Session 1.C One less disaster: LGBTI inclusive management services

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Establishing a context – Disasters & the Asia - Pacific
A region regularly affected by disasters
Impacts & effects of disasters

“….. impacts are never evenly distributed nor uniformly experienced because different social groups exhibit varying characteristics of vulnerability and resilience (Finch et al. 2010). ….. research demonstrates disparities by gender, ethnicity/race, class/income, disability and age (and other ‘marginalised groups’), during disaster”

“There is, a need for scholarly and policy research …….. on the human impacts and aspects of natural disasters”

Dominey-Howes et al., (2014) Gender, Place and Culture, 21 (7), 905-918
The United Nations International Strategy for Disaster Reduction (UNISDR) contends that:

“social difference be recognised, and the needs and concerns of all social groups such as poor, rich, men, women, young, old, indigenous or non-indigenous must be necessarily integrated into the disaster reduction policies and measures because the level of vulnerability depends on these social aspects”

One group that until recently, almost entirely absent from the scholarship =

**sexual and gender minorities**

Dominey-Howes et al., (2014) *Gender, Place and Culture*, 21 (7), 905-918
Four key issues emerged:

1 – negative impacts of heteronormative assumptions in policy development

2 – consequences of ongoing anti-LGBTI discrimination

3 – diversity of LGBTI experiences by class/race/ethnicity & gender

4 – networks of resilience

Critical work by:
- Caldwell (2006)
- D’Ooge (2008)
- Leap et al., (2007)
- Richards (2010)
Case 2 – Earthquake, Haiti, 2010

Issues included:

1 – many similar to New Orleans
2 – destruction of ‘safe’ physical spaces
3 – religious demonisation (& assault)
4 – violence, rape & exclusion
5 - invisibility

Critical work by:

International Gay and Lesbian Human Rights Commission (IGLHRC, 2011)
SEROvie (an HIV/AIDS NGO)
Case 3 – various hazards, S & SE Asia, 2004 - 2010

2004 tsunami

- ‘Aravanis’ people in Tamil Nadu
- Born intersex (or male)
- Dress in feminine clothes – don’t define themselves as male/female
- Stigmatised/marginalised
- Ignored by govt & NGOs
- Experienced much abuse

Critical work by:
Pincha (2008)
Pincha & Krishna (2008)

2010 Mt Merapi volcano

- ‘Waria’ people in Central Java
- Born male
- Adopt feminine features & identities
- Stigmatised/marginalised - rejected
- Invisible to govt & NGOs after the eruption
- Did not fit ‘normative classifications’

Critical work by:
Balgos et al., (2012)

20XX Cyclones & floods

- ‘Baklas’ people in Irosin, Philippines
- Born male
- Non-normative gender performativity & sexual orientation
- Swing from male to female tasks & responsibilities
- Stigmatised/marginalised - rejected
- Significant difficulties in evacuation shelters
- Did not fit ‘normative classifications’

Critical work by:
Gaillard (2011)
Our ARC Discovery project, team & agenda

We focused on four situated events:

Brisbane, Queensland, and the affect of the floods of January 2011

Creswick, Victoria, and the affect of the floods of January 2011

Blue Mountains, NSW wildfires of 2013

Christchurch, New Zealand, and the affect of the earthquake of February 2011

Although………..
1 – Occlusion & discrimination in DRR policy & practice

Analysis of NSW Emergency Management response & recovery arrangements

3 plans:

NSW EMPLAN
Welfare Services Functional Area Plan (response & recovery)

NSW RECOVERY
RESPONSE (& RECOVERY)

- Emergency accommodation (ADRA)
- Food & refreshments (Salvation Army)
- Clothing & personal items (St Vincent de Paul)
- Personal support (Australian Red Cross)
- General support (Anglicare)

Outsourcing to third party religious institutions

(granted exemptions to anti-discrimination legislation in employment AND service provision – even though receiving tax payer funds to serve) = ‘curious policy paradox’ 😐

2 – destruction of *home, neighbourhood, community*

For LGBTI people in many locations, the making of home – at both scales of the house and neighbourhood – operates as a site, source and process of resilience in heteronormative societies that are routinely discriminatory and potentially violent (Gorman-Murray 2007a; Waitt and Gorman-Murray 2007).

Residential dwellings offer one of the most immediate spaces of privacy, security and identity-support for LGBTI individuals and families (Gorman-Murray 2008).

We reveal impacts at:

1. small scale of individual home (together with negative impacts on relocation & rebuilding)
2. discriminatory experiences in emergency shelters & temporary accommodation
3. medium – large scale with loss of neighbourhoods & community infrastructures (physical & socio-cultural)

3 – media analysis of Antipodean disasters

4 – resilience & capacity

Resilience… Adaptive capacity…… Social capital…… Networks…… Resistance…… Skills
Opportunities for going forward

Sexual and gender diverse individuals/communities can:

✓ Step up and volunteer as part of local emergency service units
✓ Foster partnerships between LGBTI support organisations and the emergency services
✓ Build disaster preparedness into their social networks

Governments, emergency service organisations and other response agencies can:

✓ Develop legislation and policies are are inclusionary
✓ Adopt and enact new GEM Guidelines
✓ Reach out to and engage with LGBTI community organisations who can act as gatekeepers to engage with sexual and gender diverse people
Summary

Disasters affect individuals, families & communities

Impacts on people are not evenly experienced

Vulnerability & resilience dependent on a series of socio-cultural & other factors

Extremely limited scholarship and policy work on experiences of LGBTI populations and many experience increased vulnerability and policy negative experiences during and after disasters

In Australia and elsewhere, policy (negative) settings perpetuate vulnerability and discrimination & increase marginalisation

Histories of LGBTI people & families in Australia currently invisible

Thanks to all those that have shared and worked with us

Research has helped assist with the development of new Gender and Diversity EM Guidelines

Thanks & questions?
LGBTI-inclusive Emergency Management in Victoria
Equitable service delivery vs ‘we treat everyone the same’
Impact of prejudice and discrimination

Direct effects
- Reduced physical and mental health & wellbeing
- Social isolation and economic disadvantage

Indirect effects
- Reduced access to, and use of, mainstream health services
DIRECT EFFECTS

Violence, discrimination and social exclusion

• 65% of trans and gender diverse people had experienced discrimination or harassment (n=946)*
• In Victoria, one in seven GLBT people report living in fear of heterosexist violence^
• 25.5% of LGBT people reported being subject to heterosexist verbal abuse, 15.5% to harassment, and 15.3% physical violence or the threat of physical violence^

*The First Australian National Trans Mental Health Study: Summary of Results (2014)
^Private lives 2 (2012)
DIRECT EFFECTS

Self-harm and attempted suicide

• LGBT people are up to 14 times more likely to attempt suicide or self-harm than the national averages*

• Nearly 21% of transgender respondents in a national survey report suicide ideation compared with 2.3% in the general population^

*A Suicide Prevention Australia Position Paper (2009)
^The First Australian National Trans Mental Health Study: Summary of Results (2014)
DIRECT EFFECTS
*Drug and alcohol misuse*

- Use of illicit drugs in the LGBT community is two to five times higher than in the general population*
- Among young people, 7.8% of SSA students compared to 1.3% of opposite-sex attracted students had ever injected drugs^

^
Smith, Agius et al., (2009)
INDIRECT EFFECTS

In hiding

• 44% of LGBT respondents aged 16-89 years reported that they occasionally or usually hid their sexual or gender identity in public for fear of discrimination or abuse

• Nearly 34% of LGBT Australians usually or occasionally hid their sexuality or gender identity when accessing services and 39% did so at work

• 84% of LGBT people who participated in mainstream sport were not generally out (46.0% not out at all, 33.5% out to some)

^Private lives 2 (2012); *Come Out to Play (2010)
INDIRECT EFFECTS

Service access

• LGBT people underutilise services and delay seeking treatment due to actual or anticipated bias from service providers leading to:
  ➢ Reduced screening for a range of health conditions
  ➢ Escalation of a range of issues or problems^  

• Sexual minority young women in Australia are significantly more likely than heterosexual women to have lower continuity of GP care and lower satisfaction with that care*  

• Identity concealment can lead to significant reduction in quality of care

^Private Lives 2, 2012; *Australian Longitudinal Study on Women’s Health, 2011
Research project on identifying the experiences and needs of LGBTI communities before, during and after emergencies in Victoria

A research report commissioned by the Department of Premier and Cabinet

2018

LGBTI sample

EM sample
Effects on LGBTI people
As a sector we have a role to play to improve the experience of LGBTI communities before, during and after emergencies.
“GLHV is putting the lives of Victorians at risk”

LGBTI-inclusive practice tools

Rainbow Tick Standards

Standard 1: Organisational capability
Standard 2: Workforce development
Standard 3: Consumer participation
Standard 4: A welcoming and accessible organisation
Standard 5: Disclosure and documentation
Standard 6: Culturally safe and acceptable services
Thank you

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