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Submission to the Independent Review of Commonwealth Disaster Funding

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Submitted by: Emerging Minds, National Workforce Centre for Child Mental Health

Q1. What experience have you had with Commonwealth disaster funding support?

Emerging Minds receives funding for the National Workforce Centre for Child Mental Health (NWC), which has been established to assist professionals and organisations who work with children and/or parents/families to have the skills to identify, assess and support children at risk of mental health conditions. Funding for this program is not through disaster funding, however, an important priority of the program is to build family, workforce, organisational, and system capacity to advance the mental health of infants, children, parents, and families through preparing for, responding to, and recovering from disasters.

It is now well understood that infants and children are in fact amongst the most vulnerable populations when disaster occurs. Disaster can have significant impacts on mental health and wellbeing the short term for infants and children, and can lead to lifelong impacts on mental health, development, and functioning of the younger generation affected by disasters as they transition into adulthood. The aim of our work in relation to disasters through increasing access to support for infants and children is to promote positive mental health and build resilience, mitigate harm to children, prevent mental health issues, and reduce impact of ongoing mental health difficulties in the short and long term.

Emerging Minds has not received specific Commonwealth disaster funding support but has provided resources, training, and advice to professionals, programs, and services who are funded by Commonwealth disaster funding. For example, mental health support programs, primary health networks, locally led resilience initiatives, and capacity building resources or initiatives.

One of our most well-known resources, the Community Trauma Toolkit, is well utilised by many including those funded by Commonwealth disaster funding. This resource is designed to assist individuals and workforces involved with children, families, and communities to provide support to children to mitigate negative effects of disasters, support families who may be experiencing difficulty, and promote long-term recovery.

Emerging Minds is in the process of developing further workforce capacity building initiatives and resources which will be designed to support risk reduction, preparedness, response, recovery and resilience of infants, children, and families in the face of the extreme disaster events Australia is projected to experience over coming decades. We are also expanding on our digital health support for





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families in relation to disasters and working on a guided self-help platform. These initiatives will support families, communities, professionals, services and programs funded by Commonwealth disaster funding.

Emerging Minds also co-convenes the National Infant and Child Disaster Mental Health Advisory Committee. This expert reference group is available to advise the government on developing infant, children, and young people-centric systems and policies in disaster planning, response, relief, and recovery.

Q2. How could Commonwealth funding support communities to reduce their disaster risk?

Disaster events are occurring more frequently and with increasing intensity, meaning that more children and their families are at risk of living through disasters. Disasters can lead to children experiencing disruption in health, wellbeing, and education, leading to long-term developmental consequences, including mental health disorders. Acknowledging this, we have a responsibility to develop new funding cycles and risk planning and mitigation strategies which respond to the unique needs of infants and children.

Whist research demonstrates positive outcomes for children who receive the right supports in the context of disasters, children are the 'forgotten victims'. Child mental health support in the context of disasters remains scarce. Recent disasters have highlighted several gaps and challenges regarding the implementation of coordinated and effective support for infants, children, and families following disasters.

Commonwealth funding support can assist communities to reduce their disaster risk by funding approaches and practical strategies that prioritise the unique developmental needs of infants, children, young people and their families for ongoing preparedness, readiness, response, and resilience.

Many disaster response initiatives for infants, children and young people are focused on universal health promotion or education programs. Whilst these can be beneficial for some members of the community, a phased and tiered approach that is inclusive of universal, targeted, and specialist responses is more effective and consistent with mental health service delivery models. Framed within a phased and tiered approach, funding for the development of a core set of evidenced-informed disaster response measures and strategies to support infants, children, young people, and their families is needed to guide ongoing preparedness, readiness, responses, and recovery.

A commitment to provide funding to gain further evidence on what approaches and outcomes are needed would enable the building of informed child-centric systems, interventions, and workforce capacity across health, education, community, social, and emergency management sectors. Using a phased and tiered mental health response approach would provide guidance to funding bodies, services, and communities on effective investments to mitigate risk to and build resilience of the younger generation and their families before, during, and after challenging times. Funding multi-sectoral workforce competency-based training, resources, and support aligned to a phased and tiered approach will also increase capacity to appropriately respond to infants, children, and families. Alongside this, organisations would benefit from support to implement the changes required to create an environment that supports workers to deliver child-centric disaster practices.





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It is imperative funded responses include targeted support for the adults whom children rely on, physiologically and psychologically, in disasters. A child's family has the most powerful and enduring influence over their development and health. Yet, parents/caregivers may be impacted negatively by disasters. Mental health responses need to move beyond individualised responses for children and separate responses for adults but more integrated and holistic support that focuses on the preparedness, recovery, and resilience of the family as a whole. Commonwealth funding could reduce community disaster risk by funding family focused approaches that foster resilience and address vulnerabilities. This has been recommended by researchers, practitioners, and parents with lived experience.

Q3. Please describe your understanding of Commonwealth disaster funding processes.

No response provided.

Q4. Are the funding roles of the Commonwealth, states and territories, and local government, during disaster events clear?

No response provided.

Q5. Is there any further information you would like to provide?

We would like to provide further information on how Commonwealth funding could support communities to reduce their disaster risk.

Funding a joined-up, health-informed approach to ensure the basic needs of infants, children and families are included in disaster risk planning and mitigation in the emergency management sector is needed. The AIDR handbook Health and Disaster Management identifies that "There is currently no standard practice in emergency management planning for the unique needs of children in Australia." All local government emergency management plans should ensure the basic physiological and psychological needs of infants and families are considered, including infant feeding needs, separation and reunification of children, and child/family safe places. There is evidence to suggest that their unique needs are often not considered in local government emergency management plans, or are considered in an inconsistent, haphazard way. Without support, local governments may lack confidence to plan for the unique needs of infants, children, and families. Funding an infant and child-specific program that develops, implements, trains, and evaluates outcomes of infant and child disaster planning, response, and recovery will support communities to reduce risk. This could be achieved through partnering with child-centric initiatives, such as the National Workforce Centre for Child Mental Health.

Many programs and communities do not have the pre-existing health, development and education infrastructure that forms the basis of a mental health disaster response for infants and children, particularly in rural and remote areas. Funding arrangements that temporarily boost support for these communities during disasters present challenges for service providers and families, whose ongoing needs for support will be removed following cessation of temporary disaster response funding. The concept of 'build back better' could be applied where the expansion of core services in disaster-affected communities is leveraged as an opportunity to address and set up sustainable and ongoing services that address previous inequities and build local capacity to respond.





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Australia's adherence to the United Nations Convention on the Rights of the Child (CRoC; United Nations, 1990) stipulates every child has the right to participate and be heard in discussions and decisions that will affect them (when they are capable of forming their own views). Australia has a responsibility to ensure that children's best interests are reflected in policy and service delivery, and that children are widely supported to participate in the decisions that affect their lives (National Children's Commissioner, Australian Human Rights Commission, 2016). There is a call for children to be active participants in reflecting on disasters and to be part of the decision-making on issues that impact their short and long-term recovery. Children are capable and can benefit from actively contributing to all areas of disaster prevention, preparedness response and recovery. Collaboration with children, parents, and families can lead to creative and adaptive community approaches that reduce risk and strengthen resilience, resulting in compounding benefits for future generations. Investing in families with lived experience through co-design, or working with organisations with experience in this, can uncover innovative ways to support children and families in relation to disasters.



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