

ABSTRACT

Issues of marginalisation specific to gender and sex minorities include the loss of safe spaces, religious stigmatisation, physical and verbal abuse and the lack of disaster risk reduction policies to adequately address their needs. The majority of work regarding gender has focused on vulnerabilities and outcomes for women, heavily influenced by a Western perception of gender as being binary; women and men. This concept fails to incorporate the diversity of gender identities, particularly those in non-Western settings. Current disaster risk reduction policies and frameworks fail to recognise the experiences, needs and capacities of sex and gender minorities. It has been argued that some socio-economic development agencies consider sex and gender as requiring containment and control, rather than being acknowledged or embraced and contributing positively to society. Gender and sex minority groups can play an equal role in supporting their communities. A review was completed that consolidates current global literature on the experiences of sex and gender minorities affected by disaster events. This information may be used to guide disaster risk reduction policy, acknowledge the experiences and needs of people with different sexualities and gender identities, and improve outcomes for these people.

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Pride and prejudice: LGBTIQ community responses to disaster events worldwide

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Introduction

It is widely acknowledged that sex and gender minorities experience social and political marginalisation in most societies. The extent of this is highly variable, differing across countries, states and geopolitical regions. It is dependent on applicable laws, politics and social values (Gorman-Murray *et al.* 2017). Such marginalisation results in forms of discrimination such as psychological and physical abuse, sexual assault, exploitation, shunning, forced heterosexual marriage and conversion therapy (Kahn *et al.* 2018). This can lead to social and political isolation and a higher prevalence of mental health issues (Kahn *et al.* 2018, Yamashita, Gomez & Dombroski 2017). Having legal rights and protection does not necessarily translate into exercising those rights, so discrimination may be present where gender and sex minorities have legal protection from discrimination (Sauer & Podhora 2013). According to Gorman-Murray and colleagues (2017), gender minorities face higher levels of discrimination than cisgendered minorities (where biological sex matches gender identity and sexual orientation is not heterosexual). This is because their gender identities do not fit neatly into the traditional gender-binary model, which emphasises biological sex and physical gender representations.

The vulnerability of a population, especially in times of emergency and crisis, can exacerbate aspects of marginalisation. This can amplify existing vulnerabilities and social issues. Studies by Gorman-Murray and colleagues (2017) identified several issues specific to gender and sex minorities, including the loss of safe space, stigmatisation, physical and verbal abuse and the failure of disaster risk reduction (DRR) policies to adequately address the specific needs of these minorities, leading to further exclusion and marginalisation. Additionally, the vulnerability of these groups is intersectional and influenced by other factors such as race, class, income and dis/ability (Stukes 2014, Haskell 2014, Albuero-Canete 2014).

Marginalised groups often develop their own support systems and coping mechanisms using available resources (McKinnon, Gorman-Murray & Dominey-Howes 2016, Gorman-Murray *et al.* 2017). Although ways to improve resilience may be universal, such as emotional regulation, other activities such as building family and school relationships and community bonding may not be appropriate due to social rejection (Beasley, Jenkins & Valenti 2015). During emergencies, specific tools and approaches that people employ will determine their level of resilience.

Research benefits and contribution

The majority of work regarding gender and disaster has focused on women, heavily influenced by the Western perception of gender existing as a binary;

women and men (Gaillard *et al.* 2017). This traditional concept of gender is limiting and fails to incorporate the diversity of gender identities, particularly those in non-Western settings (Petchesky 2012, Gaillard *et al.* 2017, Gaillard, Gorman-Murray & Fordham 2017). Researchers agree that current DRR policies and frameworks fail to incorporate the experiences, needs and capacities of sex and gender minorities (Dominey-Howes, Gorman-Murray & McKinnon 2014; Gaillard, Gorman-Murray A & Fordham 2017). Gaillard, Gorman-Murray & Fordham (2017) identified that the *Hygo Framework for Action 2005–2015* and the *Sendai Framework for Disaster Risk Reduction 2015–2030* include gender as a significant consideration. However, the assumption is for the needs of women, and heterosexual women in particular (Gaillard, Gorman-Murray & Fordham 2017). It has been argued that some socio-economic development agencies consider sex and gender minorities as requiring containment, rather than being embraced as central to human experience and having the potential to positively contribute to society (McSherry *et al.* 2015).

The review showed there was a significant lack of research undertaken specific to gender and sex minorities in disasters. Dominey-Howes, Gorman-Murray and McKinnon (2014) reviewed five pre-2012 case studies and identified significant issues. To date, little seems to have progressed. This review aims to consolidate current literature on the experiences of sex and gender minorities to help guide the DRR policy, acknowledging the experiences and needs of people with diverse sexualities and gender identities.

Methodology

A comprehensive search was conducted using the MEDLINE (1985-7/10/2018) ProQuest (1938-7/10/2018), and PsychINFO (1946-7/10/2018) databases. A combination of the following terms were used: 'disaster'; 'sexuality'; 'non-binary'; 'lesbian'; 'gay'; 'homosexual'; 'homosexuality'; 'bisexual'; 'transsexual'; 'transgender'; 'transgendered'; 'intersex'; 'two-spirit'; 'two spirit'; 'pansexual'; 'polysexual'; 'queer'; 'genderqueer'; 'same sex relationship'; 'same-sex relationship'; 'sexual minority'; 'gender minority'; 'LGBT'; 'LGBTI'; 'LGBTQ'; 'LGBTIQ'; 'LGBTQI'; 'LGBTIQA'; 'LGBTQIA'; 'LGBTQ+'. All search terms were combined with Boolean terms and truncation symbols. Results were limited to peer-reviewed, English language publications. Reference lists of all relevant publications were reviewed to identify additional publications, including grey literature. The title and abstract of all records were reviewed by an independent author to identify potentially relevant publications. All relevant publications were read in full.

Results

The search returned 207 potentially relevant publications; 23 from the MEDLINE database, 35 from the PsychINFO database and 149 from the ProQuest database. There were 27 additional publications identified

through searches of references lists. After duplications were removed, a total of 172 publications remained. All 172 publications were reviewed based on title and abstract and 127 publications were excluded. As a result, 45 publications were selected for full-text review. Three publications were excluded because gender and sex minorities were not the focus of the research. Four were excluded as they did not relate to disaster events. This left 38 publications selected for inclusion in the final review.

Discussion

Increasing discrimination and vulnerability

Gender and sex minorities face difficulties in gaining acceptance from societies worldwide (Stukes 2014; Dominey-Howes, Gorman-Murray & McKinnon 2014). Increased rates of discrimination in various forms have been experienced and described in disaster events. These are summarised in Table 1.

Urbatsch (2016), Stukes (2014), Haskell (2014) and Richards (2010) describe that attitudes towards homosexuality are linked with the condemnation of sex minorities by conservative religious groups. This was evident after the 9/11 World Trade Centre attacks and Hurricane Katrina. They noted that this is a reflection of the concept of divine retribution; human suffering being a consequence of sin. Urbatsch (2016) found a measurable increase in negative attitudes towards homosexuals after disaster events, if only temporary. The International Gay and Lesbian Human Rights Commission (IGLHRC) and SEROvie¹ (2011) found similar occurrences after the Haiti earthquake, where the gay community was accused of 'calling down the wrath of God'. Paine (2018) presented similar findings, stating some faith leaders held discriminatory attitudes towards LGBTIQ people, 'legitimising hateful and violent behaviour' towards them. Haskell (2014) argues these concepts create unique social challenges in emergency and crisis situations.

Negative attitudes and discrimination against gender and sex minorities manifest in various ways. This includes verbal abuse, noted by Yamashita, Gomez and Dombroski (2017), where a transgender person in Japan was called a 'cross-dressing deviant fag' by a volunteer. Of concern are reports of violence and sexual abuse, described by Knight and Welton-Mitchell (2013) after floods in Nepal, and Pincha and Krishna (2008) after the tsunami in India. Other noteworthy examples are described by IGLHRC and SEROvie (2011) after the Haiti earthquake; the rape of a lesbian by eight men and the beating by a crowd of an MSM² person who dressed as a woman to try and obtain food. Also reported was 'corrective rape' against female-identified people. D'Ooge (2008) describes a

1 A Haitian community organisation that provides services to sex and gender minority groups.

2 Men who have sex with men. This term is not necessarily indicative of sexual identity.

Table 1: Publications describing the vulnerability of and discrimination against gender and sex minorities in disasters.

Year	Location	Event	Publication author(s) and date
2001	USA (New York)	World Trade Centre 9/11 attacks	Eads 2002
			Espinosa <i>et al.</i> 2010
			Urbatsch 2016
2004	India	Indian Ocean tsunami	Pincha & Krishna 2008
2005	USA (New Orleans)	Hurricane Katrina	Leap, Lewin & Wilson 2007
			D'Ooge 2008
			Richards 2010
			Petchesky 2012
			Haskell 2014 Stukes 2014
2008	Nepal	Flood	Knight & Welton-Mitchell 2013
2009	Samoa	Tsunami	Gaillard <i>et al.</i> 2017
2010	Indonesia	Mt Merapi volcanic eruption	Balgos, Gaillard & Sanz 2012 Gaillard <i>et al.</i> 2017
	Haiti	Earthquake	IGLHRC and SEROVie 2011 Petchesky 2012
2011	Australia (Brisbane)	Flood	McKinnon, Gorman-Murray & Dominey-Howes 2016 McKinnon, Gorman-Murray & Dominey-Howes 2017 Gorman-Murray <i>et al.</i> 2018
	New Zealand (Christchurch)	Earthquake	McKinnon, Gorman-Murray & Dominey-Howes 2016 McKinnon, Gorman-Murray & Dominey-Howes 2017
	Japan	Earthquake and tsunami	Yamashita, Gomez & Dombroski 2017
2012	Samoa	Cyclone Evan	Gaillard <i>et al.</i> 2017
2013	Philippines	Typhoon Haiyan	Ong 2017
2014	Nepal	Earthquake	Sthapit 2015

transgender woman being arrested and detained by police for four days after taking a shower in the women's bathrooms at an evacuation centre after Hurricane Katrina. Petchesky (2012) describes the sexual and gender-based violence against transgender people committed by aid workers after the Haiti earthquake.

Policy deficiencies

Dominey-Howes, Gorman-Murray and McKinnon (2014, 2016) and Cianfarani (2012) found that gender and sex minorities are largely absent from DRR policy. Dominey-Howes, Gorman-Murray and McKinnon (2016) note that in Australia, the exclusion of these groups is likely due to omission rather than deliberate discrimination. This suggestion is possibly applicable to other jurisdictions where sex and gender minorities are granted similar legal rights regarding protection from discrimination. However, Gaillard, Gorman-Murray and Fordham (2017) acknowledge there are other challenges in countries where activities perceived as non-conforming are illegal. Regardless of legal status, their needs remain invisible. IGLHRC and SEROVie (2011) found gender-restrictive policies in Haiti prevented all-male households from accessing relief supplies; women were prioritised. Yamashita, Gomez and Dombroski (2017) found in Japan that people in same-sex relationships had difficulty visiting partners in hospital and were unlikely to be informed of a partner's death and did not qualify for public housing due to restrictive definitions of 'household' or 'relatives'. After Hurricane Katrina, Stukes (2014), Leap, Lewin and Wilson (2007) and Haskell (2014) describe the denial of resources and the physical separation of same-sex couples and families being a result of restrictive definitions of 'family', indicating they were not eligible or prioritised for housing assistance. Haskell (2014) also noted same-sex partners were not guaranteed hospital visitation rights and had no power to make medical decisions.

Balgos, Gaillard and Sanz (2012) and Gaillard, Gorman-Murray and Fordham (2017) found the *warias* of Indonesia (a group for which western definitions of gender cannot be easily applied) were effectively invisible after the volcano eruption, as evacuees were listed as either male or female. They generally found accommodation with friends rather than in evacuation centres. Similar findings are described in Dominey-Howes, Gorman-Murray & McKinnon (2014) and McSherry and colleagues (2015) regarding *baklas* of the Philippines (also falling outside western gender definitions) who were either denied relief supplies or experienced harassment when seeking supplies. This was also the case for the *aravanis* of India, as described by Pincha and Krishna (2008), where these people and their families were ineligible for government compensation, did not receive relief assistance, and were excluded from evacuation shelters.

Consequences

The consequences of discriminatory attitudes, combined with exclusionary policies, are significant barriers to

accessing disaster relief, directly affecting health and wellbeing. Gorman-Murray, McKinnon and Dominey-Howes (2014), Gorman-Murray and colleagues (2017) and Gorman-Murray and colleagues (2018) note the actual experience of discrimination is not required to develop a reluctance to access support, everyday experiences of discrimination are sufficient. Espinosa and colleagues (2010) found that after 9/11, gay and bisexual men were more likely to engage in risk-taking behaviours such as unprotected sex and substance use if their partner had died. Cruess and co-authors (2000), found that HIV+ gay men experienced negative physical and emotional health outcomes following Hurricane Andrew in 1992. Yamashita, Gomez and Dombroski (2017) also described people avoiding using public hygiene facilities in Japan, impacting the health of transgender evacuees. Sthapit (2015) and Knight and Welton-Mitchell (2013) found that Nepalese people whose identity documents indicated a different gender to how they presented were excluded from relief camps and were unable to receive medical care or enrol in school. Knight and Welton-Mitchell (2013) also mention the experience of one natuwa in Nepal whose family was given fewer supplies than others due to their identity.

There have been documented cases of these people significantly altering their behaviour in order to access support and maintain safety. IGLHRC and SEROvie (2011), state that some men adopted a 'more masculine demeanour' to avoid harassment and increase their access to services. Leap, Lewin and Wilson (2007) described how a lesbian couple presented as sisters in order to access support. Cianfarani (2012) found that discrimination and access to services during disasters are significant concerns in Canada, although the lived experience of this has not been researched.

Destruction of safe spaces, communities and support

Research has detailed the importance of safe spaces for the wellbeing of all people, including gender and sex minorities. Dominey-Howes, Gorman-Murray and McKinnon (2014), Gorman-Murray and Dominey-Howes (2014), Gorman-Murray and colleagues (2014), Haskell (2014) and Gorman-Murray and colleagues (2017) note the increased vulnerability of these groups is exacerbated due to the destruction of privacy, personal spaces, and community centres; evacuation centres are particularly problematic. McKinnon, Gorman-Murray and Dominey-Howes (2017), Gorman-Murray and colleagues (2017) and Haskell (2014) describe that the loss of a home may equate to a loss of ability to avoid hostilities, and may mean a loss of ability to safely express personal identity. In the 2011 Brisbane floods, it was documented that the presence of disaster relief volunteers in a gay man's home was a difficult experience. Although they likely had good intentions, they disposed of items central to the owner's identity, contributing to feelings of marginalisation. Knight and Welton-Mitchell (2013) found the loss of safe spaces to be problematic in Nepal, where gender minorities faced additional discrimination when

moving into new communities. Comparable occurrences are documented by McKinnon, Gorman-Murray and Dominey-Howes (2017) in New Zealand, where a gay couple moved their business to a new area and suffered homophobic abuse and vandalism. Similarly, Richards (2010), and Yamashita, Gomez and Dombroski (2017) note that disaster events force the coming-out of gender and sex minorities due to a loss of privacy, which adds to the trauma experienced.

The breakdown of communities was described by IGLHRC and SEROvie (2011) in Haiti, where the destruction of community centres and services had a significant impact on people who used them for health and social support. This was also documented by Leap, Lewin and Wilson (2007), after Hurricane Katrina, as large numbers of people were forced to relocate from their neighbourhoods. This intensified the already prevalent issue of housing insecurity, as the *Louisiana Equal Housing Opportunity Act* permitted discrimination based on gender and sexuality (Haskell 2014). Richards (2010) and D'Ooge (2008) found that tourism suffered after Hurricane Katrina and gay tourist areas were not prioritised in rebuilding efforts.

Of significance is the experience of people identifying as transgender. Yamashita, Gomez and Dombroski (2017) note that the disruption of access to materials that enables gender performance (cosmetics, clothing, medication) and the consequences of the perception of others are significant. One Japanese transgender evacuee avoided using hygiene and laundry facilities due to concerns regarding their perceived gender. Similar issues are described by Gorman-Murray and colleagues (2018), in Australia and New Zealand, regarding access to medication and transgender-specific health advice, as well as disruptions of transgender-friendly shared accommodation.

Organisational relationships

Relationships between emergency response organisations and gender and sex minorities can impact on use of those services. Stukes (2014) found there were few organisations openly supportive of LGBTIQ people during Hurricane Katrina. Gaillard and colleagues (2017) noted that organisations will 'include gender programs as a sign of accountability to western donors' and claim the mainstreaming of gender, but this is mainly restricted to cisgendered women. Sthapit (2015) found this was true during the 2010 earthquake in Nepal, with non-government organisations being primarily accountable to donors rather than communities they serve. Diverse family structures and gender roles of Nepal were ignored. In Haiti, IGLHRC and SEROvie (2011) found there was concern of homophobia being 'exported' via religious missionaries. In Australia, Dominey-Howes, Gorman-Murray and McKinnon (2016) found the New South Wales Government employs faith-based organisations to provide emergency-related services. Some of these organisations have actively campaigned for the right to discriminate against gender and sex minorities. Currently, faith-based discrimination against

gender and sex minorities in Australia is legal, although whether this actually occurs was not discussed. Paine (2018), an employee of Christian Aid, authored a paper about the organisation's attitude towards the rights of LGBTIQ people, which was historically exclusionary. The push to become more liberal was met with substantial internal resistance, as well as the concern that financial donors would withdraw. This was the case with World Vision USA when they employed people in same-sex marriages. In the face of this resistance, Christian Aid 'takes a moral position on the treatment of LGBTI[Q] people, [however] it does not seek to take a moral position on sexuality or gender identity' (Paine p.169).

Ong (2017) describes different relationships between aid organisations and communities affected by Typhoon Haiyan. In this case, gay foreign aid workers created safe spaces for local sex minorities. However, also described were problematic situations of gay foreign aid workers engaging in sexual relations with local people. Although these situations may have been mutually beneficial, they are generally frowned upon. Stukes (2014) describes in detail the contributions and successes of the (very few) LGBTIQ-friendly organisations that worked to improve outcomes after Hurricane Katrina.

Resilience factor

As described by Gaillard, Gorman-Murray and Fordham (2017), Gorman-Murray, McKinnon and Dominey-Howes (2016), Dominey-Howes, Gorman-Murray and McKinnon (2014) and Gorman-Murray and colleagues (2014), vulnerability and resilience are not mutually exclusive; they can be demonstrated simultaneously. Despite discrimination and exclusionary policies, sexual and gender minorities draw on informal networks for support, rather than accessing mainstream services. This was described in the United States of America (Leap, Lewin & Wilson 2007; D'Ooge 2008, Stukes 2014), Indonesia (Balgos, Gaillard & Sanz 2012), the Philippines (Ong 2017) and Australia (McKinnon, Gorman-Murray & Dominey-Howes 2016; Gorman-Murray *et al.* 2017; Gorman-Murray *et al.* 2018). Additionally, Ong (2017) and Beasley, Jenkins and Valenti (2015) note the importance of online communities for these minority groups to maintain a sense of community and connection. Dominey-Howes, Gorman-Murray and McKinnon (2014) suggest the importance of strong community connections between sexual and gender minorities during disasters is particularly worthy of attention in research and policy-making.

A survey conducted by the Queensland Association for Healthy Communities one year after the 2011 Brisbane floods showed over 50 per cent of respondents self-identifying as a sex or gender minority avoided official support services due to uncertainty or anxiety (Gorman-Murray, McKinnon & Dominey-Howes 2016). However, LGBTIQ community organisations do compensate for shortfalls in support provided by mainstream services, including finding safe accommodation and psychosocial support. This has been documented in the United States of America (Stukes 2014, Eads 2002), Haiti (IGLHRC and



Discrimination can lead to a higher prevalence of mental health issues compounded by social and political isolation.

Image: Eric Brumfield

SEROvie 2011, Petchesky 2012), and Australia and New Zealand (Gorman-Murray *et al.* 2014). Gorman-Murray and colleagues (2017) also note that during the Brisbane floods of 2011, people of diverse sexualities and genders would have preferred to access support through LGBTIQ groups but were unable due to geographical barriers such as distance and physical accessibility.

Contribution to DRR

People of diverse genders and sexualities support disaster relief efforts in a number of ways (Stukes 2014). Gaillard and colleagues (2017) and McSherry and colleagues (2015), regarding the *fa'afafine* of Samoa, and Balgos, Gaillard and Sanz (2012), regarding gender minorities in non-Western settings, identified that the capacity of these groups was a major factor in their ability to contribute to disaster relief activities. They were able to perform tasks traditionally assigned to both men and women, provided assistance to other people, and could allocate more time to relief activities (being less likely to care for children). Ong (2017) noted that after Typhoon Haiyan, local gay men were appointed to leadership positions in accountability and communications departments for large aid organisations. This may have been due to their ability to communicate effectively with various populations.

Inclusive policy

Given widespread exclusion of gender and sex minorities from DRR policy, little research has been conducted into how inclusive policy changes would benefit communities. In Indonesia, following the 2010 Mount Merapi eruption,

McSherry and colleagues (2015) found that the *baklas* had specific advantages in terms of social networking and the ability to support a range of activities, particularly as 'social agents'. This recognition and their engagement ultimately served to reduce discrimination and anti-*bakla* harassment. In West Hollywood, California (Wisner, Berger & Gaillard 2017) showed minority communities were directly involved in the development of local DRR policy. There has been a shift in perception from LGBTIQ people being vulnerable and 'at-risk', to being people with agency and the capacity to contribute to risk reduction activities. The appointment of a transgender woman to the position of chairperson of the public safety commission assisted in driving community empowerment and participation rates in DRR activities. Cianfarani (2012) also found that inclusive policy may assist in reducing vulnerability, and emergency management communities would benefit from building relationships with LGBTIQ organisations.

Recommendations

The steady growth of research in this area must continue

Although currently limited, research in this area is expanding and exploring issues relating to LGBTIQ experiences in disasters more deeply. This will assist in guiding DRR policy and practice to reduce vulnerability and improve the provision of appropriate services.

The needs and capacities of gender and sex minorities must be acknowledged in DRR policy

A policy shift towards gender inclusivity rather than gender equality that may reduce the vulnerability of gender minorities, especially in non-Western contexts. The removal of heteronormative policies, particularly regarding restrictive definitions of family and gender may significantly improve outcomes for these groups.

Disaster response organisations must provide inclusive services and build relationships with gender and sex minorities

This inevitably involves developing and maintaining an awareness of LGBTIQ issues and how service providers can work to reduce vulnerability. Significant resistance may be encountered in faith-based organisations and in jurisdictions where homosexuality is criminalised. Further research into improving inclusivity in these contexts may be beneficial.

LGBTIQ organisations need acknowledgment for their role in DRR

These organisations have demonstrated a willingness and capacity to contribute to emergency response. Prioritising the resumption and building of their services, while using already established networks to build DRR capacity, may allow the provision of targeted services,

especially where there are barriers to accessing mainstream support.

Community engagement

Working with these communities may assist in the development and implementation of plans and policies for the provision of appropriate services. This may also assist to increase participation rates in DRR activities.

Future research directions

Research shows that gender and sex minorities may be affected by race, disability and socioeconomic status. Exploring this may lead to improvements in services for people particularly vulnerable. Additionally, widespread deficiencies in inclusive policy creates opportunities to explore how policy changes may improve outcomes.

Conclusion

People in gender and sex minorities face discrimination in society every day. During disaster events, they frequently experience discrimination, harassment, violence and denial of services. The destruction of safe spaces can contribute to greater marginalisation. This creates substantial barriers to accessing adequate support, which can lead to negative outcomes. These situations are compounded by exclusionary policy and poor relationships between emergency response organisations and the LGBTIQ community. Despite such challenges, these people demonstrate resilience and the capacity to make significant contributions to disaster risk reduction. The coexistence of vulnerability and resilience warrants acknowledgment in policy-making and by response organisations. While not an easy task, research in this field will assist in developing and guiding inclusive DRR policy.

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