



**Disaster Recovery, Planning and Management for Women,
their Families, and their Communities in all their Diversity**

Joint Position Paper of the National Women's Alliances

March 2020

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We welcome the establishment of the National Bushfire Recovery Agency. In this process, it is vital that we pool our knowledge and experience of previous disasters to, recovery efforts and future management and preparedness include and reach everyone who need them.

During an emergency, everyone in a community is affected, but there is strong evidence to show that different groups of people experience disaster differently. Gender stereotypes and roles, inequality, intersecting identities and forms of discrimination, social isolation and economic constraints have previously resulted in women being placed in positions of increased susceptibility to harm during an emergency and in immediate and longer-term recovery.

Disasters have a gendered face. In Australia, the need to cope with disasters in Australia has been shown to reinforce traditional gender roles within families and communities, with women contributing to unpaid community support work, caring for children and family, while forgoing or relinquishing employment opportunities which are crucial for gender equality and women's longer-term economic security.ⁱ Evidence shows this pattern has recurred in the 2009 Black Saturday bushfires,ⁱⁱ and the 2011 floods in Queensland and Victoria.ⁱⁱⁱ Further, Australian research has shown that rates of domestic and family increase in post-disaster settings.^{iv}

There is a risk that any non-gendered bushfire recovery plan will fail to identify and address the different challenges and needs of women, which would in turn exacerbate the harmful impacts on them. Failure to respond to the different experiences and priorities for women will risk increasing gender inequality in the longer-term. At the same time, there is also evidence to show that disaster recovery is an opportunity for change, and for promoting gender equality as communities and lives are rebuilt.^v All disaster preparation, management, response and recovery efforts need to include a gender analysis at all levels, within both government and non-government organisations.

Further, intersectional issues for women and people facing more than one type of disadvantage or discrimination should be considered. An intersectional lens needs to be applied to all aspects of the recovery process. 'An intersectional lens' refers to the way in which social norms such as racism, migration status, laws, policies and interventions act together and over time to compound the impacts of inequality on particular groups of people, for example on Aboriginal women, women with disability, or who are from low-socioeconomic backgrounds.

An intersectional gender lens is a tool for analysing how social norms, policies and interventions act alongside gender inequality to create more severe impacts on particular groups of women and people. It requires looking at a particular intervention systemically alongside other policies and systems of disadvantage to help us to understand the disparate impacts of a policy on particular groups of women and people. 'An intersectional gender lens' begins with considering how multiple forms of discrimination, for example gender and race, may coincide to multiply and create new harms to particular people, for example, how racial and sex discrimination may amplify harms experienced by Aboriginal and Torres Strait Islander women. This means particular efforts should be made to engage diverse groups of women, including regional, rural and remote women, women with disability, women from migrant and refugee backgrounds, Aboriginal and Torres Strait Islander women, older women, young women and LGBTIQ+ people in positions of community leadership and in the

development and implementation of recovery initiatives. This will enable consideration of how different structures and systems may interact and increase harms or barriers to recovery.

This joint position paper focuses on these gendered considerations. It draws from the collective expertise and engagement of the National Women's Alliances (NWAs), including previous work on disasters:

- A survey of 300 women undertaken by the National Rural Women's Coalition (NRWC) in early 2020 on rural, regional and remote (RRR) women's experiences of rural life, including current disasters (henceforth the NRWC 2020 survey),
- *The Impact on Women in Disaster Affected Areas in Australia: 'We need to think about vulnerability differently'* (Report on the 2014 Roundtable Discussion in Canberra), 2014, Australia: economic Security4Women (eS4W), NRWC
- *eS4W's Women's Voices from the Flood Plains: an economic gender lens on responses in disaster affected areas in Queensland and Victoria*, 2012, Victoria: eS4W, JERA International

The paper draws on other existing resources and evidence on the interaction between gender and disaster in Australia. People with Disability Australia (PWDA) have also contributed expertise to the drafting this paper.

Summary of recommendations

1. Adopt the *Gender and Emergency Management (GEM) Guidelines* developed by Women's Health Goulburn North East, Women's Health in the North and Monash University Disaster Resilience Initiative.
2. Address intersectional issues for women and people facing more than one type of disadvantage or discrimination. An intersectional lens must be applied to all aspects of the recovery process. This means all community consultation processes should make a particular effort to engage and work with marginalised populations. Particular efforts should be made to engage Aboriginal and Torres Strait Islander women, regional, rural and remote women, women with disability, migrant and refugee women, older women, young women and LGBTIQ+ people in positions of community leadership, and in the development and implementation of recovery initiatives.
3. Ensure that all relevant recovery and response information is accessible to local communities in language, including Indigenous languages, Auslan and Easy English.
4. Recognise and respond to Aboriginal and Torres Strait Islander women's and communities' connection with and knowledge of land in recovery and response approaches.
5. Include women's organisations and providers of women's services in disaster planning processes and resource them to participate in order to avoid any negative impact of natural disaster response and recovery efforts on their capacity to meet the needs of women in the area.
6. Recognise that long-term drought conditions constitute a disaster, as well as an exacerbating factor in the current bushfire crisis.
7. Recognise that some individuals, households and communities are experiencing and have experienced multiple and overlapping disasters, and plan recovery efforts accordingly.
8. Recognise the social value of unpaid care and community work, primarily undertaken by women, through formal acknowledgement, such as remuneration and awards.
9. Establish equal opportunities for the leadership and participation of women as emergency service responders which will lead to an improvement in the gender balance of disaster responders, including the measures outlined in *Women in Fire and Emergency Leadership Roles* Report, and *Living LGBTI during Disasters* Report.
10. Consider population-representative gender targets in executive and leadership emergency management and recovery roles, where 50% of positions recruited are targeted for women or gender-diverse people.
11. Examine organisational messaging. Avoid projecting a binary image of men on the ground working, saving, rescuing and restoring while women occupy the role of wives and mothers and take responsibility for emotional recovery. Use diverse imagery which suggests both women and men have roles in all rebuilding and community / family care roles. Address appropriate gender perspectives and responses in the emergency planning in times of responding to a natural disaster.

12. Reduce response times for relief, including the delivery of aid and other supports. Many people do not have a financial buffer. This particularly applies to people in drought affected areas. There is an urgent need to deliver aid and other supports in short timeframes.
13. Ensure that relief and recovery initiatives are responsive to geographic locations, and the local environment and community. Disasters will manifest differently in different locations and communities. Women from rural, regional and remote communities must be involved in the development and implementation of locally relevant initiatives. As above, efforts should be made to ensure a diverse range of women are engaged through partnership with a diverse range of organisations.
14. Establish aid and rebuilding initiatives fit for purpose and accessible to all in the community. Strong engagement with local communities and shire councils is critical in this regard. Additionally, an outreach approach is crucial to ensure that the most vulnerable individuals in a community are able to access relief for which they are eligible and entitled.
15. Ensure evacuation centres and services meet the accessibility requirements of people in the local community.
16. All organisations providing emergency relief should avoid discrimination and be accessible to LGBTIQ+ people, including through training to provide inclusive services and referrals. At a minimum, ensure that religious organisations which may be inaccessible to LGBTIQ+ people are not the sole provider of emergency relief in a community, including by ensuring LGBTIQ+ inclusive relief services, referral networks and other services are available and visible.
17. Prioritise repair and re-establishment of public infrastructure including roads, public transport, telecommunications and water
18. Increase the rate of the Disaster Recovery Payment and Disaster Recovery Allowance. Disaster Recovery Allowance is currently equivalent to the rate of Newstart or Youth Allowance. There is widespread evidence for the need to increase the rate of Newstart to be in line with acceptable living standards.
19. Provide alternate and accessible financial support arrangements for migrants and refugees who are not eligible for social security payments and may not be eligible for Disaster Recovery Payments as consequence of interdependence of Centrelink payments. Ensure that women experiencing violence are able to access income support regardless of migration status.
20. Investigate options for providing compensation and extending leave entitlements for individual involved in unpaid voluntary and community work following disasters, where such work has incurred a direct loss of income.
21. Abandon roll out the Cashless Debit Card to income support payments noting the potential ramifications for disaster recovery. Ensure that people in receipt of all income support payments are exempt from mutual obligation or job search requirements, and payments are not suspended during disasters.

22. Implement practical post-disaster (financial and nonfinancial) support that uses small, locally owned businesses so they can continue to be sustainable providers of goods and services to the community in which they operate.
23. Consider the re-establishment of formal childcare and carer respite services as a priority. Promote family friendly workplaces as a key element of disaster response.
24. Ensure the full engagement and equal participation of women (including marginalised women), individually or through the involvement of women's organisations and services in planning for disaster response and recovery so that gender responsive approaches are planned which consider the specific needs of all women as well as the expertise of communities of women who face multiple barriers in times of disaster, such as women with disability.
25. Consider extending the time period of the provision of Health Care Card to people living in disaster affected areas and to those people who may have had to move as a result of the disaster.
26. Prioritise and ensure immediate access to funding for disability or health support equipment that is damaged or destroyed in fire.
27. Provide additional short-term accommodation (e.g. self-contained mobile housing) for recovery support workers who are imported into communities during and after natural disasters, relieving pressure on local sources of accommodation that may already be used as emergency or crisis housing and prevent further increasing costs of housing.
28. Arrange and provide dedicated mental health services for disaster-affected communities are available for a minimum of two years following disasters, in recognition of the long-term mental health impacts of disaster experiences.
29. Provide mental health service delivery includes an outreach approach to connect to people who are less likely to be help-seeking in accessing services.
30. Resource existing mental health services, such as telephone counselling, to increase access and availability following disasters, including outside work hours.
31. Provide training in gender sensitivity, domestic and family violence and cultural and responsiveness to frontline mental health workers and Primary Health Network (PHN) bushfire trauma coordinators to ensure that providers are sensitised to the gendered nature of trauma following disaster, domestic and family violence, and the needs of LGBTIQ+ people, and can provide culturally safe and responsive health services.
32. Arrange and provide access to free and adequate mental health support in the aftermath of natural disasters to those who do not have Medicare eligibility.
33. Arrange, provide and secure access to adequately resourced, culturally safe and responsive women's specialist services, including crisis services responding to violence against women. There is critical need for ongoing assessment of an increased demand for women's specialist services.

34. Train emergency services and disaster relief personnel so they are able to undertake a safety/risk assessment when working with potentially vulnerable persons and situations. This includes understanding the indicators of family violence/violence against women and children and being able to identify the indicators and respond appropriately whilst in the field.
35. Implement, as a matter of priority, a separately funded process to develop an ongoing preparedness, mitigation and response plan to respond to disasters and ensure long-term recovery.
36. Support the development local preventative disaster plans and responses by individual Shire councils and communities and then integrate these plans into a wider state response. A key consideration in this locally developed planning should be gender and a recognition of the circumstances and locations of vulnerable women and their need for additional protection, care and support in times of disaster. All local disaster plans need to:
 - a) Include an action plan to prevent violence against women, drawing from the learnings of the Macedon Ranges Shire Council plan and the Our Watch Change the Story Framework,
 - b) Recognise and respond to Aboriginal and Torres Strait Islander women's and communities' connection to and knowledge of land,
 - c) Implement recommendations from the *Living LGBTI during Disasters* Report, be accessible to local communities in language, including Indigenous languages, Auslan and Easy English, and
 - d) Implement the *Local Emergency Management Guidelines for Disability Inclusive Disaster Risk Reduction* in all plans, and provide support and resources for the implementation of the *Person-Centred Emergency Preparedness Toolkit* with people with disability, carers, and disability organisations and services.
37. Implement the Operational Guidance on Infant and Young Child Feeding in Emergencies (OG-IFE) in disaster planning.

1.0 Gender as a social determinant of disaster

One in six Australians are estimated to be exposed to disasters in their lifetime, but that does not mean the experience is uniform. Disasters increase inequality and marginalisation, multiply risk factors, and the impacts of disaster are socially determined by age, economic security and socio-economic status, gender, disability, location and cultural background and language skills.^{vi} For many people and communities, a visible and recognise natural disaster is overlaid upon a less visible personal disaster or series of traumatic and cumulative events

The impacts of disaster are clearly gendered. More men die in Australia disasters, in direct response,^{vii} but female fatalities are more likely to occur while sheltering in a home or fleeing. Further, while the number of male fatalities from bushfires has been decreasing in recent years, fatalities of women and children have increased.^{viii} Evidence indicates that it is the gendered social norms and narratives, of men as heroic and women as carers which shape their susceptibility to different impacts of disaster in different ways. Gender roles and social norms mean women are at greater risk of economic insecurity resulting from disasters, their experiences of mental health are different from those of men, they are at greater risk of domestic and family violence. Moreover, women's lesser relative degree of political or decision-making and economic power results has resulted in historically gender-blind approaches to disaster. The *Gender and Emergency Management (GEM) Guidelines* developed in Victoria by Women's Health Goulburn North East, Women's Health in the North and Monash University Disaster Resilience Initiative outline a strategy for gender-responsive disaster management based on the pillars of:

- a) gender equity and diversity,
- b) gender-sensitive communication, and
- c) domestic violence in disaster.

Gendered impacts are multiplied when women also live with other inequalities which increase their risk of being affected, whether resulting from Aboriginality, age, disability, sexuality and gender diversity, being of migrant and refugee background. Aboriginal and Torres Strait Islander women's and communities' connection with and knowledge of land mean that disaster impacts are experienced differently and with different severity, and additionally, Aboriginal and Torres Strait Islander women are likely to face increased risks due to the multiplying effect of poverty and gender based violence.

Women with disability face greater barriers in evacuating disasters and accessing shelters, as well as the potential loss of mobility, accessibility devices, medical devices and equipment in disaster evacuations or a loss of electrical medical equipment if power is lost during emergencies. Moreover, warning and evacuations communications can be inaccessible to people with disability. With the barriers faced by women with disability resulting in overrepresentation amongst Australians living in poverty, financial insecurity multiplies these risks.^{ix}

Migrant and refugee people have also been found to experience greater risk during disasters due to cultural barriers, and difficulty accessing and interpreting warnings due to limited dominant language proficiency.^x Communication is critical in disasters and all warnings, response and recovery information must be accessible to local communities in language, including First Nations languages and Auslan.

Further, it must be acknowledged that many communities, households and individuals are currently experiencing or have experience multiple and overlapping disasters, and which amplify impacts and erode resilience.

Response and recovery is a period in which gender roles shift and are in flux, as people and communities are forced to adapt to new circumstance. Disasters are often a time in which unequal gender norms and roles are reinforced, and can be setting in which women and other groups lose footing in the pursuit of equality, as traditional norms and power structures are reasserted.^{xi} In commenting on the trend of women taking on greater care work in the wake of the 2011 floods, Shaw, Van Unen and Lang (2012, 19), note that,

Little formal recognition of women's invaluable role in community rebuilding was evident across this study. Across all areas it was reported that there had been little if any, attempt to acknowledge the extra caring and voluntary responsibilities that women have taken on in the recovery process.

Disaster response and recovery therefore provides an opportunity to make visible and give greater social value to the unpaid care work that is predominantly done by women. However, support strategies need to recognise the impact that additional voluntary and caring work has on women's longer-term economic security, and ways to engage and keep women in income-earning roles must also be considered. In this way, with a gender responsive and intersectional approach to disasters, response and recovery can conversely be an opportunity to progress gender equality through new opportunities, roles and strategies supports which value the contributions of women.^{xii}

Recommendations:

1. Adopt the *Gender and Emergency Management (GEM) Guidelines* developed by Women's Health Goulburn North East, Women's Health in the North and Monash University Disaster Resilience Initiative.
2. Address intersectional issues for women and people facing more than one type of disadvantage or discrimination. An intersectional lens must be applied to all aspects of the recovery process. This means all community consultation processes should make a particular effort to engage and work with marginalised populations. Particular efforts should be made to engage Aboriginal and Torres Strait Islander women, regional, rural and remote women, women with disability, migrant and refugee women, older women, young women and LGBTIQ+ people in positions of community leadership, and in the development and implementation of recovery initiatives.
3. Ensure that all relevant recovery and response information is accessible to local communities in language, including Indigenous languages, Auslan and Easy English.
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5. Include women's organisations and providers of women's services in disaster planning processes and resource them to participate in order to avoid any negative impact of natural disaster response and recovery efforts on their capacity to meet the needs of women in the area.
6. Recognise that long-term drought conditions constitute a disaster, as well as an exacerbating factor in the current bushfire crisis.

7. Recognise that some individuals, households and communities are experiencing and have experienced multiple and overlapping disasters, and plan recovery efforts accordingly.
8. Recognise the social value of unpaid care and community work, primarily undertaken by women, through formal acknowledgement, such as remuneration and awards.

2.0 Emergency services

While the impacts of disaster are different, the nature of response and disaster is also subject to norms about gender. Emergency and disaster management services are dominated by men, including in leadership positions.^{xiii} The service provided by emergency and disaster management is crucial for ensuring the safety and protection of communities, but there is evidence to show that internal cultures of such services celebrate masculine ideals of glorified heroism and bravado.^{xiv} The bravery of emergency services is cause for celebration, but the masculinised cultures have been shown to unnecessarily exclude women, as well as men and non-binary people who are not considered to meet, for various reasons such as sexuality and gender non-conformity, stereotypical assumptions about masculine behaviour in crises. Indeed, evidence shows that while emergency organisations personnel support gender equality across all genders, gender stereotyping remains prevalent within organisational culture and women reported experiences of exclusion in practice.^{xv} Further, homophobic and heteronormative cultures have also been identified within emergency services.^{xvi}

Diverse leadership and representation in emergency services is crucial for breaking down gender norms which disadvantage men and women in disasters. Media and messaging can play an important role. Positive examples from the recent bushfire crisis included an article run by *Australian Women's Weekly* on the Lake Tyers Aboriginal Trust CFA all-First Nations all-women fire brigade.^{xvii} This article was significant for challenging both gender and racial stereotypes about the role of women, and importantly, Aboriginal women in emergency services roles and leadership. Further, including women and other people, such as LGBTIQ+ people, in emergency services increases the likelihood that their needs and perspectives will be met.^{xviii} In service of these aims, the *Women in Fire and Emergency Leadership Roles Report*, and *Living LGBTI during Disasters Report* recommend the adoption of multiple strategies to ensure diversity in emergency service personnel, including recruiting for gender-representation which reflects the broader population, supporting workplace flexibility and review policies, and raising awareness through training to promote inclusion among personnel.

Recommendations:

9. Establish equal opportunities for the leadership and participation of women as emergency service responders which will lead to an improvement in the gender balance of disaster responders, including the measures outlined in *Women in Fire and Emergency Leadership Roles Report*, and *Living LGBTI during Disasters Report*.
10. Consider population-representative gender targets in executive and leadership emergency management and recovery roles, where 50% of positions recruited are targeted for women or gender-diverse people.

11. Examine organisational messaging. Avoid projecting a binary image of men on the ground working, saving, rescuing and restoring while women occupy the role of wives and mothers and take responsibility for emotional recovery. Use diverse imagery which suggests both women and men have roles in all rebuilding and community / family care roles. Address appropriate gender perspectives and responses in the emergency planning in times of responding to a natural disaster.

3.0 Emergency relief and recovery

Women in the NRWC Survey 2020 commented on what they considered to be the most important factors for relief. They asked repeatedly for agencies and government to,

“Tell us what’s going on and don’t treat us like we’re not important.”

Women emphasised the importance of clear and honest communication with disaster-affected communities and their involvement in response and recovery, and which is important from the perspective of trauma-informed practice for re-establishing a sense of control after the disempowerment of potentially having lost loved ones, community, homes, valued assets and a sense of normality.^{xi} To achieve this, the recommendation of the *Gender and Emergency Management* guidelines to seek “local expertise wherever possible” should be implemented, and it is suggested that working closely with local organisations, including women’s organisations, and Shire Councils is critical in this regard. In addition, involving local Aboriginal organisations and local migrant and refugee people and organisations, and people with disability and Disabled Persons’ Organisations is crucial for ensuring culturally safe and responsive relief.

There is a need to consider how relief services can be provided equitably, and which do not rely on an individual’s human and social capital, or capacity for help-seeking. In many regional, rural and remote communities, there can be a culture of stoicism and of reluctance to seek help. This means that it cannot be assumed that people will approach services for assistance if there is a disaster centre established or that the most vulnerable individuals will seek support. ‘First-in, best-dressed’ approaches to determining access to relief should be avoided, and an outreach is crucial to ensure that people who experience overlapping barriers to accessing supports, such as single parents, women with disability, and older women are able to access relief services for which they are eligible and entitled.

For LGBTIQ+ people, the loss of a home may also be the destruction of an individual’s place or strategies to be safe from homophobia in the local community.^x Temporary housing solutions may put individuals and same-sex couples at risk of homophobic responses from staff or other residents and may provide inadequate bathroom and sleeping facilities for transgender people and people who do not identify on the gender binary.^{xi} There is a need to recognise the consequences of outsourcing response and recovery to third-party, and faith-based, organisations. People may need to hide their sexual or gender identity from service providers or volunteers out of fear that an individual might turn out to be hostile, leading to increased anxiety and lost opportunities to identify the most suitable supports available. Where recovery services are outsourced to religious-based organisations with negative views of homosexuality or narrow definitions of gender, LGBTIQ+ people will be outright excluded, or more subtly made to feel unwelcome or unsafe.^{xii} In the absence of positive reassurance, LGBTIQ+ people may choose not to access services provided by organisations unknown to them, regardless of the individual or organisation’s actual beliefs or position.

Recommendations:

12. Reduce response times for relief, including the delivery of aid and other supports. Many people do not have a financial buffer. This particularly applies to people in drought affected areas. There is an urgent need to deliver aid and other supports in short timeframes.
13. Ensure that relief and recovery initiatives are responsive to geographic locations, and the local environment and community. Disasters will manifest differently in different locations and communities. Women from rural, regional and remote communities must be involved in the development and implementation of locally relevant initiatives. As above, efforts should be made to ensure a diverse range of women are engaged through partnership with a diverse range of organisations.
14. Ensure that aid and rebuilding initiatives are fit for purpose and accessible to all in the community. Strong engagement with local communities and shire councils is critical in this regard. Additionally, an outreach approach is crucial to ensure that the most vulnerable individuals in a community are able to access relief for which they are eligible and entitled.
15. Ensure evacuation centres and services meet the accessibility requirements of people in the local community.
16. All organisations providing emergency relief should avoid discrimination and be accessible to LGBTIQ+ people, including through training to provide inclusive services and referrals. At a minimum, ensure that religious organisations which may be inaccessible to LGBTIQ+ people are not the sole provider of emergency relief in a community, including by ensuring LGBTIQ+ inclusive relief services, referral networks and other services are available and visible.

4.0 Women's economic security

The immediate relief response following disaster has crucial gender impacts, as work roles are reorganised to meet a community's most pressing needs. Further, this response can have long-term gender equality impacts which disadvantage women.

Women in the NRWC Survey 2020 commented on what they considered to be the most important factors for relief. They spoke of:

“Rapid reinstatement of public infrastructure. Roads and telecommunications underpin business, schools, farms etc.”

“Less red tape.”

Women also spoke of the importance of prioritising the re-establishment of public infrastructure including roads, public transport, telecommunications and water to enable a rapid return to normality.

Additionally, respondents repeatedly emphasise the need to reduce red tape and barriers for accessing cash relief, including access to ATMs. Like the NRWC Survey 2020, the eS4W's *Voices From the Flood Plains* Report found that a lack of access to cash in the period directly the floods hindered women's and communities' recovery, and that these impacts flowed into

the research period 18 months later. The importance of cash was indicated by an increase in cash transfer activities, such as selling produce and goods, among women in the months after the floods. The red tape for accessing relief was a cause of significant distress. Further, relief packages that were delivered through a reimbursement system were not appropriate and hindered recovery, as many women and households because of limited cash flow or accessible savings. With Newstart and Youth Allowances, for these reasons, the Disaster Recovery Payment and Disaster Recovery Allowance rates must be increased as recommended by the Australian Council of Social Services (ACOSS).^{xxiii} The Disaster Recovery Allowance is currently equivalent to the rate of Newstart or Youth Allowance payments. There is now a significant body of evidence, and industry and community support for the need to increase the rate of Newstart allowance to meet acceptable living standards.^{xxiv}

Further, the Disaster Recovery Allowance is delivered through Centrelink, which can leave women on temporary visas, and those serving newly arrived residents' waiting periods, without any financial help in the wake of disasters. This constitutes a significant gap given the government's increased focus on regional migration leading to increased numbers of migrants settling in regional areas. Migrants in regional areas have regional residency requirements which means that they cannot move out of or away from high risk zones and areas in preparation for disasters, or to re-establish themselves post-disaster. These vulnerabilities are compounded by factors such as lack of social networks and community support for migrants in regional areas and ineligibility for government support and services. Disaster relief and recovery should not discriminate on the basis of visa or migration status, and tailored support and services should be offered to women from migrant and refugee backgrounds.

Women further reported that at times they were forced to choose between immediate necessities such as food and medication. One approach to address this would be to extend eligibility to the Health Care Card to people in disaster affected areas, or who have moved as a result of disasters, to ensure they are able to continue to meet health needs and that the risk of poverty is not multiplied through as a result of illness or requirements for medication^{xxv} Moreover, definitions used to qualify for aid packages may exclude families headed by same sex couples or use gender qualifications based on narrow definitions.^{xxvi} It is crucial that barriers to relief for LGBTIQ+ people are removed through inclusive services.

From a gender perspective, it is crucial to understand that the immediate impact of disasters reorganises gender roles and work patterns into a more rigid gendered division of labour, as women take up the burden of increased care or unpaid work. In rapid-onset disasters such as bushfire and flood, access to public infrastructure and social infrastructure such as aged care, child care and schools are compromised, women are often precluded from an early return to work.^{xxvii} As noted by Shaw, Van Unen and Lang (2012, 22)

... for most women in disaster situations, entry, return or re-entry in the workforce is suspended for the initial time of the disaster... for some, wages for time off were deducted from pay, leaving these women with the particular hardship of rebuilding homes and community with little funds and the stresses of potentially losing their jobs.

They went on to report that employment declined by 1.0% or 23,700 in Queensland in the month following the 2011 floods, with women accounting for about 69% or 163,00 of the total fall.^{xxviii} Similarly, evidence indicates that rural Australian women in communities experiencing drought are forced to seek off-farm work to support the farm financially, as well as increase the amount of on-farm work they provide as the financial capacity to hire additional workers declines.^{xxix}

The redistribution and increased burdens of unpaid and care work has the implication of substantially undermining the economic security of women, who do the majority of unpaid and care work. As noted by Parkinson, Duncan, and Weiss (2014),

Barriers to women's financial recovery begin with women's lower savings base – itself a result of lifelong barriers to income production due to socially-constructed gender roles and discrimination.

One approach would be to include local women and communities in paid disaster relief roles,^{xxx} which should include child and aged care. This would both make the best use of their knowledge of the local community, relationships, women's greater likelihood of undertaking voluntary relief work and ensuring women's economic security in the disaster aftermath. Such roles should ensure flexible working conditions to increase the ability of women to be involved. Taking a gender-transformative lens, formally recognising the contributions of women through awards for voluntary and community rebuilding work are an important strategy which could be implemented for building their social value.^{xxxii}

Further, in the 2019-2020 bushfires, emergency service workers such as the firefighters, who are predominantly men, were afforded additional leave to compensate for loss of income incurred in directly responding to disasters.^{xxxiii} In the same way, a gender lens calls for the recognition of the loss of income incurred by women in the period immediately following a disaster, in undertaking unpaid care and voluntary community work necessary for community recovery. Leave entitlements and compensation are necessary and should be extended to women to ensure their economic security in the immediate aftermath, and for equally valuing the economic contributions of care work to community recovery.

In this context, the Cashless Debit Card which restricts its recipient's access to cash is of great concern for its potential to increase the susceptibility and disadvantage of people already living in poverty on income support payments.^{xxxiiii} At present, income management programs including the Cashless Debit Card discriminate against women, with women currently making up 58.2% of people on income management. Further, 78.4% of people on income management are Aboriginal and Torres Strait Islander.^{xxxv} Reducing the red tape for cash relief, whether the barriers to accessing social security payments or other kinds of support, is crucial in the immediate aftermath of disasters. Plans to roll out the Cashless Debit Card to all recipients of income support payments must be abandoned in light of the potential ramifications for disaster recovery, which are likely to disproportionately impact on Aboriginal and Torres Strait Islander women and women being subjected to domestic and family violence. Mutual obligations requirements also need to be suspended during this period, and all payments suspensions need to halt for people in receipt of income support payments.

Roughly 30% of businesses are owned by women, with a slightly greater number owned by women in rural areas. Evidence and analysis from the eS4W and NRWC Roundtable noted that support to small businesses is crucial in post-disaster response, as it plays a major role in employment and therefore income.^{xxxvi} Women from the NRWC Survey wanted agencies and government to:

“Understand that this won't be over with a bit of rain. Rural businesses will take years to recover and ensure assistance reflects this”. (NRWC Survey 2020).

In the 2011 floods, short term impacts became long term as small business owners felt the brunt of flood impacts and subsequently lost the capacity to employ part-time and casual positions. As a result, many women reported experiencing a creeping poverty, and not being

able to find jobs to fill the positions they lost. Casual employment increased, particularly in service industries, while part-time and more secure work with the associated leave entitlements and benefits were lost.^{xxxvi}

According to the eS4W's *Voices from the Flood Plains* report, the loss of employment and contribution to work that was socially valued by virtue of remuneration impacted of women's sense of control and confidence with household expenditure. It also led to feelings of depression of sadness. This was experienced as a mutually reinforcing cycle, with women avoiding clubs or meetings they used to attend and becoming gradually more socially isolated as financial and emotional stress increased in homes. This was reinforced by a lack of money, including for transport, and exhaustion. As social isolation and conflict at home increased, their ability to obtain income-earning work and contribute to other forms of productive activity decreased.^{xxxvii}

Support for small businesses, which support both women and broader communities economically are therefore crucial for ensuring their longer-term economic security. One strategy recommended by the eS4W and NRWC Roundtable was the provision of government sponsored vouchers (for example, for food or household goods) that can be used at locally owned businesses to support their ongoing viable. A community response that has emerged from the 2019-2020 bushfires is the #spendwiththem tag and social media account established by Turia Pitt, and which encourages spending and purchasing from small and rural businesses affected by the fires.^{xxxviii} Response and recovery plans should consider how such initiatives can be supported, and in future, how similar initiatives may be implemented.

Recommendations:

17. Prioritise repair and re-establishment of public infrastructure including roads, public transport, telecommunications and water
18. Increase the rate of the Disaster Recovery Payment and Disaster Recovery Allowance. Disaster Recovery Allowance is currently equivalent to the rate of Newstart or Youth Allowance. There is widespread evidence for the need to increase the rate of Newstart to be in line with acceptable living standards.
19. Provide alternate and accessible financial support arrangements for migrants and refugees who are not eligible for social security payments and may not be eligible for Disaster Recovery Payments as consequence of interdependence of Centrelink payments. Ensure that women experiencing violence are able to access income support regardless of migration status.
20. Investigate options for providing compensation and extending leave entitlements for individual involved in unpaid voluntary and community work following disasters, where such work has incurred a direct loss of income.
21. Abandon roll out the Cashless Debit Card to income support payments noting the potential ramifications for disaster recovery. Ensure that people in receipt of all income support payments are exempt from mutual obligation or job search requirements, and payments are not suspended during disasters.
22. Implement practical post-disaster (financial and nonfinancial) support that uses small, locally owned businesses so they can continue to be sustainable providers of goods and services to the community in which they operate.

23. Consider the re-establishment of formal childcare and carer respite services as a priority. Promote family friendly workplaces as a key element of disaster response.
24. Ensure the full engagement and equal participation of women (including marginalised women), individually or through the involvement of women's organisations and services in planning for disaster response and recovery so that gender responsive approaches are planned which consider the specific needs of all women as well as the expertise of communities of women who face multiple barriers in times of disaster, such as women with disability.
25. Consider extending the time period of the provision of Health Care Card to people living in disaster affected areas and to those people who may have had to move as a result of the disaster.
26. Prioritise and ensure immediate access to funding for disability or health support equipment that is damaged or destroyed in fire.
27. Provide additional short-term accommodation (e.g. self-contained mobile housing) for recovery support workers who are imported into communities during and after natural disasters, relieving pressure on local sources of accommodation that may already be used as emergency or crisis housing and prevent further increasing costs of housing.

5.0 Mental Health

The mental health impact of disasters cannot be overlooked in short or long-term responses, and we welcome the announcement of the Minister for Health of \$13.7 million for immediate distress and trauma support, and \$29.6 million for longer-term Medicare support psychological treatment. Indeed, the need for mental health services was a recurring theme throughout the NRWC 2020 Survey. Women described specialist health, including mental health services, as one of the most crucial services in their community. When asked what was needed for recovery after the recent summer of disasters, one woman answered:

Joy. Someone and something that motivates people to keep going. (NRWC Survey 2020),

This quote gives an indication of the level of mental exhaustion and distress that disaster-affected communities are currently experiencing, and the emotional and psychosocial support required. Even 18 months after the 2011 floods, the eS4W's *Voices from the Flood Plains* report noted that women and communities were still deeply traumatised by the experience of disaster and were subsequently focused on family and relationship recovery and the fear of another disaster, rather than strategic economic and longer-term recovery.

People of all genders experience significant mental illness and trauma post-traumatic stress disorder after disaster, but research indicates these experiences and coping can be quite different and require different responses. Men in the 2009 Black Saturday were found to feel a need to stay and rebuild after the fires as a form of resistance and to regain control over the disaster, while some women reported fear and the desire to leave, and relationship breakdown was significant in the aftermath of the fires.^{xxxix} While men are more likely to self-medicate with drugs and alcohol,^{xi} a reinforcing factor for men's violence against women, women may experience greater psychological problems.^{xii}

In the context of the 2011 Floods, Shaw, van Unen and Lang (2012, 29), noted that,

The physical, psychological, emotional and spiritual impacts of the flood are complex and hard to disentangle from each other.

They found that participants in their study reported women experienced a greater grief over the loss of the home, which was attributed to women's gendered role in undertaking household work to "make the house a home".^{xlii} In this context, the emotional investment of rebuilding was often debilitating, and compounded with economic pressures. Returning to Black Saturday, in taking on the gendered role of providing voluntary community support, women in Black Saturday were exposed to the loss, grief and trauma of others over time, and experienced burn out in the medium term.^{xliii} Women who provide care and work in the home may be secluded at home following a disaster, as children and partners return to school and work may experience greater social isolation. As such, existing evidence shows that as a result of gender differentiated roles in disasters, men and women may experience the trauma of disaster differently, and require different, gender sensitive support at different times and in different settings throughout the duration of recovery. Further, women require additional and specialised support due to increasing rates of domestic and family violence in the aftermath of disasters, as explored in more detail below.

The need to ensure mental health services is especially relevant for rural, regional and remote communities where health services are generally less available. However, the lack of available services and the value held for being stoic and lack of help-seeking culture in regional, rural and remote communities may create barriers for accessing mental health services. An outreach approach is crucial, as is the extension of existing and known services. For example, existing telephone counselling services operating 8:30am to 5:00pm on weekdays should be resourced to extend their hours during disaster recovery.

It is furthermore crucial that culturally appropriate, safe and accessible services for Aboriginal and Torres Strait Islander people, migrant and refugee communities, people with disability and LGBTIQ+ people are available, and that training enables existing providers to deliver such services. It must be acknowledged that Aboriginal and Torres Strait Islander women's connection to land means that disasters are experienced differently.^{xliv} For example, LGBTIQ+ people are often forced to present as heterosexual to access counselling support,^{xlv} undermining relationships of support and inequitably reducing the quality of care which they can access. Further, mental health services must be available to all people in the community following disasters, including those who do not have Medicare eligibility.

Recommendations:

28. Ensure dedicated mental health services for disaster-affected communities are available for a minimum of two years following disasters, in recognition of the long-term mental health impacts of disaster experiences.
29. Ensure that mental health service delivery includes an outreach approach to connect to people who are less likely to be help-seeking in accessing services.
30. Resource existing mental health services, such as telephone counselling, to increase access and availability following disasters, including outside work hours.
31. Provide training in gender sensitivity, domestic and family violence and cultural and responsiveness to frontline mental health workers and Primary Health Network (PHN) bushfire trauma coordinators to ensure that providers are sensitised to the gendered

nature of trauma following disaster, domestic and family violence, and the needs of LGBTIQ+ people, and can provide culturally safe and responsive health services.

32. Ensure access to free and adequate mental health support in the aftermath of natural disasters to those who do not have Medicare eligibility.

6.0 Gender-based violence

Levels of gendered violence against women increase in the aftermath of a natural disaster, together with levels of aggression and violence in communities more generally. Increases in violence have been documented in the aftermath of the 2009 Black Saturday fires, and in the 2011 floods by Shaw, van Unen and Lang (2012, 32), where women reported:

“not enough safe house for women escaping violent relationships”

“a lot of men felt the need to take their insecurities out on their families”

“women don’t go out anymore”

Women experiencing increased male violence may find it harder to report violence or seek help when the perpetrator is a man experiencing trauma as a result of the disaster or who had been heroes in the fires.^{xlvi} Disasters can also exacerbate women’s existing experiences of domestic and violence, with evidence to show bushfires have been used as a threat in controlling or abusive behaviour. For example, women have reported receiving threats that they will be left to perish or be harmed during disasters.^{xlvii} Women who experienced violence before the disaster may also find their networks, safe places and coping strategies are unavailable during community recovery. Further, and as noted above, LGBTIQ+ people and families may also be at risk of gender-based harassment and violence from accessing relief services.

In an environment where the usual avenues for seeking help are reduced, women’s reporting of violence may not be heard or may be silenced. Meanwhile, women with existing intervention orders or with violent ex-partners are at risk of sharing emergency shelter with them or encountering them when accessing other relief services. Moreover, as noted by Parkinson, Duncan and Weiss (2014, 22),

Unfortunately, the services established after disaster to support men and women suffering economic and physiological effects are seldom informed by an understanding of domestic violence and at times are inaccessible and ineffective.

They further report that,

For some women, there is no option but to return to violent men to house their children – ignorance of vulnerabilities like these by community and emergency management further endangers women (Parkinson, Duncan and Weiss 2014, 5).

Women’s essential specialist services, which are equipped to respond to an increase in domestic and family violence are sometimes taken over or displaced by general support services during the relief period.^{xlviii} In light of increased rates of violence, it is therefore crucial that women’s specialist services are supported and funded to respond to domestic and family violence as part of disaster responses. Disaster planning needs to treat domestic and family violence services as a distinct, necessary specialisation within the disaster, rather than as a

separate or lesser consideration. Further, support service workers responding to disasters must be training to recognise and respond to domestic and family violence. Previous experience shows that involving domestic and family violence and women's health specialists from the beginning is crucial for gender-sensitive approaches to recovery.^{xlix} Considering the chronic under-resourcing of these specialist services relative to demand, additional funding is needed to ensure they can participate in planning and coordination.

Recommendations:

33. Ensure access to adequately resourced, culturally safe and responsive women's specialist services, including crisis services responding to violence against women. There is critical need for ongoing assessment of an increased demand for women's specialist services.
34. Train emergency services and disaster relief personnel so they are able to undertake a safety/risk assessment when working with potentially vulnerable persons and situations. This includes understanding the indicators of family violence/violence against women and children and being able to identify the indicators and respond appropriately whilst in the field.

7.0 Preparing for the future

Women from the NRWC Survey commented on the importance of preparation for disaster by building resilience and working with local communities. In spite of the current or recent nature of disasters at the survey, women's responses had an emphasis on early preparation. They reported that,

"While community pull together in disasters and in times of need, sometimes action earlier could prevent said disaster. Local people know the signs and need to [be] consulted to best help their community. Someone making decisions remotely does not always have enough facts or empathy to make informed and meaningful decisions"

"we MATTER"

"I appreciate the help given after TC Debbie but I mostly feel that rural communities are at the bottom of the food chain when it comes to infrastructure upgrades and services"

"To have in place a more cohesive disaster plan organised and managed by one group" (NRWC Survey 2020).

They emphasise the need to involve local communities in disaster planning and response, to have a coordinated approach, and the importance of ongoing investment in regional, rural and remote communities to ensure their ongoing resilience through physical and social infrastructure and resources. It would be remiss not to report that a recurring theme throughout responses was a call for action of climate change as part of disaster-preparedness. Climate change is in itself likely to have gendered implications, and an intersectional gender lens is crucial to any actions to address its impacts.ⁱ

Due to the gendered nature of disasters, their management, and the subsequent impacts, it is crucial that women are involved in disaster preparedness and planning. The overrepresentation of women in sectors such as community services means that women are likely to add key skillsets to build community resilience, for example working with families, neighbourhoods and communities. In light of these skills, it is important to work with women to build capacity for community resilience.ⁱⁱ This means consulting with women in all their

diversity, including women with disability, from migrant and refugee backgrounds, Aboriginal and Torres Strait Islander women, and LGBTIQ+ women and gender diverse people to maximise the range of resilience skills brought to the table. Aboriginal and Torres Strait Islander women's and communities' knowledge of and to land, and land management, must also be considered key skills and perspectives in preparing for disasters.

Further, according to Parkinson, and Weiss (2014, 21),

Defined gender roles mean women receive less bushfire education resulting in a lower preparedness for a bushfire and less skills in operating equipment and chainsaws to aid fire-fighting attempts and escape.

Deliberate efforts must therefore be made to target those who do not typically fit into the narrative of bushfire actors, namely women and LGBTIQ+ people in bushfire education and planning, so that the knowledge to prepare for bushfires is equitable. Further, disaster planning is usually focused on a heteronormative family, with the impact of excluding LGBTIQ+ people and potentially further negative impacts to a group with already low trust in agencies and institutions.ⁱⁱⁱ Implementation of the *Living LGBTI during Disasters* Report recommendations would begin to address this gendered exclusion.

For women with disability, pre-planning for disasters is crucial to ensure that emergency services are prepared to provide accessible services and information. The *Local Emergency Management Guidelines for Disability Inclusive Disaster Risk Reduction*ⁱⁱⁱⁱ have been developed to support local emergency services to be able to provide accessible services to people with disability through consultation and partnership. Further, the *Person-Centred Emergency Preparedness* (PCEP) process tool and framework enables a person-centred and capability approach to enable whole-of-community disaster resilience. Supporting and resourcing emergency services to work with people with disability, community health organisations and carers in pre-planning will ensure women and people with disability are included and supported during disasters. The DIDRR Guidelines and PCEP should be implemented as part of all local emergency management plans to include and enable people disability. Women with disability must be allowed to lead through this process, to incorporate a gender lens on the DIDRR Guidelines, as well as DPOs, such as Women with Disabilities Australia.

Preventing violence against women is equally crucial for preparing for disasters, and reducing their gendered impacts. The Macedon Ranges Shire Council developed its first *Prevention of Violence Against Women in Emergencies Action Plan* in 2015. Now on their third plan, the Council shares the following learning and recommendations:

- Involve family violence, women's health and LGBTIQ+ specialists from the beginning
- Capitalise on the ability of local government to facilitate and lead action
- Keep it simple: be realistic about the number and complexity of actions selected given the availability of response and recovery agencies during the disaster period
- Choose actions that are achievable, measurable and informed by new research findings, information and practices
- Invest time in strengthening partnerships to build commitment of agencies to working together and leading at least one partnership action
- Allocate resources to the work – both staff time and a budget; the greater the resources the deeper the impact
- Acknowledge that working in primary prevention of violence against women takes time and action often starts with response/referral
- Build understanding of the link between gender inequality and family violence

- Make use of existing tools and resources including the GEM guidelines

A local approach to preventing violence against women and people who are sexuality and gender diverse should be supported and encouraged nationally through resourcing and guidelines.^{liv}

The rights of women and parents to health care services, including in the post-natal period and while lactating and feeding infants, are enshrined under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).^{lv} Existing evidence indicates that women's and parents capacity to feed infants may be at threat during emergencies. Increased rates of illness, including gastrointestinal infections, as well as hospitalisations connected to infant feeding problems, have previously been recorded in emergencies including the 2011 Brisbane floods and Cyclone Yasi emergencies.^{lvi} In emergencies, breastfeeding women and parents are able to provide their infants with a safe supply of food and water as well as the anti-infective factors in human milk.^{lvii} Yet women and parents require support in order to enable them to continue breastfeeding.^{lviii} Resources necessary for formula feeding such as infant formula, clean water, electricity or gas for heating water, hygienic food preparation environments and health care may be challenging to access in an emergency.^{lix} Widespread lack of access to clean mains water, power and gas was seen in the 2019-2020 Australian bushfires and must be planned for by emergency services and as part of emergency preparedness.

World Health Assembly resolutions and the Australian National Breastfeeding Strategy state that infants and young children in emergencies planning should be implemented by Australian governments (Sixty-Third World Health Assembly 2010, Seventy-First World Health Assembly 2018, COAG Health Council 2019).^{lx} Information on emergency kits for babies is also lacking meaning that parents are not being supported to be prepared themselves.^{lxi} Guidance exists to enable governments, aid organisations and individuals to support mothers, parents and caregivers in the feeding of their babies in the form of the Operational Guidance on Infant and Young Child Feeding in Emergencies (OG- IFE).^{lxii} The OG-IFE is endorsed by the World Health Assembly and requires that policies on infant and young child feeding be developed, that emergency relief and management staff be trained on these policies, and that interventions be planned and implemented to support mothers, parents and carers to breastfeed, formula feed and complementary feed children.^{lxiii}

Recommendations:

35. Implement, as a matter of priority, a separately funded process to develop an ongoing preparedness, mitigation and response plan to respond to disasters and ensure long-term recovery.
36. Support the development local preventative disaster plans and responses by individual Shire councils and communities and then integrate these plans into a wider state response. A key consideration in this locally developed planning should be gender and a recognition of the circumstances and locations of vulnerable women and their need for additional protection, care and support in times of disaster. All local disaster plans should:
 - e) Include an action plan to prevent violence against women, drawing from the learnings of the Macedon Ranges Shire Council plan and the Our Watch Change the Story Framework,
 - f) Recognise and respond to Aboriginal and Torres Strait Islander women's and communities' connection to and knowledge of land,

- g) Implement recommendations from the *Living LGBTI during Disasters* Report, be accessible to local communities in language, including Indigenous languages, Auslan and Easy English, and
- h) Implement the *Local Emergency Management Guidelines for Disability Inclusive Disaster Risk Reduction* in all plans, and ensure support and resources for the implementation of the *Person-Centred Emergency Preparedness Toolkit* with people with disability, carers, and disability organisations and services.

37. Implement the Operational Guidance on Infant and Young Child Feeding in Emergencies (OG-IFE) in disaster planning.

National Women's Alliances

The six [National Women's Alliances](#) – funded by the Office for Women represent over 200 women's organisations, bringing forward the views, voices and issues of Australian women an in particular, women from marginalised and disadvantage groups. They are:

- [Australian Women Against Violence Alliance](#) (AWAVA)
- [economic Security4women](#) (eS4W)
- [Equality Rights Alliance](#) (ERA)
- [Harmony Alliance: Migrant and Refugee Women for Change](#)
- [National Aboriginal and Torres Strait Islander Women's Alliance](#) (NATSIWA)
- [National Rural Women's Coalition](#) (NRWC)

The Alliances have previously developed community-informed evidence and resources relating to disaster response and recovery from a gender perspective.

We thank [People with Disability Australia](#) (PWDA) who also contributed to the development of this position paper.

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