

## Preparing mental health systems for climate crisis



Australia is experiencing an unprecedented bushfire crisis. As of January, 2020, bushfires have burnt approximately 17 million hectares,<sup>1</sup> resulting in the deaths of 33 people and more than one billion animals.<sup>2</sup> For several months, professional and volunteer firefighters have worked tirelessly to minimise the impact of out of control fires across the nation, in what is just the beginning of the annual fire season.

The National Disaster Risk Reduction Framework launched by the Australian Government in 2018, emphasised the beneficial role that proactive efforts to adapt to a changing climate will have for economic, community, and health outcomes.<sup>3</sup> This is particularly important given that the population, assets, and infrastructure of Australia are located in disaster risk areas, including coastal zones, floodplains, and across the urban–rural fringe.<sup>3</sup> However, the current emergency has highlighted the scale of work still to be achieved in local and national efforts to prepare, mitigate, and adapt to climate change.

The ongoing bushfire crisis will have considerable implications for mental health. For most people, the heightened level of distress that occurs with trauma and loss will subside over time. However, a significant proportion of people will experience mental health difficulties that emerge months or years after the disaster, creating a second surge of health need. Exposure to trauma during bushfires increases rates of post-traumatic stress disorder, depression, anxiety, and alcohol use.<sup>4,5</sup> Incidents of domestic violence are more frequently reported after disasters, creating a further wave of risk for survivors.<sup>6</sup> Developmental regressions, and emotional and behavioural difficulties, are common in children, with recent findings revealing that students (9–12 years old) in areas affected by bushfire showed reductions in expected levels of numeracy and reading 2–4 years after exposure.<sup>7</sup>

In response to the bushfires, Australian non-governmental, private, state, and federal organisations have already mobilised a range of mental health services. Yet, addressing the extended psychological effects of bushfires will require careful planning and coordination. In January, 2020, the Australian Government established a National Bushfire Recovery Agency and announced a

AUS\$2 billion National Bushfire Recovery fund, of which \$76 million has been allocated to mental health.<sup>8</sup> The funding package includes free counselling sessions for individuals and emergency services personnel affected by the fires, expanded access to telehealth services, trauma-informed care and care coordination, community grants, and the expansion of youth mental health services.<sup>8</sup> This announcement represents an important shift towards recognising the mental health consequences of disasters, but long-term planning is required.

The need for a responsive and sustainable mental health system that is equipped to deal with the long-term effects of disasters is now painfully evident. Beyond the impact of fires, many regional Australians are coping with the effects of ongoing drought, storms, and floods. Yet mental health services in rural and remote areas continue to be under-resourced.<sup>9</sup> Attracting psychiatrists, psychologists, and nurses to country towns is an ongoing challenge. The Australian Government's Productivity Commission draft report<sup>10</sup> published in 2019, details reforms required for a sustainable mental health system that provides timely access to appropriate treatment for people with mental ill-health, including for people in rural and remote areas. Extended hours mental health services as an alternative to emergency departments, and specialist care that can meet regional needs, are required. To circumvent isolation and barriers to accessibility, expansions to clinician-supported online and self-help resources, such as the MindSpot Clinic, and moderate-intensity videoconferencing services, are also recommended. Importantly, preventive efforts to help build resilient, connected communities will help mitigate risk factors for mental ill-health when catastrophes occur. Partnerships with schools, community organisations, and sports clubs will reduce stigma and the potential for discrimination, thereby fostering feasibility, acceptability, and accessibility for the delivery of evidence-based treatments for postdisaster mental health. All mental health efforts need to be culturally secure and developmentally appropriate, and funding needs to be available to evaluate their performance and cost-effectiveness.

The implementation of measures by Australia and other countries to support the resilience of communities

dealing with the effects of climate change is vital. In Australia, generous donations, extensive volunteer efforts, advocacy, and social media enterprises have enabled people to connect with individuals and businesses affected by fires and drought, supporting self-determination for crisis-affected communities. At a broader level, these actions mitigate, in part, the growing eco-anxiety across our society. However, Australia's experience indicates that governments need to make long-term commitments to the planning and coordination of local and national mental health services to ensure effective and sustainable responses to future disasters.

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