Gender Mainstreaming

In Emergency Management:

Opportunities for

Building Community Resilience in Canada

CONTENTS

ACKNOWLEDGEMENTS

Dr. Elaine Enarson

Applied Disaster and Emergency Studies, Brandon University

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EXECUTIVE SUMMARY

1.   Background

This report builds on international efforts over the past decade to develop more gender-sensitive approaches to disaster risk management, for example by the International Strategy for Disaster Reduction, and the humanitarian relief efforts of the Canadian International Development Agency.[1] Our observations also reflect recent initiatives by researchers, practitioners and policy makers to promote gender mainstreaming. Paradoxically, while Canada has hosted gender and disaster conferences in Vancouver (1998) and Cape Breton (2006), little demonstrated change has followed along the lines recommended [see Appendix F: Conference Recommendations, 1998, and Appendix I: Selected On-Line Resources On Gender And Disaster). Women's organizations and networks, especially in the health sector, remain "out of the loop" of emergency preparedness.

As an outcome of the Cape Breton conference, a small group involving academia (Manitoba and Ontario), government (Public Health Agency of Canada) and emergency management practice (Vancouver) formed the Gender and Disaster Network of Canada (GDNC). Less than a year old and still developing its membership, leadership structure and web presence, the network is an important context for this report. Also significant is the recent study by the Canadian Red Cross identifying women as one of Canada's ten most at-risk populations in the event of a disaster and the least likely population group to be integrated into current emergency management systems.

2.   Making the Connection: Why Gender? Why Women?

Research, field reports from relief workers, and first-hand narratives from disaster victim/survivors all support the conclusion that gender matters in disasters. Gender-based analysis in emergency management, as yet not well advanced in Canada, fills a knowledge gap and offers new tools and approaches for disaster risk management. However, as the

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[1] Correspondence to Elaine Enarson, Applied Disaster and Emergency Studies, Brandon University (eenarson@earthlink.net) and Margaret Haworth-Brockman, Prairie Women's Health Centre of Excellence, Winnipeg, Manitoba (m.haworth-brockman@uwinnipeg.ca).

gender dimensions of hazards and disasters are not well understood, we begin with three answers to the question "Gender and disaster—what's the connection?"

Gender-based capacities and needs affect resilience

Gender relations contribute to people's resilience to hazards and the effects of disasters, and also affect social vulnerability to disaster. As noted in the Global Platform for Disaster Reduction developed by the UN International Strategy for Disaster Reduction, gender is a cross-cutting principle interacting with all other social markers such as economic status, age, ethnicity, and ability. It follows that, while gender should not be seen as a determinative factor, it is also never irrelevant. Women's life experiences, professional roles, social networks, coping strategies and leadership skills are particularly emphasized in this report. However, gender relations also put women and men differently at risk, for example of the effects of climate change or in the aftermath of a major flood or ice storm, and women's health and safety can be jeopardized in disasters. These general statements are supported by a review of statistical patterns and trends demonstrating with more precision which groups of women are least able to anticipate, prepare for, cope with and recover from the effects of a disaster. These include Aboriginal women and those with disabilities, as well as women in poverty and single mothers.

Gender patterns shape the workplace cultures of emergency management

Emergency management in Canada, as elsewhere, is colored by its historically military origins and such male-dominated occupations as law enforcement, fire fighting, engineering, and senior management. The presence of increasing numbers of women in emergency management roles, both in and out of government, promises to reshape the daily routines and cultures of these workplaces. For example, the assumption that emergency managers place job roles over family roles in a crisis is challenged by the two-career household, especially when both partners serve in response roles. Efforts are needed to expand opportunities for women, create a work force as sensitive to gender as to age and other determinants of vulnerability and capacity, and to build more family-friendly emergency management workplaces. In this section, we include first-person accounts from

women speaking out about their experiences and coping strategies as minorities in emergency management.

Gender matters to women and men who have experienced Canadian disasters

The practical implications of gender relations for emergency management are illustrated by a review of Canadian and international disaster case studies. Among the findings stressed are women's lower tolerance to risk and relative attentiveness to disaster risk communication, the propensity of women to undertake household mitigation and their key role in family emergency preparedness, the social conditions increasing their vulnerability, and the disadvantages of women in the aftermath, among them slower economic recovery, lack of child care, lack of affordable housing, increased reports of stress and domestic violence.

These international findings are generally confirmed by Canadian case studies, which centre on the 1997 Red River flood and involve a small number of researchers. Additionally, sex- and gender-based vulnerabilities are noted to the effects of climate change, including exposure to substances potentially harmful to reproductive health. The primary lessons to be drawn from this limited body of research are reviewed in this section and gaps pointed out. Among these are the notable absence of international or Canadian research on gender as a factor in men's lives in disasters, lack of gender analysis in studies of children's disaster experiences, and the need for more research on young and unmarried women. This section is supported by a compilation of first-person statements [Appendix E: Voices of Women and Men in Canadian Disasters].

3.   Connecting Gender and Disaster Concerns in Practice

In this section, a rationale for gender mainstreaming is developed and mainstreaming principles are introduced with reference to hazards, disasters and emergency management. The "lessons learned" about conditions needed for sustained and effective mainstreaming are reviewed, for example the need for strong and demonstrated leadership, adequate resources, coordination and clear communication. A gap analysis is then conducted with

respect to emergency management and women's organizations, with emphasis on windows of opportunity for positive change.

Missed opportunities in emergency management systems

Science-based lessons learned over two decades are not yet reflected in post-secondary disaster studies. This is also true of training and certificate programs, which continue to focus more on the response mode than on other areas in which gender analysis is particularly useful, including mitigation, preparedness, long-term recovery and community resilience building.

We also identify policy gaps and suggest specific areas for policy directives in lead emergency management organizations across all jurisdictions. These include support for family-friendly workplaces, gender training, recruitment and retention of nontraditional women into positions of responsibility, the collection and the use of sex-specific data for hazard and risk assessments, protection from gender-based violence and other areas of concern.

With respect to practice, it is suggested that all public education materials merit close examination. More gender-specific language is needed and more attention to the covert gender messages conveyed through illustrations and use of examples and text. Lack of gender content or thoughtful integration of "gender lessons learned" is noted in the practical tools reviewed, including website preparedness information and training materials for work with children and seniors, for volunteers in reception centres, and in psychosocial responses.

Partnerships, too, are considered in this section. The need for outreach and collaboration with related networks is emphasized, including networks organized around specific populations, locales, events or issues. As gendered approaches are used in many environmental, social justice, sustainable development and related groups, partnerships here would reinforce the goals of mainstreaming.

Three appended documents support this section. Gender-sensitive humanitarian relief approaches are introduced in Appendix B, prepared by the international Gender and Disaster Network. Appendix C summarizes a host of issues likely to arise for girls and women in the aftermath of disasters in such areas as housing, employment, safety, health and participation. The section is also supported by Appendix D which applies seven "analytic tasks" of gender mainsteaming to emergency management.

Missed opportunities in women's organizations and networks

The connections between high-risk women and grassroots women's organizations are developed with examples of specific agencies, groups, and networks across the country. Special attention is accorded women's health networks due to the determinants of health approach to disaster vulnerability adopted in Canada, and the body of expertise available through these networks to emergency managers. Particular needs and strategies for meeting these are highlighted, including sustained effort and sufficient resources to ensure that emergency preparedness becomes a reality in the organizations sustaining vital safety nets for women and their families.

In this section, we develop a rationale for sustained and multifaceted partnerships with women's organizations and networks in and beyond the health sector. Readers will also gain an appreciation for the degree of overlap between the concerns of emergency managers and those of women's health advocates. The section is supported by Appendix G which offers contact information for dozens of Canadian women's groups with which emergency managers can and should begin to partner for specific purposes.

Good practice

We include a brief section highlighting effective practices for developing and promoting gender sensitive emergency management in the areas of education, training, policy, practice, and partnerships. Models of resource development (e.g., an emergency preparedness manual for domestic violence shelters), networking (e.g., the new Gender and Disaster Network of Canada) and public awareness (e.g. targeting women in national preparedness campaigns) are among those highlighted.

4.   Strategic Recommendations for Gendering Canadian Emergency Management

The proposed framework for action is not a wish list but builds on the real needs and resources identified in this report. Specific action points are consolidated in Appendix H: Action Steps for Gendering Emergency Management. Specific actions are proposed in the areas of education, training, policy, practice and partnerships. Among these are recommendations for:

1) **new initiatives** such as a national consultation of subject experts, the development of a national research agenda, a gender review of existing emergency management policy in different jurisdictions, and the creation of a new Women's Network for Disaster Resilience;

2) **new resources** such as draft gender equity policy statements, gender-focused fact sheets, gendered risk communication messaging and awareness materials, training modules for emergency managers (on gender) and for women's organizations (on preparedness); and

3) **new outreach to potential partners**, supported by these context-specific, Canadian-focused "building block" materials on gender and disaster risk reduction.

In the spirit of gender mainstreaming, we conclude by offering a road map for sustained change over the course of three years, leading to an emergency management system fully capable of reaching and engaging women and men equally. A *Gender Equality and Disaster Resilience* initiative is proposed to provide structure, resources and momentum to the recommended action steps. We suggest a leadership structure based on a working group of experienced emergency managers and a parallel new working group of women's health experts. This integrated approach, led by the Gender and Disaster Network of Canada and the Canadian Women's Health Network, offers support to women and men now striving to identify and reduce unsafe and unsustainable conditions and practices. In the increasingly risky future that lies ahead, a gender-friendly approach can only make the nation safer.

1   INTRODUCTION

Galvanizing Canadians to mitigate hazards and prepare for disaster and disaster recovery is the passion of emergency management authorities, from the part-time municipal coordinator or volunteer fire fighter to the highly trained Emergency Social Service volunteer and technical experts in government ministries. Public Health Canada is among these and well positioned to lead on the issues of health and safety in disaster contexts. Their leadership has been evident in the efforts of the Centre for Emergency Preparedness and Response to build resilience and reduce social vulnerabilities, including those based on gender and other social dynamics.

This report brings gender scholarship, the women's health movement and the concerns of Canadian women's organizations to the increasingly urgent task of reducing the impacts of disasters in a future certain to bring more. It builds on international efforts over the past decade to identify how gender relations put women and men differently at risk, for example of the effects of climate change or in the aftermath of a major flood or ice storm— and, equally, how our lived experiences as women and men can and do help us build safer homes, livelihoods, neighborhoods, businesses and communities. But building and sustaining resilience is not possible in the face of persistent inequalities, including those that impoverish the lives of girls and women across economic, age, cultural, ability and sexuality groups. Women's leadership, energies and long experience as social change advocates in the areas of the environment and health are needed now more than ever.

We begin the dialogue by offering three answers to the question "Gender and disaster—what's the connection?" Gender in the hazard and risk equation is discussed first, followed by a statistical portrait of patterns and trends putting particular groups of women at increased risk. Before moving to a brief review of the Canadian scholarly literature, we consider the implications of emergency management as an emerging profession shaped largely by men's experiences and values.

The next section is devoted to gender mainstreaming in Canadian emergency management, beginning with an analysis of current gaps and opportunities in emergency management systems, on the one hand, and the world of women's organizations, on the other. Our focus is positive, seeking out windows of opportunity for gender-sensitive ways to promote community resilience to disaster. We offer a short section on Good Practice to demonstrate the possibilities.

The gender review leads in the final section to a proposed three-year mainstreaming project leaving the nation substantially better equipped to anticipate, prepare for, cope with and recovery from disasters of all kinds. Readers will find specific action points for change in education, training, policy, practice, and partnership summarized in Appendix H. Other appendices include first-hand narratives from women and men in Canadian disasters, recommendations from an early Canadian gender and disaster conference, a template for gender sensitive relief, analytic tasks for gender mainstreaming, selected readings, and contact information for women's organizations in support of the proposed *Gender and Disaster Resilience Project*. This three-year initiative is described in the final section of the report.

The authors look forward to collaboration and invite dialogue with all readers.

2   MAKING THE CONNECTION: WHY GENDER? WHY WOMEN

Gender is a central organizing principle of all societies and the basis of the everyday routines and social interaction of women and men, boys and girls around the world. This social fact makes gender inescapably part of the social fabric made visible in disasters. Gender differences in personality, intimate relationships, mental and physical health, kinship networks, work and workplaces, social roles, and community life are dramatically in play when families and communities struggle to cope with the unexpected.

Across Canada, women wake each day to care those who depend upon them for their own safety and survival, and work with and without regular salaries as informal health care providers, mental health counselors, and teachers of all kinds. They seek out information about health and environmental issues, have honed survival skills on the street or in their own home, and tend to adopt pro-social responses to stress. Many work in institutions and roles bringing them into the center of emergency work, including disaster emergency medicine, home health workers, child care providers, social service administrators and human service professionals. They know the pressures that divide families and communities today, and the particular pressures on the nonprofit human and social service sector.

In increasing numbers, of course, women also provide for their families through employment as well as by managing homes and households, and knitting together the essential kinship ties that come into play in the aftermath of disasters. They connect families to local schools, employers, and faith-based organizations. They produce and

preserve foods for family consumption and help their families monitor, resist and cope with changing environmental conditions. Women teach their children essential lessons about safety and many pass along the ethic of community service, contributing untold hours annually in voluntary community service. They are the base of the voluntary sector of disaster response and emergency preparedness. Though still a minority, women are increasingly the face of the "first responder," serving in technical, military, and traditionally male roles. Perhaps most importantly, women's long tradition of advocacy for social justice and human rights also makes them local leaders who have connections with all the high-risk community groups emergency managers now strive to reach.

Women bring these life experiences, talents, passions and energies to bear when floods or explosions or health crises transform their worlds. Gender inequalities also expose girls and women of all ages to harm, especially in high-risk population groups such as the poor and persons with disability. Across the border, older, low-income African American women bore the brunt of the Gulf Coast hurricanes, for example, just as women bore the brunt of the Indian Ocean tsunami and the Pakistan earthquake.[2] Many international case studies now document women's disproportionate injury and fatality rates, the persistent violation of women's human rights, and patterns of exclusion in relief agencies despite the evident leadership of grassroots women before, during and after disasters.

For all these reasons, humanitarian relief agencies are now taking gender into consideration as are governmental development and relief agencies. Both gender and culture are "agreed principles" in the world's most basic framework for reducing disaster, the ISDR Hyogo Framework for Action. International women's organizations and researchers have helped organize eight major international conferences on the topic (Costa Rica, Australia, Pakistan, Vancouver, Miami, Ankara, Honolulu, Nova Scotia). Additionally, many community meetings have been called in the wake of particular events and workshops conducted at hazards conferences, among them gender and disaster workshops offered in conjunction with the 2006/2007 Australasian Natural Hazards Management conferences (with a 3rd workshop pending in New Zealand, 2008).

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[2] Among others, see Laska and Morrow (2006); Oxfam International (2005); IFRC (2005), Chapter 6 ["Please don't raise gender now - we're in an emergency!"]; Enarson and Morrow (1998); Enarson and Chakrabarti (forthcoming).

Making the connection in Canada

Neither gender difference nor gender inequality determines people's relative risk in disasters unilaterally, nor is there any one way that gender relations affect women and men of different ages, abilities, cultures, and so forth. Indeed, this is why one of the challenges of emergency management at the local level is to identify and track the particular social dynamics affecting disaster vulnerability and resilience. Toward that end, a recent national study of the Canadian emergency management system in relation to high-risk populations concluded, adopting a social determinants of health approach, that women are one of the nation's ten high-risk populations.[3] Gender is often seen as a cross-cutting factor in all populations at risk, among them seniors, persons with disability, aboriginal residents, medically dependent persons, low-income residents, children and youth, persons with low literacy levels, transient populations, and new immigrants and cultural minorities. As seen in the Red River Valley flood, 1998 ice storm, blackout, the SARS outbreak and other recent emergencies and disasters, these are indeed useful indicators of relative exposure to harm and barriers to recovery. Predictably, it was often poor women and those living with disabilities, elders, aboriginal women, single mothers and women marginalized by language or other factors who had the most to lose.

Yet gender (like sex and sexuality) remains poorly understood as a factor in the practice of emergency management, resulting in disparities and gaps in women's disaster resilience and lack of capacity in the thousands of voluntary organizations serving those at greatest risk. Further, the leadership, coping skills, interpersonal networks, and life experiences of women are under-utilized, for example in risk communication campaigns, neighborhood and workplace preparedness efforts, emergency post-disaster response and recovery efforts at the household and community levels. The roles of women and men in emergency response professions, health sector organizations, and in the family also introduce additional work and family concerns into emergency management which have not yet been addressed.

Paradoxically, while these gender concerns are clearly addressed by Canada through CIDA's humanitarian outreach, gender has not yet been mainstreamed at the national,

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[3] For more information or copies, contact Don Shropshire, National Director of Disaster Management, Canadian Red Cross [don.shropshire@redcross.ca].

provincial, territorial or municipal levels risk from preparedness, mitigation, relief and recovery systems. Further, emergency preparedness has not yet been "on the radar screen" of low-budget community groups that directly serve women and families at high risk. Both gaps were demonstrated by two recent workshops with Winnipeg women's groups and emergency managers and practitioners.

2.1   Understanding Gender and Disaster Risk[4]

In general, Canada's emergency management systems do not tend to "see" gender as a determinant of social vulnerability. Perhaps this stems from an overarching cultural acceptance that gender equality in Canada has been reached and that by labeling gender as a determinant of social vulnerability an uncomfortable reconnection to past gender labels such as "the weaker sex" emerges. Rather than reawaken tired stereotypes, by connecting gender and disaster emergency managers can be provided a more accurate picture of the needs and resources of Canadians most at risk in the event of a disaster.

Current national sex-disaggregated data suggest that males and females do not share the same experience of Canadian life and that gender does play in a role in shaping those experiences. Canadian women are disproportionately represented in areas such as disability, age, and lower income levels, and are much more likely to be victims of domestic violence. The gender gap becomes even more apparent when looking at the socioeconomic status indicators of Aboriginal women, senior women, and women who live with a disability.

Understanding the connection between gender-based vulnerabilities and Canada's hazard and disaster experience is an important step towards increasing the capacity and effectiveness of Canada's emergency management systems.

The gender divide: Why Canadian females are at greater risk to a disaster

Demographically, women slightly outnumber men in Canada, making up 51% of Canada's population. As indicated by Table 1, the gap between the sexes increases in the later stages of life. Statistically, the majority of Canada's low income, senior, persons with disability, and other at-risk populations are also female.

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[4] The primary author of this section is Sara Walsh [sarawalsh115@hotmail.com]

Gender gaps and Canadian socioeconomic indicators

A person's ability to access secure, full-time employment and to generate adequate income to meet their daily needs is a key factor in reducing their level of risk to a disaster. Having adequate income allows a person to afford safe and secure housing, transportation to evacuate, and property insurance to recover and rebuild. Income has also been positively correlated to increased personal health and well-being,[5] so it is significant that women are disproportionately represented in aggregate low income statistics.[6] In 2003, women over the age of 15 in Canada had an average pre-tax income from all sources of $24,400, only 62% of what men earned in the same year. The income gap persists even for women who were employed full time in 2003. These women earned an average of $36,500, just 71% of what men who were working full time made in the same year. This gender income disparity is seen across education levels, age groups, and occupations.

Table 1: 2006 Canadian Census data by age and sex (Statistics Canada 2006 a)

	Females	Males
Total	16,136,925	15,475,970
0 to 14 years	2,722,515,	2,857,320
15 to 64 years	10, 966,260	10,731,550
65 and older	2,448,155	1,887,100
80 years and older	753,970	413,340

Significantly, women still do two-thirds of the unpaid domestic work within their households.[7] In order to meet household obligations, women are more likely to take part-time work and to remain underemployed than men. In 2004, 27% of women in the workforce were working part-time compared with 11% of men in the workforce. Women make up the majority of workers who work temporary, part-time or multiple jobs; this

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[5] Phipps (2003, p. 13)

[6] Unless otherwise stated, the data cited in this section closely follows Statistics Canada 2006. Readers are referred to the highlight section (p 11-16) for a comprehensive national overview of women and age, ethnicity, income, employment, and disability. Also see Day and Brodsky (2007); and the Native Women's Association of Canada (2007).

[7] Day and Brodsky (2007, p. 5)

sector of the job market is far less likely to have benefits and job security than more lucrative full-time employment.

The majority of single-headed households in Canada are headed by women. Heading a household alone places greater demands on a woman's time and financial commitments. In 2003, 38% of female-headed households were below Statistic Canada's low income cutoff; in contrast, only 11% of single male-headed households were considered low income in the same year. It follows that when emergency management agencies call for 72-hour personal household preparedness, many single women who head households lack the time and financial resources to respond. The average incomes of women who are seniors, living with a disability, or who are members of an ethnic minority are further reduced by sex and gender. In 2003, the average annual income for senior women (approximately $20,000) was $10,000 dollars less than the average annual income of senior men in Canada.

As illustrated in Table 1, Canada's population is aging with a pronounced gender gap; currently 57% of Canadians over the age of 65 year are women as are 67% of Canadians over the age of 80 years. Age alone is not an indication of social vulnerability; however, other social determinants such as low income, disability, and social isolation are conditions faced by many of Canada's aging population.

Women who are over the age of 65 face increased levels of disability, live on lower incomes, and have fewer social support networks than men their age. The percentage of women over the age of 65 years who are considered low income by Statistics Canada's after-tax Low-Income Cut-Offs is 8.4%, which is more than double that of senior men (3.2%) who are living on a low income. [8] The overall number of seniors over the age of 65 years is expected to increase from 4.2 million to 9.8 million between 2005 and 2031. This is because women who are seniors now are women who were still likely to interrupt or discontinue their paid work when younger to take up household responsibilities; thus they have fewer pensions or other savings. Senior women are also more likely to be low income if they are unattached. Living independently is not an indication of social vulnerability, but it can be related to other factors of social vulnerability such as lowering a household's income and reducing the social support networks available. In 2001, almost 40% of Canadian senior women lived alone; over one in five unattached senior women were considered low income by Statistics Canada.

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[8] Townsend op cit. (2007, p. 3)

Disability is another key determinant of increased social vulnerability and not just for Canada's senior population. In 2001, 13.3% of Canadian women over the age of 15 reported a disability (almost 2 million women) compared with 11.5% of men in the same age category. [9] Mobility impairments are the most reported disability in Canada, and affect a greater percentage of women than men (12.2% of women over the age of 15 compared to 8.6% of men over 15). Canadian women with disabilities are twice as likely as other women to be living in poverty. In 2000, the average annual income for women with disabilities was $17, 200 compared to the $26,900 average income earnings of men with disability.

The relationship between age and disability drastically increases as women age.[10] In 2001, 12% of women between the ages of 35 and 54 years reported a disability, 42% of women between the ages of 65 to 74 reported a disability, 50% of women aged 75 to 84 years reported a disability, and 72% of women over the age of 80 years reported a disability. The likelihood of disabilities increasing as men age is also a concern as 69% of men over the age of 80 years old reported a disability in 2001. However, among the senior population, women (12%) are more likely to report having a severe disability than men (9%).

Canadians who are visible minorities face statistically greater economic and social barriers than others. In 2001, over 2 million Canadian women (14% of all women) identified as a member of a visible minority. In 2000, female immigrants (23%) were more likely to fall below Statistics Canada Low-Income Cutoff line than male immigrants (20%). Additionally, women who were born outside of Canada face higher levels of unemployment (8.1%) in Canada than women who were born in Canada (7.0%). For the most part, Canada's new female immigrants are well educated and fluent in one of Canada's two official languages. However, 2% of Canadian women cannot speak either official language and make up a disproportionate majority (61%) of Canadians who report that they can not communicate in either French or English. Senior foreign-born Canadian women make up the majority of those who can not speak either official language.

Canada's Aboriginal females face far greater challenges than their non-Aboriginal female counterparts. In 2001, some three percent of the female population (just under half a million) identified themselves as Aboriginal, and many live in poverty. Aboriginal women have the lowest average annual incomes of all groups in Canada; in 2001, the average

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[9] For disability data, see Statistics Canada (2002) and the website of the Council of Canadians with Disabilities.
[10] For age data, also consult Statistics Canada (2006, 2007) and Townsend (2007).

income for Aboriginal women was $16,519 compared to the average income for Aboriginal men which was $21, 958. They also have lower levels of education and greater family responsibilities, and experience more violence in their relationships. In the same year, 65,920 Aboriginal women were single parents.[11] Just over one in four Aboriginal women live on a reserve, putting them outside the reach of provincial emergency management authorities. Further, in 2001, 40% of Aboriginal women over the age of 25 had not completed high school compared with 29% of non-Aboriginal women in the same age category. Aboriginal women are also less likely to complete post-secondary education than non-Aboriginal women in Canada. The majority of Aboriginal women who start a degree and do not complete it, report family obligations (34%) as the main cause of incompletion; in contrast, Aboriginal men do not finish postsecondary education because of financial concerns (24%), followed by family (11%) obligations. Finally, Aboriginal women face much higher rates of violence than non-Aboriginal women.[12] Statistics Canada's 2004 General Social Survey reports that violence against Aboriginal women is three times higher (21%) than the national average reported against non-Aboriginal women (7%).

As already mentioned, compounding these objective indicators of difficult daily lives is the fact that in Canada, as across the globe, girls and women are active caregivers to family and community. A synthesis of Health Canada data on home and community care demonstrates that women are the largest group to receive and to deliver personal care.[13] Women give more of their time and perform more demanding forms of care than men, and travel longer to do so; women are also more likely than men to care for more than one person. Caregiving can be enriching but also often takes a toll on health and economic well-being. For example, the majority of those caring for seniors (61%) are women, of whom 59% (vs. 45% of men) cite increased stress due to multiple demands.

Taken as a whole, these are the building blocks for women's greater jeopardy in hazardous living conditions and in the aftermath of a major emergency or disaster. These

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[11] Native Women's Association of Canada (2007, p.2)

[12] Aboriginal women face much higher incidences of violence because "many risk factors associated with violence for Aboriginal people have been cited, including lower educational achievement, higher unemployment rates, alcohol abuse, experiences of colonization, feelings of devaluation among Aboriginal people, and a history of abuse in residential schools" (Statistics Canada 2006 c: 69).

[13] Morris (2001) is the source for data in this section.

patterns, rather than gendered personality traits per se, go some distance in explaining the consistent finding that women report more stress than men after disasters.[14]

Implications for community resilience

National level aggregate statistics used throughout this discussion provide only a broad and general picture of gender-based vulnerability. Missing from national level statistics are the situational vulnerability determinants that men and women experience throughout their lives. Particularly during their reproductive years, women may become more vulnerable and dependent on medical care before, during, and after a pregnancy, a sex difference and gender role that increases the risk factor for women. Men and women can both experience situational vulnerability in the form of temporary unemployment, illness, divorce, etc. Another missing component from this discussion is that of persons who remain virtually "invisible." Illegal migrant workers, sex trade workers, abused women and children, women and men who are homeless, and illegal drug users face an even greater risk in a disaster because of an inability to access resources and a mistrust of resources provided by government agencies. Unfortunately, very little is known about these populations in our communities, and sex-disaggregated data are either non-existent or not easily accessible.

A gendered analysis of populations living at increased risk in Canadian society today illustrates that girls and women face greater economic marginalization, are more likely to be the single head of household, experience higher levels of violence, and are more likely to experience severe disability than their male counterparts. Connecting gender-based vulnerability to Canada's hazards and disasters a clearer, sharper picture emerges of who is least able to anticipate, prepare for, cope with and recover from a disaster.

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[14] Among many others, see Ollenburger and Tobin (1998).

Men and Masculinity: Reducing Gender-Based Vulnerabilities

▶ Pre-disaster mental health initiatives targeting men in first-responder roles

▶ Support services for men in care giving roles, e.g. single fathers, disabled spouses

▶ Organizational practices sensitive to men's family responsibilities, e.g. in dual-career responder couples

▶ Targeted risk communications highlighting gender norms that expose men to harm, e.g. high risk tolerance, lack of help-seeking, self-destructive coping strategies

▶ Outreach to disaster-affected men through men's social and sport clubs and workplace-based programs

▶ Access to nontraditional occupations and roles in emergency management

▶ Gender-sensitive disaster mental health outreach to men living in stressful conditions or who may have weak social ties, e.g. widowers, homeless men, migrant workers, men in threatened livelihoods and those who are unemployed

▶ Community-based strategies for educating boys, teens and adult men about the human impacts of disaster including increased substance abuse and interpersonal violence

2.2 The Gender Dimensions of Emergency Management

Especially in an era of retrenchment when local communities must find or develop their own resources, it is important to learn how women and men, respectively, take steps toward mitigation, preparedness and recovery. Part of the answer lies in the relationship of residents to local emergency management and voluntary organizations active in disasters. These are the local people who cajole, nudge, enable, encourage or otherwise promote community resilience to disaster. It is, therefore, important to understand the gender dimensions of emergency management.[15]

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[15] It is outside the scope of the paper to offer a full discussion of gender relations in the many different organizational environments that together comprise the "emergency management system," including private and public actors, federal/provincial/territorial, nongovernmental organizations active in disasters, and emergency management organizations and authorities serving indigenous populations.

The gendered emergency management workplace

The Canadian emergency management system has historically had a strong basis in civil defense and the traditionally male-dominated jobs and occupations at its core, from law enforcement, emergency medical care, and engineering to senior management, public administration, information technology and utility managers.[16]

This workplace culture is significant for at least three reasons. First, a military culture is response oriented and fosters a climate in which the 'tyranny of urgency' prevails and issues of gender (or culture or disability) are seen, if at all, as distractions. Secondly, this creates a work force in which gender, ethnicity and income converge, arguably undermining the capacity of emergency management to connect with those at risk who do not share their class, ethnic or gender status. Third, there is a concern that if emergency managers and responders are not confident of the safety of their families in the event of a disaster, the system as a whole may be jeopardized. Previous studies on this question of "role abandonment" were based on a workforce more likely to be married men with female support systems than is the case today.

Working in a Man's World?

I am often asked about working in a "man's world." I believe it is not a man's world but the world you make it out to be. The emergency management "world" encompasses not only the traditional first responder roles – police, fire and emergency medical services – but also the military, volunteer agencies, government departments and industry. Traditionally, female emergency managers have been represented in the health care, social service and educational agencies, while male managers have represented the police, fire and emergency medical services agencies. However, I have noticed that when municipalities move from using traditional first responder agencies such as fire and police for their municipal emergency managers to hiring a civilian emergency manager, a woman is often the successful candidate. As well, there seem to be more men in health care emergency manager positions in the last few years. The message? Emergency managers should not be defined by gender, but by the education and experience they bring to the job.

Source: Joanne Sheardown, Coordinator, Emergency Planning and Preparedness Program, Lakeland College, Vermilion, Alberta. IAEM Bulletin (2005)

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[16] Women's experiences in emergency management organizations have been documented in Australia (Robertson, 1998) and the US (Phillips, 1993; Wilson, 1999; and see Peterson, 1997) and confirm the patterns suggested by an early study conducted by the International Federation of Red Cross/Red Crescent Societies (Gibbs, 1990).

It may be that fundamental shifts in the gender structure of Canadian emergency management will follow only when women acquire formal political power, as suggested by Joe Scanlon in his discussion of gender as "the missing element in disaster response." Noting that response agencies are typically unaware of discrimination against women, though awareness is increasing, he concludes that:

> *[R]eal change may come only as women acquire political power, especially at the local level. Canadian research suggests that the head of local government inevitably plays a key role in disaster response. As women assume increasing power in local government, they will also assume increasing power in disaster response.* (Scanlon, 1998, p.51)

Nonetheless, Canadian women are an increasing presence in emergency management, represented symbolically by the designation of Marg Verbeek (who has held leadership positions in the Canadian Emergency Preparedness Association and the Ontario Association of Emergency Managers) to the post of President of the International Association of Emergency Management in 2006. As she notes, "*Women are eager to enter the field of emergency management, recognizing that they're going to be part of a collaborative consortium. . . Women make great team builders and are good at bringing people together.*"[17]

To Understand Needs, Ask Women

If you want to understand what's going on in homes and neighborhoods, ask women. In every culture, as wives, mothers, daughters, sisters, aunts and nieces, they are the primary caregivers. Women are attuned to the needs of their families, especially those of dependent members, such as children and the elderly. Extending into the community, they are more likely to know what's going on in their neighborhoods, including the presence of an elderly man down the street who needs extra help in an emergency. . . Women are more cautious and tend to approach danger differently. For example, it is well documented that women are more likely to heed official advice and urge their families to evacuate in an emergency. This suggests that community women's groups are effective venues for educational programs on evacuation and other emergency policies and initiatives.

Source: Betty Hearn Morrow (2006)

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[17] IAEM. (2005). Bulletin 22 (9). Special Focus Issue: Women in Emergency Management.

Many factors support the entry of women, including the professionalization of emergency management and with it increased demand for skill sets supporting collaborative and problem-solving approaches. Academic degrees will provide alternate paths of entry for women who will find more demand for the skills and abilities they offer. The strong health focus of Canada's emergency management system also supports the integration of women health advocates, researchers, providers, and managers in a variety of roles.

Finally, in line with the growing commitment of Public Safety Canada, Public Heath, the Canadian Red Cross and other lead agencies to engaging at the local level with high-risk populations, it is likely that emergency management jobs, professions, and workplaces will prove more attractive to indigenous and new Canadians, persons living with different kinds of abilities/disabilities and other high-risk populations, women and men equally.

As of yet, no research is available on gender relations in the Canadian emergency management system. However, Canadians responded when the new advocacy group EMPOWER conducted an internet survey in 2006 geared to gender issues in emergency management. Over two hundred people responded from the US, Canada, Cayman Islands, England, Australia, and New Zealand; 71% were female and 29% male. A highly educated group (nearly three in four have either an undergraduate or graduate degree), they are relative newcomers; three-quarters have held their current emergency management job for five or fewer years.

Work and Family in Emergency Management

Who stays and who reports for duty when one parent is a police officer and the other a nurse? What happens when one is a chemist with knowledge of hazardous chemicals, the other a teacher, and an incident occurs when children are at school? . . . Access to emergency child care may need to become part of emergency plans. . . Planning involves looking ahead. It is time to examine how the changing nature of the family may affect emergency responsibilities. One way to start would be to have traditional emergency agencies survey their staff to see how many are single parents and how many have spouses with emergency responsibilities. The next step would be to examine those with problems or conflicts then work out some solutions: perhaps writing these persons out of emergency plans, perhaps working out child care arrangements, perhaps meeting with other emergency agencies to discuss priorities.

Source: Scanlon. (1998)

Interestingly the largest gender difference reported concerned "influential factors in professional advancement," with women much more likely to cite mentoring. Women and men also reported different professional backgrounds. For men, past positions included senior management, military experience, technical expertise and political office; for women, clerical, sales and social service experience pointed them to emergency management.

Peer support and effective mentoring are likely to help emergency management organizations recruit and retain women as the profession continues to evolve. Men with different skill sets and backgrounds are also coming to the field, which will also reshape the influential culture of emergency management that dominates today.

Family support is essential for all those with family responsibilities, in all sectors of emergency management. Human resource policy and practice in emergency management need close examination to ensure that women and men with competing family demands are supported through family leave, child care, opportunities for part-time employment, and other family-friendly approaches.

How We Adapt: Listening To Women in Emergency Management

- *From PR, I am able to better facilitate communications between various stakeholders.*
- *Sociology helps me to anticipate people's actions and reactions in group settings.*
- *Many of the skills I used working in the non-profit community (planning, organizing, coalition-building) are important in the role of emergency management, planning and operations.*
- *My policy background has made our emergency management program more mature and focused.*
- *I believe that my experience in health planning and promotion assists with the education and training components of emergency management.*
- *My multi-disciplinary background helps me see the whole picture, where many have discipline-specific tunnel vision.*
- *As a banking auditing office manager, I have the ability to track and understand budgets, and grant* accountability.

Source: Statements from respondents to an on-line survey, adapted from the EMPOWER presentation to the World Disaster Management Conference, Toronto, June 2006.

Recruiting and retaining women in high-risk populations poses additional challenges due to the Anglo-Saxon and male dominated workplace culture of most emergency management workplaces. When the skills, abilities, and networks of those who come from community work and/or academia are more valued, more diverse groups of women and men with important life experience and perspectives may well chose emergency management careers. Emergency managers are nothing if not pragmatic. If and when working with women as peers and partners is perceived as helping emergency managers to do their job, doors will open.

2.3   Lessons Learned in Canadian Disasters

Before reviewing the academic literature on gender and disaster in the following section, we invite readers to listen (see Appendix E) to the accounts from Canadian wives, daughters, activists, service providers, emergency managers (and from some of the men in their lives) about their experiences and feelings before, during and after recent national disasters. Direct observation and personal accounts from disaster survivors are the bedrock of our knowledge about the human dimension of disasters. But women's voices and the voices of survivors are among the most "excluded perspectives" identified as a theoretically and politically significant gap by renowned Canadian geographer and student of disaster, Ken Hewitt. Unequal access to media is the norm, though certainly the 'blog sphere' specifically and the Internet generally are more woman-friendly than mainstream media. These first-person accounts will carry more weight when the media, researchers and emergency managers are interested in what women and men have to say—even when they read and speak in different formats or in words other than French or English, or speak behind the scenes only for reasons of personal safety.

Gender and disaster research in Canada

Practical lessons can be gleaned from nearly two decades of international gender and disaster research. While recent work tends to focus more on capacity and, in the wake of the Indian Ocean tsunami, is somewhat more recovery-focused, these are the building blocks of knowledge about the lives of women and men in disasters:[18]

Exposure to risk

- Women are disproportionately exposed to poverty with the attendant risks of dangerous shelter (e.g., trailer homes), neighborhood contaminants (e.g., hazardous facilities on reservations and in other low-income communities), inadequate access to proper nutrition and health care, and other everyday realities which increase the vulnerability of low-income residents;
- Women's roles as primary family caregivers may expose them to harm as they strive to protect others.

Risk perception

- Gender norms foster more "risk taking" among men and "risk avoidance" among women, with implications for preparedness and safety in disasters;
- Women express higher levels of concern than men, on balance, about environmental hazards likely to affect their families.

Preparedness behavior

- Women seek out information about hazards;
- Men prepare the external household areas while women prepare family members;
- Women volunteer more for local preparedness programs, e.g. in schools;
- Women are more likely than men to take part in community organizations addressing local environmental or technological hazards.

Warning communication and response

- Women's networks provide them with more information and warnings;
- Emergency warnings from local disaster managers are more likely to be found credible by women than by men, and women are more likely to act upon them;
- More men than women are found to disregard evacuation orders; women with children evacuate earlier than men.

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[18] Adapted from Fothergill (1996) and research based primarily on the US.

Physical impacts

- In highly developed countries like the US, more men than women die in weather-related incidents, including lightning;
- Physical impacts include damage to shelters and law enforcement systems providing reduced service to abused women though increased calls for assistance are often reported after disasters.

Psychological impacts

- Some studies indicate that women and girls express more mental health problems while men are more likely to suffer the effects of substance abuse;
- Caregiver responsibilities expand and may magnify women's psychological distress;
- Men more than women tend to express anxiety at the perceived loss of the economic provider role.

Emergency response

- Women with children are the least likely to help others outside the family; men are more likely to assist strangers, e.g. through search and rescue efforts;
- Women offer more sustained emotional support to disaster victims, e.g. as volunteers and within the family;
- Women are more likely to warn others and to assist in long-term recovery, e.g. as crisis workers and human service professionals;
- Men more often than women hold leadership roles in established economic and political organizations responding to disaster and are highly visible in male-dominated "first responder" occupations.

Recovery

- Women more often than men tend to receive assistance from family members;
- Women are more likely than men to seek help over the long-term from outside agencies.

Reconstruction

- Women are likely to remain in temporary accommodations longer than men;
- Fewer women-headed businesses receive government post-disaster loans.

New researchers, male and female, who bring different world views and work in different environmental contexts, will ask and answer new questions about gender. Among these we hope will be many more Canadian researchers who at present are conspicuously under-represented.[19]

Canadian research on gender and disaster [20]

Anthropologist Ray Wiest and his colleagues at the University of Manitoba wrote one of the earliest published papers on the topic for the United Nations Development Program (2004), and other Canada-based scholars have since contributed to the analysis of gender and disaster risk reduction.[21] Nonetheless, few gender-focused Canadian disaster case studies have been conducted to guide emergency management.

The international themes reviewed above are, for the most part, echoed in Canadian studies. For example, a common theme is that of women's propensity to heed evacuation and preparedness warnings, as was indicated in a study of older couples from Southern Manitoba who were directly affected by the 1997 Red River flood (Enarson & Scanlon, 1999). They also found a strongly gendered division of labour in all phases of the flood; much of women's work taking place behind the scenes, providing childcare for others and providing meals and other provisions for volunteers, while men's activities were more visibly flood-related, e.g. sand bagging or building up dikes. These patterns were documented in a second gender-focused study of the Red River flood (Grant and Higgitt, 2001), with more attention to the physical and mental health effects on women whose flood work was so demanding, long-lasting and unrecognized. Higher stress levels among women were also reported after the flood by Lindsay and Hall (2007) though Hutton (2004) reported higher stress levels among men and lower than expected stress levels among women with young children. Both different stressors and different coping strategies are in play in most studies of this kind.

A similar pattern emerges in one historical study of the slowly-unfolding disaster of drought and depression on the Canadian prairies. *Times are hard: A Saskatchewan farm*

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[19] See Enarson and Meyreles (2000) for a comparative international analysis and critique of the gender and disaster literature.
[20] The primary author of this section is Anne Danielson (caden@mts.net)
[21] Wiest et al. [1994]; Enarson and Morrow, eds. [1998]; Amaratunga and O'Sullivan [2006].

woman's experience of the Great Depression, [Bye, 2001) details the invisible yet imperative work of one woman and the many additional responsibilities she took on such as selling farm produce, scrimping, saving and sewing to financially support the family as well as caring for the ill and organizing family reunions. In this same vein, using the 1917 Halifax explosion as his case study, Joe Scanlon (1998) explored the myth that women are less competent than men in disasters. In "Myths of Male and Military Superiority" (1999) he further demonstrates that fictional accounts distorted what was observed about women's roles in the initial search and rescue.

The critical roles of women as responders, especially in the event of pandemic, is the subject of a study by Amaratunga and O'Sullivan (forthcoming) based on focus groups of health professionals responding to SARS. Among the gender concerns were lack of medical equipment that fit women and men well; the stigmatization of nurses who were socially "contaminated" by their work in SARS wards; and, increased stress due to family concerns, including conflict with partners over the women's caregiving work in this hazardous environment. All these issues warrant additional research due to the heightened risk of biological hazards.

Enarson's study of domestic violence programs in the US and Canada found low levels of preparedness in women's antiviolence organizations but relatively strong degrees of interest in establishing closer connections with emergency management. Increases in service demands continued as long as one year after the disaster events considered (which included the Red River flood, BC landslides, and the Saguenay flood), even as the capacity of the responding grassroots agencies declined.

Reproductive health effects have also been explored, for instance in a short slide presentation by Kirsty Duncan (nd) about the effects of climate change, and in a study of the effects of the 1998 Quebec ice storm (King & Laplante, 2005). This study found that a major stressful event can, independently of maternal factors, negatively affect prenatal maternal stress and the cognitive development and language development of the unborn child. This may be an indicator of the kinds of reproductive health risks women may face as weather events become more extreme with global warming. A related study from Nunavik by Muckle, Ayotte, Dewailly, Jacobson and Jacobson (2001) explores the amounts of toxins (specifically, polychlorinated biphenyls, methyl mercury and lead) found in pre- and post-natal Inuit infants and their mothers. Results indicated the levels of toxins found and how

this compares with other communities dependent upon marine food sources, and with the general population.

Finally, a master's thesis written by Sandra Owens (2005) documents the diffuse effects on women's livelihoods in Labrador in the face of global warming. Specifically, the study illustrates how noticeable changes in climate such as snow decrease, decline of species availability and more variability in weather patterns is taking a toll on women's cultural, physical and mental health. Just how each of these factors combine to affect health is briefly discussed.

Gaps and suggestions

Unfortunately, the extant literature on these topics in Canadian contexts is not extensive nor does it address all areas of concern. One of the most notable gaps is lack of information regarding families, more specifically, children in disaster. Parents' vulnerabilities are often transferred to children, who are generally highly dependent on adults and who also experience differential vulnerability based on gender differences, so it is imperative that more research be undertaken in this area. There is also a need for research on the unique needs of younger and unmarried women, as well as individuals outside the traditional nuclear family. Gender themes should be explored through all phases of life and among Canada's many diverse populations and cultural groups, as well.

As is the case internationally, much of the gender research is women focused. While this is important, more research such as Shelley Pacholok's (2007) on the different coping skills and competitiveness of male emergency responders' during the Kelowna wildfires is needed. After participating as a volunteer in emergency management during the 1997 Red River flood, Susan Goyer (1988) cites the need for emergency planners and responders to increase local citizen's participation and listen to local people. Women's participation as individuals or through women's groups is also suggested by Lynn Orstad (2001) as a means of supporting each other as well as their neighbourhoods and communities. She also suggests women's groups consider how to increase the safety of abused women during disasters. Finally, examination of the resilience and vulnerability of different groups of women and men is clearly called for, among them case studies of how immigrant, single-parent, disabled, homeless, minority, socially and locationally isolated families have been impacted and how they might be likely to respond or to prepare. Their perspectives offer essential knowledge to

emergency planners, volunteers, non-governmental organizations, provincial and federal government emergency response officials and emergency responders who strive to efficiently and effectively prepared for and respond to disasters.

3   MAKING CONNECTIONS: WINDOWS OF OPPORTUNITY FOR CHANGE

The research studies, demographic patterns, social trends, and first-person accounts from disaster survivors reviewed above help answer the question "Why gender? Why women?"

Women and men are indeed natural partners in disaster risk management, though their experiences needs and interests in disasters may differ—or may not. At the local level, women's leadership is especially needed to tap into high-risk populations such as Aboriginal women, on and off reserve, non-English speaking mothers newly arrived in Canada, homeless women and those who reside in a shelter due to abuse, low-income single mothers or widows struggling to support their families or maintain their independence, senior women with and without partners and in poor or declining health, women of all walks of life living daily with disabilities, and those whose lives are constrained by the fear and reality of sexual violence.

As ever, the main challenge is moving from knowledge to action, especially in emergency management where life, safety and a cherished way of life are at stake. We turn next to specific system gaps and opportunities for change. Readers will find that the issues and action steps in the next two sections foreshadow our conclusion that a sustained, integrated and comprehensive initiative is needed for mainstreaming gender concerns into Canadian emergency management.

Mainstreaming gender in emergency management

> *Including gender-based analysis makes our work more effective: refines our analysis, supports our policy-making, strengthens implementation, improves our communications, and widens our circle of contacts. Consistent with the profile of Canadian society, gender-based analysis ensures positive and equitable outcomes for everyone men and women, girls and boys.* [22]

Fundamental values as well as efficiency claims support the effort to build a more gender-inclusive approach to emergency management. Gender mainstreaming is the imperative of the Canadian government, pointing the way toward realization of women's and men's fundamental human rights in all dimensions and sectors of national government. Canada's gender mainstreaming approach has earned international acclaim, as has the gender-sensitive approach to humanitarian relief promoted by CIDA. [23] A recent review of

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[22] See Mainstreaming of a Gender Perspective, Foreign Affairs and International Trade Canada. Retrieved February 14, 2008 from http://www.dfait-maeci.gc.ca/foreign_policy/human-rights/Iwe5-mainstream-en.asp

[23] See Gender equality and humanitarian assistance: a guide to the issues, produced by Beth Waroniuk for the Canadian International Development Agency. 2004. Available through CIDA: www.cida.gc.ca) or http://www.acdi-cida.gc.ca/INET/IMAGES.NSF/vLUImages/Africa/$file/Guide-Gender.pdf. Also see Status of Women Canada for many additional gender mainstreaming tools

nearly two decades of mainstreaming in such agencies as the Department of Justice and Health Canada highlights the hallmarks of successful mainstreaming, including: [24]

> 1) support from the top
>
> 2) strong policy on gender mainstreaming
>
> 3) a stable budget and human resources
>
> 4) early intervention
>
> 5) an integrated and practical training programme
>
> 6) capacity building

Disaster risk management, like gender mainstreaming, is an integral planning and administrative principle supporting the well-being of all parts of Canadian society. A strong platform for gender mainstreaming in emergency management is provided by the National Disaster Mitigation strategy. The call to build "a culture of mitigation in Canada" fosters wide consultation with stakeholders, as emergency management becomes real only and most critically at the level of households, neighborhoods and communities. Public Safety Canada expects that FPT Emergency Management officials "will work collaboratively to promote and facilitate disaster mitigation initiatives within their own jurisdictions, and in cooperation with other stakeholders, to affirm disaster risk reduction as a way of life for all Canadians." Further, they are urged to "Work with non-governmental organizations and other stakeholders (including the private sector) to create public engagement, education, and outreach activities focused on disaster mitigation."

To date, however, stakeholders have not included women's organizations or networks, even in the area of health and safety or with respect to environmental hazards and resource management. Because gender mainstreaming is as much about dialogue as policy statements, trainings or budget, Appendix D includes a series of self-assessment questions related to the seven core analytic tasks of mainstreaming. These are provided to help spark dialogue about women, men and gender in the "business as usual" of emergency management organizations. Mainstreaming the concerns of emergency management into "business as usual" in women's organizations is equally challenging. Notwithstanding the increased risk in which so many Canadian girls and women live, vulnerability and resilience

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(http://www.swc-cfc.gc.ca/index_e.html). Also see the acclaimed HIV/AIDS mainstreaming model from the Commonwealth Secretariat (Baksh and Amaratunga, 2002).

[24] See Canadian Experience in Gender Mainstreaming 2001, available on-line from the Status of Women Canada: http://www.swc-cfc.gc.ca/pubs/0662667352/200112_0662667352_e.pdf

are not now identified as areas of concern in Health Canada's Bureau of Women's Health, Status of Women Canada, or relevant provincial or territorial ministries. At the grassroots, under-resourced women's groups working closely with those most at risk tend to see emergency preparedness (if at all) as discretionary and externally imposed.

In the next section, we seek potential points of intersection between emergency management and women's service organizations, two communities of practice now blissfully ignorant, each of the other. Opportunities for change in training and education, policy and practice, and partnerships are discussed first, followed by consideration of the resources and needs of women's organizations. Progressive opportunities for engaging a wide range of women's organizations are offered here and in Appendix G. This section is the context for the subsequent discussion of "good" or "better" practice, and to our final the strategic recommendations for change.

3.1 Gaps and Opportunities in Emergency Management

The professionalization of emergency management implies a commitment to science-based practice and academic expertise, including the development of institutional capacity to capture, generate and apply knowledge about disaster risk and the everyday lives of Canadians. Concretely, professionalization has led to expanded educational and training opportunities, new tools and resources, and new relationships between practitioners, academics and policy makers. This is an especially critical moment, then, to consider how well the emergency management system incorporates knowledge about women, men and gender relations in disaster contexts.

3.1.1 Postsecondary education and training

"Naming the subject" is a critical achievement of any new discipline, allowing practitioners to frame their work theoretically and methodologically, designate core readings, develop a community of scholars and in other ways institutionalize a point of view. As Canadian emergency management does not yet recognize gender as a core subject, the "gender silence" in academic emergency management is deafening. However, international support for the emerging paradigm of community-led risk reduction and sustainable development supports gender analysis, for example in relief and development

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work. The *Guidelines for Gender Sensitivity in Humanitarian Relief* developed by CIDA are a case in point.

University research and teaching

Who teaches the gender and disaster literature? The short answer is that it is not. A review of postsecondary coursework demonstrated the striking absence of social science alternatives to the hazards paradigm still dominant in Canada. [25] In the two years since the baseline survey, Royal Roads and York Universities have begun to offer post-graduate degrees which may indeed bring the social dimensions of disaster, including gender analysis, to more students. Some faculty, for example at Royal Roads University, do incorporate gender analysis, and an elective course on Gender and Disaster was recently developed for Brandon University's Applied Disaster and Emergency Studies Department. Geography courses may tangentially address gender, ethnicity, age, ability and other social factors, and certainly particular faculty are likely to, but as yet there is no sustained analysis of gender relations in disasters taught in Canada. As the identity of Canadian disaster studies is still emerging, ample opportunity exists to ensure that faculty and students engage with (and contribute to) the new international literature on gender and disaster. This is contingent upon the new scholarship being taught, whether in Gender and Disaster courses or as supplementary material in more traditional emergency management courses. Teaching modules for distance education are especially needed to reach out to the next generation through related curricula such as women's studies, aboriginal studies, health studies, environmental studies, gerontology and community studies. Canadian emergency management students not taught the new gender material are not well-equipped to serve the women and men they will meet in disaster contexts.

Who will teach in future? To help end the marginalization of gender studies, every effort should be made to recruit and retain faculty with demonstrated knowledge of this multidisciplinary field. Graduate education in emergency management is an essential stepping stone, and slowly developing in Canadian institutions. With qualified teaching

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[25] Falkiner (2005) conducted the survey based solely on a review of college catalogues. Just 7 of l00 college classes, for instance, were taught in sociology departments.

staff alert to the theoretical and practical issues gender raises throughout the disaster cycle, the next generation of disaster scholars and practitioners will indeed be gender aware.

Whose questions are answered? A gender perspective is certainly not a requirement of excellence; however, without baseline demographic information on samples and populations, for example, readers are offered a covertly gendered analysis without the benefit of discussion. This is especially the case in emergency management research when samples are quite often disproportionately female or male. Sex-and age-specific data must be the norm and the academic reward system musts reflect this. Journal reviewers and grant review panels, for example, should be encouraged to include gender-based analysis as a factor in their evaluation, and young researchers using gender based analysis should be supported. Support for basic and applied research is needed in all subfields of emergency management; increased support for gender-sensitive research would reinforce Canada's leadership in this area internationally.

Gender and disaster research, teaching and writing is also a pathway to a more holistic disaster management. Aboriginal colleges and are natural partners in an integrated approach to climate change that addresses gender and culture. Additionally, community-oriented postgraduate students now working in environ-mental studies, aboriginal studies, natural resource management, gerontology, disability studies and other fields could be introduced to disaster studies and potentially to careers in emergency management were appropriate courses made available. The dominance of women in the health care system as providers and patients, their presence in the health sector of emergency management, and the women's health movement all suggest the particular need for gendered approaches to health and disaster. University foundations can be enlisted in the search for external support for curriculum development in all these areas, e.g. Gender and Climate Change in Northern Communities, or Women's Health in Emergencies.

How is gender and disaster knowledge shared? The barriers to moving from knowledge to action are formidable but building a community of practice is an essential first step. The annual CRHNet symposium is a potential vehicle for continued dialogue about what a gender-fair approach to disaster might look like. Women in emergency management fields were among its founders and continue to be instrumental so a CRHNet caucus on Gender Mainstreaming could succeed. Annual conferences such as the World Conference on Disaster Management and provincial emergency management conferences are other venues for

introducing the voices of women and men knowledgeable about gender vulnerability and capacity in disasters.

Postsecondary training and certification programs

Collaboration between researchers and practitioners is essential in all aspects of the field, including gender mainstreaming. A more gender-sensitive approach to practice will educate future practitioners about how to use gender analysis in risk assessments, communications strategies targeting women and men respectively, the gender dimensions of post-disaster stress, work and family issues that may arise for responders, and many other very practical topics. The Centre for Emergency Preparedness College could promote this through its website, publications, and organization of the annual World Conference on Disaster Management.

As is to be expected, training and certification programs focus on technical expertise and practical applications. Developing targeted, user-friendly training modules for use in short courses would help move gender scholarship from the library to the field. The Emergency Management Division of the Justice Institute of British Columbia, currently offering a 15-credit Emergency Management Certificate, is a natural leader for this kind of change. Similarly, the Canadian Red Cross affords residents many opportunities for training. Integrating examples from the field about how girls and women are affected and how they prepare and respond would reinforce the strong gender-sensitive approach recommended by IFRC documents such as *Working with Women in Emergency Relief and Rehabilitation Programmes*. Simply utilizing existing gender-sensitive tools in training is one important step forward, as is gender-sensitive language in the classroom (e.g. "mother and father" instead of "parents").

3.1.2   Emergency management: policy and practice

At the heart of the profession of emergency management is foresight and planning—and, in the heart of emergency managers, is the foreboding that neither are a priority where they live and work. It is their business to know that local governments, businesses, community organizations, and especially individual households are woefully unprepared for the unexpected. Reaching out to women and women's organizations can change this picture.

Yet, the Canadian Red Cross study of high-risk populations found that women were the group least integrated into emergency management systems currently. The following section develops the point and suggests avenues for change.

An enabling policy climate

Policy reflects values, sets a tone, raises expectations, and can redirect resources. In this way, basic gender equity policy statements integrated into the National Framework for Disaster Reduction, provincial EM mandate or vision statements, and the guiding principles of voluntary organizations can help shape the future. At present, policy statements in emergency management agencies at all government levels (and generally in voluntary agencies) lack specific reference to equitable access to all resources without respect to sex, gender, sexual practice, marital status or family structure.

Gender equity and disaster policy development should build on existing frameworks. Among these are Health Canada's Gender-Based Analysis Policy which "recognizes that policies may have a differential impact on women and men and the need to build a gender perspective into health policy at all levels. It acknowledges that certain health problems have distinct implications for men or women and that a gender perspective is essential in understanding the causes of ill health and in ensuring effective interventions to improve health." [26] In the health field, policy guidance on gender equity in disaster could be developed by Emergency Measures Organizations, health emergency management directors and Emergency Social Service directors, among others. We note below that the Canadian Women's Health Policy already encourages attention to specific risks faced by women.

Among other directives appropriate to particular institutions or contexts, more specific policy might be written to promote gender equity in emergency management:

1) promote the recruitment of women/men in nontraditional emergency management roles;

2) require the collection of sex-specific data for use in risk assessments and post-disaster impact assessments in support of gender-based analysis, as strongly encouraged by the Government of Canada through the Status of Women;

3) implement gender-sensitive indicators of preparedness, response, and recovery;

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[26] See Canadian Experience in Gender Mainstreaming 2001. Available on-line through Health Canada: http://www.swc-cfc.gc.ca/pubs/0662667352/200112_0662667352_3_e.html

4) require gender review of existing tools, resources, practices and policies;

5) prohibit sex-based mandatory evacuation orders;

6) give priority to single parents and those with large family responsibilities in access to post-disaster temporary housing;

7) direct funds toward child care /dependent care arrangements supporting women and men whose family responsibilities might otherwise constrain them in a disaster;

8) encourage the development of economic recovery packages that recognize women's predominance in the unpaid or informal work force and the significance of home-based work to women;

9) mandate provisions for preventing and responding to gender-based violence; and

10) support participatory planning principles through which women and other high-risk populations would share decision-making as feasible at the local level.

Equality rights guaranteed under the Canadian Charter of Rights and Freedoms, and a long history of anti-discriminatory case law and public policy, support these directives. Additionally, useful international policy instruments are available, among them the gender policy developed in 1999 by the UN collaborative IASC [InterAgency Standing Committee) to which the International Committee of the Red Cross and a host of other non-governmental and international organizations are signatories. [27] Acknowledging that "complex emergencies and natural disasters have a differentiated impact on men and women which often affect the realization of rights," it goes on to urge, among other action steps, the "integration of a gender perspective and participation of women's organizations in capacity building in humanitarian response, as well as in the rehabilitation and recovery phase." As implementation and leadership are the keys to successful change, not policy itself, the policy statement urges member organizations to "formulate specific strategies for ensuring that gender issues are brought into the mainstream of activities." Significantly, priority is given to the "participation of women in the planning, designing and monitoring of all aspects of emergency programs."

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[27] The short policy document can be viewed at:
http://www.unicef.org/emerg/files/IASConGender.pdf. Also see the more extensive IASC Gender Handbook in Humanitarian Emergencies which contains detailed planning, implementation and evaluation guidelines for gender equitable response and recovery organized by sectors, cited earlier. Available on-line through IASC:
http://ochaonline.un.org/AboutOCHA/GenderEquality/KeyDocuments/IASCGenderHandbook/tabid/1384/Default.aspx

Other action steps in the IASC gender policy refer to development of "gender-sensitive operational studies, best practices, guidelines and checklists for programming, as well as the establishment of instruments and mechanisms for monitoring and evaluation, such as gender-impact methodologies, in order to incorporate gender analysis techniques in institutional tools and procedures;" capacity building for gender mainstreaming; and reporting and accountability mechanisms. Among the latter are "incentives, performance evaluations, MOUs, budget allocation analysis and actions for redressing staff imbalance." These strategies, too, can prompt change in the workplace culture of emergency management in Canada.

Gender-sensitive public outreach and education

Though residents may learn through billboards, handouts, posters and other media about emergency preparedness, the public face of emergency management at this time is the website. Covert and overt web-based messaging about women and men in disaster should, therefore, be carefully considered.

It is outside the scope of this paper to offer a full content analysis of gender messages conveyed through public awareness materials, on and off-line, but a cursory examination reveals room for improvement. *Families and households are diverse*, yet the "family" is addressed generically with little or no reflection of cultural difference or economic constraints. The family is also typically addressed as a single unit with little or no recognition of how conflict or competing interests on the basis of gender and/or age may prevent or hinder preparedness or effective response and recovery. The "family" is also generally presented as middle-aged and middle-class with the capacity and resources to purchase and store emergency supplies, arrange for private child care or transportation, cell phones, computers, and perhaps a cottage for the family in case of evacuation. Website content and illustrations rarely reflect the living conditions of girls and women most at risk and tend to reinforce gender stereotypes.

Language is important, and can be used to exclude and/or to target women. <u>Two</u> people might begin to think about the need for a workplace emergency plan if addressed as "mothers and fathers" rather than "parents," and neighborhood preparedness teams might generate more interest through reference to "the skills women and men can share with neighbors." Consistent use of the modifier "women and men" invites attention to how

people's experiences might impact preparedness, for example "women and men from non-English speaking backgrounds," "women and men who are homeless," or "women and men who are single parents." Sex-specific terms such as "widow" and "widower," "(grand) mother or (grand) father," should also be used, while avoiding stereotypic language such as "nurses and doctors" that imply two gender categories.[28]

Supporting Mothers through Disaster

For a start, we can involve mothers in planning for mothers and children. We can ask what would be most helpful, and the answers are not likely to be services existing today in Canada:

- paid short-term leave from work to make arrangements for recovery, encouraging employers to provide voluntary vacation donations for vulnerable employees
- access to cleaning services; photography services to replace or restore family photos
- community kitchens
- free communication to access personal supports
- safe and accessible transportation services to provide children and youth with opportunities to get to normal activities and assist women to get to the necessary services while having children in tow
- safe, accessible day care at no or at least affordable rates for women who didn't have day-to-day child care, whose day care is no longer operating or who can't afford it due to other financial demands
- no interest/low interest loans to restart home businesses
- non-directed funding e.g., provide $200 to send the kids to stay with Aunt Susie
- grants to assist in clean-up costs up-front
- monitored youth activities to engage youth in appropriate and supportive activities and to empower youth to assist in community recovery
- safety to protect from violence and provide feeling of security
- parental education regarding the need to provide children with psychosocial supports, and support for children-based services such as arranging birthday celebrations, community social activities, art, play and theatre activities, and weekend "Mom and Tots" camps.

We can empower women to become engaged in their own recovery while providing them with treats, too. Given the additional stresses with which many must cope, it is not extravagant to consider providing massages, respite childcare as "time outs" for mothers, luxury treats, cleaning services; and counseling. Finally, and importantly, we must provide opportunities for women and youth to contribute to community recovery planning.

Source: Adapted from Laurie Pearce, Women and children in disasters: Issues for discussion, presentation to the Cape Breton gender and disaster conference.
Available on-line:
http://www.capebretonu.ca/ICEMS/Gender%20and%20Disaster%202006.pdf

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[28] The phrase "gender and social vulnerability" is gaining currency but should be avoided as it privileges "gender" from among other factors at the heart of vulnerability, and implies that gender status is not related to social vulnerability.

Website messages can be proactive in highlighting gender differences. For example, it is important to encourage compliance with evacuation orders among men, ideally with humor and testimonials from men. An emergency manager may want to use gendered language and images to raise awareness among residents of a seniors' apartment, or low-income renters, both likely to be dominated by women.

Gender-targeted outreach is useful, including to such sex-specific networks as Boy Guides or women's auxiliaries of male-dominated service clubs are appropriate in just the same way that risk communicators may reach out to different denominations or cultural groups. Given women's roles in negotiating sexual relationships and responsibility for birth control, it is appropriate that communication about family emergency planning include specific reference not only to personal hygiene supplies, vitamins, and other supplies related to pregnancy or lactation, but also to contraceptives. Reproductive health and family planning are concerns of women and men alike in the aftermath of disasters.

Women Work Behind the Scenes

In addition to outreach to women in disaster-related jobs and professions, efforts are needed to communicate with and involve women who work behind the scenes.

- As mothers and grandmothers
- Caring for sons and men in high-risk occupations or living conditions
- Providing home-based health care, or paid personal attendant care
- Responding to disaster mental health issues as crisis workers
- Providing paid and unpaid child care
- Working with children in the classroom before and after disasters
- Formal and informal counselors and faith-based leaders
- Organizing community or neighborhood events
- Employed in agencies serving women and men at high risk in disasters

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More inclusive emergency preparedness resources

Gender-sensitive action guides are also needed, though few are currently sensitive even to income. Pets clearly influence the decisions of owners in disasters and warrant attention; however, the "special needs" of pets often command more attention on emergency management websites than girls and women, even when other groups are targeted. The City of Ottawa, to take just one example, gives special consideration to emergency preparedness for rural residents, occupants of high rise facilities, "special" populations (scant) and pets

(extensive), but offers no guidance about what women and men, respectively, might reasonably expect in and after a disaster.

Family guides to preparedness are often implicitly gendered. "Emergency Planning for Your Family: The 5-step Guide" produced by Public Safety Canada, for example, features soft colors and a woman and child on the cover, with considerable discussion of the need to make child care arrangements. It would be more effective if it directly confronted gender myths (e.g., women are passive and emotional in disasters, men are active and stoic) or offered information of special value to pregnant women and those in child-bearing years about the potential hazards of mould, cleaning supplies and contaminated water. Guides like this can also target and inform widowers who may be especially isolated, men and boys who may *not* be unfamiliar with power tools, and men of all ages who are likely to resist seeking help.

Gender-sensitive awareness materials are needed that target men and boys, girls and women, father and mothers. The need for specialized information is recognized in other domains, for for example Nova Scotia's slide presentation on Pandemic Influenza: Basic Information for Employers. Business continuity guides are generally geared to larger and for-profit organizations rather than the nonprofit sphere in which most women's organizations and small businesses women operate. While many principles transfer well, this cannot be assumed, for example in the case of women's clinics with privacy concerns. Emergency planning guides should also be written in a way that is encouraging to women who may lack relevant experience (e.g. turning off gas meters or using a wrench) and to men whose risk tolerance may cause unnecessary damage (e.g. not moving heavy furniture out of harm's way) or injury in the clean-up period (e.g. careless use of power tools).

Website gender myths tend to emphasize vulnerability more than resilience, for example in educating the public to expect post-disaster stress among children and seniors especially. However, one of the most well-established patterns in disaster stress research is around gender. Women's greater propensity to report and/or experience stress suggests the need for gender-specific mental health counseling, more women trained in post-disaster counseling, and/or more male counselors sensitive to the nuances of gender power in relationships. Training materials utilized by agencies such as the Canadian Disaster Child Care Association [CDCC] are not informed by research on gender identity in young children though cultural and other differences among children are recognized, as if children have no gender. Similarly, the Mental Health Network of Canada offers links to information on

children's needs but no resources on normative barriers women/men may experience reporting stress or seeking help, the causes of women's disaster stress, possible links between stress, domestic violence, and/or interpersonal violence, or the self-destructive "coping strategies" that are culturally available to men. The possibility of increased abuse and/or sexual assault in the wake of disaster should certainly be addressed in an appropriate way in preparedness guides and Reception Centre Service Manuals. Domestic violence has, in many disasters, been found to increase as much as a year later, especially when housing loss forces women back into abusive relationships.[29]

Exercises and trainings that promote gender equity

Gender-sensitive scenarios and exercises do more than include both women and men. Training based on realistic probabilities can effectively prepare staff and volunteers for their roles, but high-risk populations are rarely included in emergency trainings or consulted in their design. This gap can be addressed through networking with advocacy groups, and incorporating the words and experiences of women and men who have lived through disasters. Appendix E, a selection of disaster stories from Canadians, was compiled for this purpose.

Volunteers active in emergency social services are an especially important group to reach. *Emergency social services trainings* vary considerably in scope and depth, and not all jurisdictions provide the same level of support. As this is historically a field most attractive to women, it is important that illustrations, examples, training materials, training teams and other ESS efforts reach out to men as well as women. *Mixed-sex outreach teams* provided with gender-sensitive training materials best serve a disaster-impacted community. Counseling teams cannot effectively reach both women and men without a gender perspective on the psychosocial impacts on, and resources of, women and men. In some communities, mental health outreach will simply not succeed without male outreach workers who can engage in dialogue with men through men's spaces and activities and, similarly, with women outreach workers. Developing training projects for gender mainstreaming Canadian emergency mainstreaming would meet the JEPP mandate to

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[29] See the fact sheet on domestic violence in disasters available through the Gender and Disaster Sourcebook:
http://www.gdnonline.org/resources/VAW%20in%20Disasters%20Fact%20Sheet%202006.doc

"ensure a reasonably uniform emergency response to all types of emergencies from coast to coast" and should be pursued.

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Domestic violence rises in blackout

One of the darkest aspects of the week-long blackout around Montreal has been a marked increase in cases of domestic violence. To make matters worse, shelters have been closed for lack of power and hot lines for victims have been disrupted. Montreal Urban Community Police Chief Jacques Duchesneau said cases of domestic violence have "soared" since the ice storm began on January 4. Though he could not provide precise figures, the chief said one in four calls in the past week has been from battered women.

Source: Picard, A. (1998) Domestic violence rises in blackout. *Globe and Mail*, January 14, 1998.

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Neighborhood team building with women

Modeled on the Community Emergency Response Teams (CERTS) popular in some parts of the US, the BC CERTeams Society offers "basic training" on a not-for-profit basis to all residents, with emphasis on traditional emergency response roles. An alternative approach likely to attract more women is promoted through the BC PEP Disaster Resilient Communities Program, which offers an extensive Community Emergency Program Review toolkit. The checklist provided could be revised to encourage the involvement of women's organizations. Workshops on Neighbourhood Team Building have also been provided by the City of Vancouver's neighbourhood emergency preparedness program.

However, "Tools for Change: Emergency Management for Women" is an under-utilized resource. [30] This short overview introduces users to "realities for women after a disaster," including an increased risk of abuse or assault. It positions women as leaders in family and neighborhood preparedness, and recommends specific steps for forming and maintaining "women's neighborhood teams" with this framework:

> *Close cooperation is needed between technical specialists, educators, women's groups, non-profit organizations and local government if we are to make a difference to the people at the disaster site. Women are strong communicators. They are motivated to protect their*

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[30] Available on-line through the UN Division for the Advancement of Women: http://www.un.org/womenwatch/daw/csw/env_manage/documents/EP2-2001Oct22.pdf. See the CBU Proceedings, Gender and Disaster Conference for more discussion.

families and frequently spark the change needed in their communities with their commitment to make their communities a better place to live.[31]

3.1.3   Partnerships

Building a constituency for social change implies bridge work, common ground, shared networks and sustained dialogue across borders. Gendering emergency management is an initiative with much to learn from partnering with Community Resilience Building projects, climate change projects, local women and environmental action groups, urban safety initiatives, and especially with gender-sensitive sustainable development and environmental action networks. International relief agencies often have a national presence (e.g. Plan Canada), and networks coordinating humanitarian relief and development efforts exist in some provinces (e.g. Manitoba Council for International Cooperation, which invited a gender and disaster presentation during International Development Week 2007).

Advocacy and service groups working with seniors, sexual minorities, or safety for children are examples of population-based networks that also offer very positive connections, as do faith-based networks such as interfaith immigration councils. The Canadian Child Care Federation, Canadian Association of Family Enterprise, and the Canadian Federation of Business and Professional Women's Clubs are other promising avenues for collaboration. Place-based initiatives for community resilience (e.g. Vancouver, Winnipeg and elsewhere) and those engaging community volunteers (e.g. Voluntary and Nonprofit Sector Organizations of Manitoba) can be important local nodes for mainstreaming. Specific project collaboration with professional communities is also useful, for example with trade unions or teachers.

On college campuses, fruitful connections can be built between emergency management agencies and women's and First Nations resource centres. Specific gender and disaster resilience projects could readily be undertaken with the International Institute for Sustainable Development and campus-based centres such as University of Manitoba's Natural Resources Institute, Brandon University's Rural Development Institute, UBC's Centre for Health and Environment Research, UNB's Environment and Sustainable Development Research Centre, or McGill's Global Environmental and Climate Change Centre, among a host of others.

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[31] See Orstad (2001)

Women's and community organizations working most closely with at risk populations are typically nongovernmental (though they may be supported in part by government funds) and operated by local directors, staff, board members and volunteers with deep ties to the community. They may in turn be connected to social service networks such as United Way and participate in collaborative fundraising and awareness projects which offer conduits for sharing emergency management information. Many have practical resources such as translators, extra space, staff trained in family crisis, stored water and food and other resources. Because they are grant driven, they are likely to be a good source of information about trends and patterns on social vulnerability, for example the proportion of women in new workers programs or among the unemployed or new homeless. Most importantly, the staff and volunteers of these agencies know both the difficult living conditions of women and their families and the coping strategies they use to stay afloat. They observe women's daily struggle to survive and to protect their families. In some cases, these groups have connections that are multigenerational and deeply rooted, especially in remote communities. Through their clients, patients, students, or co-workers, and through their staff, volunteers, board members and other supporters, women's community organizations come to know which women and families will be most hard hit and to whom they will turn for help.

For all these reasons, we especially emphasize networking with women's organizations in disasters in the section below.

3.2   Gaps and Opportunities in Women's Organizations [32]

Across the country there are numerous agencies and organizations that women turn to for assistance and which work with women to improve their lives. Some agencies are truly grass-roots, representing and responsive to a small constituency, often quite specific geographically, or specific to some aspect of women's lives. For instance, there are rural family resource centres where women seek support and assistance in remote communities or villages; other agencies provide support to aging women, or women escaping violence, and so on. These smaller agencies are typically linked into larger networks and collaborate and

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[32] Margaret Haworth-Brockman is the author of this section [m.haworth-brockman@uwinnipeg.ca]

correspond with like-minded sister agencies for support and to share resources and information.

The smaller agencies will especially benefit from the tools and resources available for gender and disaster information because they provide direct service to women and their families, but they very often lack the resources, capacity and staff to absorb new material and implement changes. Dependant on program-only funds and the attendant reporting requirements, staff have little time to take on new work although they may well see the value in it and would like to do so.

As more attention has been accorded in the health sector to gender in disasters, both as a cross-cutting concern and as a root cause of vulnerability, the health sector is a natural partner for gender mainstreaming. Women's organizations in general assist and deal with a myriad of women's issues, most of which affect or are affected by health. That is to say, women's organizations are tied into women's health concerns.

Health-related clinics, research centres and networks in Canada are typically of a larger scale (a larger constituency and covering a greater geographical area or population) but are connected to the smallest agencies and provide the means for further connections and linkages. The larger women's health agencies may have more staff to help with initial dissemination, web sites that are maintained more regularly (because of having more staff), and participate in list servs as well as local, regional and provincial meetings. Thus, working through the health-related women's organizations is a feasible way to enrich gender in disaster networks and disseminate information and tools.

Besides making connections to women directly and to other women's organizations, women's health agencies in Canada are knowledgeable, as a group, of gender-based analysis and gender mainstreaming methods and goals. They have routinely argued for gender-based analysis and gender mainstreaming and are frequently called upon to provide training and resources on gender-based analysis. The federal *Women's Health Strategy* and *Gender-Based Policy* provide the policy background and opportunity for collaboration with women's health organizations, and there are provincial women's health strategies that likewise give entrée to the links between emergency management and women's health. (In addition, a number of provinces and local health authorities within provinces have a person designated as the gender focal point or women's health expert.)

This section discusses how to proceed to begin gender mainstreaming disaster preparedness, starting with the women's health organizations across Canada because of their

ties to other women's organizations as well as to gender-neutral agencies. Links and opportunities for engaging other important women's organizations are also described. Appendix G gives a comprehensive list of agencies to be approached for integrating gender and disaster work.

3.2.1 Opportunities with women's health organizations

There are clinics and hospitals across Canada that are tailored to women-specific care and their current capacity to deliver gender-sensitive disaster assistance or to have already integrated gender in disaster preparedness is mixed at best. There are leaders in the field, however, where the work can start. Women's Health Clinic in Winnipeg, BC Women's Hospital and Women's Hospital in Toronto are three such examples. These institutions have well-developed public education programs, where they routinely disseminate new information via brochures and pamphlets (distributed widely to other clinics and hospitals), regular topic-specific meetings, counselors and group support meetings, public service announcements, web-sites and various public events. Public education materials developed to help women prepare for emergencies can quite easily be shared through these women's health centres, with attention paid to tailor the materials for local women's circumstances, including literacy, culture and so on. Public events give an opportunity to allow women to come together, hear new information, exchange ideas and recommendations and ask questions, allowing for greater depth and discourse than printed material. Some women are very comfortable finding and using web-based materials and postings and blog sites can be developed for them; young women and some rural women find this their easiest way to communicate.

Women's Health Clinic (Winnipeg) is one such agency that both has the capacity and resources for broad communication, but also is knowledgeable about gender and gender-based analysis. The Women's Health Clinic is also a national leader in advocating for women and gender sensitivity at all levels. There are other community health clinics that also provide leadership in providing culturally-appropriate and gender-sensitive care even if they do not routinely use these terms. They are also listed in Appendix G. Hampered by pressing concerns for acute care, these agencies, are ironically perhaps less able to integrate gender and disaster materials.

The Centres of Excellence for Women's Health and the Working Groups of the federal Women's Health Contribution Program (WHCP) are also vital starting points for disseminating information about gender and emergency management and for mainstreaming emergency management in gender-sensitive work. Supported with core operating funds from the Women's Health Contribution Program, through Health Canada's Bureau of Women's Health and Gender Analysis, the Centres of Excellence and working groups have been in operation for over 10 years, progressively building both expertise and credibility in the women's community (particularly women who are frequently marginalized) and with governments and policy-makers.

The WHCP agencies are able to connect research with community in two ways: disseminating new information to women and women's organizations at all levels; and working with governments at all levels to better incorporate women's needs and concerns in policy and planning. Indeed, the Centres have consistently contributed to gender-based analysis training across the country, gaining international recognition as well. They have developed GBA guides that use familiar examples and case studies across a wide range of topics and for a wide range of audiences. Prairie Women's Health Centre of Excellence has co-hosted two local workshops in Winnipeg with BU's ADES program using established networks and community links. The BC Centre of Excellence for Women's Health hosts a national list serv connecting women across the country to new information and resources.

Canadian Women's Health Network, also funded through the WHCP, provides a clearinghouse function (archive) as well as wide dissemination through three main modes: *Network*, a popular language women's health magazine; Brigit's Notes; and Research Bulletin. In addition CWHN hosts and maintains a number of list servs including ones specific to rural women's health and Aboriginal women's health.

3.2.2   Opportunities with other women's organizations

There are two other categories of women's organizations for initial collaboration: umbrella agencies and population-specific organizations.

The umbrella agencies (see Appendix G) include the Women's Councils: municipal, provincial and the National Women's Council of Canada; and the provincial women's advisory councils and their federal counterpart. The Women's Councils hold regular information evenings and develop comprehensive policy recommendations for change in

economic, structural, environmental and other systems to improve women's well-being. Their membership includes 10 or more local women's organizations and individuals at any one time, and their history in Canada is long-established.

Provincially-appointed women's advisory councils are no longer extant across the country, but Manitoba and Nova Scotia still have councils with membership throughout their province and with direct contact with elected officials and their departments. Population-specific groups where good connections and collaboration can be initiated include the Disabled Women's Network of Canada (DAWN Canada), Native Women's Association of Canada, Pauktuutit – Inuit Women's Association, and the YWCA and other faith-based groups.

3.3   Good Practice in Gendering Emergency Management

Substantial progress has been made internationally in the past decade to meet the concerns raised here. For example, a growing number of tools geared to humanitarian relief organizations are now available. The new IASC publication *Women, Girls, Boys and Men - Different Needs, Equal Opportunities* will soon be available in multiple languages and is being heavily promoted electronically. Also encouraging are initiatives from UNICEF, UNDP and international development agencies for rapid deployment of gender and disaster expert teams. GenCap teams, an IASC initiative supported by international donors, will provide "technical leadership and support on Gender Equality Programming through close collaboration with humanitarian actors."[33] What models of mainstreaming exist in Canada?

Gender-based analysis in women's health organizations

As demonstrated above, women's health organizations have an established record of demonstrating the practicality and value of integrating gender based analysis to promote women's (and men's) health. Health Canada was one of few federal departments to demonstrate evidence of GBA integration in a report from the Parliamentary Standing Committee on the Status of Women. Likewise PHAC has already found means to illustrate how gender-based analysis contributes to better health planning and policy, as the request

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[33] For more information see:
http://ocha.unog.ch/ProCapOnline/index.aspx?module=viewpage&pageid=gencapfactsheet

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for this report demonstrates.   Nevertheless, gender-based analysis is not yet integral to all parts of these two large departments. While some tools provide for sex-disaggregation of data or mention gender as a determinant of health, this in itself is not sufficient for comprehensive gender-based analysis. This is because gender-based analysis encompasses a deeper exploration of the meaning and implications of data and policy, not simply a reporting of current statistics by the categories of male and female. Women's organizations (for example the Centres of Excellence for Women's Health) consistently find that understanding of GBA, leading to its incorporation in day-to-day work, is best achieved through examples and demonstrations that are recognizable and familiar to health planners and others who will use them, and that illustrate the efficacy of GBA for topics that concern them specifically.

Canadian meetings on women, gender and disaster

With support from the Justice Institute of British Columbia, BC PEP, Emergency Social Services Association and others in the Lower Mainland, a successful workshop was conducted in 1998 in Vancouver, attracting over 100 participants. Representation was particularly strong from antiviolence groups and from Emergency Social Services. Participants heard from a number of gender-focused researchers about the effects of floods on women, and worked in small groups on particular areas of concern. One of the outcomes was a set of recommendations (see Appendix F), including specific recommendations on violence against women. These were used effectively in support of a follow-up funding request for the emergency preparedness manual described below. Six years later, Cape Breton University hosted a National Symposium on Community Resilience that focused on *Gender and Disaster in Canada: New Thinking, New Directions*. This second Canadian conference was initiated by a practitioner with a strong focus on gender dimensions of pandemic influenza planning (M. Provost) with support from CBU's International Centre for Emergency Management Studies, PHAC, PSC and a corporate sponsor. The event attracted a small group of experienced practitioners and researchers as well as key government emergency management leaders. Proceedings for both the Cape Breton and the Vancouver conferences are available on line (see Appendix I).

The Gender and Disaster Network of Canada

An outcome of the CBU conference, the GDNC was originally hosted by the Women's Health Unit of the University of Ottawa with support from students and faculty at Brandon University.[34] While the GDNC is in the preliminary stages of development, in one short year it has served the critical function of providing a platform for gender mainstreaming. A diverse steering committee with staggered terms is currently being formalized, and outreach planned to key actors in emergency management and the nation's women's groups. Originally intended as a Canadian "node" of the larger international Gender and Disaster Network, the GDNC allows for a distinctly Canadian voice and a platform for the exchange of information about tools, publications, events and opportunities, for developing simple public awareness materials and targeted presentations (e.g. for businesswomen, for men, for teens), and for national advocacy. GDNC's mission statement reflects a strong commitment to understanding and reducing gender-based risk in the lives of Canadian boys and men, girls and women, and both women and men are members. To achieve sustainability, a relatively permanent institutional home is needed and strong connections with all relevant partners, especially in the areas community resilience, environmental sustainability, social justice and women's equality at all levels.

Mitigating violence against women in disaster

At the 1998 Vancouver workshop on *Women and disaster: What are the Issues?*, the director of the BC Association of Specialized Victim Services and Counseling Programs [BCASVSCP] raised concerns about the capacity of her office and coalition member agencies to continue to serve their clients in a crisis, concerns raised by reports of increased violence against women following the Loma Prieta earthquake in California.[35] Ten recommendations were offered at the end of the conference specifically addressing the problem of disaster-related violence (see Appendix F), among them the need for an emergency preparedness guide specifically geared to women's antiviolence services. *It can happen to you! Tools for change: Emergency Management for Women's Services* was developed

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[34] Visit the website of the GDNC at: http://www.gdnc.ca.

[35] The conference proceedings from Vancouver include her original account. See Appendix I for links.

in the following year.[36] Significantly, the antiviolence coalition was subsequently invited to join the BC Provincial Integrated Recovery Council (PIRC].

Given the constraints of both women's groups and emergency managers, resources must be leveraged through partnerships of this kind. It is noteworthy that the Ministries of Women's Equality, Human Resources and Attorney General were funders of BCASVSCP's emergency preparedness initiative, suggesting the efficacy of engaging a broader range of ministries, for example in Aboriginal affairs, immigration, culture, and trade as well as health and environment.

These foundations made the initiative viable: 1) strong and informed leadership from the women's organization; 2) ability to relate directly to the threats posed by disasters to continued service to highly vulnerable residents; 3) province-wide network of local service agencies with a stake in emergency preparedness; 4)) strong support from provincial authorities (PEP) to the principle of capacity building; 4) inclusion of relevant government ministries for funding and guidance; 5) action research support from the academic community; 6) consultants with specific knowledge about both emergency management and the antiviolence women's groups available to produce the manual; and 7) an established and well-regarded implementing agency with website capabilities and strong links to local communities across the province.

Winnipeg women's resilience workshops

Two workshops were conducted in the summer and late fall, 2008, in an effort to engage local women's organizations working with high-risk women in discussion about emergency preparedness and risk reduction. The July workshop was coordinated by PWHCE and BU/ADES with support from PHAC, attracting 25 participants, as did the December workshop. With the active participation of the City of Winnipeg emergency coordinator and other practitioners, both workshops helped raise awareness among participating agencies about the roles of women's organizations in a disaster and the resources available to them, or not.

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[36] The workbook is available online through BC PEP and other sources. See: http://www.pep.bc.ca/management/Women_in_Disasters_Workbook.pdf. For more information on this project, visit the website of the BCAVSCP: http://www.endingviolence.org/node/471

As expected, the primary outcomes were information sharing and networking, with exposure in the second workshop to some existing tools for organizational self-assessment and preparedness. Practical and specific ideas were generated in both workshops for implementing more gender-sensitive approaches and potential funders were identified. Additionally, follow-up invitations from the Manitoba Women's Advisory Council and the Provincial Council of Women of Manitoba were received and accepted. Training has also been requested by the Young Parents Resource Centre which works with at-risk children through the Manitoba Community Action Program for Children coalition. Additionally, the mailing list generated was used successfully to solicit representation on the Disaster Resilience Network of Manitoba, a parallel initiative under development in the Winnipeg area.

Featuring women

A current Public Safety Canada [getprepared.ca] public information television spot highlights the capabilities and leadership roles of women in the family. The spot uses a female narrator, and images of women and children taking action in the absence of men. It emphasizes inclusivity by having the woman of the family remind viewers that "we are all responsible."

Website content and illustrations also offer opportunities for highlighting the contributions women make to emergency management. An example is provided by the JIBC Emergency Management Division, which posts a "testimonial" feature currently profiling Donna Rekve, Powell River ESS training and emotional support coordinator. She conveys her enthusiasm to other women:

> *When I first became involved in ESS in the late 80s we learned as we went, but no matter how much I did, I didn't feel confident that I knew what I was doing. I came back to ESS in 2003 after a few years absence, and I couldn't believe the changes. I've now taken all the ESS courses offered through the JI and what a difference to my understanding. Cross training in the different functions has been so valuable and, I think, an absolute must. Thanks to my training, I know what I am talking about and feel very confident that I could make a difference in the event of a disaster.*[37]

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[37] JIBC testimonial retrieved February 11, 2008, from http://www.jibc.ca/emergency/testimonial.htm

It is important to note that mainstreaming gender does not imply that women's traditional roles are in any way less worthy than emergency management roles traditionally dominated by men. However, opportunities for highlighting nontraditional roles for men, and for women, should also be sought.

BC PEP hazard and risk vulnerability analysis

The BC Hazard, Risk and Vulnerability Analysis (HRVA) tool kit prepared by the BC Provincial Emergency Program is a very useful and well-regarded guide. We highlight it here as one of a very few examples of gender sensitivity in the "tool kit" of Canadian emergency management. For example, users are directed to consider gender as one of the parameters of social vulnerability (mothers and children; violence against women) along with the infirm in hospitals, prisoners, and many others. Guidance to users on how to go about reaching and working with these groups would add value. It would also be useful to include women or men trained in gender analysis or knowledgeable about local gender relations among the "subject experts" recommended for inclusion on the HRVA advisory committee, along with "women's and community groups" from the community sector. [38]

Addressing the psychosocial needs of women and men

Also from BC, guidelines for *Worker Care Team: Caring for the Psycho-Social Needs of Disaster Volunteers and Staff* have been developed to help first responders and others recognize and address the emotional demands of emergency work. A comprehensive worker care program is recommended, including conflict resolution skills and child care and/or elder care services if needed. The worker care team also assists by "educating the families of responders" about reactions common to emergency responders. While the guide could be developed in ways that draw out likely gender differences, it is potentially a powerful tool for women and men in these demanding roles, as well as their families. Laurie Pearce

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38 The BC Hazard, Risk and Vulnerability Analysis (HRVA) tool kit is available on line: http://www.proventionconsortium.org/themes/default/pdfs/CRA/BC_HRVA_2003_meth.pdf

presented the tool at the CBU gender conference, noting that "empowering women to contribute in their own recovery is probably the most effective tool we have." [39]

In Manitoba, emergency preparedness information on the City of Brandon's website is distinguished by including the telephone number of the Westman Women's Shelter among the three hot-lines listed as support for "emotional reactions" to disaster. In the same vein, the PHAC on-line guide *Responding to Stressful Events: Taking Care of Ourselves, Our Families and Our Communities* reminders users that "distress or crisis centres" are available in the aftermath of disasters and may be part of self-care. While children, teens, and seniors are highlighted, no gender analysis or discussion of women's experiences are offered; the document was revised by the Mental Health Support Network of Canada and further revision by subject experts from the Canadian Women's Health Network would strengthen it.

Anticipating child care needs

Child care services made available by the Ontario Ministry of Community and Social Services (operated by the Raggedy Ann Day Care Cooperative) helped families after the Barrie tornado. The specific needs of children, for example for safe play space, are evident but communities rarely make advance child care arrangements for disasters. One result is that mothers especially may be unable to return to work or turn to the daunting tasks of recovery. The Canadian Disaster Child Care Association is an invaluable voluntary partner in gender-sensitive emergency management conducting two workshops annually.[40]

Gender-sensitive training materials

In the training chapter of the PHAC document *Personal Services: Psychosocial Planning for Disasters*, users will find role plays reflecting situations faced by women in disasters. For example:

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[39]This tool and the useful discussion proved by Laurie Pearce are both available in the CBU gender conference proceedings:
http://www.capebretonu.ca/ICEMS/Gender%20and%20Disaster%202006.pdf

[40] Visit the CDCCS website at: http://members.shaw.ca/disasterchildcare/CDCC%20Newsletter.htm

You are a [personal services] worker at a reception centre. You have been asked by one of the Emergency Measures officials to help a woman of 65 who has lost her house and all her possessions in a devastating tornado. She was sitting dazed amidst the wreckage and was finally persuaded to come to the reception centre to get help. She has been alone in her house for years. Her only sources of income are Old Age Security and Guaranteed Income Security. She has one daughter who lives in a small town 50 kilometres away. She has always been independent, but now seems overwhelmed by the catastrophe. How could you help? [41]*

While this example also illustrates the tendency to gender stereotyping, staff and volunteers presented with this role play are served well by approaches that increase gender awareness.

4   STRATEGIC RECOMMENDATIONS FOR GENDER MAINSTREAMING

We have raised a wide range of gender concerns arising throughout the disaster cycle for women and for men, and pointed to the lack of integration of these concerns into either emergency management or women's organizations. A number of action steps have been suggested to begin to close this gap, summarized in Appendix H. Without an implementation framework, however, it is difficult to be optimistic about realizing this agenda for change. We conclude, therefore, by outlining an ambitious gender mainstreaming initiative for Canada.

Gender Equity and Disaster Resilience, 2008-2011

A broad base is essential for effective and sustained mainstreaming. Toward that end, we recommend representation from:
1) lead agencies and networks in the Canadian government's emergency management system at the federal, provincial, territorial and local levels;
2) lead women's organizations active at the national or provincial level in addressing gender disparities;

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[41] Adapted from: U.S. Dept. of Health and Human Services, National Institute of Mental Health. *Training Manual for Human Service Workers in Major Disasters*, Farberow, N.L., and Gordon, N.S.

3) women's networks and organizations active at the local level serving and/or advocating for high-risk women;

4) lead voluntary agencies and networks working with other high-risk groups;

5) postsecondary training and education institutions in Canada; and

6) private sector partners in the financial and insurance sector.

A. Commitment, high level support and accountability are needed. It is essential to build a constituency for change. Local concerns and grassroots pressure may be the driving force, but in this process there is no substitute for leadership from senior managers. Toward that end, we recommend the three-year *Gender Equity and Disaster Resilience* campaign, with a leadership structure comprised of:

► The Gender and Disaster Network of Canada could take the lead in implementing the campaign through the development of a new multisectoral *GDNC Gender Mainstreaming Committee*;

► Senior managers across the emergency management system to be invited to play a role on the GDNC *Gender Mainstreaming Committee*;

► A *Women's Network for Disaster Resilience*, comprised of senior leaders in national women's organizations actively engaged in environmental, health, housing and social justice issues, to be developed in collaboration with the GDNC and the Canadian Women's Health Network.

B. Capacity building. Sustained and visible high-level support cannot effect change if the organizations and institutions tasked with carrying out the essential activities of emergency management cannot, for example, conduct risk assessments using sex-specific data, identify local trends affecting the relative risk of women and men, or support grassroots women's and community organizations in emergency preparedness planning. Toward that end, we recommend:

► Staff time be provided for the three-year period of the *Gender Equity and Disaster Resilience* initiative, through a part-time temporary appointment in a relevant agency, private sector grants, secondments, paid internships, job reassignments or other resources;

- Technical expertise be secured through institutional supporters to develop the human and technological resources of the GDNC and increase its capacity to exercise the leadership role recommended;

- One-year contractual support to Canadian Women's Health Network to develop a sustainable virtual network of women's organizations and related networks, and liaise with the GDNC Mainstreaming Committee;

- A campaign to increase membership in the GDNC among women's networks and organizations, among men in key leadership positions in emergency management, and among potential partner organizations working on environmental sustainability;

- Annual Summer Institute to be held in conjunction with relevant conferences or workshops, designed to engage emergency management students, practitioners, and women's organizations in dialogue leading to policy and resource development.

3. Resources. A mainstreaming initiative of any scale cannot be sustained without sufficient financial and human resources. In an era of retrenchment and privatization, private/public partnerships are essential for all emergency management initiatives. Toward that end, we recommend:

- Short-term support from lead emergency management agencies to develop the capacity of the GDNC, utilizing existing staff resources and contract appointments as feasible;

- Meeting most direct costs of the initiative by incorporating gender sensitivity into on-going activities and resources, e.g. reviewing and revising website materials, exercises and scenarios, course offerings, etc.

- Sponsorship be sought for gender-sensitive public awareness activities that capitalize on women's lower tolerance for risk, e.g. from the Institute for Catastrophic Loss Reduction;

- Corporate sponsorship be sought for selected mainstreaming activities;

- JEPP training funds be sought for cross-training emergency practitioners and women's organizations active in disasters;

- Gender and Disaster training materials to be developed by the GDNC and made available on a cost-recovery basis to women's and emergency management organizations.

4. Coordination. A coordinated approach is also essential to effectively direct scarce resources and ensure an integrated and multi-sectoral approach that recognizes the capacities and interests of all stakeholders and social actors in the national emergency management system. Toward that end, we recommend:

► Lead federal agencies with emergency management roles designate a gender focal point (i.e., person, department or bureau) for no less than the proposed three-year period, with representation on the steering committee of the GDNC Gender Mainstreaming Committee;

► The Canadian Women's Health Network coordinate the *Women's Network for Disaster Resilience*;

► The Women's Network for Disaster Resilience coordinates with the GDNC and institutional supporters to identify windows of opportunity for public education;

► GDNC website space be created to share information and document and track all project activities, e.g. the development or revision of tools, collection of good practice models, sharing of opportunities for public presentations, etc.

5. Communication. Effective and transparent internal communication is needed. So too, is effective communication with the various publics involved in emergency management with respect to the gender dimensions of disasters. Toward that end, we recommend:

► The GDNC form a Gender Mainstreaming listserv for the purposes of regular and coordinated communication with all parties to the proposed *Gender Equity and Disaster Resilience* initiative;

► Representation from various media in the GDNC Working Group and/or outreach to representatives, e.g. including mainstream and new media serving women's groups, non-English speakers, and those with alternative communication needs and skills;

► Monthly steering committee conference calls for all members of the GDNC Gender Mainstreaming group.

6. Monitoring and evaluation. Well-established and consensus-based programs are often subject to incomplete or ineffective implementation and this is certainly a threat to the long-term success of the gender mainstreaming project recommended here. Toward that end, we recommend:

- ► Semi-annual meetings of the Steering Committee as feasible to reassess goals and resources;

- ► Regular review of the action plan to be developed to guide the new initiative (vision, mission, goals, objectives, budget, timetable, roles);

- ► That the obligations and responsibilities of individuals implementing the goals and objectives of this project be reflected in their work plans and performance reviews;

- ► Funding be sought to conduct participatory evaluation at the end of the first year of the project, to include representatives from all parties;

- ► Transparent and consensual indicators of effective implementation following established program management principles.

5   FINAL OBSERVATIONS

As the national emergency management framework emphasizes mitigation and community engagement, emergency management authorities have increasingly focused on outreach to and partnership with at-risk populations. Women, however, have not been targeted. There is no reason to believe that, once understood, integrating gender concerns in emergency management would be resisted. Indeed, the most effective strategy for partnering with at-risk groups at the local level may be to centre the next phase of vulnerability reduction on gender concerns generally, and at-risk women and girls especially. This conclusion is supported by the preceding review of the capacities and cross-cutting concerns of women's organizations in Canada, and by the acknowledged leadership of grassroots women in outreach to the socially marginalized.

A safer, more just, and more disaster resilient nation cannot be realized without the full and equal participation of women and men, girls and boys. The urgency of the challenges to life and safety at this historical juncture make this a timely project. It is one supported by the fundamental principles of equity in emergency management and the voluntary sector, and by the national and international leadership already demonstrated by Canada in the area of gender equality and humanitarian relief. In an era of increasing risk, the time to act is now.

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APPENDIX A:
GLOSSARY AND ACRONYMS

Coping capacity
The means by which people or organizations use available resources and abilities to face adverse consequences that could lead to a disaster. In general, this involves managing resources, both in normal times as well as during crises or adverse conditions. The strengthening of coping capacities usually builds resilience to withstand the effects of natural and human-induced hazards.

Critical infrastructure
Essential underlying systems and facilities upon which our standard of life relies.

Disaster
Essentially a social phenomenon that results when a hazard intersects with a vulnerable community in a way that exceeds or overwhelms the community's ability to cope and may cause serious harm to the safety, health, welfare, property or environment of people; may be triggered by a naturally occurring phenomenon which has its origins within the geophysical or biological environment or by human action or error, whether malicious or unintentional, including technological failures, accidents and terrorist acts. Naturally occurring or induced epidemics can also become disasters.

Disaster risk reduction
The conceptual framework of elements considered with the possibilities to minimize vulnerabilities and disaster risks throughout a society, to avoid (prevention) or to limit (mitigation and preparedness) the adverse impacts of hazards, within the broad context of sustainable development.

Early warning
The provision of timely and effective information, through identified institutions, that allows individuals exposed to a hazard to take action to avoid or reduce their risk and prepare for effective response.

Emergency
A present or imminent event that requires prompt coordination of actions concerning persons or property to protect the health, safety or welfare of people, or to limit damage to property or the environment.

Emergency management
The management of emergencies concerning all-hazards, including all activities and risk management measures related to prevention and mitigation, preparedness, response and recovery.

Empowerment
Empowerment is about people - both women and men - taking control over their Lives: setting their own agenda, gaining skills, increasing self-confidence, solving Problems, and developing self-reliance. It is both a process and an outcome.

Gender
Refers to the array of socially constructed roles and relationships, personality traits, attitudes, behaviours, values, relative power and influence that society ascribes to the two sexes on a differential basis. Gender is relational-gender roles and characteristics do not exist in isolation, but are defined in relation to one another and through the relationships between women and men, girls and boys.

Gender-based analysis
An analytical tool that uses sex and gender as an organizing principle or a way of conceptualizing information- as a way of looking at the world. It helps to bring forth and clarify the differences between women and men, the nature of their social relationships, and their different social realities, life expectations and economic circumstances. It identifies how these conditions affect women's and men's health status and their access to, and interaction with, the health care system.

Gender bias
The root of gender inequalities and falls into three broad problem types3: over-generalization- adopting the perspective or experience of one sex and applying it to both sexes; gender insensitivity - ignoring sex and gender as important variables; and double standards -assessing the same or essentially the same situation, trait or behaviour differently on the basis of sex.

Gender blind
Ignores different gender roles, responsibilities and capabilities. It is based on information derived from men's activities and/or assumes those affected by the policy have the same needs and interests.

Gender equality
Women and men, girls and boys enjoy the same status in society. Gender equality means that they all equally realize their full human rights and potential to contribute to national, political, economic, social, personal and cultural development, and to benefit equally from them, regardless of their gender.

Gender equity
The process of being fair to women and men, girls and boys. To ensure fairness, measures must often be taken to compensate for historical and social disadvantages that prevent women and men, girls and boys from otherwise operating on a level playing field. Treating everyone identically can perpetuate rather than remedy inequality. The guiding principle of gender equity is to create equal outcomes for women and men, girls and boys.

Gender equality
Women and men have equal rights and should have the same entitlements and opportunities. Equality is rights-based.

Gender equity
Resources are fairly distributed, taking into account different needs.

Gender mainstreaming
The process of bringing a gender perspective into the mainstream activities of government at the policy, programme and project levels.

Gender neutral
Not specifically aimed at either men or women and is assumed to affect both sexes equally. However it may actually be gender blind.

Gender redistributive
Seeks to change the distribution of power and resources in the interest of gender equality.

Gender relations
Social relations based on gender that are embedded in societal institutions such as the family, schools, workplaces and governments. They shape social systems and organizations, including the health system, and are supported by values, rules, resource allocation and routine activities.

Gender specific
Recognizes gender difference and targets either men or women within existing roles and responsibilities

Hazard
A potentially damaging physical event, phenomenon or human activity that may cause the loss of life or injury, property damage, social and economic disruption or environmental degradation. Hazards can include latent conditions that may represent future threats and can have different origins: natural (geological, hydrometeorological and biological) or induced by human processes (environmental degradation and technological hazards). Hazards can be single, sequential or combined in their origin and effects. Each hazard is characterized by its location, intensity, frequency and probability.

High-risk populations
People whose situational and physical characteristics increase their susceptibility to harm due to disasters.

Mitigation
Structural and non-structural measures undertaken to limit the adverse impact of natural hazards, environmental degradation and technological hazards.

Partner
Any individual, group, or organization that might be affected by, or perceive itself to be affected by an emergency.

Practical gender needs
Arise from the different material conditions of women and men, due to the roles ascribed to them by society. They reflect women's position in society, but do not include challenging it.

Prevention
Activities to provide outright avoidance of the adverse impact of hazards and means to minimize related environmental, technological and biological disasters. Depending on social

and technical feasibility and cost/benefit considerations, investing in preventive measures is justified in areas frequently affected by disasters. In the context of public awareness and education, related to disaster risk reduction changing attitudes and behaviour contribute to promoting a "culture of prevention".

Preparedness
Activities and measures taken in advance to ensure effective response to the impact of hazards, including the issuance of timely and effective early warnings and the temporary evacuation of people and property from threatened locations.

Risk
The probability of harmful consequences, or expected losses (deaths, injuries, property, livelihoods, economic activity disrupted or environment damaged) resulting from interactions between natural or human-induced hazards and vulnerable conditions. Conventionally risk is expressed by the notation Risk = Hazards x Vulnerability. Some disciplines also include the concept of exposure to refer particularly to the physical aspects of vulnerability.

Risk management
The use of policies, practices and resources to analyze, assess and control risks to health, safety, environment and the economy.

Sex
Refers to the biological differences between females and males. The health sector has focused largely on reproductive differences, particularly maternity, but physical distinctions between females and males shape a much broader range of health issues. The health sector is slowly recognizing the extent of anatomical and physiological differences and incorporating them into science and treatment. Reliance on male standards is being questioned, for example in recognizing and treating heart disease and in understanding the different effects of anaesthetics on women and men, girls and boys.

Sex-disaggregated data
Data that are collected and presented separately on men and women.

Strategic gender needs
Relate to women's empowerment and to what is required to challenge the gender balance of power and control to achieve gender equality.

Resilience
The capacity of a system, community or society to adapt to disturbances resulting from hazards by persevering, recuperating or changing to reach and maintain an acceptable level of functioning.

Vulnerability
The propensity to suffer some degree of loss (e.g., injury, death, and damages)   from a hazardous event. Whether considering a community, an individual, an economy or a structure, vulnerability depends upon coping capacity relative to the hazard impact.

Sources: A Emergency Management Framework for Canada: www.publicsafety.gc.ca; ISDR glossary: http://www.unisdr.org/eng/library/lib-terminology-eng.htm ; Health Canada: http://www.hc-sc.gc.ca/hl-vs/women-femmes/gender-sexe/policy-politique_e.html#1 Commonwealth Secretariat: http://www.thecommonwealth.org/gtinformation/164311/164493/164495/gender_terms/; UNESCO: portal.unesco.org/en/files/11483/10649049699definitions.doc/definitions.doc

ACRONYMS

ADES	Applied Disaster and Emergency Studies, Brandon University
BCASVACP	BC Assoc. of Specialized Victim Assistance & Counseling Programs
BC PEP	British Columbia Provincial Emergency Program
CWHN	Canadian Women's Health Network
CDCCA	Canadian Disaster Child Care Association
CRC	Canadian Red Cross
CRHNet	Canadian Risk and Hazards Network
DEM.net	Disability and Emergency Management Network
ESSA	Emergency Social Services Association
GDN	Gender and Disaster Network
GDNC	Gender and Disaster Network of Canada
IASC	InterAgency Standing Committee
UN ISDR	United Nations International Strategy for Disaster Reduction
IFRC	International Federation of Red Cross and Red Crescent Societies
JIBC	Justice Institute of British Columbia
PHAC	Public Health Agency of Canada
PWHCE	Prairie Women's Health Centre of Excellence
PSC	Public Safety Canada

APPENDIX B:
SIX PRINCIPLES FOR ENGENDERED RELIEF AND RECONSTRUCTION [42]

1. THINK BIG. Gender equality and risk reduction principles must guide all aspects of disaster mitigation, response and reconstruction. The "window of opportunity" for change and political organization closes very quickly. Plan now to:

➤ respond in ways that empower women and local communities
➤ rebuild in ways that address the root causes of vulnerability, including gender and social inequalities
➤ create meaningful opportunities for women's participation and leadership
➤ fully engage local women in hazard mitigation and vulnerability assessment projects
➤ ensure that women benefit from economic recovery and income support programs, e.g. access, fair wages, nontraditional skills training, child care/social support
➤ give priority to social services, children's support systems, women's centers, women's "corners" in camps and other safe spaces
➤ take practical steps to empower women, among others:
    o consult fully with women in design and operation of emergency shelter
    o deed newly constructed houses in both names
    o include women in housing design as well as construction
    o promote land rights for women
    o provide income-generation projects that build nontraditional skills
    o fund women's groups to monitor disaster recovery projects

2. GET THE FACTS. Gender analysis is not optional or divisive but imperative to direct aid and plan for full and equitable recovery. Nothing in disaster work is "gender neutral." Plan now to:

➤ collect and solicit gender-specific data
➤ train and employ women in community-based assessment and follow-up research
➤ tap women's knowledge of environmental resources and community complexity
➤ identify and assess sex-specific needs, e.g. for home-based women workers, men's mental health, displaced and migrating women vs. men
➤ track the (explicit/implicit) gender budgeting of relief and response funds
➤ track the distribution of goods, services, opportunities to women and men
➤ assess the short- and long-term impacts on women/men of all disaster initiatives
➤ monitor change over time and in different contexts

3. WORK WITH GRASSROOTS WOMEN. Women's community organizations have insight, information, experience, networks, and resources vital to increasing disaster resilience. Work with and develop the capacities of existing women's groups such as:

➤ women's groups experienced in disasters
➤ women and development NGOs; women's environmental action groups
➤ advocacy groups with a focus on girls and women, e.g. peace activists
➤ women's neighborhood groups

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[42] Written and distributed by E. Enarson for the Gender And Disaster Network January 2005

- faith-based and service organizations
- professional women, e.g. educators, scientists, emergency managers

4.   RESIST STEREOTYPES. Base all Initiatives on knowledge of difference and specific cultural, economic, political, and sexual contexts, not on false generalities:

- women survivors are vital first responders and rebuilders, not passive victims
- mothers, grandmothers and other women are vital to children's survival and recovery but women's needs may differ from children's
- not all women are mothers or live with men
- women-led households are not necessarily the poorest or most vulnerable
- women are not economic dependents but producers, community workers, earners
- gender norms put boys and men at risk too, e.g. mental health, risk-taking, accident
- targeting women for services is not always effective or desirable but can produce backlash or violence
- marginalized women (e.g. undocumented, HIV/AIDS, low caste, indigenous, sex workers) have unique perspectives and capacities
- no "one-size" fits all: culturally specific needs and desires must be respected, e.g. women's traditional religious practices, clothing, personal hygiene, privacy norms

5. TAKE A HUMAN RIGHTS APPROACH. Democratic and participatory initiatives serve women and girls best. Women and men alike must be assured of the conditions of life needed to enjoy their fundamental human rights, as well as simply survive. Girls and women in crisis are at increased risk of:

- sexual harassment and rape
- abuse by intimate partners, e.g. in the months and year following a major disaster
- exploitation by traffickers, e.g. into domestic, agricultural and sex work
- erosion or loss of existing land rights
- early/forced marriage
- forced migration
- reduced or lost access to reproductive health care services
- male control over economic recovery resources

6. RESPECT AND DEVELOP THE CAPACITIES OF WOMEN. Avoid overburdening women with already heavy work loads and family responsibilities likely to increase.

- identify and support women's contributions to informal early warning systems, school and home preparedness, community solidarity, socioemotional recovery, extended family care
- materially compensate the time, energy and skill of grassroots women who are able and willing to partner with disaster organizations
- provide child care, transportation and other support as needed to enable women's full and equal participation in planning a more disaster resilient future

APPENDIX C:
ISSUES FACING WOMEN AFTER DISASTERS

HOUSING

Evacuation voluntary?
Affordable housing for low-income women?
Clean-up, repair, and rebuilding help targeting women heading households?
Access to housing loans?
Input into reconstruction policies?

TRANSPORTATION

Access to public transportation in temporary accommodations?
Access to family transportation?
Key services on public transportation routes?

INCOME AND EMPLOYMENT

Accessible child care? Family child care providers supported?
Child care for women workers in response roles?
Family/work concerns of volunteers addressed?
Family-friendly work policies allowing leave and support during clean-up and rebuilding?
Home-based jobs disrupted or destroyed? Women-owned businesses at risk?
Access to nontraditional work and training during reconstruction?
Equity in credit and loans during rebuilding, relocation, and recovery?
Continuity of income support through nonprofits, crisis agencies, government programs?
Long-term economic impacts monitored by gender?
Legal services available in disputes over relief money?

DEPENDENT CARE

Child care available to help women prepare, access relief resources, relocate, and rebuild?
Respite care for long-term caregivers during recovery?
Continuity of health care services to women caring for ill or disabled dependents?

PHYSICAL AND MENTAL HEALTH

Appropriate health care services in temporary accommodation?
Mental health workers trained in gender violence issues?
Reproductive health services available in temporary accommodation?
Counseling, support groups, and respite care for women survivors and responders?
Long-term recovery assistance anticipated?

VIOLENCE

Increased physical, emotional, or sexual violence?
Access to safe evacuation space? Priority attention to women and children in shelters?
Continuity of services to women at risk? Increased services loads anticipated?

ACCESS TO RELIEF RESOURCES

Provision for women with children coming to relief and recovery sites?
Assistance to complex households with multiple household heads?
Transportation, work release, and child care available?
Physically accessible sites with culturally diverse materials?
Long-term recovery services to caregivers available?

FULL PARTICIPATION IN DISASTER DECISION-MAKING

Women's specific needs identified? Relief monies monitored for gender impacts?
Community meetings scheduled to facilitate women's participation? Child care provided?
Most vulnerable women sought out and included on recovery projects?
Women's voices heard in all aspects of disaster recovery and mitigation initiatives?

APPENDIX D:
SEVEN ANALYTIC TASKS OF GENDER MAINSTREAMING
FOCUS ON EMERGENCY MANAGEMENT

1. Ask questions about the responsibilities, activities, interests and priorities of women and men, and how their experience of problems may differ.

► How do the health and security needs of adolescent girls and boys differ before, during and after disasters?
► How can women on their own in emergencies be supported? Men on their own?
► Do we consistently provide sex-appropriate personal hygiene items, gender-sensitive counseling, equitable access to disaster-related jobs or job training?
► What recovery challenges will women living with disabilities or HIV/AIDS face?
► Do our first responders and emergency social service staff and volunteers have a solid knowledge base about how women's and men's lives relate in this cultural context?

2. Question assumptions about "families," "households," or "people" that may be implicit in the way a problem is posed or a policy is formulated.

► What assistance is available to renters and residents of social housing? How about homeless women and children? Homeless men?
► How do we know if girls and women in disadvantaged positions within households are receiving relief supplies? What can be done to increase their access to relief and recovery assistance?
► Are counseling, housing and economic recovery services accessed easily by those in nontraditional relationships or nontraditional households?
► How do we reach young women and men not living with families?
► What supports are in place to assist single mothers or single fathers?

3. Obtain the data or information to allow the experiences and situation of both women and men to be analyzed.

► What sex-specific data are included in local hazard and risk assessments? What other sex-specific data are available, for example on local unemployment rates for women/men or major health risks faced by girls and women, boys and men in this area?
► Have we sought out advocacy groups, academic and government bureaus and international data sources for information about high-risk areas we are likely to serve?
► When we respond to disasters, do we seek out female and male community leaders equally? How about women's organizations with service data and other insights into high-risk girls and women, e.g. women with disabilities, subject to violence, homeless, living with HIV/AIDS, etc.

4. Seek the inputs and views of women as well as men about decisions that will affect the way they live.

► Are women and men equally engaged in decision-making roles as well as consultation?
► Do we consult with the people depending on our services for feedback about access, quality, and specific unanticipated needs?

- ▶ What arrangements are in place to increase participation of those most at risk? How about those with family responsibilities?
- ▶ How do we learn about women's networks in this emergency, or women's advocacy groups?
- ▶ How do we ensure that their views as well as men's are heard when questions or conflicts arise?
- ▶ If we are not including women as decision-makers, how would we know?

5. Ensure that activities where women are numerically dominant (including domestic work) receive attention.

- ▶ What do we know about culturally-specific gender relations in this area, for example the gender-based division of labor in family and community?
- ▶ Do we know what women's dominant areas of responsibility are, and men's? How do we know?
- ▶ How are girls and boys, respectively, involved in household labor and what does that tell us about their lives after disasters, including their physical and mental health status?
- ▶ Do we know in what areas of employment women and men respectively are dominant in this community and region?
- ▶ Do economic recovery plans reflect women's traditional use of home space for earning income or producing goods for family use?
- ▶ Is volunteer recruitment and training based on knowledge of how women and men, respectively, use leisure time?

6. Avoid assuming that all women or all men share the same needs and perspectives.

- ▶ Do we fairly consult with and assist aboriginal, new immigrant, and migrant communities whose priorities for relief and recovery may differ?
- ▶ Do we understand social differences and resources among women of varying cultural, ethnic or language groups? What about gender differences among persons with different kinds of disabilities?
- ▶ When we help disaster-stricken communities, how do we monitor the effects on women's and men's livelihoods, respectively? On women's personal security? On men's mental health?
- ▶ What efforts are we making to reach subgroups, for example women and men who are recent immigrants, women heading households alone, or grandmothers with additional responsibilities for children after disasters?
- ▶ Does our outreach to the unemployed reach women who earn income at home?
- ▶ Do we know how being female or male makes a difference in sub-groups such as the widowed or unemployed?

7. Analyze the problem or issue and proposed policy options for implications from a gender perspective and seek to identify means of formulating directions that support an equitable distribution of benefits and opportunities.

- ► How well prepared are communities in high-risk areas to meet the needs of women and men equally? How would we know?
- ► What opportunities for empowering girls and women arise in the aftermath? How are these reflected in our outreach and response?
- ► Do response and relief funds target high-risk women/men equitably? How would we know?
- ► Do we employ women/men in decision-making positions who are knowledgeable about culturally-specific gender relations as well as other social conditions in crisis?
- ► Are gender-sensitive indicators of recovery in place? Is gender awareness among the evaluation criteria for disaster preparedness, response and recovery projects?

Source: Adapted to disaster field by E. Enarson. See United Nations, Office of the Special Advisor on Gender Issues and Advancement of Women, 2002. *Gender Mainstreaming: An Overview*. Retrieved February 29, 2008 from:
http://www.un.org/womenwatch/osagi/pdf/e65237.pdf.

Women as responders and leaders in recovery

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If we can send these women back strong and productive and hopeful to their families, then the families will become strong and hopeful and productive and so will the communities. I think that by identifying the women as the real major caregiver in the community we've done a really wonderful piece of work to ensure the survival of these communities over the next several years—hopefully, before the next flood hits! [Government observer on BSE-affected families]

***

For the first time, I really felt like a mother—the feeling of putting my kids before me, leaving my husband and my house. I have a lot more strength than I thought I did . . .I come from a family with strong women bonds. The women in my family have been through a lot—my Mom's divorce, my sister was in an abusive relationship. They came out of them. I know it's in me too, when I needed to. [Flood-affected mother, Southern Manitoba]

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The masks were so large as they were designed for men… most of the equipment was designed for males, we (women) had real issues around equipment fitting and the lack of equipment. [Nurse responding to SARS outbreak]

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As nurses we were conflicted about quarantine – what will happen if you have a baby or are pregnant…who will take care of my children at home, who will feed them, take care of them at night, help them with their homework. [Nurse responding to SARS outbreak]

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Everything actually came to a standstill. The police services were overwhelmed and stretched. There were no phones, no electricity, no water. All the energy was spent fending off the most immediate problems and responding to essential needs. It required great flexibility on the part of the staff. [Flood-affected domestic violence shelter, Saguenay]

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We had not received any weather warnings, and it was only after the sky changed colours that I phoned a neighbour to tell her that her TV antenna and garbage cans had been blown away by the wind.. . . I had two young children aged 1 and 3. I thought that by pushing a table against the fridge and huddling over my children, we would be safe. I thought of hiding in the basement, but was too afraid that we would not be found if, heaven forbid, trees fell on the house and a fire started. When the storm subsided, the house was surrounded by debris, and I immediately called for help. I have no idea how I managed to react like this in just a few seconds. I later created my safety plan and emergency kit, because I now knew that this did not just happen to others. This came in handy because I was hit by the 1998 ice storm in Montreal. I was there for work and was staying at a hotel for what was supposed to be two days. I arrived Tuesday, only to leave Saturday. One could

say that I could see the signs of this threat on Wednesday based on what I had experienced 20 years earlier. I put together my emergency kit by late Wednesday afternoon. I got a flashlight, radio, battery, juice and bottled water, as well as food I could keep and eat easily, and of course cash. When the blackout hit Montreal, I became the point of reference at the hotel, as I was autonomous and had information via the radio. This enabled the hotel to keep its clients informed because people were in a panic, and to take people in because they understood the scope of the problem. Today, I am ready. My kids and grandson know how to make their own kit, because they know the unexpected can happen to them. [Hurricane and ice storm affected mother, Quebec]

***

My husband does all the physical 'man' work but I'm the one that does the books. I'm the one that pays the bills, and I'm the one that can figure out how to keep all the finances going and our heads above water. When it came to all the flood stuff, my husband just walked away from it. It's been me that's been with EMO and Water Resources, with everybody. If you ask one question of my husband, it's 'well, don't ask me, go ask her. She knows everything.' All the contractors, me. Before we returned, I hired everybody. I had everybody all lines up and ready to go. . .and I've decided I've had enough for now. [Flood-affected woman, Southern Manitoba, three years later]

***

You were just so busy. I was in the house and I had to feed the volunteers we had. There would be about 40 people and the kids wouldn't eat the sandwiches made by the Salvation Army. I had to stand in the kitchen and make homemade soup and I was making them chicken sandwiches. I dug out all my borscht in the freezers because I figured, well we have to get out of here and I'm just going to have to throw it away. The volunteers were so thrilled t hey wanted to come back because we were the only ones that served desert. [Flood-affected woman, Southern Manitoba, three years later]

***

Everything was a mess. You've never seen such muck. Somehow you work, work, work, and you come back and you're dead. You get up in the morning and you come back and you start the same thing again. . . We worked all day. . . Then little by little, my legs gave in. . . Until now, my legs are no good but you keep on going because it has to be done. It has to be done, so you keep on. . . You got to do it. It has to be done. You got to do it. [Flood-affected woman, Southern Manitoba, three years later]

Women and men at odds in a disaster

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She took care of the kids. I took care of myself. [Flood-affected man, Southern Manitoba]

***

Packing and moving things upstairs took a couple of days. Since I didn't want to come back to a messy house, I cleaned at the same time as packed. It was a couple of nights staying up until two-three a.m. I did the cleaning while the others sandbagged. I kind of thought to myself 'Who's gonna' help me while you help the neighbors?' The whole thing was nerve-wracking, always thinking about what you forgot. It's exhausting both physically and emotionally. [Flood-affected woman, Southern Manitoba]

***

I work, I hunt, she's a homemaker—that's it. . . You can't live on handouts. There wasn't much choice. She didn't want to leave, but I pay the bills. There was no choice. [Flood-affected man, Southern Manitoba]

***

After we moved back, my husband would go to the Arena and find out what was happening. He also went there to eat meals from time to time. I didn't. I stayed here to eat so I could keep working. There was so much cleaning to do. [Flood-affected couple, Southern Manitoba]

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He thought I was crazy to take all these things. I wanted the bedding to smell like home and make things as homey as I could. We put pictures of Dad to put on the fridge . . .I packed up my wedding dress! [My husband] thought I was nuts . . .I packed up my diaries and calendars of my pregnancies . . .I packed up my rocking chair. It's my chair and my time with the kids when I rock them to sleep. My Mom doesn't have one. [Flood-affected woman, Southern Manitoba]

***

We had a difference in opinion about whether we should move basement furniture upstairs. [He] didn't think we needed to, but we brought the furniture upstairs and raised it. I was actually wanting to move the furniture out of the house, but he thought I was over-reacting at first. I insisted furniture come up from downstairs. [He] was quite confident in the dike system . . .We met halfway and moved the furniture upstairs. We had a difference in opinion about whether we should move basement furniture upstairs. [He] didn't think we needed to, but we brought the furniture upstairs and raised it. I was actually wanting to move the furniture out of the house, but he thought I was over-reacting at first. I insisted furniture come up from downstairs. [He] was quite confident in the dike system . . .We met halfway and moved the furniture upstairs. [Flood-affected woman, Southern Manitoba]

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The facilities [in the hotel to which they were evacuated]weren't good for washing clothes. I did the laundry between one and two a.m. During other times it was always full . . .A lot of the girls' stuff was wash and hang to dry so one table was used to dry clothes flat. I did the laundry. The girls tried to be out in the evenings as much as possible . . .[We] just carried over from our normal jobs . . .I kept track of things, [he] carried things. I did clothes. He left at six a.m. to go to work and came back at seven p.m. and then ate. Therefore it wasn't a major imposition on him . . My youngest daughter and I spent many evenings in the lobby because my husband and the oldest girl like to go to bed early. When my husband watched TV the volume was too loud. [Flood-affected woman, evacuated from Southern Manitoba home]

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It was really hard. Our youngest was forgetting his daddy. So did [the toddler]. He would cry every time his daddy would leave [after a weekend visit]…[He] had to get readjusted to

seeing his father every day. It took him a good two months to get readjusted. He didn't really see him as his father. [Flood-affected woman, Southern Manitoba]

***

I asked my husband if we were going to flood. I counted on him and he said we weren't going to flood. He told me not to worry, so I ignored the whole thing and went about my life . . . He kept telling me not to worry and that if we flood, the city of Winnipeg will flood. [Flood-affected woman, Southern Manitoba]

***

My wife is always a bit more scared than I am. She gets worried. Right away, she wanted to move stuff from our basement, get the furniture out. I said 'let's take it easy, don't panic . . .The river doesn't mean get worried. They can sandbag it. I never thought the water would get here. . . . Don't think you know it all--move your stuff up. [Flood-affected man, Southern Manitoba]

***

It wasn't a big deal before the flood. If conflicts never got fixed they would just go away . . . I think the flood changed this. There were more decisions to be made . . .We're not agreeing on anything . . .He's not taking me seriously. You can't go your whole life with someone without having something to offer them . . .It's his way and that's it. It wasn't a big deal before the flood. Now it is. We should fix this or it could be marriage counseling . . .I think it will be better once the flood decision are made. To offer them . . It's his way and that's it. It wasn't a big deal before the flood. Now it is. [Flood-affected woman, Southern Manitoba]

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My daily life is lost now. I'm slowly starting to get back into a bit of a routine. I've lost my creative aspect. I have no time for naps—I'm a lot more short-tempered. My husband and I fight more often. Before, we didn't fight much, but now I find I'm picking at him more . . . He has an escape from this—his work. Everyday I'm reminded things still aren't normal. [Flood-affected man, Southern Manitoba]

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And it used to really frustrate me that I wasn't more part of those conversations because why would you think that I wouldn't understand or if I couldn't understand or why wouldn't you [husband] take the time to explain. [BSE-affected farmer]

***

We could built a house and pay cash, we would not need a mortgage. I just cannot talk him into it. In fact, I don't even try to talk him into it anymore. For some reason, there has to be so much money in the bank, in case of BSE and a drought comes. It is just really frustrating to me because as a woman's point of view, a house is really important…people are going to judge us by the outside of the house and that causes me a lot of stress. [BSE-affected farmer quoted by Reinsch]

***

People were all working like dogs. No one would stop to eat, but I baked when the Army was in town and brought cupcakes to the Legion. It was hard because I didn't have anyone

to leave my kids with. I felt tied down and I had to watch them. I couldn't get out. [Flood-affected woman, Southern Manitoba]

***

Women were more physical. Men hemmed and hawed—women did the work . . . [Women] are more 'get it done' rather than sit back. They're more panic stricken. There's no 'wait and see' attitude . . .Women do whatever has to be done to get the job done. Like mum's protecting kids, the house is the same. I didn't think a lot of times, I just did it. [Flood-affected woman, Southern Manitoba]

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My son-in-law was angry (that I was working) but you just reassure them that you're taking a shower and you're taking all the precautions. And my boyfriend was the same way. You make sure that you wear that stuff and take all the safety precautions because he didn't want me getting sick. I think we were more at ease, but our family members were definitely upset. [Nurse responding to SARS outbreak]

Men under stress in disasters

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Yeah, well I guess I have to use a lot of black humor to keep going. You know, when you're spending—ah, we've got to the point now we're spending savings so that doesn't do my mind any good. . . Either you have an off farm job or you're spending savings. …I end up not going to sleep and then, you know, going to sleep too late and then…I feel poorly. And then, also, you know, used to come this time of year and you have a lot of enthusiasm for doing a lot of work and getting prepared for things, and I don't have the enthusiasm that I would normally feel to get out and get doing things. So that part is kind of. . .and that's affected myself and a lot of people too.   Then, you don't like to talk about it because it gets you down and some people it does get really down. In fact, hum, what just happened –a real good friend of ours…committed suicide." [Third generation family farmer affected by BSE]

***

I know my wife took it a lot better than I did. I was more stressed than anything else. She was my shoulder. I was the weak one in this one. [Flood-affected man, Southern Manitoba

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He started crying when I was leaving. I knew as soon as he started, I couldn't. He needed to see me being strong and all right. I said, 'We'll be back.' He's crying—I have to be strong. But as soon as I got into the car, I started bawlin'. I cried the whole way into Winnipeg. I was scared. I left not knowing what would happen. There was nobody around. It was silent, no people, no cars. [Flood-affected woman, Southern Manitoba]

***

One of the most stressful things I've ever had was the week I had to spend in the hotel room. At the [hotel], there were three floors of evacuees from [the neighboring town of] Morris and here. I'd get up and people were walking up and down the hallways at six a.m. crying. You didn't have to ask, you knew they'd lost their homes. Boy was that stressful. I booked off work . . .The really tough part is knowing people who are coming home and their

home has been lost. How do you talk about that? . . .It was hard. A lot of the time I had tears coming down my face thinking about them . . .I preferred to be [lodged in the hotel] with the people from here, because we were going through the same thing. Just by being with them—they're doing OK, so I must be doing OK. [Flood affected man describing evacuation]

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He ran about nervous. I tried to keep him busy…My husband just worried the whole time. I called the municipality and told them we were available to sandbag wherever they needed us. [Flood-affected woman, Southern Manitoba]

***

He lost weight, he wasn't shaving. I at least could take some down time and take the kids out in the wagon. He would gobble down some food at noon and then go back to [flood] work.. . . . He started crying [when he saw the flooded house]. You wouldn't know unless you're from a small town. [Flood-affected woman, Southern Manitoba]

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He said just by him working for those four months [in British Columbia], they put money in the bank. They paid up all their old bills, the ones that they couldn't pay because the farm wasn't giving them enough money. He gave up four—you know, first of all, he gave up four months of his children's life. He was home for awhile and then he was gone again. . . Money--money is all fine and dandy, but you know in the end of it —and I'm a guilty person for this—but at the end of it, he'll never get back that time with his children. Yeah, he'll never—he'll never get it back." [Community observer on BSE-affected farmers]

Women under stress in disasters

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Because people could not see my disability, they assumed I was OK. So, no one offered to help. I paid the consequences of this later as the pain was so bad for weeks after the storm. [1998 ice storm testimonial]

***

Some women in the shelter lost their homes, many had indirect problems not related to family violence to be solved. Some women were not able to see their children who were not with them. Increased stress and worries. [domestic violence shelter employee, Saguenay flood]

***

I really can't over-emphasize the need for child care workers. I worked 18 hour days seven days a week for several months on end and my children just got left to fend for themselves. My community had promised they would like after my kids while I worked by that promise soon went by the board. We had no trauma team in place. It took three and a half months from the blizzard to get a trauma team in place working in our community. They had workers in Winnipeg at reception centres, but when we moved home there was nobody there to help us re-enter into the community. [Flood volunteer, Southern Manitoba]

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She's the one that gets the phone calls from the bank. She's the one that gets phone calls from the fertilizer place. She's the one that gets the mail. . .The wives probably are the ones that do the books….So the stress is on her. Then she has to go and try buy groceries, and she has no money to buy groceries and how are you going to feed your children, especially if you're a young family? [Community observer on BSE-affected farmers]

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Women are there to back them up but now they're, we're finding more men are leaving the farm to work leaving the chores to the women and the women already were—like men are not as multitask as women—and so they already had 10 hats on and now they're doing the main job as well. [The men] are away for weeks at a time and the women are in the barns in the morning and they're getting the kids ready for school and that's where the kids really suffer. Then they're coming in and phoning us and saying 'I just can't do this anymore.' [Counselor on BSE-affected farmers]

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'What's wrong with me? Why can't I get over it?' And particularly for the women, because they had to look after their husbands, their children, their normal house accounts, their EMO account, their Water Resources account. They had to go out and buy whatever they needed for their new house and make a thousand decisions every day if they were rebuilding. And they had to make the decisions that kept them going in their apartment or their mobile home. They were literally exhausted and worn out, and there was nobody they felt safe turning to. If they'd go to work and talk on coffee break, people would turn on them and accuse them of expecting the government to look after them. People started to feel very, very isolated quite early on.[Flood volunteer, Southern Manitoba]

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The mothers were horrendously over-loaded. The men went off to war, they went off to hunt and did their thing. I'm sorry to generalize, but you know I've been watching this pattern emerge. And the women stayed home and tended the fire. They gathered the food, they made sure they had a roof over their head, whether it was a mobile home or an apartment. They had to rebuild their house. They had to deal with all the home bonding issues. [Flood volunteer, Southern Manitoba]

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We needed to be together for this and we weren't. [Flood-affected wife on evacuation of women and children, Southern Manitoba]

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She identified that I looked safe to talk to and so she confided in me how much it all hurt. And how much the grief of the flood was compounding the death of her daughter many years ago, that she was now reliving the death of her daughter through the stress of the flood. And she felt so isolated, because she has so much financially that there was nobody that she could talk to or share her hurt with. They wouldn't understand, because she had money and so she had "everything she needed." There were very few people who could understand her emotional needs. [Flood volunteer, Southern Manitoba]

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It's our poor daughter who gets the worst of it . . . My temper with her now is worse. I didn't expect for things to be lasting so long . . . Personally, I want to get back and do the things that are most important to me . . .I even yelled at the baby the other day—now that's real stress. [Flood-affected woman, Southern Manitoba]

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They will call me and ask me things like, 'I don't know how to help here, can you help? Can you help me figure out how I can help my husband who—he won't talk to me. He hasn't talked to me in weeks. You know, I know it's not me. Can you help? [Counselor on BSE-affected wives]

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My younger one went to live with my mom in a senior's complex. So for seven months, he's had no supervision whatsoever. My mom didn't even know how to discipline him. He decided to quit school, just to have a gay old time and because I wasn't hands on, I couldn't control him. We've been going through this rebellion bit with him and it's been hell. Now I've got 7 ½ months to undo and see if I can get him back on track again. . . We're exhausted, both of us, you know. It's always me that keeps everything going and I'm so tired. I've always been the strong one. I had to do it all. Keep the house going. I feel that I'm the one that's kind of holding things together. Flood-affected woman, Southern Manitoba, three years later]

See Selected References for original sources:

BSE-affected women: Reinsch (forthcoming in Enarson and Chakrabarti)
BSE affected families: Enarson and Martz [2007]
Ice storm domestic violence: Enarson [1999]
Ice storm disabilities: Barile et al. (2006)
Hurricane and ice storm survivor story: Public Safety Canada [2008]
Red River flood: Enarson and Scanlon [1999]
Red River flood interviews three years later: Grant and Higgett [2001]
Red River flood volunteer, Goyer [1998]
SARS accounts from focus group study, Amaratunga and O'Sullivan (forthcoming in Enarson and Chakrabarti) and as reported in the Proceedings of the Cape Breton gender and disaster conference:
http://www.capebretonu.ca/ICEMS/Gender%20and%20Disaster%202006.pdf

APPENDIX F:
WOMEN IN DISASTERS: CONFERENCE RECOMMENDATIONS, 1998

Women in Disasters: Exploring the Issues
Vancouver, BC, June, 1998

To increase the visibility of women's vulnerabilities and resources in disaster and enhance effective response to their needs, we recommend:

1. Women speaking out strongly within their own organizations to voice their views and create a climate for change;

2. Fully engaging women in proactive planning for violence-free and culturally-sensitive disaster response in every community;

3. Women participating in developing emergency plans within their agencies and reviewing, evaluating, and amending existing emergency plans, if any;

4. Community-based hazard assessment identifying the location and specific needs of vulnerable women and children, among them women living with disabilities, mental illness, or serious medical problems, senior women, new immigrant women, minority-language speakers, single mothers, poor and low-income women and others;

5. Extended and culturally-appropriate post-disaster responses, including long-term recovery outreach teams and alternative mental health models such as healing circles;

6. Developing and distributing emergency response materials in different languages and geared to different communities, including deaf and impaired-hearing women and others with special needs;

7. Funding to support Canadian research into the role of gender in the planning, response, and recovery activities of emergency responders, planners, volunteers, and the community at large;

8. Implementing a national mitigation strategy with the active participation of women, taking into account women's visions of more sustainable communities and gender issues in community planning and emergency response;

9. Facilitating women's participation in developing post-disaster recovery and reconstruction plans empowering to women, including providing child care at community meetings;

10. Integrating gender analysis into existing and new emergency management training at the provincial and national levels;

11. Distributing through traditional and new media the proceedings and recommendations of this conference to all relevant provincial and federal agencies and to women's service organizations throughout the province.

To integrate women's services into all aspects of emergency management at the local, provincial, and national levels, we recommend:

1. Including women's services as full and equal partners in community-based emergency planning, contributing their knowledge and expertise to more effective emergency response;

2. Developing a workbook for women's organizations undertaking emergency planning, including specific guidelines and resources, information on individual preparedness, local emergency management resources and structures, and relevant gender and cultural issues;

3. Employing diverse media and delivery strategies to educate women's organizations that serve disaster-vulnerable groups about community-specific hazards, existing resources and response plans, and other aspects of emergency management;

4. Developing or extending existing and new organizational partnerships, for example between emergency managers, women's services, and regional health care agencies.

To address emergency planning issues specifically impacting violence against women services, we recommend:

1. Innovative strategies to assist antiviolence programs with in-house emergency planning, including an emergency planning workbook geared to specific issues confronting these programs in the event of a major community disaster;

2. Producing and distributing to governmental and community agencies a comprehensive report educating social and human service planners and emergency responders about the social impacts of disaster on women, including the risk of increased violence;

3. Implementing proactive agreements with provincial and federal agencies which provide post-disaster financial assistance to ensure that timely and adequate financial resources are available for antiviolence organizations responding to increased service demands in the aftermath of disaster;

4. Revising relevant provincial brochures and materials to include information on the likely social and psychological effects of disaster, including increased violence;

5. Incorporating violence issues into training materials for mental health disaster outreach teams and developing mutual aid agreements between women's services and mental health agencies;

6. Developing alternative plans for women unable to safely access existing evacuation sites;

7. Initiating agreements with BC PEP and lifeline services such as BC Tel to maintain accessible services by according priority status to crisis lines during disaster;

8. Implementing mutual aid agreements among neighbouring antiviolence services to foster timely crisis and recovery assistance to hard-hit programs and services;

9. Arranging for inspection and evaluation of the physical facilities of women's services in seismic regions;

10.   Educating and preparing staff and volunteers in women's services for their personal safety and for more effective assistance to others.

To support women in emergency management and women's service roles across organizations and agencies, we recommend:

1. Increasing opportunities for formal and informal networking between women's services and emergency planners and responders at the local level;

2. Creating opportunities for informal mentoring, job exchange and other initiatives which will increase communication between women emergency managers and women's service providers

3. Developing a BC PEP-hosted web-site and using existing women's service web-sites to share information and increase electronic networking between women's services and women emergency managers.

To support and sustain women undertaking voluntary relief work, we recommend:

1. Developing a comprehensive informational packet and video about how relief workers and their families are likely to be impacted by this work;

2. Providing public recognition and other incentives for employers who support the voluntary relief work of their employees, and informational materials for unions and business encouraging proactive policies and procedures, e.g. protecting the vacation time of employees accepting emergency relief assignments, and financial assistance with out-of-pocket expenses such as child care;

3. Increasing local support for the families of emergency response workers on assignment, for example neighborhood family networking, meals-on-wheels assistance through local religious and non-religious organizations, and contact through the emergency assignment between the sending organization and the relief worker's family;

4. Encouraging a range of comprehensive child care options for the families of emergency response workers, to be provided by the sending organization or employer, or available on-site as appropriate;

5. Funding extended trauma teams to provide response workers with long-term, confidential mental health services as needed, to be provided through task numbers assigned by the Provincial Emergency Program under the terms of the Emergency Program Act;

6. Mandating on-site crisis counseling and critical incident stress debriefing for all relief workers, and effective orientation of incoming relief workers by those departing.

APPENDIX G:
WOMEN'S ORGANIZATIONS AS PARTNERS IN GENDER AND DISASTER

To reach the broadest number of women's groups across the country, it makes good sense to begin with organizations that already have a broad reach and that also have the infrastructure to more easily incorporate and implement the work and materials to be shared. Note that this list does not include French-only organizations, though many provide service and opportunities in both official languages. There are other organizations that are French-only that could be included for greater inclusivity.

Women's Health Organizations

Centres of Excellence for Women's Health and Working Groups
www.cewh-cesf.ca

Opportunities: development and distribution of plain-language materials; connections with governments at all levels, including public health and health planners; connections with a broad range of moderate, small and grass-roots-sized agencies across provinces; established infrastructure and staff who can accommodate the work in on-going programmes. Note that this set of organizations includes the Canadian Women's Health Network, a well-established national organization set up to distribute this kind of information/

Individual centres and groups are:

Atlantic Centre of Excellence for Women's Health	http://www.acewh.dal.ca/
BC Centre of Excellence for Women's Health	http://www.bccewh.bc.ca/
Prairie Women's Health Centre of Excellence	http://www.pwhce.ca/
Women and Health Care Reform	http://womenandhealthcarereform.ca
Women and Health Protection	http://www.whp-apsf.ca/en/index.html
Canadian Women's Health Network	http://www.cwhn.ca/

The following organizations are also leaders in women's health in Canada and have far-reaching networks that can be used in mainstreaming disaster preparedness, particularly in hospitals and health systems.

Women's Health Clinic, Winnipeg	www.womenshealthclinic.org
Women's College Hospital, Toronto	http://www.womenscollegehospital.ca/
BC Women's Hospital, Vancouver	http://www.bcwomens.ca/AboutUs/BCWomens/default.htm

Umbrella Agencies

Opportunities: connections with women and women's organizations across provinces, particularly in smaller towns and rurally; direct line of communication with elected officials (in the case of the Advisory Councils); considerable strength in numbers in the case of the Councils of Women, NWAC and the YWCA, coupled with longevity.

Umbrella groups:

Native Women's Association of Canada	www.**nwac-**hq.org/
YWCA Canada	http://www.ywcacanada.ca/
Women's Advisory Councils	www.swc-cfc.gc.ca/ (Status of Women Canada)
Manitoba	www.mwac.mb.ca/
New Brunswick	www.acswcccf.nb.ca/
Newfoundland and Labrador	www.pacsw.ca/
North West Territory	**www.statusofwomen.nt.ca**
Nova Scotia	**www.women**.gov.ns.ca/
Nunavut	www.qnsw.ca
Prince Edward Island	www.gov.pe.ca/acsw/
Quebec	www.csf.gov.gc.caq
Yukon	www.**womens**directorate.gov.yk.ca/**women**/**council**.html

Provincial, National, Municipal Councils of Women	http://www.ncwc.ca/
	http://www.mts.net/~pcwm/
Pauktuutit - Inuit Women's Association	http://www.pauktuutit.ca/
DAWN Canada (Disabled Women's Network)	www.dawncanada.net

Other Broad-reaching Women's Organizations

National Association for Women and the Law	http://www.nawl.ca/
Legal Education and Action Fund	http://www.leaf.ca/
University women's centres	
National Anti-Poverty Organization	http://www.napo-onap.ca/

A. With Respect to Training and Education

Activities and initiatives

- Compilation and gender review of Canadian college syllabi in emergency management and disaster studies

- Curriculum revision workshop for postsecondary faculty

- Invitational workshop for practitioners and researchers to develop a G&D research agenda for Canada, 2000-2015

- Gender caucus in CRHNet for communication and resource sharing

- Scholarship fund to support student travel with preference to gender scholars

- Competitive multi-disciplinary grants program to develop and strengthen research capacities across colleges and universities in the area of gender and disaster, with input from practitioners and women's organizations and other end users

- Research Chair in Disaster Risk Reduction with sensitivity to gender among the selection criteria

- Outreach through women's networks to recruit and support nontraditional women in emergency management training and higher education programs

- Gender-balanced training teams

Resources and tools

- Gender-sensitive Family Emergency Plans and other templates for use in training programs and the practical education of university students

- Training modules with gender perspective for emergency practitioners (selected), e.g. ESS, emergency disaster medicine, mental health or disaster child care professionals, etc.

- Gender-sensitive evaluation guidelines for reviewers, e.g. relevant professional journals or funding agencies

- Annual session at CRHNet on gender as a cross-cutting concern

- Electronic bibliography of G&D resources in Canada, including professional publications, resource guides, working papers, etc. with provisions for updating

- Special issues of relevant Canadian scholarly journals and emergency management publications, e.g. *Disaster Management Canada*

- Fact sheet of "talking points" on Gender and Disaster in Canada for circulation in the practice policy and research communities, with core recommended readings
- Science-based issues briefs or fact sheets on, e.g., Gender dimensions of climate change, Building resilience to disaster in aboriginal families, Working with girls and boys for safer communities, Women's economic recovery after disaster, Stress factors for responders: his and hers, etc.
- User-friendly publication on "Gender mainstreaming in Canadian DRR: An Action Guide for Practitioners working with At-Risk Populations"
- Solicit input from local, regional and/or national organizations knowledgeable about girls women at increased risk when planning and conducting trainings
- Develop gender-sensitive indicators for program evaluation
- Develop gender-sensitive indicators for assessing hazard and risk assessments, impact assessments, and long-term recovery assessments

B. With Respect to Policy Development and Practical Applications

Activities and initiatives

- Create a Women's Network for Disaster Resilience with representation across sectors, jurisdictions and regions
- Coordinate an action-planning National Consultation on Gender Mainstreaming Emergency Management, to include senior managers and organizational leaders in women's networks, emergency management organizations and related partner networks
- Demonstration projects in selected FTP and local contexts to develop or strengthen organizational resilience to disasters, targeting women's nonprofit organizations
- A review of website content (including illustrations and terminology) to identify and correct unintended bias
- Conduct a review of policy frameworks to identify opportunities for the elaboration and specification of gender equality
- Include representatives from women's groups at high risk on planning teams preparing local preparedness campaigns
- Exploit opportunities for highlighting gender on special occasions, e.g. Emergency Preparedness Week, Earth Day, International Women's Day, etc.

- ► Coordinated public awareness campaign to reach high-risk populations based on sustained consultation with specific groups, including representative groups of women at increased risk
- ► Consult with media experts, including women and media NGOs to develop and strengthen intended messages
- ► Identify target populations and address them directly in public awareness campaigns
- ► Long-term recovery outreach teams (mixed sex) and alternative mental health models such as healing circles
- ► Recognition through the GDNC of "good guys" (male or female) who are champions of gender mainstreaming.

Resources and tools
- ► Develop draft policy statement on gender mainstreaming in emergency management for consideration by high-level managers, e.g. in national emergency management organizations and other key voluntary and government actors
- ► Commission sector-specific policy briefs to be circulated to senior management at the territorial, provincial and municipal levels with attention to human resource practice, budget allocation, post-disaster services such as housing, financial recovery programs, and mental health counseling and related areas where gender disparities emerge
- ► Revision of existing tools to identify and address gender bias
- ► Development and promotion of gender-sensitive practice guides, e.g. "Does your program reach girls and women at risk? An organizational self-assessment"
- ► Develop gender specific preparedness resources such as "Women and their families in disaster: 10 steps to plan for the unexpected," or "Men talking with men about risk"
- ► Compilation of "good practice in gender mainstreaming disaster risk reduction in Canada," for electronic posting and circulation

C. With Respect to Developing Partnerships

Activities and initiatives

- ▶ Phased in action plan for outreach to women's organizations serving high-risk girls and women, as well as men's professional and service groups
- ▶ Phased-in action plan for reaching other potential related organizations and networks
- ▶ *C*ampus and community workshop series on such topics as "Making the connections" between Gender Equality, Disaster Reduction and (among others) Sustainable Development, Climate Change, Safe Cities, Rural Community Resilience, Violence Prevention
- ▶ Explore opportunities for collaborative, multidisciplinary action research projects with potential partners

Tools and resources

- ▶ Basic educational slide presentations on "Gender and Disaster: What's the Connection" for posting and circulation to potential partner organizations
- ▶ Basic "talking points" poster on "Gender and Disaster: What's the Connection" for distribution to potential partner organizations
- ▶ Portable photo display incorporating first-hand accounts from women and men in Canadian disasters, for use in conferences, workshops and community meetings
- ▶ Brochure demonstrating "how gender matters" in all high-risk populations and in diverse cultural settings, targeting practitioners at the local level
- ▶ Develop a workbook for women's organizations undertaking emergency planning, including specific guidelines and resources, information on individual preparedness, local emergency management resources and structures, and relevant gender and cultural issues

APPENDIX I:
SELECTED ON-LINE RESOURCES ON WOMEN, GENDER AND DISASTER
Prepared with attention to Canadian resources

Start here!

Gender and Disaster Sourcebook, an international compilation of case studies, policy frameworks, practice guides, academic papers, community education materials and more: http://www.gdnonline.org/sourcebook.htm

Some history--conference proceedings and recommendations

Gender and Disaster in Canada: New Thinking, New Directions, fall 2006, Cape Breton University: ttp://www.capebretonu.ca/ICEMS/Gender%20and%20Disaster%202006.pdf

Gender Equality and Disaster Risk Reduction Workshop, summer 2004, Honolulu, Hawai'i. Proceedings: http://www.ssri.hawaii.edu/research/GDWwebsite/pages/proceeding.html

Gender Equality, Environmental Management and Natural Disaster Mitigation. 2001. UN Division for the Advancement of Women, Expert Working Group meeting in Ankara, Turkey. Proceedings: www.un.org/womenwatch/daw/csw/env_manage/documents.html.

Reaching Women and Children in Disasters. Miami, FL, summer 2000. Available through the Gender and Disaster Network: http://online.northumbria.ac.uk/geography_research/gdn

Women in Disasters: Exploring the Issues, Vancouver, BC, spring 1998. Proceedings and recommendations: http://www.ssri.hawaii.edu/research/GDWwebsite/pdf/VancouverConf.pdf

Networks

Please visit the new website of the newly formed **Gender and Disaster Network of Canada:** *http://www.gdnc.ca/*. it is a work in progress and your ideas and materials are very welcome.

Gender and Disaster Network, an international network of academics, practitioners and policy makers in support of gender equality in disaster risk reduction. On-line publications and reports, member information, and listserv: http://www.gdnonline.org/

Disaster Watch, an initiative of the Huariou Commission and Groots, a global network of grassroots women's organizations, supports the growth & development of women - centered community based, post disaster response. Co-ordinated by Swayam Shikshan Prayog, India. For updates, resources, advocacy and action: http://www.disasterwatch.net/.
Also visit *Groots Canada* http://www.groots.org/members/canada.htm

UN position statements and publications:

Women, Disaster Reduction and Sustainable Development: http://www.unisdr.org/eng/risk-reduction/gender/Women,%20disaster%20reduction%20and%20SD.pdf

Making Risky Environments Safer: Women Building Sustainable and Disaster-Resilient Communities. Women 2000 and Beyond publication (April 2004, E. Enarson), UN DAW (available in French and Spanish): http://www.un.org/womenwatch/daw/public/w2000.html

Practice guides and tools:

It Can Happen To Your Agency! Tools for Change: Emergency Management for Women's Services (emergency planning manual for shelters). 2001, BC Association of Specialized Victim Assistance and Counseling:
http://www.pep.bc.ca/management/Women_in_Disasters_Workbook.pdf

Gender Equality and Humanitarian Assistance: A Guide to the Issues. CIDA, 2003:
http://www.acdi-cida.gc.ca/INET/IMAGES.NSF/vLUImages/Africa/$file/Guide-Gender.pdf

Women, Girls, Boys and Men: Different Needs, Equal Opportunities. Gender Handbook in Humanitarian Action, UN InterAgency Standing Committee, December, 2006:
http://www.humanitarianinfo.org/iasc/content/documents/subsidi/tf_gender/IASC%20Gender%20Handbook%20(Feb%202007).pdf

Weaving Gender in Disaster and Refugee Assistance, and accompanying Field Checklists. Report prepared by Interaction: American Council for Voluntary International Action. Washington, D.C. Includes conference papers and field practice checklists. Available on-line through InterAction: www.interaction.org. Also see Best Practices for Gender Integration in Organizations and Programs From the InterAction Community (1998) and the many additional gender mainstreaming resources offered to organizational members.

Working With Women at Risk: Practical Guidelines for Assessing Local Disaster Risk, E. Enarson et al. 2003, available in Spanish:
http://gdnonline.org/resources/WorkingwithWomenEnglish.pdf

Advocacy and Observation

Vulnerability of Women in Disaster Situations, Kate Wood, President of the Canadian Red Cross and Special Representative of the International Federation of Red Cross and Red Crescent Societies at the UN Commission on the Status of Women, in New York, March 7, 2005: http://www.redcross.ca/article.asp?id=012396&tid=001

Gender and Disaster Network Oral Statement to the Global Platform on Disaster Risk Reduction, Geneva, 2007: http://www.preventionweb.net/globalplatform/first-session/docs/Wednesday_Statements/Org_and_Other_Statements/GDN_Statement.pdf

Gender Equality in Disasters: Six Principles for Gender-Fair Relief and Reconstruction, Gender And Disaster Network, January 2005: http://www.gdnonline.org/resources/genderbroadsheet.doc

Women and girls last? Averting the second post-Katrina disaster. E. Enarson, 2006: http://understandingkatrina.ssrc.org/Enarson/

Women and Disaster Fact Sheet prepared for Sociologists for Women in Society, E. Enarson, 2006: http://www.socwomen.org/socactivism/factdisaster.pdfvvv

Battered Women in Disaster: Case Study of Gendered Vulnerability, E. Enarson, 1998. Transcript and related materials from on-line emergency management discussion, including planning guidelines for shelters, programs, and emergency management agencies: http://www.emforum.org/vlibrary/980603.htm

Regional Perspectives on Gender and Disaster Risk Reduction. Commentaries from participants in the Honolulu Workshop on Gender Equality and Disaster Risk Reduction, 2004: http://www.ssri.hawaii.edu/research/GDWwebsite/pdf/WorkingGroups/COMMENTARIES.pdf

Case studies [and see the bibliography of this paper]

The Needs of Women in Disasters and Emergencies. R. Wiest, University of Manitoba, Jane Mocelli and Thandiwe Motsisi, 1994. Report for the UN Development Programme and the Office of the US Disaster Relief Coordinator: http://online.northumbria.ac.uk/geography_research/gdn

See the *Gender and Disaster Sourcebook, section 7,* for citations to numerous empirical studies around the world on the gender dimensions of hazards, disasters and disaster risk reduction: http://www.gdnonline.org/sourcebook.htm