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DISASTER PREPAREDNESS PLANNING FOR THE HOMELESS

Practices & Gaps

R.R. ERICKSON, PH.D.

Disaster Preparedness Planning for the Homeless:

Practices & Gaps

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Disaster Preparedness Planning for the Homeless: Practices & Gaps

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ABSTRACT

The problem addressed by this study was the American failure to meet the disaster preparedness needs of the homeless. The purpose of the study was to assess the gaps between the best practices for disaster preparedness, as identified by FEMA and emergency and disaster management experts, and the current disaster preparedness activities completed by all organizations that offer disaster services to the homeless. The study included content analyses, a gap analysis, spatial data analyses, and the triangulation between the case studies found in the literature review and the study's findings. The research questions asked were, "What are the best practices recommended by experts in managing the special needs of the homeless in regard to the emergency and disaster management processes: Mitigation, Preparedness, Response, and Recovery," "What disaster preparedness steps are addressed by homeless shelters and other disaster service providers for the homeless," "What gaps exist between best practices recommended by FEMA and other experts and what homeless shelters and other disaster service providers for the homeless are currently doing regarding emergency and disaster

preparedness planning," and "What vulnerabilities are created by the gaps in disaster preparedness planning for the homeless in the United States?" The findings showed a great deal of variability in best and actual practices when planning for the disaster needs of the homeless, that disaster preparedness was ineffective, and that the homeless were suffering unnecessarily because of the deficits. The conclusions drawn were that disaster preparedness mandates were needed for homeless shelters and service providers to standardize disaster preparedness processes. Future research is required in order to explore the implementation of disaster preparedness plans and their outcomes.

CHAPTER ONE: INTRODUCTION

The defining characteristic for emergency and disaster management in the 21st century was the deepened interest in disaster preparedness. The Department of Homeland Security (DHS) defined emergency and disaster preparedness as "a continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action in an effort to ensure effective coordination during incident response" (DHS, 2017, para. 1). By this definition, an incident was an emergency or disaster that required the mobilization of significant amounts of community resources (DHS, 2017). The severity and scope of damage produced by disasters, which included the terror attacks on Washington, D.C., New York, New York, and Shanksville, Pennsylvania on September 11, 2001; Tropical Storm Allison of 2001; Hurricanes Charley, Francis, Ivan, and Katrina in 2005; the Evansville Tornado in 2005; and Hurricane Rita in 2005; escalated interest in disaster preparedness (Burby, 2006; Eshghi & Larson, 2008; Okal et al., 2005; Schuster et al., 2001). Each of these disasters had a price tag of well over $500 million, demonstrating the rising financial threat posed by large-scale incidents (Smith, 2007). To reduce the threat of multi-million or billion-dollar crises in the

future, disaster preparedness systems are designed to minimize risks, losses, and costs of disasters.

The damage produced by the disasters from the first decade of the 21st century was significant, but both the immediate and long-term recovery efforts could have been significantly improved, with resulting financial benefits, had the right preparedness strategies been in place (Gamboa-Maldonado, Marshak, Sinclair, Montgomery, & Dyjack, 2012; Miceli, Sotgiu, & Settanni, 2008). FEMA (2017) recommends that localities and states utilize an all-hazards approach to disaster preparedness. The all-hazards approach creates a single disaster preparedness plan to cover all hazards (Paton, 2013). Since this approach creates a general response plan for the average citizen in the jurisdiction, holistic planning strategies need to be added to ensure the special needs of sub-groups found within the community are identified and addressed (Gamboa-Maldonado et al., 2012). The holistic approach to emergency and disaster preparedness required as many stakeholder groups as possible to participate in emergency and disaster planning activities, including representatives for the homeless population (Gamboa-Maldonado et al., 2012).

To be effective, holistic planning is best done on the local level, because local populations and service

providers are experts in the risks, needs, and capabilities of the community (Sylves, 2014). Subsequently, the local level is where FEMA assigns the majority of emergency and disaster preparedness responsibilities and authority, as this is where first responders are positioned and where resources are easiest to access (Sylves, 2014). The hierarchy of disaster response is local, state, and then federal governments (Sylves, 2014). However, while local emergency and disaster management departments accept the responsibility of being the primary agent of emergency and disaster preparedness, resource limitations restrict the scope of locality mitigation, preparedness, response, and recovery to general preparedness for the community as a homogenous whole (Chandra et al., 2013).

The restriction of the scope of local government preparedness impairs the efficacy of the holistic approach to disaster preparedness. Specifically, it limits the ability of local emergency and disaster management departments to effectively identify and address the preparedness issues associated with vulnerable populations, such as the homeless (FEMA, 2017). The main problem keeping local EDMs from planning for special populations is that EDMs routinely fail to recruit or include representation from vulnerable populations found within the community in preparedness activities (Reininger et al., 2013). A vulnerable population is

defined as a population that has an impaired ability to function in society and to respond effectively to emergency and disaster situations because of social, economic, physical, psychological, or emotional limitations (Chong et al., 2014).

The lack of representation of homeless populations or their advocates is dangerous because homeless populations accounted for 549,928 people across the United States in 2015, and populations have continued to grow slowly since (U.S. Department of Housing and Urban Development, 2016). To understand the special needs of this subpopulation fully, some form of representation is needed on disaster preparedness planning committees for the homeless. Representation can be members of the homeless population, advocates for the homeless, service providers to the homeless, or a combination of people from these groups. The representation will provide important planning information, insights, and resources that are currently missing from the government disaster preparedness process (Walters & Gaillard, 2014). By filling this gap of representation and knowledge, the heightened state of risk experienced by the homeless during emergencies and disasters can be mitigated (Walters & Gaillard, 2014).

While FEMA recognizes this oversight, it places the responsibility for disaster preparedness planning

for special needs populations, including the homeless, onto organizations that serve the population or the people with special needs themselves (Walters & Gaillard, 2014). This is problematic for a number of reasons, including the fact that the homeless and organizations that serve the homeless have limited resources for preparedness and do not have access to the expertise needed to effectively establish disaster preparedness plans (Gin, Kranke, Saia, & Dobalian, 2015). Subsequently, homeless people cannot prepare for disasters and service providers for the homeless must piece together preparedness plans, if they indeed create them, using what information is available online and using their own judgement (Every, 2016). These practices create incomplete and inconsistent disaster preparedness, limiting the ability of the homeless to access resources and help during an emergency or disaster. When the process is assessed, the problem is a gap in roles and responsibilities associated with disaster preparedness for the homeless. First, city emergency and disaster management departments do not understand the needs of the homeless, and successively expect that homeless advocacy groups and shelters will address these needs. Second, homeless advocacy groups and shelters do not have disaster preparedness knowledge, skills, and abilities, so they expect that the city's emergency and disaster management department will take care of disaster preparedness

efforts. In the end, no one is planning or preparing to meet the disaster preparedness, response, and recovery needs of the homeless.

The current standards for emergency and disaster preparedness began as a response to the aftermath of the events of September 11, 2001, and the passing of the Homeland Security Act of 2002 (Public Law 107-296, 2002). The objective of Homeland Security Act was to centralize all federal resources used to protect homeland interests and security under one agency figurehead, the Department of Homeland Security (Public Law 107-296, 2002). By centralizing homeland security functions and agencies, interagency collaborations and information sharing were made more efficient. One of the benefits of centralizing national security functions and agencies, in terms of emergency and disaster management for the United States, was that the centralization of homeland security efforts encouraged the adoption of a standardized approach for emergency and disaster preparedness (Public Law 107-296, 2002, Title I; Waugh & Streib, 2006). The standardized process for emergency and disaster preparedness was the all-hazards approach introduced by the Federal Emergency Management Agency (FEMA) (Paton, 2013; Von Lubitz, Beakley, & Patricelli, 2008). This approach created one general preparedness plan for all hazards a community faced (Paton & Johnston, 2017). While

this was an efficient method of preparedness planning, it failed to help communities effectively plan for the special needs of vulnerable populations (Walters & Gaillard, 2014). For example, it did not identify how to locate the homeless, who did not have physical addresses, it did not establish what specialty services were needed for mental and physical health needs of special populations, and it failed to account for the need to provide transportation for the homeless who did not have transportation of their own to use for evacuations or to move to shelters.

One of the first tests of the all-hazards approach to emergency and disaster preparedness planning, following the passing of the Homeland Security Act, was Hurricane Katrina (Walters & Gaillard, 2014). Hurricane Katrina was not only devastating because of the damage caused by the hurricane, storm surges, and failure of the levee, but also because it demonstrated how ill-prepared communities were to deal with the special evacuation, sheltering, and recovery needs of vulnerable populations (Laditka et al., 2008). Horror stories emerged as news crews moved into New Orleans to report on the impact of the disaster. However, while stories of nursing home residents being abandoned by their caretakers, people sheltering in sports arenas, escalated violence and crime at disaster shelters, and the massive loss of property in New Orleans attracted the attention of

the media and researchers, no one talked about the homeless or the reality that the homeless were viewed as a disposable part of the population by the local, state, and federal governments responding to the crisis (Moynihan, 2012). For example, a study by Moynihan (2012) reported that the most underserved population during the Hurricane Katrina response was the homeless. Part of the problem was that public policies were not in place to authorize the procurement of resources, such as boats, to support rescue efforts for the homeless (Moynihan, 2012). Additionally, since the homeless did not have a formal address, search and rescue teams did not have a list to use to identify individual homeless in the impacted areas who needed help. Consequently, the homeless were left in dire situations with little hope of being looked for, rescued, or provided with assistance (Moynihan, 2012).

The lack of concern over the homeless in emergency and disaster situations in the first part of the 21st century created a humanitarian crisis (Moynihan, 2012). The homeless were just as human as property owners and renters, and they had a right to emergency and disaster response and recovery services just like any other resident in a community (Gin et al., 2016). However, the lack of representation of homeless or organizations that serve the homeless on disaster preparedness

planning committees produced gaps in preparedness for the homeless. This was seen in the failure to authorize efforts and resources to rescue the homeless during the Hurricane Katrina disaster, as well as in the lack of concern about moving the homeless to shelters and helping them to recover from the disaster (Moynihan, 2012). These examples demonstrated that the all-hazards approach to preparedness has deficits in terms of understanding and meeting the special needs of vulnerable populations (Fogel, 2017; Moynihan, 2012). Furthermore, these examples suggested that for communities to meet the special disaster preparedness needs of homeless populations, communities need to create effective preparedness plans that address the specific needs and vulnerabilities of the homeless.

Statement of the Problem

This study addressed the problem of a failure to plan adequately for the special disaster response and recovery needs of the homeless, a vulnerable population, resulting in devastating consequences (Coe, Moczygamba, Harpe, & Gatewood, 2015). According to Moynihan (2012) it took weeks to authorize boats to evacuate the homeless stranded in the flooded city of New Orleans following Hurricane Katrina (Moynihan, 2012). The effects of inadequate planning for the homeless during disaster

preparedness activities were also highlighted in Fogel's 2017 study that collected data from focus groups of homeless who had survived natural disasters in California, New York, or Florida. Fogel reported that the homeless were denied assistance post-disaster because they did not have identification, a physical address, or a phone number, and the disaster management agencies failed to communicate with the homeless about where to access shelters and resources (Fogel, 2017). Fogel reveals that local governments and private organizations serving homeless populations during disasters are both failing to understand the disaster preparedness and response needs of the homeless. Consequently, the homeless are denied assistance and/or only offered help as a matter of chance when the homeless person happens to cross paths with first responders or other aid providers. Finally, the organizations that do offer services to the homeless are severely limited in their support capabilities because of small operational budgets and limited access to disaster preparedness expertise (Every, 2016). As a result, the reach and efficacy of the help offered to the homeless are grossly limited. This is a service gap, and social injustice, that needs to be corrected. By correcting this, when disasters occur, the homeless will be offered equitable disaster response and recovery services as the rest of the population.