Human Organization, Vol. 68, No. 1, 2009
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0018-7259/09/010064-09$1.40/1

Anthropological Perspectives on Disasters and Disability: An Introduction

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Natural disasters and disasters that directly derive from human actions, both evolving and sudden, trace the structural fault lines of the societies that they affect. Disaster outcomes disproportionately impact those with the least access to social and material resources: women and children, and people who are elderly, disabled or impoverished. Using a disability conceptual framework, the essays in this volume focus on disasters within their social and environmental ecologies, with particular attention to the ways in which conventional disaster planning and responses ensure that existing social inequalities will be perpetuated as consequences of disasters. We argue that by foregrounding the needs of those with the fewest resources, an applied anthropology of disaster points to potential benefits to all when disaster preparedness, response, and recovery plans include the expertise of disabled people.

Key words: disability, disasters, inclusive design, special needs, vulnerability

[On August 29] Susan Daniels called me to enlist my help because her sister-in-law, a quadriplegic woman in New Orleans, had been unsuccessfully trying to evacuate to the Superdome for two days…but, despite promises, no one came. The very same paratransit system that people can't rely on in good weather is what was being relied on in the evacuation. I was on the phone with Benilda when she told me, with panic in her voice 'the water is rushing in.' And then her phone went dead. We learned five days later that she had been found in her apartment dead, floating next to her wheelchair.

—testimony to US Congress, reported in National Council on Disability 2006:9

Few research topics provide more daunting challenges to anthropology than disaster studies because of the magnitude of what the discipline encompasses: the diversity of natural and human-made hazards, the spectrum of social and physical geographies, the ethnohistorical, sociopolitical, and economic factors that locate specific circumstances in larger global climatic, geophysical and social processes. And while, perhaps, disaster studies have been perceived as too much within the purview of the earth sciences to be central to anthropology, then disability studies have been perceived as too much within the purview of advocacy and identity politics to offer theoretical frameworks applicable in diverse contexts. Both critical disaster and disability research and theories have been marginal to academic anthropological economies.

One explanation may lie in the "uncritical acceptance of dominant 'cultural myths' about disasters [and disability, we argue] that narrow them conceptually as 1) 'natural'; and 2) 'peculiar' individual events located outside of normal social functioning" (Wisner et al. 2007:10). Hence, while intriguing, disasters would lie outside core anthropological concerns. In this set of papers for *Human Organization*, we argue against the grain of this cultural myth about disasters and propose that similar and interconnecting cultural myths about disability be similarly critically dissected. In the following articles, we offer evidence that disrupts two core assumptions about disability. First, that individual physical, sensory, intellectual or emotional impairments cause disablement (the exclusion from access to social and environmental resources) as a "natural" outcome. And second, that the accommodations and services that disabled people need for inclusion are "special needs" (for their particular benefit only) and not inclusive design approaches to creating social environments that fulfill the everyday needs of all members of their societies.

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In their review of the disaster studies literature, Wisner et al. (2007:10) suggest that anthropologists have not been particularly adept at critically analyzing the "cultural myths" of disasters. We counter that the essays of Oliver-Smith (2002) and Paine (2002) deserve attention as exceptionally well-theorized anthropological frameworks for disaster research. Yet, cultural depictions of both disasters and disabilities replicate the explanation that people's characteristics are responsible for tragic outcomes rather than social inequalities that ensure they will be harmed. That they are poor, they are children, or they use a wheelchair becomes an easy rationale for their suffering. Critical disaster and disability theories both argue that certain categories of persons experience disproportionately high levels of harm of all sorts everyday, which disasters exacerbate (Wisner et al. 2007: 3-41; Fjord 2007:58-61).

However, if conceptualizations of disaster and disability are broadened beyond their present confines, it becomes clear that anthropological literature has long addressed disaster and disability in diverse contexts. Consider the shocked reactions to Colin Turnbull's book, *The Mountain People* (1972), about a Ugandan people he called the Ik, for whom social structures crumbled in the face of extreme famine. Scheper-Hughes (1993) chronicled the devastating consequences when sugar production depleted the soil in Northeast Brazil, and the physical and emotional depletion, *nervoso,* of those who produced it. Scheper-Hughes took issue with medical doctors and government officials who blamed sugar cane workers' high infant mortality on individuals rather than on over-arching social inequalities associated with sugar production work that led to these deaths. From the mid-1980s, de Garine and Harrison began to work on a program of early warning systems for food insecurity (see their edited collection, 1988). The failure to transform this work into sustainable and equitable aid was not the fault of the anthropologists involved. Rather, it reflects the ways in which structural inequalities, and lack of infrastructure and governmental capacity, undermine efforts to provide care and security in times of crisis. As these anthropologists and other social scientists studying disaster and culture have found, those who are weaker, older, frailer and sicker do poorly when societies without strong safety nets are under threat, and in times of rapid social disruption.

In this volume, the authors offer examples of paradigmatic shifts away from myths of disasters as "peculiar" and myths of disability as "natural," and from "common good," individual-based models toward inclusive, social-based models. Disaster paradigms centered on inclusive design would respond to the needs of those who are already physically or mentally impaired. This approach would then address the needs of any marginalized group and, thereby, anyone temporarily disabled by disasters, unable to see, hear, move, or communicate in familiar ways. Drawing on their research, the authors illustrate the problems that arise when emergency warnings, responses, sheltering, the delivery of aid, and economic recovery plans are not accessible to all members of a society. We also address the consequences of disaster and public health emergency mitigation strategies that do not rely on context-based knowledge.

Why not imagine disasters as events in which residents of affected areas are all variously impaired by environmental barriers and by psychological and cognitive impairments. Everyone involved in disastrous events becomes affected by the same forces be they fire or smoke, rising water, the collapse of buildings, roads, and communication systems, the noise from bombs, helicopters, or gunfire, deaths and destruction unfolding around them. Why not place disability-centered approaches at the core of disaster planning and ensure that the probable needs of most residents are accommodated? And what of the terrible harm caused by not doing so? It is for this reason we argue that current disaster paradigms, with their biases toward helping the already privileged or physically able, should be subject to bioethical scrutiny.

Toward these ends, in her essay on emergency and disaster preparedness for and by blind people, Gerber takes to task inaccessible emergency warning systems for the ways they disable and endanger people who are blind and low-vision. Her interviews with blind people point to problems with the news "crawls" (text scrolling across the bottom of television screens) that offer updated information, including lists of school closings or emergency shelters, and tonal warnings, without also using visual description. However, as her data suggests, making television content accessible to blind people would accommodate the needs of television consumers generally. Many people find that news crawls flash by too rapidly to absorb the information; many people are out of the room yet in hearing distance of their televisions throughout the day; many people have low vision or lose visual acuity watching "visually busy" television screens. Just as with the generalized uses of closed captioning originally advocated for by deaf people, Gerber argues, emergency warning systems and evacuation plans based on accommodating the needs of blind people offer great benefits to all residents of an affected region prior to and during disasters.

In her essay on the Great Hanshin earthquake in 1995 in Japan, Nakamura describes itu disproportionate impact on disabled and poor people because they more often lived in substandard housing located on unstable land near the sea, instead of houses built to withstand earthquakes on bedrock at higher elevations. Strategically using their embodied impairments to ask for donations in public places, displaced disabled people became not only politicized but also vested by these public donations to become leaders in the Japanese Independent Living movement. Their model refutes the top-down bureaucratic and institutionalized approach used by long-standing organizations of and social services for disabled people. Instead, this group opted for local political economic vestment and expertise. More flexible and responsive to local needs, this model also points to how disaster preparedness might locally vest and support the people and organizations that provide accessible services everyday, rather than to invest in emergency or disaster-only services for unique catastrophic events. Unfortunately, similar to the withdrawal of national investment in local, community-based approaches to disaster prevention in the United States, the social policies once put

in place to ensure the continuation of this Japanese model have been reversed under political pressure.

Other disasters result from populations living in marginal socio-economic situations being exposed to dramatic environmental events and climate change such as when droughts lead to famine; when local and international wars lead to vast human migrations; and where terrorization leads to loss of food security, housing, and livelihoods. Though each of these instances are profoundly different, they share common costs: the collapse of local infrastructure and social institutions which has a disproportionate impact on those lacking the resources to escape. Drawing on field research conducted in the Kafue Flats of Zambia, Merten and Haller highlight the discordant perceptions of need and vulnerability between local social systems and government and other agency criteria. At the same time, they illustrate the ways in which local political systems, including mechanisms developed as a result of specific disasters, are able to work with and around constraints and criteria to operate in the best interests of the local population. This is not to say that local control of aid, such as the distribution of food, is inevitably "fairer." Indeed, Merten and Haller illustrate ways in which local criteria advantage people who are not vulnerable while excluding others who, through the operation of a different criteria, would gain access to food.

While drought compromises the livelihood and food security of farmers, urban dwellers are often just as vulnerable, particularly in cash- or cash-dominant economies. In Zimbabwe, inflation, civil crises, drought resulting in food shortages, and widespread HIV infections have combined to hit households hard. Gwatirisa and Manderson explore the difficulties of allocating aid in long-term crises, where assistance is provided on the basis of a set of assumptions about what constitutes "vulnerability" that fail to take into account local circumstances. Consequently, aid programs may exacerbate inequalities and inefficiencies in various ways, causing direct and indirect impacts on already resource poor or stretched groups of people. Salaried workers, such as nurses, teachers and clerks, do not earn enough to pay for rent, utilities and food costs in the context of rapid inflation. Those who provide care for people with HIV, and are aware of the importance of nutrition for those on ART (anti-retroviral therapy) in order to minimize the side effects of medication, struggle to supplement their incomes to buy food. Supplemental income generation thus takes them away from both their salaried work and family care-giving, with flow-on effects in both arenas, which doubles the impact of drought, food insecurity and inflation.

Unpacking "Natural" Disasters and "Vulnerability"

The epigraph to this introduction offers chilling evidence for the catastrophic combination that occurs when disaster and disability intersect. When faced with the proliferation of media images of dead elderly people in wheelchairs, amputees on rooftops in sweltering heat awaiting rescue for days on end after the levees "failed"[1] to hold back floodwaters in post-Katrina New Orleans, it is difficult not to locate the source of their suffering in their physical impairments. Fjord (2007) argues that these representations "stood for the whole of the tragedy of the un-evacuated residents of New Orleans. Much of the narrative work is performed by the wheelchair as a prosthetic for understandings about 'natural victims' of disasters specifically, and unexamined ideas about wheelchair users' 'tragic' lives in general" (2007:49).

According to Mitchell and Snyder (2002), narrative prostheses are cultural familiars that "materialize metaphors, such as blind, deaf, mute, dumb, insane and crippled" (17), and lead their readers or viewers along preferred plotlines to an inevitable outcome based on that impairment. Rather than to attribute the root cause of death to the elderly amputee's impairment, opposing plotlines might expose how "crippling" are "common good"[2] models of disaster planning, since every person may be temporarily or permanently unable to see, hear, move, think, or communicate before, during or after disasters, or might be without their own car, cash, stockpiled food, water, and durable medical equipment and prescriptions. Alternative plotlines might acknowledge that people with mobility and other impairments are not inherently victims, and also bring valuable cultural expertise about how to identify and resolve social and environmental barriers. Expertise that challenges the conventional construction of false dichotomies made between disasters and everyday living.

Although we argue against a unitary view of impairments and disability, as if naturally in all times and places, people living with particular sorts of impairments are always victims, are always stigmatized in similar ways, we concur with the findings of the UN Treaty on Persons with Disabilities. To draw attention to the worldwide inequality of and discrimination against people with severe impairments, on March 30, 2007, the United Nations ratified the Treaty on the Human Rights of Persons with Disabilities, to "protect and promote the rights of the 650 million persons with disabilities, 10 percent of the world's population. Previous treaties recognized the human rights of children and women. This treaty points out that the "most vulnerable" of these vulnerable persons are those with impairments who are subject to multiple or aggravated forms of discrimination.

In this introduction, we self-consciously do not use the rhetoric of human rights, because we are interested in locating specific practices within their local contexts. A social theory of disability splits apart qualities and conditions—impairments—from social responses to persons living with particular impairments, including the built and social barriers to participation—or disablement (Shakespeare 1998; Kasnitz and Shuttleworth 2001). In extending a social theory of disability to more encompassing social relationships of exclusion, however, the danger may be to drain the experiences of persons with physical, mental, sensory, or cognitive impairments of their narrative and political power. Lennard Davis (2002) proposes with his concept "dis-modernism" that disability become the

sort of Dumontian "encompassing whole" within which all possible forms of human variation become equally "part." The question then becomes: Would disability democratization level imagined boundaries socially constructed between "able-bodied" and "disabled" people, moving the center of the discourse toward inclusive design as a benefit for all? Or, would democratization smooth over the extremely rough edges lived by the majority of people in the world with severe emotional, cognitive, sensory, and physical impairments? In a social theory of disability then, what embodied forms of human difference "count" as "disability" statuses, in that discrimination is explained by embodied "defect" labels, and what by "minority" status ones? These core concerns now occupy current disability theoretical conversations.

Amongst the deluge of media images of New Orleans in which disabled people symbolized the innocent, yet expected victims of Hurricane Katrina, false reports of "rampaging masses" of African Americans explained the reason why US government forces were militarized before offering humanitarian relief. This led the authors of these essays to attempt to bridge these theoretical and bioethical difficulties in a session organized for the Society of Applied Anthropology in 2005. Since that time, there has been increased media attention to disasters with cracks beginning to emerge in cultural myths. Witness coverage of recent disasters and in their immediate and ongoing social harms—genocide and famine in Darfur 2005-2008; Cyclone Nargis in Myanmar, 3 May 2008; the earthquake in southwest China, 12 May 2008; and continued coverage of the threats to historically African American communities in post-Katrina New Orleans. In the aftermath of each violent conflict or environmental event, news reports offered evidence of the means through which inequalities experienced everyday become exacerbated by disasters. Each disaster raises questions about what embodied conditions and social qualities become linked with social practices of exclusion and discrimination. Each represents situations that caused varying numbers of people to die, to be displaced, and to incur physical, sensory, emotional, and mental impairments. And also, each situation becomes exemplary of ways these harms were disproportionately borne by specific categories of persons, which we are terming disablement.

O'Keefe, Westgate and Wisner (1976) pioneered systematic critique of conventional approaches to disasters described by Wisner et al. (2007) as "something peculiar, as events that deserve their own special focus. . . [which] risk separating 'natural' disasters from the social frameworks that influence how hazards affect people" (4). To assess "how disasters occur when natural hazards affect vulnerable people" (50), the authors introduce the Pressure and Release model (PAR). This processual approach fits well with anthropological perspectives, by identifying disasters within their socio-historical contexts—the pressure (and specifying what would alleviate them, the release):

> In disasters, a geophysical event is implicated in some way as a trigger event or a link in a chain of causes. Yet, even where such natural hazards appear to be directly linked to loss of life and damage to property, there are social factors involved that cause people's vulnerability and can be traced back sometimes to quite 'remote' root and general causes. This vulnerability is generated by social, economic and political processes that influence how hazards affect people in varying ways and in differing intensities (Wisner et al. 2007:70).

In this description, the authors intentionally leave out bio- and technological hazards (38-41) to concentrate their challenge of entrenched ideologies and myths about the naturalness of disasters often labeled "acts of God." In fact, disaster scientists recognize that the range of hazards that set the stage for later devastating human losses include environmental events such as earthquakes, floods, tsunamis, hurricanes, cyclones, volcanic eruptions, droughts, epidemic and endemic diseases; and also human-made hazards, such as wars, ethnic violence, and their accompanying disruptions of food production, famine, displacements, and disease, as well as nuclear and chemical accidents, toxic waste dumping, deforestation, and a wide range of other harm-inducing human actions.

In using the term "vulnerability" above to conceptualize and assess, Wisner et al. (2007) propose a "move away from simple taxonomies or checklists of 'vulnerable persons' to a concern with 'vulnerable situations,' which people move into and out of over time" (15). By authorizing this shift, the authors move in the direction that disability scholars and activists have proposed for some time. That is, to split apart the embodied or social characteristics of an individual or group from the social situations that cause differential burdens of harm because of barriers that deny them access to social and material resources (Kasnitz and Shuttleworth, 2001; Ingstad and Whyte 1995, 2008; Shakespeare, 1998; Corker and Shakespeare 2002). In writing about the intersection of disability, race, and disasters, Fjord (2007) notes:

> The concept of vulnerability, as it is used in disaster rhetoric may inadvertently reconstitute categories of persons for whom 'expected losses' will occur. Intended to foreground the relationship between existing sociopolitical and economic inequalities and disproportionate losses after disasters, the vulnerability concept now fuels a hermeneutics of expectancy quite familiar to critical disability theorists (16).

The critique of the concept of "vulnerability" and the expectancies it engenders are of paramount importance. Especially when conflated, as it is usually is, with commonplace cultural notions and social practices about disability. In the United States, often the whole of standard disaster and emergency planning for "vulnerable populations" consists of lists of categories of persons whom emergency personnel may encounter in a disaster; of emergency exercises to "practice" for encounters with "special needs" persons by putting an able-bodied participant in a wheelchair or placing a blindfold over their eyes; and, most often, of other lists that identify the supplies that "special needs" persons should acquire on their

own to prepare for emergencies. Not only are disabled persons equated with their impairments but their cultural expertise is absent, as is any cooperative approach to sharing resources (Fjord 2007; for such a list, see: http://www.redcross.org/services/disaster).

Few commentators then or now missed the racial implications of governmental failures to come to the aid of African Americans in New Orleans after Katrina, many of which were documented in a special issue of *The Journal of Race and Policy* 3(1), 2007. To understand how these barriers to accessing social resources might be theorized as disablement, Fjord (2007) argues for using a social theory of disability as a lens onto "race," for "race" theory's reliance on the disability concept. Baynton (2001) lays the groundwork: "Not only has it been considered justifiable to treat disabled people unequally, but the concept of disability has been used to justify discrimination against other groups by attributing disability to them" (33). Unverified media reporting of horrific crimes occurring on the ground in Katrina's aftermath, of widespread looting and sniping (used as military "intelligence [The Katrina Report, 2006]), substantiated cultural familiars from African enslavement onward about African Americans' cognitive impairments—purported inabilities to plan ahead or to use "higher order thinking" by resorting to violence rather than to cooperation. Anthropologist Denny Taylor went to New Orleans immediately after the levees failed and found that a great deal of community-building and proactive self-care was taking place off the radar of news reporting (personal communication 2006).

Alternative images that provide evidence to international audiences of very different qualities and behaviors—the networks of caring, the bulk of the heroic rescues—were absent: "The people never turned into these animals. They are being cheated out of being thought of as these tough people who looked out for each other" (Major Ed Bush, in the Katrina Report 2006:171). Writing over a year later, Tulane historian, Douglas Brinkley (2006) carefully chronicles many of the heroic rescues and cooperation going on during the chaos, yet still fails to connect the dots between the "race" concept in this circumstance and disablement. Attributing the sniping used to justify delays in military interventions to the racial divisions that surfaced under these deteriorating conditions, he overlooks an inverse causal order. Namely, the total lack of immediate, large-scale humanitarian relief by the US government telegraphed in no uncertain terms to an abandoned population that their race trumped their American citizenship.

One of the most enduring, and confounding, tragedies of disasters concerns the political and economic uses that are made of them by entrenched interests. These uses follow an enduring template; often invoked after apparently unique events to justify human rights abuses, political actions against particular persons, and the setting aside of civil liberties. Despite persistent rhetoric suggesting the uniqueness of 9/11, international and national disasters tied to terrorism and their political consequences have a long history. The Lockheed Tristar disaster, the 1993 bombing of the World Trade Center, the protracted terrorism in Northern Ireland, and the activities of such terrorist groups such as Bader Meinhof in Germany, Red Brigades in Italy, and the Japanese Red Army, have had inordinate power to shape political responses and rhetoric in their contexts. The invasion of Iraq by the US and Britain relied on the rhetoric of prevention of whole-scale disaster (from fictitious weapons of mass destruction) to argue for breaching Iraq's sovereignty and to silence critics of the invasion. What follows these decisions to invade Iraq and Afghanistan, and elsewhere, illustrate the links between war and food insecurity, among other disastrous consequences. Most media consumers are familiar with iconic images of war and famine: refugees from Biafra, southeast Nigeria, hit by famine and civil war in 1968, from the 1984-5 famine of Ethiopia, or most recently, from the famine and war in Darfur, southwest Sudan.

International news about Cyclone Nargis, which decimated "hundreds of fishing and rice-farming villages close to the sea" in Myanmar on 2 May 2008 report, "135,000 people are dead or missing. The United Nations estimates that 1.5 million survivors deep in the Irrawaddy Delta have not yet received any aid" (*New York Times*, May 28, 2008). In the Myanmar cyclone and its aftermath may be found elements of the political issues that surfaced in New Orleans, on a geometrically larger population scale:

> Volunteers have been lugging relief goods into remote villages in the Irrawaddy Delta over the past two weeks, 'Only a very few percentage of the victims get help at government-run camps. People in remote villages that are hard to reach don't get anything. To make it worse, the people in the Irrawaddy Delta have traditionally been anti-government, so the junta doesn't like them.' [*New York Times*, 23 May 2008]

In the months that followed, the Myanmar military junta persisted in restricting the access of foreign personnel, including rescue and aid workers and reporters. International leaders derided the junta for placing their own political ends before the immediate needs of suffering citizens, with the most harrowing conditions facing children in particular (Sturke, *Guardian*, May 18, 2008). Junta decisions to appropriate foreign relief materials to gain political capital for distributing them appeared in many news media, as did the forcible removal of displaced persons from the monasteries where they had taken refuge (*New York Times* May 15, 2008).

Yet, President Bush's chastisement of the junta for refusing to allow the US Navy into its ports and for manipulating disaster capital to reward allies and to punish opponents masked a tragic hypocrisy. While he ordered US Navy ships to Indonesia immediately following the Tsunami of 2004 to aid in evacuation efforts, and to Burma/Myanmar, President Bush redirected US Navy ships *away* from New Orleans after Hurricane Katrina:

> Without authorization, Captain Nora Tyson [of the US Navy warship, *Bataan*] elected to set sail for the Louisiana Coast, where she could offer aid [to New Orleans] in the form of her ship's 600-bed hospital and its full store

> of food and water. On Tuesday, [Bataan] was suddenly, inexplicably, ordered to the Mississippi Coast—a region that had problems, to be sure, but which was easily accessible by truck. [Brinkley, 2006:256]

Viewed through a political economic lens on disasters, *Bataan* was ordered to leave an historically Democrat "Blue State" without other avenues of relief to support an historically Republican "Red State" with other avenues, and President Bush's comments to the Burmese junta take on other meanings.

After an earthquake struck in China on 12 May 2008, "an unexpected mobilization, prompted partly by unusually vigorous and dramatic coverage of the disaster in the state-run news media, has come from outside official channels" (Yardley and Barboza, *New York Times*, 20 May 2008). International media reported favorably on the openness of the Chinese government to both domestic and foreign rescue workers and aid. China's international political capital, diminished by its violent suppression of protests in Tibet, rose considerably, especially in contrast with the recalcitrant Myanmar junta leaders. Speculation about the "aftershocks" of such a dramatic turn in governmental control swiftly came true, when domestic and international media uncovered news of the disproportionate deaths of poor schoolchildren, and parents began to voice their protests,

> 'This is not a natural disaster,' said Ren Yongchang, whose 9-year-old son died inside the destroyed school. His hands were covered in plaster dust as he stood beside the rubble, shouting and weeping as he grabbed the exposed steel rebar of a broken concrete column. 'This is not good steel. It doesn't meet standards. They stole our children.' [Yardley, *New York Times*, 25 May, 2008]

News images of schools of the elite still standing next to the rubble of schools for the poor, of public signage and of street protests by parents, led the Chinese authorities to forcibly suppress these protests and their news coverage (*Guardian*, May 22, 2008; Brannigan, *Guardian*, July 30, 2008). The "vulnerability" these parents expose threatens political policies far more encompassing than those of local building codes and their violations. In the context of China's inequitably enforced "one child" policy with its concomitant forced sterilizations and abortions for some yet not all, amid a cultural expectation that children will take care of aging parents and not the state, the deaths of these particular children reconstitute the multiple vulnerabilities of poor people in China.

Largely because of media coverage of protests against the inaction of governments and the United Nations to the genocide and famine in Darfur, global awareness of this grinding, ongoing crisis has grown (some say far too little too late). In the UN Development Programme report, "Reducing Disaster Risk: A Challenge for Development," its authors link disastrous outcomes to the political and economic choices that governments and their societies make. "In many countries the process of development itself has a huge impact—both positive and negative—on disaster risk." International critiques of the Khartoum regime's support of the genocide of insurgent populations in Dharfur argue that China's interests in Sudan's oil fields have protected the regime from UN and other interventions by Chinese vetoes of actions put before the UN Security Council. The systematic genocide of the male population of Darfur by Khartoum-sanctioned Arab militia also includes the systematic raping and displacement of women and children (Reeves 2008). Now, drought further threatens the lives of these displaced persons on the move and in refugee camps in Darfur and Chad. Protest campaigns based on shame—exposing the actions and inactions of specific UN and Chinese leaders on Darfur, and divestment protests on US university campuses—have shifted the political climate, and point to efforts by grassroots organizations to politicize disasters.

Reflections on the Political Economy of Disasters and Disability

It is not widely known that the most effective, immediate responses to Katrina were by local people, local organizations (see Dawn 2006 for Move.On's housing cooperative efforts), and locally based Coast Guardsmen, and not from disaster industry giants or the US military (Katrina Report 2006; Brinkley 2006). The effectiveness of local expertise, networks, and small-scale technological interventions needs to be taken into better account when societies invest in disaster planning services. According to the Katrina Report, governmental agencies and various disaster relief organizations, all vested with billions of dollars in disaster monies before and after Hurricane Katrina often competed for control. Military personnel did not come supplied with their own food and water, or transport, thus draining vital resources from the relief effort. In the months following Katrina, Red Cross volunteer reports of widespread malfeasance and misappropriation and critiques by Red Cross representatives from other countries revealed the scope of the American Red Cross failures (Salmon, *Washington Post*, December 27, 2005; Strom, *New York Times*, March 24, 2006). Yet the scandal surrounding the Red Cross, the legal charges against members of the organization, and their rapid closure of local chapters, have largely been missing from media coverage, while the stigma attached to "Ninth Warders" of New Orleans during those fateful days follows them in the cities and towns where they have been relocated (Reckdahl, *The Independent Weekly*, August 23, 2006:1).

Not surprisingly, then, critics of the dominant paradigms of disaster and disability challenge their iniquitous economic frameworks and their ties to specific political interests and philosophies. In lobbying for public monies, the American Red Cross and the Department for Homeland Security (under which FEMA resides) use the rhetoric of fear to lobby for funds. To create perceptions that in emergencies only they can offer the best services and resources to affected communities. Both disaster giants use the much invoked "lessons

learned" from Katrina. In PowerPoint presentations made at disaster conferences, snapshots of the "victims of Katrina"—those elderly dead in wheelchairs, the amputees stranded on rooftops—now serve as narrative prostheses to fund the very people who most ensured their vulnerability and harm.

> Marcie Roth of the National Spinal Cord Injury Association quoted an employee from American Red Cross headquarters as saying, 'Our shelters are not for them. There are places for them, run by local health departments, but still busloads of them kept being dropped off at our American Red Cross shelters. We can hardly serve the *intact* people' [emphasis in original]. Later inquiries confirmed that American Red Cross implemented a policy to refuse shelter access for people with obvious disabilities (NCD Impact Report 2006:10).

For profit and nonprofit agencies now market their brands of "special needs" resources—those brochures, lists, and exercises—to other agencies and organizations, rather than marketing more inclusive or economically equitable disaster planning services. Often, justifications for the lack of funding to render social environments more accessible and equitable focus on the costs to societies of paying for "special needs." These justifications, however, poorly account for the social costs to societies of sustaining existing non-inclusive design plans and bureaucracies. Not included in these accounting systems are the long-term, social costs of healthcare when large numbers of uninsured residents are disproportionately adversely harmed, as by the post-Katrina debacle. Or, the social costs of preventable harms to all residents, regardless of their abilities and inabilities, when warning systems, communication methods, evacuation means, shelter set-ups, provisioning, and so on, are neither accessible nor able to accommodate those with injuries, disabilities, medical or durable medical equipment needs, low dominant language expertise, or in psychiatric crisis. The resulting social and health disparities, we argue, are matters for bioethical concern.

Disabled people's advocacy has led to the institution of curb cuts, ramping, closed captioning, and interpreters in medical and legal settings in the US. Now, the economic benefits far outweigh the initial economic outlay. By making shops, information, courthouses and medical buildings accessible, all people previously excluded from participation may now consume goods and services, including people pushing strollers as well as using wheelchairs. Anyone who uses a wheelchair now competes for curb cuts with most people at crosswalks: people pushing dollies to stock local stores, bicycle and skate-board users, people on crutches and using walkers. In fact, most people seem to prefer to avoid that extra step down into the street. Similarly, closed captioning programs advocated for by deaf consumers now allow access by elderly and hard of hearing people, immigrants with low English competence, noisy bar patrons, and parents with sleeping babies. Signed language interpreters mandated by the ADA (Americans with Disabilities Act) have led to greater use of language interpreters in medical and legal settings. Inclusive paradigms forestall medical misunderstandings that add huge economic costs from non-compliance or medical errors which can in turn lead to malpractice litigation, and in courts, legal appeals based on allegations of the miscarriage of justice.

Paul Farmer (2005) advocates for a "preferential option for the poor" in healthcare systems planning. He steps beyond the veil of purported scientific objectivity to propose that meeting the needs of a society's poorest members, to cover the gaps, problems with accessibility, and costs, would then be inclusive in its benefits to all healthcare users throughout the life course. Likewise, we advocate for placing the needs and expertise of disabled and elderly people, women with children, homeless and impoverished people, and non-dominant language speakers, at the center of disaster and emergency public health planning within their local communities. The benefits of doing so, we argue, are multiple. Acknowledgement of the expertise of these persons uncovers creative, small-scale technological strategies, supports local knowledge, and tailors preparedness to its context. The inverse—forcing those who experience disasters to fit into one-size-fits-all disaster paradigm—furthers expectations of harm for those who do not fit. Further, vesting local community organizations that provide accessible public services everyday with most of the monies now used to support huge international and federal bureaucracies would support those services every day while integrating preparedness and rapid responses into community responses.

Aggregating resources benefits all members of the community by leveling differential economic, physical, emotional, and cognitive abilities in settings that daily accommodate the full range of access needs. The onus of financial responsibility moves from individuals, including disabled people who are disproportionately more likely to be unemployed or underemployed, chronically ill, and poor, to the polity. The majority of individual disabled people are already stretched by daily survival needs. Social services and Medicaid and Medicare providers in the US refuse to provide supplemental emergency items to those receiving their services. Thus, disabled people's "inabilities" to prepare in the ways prescribed by the American Red Cross or Homeland Security make the harms that occur to them not only "expected," but their "responsibility."

These expectations follow a political economic ideology of individual responsibility rather than social cooperative ventures. Klein (2008) terms this ideology "disaster capitalism." According to Klein, Keynesian attempts to "pool collective wealth to build more just societies" such as Roosevelt used in the financial disaster of the Great Depression, have been under fire by the Chicago School of economics for some fifty years (2008:17). In her sobering assessment of disaster capitalism using various international examples, Klein argues, "the idea of exploiting crisis and disaster has been the modus operandi of Milton Friedman's movement form the very beginning—this fundamentalist form of capitalism has always needed disasters to advance" (2008:9). The rapid selling off of beachfront properties to tourist resort venture

capitalists rather than to reconstruct fishing villages after the Asian tsunami; the use of public monies to fund private corporations to carry on war services and perform reconstruction in Iraq; funding privately run charter schools instead of re-opening public ones in New Orleans; all point to the "shock doctrine" at work.

Even in times of critical food shortages such as those now plaguing Africa because of AIDS and famine, drought and war, US government policy requires the food used for humanitarian food aid to be purchased from US agribusinesses, then shipped to localities needing the aid, and sold at market prices for the purchase of local food. Local experts ask for this tortuous process to be streamlined—to use US economic aid to directly buy the local crops for famine relief. As with using funds to support local community-based organizations that provide services everyday, not just in disasters and emergencies, vestments in the receiver nation's agriculture would more deeply support the stabilization of local democracies. However, this option is not currently open to food aid given by the US.

Readers of the essays in this journal are asked to consider whether disabled people's expertise in negotiating barriers to inclusion offer insightful inclusive design paradigms for mitigating harm from disasters and other public health emergencies. Everyday, disabled people confront access and accommodation issues: how to get into buildings with stairs; to receive medical services (inaccessible exam tables, diagnostic technologies, such as X-rays, MRIs, CAT scans, and so on); to understand and communicate when the conventional modalities used are for those who see, hear, and speak. What sort of empirical, local forms of knowledge are the skills and abilities many disabled people develop to negotiate these unacknowledged exclusions? What value might be given to cultural knowledge about alternate routes, forms of transport, creative uses of everyday technologies outside the original intentions of their makers? In any and all disasters, and in the development of disaster preparedness and response planning, we are left with an important question: what level of planning must be considered essential, part of local, national and international "standard" disaster preparedness and response toolkits, in order to take into account all of the diverse needs of heterogeneous populations?

Notes

[1]The final report on the New Orleans levees compiled by a panel of independent scientists concluded that a combination of malfeasance in their construction and maintenance, and failure by Congress to fund their completion and maintain them were the unnatural "causes" of their "failures" (Seed et al., 2006).

[2]Ana-Marie Jones, Executive Director of CARD (Coordinating Agencies Responding to Disasters), Oakland Chapter, defines "common good" disaster planning as the triage model used in military settings to optimize troop strength by focusing resources on those "left standing to fight another day." The irony, however, is that it is a point of military honor "never to leave one's buddies behind" (Disaster Planning for Vulnerable Populations, School of Public Health, University of California, Berkeley, March 2006).

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