

## **Ethnicity and Minority Status Effects on Preparedness**

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Participation of the entire populace in preparing for and responding to an event is imperative to minimizing harm and saving lives. Racial/ethnic minorities, defined as groups differing from the majority population by race, culture or language are often more vulnerable in times of disaster, yet are frequently not included in disaster plans and suffer disproportionately from adverse outcomes. This became especially evident in the United States in the aftermath of Hurricane Katrina, which ravaged the Gulf Coast region on 29 August 2005. The areas most affected by the hurricane were predominantly poor and African American.

A combination of factors associated with minority status contributes to the disaster vulnerability of racially/ethnically diverse populations. These include the social and economic conditions which often characterize minority communities, cultural and linguistic barriers, and distrust of government authorities. These dynamics largely hinder the ability of minorities to prevent, protect against, quickly respond to and recover from disasters.

### **Social and Economic Conditions**

Social and economic indicators associated with minority status—such as poverty, housing conditions, employment status and social supports—can have a profound influence on the preparedness of racially/ethnically diverse communities. Minorities living in poverty often do not regard disaster preparedness as a priority, especially if they are faced with more immediate “disasters” such as environmental toxins and daily concerns related to survival, crime, violence or pre-existing health conditions. In addition, low-income and poor racial/ethnic minorities frequently lack sufficient financial resources to take protective measures such as purchasing home or renter’s insurance, making structural changes to the home to minimize damage, stockpiling emergency supplies and having access to reliable transportation for evacuation.

Segregated residential patterns and substandard housing conditions, often inherent in poor minority communities, also make these populations disproportionately more susceptible. For example, when Hurricane Katrina hit, the Lower Ninth Ward—the lowest-lying area of New Orleans, Louisiana and most at risk for flooding—was 98% African American. When the Northridge Earthquake struck California on 17 January 1994, it largely affected regions populated by low-income Latino farm workers, many of whom were confined to substandard, unsafe housing and experienced greater material loss and homelessness than White majority or more affluent communities.

Efforts to improve the preparedness of minorities, particularly the poor and low-income, require the development of programs and policies that reach deep into the social, economic and political structures of communities. Examples include programs to improve low-income housing, expand low-wage employment opportunities, improve public transportation systems and expand access to essential health services to help mitigate the disproportionately adverse effects faced by these populations in disasters.

### **Cultural and Linguistic Barriers**

Culture and language proficiency largely influence how individuals perceive and prepare for threats prior to a disaster and how they respond and cope in the aftermath. In the pre-disaster phase, culture largely shapes attitudes toward disasters and information-seeking behaviors of racial/ethnic minorities that may differ from the mainstream. Many minority communities, for example, prefer to rely on family, friends and social networks for disaster information as opposed to educational materials and public announcements. Such information-seeking preferences impact protective behaviors and actions among minorities, including decisions related to evacuation.

In the disaster warning phase, cultural differences and linguistic barriers can distort the meaning of important messages, negatively impacting protective behaviors, contributing to non-compliance, and placing minorities at heightened risk for adverse outcomes. This has historically been the case in the United States, where disaster warnings and announcements have largely been communicated in English and where translated messages, when available, have often been less accurate, appropriate or timely. In the post-disaster phase, cultural and linguistic differences inhibit effective communication between service providers and minority victims.

Efforts to ensure that minority communities are well informed prior to, during and after a disaster require that disaster planning organizations tailor public health messages for cultural and linguistic appropriateness, utilize preferred and trusted messengers, as well as multiple channels of communication, such as ethnic media, bilingual community volunteers, and print materials with pictograms, appropriate translations and simple language for individuals with low-literacy. In addition, disaster organizations that build their cultural and linguistic capacity—through for example, expanded workforce diversity, cultural competence training for responders and training of bilingual interpreters for disasters—are able to more effectively respond to minority needs before, during and after a disaster. Resources have emerged in the United States to facilitate in this process. These include, for example, the *National Standards for Culturally and Linguistically Appropriate Services* issued in 2001 by the U.S. Department of Health and Human Services' Office of Minority Health (OMH) to provide guidelines and recommendations on improving care to minorities. In addition, with support from OMH, the Drexel University School of Public Health along with a broad group of stakeholders issued a *National Consensus Statement on Emergency Preparedness and*

*Cultural Diversity* as well as guiding principles and an online resource center ([www.diversitypreparedness.org](http://www.diversitypreparedness.org)) in 2008 to provide the field with specific information, tools and resources for integrating minorities in preparedness planning, implementation and evaluation.

### **Distrust of Government Authorities**

Trust refers to the assured reliance on others to act in one's interests with responsibility, capability, honesty, equity and transparency and is critical to facilitating adherence to appropriate preparedness and response actions. Personal experiences, culture and language proficiency largely influence perceptions of trust. Low trust, and in many cases distrust of government authorities and service providers, hinders the preparedness of minority communities. Trust is particularly low among certain minority groups—such as undocumented immigrants, refugees and immigrants fleeing authoritarian countries, and others accustomed to racial/ethnic discrimination—who fear unequal and inappropriate treatment by government authorities. In the United States, despite being eligible for emergency relief, fear of immigration enforcement and deportation inhibits undocumented and legal immigrants with undocumented family members from seeking recovery assistance. For example, in the aftermath of the wildfires in San Diego, California in 2007, immigrants were reluctant to obtain medical care, evacuate from dangerous conditions and ask for basic necessities such as food, shelter and clothing.

Community engagement and partnership in disaster planning is central to fostering trust and improving preparedness among racial/ethnic minorities. Effective community engagement involves the active participation of trusted representatives of minority communities—e.g., faith leaders, community health workers and ethnic minority leaders—in disaster planning to ensure that social values, cultural norms, beliefs, and language issues are realized and appropriately addressed in plans and procedures. Community engagement is especially important for developing effective risk communication strategies, conducting disaster needs assessments and asset mapping, and developing drills and exercises that incorporate scenarios related to minority status effects on preparedness.

In summary, racial/ethnic minorities often experience a range of barriers to preparedness and suffer disproportionately from adverse outcomes. To safeguard the safety, health and well-being of all populations, it is imperative to address the distinct needs of minority communities and actively engage them across preparedness planning, implementation and evaluation.

4 | Original article published in: Penuel, K.B. and Statler, M. (Eds.). (2011). *Encyclopedia of Disaster Relief*. Sage Publication.

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See Also: Cross Cultural Interactions; Community Preparedness; Hurricane Katrina; Language Issues and Barriers