

Disability inclusive & Disaster-resilient Queensland

Disability Inclusive Disaster Risk
Reduction Stakeholder Consultation:
Process Evaluation Report

The Centre for Disability Research and Policy
The University of Sydney

Issue 1 No. 5/2019

ISSN: 2652-2241 (Online)

Funded by



A project by:



Table of Contents

DISABILITY INCLUSIVE DISASTER RISK REDUCTION STAKEHOLDER CONSULTATION: PROCESS EVALUATION REPORT	3
Purpose.....	3
ABOUT THE PROJECT	4
Project Team.....	4
Advisory Committee.....	4
OVERVIEW OF STAKEHOLDER CONSULTATION METHODOLOGY	5
EVALUATION METHODOLOGY.....	7
Overview of Process Evaluation	7
Data Gathering.....	8
Data Analysis	9
FINDINGS	10
DISCUSSION OF FINDINGS	11
KEY MESSAGES	27
APPENDICES.....	28 – 37
CONTACT INFORMATION	38
Citation.....	38

Disability Inclusive Disaster Risk Reduction (DIDRR) is an approach that directs attention to the support needs of people with disability in interaction with their environment, and the factors which create or restrict capabilities around emergency preparedness and action during any emergency.

DIDRR depends on effective cross-sector collaboration between emergency managers and community services personnel to remove barriers that stop people with disability from engaging with DRR activities through principles of accessibility, participation, collaboration and non-discrimination (Villeneuve, Dominey-Howes, Llewellyn et al., 2017).

[image on front cover: Three people sitting at a table. One man wearing a blue shirt in wheelchair is talking. The other two women are listening]

Purpose

This report documents the process evaluation of seven facilitated inclusive community consultations with stakeholders from the disability, community, health care, emergency management, and government sectors. Stakeholders in four Local Government Areas (LGAs) were consulted on the topic of Disability Inclusive Disaster Risk Reduction (DIDRR). Participating LGAs included: Brisbane, Townsville, Rockhampton and surrounds, and Ipswich and Surrounds.

Findings reported here share how the process enabled inclusive community engagement and fostered shared learning about DIDRR among participating stakeholders. Detailed findings from the consultations are reported elsewhere (Please refer to Issue 1, No. 1 - 4/2019) in this Report Series (ISSN: 2652-2241 (Online)).

This project is one component of a much larger project that aims to co-design and test a Queensland DIDRR Framework and Toolkit.

The Queensland DIDRR Framework will guide collaborative action for DIDRR at the local community level. The DIDRR Toolkit aims to provide actionable guidance to community stakeholders by sharing tips, resources, and tools that enable them to take DIDRR actions to increase the resilience of people with disability to disaster.

About the project

The Queensland Department of Communities, Disability Services and Seniors has partnered with the Centre for Disability Research and Policy (CDRP) at The University of Sydney, Queenslanders with Disability Network (QDN) and the Community Services Industry Alliance (CSIA) to co-design and test a Disability-Inclusive Disaster Risk Reduction (DIDRR) toolkit to enable effective cross-sector community-level DIDRR collaboration to reduce risk for people with disability in disasters.

Inclusive stakeholder consultation sessions were held in four local government areas: Brisbane, Ipswich, Rockhampton, and Townsville. Participating stakeholders from the disability, community, health, emergency management, including government were invited to share their experiences and exchange knowledge about how to reduce risk and increase the resilience of people with disability to disasters.

Information from the consultations will be used to co-design the Queensland DIDRR Toolkit that is tailored to the context and needs of Queensland communities. The toolkit aims to provide actionable guidance to community stakeholders by sharing tips, resources, and tools that enable them to take DIDRR actions to increase the resilience of people with disability to disaster.

Project team

Dr Michelle Villeneuve (Project Lead/Principal Investigator) Research Stream Leader – Disability-Inclusive Community Development, Centre for Disability Research and Policy (CDRP), The University of Sydney michelle.villeneuve@sydney.edu.au

Michelle Moss (Inclusive Community Engagement Lead) Business and Operations Manager, Queenslanders with Disability Network (QDN) MMoss@qdn.org.au

Matthew Gillett (Steering Committee Member) General Manager Programs, Community Services Industry Alliance (CSIA) mgillett@csialtd.com.au

Diana Young (Project Oversight) Director, Strategy and Engagement/Community Recovery, Queensland Department of Communities, Disability Services and Seniors Diana.Young@communities.qld.gov.au

Carrol Helander (Project Officer) Principal Program Officer, Strategy and Engagement/Community Recovery, Queensland Department of Communities, Disability Services and Seniors Carrol.Helander@communities.qld.gov.au

Louise Abson (Project Officer) Project Officer, Queenslanders with Disability Network (QDN) labson@qdn.org.au

Pradytia Pertiwi (Research Assistant) Centre for Disability Research and Policy (CDRP), The University of Sydney pper6524@uni.sydney.edu.au

Advisory committee (in alphabetical order)

Fiona Mackie, Aged and Disability Advocacy Australia

Colin Sivalingum, Australian Red Cross

Eric Boardman; Annabelle Johnstone, Community Recovery Officers, Department of Communities, Disability Services and Seniors

Belinda Drew, Community Services Industry Alliance

Tammy Myles; Diana Young; Carrol Helander, Department of Communities, Disability Services and Seniors

Mike Lollback, Local Government Association of Queensland

Carl Peterson, Moreton Bay Regional Council

Craig Rogan; Dustin Vallance, National Disability Insurance Scheme

Ian Montague, National Disability Services

Nicola Moore, Office of the Inspector-General Emergency Management

Emma Martin, QHealth; Mental Health, Alcohol and Other Drugs Branch

Jacklyn Whybrow, Queensland Alliance for Mental Health

Luke Reade, Queensland Council of Social Service

Sharon Boyce, Queensland Disability Advisory Council

Michelle Moss, Queensland Disability Network

Adam Green, Queensland Fire and Emergency

Karen McPaul, Queensland Reconstruction Authority Services

Michelle Villeneuve, The University of Sydney

Overview of Stakeholder Consultation Methodology

Originally developed as a method for organisational analysis and strategic planning, the SIM facilitation technique has been adapted for use as a data collection method in participatory research and inclusive community development. SIM is designed to facilitate inclusive community engagement and promote the development of knowledge and networks/connections between participants. SIM employs a graded approach to collaboration and involves discussion using a three-phase process (Figure 2).



Overview of consultation method



Figure 2. The application of SIM as an Inclusive Community Engagement Facilitation Method

[image: sequence of interview phases that are described below in text. Images show people engaged in one-one interviews; small group discussion; and large group presentation]

The first phase involves a series of one-on-one interviews conducted by the participants (Figure 3). An interview guide, prepared by the facilitators, consists of 4 interview questions. On arrival, participants are assigned to a group (1 – 4) and assigned an interview question. The interview matrix is structured so that each participant has the opportunity to ask their assigned question of three people and respond to a question posed by three other participants. Participant interviewers are instructed to ask their question and listen to the response without interrupting. They are also asked to record responses in writing on a form provided. Interviewees are given 10 minutes to respond. [We further adapted this time frame (12 – 15 mins) to support the additional time required for participants who need more time to move between interviews or who require more time to communicate or record responses]. The process is repeated until each participant has interviewed one person from each of the other groups. The facilitators keep time and guide the group so that participants know how to proceed through the matrix.

The second phase involves each group coming together in a small group deliberation to discuss, review and summarise the individual responses to the group's assigned question. Following their summary of responses, group members are encouraged to add their perspective to the small group deliberation. In order to present a synthesis of findings to their question, each small group is asked to identify 3 main findings to be shared in the large group plenary. Each of these discussions are audio recorded.

The third phase involves a large group plenary discussion which begins with each group presenting their main findings followed by a facilitated discussion with all the participants. The presentation and plenary discussion are audio recorded.

Facilitation Process

Each SIM consultation took place over approximately 5 hours and covered 4 questions in-depth. The length of these consultations is important because the time invested in meeting new people and engaging in meaningful discussion with people from different backgrounds facilitates the development of new community connections and/or the opportunity to renew or deepen existing relationships. The small group discussion involves not only information sharing but deliberation where participants express their views, assimilate information provided by others, and develop shared understanding and potential solutions. Opportunity for informal networking and engaging in extended discussion during tea/lunch provides additional opportunities to develop connections between stakeholders.

Inclusion of people with disability was achieved by: (a) extending invitations to people with disability and their representatives to participate and represent people with disability at the SIM consultations; and (b) providing the means to support their engagement (e.g., Auslan interpretation, barrier free meeting spaces, safe space to express ideas, accommodating diverse communication needs, access for service animals, assistance with note taking).

The SIM technique has the advantage of accommodating the voices of a large number of participants (12 – 32) while ensuring that the perspectives of all participants are heard. This approach overcomes common challenges to inclusive community engagement by ensuring that people can fully engage in the process and benefit from their participation while maintaining efficiency in stakeholder consultation.

SIM Consultation Interview Questions

1. Tell me about a time when you really felt a part of your community. Probe: What helped that to happen? How did it feel?
2. What steps have you taken to prepare for emergencies? Probe: If you haven't, what could you do? Is there anyone who could help you get started?
3. In a disaster in your community, what challenges would people with disability experience? Probe: What challenges would they have sheltering in place? What challenges would they have evacuating to a place of safety?
4. Emergency services is usually the first support people think they will rely on in a disaster. In a disaster in your community, what OTHER SUPPORTS could people with disability count on? Probe: Think about where you live, work and play and the assets near you

Locations

Inclusive stakeholder consultation sessions were held in four local government areas: **Brisbane, Ipswich, Rockhampton, and Townsville.**

Participating stakeholders (n = 190) from the disability, community, health, emergency management, including government shared their experiences and exchanged knowledge about how to reduce risk and increase the resilience of people with disability to disasters.

Overview of Process Evaluation

Process evaluation was employed to understand how the stakeholder consultation process enabled inclusive community engagement and shared learning about DIDRR in light of the two key strategies of the project which were:

1. **To enable knowledge exchange among participations about DIDRR** (to identify personnel, capacity, collaborative processes, tools and structures at the micro level of communities that will enable local-level DIDRR); and
2. **To build networks/connectedness for DIDRR** (through engagement, connectedness, relationship-building, and collaboration – to increase capacity of government, emergency managers, DPOs and community services personnel to work together with PWD, their families and carers to increase the resilience of PWD to disaster).



Figure 1. Stakeholder consultation process

The process evaluation is concerned with what participants learned, how they built connections, and how they might use their knowledge/networks in the future. Recruitment, inclusive facilitation practices and how the consultation process could be improved were also evaluated.

Evaluation Methodology

This evaluation included two components: (1) stakeholders who participated in the consultations were invited to reflect on how they experienced the inclusive community engagement approach and the benefits they received from participating; and (2) project team members reflected on how the consultation invited representation of diverse stakeholders in the local area, and how the facilitation process optimised participation, including the participation of people with disability who required different supports to access information and participation in the consultations. Figure 2 outlines process evaluation methods.

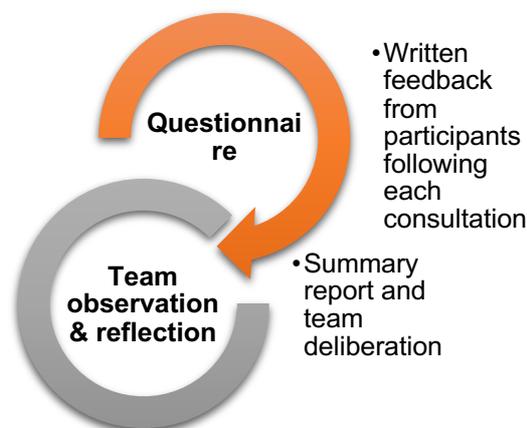


Figure 2. Overview of process evaluation methods

Data collection

The evaluator (first author) who did not have direct involvement with the participants, led the evaluation data gathering and analysis, including the design of data collection tools and interviews with the project team members responsible for implementation.

Questionnaire

A questionnaire was administered to all stakeholders at the end of each stakeholder consultation. Participants had the option of completing a paper or electronic questionnaire.

Questionnaire (main questions) (see Appendix A - SIM Evaluation form):

1. Did the stakeholder consultation meet your expectations? Please explain.
2. Please use the space below to provide any additional comments about your experience attending this consultation.
3. What did you learn about Disability Inclusive Disaster Risk Reduction (DIDRR)?
4. How will you use that learning in the future?

An online version of the questionnaire is also available via this link:

https://sydney.au1.qualtrics.com/jfe/form/SV_bxTo85V7yumKYrr

Team observation and reflection

Observations and reflections made by the project team were used to monitor the delivery of stakeholder consultations with regards to participant recruitment and inclusive facilitation practices.

Following each consultation, project team members wrote a summary of consultation report to reflect on process and content of each stakeholder consultation and to track decisions for future consultations using the Simulated Interview Matrix (SIM) methodology (see Appendix B - SIM Consultation Summary Report Template).

An interview with two team members from the Queenslanders with Disability Network (QDN) was also conducted at the end of all consultations (see Appendix C- Guide of Interview with QDN). QDN held primary responsibility for recruitment of multiple stakeholders, enabling diversity of representation by stakeholder group and perspectives of people with disability. They also held primary responsibility for enabling inclusion of people with disability through accommodations and support provided at the consultations.

Data analysis

Objective: To identify core themes about the process evaluation from the perspectives of participants and team members.

Analysis steps:

1. Paper questionnaires from all stakeholder consultations were scanned, and audio recordings from interviews were transcribed. All data were uploaded into data storage and imported into NVivo, a qualitative data analysis computer software (<https://www.qsrinternational.com/nvivo/what-is-nvivo>). All data at analysis stage were de-identified.
2. Data from questionnaires, summary reports, and interview with partners were analysed separately
3. Analysis steps below were applied to all three data sources:
 - a. Data were read in full before identifying codes that reflect the perspective of participants (open coding). Open coding was used in the first stage of analysis to organise and reduce the data.
 - b. Content analysis was used in the second stage of analysis to group codes into categories.
 - c. Constant comparison of codes and categories – expansion and collapsing of codes into categories; creation of new categories; identification of patterns in the data; observation of relationships and development of emergent themes.
4. Preliminary findings from all data sources were presented thematically in one report and discussed with all project team members.
5. Findings were presented to project advisory for discussion, interpretation, consideration of links to existing policy and practice mechanisms.

Definition of Terms

Open Coding	Open coding is a process whereby words and phrases from the participants are named to identify the key message or meaning
Constant Comparison	data-analytic process whereby each interpretation and finding are compared with existing findings as it emerges from the data analysis.
Categories	is a major component of data analysis (qualitative or non-numeric data) by which investigators attempt to group patterns observed in the data into meaningful units or categories
Themes	themes are patterns across data sets that are important to the description of a phenomenon and are associated to a specific research question. They are helpful in supporting integrated reporting on findings in response to the project purpose.

Findings

Findings are grouped into five themes summarised in Figure 2 and discussed below.



Figure 2. Summary of process evaluation findings

[Image description: a picture of clipboard that contains five themes emerging from analysis: (1) diversity of stakeholder and opportunity to network, (2) inclusive, engaging and well-structured consultations, (3) reasonable accommodation, (4) gaining awareness and knowledge about DIDRR, and (5) expected commitment and role in DIDRR]

Discussion of findings

Theme #1: Diversity of stakeholders and the opportunity to network

Recruitment of participants

The consultations were designed to be inclusive by inviting participation of people with disabilities and stakeholders from across each LGA and including participation from government, community, disability, health and emergency sectors together. Queenslanders with Disability Network (QDN), the local partner organisation, led participant recruitment.

There were two ways in which participants were recruited:

1. Recruitment of people with disabilities:

QDN advertised the project and promoted an Invitation to Participate by e-mail and a project flyer (prepared by The University of Sydney research team) (Appendix D) within their networks and other channels such as the QDN website and social media. Interested participants sent an expression of interest (EOI) to QDN reviewing responses of why potential participants were interested to engage in the consultation and why participating in the consultation was important to them. Selection centred on ensuring diverse representation by people with disability at each of the consultations.

There were a number of people expressing interest in the first two consultations Brisbane and Townsville, and not as many with the remaining consultations in Ipswich and Rockhampton. In the two later areas, QDN used their networks and connections at the local community level to identify and invite potential participants.

2. Other mainstream stakeholders

The team developed a list of stakeholder engagement category of sectoral participants that have a stake in and needed to be brought to the consultation. QDN leveraged their state-wide networks and working relationship with range of government and non-government stakeholders in different communities. QDN identified influential stakeholders in each LGA then approached, discussed and invited the targeted stakeholders to the consultations. In practice, recruitment involved numerous telephone conversations with a range of stakeholders to share the objectives and significance of the project to deliver the best outcomes for and by people with disabilities. Participation of other mainstream stakeholders was also supported by the Project Advisory Committee who shared information about the project through their networks, supporting and encouraging participation.

Motivation to engage with the consultation

QDN reported that some participants with disabilities who expressed interest to engage with the project had experienced disaster events and were motivated to contribute disaster risk reduction conversations to and advocate for improved inclusion of and consultation with people with disability. Some participants reported they had never engaged in such consultations or research before and had not participated in planning for emergency management services. These participants wanted the chance to have their voice heard in a forum that would contribute to planning and implementation of emergency and disaster welfare services.

“It’s that the notion of that ‘I’ve never been asked before’ and this is a real opportunity to have my say. For people with disabilities who often been excluded in the conversation around disaster, disaster response and disaster preparation” – Michelle Moss, QDN

For other participants who have not experienced disasters, there were also collective caring about other people they knew who had experienced disasters and the desire of wanting to make things better in future emergency situations.

QDN had also the chance to talk with mainstream stakeholders about their interest in the project. These people indicated that they ought to be involved in the project given their role and responsibility and also expressed personal interest in the topic.

Representation of stakeholders

Engagement across different LGAs varied. Representation of stakeholders across all LGAs is shown in Table 1 which shows participation by stakeholder group. There was high representation of people with disabilities across all LGAs (n = 66). QDN reported that this *“really shifted the conversation and brought a rich perspective and understanding”* during the consultations. They reported that strong representation of people with disabilities also contributed to the shifting perception of non-disabled participants about the capacity and capability of people with disabilities.

QDN recognised that there was lower representation of disability service providers across the consultations. One influencing factor, according to QDN was the change in service delivery following the full roll-out of National Disability Insurance Scheme (NDIS). Pressures on service provision and direct funding models meant that community providers chose not to attend a 5-hour consultation. They noted however some disability support worker service came along to the consultations either in their role as support for a participant or as a participant themselves. There was better representation of disability service providers in Townsville. This may have been due to the recently experienced disaster event motivating participation of this stakeholder group. The NDIS had also been rolled-out in Townsville for some time prior to the consultations.

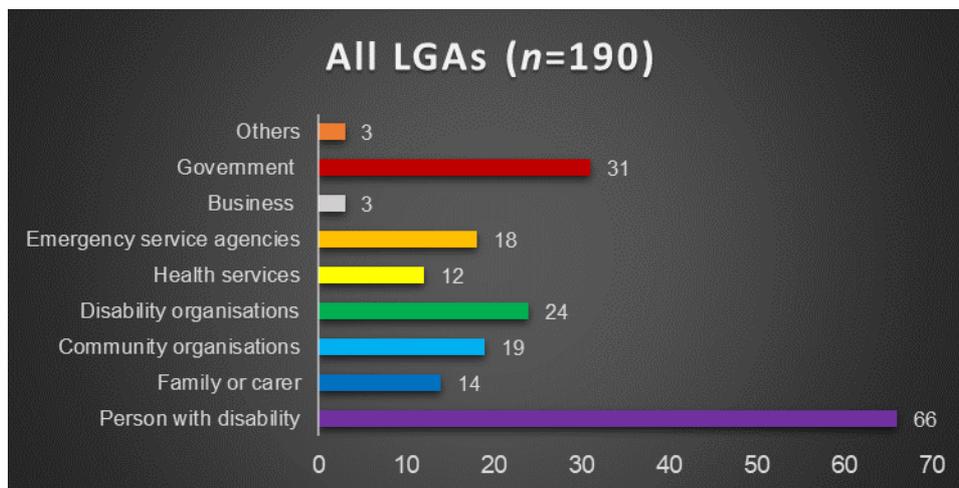


Figure 3. Representation of stakeholders all LGAs

Louise from QDN hoped for a better engagement of neighbourhood centres and community centres (included in Figure 3 community organisations) especially with the context of 90% of people with disabilities are not accessing NDIS services. She felt that neighbourhood centres have the potential to become ‘eyes’ and ‘ears’ on the ground. They also have role in creating social connectedness between community groups. However, she noted that neighbourhood centres are generally under resourced in terms of personnel and that this could hamper their capacity to participate in a 5-hour consultation session. Louise thought that neighbourhood centres are an important target audience because of their potential to link people with disabilities who are excluded from any services to information, awareness and education about disaster risk reduction.

Lower participation of the business sector was also observed. QDN did not receive specific information from the business sector on challenges to their participation. However, they wondered if the timing of the consultation, scheduled during working hours and the duration (five hours), impacted decisions to participate. QDN suggested that future consultations could develop alternative ways for people to give feedback and engage in the consultation or consider ways to deliver the consultation in a shorter period of time.

Participants based on disability type

Figure 4 shows representation by people with different types of disability. People with physical disability were the highest represented group. There was limited participation of people with psychosocial disability and mental health conditions. As a result, the project team engaged in additional outreach and consultation with service providers to gain more information about the needs of people with mental health conditions and to consider ways to improve access for people with mental illness in the future.

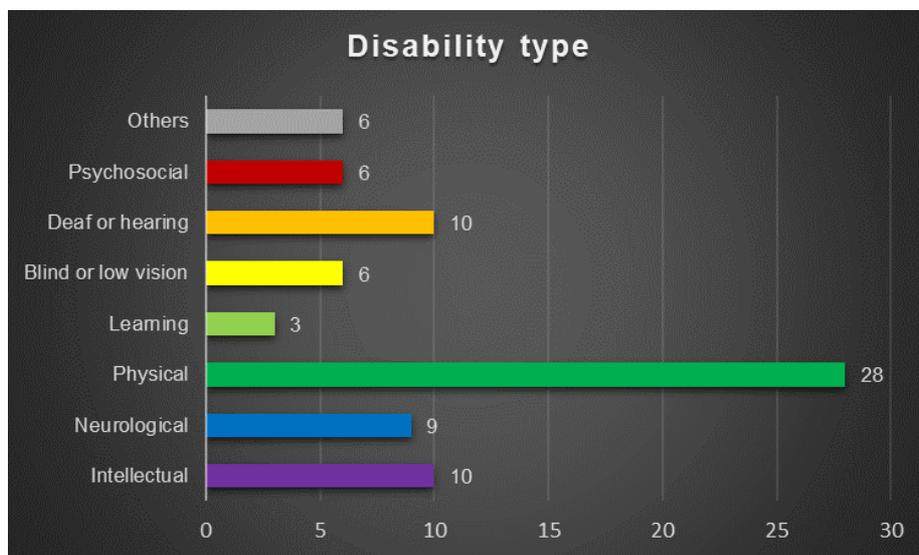


Figure 4. Participants with disabilities according to disability type

Representation of Aboriginal and Torres Strait Islander (ATSI) and Cultural and Linguistically Diverse (CALD) participants

There were 11 people from Aboriginal and Torres Strait Islander communities. Seven participants identified as Culturally and Linguistically Diverse (CALD). Participation of these groups was higher in Townsville compared to the other areas (See Figure 5). More time to provide outreach to disability organisations representing Aboriginal and Torres Strait Islander and CALD communities may have led to greater participation of people from Aboriginal and Torres Strait Islander and CALD communities.

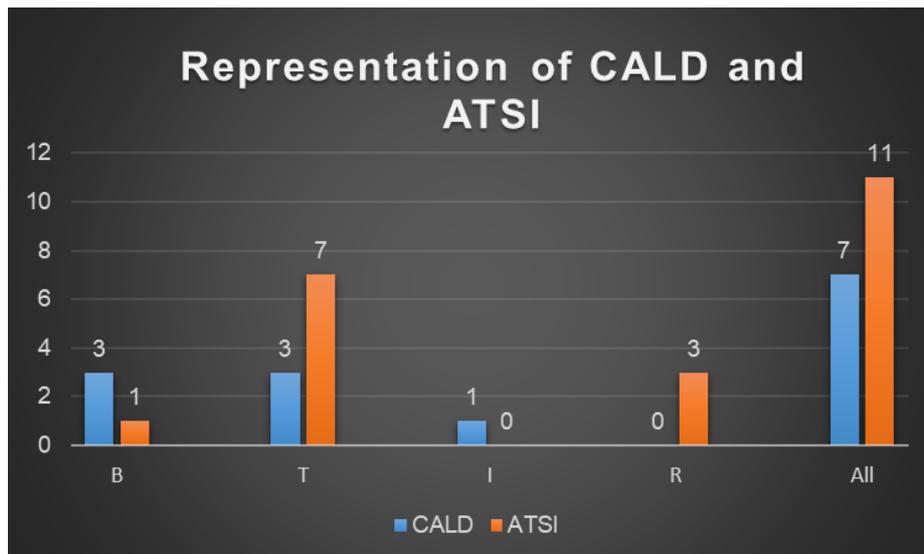


Figure 5. Representation of CALD and ATSI participants

Government participants

There was broad representation of government stakeholders at the consultations (n = 31) reflecting of the diversity of government roles, responsibilities, and interest in DIDRR. Government participants included: community development workers from local councils, emergency management and community engagement officers of the local councils, QLD government from the Department of Communities, Disability Services and Seniors who hold roles in community recovery and resilience, National Disability Insurance Agency, Department of Social Services, Department of Education, and the Office of the Public Advocate.

Opportunity to network

Diversity of stakeholders was also highlighted by some participants (n = 19) across local government areas. These participants appreciated that the workshops invited representation of stakeholders across different sectors to enrich the expertise, views and experience being exchanged during discussions. Two participants in Brisbane and Rockhampton commented on the representation of Aboriginal and Torres Strait Islander and people who are culturally and linguistically diverse (Figure 5) and suggested to invite more participation of these groups. One participant also in Rockhampton noted that there was lack of representation of people with higher needs such as autism.

*Very broad cross section of community with different life lessons and experience –
Emergency service, Ipswich*

*There were a good mix of people here, people who are the ones who know what and
they need to do and good contacts in the community – Family/carer, Ipswich*

*Greatly appreciated the participation and diversity of the group. It was a good spread
of experience and knowledge in the different aspects – Government, Townsville*

*So good to have such a great mixed of group of people and everyone willing to
provide their own experiences and thoughts – Emergency service, Rockhampton*

Only person with high needs, more people with high needs need to attend this workshop (e.g.: autism) – Person with disability, Townsville

Great opportunity for people with disabilities and interested stakeholders to feed into the convo – Government stakeholder, Brisbane

Thirteen (13) participants from across the four LGAs further reported benefitting from meeting diverse stakeholders because it fostered their networking. Networking was further enhanced through the consultation activities which enabled individuals to connect individually. Participants expressed their satisfaction with meeting new people and the benefit it brought them in working together to advance DIDRR.

Very engaging and involving experience. Learnt a lot, met amazing people with some great ideas to help improve a more inclusive DM planning and risk mitigation in the future – Government, Rockhampton

It was great to see and meet such a diversity of people and be able to partake in the development of DIDRR – Neighbourhood group, Ipswich

It was a great experience to learn from a range of stakeholders – Emergency service, Brisbane

I absolutely loved the interview style of consultation... I had the opportunity to talk with people I don't usually meet – Health Sector, Townsville

[Able] to meet with other organisations and see that we are in similar situation or expectations – Disaster group, Townsville

I really enjoyed today meeting new people and learning about their experience – Person with disability, Rockhampton

Theme #2: Inclusive, engaging and well-structured consultations

Organisation of activities

Eighty-three (83) participants across the four LGAs commented on the organisational structure of the consultation; the majority of whom reported satisfaction with how the activities were organised. These respondents referred to the workshops as being 'interactive' and 'engaging'. Via the consultation feedback form, we learned that participants with disabilities were particularly new to having a role as 'investigator' or being 'researcher/co-researcher.' They enjoyed asking questions of other participants and taking notes of other people's answers. There was a sense of pride of being part of that process and coming back together in order to provide feedback and support analysis of findings through small group deliberation and the large group plenary.

I really enjoyed the interview sessions with other group members and discussing responses to the questions as well as being interviewed for my views by other participants – Person with disability, Brisbane

The broad range of challenges certainly and disabilities certainly was highlighted with the opportunity to do 'interview' with varied attendees. Thought provoking and looking forward to this progressing – Peak organisation and emergency service, Ipswich

Good format for eliciting information from all participants – Heath service, Townsville

It was interactive and people/participant were fully engaged – Community organisation, Townsville

I like the format – it was much more engaging to be in conversation/interview format than just listening all day to a small group of presenters. It provided a framework while not being unnecessarily prescriptive in its questions – Government, Brisbane

Didn't have particular expectations but was well run, inclusive and allowed consideration of disabilities most represented. Good questions – Community organisation, Brisbane

I particularly enjoyed the interactive method with interview process – Person with disability, Rockhampton

Some participants mentioned specifically that the questions used in the 1:1 interviews were helpful in eliciting reflection and discussion with people about their experiences in dealing with disaster.

The broad range of challenges and disabilities certainly was highlighted with the opportunity to interview varied attendees. Thought provoking. Ipswich

The organisation, questions, answers put a lot into perspective and brought up lines of thought to bring this into fruition – Person with disability and neighbourhood group Townsville

Very interesting and engaging experience. I really enjoyed the 1:1 interviews, getting insights from very interesting individuals – Government stakeholder, Townsville.

One on one interviews where good as they did not let any [one] person's opinion not to be heard –Disability organisation, Brisbane

The questions that were given made me reflect on my personal situation in disaster. It also opened up my thoughts about the procedures in place for people with disabilities (PWDs) during any disaster and has made me aware of ensuring my preparedness – Brisbane SIM B

Participants across each LGA reported that the consultation was well-facilitated. A few participants in Brisbane recognised that the skills and experience of the facilitator on their evaluation. QDN reported that facilitator was able to check-in with people, make people feel comfortable from the beginning to trust and follow the process. The facilitator was also made the case for equal space for each participant to contribute and enabled balance between the 'talking' and 'listening' exercises.

A very well facilitated interactive and engaging workshop – Emergency service, Ipswich

Great facilitation and workshop format – Government, Rockhampton

Well-facilitated and inclusive – Community organisation, Rockhampton

The facilitator was very good, and the depth of the experience was good – Other sector, Brisbane

Engagement between facilitator and participants was great – QPS, Brisbane

Some participants from Brisbane and Rockhampton felt that the first part of the workshops was too information-heavy and referred to the format as being like a lecture. Participants thought the learning media, such as videos provided during the first session, was useful to them in better understanding

DIDRR during the introductory session. Through the videos, participants learned about progress and existing initiatives such as the Person-Centred Emergency Preparedness (PCEP) Toolkit.

The stories and videos help make the explanations clear – Government, Brisbane

Few participants advised on specific areas for improvement. For example,

Simplify the interview process, too much information in the beginning... add depth to discussion more to have more voices – Peak organisation, Brisbane

Breaking up the introductory material can be considered for future consultation. Few participants from Brisbane suggested to invest more time in the discussion thus allowing participants opportunity to speak. A few participants in Townsville, Ipswich and Rockhampton felt that the process was not straightforward and suggested that the 1:1 interview questions could be made more specific.

I had 2x conversations with workshop participants where the subject wasn't discussed –

Sometimes time management could have been better – Disability organisation, Brisbane

In a roundabout way it got to the point where we wanted to get to – Person with a disability, Rockhampton

I think the questions could be clearer (unless they are deliberately meant to be general/broad) – Disability organisation, Ipswich

To be more specific about with the questions asked, like is it from one major event or general – Family/carer - Townsville

Allow multiple perspectives to be heard

Some participants (n = 34) reflected on their experience attending the consultation and felt that they were given space to discuss DIDRR and share their personal view and experiences with a range of stakeholders. They raised questions and identified barriers that people are currently experiencing with regards to accessing emergency information and services. They offered solutions to address this in the future. Participants in Brisbane felt that the discussion atmosphere was 'open.' Consequently, it encouraged participants to contribute to discussion and account for all participants voices. The majority of participants valued the voice of people with disabilities and stressed the importance of this opportunity to hear their voices. Participants with disabilities in Townsville, Rockhampton and Ipswich expressed their feelings that people were actually listening to their stories. The consultations made them feel like their views were important.

Didn't have particular expectations, but was well run, inclusive, allowed consideration of disabilities that must be represented – Disability organisation, Brisbane

Everyone had the opportunity to have their voice heard – Community organisation, Rockhampton

Being included in discussions affecting my and others with disaster management – Person with disability, Townsville

Felt that I had an opportunity to be heard and share my lived experience – Person with disability, Ipswich

Being able to have our voice heard and help around disability. Also, more around disaster – Person with disability, Rockhampton

'The 1:1 was really good for people who are not comfortable speaking up to a group and everybody I found was sitting down with each other were really open having those discussion' - QDN

Participants observed that the process stripped away 'labels.' Everyone was able to come as equal to the conversation. The process enabled people to see through someone else's 'eyes' of what their role in disability-inclusive DRR could be. For example, an SES worker being able to think about how their approach fit the entire population through hearing stories of some of the difficulties that people with disabilities dealt with in disaster events.

Theme #3 Reasonable accommodation

Accessibility

Arrangement for accessibility at the consultation venues and accommodating support needs of participants with disability was discussed by QDN. They spent time discussing the access and participation needs with potential participants prior to their attendance at the consultation to ensure their meaningful involvement. QDN staff had in-depth conversations with each participant with disability about what the consultation would look like and offered support to enable their engagement. With high expectations on active participation at the consultation, advanced planning with participants with disability was helpful in preparing some participants for what to expect and learning about the best ways to support and enable their active participation.

Auslan interpretation and support to scribe for participants during individual interviews were common accommodations made. During the consultations, a number of participants brought their own support workers and interpreters which provided great support to accessibility. QDN staff and their support workers regularly checked in on participants to see if they required support or adjustments and responded to any requests for support. For example, people with visual impairment needed someone to write down notes for them or to audio-record the presentation. QDN also discussed with participants with high needs (e.g., in the areas of learning and communication) to and ensure they understood instructions and were comfortable over the course of the day such. QDN encouraged breaks for some participants as necessary.

Participants provided verbal feedback regarding accessibility to QDN during the consultation and written feedback through the post-consultation questionnaire. Two participants in Townsville were thankful of the arrangement of interpreters that enable participation of Deaf participants. One participant in Ipswich noted on the number of interpreters and suggested having sufficient interpreters for all Deaf participants, and consideration for group arrangement, (i.e. splitting Deaf people into different groups for easy information access). The same participant also highlighted that captioning is also necessary for Deaf people.

Thank you for having interpreters during the consultation – Person with disability, Townsville

If 4 tables = 4 Deaf people → needs 4 interpreters for easy access... Caption is also important for Deaf people too – Person with disability, Ipswich

A few participants in Brisbane commented on the importance of other types of access provisions that were made including room arrangement to allow participants in wheelchairs to move around consultation room and the provision of interview questions and other materials in large print.

Recommendations made by Brisbane participants were used to improve accessibility at the remaining consultations. For example,

Bit more room for those in wheelchair – give space – Person with disability, Brisbane

Large print or alternate (like electronic) format of materials would be great for low vision – Disability organisation, Brisbane

Workshop venue

Securing accessible venues, particularly in regional areas such as in Rockhampton, was challenging. In an urban area such as Brisbane it was often finding the ones that are also available and also within budget. QDN worked through their network and found that usually council and libraries have accessible venues, but they often were in high demand and were already booked.

Only participants in Rockhampton and Brisbane gave feedback about the workshop venue. Participants in Rockhampton verbally expressed their difficulty in accessing the venue via a long path which was difficult to navigate in parts. Participants in Brisbane reported the venue as being too dark for participants who depended on visual cues to follow the consultation. Few participants suggested ensuring better lighting and better texters for brainstorming and taking notes of the discussion result. Better texters were supplied following the first consultation and appreciated by participants in the other consultation sessions.

Aware of light – for visual impairment and better for Auslan people – Person with disability, Brisbane

More lights – venue

Dark text – paper – Disability organisation, Brisbane

Slides were very small text – Disability organisation, Brisbane

QDN also reflected that having access to extra space (outdoor area) in addition to the indoor space was especially helpful for the individual interviews. In some areas, such as: Brisbane, Townsville and Ipswich, people took opportunities to go outside and have quiet time for themselves.

Other feedback in relation to providing space for participation

There was an input from support group for people who have Chronic fatigue syndrome/Myalgic Encephalomyelitis that it could be challenging for people from this particular group to leave the house for longer than a couple of hours, but they were keen to be involved. Input was provided to do follow up interview outside the scheduled consultations, and there were two follow ups provided via Zoom conference and face-to-face interview at the QDN office. For similar type of group that have mobility limitation, there could be alternative ways and adaptation for engagement such as individual consultation via phone, shorter consultations, or consultations outside of working hours.

Theme #4: Gaining awareness and knowledge about DIDRR

One hundred and twenty-four (124) participants reported that they gained awareness (13%) about DIDRR, new knowledge (79%) and an understanding of the perspective of people with disability in disaster situations (10%) (Figure 6).

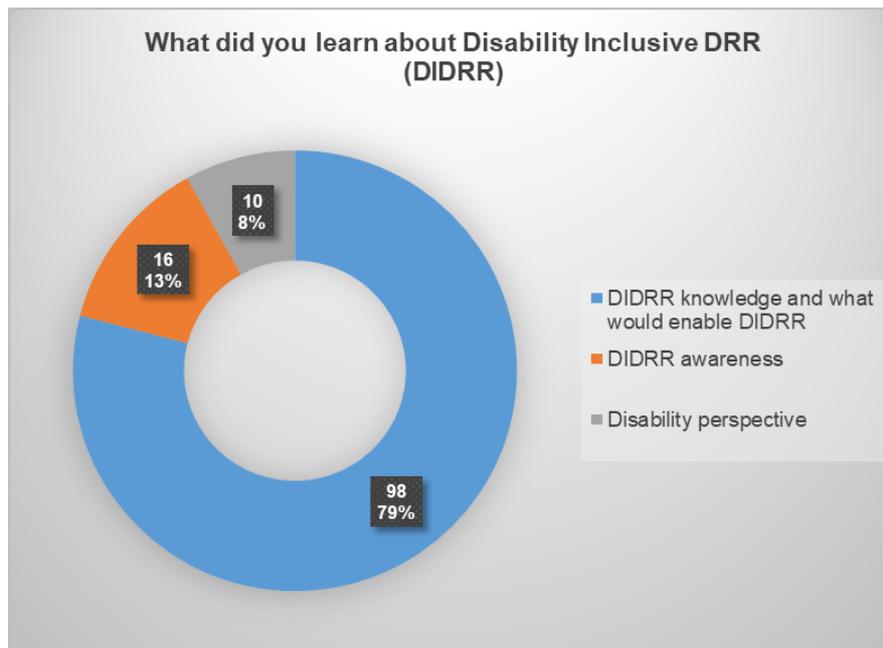


Figure 6. DIDRR learning

DIDRR awareness

For 16 participants (13%) across the all areas, learning about DIDRR was new and people were generally not aware of available DIDRR resources or how to access those resources. Participants came to understand more about the vulnerability of people with disability in disaster and the significance of disability inclusive DRR intervention. Others reflected on the relevance of the topic to their life or role. For example, one participant in Townsville expressed the needs of such discussion following the recent flood experience. This participant also noted the uncertainty over who is responsible for people with disabilities in disaster. This participant considered the importance of the consultation providing insights into this challenge. One participant with disability in Rockhampton realised that they are able to have more support to plan for disasters. Further consultation is needed to ensure appropriate provision of future intervention, as expressed by one participant in Brisbane.

*I'd never heard of it before. I learnt a lot and I think it is a valuable action that is needed –
Person with disability, Ipswich*

DIDRR is a constant topic of discussion in our local groups + networks particularly following the recent flood and the uncertainty of who has responsibility for people with disability during a disaster – Health sector, Townsville

Never really thought about it – Family/carer, Townsville

That we are able to have more support – Person with disability, Rockhampton

Level of understanding of disaster management is low – RSCPA, Ipswich

With the climate change being prominent topic in all aspects of life and with the ever-increasing aged sector, this group consultation is timely in creating awareness and putting policies and procedure in place – Person with disability, Brisbane

This is very new to me and it has opened my eyes more to disaster management and assisting more with disability persons – QPS, Brisbane

In addition to awareness about community and people with disabilities, one participant in Ipswich raised concerns about arrangements for animals.

Animals need to be included in a planning – RSCPA, Ipswich

DIDRR Knowledge

Participants reported on a range of learning about DIDRR. In general, across all LGAs, participants learned that DIDRR is a very broad topic and through the consultations they picked up new knowledge such as terminology, understanding of disaster risk and vulnerability of people with disability in disaster situations, the importance of inclusion, and what's needed for an inclusive response. Participants also gained knowledge about the importance of individual preparedness.

I did not know it existed until I got the form to fill out to join this group. I learned more about how evacuation centres work & I thought more about where to keep what I need – Person with disability, Ipswich.

That it is an integral part of a society to ensure safety measures are in place including awareness for the more vulnerable members of society should disaster (natural or otherwise) strike – Emergency service, Brisbane

Preparation is really important at the level of individuals, their families, communities and agencies/service including emergency service – Health service, Ipswich

A lot! I know a lot about DRR but not about DIDRR. Very interesting – Emergency service, Townsville

Terminology is new. Reflection on individual responsibility vs service provision – Government, Brisbane

Few participants in Townsville and Ipswich understood that DIDRR can be overlooked and through the interview and discussion they identified and became aware of the challenges and gaps in current DIDRR practices from multi stakeholder perspectives, such as the lack of social connectedness, and difficulties faced by people with disabilities.

'There are a lot of challenges for people with disability and we tend to make assumptions' – Health sector, Townsville

'How as the community we are still so very different and not connected as a community – Disability organisations, Ipswich

Gap of how it is approached to those disability and their belonging need and disaster & the grassroot support (rescue), capacity, transport' – Person with disability, Ipswich

Participants further reflected that DIDRR has been overlooked for quite a while and for it to be advanced would require multiple solutions and participation of multiple stakeholders to collaborate, communicate and share resources. Although limited, resources and research on DIDRR are becoming available; such as the PCEP toolkit. Participants acknowledged the needs for education and information on DIDRR and that it needs to be tailored to the specific needs of people with disabilities. Participants also acknowledged other factors that would support disaster preparedness for

people with disabilities such as knowing your neighbour, enabling a person-centred approach, and having plans.

There seems to be a lot of people and organisations all working together towards some goals, however they seem to mainly operating independently. A group forum such as this is a great step forward – Government, Townsville

The need to tailor education & ensure it is being funnelled through the right channels who get to the people who need it – Emergency service, Rockhampton

That service providers have a big task addressing the diversity of challenges, but we can help them by explaining our needs are – Disability organisation Brisbane

It's all about awareness and community!! The best people to assist on emergency are those closest (geographically) i.e. Neighbour – Disability organisation Brisbane

Valuable tool in the person-centred framework – Community organisation, Rockhampton

Connecting with service providers to assist individual clients planning and provide a health service prospective to do this planning so people don't simply present in hospital – Health service, Townsville

Disability perspectives

Ten (10) participants from Brisbane, Townsville and Ipswich reported that they gained a better understanding about the perspective of people with disability. In Townsville, three participants learned the best way to support people with disabilities, one person acknowledged that there might be a hidden disability that people are not aware of. In Ipswich, participants learned about the support needs and of people with disabilities in disaster.

Wonderful to speak to individuals in the room, their experiences with disasters and emergencies and the challenges they face and how we can do things better – Emergency service, Ipswich

My perception towards disability has changed and learned a lot about the environment of people with varied disability – Community organisation, Townsville

The best way to assist people with disabilities in time of disaster – Emergency service, Townsville

Direct feedback provided to QDN showed some participants have had limited interaction with people with disabilities before the consultation experience. As a result, the consultation enabled them to see people with disabilities as people and not as someone who needs rescuing. Participants came to understand that people with disabilities have the same have need to increase their self-reliance in emergency situations but require support from others to ensure their safety in disasters.

Theme #5: Expected commitment and role in DIDRR

Commitment

A significant number of participants (127 or 67%) made a commitment to use what they learned in DRR. Sixty-five people (34%) reported that they would be 'very likely' to use their learning and 62 participants (33%) chose 'will definitely use' (Figure 5).

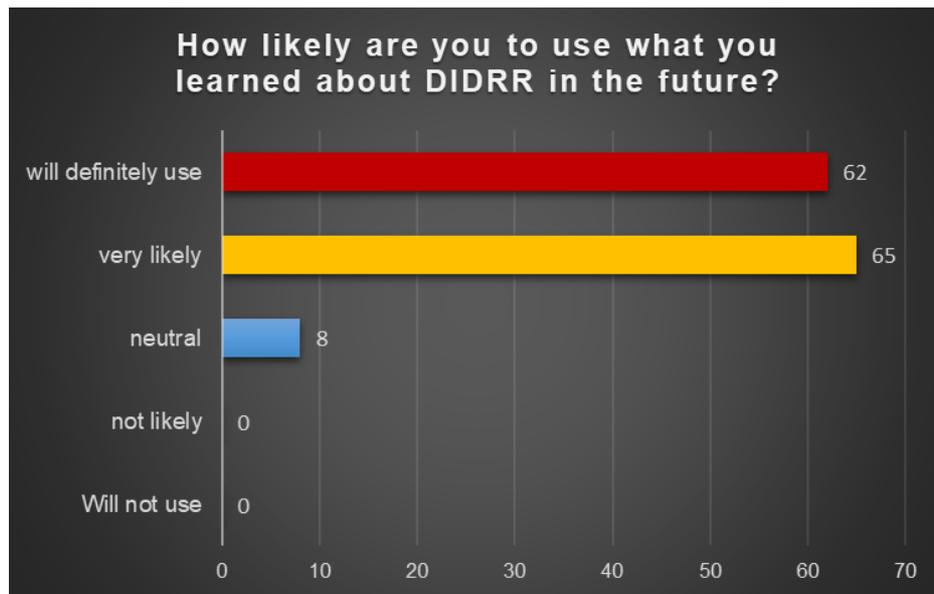


Figure 7. Commitment towards application of DIDRR learning

These participants perceived the benefit of the discussions, such as having learned about DIDRR and the importance developing DIDRR actions. Some people made commitment to actions in relation to their current role including comments such as: checking on clients, making plans, and contacting neighbours.

Resources will be invaluable to our organisation & client group – Government, Townsville

I would possibly go and talk about our emergency plan with my current support team – Person with disability, Brisbane

It's something that I never know about or something that is likely to affect me but closer thought now I realise that this is something I need to consider – Person with disability, Ipswich

Explore issues more inclusively in recovery planning – Government, Rockhampton

In my role in disaster management, we often talk about inclusiveness and having conversations with the right people – Emergency service, Brisbane

I am going to put some of the ideas into my evac quick guides and also ... that warnings and alerts to allow time to prepare if they have a disability – Emergency service, Ipswich

Support event with Auslan interpreters at Townsville Disaster Management Workshops, to promote Deaf community – People with disability, Townsville

A few other participants noted that there is an ongoing need for further training for emergency managers, local councils and organisation on how to better support people with disabilities in disasters.

We require a team of staff to be trained to assist our vulnerable people to support them in the evacuation centre – Community organisation, Townsville

Need a disability specific workshop – Person with disability, Brisbane

While others in Brisbane and Townsville were hoping the project could be expanded to other local areas.

There should be more in my community to help us out – Person with disability, Brisbane

Needs to be taken to regional, rural and remote areas – Disability organisation, Townsville

Eight (8) participants chose 'neutral' as their answers and a majority did not specify their answer. One person said that they were still not sure how to immediately apply the knowledge that might indicate the need for further training. One participant reported already have understanding of the issues and another participant reported their action would depend on the disaster situation and availability of support.

Expected roles in DIDRR

The majority of participants (98%) were sure of the roles they could they play in future DIDRR in their community or organisations (Figure 6). Seventy-eight participants (76%) were committed to contributing to DIDRR practices. The majority would raise awareness and share knowledge about DIDRR through variety of activities such as promoting, sharing information, and educating their organisation and communities. Some others made commitment according to their roles, for example: responding to disaster and assist people with disabilities (emergency manager); taking responsibility for clients (disability organisations). Five (5) people in Brisbane and Townsville expressed their interest to collaborate and work across stakeholders, such as: collaboration across health and disaster sectors. And two people, each in Brisbane and Ipswich, were eager contribute to DIDRR contributor, but they did not specify their strategy.

I do sincerely hope that the information gathered today is used to benefit not only disabled people but the community as a whole – Person with disability, Rockhampton

I learnt that I need to factor this organisation and what it supports into my operation at work – Emergency service, Brisbane

I work at NDIS. Happy to share /provide info to staff and participants. Also have connection to special schools /Deaf Service – Disability organisation, Ipswich

Working on Mental Health recovery and preparedness for the city – Health services, Townville

I work for the LAC partner carer QLD so could have a role to distributing information to people with disabilities – Family/carers, Rockhampton

Definitely a contributor in future disaster – Community organisation, Brisbane

Local council, partner for project in Townsville link with community project development i.e. changing lives, changing community – Government, Townsville

Champion the programme – Emergency service, Ipswich

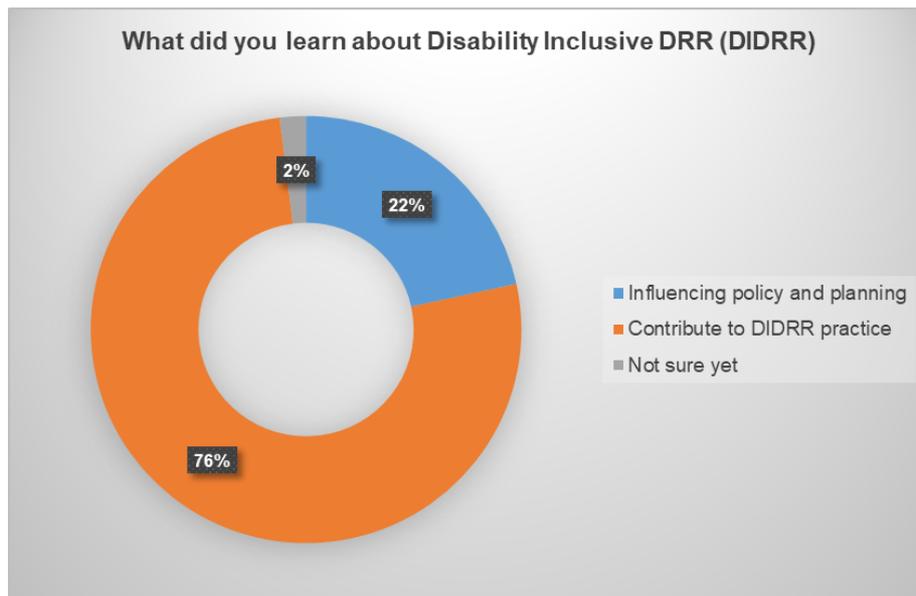


Figure 8. Expected roles in DIDRR

22% of participants were committed to influencing DIDRR policy and planning. For people with disabilities across all areas, imagined taking on a role as DIDRR advocate and representing their community group or clients. People in an emergency service role and other government roles across the LGAs expressed they would ensure disaster planning is inclusive to the needs of people with disabilities.

Consultation with policy maker and service providers in the region – Person with disability, Rockhampton

Be the first local government to have a section in our plans addressing this – Government, Townsville

Providing advice/feedback on organisational policy and planning with work of community affiliates – Person with disability, Ipswich

Ensuring ‘disabilities’ are well included within planning and activities – Health services, Brisbane

Assisting people with disabilities to be heard and supported – Community organisation, Townsville

From the perspective of QDN team members, they see a crucial role for disability organisations to be part of the advocacy and delivery of DIDRR, and the Queensland DIDRR toolkit. Particularly in relation to developing knowledge and skills in the emergency services sector for working with people with disability, learning how to better support the functional needs of people with disability in emergencies, and making information more accessible and useful for people with disability. QDN recognised a strong skill of people with lived experience who can build capacity in mainstream emergency management services. Practically, disability organisations could facilitate and connect mainstream services to people with disabilities and support through co-design of emergency preparedness or planning resources for people with disabilities. There are some QDN members at the moment who are ready, already doing (capacity development) and willing to contribute to such a role. However, these people will require skill development in areas such as leadership development and

community engagement. QDN is currently working to support people with disabilities with diverse experience to connect with business, and government to co-design and improve knowledge, test and deliver new product and initiatives through a programme called QDN Engage.

Two participants were not sure what role they could contribute. One of these participants wished that there would be more support for DIDRR in Queensland.

Key Messages

- The consultation introduced a disability perspective on disaster risk reduction and raised awareness about the specific challenges for people with disability in emergency situations.
- Participants benefitted from networking and learning together with participants across different stakeholder groups. For most participants, this was a first opportunity to engage in cross-sector learning about the needs and perspectives of people with disability and a first opportunity for all participants to discuss roles and opportunities for DIDRR.
- Inclusive stakeholder consultations were seen as engaging and allowed multiple perspectives to be heard, especially the perspective of participants with disabilities.
- Participants demonstrated commitment to contributing to the advancement of DIDRR implementation. The majority of participants envisioned roles in raising awareness about DIDRR in their community.
- People with disabilities and their representative organisations can play an important role in DIDRR especially the area of capacity development which would mutually benefit the disability and emergency management sectors.
- There was limited engagement from the business sector and community organisations that provide disability support services. Providing alternative ways for these participants to engage with the consultations, such as individual consultation, may increase participation from this group.

APPENDICES

Appendix A – SIM Evaluation Form

SIM Evaluation Form

Where did you attend the consultation? (Check one that applies)

Brisbane Townsville Ipswich Rockhampton

To which gender identity do you most identify?

Do you identify as Aboriginal or Torres Strait Islander?

Yes No

Do you identify as a person from a Culturally or Linguistically Diverse background?

Yes No

What stakeholder group do you represent? (Check all that apply)

- Person with disability
- Family/carer
- Neighbourhood centres
- Community organisations
- Disability organisations
- Peak organisations
- Health services
- Emergency services
- Business sector
- Government sector
- Other, please specify

Did the focus group meet your expectation? Yes No

Please explain

Please use the space below to provide any additional comments about your experience attending this focus group consultation.

What did you learn about Disability Inclusive Disaster Risk Reduction (DIDRR)?

How likely are you to use what you learned about DIDRR in the future? (Circle one)

1	2	3	4	5
Will not use	not likely	neutral	very likely	will definitely use

Please explain

What could be a future role for you in enabling DIDRR in your community/organisation?

Please use the space below to provide any additional comments about the consultation

Are you interested in being contacted in the future about this project or future research?

If yes, please provide the best way to contact you (e.g. e-mail address or phone number)

-----Thank you-----

Appendix B – SIM Consultation Summary Report Template

SIM Consultation Summary Report

LGA (circle): B T I R

Session (circle): SIM A SIM B

- 1 = Person with disability
- 2 = Family or carer
- 3 = Community organisation
- 4 = Disability organisation
- 5 = Health services
- 6 = Emergency service agencies
- 7 = Business
- 8 = Government
- 9 = Other

A. Number of participants

Stakeholder Groups	Number of participants			
	All	M	F	Others (Does not identify; prefer not to say)
Person with disability				
Family or carer				
Community organisations				
Disability organisations				
Health services				
Emergency service agencies				
Business				
Government				
Other (specify)				
Total Participants				

A. Opening and orientation from Dr Michelle Villeneuve

Please write and elaborate highlights of this session (in bullet points). Please use the following guiding questions if necessary:

- What is the general understanding of participants regarding the SIM consultation process?
- Were there questions/concerns from participants?
- What worked well from the session?
- What could be improved? (if any)

B. Data collection

First phase - one-on-one interviews

Please write and elaborate about this session (in bullet points). Please use the following guiding questions if necessary:

- How easy was it for participants to follow the instructions?
- What worked well from the session?
- Were there questions/concerns/difficulties from participants? (this includes if there a question that's difficult to understand/answer)
- What were the answers/assistance provided to overcome the above question?
- Were there adjustments made to instruction provided by facilitators?
- What could be improved? (if any)

Second phase - small group discussions

Please write and elaborate about this session (in bullet points). Please use the following guiding questions if necessary:

- What were the predominant themes nominated by each group and how did the group deliberate?
- What worked well from the session?
- Were there questions/concerns/difficulties from participants?
- What were the answers/assistance provided to overcome the above question?
- What could be improved? (if any)

Third phase – plenary discussion

Please write and elaborate about this session (in bullet points). Please use the following guiding questions if necessary:

- What are the predominant themes nominated by the plenary and what were the key points of discussion?
- What worked well from the session?
- Were there questions/concerns/difficulties from participants?
- What were the answers/assistance provided to overcome the above question?
- What could be improved? (if any)

C. Process evaluation

Please write and elaborate about this session (in bullet points). Please use the following guiding questions if necessary:

- Were all consenting participants able to fill out process evaluation? Please describe.
- Were there questions/concerns/difficulties from participants? (this includes if there a question that's difficult to understand/answer)
- What could be improved? (if any)

D. Inclusive facilitation strategy

(This section is to check if all participants are able to participate and how well did, we facilitate their engagement from the perspective of accessibility and approach of the consultation.)

Please write and elaborate about quality of engagement or participation of all participants (in bullet points). Please use the following guiding questions if necessary:

- Were all participants able to participate in the SIM consultation's activities? Please describe.
- What works well from the activity plan that enable this participation?
- What could be improved? (if any)

E. Any other issues

Please use this space to write and elaborate any other issues that have not been covered in the earlier sections.

Appendix C – Guide of Interview with QDN

Interview questions

A. Participants recruitment

I am interested to know your reflection about the recruitment of participants. Could you share your opinion on the representation of each stakeholder group?

Probes:

- a. Who were or were not there?
- b. What challenged participants that were not present?
- c. Any opportunities to follow up with those who were not present?
- d. What could be done better in recruiting participants?
- e. Any other comments

B. Support for participants

Could you share your reflection on the support provided for all participants, and particularly for participants with disabilities, to engage in the SIM consultation process?

Probes:

- a. Physical accessibilities and other accommodation?
- b. Engagement outside of SIM consultations?
- c. Suggestion for improvement in the future?
- d. Any other comment?

C. DIDRR learning experience

SIM consultation participants reported learning new knowledge about DIDRR for the first time and making new networks in this project. Thus, I am interested to understand about you and your organisation's learning experience about DIDRR. Could you share, if any, personal or organisational learning you experience through being a key partner in the DIDRR research collaboration?

Probes:

- a. Insightful moment during the consultation process?
- b. Engagement with stakeholders?
- c. Any other comments?

D. Future role in DIDRR

What do you see the role of QDN and other DPOs in DIDRR in the future? And in your perspective, how could the role of people with disabilities and their representatives be maintained, increased and expanded?

Probes:

- a. In DIDRR advocacy
- b. In DIDRR implementation
- c. DIDRR collaboration.

Appendix D – Recruitment of Participants with Disability

Disability inclusive & Disaster-resilient Queensland

Seeking Expressions of Interest from Persons with Disability

People with disability representatives in Disability Inclusive Disaster Risk Reduction (DIDRR) Consultation

Queenslanders with Disability Network (QDN) are seeking a range of diverse representatives of people with disability with an interest in making disaster management and planning in their local community more inclusive of the needs, interests and experiences of people with disability.

QDN is working in partnership with Queensland Department of Communities, Disability Services and Seniors (DCDSS) and the Centre for Disability Research and Policy (CDRP) at the University of Sydney to facilitate a series of workshop consultations in Queensland on the subject of Disability Inclusive Disaster Risk Reduction (DIDRR), and are seeking representatives to participate and contribute at one consultation, alongside others in the community.

The consultations will take place in the following locations:

- Ipswich
- Brisbane
- Townsville
- Rockhampton

Purpose:

Queensland is recognised as the most disaster-prone state in Australia. Natural hazard risks include flooding, tropical cyclones, storm tides and landslides. The Townsville flood in February 2019 was an example of how severe a disaster could impact our community, particularly for people with disabilities and seniors.

The purpose of this consultation is to co-design a Disability-Inclusive Disaster Risk Reduction (DIDRR) **toolkit** to enable effective cross-sector community-level DIDRR collaboration, to reduce risk for people with disabilities in disasters.



Role of the Representative:

As a representative your role is to speak up and provide feedback and advice based on your lived experience, and to share thoughts and ideas on disaster preparedness and management. You are expected to participate in a five-hour, workshop style consultation, alongside representatives from Council, health, disability service providers, community organisations and emergency services.



To apply to be selected as a Representative you must:

- Be a local resident in one of the consultation locations
- Identify as a person with disability
- Actively contribute to the consultation and share your thoughts, experiences and ideas on disaster preparedness and management
- Represent the perspective of people with disability, not only your personal perspective

Time and location:

The consultations will be held in a fully accessible venue in your location and will run for five hours, finishing no later than 3pm.

Remuneration and Support:

Participant stipend for this consultation is **\$250**, and this amount is inclusive of contribution for your travel costs to and from the consultation.

This payment will be made to your bank account, upon completion of your participation.

If support is required to participate (e.g. AUSLAN interpreters, or other support needs), please advise us when completing your Expression of Interest application.

How to apply:

To apply to participate in this consultation please complete the ‘Expression of Interest’ form here: <https://qdn.org.au/eoi-didrr/>

Please be advised QDN are seeking a diverse representation of people with disability. A selection process will be undertaken for all Expressions of Interest, and you will be advised on the outcome of your application.



For any questions contact:

Louise Abson

Project Officer

Email at labson@qdn.org.au Phone on 07 3252 8566

Contact:

Michelle Villeneuve, PhD

Stream Leader, Disability Inclusive Community Development
Centre for Disability Research and Policy
Faculty of Health Sciences, The University of Sydney

michelle.villeneuve@sydney.edu.au

www.collaborating4inclusion.org

<https://twitter.com/ResearchC4I>

<https://www.facebook.com/disabilitynaturaldisasterstudy/>

Citation:

Pertiwi, P., Villeneuve, M. (2019). *Disability Inclusive Disaster Risk Reduction Stakeholder Consultation: Process Evaluation Report. Issue 1, No. 5/2019: A report produced as part of the Disability Inclusive and Disaster Resilient Queensland Project Series.* The Centre for Disability Research and Policy. The University of Sydney, NSW 2006.

ISSN: 2652-2241 (Online)

This project was funded by the Queensland Department of Communities, Disability Services and Seniors and conducted in partnership with the Queenslanders with Disability Network (QDN) and the Community Services Industry Alliance (CSIA).