

14 August 2026

Disaster Resilience Strategy Feedback
GPO Box 2706
Adelaide SA 5001

Dear South Australian Fire and Emergency Services Commission,

Re: Refresh of SA Disaster Resilience Strategy (2026-2030)

Suicide Prevention Australia welcomes the opportunity to respond to the South Australian Fire and Emergency Services Commission's refresh of the South Australian Disaster Resilience Strategy (2026-2030). We are the national peak body for the suicide prevention sector. With over 360 members representing more than 140,000 workers, staff, and volunteers across Australia, we provide a collective voice for service providers, practitioners, researchers, local collaboratives, and people with lived experience.

Recommendations:

1. The South Australian Disaster Resilience Strategy (2026-2030) should formally recognise suicide risk within disaster and resilience planning.
2. The South Australian Disaster Resilience Strategy (2026-2030) should prioritise the delivery of psychological first aid and suicide prevention training to support communities to identify and support individuals at risk. This should begin with building capability among first-responders, community 'gatekeepers' and other frontline workers who work with communities in the immediate aftermath of a disaster.
3. The South Australian Government should budget annual discretionary funds to respond to need for suicide prevention in the event of future disasters or economic crises, such as bushfires, floods, epidemics for extended time periods after a disaster.

There are several studies indicating a link between environmental disasters and increased risk of suicide. In the Australian context, qualitative research undertaken to explore men's experiences following the Black Saturday bushfires shows that several experienced suicidal thoughts following the disaster or knew of others who died by suicide they believed was a result of the disaster experience or the additional pressure of the aftermath.¹ In addition, a survey of volunteers and emergency service personnel involved in the Black Summer bushfires identified that nearly 5% of volunteers and employees experienced suicidal ideation in the year following the fires.² A study undertaken in New South Wales in 2017 following extensive flooding found that 7% of people surveyed reported suicidal thoughts following the flood event. People who had their homes, farm or businesses inundated were between two to three times more likely to report suicidal ideation.³

¹ Zara, C., Parkinson, D., Duncan, A., & Joyce, K. (2016). Men and disaster: Men's experiences of the Black Saturday bushfires and the aftermath. *Australian Journal of Emergency Management*, 31(3), 40-48.

² After the fires: the impacts of the 2019-2020 black summer bushfires on the wellbeing of emergency service personnel. Wave 1 executive summary. Available from: [After-the-Fires-Survey-Report-Exec-Summary-Wave-1.pdf](https://www.uwa.edu.au/after-the-fires-survey-report-exec-summary-wave-1.pdf) (uwa.edu.au)

³ Matthews, V., Longman, J., Berry, H. L., Passey, M., Bennett-Levy, J., Morgan, G. G., Pit, S., Rolfe, M., & Bailie, R. S. (2019). Differential Mental Health Impact Six Months After Extensive River Flooding in Rural Australia: A Cross-Sectional Analysis Through an Equity Lens. *Frontiers in public health*, 7, 367

Effective resilience building in response to natural disaster must include considerations for suicide risk. Recommendation 12 of *Stronger Together* identified that building resilience requires a focus on health and wellbeing through public health policy,⁴ and the *South Australian State Public Health Plan* notes that suicide is considered a complex public health issue.⁵ In alignment with these priorities, the refreshed Strategy provides an opportunity to build on this focus by explicitly recognising suicide prevention across preparedness, response and recovery for natural disasters. Disasters can exacerbate underlying risk factors related to suicide such as financial distress, unemployment, relationship breakdown, domestic violence, social isolation, and can lead to mental health problems placing people vulnerable to suicide. Disasters also significantly impact people already disproportionately impacted by suicide (such as Aboriginal and Torres Strait Islander peoples, LGBTQIA+ communities, people from culturally and linguistically diverse communities, young people, people with disabilities, people who live in rural and remote areas and veterans), frontline workers and first responders more significantly than the general population. Embedding suicide prevention considerations would support state-based efforts under the *People at Increased Risk in Emergencies Framework for South Australia 2025-2029*, which identifies that states have a responsibility to “embed systems and strategies to maximise the capacity of people most at risk in emergencies to mitigate against and adapt to climate extremes and hazards”.⁶

Providing targeted support training prior to a disaster can build community capacity to support at-risk individuals and contribute to increased disaster resilience. Training programs such as psychological first aid addresses social, psychological, and practical support for people experiencing distress from disasters, and is a recommended approach in supporting people in the aftermath.^{7,8} In addition, evidence-based suicide prevention training can build on and complement psychological first-aid training to support frontline workers, community ‘connectors’ and ‘gatekeepers’ to identify, monitor and respond to future suicide risks that emerge in communities impacted by disasters. Investing in this capability before disasters occur would strengthen South Australia's preparedness and enable communities to identify and respond to suicide risk as part of the immediate response and longer-term recovery process. This would also ensure that the strategy is effectively aligned to actions under the *National Suicide Prevention Strategy*, which recommends the incorporation of suicide prevention capacity-building and processes as part of standard recovery responses for disasters, spanning both immediate and long-term recovery efforts.⁹

Disaster-related suicide prevention responses require funding that can be activated rapidly and sustained for as long as communities need it. The *National Disaster Mental Health and Wellbeing Framework* articulates that effective disaster recovery in the context of mental health and crisis requires adequate funding and planning for the preparation, response and recovery from disasters across a long-term horizon.¹⁰ The Framework further notes that this is in part because community need for specialised mental health support can emerge many months or years following a disaster.¹¹ Reflective of this, the State Government should provide discretionary funds to respond to need for suicide prevention in the event of future disasters or economic crises, such as bushfires, floods or

⁴ South Australian Fire and Emergency Services Commission. (2019). *Stronger together: South Australia's disaster resilience strategy 2019-2024*. Government of South Australia. <https://www.safecom.sa.gov.au/initiatives/stronger-together-south-australias-disaster-resilience-strategy/> [safecom.sa.gov.au]

⁵ SA Health. (2026). State public health plan 2026: Healthy | liveable | connected. Government of South Australia.

<https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/about+us/legislation/public+health+act/state+public+health+plan/state+public+health+plan>

⁶ Department of the Premier and Cabinet. (2025). People at increased risk in emergencies framework for South Australia 2025-2029. Government of South Australia. https://www.dpc.sa.gov.au/__data/assets/pdf_file/0020/1218107/People-at-increased-risk-in-emergencies-framework-for-South-Australia-2025-2029.pdf

⁷ World Health Organisation. (2011). New psychological first aid guide to strengthen humanitarian relief, News release, available online: <https://www.who.int/news/item/21-10-2011-new-psychological-first-aid-guide-to-strengthen-humanitarian-relief>.

⁸ Phoenix Australia. (2021). Psychological First Aid, Phoenix Australia, Victoria, Australia.

⁹ National Suicide Prevention Office. (2025). National Suicide Prevention Strategy 2025-2035. [National Suicide Prevention Strategy 2025-2035](#)

¹⁰ National Mental Health Commission. (2024). National Disaster Mental Health and Wellbeing Framework: Supporting Australians' mental health through disaster. Australian Government.

¹¹ Ibid.

epidemics, and for extended time periods, e.g., up to two to three years after a disaster. Funding should account for increased demand across existing suicide prevention and crisis services, and support continuity of care as immediate disaster supports transition to longer term supports. Targeted funding should focus on services that bridge accessibility challenges during disasters such as crisis lines and digital supports; in combination with active in-reach activities including community-based services, response and recovery programs, and bereavement supports. This should be implemented in a way that considers the needs of population groups who may experience heightened suicide risk before, during and after disasters.

Explicit inclusion of suicide risk considerations across disaster resilience planning provides a critical opportunity to provide effective support and create long-term resilience across vulnerable communities. If you require any further information, please contact Stephanie Trainor, Policy Advisor, Suicide Prevention Australia stephaniet@suicidepreventionaust.org.

Yours sincerely



Nieves Murray
Chief Executive Officer
Suicide Prevention Australia