



Diversity

in Disaster

Outcomes Statement

May 2018

Diversity in Disaster Conference

Melbourne, Australia.

17th and 18th April, 2018.

<http://www.genderanddisaster.com.au/diversity-in-disaster-conference/>

Outcomes Statement

Diversity in Disaster Collaborative

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The Diversity in Disaster Conference was held in Melbourne, Australia, 17-18th April 2018. It brought together a community of 237 delegates representing 136 organisations including government, academics, community members, Non Government Organisations (NGOs), policy makers, volunteers and professionals working on emergency management. An additional 107 presenters and facilitators attended from across Australia, New Zealand and the United Kingdom. A number of in-conference events highlighted pioneering work being done in Australia, including: the launch of the Gender and Emergency Management Guidelines; the presentation of the Mary Fran Myers Award to the Gender and Disaster (GAD) Pod; and the launch of the *LGBTI Experiences of Disaster* report. Over the two days, delegates and presenters considered diversity, disaster and resilience with a focus on the Australian context.

Informants who contributed to the Outcome Statement are listed at the end of the document.

This Outcomes Statement summarises the strategies and practical steps to improve inclusive emergency management (EM) that emerged during the conference. It is shaped by an informant method. Thirteen informants with experience in diversity and/or disaster attended the conference. In a post-conference workshop, their insights were combined with a conference artefact, which recorded real-time responses from delegates, into a document with over 450 data points that shaped the outcome statement¹. The Statement, reviewed by the Conference Steering Committee, is one of a series of legacy documents available from the GAD Pod website², which include: the Issues Paper; Full Program; Monograph (published by the *Australian Journal of Emergency Management*) and the external evaluation. The Outcomes Statement should be read in conjunction with these documents.

The conference was funded under the National Disaster Resilience Grants Scheme which operationalises many of Australia's international obligations under the United Nations' *Sendai Framework for Disaster Risk Reduction 2015-2030*.³ The Sendai Framework usefully sets out definitions, guiding principles, priorities and stakeholder roles for action on reducing disaster risk and increasing resilience.⁴ 'Disaster' includes acute shocks like floods, fires and terrorist attacks; slow-burn disasters like climate change; and underlying chronic stressors inherent in a community like poverty and discrimination.⁵ While the conference adopted the Resilient Cities definition of resilience, during the conference resilience and disaster in the Australian context were linked to marginalisation, privilege and community. It was noted that, while we each have our roles in disaster, individuals have the right to privacy, and services providers, emergency management professionals and communities have critical impact in fostering equity of opportunity to plan, survive and recover from disasters.

¹ Two or more informants attended each conference session and, using a standardised insights document, recorded proceedings. The conference artefact collected delegates' insights across the two days. The resultant 450+ data points inform this outcomes statement.

² www.genderanddisaster.com.au

³ United Nations, The Sendai Framework, viewed on 24 May 2018 at : <https://www.unisdr.org/we/inform/publications/43291>

⁴ It is noted that Australia will report on its obligations under the *Sendai Framework* in 2019.

⁵ 'Disaster' is used synonymously with 'emergency' in this statement.

Defining concepts: resilience, marginalisation and vulnerability, privilege and whole-of-community

1. Resilience is an organising concept in contemporary emergency management. It shapes thinking about, and action for, better outcomes. The conference committee adopted the Resilient Cities definition of resilience: “[t]he capacity of individuals, communities, institutions, businesses, and systems within a city to survive, adapt, and grow no matter what kinds of chronic stresses and acute shocks they experience”⁶. Delegates drew on a number of other definitions and critiques, including the United Nations (UN)⁷ and Australian Council Of Social Service (ACOSS) definitions⁸, and plenary session presentations during the Conference, to shape their understanding of disaster and resilience.

As an organising concept, resilience provides a powerful language and way of thinking about the work of emergency management and communities in planning for, responding to and recovering from disasters. It is noted that this language does not focus on the loss, grief, trauma or distress that many people and communities experience.

2. The experience of disaster is embedded in the fabric of our world and some resilient systems are not necessarily positive – specifically structures of privilege that condition disproportionate outcomes. Those who are discriminated against, **marginalised and vulnerable** before disaster are disproportionately impacted during and after disaster. Currently, while there are some promising areas of practice, those with ‘underlying vulnerabilities’ experience increased risk of death, injury, violence, economic and social hardship and a lack of access to resources. Promising practice includes examples where community occupies a central role. Definitions of resilience are strengthened by recognising that the conditions, dynamics, relationships and networks that structure our world before

⁶ Rockefeller Foundation, 100 Resilient Cities, definition of resilience viewed on 25 May, 2018 at:

<https://www.100resilientcities.org/resources/>

⁷ Resilience is defined as: “The ability of a system, community or society exposed to hazards to resist, absorb, accommodate to and recover from the effects of a hazard in a timely and efficient manner, including through the preservation and restoration of its essential basic structures and functions”, United Nations Office for Disaster Risk Reduction (UNISDR), ‘2009 UNISDR Terminology on Disaster Risk Reduction’, Geneva, May 2009 (<http://www.unisdr.org/we/inform/terminology>).

⁸ Australian Council of Social Service, national parent of VCOSS, defines resilience as “[t]he ability of individuals, communities, organisations, or countries exposed to disasters and crises and underlying vulnerabilities to: anticipate, reduce the impact of, cope with, and recover from the effects of adversity without compromising their long-term prospects”. Viewed on May 24 at <http://resilience.acoss.org.au>

disaster play a role in creating and determining experiences of acute shocks and chronic stresses.

3. The corollary of marginalisation and vulnerability in disaster is **privilege**: one cannot exist without the other. A conversation focussed on ‘marginalisation and vulnerability’ looks only at the disproportionate impacts of disaster and not the causes. Responding to the impacts of marginalisation and vulnerability includes recognising and acting to mitigate historic and institutionalised discrimination. Linking vulnerability and marginalisation to privilege unpacks the ways in which current systems produce the conditions that create some disasters and exacerbate the ways in which some people (and not others) are impacted by disaster.

4. The Conference heard that actions taken to address privilege, marginalisation and vulnerability reduce risk and increase **whole-of-community** resilience. Communities can lead response and recovery, self-organising in a complex web of existing and emergent relationships; and community can also play a critical role in collaborating with emergency management in all phases to shape preparedness, response and recovery. A position attributed to Mr Craig Fugate, former Administrator of FEMA, USA, portrays the view that Emergency Managers have the responsibility to plan for a ‘Whole-of-Community’ context. Any group within a community that is not included in the plans is, as a consequence, marginalised and made more vulnerable.

Practical Steps for conceptualising: resilience, marginalisation and vulnerability, privilege and whole-of-community

- The conference reiterates the need, captured in the *Sendai Framework*, to promote the collection, analysis, management and use of relevant disaggregated data and practical information and to ensure its dissemination, taking into account the needs of different categories of users.
- The *Goals and Targets of the Sendai Framework*,⁹ to which Australia is a signatory, also relate to WHO’s *Health Emergency & Disaster Risk Management*¹⁰(H-EDRM) program

⁹ The Sendai Framework and associated documents can be found at : <https://www.unisdr.org/we/inform/publications/44983>

¹⁰ The WHO’s H-EDRM documents can be found at: <http://www.who.int/hac/techguidance/preparedness/en/>

and synergise with the *UN Sustainable Development Goals Agenda 2015 - 2030*¹¹. A number of communities demonstrate the application of the principles of community development in community-based Centres of Resilience which is one strategy to address the chronic stresses in a community and underpin greater resilience to the inevitable acute shocks with the expectation of improved outcomes.

- Adopting a definition of resilience that acknowledges the link between privilege, marginalisation and vulnerability is one step toward a whole-of-community approach.
- Many communities demonstrate promising practice in fostering resilience. Existing online knowledge-hub platforms, eg the *AIDR Knowledge Hub*,¹² and the *MUDRI Compendium of Community Resilience Case Studies*¹³, have the capacity to capture and champion promising practice to increase diversity in disaster. These knowledge hubs benefit from the contribution of users and their feedback about usefulness, navigation and content.

Strategies and Practical Steps for Diversity in Disaster

A. Gender and Disaster

5. Gender has a critical impact on every person's experience of disaster. The research, lived experience and practice knowledge show that disaster risks are gendered. Gender roles and gender stereotypes cast men as protectors and heroes and women as less physically capable, the providers of care, with domestic responsibilities. These stereotypes do not reflect the facts of women's and men's roles and responsibilities in disaster. Women experience increased risk of death due to incomplete emergency planning; increased violence, including domestic and family violence and sexual assault; and greater financial hardship following disaster. Men experience increased health risks through attempting to embody hegemonic masculinity, resulting in, for example, increased risk-taking, drug and alcohol use, mental health issues and suicidal ideation. The National Gender and Emergency Management Guidelines contain strategies for addressing direct and indirect impacts.

¹¹ The UN's Sustainability and Development Goals can be found at: <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

¹² The AIDR Knowledge Hub can be accessed at: <https://knowledge.aidr.org.au>

¹³ MUDRI's Compendium can be accessed at: <https://www.monash.edu/muarc/research/research-areas/home-and-community/disaster-resilience/view-the-compedium>

6. Women are underrepresented in emergency response services, at both front-line and leadership levels. Women are also underrepresented at a leadership level in many bodies involved in emergency management including government, community initiatives, NGOs, health and social services. The underrepresentation of women in leadership roles has particular consequences for the delivery of emergency management including: reinforcing gender stereotypes and compromising the ability to plan for or respond to the needs of women and their children. It is noted that many emergency response services are currently engaged in formal review processes to increase gender equity and address sexism in their organisations, which are expected to produce recommendations, policy and procedures. Gender equity is a preventative strategy that reduces violence against women and their children.

7. One clear example of gendered experiences of disaster is the increase in domestic and family violence and sexual assault during disaster. Both men and women experience domestic and family violence and sexual assault. The figures show that women are more likely to experience, with one in four women experiencing domestic and family violence and one in five experiencing sexual violence.¹⁴ Violence against women increases at times of disaster, with consequent increase in risk of death, injury and abuse. Gendered disaster risks include direct impacts and indirect impacts. Direct impacts include: an abusive husband partner or boyfriend purposefully endangering life by, for example, compromising an evacuation plan; and changed risk in disaster contexts such as the increased exposure to perpetrators in evacuation processes and during recovery; new experience of domestic violence from a male partner who was not violent before the disaster; and a community reluctant to acknowledge 'heroes' or suffering men as perpetrators of violence against women and children. Further, services may be reduced or non-existent in a post-disaster context, and women are less likely to report because of the fear of repercussions or the belief that their needs are less important. Indirect impacts include the push back on gender roles that places the care of children with women and creates barriers to re-engaging in employment with consequent social and economic impacts.

¹⁴ Cox, P. (2015) *Violence against women: Additional analysis of the Australian Bureau of Statistics' Personal Safety Survey 2012*, Horizons Research Report, Issue 1, Australia's National Research Organisation for Women's Safety (ANROWS), Sydney; and Woodlock, D., Healey, L., Howe, K., McGuire, M., Geddes, V. and Granek, S. (2014).

Practical steps for women and men's safety in disaster

- Embedding the National Gender and Emergency Management Guidelines in emergency management practice.
- The collection and analysis of gender-disaggregated data (man, woman and other) to ensure robust evidence for policy and planning.
- Incorporating into emergency management existing national, state or territory strategy, policy and practice to reduce and respond to violence against women.
- Adoption of strategy, policy and practice to reach gender equity in emergency management services.
- Undertaking Lessons in Disaster training – to be found on the GAD Pod at www.genderanddisaster.com.au/info-hub/educations-training

B. Learning from Aboriginal People and Torres Strait Islanders

8. Aboriginal people and Torres Strait Islanders' sovereignty and caring for Country reflect stewardship of this land for more than 60 thousand years. The Diversity in Disaster Conference explicitly acknowledges climate change as a chronic emergency impacting on the Australian context. The conference sought ideas, insights and partnerships to achieve better outcomes. Knowledge of Country and cultural continuance demonstrate resilience in the face of colonial impact and climate change. This knowledge speaks directly to integrated responses as we face the slow-burn disaster of climate change and acute shocks like catastrophic fire and flood. Embedding a respectful exchange around land and stewardship calls on emergency management stakeholders to engage in authentic partnerships and collaboration, built over time with Aboriginal and Torres Strait Islander people, and the devolution of power to Aboriginal and Torres Strait land owners.

Practical steps for learning from Aboriginal and Torres Strait Islander people

- Relationship building with local Aboriginal and Torres Strait Islander nations and representative bodies.
- Responsiveness to existing work on caring for Country like the Uluru Statement from the Heart, and reconciliation action like the Closing the Gap policy.



- Organisational knowledge of obligations under any state or local treaty.
- Training for cultural competency and cultural safety is widely available and can be accessed by EM services as a step toward ensuring inclusive emergency management.

C. Practising diversity in disaster

9. Migrants, refugees and asylum seekers are integral to our community and serve in our response services, the emergency management sector and at all levels of government, business and community. These communities draw on a broad range of capabilities that may include strong resourceful community networks, bi-cultural practice, language skills, and prior experiences of emergencies and disaster. As for all people, planning and preparation require thoughtful consideration in the crafting of a plan. For people from migrant, refugee or asylum seeker backgrounds, a number of factors may impact on this planning.

Engaging with local migrant refugee and asylum seeker communities in the planning phase of emergency management ensures that responses incorporate relevant considerations. Making information about emergency and disaster available in relevant languages, on relevant platforms, and in relevant styles – including content that meets literacy levels – reduces barriers. It is noted, however, that **cultural competency and cultural safety** includes more than language. Consultation and collaboration are needed to ensure safe spaces in evacuation centres and in the provision of housing and social services during recovery. While many community groups find the Australian emergency, justice and service systems frustrating at times of disaster, migrants, refugees and asylum seekers are more likely to have experienced these systems as adversarial and punitive. Traumatic experiences of emergency and disaster are also to be expected in refugee and asylum seeker communities. As a result, barriers to accessing services during disaster are likely to include stress, confusion and fear. There are a number of practical steps that increase equity of opportunity for migrant, refugee and asylum seeking communities to plan and survive.

Practical steps for cultural safety in disaster

- Training for cultural competency and cultural safety is widely available and can be accessed by EM services as a step toward ensuring inclusive emergency management.

- Implementation of trauma-informed service delivery.
- Promising practice in this area includes recruitment of members from these communities to volunteer services like the State Emergency Services and the Country Fire Authority.
- It is noted that culture is not an excuse for violence or abuse, and protocols, training and information already exist for accountability of male perpetrators, as well for the delivery of services for the safety of women and children in a culturally competent manner.

10. Lesbian Gay Bi-Sexual Trans-sexual and Intersex (LGBTI) people are an integral part of our community, serving in our response services, contributing as emergency management professionals at all levels of government, NGOs and the private sector. LGBTI communities face specific risk at times of disaster. These risks are direct and indirect and impact on the equity of opportunity to plan for and survive emergency. Direct risks include things like heterosexism in emergency management workplaces and the refusal of service provision during disaster. It is noted that service refusal is legal for those faith-based NGOs that have been granted exemptions to non-discrimination law. These NGOs tender for and are granted government money to deliver emergency services to the Australian community. Indirect discrimination includes a lack of planning for safe spaces for LGBTI people and families and ablution blocks that equate sex and gender. It is noted that LGBTI people have the right to privacy, and should not be forced to disclose their sexuality or gender identity in order to receive services, rather it is the responsibility of services to ensure accessibility.

Practical steps for LGBTI safety in disaster

- Embedding the National Gender and Emergency Management Guidelines in emergency management practice.
- Implementation of the recommendations in *Living LGBTI in Disaster* which can be found at www.genderanddisaster.com.au/living-lgbti-duing-disaster/
- Services working in any element of emergency management are Rainbow Tick accredited.
- The provision of gender-neutral toilets and showers at EM centres and in EM workplaces.

11. While a broad range of health issues impact on experiences of disaster and emergency, the Outcome Statement reflects the conference, which focussed on the experiences of

people with obesity, disabilities including mental illness, dementia, age-related physical impairment and access to opiates. It is noted that the integration of good practice in public health into emergency management is critical for the safety of individuals and emergency management staff. Evacuation-planning that considers mobility, stress and capacity, and access to medical and home-based care essential to health in recovery, poses a complex challenge. Two critical areas were identified as having significant impact on risk: the built environment and the role of actors who have regular contact and/or a caring role to assist with planning.

People with disabilities, including mental illness, are part of our community and serve in our response services, in emergency management, at all levels of government, business and community. Disability is not always obvious, however, people with disabilities face particular risks in emergency. As for all people, planning and preparation require thoughtful consideration and the crafting of a plan for action during and after disaster. For people with disabilities, crafting a plan can be affected by a number of factors including: lack of accessible information, social isolation, increased risk related to the built environment and decreased access to essential medical care. At the same time, people with disabilities have unique knowledge of the service system, including available services and navigation. This knowledge may include previous trauma and can be a vital resource for others in the community unaware of the personal impact of trauma and possibilities for support.

Australia has comparatively high rates of obesity. People with a BMI over 40 are an integral part of our community and serve in our response services, in emergency management, at all levels of government, business and community. People with a BMI over 40 face particular risks in emergencies and, as for all people, planning and preparation require thoughtful consideration and the crafting of a plan for action during and after disaster. A number of things impact on this community's equality of opportunity to plan for and survive disaster. Direct risks include barriers to evacuation, the particular impact of extreme weather events, and access to essential health services.

Opiate users face particular challenges at times of disaster. Opiate use includes both legal and illegal drug use. As a drug of addiction, lack of access to opiates has health impacts

including withdrawal and the return of underlying conditions like chronic pain. In addition, because of the relationship between legal and illegal drug provision, the acquisition of opiates during disasters carries risk. Planning for the consequences of opiate scarcity, and the provision of services to people transition from opiates is of concern during disaster and recovery.

Older people are integral part of our community and serve in emergency management, at all levels of government, business and community. Older people hold generations of knowledge about disaster. Their experiences of past emergencies and the changed environmental and social condition of emergency are invaluable in understanding the context of current practice. Older people face particular risks during disaster and, as for all people, planning and preparation for emergency require thoughtful consideration and the crafting of a plan for action during and after disaster. A number of things impact on older people's equality of opportunity to plan for and survive disaster. Accessible spaces and information increase ability to evacuate and to make timely decisions. Due to retirement, a significant number of older people are more likely to experience emergency in the home or an institution. When older people are in an institution, the onus rest on that institution to properly plan for evacuation, including for people with dementia. Where older people live alone, social isolation and the digital divide require particular attention to ensure information about emergencies gets through.

Practical steps for health in disaster

- Services providers whose client groups are likely to have a disability, permanent or temporary impairment, have an obligation to address 'whole-of-community' inclusive emergency planning in their service provision.
- Health information about planning for extreme weather events that particularly address audiences with a BMI over 40, a disability, older people, and people with drug dependency is needed.
- Universal design of buildings and public spaces increases the opportunity for people with a disability, permanent or temporary impairment to evacuate. Where the built environment pre-dates universal design, evacuation planning requires attention to the capability of people with a disability, a permanent or a temporary impairment.



- Universal design of content increases access to information and, consequently, opportunities to make informed timely decisions. The federal government's *WCAG Specifications* catalogues accessible design techniques.
- Some actors have a greater impact on survival. Institutions, like hospitals and social housing, bear the onus of inclusive planning for evacuation.
- The inclusion of Psychosocial First Aid, Mental Health First Aid and trauma-informed principles of practice in all training for EM staff increases capacity to respond effectively.
- The inclusion of planning for drug dependency in emergency management.
- Practical steps for health in disasters is widely available in the *2015 Sendai Framework*, and in the *Technical Guidelines of the WHO's Health Emergency & Disaster Risk Management (H-EDRM) program*, both are useful considerations for emergency planners and community leaders.

12. Children and young people are particularly vulnerable to disaster. Children rely on others to listen to and respond to their needs. Children are, however, quite capable of participating in these processes. Research and evidence suggest that while disasters have profound impacts, children are resilient and often contribute critically to their own and their families' survival. School-based activities including evacuation drills and participatory or experiential planning have demonstrated positive outcomes for child preparedness and wellbeing. Ensuring that education is maintained in recovery is critical for protecting whole-of-life opportunity. Child-centred opportunities to contribute, talk about and reflect upon disaster experiences have also shown positive outcomes for child wellbeing.

Practical steps for children's safety in disaster

- Appropriate inclusion of children in emergency planning, response and recovery, fosters resilience and supports growth in the aftermath of disaster.
- Child-centred opportunities for reflection upon disaster are positive for child wellbeing.
- The provision of safe places for children in EM response and recovery centres.
- Protection of access to education for children during recovery.

13. Rural and remote communities are characterised as being resilient. These communities are disproportionately impacted by slow-onset disasters, like drought and climate change, due to their economic and cultural links to the land. The impacts of acute shocks like floods or fire occur in a context where there are fewer emergency management resources, including response and recovery services. On the other hand, rural and remote communities are often deeply committed to place and activate pre-existing networks quickly and efficiently at times of disaster. The knowledge held in rural and remote communities is of great benefit in predicting things like weather patterns, knowing the safest and fastest routes to take to evacuate in changing conditions or when responding to disaster, and understanding local community dynamics, issues and strengths. This local knowledge is valuable to emergency management. While the loss of home can mean geographic displacement, those who live in rural and remote communities face the increased likelihood of having to move great distances away, altering their connection to place and community.

Practical steps for rural and remote communities in disaster

- Partnering for recovery with rural communities recognises their distinct strengths and vulnerabilities, including the immediate and long-term impacts of strong local networks and a lack of local service systems.

14. People with animals and pets face particular risks during disaster and emergency. People with pets and animals may stay behind to provide care or protection and may be delayed in actioning evacuation plans. On the other hand, in the recovery phase pets are a strong protective factor against social isolation and animals may be a vital source of income.

Practical steps for people with pets and animals in disaster

- Planning for pet and animal evacuation increases owners' opportunities to evacuate, and pets and animals can be a positive influence in recovery.

15. For people who are homeless, disasters unfold in a context of an absence of home.

While not all planning for emergencies happens around or from the home, the presumption is that affected communities are either planning to survive in place, trying to return home or recovering in the context of a lost home. This makes homeless people vulnerable to



particular types of emergencies and disasters. Extreme weather events impact on homeless people disproportionately as they have fewer ways to mitigate impacts. Homelessness can also be a consequence of emergency. The loss of home can lead to temporary displacement from community, financial hardship and loss of social connection, and may lead to longer-term homelessness.

Practical steps for the safety of homeless people in disaster

- Plan for the provision of safe cool places and water to homeless people in extreme heat events, and safe warm places to homeless people in extreme cold events.
- Plan for homelessness, which includes the impacts of the grief, loss and trauma of losing home, as a result of emergency and disaster.

Strategies for diversity and resilience in disaster

16. Diversity and resilience are linked to power and privilege and the use of that power over time to shape access to resources. A model that acknowledges the impacts of multiple forms of power and privilege is preferable to a model that denies difference, and the impact of distinct forms of power is often related, interconnected and complex. Intersectionality¹⁵ has emerged as one way to frame the interplay of multiple forms of privilege, oppression and marginalisation. Intersectional approaches acknowledge that, in any given time or context, different forms of privilege may be more or less impactful. During conference proceedings, a number of strategies emerged to combat exclusion. These include consultation, leadership and communication strategies. These strategies have the potential to significantly impact on outcomes by: recognising the strengths and capacities of communities experiencing disaster; and acknowledging and mitigating the power imbalance between actors.

17. Consultation, partnerships and collaboration are processes for cultivating diversity in disaster. They occur between community and agencies, across community and between agencies. Consultation, partnerships and collaboration can impact on risk and increase resilience by ensuring that communities have a voice in determining outcomes that impact

¹⁵ Crenshaw, Kimberle (1989) "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics," *University of Chicago Legal Forum*: Vol. 1989 , Article 8.

upon them. However, these processes can also expose participants to further marginalisation, tokenism or discrimination. Consultation, partnerships and collaborations that increased resilience were characterised by authentic, respectful relationships, the devolution of power and the realisation of stakeholder influence over outcomes. When partnerships and collaborations worked, they often achieved economies of scale, improved knowledge transfer and exchange efficiencies, and allocated work effort efficiently between actors.

18. Change requires leadership. Leadership for diversity in disaster occurs in many places and spaces. It can be an individual, a group, an organisation, agency or a community. It can be spontaneous, sustained and/or organised. Leadership for diversity within EM agencies, including response agencies, was characterised by a willingness to listen to community, to engage with research on diversity in disaster, to acknowledge hegemonic culture, and to hold staff accountable to policy and procedures for addressing inequity. Leadership in communities, particularly leadership in the ‘voids’ and ‘vacuums’ that emerged in the aftermath of disaster, was characterised by creativity, connection to and care for people, knowledge of local issues, resilient navigation of service systems, hope and frailty. Thought-leadership occurred in academia, government, community and the private sector and was characterised by authentic consultation, partnerships and collaboration. All leaders risk a ‘leadership tax’ that manifest as the personal cost of confronting the impacts of disaster, privilege and power. This cost includes ‘burn out’, vicarious trauma, post-traumatic stress disorder/injury, and/or demotion, firing or work place bullying.

19. Communications about diversity in disaster have an impact on risk and resilience. There is currently a lack of integrated, thoughtful, specific communication tools and strategies that support diversity in disaster. A number of elements are missing, these elements include: language used to communicate about risk and resilience that is appropriate to the user and respectful; communication strategies that accurately frame the problems of disaster risk and recovery; media coverage that includes images and content representative of communities and gender roles; and the design of tools, online platforms and approaches to ensure the reduction of barriers to information. All these elements of a comprehensive communications strategy can either perpetuate privilege or support inclusive planning, response and



recovery, however, particular attention is required to address the language of ‘marginalisation’, ‘vulnerability’ and ‘minorities’. This language fails to adequately capture the lived experience of disaster, risks casting some actors as victims and further stigmatises communities who experience inequity of access to resources, decision-making and power.

20. An increased profile in monitoring and evaluation frameworks became apparent during the Conference. Driven by the need to improve the evidence-base of interventions in this sector and by the international imperative for greater accountability by all actors in meeting the identified needs of the beneficiaries in disaster, a number of frameworks provide direction for both EM and community leaders in this sector. Specifically, the *Australian Disaster Resilience Index*,¹⁶ the *Rockefeller Cities Resilience Index*,¹⁷ the *National Recovery Framework and Indicators*¹⁸ and the *National Vulnerability Profile*¹⁹ are national practical steps to guide the future collaborative activities of this sector.

Practical Steps for Partnership, Leadership and Communication

- Soon after this Melbourne Conference, the Federal Government announced the establishment of a new *National Resilience Task Force*, to be located within the Ministry and Department of Home Affairs. The focus of this new Task Force is to develop and implement a National Disaster Mitigation Framework. Whilst the new Task Force was not known to the Conference participants, many sessions reinforced the importance of prevention, mitigation and disaster risk reduction in the Australian setting. This Outcomes Statement will be forwarded to the Director of the new Task Force with the offer of providing an avenue for continued dialogue.
- Establishing a national emergency management and recovery group to: share the diverse work happening in the emergency space, especially the work of communities; to create a platform for reporting to stakeholders; and to consolidate learning from community consultation. The aim of this working group would be to increase visibility of community

¹⁶ The Australian Disaster Resilience Index, <https://www.bnhcrc.com.au/research/hazard-resilience/251>

¹⁷ the Rockefeller Cities Resilience Index, <https://www.rockefellerfoundation.org/report/city-resilience-index/>

¹⁸ the National Recovery Framework and Indicators <https://knowledge.aidr.org.au/resources/national-recovery-monitoring-and-evaluation/>

¹⁹ the National Vulnerability Profile

<https://www.oem.wa.gov.au/Documents/Resources/ReportsandReviews/UnderstandingDriversofDisasterThecasefordevelopinganAustralianVulnerabilityProfile.pdf>

and disasters, to increase accountability in emergency management, catalyse work effort and encourage transparency.

- Adoption of the National Gender and Emergency Guidelines by emergency management services.
- Implementation of the recommendations in Living LGBTI in Disaster which can be found at <http://www.genderanddisaster.com.au/living-lgbti-duing-disaster/>
- The activation of existing national government strategies including the National Strategy for Disaster Resilience Community Engagement Model, and the National Principles for Disaster Recovery.
- Leadership programs for diversity in disaster can come at a personal cost. It is therefore important to have appropriate support mechanisms in place for leaders working on diversity in disaster.
- The development of a communications toolkit for diversity in disaster using a co-design approach. This co-design approach would include representatives from the communities identified above and might include:
 - A review of language to ensure respect and accessibility.
 - Key messages for people most at risk.
 - Forging constructive working relationships with journalists and other media professionals.
 - Developing social media policies and presence to directly communicate risk and recovery messages.
- The inclusion of strategies for diversity in monitoring evaluation and learning frameworks to measure impact and improve practice.

Conclusion

The Diversity in Disaster conference brought together actors from emergency management, academia and community to generate ideas, exchange information and insights into the problem of disproportionate disaster impact. These insights provide valuable information for future planning. The definition of resilience as an organising concept in emergency management was strengthened by recognising that the conditions, dynamics, relationships and networks that structure our world before disaster, play a role in creating and



determining experiences of acute shocks and chronic stresses. This acknowledges the interplay between vulnerability and privilege. The role of gender in shaping disaster experiences and consequences, and learning from Aboriginal and Torres Strait Islanders for land management and resilience, cut across much of the thinking about diversity in disaster. Strategies for increasing diversity include: consultation and partnership, communication, creativity, authentic leadership and devolving power to knowledgeable stakeholders. The adoption of these strategies has flow-on effects that increase the equity of opportunity for all members of the community to plan for and survive disaster and to thrive in recovery.



With thanks to the team of informants who contributed their insights: Alexandra Howard, Faye Bendrups, Stuart Reid, Corrine Waddell, Elise Erwin, Helen Scott, Jack Plant, Samuel Beattie, Ben Baccaris, Jessie Adams, Alyssa Duncan, Stephen O'Malley, and the members of the Diversity and Disaster Committee who reviewed the document and provided feedback.