The 9/11 attacks brought home the reality that state and local governments and emergency response organizations must be prepared to respond to acts of terrorism. Of particular concern has been improving state and local response capabilities for dealing with terrorist incidents involving weapons of mass destruction (WMD)—biological, radiological, chemical, or nuclear weapons.

Congress established the Advisory Panel to Assess Domestic Response Capabilities for Terrorism Involving WMD (the Gilmore Commission) in 1998 to evaluate the progress of federal preparedness programs for local emergency response and to recommend strategies for effectively coordinating preparedness and response efforts across federal, state, and local government and response organizations.

As part of that effort, the RAND Corporation conducted a nationwide survey of state and local response organizations: law enforcement, fire services, offices of emergency management (OEMs), emergency medical services (EMSs), hospitals, and public health agencies. Following the first wave, which was fielded just prior to the 9/11 attacks, the effort fielded two additional waves in 2002 and 2003. Wave III surveyed more than 1,600 local and state organizations and had a 56 percent response rate.

What Steps Were Taken After 9/11?
In response to 9/11, state and local organizations took a number of steps to improve their preparedness; these included updating mutual aid agreements for emergencies in general, updating response plans for chemical, biological, and radiological (CBR)-related incidents, and conducting risk assessments.

Unfortunately, we cannot tell how much better prepared the nation is as result, because we lack standardized measures of organizational and community readiness and because we cannot tell how many resources may have been diverted from other areas of preparedness (or other agency responsibilities) to focus on terrorism preparedness.

Still, the activities undertaken support overall preparedness, whether for a natural disaster or a terrorist-related incident. However, the survey results suggest that in taking on additional demands after 9/11, some local organizations may have been stretched too thin—a concern that warrants further examination.

One interesting finding addressed how organizations’ perception of threat related to how proactive they were in addressing preparedness for terrorism-related incidents. The survey asked respondents whether they perceived the threat to their jurisdiction to be low or high and then correlated those responses with how organizations funded preparedness activities.

As shown in the figure, organizations that perceived their threat level to be high either increased spending or reallocated resources more than did organizations that perceived their threat level to be low. In general, organizations that perceived their threat level to be high were more likely to undertake a number of actions to improve their overall preparedness than were organizations that perceived their threat level to be low.

What Areas Are in Need of Improvement?
We highlight three areas in need of improvement: coordination with the private sector, coordination among nontraditional partners such as public health, and expectations of the role of the military.

The 2003 survey results show limited interactions of state and local response organizations with the private sector, either in sharing threat information or participating in joint preparedness activities (e.g., planning and training).
As for coordination among nontraditional partners, the survey shows a disconnect between how public health agencies and law enforcement and fire departments view the degree to which they are integrating their preparedness activities.

Events in Louisiana after hurricane Katrina highlighted the differing expectations state and local officials have about the role of the federal military and the National Guard in responding to a major catastrophe. The survey also found that state and local response organizations varied in their expectations of the military following a large-scale terrorist-related incident or a major disease outbreak, such as pandemic flu. These differences raise an important question about whether state and local organizations are doing planning under very different assumptions in terms of the role they expect the military to play during the response to a major disaster.

**What Support Needs Do Organizations Have?**

Although the survey noted a number of support needs, two key insights emerged. First, first responders were primarily concerned about protection of response personnel and their ability to decontaminate victims and provide mass care. Organizations cited limited training and equipment procurement budgets, as well as competing or higher departmental budget priorities, as limiting factors in addressing this need.

Second, volunteer fire departments were less involved in terrorism-specific preparedness activities than paid fire departments; this raises concerns, since the majority of fire departments in the nation are volunteer.

Finally, most organizations were looking toward the Department of Homeland Security (DHS) for funding support. But they were also looking to DHS for more information about the terrorist threat and for more coordination between federal, state, and local levels; more streamlining of grant processes and requirements; more consolidation of training courses/programs and equipment programs; and more facilitation in integrating with the private sector.

**Conclusions**

Given the catastrophic impact of hurricanes Katrina and Rita, controversy has arisen over whether state and local organizations have overemphasized preparedness for terrorism at the expense of emergency preparedness for natural disasters. Our results suggest that the events of 9/11 spurred response organizations not only to undertake preparedness activities for terrorism-related incidents but also to make general improvements in emergency response. All these activities support overall preparedness for any catastrophic event.

These survey results provide a broad national picture of what was occurring in 2003 with respect to state and local response organizations’ preparedness. Some things have obviously changed in the three years since this survey was fielded, but the issues identified likely remain relevant today. And so do the challenges.

Moreover, the survey provides a valuable database and a useful set of baseline measures for tracking improvements in U.S. preparedness over time. Thus, an update of the survey and periodic assessments such as this would be an important undertaking to determine what, if anything, has changed in the intervening years.
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