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USER JOURNAL TITLE:	Journal of Religion and Spirituality in Social Work
ARTICLE TITLE:	Spirituality and Faith-Based Interventions: Pathways to Disaster Resilience for African American Hurricane Katrina Survivors
ARTICLE AUTHOR:	Alaywiyah et al.
VOLUME:	30
ISSUE:	3
MONTH:	
YEAR:	2011
PAGES:	294-319
ISSN:	1542-6432
OCLC #:	

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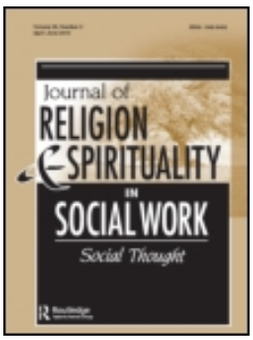

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Journal of Religion & Spirituality in Social Work: Social Thought

ISSN: 1542-6432 (Print) 1542-6440 (Online) Journal homepage: http://www.tandfonline.com/loi/wrsp20

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To cite this article: Tuti Alawiyah MHum , Holly Bell PhD , Loretta Pyles PhD & Ratonia C. Runnels LMSW (2011) Spirituality and Faith-Based Interventions: Pathways to Disaster Resilience for African American Hurricane Katrina Survivors, Journal of Religion & Spirituality in Social Work: Social Thought, 30:3, 294-319, DOI: 10.1080/15426432.2011.587388

To link to this article: http://dx.doi.org/10.1080/15426432.2011.587388

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ISSN: 1542-6432 print/1542-6440 online
DOI: 10.1080/15426432.2011.587388

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Spirituality and Faith-Based Interventions: Pathways to Disaster Resilience for African American Hurricane Katrina Survivors

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Research has shown that spirituality and religion are important sources of resilience and coping in adversity such as disasters, particularly for African Americans. In addition, churches and faith-based service providers are key actors in disaster relief and recovery. After Hurricane Katrina, research on survivors has focused little on the role of spirituality and religion in their recovery. This case study illustrates that even without soliciting it, survivors who evacuated to a host city talked about the importance of spirituality and religion in their recovery process. Further, interviews and observations with local service providers illustrate that few practitioners utilized spirituality or religion as a resource and that coordination between faith-based and secular service providers was problematic. Our research highlights a neglected area of cultural competence for those providing services to Katrina survivors. We discuss the implications for social work policy and practice.

KEYWORDS African Americans, disasters, faith-based organizations, Hurricane Katrina, resilience, spirituality

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When Hurricane Katrina hit New Orleans at the end of August 2005, between 50 and 100 thousand people struggled to survive, waiting for government help. They suffered through distressing experiences that included witnessing a massive flood, and losing their homes and loved ones. Finally, they were evacuated to cities across the United States. What followed was a long process of trying to get assistance from the Federal Emergency Management Agency (FEMA), resettling in host cities, and the anguished wait to return home. Many were separated from family and friends who would normally be important supports in times of crisis.

Many of these survivors were from African American communities of long-standing disadvantage, and the impact of the storm and evacuation multiplied pre-existing challenges of disability, underemployment, illiteracy, health problems, and housing discrimination (Fussell, n.d.). At the same time, in these and other African American communities, extensive social networks, faith in a higher power, an active spiritual practice, and a history of receiving support from the Church have provided many with the ability to cope. The role that churches, faith-based organizations, and spiritually-informed practice have played in disasters, including Hurricane Katrina, represents a burgeoning area of the literature on disasters (De Vita et al., 2008; Joshi, 2010; Koenig, 2006; Massey, 2006; Trader-Leigh, 2008). For example, six weeks after Hurricane Katrina in October 2005, of the 26,138 individuals who were in emergency shelters in Louisiana, 52% were housed by the Red Cross, 26% were housed by nonprofits, private entities or parish (county) governments, and 22% were housed by churches and faith-based organizations (Pipa, 2006). Even though churches play a central role in disaster recovery, they, especially African American churches, have been largely excluded from disaster planning and prevention efforts (Trader-Leigh, 2008). Thus, churches and faith-based organizations represent a critical dimension of disaster relief and recovery that deserves further exploration.

This article is part of a larger qualitative study that focused on the complementary roles of the state (governmental organizations) and civil society (nongovernmental organizations, including faith-based and secular-for-profit and not-for-profit organizations, as well as informal organizations), in assisting Hurricane Katrina survivors evacuated to a large southern city. It focuses on perspectives that African American survivors offered on the role of spirituality and religious practices in their recovery. We compare these perspectives with those of local service providers, and consider how these professionals and volunteers from faith-based and secular organizations talked about religion and spirituality, the challenges involved in coordinating services, and how they attempted to incorporate spirituality and religion into services for survivors. The findings raise important issues about spirituality and religion as aspects of cultural competence for social workers and how social workers can interact with faith-based organizations in disaster recovery.

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SPIRITUALITY, RELIGION, AND RESILIENCE IN AFRICAN AMERICAN COMMUNITIES

Spirituality, faith, and religious belief have been identified as vital coping mechanisms that can enhance resilience for survivors of adversity (Banerjee & Pyles, 2004; Greene, 2002). Canda and Furman (1999) defined spirituality as "a universal and fundamental aspect of what it is to be human," (p. 37) including the search for meaning and purpose in life, a moral framework, and ultimate reality. They noted the distinctiveness of spirituality from the institutional traditions and community associated with the term "religion." At the same time, research has illustrated the difficulty of separating spirituality and religion in practice, as they often overlap (Banerjee & Pyles, 2004; Wood, 1999). For example, Watlington and Murphy (2006) used the terms religion and spirituality simultaneously, incorporating both substantive content (e.g., beliefs, practices, and feelings directed toward God) and the functional aspects of religion (e.g., a process focused on questions of ultimate meaning and concern). In their research on the roles of religion and spirituality among African American survivors of domestic violence, they assessed spirituality by measuring aspects of day-to-day spiritual experiences such as "feeling God's presence" or "feeling God's love . . . through others." Religious involvement was assessed by measuring the frequency of attendance in worship services, prayer, meditation, reading Holy Scriptures, and thoughts about God.

Resilience has been defined as "successful adaptation despite risk and adversity" (Masten, 1994, p. 3). Richardson (2002) has suggested that resilience has three aspects: qualities or *protective factors* that include self-efficacy, easygoing temperament, positive outlook, having a warm and caring relationship with parents, and having access to basic needs in a community (Greene & Conrad, 2002; Masten, 1994; Richardson, 2002); *coping strategies* (choosing consciously or unconsciously to reintegrate resiliently, reintegrate to the comfort zone or reintegrate with loss); and the *motivation* to reintegrate resiliently. Richardson (2002) has explained that when people choose to reintegrate resiliently, they need a motivational force (energy), for example, a higher power that drives them to make this reintegration.

Research has shown that faith and spirituality are important characteristics of resiliency that influence positive adaptation despite an exposure to some stressors (Greene & Conrad, 2002; Greene, Galambos, & Lee, 2003; Richardson, 2002) because of their transcendent, adaptive, and transformational values (Canda & Furman, 1999; Greene & Conrad, 2002; Richardson, 2002). Additionally, spirituality can impact resiliency through coping, inner peace, self-esteem, perseverance, and helping others (Banerjee & Pyles, 2004). Spirituality has also been shown to function as a framework of belief, as a motivator, as a coping strategy, and as a source of support from spiritual communities (Bell, Busch, & Fowler, 2005).

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Spirituality and religious participation are common coping strategies among African Americans (Watlington & Murphy, 2006). Afrocentric spirituality has been described as a life force that connects African Americans to the universe, nature, the ancestors, and the community (Schiele, 1994; Wheeler, Ampadu, & Wangari, 2002). Stewart (2004) argues that the Eurocentric emphasis on materialism and individualism has created a sense of spiritual and personal alienation for African Americans and separated them from the Afrocentric values of interdependence, collectivism, transformation, and spirituality (Gilbert, Harvey, & Belgrave, 2009). Recurrent oppressive and racist experiences, feelings of powerlessness, poor adaptation, poverty, and lack of resources are associated with stress, depression, and living in hostile and oppressive environments (Williams, 2008). The church has served as a therapeutic resource by providing a community that allows for articulating suffering, finding collective support, and providing an asylum to release frustrations and pain without judgment (Brome, Owens, Allen, & Vevaina, 2002) and has been identified as a source of empowerment and strength for many African Americans (Musgrave, Allen, & Allen, 2002).

THE ROLE OF SPIRITUALITY AND FAITH-BASED ORGANIZATIONS IN FOSTERING DISASTER RESILIENCE

Spirituality has also been shown to be a crucial source of resiliency in the face of natural and human-caused disasters (Koenig, 2006; Weiss, Saraceno, Saxena, & van Ommeren, 2003). Research after the 9/11 terrorist attacks revealed that most Americans employed spiritual and religious coping strategies and that these coping strategies were related to lower levels of anxiety and depression (Schuster et al., 2001; Trevino & Pargament, 2007). Religion helps people recover from disaster by providing: a positive world view; meaning and purpose; psychological integration; hope and motivation; personal empowerment; a sense of control; role models for suffering; guidance for decision making; answers to ultimate questions; and social support (Koenig, 2006).

Few studies have been conducted that concern spiritual coping in the aftermath of Hurricane Katrina. A qualitative study of ten older African American survivors displaced by the 2005 hurricane (Lawson & Thomas, 2007) found that survivors' experiences of continual communication with their higher power, belief in miracles, reading the Bible, and other devotional materials, and helping others all provided sources of resilience and healing.

Local churches and faith-based relief organizations provide direct services in times of disasters. International nongovernmental organizations (INGOs) such as the United Methodist Committee on Relief, Catholic Charities, and World Vision are all key faith-based organizations in disaster relief and recovery work nationally and internationally (Koenig, 2006).

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After Hurricane Katrina, faith-based organizations and churches played what appears to be an unprecedented role in disaster relief and recovery due to the magnitude of need, providing emergency aid, donations management, volunteer housing and coordination, case management, and direct human services (De Vita et al., 2008). Many of these groups were not just the typical INGOS, but were locally-based churches, including African American churches. One study noted that two thirds of faith-based community organizations (FBCOs) had no prior experience providing disaster relief (DeVita et al., 2008). This same study revealed that both secular nonprofits and faith-based groups rarely worked with state and local governments, but that secular nonprofits were twice as likely as faith-based groups to do so (23 percent versus 10 percent).

African American churches in particular played a critical role in relief and recovery from Hurricane Katrina (Trader-Leigh, 2008) including "mobilizing resources, providing direct services to survivors, brokering relationships with the larger disaster response community, and acting as moral agents and social justice advocates on behalf of Katrina and Rita evacuees" (p. 2). Trader-Leigh argued that African American churches have been virtually ignored in public policy disaster management circles, despite the fact that they play a crucial role to some of the most vulnerable people in disasters.

Despite this understanding of the importance of spirituality for resilience for African Americans and the significant role played by churches and FBCOs, considerable research on the impact of Katrina (see, e.g., Kaiser Family Foundation, 2008; Kim, Plumb, Gredig, Rankin, & Taylor, 2008) does not address spirituality or religion among survivors. One study (Chen, Keith, Airriess, Li, & Leong, 2007) did assess survivors' religiosity, but found that it did not contribute significantly to any of the health models, largely because all of the survivors identified themselves as religious.

In sum, spirituality and religious faith have been shown in prior research to be sources of resilience in adversity including disasters, particularly for African Americans. However, there is relatively little focus on spirituality or religion in research on the resilience of survivors of Hurricane Katrina, many of whom were African American. Although there is some research on the role that faith-based organizations and churches played in Katrina, there is little that combines survivor perspectives with service provider perspectives on spirituality and religion in that process. The question of what role secular service providers played in offering spiritually-grounded service delivery was also unknown and thus we sought to answer that question in this research. The present study explores the ways in which African American survivors of Hurricane Katrina talked about how spirituality and religion assisted them in adjusting to the aftermath of the evacuation and how local service providers, including social workers, did and did not support this resource for survivor clients.

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METHODOLOGY

This study draws from a larger qualitative study on the role of civil society and the state in disaster recovery. Focusing on the recovery process of Katrina survivors evacuated to a southern host city as the "case," we used a case study design (Stake, 1995) and drew on ethnographic methods such as in-depth interviewing, participant observation, and examining documents created in the setting (see, e.g., Wolcott, 2008). Many members of the research team worked with local agencies during the recovery efforts and began recruiting research respondents as they arrived at the local shelter and continued recruitment during the two-and-a-half years of the study. Seventy-three survivor respondents were recruited. Researchers attempted to maintain contact with survivors and conduct multiple interviews over the subsequent 2 years, despite the fact that the instability of survivors' lives made this challenging. Some survivors were interviewed for the first time late in the study period and provided an account of their experience since the evacuation in just one interview. The interviews were largely unstructured and began by asking about evacuation experiences, particularly receipt of assistance. Follow-up interviews focused on what had happened since the last interview. Respondents gave informed consent and were provided with protections of confidentiality; considerable care was taken in interviewing these vulnerable respondents. The university Institutional Review Board reviewed and approved this project. Survivors received a $25 gift card for each interview.

Researchers also followed the emergency response and long-term recovery in the host community (see also Bell, 2008; Lein, Angel, Bell & Beausoleil, 2009). Over 40 governmental, nongovernmental, and faith-based organizations provided emergency relief and long-term case management and other services to survivors. To collaborate their efforts, these service providers, who included government officials, social workers, pastors, case managers, and volunteers, met in community-wide case management meetings for over 2 years. Members of our research team interviewed 98 of these service providers and observed the case management meetings. Provider interviews focused on the respondent and his or her respective agency affiliation before the storm and how it changed as a result of providing services to survivors, as well as the impact on the provider. Most service providers were interviewed once; a few key informants were interviewed a second or third time about their organizations' changing roles in the recovery over time.

All interviews were digitally recorded and transcribed. Multiple interviews from both survivors and service providers were read by a team of coders that included the coprincipal investigator, project manager, research associate, and several graduate students. Together they developed a master list of codes that represented both in vivo and theoretically-driven topics

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(Patton, 2002). The code development process went through multiple iterations with multiple interviews. Once a relatively stable list of codes was established, a team of graduate students coded the individual documents. This project utilized N6, a qualitative data analysis software program, to manage the data (www.qsrinternational.com).

Data Analysis for the Current Study

Although it was not a primary focus of the overall study, spirituality was a topic that emerged spontaneously in many of the interviews with survivors. Drawing on prior research that highlighted the importance of spirituality as a critical coping mechanism for African Americans, we were interested in how the African American survivors (n = 52) would talk about how spirituality and religion impacted their recovery process. Further, as we observed the development of the local case management system, we were curious about how the primarily European American service providers would address these African American survivors' spiritual needs. Therefore, we conducted this analysis of interviews with the 52 African American survivors, and 98 service providers, as well as our field notes of observations of the case management meetings over a 2-year period.

As it was not a primary focus of the study, we do not have consistent or complete information from all respondents. If a respondent did not talk about spirituality or religion, we cannot say if this is because it was not important to him or her, or because it was not asked. Further, interviewers did not always follow up with questions about how spirituality or religion was important to the respondent. In only a few cases did we have information from survivors about how their religious or spiritual practice helped them make meaning of their Katrina experience. Further, we can only report on what we saw at community recovery meetings and what service providers told us about how they addressed survivors' spiritual and religious needs. Despite these limitations, we felt the spontaneous discussion of religion and spirituality by survivors and the response by service providers merited further study.

To conduct the analysis, we first focused on the specific code in the survivor data on "meaning/reflexivity," a code that included what survivors said about their faith and spirituality, their religious activities, how it helped or hindered their recovery, and how they understood the Katrina experience in the broader context of their lives. The first author read the coded information on the 52 African American survivors, as well as the corresponding field notes and the interviews for background. She also conducted text searches of related terms such as spiritual, religion, God, Lord, faith, pray, church, hope, moving on, and resilience to capture any additional references. She wrote memos (Saldana, 2009) and created a number of descriptive subcodes of the original "meaning/reflexivity" code as well as the additional retrieved

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material. Such codes included thanking God, praying, hoping, and finding a job. She then combined a number of these codes into categories, such as "relationship with God." Finally, after further reading and consulting with other members of the research team, she created the themes that became the findings for this paper. She went back and forth from the data to the themes and from the themes to the data until she was confident that the themes represented the best fit for the data. For a discussion of moving from descriptive codes to analytic themes, see Saldana (2009). Table 1 illustrates the codes, categories, and themes along with examples of coded material.

To analyze the provider data, the second author examined material coded in the larger study called "providers' perception of clients' faith," which included statements that providers made about survivors' spirituality, church attendance and other religious activities, as well as nonreligious beliefs, such as a higher power. She also conducted text searches of related terms such as spirituality, religion, faith, prayer, minister, preacher, and church and examined the retrieved text. Due to the small amount of data, she did not subcode the information. She organized the material by categories, going back and forth between the emerging categories and the data, ultimately collapsing and synthesizing the categories into the three themes that are included in the results (see Saldana, 2009). Table 2 gives examples of the originally coded data, and the emergent categories and themes.

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RESULTS

In the following sections, we present both survivor and service provider perspectives on spirituality and religion as a resource for disaster recovery. Our interviews suggest that although African American survivors talked about spirituality and religious practices as important in their recovery process, only a few local service providers utilized spirituality or religious practices as resources in supporting survivors' recovery.

Survivor Perspectives

Table 3 outlines the demographics of all the survivor respondents. They were predominantly female (44 people, 60%) and African American (52 people, 71%). Interviews revealed that employed survivors were generally employed in jobs that typically offered low wages, few benefits, and frequent turnover such as the food service industry, health care professions, cleaning businesses, clerical work, and manual labor. Forty-one percent were not in the labor force, including full-time students, disabled, and retired persons. For this analysis, we draw only on the interviews with African American survivors ($n = 52$).

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TABLE 1 Moving from Categories to Themes—Survivor Data

Subcodes	Example of coded material	Categories	Themes
Thanking God	". . . I wonder how did I go through that because it was horrible, you know. Thank God, I am alive, you know." (1029-01)	Relationship with God	Expression of Religion and Spirituality
God helping	". . . He's trying to help, He's helping me more and more. You know He's keeping me strong." (1027-03)		
Reassessing faith in God	"I felt like I lost my faith. I was like if there is God, why is he doing this to us." (1005-02)		
Finding meaning behind the disaster	"I see it [the hurricane] in the spiritual realm as a move of God, an act of God. So, I look it in a positive way. . . . it brought families closer together. It made us see what was more important." (1048-01)		
Praying and meditating	". . . during the time of the storm, all of us got together and we prayed together". (1034-01) "I meditate probably fifty times a day and every time I meditate of course I pray, it's like praying." (1023-03)	Religious and Spiritual Practices	
Reading the Bible	"The best thing I could do was read a Bible and that would be church for me." (1018-02)		
Attending church	"I was living there by myself, and very active in my church, . . . that's mostly what I did, you know." (1029-01).		
Getting adjusted	"I'm beginning to learn how to work with it now, get adjusted, after a year I guess, you know, life goes on. . . ." (1025-05)	Positive adaptation	Expression of Survivors' Resiliency
Moving on	". . . when you give up you die, and that's just the way I feel you know. If I give up, it will be over and I'm not gonna' give up. So, as long as I got God on my side I can't give up. There is no over, you know." (1023-03)	Perseverance (Hope and Optimism)	
Finding a job and housing	". . . I want to be able to have a foundation, not saying financially and have a job. . . ." (1044-07) "While I'm in the trailer, I'm gonna be looking for an apartment or something. . . ." (1029-02).		
Helping others	". . . I had to take care of him [a boy she takes care of] and that helped me because I couldn't lay in the bed and cry like I was doing. I couldn't. I had to get up. And so that made me get up and out. . . ." (1008-01).	Positive transformation (through Altruism)	

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TABLE 2 Moving from Categories to Themes—Provider Data

Example of coded material	Category	Theme
"And we're dealing with a large African American culture that in a lot of these public meetings, for instance, I'll give you a good for instance, our United Way, recovery coordinator, you know got up what two weeks ago, uh, to 'God give the glory to God give the glory' in our case management meeting, um, you wouldn't hear that from your average person who works for United Way." (European American faith-based organization director)	African American survivors express their faith very differently than the European American service providers	When and how providers talked about spirituality and religion
One thing that EW (African American working for African American faith based organization) said that was interesting to me was the African Americans don't seek therapy from therapists or case managers—they seek it from their hairdressers and their pastors (Field notes)	African Americans seek counseling from their hairdressers and their pastors.	
"I don't know how I keep going, I guess the grace of God, just keep praying, and asking him to give me the strength to move on. . . ." (African American survivor case manager)	Survivor provider talks about surviving by faith.	
"And their spirituality was so prominent, the, the ones from . . . Katrina." (European American therapist)	Spirituality is very important to African American survivors.	
"when it [shelter] opened, um, and you had to go through the chain of command, and when we got to the top of that chain of command, the person said to me, 'We do not need chaplains here. All chaplains do is stir things up. These people need to rest."' (European American pastor/chaplain and agency director)	Chaplains were actively discouraged at the shelter	Need to forge closer relationships between secular service providers and faith-based organizations
"So, the uniqueness of this, of this particular disaster for our community was that, there was this, this, this collision of faith-based and community-based organizations that weren't used to working with each other. . . ." (African American survivor and service provider)	Problem for faith-based and community organizations is not religious conflict, but they don't know how to work with each other.	
". . . not anytime during the duration of when that storm hit, and even up to now, we have never proclaimed to provide any type of case management or counseling, 'cause none of us are degreed or educated to do that." (African American nonevacuee, faith based provider)	Concern by FBO not to call what they did "case management" because their staff didn't have professional degrees.	

(*Continued*)

TABLE 2 Moving from Categories to Themes—Provider Data (*Continued*)

Example of coded material	Category	Theme
". . . it was just liberating to be able to talk to people about, you know, their faith and, uh, their testimony, and, you know, the fact that they survived the hurricane, and you know, what do you think God's trying to tell you, and just using that." (African American, nonevacuee case manager working for an FBO)	Case manager talks about how she uses client's faith to support them in recovery.	Integrating spirituality into mental health counseling and case management
Information about first anniversary commemoration September 9, 2006: Local nonprofit putting on event to build community and awaken spiritual healing for survivors of the hurricanes and the host community. (Field notes from case management meeting)	Example of a community event focused on spiritual healing.	

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Expressions of spirituality and religion

Among African Americans, 48 out of 52 respondents disclosed their faith, religiosity, and spirituality even though researchers did not specifically pose questions about religion or spirituality. Respondents talked about their relationships with God after the disaster; for example, by expressing thankfulness to God and reassessing their faith. Respondents also talked about their religious or spiritual practices such as prayer, meditation, reading the Bible, and church attendance.

The results from the African American survivors' data confirmed the importance of spirituality and religion in their lives. Most spoke of their connection with God in positive ways, but a few expressed it in negative ways. For example, one respondent said: "It made us very sad [the storm and evacuation], but at the same time, we were thankful to God first for being safe . . ." Another respondent reappraised his faith in this way: "I felt like I lost my faith. I was like, 'If there is a God, why is he doing this to us? Why are we out here like this? If he really did love us, why are we seeing these people dying in front of us?" Some survivors tried to find meaning in the disaster by seeing God's presence in the events. For example, this survivor said: "I see it [the hurricane] as an act of God. So, I took it in a positive way. . . . it brought families closer together. It made us see what was more important." Another reasoned: "He [God] ain't brought me this far to leave me hanging," believing there must be a reason for the trials she was experiencing.

Most African American survivors also talked about religious practices such as praying, meditating, reading the Bible, and attending church. Prayer was important for most of these respondents when they faced difficult situations. For example, one woman expressed her feeling about the recovery process in this way: "Everything is going to be alright, and I'm a praying person, I do a lot of praying." A woman who could not attend church services on Sunday because she had to work, stated: "The best thing I could

TABLE 3 Survivor Demographics

Characteristic	Respondents (n = 73)	Percent of total
Gender		
Women	44	60%
Men	29	40%
Race/ethnicity		
African-American	52	71%
Hispanic[a]	4	5%
White	15	21%
Asian	2	3%
Age[b]		
18–35	21	29%
36–65	49	67%
66 and over	3	4%
Pre-Katrina Occupation[c]		
In the labor force	45	62%
Manual labor	10	22%
Service/sales/clerical	26	58%
Professional	7	16%
Other	1	2%
Unemployed	1	2%
Not in the labor force	28	38%
Student	5	7%
Homemaker	4	5%
Disabled	9	12%
Retired	8	11%
Other	2	3%

[a]Survivors categorized as Hispanic identified themselves as such.
[b]Ages are estimates in some cases.
[c]Occupational data is based on survivors' descriptions of their past employment. Manual labor includes construction and manufacturing occupations; services/sales and clerical includes retail trade, accommodation and food services, arts, entertainment and recreation, administrative and support services and "other services-except public administration;" professional includes professional, scientific and technical, management of companies and enterprises, finance, insurance and real estate, public administration and educational services. The percentages of survivors in various occupational categories are based on their share of those in the labor force, while data on those not in the labor force is presented as a share of all survivors interviewed.

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do was read a Bible and that would be church for me." Other survivors expressed the importance of religious practices such as going to church. Another survivor stated: ". . . I'm going to find one. Yeah, I like going to church."

Survivors' resiliency

The majority of the African American survivors we interviewed expressed some sort of religious or spiritual beliefs and for the vast majority of them,

these beliefs and spiritual activities were a positive part of their recovery. Many felt a sense of strength because of their belief that God had helped them in difficult situations. One woman said, "He [Lord] done give me the strengths." Religion and spirituality also helped survivors to develop hope and optimism despite adversity. A male survivor stated it this way:

> . . . when you give up you die, and that's just the way I feel, you know. If I give up, it will be over and I'm not gonna give up. So, as long as I got God on my side I can't give up.

Another survivor felt that God was directing him through his recovery: ". . . let God guide you and trust that He'll lead you in the right direction."

Survivors' resiliency was illustrated by their positive adaptation to their new situation: searching for jobs, looking for permanent housing, and accessing available material and social supports. Survivors also demonstrated resilience in their ability to maintain hope and optimism and transform the experience of the trauma of the hurricane through altruism and helping others. Respondents reported that their spirituality and religious practices helped them adjust to their new situation and move on. One respondent, for example, reported, "I'm beginning to learn how to work with it now, get adjusted, after a year, I guess, you know, life goes on . . . I can't keep dwelling on the past. I got to keep going." A female survivor described how her spirituality helped her to keep moving and trying to find a job:

> I want to be able to have a foundation, . . . and have a job that I'm comfortable with that I will go to, you know that's not far because I don't have a vehicle. So God is making waves for me, I pray, I just sat and just basically just meditate and try to see which way to go, so I got up off of my back and went out and as soon as I got up and I prayed the whole, when I got up I got the job, just like that.

In some cases, survivors' resilient reintegration took the form of altruism—helping neighbors, family members, and others in need. For example, one woman convened an Encouragement Dinner for Louisiana people with her pastor. Another female survivor, who had a strong religious belief, was taking care of a two-year-old boy as a way of coping through altruistic acts. She stated:

> When I took him in . . . I had to take care of him and that helped me because I couldn't lay in the bed and cry like I was doing. I couldn't. I had to get up. And so that made me get up and out. . . .

We do not have data over time about how spirituality or religious practices helped all African American survivors resiliently deal with the

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stress of displacement. However, we do have some information, and below we include the story of one respondent, Whitney Morris (a pseudonym). Whitney Morris is a woman in her forties. Like many other African American survivors, she was separated from her family during the evacuation to the host city. She found a job at a local restaurant the first week she lived in the shelter and received FEMA rental assistance for 6 months. However, she faced the same problems as many survivors: barriers to securing identification, ongoing struggles with FEMA, health problems, challenges with transportation, and feeling like she didn't belong in the host community. She missed her family and her life in New Orleans. In May 2006, she took a break from work because of anxiety and depression. She told the interviewer that she was anxious about her future, missed her family, and bad weather evoked memories of her traumatic escape from New Orleans.

In November 2006, while struggling with depression, she had an experience that seemed to be a turning point for her, while she was talking to an acquaintance:

> I met her on the bus, and she was reading a word, so I asked to see it, and it was, you know, very interesting. And like it hit me, you know. And it was something like, "To take the burden, let the burden, and give it to God." And, it just, for some reason, you know, I'm not trying to get religious on it, but . . . , that's what opened my eyes. And I thought my interests are, you know, being directed to this. So I, I read it [spiritual reading] in the morning . . . And uh, it's inspiring, and it's just, it's uplifting in the morning. It makes you motivation [sic]. So I think my motivation was gone at one point, 'cause I was just trying to, you know, accept the transition . . . I had a foundation in New Orleans. I loved it. I was comfortable. Forty hour a week job. You know. My boss loved me. . . . So I just got stabled [sic] a little bit [in New Orleans], and then this [Hurricane Katrina] happened. So I feel like I come, I'm coming around. Because I talk to different people like you, you know, and, I'll let it out. You know, and, I get up. I was in a state of depression . . . I'm happy to say that I feel good.

Whitney's story gives us some insight into the ways that spiritual beliefs and the daily practice of reading inspirational literature could promote resilience. For Whitney, a word of inspiration helped her make meaning of her experiences, to see them as part of a bigger plan and reach out for support, both from God ("give the burden to God") and others. It helped her grieve what was lost ("I had a foundation in New Orleans") but also helped her out of depression and into a frame of mind to try again to deal with the pressures of resettling in her new home.

While we do not have data from all the African American survivors that would show how their spirituality or their religious practices influenced their recovery and the meaning they made of the experience, the data we

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do have illustrate that nearly all the African American survivors interviewed expressed some indication that they drew on spiritual beliefs or religious practices as part of their recovery.

Provider Perspectives

There were many churches and faith-based organizations involved in the emergency response and the long-term recovery. Despite this, service providers were much less likely than survivors to talk about religion or spirituality either in individual interviews or in the public meetings that we observed. Table 4 illustrates that service providers were more likely to be European American and well educated than the African American survivors. Half held Masters' degrees and 31% held an identifiable social work degree, either an MSW (29) or PhD in social work (1). One provider identified as "clergy" and two had degrees in Divinity. Nineteen worked for faith-based organizations. Eight were themselves Katrina survivors. Table 5 shows the racial and ethnic breakdown of providers who worked for faith-based organizations and those who did not.

As with the survivor interviews, the providers' spirituality or religion were not a main focus of the interviews; therefore, we have more superficial information about these topics. In only rare cases do we have information about how service providers used their spirituality or religion to make meaning of the unique and stressful situation of working with Katrina survivors. In the following section we will examine when and how providers talked about religion and spirituality, and two themes that emerged: the need to forge better relationships between secular service providers and faith-based organizations, and the importance of incorporating spirituality into disaster recovery and case management.

Providers talk about spirituality and religion

In addition to being mentioned less often by service providers in general, European American and African American service providers spoke about spirituality and religion very differently in interviews and in the public meetings we observed. European Americans were much more private about their personal faith and religious practices and rarely invoked faith in public meetings. African American service providers were much more likely to talk personally about their faith and what it meant. The European American director of a faith-based organization, described a case management meeting where a fellow service provider (who was an African American Katrina survivor) expressed her faith by saying: "To God give the glory," and commented, "You wouldn't hear that from your average person who works for this agency." The African American Katrina survivors who also became service providers almost always expressed their experiences in terms of their

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TABLE 4 Service Provider Demographics

Category	Number	Percent of total
Gender		
Male	24	24%
Female	74	76%
Age		
18–29	18	18%
30–39	17	17%
40–49	30	31%
50–59	20	20%
60 and over	10	10%
Missing	3	3%
Ethnicity		
African American	18	18%
European American	67	68%
Asian	2	2%
Hispanic	7	7%
Other	4	4%
Education		
High school diploma or GED	1	1%
Some college	8	8%
Bachelors' degree	28	29%
Masters' degree	53	54%
Social work	29	30%
PhD/MD	3	3%
Social work	1	1%
Missing	5	5%
Agency Affiliation		
Faith-based	19	19%
Other	79	81%
Katrina Survivor	8	8%

TABLE 5 Provider Race/ Ethnicity by Agency Affiliation

	Agency affiliation	
Race/Ethnicity	Faith based organization	Other
African American	3 (3%)	16 (16%)
European American	14 (14%)	54 (55%)
Asian	1 (1%)	1 (1%)
Hispanic	1 (1%)	6 (6%)
Other	1 (1%)	2 (2%)

faith, as in this example: "I don't understand how anybody could be in social service and not realize things are out of their control . . . that they can't do it by themselves . . . they only have so many resources . . . each of us have to rely on a higher power."

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Most of the time, discussions of spirituality and religious faith came up in the context of discussing survivors' mental health needs. Many providers acknowledged that survivors' spirituality and religion, including church attendance and the social support that churches provide, was a great resource. However, the reliance on the church and close family ties proved to be somewhat of a liability in their new homes, as several service providers noted that pre-Katrina these families would go to their preacher in times of difficulty, "but now they don't have their preacher and they don't have their family members and they're really stuck" (European American social worker and program coordinator). Furthermore, survivors were repeatedly characterized as unwilling to access assistance in more formal systems characteristic of the host community, as noted by one African American nonevacuee social worker: "As for the African-American culture, they believe in church . . . getting counseling from the church . . . and getting counseling from the grandmas . . . but they solely rely on the church for counseling." This was attributed partly to lack of familiarity with secular social service agencies, and partly as suspicion of outsiders, as most survivors were coming from long-standing and tight-knit communities. Survivors wanted familiar resources in times of crisis; however, they were far from those resources and service providers in the host community struggled to create resources that were culturally appropriate.

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Need to forge closer relationships between secular and faith-based organizations

One of the challenges of incorporating spirituality into disaster relief and recovery was a certain wariness between faith-based and secular organizations around the issue of proselytizing and credentials. One local African American service provider talked about the "collision" between these two groups. Another provider, a European American who was also a pastor and trained chaplain, told a story that illustrated some of this tension. Although the local shelter for medically needy survivors regularly used chaplains, the general shelter "had a very different feel." The provider noted it was necessary:

> . . . to go through the chain of command, and when we got to the top of that chain . . . the person said to me, "We do not need chaplains here. All chaplains do is stir things up. These people need to rest." And I asked for a little clarification, and he says, "We have medical staff to take care of physical needs, we have mental health workers to take care of mental health needs, we don't need chaplains." . . . I mentioned that there's also another component in people, and it's the spiritual side. That wasn't really what they were very interested in. And they obviously had some very negative ideas about what it meant.

This respondent went on to define the appropriate role for spiritual care in a disaster, noting that chaplains can operate much like mental health workers, "to be present, to listen, and so they have the skills of a counselor." However, this could create boundary confusion for social workers and other service providers who are trained to provide mental health care and are trying to incorporate an attention to clients' spiritual needs into their practice. It raises the issue of which professionals are appropriately trained and credentialed to provide what kind of service.

This issue of professional boundaries came up in another way. A respondent from one of the African American faith-based groups talked about how concern about credentialing kept them from participating in the case management groups, even though they were providing services that looked on the face of them like case management:

> . . . we have never proclaimed to provide any type of case management or counseling, 'cause none of us are degreed or educated to do that . . . we're a spiritual-based nonprofit, so we have to really be careful with what people—what it appears we're providing.

The organization provided critical services to survivors both right after the initial evacuation and during the long-term recovery. However, the lack of participation in the coordinating group was a loss to the overall recovery process, because this African American faith-based organization could have provided guidance to the European American service providers about how best to support survivors' spirituality and religious participation in their recovery. They could have provided a bridge between survivors' mental health and spiritual needs.

Integrating Spirituality into Mental Health Counseling and Case Management

Providers offered a few examples of what spirituality and religion integrated into disaster services looked like. For example, one respondent, a European American social worker, described an event at the shelter:

> There was one afternoon where they brought in a small . . . worship service, and it was an African American church, and they started to do this very upbeat, very contemporary gospel song . . . People were literally running through the Convention Center to get to this place . . . when people were going away after the service, their body language went from with the heavy shoulders, which is what I had gotten used to seeing . . . and head down, to that very characteristic New Orleans chin pointed toward the sky.

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He noted this religious ritual was an important resource for supporting survivors' mental health, as he described survivors as ". . . emotionally and spiritually adrift." In another example, one of the African American survivors who was also a service provider talked about how she supported clients' faith: ". . . I just affirm that and just tell them, 'It's good that you have that [faith] to lean on,' you know. 'That's a support and it's a strength . . .'"

One faith-based counseling organization received funding to provide spiritually oriented counseling to Katrina survivors. The counselor they hired was an African American social worker who was not an evacuee, but who had grown up in the Deep South. She described herself as "old in faith." She talked about using survivors' faith, when appropriate, to help them make sense of their experience. As she said:

> . . . it was liberating to be able to talk to people about, you know, their faith and, uh, their testimony, and, you know, the fact that they survived a hurricane, and you know, what do you think God's trying to tell you . . . So, and for a body of people that are so, even if they didn't go to church, they believe in God, and, you know, they'll talk about what God has done although he may be doing all this crazy stuff that has nothing to do with being a Christian, there's this belief in God and that God will take care of you, and so just being able to focus on that, in some situations, and bring that out, and you know, talk about, "Where do you think God is leading you?" and "What does that say about your life?"

She belonged to a large local church and she invited survivors to her church, as she believed that the primary social connections for people were church and jobs. She believed this was one of the problems with the general case management system because many case managers were not familiar with the culture of survivor clients and didn't understand the importance of church and spirituality in survivors' lives. She did not talk about spirituality or religious practices with all clients, but only when she assessed that the situation called for it. For example, she described talking about scripture with one client and framing another client's unexpected receipt of Medicaid to cover a large hospital expense as a miracle.

Finally, the European American director of a faith-based organization had this to say about the work that needed to be done to incorporate spirituality and religion into disaster recovery:

> . . . when the faith community does it right, it is an incredible service to the city because people who live through crisis often turn to or away from their faith. Either way, a chaplain should be able to handle that emotional baggage and help process. Chaplains should know when they need to refer someone on to mental health. It's a great service, a free service. It's a good deal for the city but if the city's only view of it is fear of proselytizing, they've got their head on backwards . . .

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In summary, service providers were much less likely than survivors to talk about religion or spirituality and European American service providers were less likely to mention it than African American service providers. Their discussions focused on the need to forge better relationships between secular service and faith-based organizations and the importance of incorporating spirituality into mental health services and case management.

DISCUSSION

Our interviews with African American survivors of Hurricane Katrina suggest that spirituality and religious practices provided the motivational force that Richardson (2002) notes is a necessary condition for resilience. Equally important, churches and faith-based groups provided material and social resources critical to the disaster response and recovery, a finding echoed in the literature (Joshi, 2010; Trader-Leigh, 2008). These dimensions (both spirituality and help from religious institutions) appear to be mutually reinforcing. Material and emotional support from a church pastor or church member reinforces faith and spirituality. This facilitates deeper connections to the churches as institutions and the material and social supports they have to offer. Our research is limited in that it does not allow us to tease out the unique contributions that both spirituality and connection to a religious institution make in fostering disaster resilience, a challenge noted in previous research (Banerjee & Pyles, 2004; Wood, 1999).

For the most part, the local service providers, although acknowledging that spirituality was a resource for healing in the African American community, underutilized it as a resource. African American service providers spoke more readily about their own faith and appeared to be more able to draw on religious and spiritual resources in their work with survivors. Based on this data, we do not know what special contribution spirituality or religious practices made or did not make in fostering disaster resilience for the displaced survivors, but it was clearly a lost opportunity on the part of some of these providers.

The lack of collaboration between secular nonprofit organizations, faith-based organizations and the government reported by our provider respondents is a recurring theme in recent policy debates on disasters (De Vita et al., 2008; FEMA, 2007; Joshi, 2010; *National disaster response*, 2008). Chaplains, pastors, church members, and other service providers from faith-based organizations are marginalized from the process. For example, in New Orleans after Hurricane Katrina, national and international NGOs favored more professionalized organizational partners over organizations, such as African American churches, that represented less educated, lower-income people of color (Pyles, 2010). Such practices are a violation of the nondiscrimination clause of the Stafford Act, the key legislation that governs disaster policy and practice in the United States (FEMA, 2007).

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As part of a large interdisciplinary team of civil society and state agencies, social workers providing services after a disaster face a range of issues in providing spiritually-sensitive services to clients. Below we discuss the implications of this research for practice and policy.

Implications for Social Work

Practice

In order for social workers working with survivors in disaster contexts to address spiritual and religious matters and provide appropriate resources, it is necessary for them to understand that spirituality can be a source of resilience (Richardson, 2002) and that religious institutions are critical sources of support, particularly for African Americans (e.g., Brome et al., 2000; Musgrave et al., 2002; Watlington & Murphy, 2006). However, religion and spirituality are still somewhat neglected topics in social work education (Barker, 2007; Canda, 1989; Sheridan, Wilmer & Atcheson, 1994; Sheridan & Hemert, 1999). Concerns have been raised about conflict with the mission of social work, the NASW code of ethics, separation of church and state, client's beliefs, and the social worker's beliefs (Barker, 2007; Hodge, 2002; Hodge, Baughman, & Cummings, 2006; Stewart, 2009; Svare, Hylton, Albers, 2007; Tangenberg, 2005).

These complexities notwithstanding, studies have shown that social workers employ spirituality in their practice, and provide religious guidance and spiritual interventions (Modesto, Weaver, & Flannelly, 2006). For European Americans, making connections to local spiritual and religious resources may be a challenge as many see their spirituality as a deeply personal issue, may have unresolved personal issues with organized religion, or lack the necessary education or training in spiritually-sensitive social work practice. However, to meet the needs of clients, they need to step out of their comfort zones to provide appropriate support and referrals, as well as support different ways of expressing faith.

Recently, the National Voluntary Organizations Active in Disaster published a guide for spiritual care in times of disaster (Massey, 2006). The authors have noted that although spiritual care providers and mental health professionals "have sometimes harbored suspicions of each other's roles and that suspicion can interfere with the timely and efficient provision of services" (p. 20), the two groups do share common ground. This commonality includes concern for emotional well-being, practice of attentive listening, and embracing a holistic view of the individual. Building on this commonality can be a way to bridge these service gaps.

Such practice behaviors cannot be fully effective without addressing the structural disparities in the disaster response system itself. Facilitating access to informal helping systems such as churches—and thus making full

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use of religion as an institution that can foster resilience—is key for African American disaster survivors who may be suspicious of more formal helping systems. Social workers should strive to increase options for services by providing spiritually-sensitive services within traditional social service agencies for those who want it, as well as locating referral resources for African American clients who want faith-based services within their own community and institutions. Some issues, such as the sociopolitical elements surrounding federal aid to African American Katrina survivors, might best be addressed in homogeneous groups, led or co-led by chaplains or pastors. Homogenous groups would allow respondents to collectively assess the negative impacts of racism and oppression, to share one another's burdens and the trauma they have experienced, and to draw on a common source of inner strength and comfort. Community leaders should be consulted, included, and take the lead in the development of these interventions.

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Policy

As more and more faith-based organizations enter the social services field as a result of federal policy trends that focus on faith-based initiatives and charitable choice (Weiss, 2001), social workers will have increased opportunities to work with faith-based providers. Although INGOs who provide humanitarian aid and relief in disasters and crises globally are often affiliated with faith groups, it is unclear whether they possess the cultural and spiritual competence to attend to the needs of disaster survivors such as the ones in the study. Weiss et al. (2003) have argued for establishing disaster a mental health policy before disasters that includes addressing religious and spiritual needs of survivors with particular attention to local culture and communities that have unique ways of coping. This can be achieved through both federal mandates and local protocols around disaster response. Our study supports previous research that stresses that African American faith-based groups be included in disaster planning, response, and recovery (Trader-Leigh, 2008).

United Nations' operations guidelines in disaster relief reflect a human rights-based approach that affirms a commitment to nondiscrimination (Inter-Agency Standing Committee, 2008). Religious and ethnic minorities, in particular, are protected and these guidelines support individuals' right to practice their religion. However, the guidelines need to be more explicit about including local faith organizations in the process and affirming a commitment to spiritual competency.

Overall, members of civil society, such as nonprofit organizations, faith-based organizations, churches, and other informal neighborhood groups play a critical role in disaster recovery, filling in the many service gaps left by federal, state, and local governments (Harrell & Zakour, 2000). Our research shows that churches and faith-based groups were critical to the

civil society response to Hurricane Katrina, and that religion and spirituality were important resources for African American survivors. Our work suggests that social workers need to continue to educate themselves about spirituality and religion in different client groups and forge alliances with faith-based organizations so that they can enhance clients' resilience in adversity.

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