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# AFTER *the* DISASTER

Recovery for Australia's  
Children



**Royal Far West**  
Children's health, country-wide

**unicef** 

AUSTRALIA

for every child









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### **This page**

The remains of burnt out buildings are seen along main street in the New South Wales town of Cobargo on December 31, 2019, after bushfires ravaged the town. - Thousands of holidaymakers and locals were forced to flee to beaches in fire-ravaged southeast Australia on December 31, as blazes ripped through popular tourist areas leaving no escape by land. ©UNICEF/UNI266318/Davey/AFP-Services

### **Following page**

Children play at the showgrounds in the southern New South Wales town of Bega after being evacuated by bushfires on December 31, 2019. ©UNICEF/UNI266318/Davey/AFP-Services



We offer our sincere condolences to every child, family and community impacted by the catastrophic Black Summer bushfires.

We stand in awe of the extraordinary efforts of Fire and Rescue Services, first responders and community leaders who risked their lives to protect others. We commend the response of both State and Federal Governments in supporting affected communities during and after the crisis.

UNICEF Australia and Royal Far West also acknowledge the Traditional Custodians of Country of the land and communities impacted by the fires, and their connection to their lands, waters, and communities. We pay respect to Aboriginal and Torres Strait Islander peoples and cultures, and to Elders both past and present.

Finally, we acknowledge the incredible compassion and generosity of the Australian public, whose outpouring of support raised more than \$640 million for relief and recovery efforts.

In times of disaster, however, the needs of children can often be overlooked. We believe that we can, and must do more to place children's needs at the centre of community led recovery. This report offers ideas on how this can be done.



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# FOREWORD

Australians are fortunate to live in a spectacular natural environment – our ‘great outdoors’ known around the world. We love our ‘sunburnt country’, our ‘sweeping plains’, our ‘ragged mountain ranges’, and our ‘jewel-sea’<sup>1</sup>. Living in Australia provides opportunities for children to grow and thrive - enjoying the natural environments of outback, ‘the bush’, our extensive national parks and our scenic coastline.

However, our landscape brings challenging and diverse weather conditions. Extreme weather events occur regularly and different regions can simultaneously experience heatwave, fire, cyclone, flooding and drought. Climate change is increasing the intensity and frequency of these events, and their consequences for communities. Drought has been particularly prevalent in many communities over the past decade, with young children in some regions never having experienced rain.

This long period of dry conditions, coupled with heatwaves and extreme weather, resulted in the bushfires that occurred from September 2019 to March 2020. It is estimated that 80% of the Australian population was affected in some way by the fires of that summer. These bushfires were particularly devastating for many communities because of their scale and intensity, their destruction of both built and natural environments, the loss of human and animal life, and because of the trauma caused to such a large percentage of the population, who either experienced or witnessed this horrific event. Within months of the bushfires, the COVID-19 pandemic spread across Australia, affecting communities in all States and Territories. This pandemic resulted in further deaths, serious illness, the separation and isolation of families and households from one another, a range of physical and mental health impacts, and significant delays to bushfire recovery efforts.

Children are particularly vulnerable to the trauma of these events and to their consequences. For children, these consequences can change the trajectory of their lives, reducing education, employment and psychosocial outcomes immediately and for the rest of their lives. For children in rural and remote areas, this comes in addition to the already significant disadvantage they experience, because of where they live. Their outcomes are already at significant risk of being reduced because of limited access to resources, services and support throughout their childhoods.

During 2020, UNICEF Australia (UA) and Royal Far West (RFW) formed a partnership to deliver customised psychosocial and learning support to children and young people impacted by these events. The program being delivered through this partnership is one of the primary interventions in a broader set of initiatives to ensure that the needs of children are prioritised in the nation’s recovery. UNICEF Australia and Royal Far West take a child centred approach to our work – directly focusing our support on children and their parents, caregivers, educators and the services that support them. We also take a socio-ecological approach - designing integrated interventions that work in partnership with children and their parents and caregivers, schools and teachers, local communities and existing local services.

Together we work to develop and enhance the resilience of children and young people in rural and remote locations, and to strengthen the support system that surrounds them where they live. The changes we achieve are sustainable in the long term, changing children’s lives and helping them to thrive during childhood and through their path to adulthood.

National and State government policies and frameworks are too often silent on children’s particular needs, characters, contexts and aspirations. Strengthening these policies and frameworks would sharpen the focus of services and support for children and young people, and their parents and caregivers. This in turn would lead to stronger outcomes through every stage of their lives; infancy and early childhood, childhood, adolescence, young adulthood and adulthood.

We call on governments, businesses, non-government agencies and philanthropic organisations to invest urgently in research, policies and programs to strengthen the resilience of our children and young people. By supporting our children, young people and communities, by working with them, listening to them, and providing support to nurture them, we will ensure that they are able to build and enjoy strong futures, thereby strengthening Australia’s resilience.



**Tony Stuart**  
Chief Executive Officer  
UNICEF Australia



**Lindsay Cane AM**  
Chief Executive Officer  
Royal Far West

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# EXECUTIVE SUMMARY

This report describes the challenges that many of Australia's children and young people face as a result of where they live, including as a result of disasters and emergency events. It presents the case for a stronger policy focus on children and young people, more research about what works best to improve their outcomes, and an increased investment in programs and services to support them.



UNICEF Australia (UA) and Royal Far West (RFW) are focused on achieving strong outcomes for children and young people, including those affected by extreme weather events and disasters. We know that children and young people in rural and regional communities can often experience disadvantage as a result of where they live, with less access to resources, services and support, including before, during and after any emergency or crisis. As a result they are more likely to experience greater developmental delays and more significant challenges, both throughout their childhood and for the rest of their lives.

We believe that given the right support, children and young people grow and thrive. The right support, at the right time, improves their immediate health, development and wellbeing, leading to a greater sense of agency and self efficacy, and resulting in long term health, wellbeing and life outcomes.

This report calls for governments, business, non-government organisations and philanthropy to take action to support children and young people before, during and after disasters and emergencies, to support these long-term outcomes

We are advocating for more programs and interventions that are:

- Evidence based and addressing the needs of children and young people through all the stages of their lives (infancy and early childhood, childhood, adolescence, young adulthood and adulthood), including a strong understanding of the many factors that affect those stages
- Coordinated and collaborative with local communities, resulting in strong and sustainable support for local services
- Multidisciplinary with a balance of both clinical and non-clinical support including health and allied health professionals, educators, parents and caregivers, and children and young people, and
- Community based and community led to ensure relevance and effectiveness given each unique local context.

This report includes **key recommendations** to address existing disadvantage and disaster related challenges faced by children and young people, particularly in rural and remote areas. These recommendations focus on the changes that need to be made to support our children and ensure that they can thrive and develop into healthy and productive adults

# RECOMMENDATIONS

## ○ Strategic and Contextual

- 1 Strengthen key National and State/Territory policies and frameworks so that they;
  - a. Reflect a **holistic focus** on the wellbeing of our children and young people, including those affected by bushfires and other disasters or emergency events
  - b. Place the best interests of children and young people at the **centre of policies** that affect them
  - c. Reflect the **circumstances and contexts** within which children and young people live and grow, including an existing trauma or disadvantage, and
  - d. Prioritise their needs and **aspirations**.
- 2 Strengthen **disaster resilience policy** and practice to focus on the specific needs of children and young people taking into account contextual factors that surround disasters and emergency events – in particular the geographic location in which they occur, with most disasters occurring in regional and rural areas of Australia.
- 3 **Commission a review** of relevant policies and frameworks that guide disaster planning, response and recovery efforts to ensure the unique needs of children are specifically identified and addressed.
- 4 Increase **early and equitable access to locally provided health programs** and services (including allied and mental health) for all children and young people regardless of their personal and family circumstances or where they live.
- 5 **Fund research** (in collaboration with service providers) to understand the needs and 'voice' of children and young people, and the interventions and responses that most support them, particularly those who are affected by trauma and disadvantage.
- 6 Take action to **mitigate the broader impacts on children's wellbeing** including climate change, intergenerational trauma, and the multideterminants of disadvantage.

## ○ Before the next crisis – preparation and planning

- 7 **Collaborate and coordinate across sectors** (including governments, non-government organisations, business, philanthropy, community based organisations) to fund, develop and support multifaceted, collaborative and coordinated approaches to;
  - a. **Educate communities** about the impact of trauma on children and young people
  - b. **Enhance emergency response** approaches within sectors, and
  - c. **Improve resilience** in our children and young people.
- 8 Establish a preferred **panel of providers that are 'fit for purpose'** to respond to the range of disasters and emergency events, including providing support to children and young people, their parents and caregivers, service providers and communities (before, during and after disasters and emergency events).

## ○ During Disaster Response and Relief

- 9 **Support emergency response and relief agencies** to include the needs of children and young people in their approaches and practices.

## ○ Throughout Disaster Recovery

- 10 Fund practical, multifaceted, and holistic programs, services and approaches that support children and young people – **improving mental health, psychosocial and wellbeing outcomes** for children and young people affected by disasters and emergency events.

See p30 for more details on recommendations





# CHILDREN AND YOUNG PEOPLE IN AUSTRALIA – A SNAPSHOT

There are over 5.5 million children under the age of 18 years in Australia.<sup>3</sup> Approximately two thirds of these children are between the ages of 0-9 years. How many children are there across Australia, by age group?

- 29% are 0-4 years (1,573,626)
- 29% are 5-9 years (1,567,281)
- 26% are 10-14 years (1,431,690)
- 16% are 15-17 years (866,346).<sup>4</sup>

In Australia, half of all lifetime mental health disorders emerge by the age of 14, and three quarters by the age of 21.<sup>5</sup> Suicide is the leading cause of death in young people<sup>6</sup> and suicide rates are higher in regional areas.<sup>7</sup> More than 1 in 6 (16.2%) of children and adolescents aged 4-17 in rural areas have mental health problems. This is closer to 1 in 5 (19%) in regional areas (i.e. including one or more regional centres).<sup>8</sup>

Where children and young people live increases or decreases their experience of inequality, their access to services and support, their developmental outcomes, and these further influence their life trajectory and outcomes. Children in rural and remote Australia face greater challenges than their urban peers:

- Children in rural and remote Australia are more likely to experience poverty, unemployment, lower educational attainment, more family and domestic violence, and more contact with the child protection system.<sup>9</sup>
- 1 in 5 children across Australia (22%) are developmentally vulnerable on one or more domains in their first year of school.<sup>10</sup>
- Almost 2 in 5 Aboriginal and Torres Strait Islander children (42%) are developmentally vulnerable on one or more domains.<sup>11</sup>
- Children in rural, regional and remote areas are more likely to be developmentally vulnerable than children in metropolitan areas (27% compared to 21%).<sup>12</sup>
- Children living in very remote areas are twice as likely as those living in major cities to be developmentally vulnerable.<sup>13</sup>
- One-third of children (32%) in rural and remote areas of NSW are unable to access the health services they need.<sup>14</sup> This includes services such as early childhood intervention services, allied health services, paediatricians, and mental health services.<sup>15</sup> This situation is highly likely to be replicated across all Australian jurisdictions.
- In the 'Young Minds Matter Survey' just under half (48.9%) of children aged 4-11 years with mental health disorders had used services in the 12 months prior to the survey.<sup>16</sup>
- Because of the lack of local services, some families travel to attend services further away from home, with the associated additional costs and time.



**5.5 million children**  
under the age of 18 years

**29%** 0-4 years (1,573,626)

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**16%** 15-17 years (866,346)



In addition to these issues of remoteness, disadvantage and access to services, Aboriginal and Torres Strait Islander children living in Australia also experience the legacy and ongoing impact of loss of land and connection to country, the decimation of culture, language and community, and ongoing racism and discrimination.<sup>17</sup> There is a need to both support Aboriginal and Torres Strait Islander community controlled health services to enable effective and culturally appropriate service delivery, and to support mainstream services to engage more effectively with Aboriginal and Torres Strait Islander families and communities.

During 2020 children and young people have experienced additional issues as a result of the COVID-19 pandemic with a 28% spike in calls to the phone counseling service Kids Helpline (Victoria) between March and July 2020, compared to the same period the previous year.<sup>18</sup> There is a significant increase in the need for children's mental health services with recent data showing the volume of psychological therapy delivered by RFW Telecare (services delivered by technology) is now six times what it was three years ago.<sup>19</sup>

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*“The government needs to know that we have views and emotions too. And we know how to speak too. And we should be recognised as human beings as well.”*

YOUNG PEOPLE<sup>2</sup>

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### And what do children and young people say?

A recent survey of young Australians found that only 13% of young people feel that leaders in government listen to their views. This means that 87% of young people do not feel heard by key decision makers who are making policy decisions that will affect their futures. In contrast, 67% of young people do feel listened to (sometimes or consistently) by their parents, and 54% by their teachers.<sup>20</sup>



We live in a time where children and young people (from urban, rural and regional areas) are now more often affected and concerned about long term issues such as drought, ongoing disasters and emergencies, and climate change.<sup>21 22</sup> Children and young people often have more concerns about the future as a result, potentially contributing to 'eco-anxiety'.<sup>23</sup> An Advocate for Children and Young People (ACYP) study that collected the views of children and young people, demonstrates that children and young people feel "invisible, forgotten, helpless and unable to influence the world around them" and are calling for:

- More targeted and tailored mental health interventions for themselves and their families
- Greater education about disasters
- Integrated mental health support in schools
- Greater flexibility of educational delivery following disasters
- Greater support to ensure adequate housing following disasters (either on their property or as short term accommodation)
- Greater financial and material support for families who have suffered social and economic impacts of disaster, and
- Inclusion of children and young people in community preparation and prevention, land management, community rebuilding and community events to enhance cohesion and participation after a disaster.<sup>24</sup>

Australian children and young people are often resilient and demonstrate leadership, with strong thoughts and feelings about how they can support and guide society in relation to disasters.<sup>25</sup> They are seeking opportunities to share their experiences and to participate in enhancing their own resilience and that of their community.<sup>26</sup>

Australian young people have contributed through the 'Our World, Our Say' national survey on climate change and disaster risk, calling for change. These young people feel unprepared, under-educated, concerned and increasingly frightened by the prospect of disasters. They have identified their priorities for learning as including how to:

- Plan and prepare for natural hazards
- Care for themselves and others in a crisis
- Access emergency alerts and warnings, and
- Prevent or reduce the risk of a disaster.<sup>27</sup>

Very young children (pre school age) increasingly exhibit concerns and anxiety through their behaviours, and need age appropriate support to enable them to understand their experiences and emotions, and to similarly express their 'voice'.<sup>28</sup>

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*"That's why most of the time young people don't speak up, it's because we get told, 'You don't know what you're talking about.'"*

*"They don't really listen to us in the community because we are young."*

YOUNG PEOPLE<sup>2</sup>

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# CHILDREN AND DISASTERS

Children raised in a safe and secure environment are able to develop and thrive through childhood. The experience of trauma or a large-scale emergency event or disaster interrupts their childhood, affecting mental health, emotional wellbeing and childhood development through to adolescence and young adulthood.<sup>30 31</sup> Children are directly affected by bushfires and other emergency events.

- Of the 173 people who died as a result of the 'Black Saturday' fires that occurred across Victoria in 2009, 35 were children and young people, and 16 children were left orphaned by the event.<sup>32</sup>
- A study of 25,000 school children found that those exposed to the traumatic 'Black Saturday' (2009) fires, were more likely to fall behind in their learning years. "The younger the child is at the time of exposure, the greater the risk."<sup>33</sup>
- Children and young people are particularly susceptible to mental health issues following disasters or emergencies, resulting in poorer educational outcomes and a loss of a sense of stability and safety.<sup>34</sup>
- Tens of thousands of children and their families either directly experienced the 'Black Summer' fires in 2019-2020, or were affected by them.<sup>35</sup> Some fled their homes, some lost their homes, loved toys, pets, and possessions. Many were frightened by the event as it unfolded in their own community, nearby or witnessed via the television and other media.

As a result of the summer of 2019/2020

**2 in 5** children 

**and young people were personally impacted by bushfires** (either being directly affected or knowing someone who was directly affected)

**3 in 10** 

**were personally impacted by drought** (either being directly affected or knowing someone who was directly affected)

**almost 25%** 

**were personally impacted by floods** (either being directly affected or knowing someone who was directly affected)

Of those who had been directly affected by a disaster or emergency event, **7% had experienced two of the three disaster types**, and 2% had experienced all three.<sup>36</sup>





A number of factors increase the risk of long-term impact as a result of this kind of trauma. Some factors are preexisting, some arise during an emergency, and others occur afterwards.

- Preexisting factors include the experience of poverty, homelessness, family or household unemployment, lower engagement with education, lower access to health care and other services and developmental health challenges, developmental delays or disability.<sup>37</sup>
- During an emergency event children can be particularly affected if they directly experience or witness the horror of the event, were separated from their parent or caregiver, or thought that they or their parent or caregiver might die. Research findings indicate that even a brief separation or absence from an important caregiver during an intense event threatens a 'sense of attachment security (and) may destabilise the child's security attachment, persisting into adulthood.<sup>38</sup>
- Factors that arise after a crisis include parental distress, parenting behaviours such as overparenting<sup>39</sup>, and family conflict or family violence - as the risk of these increases after a disaster or large scale emergency event<sup>40</sup> and contributes to children and adolescents experiencing mental health symptoms.<sup>41</sup>

There are many ways that this trauma affects the behaviour and experiences of children and young people, including:

### Immediate and short term

*(days, weeks and months)*

- Loss of concentration
- Disturbed sleep
- Re-experiencing the event through nightmares
- Repetitive reenactment through play
- Mental health disorders including anxiety, depression or lower mood<sup>42</sup>
- Increased anxiety (particularly separation anxiety)
- Difficulty managing and regulating emotions, and
- Behavioural regression (such as thumb sucking and wetting)<sup>43 44</sup>

### Medium term

*through childhood and adolescence*

- Higher likelihood of experiencing mental health problems<sup>45</sup>, and
- Lower educational attainment in reading and mathematics.<sup>46 47</sup>

### Long term and into adulthood

*(with evidence of these found up to 20 years later in one study<sup>48</sup>)*

- Lower educational or academic achievement<sup>49</sup>
- Poorer employment outcomes
- Lower long-term wellbeing outcomes, and
- Higher risk of mental health issues.<sup>50</sup>

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*“We are the ones who will be grappling with hotter temperatures, cyclones, floods and bushfires all our lives. This planet is our home. Together we can create a climate safe future.”*

TARA TOLHURST – YOUTH PARTICIPANT  
IN THE "OUR WORLD, OUR SAY" SURVEY<sup>29</sup>

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These changes and behaviours all affect friendships, family relationships and the ability to enjoy social activities. Children may demonstrate guilt, avoidant behaviour and have fears of recurrence and worry for the safety of themselves and others.<sup>51</sup> Without early intervention these effects may persist and re-emerge throughout life, affecting lifelong educational and functional outcomes.

A recent literature review, commissioned by the Spinifex Network and co-authored by Charles Sturt University and RFW, shows an increased risk of poorer mental health outcomes for children as a result of bushfires. The review, *“The Impact of Bushfire on the Wellbeing of Children Living in Rural and Remote Australia: A Rapid Review”* investigated both the dynamics associated with mental health and development of children impacted by bushfire, and which interventions lead to better outcomes for these children.

The findings of this review identified that children exposed to bushfires may be at increased risk of poorer wellbeing outcomes. Children particularly at risk are those from more vulnerable backgrounds who may have other compounding factors, limiting their ability to overcome bushfire trauma.

It also found that although several studies investigated the short and long-term impact of exposure to bushfire on children and adolescents, there were no studies that highlighted effective interventions to reduce the risk of the impact of bushfire.

Furthermore it found that the impact of bushfires on children's wellbeing may emerge as time passes. There are short-, medium- and long-term impacts of bushfire exposure on the wellbeing of children who had been exposed to it. Children can be dealing with the trauma of bushfires up to three years after the event, and not everyone is affected.



A long exposure picture shows a car commuting on the outskirts of Cooma, NSW, as the sky turns red due to nearby bushfires on January 4, 2020. Up to 3,000 military reservists were called up to tackle Australia's relentless bushfire crisis, as tens of thousands of residents fled their homes amid catastrophic conditions. © UNICEF/UNI266319/Khan/AFP-Services



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# UNICEF AUSTRALIA AND ROYAL FAR WEST: OUR COLLABORATION

## The UNICEF Australia and Royal Far West partnership

UNICEF, the United Nations Children's Fund, is the world's leading organisation for children and families. We work in more than 190 countries and territories around the globe. Our mission is to ensure that every child has the opportunity to survive and thrive – regardless of who they are, where they live, or what they believe.<sup>54</sup>

UNICEF Australia's vision is a fair chance for every child. As an Australian NGO we work in partnership with Governments, local organisations, and the private sector to protect and enhance the rights and wellbeing of children here in Australia and around the world.

We recognise that children and young people are experts in their own lives and have the unique capacity to advocate for a better world. We facilitate initiatives that lift their voices and encourage their participation. We work with Governments to strengthen systems and drive continual improvement in outcomes for children, and we work in partnership with local organisations to help target inequality and accelerate and scale what is working well at the community level.

The Black Summer fires of 2019/2020 were unprecedented in scale and impact on children, families and communities across Australia. As these events were unfolding, UNICEF Australia consulted widely with Governments and leading response agencies and it became clear that UNICEF Australia's capabilities and resources were required to help ensure that children's needs were prioritised and addressed throughout the response and recovery. UNICEF Australia was guided by a child rights lens and launched a response in partnership with key local agencies to help address the key needs of children, drawing on the extensive global experience held by UNICEF (in 2019, UNICEF and its partners responded to 281 humanitarian situations across 91 countries).

Royal Far West is one of Australia's oldest and most enduring charities and is dedicated to the developmental health and wellbeing of Australia's 'country kids'. Established in 1924, Royal Far West provides an integrated service and offers health, education and disability services for country children and their families at the *Centre for Country Kids* in Manly, as well as virtually via Telecare and in local communities.

Through a team of more than 95 paediatric specialists, Royal Far West supports children aged up to 12 with a range of concerns including speech and language delays; behavioural and conduct disorders; early life trauma and mental illness; autism, attention deficit and hyperactivity disorders.

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*“Our family is forever thankful for the wonderful support we have been able to receive to help our kids after the frightening times experienced during this unprecedented bushfire period... It has been really tough this year and you are my touchstone, my place to go with the kids to get heard, supported and refocused. I seriously couldn't do it without you all.”*

SOUTH COAST MOTHER<sup>53</sup>

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UA identified RFW as an ideal partner due to the combination of RFW's deep existing relationships in rural and remote communities and the clinical expertise it holds in core elements of children's health. Following the 'Black Summer' bushfires, UA and RFW formed a partnership to deliver psychosocial support to children (aged 0-12 years) and their families. Both organisations understand the impact of disasters and emergencies on children's development and lifetime outcomes, and both share a common goal to improve the health and wellbeing of children and young people. Each organisation brings different but complimentary strengths to ensure that the needs of children are well understood and addressed through this program and, in the long term through advocacy at the national level to strengthen systems of emergency response and help to ensure that these become more sensitive to children's needs.

Children and families were already being supported by RFW when they were impacted by the bushfires of 2019/20. In response to the scale and trauma of the 'Black Summer', UA and RFW have created and delivered the *Bushfire Recovery Program* (The Program). The Program is based on evidence of what works best to support children and young people (particularly those aged 0-12), and is in response to the overwhelming unmet need to provide support to children, young people and their families after

disasters or large scale emergencies. This evidence emerged from a needs assessment conducted in fire-affected communities which identified underlying vulnerabilities in affected communities and a lack of mental health support for children less than 12 years of age.<sup>55</sup>

UA and RFW are working with children and the key adults that support them to improve resilience and wellbeing and decrease any negative long-term impacts for the children. RFW Multidisciplinary teams including social workers, occupational therapists, speech pathologists, and psychologists are deployed to work with children, parents and families, caregivers, teachers and local service providers in communities. Having such a diverse set of clinicians with this range of expertise, allows the team to adapt and respond flexibly to the needs of children.

The Program is focused on and responsive to the needs of the children. It has been developed to ensure children and community members in bushfire affected locations benefit from psychosocial support and mental health services that support recovery and develop resilience. The Program aims to achieve the following outcomes:

- **Children** receive direct psychosocial support through delivery of face-to-face and/or Telehealth activities to understand and manage the changes they have experienced as a result of the bushfires, understand that their reactions are normal, develop skills for coping, problem solving, and decision making, build peer support networks and restore self-confidence and self-esteem. The skills that children are learning during the group programs help them to cope with current difficulties and are useful to prepare for future challenges. Children who require additional support receive follow-up case management and clinical services provided by RFW face-to-face or via Telehealth.
- **Parents** and caregivers are gaining practical information and strategies to support their children during and after a disaster or emergency event, including knowledge of emotional and behavioural signs that may indicate that additional support is needed. Parents and caregivers feel more confident that they have the knowledge to access support for themselves and their families.
- **Educators** are gaining the knowledge and skills to provide psychosocial support to children in their care in relation to the impact of the bushfires.
- **Health and Social Service practitioners** are gaining the knowledge and skills to become more confident to support children and their families in their care in relation to the impact of the bushfires.
- **Community leaders** are developing the knowledge and skills to be confident to support children and their families as part of community recovery.<sup>56</sup>





The Program is both creative and flexible. Engaging resources are used, including

- Occupational therapy equipment such as theraputty, heavy balls, gym balls and a lycra tunnel. This equipment was used to provide heavy work breaks to support emotion and behaviour regulation. Children's books – particularly Birdie and the Fire<sup>57</sup> and the companion Birdie glove puppets, developed by Children's Health Queensland
- The *Storm Birds* resources from Good Grief<sup>58</sup>, and
- The *Community Trauma Toolkit* from Emerging Minds.

Telehealth therapy and support is used to provide ongoing clinical care to children and families, and allows RFW staff to continue to support educators. When COVID-19 prevents face-to-face engagement in communities, Telecare therapy and support can be utilised to deliver group activities.

The program can easily be modified to assist with trauma resulting from other disasters or large scale emergencies such as floods, cyclones, storms and drought.

## Benefits for children and families

Our approach provides many benefits to children, their families and to teachers. It is trauma-informed and conducted in both individual and group settings. Its approach engages the mind, the body and the heart – a holistic approach to learning and to recovery from trauma.

- Children are helped to understand their experience of bushfire, and the resulting changes.
- Priorities for each program are set by the schools and include:
  - How to develop coping skills and deal with change
  - How to express feelings during stressful situations
  - How to identify and regulate emotions
  - Managing anxiety
  - Mental Health support, and
  - Building and supporting resilience and wellbeing.
- As a result of participating, children, parents, caregivers and teachers:
  - Learn about community trauma and its impacts
  - Understand different reactions to trauma and stress
  - Learn approaches and strategies that can be used for self care and to support others
  - Understand the process of individual and community recovery and how to support ourselves and others in that recovery process
  - Understand and learn to regulate emotions and physical responses
  - Share stories, and
  - Support one another.
- Teachers learn about different resources and techniques that are available and can be used in the classroom.

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*“As families were slowly recovering from the fires the COVID-19 restrictions hit which brought more fear and uncertainty to children. Communities have been unable to access urgent mental health support because of travel restrictions. Through the Bushfire Response Program we have been able to adapt our services and reach families and children remotely by telecare.”*

ALEX CRAWFORD, CLINICAL PSYCHOLOGIST FROM THE BUSHFIRE RESPONSE PROGRAM TEAM AT RFW<sup>59</sup>

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## Why does our approach work?

Our approach is effective because it:

- Is evidence-based and collaborative
- Is community based and easily accessible
- Balances clinical and non-clinical support without 'pathologising' the children or their experience of disaster and recovery
- Is delivered by a multidisciplinary team of experienced Social Workers, Psychologists, Occupational Therapists and Speech Pathologists. Each discipline brings unique skills to meet the varied needs of the community and their combined wisdom/knowledge enhances the delivery of the whole program.
- Is flexible and tailored for individual circumstances and community context
- Involves the children, their families, their schools, and their community organisations – with children participating, playing, and learning without necessarily being aware of the clinical expertise that surrounds them and that participation, and
- Builds on local strengths and supports the local service system, contributing to sustainable support the children and young people will need beyond the life of the program.<sup>60</sup>







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# COMMUNITY BASED CASE STUDIES

UA, in collaboration with RFW, conducted a needs assessment process in ten fire-affected communities, after the 'Black Summer' fires. UA visited communities in order to understand existing services and support and to document service gaps, with RFW joining for some of these visits. Communities were selected based on the following criteria:

- Pre-existing factors affecting children and young people's wellbeing, such as drought
- When the community had been affected by fires over the summer period (early in the fire season or in 2020), and
- How the fires had affected the community – whether community members had evacuated, the number of buildings damaged or destroyed and lives lost.

For the southern NSW communities (including Towamba and Batemans Bay) UA and RFW visited the communities together, and held consultations with key stakeholders including emergency response services, local government, Service NSW, the Australian Red Cross, non-government services in the area, local health and education officials and members of the community. Conducting these visits was essential in order to develop an accurate understanding of how specific communities were affected, depending on their own circumstances and the particular character and impact of the fires in their location. Only by understanding the particular community experience, can UA and RFW (or any provider) identify the most appropriate resources and methods of delivery to support community recovery.

Key findings of this needs assessment shaped the subsequent delivery of services to affected communities:

## Separation/relocation

- Some families were separated during the fire event as different family members evacuated or stayed to defend the property, or left to stay with family and friends until it was safe to return.
- Some families have been separated in order to be rehoused (after the loss of their home in the fires).
- Some families have moved to new locations and enrolled their children in school, out of their usual area and friendship group.

## Ability to cope

- Children have been confused, anxious, easily upset and 'clingly', having nightmares or waking from sleep.
- Some parents were struggling to cope with financial stress, loss or damage to housing, mental health issues, and other changes.
- Some were finding it difficult to be available to their children to listen to their concerns and to help them to deal with the impact.
- There was an increase in domestic violence across affected communities.

## Access to support services

- Existing support services (e.g. Kids Helpline, Lifeline and Mensline) included child friendly spaces and psychosocial first aid services at local community recovery hubs, and some provided mobile outreach services for children (e.g. playgroups). Headspace delivered services to adolescents and young people (aged 12-25) in some locations.
- There were no programmes or services being provided specifically to primary school aged children (6-12 years). There were no psychologists in Eden and while there were some psychologists in other areas, distance was limiting access to these services.
- Support for families and children of pre-school age was required.
- Large Aboriginal and Torres Strait Islander communities had different needs and means of accessing services<sup>61</sup>.

RFW's multi-disciplinary team of clinicians (including social workers, occupational therapists, a clinical psychologist, and a speech pathologist) worked with fire affected communities to support children and their parents, caregivers and teachers. The team's experience and training included:

- Trauma informed practice
- Child Developmental Assessment
- A community trauma tool kit (developed by Emerging Minds)<sup>62</sup>
- The *Stormbirds* child group program (developed by Good Grief)<sup>63</sup>
- Teaching Recovery Techniques from the child group program with Children and War Foundation<sup>64</sup>
- *Birdie's Tree* social stories from the Queensland Centre for Perinatal and Infant Mental Health<sup>65</sup>
- Tuning in to Kids parent group program, and
- Trauma-focused cognitive behavioural therapy (TF- CBT).

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## CASE STUDY

### Towamba



Towamba is a small community in New South Wales, located in the Bega Valley Shire. It is located about forty minutes west of Eden and was one of the settlements established after Benjamin Boyd opened up the area to European settlement in the 1840s and 1850s. This community has a population of 234 people<sup>66</sup> and operates as a small service centre for the surrounding agricultural community.

The Bega Valley Shire is significantly disadvantaged based on the Index of Relative Socio-economic Disadvantage (IRSD).<sup>67</sup>

- Unemployment for this region sits at 15.4%.<sup>68</sup>
- 35% of children under 5 years of age are considered vulnerable.
- 18% of children under 15 years of age are affected by mental illness.
- 20% of young people between 15 and 18 years of age are affected by mental illness.<sup>69</sup>

Children in the community disproportionately experience health and developmental concerns including ADHD, behavioural difficulties, mental health concerns or diagnoses, or language delays.<sup>70</sup>

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*“It was great to learn what my kids have learned, so I can encourage and continue to develop good strategies.”*

PARENT

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The Bega Valley was experiencing a significant area of drought before the ‘Black Summer’ fires, with much of the area experiencing intense drought.<sup>71</sup> Over 60% (60.4%) of the Bega Valley Shire burned in the summer of 2019/2020. This represents 192,489 hectares and has had a devastating impact on the communities within this LGA.

For communities as small as Towamba, services are often not available locally. Families are asked to travel to larger hubs to receive support, but this is not always possible and leads to people feeling that they have been ‘forgotten’.<sup>72</sup>

A team of two RFW clinicians and one Be You clinician has been working collaboratively with the Towamba community to provide services for children 0-12, working with Headspace and the local family support service.

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*“Now I know that it’s OK to talk about how I feel.”*

CHILD

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#### Program elements that were agreed and delivered included:

- **An Educator Workshop** to enhance the understanding of trauma and its impact and to share strategies to support the school community following the fires
- **Delivery of Stormbirds** to students, in collaboration with a member of Be You/ Headspace to ensure mental health and wellbeing support would continue to be available to the school community into the future
- **Parent/Caregiver sessions** to provide personalised and tailored support to parents and caregivers
- **Connections to other services** supporting the community e.g. the *Far South Coast Family Support Service*, the *Family Referral Service*, *Playability* and *Headspace*, and
- **Additional Telecare support** for children and schools.



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## CASE STUDY

### Batemans Bay



Batemans Bay is a town on the South Coast of New South Wales and sits within the Eurobodalla Shire. Batemans Bay is the closest seaside town to Canberra and this makes it a popular holiday destination for residents of the national capital. Batemans Bay has a population of 11,294 and if surrounding beachside communities are included in this figure, the larger urban area of Batemans Bay has a population of 16,485.<sup>73</sup>

There is a strong Aboriginal and Torres Strait Islander community in the Batemans Bay area, making up 11.1% of the population.<sup>74</sup> The Yuin people of the Walbunja Clan are the traditional custodians of this area. A number of sites across the region are culturally significant to the Aboriginal peoples.

Batemans Bay sits as the northern gateway to the Eurobodalla Shire and the entire region is gaining national recognition as a centre for sustainable agriculture. Batemans Bay itself is known for Clyde River oysters and its fishing fleet. Tourism and hospitality are at the centre of the economy. The artistic and cultural community is strengthening with a growing art, dance and theatre component.

Eurobodalla Shire is significantly disadvantaged based on the Index of Relative Socio-economic Disadvantage (IRSD).<sup>75</sup> The region experiences high levels of unemployment, domestic violence and homelessness. All age demographic groups below 60 years are lower than the national average. This may lead to lower investment in services that support children and young people.



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*“This was a great opportunity for my daughter to develop more tools and strategies and to express her feelings with her peers.”*

PARENT

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- Unemployment for this region sits at 13.4%.<sup>76</sup>
- 41% of children under 5 years of age are considered vulnerable.
- 19% of children under 15 years of age are affected by mental illness.
- 21% of young people between 15 and 18 years of age are affected by mental illness.<sup>77</sup>

In the local Primary Schools, a disproportionate number of children experience health and developmental concerns including diagnoses of ADHD, intellectual disability, language disorders, behavioural difficulties, mental health diagnoses and trauma backgrounds.<sup>78</sup>

Prior to the fires, the Eurobodalla region was drought affected, with much of the area south of Batemans Bay directly experiencing drought throughout 2019. The 'Black Summer' fires affected the region from November 2019 through December with widespread devastation occurring on 31 December 2019. Extensive flooding then occurred in the Shire, six weeks after the peak of the fires, in February 2020.<sup>79</sup>

Over 80% (80.7%) of the Eurobodalla burned in the summer of 2019/2020. This represents 271,000 hectares of land burnt, which has had a devastating impact on the communities within this LGA.<sup>80</sup> Tragically 3 lives were lost during the fires, and 500 homes were destroyed. The area has been experiencing high levels of homelessness, domestic violence and drug incidents since the fires, with children and young people demonstrating hyper vigilance about fires and weather, increased levels of emotion, tears and anxiety (particularly about the location of parents and siblings)<sup>81</sup>.

A team of six clinicians has been working collaboratively with local schools and pre-schools..



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*“It’s Ok to feel upset when these kinds of things happen.”*

CHILD

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#### Program elements that were agreed and delivered included:

- **Delivery of Children’s Groups** – based on the Stormbirds program and using additional resources such as the ‘*Birdie and the Fire*’ and ‘*Hey Warrior*’ storybooks. The children attending had very often experienced direct contact with the fires, loss of property and pets, and had ongoing difficulties with housing. The process included a combination of body-based activities and developed coping skills and involved teacher’s aides from the school, so that the children had an adult in the room with whom they had an ongoing relationship.
- **Educator Workshops** delivered to teachers, by an occupational therapist and a clinical psychologist. This session focused on community trauma, responses to trauma in children and adults, and strategies to support children in the classroom. In response to a request from the school, there was a specific focus on body-based strategies and making use of donated occupational therapy equipment (e.g. a lycra tunnel, weighted balls, rubber tubing, theraputty and gym balls).
- A **Parent Group Session** focused on community trauma, trauma responses, emotion coaching and strategies to support children and their families.
- **Preschool sessions** for children and teachers using the *Birdie and the Fire* story and puppets, activities and crafts for the children, sharing and talking about the experience of the fires, and staff support and sharing.
- **Additional Telecare sessions** for specified children and follow up online support for schools.



## The story of Jack\*

\*To respect the privacy of our program beneficiaries, we have changed the names of the individuals in this story. We have also not included images of the children and family due to child protection policies and procedures at UNICEF Australia.

Jack is 10 years old and lives with his family in a small town on the South Coast of NSW. During the summer of 2020, bushfires burnt around Jack's home and the children were evacuated to their grandmother's house further up the coast. This was extremely distressing for the children, especially since their mother stayed behind. The family was eventually reunited at home after travelling eleven hours through thick smoke - a journey that usually takes two hours. Once home, they were relieved to discover their house had not been burnt, but it was full of smoke and ash and they were without electricity for several days. The thick smoke lingered for weeks and the children could not play outside. Jack and his siblings were traumatised and frightened by this experience.

Jack became quiet and withdrawn and would startle easily. His teacher said that he was struggling to concentrate and was quieter than usual, even with his friends. Jack's younger sister had become very "clingy" and was scared whenever she heard or saw a fire truck.

A local social worker provided information to Jack's mother on resources and services that could help the children. As part of the Bushfire Recovery Program, Jack benefited from seeing a care team - this included sessions with a psychiatrist, pediatrician, dietitian, occupational therapist, and social worker. Between appointments, he enjoyed fun activities at school and a recreation program. He particularly loved dodgeball and boxing. His younger sister enjoyed the crafts and getting messy with shaving foam. Through this program, Jack's mother Katie received an extra psychology session and was given information on the impact of disaster trauma on children, along with resources and ideas how to best support them. This included the importance of re-establishing and maintaining routines, opportunities for special time together and child led play, shared reading, emotion coaching and the vital importance of also taking care of herself.

Just as the family was slowly recovering from the fires, the COVID-19 restrictions hit, bringing further fear and uncertainty. Home schooling has been hard for Jack as he misses his teacher and he needs his mother to supervise all lessons. In addition, he has not been able to see his grandmother and worries about her because she is not well.

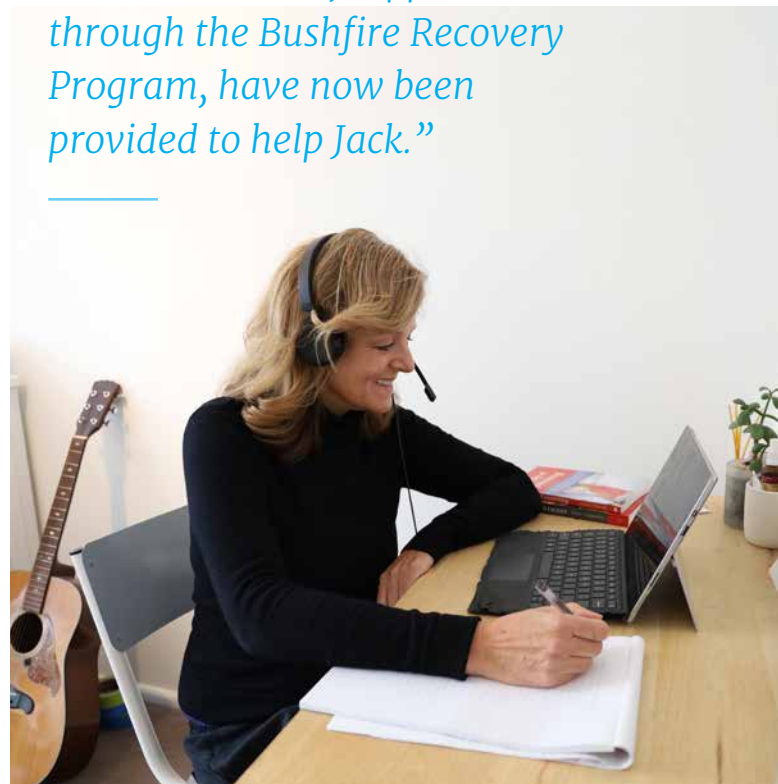
The Bushfire Recovery Program team will attend the local school to offer support to Jack's teachers and his friends once the COVID-19 travel restrictions are lifted. In the interim, Jack and his family receive Telehealth remotely from the bushfire response program team. His mother is now feeling more hopeful about Jack's recovery due to the continued support.

Occupational Therapist Emily Barton explains how her Telecare sessions are making a difference for Jack.

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*“Due to a number of factors, including the recent bushfires, family disruptions and home relocations, Jack has experienced increased difficulties. This has resulted in increased internalising of emotions, elevated stress levels and low overall confidence in abilities. Weekly 30-minute telecare sessions, supported through the Bushfire Recovery Program, have now been provided to help Jack.”*

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The Bushfire Recovery Program is making it possible for children like Jack to receive the best clinical care.



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*“I learned how to identify students in my classroom who might be experiencing trauma, and strategies to use in the classroom, to help those students deal with that trauma.”*

*“Children learn ways of understanding what they have been through. They hear a story, get helpful visuals, and learn a simple (age appropriate) understanding of the theory behind trauma and recovery.”*

TEACHERS

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## Outcomes and Lessons Learned

UA and RFW's *Bushfire Recovery Program* is helping children and young people recover from the significant distress caused by the 2019/2020 bushfires and their impact. Children and young people are re-engaging with their learning and are supported to strengthen their wellbeing and face the future with confidence. As of January 2021, this program has delivered the following outcomes:

- **Over 35 fire affected communities have been supported** through work with children and young people to increase their resilience.
- **10 Communities participated in a needs assessment** to inform approaches to best support those children and young people.
- **635 children have received direct psychosocial support** through group programs/sessions including Stormbirds Program for Primary School children and Birdie's Tree Resources for Pre-School children (143 of these children identify as being Aboriginal or Torres Strait Islander and 22 identify as being from a culturally and/or linguistically diverse background).
- **45 children** who have required additional health/mental health/psychosocial support **have received follow-up case management and clinical services** (Psychology, Speech and/or Occupational Therapy) via Telecare.
- **1113 supporting adults** (parents, carers, educators, health professionals, and relevant community members) **have benefited from focused psychosocial support/training and capacity building to support the children they care for** (348 of these are educators, 643 are parents and caregivers, and 122 are other professionals).
- **2988 children have received indirect psychosocial support**, benefiting from the upskilling and capacity building of educators (572 of these children identify as being Aboriginal or Torres Strait Islander and 98 identify as being from a culturally and/or linguistically diverse background).

We learn so much from the communities we work to support.



## Key Learnings

- **Each community will be affected differently by these events and will have their own path to recovery**
- It is essential to understand each community context by engaging with the local community before determining the best approach to design and implement to support them
- It is essential to work collaboratively with the community at all stages of the process to give them choice and maintain the local community focus
- Pre-existing factors such as drought and socioeconomic wellbeing will have a significant impact on how (well) a community will recover after a disaster or emergency event
- The scale of each disaster or emergency event contributes to its impact on the community – including whether community members must evacuate or not, whether buildings and lives are lost, and how much area is affected
- Rural and regional communities are already disadvantaged with less access to a wide range of community support and services, and therefore they will be disproportionately affected by any emergency or disaster, and will need additional support
- Assisting children and young people early in their lives and quickly after any trauma or disaster, provides benefits in the short term, during their childhood and through to their adult years, and
- Recovery is a long journey and support will be required for many years.

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*“At first I really didn’t like telling people about my problems and feelings, but now I feel better when I do that.”*

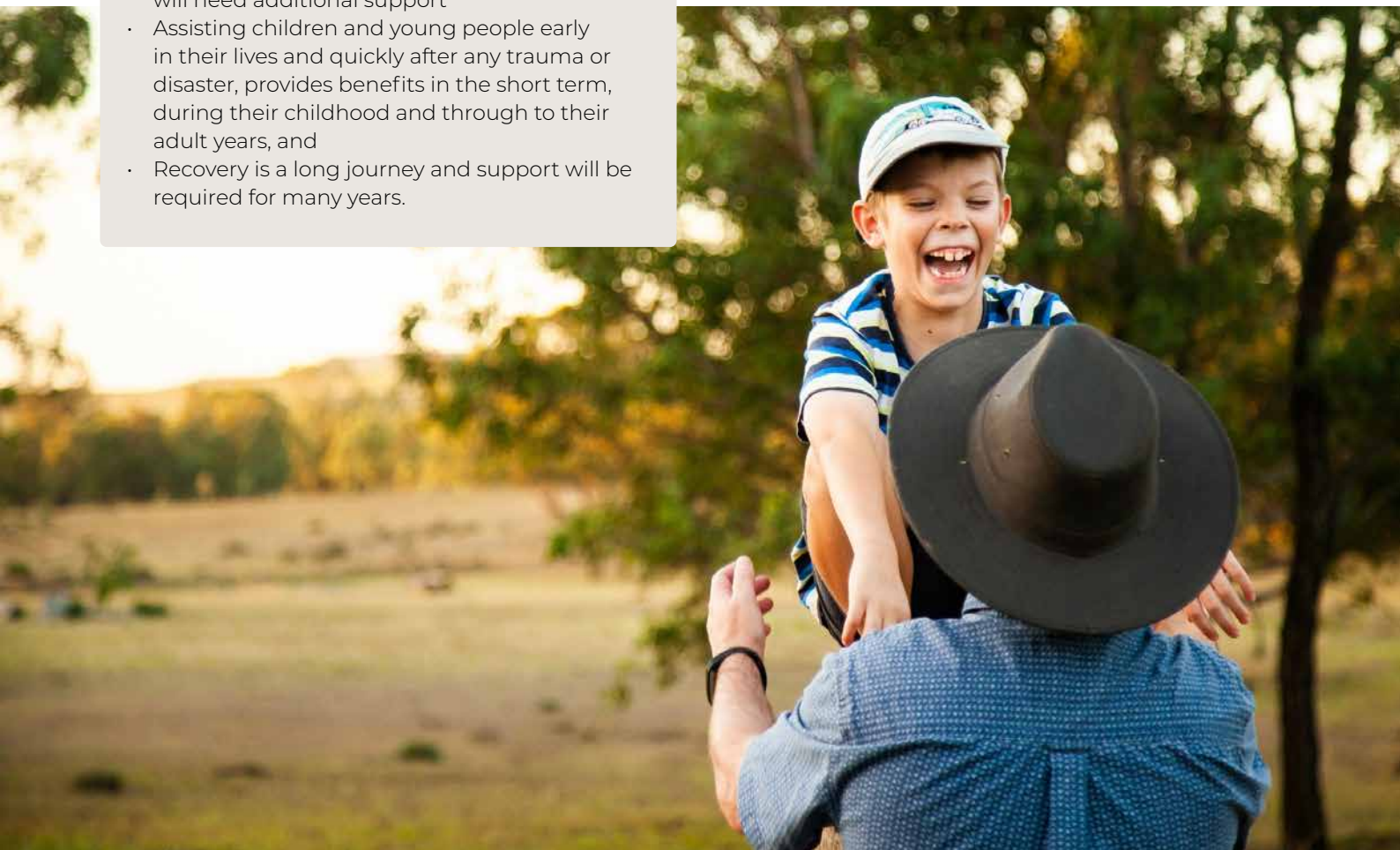
CHILD

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*“We all enjoyed learning about ways to calm down when we are having strong feelings. My daughter learned that it is important to express her feelings, and that no-one will judge her. And the games were fun!”*

PARENT

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# HOW OUR LEARNING INFORMS THE FUTURE

Given climate change, it is likely that many more Australian children and young people will be affected by disasters or emergency events in the future. Extreme weather events are going to continue with increasing intensity and frequency. These events have a disproportionate effect on disadvantaged communities and the children and young people who live there, resulting in disastrous consequences in these locations. These extreme weather events and disasters have significant impacts on housing, employment, education, physical and mental health and wellbeing.

Developmental inequities for children are based on a range of intersecting characteristics related to where they live, whether they can readily access health and other services, how well they are supported during any crises or emergencies, and whether they experience additional trauma in their lives. Children and young people exposed to bushfires and other large-scale emergencies are at increased risk of poorer wellbeing outcomes, and these occur disproportionately to those children who already experience these 'compounding factors', inequities and disadvantages.<sup>82</sup>

The engagement and participation of families, caregivers, communities and children themselves is central to combating this disadvantage and strengthening environments that support children's development and securing their wellbeing and future potential.<sup>83</sup> We can do more to support children and young people before, during and after a disaster or emergency event.

The following call to action is based on our own research, learning and practice as we work with communities. It aligns with calls from across the early childhood and disaster resilience sectors for more to be done to support children and young people in the face of an increasingly challenging future. We believe that our experience is useful for governments, businesses, non-government organisations, community based organisations and service providers.

## Research and evidence

It is essential that governments and organisations that support children and young people have an evidence based understanding of the impact of emergency events, in the immediate and long term and across all aspects of development and wellbeing. It is also essential that we have an evidence-based understanding about what constitutes an effective intervention. Extensive reviews of research literature reveal several studies that investigate the impact of emergencies on children and young people, however there are no studies that investigate effective interventions to reduce the risk of the impact of such events.<sup>84 85</sup>

There are many ethical and practical challenges of conducting research in post-traumatic settings<sup>86</sup> and these contribute to a lack of evidence about which interventions<sup>87 88</sup> provide the greatest support.

Some excellent studies have been undertaken and frameworks developed to guide interventions, however we call for more funding for this research.

## Policy and Frameworks

Australia does not have one cohesive national policy statement or framework designed to support children and young people and their resilience in the face of increasing complexity in the modern world, including disasters or large scale emergencies.

There is an increasingly desperate need for child focused policies, frameworks, programs and resources to understand children and young people's experience of disasters and trauma, and to support strong outcomes for children and young people in the short term and across their life course. We add our voice to those calling for child and youth focused policies and frameworks to address all stages of a child's development, the multiple determinants of disadvantage, and all phases of disasters; preparation and planning, response, relief and recovery.<sup>89</sup>

There is also an increasing need for a wide range of existing policies, as well as new policies, to reflect the needs, contexts and aspirations of children and young people. This will enhance their immediate childhood outcomes, to ensure their ongoing development and wellbeing and to maximise their lifelong outcomes as members of our society.

We believe that a cohesive national policy statement or framework is needed to support children and young people and ensure their development and wellbeing. Such a policy or framework should be inclusive of all key issues that face children and young people in a modern and complex world – including disasters and emergencies. It should include core principles and provide guidance for all organisations (government nor nongovernment) who provide services or support to children and young people. The development of a such a policy should include the voices of children and young people and key organisations that support them.

## Investing in children and young people

The evidence for early investment in children's health, education and development is clear and such investment has benefits that compound throughout a child's lifetime, for their future children, and for society as a whole.<sup>90</sup>

We support the numerous submissions to the *Royal Commission into National Natural Disaster Arrangements* (2020) calling for long-term, community based, child centred interventions and strategies.<sup>91</sup> They call for the active involvement of children in decision-making at all stages of the emergency management cycle (planning, preparation, response, relief and recovery) and including activities that occur in their own communities. We also support calls for consultation and engagement with children, and funding for school based post-disaster recovery interventions.<sup>92</sup> These voices are joined by the Productivity Commission's inquiry into mental health<sup>93</sup>, and the work of key researchers working with children after disasters and emergency events.<sup>94</sup> Together we call for long-term multidimensional services and resources to promote mental health, human rights, social inclusion and wellbeing for children and young people.

There is increasing evidence that Hobfoll's principles of psychosocial support are effective in guiding and informing effective interventions to restore and support resilience in the early to mid stages of any disaster recovery process. These are to support and promote:

- a sense of safety
- a sense of calm
- a sense of self and community efficacy,
- a sense of connectedness, and
- hope.<sup>95</sup>

We hope that more can be done to develop the essential skills and behaviours that successfully incorporate these principles into daily living and disaster responses, within the context of a connected and engaged local community and service system.<sup>96</sup>

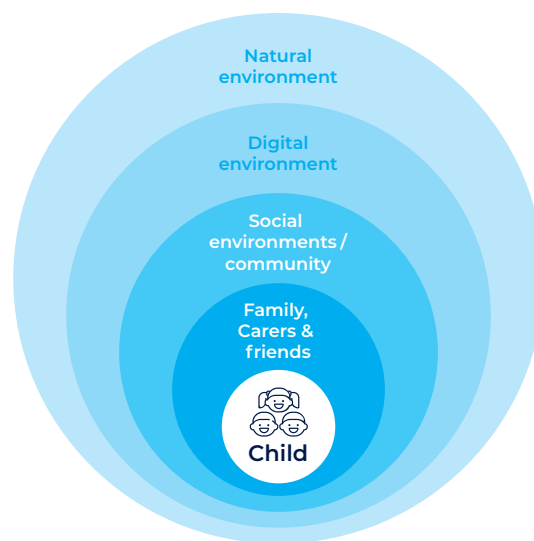
These principles now inform internationally recognised and respected approaches to psychological first aid and psychosocial support<sup>97</sup> and align closely with UNICEF's mental health and psychosocial support guidelines.<sup>98</sup> Basing intervention design and delivery on these principles of community based mental health and psychosocial support ensures that

- Physical, social, cognitive, emotional and spiritual elements are all included
- The optimal development and wellbeing of the child is central
- Community characteristics, knowledge and capacities are understood and utilised
- Children and young people, their families, caregivers and communities are all engaged to ensure the development and wellbeing of the child, and
- Local support systems are strengthened.<sup>99</sup>

Programs and interventions are needed, with important additional characteristics including:

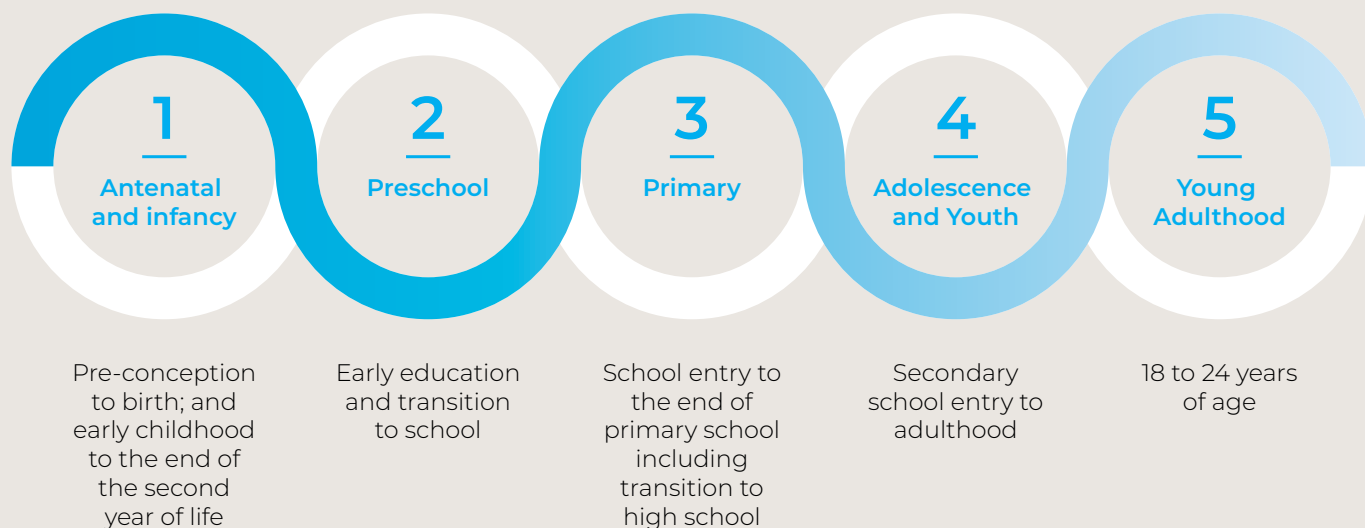
- Person-centred, early intervention and prevention based
- Inclusive of the full spectrum of community support and clinical services
- Accessible wherever people live
- Reflective of the cultural, social and clinical preferences of the person
- Delivered by a skilled workforce
- Supported by technology and comprehensive governance
- Responsive to local needs, and
- Able to be readily 'ramped up or down' as needs change or disasters and emergencies occur.<sup>100</sup>

Taking a person centred (in this case child centred) approach to wellbeing for children and young people is essential, as this recognises the multiple determinants of health and wellbeing and places the children in a social ecological context, reflecting how children live and develop, and the complexity of factors that influence their development and wellbeing.



**Figure 1.** The Social Ecological Model (used by UNICEF and adapted from Bronfenbrenner)<sup>101</sup>





**Figure 2** Key life stages for children and young people<sup>102</sup>

Taking a life course approach to program design and intervention is also essential to recognise the evolving risks and needs that children and young people face from infancy through to early adulthood. Across this life course there are key transition periods, which will further influence a child's development, health and wellbeing. Understanding these is an essential element when planning and delivering community based interventions before, during or after disasters and emergencies.

## Take a local community based approach

There is a great deal of pressure on small communities to support locally affected families and community members before, during and after emergencies. Many communities feel overwhelmed by offers of support and a lack of coordination. This places pressure on a small number of community based services and leaders to ensure that coordination locally. This is exhausting and unsustainable in the long-term. The inevitable fatigue for key community members is an issue that requires attention and support, best achieved through an established set of collaborative locally based relationships and appropriate education and support.

School based disaster resilience programs are important as they focus on social, emotional, learning and vocational support for children and teenagers, to mitigate disaster related mental health impacts and poor educational outcomes.<sup>103</sup> Multidisciplinary approaches bring together health, education, and physical/social development and

are internationally recognised as being the most effective.<sup>104 105</sup> Approaches that focus on the health and wellbeing of children and young people, and coordinate local services and supports to strengthen the local service system are more likely to succeed and reduce the impact of disadvantage and large-scale emergency events.

Approaches built from these elements create reinforcing and sustainable support systems in local communities, with parents, caregivers, teachers and services more able to support children and young people, and greater awareness and skills leading to increased self esteem and long term health and wellbeing outcomes.







# KEY RECOMMENDATIONS

## ○ Strategic and Contextual

1

### **Strengthen key National and State/Territory policies and frameworks (economic, environmental, health, education, infrastructure, and social) so that they;**

- a. Reflect a holistic focus on the wellbeing of our children and young people, including those affected by bushfires and other disasters or emergency events
- b. Place the best interests of children and young people at the centre of policies that affect them
- c. Reflect the circumstances and contexts within which children and young people live and grow, including any existing trauma or disadvantage, and
- d. Prioritise their needs and aspirations
- The *National Children's Mental Health and Wellbeing Strategy* should include action to support children and young people affected by natural disasters (e.g. bushfire, flood, cyclone and drought) and other traumas (e.g. COVID-19).
- Strengthening key policies and frameworks would recognise the multiple and the complex determinants of children and young people's health and wellbeing including pre-existing disadvantage and trauma.
- Effort and consideration are required to understand children's strengths, aspirations, needs and vulnerabilities.
- Policies and frameworks should also consider the needs and capacities of parents and caregivers, and the services and professionals that support children and young people.
- These policies should be developed or strengthened through a consultative and inclusive process, including the participation and 'voice' of children and young people.

2

### **Strengthen disaster resilience policy and practice to focus on the specific needs of children and young people** taking into account contextual factors that surround disasters and emergency events – in particular the geographic location in which they occur, with most natural disasters occurring **in regional and rural areas of Australia**.

- This recognises that many children, families and communities face multiple layers of disadvantage such as an over-representation of pre-existing exposure to trauma and/or mental health challenges coupled with greater issues in accessing services – this 'double disadvantage' is then amplified by natural disasters.
- This also recognises that support provided before, during and after natural disasters needs to be delivered with a trauma-informed approach, which can also deliver widespread mental health support in community based and non-threatening settings.

3

### **Commission a review** of relevant policies and frameworks that guide disaster planning, response and recovery efforts to ensure the unique needs of children are specifically identified and addressed.

4

**Increase early and equitable access to locally provided health programs and services** (including allied and mental health) for all children and young people regardless of their personal and family circumstances or where they live.

- This access would include currently underrepresented and disadvantaged children and young people e.g. Aboriginal and Torres Strait Islander children; those in the child protection, out-of-home care and justice systems; those living with a disability, or physical or mental health condition; those from rural and regional areas; those with complex needs; and those living in disadvantaged locations.
- This requires an increase in mental health promotion to raise awareness and prevention, and increase access to services, particularly in areas of increased risk or need, and low service engagement.
- This would also include increased access to flexible models of service delivery (e.g. Telehealth).

5

**Fund research** (in collaboration with service providers) to **understand the needs and 'voice' of children and young people**, and the interventions and responses that most support them, particularly those who are affected by trauma and disadvantage.

- This includes the needs of children and young people living with multiple disadvantage and those affected by disasters, emergencies and trauma.
- Much of this research would be community based and take account of local community circumstances and context.
- This research would identify the approaches that are most needed to address these needs, evaluate and identify the approaches that are most successful in supporting strong outcomes and wellbeing for these children and young people, and identify those organisations and partnerships that are able to implement these approaches.

6

**Take action to mitigate the broader impacts on children's wellbeing**, including climate change, intergenerational trauma, and the multideterminants of disadvantage.

- This includes taking action to reduce emissions and mitigate the effects of climate change, and to reduce the rate of this change and the severity of its consequences for human populations including children and young people.
- It includes considering the needs and aspirations of children and young people in economic and other policies and programs, to reduce inequity and disadvantage.
- It also includes investing in mental health services (particularly in rural and regional areas) so that locally based service systems are able to better respond to surge demand during times of drought, extreme weather events, or when crises such as the current COVID-19 pandemic occur.

7

## Before the next crisis – preparation and planning

**Collaborate and coordinate across sectors** (including governments, non-government organisations, business, philanthropy, community based organisations) **to fund, develop and support multifaceted, collaborative and coordinated approaches to;**

- Educate communities about the impact of trauma on children and young people**
- Enhance emergency response approaches within sectors, and**
- Improve resilience in our children and young people.**

- Cross-sector collaboration includes sharing resources, co-designing and funding multi-disciplinary programs and services, establishing both interagency and local relationships to support communities and the children and young people within them.
- The purpose of such collaboration is to reduce complexity, duplication and overlap, and to address gaps in service delivery to support children, young people and their families in the communities in which they live.
- Multifaceted approaches include both clinical and non-clinical trained personnel from a range of disciplines to provide specialised, holistic and integrated services and support.
- Integrating these approaches builds the capacity and 'mental health and disaster literacy' in children, young people, parents, caregivers, teachers and communities



8

**Establish a preferred panel of providers** that are 'fit for purpose' to respond to the range of disasters and emergency events, including providing support to children and young people, their parents and caregivers, service providers and communities (before, during and after disasters and emergency events)

- This would include requiring that those service providers that work with communities (including rural and remote communities, Aboriginal and Torres Strait Islander communities, Culturally and Linguistically Diverse communities and others) have knowledge and experience of working with those communities and a strong understanding of the complexities that they face.
- This would also include evidence based, specialist trained, and 'disaster ready' organisations and multi-discipline partnerships, so that deployment during or after a disaster or emergency is timely, efficient, and effective.

9

## During Disaster Response and Relief

**Support emergency response and relief agencies to include the needs of children and young people in their approaches and practices.**

- This includes meeting the needs of children, young people and their families and caregivers during the response and relief phases of any disaster or emergency e.g. in community 'hubs', and in response, evacuation or relief centres.
- A multifaceted and multidisciplinary approach should be taken to the provision of this support to agencies and therefore to children and young people.
- Such approaches should also strengthen the longer term provision of such support by including and working in collaboration with local services throughout relief and recovery.
- A balance of clinical and non-clinical elements is beneficial during this disaster phase e.g. a combination of mental health and trauma trained specialist support, along with games and activities for children and young people to access.

10

## Throughout Disaster Recovery

**Fund practical multifaceted programs and approaches** that support children and young people – improving mental health, psychosocial and wellbeing outcomes for children and young people affected by disasters.

- Ensure that this funding is sufficient for development, implementation and evaluation of approaches to further enhance the evidence base about what works best to support children and young people.
- Reflect a long-term commitment of at least 5-10 years, recognising the long-lasting impacts of natural disasters for children, and ensuring a focus on reducing the likelihood of long-term adverse impacts into adulthood.
- Understand that these interventions occur in a community context, taking into account particular locations, specific hazards, and the local service system.
- Ensure that these interventions are shaped by the community context and needs, and include collaboration with the community. This needs to include acknowledgment and understanding that each community is different, even though several communities may have been impacted by the same natural disaster. Working in collaboration with communities and local providers is the best way of supporting existing strengths and ensuring that recovery efforts can be long-term and sustainable.
- That any planning/funding/programming, especially for children, should provide ongoing support across all disaster phases including preparedness, response and recovery, respecting that each of these phases requires a different focus and approach to deliver child centred support, which listens to 'the child's voice'.
- Funding should be directed towards services that include a balance of clinical and non-clinical services and support and can provide programs using a range of modalities, for example combining face-to-face delivery with Telehealth services. This enables consistent and flexible support for those more isolated communities.
- Approaches should also build on and support local capacities, resources, organisations and services while providing (additional) external support when it is most needed<sup>106</sup>.

# RECENT DISASTERS - THE AUSTRALIAN CONTEXT

## ATTACHMENT A

During 2019/2020 Australia experienced a wide range of severe weather conditions and events, argued to be one of the most significant in modern history.<sup>107</sup> A number of factors contributed to these disasters including that this was the sixth driest year on record – 24 per cent below the long-term average, and that December 2019 was Australia's hottest recorded month.<sup>108</sup> It is important to understand that extended dry conditions, with below average rainfall, had affected Australia for several years, leading to significant areas of drought in the Murray-Darling basin, across Eastern Australia, and along the west and south coasts of Western Australia.<sup>109</sup>

During this period, the Australian Government Crisis Centre issued more than 1500 incident notifications to key stakeholders across federal and state levels of government.<sup>110</sup> Domestically these incidents included:

- Bushfires occurring as early as July 2019, and including the fires referred to as the 'Black Summer' bushfires (September 2019 to February 2020) in:
  - South-eastern Queensland (QLD)
  - North-eastern New South Wales (NSW) South-eastern NSW and eastern Victoria (VIC)
  - The southern coast and Kangaroo Island, South Australia (SA)
  - South-western areas of Western Australia (WA), and
  - The Australian Capital Territory (ACT).
- Major Storm events across South East Australia (August 2019), NSW (November 2019 and January 2020) and both Victoria and the ACT (January 2020)
- Cyclone events in Western Australia, the Northern Territory and Queensland (January and February 2020)
- NSW floods (February 2020), and
- The Coronavirus (COVID-19) pandemic (December 2019 - ongoing).<sup>111</sup>

The 2019/2020 bushfire season was particularly devastating across Australia. Hundreds of fires burned simultaneously across all states and territories, stretching the resources and coping capacity of emergency response agencies and communities alike.

As of May 2020:

- Fires had burned over an estimated 35.8 million hectares of land across Australia, equaling an area 5 times the size of Tasmania.
- More than 3000 homes and 7000 facilities and outbuildings were destroyed.
- 33 people died (9 firefighters and 24 community members) with thousands more affected by smoke

inhalation and heat as a result of the fires and the summer.

- More than 100,000 head of livestock perished.
- Six of Australia's 19 World Heritage Properties (including approximately 82% of the Greater Blue Mountains Area) were burnt.<sup>112</sup>
- Nearly three billion native mammals, birds, reptiles and frogs were either killed or displaced, 750 animal species now identified as in need of urgent attention<sup>113</sup> and some endangered species now believed to be extinct.<sup>114</sup>
- It is estimated that nearly 80% of Australians were either directly or indirectly affected by the bushfires.<sup>115</sup>

As evidence of the further complexity that can emerge as a consequence of a disaster of this scale, significant smoke clouds blanketed towns and regions from Sydney to Melbourne, reaching Auckland in New Zealand and detected 10,000 kilometres away in South America.<sup>116</sup>

## National Disaster policies and frameworks

Following the 'Black Saturday' fires in 2009, Australia developed a *National Strategy for Disaster Resilience* (2011)<sup>117</sup> and frameworks such as the *National Disaster Risk Reduction Framework* (2018)<sup>118</sup>. Australia's *National Strategy for Disaster Resilience* (2011) (the Strategy) was agreed by the *Council of Australian Governments* (COAG). The Strategy acknowledges the increasing severity and frequency of extreme weather events and the disasters that follow them. It calls for need for a coordinated, cooperative national effort to enhance Australia's capacity to withstand and recover from future emergencies and disasters. The Strategy describes disaster resilience as the collective responsibility of governments, business, the non-government sector and the community.<sup>119</sup>

The 'Australia-New Zealand Emergency Management Committee' (ANZEMC) is the peak government committee responsible for emergency management in Australia and New Zealand. ANZEMC reports to the Ministerial Council for Police and Emergency Management. ANZEMC is responsible for influencing and advocating for national policies and capabilities that reduce disaster risk, minimise the potential for harm and uphold public trust and confidence in emergency management arrangements. ANZEMC's vision is to



create 'a nation that is prepared for, and resilient to, natural and human caused events, in particular those with severe to catastrophic consequences.'<sup>120</sup>

The 'Social Recovery Reference Group' (SRRG) is an independent advisory group working to the ANZEMC's *Community Outcome and Recovery Sub-Committee* (CORS). The SRRG has been established to support the development of policy and planning relating to the human, social and community consequences of disasters. It has developed the *National Principles for Disaster Recovery*, to guide disaster recovery efforts. These have been reviewed and enhanced by community members who have themselves experienced a disaster or emergency event and the subsequent community recovery process.

The *National Principles for Disaster Recovery* are particularly relevant as a guide for community based intervention, and provide clear guidance to support individual and community resilience and recovery:

- **Understand the context** - Successful recovery is based on an understanding community context, with each community having its own history, values and dynamics
- **Recognise complexity** - Successful recovery is responsive to the complex and dynamic nature of both emergencies and the community
- **Use community-led approaches** - Successful recovery is community-centred, responsive and flexible, engaging with community and supporting them to move forward
- **Coordinate all activities** - Successful recovery requires a planned, coordinated and adaptive approach, between community and partner agencies, based on continuing assessment of impacts and needs

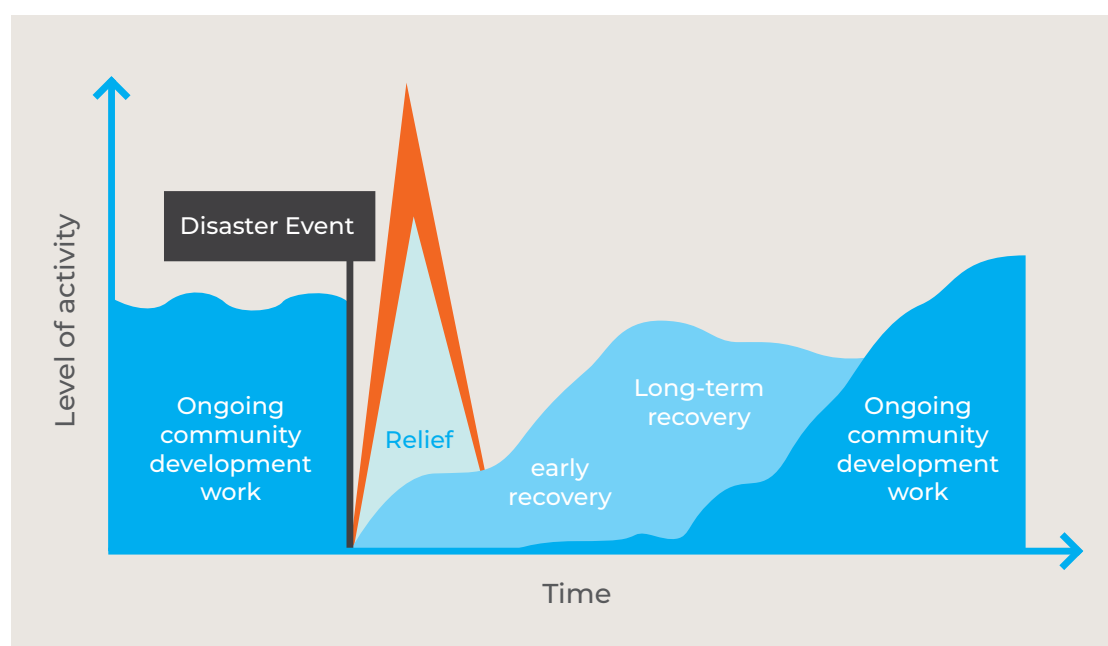
- **Communicate effectively** - Successful recovery is built on effective communication between the affected community and other partners, and
- **Recognise and build capacity** - Successful recovery recognises, supports, and builds on individual, community and organisational capacity and resilience.<sup>121</sup>

## Disaster Phases and Human Responses

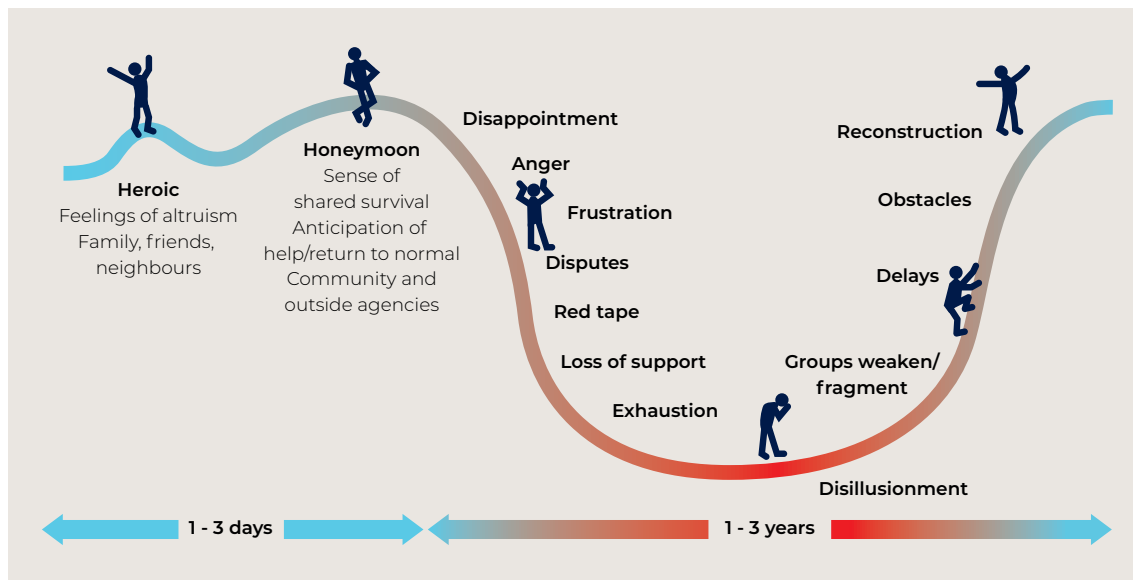
Natural disasters and extreme weather events are by their nature complex. Their effects are ultimately determined by a unique combination of key factors including:

- The scale and intensity of the event itself and the effectiveness of the emergency response
- How populations live within the affected landscape (before, during and after the crisis)
- The type of preparation and planning and the degree to which this has been undertaken across the community
- The pre-existing nature of the community (its history, agency and social capital)
- The effectiveness of relief and early recovery efforts
- The government, and non-government approach to early and long-term recovery, and
- The degree to which the community is effectively engaged in all aspects of the disaster or emergency.<sup>122</sup>

The figure below illustrates how a rapid onset disaster interrupts life within the affected community, and how the community re-establishes its level of functioning over time.



**Figure 1:** Effect of disaster on ongoing community development and interface with relief and recovery<sup>123</sup>



**Figure 2:** Human response after a bushfire or similar disaster has occurred.<sup>124</sup>

Human responses after a bushfire or major emergency vary depending on the degree to which each person was affected, their pre-existing resilience and life circumstances, any previous trauma suffered, and the support system that surrounds them. A range of psychosocial and emotional responses is to be expected during the relief and recovery phases of any crisis.

## The Royal Commission into National Natural Disaster Arrangements

Following the 'Black Summer' fires in 2019/2020, a *Royal Commission into National Natural Disaster Arrangements* (2020) (The Commission) was established to examine disaster management coordination during all phases of the disaster, as well as improving resilience, adaptation and mitigation. The Commission recommended that state and territory government continue to deliver, evaluate and improve education and engagement programs aimed at promoting disaster resilience for individuals and communities.<sup>125</sup>

While submissions were made to the Commission about the particular consequences for children and young people, and 24 sets of recommendations were made about a wide range of issues related to aspects of disaster preparation, response and recovery, no specific recommendation was made to support action or change for children and young people.

The most relevant recommendations call for community education about disaster preparation, emergency warnings and education to promote and develop disaster resilience. This lack of attention to support the mental health of our children and young people after a significant national trauma is a lost opportunity and demonstrates a gap in our national attention.

## AUSTRALIAN POLICIES FOR CHILDREN

### ATTACHMENT B

Australia does not have one cohesive national policy statement or framework designed to support children and young people and their resilience in the face of increasing complexity in the modern world, including disasters or large scale emergencies.

Australia's *National Framework for Protecting Australia's Children* (2009-2020) focuses primarily on the issues of child abuse and neglect, with actions to assist parents to look after their children, help young people in out-of-home care, and help organisations to protect children and young people.<sup>126</sup> This framework makes no specific reference to disasters or other large-scale emergencies.

Australia's *Healthy, Safe and Thriving: National Strategic Framework for Child and Youth Health*<sup>127</sup> and the *National Action Plan for the Health of Children and Young People: 2020-2030*<sup>128</sup> take a life course approach to the (primarily physical) health of children and young people. These frameworks recognise the evolving risks and needs of children through infancy, childhood and into early adulthood, however they do not make reference to the specific trauma of disasters or emergencies.

The "Children's Rights Report 2019 – In Their Own Right" outlines how children's rights are protected and promoted across Australia. While this report makes no reference to the trauma and other impacts on children affected by disasters and emergencies such as those extreme weather events, it covers many



important issues for children's lives including children's participation in issues that affect them, safety and wellbeing, education, justice, and health.<sup>129</sup> Children's Commissioners and Guardians are in place in all states and territories. These Commissioners and Guardians have a clear commitment to enhancing the wellbeing and life outcomes of children and young people. The NSW Advocate for Children and Young People has been particularly active releasing a Strategic plan for Children and Young People in NSW and conducting a consultation process to engage children and young people to develop *Children and Young People's Experience of Disaster*<sup>130</sup>.

In August 2019, the Federal Government announced a *National Children's Mental Health and Wellbeing Strategy* focusing on the 0-12 age group, to prevent mental health illness and reduce its impact on children and young people, and their families and communities. This strategy is part of the *Long Term National Health Plan* providing a 2030 mental health vision.<sup>131</sup> The ongoing development of this strategy is a positive development and provides an opportunity to improve the lives of children and young people across Australia. We hope that this strategy will acknowledge the multiple determinants of health and wellbeing (including socioeconomic inequality) and prioritises strategies to reach children and young people living in areas affected by extreme weather events.

## GLOSSARY

### ATTACHMENT C

Unless otherwise indicated, the following definitions are adopted from definitions provided by UNICEF.<sup>132</sup>

**Child** – *Child* is defined as all children and adolescents aged 0-18 years of age (according to the Convention on the Rights of the Child). The term is inclusive of boys, girls and LGBTI children; children with protection risks or exposed to serious events; and children with disabilities or with mental, neurologic and substance abuse (MNS) disorders.

**Parents and Caregivers** – *Parents and caregivers* refers to those responsible for the care of children, and may include mothers and fathers, grandparents, siblings and others within the extended family network, as well as other child caregivers outside of the family network.

**Community** – *Community* includes men and women, boys and girls, and other stakeholders in child and family wellbeing, such as teachers, health workers, legal representatives and religious and governmental leaders. Community can be defined as a network of people who share similar interests, values, goals, culture, religion or history – as well as feelings of connection and caring among its members.

**Disaster** – *Disaster* refers to a serious disruption of the functioning of a community or a society at any scale due to hazardous events interacting with conditions of exposure, vulnerability and capacity, leading to one or more of the following: human, material, economic and environmental losses and impacts.<sup>133</sup>

**Family** – *Family* is a socially constructed concept that may include children who live with one or both biological parents or cared for in various other arrangements such as living with grandparents or extended family members, with siblings in child- or youth-headed households, or in foster care or institutional care arrangements.

**Recovery** – *Recovery* is 'the restoring or improving of livelihoods and health, as well as economic, physical, social, cultural and environmental assets, systems and activities, of a disaster-affected community or society, aligning with the principles of sustainable development and 'build back better', to avoid or reduce future disaster risk'.<sup>134</sup>

**Resilience** – *Resilience* is the ability to overcome adversity and positively adapt after challenging or difficult experiences. Children's resilience relates not only to their innate strengths and coping capacities, but also to the pattern of risk and protective factors in their social and cultural environments.

**Young Person** – A *young person* is a person between the ages of 15-24 years – noting that there are overlaps between children 0-18 years, adolescents 10-19 years and young people 15-24 years.

**Wellbeing** – *Wellbeing* describes the positive state of being when a person thrives. In mental health and psychosocial work, wellbeing is commonly understood in terms of three domains:

1. Personal wellbeing – positive thoughts and emotions such as hopefulness, calm, self-esteem and self-confidence
2. Interpersonal wellbeing – nurturing relationships, a sense of belonging, the ability to be close to others
3. Skills and knowledge – capacities to learn, make positive decisions, effectively respond to life challenges and express oneself.

# PROJECT METHODOLOGY

## ATTACHMENT D

An independent consultant with disaster recovery and resilience expertise has prepared this report. The report was prepared after conducting an extensive review of material and information available from a wide variety of sources with a focus on disaster resilience and children and young people, with particular focus on information available from the following organisations:

- UNICEF Australia
- Royal Far West
- The National Bushfire Recovery Authority (NBRA)
- The Australian Institute of Disaster Resilience (AIDR)
- Emerging Minds
- The office of the Advocate for Children and Young People (NSW)

This review was complemented by consultations with significant stakeholders in relation to disaster resilience and children and young people, including the following:

1. Juliet Attenborough, Programs and Advocacy Manager, Adolescent Wellbeing and Potential, UNICEF Australia
2. Victoria Clancy, Bushfire Response Coordinator, UNICEF Australia
3. Oliver White, Head of Government Relations, UNICEF Australia
4. Nicole Breeze, Director of Australian Programs and Advocacy, UNICEF Australia
5. Jenny Stevenson, Head of Advocacy and Government Relations, Royal Far West
6. Jacqui Emery, Business Director, Royal Far West
7. Sarah Eagland – Social Worker, Program Manager, RFW
8. Chris Anderson – Social Worker and Coordinator, RFW
9. Jessica Genaroli - Psychologist, Royal Far West
10. Eleanor Knight – Speech Therapist, Royal Far West
11. Emily Barton – Occupational Therapist, Royal Far West

The consultation phase of the project included the following questions:

1. How is the program working on the ground?  
Describe the approach, how the multidisciplinary approach is working, who is included, some of the surprises, challenges or successes.
2. How many children and others are involved? I need statistics if they are available.
3. What are the key messages for governments/ donors, about the value of the program?
4. Is it possible to include a handful of participants e.g. a principal, a parent, an allied health professional?
5. How do I ensure that the report I am writing reflects the voices of children?

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## Carnival Australia

We would like to thank our principal partner Carnival Australia for their commitment to children's wellbeing and for providing the funding to deliver the program described in this report.



## The Australian Public

Thanks to the generous support of everyday Australians, both UA and RFW raised critical funds during bushfire response appeals to enable psychosocial support for the most vulnerable children. This support has enabled us to deliver critical protection for children long after the disaster, which we know to be critical for long term recovery.

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The program includes a number of additional business partners: [HP](#) (donating technology), [Little Wings](#) (supporting flights to communities), and the [NSW Rural Doctors Network Health Workforce Scholarships Program](#) (funding specialist training for the team). A variety of organisations have donated vouchers for families, and the [GIVIT Foundation](#) has proved to be a valuable resource linking unmet need with donations. [Charles Sturt University](#) is conducting an independent evaluation of the program through the support of the [Paul Ramsay Foundation](#).

We would like to acknowledge and thank all of these organisations for their generous support of the Bushfire Recovery Program.



UNICEF Australia (UA) and Royal Far West (RFW) share a common goal to improve the health and wellbeing of children and young people wherever they live.

We work to ensure that all children have the opportunity to survive and thrive, developing to achieve their full potential. Our work is built from a foundational commitment to children's rights, and we work to secure these fundamental rights for every child regardless of gender, race, religious beliefs, income, physical attributes, geographical location or other status.

We seek to understand and address the root causes of inequity so that all children, particularly those who experience disadvantage or deprivation in society, have access to education, health care, sanitation, clean water, protection and other services necessary for their survival, growth and development.

We particularly work to support children who live in rural and remote communities as it is these children who are more likely to face multiple challenges and disadvantages because of where they live.



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