can provide access to a broad range of people from the comfort of their own homes. Programs that are subsidised or available free of charge are more accessible across the community and reduce the financial impact on the person seeking support.

MindSpot offers easy to access, free, comprehensive psychological support online and over the phone for people experiencing anxiety and depression. The MindSpot program involves purpose designed treatment courses that utilise Cognitive Behavioural Therapy. The courses focus on skills development to support positive coping mechanisms, and are run by accredited psychologists and psychiatrists who are available to provide regular follow up sessions as needed. MindSpot is accessed online by completing a screening assessment, which then links people to the most appropriate support

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[5] National Mental Health Commission. 2021. Our Stories—beyond the disaster.

that best meets their needs. People can self-refer to the MindSpot program, or be referred by a health professional.

An important advantage of the MindSpot program is that GPs can monitor their patient's experience through shared client records, enabled with the patient's consent. This allows a treatment team approach and improves hand-over between health professionals.

MindSpot is based at Macquarie University, Sydney and is funded by the Australian Government as a regulated clinical service. Since its launch in 2012, MindSpot has helped more than 20,000 Australian each year.

Find out more

To find out more about the services offered by MindSpot visit: www.mindspot.org.au/

Key Priority 5: Provide culturally safe and appropriate support

Recognise the cultural diversity within communities and prepare responses that are understandable, relatable and culturally respectful. Recognise the cumulative trauma and cultural impact of disaster on Aboriginal and Torres Strait Islander peoples, and ensure culturally safe and appropriate support is available.

Providing culturally appropriate and safe services should be a priority for disaster support. Specific groups requiring such services include Aboriginal people; people from culturally and linguistically diverse communities; children and young people; and other population groups whose needs require special consideration in a disaster.

Example 5.1: Bushfire Recovery Program—Gippsland and East Gippsland Aboriginal Co-Operative Ltd (GEGAC)

Aboriginal and Torres Strait Islander peoples tend to have a greater exposure to natural disasters in Australia, as they are more likely to live in rural and remote locations. Aboriginal populations are also younger, therefore raising considerations about the specific supports needed by children and young people. For people in remote areas, scaling up existing supports and services will be a challenge, especially where this means finding staff with specialist knowledge and skills.

Aboriginal people's unique connection to country and the possible impacts of successive – and inter-generational – traumas also needs recognition. Support for Aboriginal communities affected by disasters is therefore best led by trusted Aboriginal organisations and workers who can work with community members to ensure their needs are sensitively met.

Gippsland and its surrounding areas in Victoria were badly affected during the Black Summer bushfires. During this time, GEGAC and other local Aboriginal health services and land councils worked collaboratively to provide culturally appropriate support to the local communities. The GEGAC Bushfire Recovery Program was established to provide case management support to Aboriginal people living in Gippsland and East Gippsland. The service helps to improve access to other services; links people back to support who may have stopped receiving support; helps identify existing issues that may have worsened during the disaster, such as family violence and drug and alcohol use; and helps people access financial support and grants. The service also assists Aboriginal people with grant applications and other paperwork, as well as provides informal advice to ensure the mental health and disaster support meets the social and emotional wellbeing needs of the local Aboriginal communities.

Find out more

To find out more about the GEGAC bushfire recovery website visit the:
https://www.gegac.org.au/home/gegac-bushfire-recovery-program/

Example 5.2: Children's therapeutic play kits—ACT Health

Exposure to potentially traumatic events are confronting for everyone, however, for young children they can have long-lasting impact on their development. Depending on age, children may not fully understand the disaster experience. Providing age-appropriate, targeted support that is available across

a variety of settings can assist children with understanding their personal experiences and support a positive recovery journey. Age-appropriate education, activities and play therapy are being used in some areas of Australia following disaster to help educate children and support their mental health and wellbeing.[6]

The ACT Disaster Relief Centres used therapeutic play kits during the Black Summer bushfires to settle children and help parents re-engage with their children through play. The play kits, which were developed based on expert advice, were provided to each child. They were encouraged to write their names on them and take them to their next accommodation (which in most cases was a hotel room). This meant they had a new possession of their own at a time when many had lost their keepsakes in the fires, as well as some activities to do while their parents were evaluating their losses and planning their next steps.

The play kits provide a range of sensory activities to support children's wellbeing; for example, tactile feeling with clay to make things, and drawing and writing. Children can do the play activities by themselves, or with their siblings and parents. The play kits also include an educational book that helps to educate children about disasters and their emotional response. ACT Health received very positive feedback from a number of families, and witnessed productive and settling playtime occur within the bushfire relief centres.

Find out more

To find out more about the ACT Disaster Recovery Counselling Committee Children's Therapeutic Play Kits contact the Office of the Director of Allied Health, Mental Health, Justice Health, Alcohol and Drug Services, Canberra Health Services, ACT Health at DAH.MHJHADS@act.gov.au

Example 5.3: Natural Disaster Resilience Strategy support programs—Northern Settlement Service

Disasters can affect every member of the community, and for people from culturally and linguistic diverse backgrounds (CALD), navigating support can come with additional language and cultural barriers. Providing culturally safe and appropriate services to ensure people from CALD communities have access to appropriate disaster support, mental health support and information to assist their recovery, should be made available in their language and designed to meet their individual cultural needs.

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[6] ACT Health feedback on the National Disaster Mental Health and Wellbeing Framework, from the Framework's expert advisory group.

The Northern Settlement Service in the Hunter and Central Coast regions of NSW recognised this need. To support the CALD communities in the region, the Northern Settlement Services developed a dedicated natural disaster resilience strategy and resources working with CALD communities. The strategy and resources were developed in partnership with NSW State Emergency Service and NSW Fire and Rescue. Forums were also held to inform the development of the strategy and resources. Over one hundred managers and CEOs from non-government agencies attended the two day forums, which were held in partnership with Northern Settlement Service Ltd., NSW Rural Fire Service and NSW State Emergency Service, and were supported by Family & Community Services and The Salvation Army. The strategy aimed to improve disaster resilience by educating, informing and assisting CALD communities to better understand what to do in times of disaster and how to access support.

The education and training resources included:

- DVDs available in six community languages
- workshops, which were delivered across the Hunter and Central Coast regions
- multilingual fact sheets and guides
- a Business Continuity Plan template for community based organisations
- resources for workers who are supporting families and who have experienced the sudden death of a loved one in disaster

Find out more

To find out more about the Northern Settlement Service and the support available for local CALD communities in the Hunter and Central Coast region visit: nsservices.com.au/

Example 5.4: Birdie's Tree—Growing together through natural disasters

Queensland regularly experiences floods, cyclones and bushfires, and the state has long felt the impacts of drought. Such events can affect the mental health and social emotional wellbeing of babies, young children and their families, immediately and in the long term.

The Queensland Centre for Perinatal and Infant Mental Health, in Children's Health Queensland Hospital and Health Service, has developed Birdie's Tree: a one-stop website to support families affected by natural disasters and disruptive events.

Birdie and her friend Mr Frog feature in 11 storybooks that teach young children about natural disasters and help them process the 'big feelings' – like sadness, anger and worry – that disruptive events can cause. The stories are supported by a suite of online games for children, information for parents, resources for teachers and educators, and links for health professionals. The resources can be adapted for a range of purposes, including the Birdie's Tree Early Learning Program for early childhood education and care settings.

Some Birdie's Tree resources have been specifically co-designed to support Aboriginal and Torres Strait Islander families. The storybooks are gradually being translated into multiple languages to assist families around the world. 'Birdie and the Virus' is available as an animation, including a hand-washing song. 'Relaxing with Birdie' is a mindfulness and movement routine to help children calm down, relax, rest and sleep in stressful times; while 'Fun with Birdie' is an activity book designed to counteract some of the disruptive effects of natural disasters in young children's lives.

The effectiveness of the Birdie's Tree resources has been recognised through a Resilient Australia Award from the Australian Institute of Disaster Resilience (AIDR), and a Queensland Premier's Award for Excellence in the category 'Give all our children a great start'.

Find out more

To find out more and access the Birdie's Tree resources, search 'Birdie's Tree':
www.childrens.health.qld.gov.au/natural-disaster-recovery/

Key Priority 6: Minimise the impact of aftermath stressors

Reducing the impact of aftermath stressors on people's mental health and wellbeing helps to improve recovery outcomes and reduce a person's risk of experiencing long-term mental ill-health. Coordination functions are essential to mitigate stress, duplication and practical difficulties in service delivery.

Recognising that aftermath stressors can be a source of trauma or distress is an important consideration for services providing mental health and wellbeing support to ensure support meets the emotional practical recovery support needs. Providing multifaceted support can reduce the impact of aftermath stressors on individual, family and community mental health and wellbeing.

Example 6.1: Victorian Government's Bushfire Case Support Program

Victoria has a history of devastating bushfires. The 2009 Black Saturday bushfires severely impacted many regions in Victoria, and the recent 2019-2020 bushfires again impacted many of these areas. Disasters can affect many areas of a person's life, and often the aftermath stressors such as dealing with insurance, rebuilding, accessing financial support and other stressors affect people's mental health and wellbeing as much as – if not more than – the event itself.

During the 2009 Black Saturday bushfires the Victorian Government introduced the Bushfire Case Support Program, which continues to be an important component of Victoria's disaster response.

- On 10 February 2009, the government announced a case management service open to anyone affected by the bushfires, with promised contact within 24 hours.
- DHS, in partnership with Centrelink, set up the service within three days, including an information system, and worked with the Commonwealth and others to secure case managers.
- Overall 70 agencies were involved, with 380 case managers at peak.
- Within a month, 4,000 people registered with the case management services.
- By mid-2010, more than 5,500 people had used the service (just under 15 people per caseworker).
- Most people used the service for 12 months or less and most expressed satisfaction.

The program's Support Coordinators provide a single point of contact for those who need it, working with local residents to link them directly with vital support. The support provided includes information and advice, mental health support, and referral to other services as required.

The program also helps by providing practical support such as assistance with filling out paperwork, applying for grants, assistance with financial claims, and navigating the services available through government while also supporting mental health and wellbeing.[7]

Find out more

To find out more about the Victorian Government's Bushfire Case Support Program visit: www.vic.gov.au/your-wellbeing-bushfire-recovery

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[7] Premier of Victoria. Case support program for fire affected communities press release. 12 January 2020. Accessed 12 April 2021: https://www.premier.vic.gov.au/case-support-program-fire-affected-communities

Key Priority 7: Learn and improve

What has been learned from previous disasters should guide community preparedness ahead of, during and after disasters. Ways to record lessons and share experiences with broad community involvement need to be agreed and publicised.

Communities and services can learn important lessons from previous disasters that are highly beneficial is shaping future response. Learning from disaster and people who have had first-hand experience should guide future disaster preparedness and response.

Example 7.1: Disaster Preparedness for Older People Program—Volunteering Queensland

Older people are valued members of the community who bring knowledge, skills and experience about disaster. By sharing their previous disaster experience with other people in the community, older people can feel more positive and others can learn from their wisdom.

Volunteering Queensland has developed a specific program to support disaster preparedness for older people. They work directly with older people through forums and workshops run in partnership with local governments, emergency services and other agencies based in the local community to ensure older people:

- can access relevant disaster preparedness information
- hear from services that provide disaster support
- have opportunities to participate in disaster preparedness planning and volunteering
- participate in workshops so that agencies that support vulnerable older people in the community are aware of the needs of older people when preparing and developing evacuation and disaster preparedness plans for their clients.

Consultations with older people across the community have helped inform the development of a report examining the specific needs for older people in disaster. The report shares examples of older Australians experiencing of a range of disasters, which will help inform services and communities to better meet the needs of people affected by disaster.

Locations included: Redlands, Moreton, Logan, Livingstone, Somerset and Tablelands.

Find out more

To find out more about the Disaster Preparedness for Older People Program offered by Volunteering Queensland visit: www.volunteeringqld.org.au/services/disaster-preparedness-for-older-people

Australian and international disaster (mental) health frameworks and plans

Australian state and territory disaster mental health frameworks and plans, the Australian Government's National Disaster Arrangements, and international mental health disaster frameworks have been used to inform the development of the National Disaster Mental Health and Wellbeing Framework.

The following table outlines national, state and territory government disaster mental health plans, as well as international frameworks, used to inform the National Disaster Mental Health and Wellbeing Framework.

Framework/Plan & Managing Body	Overview
Australian States and Territories	
Australian Capital Territory ACT Emergency Service Agency ACT Emergency Plan (2014)	This plan describes the responsibilities, authorities and the mechanisms to prevent, or if they occur, manage emergencies and their consequences within the Australian Capital Territory in accordance with the requirements of the ACT Emergencies Act 2004.
New South Wales Ministry of Health Mental Health Services Supporting Plan (2012)	This plan is the NSW Health Mental Health Services Supporting Plan to the NSW Health Services Functional Area Supporting Plan (NSW HEALTHPLAN), which itself is a supporting plan of the NSW State Emergency Management Plan (EMPLAN). The Mental Health Services Supporting Plan (2012) outlines the agreed roles and functions for the mental health services component of NSW Health, incorporating an all hazards approach.
Northern Territory NT Police, Fire & Emergency Services Territory Emergency Plan (2021)	This plan describes the Northern Territory's approach to emergency and recovery operations, the governance and coordination arrangements, and roles and responsibilities of agencies. The plan is supported by regional and local emergency plans, as well as hazard specific and functional group plans. Annexure F (vi) outlines medical group roles and responsibilities, and includes mental health.
Queensland Queensland Health Mental Health Sub-plan (2018)	This plan is a functional health plan that supports the *Queensland Health Disaster and Emergency Incident Plan*. The purpose of the *Mental Health Sub-plan (2018)* is to provide direction for the mental health response to disasters and emergency incidents in Queensland.
South Australia SA Health SA Health Emergency Management Framework (2018)	The purpose of this framework is to establish a clear and consistent approach to Emergency Management for all of SA Health, recognising its duties and responsibilities as outlined in the Emergency Management 2004 and Public Health Act 2011. SA Health's role during emergencies is to provide, maintain and coordinate health services with an emphasis on early intervention and quality care.
Tasmania Department of Premier and Cabinet Tasmanian Disaster Resilience Strategy 2020-2025 (2019)	This strategy focuses on implementing the United Nation's Sendai Framework for Disaster Risk Reduction in Tasmania, and the alignment of plans and actions with such national and international Frameworks. This aims to ensure consistency with other jurisdictions and with established standards of best practice.
Victoria Department of Health and Human Services Psychosocial support: a framework for emergencies (2014)	This framework offers advice on the principles and considerations that should underpin psychosocial support to impacted individuals and communities during and following any emergency. It expands upon the *After the bushfires: Victoria's psychosocial recovery framework* so that it is relevant to any emergency, both natural and human caused.
Western Australia Department of Health	This plan outlines both the strategic intent and how the WA health system will respond to any emergency or disaster within the jurisdiction of Western Australia.

Framework/Plan & Managing Body	Overview
State Health Emergency Response Plan and Annexes (2018)	*Annex M* outlines the mental health response.
Australian Government	
Department of Health National Health Emergency Response Arrangements (2011)*(NatHealth Arrangements)*	These arrangements outline the strategic authorities, responsibilities, arrangements and the mechanisms that enable a coordinated national health sector response to emergencies of national consequence. The NatHealth Arrangements operate within the context of Australian Government National Security framework.
International	
World Health Organisation Health Emergency and Disaster Risk Management Framework (2019)	This framework aims to provide a common language and comprehensive approach that can be adapted and applied by all actors in health and other sectors who are working to reduce health risks and consequences of emergencies and disasters.
United Nations Office for Disaster Risk Reduction Sendai Framework for Disaster Risk Reduction 2015-2030 (2015)	This framework aims to prevent new and reduce existing disaster risk through the implementation of integrated and inclusive economic, structural, legal, social, health, cultural, educational, environmental, technological, political and institutional measures that reduce hazard exposure and vulnerability to disaster, increase preparedness for response and recovery, and thus strengthen resilience.
United Nations Inter-Agency Standing Committee IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings (2007)	These guidelines aim to enable humanitarian actors to plan, establish and coordinate a set of minimum multi-sectoral responses to protect and improve people's mental health and psychosocial well-being in the midst of an emergency.