

## Sow the Wind, Reap the Whirlwind: Katrina 15 Years After



See also the *AJPH* Hurricane Katrina 15 Years After section, pp. 1460-1503.

“For they have sown the wind, and they shall reap the whirlwind” (Hosea 8:7) warns us that we should anticipate suffering serious consequences as the outcome of our own bad actions or negligence. However, there is also the parable of the positive aspect of sowing, whereby good acts can lead to betterment: “For whatever a man sows, this he will also reap” (Galatians 6:7). Both parables have something to offer in the “lessons learned” from that fateful August in 2005 when Hurricane Katrina devastated areas of Louisiana and Mississippi and now, some 15 years after, when natural disasters have become the “new normal” in public health.

### “KATRINA 15 YEARS AFTER” SPECIAL SECTION

This special section of the *AJPH*, “Katrina 15 Years After,” provides manifold examples of actions (or inactions) that led to amplification of the natural disaster as well as good acts that have led to increased resilience and preparedness. The historical and empirical evidence presented in this special section highlights the lessons learned that can be directly useful for public health policy, intervention, and practice to mitigate the dire consequences

of hurricanes, wildfires, and other natural disasters.

Previous *AJPH* editorials, “Public Health Disasters: Be Prepared,” which outlines the dilemma public health emergency preparedness professionals and societies face in paying the price for preparedness,<sup>1</sup> and “Medical Countermeasures: A Stitch in Time Saves Nine,”<sup>2</sup> which notes the competing choices to be made among priorities, help our thinking with respect to preventing untoward things from occurring in the first place (primary prevention) and preventing things that do occur from becoming even more serious (secondary prevention).

### “SOWING THE WIND”

Perhaps, in the broadest view—and especially cogent in the light of the current level of raised awareness of the systemic racism still highly prevalent in the United States—the sowing of the wind of systemic racism reaped the whirlwind of much of the destruction caused by Hurricane Katrina in terms of loss of life and property that disproportionately affected Blacks (even considering their large percentage of the population), who were living in poorer areas at high risk for flooding, had less opportunities for early evacuation to areas of

safety, and had higher levels of preexisting medical conditions that made them more vulnerable to the trauma and stress of Katrina.

Former president Barack Obama, when he was a US senator from Illinois, noted this point:

When he declared on the Senate floor that the poor response to Katrina was not “evidence of active malice,” but merely the result of “a continuation of passive indifference.” These structural exclusions matter very much for one’s total life opportunities, including crucially one’s economic opportunities . . . and thus greatly affect one’s opportunities to, say, escape from deadly hurricanes.<sup>3</sup>

Katrina gives us a unique lens through which we can see that racism is “not just a matter of the psychology of hatred but is instead also a matter of the racial structure of political and economic inclusion and exclusion.”<sup>3</sup> Now, some 15 years after, we need to take a deep look into whether the lessons learned from Katrina are actually being

translated into actions—or have they become “lessons forgot,” as this next public health disaster of COVID-19 sweeps through our most vulnerable communities.

### “THIS HE WILL ALSO REAP”

Another side of the coin operative during Hurricane Katrina is that, contrary to what was often reported by the media and went viral, there was the demonstration of human kindness: “That whole week newspapers were filled with accounts of rapes and shootings across New Orleans” and “There were terrifying reports of roving gangs, lootings and of a sniper taking aim at rescue helicopters. . . . The chief of police said the city was slipping into anarchy, and the governor of Louisiana feared the same. ‘What angers me the most,’ she said, ‘is that disasters like this often bring out the worst in people.’”<sup>4(p18)</sup> This narrative playing out in the media was reinforcing the myth of the veneer theory coined by Frans de Waal, which posits:

Civilization is nothing more than a thin veneer that will crack at the merest provocation. In actuality, the opposite is true. It’s when crisis hits—when the bombs fall or the floodwaters rise—that we

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humans become our best selves.<sup>4(p17)</sup>

It wasn't until months later, and reported out of the media spotlight of the immediate disaster, that:

Researchers from the Disaster Research Center (DRC) at the University of Delaware concluded that “the overwhelming majority of the emergent activity was prosocial in nature.” A veritable armada of boats from as far away as Texas came to save people from the rising waters. Hundreds of civilians formed rescue squads, like the self-styled Robin Hood Looters—a group of eleven friends who went around looking for food, clothing and medicine and then handing it out to those in need. Katrina, in short, didn't see New Orleans overrun with self-interest and anarchy. Rather, the city was inundated with courage and charity.<sup>4(p18)</sup>

This sowing of a spontaneous response and support for others can result in a bountiful harvest that we also reap in strengthening community resilience and saving lives. Katrina essentially reaffirmed the scientific evidence on how communities react to public health emergencies. The Disaster Research Center

has established that, in nearly seven hundred field studies since 1963, there's never total mayhem. It's never every man for himself. Crime—murder, burglary, rape—usually drops. People don't go into shock, they stay calm and spring into action. “Whatever the extent of the looting,” a disaster researcher points out, “it always pales in significance to the widespread altruism that leads to free and massive giving and sharing of goods and services.”<sup>4(p18–19)</sup>

## CONCLUSIONS

Hurricane Katrina, viewed from the perspective of 15 years

later, teaches us that we cannot afford to neglect the winds of racism that we are still sowing such that the same disproportionality in impact on lives that affected communities of color during the whirlwind of Katrina is again being reaped in the whirlwind of greater attack, hospitalization, and mortality rates in the current pandemic of COVID-19.

As communities, states, and the nation, we must rise to our higher selves and sow new seeds through changing hearts and protecting the most vulnerable among us to reap the benefits for all of us to be in a society living in racial harmony where everyone has the opportunity to flourish—as well as being fully prepared for, and ready to respond to, the future public health emergencies such as Katrina and COVID-19 that will inevitably arise.

We need to reap the oneness of humanity, a oneness of the human race that “is no mere outburst of ignorant emotionalism, or an expression of vague and pious hope” but a oneness that “must bind us all . . . as members of one human family” through “an organic change in the structure of present-day society” that “calls for no less than the reconstruction . . . of the whole civilized world—a world organically unified . . . and yet infinite in the diversity.”<sup>5</sup> **AJPH**

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### CONFLICTS OF INTEREST

The author has no conflicts of interest to declare.

### REFERENCES

1. Kim-Farley RJ. Public health disasters: be prepared. *Am J Public Health*. 2017; 107(suppl 2):S120–S121.
2. Kim-Farley RJ. Medical countermeasures: a stitch in time saves nine. *Am J Public Health*. 2018;108(suppl 3): S177–S178.

3. Gilman N. What Katrina teaches about the meaning of racism. Available at: <https://items.ssrc.org/understanding-katrina/what-katrina-teaches-about-the-meaning-of-racism>. Accessed July 12, 2020.

4. Bregman R. *Humankind: A Hopeful History*. Manton E, Moore E, trans. New York, NY: Little, Brown; 2019.

5. Effendi S. The world order of Bahá'u'lláh. 1991. Available at: <https://reference.bahai.org/en/t/se/WOB/wob-22.html>. Accessed July 12, 2020.