Understanding the role gender plays in survivor responses to disasters: evaluating the Lessons in Disaster Program

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Introduction

The Gender and Disaster (GAD) Pod is an initiative of two Victorian women's health organisations of Women's Health Goulburn North East (WHGNE) and Women's Health In the North (WHIN) that worked in partnership with the Monash University Disaster Resilience Initiative (MUDRI). Formally established in 2015, the GAD Pod promotes an understanding of the role gender plays in survivor responses to disasters.¹ Embedding these insights into emergency management practice builds on the initiatives emerging from WHGNE's foundational research of the 2009 Black Saturday bushfires in Victoria and earlier research on improving the health, safety and wellbeing of women (GAD Pod 2018).

In Australia and other countries, a growing body of research points to the significance of gender in determining disaster experience, recovery and resilience. Bushfire reveals itself as far from gender-neutral and greater than a 'natural hazard', exposing the distinct cultural and historical gender relations that underpin such events (Eriksen 2014). For women, genderbased issues during and following disasters include increased vulnerability through previous and existing family and domestic violence, as well as new or increased violence in the aftermath of the disaster. Relationship violence, child abuse and divorce all increase after disasters (Parkinson & Zara 2013) as does demands on women for unpaid work. Reduced health and community services and difficulty in accessing the services that do exist, add to risks and isolation for women. Lack of childcare and transport due to damaged infrastructure or through family and friends relocating away from disasteraffected regions inhibits women's return to employment more than it does for men. This reflects the social construction of women caring for children while men generally (Parkinson 2015) have priority use of vehicles in families. Most jobs created in recovery and reconstruction phases have been traditionally jobs for males; further disadvantaging women (Enarson 2012).

1 The authors recognise that the term 'natural hazard' is more frequently used, however they have retained the term 'natural disaster' as it is the title of some program sessions.

ABSTRACT

This paper evaluates four pilot training sessions conducted in August 2015 by Women's Health Goulburn North East, Women's Health In the North and the Monash University **Disaster Resilience Initiative** as part of the Gender and Disaster Pod initiative. The Lessons in Disaster Program promotes the understanding of the role that gender plays in survivor responses to disasters. The program embeds these insights into emergency management practice through training delivered to emergency management practitioners. This paper describes an independent evaluation of the program and reveals positive outcomes for participants in the emergency management and community sectors as well as highlighting key areas for further improvements.

The demands on men to 'protect and provide' together with some men's demonstration of 'hyper-masculinity' in disasters increases the risk for men (Parkinson 2017). Pursuing 'ideal' masculinity takes a toll on men's health, from unnecessary risk-taking to refusing to seek help for physical or mental health issues. Sadly, expectations of traditionally defined male 'courage' are real and there may be career penalties for men who seek psychological help, both in the workplace and at home (Zara *et al.* 2016). After Black Saturday in 2009, the increase in self-harm behaviours by men, such as alcohol abuse, mental health issues and suicide were widely noted (Parkinson 2017).

Distinct risks also exist for the LGBTI community (Dominey-Howes, Gorman-Murray & McKinnon 2014, Gorman-Murray, McKinnon & Dominey-Howes 2014). This occurs through emergency management policy neglect and through exacerbation of discrimination and marginalisation. Disasters can destroy the home that provides a safe space away from judgement for people of diverse gender and sexual identities (McKinnon, Gorman-Murray & Dominey-Howes 2016). Evacuation centres may present risk of verbal and physical abuse through homophobic responses from personnel or others displaced by the disaster. In addition, bathroom facilities may be problematic, particularly for trans people (Gorman-Murray et al. 2014, Gorman-Murray et al. 2016). Research has found that definitions of family often excludes same-sex couples and gives priority to traditionally defined families (Dominey-Howes, Gorman-Murray & McKinnon 2014). It has even been the case that LGBTI people have been blamed for the disaster itself (Dominey-Howes, Gorman-Murray & McKinnon 2016).

During and after disasters, while women and people of diverse gender and sexual identities can be particularly vulnerable, they are also well placed to increase community resilience and 'build back better' (UNISDR 2014, Parkinson *et al.* 2016).

The Hyogo Framework for Action (2005-2015)² and its successor, the Sendai Framework for Disaster Risk Reduction 2015-2030³, recognise a broad cycle of disaster that includes planning, response and recovery. The frameworks recognise the need for a wholeof-society, multi-sector response that engages all stakeholders. These frameworks focus on building resilience and recognise the needs and vulnerabilities of diverse groups, including women.

Disaster risk reduction requires an all-of-society engagement and partnership. It also requires empowerment and inclusive, accessible and nondiscriminatory participation, paying special attention to people disproportionately affected by disasters, especially the poorest. A gender, age, disability and cultural perspective should be integrated in all policies and practices, and women and youth leadership should be promoted. In this context, special attention should be paid to the improvement of organized voluntary work of citizens.

(Sendai Framework for Disaster Risk Reduction 2015-2030, Para 19 (d)).

In particular, the Asia-Pacific Input Document for the Post-2015 Framework (UNISDR 2014) highlights the tension between practices focused on women's health and safety and practices focused on disaster management. Though 'the call for inclusivity covers the need to include women', an outstanding need for a 'clear, stand-alone message' in disaster management remains.

...gender-based social, economic and cultural constructs marginalise women across all community groups irrespective of class, caste, economic standing, status, ethnicity and age, [women are] differently vulnerable to disaster risk in comparison to men within the same social groups. (UNISDR 2014, p. 20).

In the Australian emergency management sector, notions of inclusivity and diversity are gaining traction. Reflecting a shift from its origins in Civil Defence command-and-control practices (Krolik 2013, p. 44), the Australian Defence Force, the Australian Federal Police and the Victorian Country Fire Authority have reviewed their culture of gender inequity (Australian Human Rights Commission 2014). At a national level, increasing recognition exists for a 'whole-of-nation resilience-based approach...to enhance Australia's capacity to withstand and recover from emergencies and disasters' (Attorney-General's Department 2011). Addressing the needs of diverse aroups including, but not limited to, LGBTI communities, the elderly, young people, Aboriginal and Torres Strait Islander peoples, cultural and ethnic groups, women and people with a disability, offers the greatest potential for building resilience and ensuring participation in disaster response and recovery.

The National GEM Guidelines are high-level and strategic guidelines, devised specifically as a gender-sensitive approach to the planning for and delivery of disaster relief and recovery. Specific examples and an Action Checklist are provided to indicate ways that states and territories can operationalise them within a local context. A comprehensive literature review provides the evidence base. Using the GEM Guidelines enhances current systems and improves recovery capacity by:

- involving women and people of diverse gender and sexual identities
- promoting self-care (e.g. by countering gender stereotypes)
- acknowledging and addressing domestic and genderbased violence in times of emergency
- raising awareness of the gender spectrum and the way gender assumptions and gender stereotyping can contribute to trauma
- creating awareness of gender or cultural practices that may endanger women and people of diverse gender and sexual identities in times of disaster
- acquiring gender-disaggregated data

² United Nations Hyogo Framework for Action 2005-2015. At: www.unisdr. org/we/coordinate/hfa.

³ United Nations *Sendai Framework for Disaster Risk Reduction 2015-2030.* At: www.unisdr.org/we/coordinate/sendai-framework.

Research

• progressing uniformity across jurisdictions, enabling staff to transfer resources and support with ease.

The guidelines relate to the principles of the National Principles for Disaster Recovery, in particular, 'understand the context', 'recognising complexity', 'acknowledging and building capacity' and 'employing effective communication'. The GEM Guidelines progress these principles specifically through use of a gendered approach.

Recent advances in disaster risk management requires Australian emergency management systems to adapt to change. Change involves challenging closely held cultural beliefs about the role of men and women and contests male privilege and institutional bias. Collaborative efforts across the community and emergency management sectors need to raise awareness, provide education and build capacity to include gender considerations in policy, planning and service delivery. The Lessons in Disaster Program forms part of this effort to incorporate a gendered framework into the emergency management sector. This paper details the findings of an evaluation of the 2015 Lessons in Disaster Program.

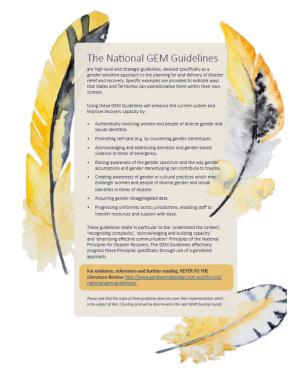


Image: The National GEM Guidelines

Modules	Design team and development process	Aims	Objectives
ldentifying Family Violence After Natural Disaster	Women's Health Goulburn North East	To assist in ensuring the safety of women and children after natural disasters, to offer participants the knowledge and skills to identify family violence and to provide referrals where appropriate to specialist organisations.	Participants should gain knowledge of the definition of family violence, the causes of family violence, the connections between disasters and family violence, and of ways to talk about and approach family violence.
Gender Equity in Disaster	Design Team (base session developed by Women's Health In the North)	To understand the impacts of gender in the delivery of effective emergency management services and develop strategies to address gender inequalities.	Participants should be able to better recognise their personal values around gender, gain knowledge of the correct use of gender terminology, learn the value of building a gender responsive organisation, and develop gender-sensitive skills and programs.
Living LGBTI in Disaster	Design team (base session developed by La Trobe University)	To broaden the understanding of the impacts of current emergency management practices on LGBTI people and to assist services to develop strategies to address inequalities.	Participants should be able to better recognise their personal values around LGBTI identities, learn the value of building a LGBTI-responsive organisation, and develop LGBTI-sensitive skills and programs.
Men In Disaster	Women's Health Goulburn North East	To broaden the range of constructive behaviours for women and men before, during and after disasters.	Participants should gain an understanding of the concepts of sex and gender and their impact on men's responses to disaster, and an awareness of the challenges faced by men in disaster contexts. Participants should recognise the consequences of hyper-masculine behaviours on men, other people, families and organisations, identifying the implicit and explicit behaviours and practices that support rigid gender roles.

Table 1: Module aims and objectives.

Table 2: Module attendance, participant recruitment, module delivery and venue for sessions.

Modules	Attendance	Participant Recruitment	Module Delivery	Venue for Sessions
Identifying Family Violence After Natural Disaster	21	Senior members of the GAD Task Force - identified and invited	Each session attracted a diverse group of emergency management personnel together with local government, church representatives and community members	Victorian Emergency Management Training Centre, Craigieburn, Victoria.
Gender Equity in Disaster	17	 identified and invited middle management from their organisation. The invitation snowballed into other organisations. 		
Living LGBTI in Disaster	17			
Men in Disaster	23			

Training

The Victorian Government's Natural Disaster Resilience Grants Scheme funded the Lessons in Disaster Program, which contained four modules. The experienced design team targeted sessions to practitioners in middle management; recognising that they play a key role in turning policy into action and in fostering behaviour change. The four modules are:

- Identifying Family Violence After Natural Disaster
- Gender Equity in Disaster
- Living LGBTI in Disaster
- Men in Disaster.

The GAD Pod team drew on what they learnt from the literature review and the research following the 2009 Victorian bushfires with two studies on women and men respectively. The GAD Pod team contracted a consultant to design the graphic and instructional material for all modules, which subject experts supplemented. Table 1 details the modules sessions, who developed the session and the sessions' aims and objectives.

Evaluation methodology

The Evaluation Steering Committee, consisting of the MUDRI team, two project managers and the Chair of the Project Advisory Group, met and agreed on the evaluation parameters. The committee provided project documentation and responded to requests for further information and clarification during the evaluation. In addition, to contextualise the evaluation, a focused literature review summarised the challenges of delivering training on gender and LGBTI inclusivity to the emergency management sector. Monash University Human Research Ethics Committee approved the research project.

The MUDRI team, working as external evaluators, used a three-pronged approach to the evaluation:

 A document analysis of project and training documents to understand the context and implementation processes. MUDRI evaluated the four modules, focusing on the number of participants, their organisation or community, participant feedback, perceptions and key implementation issues.

Table 3: Breakdown of survey participants across each module.

Module	Attendance	Participants Contacted for Survey	Participants Agreeing to Participate
ldentifying Family Violence After Natural Disaster	21	12	6
Gender Equity in Disaster	17	14	4
Living LGBTI in Disaster	17	16	5
Men in Disaster	23	5	5
Total	78	47	20

- Interviews by telephone with a sample of session participants from all four modules using a structured survey tool designed to gauge participant perceptions of the program.
- A focus group to understand the perspectives of the program developers and facilitators.

One training session for each module was delivered to between 17 and 23 participants at each session. Table 2 details how many participants attended each session, participant recruitment and the venue for the sessions.

Findings

Document analysis

The program development team completed a literature review and consulted with subject experts to underpin the program context and content. The four modules demonstrated a sound philosophical approach to content and program delivery reflecting contemporary approaches to the program context and adult education

Research

Table 4: The aggregate of feedback for the sessions.

Sessions resources 'accessible' or 'very accessible'	Sessions 'useful' or 'very useful'	Session resources	Usefulness of session	Key concepts from sessions	Awareness of issues	Quality of session presenters
90% (18)	95% (19)	Useful, interesting, of high quality and relevant to their work.	Six key themes emerged: knowledge, resources, increased awareness, discussion, presenters and contacts.	Gained knowledge.	Increased awareness of the issues and found the group discussions and exercises very useful.	Commended quality of presenters, their knowledge, how they spoke with a level of authority and expertise, valued meeting new people in the area.

principles. The program documentation, administrative and learning resources were comprehensive in quality.

Participant interviews

The evaluation team contacted 47 of the 78 participants for a telephone follow-up survey; 20 agreed to participate. Table 3 shows the breakdown of participants across the modules.

The majority (90 per cent, 18) of survey participants attended because they were 'interested in the topic' and 10 per cent reported that their manager recommended their participation. Most participants (40 per cent, 8) came from an emergency services organisation, 30 per cent (6) came from a local government authority, 25 per cent (5) came from state government and five per cent (1) came from the community. They had a range of positions including advisers, senior managers, coordinators, emergency management providers, officers and policy and strategy roles.

Table 4 shows how most participants responded to the session resources.

Participants gave positive feedback and identified six key themes, noting that the well-informed presenters helped them gain knowledge and increase their awareness.

Of particular interest was how participants used the materials and content from the sessions to implement change in their workplace or practice in the months following participation. The most common theme was 'greater awareness', and participants' efforts to apply their learning to their practice or share information. Nine participants reported having a deeper understanding and awareness of the practice of others and of having more consideration when attending emergencies and interacting with those affected by fires. One participant commented that the 'learnings had been so useful and had transferred in so many ways at home and at work'. Another reported implementing a proactive approach to domestic violence in training. Another found the learning helpful for dealing with workplace issues.

Survey participants from three groups reported making changes. The types of changes made included implementing domestic violence training, joining a gender- and disaster-related subcommittee and incorporating information into handbooks and community resilience plans, but participants provided no details about the specific changes they had made. Survey participants from the LGBTI session reported the most changes, including incorporating LGBTI information into internal council materials, White Ribbon activities, school projects and family violence and recovery policies. Members from other groups reported planned changes. Only three participants reported making no changes.

Focus group

Four people responsible for the design and delivery of the program participated in the focus group. The focus group identified practical implementation challenges as key issues. For example, a significant regional fire outbreak affected one of the sessions, resulting in a number of absences. A key LGBTI session facilitator was unable to attend due to illness and the group noted the loss of the extensive knowledge of this presenter. The group also indicted that the venue as problematic. While its location was accessible and the room suitable, participants were asked to keep the noise level to a minimum, which may have influenced discussions.

Themes that emerged from the focus group suggest a deep understanding of the challenges and opportunities for training. The facilitators had a collaborative, strengths-based approach to building training content. They showed an awareness of the potentially confronting nature of the content and made a conscious effort to 'join the dots' for participants without 'preaching to them'. The facilitators reported that they had expected some pushback, saying 'I was ready for pushback, prepared for it but, by-and-large, it didn't come'.

The facilitators agreed that the implicit theoretical underpinning for the program was the public health model approach. The training delivered crucial information for intervening to minimise harm by increasing resilience and decreasing vulnerability at the three key stages: prevention, early intervention and ongoing care.

The evaluators felt that considering time pressures and the nature of the content, the perceived success of the sessions was largely due to the high quality of the content, the recruitment strategy and the facilitators' skill levels. The facilitators preferred faceto-face delivery style. However, they recognised that not everyone could attend an in-person session and felt this provided an opportunity to develop online training resources. The facilitators noted that this training does not represent a 'silver-bullet' solution, but rather represents part of an ongoing practice to address inclusion and gender equity issues in disaster management.

Suggestions and feedback

A strong sentiment among participants confirmed that the sessions were 'very important and need to be implemented more widely', that they were 'fascinating' and 'delivered well'. One participant commented on the professionalism of the facilitators and the value of having a male instructor to involve participants who may have otherwise been difficult to engage.

While most felt it was a worthwhile initiative, some revealed a sense of 'preaching to the converted', and that the session content could have been more challenging for those with issues related to LGBTI communities. One participant suggested that 'breakout' spaces could have been provided for participants to manage the 'highly emotional content' more privately.

One LGBTI participant reported that there were better, shorter courses elsewhere, but did not elaborate on what service provider ran similar sessions. In the Identifying Family Violence After Natural Disaster group, suggestions included having facilitators from an 'appropriate academic background' and spending more time on practical strategies, giving more 'information on impact assessments in the community' and on 'reform and broader context'. Encouragingly, 75 per cent (15) of survey participants said they would be interested in follow-up for themselves and 85 per cent (17) said they would be interested in follow-up from WHGNE for their organisation. This indicates a good level of engagement with the materials.

Conclusion

The Lessons in Disaster Program met its aims and objectives with excellent and positive feedback from

survey participants and focus group members. Some limitations of this evaluation include the lack of baseline measures for knowledge, behaviour and attitudes and the absence of long-term impact measures. While the number of participants surveyed from each group appears low, there was a 20-30 per cent response rate from each group. This is considered an acceptable outcome for this type of evaluation.

Survey participants from all four groups reported greater awareness of the issues and a better skill set to deal with relevant concerns. Participants expressed limited negative feedback and showed high levels of interest for follow-up sessions from WHGNE. The short-term outcomes from the project, as assessed by how the participants made use of the information and experiences gained from their participation in the program, demonstrates a greater awareness of the session content and encouraging self-reported change in behaviour because of their participation.

Although this evaluation was unable to obtain base-level data on knowledge and attitudes, the contextualising document suggested a lack of knowledge about inclusivity and a bias against incorporating gender and LGBTI-responsive emergency management practices. In this context, these findings offer potential positive outcomes by working at the intersection of disaster and gender. Translating knowledge from the women's health and LGBTI sectors to managers and influencers in the emergency management sector showed encouraging potential to build resilience and foster whole-of-community participation in planning, response and recovery.

The GAD Pod has now advanced the first two modules, combining elements of the Identifying Family Violence After Natural Disaster and the Men in Disaster modules. The LGBTI module has been redeveloped following research into the experiences of LGBTI people in disasters. The GAD Pod will continue to roll out the Lessons in Disaster Program informed by this evaluation. The advisory group accepted the evaluation report and included it in the final report to the project funders.

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