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**THE TEXTURE OF LOCAL DISASTER RESPONSE:
SERVICE PROVIDERS' VIEWS FOLLOWING HURRICANE KATRINA***

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ABSTRACT

Disasters highlight elements of community vulnerability and resiliency. Effective responses are organized and managed to provide goods and services to survivors while also being supportive of the organizations attempting to meet these needs. Collaboration among local service providers, such as nonprofit, faith-based, and governmental organizations, allows communities to build upon internal and external networks and resources to prepare for and respond to disasters. Using a livelihoods framework, we analyze 139 qualitative field interviews conducted in the Mississippi Gulf Coast and Southeast Louisiana, to learn from the experiences, needs, and recommendations of people working on the front lines of disaster in response to Hurricane Katrina. Narrative information from service providers will help inform sociologists, organizations, and policymakers about the views of practitioners serving as intermediaries between people's everyday lives and broader structures and processes influenced by crisis events.

Introduction

In 2005 Hurricane Katrina and its aftermath wreaked havoc across the Mississippi Gulf Coast, Southeast Louisiana, and the southern region of the United States. As with many disasters, social and economic inequalities were highlighted while numerous efforts were aimed at helping individuals, families, and communities survive and recover.

Beyond providing an opportunity for celebration of people's willingness to help each other and consciousness-raising about the deep divisions which persist in our society, the aftermath of a hurricane provides an avenue for research with practical application. Through social assessment we learn from disaster and thus can better plan for, respond to, and even rebound from crises in the future. Our assessment

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presented in this article involves an interpretation of the experiences described by our “real world teachers” and requires the amplification of the voices of service providers in order that they be heard and responded to collectively.

While assisting individuals and organizations working in the aftermath of this disaster, we have formulated this analysis as a strategy for informing policymakers, agency personnel, and foundations to better support on-the-ground relief, recovery, and redevelopment efforts. Furthermore, it is anticipated that this analysis will help those who study the sociology of disaster, community development, and public health by providing insights drawn from the field that reflect and encourage efforts to achieve greater community resiliency through coordinated organizational disaster planning and response mechanisms.

Disasters, Response and the Livelihoods Framework

Previous disaster studies are illustrative regarding the ramifications of disaster as they relate to the varying impacts on and needs of populations and the assortment of potential and actual responses. Of course, all disasters are not the same, but there are commonalities. Gill and Ritchie (2005) maintain that disasters fall along a continuum from natural to technological, with both types having distinguishing (responsibility, predictability, and certainty of impacts) and overlapping characteristics. Furthermore, Burkle (2006) argues that it is often difficult to differentiate between natural, technological, and complex humanitarian disasters in cases where there is limited state capacity to provide an effective response. This is important because much of what separates different types of disasters is not only their causes but also the various responses to them by the public and the state (see, for example: Erikson 1994; Picou, Gill and Cohen 1999; Picou, Marshall and Gill 2004).

Existing research demonstrates that disaster-induced changes in social interaction and geographic location affect individual and community identities and the politics of interpersonal, community, and intercultural relations. Sudden social and economic change in a community instigated by disaster can be profoundly traumatic (Erikson 1994), with impacts on survivors and their responses varying by race, class, and other socioeconomic characteristics (Elliot and Pais 2006). An issue that quickly emerged after the 1994 Northridge earthquake in California was the widespread need to repair or replace damaged housing and business districts, reflecting the scope of people’s dependence on the built environment for support of their daily activities (Bolin and Stanford 1998). In a review of anthropological evidence, Oliver-Smith (1996) notes that population relocation or resettlement is

a common strategy of post-disaster recovery and reconstruction. This movement of people can increase stress for disaster survivors and for people living in the areas to which they relocate. Ritchie and Gill (2007) shed light on the mediating role played by social capital in how individuals and communities are affected and respond to disasters.

The social science of development literature may also be used to inform disaster research. This connection has been explored by analysts including Blaikie et al. (1994), and it is being expanded through growing concern over the concepts of vulnerability and resiliency. Of major interest in literature focused on the development-disaster intersection are the threats to livelihood systems posed by both short-term shocks and long-term stresses. Access to or exclusion from socioeconomic resources shapes one's capability to handle shocks and stresses through avoidance, adaptation, and/or the construction of alternatives (see: Bebbington 1999; DeHaan 2000; DeWaal 2005). Institutions and organizations mediate people's access to the assets necessary for coping with change (DeHaan and Zoomers 2005). Natural, technological and humanitarian disasters present a variety of challenges to people's livelihoods in the social, cultural, economic, and ecological spheres. Individuals and groups susceptible to the problems of disaster because of their socioeconomic and geographic position are generally classified as vulnerable (Bolin and Stanford 1998; Cannon 1994; Morrow 1999). On the other end of the continuum, people and their communities are considered resilient when they have access to the resources needed to prevent or respond effectively to a crisis situation. In a context of resiliency, disaster events are anticipated, planned for, and met with a variety of proactive responses individually and collectively (Cannon 1994; Cutter et al. 2006; Morrow 1999). Resilience is often predicated on diverse informal groups and formal organizations coming together to collectively face challenges to livelihood systems.

In all, people need access to the assets that provide them with the capacity to respond to disaster or the threat of disaster. Assets include those in the environmental/natural, physical/built, human, social, and financial realms. Limited access to these assets results in greater vulnerability to changes, many of which may be out of the individual household's or community's direct control. When problems do arise because of limited resources in the face of a crisis situation, people often put demands on the state to respond. If the state fails to act, or has little capacity given the breadth and/or depth of the situation, collective action might also take place through civil society, including nonprofit organizations and grassroots networks. A hybrid state-civil society and conflict-cooperation response

is then likely to develop. Across organization types, when they have the capacity to act and provide assistance to help people meet their needs, these groups serve as assets to people's livelihood systems.

Viewed through the livelihoods framework, exploration of the insights of people and organizations responding to the shocks and stresses found in the aftermath of disaster is critical if we are to inform relief and recovery efforts and plan for the future. Questions worthy of attention concern what successes, challenges, and recommendations these social actors have to offer on how best to serve people in times of need. One of the many ways of answering this is to analyze their perceptions and interpretations of their lived experiences working on the front lines. We argue that this study of organizational capabilities to respond to people's needs following a disaster more clearly defines the short-term shocks and long-term stresses that must be considered when public, private, and nonprofit organizations develop disaster planning and response mechanisms.

Methods

The project from which this article was developed is part of a larger effort designed to document the needs, interests, and recommendations of people impacted by Hurricane Katrina. It involved the use of multiple research methods, including qualitative and quantitative data collection and analysis. Specifically, the researchers conducted: observation of relief and recovery efforts; an in-take/needs assessment survey with community residents and others seeking assistance in East Biloxi, Mississippi; and field interviews with residents and service providers in affected communities. Qualitative key-informant interviews were conducted in two subregions of the Gulf South: the Mississippi Gulf Coast and Southeast Louisiana. Each of these locations experienced the disaster in somewhat different ways. The Gulf Coast felt the direct impact of Hurricane Katrina and suffered major physical damage. Southeast Louisiana faced physical damage and a massive influx of evacuees from the greater New Orleans area to the northern parishes of this region. The primary focus in this article is analysis of the qualitative data obtained through 139 key-informant interviews conducted with service providers. Convenience and snowball sampling techniques were utilized whereby paid staff and volunteers working with nonprofit, faith-based nonprofit, and government organizations were contacted and asked to participate in the project. Researchers prepared a one-page written description of the project and disseminated it through face-to-face visits with organizations providing services throughout the region. At the conclusion of many interviews, participants were asked to recommend others who would be

willing to participate in the project. Interviewers had some difficulty locating the identified service providers since most agencies were in temporary facilities. In the end, 89 interviews were conducted from February through March 2006 (six months after Hurricane Katrina made landfall) along the Mississippi Gulf Coast in towns from East Biloxi to Waveland by faculty, staff, and graduate students in the Delta State University Division of Social Sciences Community Development Program and the University of Michigan School of Public Health, Office of Public Health Practice (see: Table 1 and Figure 1). An additional 50 service providers were interviewed in Tangipahoa Parish, Louisiana by graduate students in the Southeastern Louisiana University Department of Sociology and Criminal Justice.

Table 1. SERVICE PROVIDERS INTERVIEWED BY LOCATION AND ORGANIZATIONAL TYPE

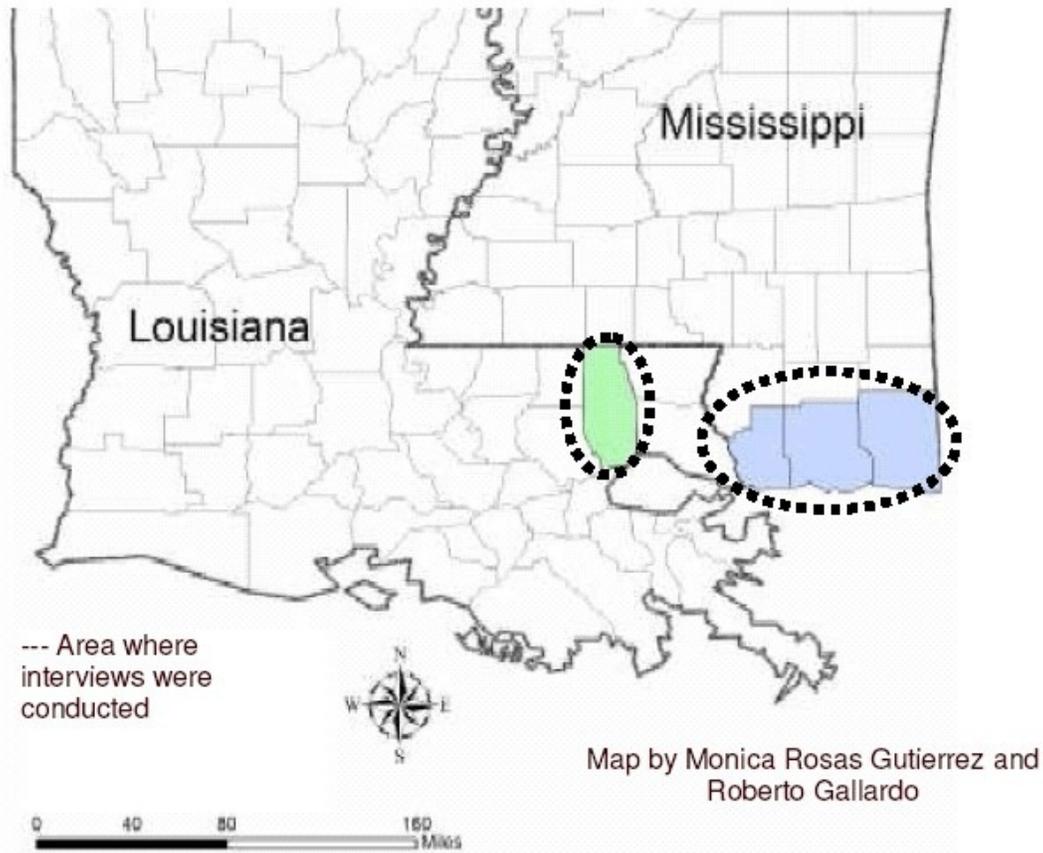
LOCATION	NONPROFIT	FAITH-BASED NONPROFIT	GOVT*	FOR PROFIT & OTHER	TOTAL
Mississippi Gulf Coast**	37	36	13	3	89
Southeast Louisiana.	25	9	16	0	50
Total.	62	45	29	3	139

*Public schools, colleges, and universities are classified as government organizations.

**The 89 interviews represent 61 organizations. More than one person was interviewed in 16 organizations.

A similar questionnaire was utilized for all interviews. Consisting of items focused on demographic and organizational characteristics of respondents, there were an additional twenty open-ended questions regarding services provided through their organizations, successes and challenges faced in providing services, and recommendations for the future. All interviewers were trained to administer the specific study instrument after being educated on qualitative research techniques. Interviewers asked the questions, recorded responses in writing and, in some cases, audio recorded responses when permitted by the respondents. The interviewers later revised their notes for greater accuracy, detail, and clarity. Partial transcripts were consulted for making direct quotations in this article.

Figure 1. LOCATION OF INTERVIEWS WITH SERVICE PROVIDERS (N = 139).



Qualitative analysis of the responses consisted of a team of researchers reading through the notes and coding them by theme. The themes and sub-codes were revised to account for new issues emerging from the data. For this article, results are presented as separate narratives for each of the two distinct study locations. Where applicable, we highlight patterns in the data by organizational type.

Results

Mississippi Gulf Coast

Services provided. Analysis concerning the services that organizations offered along the Mississippi Gulf Coast yielded a variety of categories (Table 2), including basic rescue and public safety services provided by the police and fire departments. Provision of food and water was also a major focus. Early in the relief efforts, food was primarily provided through distribution of “meals ready to eat” (MREs) by the military and large-scale relief agencies. This was followed by soup kitchens and food pantries operated primarily by nonprofit and faith-based organizations.

Clothing, personal hygiene, and general household items were also collected and distributed. Some items were offered indirectly through financial resources from relief agencies via cash assistance and retail gift cards (e.g., Wal-Mart, grocery stores). Housing was provided through a variety of avenues – emergency shelters, tents and eventually Federal Emergency Management Agency (FEMA) trailers.

Table 2. PRIMARY SERVICES PROVIDED BY RESPONDENTS' ORGANIZATIONS

MISSISSIPPI GULF COAST	SOUTHEAST LOUISIANA
Rescue and public safety	Public safety
Food and water	Food
Clothing, personal and household items	Emergency shelter and transitional housing
Financial assistance (cash and gift cards)	Utility assistance
Emergency shelter and transitional housing	Health care and counseling services
Cleaning and debris removal	Advocacy and legal services
Repair of damaged homes	Employment assistance
Health care and counseling services	
Advocacy and legal services	
Language translation	

The cleaning of people's homes was another common service provided, especially by those affiliated with nonprofit and faith-based organizations. This involved removal of furniture, appliances, and other items from houses and apartments, "gutting" them of drywall and insulation, and treating mold. Debris removal was important following house cleaning and the clearing of trees and branches that had fallen on homes and in the streets.

Health care was provided by some of the organizations, including nonprofit and faith-based organizations and government agencies. For the most part, respondents indicated they provided basic primary care, especially treatment for head colds, ear aches, and respiratory symptoms. A small number of groups provided specialty services including dental and vision care, and grief/stress counseling.

Given the wide variety of people's needs and the numerous organizations involved in providing services, case management and referral services were critical. Unfortunately, few groups were able to direct specific attention to this arena.

THE TEXTURE OF LOCAL DISASTER RESPONSE

35

Additionally, some groups engaged in advocating for services for the people impacted by the hurricanes, such as those living in poor neighborhoods, children, elderly, and minority racial/ethnic groups. Other services provided were language translation (English, Spanish and Vietnamese), education, and opportunities for recreation, with the latter two services tailored for children.

Experiences – successes and challenges. Provision of material needs was frequently mentioned as a success. These included the quantity of supplies provided, the number of meals served, and how much money was obtained and redistributed in the communities. Others described more personalized successes like “giving people a full belly.” Some interviewees spoke of successes providing services and volunteering to accomplish tasks; they described their success in material form and the time and the sacrifice they made in leaving their families and jobs to help others. There was a general sense of success expressed in terms of the number of volunteers recruited to the area.

Several participants spoke of nonmaterial successes such as providing hope, helping people to feel protected, and letting them know that somebody cares. They also viewed their work as positive in terms of keeping people company and listening to them whenever they needed someone with whom to talk. Volunteers from faith-based organizations mentioned providing spiritual guidance.

Interview participants also identified several challenges faced in providing services in the wake of the hurricane. First and foremost was the overwhelming nature of the disaster; this was mentioned by people working with nonprofits, faith-based groups, and government agencies alike. There was so much need for assistance, interviewees pointed out, but there were simply too few resources. In particular, financial resources were in short supply. For instance, there was an inadequate supply of the equipment and supplies needed for debris removal and construction assistance.

The extent of the destruction was most apparent in terms of housing. There was a severe lack of emergency shelter and more moderate- and long-term housing. Several organizations were working on housing, but the demand was incredibly high given the level of destruction. An interviewee noted that, “We see people every day begging for places to stay.” Also troubling was the fact that many people had “no place to shower if they live in tents or on the street. There’s no place to wash their clothes.”

Although the number and level of commitment of volunteers who came to the region to work was considered an asset, the coordination and management of these volunteers posed a challenge. Churches and colleges/universities were able to

organize and bring in large groups of volunteers whose work proved vital. However, helping volunteers secure lodging, obtain food, and manage projects was difficult. With the shortage of supplies, they had to balance the need for volunteers with the use of resources in an efficient and effective manner. Another challenge mentioned by some participants was the limited number of skilled volunteers – doctors, nurses, electricians, plumbers, carpenters, and contractors.

A challenge repeatedly mentioned by people working among a variety of organizational types was the bureaucracy they confronted in providing services, mainly demolition and construction. They had to apply for and follow-up on permits with the city and county governments. To obtain resources, they had to manage the complex systems established by FEMA and the Red Cross. Some of the service providers felt that they were not helping people as much as they had originally expected. They stated that it takes too much time to get permits for work to be done, and there is too much red tape, thereby impeding the speed at which work may be started and completed. Also, they reported feeling a lack of supportive attention from government agencies.

Respondents mentioned additional problems resulting from the storm. The physical and organizational infrastructures of the health care system were severely damaged. Buildings were destroyed; equipment, supplies, and records were lost; health care providers were displaced; an adequate supply of medication was not available. Few specialty health services could be provided, particularly surgery, disease screening, disease management, and counseling. As one respondent said, the “most acute unmet need is the lack of certain subspecialties.”

The communication infrastructure was damaged during the hurricane, and it took time to restore telephone and television systems. This caused problems for many agencies in their ability to get information to the public. Additionally, service providers identified interpersonal communications challenges such as the language barrier, primarily between English, Spanish, and Vietnamese speakers. The populations in the affected communities were diverse, and despite efforts to provide translation services, needs surpassed the supply of translators and translated materials.

Although providing hope to people was considered a success, there was still recognition of a sense of powerlessness and hopelessness in the wake of the disaster. People from some organizations felt that they were not able to help as much as they wanted, they could not provide the services that people requested, nor did they have a way to guide people through the process of accessing various services.

THE TEXTURE OF LOCAL DISASTER RESPONSE

37

Recommendations. As part of each interview, service providers were asked for their recommendations on how to assist in disaster relief, recovery, and redevelopment. Through the process of examining notes for recommendations from the service providers, a few major themes were identified, including short- and moderate-term issues. Short-term recommendations focused on how to improve conditions “on the ground.” There were few of these expressed, but those who did address these issues brought up a need for more rapid response by rescue operations and an increased supply of food, shelter, FEMA trailers for people who still live in tents or at emergency sites, and other basic services. Problems like basic infrastructure repair, such as roads and medical facilities, were also identified.

As for more moderate-term recommendations, participants expressed a desire to get survivors in permanent homes and help them get their lives back together. They called for greater psychosocial support to deal with feelings of being overwhelmed, stressed, and depressed, especially those who experienced the loss of a family member, close friend, or neighbor. A continuing need for financial guidance and access to resources was also mentioned.

Participants were asked to make recommendations to assist other organizations providing services in the wake of disaster. A common answer provided primarily by interviewees from nonprofit and faith-based organizations was that relief groups should not rely exclusively on help from the government. They argued that these groups should be prepared to confront disasters on their own, at least in the short term, and they emphasized the importance of having a disaster plan in place. Additionally, they recommended assisting people regardless of socioeconomic status, and they emphasized the importance of being generous and getting involved in a variety of activities rather than being narrowly focused. Interviewees called for cooperation, pulling together, defining resources and tasks, sharing resources, and not having just one person in control of every task within any one organization. They said organizations should be flexible and learn from their own and others’ experiences. As one person stated, it is critical to “act as opposed to react.”

When questioned about recommendations specifically targeted toward policymakers and government agencies, several respondents declined to answer, while others claimed that relief and recovery efforts had gone well under the dramatic circumstances. Some participants provided a wealth of recommendations. For example, they argued that private and government-based flood and hurricane insurance policies should provide better coverage than they did following Hurricane Katrina. Respondents stated that it should not matter whether damage was caused by flooding or wind-driven rain.

Some interviewees stated that the government—including policymakers and agencies—needs to respond in a more proactive, efficient, and effective manner. This includes federal and state agencies having disaster plans in place and utilizing these plans as the basis for disaster preparation and response. According to respondents, government action should also involve more funding for nonprofit and faith-based organizations providing services at the local and regional levels.

Southeast Louisiana

Services provided. Hurricane Katrina sent heavy rains and strong winds through Southeast Louisiana. Furthermore, the area came to host thousands of evacuees from more severely impacted areas such as New Orleans. Some of these evacuees stayed for a short time, while others remained for a longer time period or made the area their new home. A variety of services in Tangipahoa Parish, where interviews were conducted, were provided in response to Hurricane Katrina (Table 2). The service organizations represented through the interviews included those providing help to children, families, and animals via food and other personal provisions as well as housing, utilities, legal services, healthcare and counseling, and employment assistance. A variety of government-related services were also provided by these interviewees, including public safety and judicial services, education, and health care.

Experiences—successes and challenges. Respondents were generally impressed with the extent of care and generosity offered by many organizations and individuals from both within the region and outside the area. Concerted efforts were made to assist people with an array of needs. As one respondent noted, “We were blessed with donations and we had to get rid of a lot of it, so we gave with no questions asked.” Some organizations were able to obtain additional grant monies to expand services as needs emerged. Teamwork within and between organizations was recognized as a means of effectively responding to people’s needs. Although many of the area’s service sector businesses were short-staffed after the storm and began offering incentives to attract new employees, the increased availability of jobs in the area was viewed as a positive outcome.

This disaster served as a valuable learning experience in regard to the coordination of services in Southeast Louisiana. It revealed both internal and external organizational weaknesses that hindered disaster response. Individual organizations discovered that they needed a disaster plan for their own service delivery efforts and needed to be aware of how other organizations planned their

THE TEXTURE OF LOCAL DISASTER RESPONSE

39

disaster response. Very few of the organizations in this study had existing emergency plans for dealing with a disaster, especially one of this type and magnitude, nor did they have the capacity to coordinate response with other agencies.

There were several common challenges identified by service providers. Many organizations experienced cuts in government funding since the hurricane, and the competition for supplemental funding simultaneously increased. Respondents cited an overall lack of resources (e.g., money, staff, access to housing, basic supplies) that resulted in their inability to meet people's needs. As one of the respondents pointed out,

“You have people who have worked all of their lives, we see it all of the time, who have lost everything, who had homeowners' insurance, but their house was washed away due to a flood, so they say, because the levees broke. They did not have flood insurance and they're now trying to start over and are responsible for a mortgage note because nobody's covering it. And it is really very disheartening because the needs are overwhelming.”

Attempting to meet the needs of people impacted by disaster, both from within and from outside of the community, resulted in increased case loads for these organizations. Service providers from New Orleans were also displaced and in need of office space where they could continue operations. They were challenged with locating their regular clients who had been displaced throughout the country.

When volunteers from outside the region arrived to help service providers, many organizations did not know how to use them, let alone how to refer them to another organization where they could be more efficiently utilized. Several respondents mentioned a lack of local volunteers being available to assist with a variety of tasks, partly due to these local volunteers spending time addressing the impact of the storm on their own personal lives. There were local residents who housed, fed, and assisted displaced family members and friends after the hurricane for several weeks and even months. This not only increased the general population of Tangipahoa Parish and the cumulative demand for public, nonprofit, and private sector services, but it also increased the level of stress and uncertainty experienced by residents already living in the parish. Mental stress accompanying the trauma experienced by displaced residents increased the demand for mental health services. However, the necessary level of services to meet this demand was not readily accessible.

Available and affordable housing quickly disappeared with increased demand for short- and long-term shelter. Displaced residents, as well as government and business sector contractors, occupied the vast majority of hotel/motel rooms, apartments, and other dwellings in the area. The rent and purchase prices of dwellings increased with the high level of demand. Respondents indicated that churches seemed to be more proactive than other organizations when assisting people with locating temporary housing. Housing availability and affordability had not notably improved six months after the storm at the time when these interviews were conducted. Habitat for Humanity did increase its building projects in the region since the hurricane, although a shortage of volunteers to help with construction continued. Many displaced residents decided to permanently settle in Tangipahoa Parish, straining available resources in the area now labeled as the post-Katrina "high growth" corridor of Louisiana. One respondent noted, "The traffic and numbers of people that now live here, and our world, has changed and will never be the same."

Interviewees noted that transportation remains a critical need for a variety of people seeking assistance. While there are a few private taxi services in Tangipahoa, there are no public bus systems and only a limited number of vans used for transporting the elderly. A respondent stated, "I wish we had a bus system in this area; people miss appointments because they cannot get here."

Recommendations. Improved communication between organizations was recommended by a number of service providers interviewed in Tangipahoa Parish, as a way to more successfully respond to a disaster. This included improving the ability to communicate immediately after a disaster when utilities and other services are not working, as well as communicating between organizations in an effort to more efficiently coordinate disaster response. Increased funding, manpower, and equipment for organizations would facilitate this effort, as well as a written organizational directory to enhance inter-agency coordination. An ongoing effort to increase networking and collaboration between organizations could also result in more successful agency referrals following a disaster. Several organizations felt ill-prepared to handle the demands imposed on them after the storm. They stated that improved agency coordination and governmental support, with less "red tape," may have helped them overcome their own feelings of helplessness and despair.

Representatives from several organizations noted that the effects of this disaster were intensified by a lack of communication between different levels of government. This led to resentment expressed toward government officials by nonprofit organizations and the general public. Service providers recommended that the

disaster planning process allow nonprofit organizations and other agencies to participate in planning efforts before a disaster occurs, thereby increasing their level of preparedness and their ability to communicate with each other. In addition, organizations would like to have the ability to “break policy” if a particular scenario does not allow them to provide the services that people need. In some respects, nonprofit and faith-based organizations may have responded more effectively to this disaster than government agencies because they were not encumbered by the bureaucracy of state or federal policy procedures.

Discussion – Learning from the Field

This research focused on documenting the experiences, successes, and challenges faced in providing disaster assistance from the perspective of those people actually working on the front lines, thus augmenting and expanding upon existing research on disaster relief, recovery, and redevelopment (see: Bolin and Stanford 1998; Brennan, Flint, and Barnett 2005; Comfort et al. 2001; Morrow and Enarson 1996). The goal was to use the narratives provided by service providers’ experiences to inform collective action to move the communities where they work from vulnerability closer to resiliency. Combined, the service providers’ voices offer a series of insights and recommendations that nongovernmental organizations, funders, government agencies, and policymakers would do well to consider as they evaluate past crisis events and develop strategies to enhance future responses to disasters that minimize suffering.

Hurricane Katrina imposed both short-term shocks and long-term stresses on people’s livelihoods. In a matter of hours, individuals, families, and their communities were largely dispossessed. It will take time and collective efforts to rebuild physical, economic, and social infrastructures, especially in light of exposed vulnerabilities across race and social classes. All the while, future disasters pose a continuous threat. Integrating results drawn from this study of service providers and interpreting them through the livelihoods framework, there are some notable insights and lessons learned from responses to Hurricane Katrina. They include:

- The magnitude of Hurricane Katrina and its aftermath was simply overwhelming. Local livelihood assets were outweighed by the shocks and stresses of the disaster. The destruction was so great and people’s needs so extensive that they far outweighed the response capacity of both local and outside state and nongovernmental actors.
- Many of the nonprofit and faith-based organizations that responded to the hurricane did not have disaster relief or recovery as a primary part of their

mission. Still, they mobilized already limited resources in a dire situation to help meet human needs. The level of generosity and volume of response by a wide variety of individuals and organizations was extensive. These organizations worked to augment existing assets and serve residents in responding to the problems at hand.

- The influx of volunteers from outside of the area directly impacted by Hurricane Katrina was of critical importance. However, feeding, housing, and managing these volunteers compounded the already overwhelming resource and logistical problems.
- Limited communication and coordination among service providers and resource organizations prior to the hurricane along with severely restricted communication channels in its aftermath led to many shortages and inefficiencies in efforts to help people in need.
- Communication between service providers and many of the survivors was severely hampered because of language barriers. Given the diversity of the population prior to the hurricane, this could have been anticipated.
- Intra- and inter-organizational flexibility might prove helpful for an efficient and coordinated response that builds from the strengths of the partner organizations and fills in gaps in services between them.

It is critical to note that nonprofit and faith-based organizations have an important role to play in planning for and responding to disasters. To reach their full potential, however, they must be able to access financial, physical, and human resources. This requires assistance from other nongovernmental organizations and governmental agencies. Overcoming many of the challenges discussed in this article will require funders and other resource providers to establish and maintain relationships with local groups before disaster strikes. In other words, networks must be developed and maintained as part of disaster planning. This would likely provide for a clearer, more timely and effective coordinated response in the future. As a concluding point, it is worth considering the role of social assessments such as the one presented in this article for informing disaster preparedness and response. Conducting social assessments (with attention toward assets *and* needs) and evaluating responses in a manner that incorporates community residents, service providers, and diverse organizations in the process allows for the generation of data and analysis applicable to providing direct services, advocating for the needs of the vulnerable, and planning for future crisis events. Although research is rarely viewed as a priority, it may prove fruitful. Such is the hope of this endeavor. For

example, we have partnered with several groups to distribute these research findings to local, regional, and national organizations and to policymakers. This was an initial step in sharing the views of service providers with those who are in a position to advocate for change in disaster preparedness and response. Additionally, several of these organizations are working together in a collaborative network to use research to inform their planning and expand collective action.

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