Phoenix AUSTRALIA | CENTRE FOR POSTTRAUMATIC MENTAL HEALTH

What is the impact of the COVID-19 pandemic on the mental health and wellbeing of communities who have experienced multiple disasters?

What are the impacts of disasters?

Following a disaster, initial feelings of shock, sadness and anger are common. Those impacted may also experience mental, behavioural and physiological reactions such as difficulty concentrating or problem solving, withdrawal, and feeling tense or "jumpy". As with other potentially traumatic events, for most people these feelings will subside as they draw on existing coping resources and the support of family, friends and other connections. However, the effects may be more significant for some, and may lead to mental health issues. In addition to these psychosocial impacts, disasters can often cause multiple additional stressors, such as financial, housing and impacts on infrastructure and the natural environment.

Over the 2019/20 summer, many Australians were impacted by the 'Black Summer' bushfires, which burnt more than 24 million hectares across eastern and southern Australia. This unprecedented disaster was quickly followed in January 2020 by the arrival of COVID-19 in Australia. To reduce the spread and morbidity of the virus, public health restrictions were implemented, which has also had a significant impact on mental health and wellbeing. In the years since, there have been multiple additional disasters that have impacted many of the same regions of Australia, including major storms and floods, further bushfires, an earthquake and a mouse plague.

Although the long-term trajectories of individual disaster events have been well researched, there have been few studies that have directly explored the mental health impacts of multiple disasters in the Australian context, such as the experiences and support needs of individuals and communities who have been impacted by a disaster ahead of or in parallel to the pandemic. As such, there is a need to understand, in-depth, how the pandemic shaped these communities' mental health experiences, and their unique challenges and barriers to recovery.

Our research

Conducted with funding from the National Mental Health Commission, this project comprised two main stages, including: a preliminary literature review; and in-depth qualitative investigations involving interviews and focus groups situated in recently disaster-affected areas. The study aimed to answer the following research questions:

1. How do community members experience and perceive the impacts on their mental health and wellbeing, following COVID-19 pandemic and multiple disasters?
2. How do community members perceive the mental health needs, barriers and facilitators to recovery for their community, who are impacted by COVID-19 pandemic and multiple disasters?
3. How do health providers and other community helpers experience service delivery, including challenges and facilitators to recovery, with those impacted by the COVID-19 pandemic and multiple disasters?

18 semi-structured interviews were conducted via telephone with community members

5 focus groups were conducted via Zoom with 31 community help providers participating in total

participants were predominantly based in VIC (61%), NSW (35%), or SA (2%).

the majority of participants identified as female (88%)

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Findings

There was an initial sense of the community coming together following the bushfires

"After the bushfire, the first three months people were helping each other, trying to find solutions, lots of get togethers. It was actually a really strong time for the community."

The pandemic disrupted the "normal response" to disasters, with many left feeling hopeless and waiting for "the next bad thing to happen"

"You never know if the rug's going to get swept out from under your feet."

Communities experienced escalating tension and division regarding COVID vaccinations and/or restrictions, distribution of resources post-disaster and difficulties re-connecting socially

"They were angry to be lumped with the city lockdowns that had to happen and everything getting shutdown because the way they heal from such events is via their community engagement. To not be able to do any of that, they were just really, really mad."

Communities were impacted by 'red tape', disconnected services and barriers to accessing support. Housing and financial challenges further complicated recovery.

"The other disaster that adds another layer here is the building supply cost [due to COVID]. Suddenly housing costs make it even more unaffordable for people trying to rebuild after the disaster."

Intersecting traumas and mental health difficulties were exacerbated by disasters and then pandemic restrictions

"...bushfires, pandemic, and is it's bringing up all these other traumas as well, early childhood trauma, sexual abuse. That's why I mentioned complexity, because it's just – everything is coming up and of course, coping strategies have eroded or relationships might have broken down."

The cumulative effects of disasters have left health and recovery workers fatigued and burnt-out

"When we first started, it was bushfires. But then, with COVID coming, putting another layer on it; with the floods coming, we feel sometimes we're pulled here, we're pulled there. There's not enough of us to try and do all the things that everyone's asking us to do."

Further resources

These findings provide valuable information for our organisation, health and recovery workers, researchers, governments and the National Mental Health Commission to better understand the impacts and needs of those affected by compounding disasters and the COVID-19 pandemic, as well as identify opportunities to improve future responses to multiple disasters.

Learn more about supporting those impacted by multiple disasters at the Disaster Mental Health Hub

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