



# **Where the American Public Stands on Terrorism, Security, and Disaster Preparedness**

**Five-Years after September 11,  
One-Year after Hurricane Katrina**

**September 2006**

**Annual Survey of the American Public by the  
National Center for Disaster Preparedness at  
Columbia University, Mailman School of Public Health  
and The Children's Health Fund**

**Survey administered by the Marist College Institute for Public Opinion**

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## Introduction

Since 2002, the National Center for Disaster Preparedness (NCDP) at Columbia University's Mailman School of Public Health, and The Children's Health Fund (CHF), have done annual surveys on public attitudes and personal preparedness in the aftermath of the terror attacks of September 11, 2001. Conducted in collaboration with the Marist College Institute for Public Opinion (MIPO), each is a random-dial telephone survey of approximately 1,300 adults stratified according to U.S. Census 2000 data. Current and trend data from these surveys reveal an ongoing loss of confidence in government and inadequate levels of personal preparedness.

In August 2006, NCDP completed its fifth annual survey. The 2006 survey includes a national sample as well as representative samples of Louisiana and Mississippi of the counties most affected by Hurricane Katrina –those where residents are federally declared eligible for both individual and public assistance– and New York City and State.

Each edition of the survey has trended as well as questions appropriate to the given time period. Trended questions include confidence in government; willingness and ability to evacuate; personal and family preparedness plans; personal sacrifice; community preparedness; perceptions and engagement of all-hazard preparedness; and other questions thematic with the afore listed. All questions are cross-tabulated with a variety of demographics including race, age, gender, income, and region, size of community, political affiliation, and education. Further, select questions establishing a division of respondent (e.g. those having personal and family preparedness plans vs. those who do not) are cross-tabulated with other selected questions to observe correlations (e.g. awareness of community preparedness plans). The surveys are developed by NCDP and CHF investigators in conjunction MIPO.

Full data and trend tables are available on request.

## Key Findings

### *A Crisis of Confidence*

Five years after September 11 and one year after Hurricane, public confidence in the government to protect the area they live has hit a new low. Only 44% of the American public believes that the federal government can protect their community from a terrorist attack. This is a sharp and ongoing erosion of confidence, down from a high of 62% in 2003, and the second consecutive year that fewer than half of the American public believes government can protect them.

Confidence in the health system to respond to a biological, chemical, or nuclear attack has also steadily declined. Barely one-fourth (28%) are confident compared to 53% in 2002. Worse still, only 23% believe the health care system is ready to respond effectively to a bird flu pandemic.

When asked about specific aspects of keeping America safe, there are no signs of increased confidence. Just over one-third (36%) of the American public believes government can protect public transportation from terrorism, down from 43% in 2004. Also, just over one-third (36%) are confident that shipping ports are protected, confidence in the government's ability to protect U.S. borders (31%), and being confident in the government to oversee spending and set priorities on terrorism and disaster preparedness (35%).

These findings suggest a lack of confidence in the performance of the Department of Homeland Security (DHS). This is reinforced by our findings regarding DHS Secretary Michael Chertoff about whom only 38% expressed having confidence he can lead or organize a response to a major disaster. This contrasts starkly with the 65% rating of former DHS Secretary Tom Ridge two years ago.

At the community level, less than one-third (31%) believe their community has an adequate response plan currently in place in the event of a terrorist attack and only half (51%) in the case of natural disaster or emergency weather events – both unchanged from 2005.

### *A Crisis of Preparedness*

Consistent with our previous survey results, only a small percentage of the American public is personally prepared for a disaster. Less than one-third (31%) have a basic family emergency plan (which consists of at least two days supply of food and water, a flashlight, a portable radio, spare batteries, and emergency phone numbers and meeting place) and two-thirds, 66%, feel personally unprepared. These figures are virtually unchanged from 2005 (31% and 64%, respectively). This crisis of preparedness persists not only with eroding confidence in government, but with mounting concern about additional terrorist attacks occurring in the U.S. Currently, 82% of the American public is concerned there will be future attacks, up from 78% in 2005 and 76% in 2004.

Asked why they do not have a family emergency preparedness plan, a quarter (26%) say they have not had enough time to assemble these items with nearly another quarter (22%) saying they do not know what to do to achieve basic preparedness. Only 3% say it is because they already feel prepared. The percentages for these reasons are virtually unchanged since 2005. These findings strongly suggest that despite several recent well funded efforts, risk communication has failed to inform the American public about the essentials of preparedness.

As was made vividly clear in the weeks following Hurricane Katrina, having an evacuation plan is an essential element of community preparedness. However, cooperation of those who would be required to evacuate is also essential. Getting people to safety in an orderly fashion during an emergency can be expected to continue to be problematic. An overwhelming 92% of Americans have at least one reason why they would not evacuate immediately if ordered to do so. This is unchanged since 2005. The most common reasons are the need to ensure the safety of dependent family members –children (48%), elderly (47%), disabled (45%), and pets (34%). As was illustrated in the aftermath of Hurricane Katrina, lack of transportation is a potential barrier to effective community evacuation. Twenty-nine percent cite transportation as a reason, virtually identical to 2005 (30%).

The crisis in confidence is invoked in evacuation as well: an increasing number, 42%, say they

would not evacuate for lack of confidence in those ordering the evacuation. This is up from 36% in 2005.

### ***A Racial and Political Divide***

When we look at responses stratified by race, we find that African-Americans are much less trusting of government's role in disasters. About one-third (36%) of African-Americans express confidence in the ability of the government to protect the area they live (44% for Whites and 49% for Latinos). Further, less than half (43%) express confidence in the government to respond to a natural disaster or emergency weather event in their community (55% for Whites and 62% for Latinos) and only 37% feel their community has an adequate emergency response plan for natural disaster or emergency weather events (55% for Whites and 40% for Latinos).

The concerns of African-Americans are also more prevalent. Nearly three-quarters (73%) have concern about the possibility of a natural disaster or emergency weather event in their community (50% for Whites and 58% for Latinos). Further, 66% are concerned about the possibility of a terror attack in their community (36% Whites and 60% Latinos)

Overall, fewer than half of the American public (45%) said that the government's response to Hurricane Katrina made them more likely to personally prepare for a disaster –but 60% of African-Americans were so motivated. And, as was clear from the events in New Orleans following the hurricane, transportation may be more of an issue in African-American communities: 39% cited lack of transportation as a reason they would not evacuate immediately (compared to 29% overall).

Variations in confidence in government are also notable based on stated party affiliation. Among Democrats, 37% are confident in government to protect their community compared to 53% of Republicans (and 43% overall including Independents). Only 22% of Democrats are confident in the government to oversee spending and set fiscal priorities compared to 50% of Republicans (and 35% overall including Independents). Well over half of Republicans, 58%, think the U.S. is prepared for a future terrorist attack, compared to 39% of Democrats (and 49% overall including Independents).

Confidence in President Bush to give accurate and reliable information in the event of a public health emergency is dramatically split. Among African-Americans, 30% trust the president compared to 59% of Whites and 55% overall. Only 26% of Democrats expressed trust for President Bush compared to 86% of Republicans.

### ***Where the Disasters Struck***

One year after Hurricane Katrina, more than three-fourths of Louisiana and Mississippi residents, (78%) are concerned there will be another natural disaster or emergency weather event in their community (compared to 54% nationally). Residents of these states are more prepared for a natural disaster than is typical (68% vs. 57% overall). After Hurricane Katrina, fewer than half of the residents of these states are confident in the ability of government to respond appropriately to a natural disaster (47% vs. 54% overall). The hurricane and its aftermath motivated nearly two-thirds (63%) of Louisiana and Mississippi residents to become personally prepared for a major emergency, compared to 45% nationally.

In New York State, personal preparedness for a terrorist attack is no better than typical for the nation (34% feel personally prepared, virtually identical to 33% nationally). Fewer New York City and State residents have a basic family preparedness plan (26% both in the City and statewide, compared to 31% nationally and 41% in Louisiana and Mississippi). More New Yorkers cited not knowing what to do (30% both in the City and statewide, compared to 22% nationally) as the reason they did not have a plan. The failure of risk communication efforts is illustrated clearly here, since these results are in spite of the New York City Office of Emergency Management's ongoing *Ready New York* campaign meant to engage individuals and families to prepare.

Most New Yorkers express a lack of confidence in the adequacy of their community's emergency response plan: only 27% of City residents express confidence, 28% in suburban communities, and 31% upstate. In New York State as in the nation as a whole, African-Americans express the lowest level of confidence in the adequacy of their community's preparedness (21% compared to 31% Latino and 30% White).

### *A Closer Look*

Our findings have consistently shown that despite increasing concerns about additional acts of terrorism in the U.S., and despite declining confidence in government, the American public has taken few steps to become personally prepared for an emergency. When we explore the data in detail, we find that people with greater confidence in government are significantly more likely to be personally prepared. They are also more confident in the health care system to prepare for a biological, chemical, or radiological attack or pandemic flu. Despite differences in attitudes toward government when we hold for race, race itself is not significantly associated with personal preparedness. Overall, we found that those who identify their political party affiliation as Republican, and those at the highest income levels, have significantly greater confidence in government to prepare for disasters and terrorism attacks.

### *Conclusions*

Five years after September 11 and one year after Hurricane Katrina, the American public is not prepared for a terrorist attack or other disaster. Individuals and families remain unprepared, in part because they do not know what they should do to become prepared. This is despite having witnessed, at least on television, the dramatic consequences of being unprepared in a weather emergency, Hurricane Katrina.

Those most directly affected by Katrina have become better prepared for weather related disasters. However, in New York City, where the threat of another terrorist attack has remained higher than anywhere in the nation, family preparedness is marginally lower than typical.

This inadequate degree of personal preparedness is occurring alongside a crisis of confidence in government to get the job done with respect to terrorism –to protect communities and keep vulnerable infrastructure such as ports and borders safe. Confidence in the health care system has fallen each year and is now at an all-time low. Highly publicized and well funded efforts to make the public more aware of the need to become prepared, and how to do so, have failed to bring about the desired changes. Clearly if the American public is going to feel safe from terrorism and other emergency events, and become adequately prepared to deal with those that occur, significant changes must occur.

## Methods

The **2006 national survey** was conducted between July 19 and August 7, with 1,207 adults 18 years of age or older within the continental United States having been interviewed by telephone. Telephone numbers were selected based upon a complete list of telephone exchanges from throughout the nation. The exchanges were selected to ensure that each region in the country was represented in proportion to its population. The results of the survey are statistically significant at  $\pm 3.0\%$ . The margin of error increases for cross-tabulations. Interviews were conducted in both English and Spanish.

Previous years' surveys employed similar methodology and sample sizes.

The **2006 Louisiana/Mississippi survey** was conducted between July 25 and August 7, with 614 adults 18 years of age or older within counties most affected by Hurricane Katrina –those where residents are federally declared eligible for both individual and public assistance– interviewed by telephone. This survey is of adults living in residences with working telephones. Telephone numbers were selected based upon a complete list of telephone exchanges from throughout the area. The results of the survey are statistically significant at  $\pm 4.0\%$ . The margin of error increases for cross-tabulations. Interviews were conducted in both English and Spanish

The **2006 New York State** survey was conducted between August 7 and 16, with 1,008 adults 18 years of age or older within New York State interviewed by telephone. Telephone numbers were selected based upon a complete list of telephone exchanges from throughout the state. The exchanges were selected to ensure that each area was represented in proportion to its population. The results of the survey are statistically significant at  $\pm 3.0\%$ . The margin of error increases for cross-tabulations. Interviews were conducted in both English and Spanish

## **Institutional Information**

### ***National Center for Disaster Preparedness***

NCDP is an academically based, inter-disciplinary center focused on the nation's capacity to prevent and respond to terrorism and major disasters. NCDP's areas of expertise include disaster preparedness and response, mental health treatment, pediatric issues, and the socio-political dimensions of terrorism. NCDP is a national and international leader in disaster and terrorism readiness providing direct services to individuals affected by September 11, public health training, and applied research. NCDP produces curriculum on bioterrorism, develops mental health programs, provides training for public health professionals and other first responders, develops model programs, and has a wide-ranging research and public policy agenda. NCDP has collaborative relationships with faculty from Columbia University's schools of nursing, medicine, dentistry, journalism, Teacher's College, School of International and Public Affairs (SIPA), and Union Theological Center as well with scholars at leading national and international universities, centers, and across all levels of city, state, and federal government.

### ***Mailman School of Public Health***

The only accredited school of public health in New York City and among the first in the nation, Columbia University's Mailman School of Public Health provides instruction and research opportunities to more than 800 graduate students in pursuit of masters and doctoral degrees. Its students and more than 200 multi-disciplinary faculty engage in research and service in the city, nation, and around the world, concentrating on biostatistics, environmental health sciences, epidemiology, health policy and management, population and family health, and sociomedical sciences.

### ***The Children's Health Fund***

The Children's Health Fund, founded in 1987, is committed to providing health care to the nation's most medically underserved children through the development and support of innovative pediatric programs and the promotion of guaranteed access to appropriate health care for all children. To date, The Children's Health Fund's national network of 21 pediatric

programs has treated more than 350,000 children. For more information visit [www.childrenshealthfund.org](http://www.childrenshealthfund.org).

***Marist College Institute for Public Opinion***

Founded in 1978, the Marist Institute for Public Opinion (MIPO) is a survey research center at Marist College in Poughkeepsie, New York. MIPO has conducted independent research on public priorities, elections, and a wide variety of issues including the economy, health care, foreign affairs, the environment, science, information technology, and lifestyles. Through the regular public release of Marist Poll surveys, MIPO has built a reputation of independence, reliability, and accuracy. Frequently cited by journalists, public officials, and policy experts, the Marist Poll has been recognized for fairness, accuracy, and timeliness. MIPO offers full service commissioned research for business, government, and nonprofits. In all matters, MIPO, as a research organization, adheres to the current Code of the National Council on Public Polls and the Standards and Ethics of the Council of American Research Organizations (CASRO). MIPO also provides educational opportunities for students and is a public resource for information on survey methodology through internships, conferences, seminars, and coursework.