

## *Gurumba Bigi & Welcome*

I would like to acknowledge and pay my respects to the First Nations custodians of the unceded lands we are all meeting on and from today across Qld and Australia.

This includes the **Ugarapul Peoples**, here on the edge of the beautiful Scenic Rim in Southern Qld.

To Elders, past and present, and to country, thank you for your generosity, spirit, and teaching.

To our emerging leaders and First Nations colleagues joining today, may we work together in unity to create a world that supports all people to flourish.

A warm welcome and big thank you to all for being here and prioritising our children and young people.



Thriving Queensland Kids Partnership



Thriving Kids in Disasters is funded by The John Villiers Trust

# Thriving Kids in Disasters | Words into Practice WEBINAR 2

## Webinar 2

### Thriving Kids in Disasters: Words into Practice

Supporting kids' and caregivers' social and emotional wellbeing in disasters

Wednesday 23rd October 2024  
11:00am - 12:15pm



**Host:** Anita Egginton, PhD *Thriving Qld Kids Partnership*

With over 30 years of practice, academic training, and lived experience of significant events, Anita's role in TKiD is to resource practitioners, organisations and groups to support the wellbeing and resilience of kids across the different phases of disaster management in Queensland.



### Guest Presenters:



**Sharleen Keleher, PhD** *Qld Centre for Perinatal and Infant Mental Health*

Sharleen's doctoral research focused on designing a professional learning program for educators and teachers that fosters disaster resilience in early childhood. Working with the beloved Birdie's Tree team Sharleen is committed to children's holistic development and is well placed to talk with us about creating learning and care environments that empower children to thrive in and beyond disasters.



**Brad Morgan** *Emerging Minds*

As the Director of Emerging Minds, Brad leads the delivery of national strategies and activities designed to strengthen support for child mental health, trauma, child development, and parent and family mental health. Brad's focus is on combining practice and lived experience expertise with international and Australian research to develop robust health promotion, prevention, and early intervention.

# Housekeeping

- This is a 1hr and 15 minute webinar – **microphones and video are turned off**
- The session will be **recorded**
- Please use the **Q&A function** throughout the webinar
- **Tech/other support** from Sophie Morson and Kamila Davidson (TQKP collaborators)



# Why we are hosting these webinars

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We want to:

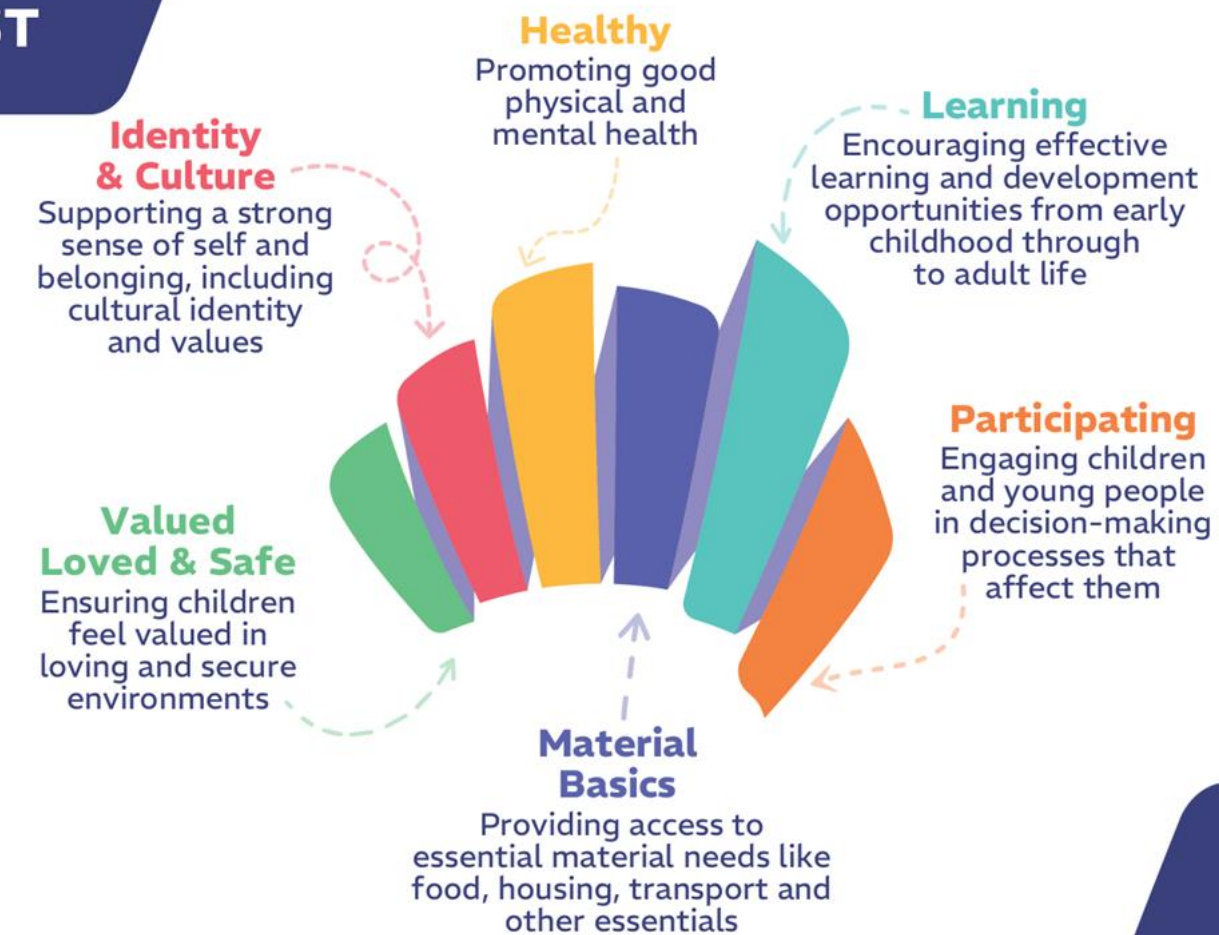
1. Increase attention to the wellbeing and resilience of kids in Qld disaster management settings
2. Provide people involved in disaster management and allied operations with access to contemporary child and youth centred practices, people, programs, and resources that provide examples of how they might support kids and caregivers in PPRR settings



# Supporting the social and emotional wellbeing of infants, children, young people and their caregivers in disaster settings



## THE NEST



What surrounds us and happens to us shapes us. To thrive, infants, children and young people need healthy developmental environments where their needs are met, their wellbeing is prioritised, and their resilience nurtured.

# TKiD review of evidence

- All recovery activity should recognise, respect and build on the skills, knowledge, capacity, connections, needs, and interests of individuals, families, groups, services, and institutions
- Actions/ plans for service and investment must be informed by a nuanced understanding and agreement of what is needed, by who, how it should be delivered, and who should deliver it
- This requires respect for people's diverse lived experiences, resources, and expertise; local knowledge and ways of being-doing-knowing; and a culture of inclusivity and collaboration
- A range of age and development appropriate supports across a spectrum of services is generally required, and wherever possible should be delivered by or in partnership with the local community and existing service system
- Psychosocial recovery, like physical recovery, takes years.

## Beyond Bushfires research

(Gibbs et al 2015)

“In interviews children, young people and parents highlighted the exposure to individual and community level trauma and dislocation, the effects of which were expressed in every element of their lives”.

We must draw on people's lived experiences and work in partnership with them through their disaster experiences

## Assessments of children's disaster recovery needs

(UNICEF, Royal Far West et al 2020-24)

“There was clear evidence of children's capacity to recognise and address the challenges of a post-disaster context, contributing to important decision making about their lives”.

Assessments undertaken across three states in recent years reveal a lack of planning for children when it comes to disaster response and recovery, and this is leading to long-term consequences.

“When disasters occur, children may experience a range of vulnerabilities: psychological, physical and educational. These vulnerabilities tend to be interconnected and mutually reinforcing ... Moreover, vulnerability factors tend to build up over time and cluster together resulting in what we refer to as accumulative vulnerability”

Fothergill and Peek, 2015



Hand over to Sharleen  
Keleher, QCPIIMH

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# Early Childhood Disaster Resilience and Recovery: A multi-disciplinary approach

Thriving Kids in Disasters: Words into Practice

Dr Sharleen Keleher





Children's Health Queensland Hospital and Health Service  
pays respect to the Traditional Custodians of the lands  
on which we have the privilege to work on.

We acknowledge and pay our respects to Aboriginal and  
Torres Strait Islander Elders past, present and emerging.

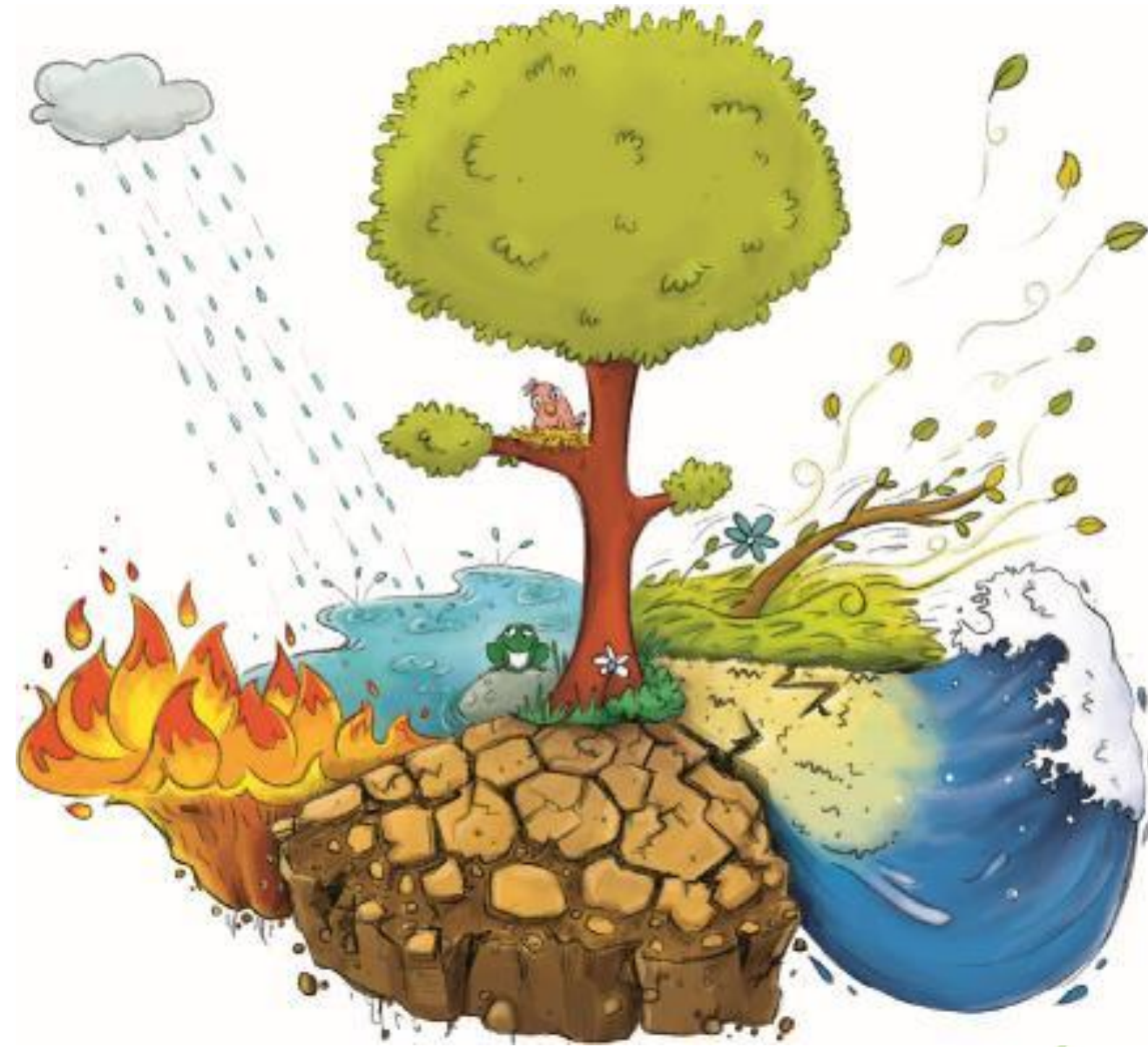


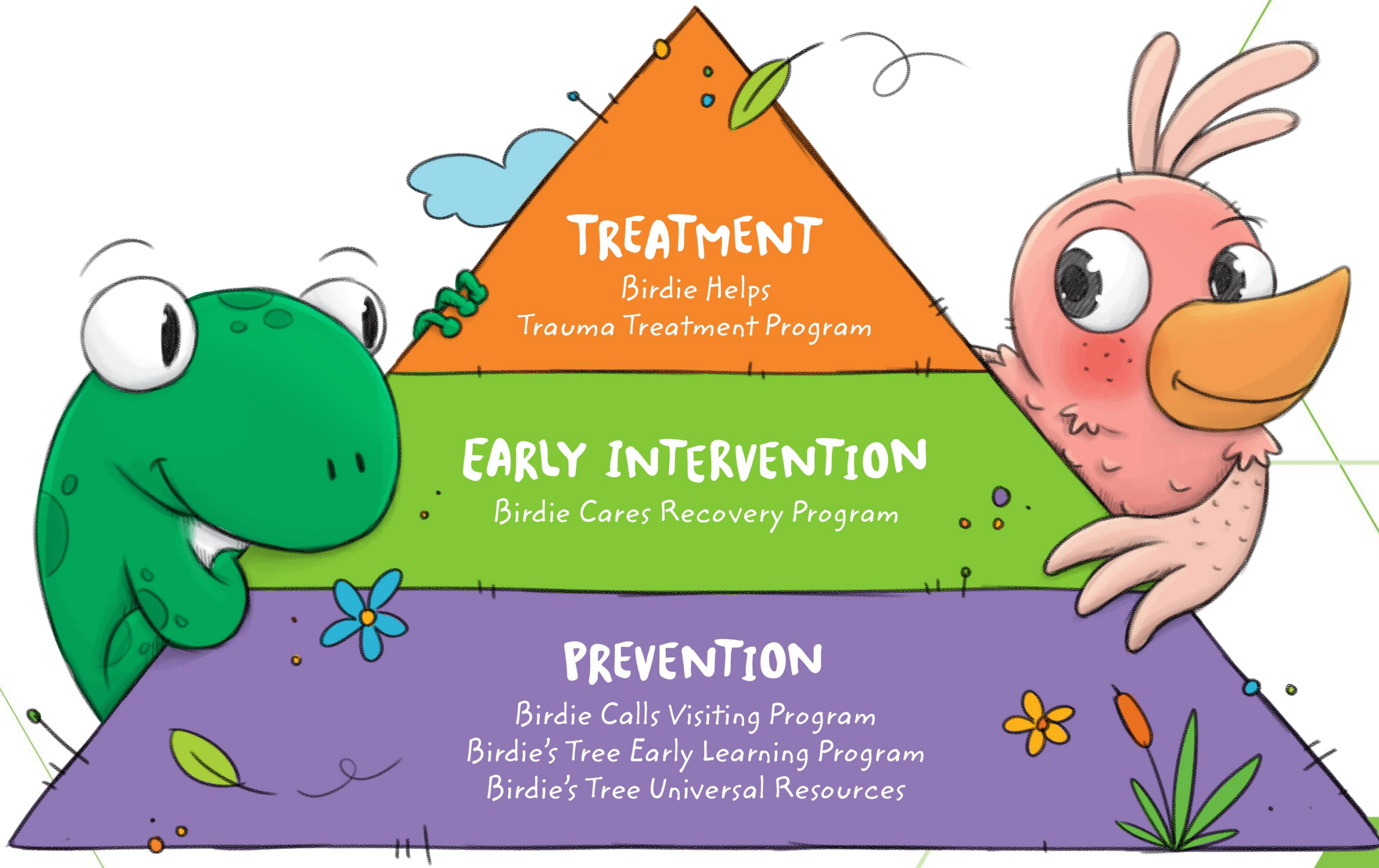
# Recognition of Lived Experience



We recognise the lived experience of mental health challenges within our work teams, partners and clients. We are grateful for the lived experience expertise that informs our ongoing practice.

## How did Birdie's Tree begin?





## TREATMENT

Birdie Helps  
Trauma Treatment Program

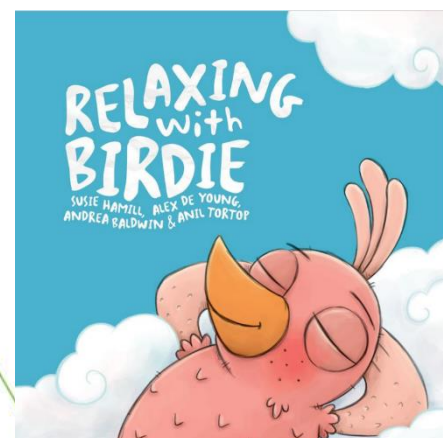
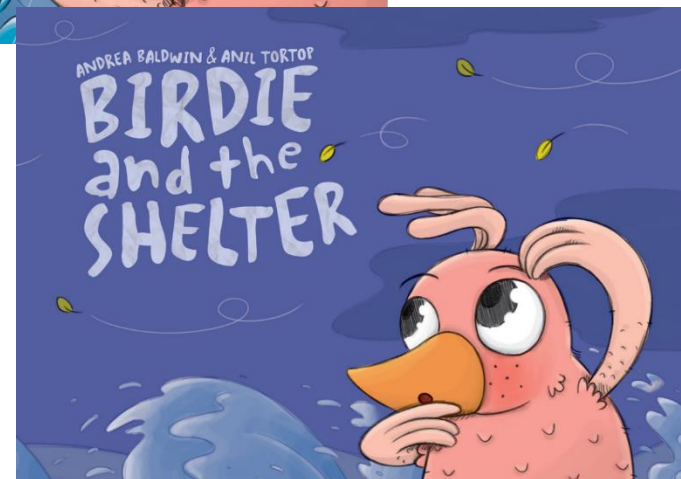
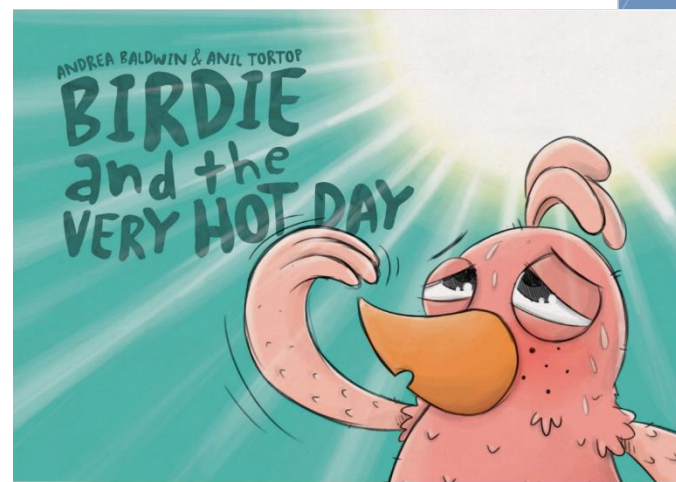
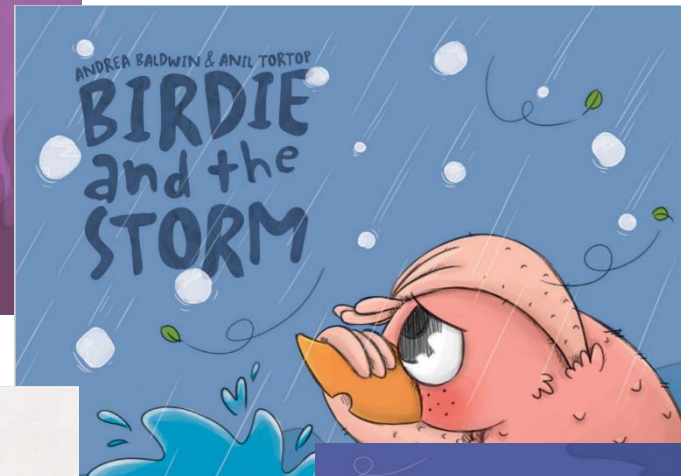
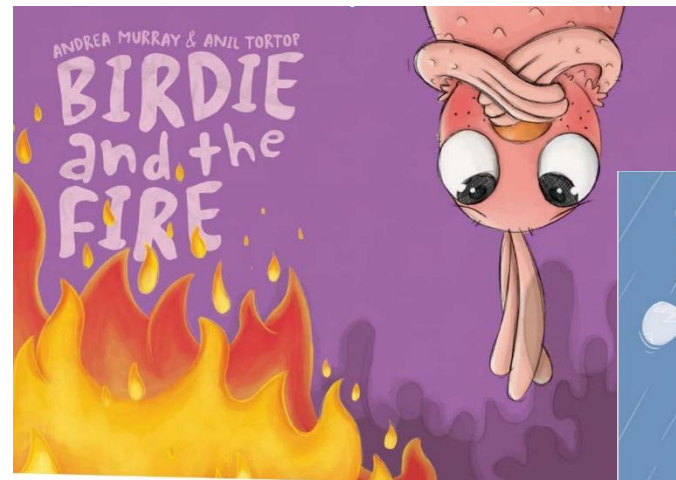
## EARLY INTERVENTION

Birdie Cares Recovery Program

## PREVENTION

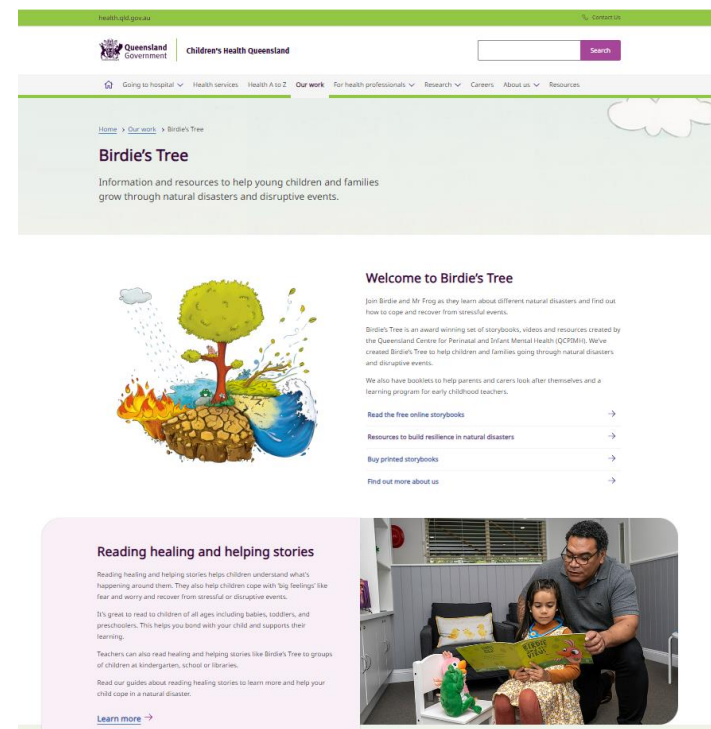
Birdie Calls Visiting Program  
Birdie's Tree Early Learning Program  
Birdie's Tree Universal Resources

11 storybooks



Mindful movement

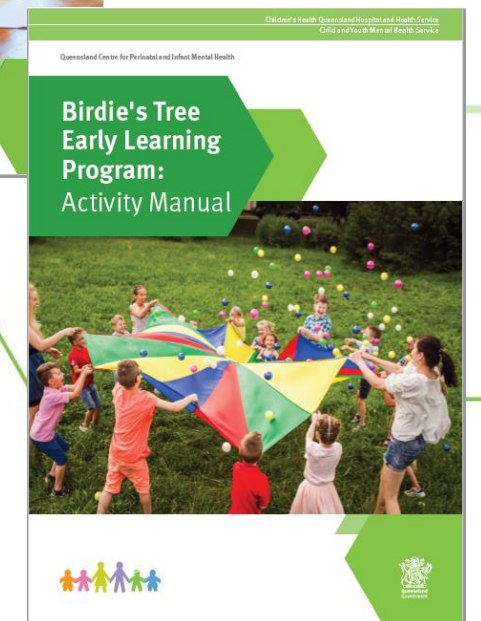
Website



Early Intervention



Professional learning for ECEC educators





# Common reactions in babies and young children



Sadness



Sleeping problems



Increased clinginess or separation anxiety



Emotional outbursts or temper tantrums



Going backwards in previously developed skills



New or increased fears and worries



# Common reactions in adults and caregivers



Feeling irritable and being snappy towards others



Having trouble sleeping



Experiencing low motivation, mood or energy most of the time



Withdrawing from family and friends



Worrying more than usual or having difficulty controlling worry



Not enjoying the things you used to



Finding it difficult to wind down



Drinking more alcohol or using other drugs to help you relax



# Risk factors

## Pre-existing

- Temperament
- Physical illness
- ACEs/trauma
- Intergenerational trauma
- MH concerns
- Poor attachment
- Female
- Genetic risk

## Event-related

- Threat of life/ injury to parent
- Death of parent/s
- Threat of life/injury to self
- Separated from parent/s
- Parent distress
- Home destroyed
- Evacuated

## After

- Parent-child relationship difficulties
- Parent distress
- Family stressors & dysfunction
- House disruption
- Emotion dysregulation
- Low social support

# What helps?

## Talk

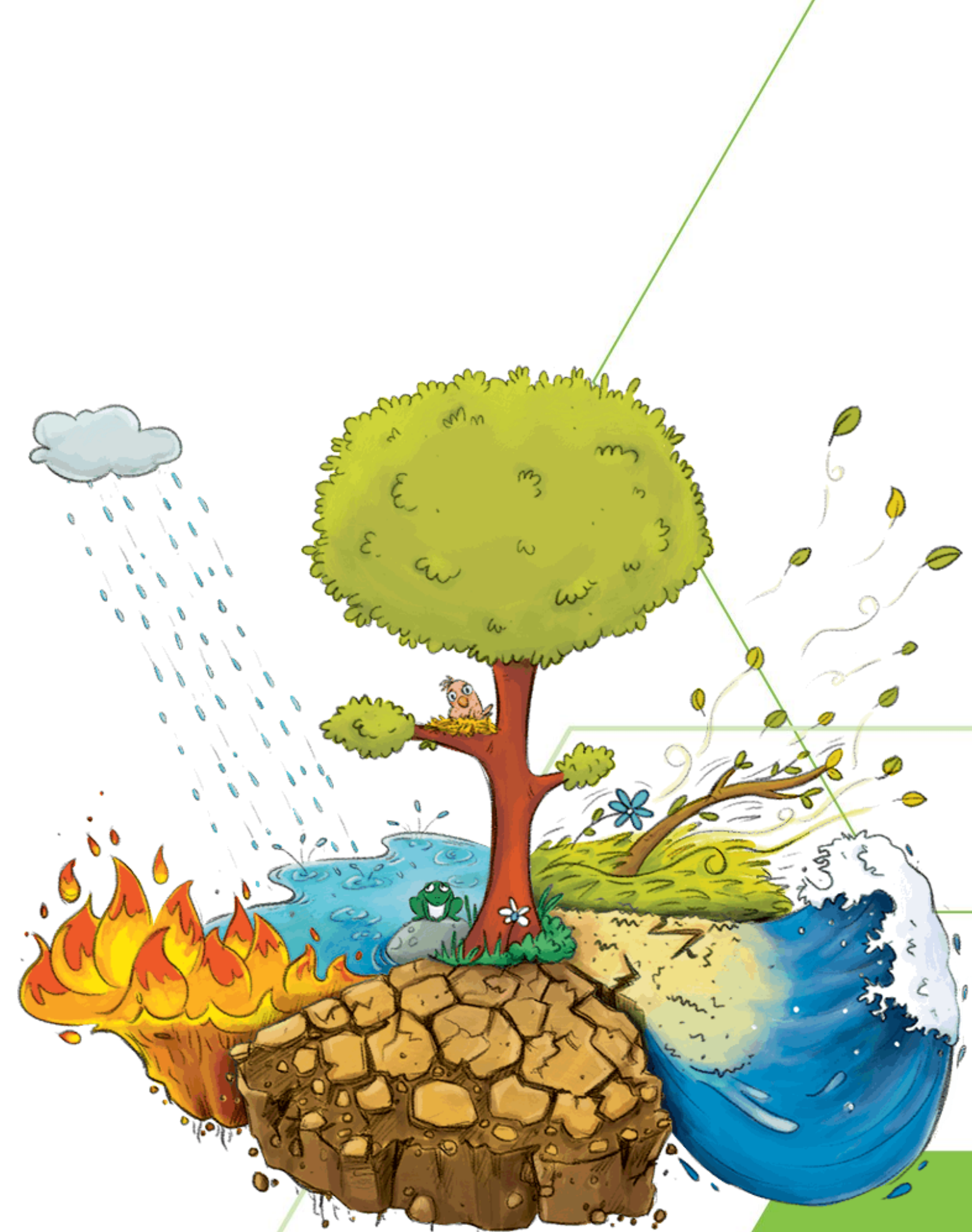
- Young children know more than we think - don't avoid discussion
- Provide age-appropriate information
- Increased knowledge decreases anxiety
- Don't scare – talk about what happened, what can be done, what will happen next
- Interaction + guidance = problem-focused coping

## Play

- Children process emotional experiences through play
- Enable children's agency in response and recovery
- Therapeutic games can help – sense of success and mastery

## Tell stories

- Language helps children grasp and share their experiences
- Therapeutic stories contain, structure and interpret emotional experiences
- Emotional literacy – words for 'big feelings'



# Birdie's Tree Early Learning Program: Evaluation

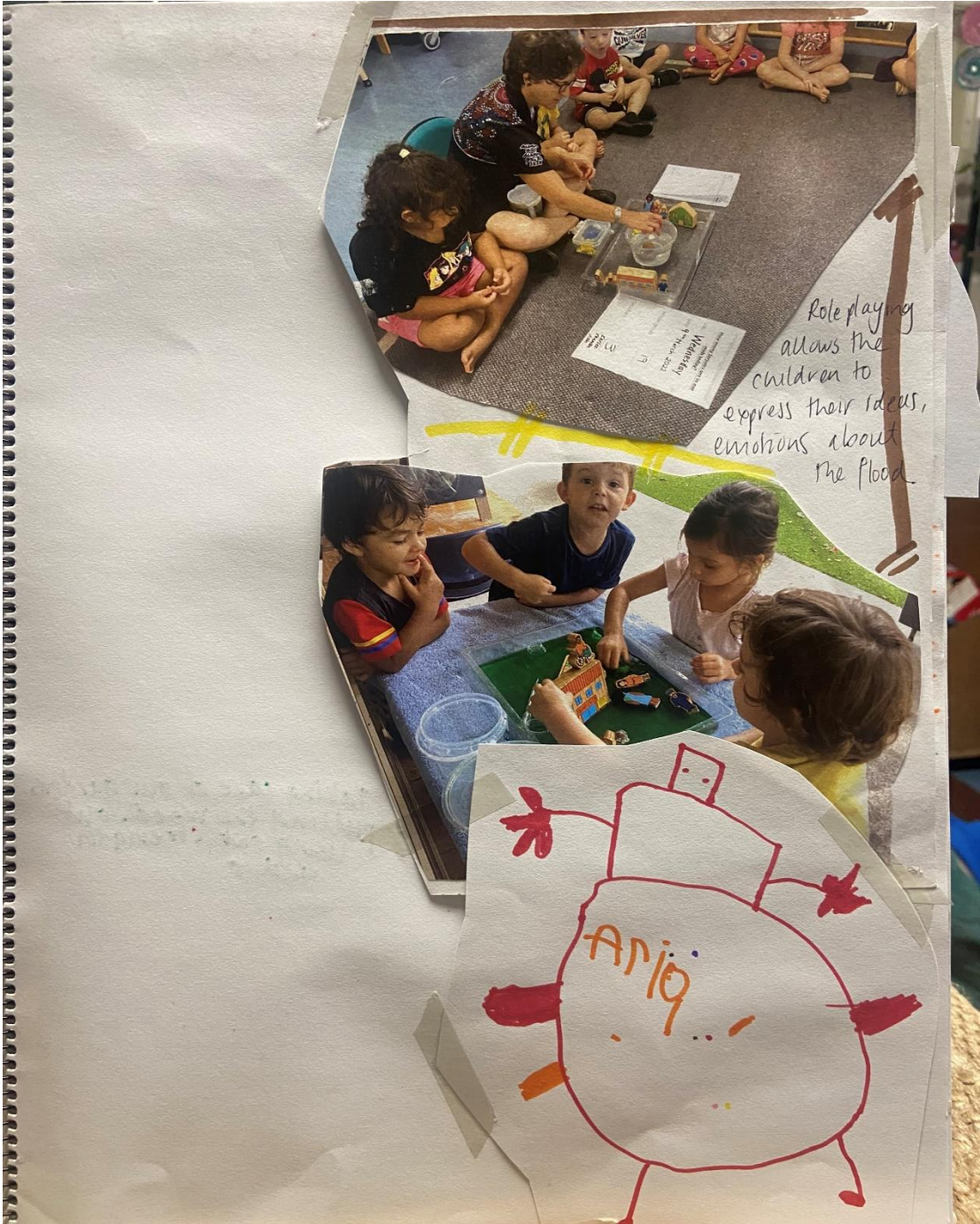
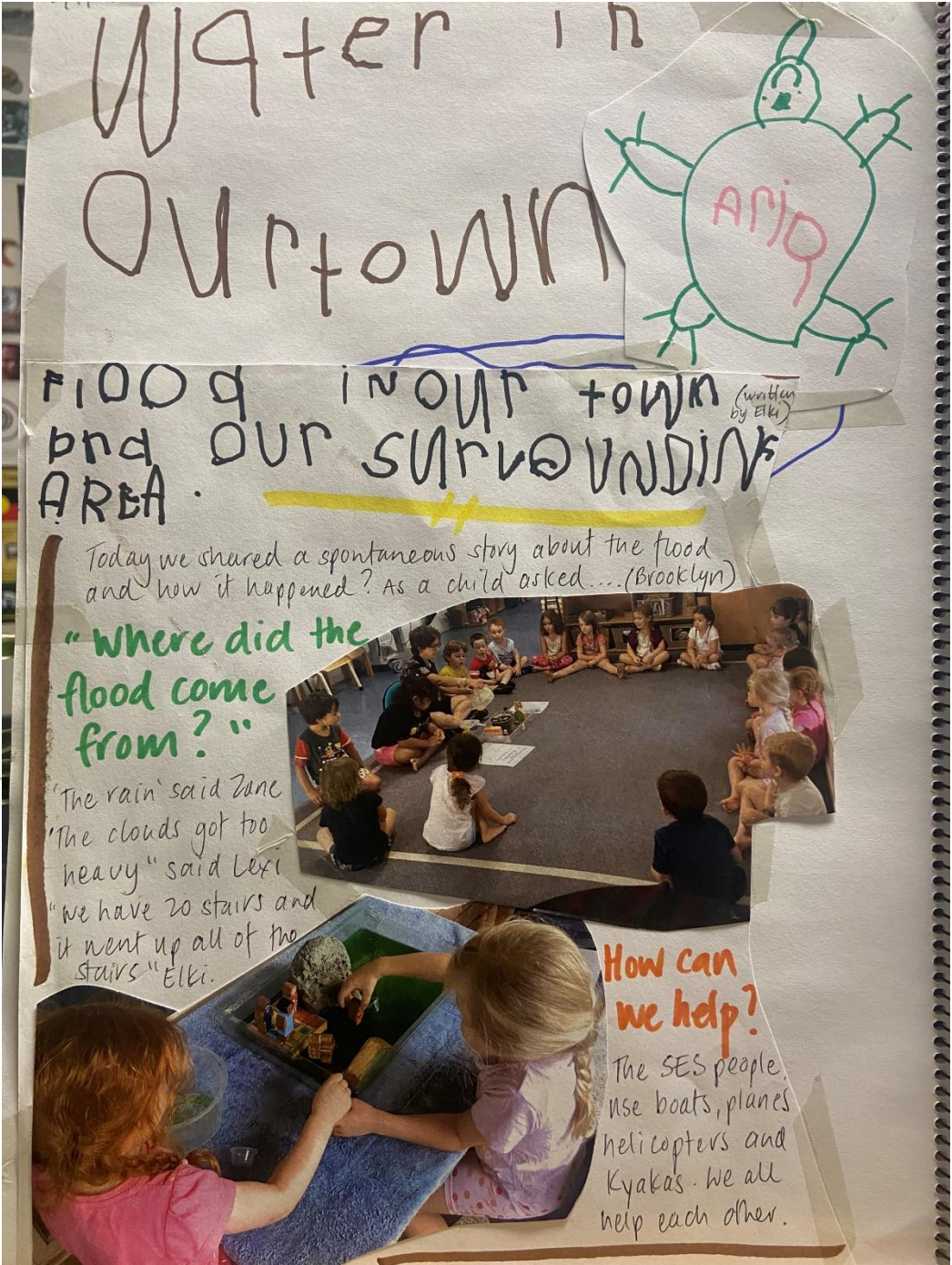


- Mixed methods study
- Over 200 early learning centres across Qld and NSW
- Tailored delivery informed by consultation

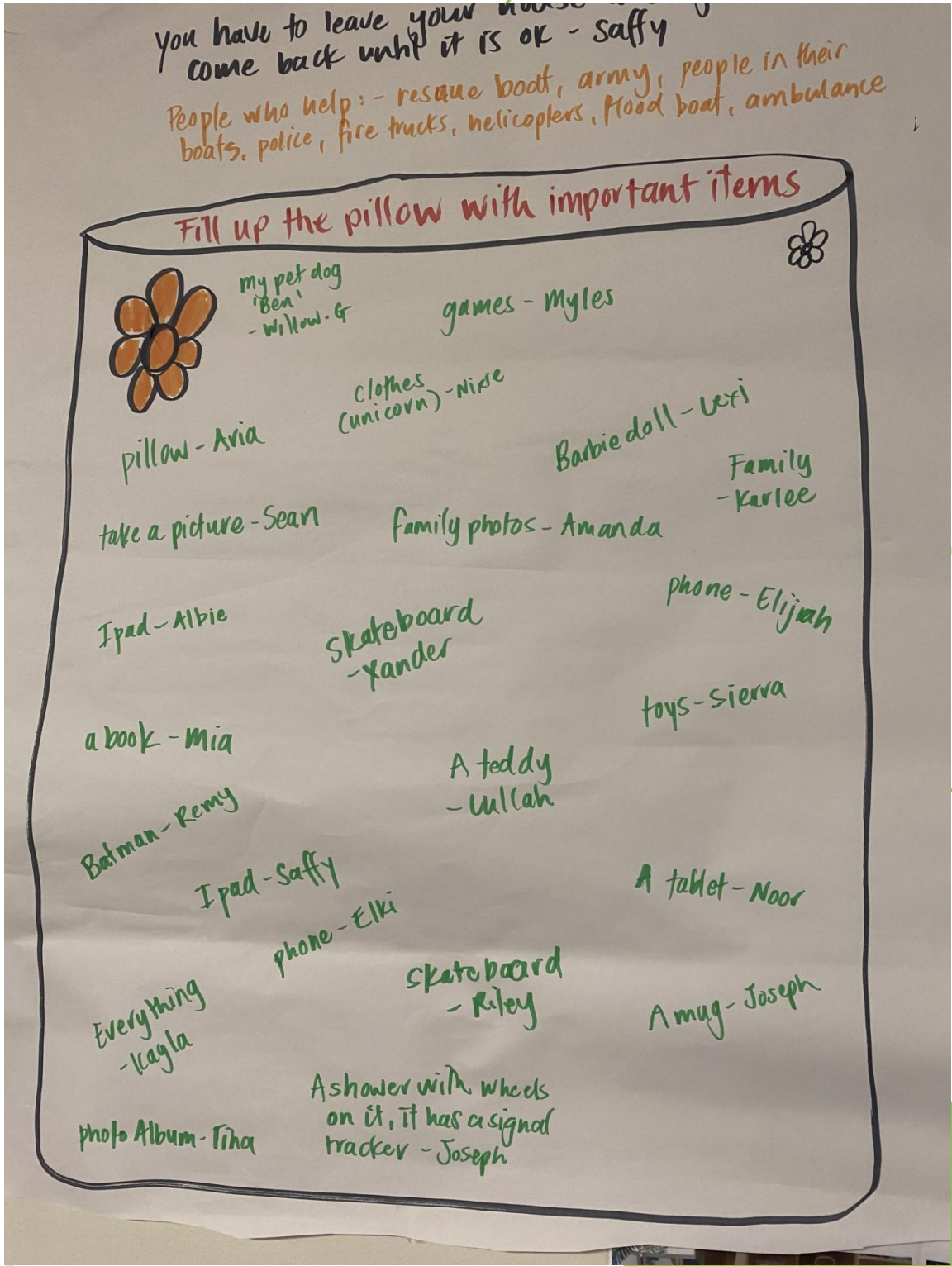
# Working together



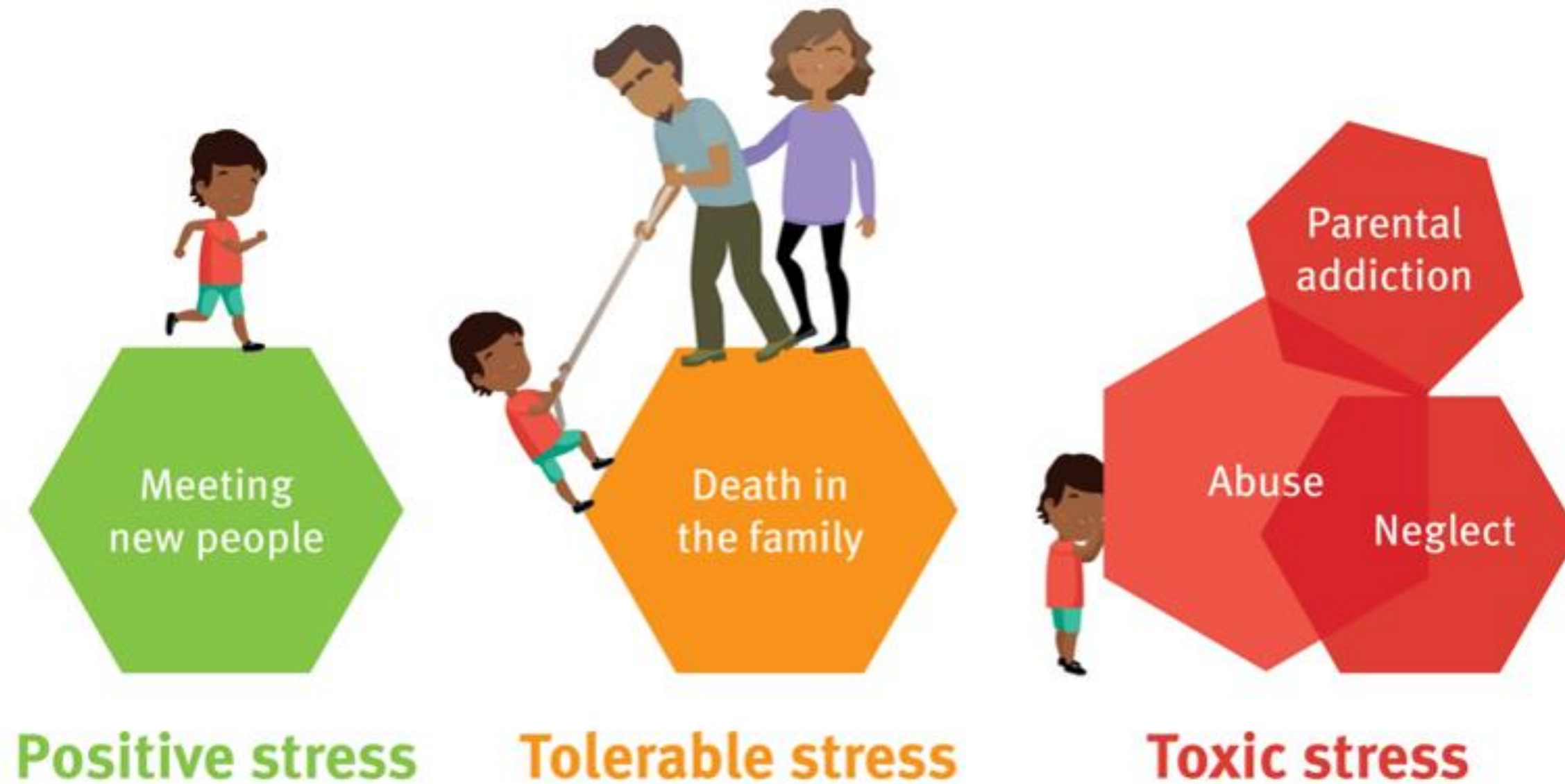
# Observing children's responses



# Supporting children's understanding of severe weather and disasters in responsive ways

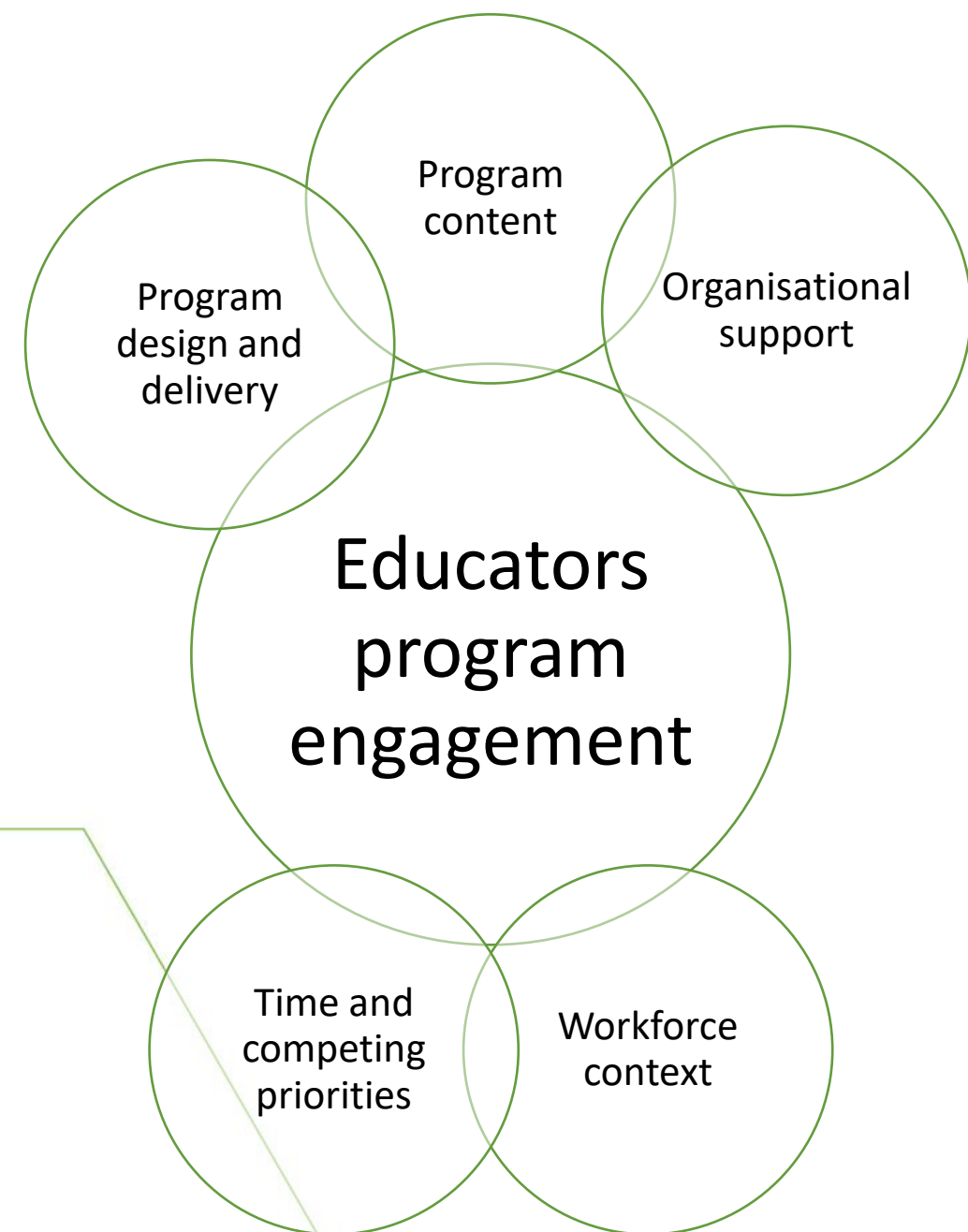


# Disasters don't happen in isolation





# BTELP: Summary of findings



- Consistencies in educators' use of Birdie's Tree resources regardless of centre type and location
- Focus on place-based practices
- Educators' commitment to supporting children navigate learning and social challenges
- Collaborating with the community
- Connectedness with nature and through centre-family relationships
- Children as active agents in their learning

# BTELP: Recommendations

Professional learning for disaster resilience education should be a national education workforce development priority.

- Explicit alignment with relevant curriculum frameworks
- Place-based, responsive and adaptable to emerging issues in the context
- Structure for reflections that supports
  - educators' active engagement in learning
  - connects with their teaching practice and children's learning
- Connect with educators' context
- Flexible
- Organisational supports to reduce barriers for engagement
- Awareness of workforce challenges

Infants and young children must be considered and included in disaster preparedness, resilience and recovery policies and procedures.

<https://www.childrens.health.qld.gov.au/our-work/birdies-tree-natural-disaster-recovery>

or browse 'Birdie's Tree'

Queensland Centre for Perinatal and Infant Mental Health

[birdies-tree@health.qld.gov.au](mailto:birdies-tree@health.qld.gov.au)

Ph. (07) 3266 0300





Thriving Queensland  
Kids **Partnership**

connect • catalyse • learn

Quick  
questions



Hand over to Brad Rogers,  
Emerging Minds

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# Thriving Kids in Disasters: Words into Practice

Supporting kids' and caregivers' social and emotional wellbeing in disasters

**Emerging  
Minds.**

National  
Workforce  
Centre for Child  
Mental Health





## **Acknowledgement of Country**

We recognise the land on which we meet today and pay respect to Aboriginal and Torres Strait Island Peoples, their ancestors, the elders past, present and future from the different First Nations across this Country.

We acknowledge the importance of connection to land, culture, spirituality, ancestry, family and community for the wellbeing of all Aboriginal and Torres Strait Islander children and their families.

# Emerging Minds

- Interactions and behaviours are shaped by multiple variables operating in a system.
- Many variables are by design (policy and programs, practice guidance)
- Some variables make interactions and practices harder.
- Some make it easier.

Policy and Programs

Organisations

Practice Leaders

Practitioners

Families

Our work is to understand and intervene in different variables to make delivering support for infant and child mental health

- **Easier**
- **Expected**
- **Expanded**
- **Equitable**



# Our work in disasters

- To increase the visibility of infants, children, young people and their caregivers in disasters
- Supporting systems change to make supporting infants an expected and embedded part of disaster preparation, response and recovery
- Learning from children, families, practitioners, researchers and communities about what supports their mental health and wellbeing
- Translating this knowledge to make it practical and accessible for children, families, professionals and communities



# Importance of a systemic approach to child mental health following a disaster



**Meaningful  
collaboration  
across all layers  
of the system is  
essential**



# **Systems Change + Practice Change**

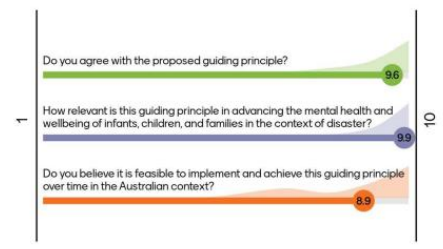
# What has been happening?



3. F  
Inf



## 2. Understanding the Context from an Infant, Child, and Family Perspective



emerging minds

Are there any comments you would like to suggest which relate to this principle?

I'm not sure what 'implementation' of this principle means in practice. Is the action 'understanding'?	I think that it might be helpful to have some text that need to understand the family context.	The question is about how we can understand the perspectives of infants, children, and families. 'Families' will need some unpacking. This has to be an inclusive term of the variety of families.	Through the child's perspective - using a child's view and starting point. This is also context
physical and emotional, safety of play, gathering community places for children - child's view	Is it 'Successful preparedness and response to meet the needs of infants, children, and their families..?'	We need to separate and then combine the context perspectives of the infants, children and families. They may potentially be in conflict at times.	This needs time and is also ongoing - context is always changing. Will need to be a combination of community context and also the unique family context

emerging minds

### 3. Recognising and Navigating Complexity with Infants, Children, and Families in Mind

Successful preparedness and recovery recognises the intricate, dynamic and ever-changing nature of disasters and the impact on the mental health and wellbeing of infants, children and families.

emerging minds

It is likely to increase the potential for very by parties leadership have recognise and	Again I'm finding it difficult to rate the 3rd question on Meets. I'm not clear on what 'implementation' of the principle means, apart from recognising the truth of what's expressed in the principle.	I think this is the hardest to implement. Complexity is actually a word that doesn't mean much to me anymore because means different things to different people, and from my experience it is overused	Children in rural and remote areas disproportionately impacted but have least access to services
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emerging minds

Are there any comments you would like to suggest which relate to this principle?

I am wondering in all these principles about the framing and is the support for families is in order for them to be able to support children? It is not clear in how the principles are written.	the greater the complexity the harder it can be for the family to realistically access any support available	Do we need to recognise/acknowledge the additional complexity of cascading disasters and cumulative impacts	Trying to define complexity can be divisive as it means different things for different people. Rather than "complexity" could it be "factors which could create complexity"?
In terms of implementation, just noting complexity in navigating systems without it also being a disaster context. So consideration here might need to be the child's circumstances 'at the usual time.'			

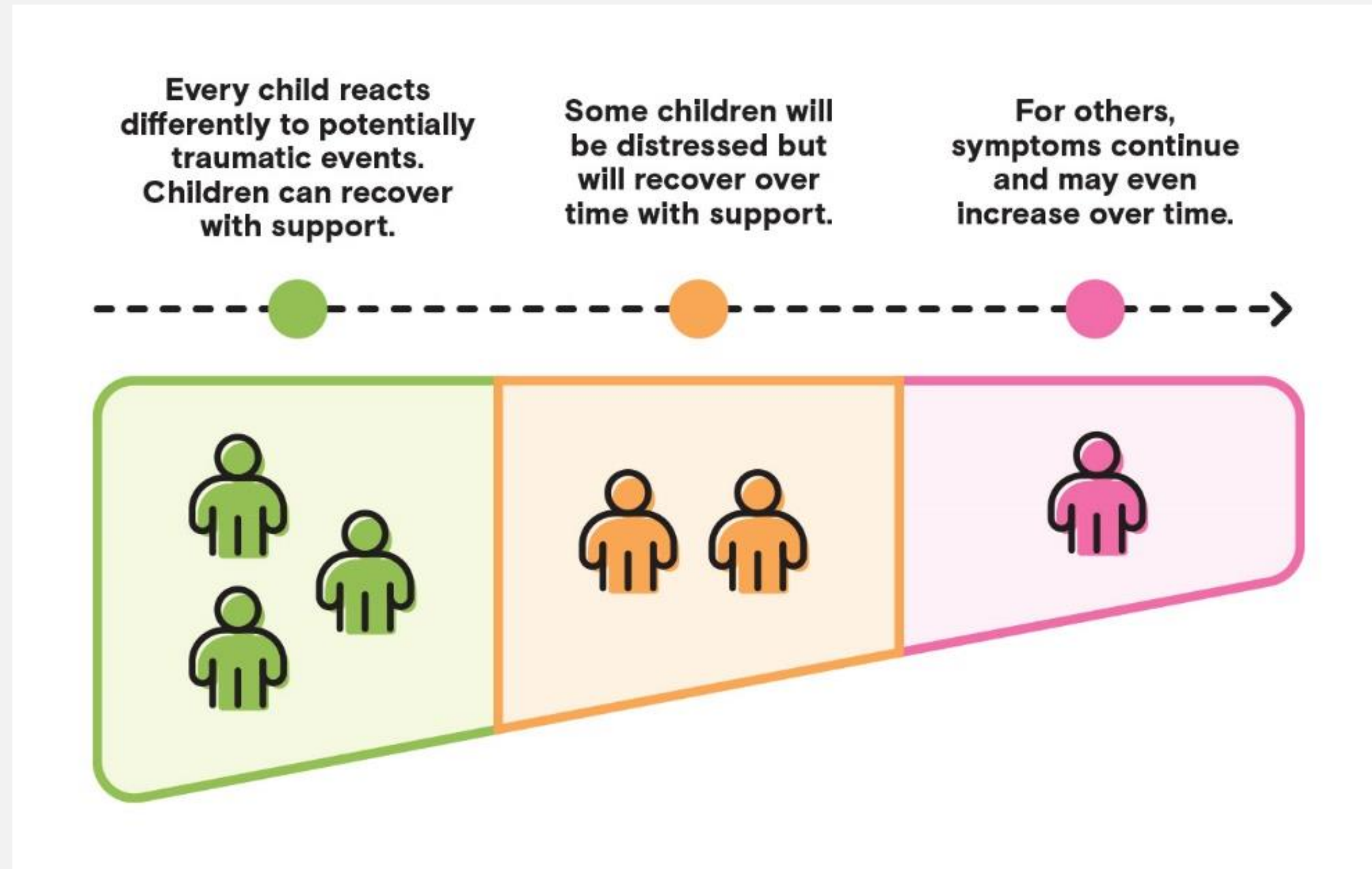
emerging minds

### 4. Infant, Child and Family-Centered Coordinated Disaster Preparedness and Response

Successful disaster preparedness and response necessitates a coordinated, adaptive approach that places infants, children and families at the core, ensuring seamless collaboration between community and partner agencies.

emerging minds

# What do we know about children's responses to disasters?



## Infants and children are often overlooked at a policy level

- Concerns across the sector due to inadequate consideration of infants and children in disaster planning.
- National Infant & Child Disaster Mental Health Advisory Committee (NICDAC) was formed with ACATLGN to address this gap at a policy level.
- The committee supports the National Workforce Centre (NWC) with strategies for children in disasters.
- NICDAC brings together sector researchers, practitioners, and leaders.
- It focuses on system-level responses, workforce needs, policy guidance, and implementing NWC initiatives.

Policy and Programs

Organisations

Practice Leaders

Practitioners

Families

## Leaders need a guiding framework

- Consultation with sector leaders revealed a need for organisational guidance on addressing infants' and children's needs in disasters.
- Ongoing collaboration highlighted the need for key actions to help guide child focused disaster planning, response, and recovery.
- NICDAC further highlighted the need for a strategic framework to guide system responses.
- Feedback from leaders, emphasised the importance of providing accessible, evidence-based information for leaders.

Policy and Programs

Organisations

Practice Leaders

Practitioners

Families



# Principles and Actions

Jun 2023  
Position Statement for Policy Guidance  
Brainstorming

Sep 2023

Nov 2023

Mar 2024



# Principles and Actions



## Questions

- Are you aware of any other similar frameworks or documents providing guidance on system responses specifically focusing on infants, children, families in the context of disasters?
- What are the key factors that need to be considered in developing this type of document/framework?
- Do you have any questions or additional comments?



# Principles and Actions

Jun 2023  
Position Statement for Policy Guidance  
Brainstorming

Sep 2023  
Refining Position Statements Breakout Room  
Discussion

Nov 2023  
Presentation of Guiding Principles & Menti  
Survey

Mar 2024

## 1. Use Infant, Child, Family, Community-Led Approaches

Infants, children and families are important members of the community. Successful disaster preparedness and response is grounded in prioritising the voices of children and families as valued members of communities, ensuring active participation, and tailoring support to the diverse needs of infants, children and families.



## 1. Use Infant, Child, Family, and Community-Led Approaches



Are there any comments you would like to suggest which relate to this principle?

Language use: Child voice assumed verbal; Community led - realistic, what do we mean	Let informed	how to share relevant info for inf young chn and families	We must avoid ambiguity in wording that could cause unintended adverse actions by others in the future
will need creative and innovative approaches to engage all - traditional methods often not engaging for children	Babies have big voices and can be very clear about whether they're happy or unhappy. The complexity is who interprets, and translates what they're expressing into actions in their best interests.	Agree with the emphasis on community-led, and then infant, child, caregiver (?) centred	

concerned about how this will look in reality.

Would you add "Community" to the Principle heading too? I think of 2 nearby communities following the 2019/20 bushfires which received different levels of support, creating a context for the future

## 2. Understanding the Context from an Infant, Child, and Family Perspective

Successful preparedness and response with infants, children, and families is grounded in a deep understanding of the unique context of their community environment where they live, learn, grow, and play. These contexts shape their health, well-being, development, and learning before, during, and after disasters in the short and long term.



## 3. Recognising and Navigating Complexity with Infants, Children, and Families in Mind

Successful preparedness and recovery recognises the intricate, dynamic and ever-changing nature of disasters and the impact on the mental health and wellbeing of infants, children and families.



Are there any comments you would like to suggest which relate to this principle?

I am wondering in all these principles about the framing and is the support for families in order for them to be able to support children? It's not clear in how the principles are written.	the greater the complexity the harder it can be for the family to realistically access any support available	Do we need to recognise/acknowledge the additional complexity of cascading disasters and cumulative impacts	Trying to define complexity can be divisive as it means different things for different people. Rather than "complexity" could it be "factors which could create complexity"
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Successful disaster preparedness and response necessitates a coordinated, adaptive approach that places infants, children and families at the core, ensuring seamless collaboration between community and partner agencies.



# Principles and Actions

Jun 2023

Position Statement for Policy Guidance  
Brainstorming

Sep 2023

Refining Position Statements Breakout Room  
Discussion

Nov 2023

Presentation of Guiding Principles & Menti  
Survey

Mar 2024

Further Development of Principles & Actions

Emerging  
Minds.

National  
Workforce  
Centre for Child  
Mental Health

## 1. Principles and Actions

You will remember from our work last year that the Principles and Actions document will provide overarching guidance on the rationale, evidence, principles, values, and experiences that inform infant, child, and family centred systemic responses to disasters. We thank you for your collective input in the development of the Principles and Actions. The document is intended to:

- Raise awareness and visibility of the unique needs of infants, children and young people in disasters and the context of climate change.
- Represent collective principles, knowledge, experiences, and values that need to be considered in planning policy, systemic actions, and services responding to the needs of infants, children, and their families in the context of disasters.
- Summarise key actions that can be undertaken to improve systemic responsiveness and support for infant, child and young people's mental health and wellbeing (referencing the actions described in the Practice Guide listed below).

The primary audience for this document will be decision makers, policy leaders, peak bodies, local network leaders and organisation leaders. We note that many members of NICDAC are in these roles, and we hope that you will be able to use it in your own networks and assist you in contributing to policy and program design.

Initial principles have been formed and discussed with NICDAC. These are currently being refined further following further feedback and consultation. The 'Actions' section of this document will summarise many of the practices and strategies described in the Practice Guide, which will occur after the finalisation of the Practice Guide.

### Preparation for meeting:

Before the meeting, we kindly request all NICDAC members to review the minutes and discussions related to the principles and actions from our previous session. During our upcoming agenda, we will allocate a specific section to accommodate further insights and recommendations, aiding in the planning and development of the principles and actions.

Furthermore, please be aware that additional dedicated time will be earmarked in the upcoming NICDAC meetings later this year, specifically designated for discussions and advancements in this area. Your continued input and active participation are crucial as we shape and develop this work.



### Principle 1

Use community informed and led approaches that are inclusive of infants, children and families.

### Principle 2

Understand the context from an infant, child and family perspective.

### Principle 3

Recognise and navigate the dynamic complexity of disasters and their impact in relation to development, mental health and wellbeing of infants, children and families.

### Principle 4

Coordinate infant, child, family centred activity, planning and action across agencies, workforce and community to ensure collaborative and informed outcomes.

### Principle 5

Communication must be inclusive of children and families and be geared towards addressing the unique needs and concerns of infant, children and families.

### Principle 6

Recognise and strengthen capacity and capability to support, engage and enable infants, children and families in relation to disasters.

## There is a major gap in workforce skills and confidence

- National Workforce Survey revealed a major gap in skills and confidence for responding to children's needs in disasters.
- Survey distributed widely through Emerging Minds and over 100 stakeholders and organisations across Australia
- Doubled responses compared to 2020-21, with most being new respondents
- Over 3000 workers completed competency and disaster-specific questions
- 59% were aware of Emerging Minds beforehand, allowing for comparison of competency levels

Policy and Programs

Organisations

Practice Leaders

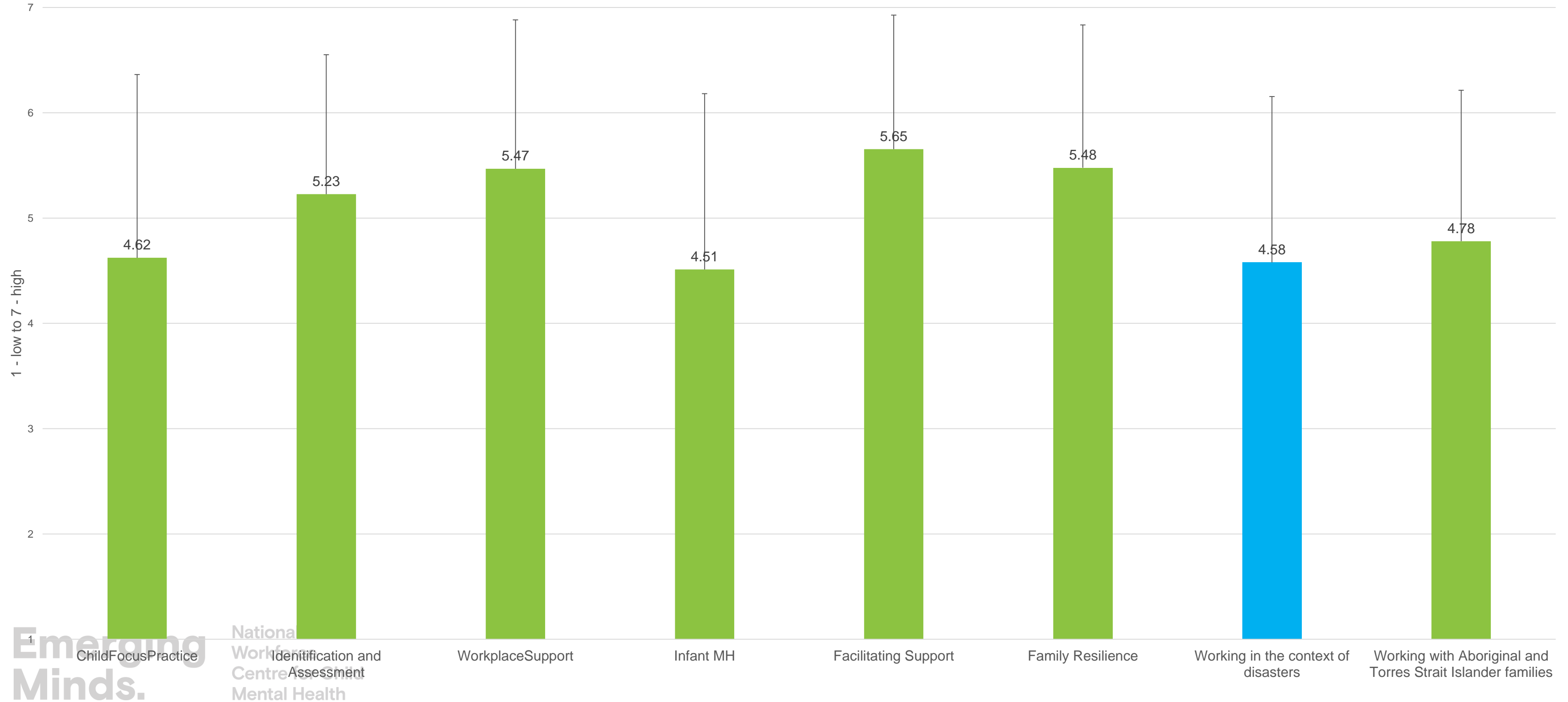
Practitioners

Families

# Generalist child mental health competency means scores

Answered by all respondents

Scores of 6-7 = high competence | 5-6 = moderate competence | 4 and below = low competence



# Key practices

Why we need to support infants and children before, during, and after disasters.

Understanding how disasters influence infants and children.

Disaster preparedness: A child-centred and family-focused approach.

Supporting infants, children, and families during and immediately after disasters.

Supporting infants, children, and families in an evacuation.

How psychological first aid can support infants, children, and families who experience a disaster (Part One).

Psychological first aid with infants and children: Practice guidance (Part Two).

The foundations of psychosocial support with infants, children, and families after disasters.

Practices for supporting infants and children after disasters.

Practices for supporting parents and families after disasters.

Looking after your well-being as a worker.



# Supporting Infants and Children in Disasters: A Practice Guide

- A comprehensive resource to enhance practitioners' work with infants, children, and families.
- Builds on the community trauma toolkit and provides more in-depth guidance on key practices.
- Covers the phases of disaster preparedness, response, and recovery.



## Co-designing with families is an essential part of the solution

- Families' insights have been essential for crafting solutions that address real challenges effectively.
- Parents and carers have identified a gap in approaches which address working with parents and the family as a whole.
- The Child and Family Partners Disaster Advisory Network was established to gain a deeper understanding of families' needs.

Policy and Programs

Organisations

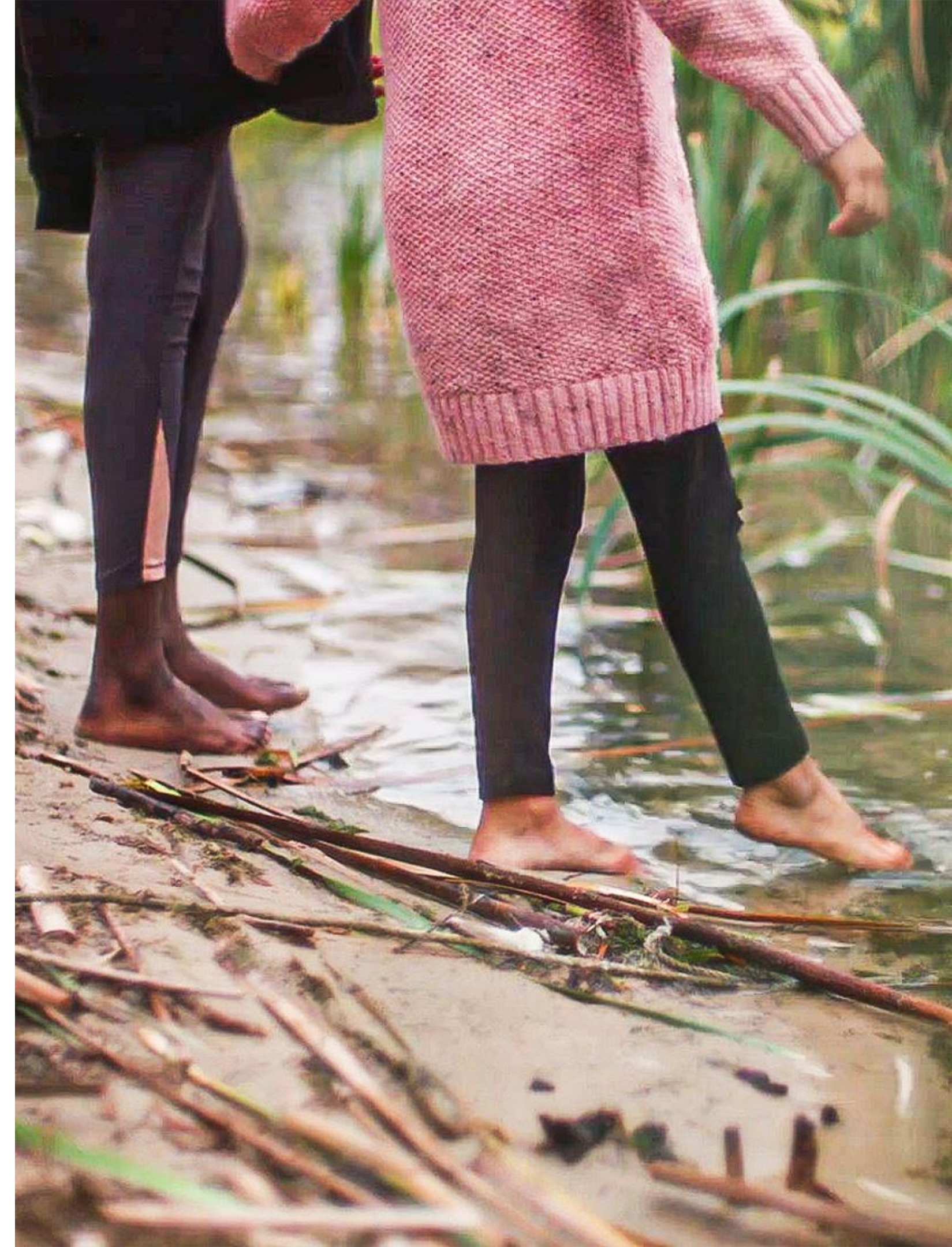
Practice Leaders

Practitioners

Families

“While each of us in our family experienced an injury, our family was also injured. Our whole family dynamic had gone from a place of play, safety and trust, to one where no one felt safe.

Over the years I found it really difficult to articulate to mental health practitioners that the family should be considered as another person or entity who needs to be supported, in a way that’s different to how you might work solely with an individual parent or child.”



“There was death everywhere. Livestock were dying, native animals are dying, plants are dying, 100-year-old-trees were dying. It was just everywhere you looked. But something that was really important for him was stability and routine... and trying to let him have an opportunity to be a child.”

**Emerging  
Minds.**

National  
Workforce  
Centre for Child  
Mental Health





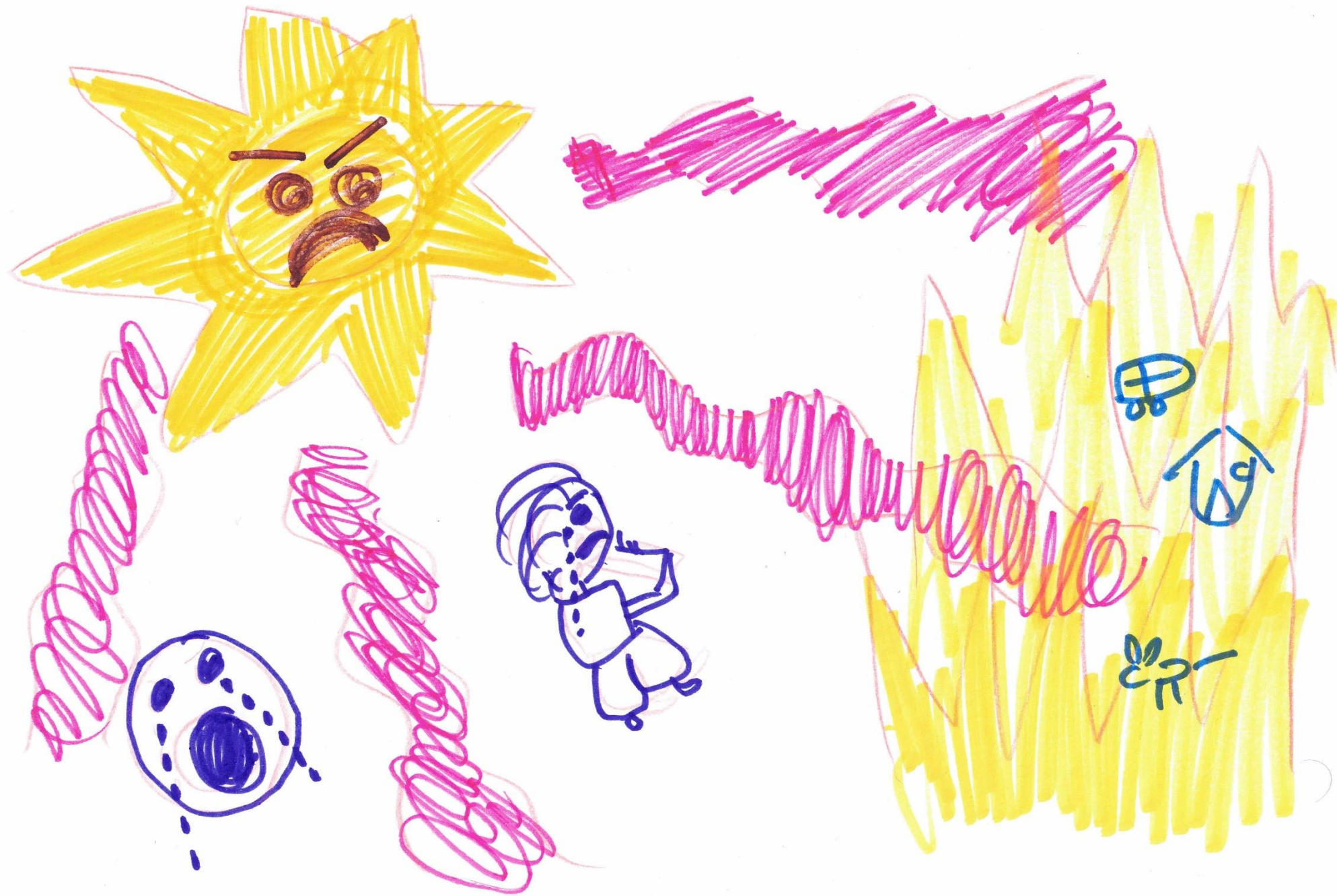
“We talked about what they needed [with the kids]. In the difference of feeling and being safe. And, they both agree that they need to know their parents are okay. They need to know that, you know, mum's okay. Dad's okay. They need to know that we're going to be okay.”

“I had intense guilt and shame not preparing for the fires.....I had no idea that there'd be two weeks where we couldn't even get food, like they helicoptered the army in to bring food in. And, you know, here I was with two packets of hot cross buns, so I felt awful. And then I, you know, at that point realised it wasn't helping my kids.”

**Emerging  
Minds.**

National  
Workforce  
Centre for Child  
Mental Health





I hate losing my life to fire.

- Drawing by 8 year old

Give the kids lots of understanding because you don't know their perspective of the disaster. The parents have probably been through things like that, but the kids haven't lived as long, so they might be more traumatised because they don't know what to expect. – 11 year old

Check in with their kids, on how they're feeling and seeing if they're going ok...you don't know how they're feeling. They will be feeling different to you. – 13 year old

# Family Hub & Resources

- The Family Hub will offer evidence-based digital resources and guidance for early intervention in mental health concerns for children aged 0-12 years.
- It is built around an online 'guided self-help model,' combining self-help resources with practitioner guidance.
- Co-designed with 21 practitioners and 29 lived experience advisors, the Hub's prototype will include learning pathways for families.
- A focus of the Hub will be pathways related to disaster recovery, with the prototype expected to be completed by June 2025.



# Changes to the way we view infants and children

From **PASSIVE**  
Viewing children as innocent, vulnerable and passive.



To **ACTIVE**  
Children are active in shaping their own lives, making meaning of their experiences, and possessing an array of skills, know-how, creativity & imagination, guided by values, beliefs and hopes.

From **NAÏVE**  
Viewing children as naïve and inarticulate.



To **KNOWLEDGEABLE**  
Children possess significant knowledge, language and understandings to define and describe both problems and solutions.

From **RECIPIENTS**  
Viewing children as passive recipients of services.



To **CONTRIBUTORS**  
Children are skilled and capable collaborators in the task of finding useful responses to problems and can make helpful contributions to others facing similar circumstances.

From **CATEGORIES**  
Solely assessing a child's congruence with mental health or developmental categories.



To **CONTEXT**  
Children's views and experiences exist in broader contexts, circumstances and relationships that surround them, that children can evaluate.





# Thank you.

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**Emerging  
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National  
Workforce  
Centre for Child  
Mental Health

**Community  
Trauma Toolkit  
QR code:**



**Families Disaster  
resources  
QR code:**





Thriving Queensland  
Kids **Partnership**

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Q & A



ThinkFeelDo sensory bears are an invaluable tool that help enable children struggling with trauma to regulate their emotions and talk about their feelings.



# Wrap up & Feedback

We'd love to hear about ideas this webinar has given you for supporting children and young people's wellbeing and resilience in the disaster management settings you operate in.

Look out for our **third webinar** at the end of November. Partners and collaborators from the **Resilient Kids program** in northern NSW will be joining us to share their different perspectives and experiences of setting up and running a regional, multi-dimensional child and youth focused flood recovery and resilience initiative.

# Would you like to know more about TKiD?



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Sign up to the TQKP newsletter -  
<https://share.hsforms.com/1nOobIL2PRpic2j3NPGVc7Qdtff3>

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