

# Health Equity with Special Populations in Emergencies

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# Session Objectives

- Define the concept of health equity and its importance in emergency response
- Identify vulnerable populations and assess health disparities during emergencies
- Evaluate strategies for ensuring equitable access to resources and care during emergencies
- Apply culturally competent communication and engagement techniques in crisis situations
- Develop policies and interventions that promote health equity in emergency response plans

# Defining Health Equity

Per Healthy People 2030, **health equity** is:

*“the attainment of the highest level of health for all people.* Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.”

- **Health disparity** is *“a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage.* Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

# Equality vs. Equity

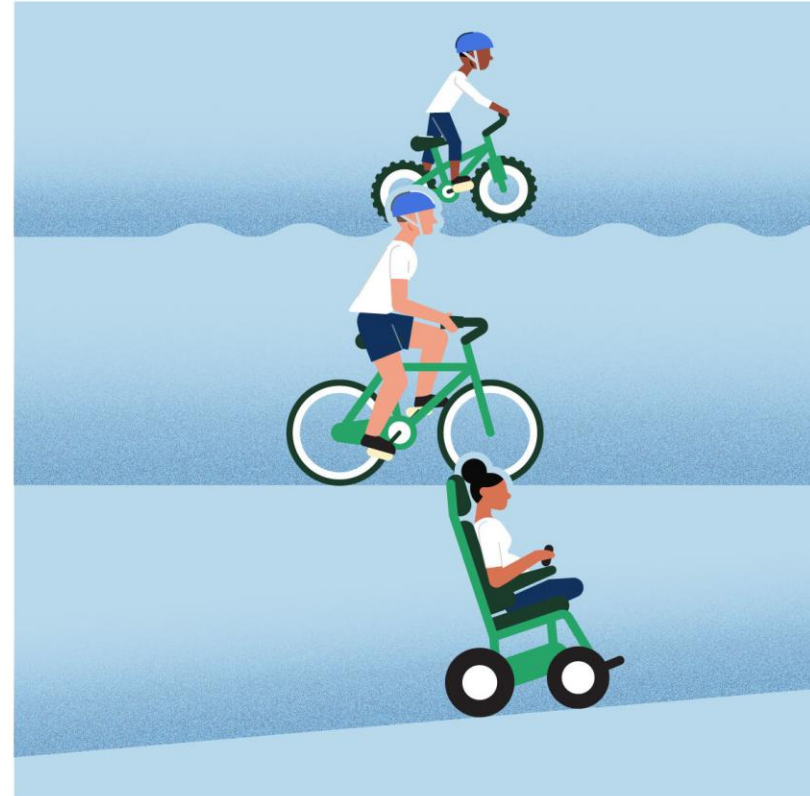
## EQUALITY:

Everyone gets the same—regardless if it's needed or right for them.



## EQUITY:

Everyone gets what they need—understanding the barriers, circumstances, and conditions.



# Considering Health Equity – What are the benefits?

- Allows planning team to consider different points of views that can enhance emergency response
- Can assist with the targeting of resources when limited or scarce, streamline service delivery, and reduce duplicative efforts in response and recovery phases
- Ensures emergency plans are more equitable, responsive, and effective in serving not only a variety of populations but those who face a harder path to recovery after disasters occur

# Considering Health Equity – What does that look like?

- Engaging community members with:
  - Reflecting the demographics of the populations served
  - Direct experience of inequitable disaster recovery
  - Limited resources
  - Residing in areas most impacted by environmental or catastrophic weather events (e.g. communities residing in a flood plain, near a [Superfund site](#))
- Ensuring that your resources and public communications are accessible, affordable, and safe
  - Are the resources and messaging provided easily accessible to socially vulnerable groups before and after a disaster event?
- Using data to identify vulnerable groups and track the inequitable impact of crises
- Consider the diversity of your emergency preparedness workforce

# Let's discuss: In your emergency preparedness role,

- How have you engaged with community members in your planning and response efforts?
- What strategies have you used to ensure the resources offered and public communications are accessible, affordable, and safe?
- Do you use data to identify vulnerable groups or track the inequitable impact of crises?
  - If so, what data have you used?
- How have you considered the diversity or lived experiences of your team when thinking about enhancing the work that you do?

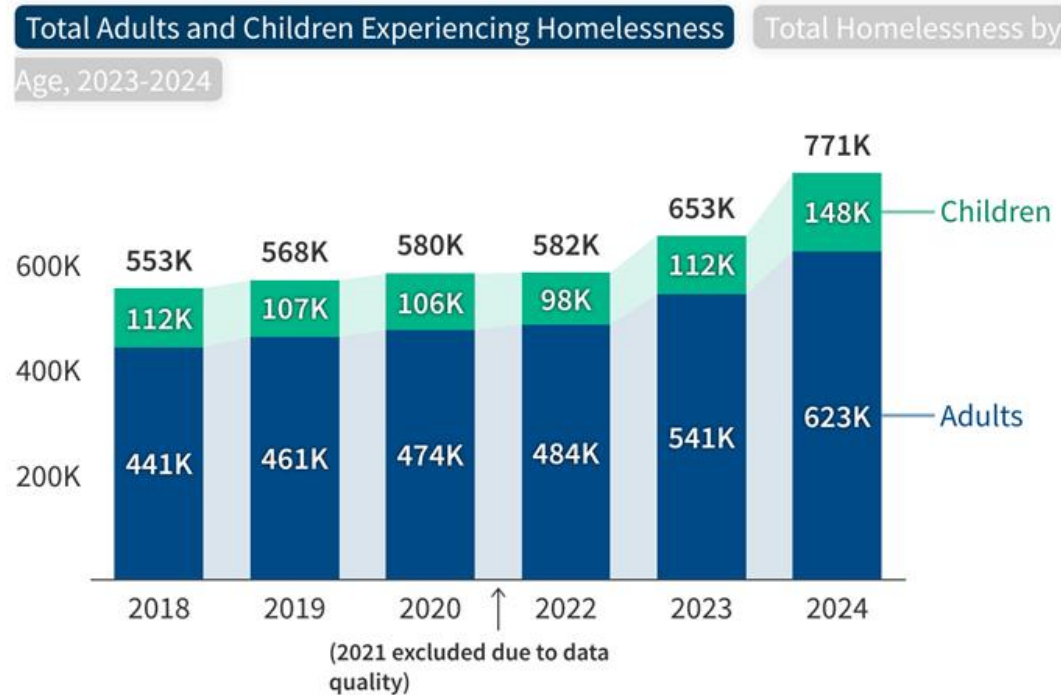
# Deep Dive: Meeting the Needs of the Unhoused in Disaster Planning

# Facts about Homelessness

- From 2018-2024, the number of people experiencing homelessness on a single night increased nearly 40% to over 771,000 people.
- In 2024, 81% people experiencing homelessness were adults, but the number of children experiencing homelessness grew at double the rate of adults.
- In 2024, 68% people experiencing homelessness were people of color.
  - This includes Black, Hispanic, American Indian or Alaska Native, Middle Eastern or North African, Native Hawaiian or Pacific Islander, and Asian adults and children.

### While Eight in Ten People Experiencing Homelessness Are Adults, the Number of Children Experiencing Homelessness Grew More Rapidly from 2023-2024

Number of adults and children experiencing sheltered and unsheltered homelessness on a single night



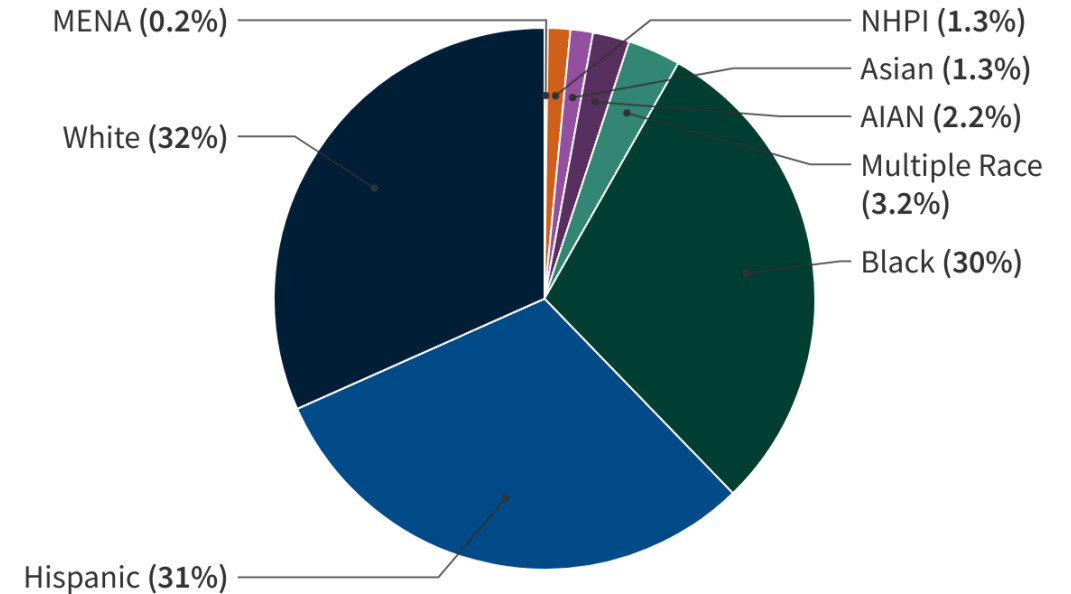
Note: Data come from HUD’s annual Point-in-Time (PIT) count, conducted on a single night each year. Includes all U.S. states, territories, Puerto Rico, and District of Columbia. Data for 2021 are not shown due to quality issues. Includes adults ages 18 and older and children under age 18. People staying in emergency shelters and transitional housing are considered "sheltered"; all others are unsheltered.

Source: KFF Estimates of People Experiencing Homelessness by Age, 2018-2024.



### In 2024, About Seven in Ten People Experiencing Homelessness Were People of Color

Total number of people experiencing homelessness on a single night in January 2024: 771,480



Note: Data come from HUD’s annual Point-in-Time (PIT) count, conducted on a single night each year. Includes all U.S. states, territories, Puerto Rico, and District of Columbia. Persons of Hispanic origin may be of any race but are categorized as Hispanic for this analysis; other groups are non-Hispanic. AIAN refers to American Indian or Alaska Native people. MENA refers to Middle Eastern or North African. NHPI refers to Native Hawaiian or Pacific Islander. Includes adults and children.

Source: KFF Analysis of 2024 CoC Homeless Populations and Subpopulations Reports.



**Literally homeless (HUD category 1), meaning:**

- (i) Living in a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a vehicle, park, abandoned building, bus or train station, airport or camping ground; or
- (ii) Living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals); or
- (iii) Exiting an institution (hospital, jail, etc.) where you resided for 90 days or less, and resided in an emergency shelter or place not meant for human habitation immediately before entering the institution.

**Fleeing/attempting to flee domestic violence (HUD category 4), meaning:**

Any individual or family who:

- (i) Is fleeing or is attempting to flee domestic violence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks to obtain other permanent housing

**Imminent Risk of Homelessness (HUD category 2), meaning:**

Individual or family who will imminently lose their primary nighttime residence, provided that:

- (i) Written notice stating that residence will be lost within 14 days of the date of application for homeless assistance has been received; and
- (ii) No subsequent residence has been identified; and
- (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing.

**Unstably housed (Oregon Housing and Community Services definition), meaning:**

Any individual or family who:

- (i) Is at risk of losing housing, and doesn't otherwise qualify as homeless or at risk of homelessness under the above listed categories, provided that:
  - a. They have been notified to vacate current residence OR otherwise demonstrate \*high risk of losing current housing; AND
  - b. Lack the resources or support networks to obtain other permanent housing

\*\*High risk may be demonstrated by, but is not solely defined as: having experienced a loss of income or other threat to housing stability. In addition, sharing housing of other persons due to loss of housing, economic hardship, or a similar reason (doubled up) may demonstrate a high risk of losing current housing. Owing rental arrears or not having the ability to pay for future rent may also demonstrate high risk status.

**Homeless under other federal statutes (HUD category 3), meaning:**

Unaccompanied youth under 25 years of age or families with children and youth who do not otherwise qualify as homeless under this definition, but who:

- (i) Are defined as homeless under other listed federal statutes;
- (ii) Have not had a lease, ownership interest or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
- (iii) Have experienced persistent instability as measured by two moves or more during the preceding 60 days; and
- (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers.

# Housing instability...

- Increases the risk of chronic absenteeism in school, thus reducing access to school-based or school-linked healthcare
- Decreases the likelihood of having a medical home, which can lead to holes in medical records and challenges with medication adherence and chronic disease management
- Increases vulnerability to disasters
  - Experiencing a disaster can further compound the trauma experienced from being homeless.
  - Per [SAMHSA's Disaster Technical Assistance Center](#) (DTAC), people who are homeless are more likely to experience aggravation of existing mental illness, withdrawal from substances, and inability to evacuate.
  - They may also lose access to places they spent time and found safety before the disaster.

# Creating an Inclusive Emergency Management System

- Explore the demographics of homeless populations in your community
- Connect with Homeless Service Providers (HSP), the local Continuum of Care (CoC), and other community-based organizations (CBOs)
  - Check with colleagues or other collaborative partners to seek introductions if needed

CoCs are regional/local planning bodies that coordinate housing and services funding for persons experiencing homelessness. They also collect local data on persons experiencing homelessness in their region(s). To find a local CoC, go to:

<https://www.hudexchange.info/grantees/find-a-grantee/>

State	Organization Name	Programs	Last HUD Award
VA	VA-500 - Richmond/Henrico, Chesterfield, Hanover Counties CoC	CoC	2023
VA	VA-501 - Norfolk, Chesapeake, Suffolk/Isle of Wight, Southampton Counties CoC	CoC	2023
VA	VA-502 - Roanoke City and County, Salem CoC	CoC	2023
VA	VA-503 - Virginia Beach CoC	CoC	2023
VA	VA-504 - Charlottesville CoC	CoC	2023
VA	VA-505 - Newport News, Hampton/Virginia Peninsula CoC	CoC	2023
VA	VA-507 - Portsmouth CoC	CoC	2023

# Partnering with Homeless Service Providers & Experts

- Assess the quality of existing relationships and determine any changes needed to strengthen partnerships
- Collaboratively explore where homeless service providers may fit in local / state response and recovery plans
  - Establish formal agreements before a disaster strikes
- Inventory existing services within the community for the homeless & unstably housed
- As you collaborate:
  - Include an educational component in meetings, including clarification of each partner's roles and information on disaster funding sources and restrictions
  - Avoid jargon and acronyms
  - Focus on small steps and areas of mutual benefit – set realistic expectations and prioritize activities accordingly

# Don't forget about long-term recovery!

- Recovery is an opportunity to strengthen the community's response to housing insecurity
- Traditional disaster recovery programs typically are not designed to target people experiencing homelessness
  - Application procedures for aid can pose barriers to people without documents or a place to live
- Homeless service providers are critical to long-term recovery planning and taskforce activities

# Additional Resources

- United States Interagency Council on Homelessness (USICH), January 2025: [\*Disaster Response Framework for supporting people experiencing homelessness during low-level localized incidents\*](#)
- U.S. Department of Housing and Urban Development (HUD): [\*Disaster Recovery Homelessness Toolkit\*](#)
- International Journal of Environmental Research and Public Health, February 2022: [\*Working With Disaster-affected Communities to Envision Healthier Futures: A Trauma-informed Approach to Post-Disaster Recovery Planning\*](#)
- National Center for Homeless Education: [\*Disaster Preparation and Response Resources webpage\*](#)

# Questions?