

THE LGBTI COMMUNITY IN THE 2011 QUEENSLAND FLOODS: MARGINALITY, VULNERABILITY AND RESILIENCE

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ABSTRACT

Vulnerability to disasters is not inherent to particular social groups but results from existing marginality. Marginalisation from social, political and economic resources and recognition underpins vulnerability and impedes recovery. Yet concurrently, disasters can reveal the resilient capacities of some marginal groups, who often develop specific means of coping with marginality. This paper applies these perspective to the experiences of LGBTI (lesbian, gay, bisexual, trans, intersex) sexual minorities during the 2011 disasters in Queensland, Australia. The findings come from a survey conducted by the Queensland Association for Healthy Communities (QAHC) a year after the floods. An agreement was established between QAHC and university researchers to facilitate data analysis. This paper analyses some key findings using the concepts of marginality, vulnerability and resilience. The data reveal vulnerability due to social and political marginality, including discrimination and issues of access to assistance, but simultaneously examples of resilience borne by self-reliance in a context of marginality.

KEYWORDS

LGBTI community; disaster; Queensland floods; marginality; vulnerability; resilience.

1. INTRODUCTION

Vulnerability to disasters is not an inherent characteristic of social groups but a product of existing societal marginality. Certain groups are marginalised from social, political and economic resources and recognition, which underpins their vulnerability to disasters and impedes recovery. Disaster research and management must therefore consider not only vulnerabilities made evident during a disaster, but account for extant processes of marginalisation that permit vulnerability and heighten adversity during a disaster.¹ Simultaneously, such situations can also

reveal the unexpected resilient capacities of marginal populations, since these individuals and groups often develop specific ways of dealing with experiences of marginality. The concept of marginality is thus useful for understanding the socially differentiated impacts of disasters and assisting the efficacy of emergency management and disaster response and recovery.

This paper applies these ideas about marginality, vulnerability and resilience to the experiences of LGBTI (lesbian, gay, bisexual, trans, intersex) sexual minorities during and after the 2011 Queensland floods. LGBTI populations are socially and politically marginalised in most societies, although this varies between and within nation-states according to prevailing laws, politics and social mores. Even in twenty-first century Australia, LGBTI people continue to experience marginalisation, and globally there is little work on LGBTI experiences during disasters (Cianfarani 2012; Dominey-Howes, Gorman-Murray, and McKinnon 2013). We thus seek to contribute to research on marginality and disasters. In early 2011, particularly 10-24 January, two-thirds of the state of Queensland, Australia, was subject to serious flooding following record rainfall, with a 'state of emergency' then 'disaster' declared. Some of the most severe flooding occurred in the Brisbane River Catchment, and large areas of Brisbane, the capital city, with over two million residents, were affected, resulting in extensive infrastructure damage and residential displacement. This paper discusses some LGBTI experiences during the floods in south-east Queensland.

The findings come from a survey conducted a year after the floods by the Queensland Association for Healthy Communities (QAHC). The survey – 'The LGBTI Community and their Experience of Natural Disasters' – sought to understand the experiences, resources and needs of LGBTI people. While not designed by professional researchers, the survey offers valuable information on LGBTI experiences of disasters given lack of research on this population. An agreement was created between QAHC and university researchers to facilitate analysis of material, social, emotional and mental health impacts on fractions of the Queensland LGBTI population. In this paper, we analyse and discuss some of the key findings using the concepts of marginality, vulnerability and resilience; this framework helps us to understand the particular issues facing LGBTI people and in turn contribute to inclusive disaster preparation, response and recovery. The data show LGBTI vulnerability due to social and political marginality, including discrimination and issues of access to assistance, but simultaneously examples of LGBTI resilience borne by self-reliance in a context of marginalisation. We begin by expanding on these concepts and then apply them to the case study.

2. MARGINALITY, VULNERABILITY AND RESILIENCE

Our analytical framework contends that marginality is a concept – and a lived reality – that links experiences of vulnerability and resilience for 'peripheral' populations like LGBTI communities. We discuss these three concepts in turn, drawing their interconnectivity.

2.1 Vulnerability

During the 1970s, disaster research shifted from a ‘hazard paradigm’ to a ‘vulnerability paradigm’, which stressed that disasters, as societal events, occur due to people’s vulnerability in the face of natural hazards (e.g. cyclones, tsunami) or technological hazards (e.g. terrorism, nuclear accident) (Gaillard 2010; Steckley and Doberstein 2011). In this sense, a disaster is a process that “occurs within society and not within nature”, and vulnerability is central in ascertaining the effects of hazards (Weichelsgartner 2001, 86). The meaning of vulnerability continues to be debated but can be broadly defined as the conditions – including physical, social, cultural, economic and political – that render people and communities susceptible the impact of hazards (Wisner 2009).

The concept of vulnerability arguably focuses on adversity, loss and the incapacity to withstand hazard impacts (Gaillard 2010). However, vulnerability is not just about a lack of access to economic or material resources – resulting from, for instance, poverty or limited socioeconomic means – but also draws attention to how social and cultural positions and subjectivities contribute to incapacity. As Wisner (2009, 177) contends, “persons at the same level of income do not suffer equally in disaster situations nor do they encounter the same handicaps during the period of recovery”. Rather, a lack of political rights and social recognition, and differences based on ethnicity, race, age, health, disability, gender and sexuality, all play into individual and community tendencies to vulnerability in disasters (Phillips et al. 2010). But while vulnerability is unevenly distributed across a given society, policies concerning disaster risk reduction, or emergency management and disaster response and recovery, rarely take specific account of the needs of individual social groups, even if certain social groups are recognised as ‘more vulnerable’ (e.g. the elderly, women, diverse language groups, etc.) (Finch et al. 2010; Gaillard and Mercer 2012).

2.2 Resilience

Resilience is also a debated and broad-ranging concept (Aldrich 2012). A fundamental definition posits resilience as the positive flipside of vulnerability, or at least as those components of individual, group and social functioning that might reduce susceptibility to hazards and disasters (Zhou et al. 2010). In this way, resilience is linked to agency, or what is called, in the hazards and disaster nomenclature, ‘capacity’ in the face of hazards (Gaillard 2010). In this context, resilience is the ability of people and communities to maintain relatively stable psychological and social functioning in highly disruptive events, and ‘bounce back’ in a timely manner (Bonnano et al. 2007; UNISDR 2009). Emphasising *existing* capacity, resilience is determined by the ways in which a community is equipped to anticipate, cope with and recover from the uncertainty and change wrought by disaster. Thus, according to the United Nations International Strategy for Disaster Reduction, resilience is the extent to which a community “has the necessary resources and is capable of organizing itself both prior to and during times of need” (UNISDR 2009, n.p.).

Resilience and vulnerability are linked and often interconnected concepts – respectively concerned with capacity and incapacity in the face of hazards, for instance – but they should not be understood as sitting along a shifting holistic spectrum from incapacity to capacity. Rather, a single hazard can trigger experiences of vulnerability and resilience *simultaneously* in the same society or community, *dispersed* in *different* ways across the population according to social, cultural and economic resources, and geographical location relative to the physical impact of the hazard (Miller et al. 2010; Aldrich 2012). This connection between vulnerability and resilience brings us to the final concept.

2.3 Marginality

Marginality refers to the peripheralisation of certain people and groups within a society, which may be materialised in different ways (Cullen and Pretes 2000). These may be economic, social, cultural, political or physical – relating to poverty, socioeconomic means, social or cultural minority status, lack of political access or geographical location (Gaillard 2010). It need not be intrinsically related to susceptibility to disaster, and this is what makes it an interesting and useful concept when thinking about the human impacts of hazards (Gaillard and Kelman 2012; Hewitt and Mehta 2012). Marginality draws attention to groups *already* inherently vulnerable in a society, which are made *more* susceptible to hazards within a given population. As Gaillard (2011, 121), for instance, indicates, “marginalized groups within society may be more vulnerable than others because they are deprived access to resources which are available to others with more power”.

In this way, marginality might be seen as synonymous with vulnerability – in terms of classic hazard and disaster paradigms – but we also think it offers a different framework for examining social functioning in disasters. Rather than synonymy with vulnerability, marginality allows us to consider how peripheral groups, already marginal in a society, might develop *inbuilt* coping strategies and capacities to ‘get by’ in normal societal circumstances (Cody and Welch 1997; Christman 2012). These capacities and strategies might then be activated and drawn upon in different ways to provide resilience during a disaster (Balgos et al. 2012; Kelly and Smith 2012). In this way, marginality, as a concept, might be a way of linking paradoxical experiences of both vulnerability and resilience. Of course this will not be the case for all marginalised groups, but will be for some, such as some LGBTI communities in some places.

3. LGBTI EXPERIENCES IN DISASTERS GLOBALLY

To flesh out the linkages, it is informative to review extant work on LGBTI experiences of disasters. Research on LGBTI disaster experiences are an expanding field, with a number of non-government and academic publications drawn from these contexts: Tamil Nadu, India, following the 2004 tsunami (Pincha 2008; Pincha and Krishna 2008); New Orleans, USA, following Hurricane Katrina in 2005 (Leap et al 2007; D’Ooge 2008; Richards 2010); Haiti,

following the 2010 earthquake (IGLHRC/SERVie 2012); central Java, Indonesia, following the 2010 eruption of Mt. Merapi (Balgos et al. 2012); Irosin, the Phillipines, following persistent weather and flood hazards (Gaillard 2011); and Japan, following the 2011 earthquake and tsunami (Ozawa 2012; Yamashita 2012) (Figure 1). Collectively, this work highlights a number of vulnerabilities based on existing social marginalisation (sometimes differing across and sometimes transcending specific contexts). Stigmatisation from right-wing religious groups in the USA and Haiti, who asserted disasters as divine retribution for ‘sinners’ and their supporters, drew on derogatory stereotypes, exacerbated vulnerabilities and even incited violence against sexual and gender minorities (IGLHRC/SERVie 2012). Similarly, loss of personal and communal spaces – i.e. homes and community centres – exposed sexual and gender minorities to harassment and violence (Caldwell 2006; IGLHRC/SERVie 2012).

Figure 1: Locations of extant work on LGBTI experiences of disasters. Brisbane and Christchurch are the study sites for our ongoing work. Brisbane, Queensland, is the focus of the present discussion.



The research also underscores the effects of heteronormative assumptions about individuals and couples by governmental and non-governmental agencies charged with disaster risk reduction (DRR) and relief and recovery. In many official and organisational policies, ‘family’ invoked an opposite-sex couple with children, while emergency practices deployed binary (male/female) concepts of gender. In New Orleans, for example, same-sex families were not recognised in Louisianan legislation, and thus excluded from support and sometimes separated in resettlement (D’Ooge 2008). Experiences of emergency shelters were found to be particularly problematic for sexual and gender minorities over a number of sites, exacerbating LGBTI vulnerabilities. Notably, trans, intersex and other gender minorities had difficulties in shelters,

where workers and evacuees questioned their gender identities. Post-Katrina, a woman was arrested for using the ‘wrong’ bathroom; in Japan, a woman was called a “cross-dressing deviant fag” by a volunteer worker (Yamashita 2012, n.p.).

In India, Indonesia and the Philippines, different ‘third gender’ groups – *aravanis* in Tamil Nadu (Pincha and Krishna 2008), *warias* in Java (Balgos et al. 2012) and *baklas* in Irosin (Gaillard 2011) – had difficulty accessing emergency shelters because evacuees were recorded as ‘male’ or ‘female’ only. Furthermore, if they did access shelters, *aravanis* were denied food and suffered verbal and/or physical abuse, while *baklas* assigned to ‘male’ accommodation were harassed. Reports from Haiti, meanwhile, indicate difficulties in evacuation shelters across sexual and gender difference. Lesbians, bisexual women, trans and intersex people were subject to gender-based violence and ‘corrective rape’, while gay and bisexual men also recounted forced “sexual relations with straight-identified men for food or money” (IGLHRC/SEROVie 2011: 4-5). Some men adopted a “more masculine demeanor” to avoid abuse and reduce the chance of “being denied access to emergency housing, healthcare, and/or enrolment in food-for-work programs” on the basis of ‘effeminacy’.

As well as vulnerabilities based on heteronormativity, experiences of marginality (and consequent group identity and communal self-reliance) at times enabled social strength and capacity-building. Already used to dealing with heteronormative assumptions and policies by both government and other organisations, some sexual and gender minorities creatively invented means to sustain their wellbeing and community in the face of both the ‘natural’ disaster and exclusion from official assistance. In New Orleans, friendship networks – families-of-choice – were used to establish an alternative “network of information exchange about sources of housing, food, and medical care, availability of social services, and whether friends had survived and if so, their current addresses” (Leap et al. 2007, 13). In Indonesia, likewise, rather than seeking out evacuation sites and risking discrimination, many *warias* sought help from among friendship networks.

Both *warias* and *baklas*, moreover, enacted ways of assisting other populations to cope with disaster impacts, such as collecting relief goods, initiating clean-up and providing personal grooming services. Gaillard (2011, 122) argued that *baklas* are known for “their sense of initiative and leadership” and are thus “crucial resource persons within their communities when confronted with natural hazards”. A dialogue between *baklas* and the wider community was initiated, which incorporated and acknowledged the contributions of *baklas* in disaster response programs. This “helps in reducing discrimination and mockery during disasters” (Gaillard 2011, 124). These studies from the USA, Haiti, Japan, India, Indonesia and the Philippines thus show how social marginality based on sexual and gender identity exacerbates vulnerability during disasters, in terms of health, wellbeing and social and material losses, and also suggest how marginality can, in some instances, inform strategies for resilience. With these ideas in mind, we turn to LGBTI experiences of the 2011 Queensland floods.

4. THE LGBTI COMMUNITY IN THE 2011 QUEENSLAND FLOODS

Record rainfall from December 2010 to early January 2011 resulted in flooding in almost every river catchment in Queensland south of the Tropic of Capricorn in January 2011 (Queensland Floods Commission 2011). The most severe flooding occurred in the Lockyer Creek and Bremer River, major tributaries of the Brisbane River (van den Honert and McAneney 2011). In Brisbane, flooding peaked on 13 January, with 14,100 properties affected. Across south-east Queensland, flooding over 10-24 January resulted in 22 deaths; over 200,000 people were affected and 28,000 homes needed rebuilding (van den Honert and McAneney 2011).

Data about LGBTI experiences during and after the 2011 Queensland floods are from a survey by QAHC, a community NGO whose mission is to “promote the health and well-being of lesbian, gay, bisexual and transgender Queenslanders” (QAHC, n.d.). The organisation was formed in 1984 as the Queensland AIDS Council, originally focusing on HIV/AIDS and other gay men’s health issues. In 2004, QAHC expanded its remit to be inclusive of the health and wellbeing of the whole LGBTI community, prompting a name change. To serve this remit, the QAHC survey sought information on LGBTI experiences during and after the floods. In total, 48 people completed the survey; there were 70 questions, both open and closed. While a small-scale survey and not representative of the Queensland LGBTI community, the data nevertheless provide valuable detail about the disaster experiences of at least some LGBTI people.

The majority of respondents – 79% – were living in Brisbane, and the other 21% in regional cities and towns in south-east Queensland. The results thus record impacts on LGBTI communities in Brisbane and south-east Queensland. In terms of gender identity, 44% of respondents identified as female, 33% as male and 23% as trans (both MtF [male-to-female] and FtM [female-to-male]), intersex or genderqueer. In terms of sexual identity, 53% identified as lesbian, 33% as gay and 14% as queer. 50% of respondents were in a same-sex relationship during the disasters; responses suggest that being in a same-sex relationship can inflect LGBTI experiences and wellbeing during disasters. We now discuss some key findings from this survey, linking them to the concepts of marginality, vulnerability and resilience.

5. MARGINALITY AND POST-DISASTER MENTAL HEALTH

First, we give some information on post-disaster LGBTI mental health and wellbeing. Health studies indicate that LGBTI Australians have an above average incidence of mental health indicators, that is, stress, anxiety, fear and depression, which is attributed to variables related to marginality, such as ongoing social disapproval and ingrained interpersonal vigilance (Leonard et al. 2012). Redressing these mental and emotional health issues is part of QAHC’s remit. Post-disaster mental health outcomes reflect situational psychological and emotional pressures typical across affected populations, but are often heightened in marginal groups. Making an effort to ascertain such outcomes, the survey asked respondents to indicate if they experienced

heightened fear, stress, anxiety and depression as a *direct* result of the floods. Unfortunately, the survey did not ask respondents to rate their usual mental and emotional wellbeing, and nor could the survey, targeted at the LGBTI community, generate comparison against the wider population. Nevertheless, the self-assessment of heightened mental health issues following the floods is instructive about perceived and experienced mental and emotional impacts: in each case the majority of respondents experienced elevated fear, stress, anxiety and depression, and indicated a high or significant impact on wellbeing. Table 1 summarises the results, with representative qualitative responses.

Table 1: LGBTI self-assessment of mental health impacts of the 2011 Queensland floods

Fear	69.2% experienced fear: <ul style="list-style-type: none"> • [The flood was] pretty damn traumatic, I was terrified. I just never want to see it again.
Stress	80% experienced stress: <ul style="list-style-type: none"> • Going to and from work on the train – through flood affected areas was stressful – seeing people throwing out a houseful of destroyed furniture was devastating. Working with and for other people directly affected by the disasters post flooding was also challenging and quite emotional.
Anxiety	72.5% experienced anxiety: <ul style="list-style-type: none"> • [I still have] some panic attacks ... having problems which require my medication to be increased above normal. • We experienced strong feelings of guilt and this year I have experienced anxiety and depression. Because of the work I do, this has compounded the problem.
Depression	71.8% experienced depression: <ul style="list-style-type: none"> • I felt very alone and depressed. I wanted to suicide but had no courage to do so. • I'm very depressed and need to let my feelings out but I look horrible and can't face anyone.

These adverse mental health outcomes, as noted earlier, are in line with experiences common across populations in post-disaster contexts; however, they arguably have a more serious impact on marginalised groups who often already evidence higher fear, stress, anxiety and depression in day-to-day life due to their more limited access to social capital and political inclusion, and who are then further sidelined in disasters. Indeed, Balgos et al. (2012, 338) contend that “the marginalisation of LGBT people is heightened during disasters, as existing inequalities are magnified”. As a result of this ‘double’ marginalisation in both ordinary and extraordinary circumstances, many respondents described further place-based emotional and psychological impacts that were particular to lives as sexual and gender minorities, reflecting existing marginality and inciting inbuilt vulnerabilities .

6. POST-DISASTER GEOGRAPHIES OF VULNERABILITY: APPREHENSION, ENCOUNTER AND MARGINALISATION

The particularity of living as a sexual and/or gender minority, with certain experiences, concerns and needs, exacerbated emotional and mental health issues in the post-disaster context, at least as self-reported by most respondents. These outcomes were in turn linked to apprehension and negative encounters within particular *social and spatial settings*.

Thinking first about the wide(r) scale of the local community, neighbourhood, suburb or town in which LGBTI people were living, respondents were asked if they were fearful of experiencing discrimination, prejudice or abuse on the basis of their LGBTI identity during the disaster or in the immediate recovery phase. Overall, *two-thirds* of the respondents were fearful of heterosexist, homophobic and/or transphobic prejudice and/or abuse. 43% indicated they were fearful in *all* public places (streets, buildings, parks, evacuation centres) at *all* times during the floods and the recovery, while 23% indicated they were fearful *sometimes* and/or in *some* places. Respondents described some of their fears and experiences of abuse and intimidation:

While videoing flooding in Maryborough, I was accused of being a paedophile.

People were targeting groups of gay people in town as our 'behaviour' had brought this upon the community as a whole. So I was told on many occasions.

These encounters dredge up emotionally-damaging, derogatory stereotypes about LGBTI people as socially deviant. The second quote shows that homophobic 'divine retribution' rhetoric – often issued by fundamentalist Christian churches in the US, such as Westboro Baptist Church – was also evident in Queensland during and after the 2011 floods. This revives a long history in the Western Christian tradition, from the eighteenth century, of linking same-sex acts, sin and disasters ('Acts-of-God') (Gilbert and Barkun 1981). Thus, the marginality of the LGBTI community was enhanced during the floods by being excluded from, and then blamed for the impacts experienced by, the 'mainstream'.

This, in turn, had a specific effect on exacerbating LGBTI vulnerability: the apprehension and, at times, experience of prejudice in community environments was translated into *particular* spaces and settings as well. It is especially troubling, in this context, that many LGBTI people were reluctant to access mainstream emergency relief and recovery services supplied by the government directly or under contract – services and resources designed to enhance societal resilience in disasters – due to fears about heterosexist, homophobic and/or transphobic discrimination and abuse. Respondents were asked to assess if a range of emergency relief and recovery services were safe, accessible and welcoming to them as LGBTI individuals, couples or families, why or why not, and if they did access these services. The results show that over half of the respondents did not even attempt to access a range of mainstream emergency services as they felt anxious and stressed about how they would be received, and thus uncertain about potential interactions with workers and evacuees. These findings are summarised in Table 2.

Table 2: Levels of LGBTI reticence about mainstream disaster relief and recovery services

- 55.3% were unsure about their safety with **volunteer relief groups and workers**.
- 55.2% were unsure about the accessibility and safety of **emergency evacuation shelters**.
- 50% were unsure about the accessibility of the **Community Recovery and Referral Centres** (established by Queensland Department of Communities).
- 42.1% were unsure about the accessibility of **disaster relief payments** (from Centrelink, the Federal social security program and agency, managed by the Australian Department of Human Services).

The qualitative responses highlighted that these fears and stresses were based on existing anxieties about the safety and inclusiveness of mainstream services:

Discrimination when accessing mainstream services is always an issue – you never know if you will be treated properly and with respect.

I would have been concerned my relationship may not have been accepted in mainstream support services.

I was concerned that if I needed direct contact assistance that I would have been either judged or misidentified concerning my gender.

I wasn't fully out at this time so I already had to hide things.

Moreover, some respondents expressed concerned that prejudice might be exacerbated due to the uneven and edgy emotional climate of the post-disaster context:

I was concerned that LGBT individuals may not be comfortable in accessing mainstream services, especially when they were vulnerable.

If I was in a position to access [emergency support services] I would have been fearful given the general emotions being carried so high during this time.

I didn't want the possible added pressure.

These quotes show that everyday experiences of marginality are carried into the disaster context. The survey results thus suggest that societal prejudices are not set aside and/or become irrelevant during a disaster, but frame the experience of disaster and its aftermath for marginalised groups. In this case, the vulnerability of some LGBTI people was exacerbated.

7. HOME FEARS

Housing, home and shelter are key concerns during and after disaster events (Datta 2005; Brun and Lund 2008). Disruption to home environments during and after the Queensland disasters generated a 'flood' of different emotions for LGBTI people, given these are the sites

where individuals, couples and families live, maintain meaningful possessions, build interpersonal relationships and invest a sense of self. Homes are definitively emotive places that take on heightened importance for sexual and gender minorities: despite ever-present management of public surveillance, they are often one space where LGBTI people can 'be themselves'. Homes provide a semblance of ontological security – a security of 'self' – and thus disruptions to residence and living arrangements were a cause for concern in a number of ways. The potential need to evacuate home and access an emergency shelter raised stress and anxiety about safety, as with other mainstream support services:

I would have been very worried to explain my circumstances to strangers if I had to evacuate.

I can't blend in and don't necessarily advertise.

Even without evacuation, having relief workers in one's home was also a concern for some:

My house wasn't damaged inside but downstairs was. ... If it was inside the house I would have been less comfortable with strangers.

For the sizeable minority of respondents (22.5%) who had to evacuate their homes, most sought shelter with their families-of-origin rather than in emergency shelters (some sought shelter with friends). This was an important, and necessary, form of social and spatial support during the disaster, and for many it helped improve their relationships with family:

My house was flooded and eventually destroyed due to structural damage. My family provided important assistance and support to me at this time. I stayed with them during and after the flood until I found a new house.

However, returning to the family home – a space that many had to leave in order to 'come out' and actualise their sexual and/or gender identity – induced anxiety and stress too. Some had to 'closet' their LGBTI identity while staying with family, 'shutting off' a basic part of their sense of self:

I went home and was stuck in the house all week with my family because I can't drive and there was no public transport. ... My family were not aware at the time that I was dating anyone – and it wasn't something I was going to disclose – so it wasn't something I could talk about.

I stayed with my cousins, who were quite conservative. ... I had to shut off some part of my identity for a little while.

8. GEOGRAPHIES OF RESILIENCE: MARGINALITY, SELF-RELIANCE AND BARRIERS

So far we have examined particular post-disaster vulnerabilities linked to LGBTI marginality. This is still not comprehensive: for instance, we could discuss same-sex couples' relationship

stress: 41% of people in couples indicated an impact on their relationship wellbeing, often related to finances; e.g.:

My girlfriend had to financially support myself and our mortgage for this period of time with only basic Centrelink² contributions. This affected our relationship and both emotional states.

While acknowledging there is more to say about vulnerabilities, we want to briefly turn to examples of resilience in the face of disaster, which is also informed by marginality and everyday experiences in times of 'normal' societal functioning. Connections with biological family – as noted above – were an important form of resilience that 68% of respondents accessed (not just shelter – emotional support, food, money, and assistance with repairs). However, we want to underscore that the survey revealed that there was significant emotional and material support from networks of LGBTI friendships networks and community groups – as well as some barriers to that support.

When prompted by the survey, 87.5% of respondents indicated they had existing networks of LGBTI friends and familiars that they could draw on for some emotional and material support. To this we can add a range of LGBTI organisations that gave – or at least tried to give – various types of support for the LGBTI community. Such organisations included QAHC itself (a significant source of support) and *QNews*, the local LGBTI newspaper (print and online), which provided information and referral services (McKinnon et al submitted). Both friendship and organisational support – and both emotional and material forms of support – are highlighted in the following response:

Some angels [unknown volunteer helpers] came by and cleaned it out our home, which made me emotional. We did lose power but some neighbours came by with food and friends came to hang out. I don't know who cleaned out my garage but they were ANGELS. And QAHC gave me some money.

Overall, 44% of respondents received *direct* support from LGBTI friends, networks or organisations. Some qualitative examples include:

I was rescued to a friend's house just before our roads got flooded ... I was going to be alone and if I hadn't left I would have been trapped in!

I wasn't going to leave my place but my LGBT friends (that live 10 houses away) woke me in the middle of the night to inform me both ends of our road had flooded in. We ended up getting my car out, through back yard access and knocking down a fence ...

I think QAHC did well in having FB (Facebook) messages about the floods and offering help.

However, this response rate – 44% – is half the number who indicated they had LGBTI support networks. There are various reasons for this discrepancy. For some, especially in inner-

city suburbs inundated by the Brisbane River, their friends also required assistance with evacuation and were unable to stretch their own capacities once the flood waters hit. Others simply could not access LGBTI networks or community groups because their suburb or region was not well-serviced by such organisations and their friends were outside the area. This was reported by respondents in Ipswich, a suburban region in Brisbane's west, which was inundated by the Bremer River:

There was little to no information about evacuation procedures in many Ipswich suburbs. Once power was out (even before, for a lot of people) there was no information available... I think as a whole, in Ipswich, there needed to be more information etc. Although, as a LGBT person, I would have been more comfortable accessing LGBT support services during that time.

More LGBTI would have preferred to access support from LGBTI people or groups, but could not. In this way, fundamental geographical contingencies and physical barriers, such as location, distance and accessibility, sometimes disabled LGBTI support networks.

Moreover, 37% of respondents preferred to offer support to LGBTI people because they felt LGBTI people would be vulnerable in mainstream facilities. However, the circumstances produced social and spatial barriers which made it difficult to determine how to direct support to LGBTI people:

I was mindful of the fact that LGBT people might need extra help but it was difficult to know how to target help toward LGBT people.

While some thus found it difficult to provide *direct* emotional and material assistance to LGBTI people, others provided *indirect* support by donating money to QAHC to assist their disaster relief work with the LGBT community. Others also registered with the QNews Billeting Program, which enabled LGBT people to provide temporary accommodation specifically to other LGBT people who were displaced by the disasters and who felt unsafe or unwelcome either in evacuation centres or staying with their families (thus resolving some of the issues of vulnerability in emergency shelters). Some made further suggestions about how the LGBTI community could provide material support and resilience to its own. One person suggested using LGBTI commercial venues as community referral (and possibly evacuation) centres:

It would have been really nice if we organised a queer clean-up to help out members of our community. This information could have been controlled through Twitter or Facebook and run out of either the 'Sporties' or the Wickham [gay pubs in inner-city Brisbane]. Also it would have been nice if the Wickham or 'Sporties' turned into a community hub during the disaster.

There are, then, specific spaces, networks, resources and capacities that were utilised within the LGBTI community, and which could be further developed. However, it is imperative to note that the LGBTI community were not self-segregating (and if so, it was to access pre-existing networks of resilience and offer support to vulnerable community members if possible) but also

offered support to the wider Brisbane and Queensland communities. 63% of respondents stated that it didn't matter whether their support went to LGBTI or wider communities, and 92% did offer support to 'unknown' community members. For some, the floods facilitated a coming together of the wider community for mutual support, suggesting opportunities for social inclusion across difference:

I helped in any way I could – helping family friends, strangers, 'friends of friends' and offering help to my own friends.

[It] made me feel part of the whole Brisbane community.

We were all going through the same thing. Sexuality really didn't seem important – community did.

More research is needed to see if this connectivity is, in fact, a long-term possibility. One respondent thought not:

It makes me angry that many LGBT people helped with the clean-up, etc. but we still don't get treated all that well by a lot of Queenslanders.

Despite LGBTI resilience and the desire many evinced to assist the wider community, marginality, vulnerability and societal prejudice is not necessarily overcome in the post-disaster context.

9. CONCLUSION

Given the incipient nature of this research, we do not want to offer extensive conclusions. We have tried to outline some examples of the geographies of LGBTI vulnerability and resilience in the face of a particular disaster – the 2011 Queensland floods. The results, while imperfect, are nevertheless instructive. The concept of marginality usefully links LGBTI vulnerabilities and resilience: both the susceptibility and capacity of LGBTI people and communities rest on extant marginality. This extends current understandings of marginality, opening possibilities for not only redressing perceptible vulnerabilities but identifying and utilising resilient capacities built in experiences of marginality. Everyday peripheralisation and discrimination mean LGBTI people are already vulnerable to the adverse impacts of disasters, which are exacerbated during and after the event through prejudice, displacement, problems with mainstream services and evacuation centres, and disruptions to home environments. Simultaneously, patterns of coping and community-building can provide capabilities for withstanding and bouncing back (and forward) from adversity – through LGBTI friendships, networks and organisations. Respondents suggested ways this self-reliance could be enhanced, while also intimating it was important for LGBTI people to offer support to the wider community, regardless of whether this resulted in better relations. Recognition and incorporation of capacities could thus contribute to emergency management practices, DRR and relief and recovery policies.

Our next step in this project is our own data collection, which involves a careful, detailed survey and semi-structured interviews.³ In this we hope to overcome some of the limitations of – and build on – this community data. Importantly, we acknowledge that the LGBTI community is not singular, and we want to be able to breakdown the responses by sexual and gender identity to understand differences within the community. We also want to factor in cross-tabulations by ethnicity, language, socioeconomic status, income and education, amongst others. These are important not only for understanding the diversity of vulnerabilities and capacities within the LGBTI community, but have also been shown to be significant in patterns of vulnerability and resilience in disasters across populations generally. In this way we hope to keep building research and knowledge of LGBTI experiences of disasters – to date a little studied area of scholarly and policy development.

NOTES

1. This argument is facilitated by Brian Cook and JC Gaillard's session at the 2013 Institute of Australian Geographers Conference, 'Marginality, human development and vulnerability to disasters'. We are grateful for their insight and inspiration.
2. Centrelink is the Federal program, managed by the Australian Department of Human Services, which delivers social security services and payments.
3. The project includes case studies on Brisbane, Christchurch, far north Queensland and regional Victoria.

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