

Social Support in Disaster Evacuations: A Systematic Review for Information Systems Research

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ABSTRACT

Disaster evacuations displace thousands each year, with households relying on family and friends to make decisions, secure shelter, and recover before returning home. Yet research on social support remains fragmented, typically focusing either on health outcomes or on evacuation logistics such as transportation and sheltering behavior. We address this gap by reviewing 31 empirical studies published between 2005 and 2024 and synthesizing an integrated framework that captures structural, perceived, and received dimensions of social support, along with emotional, informational, and instrumental types. We further link social support to both psychological and behavioral evacuation outcomes, highlighting its central role in communities' capacity to prepare for, carry out, and recover from evacuations. This framework advances information systems research by informing evacuation simulation and decision-support systems that anticipate social-support-driven behaviors and health impacts, identify populations with unequal access to informal support, and design tools to connect socially isolated evacuees to formal resources.

Keywords

Social support, disaster evacuation, evacuation behavior, information systems.

INTRODUCTION

Large-scale evacuations resulting from disasters such as hurricanes, wildfires, floods, and nuclear accidents displace millions of people worldwide each year. During these events, individuals and households must prepare to leave, decide whether and when to evacuate, coordinate travel logistics, secure accommodations, and manage living away from home—often for several days, but sometimes for weeks or longer—until it is safe to return (Thompson et al., 2017). Evacuations pose complex, cascading challenges for evacuees and their families, emergency managers, public health officials, and transportation authorities as they unfold across the disaster management phases of mitigation, preparedness, response (including evacuation and reentry), and recovery (including longer-term displacement and relocation) (Kuligowski, 2021; Lindell et al., 2019).

A critical yet understudied dimension of evacuation behavior is households' reliance on networks of family and friends for assistance during displacement, which we refer to as *social support* (Quarantelli, 1985). In psychology and health research, social support—often operationalized as emotional, informational, or instrumental support—is primarily framed as an individual coping resource that shapes physical, mental, and social health outcomes (Heaney & Israel, 2008). Within psychology and health research in the context of disaster evacuation, social support has been shown to buffer stress, mitigate adverse physical and mental health outcomes, and support longer-term recovery, particularly during prolonged or repeated evacuations (Solomon, 2014). From an information system (IS) perspective, this body of work can motivate and inform the design of systems that can help identify at-risk populations, prioritize supportive interventions, and evaluate the downstream health impacts of evacuation policies (Heinz et al., 2022).

Meanwhile, research on evacuation behavior, transportation, and logistics increasingly conceptualizes social support as a key determinant of evacuation decision-making and mobility patterns (Murray-Tuite & Wolshon, 2013). Studies demonstrate that access to family and friends strongly influences evacuation destination choice, travel distance, accommodation type, and relocation duration, with many evacuees traveling—often long distances—to stay in private residences within their social networks (Lindell et al., 2011; Wong et al., 2018; Na & Grace, 2022). For IS research, this literature stands to underpin the development of evacuation simulations, transportation models, and decision-support systems that account for social-support-driven mobility and sheltering behaviors to accurately predict evacuation flows and plan for populations with unequal access to informal accommodations (Grace et al., 2025).

Despite their shared emphasis on social support, these two streams of research remain weakly integrated. Studies examining health and psychological outcomes typically model evacuation behavior as a generalized environmental stressor (Solomon, 2014), while behavioral and transportation studies rarely investigate how evacuation decisions and mobility patterns influence evacuees' health, well-being, or long-term resilience (Lindell et al., 2019; Thompson et al., 2017). As a result, no systematic literature review has synthesized social support as a construct influencing both evacuation health and behavioral-related outcomes or clarified how different forms of social support—such as perceived, received, or structurally available support—can be consistently defined and operationalized across disciplines.

This lack of integration has significant theoretical and practical implications for IS research, particularly for the design and evaluation of systems intended to support evacuation management decision-making or support coping and well-being among evacuees. Research in health and disaster psychology provides critical rationales for evacuation policies by demonstrating how social support shapes preparedness, vulnerability, and physical and mental health among evacuees (Asfaw et al., 2020; Heagele, 2021; Zakour et al., 2015), and identifying evacuee populations where supportive interventions and resources are most needed (Caramanica et al., 2015; DeYoung et al., 2023; La Greca et al., 2022). In parallel, evacuation behavior and modeling studies reveal the influence of social support on when, how, and why evacuees move, where they go, and the logistical constraints they face (Mottershead et al., 2020; Xu et al., 2017)—behavioral dynamics that subsequently condition evacuees' exposure to stressors and subsequent health and psychological outcomes (Heppenstall et al., 2013; Kuroda & Koyama, 2022). Failing to integrate these perspectives risks the design of IS that simulate and optimize transportation logistics while neglecting evacuee well-being, or that focus on the physiological impacts of evacuation without addressing the behavioral mechanisms that generate them.

To address this gap, we conducted a systematic literature review (SLR) examining the state of the art in research on social support in large-scale evacuations. Drawing on 31 empirical studies published between 2005 and 2024, we synthesize an integrated definition of social support that encompasses its dimensions—including structural, perceived, and received support—and its functional types, including emotional, informational, and instrumental assistance. Building on this synthesis, we develop a theoretical model that organizes prior findings around the antecedents of social support and the behavioral, health, and psychological outcomes influenced by social support during and after evacuation.

METHODS

We conducted an SLR to examine the state-of-the-art in research on social support in large-scale evacuations. Following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Sarkis-Onofre et al., 2021), the following sub-sections report our research questions, study selection criteria, and data extraction and analysis procedures.

Research questions: To address the limited integration between health- and transportation-oriented evacuation research, and to inform the design and evaluation of IS that simulate and manage evacuations, we review the literature to answer the following research questions:

1. In what disaster evacuation contexts has social support been investigated?
2. How has social support been defined in disaster evacuation literature?
3. How does social support relate to evacuation antecedents and consequences?

Identification: Using the query (evacuation AND “social support”) for studies published between 2005-2024, we initially identified 94 records indexed in Scopus. After excluding non-English journal articles, conference proceedings, and book chapters, 80 records were retained for screening (Figure 1).

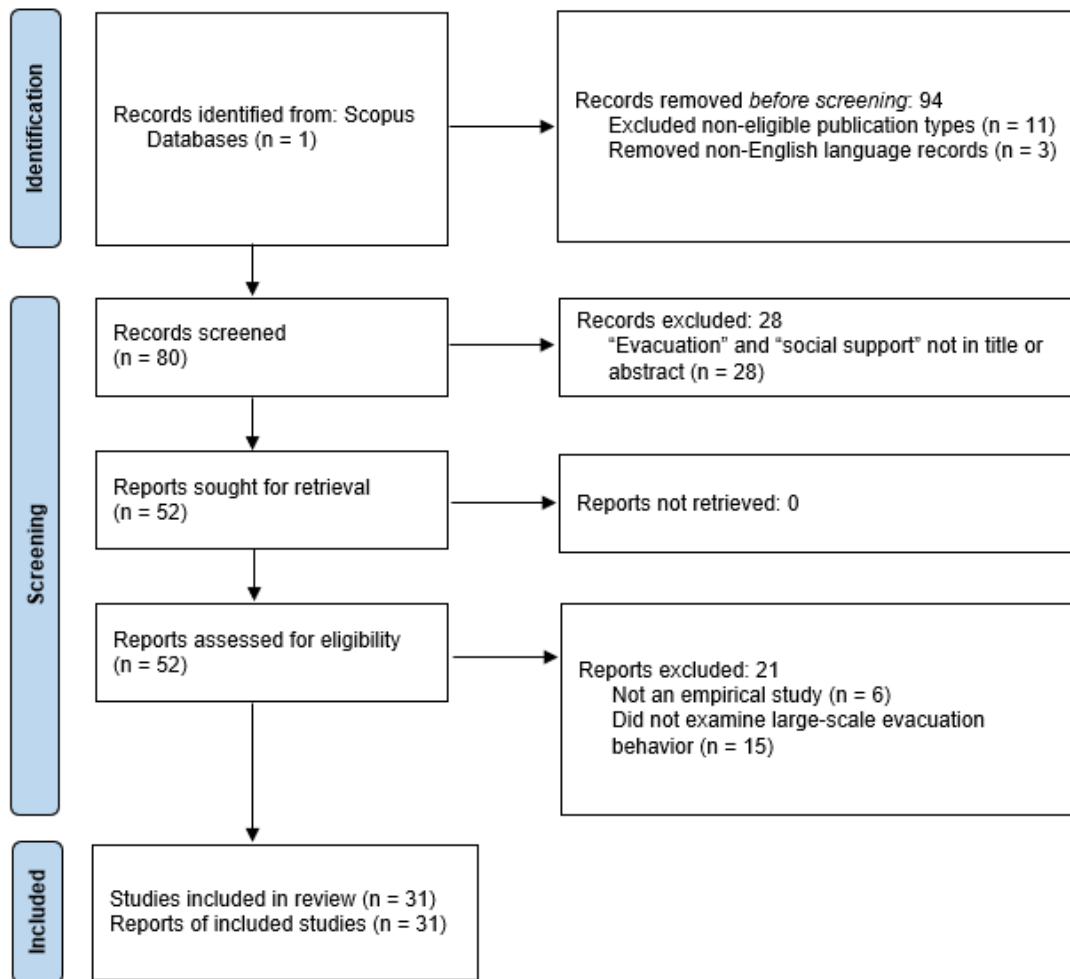


Figure 1. Study selection procedure (Paige et al., 2021).

Initial screening (abstract only). We screened the abstracts of the 80 records to assess topical relevance. Records were excluded if “evacuation” and “social support” appeared only as keywords but were not substantively addressed in the title or abstract ($n=28$). This criterion excluded studies that mentioned evacuation or social support tangentially or as related phenomena, rather than examining social support within evacuation contexts. Following abstract screening, 52 records were retained and retrieved for full-text review.

Eligibility screening (full text): We screened the full text of the 52 remaining articles for eligibility. Studies were excluded if they did not present empirical findings (e.g., practice reports, literature reviews) or did not operationalize and measure “social support” ($n=6$), or did not focus on large-scale disaster evacuation behavior ($n= 5$). The latter included studies that examined individual medical evacuations, building evacuations in non-disaster contexts, or military evacuations. We also excluded studies of post-disaster health or recovery outcomes that did not center evacuation as the analytic focus or sampling context (e.g., studies of disaster-exposed populations without specifying evacuation experiences). In contrast, we retained studies that sampled and analyzed evacuees as a distinct population and examined how evacuation-related stressors, relocation conditions, or post-displacement and recovery environments shaped social support or outcomes (e.g., behavioral or psychological). Following full-text screening, 31 studies were included in the review.

Data extraction and classification: For each of the 31 included studies, we extracted and classified information across five domains:

- *Disaster context:* Hazard type (e.g., hurricane, wildfire), geographic location, and time of the event.
- *Study methodology:* Study design, including qualitative, quantitative, or mixed approaches.
- *Evacuation antecedents:* Variables examined as predictors of social support when social support was modeled as a dependent variable, including demographic, household, social, and evacuation-related conditions that shape the availability, form, or reception of social support.

- *Social support*: Dimension of social support (structural, perceived, and/or received) and type of support (emotional, informational, and/or instrumental).
- *Evacuation outcomes*: Behavioral, psychological, health, or other outcome variables examined in relation to social support, including evacuation behaviors, mental health, and psychological outcomes.

Data extraction was conducted collaboratively using shared documents and structured spreadsheets. The authors iteratively reviewed and refined extracted information across studies. Discrepancies or ambiguities were resolved through discussion to ensure consistency in interpretation and classification. The resulting classifications of social support forms, evacuation-related antecedents, and evacuation outcomes are presented in the findings section.

FINDINGS

Study Contexts and Methodological Approaches (RQ1)

RQ1 examines the disaster evacuation contexts in which social support has been studied. Figure 2 displays the distribution of studies by disaster evacuation context and methodological approach. Overall, 14 of the 31 studies were conducted in the United States, spanning hurricanes (6), wildfires (3), hypothetical or future scenarios (4), and tornadoes (1). Eight studies were conducted in Japan, addressing nuclear accidents (5), an earthquake/tsunami (1), a flood (1), and a hypothetical scenario (1). Four studies were conducted in Canada (wildfires and flood), and one each in China (landslide), New Zealand (earthquake), the Philippines (typhoon), Sri Lanka (flood), and Afghanistan (political conflict).

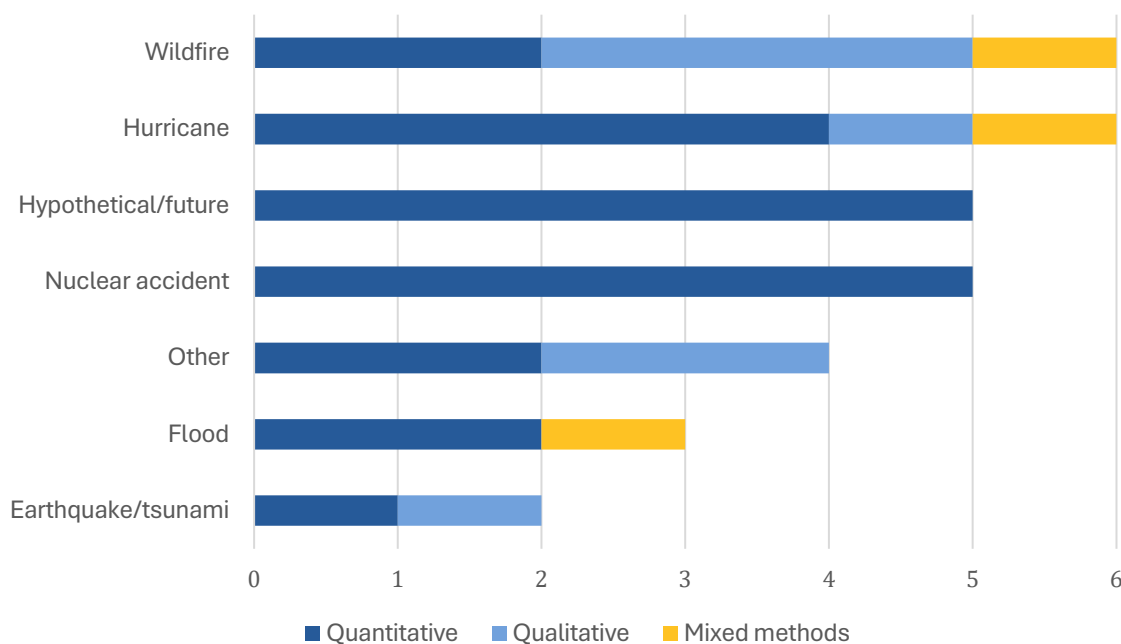


Figure 2. Disaster evacuation contexts and methods in the 31 reviewed studies

Methodologically, most studies ($n=21$) used quantitative designs to examine relationships between social support and evacuation-related antecedents and/or outcomes. Qualitative approaches ($n=7$) were less common and were more frequently applied to underrepresented disaster types and non-U.S./Japan contexts, such as Canadian wildfires, a Philippine typhoon, and political conflict in Afghanistan. Mixed-methods designs were the least common ($n=3$), appearing in only three studies.

Definition of Social Support (RQ2)

RQ2 examines how social support is defined in the disaster evacuation literature. Social support refers to *emotional, informational, and instrumental assistance that is available through informal social ties (e.g., family and friends), perceived to be available from those ties, or received from them before, during, and after disaster evacuations*. Emotional, informational, and instrumental support represent functional types of support that may be perceived as available or received in enacted form, whereas structural support reflects the underlying configuration of social ties that enables or constrains the mobilization of those functions. In this conceptual

framework, evacuations represent a temporally unfolding process in which conditions and events (i.e., antecedents) reshape the structure, perception, and reception of social support, which in turn shapes evacuation-related behavioral and psychological outcomes.

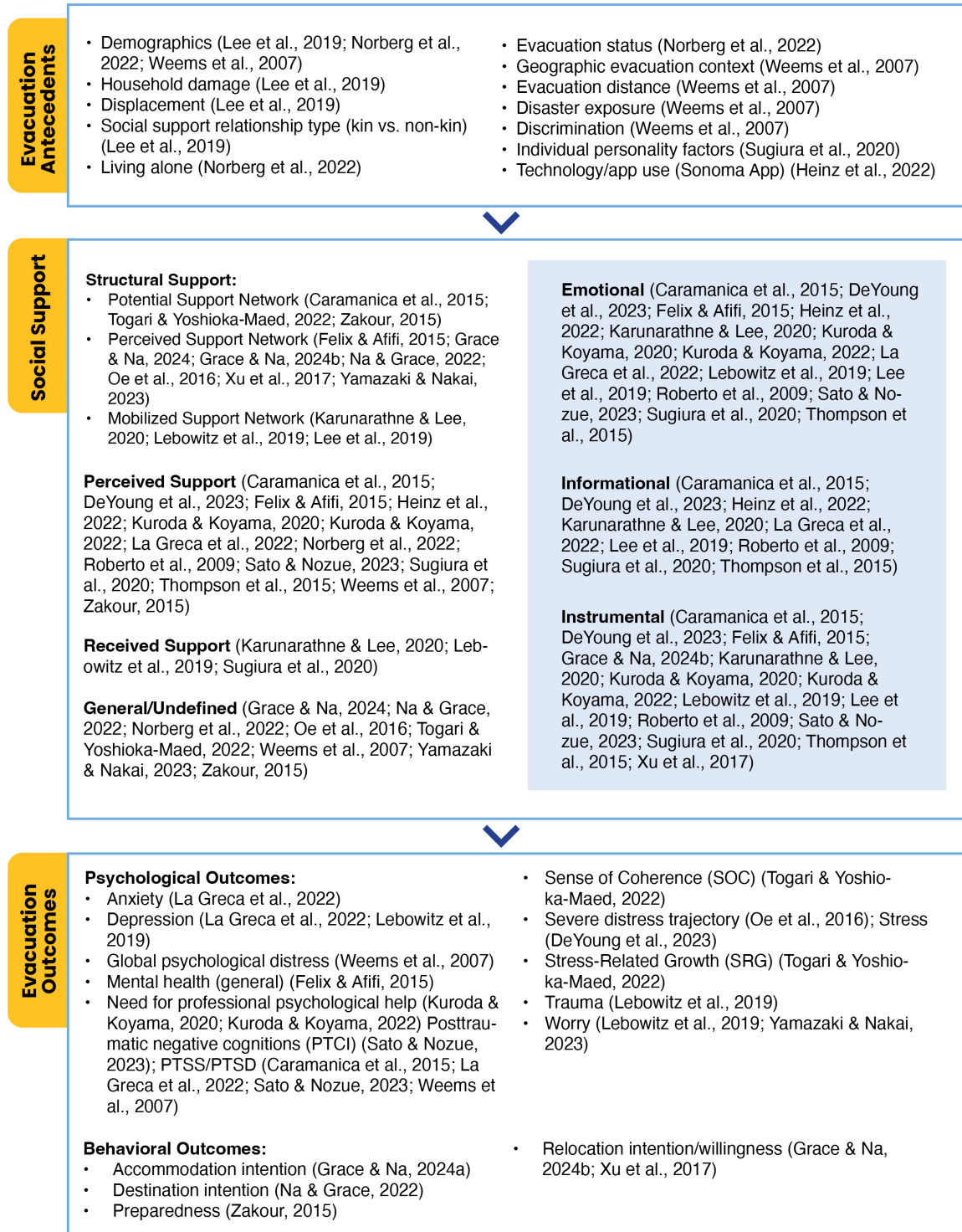


Figure 3. Synthesis of findings on social support in disaster evacuations.

Dimensions of Social Support

The conceptual definition of social support comprises three analytically distinct dimensions:

Structural support refers to the availability and composition of social network ties that may be characterized as (i) latent ties with the capacity to provide assistance; (ii) recognized ties that the individual understands as having

the capacity to provide assistance; or (iii) a mobilized ties who actually provided emotional, informational, or instrumental assistance during an evacuation. For example, Togari and Yoshioka-Maeda (2022) examined the latent network ties of male workers in Fukushima Prefecture whose wives and children had voluntarily evacuated following the Fukushima Daiichi nuclear accident. Structural support was operationalized as social network size, measured by asking respondents how many people (none, one, two–three, or four or more) they had across nine relationship categories (e.g., family, neighbors, coworkers, online friends). These items aimed to capture the presence and composition of available social ties, independent of respondents' recognition of those ties' capacities to help or whether they actually provided assistance.

Perceived support refers to individuals' beliefs about the availability and adequacy of help from family, friends, or other informal social ties in a given context. For example, Roberto et al. (2009) examined perceived social support among older adults displaced by Hurricane Katrina using the Medical Outcomes Study (MOS) Social Support Survey, which asks respondents whether someone would be available to provide different kinds of assistance (e.g., "someone to listen to you," "someone to give you good advice about a crisis," or "someone to help you if you were confined to bed"). Their findings indicate that respondents generally reported high perceived emotional, informational, and tangible support, with family members identified more frequently than non-family sources as potential providers of support.

Received support refers to actual assistance provided by family, friends, or other informal social ties during an event. For example, Lebowitz et al. (2019) examined post-flood social support among older adults in Jōsō City, Japan, 30–90 days after severe flooding in September 2015. Using the Brief Inventory of Social Support Exchange Network (BISSEN), respondents reported whether they had received specific forms of assistance from cohabiting family members, relatives, friends, neighbors, and/or colleagues. Received support included having someone listen and provide emotional reassurance, receiving advice when making difficult decisions, having someone take action on their behalf, and being cared for when physically ill. Analyses revealed that receiving support from family members was associated with lower levels of depression, trauma-related symptoms, and worry, whereas receiving support from non-family sources (e.g., friends or neighbors) was associated with higher levels of post-flood psychological distress.

Types of Social Support

The definition also conceptualizes three types of social support:

Emotional support refers to expressions of care, empathy, reassurance, and belonging provided by family and friends that help individuals cope with stress, fear, or uncertainty. Emotional support can take the form of perceived availability of assistance or actual received support, both of which influence evacuees' psychological well-being. For example, among pregnant women and mothers who evacuated during Hurricane Florence, higher perceived emotional support—measured using adapted MOS Social Support Survey items—was significantly associated with lower maternal stress, with participants describing how reassurance and understanding from family buffered evacuation-related distress (DeYoung et al., 2023). Moreover, in a qualitative study of the 2011 wildfire evacuation of Sandy Lake First Nation, Asfaw et al. (2020) documented emotional support Elders received from family members during displacement and the lack of support that resulted when evacuation policies separated family members, causing distress and feelings of isolation.

Informational support refers to the provision of advice, guidance, warnings, or situation-relevant information by family and friends that helps individuals understand a situation and make decisions. Following Hurricane Irma, La Greca et al. (2022) found that mothers who reported higher perceived informational support—measured via the ENRICH Social Support Inventory (e.g., having someone to provide advice or guidance when facing problems)—experienced significantly lower levels of posttraumatic stress, anxiety, and depression three months post-disaster. Another study conducted during the 2017 flooding in rural Sri Lanka, found that households received informational support in the form of disaster warnings and flood updates from close relatives and neighbors during evacuation, with social network analysis showing that these information exchanges broadened to more geographically dispersed social and organizational networks during recovery (Karunaratne and Lee, 2020).

Instrumental support refers to tangible and/or practical assistance provided by family and friends, including transportation, shelter, financial assistance, childcare, food provision, and help with evacuation or recovery tasks. For example, Thompson et al. (2015) examined perceived instrumental support during the 2007 San Diego wildfire using the ISEL Tangible Support subscale but found no significant association with PTSD or cortisol, possibly due to low distress and access to formal resources. Similarly, Sugiura et al. (2020) found that personality traits predicted providing instrumental help during the 2011 Great East Japan Earthquake, but not receiving help, suggesting personality shapes support provision more than receipt.

Antecedents of Social Support and Evacuation Outcomes (RQ3)

RQ3 examines the antecedents identified in prior studies as shaping social support and how social support, in turn, influences evacuation consequences. Only five studies explicitly modeled predictors of social support (Figure 3). Identified antecedents include evacuation distance, disaster exposure, perceived discrimination, geographic context, income, minority status, living alone, sex, age, and residence in evacuated versus non-evacuated communities (Norberg et al., 2022; Weems et al., 2007). Personality traits such as altruism and problem-solving were associated with providing instrumental help, whereas leadership and well-being predicted encouragement to evacuate (Sugiura et al., 2020). Finally, greater physical damage and displacement were linked to mobilizing larger, less dense, and more non-kin-based networks, while less affected households relied on smaller, kin-centered networks (Lee et al., 2019).

Although only five studies statistically modeled social support as a dependent variable, qualitative research identifies key conditions that function as antecedents by shaping support availability and experience. Evacuation policies that separated Elders and dispersed communities constrained culturally grounded support (Asfaw et al., 2019, 2020), while accommodation delays and unfamiliar shelters limited access to informal networks (Mottershead et al., 2020). Caregiver presence and household composition conditioned preparedness among elderly evacuees (Heagele, 2021), and institutional coordination failures hindered support during residential care evacuations (Heppenstall et al., 2013). In conflict and typhoon contexts, uncertainty, transnational ties, and resettlement processes restructured perceived and received support (Nelson et al., 2011; Orphan et al., 2026). Together, these findings point to evacuation policy, sheltering arrangements, caregiving capacity, institutional coordination, and displacement context as salient variables for future models of social support.

Evacuation Outcomes

Across the quantitative (n=21) and mixed methods (n=3) reviewed studies, outcomes linked to social support were predominantly psychological rather than behavioral (Figure 3). Most examined anxiety, depression, distress, PTSS/PTSD, stress, trauma, worry, or related mental health indicators, whereas relatively few assessed behavioral outcomes such as preparedness, destination choice, accommodation intentions, or relocation willingness. Significantly, these domains were typically analyzed separately, with little attention to how evacuation behaviors and psychological outcomes interact. Consequently, the literature offers limited insight into how social support simultaneously shapes both what evacuees do and how they fare during and after displacement.

Most studies identify an inverse relationship between social support and adverse mental health outcomes, with higher levels of perceived or received support associated with lower anxiety, depression, distress, and PTSS/PTSD. However, social support is not uniformly protective. Lebowitz et al. (2019) demonstrate that support can function as both a buffer and a burden, depending on network composition (family vs. non-family), directionality (receiving vs. providing), and reciprocity. Reciprocal, family-based support was associated with reduced post-disaster psychological distress, whereas non-family and imbalanced support exchanges were linked to greater psychological strain.

The qualitative studies (n=7) enrich the predominantly inverse relationship observed in quantitative research by illustrating how and under what conditions social support shapes evacuees' psychological experiences. Across wildfire, hurricane, earthquake, typhoon, and conflict contexts, support from family and friends takes the form of concrete practices—such as cooking traditional food, assisting with medication, coordinating transportation and lodging, and maintaining communication—that helped reduce stress and supported coping (Asfaw et al., 2019, 2020; Mottershead et al., 2020; Orphan et al., 2026). These studies emphasize that support is embedded in social contexts defined by culture, reciprocity, and collective identity, which encourages resilience among evacuees (Nelson et al., 2011; Heppenstall et al., 2013). They also show that the absence or disruption of support, including limited caregiver capacity and lack of sheltering with family, contributes to distress, uncertainty, and vulnerability (Asfaw et al., 2020; Heagele, 2021; Mottershead et al., 2020). Moreover, qualitative findings illuminate dimensions largely absent from quantitative models, including how evacuation policies structure access to support, how available support conditions preparedness behaviors, and how support structures are reconstructed during relocation (Heagele, 2021; Nelson et al., 2011). Together, these studies demonstrate that social support is not a static buffer against distress, but a contextually contingent resource that is shaped by social and instructional structures and disaster conditions which, in turn, shape evacuee preparedness, coping, and longer-term resilience.

DISCUSSION

Below we discuss this review's contribution to our understanding of social support in disaster evacuations, its implications for IS research, and our study's limitations and opportunities for future work.

Integrating Fragmented Perspectives on Social Support in Evacuations

This review addresses the fragmentation of research on social support: social support has been examined extensively in the context of disaster evacuations, but studies (i) conceptualize and measure the construct of social support differently, and (ii) theorize social support as either a resource for individual coping or logistical decision-making. Our synthesis of this literature clarifies and advances theory in three ways:

- *Fragmented outcomes:* Health and psychology studies primarily conceptualize social support—especially perceived support—as a coping resource influencing stress, anxiety, and PTSS/PTSD, while evacuation behavior and transportation studies treat social support—especially received support—as a determinate of evacuation, destination, and sheltering decision-making. These disciplinary and research design differences result in research that rarely investigates health and behavioral outcomes, and their interrelationships, limiting understanding of how evacuation behaviors and psychological outcomes are mutually shaping.
- *Conceptual inconsistency:* Prior research variably operationalizes social support as network size, perceived availability, or received assistance, often without distinguishing among these dimensions. Furthermore, studies investigate different types of support evacuees that are available, perceived, and/or received from their family and friends. By synthesizing structural (including latent, recognized, and mobilized networks), perceived, and received support, and linking these to emotional, informational, and instrumental functions, this review offers a coherent multidimensional construct that can guide interdisciplinary research.
- *Underdeveloped theory:* Few studies model social support within an endogenous evacuation process. Instead, it is treated as a static coping or decision resource, with antecedents and outcomes analyzed separately. This obscures how support is shaped by preexisting conditions (e.g., household composition, car ownership) and evacuation events (e.g., warnings, displacement), and how these shifts subsequently influence behavioral and psychological outcomes. Our framework begins to theorize social support as dynamic structural, perceived, and received resources that can change before, during, and after evacuation and conditions, in turn, evacuation-related outcomes.

By integrating these strands, our review begins to shift theory from viewing social support as either an individual coping resource or a logistical determinant toward understanding it as embedded in sociotechnical systems that shape the availability, perception, and mobilization of social support in communities. This integration is particularly salient for ISCRAM research, where ICT like social media, decision-support systems, and simulation tools are advanced to evacuation management.

Implications for Information Systems Research

This SLR yields actionable implications for designing IS to strengthen social support during evacuations. Drawing on Heaney and Israel (2008), we organize these around three approaches: enhancing existing networks, developing new networks, and building community capacity.

Enhancing Existing Network Ties

ISCRAM scholarship, particularly research on social media use during evacuations, has largely emphasized large-scale information diffusion, collective sensemaking, and coordination among strangers or relatively loose social ties. While this work illuminates how crowds share warnings and situational updates, it pays less attention to the personal networks of family and friends that households actually rely on for shelter, transportation, and coping. Our review highlights the need for IS interventions that deliberately strengthen these trusted ties, whether through social media features or bespoke tools not tied to public platforms.

IS interventions can enhance existing network ties by improving the visibility and mobilization of support among already-connected individuals. Our framework distinguishes structural capacity, perceived availability, and mobilized assistance of social networks—dimensions rarely distinguished and addressed in IS research. Rather than enabling only ad hoc communication, systems can, for instance, help households identify who has housing outside evacuation zones or access to transportation, make these capacities visible so support is perceived in advance, and help activate networks to deliver emotional, informational, and instrumental aid when evacuation occurs. Consistent with this focus on trusted ties, individuals are more willing to share crisis information when it originates from relatives and friends than from government or media sources (Chauhan, 2026). Designing these personal networks strengthens capacities for resilience before, during, and after evacuations.

Developing New Social Network Linkages

A second intervention strategy involves designing IS to identify households lacking structural and perceived support before evacuation and proactively connect them to formal assistance. While prior ISCRAM research has documented social media-enabled coordination and the emergence of ad hoc online communities during disasters (e.g., Chauhan & Hughes, 2018), our review highlights a gap in systems that detect socially isolated individuals and link them to transportation, shelter, health agencies, and NGOs. The reviewed studies consistently show that smaller networks and lower perceived support are associated with poorer outcomes, yet few examine mechanisms for addressing these deficits in advance of displacement. IS tools—such as registration systems, digital check-ins, and targeted outreach informed by demographic indicators (e.g., age, marital status, caregiver availability)—could flag risk of isolation and direct individuals to evacuation transportation and accommodation resources. Notably, only one reviewed study evaluated a system explicitly designed to foster new supportive connections: Heinz et al. (2022) found that a mobile app increased perceived peer support among adolescents during wildfire evacuations. However, this intervention focused on emotional and informational peer connection rather than systematically identifying socially isolated households or integrating them into formal evacuation infrastructures.

Community Infrastructure and Capacity Building

Finally, beyond supporting individuals and households, IS interventions can strengthen community-level capacity by improving cross-sector coordination and participatory problem solving. During and following evacuations, effective response and recovery depends on information sharing between emergency management and health agencies; yet weak inter-organizational relationships, fragmented information systems, and limited interoperability can undermine situational awareness and coordinated action (Abbas & Miller, 2025). Strengthening this institutional infrastructure is thus central to addressing the short and long-term health impacts observed in the reviewed studies.

Building on this sociotechnical systems perspective, our review also highlights the opportunity to embed social support into evacuation simulations, enabling decision-makers to anticipate how policies and infrastructure interact with community support structures to shape behavioral and health outcomes across varying displacement durations. Most existing models emphasize infrastructure and movement while omitting structural features of social support that influence decision-making, even though households coordinate destinations, share transportation, and delay departure to assist others. IS can operationalize structural support—such as network size and geographic dispersion of ties (Grace et al., 2024a, 2025)—as inputs to predictive and agent-based models. As incorporating realistic human behavior into crisis simulations remains a challenge (Coates et al., 2024), translating empirical findings on social support into behavioral parameters offers a concrete path forward. Such models can better inform evacuation planning (Lindell et al., 2019) by aligning transportation strategies with communities' social support infrastructures.

CONCLUSION

This systematic review synthesizes 31 empirical studies (2005–2024) to examine how social support is conceptualized and operationalized in disaster evacuation research. We show that structural, perceived, and received support—across emotional, informational, and instrumental forms—shape behavioral and psychological outcomes across evacuation phases. The integrated framework provides a foundation for IS research to design and evaluate technologies that anticipate these effects and support evacuees in accessing network-based and formal assistance.

This contribution should be interpreted considering several limitations. The review relies only on Scopus, which may omit relevant studies indexed elsewhere. Future work will expand coverage to include databases such as Web of Science. Additionally, further research should explicitly conceptualize the relationship between social support and social capital, as these constructs offer complementary insight into the forms and sources of assistance and evacuees' capacity to access and mobilize such resources.

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