

# Abstracts of Oral Presentations-WADEM Congress on Disaster and Emergency Medicine 2019

## VULNERABLE GROUPS

### Disaster Planning for the Urban Homeless Population in the United States

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**Introduction:** Homeless individuals may be dependent on social services for nutrition, shelter, and protection. These services are susceptible to disruption in disasters. Individuals are often frequent utilizers of emergency health care services, and an increase in emergency medical services utilization may be predictable. Disaster planners should anticipate and plan for the needs of these special populations.<sup>1</sup>

**Methods:** A review of disaster planning in US cities with high rates of homelessness was conducted. Utilizing homelessness census data, the five cities with the largest homeless population were chosen for analysis. Publicly available disaster plans specifically targeting at homeless were identified. Planning for nutritional support, shelter, protection, and emergency health-care utilization was identified.

**Results:** Planning specifically addressing the needs of the homeless was variable. Planning items surrounding nutrition and shelter were identified, but those around protection and use of emergency services were more limited.

**Discussion:** Recent disasters in the United States have demonstrated the increased vulnerability of populations with high utilization of emergency services during a disaster.<sup>2</sup> Homelessness is common throughout the United States, and appear to be underrepresented at the city disaster planning level.<sup>3</sup> Resources to assist planners are available, but increased adoption is indicated.

### References

1. Disaster Response for Homeless Individuals and Families: A Trauma-Informed Approach, HHS, ASPR. <https://www.phe.gov/Preparedness/planning/abc/Documents/homeless-trauma-informed.pdf>.
2. L. Dent. Progress in Emergency Preparedness for Dialysis Care 10 Years After Hurricane Katrina. <https://ajkdblog.org/>.
3. Disaster Preparedness to Promote Community Resilience. DVA. <https://www.va.gov/HOMELESS/nchav/education/VEMEC-Toolkit.asp>.

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### Discovering Best Practice for Establishing Evacuation Centers for Vulnerable Populations: Findings from an Australian Pilot Study

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**Introduction:** Potentially vulnerable population groups in disasters include the elderly and frail, people who are isolated, and those with chronic diseases, including mental health conditions or mobility issues. The 2011 Queensland flood disaster affected central and southeast Queensland, resulting in 2.5 million people being adversely affected. Seventy-two local government areas disaster were activated under the Natural Disaster Relief and Recovery Arrangements, which was more than 99 percent of Queensland. The issues regarding the role and responsibility across governments relating to planning, setup, and management of evacuation centers will be discussed.

**Aim:** This paper will report the preliminary findings of a pilot study undertaken with local government officials and humanitarian agencies in Australia concerning their involvement in planning for, setting up, and managing evacuation centers for vulnerable populations in Australia during the Queensland floods in 2011. The objective is to illuminate the challenges officials faced, and the resolutions and lessons learned in the preparation of evacuation centers through this event.

**Methods:** The study involved interviews with local government and relevant agencies' officials who have been involved in establishing evacuation centers for vulnerable populations during the 2011 floods. Six officials were recruited from local government areas affected by the disaster in Queensland, Australia. Semi-structured phone interviews were audio-recorded and thematic analysis was conducted using NVivo software.

**Results:** Three core themes emerged: 1) understanding of the importance of preparation, 2) challenging evacuation center environments, and 3) awareness of good governance principles.

**Discussion:** This pilot study demonstrated that communication with stakeholders during the preparation period prior to a disaster is essential to best practice for evacuation center management. Understanding and being aware of good governance is