Emergency Response

Emergency Response is about prioritizing and securing basic needs: food, shelter, and health.

In the case of COVID-19, though hospitals, homes, and the food supply chain were not ravaged by a physical disaster, access to food, shelter, and medical care will be challenging in every community as households struggle to afford basic needs.[47]

The key challenge within the emergency response phase is to exercise strong executive leadership during a quickly evolving situation, with limited information and often inadequate preparation.

At a moment when there is little time to spare yet little room for error, executive leaders will be repeatedly stretched and tested by a variety of confounding circumstances, including:

- **An environment of limited information:** Many local governments do not have access to data on vulnerable and marginalized populations, largely because this data goes unsolicited, not that it cannot be produced. Even when leaders have data, there will likely be a lack of community-generated information that reveals what is happening to people on the margins; a lack of accurate information if measurement protocols and data-collecting infrastructure are not in place; and a lack of permanent or reliable information as conditions will be in flux.

- **Greater difficulty obtaining community input and disseminating guidance:** Decisions will need to be made quickly yet with consideration of the diversity of public needs, while the normal methods of soliciting input and sharing guidance through community institutions are disrupted.

- **A need to balance public safety with economic activity:** Crises often present a struggle to balance between preventing loss of life and protect workers by suspending business as usual, and resuming business as usual given the economic harm that a shutdown has on businesses and workers.

- **Unclear legal obligations and authority:** A state or local government's obligations and authority to address disaster-period challenges are often unclear because responsibility is divided across different levels of government and the situations faced may be entirely unprecedented.

GUIDING QUESTIONS

How will you hear from, and be accountable to, marginalized and vulnerable communities as you form policies to respond to the disaster?

What are your mechanisms for receiving real-time information, and ensuring that information is disaggregated or community-generated to a degree that lets you identify how different communities are being impacted?

How will you address failures that are threating public safety in your community regardless of your authority and legal responsibilities?

How will public safety measures impact marginalized and vulnerable communities differently? How will you be accountable to providing additional emergency assistance to offset these impacts?

1

Create and communicate a tiered plan to respond to multiple levels of disaster.

State and local leaders must regularly describe to the public the actions they plan to take in response to the disaster, adjustments to those actions scaled to the severity of the disaster, and updates on the information on which their decisions are based. By stating a set of emergency actions being considered and the conditions under which they will be enacted, state and local governments enable community members to prepare.

Proactively communicate with marginalized and vulnerable populations. Local governments must open two-way channels of communication with marginalized and vulnerable populations, both to seek and solicit "community-generated data" on the lived experiences of these groups, and to clearly communicate public plans and the underlying risk data. To do so, local governments must recognize and tap into channels of communication trusted by these communities. These channels may be through faith-based organizations, unions, public schools, ethnic media channels, and neighborhood associations, depending on the local context. Communication must happen "early, often, and in multiple formats," using language and messaging that is "locally and personally relevant."[48]

Help households with limited resources prepare for disaster-driven disruptions. To the extent that a tiered response plan is made effectual through preparation, local governments must anticipate that some marginalized and vulnerable populations cannot afford to be prepared and adaptive—for example, by lacking the savings to stock up on supplies. Lower income adults age 50 or older are found to be significantly less prepared for natural disasters and will require additional support to weather disasters.[49]

Bridge gaps in trust that are the result of past injustices. An effectively communicated plan requires a degree of community trust. Communities of color, immigrants,[50-51] older adults,[52] and rural communities[53] have been found to be especially hesitant to trust or interact with public authorities. This reality is understandable given these populations may face barriers to accessing systems of social services, are unaware of such services, or do not have services targeted to them at all, to name just a few reasons for mistrust. This trust must be built by supporting and drawing upon local leaders already trusted by the community to facilitate communication and action.

Boston demonstrated a multi-modal, multi-lingual approach to communicating Covid-19 news to the public.[54] The City of Boston expanded its text service to include 11 languages, targeting 37 percent of its residents who speak a language other than English at home. The City sent sound trucks through the hardest-hit neighborhoods to send public health messages. City employees made weekly robocalls to thousands of older adults, in multiple languages. Finally, bilingual staff conducted interviews with ethnic media to relay information and announcements. These multi-modal approaches are especially important when reaching residents who may not have regular access to internet or broadband.

Networks of promotores de salud, or lay community health workers, can help deliver public health information to marginalized and vulnerable populations.[55] For example, Montgomery County, Maryland has a pool of over a hundred trained volunteer promotores who, during normal times, provide public health information to the local Latinx population regarding access to care, cancer screening services, HIV prevention, and tobacco-use prevention. Promotores can deliver public health messages through informal "knowledge centers" hosted in popular community spaces. This model of training and working with local liaisons is actively used in international development to reach rural communities, and may be applied to rural communities domestically as well.[56]

2

Mobilize rapidly by forming quick partnerships and reorganizing teams and resources.

Local and state governments will be overwhelmed by the scale and range of need during the disaster. Gaps in response will quickly emerge and observing and stopping these gaps will require rapid movement and informal partnerships.

Creatively partner "down" with local organizations to tangibly reach communities and deliver resources. Communities most in need of outreach are often also the most difficult to reach. Local governments must partner with grassroots organizations to both better understand who these populations are, and to get as close to these populations as possible, even if the partner organizations are not traditionally well-established nonprofits. Such organizations may include unincorporated neighborhood associations, religious institutions, and informal groups that have the capacity and connections to serve hard-to-reach people.

Partner "up" with state and federal organizations to provide them with a local understanding of vulnerabilities. Most federal aid will flow through the states, and local governments will need to coordinate closely with states to be effective. Local governments will need to engage state representatives and Congressional delegations to represent local needs at the state legislature and in Washington. As many states and cities exhibit a "red/blue" divide, this coordination may prove difficult. Even in states where the governor, state legislature and mayors are politically aligned, navigating the relationships and the balance of control can be difficult. Regional and state governments are also often legally responsible for marginalized and vulnerable populations that are within local jurisdictions: they oversee court systems, jails, nursing homes, public housing, and other critical systems. A failure to uphold responsibilities to the people within these systems can have severe consequences. For example, during the 2017 hurricane season, state authorities were found guilty of fatal oversights in the regulation of nursing homes,[57] and a mismanagement of correctional institutions is a consistent theme through disasters of all kinds.[58]

Re-task departments whose capacity would better serve a different need in the emergency response period. As a result of the disaster, some local government functions may halt or be greatly reduced—think the Department of Motor Vehicles, parking enforcement, or restaurants inspectors. Assigning these departments to work on critical emergency response activities that have some alignment with their expertise is a way to augment capacity, to reach households and businesses in need, and to handle the massive amount of paperwork that federal disaster aid creates.

EXAMPLES

As an early response to the COVID-19 crisis, the mayor of New Haven was able to apply social pressure on a local university to provide temporary emergency shelter on its campuses when its initial failure to do so—in contrast with another local university—was highlighted in a national publication.[59] Where partnerships cannot be mandated and are not preexisting, leaders can use their influence and publicity to pressure major actors to contribute to recovery efforts.

During the Great Recession, the City of New York partnered with the Financial Clinic to help low-income workers file tax returns for free. The Financial Clinic is an organization that runs one of the largest Volunteer Income Tax Assistance programs in NYC. Waiving the typical $250 fee to file tax returns, the Clinic helped facilitate $3.2 million in earned income tax credits (EITC) to over 2,000 filers.[60]

During Hurricane Sandy, local leaders partnered with FEMA, the Red Cross, and the Census Bureau to access and disseminate local emergency information.[61] This process was an application of FEMA's "Whole Community Approach" to disaster response, which moves beyond government-centric disaster management to mobilize entire communities in preparation for disasters. Collaborations ranged from the use of a FEMA and Red Cross app to provide information to those with smartphones; to collaboration with the Census Bureau's new emergency planner resources which provided demographic, housing, transportation, and special-populations information targeted to local responders.

3 Take decisive action, with an eye towards disparate impact.

Act decisively but thoughtfully by analyzing and anticipating real-time needs through community-based networks. To understand emerging local needs in as close to real time as possible, local governments should partner closely with community-based organizations and advocates led by and serving vulnerable and marginalized groups. Existing data-gathering and performance measurement systems must also be adapted and well-utilized.

Suspend rules and take extraordinary actions where necessary, to directly serve the needs of people. Such actions should be taken in proportion to the disaster. Even though legal obligations and delegation of responsibilities may be unclear, local leaders must step into positions of accountability where other leaders may have failed to act.

EXAMPLES

In the early months of the COVID-19 crisis within the U.S., the emergency measures that local leaders are willing to take have proven to be extensive.[62]

- On housing, many states responded by temporarily suspending evictions and foreclosures, and an increasing number of cities have rolled out rental assistance programs.

- Some cities have created paid sick leave programs, mandating employers to provide proactive or retroactive paid sick leave.

- Many states and cities have moved to decarcerate and release people from institutions.