Disaster Preparedness on Vulnerable Populations: Perspectives from Emergency Managers in the US Southeast Region

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Abstract: Highly vulnerable populations, such as people with disabilities, are among the most vulnerable to disasters and have unique needs in emergency rescues. This paper examines disaster management, emergency preparedness, and training from managers' perspectives for the people with special needs community in the Southeastern United States. Many studies have examined the impacts of natural disasters on local communities; however, this study examines how emergency planning and training for people with disabilities remain crucial to saving their lives. Data were collected using a qualitative, phenomenological approach through interviews with 11 managers from emergency rescue agencies. The findings indicate that most of the emergency managers feel comfortable with the approach to (a)Perceived Familiarity and Existing Provisions in Disaster Planning, (b) Focused Recognition of Commonly Addressed Vulnerabilities, (c) Identification Methods and Their Challenges, and (d) Training Practices and Perceived Gaps. The implications for social change are that this study has the potential to influence policymaking and community engagement toward fairer responses to disasters.

Keywords: Disaster Management, Vulnerable Population, Natural disaster, Emergency Planning and training

I.   Introduction

The social consequences of both natural and human-made disasters are becoming concerning among many individuals with disabilities. Afrin (2025) argued that there has been a dramatic increase in the frequency of disasters over the past couple of decades, with enormous loss of life and property and far-reaching social change. As communities confront such challenges, disaster risk systems must transition toward inclusiveness, equity, and resilience. Sherry et al. (2024) added that disaster preparedness and response programs, historically tailored more for the general population, have often fallen short in addressing the specific needs of at-risk subgroups, especially among people with disabilities. Per Sherry et al. (2024), disabled people are particularly affected in crises, with increased levels of injury, death, and loss of services.

Disaster Risk Reduction and several other global pacts emphasize community-based participatory strategies and the involvement of vulnerable communities in disaster risk reduction. This shift from response to readiness and inclusion recognizes that comprehensive emergency planning and response work when we consider physical, cognitive, communicative, and mental health needs. The transition is prompted by the moral, ethical, and social justice imperative to do so, as well as the need to reduce vulnerability through disaster preparedness to help communities survive disasters and save lives. Research and policy improvements have been made, but opportunities for inclusive planning, especially in local settings with constrained resources and limited institutional memory, remain.

This study explores the perspectives of emergency managers at the local level, the first-line responders in emergencies in the Southeastern United States, on disaster planning and training for people with disabilities. It is also anticipated that such research will identify actionable gaps and provide recommendations to improve inclusive disaster preparedness based on emergency managers' views of what is adequate, inadequate, or missing. The research aligns with the overarching goal of promoting social equity, community resilience, and systemic reform in disaster programs and practices.

II.   Background

The United States is experiencing a shift in its demographic composition, with more people having disabilities or special health care needs. As of 2021, an estimated 44 million Americans, or about 13.5% of the population, have at least one disability (CDC: Disability: 2021). These disabilities are numerous and diverse, including physical impairments and sensory impairments, as well as mental illness and chronic conditions. The most significant risk in crises is for the population with functional needs, including older adults, non-English-speaking,

and those with medical conditions who require assistive technology, at-home interventions, and communication supports.

Natural disasters such as hurricanes, wildfires, floods, and tornadoes have long exposed the shortcomings of disaster preparedness for these high-risk populations. Events such as Hurricane Katrina in 2005 raised serious concerns about prior planning and response (Corrigan et al., 2022), resulting in unnecessary loss of life and tremendous suffering among those least prepared for such events. For example, in Katrina, thousands of residents with disabilities were left behind in inaccessible transportation systems, and medically dependent, unwell individuals and underserved, alienated non-English-speaking and sensory-impaired populations were similarly affected. These mistakes underscore the need to maintain disability across all aspects of disaster management and the horrors that result when inclusivity is neglected.

Several statutes and policies, including the Americans with Disabilities Act of 1990 and the Post-Katrina Emergency Management Reform Act of 2006, support increased access and equity to ensure that people with disabilities have their needs met during disasters (Coffey, 2024). Compliance with these international legal obligations, however, is imperfect due to limited resources, poor communication, and a lack of technical capacity. Targeting messages to individuals can be challenging since "there are no communities that have accurate, current knowledge of everyone with [an access and functional need" (Plevris, 2024). Geographically remote, underserved areas are hardest hit, with fewer resources, infrastructure deficiencies, and less knowledge among emergency personnel (Caoleng & Fermin, 2024; Ude et al., 2024).

In addition, disaster planning does not currently incorporate disability-related information, such as sensory disabilities or specific mental health conditions, or chronic medical problems. It only goes far enough to consider basic mobility or reliance on power. Reaching these communities will necessitate a multifaceted strategy that includes policy change, technological innovation, improved training, and community involvement (Kumar, 2024). However, deficiencies in training, particularly in the use of scenario-based experiential learning, have limited the availability of prepared emergency responders for more vulnerable populations (Orru et al., 2025). As disasters become more complex and disaster patterns change due to climate change and technological advances, the need to address this systematic gap and to develop inclusive disaster management systems further increases. The literature has overwhelmingly demonstrated that community-based, culturally proficient planning grounded in the full involvement of individuals with disabilities and their allies can significantly enhance effectiveness, save lives, and result in greater social justice. That context about what is already in place, what resources are scarce, and what types of training do not yet exist leads us to design better solutions and harden communities that can protect all their members, especially those who are most vulnerable when a crisis strikes.

III.   Problem Statement

Despite the strides made, emergency management efforts still lack inclusion for people with special needs. The literature reveals minimal progress in evacuation and sheltering since Hurricane Katrina and a lack of exercise and community participation (Soroori Sarabi, 2025). Concern about emergency managers' preparedness for the job has received scant attention, and it is an open question how best to reduce and mitigate risks associated with these constituencies. This dearth emphasizes the need for empirical data to inform policies that promote social equity and societal resilience.

IV.   Research Objectives

The primary objectives of this study are:
1. To determine the state-of-the-practice of disaster planning for vulnerable populations or people with special needs in the Southeast United States.
2. To review current emergency-management training programs for first responders and individuals to address the needs of those with disabilities during a disaster.
3. To discover perceived shortcomings and desired improvements in disaster planning and training to protect the lives of people with special needs or disabled people.

V.   Significance of the Study

This research contributes to a better understanding of inclusive disaster management by examining how emergency managers in high-risk areas perceive these challenges. Results are proposed to inform policymaking and training programs, and to support community participation, promoting social equity and community resilience. Such understanding feeds into more efficient, accessible, and fair response systems, which in turn promote an overall

positive social change by minimizing inequities experienced by disenfranchised people (Chagadama, 2022; Chagadama & Luamba, 2025)

VI. Literature Review

1. Conceptual Framework
The conceptual framework of this study is the Sendai Framework for

The conceptual framework for this study was the theory of image restoration. This theory was developed by Benoit in 1995 as an approach to developing and understanding messages and images in crisis response. A crisis can destroy people, the environment, and organizations, particularly when the actions of organizations or individuals are inconsistent with nature or the crisis's causes (Osegbue, 2025). Correa (2025) opined that the theory of image, which focuses on cultivating and protecting a destination's image from crises, is paramount to restoring an organization's image.

The effectiveness of image-restoration theory depends on the nature of the crisis, and reactions to it vary. The theory of image restoration is helpful to communicators in rebuilding damaged reputations through options such as denial, evading responsibility, reducing offensiveness, corrective actions, and mortification. The theory of image restoration provides strategies for organizational leaders to address crisis challenges and appropriate communication methods to ensure that the intended audience is reached (Correa, 2025; Osegbue, 2025). The theory of image restoration also provides management leaders with appropriate strategies to sustain organizational longevity and sustainability in the face of disasters such as hurricanes and tornadoes.

2. The Disaster Management Cycle and Vulnerable Populations
Disaster management is a complete cycle comprising mitigation, preparation, response, and recovery to reduce vulnerability and the community's impact. Many prior programs were aggregating or blanket in nature and did not consider the specific needs of vulnerable individuals, including People with Disabilities (Windsor, 2025). Haque et al. (2025) argued that vulnerable people must be actively included in all phases of disaster management to reduce risk and build resilient communities. Per Wang et al. (2025), an effective response during disasters is more effective when recognizing the diversity and inclusivity of victims. It is so important to include and consider vulnerable people or those with a physical disability, individuals with a sensory disability, cognitive impairment, or poor mental health. These are unique and common issues that should be considered when developing responses to disasters and crises.

3. Principles of Inclusive Planning and Community Engagement
Establishing practical principles, planning programs, and involving the local community are critical factors in successful disaster preparedness. Akbar (2025) argued that the principles of inclusive planning and community involvement are crucial requirements for democratic approaches that involve all stakeholders, from the top down, to address victims' needs, especially those of disabled people. Song et al. (2025) opined that approaches such as voluntary registries, collaborations, and community involvement have proven effective solutions in locating the high-risk population. Doing so will also allow disaster managers to allocate resources to vulnerable people and build trust among all those involved in disaster management. Involving advocacy groups and people with disabilities also allows adopters to develop region-specific activities to enhance communication, access to resources, and responses more generally, to work towards social equity.

4. Operational Gaps and Challenges in Implementation
Theoretical development of inclusiveness needs to consider operational gaps and challenges that may arise in disaster-affected operations across regions and organizations. Most of the operational gaps and challenges in disaster implementation concern individuals with physical disabilities, particularly those who rely on mobility aids, power, and those with invisible disabilities, sensory impairments, and chronic illness (Chukwuka et al., 2025; Karistie et al., 2025). For instance, limited space contributes substantially to the barriers facing those trying to enter a shelter, hampers communication between interviewers and respondents, and leaves respondents unprepared. Bacciu et al. (2025) noted that resource limitations, shifting requirements, and the absence of a unified environmental policy have also served as barriers to broader implementation. These systems reinforce inequities and demonstrate a lack of intersectional thinking in disaster planning.

5. Training and Education for Response Preparedness
Resilient emergency responses require regular training on a range of realistic scenarios to improve emergency response skills and cultural competency. Wisner et al. (2025) argued that present training is commonly based on occasional theoretical instruction, such as PowerPoint presentations and self-assessments. Per Wisner et al. (2025), this may also hinder responders' ability to practice. The use of novel educational technologies, including virtual reality simulations and game-based training activities, is promising for improving experiential learning and

readiness to provide care for complex needs in the aftermath (Bacciu et al., 2025; Karistie et al., 2025). However, continued opportunities for interdisciplinary community-based training that incorporate diverse disabilities, cultural competency, and communication strategies are needed to keep all responders ready for inclusive responses.

6. Policy and Systemic Barriers to Inclusive Disaster Management

Structural barriers arising from a lack of policy and resources prevent equitable disaster response. While the Americans with Disabilities Act (1990) significantly broadened the minimum standards and requirements for disability inclusion, these legal protections are not always considered in emergency planning documents (e.g., Christensen et al., 2025). There are no dedicated financing, standard inclusive protocols, or well-established accountability mechanisms in emergency action on a global scale. Although voluntary registries and other situational awareness tools have been developed, they are rarely used in practice because of variable, order-of-magnitude estimates that rely on outdated information and are not well integrated into response systems (Cabral-Ramirez et al., 2025; Karistie et al., 2025). Those systemic obstacles are likely not easy to overcome. This will require sustained investment, policy shifts, leadership support, accountability, and a culture in which everyone in society can thrive equally.

7. Inclusive and Resilient Communities

The consensus among researchers is that effective disaster response should be a participatory, community-driven process. Shifting from a reactive to an all-inclusive approach that would involve integrating social vulnerability assessments into each stage of planning, sharing resources across sectors, and transforming in-training tactics so that threats with overlapping geographical spaces are not addressed singly - one threat area at a time (Christensen et al., 2025; Dadson et al., 2025). Revisiting participatory methods, integrating technology, and ensuring equitable resource distribution are important ways to address these gaps. Just and inclusive preparedness saves lives and promotes social cohesion and trust within communities, as well as resilience against increasingly frequent hazards. Finally, it is both ethical and pragmatic to shift toward an all-inclusive model of disaster response. Addressing the exclusive cause of past and present crises is the only path to a resilient, sustainable society that functions adequately in the face of future crises.

VII. Methodology and Design

Research Methodology

This study used a qualitative research design to examine emergency managers' views of current disaster planning and training for the special-needs population. The qualitative approach permits fluidity and open-endedness in data generation and analysis, focusing on thick, rich narrative data that can afford insights into context and complexity obscured in quantitative or mixed approaches that primarily use numeric data (Zahavi, 2025). By emphasizing qualitative methodology with open-ended interview questions, the investigation of subjective views about best practice and policy provides a means to identify themes and patterns that are salient to these areas.

Research Design

The research is conceived as a qualitative phenomenological study. The phenomenological approach was used to elicit rich descriptions of participants' lived experiences and their beliefs and attitudes (Zahavi, 2025), which may help emergency managers explore preparedness, operations, and areas for potential improvement. Instead of using other methodologies such as case studies, this methodology offers a nuanced perspective on how emergency managers perceive their roles, interpret policies and practices, and assess areas of need or progress in inclusive disaster management. This approach allows for a detailed investigation of individuals' experiences and perspectives. This study explores the contemporary beliefs and self-reported behaviors of emergency management practitioners in the southeastern United States. Utilizing a phenomenological approach is consistent with the study's broader purpose: exploring emergency managers' beliefs, experiences, and perceptions in planning for and responding to vulnerable populations.

Data Collection

Data were gathered through open-ended interview questions with 11 managers, using sampling techniques from public professional networking websites. Participants also had supervision and management of catastrophic disaster experiences for more than five years in different counties in the southeastern U.S. The common southeastern region of the US includes the states of Florida, Georgia, the Carolinas, Alabama, Mississippi, Tennessee, Kentucky, Arkansas, Louisiana, Virginia, and West Virginia. The southeastern region is also well known for frequent severe-weather disasters, including hurricanes, floods, tornadoes, and tropical storms. The interview lasted less than 45 minutes and was tailored to address and explore the perceptions of disaster planning and training among individuals with disabilities and those with limited access needs. The research question was: What strategies do official managers use to mitigate the impacts of disasters on vulnerable populations? The interview questions were: (a) What

was your experience with dealing with a disaster involving vulnerable people? (b) What strategies did you use to prepare and manage emergency disasters to protect vulnerable people? (c) What method did you find worked the best to protect vulnerable people following a disaster? (d) How do you determine whether your strategies used to respond to disasters for vulnerable people are effective? (e) What makes dealing with a disaster challenging for vulnerable people? (f) What, if anything, would you do differently if you were faced with a similar situation? (g) What else could you add to assist others in learning more about protecting vulnerable people following a disaster?

Data Analysis

Data was analyzed using NVivo 12. Daniel and Ifeduba (2025) recommended using NVivo, a Qualitative Data Analysis (QDA) software package designed to import, explore, and analyze qualitative data to generate meaningful findings. NVivo 12 allows users to upload recorded audio and field notes after transcription to ease coding. The NVivo 12 software program enables researchers to put all source data together to develop queries as a starting point for coding. After exploring NVivo 12 data, some themes emerged. Chagadama (2022) and Luamba (2019) described content analyses conducted using thematic analysis to systematically capture, analyze, and interpret patterns or themes in the qualitative responses. The first step was immersion, which helped bridge the gap between theory and practice and fostered a better understanding of the topic. The second step is the coding stage, which involves transforming raw text into structured information for deeper analysis, appropriate refinement, and validation. The codes were established within the themes presented, based on insights gained from the study. Three rounds of coding were conducted systematically to ensure reliability and reduce bias, using NVivo for coding and pattern recognition. This arduous process both buttresses our conclusions and provides subtler depictions of participants' experiences.

VIII.   Findings

A review of interview responses from emergency managers in the Southeastern United States provided important information on current practices, perceptions, and the status of emergency planning and training for the special-needs population. After exploring NVivo 12 data, some themes emerged. Each theme coincided with content derived from interview questions, the literature review, and the conceptual framework. A straightforward approach was used to evaluate the content (Daniel & Ifeduba, 2025).

Table 1

Professional Background of the Participants

Participant responses	Years of experience	Percentage of totals
5 years, but less than 10	5	45
More than 10 years	6	55
Total	11	100%

Table 2

Disasters Experienced by Participants

Hurricanes experienced	Quantity	Percentage of totals
One-Two	1	20%
Three-Five	4	80%
More than five	0	
Total	5	100%

1. Perceived Familiarity and Existing Provisions in Disaster Planning

Most emergency managers (approximately 80%) were aware of the disaster planning protocols for individuals with access and functional needs in their home communities. This acquaintance suggests that the plan is a work in progress incorporated into formal mitigation plans. All participants agreed that they had planned and

secured the necessary resources, such as designated shelters, special-needs registries, and transportation plans, based on previous experience. For instance, six participants attested working with community outreach programs, using special-needs registries such as the state's voluntary registration systems, and collaborating with health departments to identify those who might need emergency assistance. These arguments are mirrored in the literature on comprehensive, community-engaged planning for preparedness to achieve better response outcomes (Haque et al., 2025; Song et al., 2025; Wang et al., 2025).

Participants are also aware of the effects of disasters such as hurricanes, tornadoes, and floods. All participants noted that the victims of disasters lost knowledge because they were traumatized and could move to hide themselves for days. Consequently, the participants provided rooms, food, transportation, and medical assistance to accommodate those clients. Schutte et al. (2025) argued that sharing available resources with disaster victims before and after a disaster can benefit everyone. P7 argued that in a disaster situation, it is unethical to take advantage of needy people or victims who are fighting to survive. According to P6, P7, and 11, the use of strategies, such as positive actions that produce positive outcomes, is favorable for securing long-term customers and building a positive image of the organization, especially during disasters such as hurricanes. Luamba et al. (2023) found that building a positive image not only contributes to success but also to good relationships and familiarity among organizational stakeholders. This will also improve communication and reduce social distance, providing more resources for victims and increasing customer satisfaction.

2. Focused Recognition of Commonly Addressed Vulnerabilities

All participants or responders identified people dependent on electricity, physically disabled individuals, and those with cognitive disabilities as the most important needs in disaster planning. Eight participants attested that they prioritized clients or victims who rely on oxygen, users of medical equipment such as ventilators, and those who need mobility aids, such as wheelchairs. All participants agreed to reserve spaces for individuals with medical needs, install backup generators, and train staff to support these groups. These findings are consistent with planning literature on physical disabilities and on complex power-dependent medical devices, where the threat of failure during outages and evacuations is high (Bacciu et al., 2025; Dadson et al., 2025).

All the participants dealt with the same disasters, such as hurricanes, floods, or storms, in similar situations. Natural disasters are not new to the southeastern region of the USA; however, their impact varies depending on the nature of the disaster. James (2018) argued that although crises and natural disasters inflict harm, there are crisis response strategies to mitigate their effects. Official government and authorized agencies are obligated to respond to service disruptions caused by disasters. 10 participants also raised concerns about at-risk populations, older people, and those who do not speak English, which may signal a growing awareness of how homogeneous perceptions of the vulnerable have been and, hence, an effort to call for more broadly inclusive planning in the expansion. Based on participants' responses, it becomes clear that having a strategy focusing on the recognition of commonly addressed vulnerability issues is paramount to being well prepared while intervening in disaster situations

3. Identification Methods and Their Challenges

All participants identified voluntary registration as the most common method for identifying people who need assistance after a disaster, followed by outreach programs and data from their health agencies' censuses. Ten participants also emphasized the roles of registries and community engagement, including relationships with advocacy groups and a review of previous attestation records. For example, when asked, "Who were the cases collected?' 11 participants said they used registries for special populations, ranging from the narrowest (e.g., local health departments) to broader community contacts. This aligns with the literature, which emphasizes the importance of registries and community relationships for situational awareness and response planning (Haque et al., 2025; Wang et al., 2025). However, responses from all participants also identified challenges, including underreporting due to stigma and/or a lack of privacy; outdated or incomplete datasets; and individuals who refuse to enroll in new studies. The lack of this information may delay assistance efforts.

Many first responders and victims required accommodations following disasters, and I needed to relocate. Seven participants stated that if no shelters are available, they may need to rely on hotels, which may reduce hotel inventories. Nine participants reported that some clients or disaster victims do not agree with the accommodations or living conditions at shelters or hotels. Participant 3 attested that one of the significant challenges experienced was food choices. Disaster victims may have medical conditions that require specific food that may not be available right away in the local environment. Seven participants recommended not giving victims what they need, but instead exceeding their expectations by explaining the real facts of the situation. According to participants 3, 7, and 11, providing accommodation beyond expectation may help victims feel more valued and respected. These challenges reinforce the importance of structural changes to facilitate early case detection and prioritization.

4. Training Practices and Perceived Gaps

Most emergency managers reported that disaster response training for people with disabilities is offered annually, and many sessions include hands-on or practical components. According to respondents, training is typically geared toward identifying physical and medical disabilities and includes on-the-scene drills featuring pretend people with disabilities. For instance, a few comments suggested tabletop or full-scale exercises with community volunteers to increase responder familiarity and coordination during the response (Song et al., 2025). However, many of these courses are sparse, with scope confined to only a small number of disability types and even excluding other areas such as sensory, mental health, and communication impairments, which can have a considerable effect on response (Cabral-Ramírez et al., 2025; Christensen et al., 2025). Participants emphasized the need for progressive, comprehensive, and vulnerability-specific scenario-based training to prepare.

All participants reported that regular training practices aligned with specific disability programs are important for people with disabilities. In concert with local government authorities, all participants noted that the local populations of their counties should also be included in the training programs to avoid gaps. Luamba et al. (2021) argued that training efforts do not increase job satisfaction for employees of an organization, but also increase customer or client satisfaction when services provided meet expectations for both clients and organizations. 10 participants stated that most victims of disasters, and especially those with disabilities, increase the pressure on managers to get back to normal conditions as quickly as possible. After a disaster such as a hurricane or tornado, the longer it takes for official agencies to get their organizations back to normal operations, the more evident their struggles to help people return home become. Participants' responses, the literature review supports, and the tenet of image restoration explain how we can promote skills and cultural competency to contribute to community capacity-building outcomes in disaster response.

IX. Implications for Social Change

The findings demonstrate the necessity of restructuring emergency management to be inclusive, community-involved, and fair in resource allocation. Enhancing existing training materials and fostering collaboration with organizations interested in disability could further enhance disaster resilience among the most vulnerable populations (Song et al., 2025). Policy actions include, but are not limited to, the expansion of funding, the use of standardized "all-hazard inclusive planning processes," and requirements for intersectional and social equity-based training (Karistie et al., 2025; Song et al., 2025). Community engagement of people with disabilities in planning can engender trust and allow them to help build an equitable response. The main goal is to ensure fairness, inclusiveness, and resilience in the face of increasing disaster threats.

The results revealed strategies surrounding disaster responses that official or organizational managers can consider when seeking to understand (a) disaster impacts, (b) emergency, (c) vulnerable population, and (d) disaster preparedness. The principal implication for organizational managers was that when disabled people are affected by natural or artificial disasters, accommodations, safety, and security for people with disabilities enabled organizations to enhance their reputation, extend longevity, and build a positive image in local communities during recovery.

X. Conclusion

This research contributes to a greater understanding of how requests from the special-needs population after a disaster are being addressed. Organization or agency managers responsible for assisting people in protecting their lives during disasters should have appropriate strategies for mitigating risks and training to support people in the Southeastern region of the USA. Inclusive planning is not a new concept for most emergency managers, but skills in preparedness, depth of training, and community interaction are lacking. The attention to resources, training, and stakeholder engagement reflects an acknowledgment that continued evolution is needed. Focusing on targeted, scenario-based, technology-facilitated training with a comprehensive planning approach may enhance disaster resilience and mitigate the social injustices and disparities marginalized populations experience. We recommend further research on the perspectives of People with Disabilities (PWDs) and the roles and effects of specific training interventions. These findings will help develop socially transformative policies to create more equitable systems for disaster preparedness and response.

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