Discussion & Conclusion

The final results showed that, in 2000, there is a correlation between race and low-income level and that that correlation aligns very clearly with specific neighborhoods. Figure 5. Additionally, the results showed that of the 257 deaths recorded in New Orleans, nearly half appeared to cluster in one of two categories—hospitals and nursing homes. And the data shows that most people in those facilities were above 65 and black (Gentilly West and Audubon). The data was able to uncover the clear neighborhood distinctions based on socio-economic class and the evident relationship between poverty and race in New Orleans.

Finally, this study brings into light the vulnerability of certain populations during extreme weather events and inaccessibility of evacuation for poor populations. Nursing home and hospital residents were—for the most part—logistically difficult to relocate in large numbers, so where a nursing home or hospital faced damage in the storm, many people were stuck in harm’s way, as demonstrated in figure 2. There were many fatalities. Meanwhile, though the more poor neighborhoods were more susceptible to severe flood damage, without means to evacuate, many residents of the Lower Ninth Ward, Gentilly, St. Anthony, and Milbenburg stayed in their homes and were vulnerable to Katrina’s damage. I hope that this information can contribute in the future to investment in better infrastructure poor neighborhoods of New Orleans as well as more holistic and extensive planning so that mass evacuation of poor neighborhoods more susceptible to damage is accessible when a natural disaster such as Katrina hits New Orleans in the future.

References