Yes, say Karoline Mortensen, Ph.D., Rick K. Wilson, Ph.D., and Vivian Ho, Ph.D. In a 2005-2006 survey, the investigators found that Katrina evacuees displaced by the storm experienced loss of full-time employment, income and deteriorating health, as well as struggles accessing necessary physical and mental health care. What’s more, the majority of evacuees surveyed planned to stay in Houston — putting further stress on a limited and already-overwhelmed local health care system.

Hurricane Katrina struck the U.S. Gulf coast on August 29, 2005, causing one of the largest natural disasters in the nation’s history. An estimated 200,000 evacuees were evacuated to the Houston area; over 150,000 remained in the city nearly one year later.

Investigators from Rice University interviewed a total of 2055 evacuees immediately following the hurricane, two months afterward, and one year later. The evacuees’ race, education, marital status, access to health insurance, health status and presence of seven chronic health conditions — including high blood pressure, arthritis, diabetes, heart disease and asthma — were then analyzed and compared to the general U.S. population and the southern poor.

The survey showed that the storm had a marked impact on the employment and income of the evacuees, who were predominantly black and economically disadvantaged. A year after the storm, 68.2% said they were unemployed, although 58.2% held jobs before Katrina. Approximately 41% reported household incomes of less than $15,000 before Katrina; one year later, 71% reported incomes of less than $15,000.

Access to health care was another major issue for the evacuees. Thirty percent said they were uninsured before Katrina, higher than the national proportion (22.5%) but lower than the southern poor (56%). Although 44% were covered by Medicare or Medicaid before the storm, evacuees reported significant difficulties accessing medical care in the two-month period following Katrina. One-third indicated they or someone in their family could not see a doctor when they felt it was necessary. One year after the hurricane, 27.6% felt their health was worse than it was before Katrina.

Separation from family and relocation increase the risk for mental health problems after a disaster and, indeed, the mental health of evacuees deteriorated over time. Two months after Katrina, almost 19% of evacuees surveyed said they felt anxious or depressed; nearly a year later, 25.8% reported these conditions. Almost 60% of evacuees reported feelings such as fear, tension, suicide, depression, anxiety and spells of terror or panic at least a few times a week, but were not discussing their feelings with trained medical professionals.

Despite the difficulties of relocating to a new city, a year after Katrina, 68.2% said they would likely remain in Houston — there was little for them to return to in devastated New Orleans. Unfortunately, Houston’s limited health care system is ill-equipped to handle their needs. It currently meets less than one-third of the demand for its services and the area’s mental health facilities are at capacity.

In the short run, the evacuees should have better access to health care; in the long run, their employment needs should be addressed. Public health professionals must take a leadership role so that the aftereffects of Katrina do not lead to greater social disparities, particularly in health care.

HEALTH POLICY
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