"Inclusion of Disability and Gender in Disaster Management and Response"

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Being a woman with a disability it can be a paradoxical experience for all. In the past, women with disabilities knew their place in society — out of sight and out of mind. As society has progressed and disability advocates have made strides, women with disabilities are no longer automatically locked away in institutions or legally denied the typical joys of life, such as marriage or child bearing.

The passage of laws with Disabilities Act 1995 decisions have advanced the possibilities for us to live in the community and do what our non-disabled counterparts do. Yet, these freedoms bring unique challenges to women with disabilities have not benefited because of their ignorance about it.

Women sexuality as controlled by the men therefore the community living was totally denied to the disabled women. It was assumed that disabled women cannot perform the day to day chores of a normal women which has been proved later on totally baseless.

Women with disabilities from their isolation to claim their position in the societal mainstream. However, the situation is in developing countries is quite different but there is a constant effort on the part of the disabled women with the help of the various civil society organizations to overcome the shortcomings.

In a men’s dominated society like in India women’s sexuality is totally controlled by patriarchy as well as the state and therefore the situation of women in general is not good so it can be easily understood that, the situation of disabled women is very vulnerable. In disaster situation the condition have been worsen. It is seen that, no special preference is given to a disabled women. They have to struggle for getting relief or help for their existence during disaster. No one comes forward to help them except their family or friends which is very few. But side by side it was also seen that, some disabled women after disaster have become head of families a one step further to the empowerment of the women. Some women become self reliant with the help of government as well as NGOs after disaster which is also enhanced their position in the family as well as in the society.

But all these piecemeal achievements are not enough. There still exist a barrier between the normal women and the disabled women which can be broken by joining them.
together. Disabled women should be aware of their abilities, keep confident. They should not be dependent or indifferent. Raise awareness among themselves and take their parts (as much as they can) in advocacy their role in developing their abilities, their needs, rights and duties in the families and society.

Women constitute about ½ of the total population, remain neglected over a pretty long period in our social system. Women’s contribution to the country’s economic development is praise worthy. Most of the National economic activities are carried out by women and she works from dawn to dusk. Still then women remained dependent on men for subsistence and security since time immemorial. They did not have voice in decision making in the family. Till recently they were denied social existence and voting rights all over the world.

India, with a population of 989 million, is the world’s second most populous country. Of that number, 120 million are women who live in poverty. India has 16 percent of the world’s population, but only 2.4 percent of its land, resulting in great pressures on its natural resources. Over 70 percent of India’s population currently derives their livelihood from land resources, which includes 84 percent of the economically active women. India is one of the few countries where males significantly outnumber females, and this imbalance has increased overtime. India’s maternal mortality rates in rural areas are among the world’s highest. From global perspective, Indian accounts for 19 percent of all live births and 27 percent of all maternal deaths.

Disastrous events in India through the ages and its consequences on women have forced to introduce gender perspective in the context of disaster. Constituting 50% of the population, it is necessary to consider women's experiences and role in different sectors but the gender discrimination in all the spheres of life is a hindrance in women’s development. Women are disproportionately affected by natural disasters as a result of prevailing gender difference in the society though the fact is that women play a vital part in disaster mitigation and response efforts. In spite of all the added workload and stress that the women undergo, the public portrayal of women affected by disasters is that of a helpless and weak victim. There is extremely poor understanding and acknowledgement of the difficult roles they play. This results in the women continuing to be neglected in the public space and being banished to the background as usual.

Natural disaster is sudden disruption to normal life involving more people and more area by natural forces. Cyclone is one such natural disaster that continues to inflict grievous miseries in large part of the globe in terms of loss of human and bovine lives and damages to property causing a serious threat to livelihood.

The differential impact of disaster on women is being considered now days due to growing awareness in the international community. Full development can only be achieved when women and the resources that they represent are fully integrated in development process and when women are empowered to improve the economic, social and political conditions of developing countries within a framework of sustainable
development. It is also due to an understanding that men and women reveal vulnerabilities peculiar to their sex when confronted by disaster situation. In the face of this reality, it is essential to keep a clear gender focus so as to be able to support women who are facing a disaster and to reinforce their natural capacity to overcome these situations.

The process of women’s empowerment will be carried forward if the disabled women in disasters are suitably, properly, meaningfully addressed and their participation in decision-making during relief and rehabilitation is fostered. No society can develop unless women play their significant role.

**Gender, Disability and Disasters**

Women and girls with disabilities are estimated to represent up to 20 percent of the world’s female population. They are usually excluded from disaster management and mitigation. We begin with the assumption that among the problems faced by disabled women is that they have not yet been fully integrated into either the disability movement or the women's movement.

Disabled women are commonly devalued for two basic reasons:

The emphasis on physical appearance found in every society, and
The importance placed on strength to carry out household duties as well as work outside the home.

**Why Gender with the Inclusion of Disability**

**Concept of Gender**

Definitions – Gender refers to the expectations that people have from some one because they are male or female. It is the socially constructed relationship between men and women. Thus Gender refers to the socio – cultural definitions of man and woman and the way society assigns social roles. Gender refers to the differences between women and men within the same household and between cultures that are socially and culturally constructed and change over time.

Sex is the physical and biological differences between men and women. It is universal and static. Thus sex is the genetically determined biological characteristic.

**Difference between Sex and Gender**

<table>
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<tr>
<th>Sex</th>
<th>Gender</th>
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Natural Socio cultural ( man made)

<table>
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<tr>
<th>Natural</th>
<th>Socio cultural ( man made)</th>
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<tbody>
<tr>
<td>Biological differences in physical qualities</td>
<td>Masculine and Feminine qualities in roles, behaviour</td>
</tr>
<tr>
<td>Sex is constant everywhere</td>
<td>Gender is variable. It changes from time to time, culture to culture</td>
</tr>
<tr>
<td>Sex cannot be changed ( barring sex change operations )</td>
<td>Gender attributes can be changed.</td>
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**Why Talk and Know About Gender**

Studying gender would enable us to understand the gender inequalities that exist in our society. Women are nearly half of the human population but are placed unequally with men in every respect starting from right to freedom, to education, to health, reproduction, nutrition etc. Ironically the gender roles vary so much between cultures that they cannot be explained by sex differences alone. The two relevant questions that could arise here are – Should there be differences between men and women? If yes should these differences be the basis for inequalities between men and women, especially when these inequalities have led to oppression, subjugation and subordination of women.

**Manifestations of Gendered Discriminations**

Son preference - Birth of a son is celebrated whereas the birth of a daughter is not.

Discrimination against girls in food distribution- Sons are showered with love, respect and given better and more food, while the girls eat the last with lesser share. This limitation on post-neonatality food intake creates malnutrition in the girl child, which in most cases results in disability. Married women are taught to eat the last especially after the husband and all the other male members have eaten.

Better health care for boys and less for girls again increasing disability among girl children.

Lack of educational facilities – The girls have to struggle and fight for availing educational facilities while boys are given the choice of accessing better education.

Mobility – Girls have restricted freedom of mobility and the boys have no bars to movement. While security of the girls is given as the reason for preventing the girls to go out, the restriction is on the girls and not on the culprits (men).

Sexuality – Women are to submit their bodies to their husbands and have no say on reproductive rights and sexuality.
Property – Girls do not demand their share of property on the father’s family. They are to be satisfied with the ‘dowry’ given by the natal family to the in-laws. Very rarely are WWD entrusted with property.

Most girls with disability are not married while men face the problem in a lesser way.

**What the Socialization Process Mean**

As parents, peers, teachers, elders we are not aware of what we are doing to our children. Societal institutions such as schools, communities expect differential behaviour. If one does not conform to prescribed/expected male/female behaviour there is social ridicule. The socialisation process happens at multiple levels and is also influenced by the various actors of the society. Characteristics are nurtured in accordance with the norms of the society and the natural ways of children are quashed.

Most people consider that the gender division of labour natural i.e. because women give birth to children and breast feed them, they are better equipped for caring and nurturing activities. The gender division of labour are “natural” based on women’s biology and thus people find it difficult to think beyond bodies.

In fact within a household too, conscious care is taken that the male members have rest, space and time while it is expected that women can and will manage with no allocation of space and time.

**Sex Stereotypes**

One of the most significant manifestations of stereotypes is in the area of sex bias. The socio cultural importance of sex makes the stereotype a standard basis of categorization. Sex based categorization leads to sex stereotyping. Sex stereotypes are unconscious thoughts and habits that link personal attributes to sex. It tells us what the sexes are supposed to be. They function as standards against which an observer evaluates women and men’s behaviour. Thus sex stereotypes bias the perceptions, interpretations, retention and recalled information about men and women.

**Women with Disabilities and Development**

Women and girls with disabilities are estimated to represent up to 20 percent of the world’s female population, the majority living in less economically developed countries, yet are under-represented and under-served in every aspect of the international development field.

Women with disabilities offer an untapped resource for international development, as partners, staff and beneficiaries. They are under-represented and under-served in every aspect of the international development field and are denied significant participation in
community projects, human rights organizations and international development programs.

**Problems and issues that exclusion creates**

Among the important problems articulated by women with disabilities:

Women and girls with disabilities are denied access to education, vocational training, employment, transportation and housing, making it difficult or impossible to achieve economic self-sufficiency and contribute to their communities.

Women and girls with disabilities receive inadequate -- if any -- rehabilitation services, because the very limited available resources are directed toward adult men with disabilities.

Women with disabilities are less likely than non-disabled women to marry, but more likely to be abandoned with children, facing social stigma, loneliness, and poverty.

Protection against violence, even the inadequate protection afforded to non-disabled women, is not available to women and girls with disabilities.

Women with disabilities tend to be more vulnerable to exploitation of various kinds, such as sexual harassment, domestic violence and exploitation in the workplace. They are twice as prone to divorce, separation, and violence as able-bodied women. Disabled women also tend to be relatively easy targets of sexual exploitation, particularly if they are mentally retarded. Involuntary sterilization, contraceptives, and abortion continue to be forced upon women with disabilities.

In general, disabled women tend to be in a state of physical, social and economic dependency. This can lead to increased vulnerability to exploitation and violence. Because of the relative isolation and anonymity in which women with disabilities live, the potential for physical and emotional abuse is high. It is also estimated that having a disability doubles an individual’s likelihood of being assaulted. Because of their isolation however, women with disabilities are likely to have less resources to turn to for help. Most battered women's shelters and rape crisis centers are not accessible to them.

Women with disabilities are denied access to reproductive health services by cultural attitudes, physical barriers, financial constraints, and unenlightened medical personnel and health care providers.
In most countries, women and girls with disabilities have a higher mortality rate than disabled males.

Women and girls with disabilities are more likely to be malnourished than disabled males.

In accordance with the traditional social and cultural norms in village societies, many women do not go out of their houses to seek help for health care, especially if the care-provider is a male.

Most rehabilitation personnel, including community based rehabilitation workers in developing countries are men. Thus even home based services provided by male CBR workers, are out of reach for women with disabilities.

Strangers, even if they are part of a service provider team, are usually not allowed inside the house in traditional societies. If these strangers are male, it is next to impossible for them to even talk to the women in the house. Even if a traditional community accepts males as service providers in health care and rehabilitation to some extent, it still would be impossible for them to provide services to, or teach the women in the community. Such a situation can only be improved if local women were to be trained as rehabilitation workers. While women rehabilitation workers are becoming common in the sub-continent, cultural barriers continue to persist, preventing women from taking up rehabilitation work in the community setting, because it involves visits to houses of strangers.

Restricted to their homes by inaccessible environments, lack of mobility aids or transportation, family overprotection and shame caused by cultural biases, women with disabilities are often isolated and unaware of either rights or options.

Tools for Empowerment

Inclusion of women and girls with disabilities must be comprehensive and take place at all levels of the development process.

Full inclusion of women with disabilities in the development process must go beyond limited approaches which traditionally offer separate programs for people with disabilities, often charity-based, focused on prevention, medical intervention, physical rehabilitation, and custodial care (and which, in fact, have been traditionally underutilized by women with disabilities.) While women with disabilities may benefit from appropriate targeted interventions, which enable them to maximize their skills and abilities, development assistance programs must support women with disabilities to access the full range of options available to all members of the communities.
Leadership training and community development projects must conduct specific outreach efforts to include women with disabilities.

Women with disabilities must be involved in all policy and decision making processes, and at every level of the projects: as staff, consultants, participants, and evaluators.

Advice and expertise of women with disabilities must be utilized in designing programs and policies, research, conferences, and documentation of major social issues that affect women.

Education, vocational training and rehabilitation programs must include women with disabilities, to prepare women and girls for careers and gainful employment.

Rehabilitation and adaptive technology must be available for women with disabilities, and women with disabilities must be involved in the development and production of adaptive devices.

Health service personnel must be trained to offer informed and sensitive service and education addressing the health needs of girls and women with disabilities.

Governments and non-governmental organizations must be pressured to effectively implement the many important recommendations which have been made over the years by various UN bodies and non-governmental organizations, particularly at the Fourth World Conference on Women in Beijing.

Governments and non-governmental organizations in host countries must be educated to prioritize issues of women with disabilities in development efforts.

“Consultation with local women’s organizations and involving women participants in program planning is perhaps the best way to ensure a gender perspective in program design.”

All development organizations, micro-credit programs and lenders must consult with women leaders who have disabilities for strategies to make all information, programs and services accessible for women with disabilities.” (Mobility International USA: Resolution and Recommendations: Loud Proud and Prosperous: an International Coalition on Micro-credit and Economic Development for Women with Disabilities, 1998) Promoting self-help groups of women with disabilities will play a major role in reducing their isolation, providing mutual support, and improving their participation in community life. It can promote economic self-reliance if they have access to income generation activities though savings and credit and other schemes. Being economically self-reliant will give a woman with disability an added advantage in marriage and allow her to contribute to the household economy. Promotion of self-help groups can educate
women with disabilities about their rights and opportunities, and greatly reduce the chances of exploitation and violence against them.

Collect data on involvement of women and girls with disabilities. Data collection is essential in order to accurately assess the extent of inclusion of women and girls with disabilities in the development assistance process, and design and evaluate effective strategies to remedy inequalities. Strategists for gender integration recognize the importance of data collection to serve as baseline and evaluation of interventions.

Participation in Community Life: Women with disabilities tend to have fewer opportunities to participate in community life than disabled men, mainly due to cultural reasons.

Restricted mobility and absence of access provisions in the surrounding environment can be a hampering factor in the participation of women with disabilities in community life, but this aspect is common to disabled men as well.

The families of disabled women tend to be over-protective about them, and prevent them from going out of the house; for fear that they may be exploited in some way because of their disability. Although well intentioned, these anxieties can be stifling to women with disabilities. There are superstitions in village communities about the presence of disabled women being inauspicious in community gatherings. It is also believed that their presence in a family can block the chances of marriages of their female siblings. As a result, many women with disabilities remain confined to their parental homes, without being able to play the roles traditionally expected of women in society. This can lead to feelings of isolation, loneliness and low self-esteem in women with disabilities. Families in traditional societies are generally supportive in terms of physical assistance to their disabled women, but often fail in providing emotional support, which is a more complex issue.

Many families prefer to ignore the existence of feelings, emotions and the need for emotional support in women, especially if they are also disabled.

Practical Gender Needs (PGN) are related to the condition of women. They are easily identifiable (food, water, medicines, housing) and they are related to the existing gender division of labour. For example women’s issues are water, house, fuel, fodder as they are in charge of child bearing, rearing and house managing and livestock care. Fulfilling the PGNs does not change the existing power relations and no one feels threatened by the activities and programmes aimed at meeting the PGNs.

Strategic Gender Interests (SGI) are related to women’s subordinate position in society and their desire to change the existing hierarchical gender relations and make them more equal. Activities that promote SGI are education, mobilization, organizing women, capacity building, consciousness raising. Such activities are often resisted.
because they challenge the male domination and demand long term changes in gender relations.

**Indian Constitution and Women**

It is grounded on the principles of liberty, fraternity, equality and justice.

Equality, social justice, commitment to freedom lies at the core of India’s nationhood.

The Constitution pledges “to secure to all people … justice, social, economic and political; equality of status, opportunity and before the law; freedom of thought, expression, belief, faith, worship, vocation, association and action, subject to law and public morality”.

Women’s right to equality and non-discrimination are defined as justifiable fundamental rights.

Indian Constitution guarantees to all women of India the following –

Equality before the law ( Article 14 )

No discrimination by the State on the grounds only of religion, race, caste, sex, place of birth or any of these. ( Article 15 (1) )

Special provisions to be made by the State in favour of women and children. ( Article 15 (3) )

Equal opportunity for all citizens in matters relating to employment or appointment to any office under the State. ( Article 16 )

State policy to be directed to securing for men and women equally, the right to an adequate means of livelihood. ( Article 39a )

Equal pay for equal work for both men and women. ( Article 39d )

Provisions to be made by the State for securing just and humane conditions of work and for maternity relief. ( Article 42 )

To promote harmony and to renounce practices derogatory to the dignity of women. ( Article 51A e )
Gender in the Disaster Policies of the State of Orissa

The Orissa Relief Code (effective from March 1980), published by Revenue Department, Board of Revenue (Special Relief) supersedes the Bihar and Orissa famine Code 1930.

Chapter X on Care of orphans and destitutes gives the general rules on the disposal of orphans. It mentions that firstly every effort should be made to locate the surviving parents or relatives of the children – if not then such persons should be identified who are willing to adopt them or support them. Lastly, if no such persons are found then an orphan child be sent to an orphanage. In fact the policy prescribes that if the abandoned children or orphans are found suitable then they should be sent to the relief work for earning their livelihood. The policy on destitute is limited to the men only who should be provided with house building or repairing grant. Employment should also be provided to them.

Mother and Childcare finds mention under the Chapter XI on Heath measures (Medical and Public health). It recommends the following in the event of disaster and relief distribution.

Mother and child care centers to be started in each village or a group of villages affected by scarcity and distress conditions

To provide minimum health and nutritional needs of pre school children, pregnant women and nursing mothers

Provide clean drinking water and hygienic environment.

Identify the pre school children for supplementary nutrition and nutritional therapy

Convey to the community especially the parents, simple educational messages relating to health, nutrition and personal and environment hygiene.

Detect and treat common diseases such as cold, cough, Diarrhea in children

Gender Gaps in Disaster Policies

Gender differentials exist even before disasters. This is reflected in disaster policies which do not have any gender sensitivity and even go to the extreme case of gender blindness in some instances. Women issues are not at all addressed in the policy and if addressed gets relegated to the stereotyped maternal health and children section where
health and nutritional aspects are only touched upon. Even this aspect is looked with a patriarchal approach with a welfaristic notion of the State just being a provider. Concerns of women are totally overlooked in issues such as livelihood, safety, security, rehabilitation etc.

If gender and disaster issues are not taken into account gaps will exist as disasters affect women and men differently. Gendered differences exist due to men and women’s different roles and vulnerabilities. If not taken into account more than fifty percent of the populations needs go unheeded. In the context of women with disabilities as they are usually invisible they are a minority whose needs are overlooked.

**Gender Issues at Times Of Disasters**

The gender discrimination and the unequal treatment of women have a great influence on women’s personal development, self-image and behaviour in emergency situations.

Women-always the Hardest hit , Disabled Women more so

At times of disasters the hardships that women have to bear increase even further. Women and children suffer the most during and after a calamity. The reasons for this are many, some of which are due to the religious and socio-cultural environment. In families where food is scarce, women are usually the last to eat. The main income-generating person, usually the man, gets most of the food. Women who do housework and raise children do not contribute to the family’s income in the patriarchal sense and therefore receive less food. They also do without food in order to provide more for their children. Malnutrition and the lack of food reduce women’s physical and resistance, and therefore they are the most vulnerable when a disaster strikes. Due to their physical condition, they are less able to cope with the dreadful situation and in some cases die of exhaustion.

One of the reasons for the high females death rate during disasters is due to their subordinate position within the family. Not many women are encouraged to make their own decisions or take responsibility for their lives, and depend on their husbands or fathers to make even the simplest of decision for them. This thinking affects their reaction in emergency situations. In a dangerous situation they do not make their own choice on when and whether to leave the home, but instead and wait for a man in the family to decide. This can lead to a delay in evacuation and therefore increase the possibility of being injured or even killed.

One example of such lack of attention is evident in emergency shelters. These have been built to help save people in times of disasters and to provide shelter for those who can not return to their own homes. Although going to a shelter is sometimes the only possible way to survive, some women refuse to do so. Why? Certain cultural rules. Especially for Muslims women keep away them from entering these shelters. In
Islamic culture it is regarded inappropriate for women to show themselves to unknown men. In a crowded shelter it is impossible not to do so. Also the shelters do not provide enough privacy for women and seen as being unpleasant and unsafe.

Another sad fact is that traditional clothing like saris reduce the ability of women to escape in an emergency situation. Wearing a sari makes it difficult to run fast or to climb over objects blocking the escape way. During a cyclone long hair gets entangled in bushes and makes it difficult to run quickly.

Women with disabilities do not only have to cope with the above but also with the problems of mobility, psychological impairment as well as inability to see, hear or speak.

Women’s Activities Affected by Disasters

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<tr>
<th>Activity</th>
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<tbody>
<tr>
<td>Collection of drinking water</td>
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<tr>
<td>Cooking and serving food</td>
</tr>
<tr>
<td>Collection of water for other uses such as bathing, cleaning utensils</td>
</tr>
<tr>
<td>House cleaning</td>
</tr>
<tr>
<td>Collection of earth for house construction</td>
</tr>
<tr>
<td>House repair – rat hole filling</td>
</tr>
<tr>
<td>Collection of fuel wood</td>
</tr>
<tr>
<td>Child care</td>
</tr>
<tr>
<td>Livestock care</td>
</tr>
<tr>
<td>Agriculture/cultivation operations</td>
</tr>
<tr>
<td>Collection of forest products and NTFPs</td>
</tr>
<tr>
<td>Market functions – selling</td>
</tr>
<tr>
<td>Market functions – purchase</td>
</tr>
<tr>
<td>Supplementary wage work</td>
</tr>
<tr>
<td>Reproductive functions and health aspects</td>
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Action Required

Awareness of Women’s Needs

All these different factors regarding the special needs of women have to be considered in good disaster mitigation, management and relief plans. Both short term and long term plans have to be taken into consideration - local needs and identify the different categories of vulnerable persons, like women, children, the disadvantaged and elderly. The gender issues have to be fully considered in planning. Gender awareness has to be created. And both men and women have to be educated and trained in the special needs of the marginalized. The government and the voluntary sector have also to educate themselves and receive training so as to be able to provide the necessary administrative and technological support during disaster preparedness and rehabilitation.
It is extremely important that a gender and culture sensitive environment exists in all relief and rehabilitation activities. During a disaster all affected people need urgent treatment and help, but all well-meaning support does not necessarily help if it is not applied appropriately.

Making initial disaster responses gender sensitive

Relief distribution (adapted from ITDG)
Disaster relief that is gender sensitive requires:

1. **Data**
   Gendered disability disaggregated data as.
   Close interaction with the group during the relief planning process.
   Gender-disability disaggregated assessments for relief distribution.

2. **Female Workers**
   Relief must be distributed by women especially appointed to deal with gender and disabilities issues and be sensitive to the needs.

3. **Recognition of disabled women’s skills and capacities**
   Including them in the planning
   Relief work including planning and distribution

4. **Relief for people who find it difficult to access:** disabled, old women, female-headed households, and widows, single women, etc.
   Relief for women with disabilities must be provided at home by the community. When pre-disaster training takes place it is easy to devise a suitable method.

Provision of drinking water within a reasonable distance

5. **Ensure privacy**
   In shelters
   Provision of bathing facilities and toilets for women in general and specific facilities for women with disabilities.
   Provision of sanitary ware and rags for menstruation etc.

6. **Prevent Violence : Provide Security and safety**
During disasters, especially in temporary shelter and in camps, women and children are targets of sexual harassment, abuse and violence.

provide secure sleeping places, some lighting even if electricity is cut of.
safe location of toilets.

Decide with the community before disasters as to who will be in charge of this work. They must also see that domestic violence does not take place.

See that women are accompanied by another person when trying to access relief or when searching for lost family members
medical assistance should be available to women and children victims of physical or sexual abuse.

Health Concerns
Women’s health needs should be taken care of, as they are not only individual persons requiring health care but also carers of families. In the case of disabled their rights cannot be overlooked, and even among them there may be many carers.

Among the health concerns are reproductive health care. Antenatal and postnatal care should be provided;
Pregnant and lactating women would also need additional nutrition.
Women with disabilities may need catheters, special medication etc.

Trauma Counseling
Trauma manifests sometimes openly and sometimes it is not clearly visible.

Trauma could be physical or mental.
Physical trauma due to injury would mean the onset of disability itself. The community would have to decide future action (See Module VII)

In the context of psychological impacts of disasters women are as at risk as men. Sometimes they are more so as being carers of families.

It is also high I the case of single women, widows, battered women, and women with new and old trauma. These women should be provided trauma counseling

Reconstruction
Women’s local knowledge should be used by bodies responsible for reconstruction.
Women’s local and traditional knowledge would provide sensitive planning and implementation of programmes.

Women’s needs in house building have to be taken care of. In most disasters women are never consulted about the designing of their houses.

Women’s knowledge of conservation and effective use of natural resources would provide the dividing line between a successful and effective disaster management plan.

There are many Self Help Groups, Mahila Mandals and women elected local government representatives to serve as a resource.

Their involvement would mean timings according to their choice as they are already overburdened with work.

These groups could carry out activities and monitor them. Financial assistance should in these cases go o them directly. Most such groups have bank accounts.

The land must have a joint patta i.e. be owned by husband and wife jointly as must houses also. Special care must be taken of women who cannot access land and houses as they are single women, widows and women with disabilities etc. with no property in their names. Legal services must be provided to women when such decisions are taken, as many women lose their property to family members.

Livelihood
- Disasters can provide opportunities for women to be independent. The process of reconstruction can be utilized
- Include women in the workforce.
- To access credit
- To access livelihood opportunities
- Access to economic resources must include skill building including training on business and office practices, market linkages, new vocations
- Support income-generation projects that build non-traditional skills among women, by providing women with access to non-traditional projects such as construction-related employment
- Provide women with professional qualifications for training on all aspects of reconstruction work such as housing construction.
- Provide assistance to family care givers to support them economically and ensure continued care to the injured, children, and disabled.
Monitor the percentage of women and men in construction, trade, other employment; the numbers of disabled women trained; the proportion of economic recovery grants and loans funds received by women including the disabled; monitor and assess long term impacts on women and girls of disrupted markets, forced sale of assets, involuntary migration, increasing proportion of female headed households etc.

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