

# RESULTS FROM QUALITATIVE INTERVIEWS AND FOCUS GROUPS

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A warming and drying climate has changed weather patterns throughout the world, leading to an increased risk of extreme fire seasons in Australia (van Oldenborgh et al, 2021). The 2019-2020 bushfire season in Australia is described as the 'Black Summer' due to the unprecedented magnitude, duration and intensity of the bushfires, which started earlier than expected and were far more widespread and destructive than usual. All Australian states and territories were affected, with the most significant impact felt in New South Wales, Victoria, South Australia and Queensland. In total, 33 lives were lost, more than 3,000 homes were destroyed, wildlife was decimated, and over 20 million hectares of community and farming land and national parks were burnt. Governments and communities have to consider how we respond to increasingly frequent and severe events such as the Black Summer fires.



The following report is based on interviews and focus groups conducted 6-12 months after the 2019-2020 bushfire season. These were undertaken with 29 first responder volunteers across Australia who helped to fight the fires and 15 community volunteers contributing to the recovery effort, capturing their experiences and views from a mental health and wellbeing perspective. They lived and worked in the communities most closely affected and their insights into the fires and their impacts may be helpful in understanding how to better prepare and support the ongoing mental health and wellbeing of volunteers supporting bushfire prone communities.

These insights relate to preventative measures and actions that agencies can take to support and promote mental health of all their members, especially younger volunteers and those who have more recently become volunteers. They also indicate the importance of increasing individual and organisational awareness and response to the potential mental health concerns arising from cumulative exposure to trauma, not only from major events but also from a career of routine exposure to potentially traumatic events.



# **FINDINGS**

We found many strengths within participants' existing services and the ways in which they supported each other's mental health. For firefighter volunteers, the unique nature of their experiences, the strength of the camaraderie that resulted from those experiences, their commitment to protecting their local communities and their love for what they do motivated many to continue volunteering. The strength of informal peer support, particularly the informal rules about protecting new and young members, was highlighted. The extreme situations and the qualities that they saw in themselves and others at these times gave them a sense of value in their contribution, and a stronger belief in others.

We need to work out how we can actually sustain the positive lessons that we have learnt ... It's not just about recovery from the bushfire; it's saying what sort of society would we like to live in, and people are beginning to ask ...and think through those questions, and that's really heartening.

[FRANK, SA PAST CFS, COMMUNITY VOLUNTEER, AGE: 70S; EXPERIENCE: 20 YEARS]

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These experiences and lessons are summarised in three themes below, with greater detail about the findings and recommendations provided in the full report.

NB. To ensure anonymity, pseudonyms are used throughout this report.



## **THEME 1. Experiences and impacts**

Volunteers spoke about their experiences in the face of the fires; some of their accounts were harrowing. They described the fires as traumatic, extended and extreme; a situation that no-one was prepared for and not possible to simulate in training. Hence, across the spectrum of the experienced and those newer to volunteer firefighting, all experienced significant impacts on their mental health and wellbeing that were apparent long after the fires. For many, the impacts were cumulative and arose from many years as a volunteer. They spoke about living in and fighting the fires on their doorstep and the sheer exhaustion they experienced amidst a fire path that was perceived as inevitable. They spoke about travelling interstate to support other communities fighting the fires. In the context of talking about their experiences, volunteers made several comments about operational issues in the context of their mental health. This was particularly apparent where operational issues created or exacerbated unresolved challenges to doing their role. This then impacted negatively on their ability to debrief, contributed to cumulative stress, and impacted negatively on their longer-term mental health and wellbeing.

Several volunteers emphasised the loss of control that they felt, linked to the chaos and confusion in the midst of bushfires perceived as beyond anyone's control. Several participants described how they continued to feel the impacts on mental health. Several recounted neardeath experiences and the aftermath that stayed with them, in the form of flashbacks, depression, anger, disillusionment and physical health complaints. Many spoke of the camaraderie and the strength of their shared experiences during and after the fires.



...so just jump on a truck and then the days roll one after the other, but yeah. It's all a blur really. ...at the end of it and then you fall .... My friends lost their house while they weren't there. They were on the truck somewhere else, but you know, you'd hope someone else is maybe coming up behind you and they're at your house. But at the end of the day, it was just too big.

[WAYNE, SA CFS VOLUNTEER, AGE: 40S; EXPERIENCE: 8 YEARS]

I don't think any of us were quite prepared for that fire. Our captain and one of the Lieutenants with probably 50 years combined firefighting experience with those two and they'd never seen anything like it ... There are some things you just can't create in training ... we practise burn over drills each year; however, those drills are all linked towards us all being in the truck, none stuck outside which we all were ... you probably go to hell to be honest.

[BRENDON, VIC CFA VOLUNTEER, AGE: 40S; EXPERIENCE: 4 YEARS]



# THEME 2. Coping and recovery

Many volunteers described how they continued to feel the impacts of fighting the fires on their mental health, particularly with seeing the reminders all around them as firefighters and members of their communities. They recounted their heavy reliance on informal peer support and the central role played by their families; although the potential for families to experience vicarious trauma in their role as confidantes was not mentioned. This meant that families and their potential mental health needs were largely invisible. They also talked about their experiences of formal and informal debriefing, and their use of more formal supports for mental health and wellbeing. They spoke about recognition and acknowledgement of their roles and their skills and experience as core to their mental health. They spoke about how their own wellbeing was integrally tied to the wellbeing and cohesiveness of their communities.



And I can't – I can't go to a fire now ... I've lost too many houses; I've seen too many people lose everything- I can't do it anymore.

[BOB, SA CFS VOLUNTEER, AGE: 70S; EXPERIENCE: 56 YEARS]

I had an incident recently where out of the blue I was just a mess. ... I had an appointment with the psychologist and when we thought back and thought it through we had been doing some VA training - got hot as all hell and we think it was kind of like the body saying the last time you were this hot, this and this and this happened sort of stuff, and suddenly I am feeling crap again. ... we were pretty convinced that they sent us down to die.

[COLIN, CFS VOLUNTEER, AGE: 60S; EXPERIENCE: 13 YEARS]

We're all here, we all owned it, we all lost it, and now we're all rebuilding it.

[ROSS, CFS VOLUNTEER, AGE: 60S; EXPERIENCE: 52 YEARS]





It's not just about rebuilding fences, it's about rebuilding lives.

[JESS, SA COMMUNITY VOLUNTEER, AGE: 60S; EXPERIENCE: 1 YEAR]

There were only two in our brigade that had seen Ash Wednesday, so most of them were a bit on the green side ... so they get thrown in, they see houses burning down and people injured ... afterwards, we sat them down ... just go and talk ... this sharing is – it was very significant. ... I can remember one fellow saying how he had to take charge of the appliance. Well, he hadn't done that before ... he had all this responsibility. Really, we're not talking about playing marbles here, we're talking about people's homes burning down ... he was scratching gravel a bit.

[ROB, SA CFS VOLUNTEER, AGE: 80S; EXPERIENCE: 60 YEARS]



# THEME 3. Role of volunteer organisations to better support volunteers

Twenty years ago, few fire and emergency service agencies formally supported the mental health of their staff and volunteers. Greater awareness and understanding have led to a range of supports being introduced; however, further improvements can still be made. Additionally, as the duration and intensity of the fires that emergency services personnel are facing increases, it is critical that the structures, organisations and supports also evolve to reflect the increasing demands of the role.

Whilst many of the lessons described in this research have been spoken of in previous reports and research, the insights from these volunteers provide a richer picture of what is needed to support the mental health and wellbeing of volunteers and why. **Our research highlighted the importance of understanding** *why* **the interaction between volunteers, families and communities is integral to the volunteering experience and their ability to heal.** Formal relief efforts and services, and improved organisational preparedness, training and supports must sit alongside recognition and support for the many valuable and effective informal support structures that exist in the individual brigades and local communities in which volunteer firefighters perform their role. Supporting volunteers' mental health also means supporting their families and communities that are affected by fire and other emergency events.







## RECOMMENDATIONS

Several recommendations are derived directly from the experiences and expertise of volunteer participants involved in this research. The recommendations highlight that a range of interconnected processes are needed to support an individual's mental health within the wider context in which they live their lives – their local community - informed by and underpinned by three core requirements:

- Acknowledging, enhancing and making use of the strengths of existing support networks and importance of fostering cohesive community environments.
- 2. Scaling up training and support resources for volunteer agencies to ensure the sustainability of volunteering.
- 3. Improving collaboration and coordination between different groups (firefighter volunteers, paid staff, community volunteers) before, during and after the fire season.

A full description of recommendations arising from this research appear in detail at the end of this report. The key recommendations are summarised below:

- 1. Improve acknowledgment and refinement (via upskilling where required) of existing informal mental health supports/networks currently utilised by volunteers (i.e. the hot-debrief, formal and informal mentoring roles, and peer-to-peer and family support). (R-1)
  - Services more explicitly recognise the value of informal peer debrief that occurs within volunteer crews by encouraging and supporting local volunteer leaders to activate this peer support as an explicit part of their job description. (R-1.1
  - Include trauma-informed care training for peer workers as an explicit part of their job description. (R-1.2
  - Ensure that follow-up support services are delivered face-to-face, where possible, as the preferred option and minimise phone follow-up; and that it is delivered by those who are known and trusted by the volunteer, and by individuals with 'local' knowledge, skills and understanding of the ESFR organisational culture and structures. (R-1.3)
  - Follow-up with volunteers beyond the initial critical incident period after significant fire or other events as a matter of course, to protect against cumulative trauma. (R-1.4)
  - Visit volunteers on leave with mental health problems 'in place' or at home, and consult
    with/include their families, where possible to ensure their needs are assessed holistically,
    seeing the person in the whole context of family and community. (R-1.5)
  - Enable volunteers to seek formal counselling support outside of organisationally provided services (and financially compensate) to ensure privacy and confidentiality, and foster help-seeking early for mental health concerns. (R-1.6)

- Many volunteer firefighters are supported primarily by their families. Friends and volunteer
  peers are also crucial supports, especially for those who do not have family support. These
  may be regarded as informal volunteers they too should have access to mental health
  support, formally supported by organisations. (R-1.7)
- Consider a 'Community of Practice' or similar forum, especially for those volunteers in leadership roles (e.g., brigade Captains and more experienced firefighter volunteers), where those providing informal peer support and debrief can support each other's mental health, wellbeing and role development. (R-1.8)
- 2. Reduce administrative load on operational volunteers through a review of administrative structures and the recruitment of agency specific administrative volunteers. (R-2)
  - Review brigade structures to reduce the administrative load on operational volunteers.
     (R-2.1)
  - Given some volunteers do not want to perform operational roles (due to preference, capacity, step down due to cumulative stresses) but still want to make a contribution, recruitment of volunteers specifically for these non-operational roles could be considered. (R2.2)
- 3. Support greater recognition of the skills across the sector to allow volunteer and paid personnel to work together side by side in relation to training, disaster preparation and campaign coordination and communication. (R-3)
  - More opportunities for paid and volunteer staff to connect and share training and support when preparing for fire seasons and campaigns in order to improve trust as well as build relationships and respect. (R-3.1)
  - Improved use of handovers to key people on the ground, especially during campaigns to avoid confusion and chaos, and improve communication about the fire situation and status between shifts on the fireground. (R-3.2)
    - Keep established crews together, wholly or at least partially, where possible, when on campaigns. (R-3.4)
  - Greater consistency in firefighting equipment across borders. (R-3.4)
  - Ensure volunteers have adequate accommodation and other supports whilst on campaigns (where possible and practicable), especially given many volunteers are retirement age and may require added supports for sleep and rest to recover physically and mentally at the end of each shift. (R-3.5)
  - Ensure organisational management and politicians keep their promises to ESFR volunteers and their local brigades. (R-3.6)
  - AFAC, through its role in implementing uniform accreditation standards across the sector, consider how volunteers can be supported to maintain their training and accreditation at the same or similar level to paid firefighters. (R-3.7)

- 4. Improve financial compensation from the government for loss of income/earnings incurred as a consequence of volunteering, particularly during a major bushfire campaign. to alleviate other sources of stress on individual volunteer first responders and small communities. (R-4)
  - There is a compensation scheme, but how it is applied and participants' knowledge of it
    appears to be inconsistent. Hence, the process of how to apply needs to be clearer.
     Volunteer organisations need to support volunteers to make claims rather than leaving this
    to individual volunteers. (R-4.1)
  - Government review how firefighter volunteers can be financially compensated for loss of earnings. The following should be explored:
    - Remuneration should only apply when state governments require that volunteers be available to deal with an emergency.
    - Any registered emergency services volunteer to be given leave on full pay whenever their services are required. (Employers to recover their costs from the government.)
    - Self-employed volunteers to be compensated at a rate commensurate with the industry standard. (R-4.2)
  - The nature of some rural communities is changing, and many people commute to the large urban centres for work or study, especially younger volunteers. This means that in an emergency there is a shortage of people to act as first responders. Consequently, many available first responders are older. To ensure that fire stations are well staffed during catastrophic days, all volunteers to report to their station on those days (or at very least be available). This requires a review of compensation. (R-4.3)
- 5. Investigate ways to improve training for severe events, via the development and implementation of virtual reality technology training to better prepare volunteers for their role and for large-scale campaigns; particularly, to prepare them for the realities of extreme fire behaviour and potentially traumatic events, and practice working together in high stress and time critical situations. (R-5)
  - Government and ESFR organisations to invest in fire training that uses virtual reality technology to give volunteers a more accurate scenario of what they may expect in their role given varying conditions and landscapes. The prime aim would be to give first responders a sense of the challenges that they will face, to better prepare them emotionally, in addition to better practical preparation for the role. (R-5.1)

# <u>6.</u> Introduce additional mental health training for ESFR volunteers and communities impacted by disasters. (R-6)

- Enhanced training and psychoeducation for disaster prone communities in relation to community orientated disaster preparedness and fire safety planning, what to do during the fires from an individual and community orientated perspective, as well as the roles and responsibilities of all community members throughout the recovery period. (R-6.1)
- Mental health first aid training needs to be made widely available to communities that are
  likely to be impacted by bushfires and other natural disasters; prioritised for volunteer
  ESFR first. If communities are well versed in mental health first aid, then they are better
  placed to develop strategies to pick up the needs. (R-6.2)
- Acknowledge the value of experience and length of volunteer service and maximise that expertise in all training and mentoring of newer volunteers. (R-6.3)
- Training should be undertaken by lived experience peer facilitators from the local community who have 'local' knowledge, skills and an understanding of the ESFR organisational culture and structures (experience of recovery and management of mental illness, self-harm and/or suicidality is also an advantage). (R-6.4)
- Regular face-to-face mental health and wellbeing training which covers all aspects of the
  role and is staged according to the age and experience of the volunteer. This training, in the
  aftermath of a campaign and the everyday volunteer role, also serves as an opportunity for
  formalising the strengths of informal peer debriefing and early intervention in relation to
  mental health symptoms. (R-6.5)
- Include members of volunteer farm units in any training and support, and community debriefing, alongside firefighters from the paid and volunteer organisations. (R-6.6)
- Ensure a full scope of training that also acknowledges volunteers' role in attending to MVAs. (R-6.7)
- 7. Implement local community logistic support capabilities, drawing on a register of identified local community members' expertise and knowledge (e.g., drawn up by local service clubs and agencies in collaboration with local government), to support volunteer and paid ESFRs at commencement and during a major campaign, and alleviate high stress and time critical situations. (R-7)
  - Engage with the community in planning and preparation for fire events so that the benefits of local knowledge are maximised. For example, Local councils could map resident expertise of individuals in rural communities in relation to skills, knowledge of local terrain, facilities and resources as a preparatory activity that can be called upon readily at the critical early stages of an event rather than leaving it to be 'discovered' by chance during or after a natural disaster event. Relying predominantly on 'external experts' can undermine local mental health and resilience efforts during a fire event and be a missed opportunity to support sustainable mental health and wellbeing in the months after the fire event by promoting naturally occurring local leadership and expertise.

#### Community volunteers could:

- Provide early access and support to the establishment of staging areas
- Ensure interstate crews are supported
- Set up R & R facilities
- Provide a central point of support for various services deployed: police, paramedics, etc.
- Provide a buffer for crews from journalists
- Provide community support places of refuge
- Follow up on additional services required, e.g. vets to put down injured life stock. (R-7.1)
- 8. Recognise firefighter and community volunteers' mental health and wellbeing is embedded within the broader wellbeing of local communities; hence, the importance of fostering local community cohesive environments. (R-8)
  - Ensure efforts to build or maintain community cohesion are explicit goals in the recovery effort. (R-8.1)
  - Consider whole of community simulation to prepare for the fire season in rural areas, not just drills for emergency services. (R-8.2)
  - Ensure clearer communication and access plans to public buildings/facilities are developed ahead of each fire season in the event that fires start on public holidays. (R-8.3)
  - Through clearer communications, ask people to think, learn and prepare their properties better before they evacuate. (R-8.4)
  - There needs to be a long-term ongoing commitment to empowering communities to look after themselves once the intensity of critical events and response through external support provision has passed. Just as we do not disband our volunteer fighters after the disaster, so we should not assume that we can fix things 'quickly'. (R-8.5)
  - Ensure volunteer firefighters' needs are assessed holistically, seeing the person in the whole context of family and community. (R-8.6)
  - Introduce more family support services using local expertise and peer-led input, and
    maximising existing informal family networks within brigades, including more access to
    mental health support for families. (R-8.7)

