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The results of a case study will be presented. 20 interviews were conducted with experts from the field of disaster control, city administrations and social services in Germany. The main research focus was the question of who became vulnerable during the pandemic and why (see also Wisner et al. 2004). The experience of the experts, especially from the decentralized support structures, and the extent to which they were prepared for the pandemic will be discussed. It showed how important support structures were and are for many people and especially for vulnerable people. Discussed is to what extent social diversity is considered in the measures of crises management and how vulnerability is contextual and what the influencing factors are. It will be shown how the non-consideration of decentralized support infrastructure worsens the living situation of vulnerable people. Decentralized support infrastructure has an increased workload during the pandemic and is confronted with new tasks in the context of e.g. hygiene regulations and physical distancing. At the same time, the people who need the support are under increased pressure. These pressures are, on the one hand, the pandemic and the containment measures that accompany it and, on the other hand, difficulties that arise when they are not included in the measures (e.g., communication difficulties for people who read lips due to the wearing of masks). A key gap in care emerged regarding psychosocial care during the pandemic. This was already inadequate beforehand and became even worse during the crisis. Little attention was paid to the psychosocial care of the population during the pandemic. During the COVID-19 pandemic, stress and symptoms of mental illness increased while treatment options were overcrowded and could hardly accept new patients. At the same time, mental health care is not perceived as a disaster management responsibility. Most importantly, there is a large gap between the day-to-day decentralized support infrastructure and disaster management in Germany. Through increased communication and cooperation between the two, better basic care for the population can be ensured even during crises.

Wisner, B., Blaikie, P. Cannon, T., & Davis, I. (2004). *At risk: Natural hazards, people's vulnerability and disasters* (2. Ed.). Routledge

Caring about and Care in Disasters: On Privileges, Marginalisation and the Making of Critical (Social) Infrastructure Protection