

31 July 2025

# **National Emergency Management Agency submission to Productivity Commission's final review of the National Mental Health and Suicide Prevention Agreement**

The National Emergency Management Agency (NEMA) welcomes the opportunity to make a submission to the Productivity Commission's final review of the National Mental Health and Suicide Prevention Agreement (the Agreement).

The increasingly compounding nature of recurrent disasters is leading to growing impacts on the mental health and wellbeing of communities across Australia. Climate change also poses new and additional risks to mental health and wellbeing moving forward, as acknowledged in the National Health and Climate Strategy (Department of Health and Aged Care 2023).

A collaborative approach across all levels of government, including with services providers and the community, is required to provide effective support to the growing mental health impacts of the changing climate and extreme weather events.

In the current Agreement, parties recognise the impact of drought and bushfire on mental health. There is an opportunity in a new agreement to further consider and address the impacts of natural hazards more broadly on the mental health and wellbeing of Australians, including for cohorts who may be disproportionately affected by disasters and require targeted support.

We note that the Productivity Commission's Interim Report does not explicitly address the mental health impacts of disasters and climate change. We recommend that the Final Report explicitly address the escalating impacts of climate-related disasters on mental health, in line with relevant Australian Government policies including the National Disaster Mental Health and Wellbeing Framework and the National Health and Climate Strategy.

Through our experience engaging with states and territories and with disaster-impacted communities over recent higher risk weather seasons, we are seeing increased demand for mental health services and we have seen this need continues beyond the immediate aftermath of disasters for years later, consistent with research findings. NEMA recognises that the Department of Health, Disability and Ageing is responsible for mental health policy and primary mental health care as set out in the Administrative Arrangements Order, dated 13 May 2025. Within the emergency management portfolio, the Australian Government has been providing additional support to states and territories for mental health programming in disasters to meet increased need, through funding mechanisms it administers including the Disaster Recovery Funding Arrangements (DRFA).

## **Mental health impacts of disasters**

Research shows that rates of psychological distress and psychiatric disorder have consistently been higher in disaster-affected communities (Jones and Galea 2014; Beaglehole et al. 2018). The University of Melbourne's Beyond Bushfires study indicated that 10 years after the 2009 bushfires, there was a higher rate of probable mental health disorders in communities that had high levels of bushfire impact (22%), compared to low and medium impacted communities (7-9%) (Gibbs et al.

2021). Commonly reported mental health conditions identified in disaster research include post-traumatic stress disorder (PTSD), depression, anxiety and substance use disorders (Bryant et al. 2017; Norris et al. 2002). Emerging evidence also highlights that repeated exposure to compounding disasters can lead to more severe mental health impacts (Li and Leppold 2025). Phoenix Australia's research shows that intersecting traumas and mental health difficulties are exacerbated by disasters (Phoenix Australia 2023). Mental health literature has shown that people with pre-existing mental health concerns are more likely to develop negative health outcomes post-disaster (Woodland et al. 2023).

The mental health impacts of disasters can also endure over an extended period and it may take time for symptoms to present. Following the 2009 "Black Saturday" bushfires in Victoria, 21.9% of people in high-impact communities continued to report symptoms of mental health conditions 5 years later (Gibbs et al. 2016). Over time, others reported delayed onset of mental health conditions (Bryant et al. 2017).

The health workforce are also impacted by disaster events, with many personnel having dual roles of supporting their communities while also having lived experience of the disaster themselves. In 2020, 54% of surveyed Australian health professionals reported that they had seen mental ill-health among their patients or clients due to climate change (Climate and Health Alliance 2021). In 2022, 17% of surveyed Australian psychologists reported an increased frequency of climate distress presentations since 2019 (Macleod et al. 2023). Among key challenges expected to impact their work over the next 5-10 years, 56% listed weather disasters and pandemics and 55% listed climate distress.

## **Impacts on specific cohorts**

### *Emergency services workers and volunteers*

At the frontline of supporting disaster-impacted communities in Australia, emergency services workers and volunteers face a greater risk of mental health impacts than the general population (Beyond Blue 2018). In its 2018 study of first responders, Beyond Blue found that 39% of emergency responders had been diagnosed with a mental health condition at some point in their lives, and these workers and volunteers are diagnosed with PTSD at a rate 2 times higher than the general Australian population. 51% of police and emergency services employees indicated that they had experienced traumatic events which affected them deeply (Beyond Blue 2018). The 2019 Senate Education and Employment References Committee report *The People Behind 000: Mental Health of First Responders* found that the work of first responders involves inherent risk of exposure to trauma, requiring mitigation, prevention, harm minimisation and management of mental health conditions (Commonwealth of Australia 2019).

### *First Nations peoples*

First Nations peoples are disproportionately affected by disasters (Williamson 2024). This has significant implications for their mental health and wellbeing. First Nations peoples are already more likely than other Australians to experience poor mental health with higher rates of psychological distress, suicide and self-harm due to the impacts of colonisation and structural racism (Australian Institute of Health and Welfare 2024). The impacts of disasters have been well

documented as magnifying pre-existing vulnerabilities and disparity (Rosenhek and Atkinson 2024). Impacts on First Nations mental health are no different. For example, a study of mental health experiences 6 months after the 2017 Northern Rivers floods found First Nations respondents were significantly more likely to report probable anxiety and depression compared to other respondents (Matthews et al. 2019). In addition, a study on First Nations parents' and children's experiences of the COVID-19 pandemic found increased levels of anxiety, depression and loneliness as well as some cases of suicidal thoughts and self-harm (Kennedy et al. 2022).

Disasters and damage to Country can cause deep grief and emotional distress, particularly where spiritual and cultural practices or connection to place and kin are disrupted (Hunter 2020). Williamson (2022) and Colvin (2024) identified that the emergency management system is not well adapted to integrate First Nations knowledge, leadership and governance. As a result, the trauma and mental health impacts of colonisation, systemic racism and forced removals can be magnified in disasters when First Nations voices and considerations are not sufficiently taken into account. Mental health services that do not recognise the unique and specific needs of First Nations adults and children before, during and after disasters - and include culturally and age appropriate support - risk causing further harm. Reflecting Australian Government commitments under the National Agreement on Closing the Gap (Outcome 14 on social and emotional wellbeing and Priority Reform 3 on government decisions in emergencies taking into account impacts on Aboriginal and Torres Strait Islander people), research calls for approaches led by community, grounded in culture, and shaped by the strengths and priorities of First Nations peoples.

#### *People with disability*

People with disability, older people, people with chronic illness, including physical and mental health conditions such as asthma, heart disease, chronic kidney disease or anxiety and depression, are at particular risk of illness during bushfires, heatwaves, or floods (Alderman et al. 2012; Gao Y et al. 2023; Adnan et al. 2022). During disasters, people with disability can face disruptions to essential supports, communication barriers, ill equipped evacuation centres and exclusion from emergency planning processes, leading to increased anxiety, isolation, and trauma.

Research from the 2017 flood event in the Northern Rivers showed how existing physical and mental health concerns of people with disability intersected with the impact of the event, resulting in longer-term consequences (Bailie et al. 2022). The study revealed that people with disability were 2-3 times more likely to develop probable PTSD compared with the general population. The findings showed that mental health impacts of disasters can affect recovery more broadly, emphasising the need for longer term supports designed specific to the needs of people with disability.

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability revealed that emergencies and disasters can have profound and disproportionate impacts on people with disability (Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability 2020a). Its final report identified the impact of insufficient accessible communications on the mental health of people with disability, noting that this led to significant distress for people with cognitive disability during the COVID-19 pandemic (Royal Commission into Violence Abuse, Neglect and Exploitation of People with Disability 2020a). It also found that there can be significant barriers for accessing healthcare for people with disability in disasters, exacerbated by unconscious bias and discrimination (Royal Commission into Violence Abuse, Neglect and Exploitation of People with Disability 2020b).

In line with commitments under Health and Wellbeing Policy Priorities 3 and 4 in Australia's Disability Strategy 2021-2031, mental health supports in disasters must be appropriate, effective and accessible for people with disability (Department of Social Services 2024).

### *Children and young people*

Infants, children and young people will have the greatest exposure to climate change across their lifetime, meaning they will disproportionately experience its adverse impacts. Children and young people are susceptible to an array of adverse disaster and climate-related health outcomes (Gao CX et al. 2023). They are also especially prone to experiencing mental and emotional distress associated with climate change, irrespective of whether they have been directly affected or merely exposed to information about climate-related events (Wall and Eapen 2025). Findings from a survey demonstrated that young people with great concern about climate change were more likely to experience higher levels of psychological distress and reported lower subjective wellbeing (Gao CX et al. 2023).

### **National Disaster Mental Health and Wellbeing Framework**

Following the 2019-20 Black Summer bushfires, the Australian Government announced the development of the National Disaster Mental Health and Wellbeing Framework (the Framework). The National Mental Health Commission led its development.

The Australian Government released the Framework on 21 June 2023. It acknowledges the need for a joint and collaborative approach by all levels of government and communities to ensure consistent mental health and wellbeing support before, during and after disasters (Australian Government 2023).

The Framework supports implementation of recommendation 15.3 of the Royal Commission into National Natural Disaster Arrangements, which called for Australian, state and territory governments to refine arrangements to support localised planning and the delivery of appropriate mental health services following a disaster (Royal Commission into National Natural Disaster Arrangements 2020). It noted the need for greater coordination and planning for the delivery of long-term locally-based and appropriate mental health services.

NEMA, the Department of Health, Disability and Ageing and state and territory governments are now working together to progress implementation. This includes through the establishment of a National Disaster Mental Health and Wellbeing Senior Officials' Group, as agreed to by Australian-New Zealand Emergency Management Committee members on 20 June 2025.

### **Disaster Recovery Funding Arrangements**

In addition to the support administered by the Department of Health, Disability and Ageing and provided by state and territory governments, mental health support may also be made available through the Commonwealth-State jointly funded Disaster Recovery Funding Arrangements (DRFA), which is administered on behalf of the Australian Government by NEMA. Through the DRFA, the Australian Government supports states and territories with the costs of relief and recovery assistance to communities. State and territory governments identify the assistance

required to support impacted communities following a disaster event, and the Australian Government co-funds it.

States and territory governments may choose to activate personal and financial counselling as a standard assistance measure under the DRFA. Where identified recovery needs following a disaster exceed existing supports and what is available through the standard DRFA assistance, the states and territories may request agreement from the Australian Government to cost-share extraordinary recovery packages for mental health support under the DRFA. To support the states and territories in the development of such extraordinary assistance measures, NEMA has developed a standardised mental health and wellbeing recovery package in consultation with the state and territory governments (NEMA 2025).

### **Support for mental health for emergency services workers**

The Australian Government is providing funding for mental health support for emergency services workers through Fortem Australia, administered by NEMA. Since April 2022, NEMA has provided \$16.6 million in funding for Fortem Australia's Support for First Responders program, which has delivered services for the emergency services worker community that include psychological support, wellbeing activities and mental health literacy training to reduce stigma, improve future resilience and support first responders with mental health issues. This program ends on 31 December 2025.

This is in addition to support administered through the Department of Health, Disability and Ageing to the Australian Psychological Society and the Black Dog Institute, which is also ending on 31 January 2026 and 31 December 2025 respectively. State and territory governments, as well as emergency services organisations, are also providing mental health support to this cohort.

The Australian Government has committed \$3.6 million to extend targeted mental health support for emergency services workers in 2025-26. The program is currently under development and further details will be made available in due course.

## References

- Adnan MSG, Dewan A, Botje D, Shalid S and Hassan QK (2022) 'Vulnerability of Australia to heatwaves: A systematic review on influencing factors, impacts, and mitigation options', *Environmental Research*, 213, doi:10.1016/J. ENVRES.2022.113703.
- Alderman K, Turner LR and Tong S (2012) 'Floods and human health: A systematic review', *Environment International*, 47:37-47, doi:10.1016/j.envint.2012.06.003.
- Australian Institute of Health and Welfare (2024), 'Health and wellbeing of First Nations people', <https://www.aihw.gov.au/reports/australias-health/indigenous-health-and-wellbeing>, accessed 25 July 2025.
- Bailie J, Matthews V, Bailie R, Villeneuve M and Longman J (2022) 'Exposure to risk and experiences of river flooding for people with disability and carers in rural Australia: a cross-sectional survey', *BMJ Open*, 12(8), doi: 10.1136/bmjopen-2021-056210.
- Beaglehole B, Mulder RT, Frampton CM, Boden JM, Newton-Howes G and Bell CJ (2018) 'Psychological distress and psychiatric disorder after natural disasters: systematic review and meta-analysis', *Br J Psychiatry*, 213(6):716–722, doi: 10.1192/bjp.2018.210.
- Beyond Blue Ltd. (2018) *Answering the Call National Survey: Beyond Blue's National Mental Health and Wellbeing Study of Police and Emergency Services – Final Report*.
- Bryant RA, Gibbs L, Gallagher HC, Pattison P, Lusher D, MacDougall C, Harms L, Block K, Sinnott V, Ireton G, Richardson J, Forbes D (2017) 'Longitudinal study of changing psychological outcomes following the Victorian Black Saturday bushfires', *Australian & New Zealand Journal of Psychiatry*, 52(6):542-551, doi:10.1177/0004867417714337
- Climate and Health Alliance (2021) *Real, urgent & now: insights from health professionals on climate and health in Australia*, Climate and Health Alliance, [https://www.caha.org.au/caha\\_reports](https://www.caha.org.au/caha_reports), accessed 28 July 2025.
- Colvin A (2024) *Final Report: Independent Review of Commonwealth Disaster Funding*, Deloitte, <https://www.nema.gov.au/about-us/governance-and-reporting/reviews/independent-review-of-commonwealth-disaster-funding>
- Commonwealth of Australia (2019) *The people behind 000: mental health of our first responders*, Senate Education and Employment References Committee, [https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Education\\_and\\_Employment/Mentalhealth/Report](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Education_and_Employment/Mentalhealth/Report)
- Department of Health and Aged Care (2023), *National Health and Climate Strategy*, Australian Government, <https://www.health.gov.au/resources/publications/national-health-and-climate-strategy?language=en>
- Department of Social Services (2024) *Australia's Disability Strategy 2021-2031: 2024 Update*, Commonwealth of Australia, <https://www.disabilitygateway.gov.au/document/11081>
- Gao Y, Huang W, Yu P, Xu R, Yang Z, Gasevic D, Ye T, Guo Y and Li S (2023) 'Long-term impacts of non-occupational wildfire exposure on human health: A systematic review', *Environmental Pollution*, 320:121041, doi:10.1016/j. envpol.2023.121041.
- Gao CX, Teo SM, Brennan N, Fava N, Freeburn T and Filia K (2023) *Climate Concerns and Young People's Mental Health: Findings from the 2022 Mission Australia Youth Survey*. Orygen: Melbourne, VIC and Mission Australia: Sydney, NSW.
- Gibbs L, Molyneaux R, Harms L, Gallagher H C, Block K, Richardson J, Brandenburg V, O'Donnell M, Kellett C, Quinn P, Kosta L, Brady K, Ireton G, MacDougall C and Bryant R (2020) *10 Years*



*Beyond Bushfires Report 2020*. University of Melbourne, [https://mspgb.unimelb.edu.au/\\_\\_data/assets/pdf\\_file/0004/4165843/10-years-Beyond-Bushfires-report.pdf](https://mspgb.unimelb.edu.au/__data/assets/pdf_file/0004/4165843/10-years-Beyond-Bushfires-report.pdf)

Gibbs L, Bryant R, Harms L, Forbes D, Block K, Gallagher HC, Ireton G, Richardson J, Pattison P, MacDougall C, Lusher D, Baker E, Kellett C, Pirrone A, Molyneaux R, Kosta L, Brady K, Lok M, Van Kessel G and Waters E (2016) *Beyond Bushfires: Community Resilience and Recovery Final Report*. University of Melbourne, [https://mspgb.unimelb.edu.au/\\_\\_data/assets/pdf\\_file/0008/3043187/Beyond-Bushfires-Final-Report-2016.pdf](https://mspgb.unimelb.edu.au/__data/assets/pdf_file/0008/3043187/Beyond-Bushfires-Final-Report-2016.pdf)

Goldmann E and Galea S (2014) 'Mental health consequences of disasters', *Annu Rev Public Health*, 35:169-83, doi: 10.1146/annurev-publhealth-032013-182435. Epub 2013 Oct 25. PMID: 24159920.

Hunter SA (2020) 'Triggering trauma: the impact of the bushfire crisis on Aboriginal and Torres Strait Islander Peoples', SNAICC – National Voice for our Children, <https://www.snaicc.org.au/wp-content/uploads/2020/01/Opinion-piece-Sue-Anne-Hunter-response-to-fires-trauma-Jan2020.pdf>

Kennedy M, Bright T, Graham S, Heris C, Bennetts SK, Fiolet R, Davis E, Jones KA, Mohamed J, Atkinson C and Chamberlain C (2022) "You Can't Replace That Feeling of Connection to Culture and Country": Aboriginal and Torres Strait Islander Parents' Experiences of the COVID-19 Pandemic', *Int J Environ Res Public Health*, 19(24), doi: 10.3390/ijerph192416724.

Li A and Leppold C (2025) 'Long-term mental health trajectories across multiple exposures to climate disasters in Australia: a population-based cohort study', *The Lancet Public Health*, 10(5).

Macleod E, Curll S, Walker I, Reynolds J, Lane J, Galati C and Greenwood L, Christensen B and Caelear AL (2023) *Australian psychologists in the context of disasters: preliminary report on workforce impacts and needs*, Canberra: Australian National University.

Matthews V, Longman J, Berry HL, Passey M, Bennett-Levy J, Morgan GG, Pit S, Rolfe M and Bailie RS (2019) 'Differential Mental Health Impact Six Months After Extensive River Flooding in Rural Australia: A Cross-Sectional Analysis Through an Equity Lens', *Front Public Health*, 7(367), doi: 10.3389/fpubh.2019.00367.

National Emergency Management Agency (2025), 'Standardised recovery packages', <https://www.nema.gov.au/our-work/disaster-recovery/disaster-recovery-funding-arrangements#standardised>, accessed 25 July 2025.

Norris FH, Friedman MJ, Watson PJ, Byrne CM, Diaz E and Kaniasty K (2002) '60,000 disaster victims speak: Part I. An empirical review of the empirical literature, 1981-2001', *Psychiatry*, 65(3):207-39, doi:10.1521/psyc.65.3.207.20173.

Phoenix Australia (2023) 'The impacts of compounding disasters and stressors on mental health and wellbeing: Policy Brief', <https://www.phoenixaustralia.org/disaster-hub/wp-content/uploads/2023/02/The-Impacts-of-Compound-Disasters-and-Stressors-on-Mental-Health-and-wellbeing-%E2%80%93-Policy-Brief.pdf>

Rosenhek R and Atkinson C (2024) 'Aboriginal and Torres Strait Islander peoples, gender and disaster: A commentary', *The Australian Journal of Emergency Management*, 39(3):87-93, <https://doi.org/10.3316/informit.T2024081200011101437997541>.

Royal Commission into National Natural Disaster Arrangements (2020) *Royal Commission into National Natural Disaster Arrangements Report*.

Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (2020a) *Final Report: Volume 6: Enabling Autonomy and Access*, <https://disability.royalcommission.gov.au/publications/final-report-complete-volume-formats>

Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (2020b) *Issues Paper: Emergency planning and response*, <https://disability.royalcommission.gov.au/publications/emergency-planning-and-response>

Wall E and Eapen V (2025) 'Nurturing tomorrow: Mental health effect on children and youth due to climate change', *Australian Journal of General Practice*, 54(1-2):51-55, <http://dx.doi.org/10.31128/AJGP-06-24-7305>.

Williamson B (2024) 'Submission to the Select Committee on Australia's Disaster Resilience', Monash University, [https://firetoflourish.monash/\\_\\_\\_data/assets/pdf\\_file/0006/3723171/NIDR-Submission-Senate-Committee-on-Disaster-Resilience.docx.pdf](https://firetoflourish.monash/___data/assets/pdf_file/0006/3723171/NIDR-Submission-Senate-Committee-on-Disaster-Resilience.docx.pdf)

Williamson B (2022) *Aboriginal community governance on the frontlines and faultlines in the Black Summer bushfires*, Canberra: Centre for Aboriginal Economic Policy Research, <https://doi.org/10.25911/V482-AE70>.

Woodland L, Ratwatte P, Phalkey R and Gillingham EL (2023) 'Investigating the Health Impacts of Climate Change among People with Pre-Existing Mental Health Problems: A Scoping Review' *Int. J. Environ. Res. Public Health*, 20(8):5563, <https://doi.org/10.3390/ijerph20085563>.