Gender and Emergency Management Action Checklist

Checklist completed on: Checklist completed by:

	1. Engagement in Disaster and EM				
Cons	ideration	Yes	No	Action to be completed by [agencies /orgs]	Comments
1.1	Have you identified and included community leaders that are representative of women and other gender identities?			PlanningResponseRecovery	
1.2	Have you identified ways to involve women, and everyone of diverse gender and sexual identities in all aspects of emergency management?			PlanningResponseRecovery	
1.3	Do you have strategies for including and supporting people with carer responsibilities so they can fully participate in consultations and activities, (noting that the majority of primary carers are currently women)?			PlanningResponseRecovery	
	2. Planning				
Cons	ideration	Yes	No	Action to be completed by [agencies/orgs)	Comments
2.1	Have you investigated the demographics and characteristics of the communities affected by disaster to inform all stages of managing emergencies?			 Planning 	
2.2	Have you identified people/organisations with gender expertise (women- specific and LGBTIQA+) to assist with your EM strategies?			PlanningResponseRecovery	
:	3. Medication and Materials				
Cons	ideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
3.1	Have you accessed gender and anti- discrimination training for EM employees and volunteers?			PlanningResponseRecovery	
3.2	Have you provided gender and anti- discrimination training to security staff?			PlanningResponse	

3.3	Have you provided domestic violence training and education to employees and volunteers?			PlanningResponseRecovery	
3.4	Have you informed evacuation centre managers of existing restraining/ intervention order protocols in evacuation centres?			PlanningRecovery	
4	4. Documentation/Technical				
Cons	ideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
4.1	Do you offer gender identification options in forms or documents of "Male, Female, Non-binary, Prefer a different term (please specify) Prefer not to answer"?			PlanningResponse	
4.2	Do you offer gender identification options in verbal interviews? (for example, consider asking, 'How would you describe your gender?' or 'What is your gender identity?')			PlanningResponse	
4.3	Do you encourage open communication and safe expression of emotion?			PlanningResponseRecovery	
	5. Program Design/Resourcing				
Cons	ideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
5.1	Have you taken advice from specialist agencies to develop, or support, a wide range of gender specific programs or groups in the emergency relief and recovery period (e.g. women's support groups, men's sheds, specific LGBTIQA+ programs)?			Planning	
5.2	Funding: Have you considered gender in budgeting, (for example: allocation of resources to ensure continuity of services (i.e. women's refuges, men's sheds, etc)			Planning	
5.3	Have you collected, or do you have access to, gender-disaggregated data for analysis, reporting and program development?			• Planning	
5.4	Have you reviewed (and updated) communications and resources, and checked for references to gender stereotypes or assumptions about capability based on gender?			PlanningResponseRecovery	
5.5	Have you amended communications and resources to ensure different needs of women, men, and everyone of diverse gender identities are covered?			• Planning	

5.6	Have you included information about domestic violence in information about emergencies? (for example: our postcard, flyers, pamphlets, advertising, 1800RESPECT – see video here http://bit.ly/29QjGWh)			PlanningResponseRecovery	
5.7	Have you investigated ways of increasing counselling/mental health services and support to men in the emergency relief and recovery period, with the knowledge that men are often reluctant to seek formal counselling?			• Planning	
5.8	Have you addressed the increased risk of domestic violence in emergency recovery planning?			PlanningRecovery	
5.9	Have you assessed the ability of the state/territory's resources to respond to domestic violence post-disaster (for example, domestic violence training for first responders)?			Planning	
5.10	Have you identified and engaged domestic violence workers in recovery efforts and recovery committees?			PlanningResponseRecovery	
5.11	Have you identified and engaged domestic violence specialists to speak at community meetings?			PlanningResponseRecovery	
ϵ	i. Facility Design				
Consi	deration	Yes	No	Action to be completed by [agencies/orgs]	Comments
6.1	Public evacuation /relief venues: Have the particular needs of women, men, and everyone of diverse gender and sexual identities, including LGBTIQA+ people been considered?			PlanningRecovery	
	(Consider facilities such as bathrooms, toilets and showers marked Female, Male and 'All Genders' to reduce fears and vulnerabilities).				
6.2	Have you considered: Banning Drinking advertising in relief and recovery locations? Holding meetings in alcohol-free venues? Holding alcohol-free community events?			Planning	

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This page is provided for y	our notes.		

Two (2) Addenda are included on the following pages.

These were developed following acceptance of the national GEM Guidelines at the conclusion of the 'All on Board' program (funded by the Commonwealth Government), and are provided for your additional information.

The GEM Guidelines will undergo a comprehensive update in 2024.



ADDENDUM 1

Addressing the needs of pregnant and breastfeeding mothers and those caring for infants and small children Checklist

Checklist completed on:	Checklist completed by:	

Consideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
Have you provided training of emergency management employees and volunteers to recognise the specific needs of pregnant women, women with childrearing and breastfeeding responsibilities; as well as the specific needs of those caring for infants and small children?			 Planning 	
Have you ensured training and leadership in WHO Code compliance to volunteers?			 Planning 	
Have you ensured emergency nutrition and hydration for pregnant and breastfeeding women, and non- breastfeeding mothers and carers?			PlanningResponse	
Have you investigated strategies to prevent pressure on women to stop breastfeeding and begin or increase formula feeding?			PlanningResponse	
■ Have you ensured infant feeding is available, including skilled breastfeeding assistance, appropriate access infant formula and other resources for formula feeding after assessment of need by a suitably skilled health worker?			PlanningResponseRecovery	
Have you engaged community maternal and child professionals in the delivery of quality care to mothers and carers of infants and small children in emergencies?			PlanningRecovery	
Have you ensured sanitary and nursing provisions are available to pregnant and breastfeeding women?			PlanningResponse	
Have you ensured disinfection facilities are available for those preparing bottles for infants?			PlanningResponse	
 Have you provided quiet and private breastfeeding rooms or areas for breastfeeding women. 			PlanningResponse	

ADDENDUM 2

Acting on Gendered Needs in Evacuation and Relief Centres Checklist 1

Checklist completed on: Checklist completed by:

Consideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
Do you have a question on your intake form that asks everyone if they have an intervention order for them and/or their children?			PlanningResponse	
If women and children (and others) have intervention orders, do you have a clear process to follow and ways to contact police and/or Family Violence support?			PlanningResponse	Have you included local Family Violence experts and FV Police Liaisons in your Emergency Management Planning Committees?
Have you considered designating specific rooms of spaces as 'safe areas' for those with intervention orders and providing toys for children in these areas?	r		PlanningResponse	Note that women and others may not feel safe in shared spaces.
Have you allocated safe, private, and separate spaces for women, men and people of diverse gender and sexual identities, to contact services such as family violence services, etc.? (1800 RESPECT, Men's referral line, Qlife)			PlanningResponse	Please note that women and people of diverse gender and sexual identities may be reluctant to engage with faith-based support, police, and emergency services due to history or perception of discrimination.
Have you allocated safe and separate places and toilets for women and people of diverse gender and sexual identities?			PlanningResponse	Good practice ensures lockable toilets for women, men, and people of diverse gender and sexual identities at a minimum. ²
Have you ensured several toilets have 'All genders' signs (in addition to Female and Male toilets)?			PlanningResponse	*Signs and further information available <u>here</u>
Have you considered placement of baby change tables/rooms and nappy waste bins, to allow family, friends, or caregivers of all genders to change babies' nappies in a safe environment?			PlanningResponse	
Are there other ways to increase safety for women, men and people of diverse gender and sexual identities in the evacuation and relief centre?			PlanningResponse	As experts in your community, you are best placed to design appropriate and effective local approaches. Other guidelines may be relevant for people of al ages, abilities, and backgrounds Refer to footnote 2.

Me	edication and Materials				
Co	nsideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
	Is there a way to provide access for sexual and reproductive health prescriptions/ medications if people have left them at home (contraceptives, PrEP, HIV, hormones, etc.)?			PlanningResponse	For example, through telehealth, an identified local GP and pharmacist, etc.
•	On your intake form do you enquire if individuals need to store medication? And can you safely refrigerate them?			PlanningResponse	For example, refrigeration of hormones, locked cabinets, etc.
	Are sanitary items (pads, tampons) included as normal items in the First Aid kit and available at the evacuation/relief centre?			PlanningResponse	
•	Are processes in place to appropriately dispose of sanitary items? Consider the placement of disposal facilities in all toilets.			PlanningResponse	
Inc	clusive Services				
Сс	onsideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
•	Have you included information or website links about family violence services, referral services, etc. to everyone accessing the evacuation or relief centre?			PlanningResponse	Best practice suggests a universal approach where such information and posters are readily seen by everyone, e.g., on walls, on intake table, etc.
	Have you included the Rainbow Flag, Rainbow lanyards, posters, brochure with same-sex couples etc. to indicate inclusion and welcome for people of diverse gender and sexual identities?			PlanningResponse	
•	Are processes in place to respond to gender- based complaints of harassment by staff, volunteers, or other attendees/ evacuees? Is this process advised during intake procedure?			PlanningResponse	Best practice is that confidentiality is prioritised, although this may be difficult in evacuation conditions.
Em	nergency Births				
Сс	onsideration	Yes	No	Action to be completed by [agencies/orgs]	Comments
•	Have arrangements been made for emergency births in your evacuation/relief centre? Have you considered what suitable room, resources and support will be available?*			PlanningResponse	Earthquakes [and other disasters] have been associated with increased risk of pre-term birth and other adverse pregnancy outcomes. ³

¹ This checklist should be read in conjunction with the accompanying relevant sections of the broader GEM Guidelines and Literature Review

³ Hawkins, G., Gullam, J., & Belluscio, L. (2018). The effect of a major earthquake experienced during the first trimester of pregnancy on the risk of preterm birth. Australian And New Zealand Journal Of Obstetrics And Gynaecology, 59(1), 82-88. doi: 10.1111/ajo.12797

Our appreciation to the City of Casey for piloting this checklist.



² This checklist is developed with the understanding that public spaces will comply with legislative requirement for accessibility.