DISASTERS AND POVERTY

NATURAL DISASTERS DISPROPORTIONATELY AFFECT THE WORLD'S POOR

Over 90 percent of deaths due to natural disasters occur in poor countries. Even in developed countries, poor citizens are most affected by disasters. Poor residents of New Orleans bore the heaviest loss of life, health and property due to Hurricane Katrina. An event of similar physical magnitude is likely to cause more deaths in a developing country than in a developed country. The disparity in disaster outcomes between rich and poor can be understood as a function of both pre-event vulnerability and post-event response. Factors such as geography, personal resources, community infrastructure and political stability all impact the occurrence and consequences of natural disasters.

Social instability may also accompany poverty particularly when there are large disparities in the distribution of wealth and income. Such disparities may be marked by different language preferences. For example, in Haiti, the poorest nation in the Western Hemisphere, French is often taken as the language of the privileged and Creole the language of the poor. "Just because you speak French does not mean you are smart" can be a call of the poor and disadvantaged who are also stigmatized and denied services as well as respect.

Geography: The poor are more likely to live in less expensive and environmentally vulnerable areas such as flood plains, volcano bases, seismically active areas or tornado alleys. Environmental exploitation, often made for economic reasons (for example hillside deforestation), increases vulnerability to natural disasters such as landslides.

Personal Resources: Poverty is a well-known determinant of poor physical health, and the poor may therefore be more vulnerable to adverse physical health outcomes in the wake of a disaster. Malnourished, non-immunized and/or chronically ill persons may be less able to withstand the physical stress of a disaster. Furthermore, poor persons who have been focused on daily survival are less likely to have resources—extra food, fuel or money—to use in the event of a disaster. When provided sufficient food, the body's response of moving from famine to adequate nutrition can bring its own physical changes and at times symptoms.

Infrastructure: The poor often live in sub-standard housing that is more vulnerable to collapse and destruction during an earthquake or other disaster. Building codes are often not adopted or enforced. Poor communities often lack transportation and communication infrastructure to facilitate an adequate disaster response. Health systems in poor countries are often underresourced even prior to a disaster, and are quickly stretched beyond capacity in the face of increased injuries and illness.

Political Instability: Political instability in many poor countries can hamper the ability to organize a coordinated disaster response. Limited resources can also expose intra-community schisms—sometimes along racial, ethnic, or religious lines—that further complicates necessary community coordination. Disasters open these fault lines of a society composed of differences in economic privilege, race and religion. Immigration out of disaster areas by those able to do so can be dramatic after a disaster. At times this further exacerbates the economic disparities as the wealthy are able to leave and the poor are not. The poor may also use illegal and risky means of immigration (e.g. "boat people") in order to find safety, nutrition, health and work for themselves and their families.

Vulnerable populations: In the face of scarce resources, women, children, the elderly and the mentally or physically ill, may be particularly vulnerable to neglect and exploitation. Children and women of poverty are particularly vulnerable to exploitation as they try to obtain food and safety in a disaster community with none.

Recovery from Disaster: When other countries bring resources to disaster impoverished nations, they can also create expectations that cannot be sustained after the responders leave. Working with the disaster regions populations and recognizing the need for sustainable recovery is a critical ingredient of recovery over the years that are required after a major disaster.

References

Ursano RJ, Fullerton CS, Wiesaeth L Rafael, B. (Eds) *Textbook of Disaster Psychiatry*, Cambridge University Press, Cambridge, UK 2007.

McMahon, M.M., Disasters and Poverty. Disaster Management & Response, 5 (4), p. 95-97, 2007.

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