



Mental health, wellbeing and resilience after the 2019–20 bushfires

THE AUSTRALIAN NATIONAL BUSHFIRE
HEALTH AND WELLBEING SURVEY



Australian
National
University

The 2019–20 bushfires led to extensive mental health problems that persisted for more than 18 months after the devastating events.

The *Australian national bushfire health and wellbeing survey*, conducted by researchers at the Australian National University, documents the levels of psychological distress and resilience of more than 3,000 Australians directly and indirectly affected by the fires. The survey reveals how people and communities responded to the bushfires, with lessons for how Australians can better prepare for and manage future disasters.



Evaluating mental health and wellbeing after bushfire exposure

Australia has always been fire-prone. Climate change is likely to increase the frequency and intensity of fires.

Governments and aid agencies encourage communities to 'build back better' following bushfires. However, there is little Australian research on psychological distress and resilience after bushfires. Evaluating the short- and long-term effects of bushfire exposure on mental health and wellbeing helps the nation prepare for future bushfires and other natural disasters.

The Australian national bushfire health and wellbeing survey provides important information on the impacts of bushfire on mental health and wellbeing and identifies resilient coping strategies.

Surveying bushfire survivors

It was the worst season I have experienced. I feel shattered when I travel through burnt out areas. The deathly quiet of the bush is horrible. No insects or birds song.

– Survey respondent

The national survey included 3,083 people aged 18 years or older living in Australia during the 2019–20 bushfires.

Around 20 per cent of survey respondents lived in a postcode that the Australian Government determined to be bushfire-impacted. As distress was felt beyond the fire regions, researchers developed an alternative framework for classifying exposure severity based on people's experiences.



The survey incorporated three categories of impact:

- Directly affected (52 per cent of respondents) – segmented into high, medium and low exposure
- Indirectly affected (14 per cent) – outside the Australian Taxation Office (ATO) bushfire-affected postcodes, financially affected by fires
- Non-affected (34 per cent) – outside the ATO bushfire-affected postcodes and not involved in fire responses.

Parents described mental health symptoms for themselves and their dependent children.

A quarter of New South Wales and Victorian Aboriginal and Torres Strait Islander people live in bushfire-prone areas, emphasising the importance of insights into their mental health.

The 2019–20 bushfires

The ecological consequences far outweigh any social consequences, and this adds a high degree of anxiety to me personally.

– Survey respondent

Between July 2019 and March 2020, Australia experienced the most severe bushfires on record. Fires across every state and territory devastated the natural and built environment, resulting in 33 deaths and many injuries, and killing or displacing billions of animals. Fires destroyed more than 3,000 dwellings. There were more than 38,000 insurance claims.



Impact of the 2019–20 Australian bushfires

33

DEATHS

\$\$\$\$\$\$\$\$\$\$\$\$

Australia's costliest natural disaster, APPROACHING \$100 BILLION

3,094

HOUSES DESTROYED

\$2 BILLION

National Bushfire Recovery Fund

\$\$\$\$\$

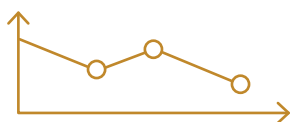
At least \$4–5 billion worth of **economic losses to the Australian food system**



\$2–3 BILLION

worth of direct fire damage to farm property, infrastructure and land

Over 100,000 livestock deaths



38,181

insurance claims for over \$2.3 billion worth of losses

Over 17 million hectares burned



Largest area burned in a single recorded fire season for eastern Australia

3 billion native animals

gravely affected by smoke inhalation, dehydration, heat stress and habitat loss, leading in some cases to population decrease and species endangerment.



Estimated 480 million mammals, birds, and reptiles lost

Survey results

The bushfires severely impacted my mental health for about 9 months post-bushfire. This impacted my work, study and relationships. I started seeing a psychologist 6 months after the fires and it really helped. I continue to experience some anxiety but am able to manage it for the most part.

– Survey respondent

The survey found that people affected by bushfires are at increased risk of ongoing mental health challenges, including depression, anxiety, and posttraumatic stress disorder (PTSD).

Psychological distress

We lost reliable electricity, water, communication, access to resources for about 4 weeks all in all. If we had evacuated when we were able, we would have been forced to be in emergency accommodation for 3 weeks at a minimum.

– Survey respondent

- The survey found widespread high levels of depression, anxiety and stress 12–18 months after the fires. Severity of bushfire exposure was associated with severity of psychological distress: those with the highest exposure reported higher levels of anxiety and depressive symptoms. Those indirectly affected also showed higher psychological distress than the wider sample – with almost three-quarters experiencing anxiety symptoms up to two years after the fires
- Mental distress was higher for bushfire-affected parents with dependents than for non-parents. Bushfire-affected parents reported their children having more behavioural and emotional challenges.
- Rates of depression, anxiety, and stress among the Aboriginal and Torres Strait Islander people were high, especially for Indigenous women.

Post-traumatic stress disorder

- Men directly affected by bushfire experienced PTSD symptoms double the national population rates. For both men and women who experienced high bushfire exposure, one in five reported symptoms that met the clinical cut-off for PTSD.
- One in five people in the high-exposure category reported probable PTSD symptoms.

Community support

- Directly affected people with more social group memberships were better able to maintain these groups, build new ones, and identify with their local community after the fires.

Resilience, psychological wellbeing and posttraumatic growth

The research also considered factors predicting posttraumatic growth, resilience coping and psychological wellbeing. Almost 80 per cent of respondents reported some degree of psychological resilience.

Adverse mental health outcomes after disaster are not inevitable. Around two-thirds of people affected by disaster show psychological resilience and return to pre-disaster levels of wellbeing and functioning, or even report personal growth from their experience.

The number of directly affected high-exposure respondents reported coping scores matching those who were not affected, demonstrating how much those who have experienced a severe disaster are able to draw on their psychological and other resources to cope with adversity. Coping strategies included creative and positive approaches, a growth mindset, and awareness of the ability to control emotional responses. While directly affected people reported higher rates of psychological distress, including stress, anxiety and depression, there was growth and transformation in their recovery.

Ongoing support for a resilient future

The effects of disasters are long-lasting. There is a need for more effective support from government, local health networks, NGOs and the community.

It is vital to maintain social networks and community cohesion after bushfires. We need preventative strategies that enhance resilience and coping, particularly among the more vulnerable and most affected by bushfires.

People living away from where the disaster occurs also experience psychological distress, especially through financial loss related to the bushfires. Acknowledging this will help support those most at risk.

Monitoring mental health outcomes among bushfire-affected communities will provide further insights into the impacts of disasters. We can learn much from the experience of people exposed to fire, their subsequent coping strategies, and ongoing needs for mental health support through ongoing monitoring.

Continued research and data collection of these experiences provide critical information to help the design and implementation of programs and support to help Australians recover psychologically and build resilience after natural disasters.



Recommendations

It was an uncertain time, which lacked communication, with no support from government agencies.

– Survey respondent

Findings from this extensive survey of the impacts of bushfires on Australians lead to the following recommendations to help protect and support mental health during and after disasters.

Provide immediate, long-term and more easily accessible mental health support

This applies particularly to communities without permanent services and staff. Mental health support should reflect local needs. Ongoing monitoring of mental health will help determine the support required.

Establish a better way to determine ‘bushfire affectedness’

People outside directly affected areas experienced significant distress. Postcode of residence should be combined with information from local government areas and support agencies to determine where support should be directed.

Embed psychological wellbeing into preparedness and mitigation planning – not just disaster recovery

Communities in high bushfire risk areas should develop mental health and preparedness plans, with priority funding for locally-oriented and locally-led measures for enhancing resilience.

Longer-term monitoring of mental health and wellbeing outcomes

Monitoring the ongoing impact of bushfires on mental health is important, given the projected increase in the severity of bushfires. We need to determine the support required to address ongoing mental health challenges in affected communities. The mental health and wellbeing of parents and children should also be better supported, particularly because parent mental health can affect the response and coping abilities of dependent children.

Recognise compounding vulnerability due to pre-existing disadvantage and marginalisation

Aboriginal and Torres Strait Islander peoples’ mental health and wellbeing should be better supported, given historical marginalisation and the proximity of many to bushfire-prone areas.

2019–20 Australian Bushfire Experiences

The psychological health and wellbeing of people affected by the 2019–20 bushfires 12–18 months later.



Widespread Impact

Almost 3 times more people were affected by bushfire than captured by the ATO's classification of bushfire-affected postcodes



Social Connection

Being socially connected supported resilience



Extreme Distress

There were extremely high rates of depression, anxiety, stress and PTSD in bushfire-affected people.



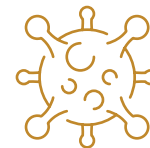
Vulnerable Populations

Women, Aboriginal and Torres Strait Islander peoples, parents and children were especially vulnerable to mental health impacts after bushfire



Psychological Distress

Higher bushfire exposure was associated with higher psychological distress, and more distress about the environment.



Covid-19 Impact

People in non-affected areas also had high psychological distress, likely due to Covid-19.



Higher Resilience

Bushfire-affected Aboriginal and Torres Strait Islander peoples and parents had higher psychological distress, but also higher resilience.

Advice

This brochure contains descriptions and imagery of bushfires that may be distressing. Mental health resources and support can be found at lifeline.org.au or by calling the 24/7 crisis line on 13 11 14.

Report

“Mental health, wellbeing and resilience after the 2019–20 bushfires: The Australian national bushfire health and wellbeing survey – A preliminary report” is available at <https://dx.doi.org/10.25911/AG7D-7574>

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Ethics

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- University of Wollongong
- Illawarra Health and Medical Research Institute
- HealthANSWERS

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