Social ties matter – experiencing and recovering from bushfires

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Establishing Partners

- A range of community organisations in each location
- Australian Red Cross
- Primary Care Partnerships from 6 regions
- Phoenix Australia: Centre for Posttraumatic Mental Health
- Victorian Department of Health
- Australian Rotary Health
- Federal Department of Human Services (Centrelink)
- Universities: Melbourne, NSW, Flinders, Swinburne, Sydney
Approaches

• Community visits and consultations
  • 2010-ongoing

• Telephone/online questionnaire with adults in 2012, 2014, 2016*
  • 1056 participants in 2012
  • 78% response rate in 2014

• In-depth interviews with children & adults (2013-2014)
  • 35 participants from high impact communities
3-4 years after the bushfires, a significant minority were showing symptoms of mental health disorders (eg post-traumatic stress, anxiety, depression)

25.6% in high-impact communities, 17.2% in medium-impact and 11.7% in low-impact communities
1/3 with marked distress had not received professional help in previous month

Within this group, women and men were equally likely to seek help
Severe psychological distress was predicted by fear for one’s life in the bushfires and death of someone close to them in the bushfires.

‘Someone close’ often referred to a community member.
Loss of friends and community members was predictive of poorer mental health outcomes.

I went to four funerals in that week and there were two I didn’t get to go to because I was at others…And none of those first four were for one person.
People with larger social networks were more likely to report loss of someone close.
Experiencing major life stressors (e.g. change of income, change in accommodation) contributed to the mental health impacts of fire experiences.
Experiencing intense anger also contributed to the mental health impacts of fire experiences.
Of the 1016 survey participants, 56% reported that they had been separated from close family members during the fires. Of those, over 30% did not know the fate of their loved one for 24hrs or longer.
Separation from close loved ones, during and immediately after the fires, was a risk factor for mental health problems, particularly for people who tend to feel anxious about their relationships.
Social ties matter - having more people you are close to is generally related to better mental health and personal wellbeing.
Involvement in local community groups and organisations is also associated with more positive outcomes in terms of mental health and wellbeing.
Living with someone else is associated with better outcomes
Participating in local groups is associated with better outcomes for those who live alone - particularly evident for those who are retired and have secure relationships.
Family members responded differently to the experience of the bushfires and aftermath.
People who were the most affected by the bushfires were more likely to move to a new community, with mixed experiences.

I still talk about it as home.
For those who stayed in their community there was generally a stronger sense of community connection.

For those who moved to a different community, the impact of subsequent financial and relationship difficulties was often lessened.
In the aftermath of a disaster experience, children and young people seek safety and stability in their home, school, social, recreational and work environments.

I remember changes all the time after the fires, things changing, doing things on different days and stuff like that.
Infographic

Number of programs targeted at school age groups

Preschool School
Primary School
Secondary School

Key
- 0-4
- 5-9
- 10-20
- 20-50
- 50-75

6% of programs targeted teachers, service providers & parents

Figure 2: Number of initiatives targeted at different school ages
Figure 7: Alignment of initiatives with the Ager and Strang Conceptual Framework.
Next steps

Implications:
- Individual
- Service
- Policy

Further research
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