Faith-Based and Community Organizations’ Participation in Emergency Preparedness and Response Activities

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Executive Summary

Recent natural disasters and acts of terrorism in the United States highlight innumerable accounts of altruism and resilience among individuals and communities. During Hurricanes Katrina and Rita, local churches and community organizations—unaffiliated with a national voluntary organization—often served disenfranchised groups that are sometimes missed by more formal response efforts (GAO, 2005). These types of heroic efforts of the smaller faith-based and community groups are often noted in the popular press. Moreover, these organizations are explicitly included in recent federal policies as capable of leveraging their unique positions in communities to help prepare for and respond to disasters and other emergencies (GAO, 2008a).

To provide a descriptive synthesis of the state of the research on the efforts of faith-based and community organizations (FBCOs) in emergency preparedness and response (EPR) efforts, RTI International was commissioned by the U.S. Department of Homeland Security (DHS) Center for Faith-Based and Community Initiatives, partnering with the DHS Science and Technology Directorate’s Human Factors/Behavioral Sciences Division, to conduct a targeted literature review. This review identified studies that provide a preliminary assessment of FBCO capacity and collaborative networks related to emergency management. Included are examples of a broad range of approaches to increase FBCO engagement and coordination identified in the research and policy literatures that may help guide future program development.

Summary of the State of the Research Literature

The empirical literature is still in its early stages of development and has methodological limitations.

Seventeen studies were identified for inclusion in the review of the empirical literature. More than half of the studies concentrate on the response to Hurricane Katrina. Most study populations are drawn from small and non-random samples. There are no formal definitions of affiliated and unaffiliated FBCOs; they are grouped into the same general category, “FBCOs.”

Comprehensive, in-depth community assessments and more rigorous research studies will enhance efforts to develop more evidence-based programs and practices that may better engage, coordinate, and support FBCOs efforts to serve vulnerable populations in EPR situations.

This review is organized around key areas of emergency management, including FBCO organizational capacity to provide emergency assistance, FBCO coordination and collaboration activities with EPR officials, and FBCO networks, and emerging programs and practices. Key findings from the FBCO literature include the following.
FBCO capacity to serve basic human needs surged in the response to Hurricane Katrina.

In several studies of FBCO participation in Hurricane Katrina response, FBCOs surveyed indicated primarily providing emergency-related services such as shelter, food, financial assistance, and clothing.

These studies also indicate a range of other services provided by FBCOs although to a lesser extent. These services include medical services, personal hygiene (laundry and showers), mental health and spiritual support, physical reconstruction (debris removal, home repair), logistics management (distribution of supplies), transportation (evacuees and volunteers), children’s services (child care and education), and case management (information, referrals).

Studies find that FBCOs quickly responded to Hurricane Katrina to meet unmet service needs.

A comprehensive survey of FBCOs that responded to Katrina-related issues found that two-thirds of FBCOs had not previously participated in disaster relief.

FBCO interviewees across studies indicate that the Hurricane Katrina response was motivated by the magnitude of needs.

Studies indicate that FBCOs collaborated during Hurricane Katrina response.

A comprehensive survey found that affiliated and local unaffiliated FBCOs collaborated with at least one or more organizations during Hurricane Katrina response. Collaboration included sharing resources, equipment, space, and supplies. Half of FBCOs reported new collaborations.

Qualitative research studies highlight that FBCO collaboratively participated in Katrina response efforts. Collaboration was found to be mostly unplanned and based on personal and professional ties rather than a planned response.

There are limitations to FBCO service capacity in disaster response and longer term recovery.

The Government Accountability Office estimates that national disaster relief organizations (such as the American Red Cross [ARC]) do not have enough feeding and shelter capacity to fully address a surge in service needs resulting from large-scale disasters.

One survey found that in addition to emergency services, faith-based organizations (FBOs) provided longer term post-Katrina services such as housing reconstruction, child care, and employment services, but to a much lesser extent than providing emergency services such as shelter, food, and water distribution.

Post-Hurricane Katrina, one survey indicates that FBOs on average delivered services for Katrina victims for less time (less than 3 months) than community-based organizations (CBOs) (1 year).
Pre-disaster, FBCOs focus on meeting emergency needs of vulnerable populations.

Several surveys find that FBO and CBO social services capacities include a focus on addressing immediate needs such as food, shelter, clothing, or cash assistance. FBOs and CBOs target vulnerable populations and are located near low-income areas. A national survey of congregations involved in service delivery (that may or may not be related to disaster relief) indicates low levels of collaboration with government agencies.

There are important variations in FBOs' and CBOs' service capacities pre-disaster.

A higher proportion of CBOs compared to FBOs provide longer term services such as mental health counseling and employment services.

On average, FBOs have smaller budgets and fewer paid staff members than secular nonprofits and rely more on private funding compared to government funding sources.

FBCO express interest in collaborative emergency planning activities but perceive barriers.

There is limited information about FBCO collaboration in formal emergency management planning activities. One study finds that there are low levels of interaction between local nongovernmental organizations (NGOs) and EPR networks, especially for religious organizations and mental health providers.

A survey of California FBCOs finds high levels of interest in disaster preparedness activities across all types of organizations. Similarly, surveys of Citizen Corps participants, which can include members of FBCOs, indicate a high level of interest in participating in disaster training activities. Despite this interest, there is low involvement in emergency planning.

Studies identify several individual and institutional barriers to FBCO participation in EPR such as lack of organizational capacity and staff resources, lack of staff dedicated to EPR coordination, no community input into state/local emergency plans, emergency plans not addressing emerging needs that FBCOs would fill, lack of FBCO credentialing, limited funding, lack of trust in emergency planning and response officials, language issues, and inadequate coordination.

There is limited participation of FBOs and CBOs in formal preparedness efforts.

Although there is a dearth of research on FBCO participation in emergency preparedness, one comprehensive study of FBCOs in San Francisco finds that many organizations obtained information on their own and purchased basic first aid supplies, but have not formally participated in planning or training efforts such as establishing cooperative response agreements, developing continuity of operations plans, or taking part in disaster drills.
A comprehensive program model to engage FBCOs in formal emergency planning and response management activities has not been developed.

The Hurricane Katrina research studies reviewed found that, in general, FBCO participation consisted of ad-hoc response efforts developed to meet immediate needs and fill in service gaps.

To better engage FBCO participation in EPR, four emerging strategies were identified.

Providing direct linkages to specialized educational materials and training opportunities;
Building organizational capacity through federal, state, and local funding and technical assistance;
Facilitating coordinated planning and network-building efforts among three groups: state and local emergency management groups, national voluntary agencies such as ARC and Voluntary Organizations Active in Disaster (VOAD), and local FBCOs;
Developing management information systems to coordinate volunteers, donations, and goods distribution and to track community assets, clients served, and expenses incurred.
Introduction

Recent natural disasters and acts of terrorism in the United States highlight numerous accounts of altruism and resilience among individuals and communities. Out of the devastation and human suffering of these large-scale catastrophes comes the opportunity to build on the strengths of new or renewed relationships. Neighbors, co-workers, and strangers may connect with and help each other in ways that might not happen before a large-scale disaster strikes (Bliss & Meehan, 2008). Scholars note that the emotional intensity of the experience and the common goal of survival can help bridge religious, racial, ethnic, and other social divides during crises (Solnit, 2009). This increased potential for bridging across divided groups could be harnessed in human recovery efforts and help rebuild communities to be more resilient and more responsive to residents compared to pre-disaster conditions (Pastor et al., 2006).

Social isolation and divisions that may be hidden pre-disaster can be pushed out into the open during a disaster, exposing the divisions within communities (Cutter et al., 2006; Morrow, 2008; Pyles & Cross, 2008). The increased vulnerability of minority groups to the negative impacts of disaster is well documented (Morrow, 1997; Sharkey, 2007), and there is growing recognition that disaster response efforts in minority communities should provide appropriate cultural and linguistic services (SRA International, 2008). Research also indicates that families' post-disaster needs relating to care giving, emotional support, and child care—which are met disproportionately by women—have traditionally taken a back seat to economic issues (Enarson & Morrow, 1998). Recent recommendations focus on incorporating children’s health and care needs directly into emergency planning and response efforts (National Commission on Children in Disasters, 2009).

Given the magnitude of physical and human needs after a large-scale disaster such as Hurricane Katrina, there is broad agreement across government agencies and communities on the need for better coordinated and more collaborative emergency preparedness and response (EPR) plans (De Vita, 2007; Government Accountability Office [GAO], 2006). During Hurricanes Katrina and Rita, local churches, unaffiliated with any national voluntary organization and therefore not traditionally viewed as the emergency responders to crises, were noted as serving disenfranchised groups stranded in places that traditional voluntary organizations such as the American Red Cross (ARC) did not enter (GAO, 2005). The role of local faith-based and community organizations (FBCOs)—which generally operate outside of traditional disaster planning and management activities of government agencies and large voluntary disaster relief organizations—received attention due to the sheer scale and speed of their response efforts (Carafano, Marshall, & Hammond, 2007; Pipa, 2006). As a result, these types of organizations are now explicitly recognized in federal policies as being capable of leveraging their unique positions in communities to help prepare for and respond to disasters (GAO, 2008a; GAO, 2008b).
Federal Policies Specifying the Engagement of National Voluntary Agencies and FBCOs in Emergency Preparedness and Response

Since Hurricane Katrina in 2005, two federal emergency management policies have been revised explicitly to recognize and provide general guidance for the engagement of both national voluntary agencies such as ARC, the National Voluntary Organizations Active in Disaster (NVOAD), and local FBCOs. Together, the national and local agencies are referred to as NGOs (U.S. Department of Homeland Security [DHS], 2008a). The National Incident Management System provides general recommendations about the EPR roles for the large, national voluntary agencies and NGOs. A second policy, the National Response Framework (NRF), specifies the role of governmental agencies and national voluntary associations in specific emergency response functions such as providing for mass care needs in nationally declared disasters. Although these policies provide a blueprint for a coordinated system to increase inclusion of FBCOs, the NRF provides general guidelines that can be tailored to local situations; therefore detailed guidance on implementation is not provided (GAO, 2008a; GAO, 2008b).

National Incident Management System

In 2004, the National Incident Management System (NIMS) was established to help provide common terminology and concepts in the federal government's approach to all hazard response, management, and coordination. The NIMS is not a management plan and does not allocate resources. NIMS recognizes that state and local government resources provide the first line of response and that local jurisdictions retain control at the local level for response activities.

NIMS guidelines are updated and revised based on lessons learned and best practices from incidents as they occur (DHS, 2008a). Importantly, NIMS was updated to recognize that NGOs and the private sector play valuable roles in preparation, response, and recovery efforts.

Specifically, NIMS guidelines recommend that agencies and national organizations pre-establish agreements with NGOs and include these organizations in coordinated preparedness plans and communication systems. It is recommended that planning efforts include developing lists of resources of NGOs and businesses, including the category, kind, and type of resources, such as size, capacity, skills, and other characteristics. Because the NIMS focus is on flexibility and local tailoring of plans, specific guidance is not provided about how frequently the organizations should communicate or how planning and response activities should be structured. The guidelines also recommend that NGOs require appropriate disaster training for

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1 NVOAD is a coalition of more than 50 nonprofit organizations that respond to disasters as part of their overall mission. NVOAD members tend to be large national organizations with sizeable budgets, and staff. (At a minimum, to join NVOAD, an organization must have recent disaster experience, operate in multiple states, and have an operating budget of more than $1 million or 300 staff and volunteers.) Appendix 1 provides a brief description of NVOAD and a list of the NVOAD members and services.
staff engaged in EPR efforts and proposes draft guidance on establishing a credentialing system for voluntary, charitable, and not-for-profit organizations (DHS, 2008c).

An example of the type of general guidance provided by NIMS includes the following (DHS, 2008a, p. 15):

NGOs, such as community-based, faith-based, or national organizations (e.g., The Salvation Army, NVOAD, and ARC), play vital support roles in emergency management and incident response activities. To fully integrate their efforts, NGOs that have the capacity and desire to be involved should be included in a jurisdiction’s preparedness efforts, especially in planning, training, and exercises. Furthermore, memorandums of agreement should be established with NGOs prior to an incident so each organization will be aware of the capabilities, expectations, and roles of others.

**National Response Framework**

The National Response Framework (NRF) provides specific guidance and objectives for a coordinated response to large-scale hazards (DHS, 2008b). The NRF designates 15 emergency support functions (ESFs) that detail a range of disaster needs and specify the federal agencies and national voluntary organizations responsible for overseeing and implementing each function. Appendix Table 1.2 provides a list of all ESFs that could be included in a national response effort.

The Federal Emergency Management Agency (FEMA) is designated as the lead federal agency coordinating the federal response for mass care services (ESF-6) in close coordination with states and voluntary organizations. FEMA’s regional voluntary agency liaisons (VALs) are responsible for coordinating with state VALs (if present) and voluntary organizations. The NRF also specifically names ARC and NVOAD as support agencies in providing mass care services—including the provision of shelter, housing, emergency assistance, and human services—and long-term recovery services (ESF-14).

Although ARC and NVOAD are both listed as support agencies in mass care, they are not included in all ESF functions together. For instance, ARC is specified as a partner to help with public health and medical services (ESF-8). NVOAD is specified to participate as a partner in NRF incident annex activities² (such as volunteer and donation management activities) whereas ARC is not specified to participate in these activities. Similar to the NIMS, there is no specific guidance provided in the NRF about the process of engagement with local FBCOs.

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² The Support Annexes describe how federal departments and agencies; state, tribal, and local entities; the private sector; volunteer organizations; and NGOs coordinate and implement common functional processes that occur in a response effort to any major event. These processes focus on eight areas of common response, including public-private coordination, public affairs, volunteer and donation management, and worker safety and health (DHS, 2008b). For volunteer and donations management, FEMA is specified as a coordinating agency and NVOAD, along with several federal agencies, is designated as a cooperating agency.
In sum, current federal guidelines specify service delivery and coordination roles for both ARC and NVOAD in providing mass care services (both ARC and NVOAD) and helping manage volunteers and donations in national response efforts (NVOAD only). Policies recognize local FBCOs that are unaffiliated with these agencies as NGOs that should be included, based on their interest and capacities to plan and respond. Guidelines propose establishing memorandums of agreement and specifically including these organizations in planning and response efforts.

**Definition Issues**

It is important to distinguish among the efforts of different FBCO groups—national voluntary disaster relief FBCOs (such as ARC) and the NVOAD organizations, their locally affiliated chapters, and smaller local FBCOs that are unaffiliated with national disaster relief organizations—because of the policy focus that distinguishes between their roles. A formal definition of affiliated and unaffiliated FBCOs in the context of EPR efforts is not present in the empirical literature. Therefore, most studies present findings for FBCOs as a group and do not distinguish between those affiliated or unaffiliated with national voluntary emergency relief organizations.

As policy and program efforts move forward, a definition will be needed that adequately distinguishes between the different types of organizations. Based on the multiple definitions in existing research literature and policies, combining definitions of FBCOs and the concepts of affiliation in disaster relief efforts is complicated by several factors. Definitions will likely need to include multiple components, including the geographic focus (national compared to local), the faith orientation of the organization (faith-based compared to secular), and experience with EPR activities (previous emergency experience compared to spontaneous). To illuminate the complexities of defining FBCOs, Appendix 2 provides a description of one approach that attempts to classify the different types of FBOs.

**Report Research Questions**

Although recent participation by affiliated and unaffiliated FBCOs in EPR activities is promising, there is little empirical research documenting organizational capacity and services (De Vita, 2007). This report provides one of the first comprehensive reviews of the recent empirical research literature to document the role of FBCOs in EPR activities. To inform policymakers about the characteristics, strengths, and limitations of identified FBCOs, the following research questions guide the report:

Do studies use consistent definitions of FBCOs that distinguish between affiliation with large national voluntary organizations (e.g., ARC, The Salvation Army)? If so, what are they?

Based on theoretical frameworks and research findings, what are the potential strengths and weaknesses of FBCOs’ participation in EPR activities?

What are FBCOs’ service capacity, networks, and coordination activities in EPR?
What does the empirical research find about FBCO strengths and weakness in EPR? How do these findings differ with the hypothesized effects?

What are the current policies and practices that have been developed to increase FBCO participation?

What are the recommendations about future efforts to improve FBCO participation in EPR?

**Organization of This Report**

The report begins by providing a summary of the state of the research based on the identified studies and then outlining the research methods used to identify studies and describes the number and types of studies identified. The following section provides background on the hypothesized reasons for organizational participation in EPR efforts and the potential strengths and weaknesses of FBCOs in providing services. Next, the empirical findings section presents the research results by topic area. The last section describes emerging program approaches to increase FBCO staff and organizational capacity, encourage cross-sector collaboration and FBCO networks, and help with designing systems to manage volunteers, distribution of goods, and tracking of clients and expenses.

The report concludes with a summary of recommendations from the research and policy literatures regarding future program efforts targeting FBCOs in EPR activities.

**Summary of the State of the Research on FBCOs in EPR**

Based on our review of 17 recent studies published since 2000, we find that there are no studies that formally define or distinguish between national affiliated FBCOs involved with EPR and smaller local FBCOs. There are some reports that focus specifically on the EPR activities of national agencies (ARC and NVOAD) and one study of local FBO shelters that asks about coordination with ARC. Two studies examine the differences in service delivery between FBOs and CBOs, but the studies do not specify whether or not organizations are affiliated with a national FBCO. Almost all recent studies focused on the role of FBCOs in emergency response are based on Hurricane Katrina, and one study focuses on community response to Florida hurricanes and another on September 11 terrorist attacks. No recent studies were identified on FBCOs to other hazards.

We find that all studies reviewed highlight clear examples of the successes of local FBCOs in helping vulnerable groups during Hurricane Katrina by providing needed services in collaboration with other FBCOs. Notably, the empirical research does not highlight any negative consequences of FBCO participation in EPR activities. However, there is also a cautionary tale about the capacity limitations of both the large affiliated and local unaffiliated FBCOs’ EPR involvement, especially in long-term recovery efforts, and the need for careful management and coordination of efforts. Although this initial, overall body of research that demonstrates a positive role for these groups is promising, the empirical literature is still in its early stages of development and has methodological limitations due to small and non-
randomly-selected samples. The more recent comprehensive studies that draw random samples of FBCOs are cross-sectional, a design that presents a one-time snapshot of FBCO involvement. Also, because almost all of the studies are based on the experience of Hurricane Katrina, the generalizability of the findings to other hazards or locations is limited. In-depth community assessments and research studies using methodologically rigorous designs across geographic regions can pave the way for developing more evidence-based programs and practices that could help better engage and coordinate FBCOs in EPR efforts.

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**Research Methods Used in This Report**

To summarize what is known about FBCOs’ capacity, and participation in recent emergency preparedness and response efforts, we use a three phase approach: (1) search, (2) sift, and (3) review. This comprehensive search strategy provides the foundation for understanding what is known about FBCO involvement in EPR.

**Search Phase**

There were three strategies used in the search phase, including (1) contacting experts, (2) conducting a formal literature search, and (3) conducting a Web search for non-peer-reviewed publications and reports. The search phase began by generating a list of contacts (based on the project team and DHS project officers’ knowledge) and contacting researchers and policy experts in FBCO service delivery and community-based EPR efforts to help identify recent research articles, relevant Web sites, and emerging program approaches in their areas of expertise. Information gathered from experts helped the project team assemble background materials as well as identify research and policy articles.

The second step includes searching comprehensive social science and health research databases of peer-reviewed articles: PubMed, EBSCO, Web of Science, CSA Illumina, and Religious and Theological Abstracts. These databases include indexes of thousands of peer-reviewed publications across a range of academic disciplines. We also conducted searches of EPR databases, including the Homeland Security Digital Library and FEMA library database and the most recent issues (within the last 5 years) of EPR peer-reviewed journals such as *Natural Hazards Review, Environmental Hazards, International Journal of Mass Emergencies and Disasters*, and *Disasters: The Journal of Disaster Studies, Policy and Management*. The list included Web sites of relevant foundations, federal and state agencies, FBOs and CBOs, academic research centers (including the DHS Centers for Excellence), and policy think tanks. The results of all searches were organized and stored in a central Refworks database, a Web-based bibliographic management tool.

In each of the databases identified, subject heading and key word searches were performed. Because subject heading terms vary by database, a base list of terms was developed as a guide for selecting subject heading terms across databases. The base list
included the following terms: “relig*,” “faith*,” “FBO,” “CBO,” “community organization,”
“disaster,” “emergency preparedness,” and “emergency response.” The asterisk (*) denotes all
possible variations using the root of that term (i.e., “relig*” captures “religiosity,” “religion,”
“religiousness,” and others). To perform searches, a religiosity-related and a disaster-related
subject heading term were crossed until all possible combinations were searched. Targeted
searches using key words terms such as “unaffiliated” and “Hurricane Katrina” were also
conducted. Searches excluded studies published in languages other than English, studies
focused outside the United States, and any articles produced before 2000.

Sifting Phase

Once the search phase was complete, articles were sorted by topic, such as empirical
findings about capacity and collaboration and examples of program approaches. Using the
publications’ abstracts, team members used two inclusion criteria to determine whether to
include the article in the empirical review of research findings: (1) the study’s primary focus
was on organizational preparedness or response activities of FBCOs and (2) the study
included some type of original research activity such as a case study or qualitative interviews.
Articles focused on the importance of FBCOs and community-based approaches to EPR were
included as background but excluded in the empirical findings review. Articles or Web sites
that identified emerging FBCO and EPR program practices were saved and included in the
discussion of program practices but excluded from the final list of articles focused on empirical
findings.

The strength of this method is that a comprehensive search of empirical and peer-
reviewed papers was conducted, and a wide variety of policy and non-peer-reviewed “grey”
literature was identified. The main limitation of this approach is that not all of the “grey”
literature can be identified. Although a full program review is beyond the scope of this report,
the wide scope of the searches identified several emerging approaches and a broad set of
recommendations for program design and improvements.

Review Phase

After generating the final list of bibliographic references in the database, the team
reviewed the articles along six dimensions: data set and method, data collection strategy,
FBCO definition, research questions, main findings, and implications. In total, 17 studies were
identified. Appendix 3 includes a full list of the studies and brief summaries of each.

Potential Strengths and Weaknesses of FBCO Involvement

Several articles identified from the literature review draw on theories focused on
explaining emergent collective behavior in an emergency situation and the reasons for the
“mass convergence phenomenon,” which includes the convergence at the disaster site of
individuals and organizations that offer assistance. Drawing on sociological, psychological, and
political frameworks, researchers study and classify the reasons and motivations behind the collective behavior of volunteers and emergent groups of volunteers during a crisis. At the individual level, a range of positive and negative behaviors are cited for participating in disaster relief—exhibiting citizenship, fulfilling psychological needs to help and provide comfort, and, in some cases, exploiting the vulnerable. It is noted in the literature that most forms of behavior during a crisis are pro-social and carried out by the public immediately after a crisis, before first responders arrive. However, crisis-related antisocial behavior, which is rarer, can also emerge (Tierney, 2009).

A long history of disaster research finds that groups of individuals who may or may not know each other organize themselves to fill perceived but unmet needs in assistance and establish an informal or formal organization. Organizations who have volunteer networks, equipment, or space also spontaneously volunteer to fill unmet needs. Sometimes these spontaneous organizations work well with government agencies and existing disaster relief organizations, whereas other times, the new organizations are turned away (Tierney, 2009).

Studies of faith-based and smaller CBOs suggest that these organizations by mission are designed to meet basic human needs (Monsma, 1996) and are therefore well positioned to participate in disaster relief efforts. At the same time, these organizations may not be prepared to respond or coordinate with formal response efforts, a situation that could cause potential confusion and duplication of services (De Vita, 2007). Drawing on these frameworks from disaster research and faith-based research as well as the empirical research reviewed, the potential strengths and weaknesses of FBCO participation in EPR activities are summarized below.

**Potential Strengths of FBCOs Involvement in EPR**

Staff bring high motivation and commitment to EPR participation because serving people in need is in line with their moral and religious values and beliefs.

FBCOs have experience serving vulnerable populations such as low-income, elderly, and immigrant populations, groups that are likely going to need specialized assistance in planning and responses.

FBCOs are embedded in the community served and have local knowledge, established trust, and geographic proximity.

FBCOs can draw on extensive networks of volunteers for service delivery and fundraising.

Congregations specifically have the facilities and service experience to provide “pop-up” shelters and food assistance, emergency services targeting basic needs, religious/spiritual relief and guidance, and educational programs.

FBCOs have the flexibility to identify unmet needs as they emerge and fill in service gaps and to help fill in needs that may not fall under EPR (keeping families together).
Potential Challenges of FBCO Involvement in EPR

Some FBCO staff lack sufficient EPR training.

Facilities, if not pre-certified, may not meet minimum performance standards; therefore, there are concerns about safety and liability and insurance.

Due to close geographic proximity to vulnerable populations and disaster sites, FBCOs may have limited capacity due to damage to local facilities or not enough staff or volunteers that remain behind to cover response participation.

FBCOs may have limited knowledge of or connection to EPR networks to coordinate response activities.

Limited tracking infrastructure to monitor clients and services provided during a response effort can limit the extent of their reimbursement.

There is some distrust of formal collaboration with government agencies.

There may be turf issues between unaffiliated groups and national voluntary agencies.

Without coordination, there may be service duplication or confusion about service delivery.

The potential exists for proselytizing and not respecting religious diversity.

Empirical Research Findings

Characteristics of Identified Studies

Following the research methods described previously, 17 studies were identified for inclusion in the review of the empirical literature. Table 1 highlights that of the 17 studies, most of the research is published as policy research reports (13) and a lower number are published in peer-reviewed journals (4). The majority of the policy research reports focused on FBCOs were commissioned directly by the government (5 out of 13) or conducted by the Government Accountability Office (2) as part of their monitoring and evaluation of the response to Hurricane Katrina. Other reports were commissioned by foundations or self-funded by think tanks.

Table 1 emphasizes that 10 out of the 17 studies focus on the response by FBCOs to Hurricane Katrina. One study focused on the 2004 Florida hurricane season and 1 study focused on FBCO response to the September 11 terrorist attacks. Recent studies are also beginning to focus on FBCO capacity and coordination efforts as part of location-specific studies of emergency preparedness efforts.
Table 1. Total Number of Studies Included in the Literature Review, by Topic Area

<table>
<thead>
<tr>
<th>Publication type</th>
<th>Total (n = 17 studies)</th>
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<td>Peer-reviewed journal</td>
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<td>13</td>
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<tr>
<td>Government report</td>
<td>2</td>
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<tr>
<td>Government-sponsored research</td>
<td>5</td>
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<tr>
<td>Policy think tank</td>
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<td>Hurricane Katrina response</td>
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</tr>
<tr>
<td>Florida hurricane response</td>
<td>1</td>
</tr>
<tr>
<td>September 11 response</td>
<td>1</td>
</tr>
<tr>
<td>FBCO preparedness and social service capacity</td>
<td>5</td>
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<table>
<thead>
<tr>
<th>Research methods</th>
<th>Total (n = 17 studies)</th>
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<tbody>
<tr>
<td>Quantitative only (survey, social network)</td>
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<td>Qualitative only</td>
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<tr>
<td>Mixed method (quantitative and qualitative)</td>
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</tbody>
</table>

A mix of quantitative and qualitative research approaches are used to study FBCOs in EPR efforts. Most studies are location-specific and focus in-depth on one location both in emergency preparedness and response. Of the 17 studies conducted since 2000, 7 employ qualitative methods including interviews, case studies, or focus groups. Three studies focus on quantitative methods only (2 surveys and 1 social network analysis). The remaining studies use a mixed-methods approach that includes a survey of FBCOs and a qualitative component. Three of the 9 surveys attempt to obtain a representative sample of FBCOs in a defined geographic area.

**FBCO Pre-Disaster Service Capacity Research Findings**

Given the policy focus of facilitating FBCO involvement to participate in EPR activities, one of the main topics of the research studies is to provide a description of FBCO organizational and service capacity pre- and post-emergency to develop an understanding of what types of service delivery FBCOs can help with. Also, studies focus on FBCOs’ perceptions of inter-organizational coordination among unaffiliated and affiliated FBCOs and the external coordination between the FBCOs and the emergency response community. There are few comprehensive social network assessments establishing the density and quality of FBCO networks and formal and informal linkages to national or local disaster planning efforts.

Congregations and FBOs from across the religious spectrum have a long history of providing services, especially in economically disadvantaged communities. Nationally
representative and multi-site surveys of congregations and FBCO social service organizations have established that the primary services offered by FBOs or congregations are emergency assistance to meet the immediate needs of shelter, food, and clothing (Allard, 2008; Chaves et al., 2009; Wright, 2009).

Many congregations provide these services using small amounts of funding and low numbers of staff. A recent nationally representative survey by Chaves et al. (2009) finds that from 2006 to 2007, more than 80% of congregations provide some level of services; however, only 15% have any paid staff working at least a quarter of the time on the program. Findings from this survey highlight low levels of collaboration between congregations and government agencies (6%) in service delivery. Collaboration between congregations and secular nonprofit organizations (20%) is higher (Chaves & Anderson, 2008).

There are some important differences between FBOs and CBOs in terms of services, organizational capacity, and geographic location. Drawing on a comprehensive survey of FBOs and CBOs, Allard (2008) finds that 88% of FBOs that integrate faith within service delivery provide emergency services compared to 69% of faith-based providers that segment faith from service delivery, and 50% of CBOs. Compared to FBOs that integrate faith into service delivery or FBOs that segment faith from services, CBOs are more likely to provide services (such as mental health, substance use, or employment services) that require trained professional staff. Similarly, FBOs have fewer resources than CBOs although both types of organizations target low-income populations. In urban areas, both FBOs and CBOs are located near their clients; however, faith-integrated organizations are more likely to be located in high poverty neighborhoods and therefore more geographically accessible to low-income residents (Allard, 2008).

**FBCO Surge Service Capacity Research Findings**

Four studies survey FBCOs about services provided during Hurricane Katrina. The results from these studies (presented in Table 2) consistently find that during the response, primary services focused on meeting basic needs such as temporary shelter and the distribution of food, water, clothing, and short-term financial assistance. Drawing on a random sample of FBCOs responding to Katrina, De Vita et al. (2008) finds that 70% of FBCOs provided emergency services, whereas less than half provided long-term services. Approximately one quarter of FBCOs provided direct child care or job training assistance.
Table 2. FBCO Surge Service Capacity Documented in Hurricane Katrina Research—Focused Studies

<table>
<thead>
<tr>
<th>Study Population</th>
<th>Service Capacity in Hurricane Katrina</th>
</tr>
</thead>
<tbody>
<tr>
<td>200 FBCOs responding to Hurricane Katrina (De Vita et al., 2008)</td>
<td>Among FBCOs, 70% provided emergency services such as food, water, clothing, and temporary shelter. Less than half provided long-term services, and less than 25% provided child care or job training. A larger proportion of FBOs (70% to 85%) provided clothing, household goods, food, water, money, or in-kind donations, compared to CBOs (40% to 55%). Two-thirds of FBCOs indicated that they began providing immediate relief during or within the first week. FBCOs located adjacent to the impact area were the quickest to respond compared to FBCOs located within the primary impact area.</td>
</tr>
<tr>
<td>127 FBCOs and 46 in-depth interviews in Louisiana (Hull et al., 2006)</td>
<td>FBCOs provided services in 10 core areas: shelter, food, medical service, personal hygiene, mental health and spiritual support, physical reconstruction, logistics management, transportation, children's services, and case management. Under each of these services, there are several sub-functions. 79% provided some form of shelter to evacuees and volunteers. 85% provided food services (prepared meals, prepared food, or distributed food to communities or other organizations). 62% provided medical service (advanced, basic, or medical prescriptions). 88% provided personal hygiene support (assembled or distributed kits, laundry, provided showers or other hygiene). 87% provided mental health support, including mental health or spiritual counseling (81%). 54% provided physical support (debris removal, mud removal, home repair). 80% provided logistics management, including assessments and distribution and warehousing of supplies. 61% provided transportation (shuttled evacuees and volunteers or evacuated). 50% provided child care (24% provide formal child care, 46% education). 92% provided some form of case management (information, referral, completing forms, direct financial).</td>
</tr>
<tr>
<td>157 FBOs in Baton Rouge (Cain &amp; Barthelemy, 2008)</td>
<td>Of the churches that completed the survey, 87% reported proving services to Katrina evacuees. Of the churches providing services, 73% provided food, 69% financial, 54% clothing, 40% counseling, 24% transportation, 19% child care, and 14% housing, and 43% attempted to reconnect family members.</td>
</tr>
</tbody>
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(continued)
Table 2. FBCO Surge Service Capacity Documented in Hurricane Katrina Research–Focused Studies (continued)

<table>
<thead>
<tr>
<th>Study Population</th>
<th>Service Capacity in Hurricane Katrina</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 FBO shelters in New Orleans (Pant et al., 2008)</td>
<td>Shelters had the capacity to serve from 35 to 441 people. All shelters provided water, food, and shelter. 94% provided at least one additional service beyond basic needs. 81% provided a doctor or nurse. 88% provided telephone access. Other services such as relative tracking, job services, and spiritual support were not uniformly provided.</td>
</tr>
<tr>
<td>Five affiliated FBCOs (GAO, 2008b)</td>
<td>ARC provided 3.4 million overnight stays and 52.6 million meals and snacks. The Salvation Army provided 91,400 loading spaces and 7.7 million meals and snacks. Southern Baptist Convention provided 14.6 million meals. Catholic Charities provided 51 million pounds of food. Estimates that the mass care capacity (sheltering, feeding, bulk distribution of emergency relief items) of ARC would be overwhelmed in a large-scale disaster.</td>
</tr>
</tbody>
</table>

Two other FBCO surveys that are not drawn from random samples find results similar to the De Vita et al. (2008) study for the provision of emergency services. However, these studies find a greater percentage of FBCOs providing medical services and transportation. A survey of churches in New Orleans found that approximately 70% of the churches responding to Hurricane Katrina provided food and financial assistance and 54% provided clothing (Cain & Barthelemy, 2008). Similar to the De Vita et al. (2008) study, child care and transportation were provided by a lower proportion of churches, less than 25%. Another survey of FBCOs finds similar results for FBCO delivery of emergency services and child care but estimates that higher proportions of FBCOs provided transportation (61%), medical care (62%), and mental health services (87%) (Hull et al., 2006). A study based on a smaller sample of FBO shelters indicates that all 16 FBOs provided food and water in addition to shelter. More than 90% of the shelters also provided another service such as medical care and telephone services. Taken together, these studies highlight a consistent picture of FBCOs meeting basic human needs. However, there is variation in the non-emergency assistance services provided. Access to services beyond basic needs is likely to depend more on the immediate and varied skills of FBCO staff and volunteers, the location, and the partnerships developed.

The De Vita et al. (2008) study notes some differences in the FBOs and CBOs responding to Katrina in terms of the overall services provided, length of service delivery, staffing, and funding sources. Of the FBCOs surveyed, a larger proportion of FBOs (70% to 85%) provided emergency services, such as clothing and household goods, compared to CBOs (40% to 55%). Post-Katrina, FBOs on average delivered services to families for less
time (less than 3 months) compared to CBOs (1 year). A greater percentage of CBOs used paid staff in response efforts, whereas FBOs relied primarily on volunteers. FBOs were more likely to receive private donations whereas secular organizations were more likely to receive government funding, a finding that is consistent with the Cain and Barthelemy (2008) study. Similarly, the Pant et al. (2008) shelter study found that 75% of FBO shelters were funded by private donations, though 63% also received funding assistance from ARC.

Due to the lack of data collection and standard measurement of FBCO capacity, an analysis of affiliated FBCOs’ capacity conducted by the GAO illustrates the challenges of measuring the true surge capacity of NGOs (GAO, 2008b). Based on preliminary research, the GAO estimates that the large affiliated FBCOs such as ARC will not have the mass care capacity to shelter and feed people in the event of a large-scale disaster. To address the challenges of measuring FBCO capacity, as part of a gap analysis, FEMA will include affiliated and unaffiliated FBCOs in estimating service capacity (DHS, 2009a).

**FBCO Collaboration in Preparedness**

Table 3 indicates that 10 of the 17 studies examined a variety of FBCO collaboration activities in preparedness efforts. Some of the national FBCOs have agreements in place that specify roles and functions when working together (GAO, 2008b). For example, GAO (2008b) reports that since 2000, the Southern Baptist Convention has had a feeding agreement with ARC specifying that the food cooked in their mobile kitchens will be distributed by ARC transportation. At the same time the GAO (2008b) noted that the national agreements were not made clear to the local chapters so that many locally based volunteers were unaware that the national offices had a mutual aid agreement in place and therefore did not coordinate efforts.

Other studies indicate that few affiliated and local FBCOs had formal collaborations with each other or with EPR officials, either pre- or post-Hurricane Katrina. Studies also indicate that churches and local FBO shelters that responded to Hurricane Katrina rarely had disaster plans or formal collaborative agreements in place (Pant et al., 2008; Trader-Leigh, 2008). One study finds that FBCOs specifically located in high poverty neighborhoods have limited linkages to larger disaster relief agencies (Zakour & Harrell, 2003). This study suggests that outreach to the smaller FBCOs co-located with and providing services to low-income families is needed.

In the Post-Katrina era, studies indicate low collaboration and perceptions of limited opportunities for formal collaboration among FBCOs and between FBCOs and EPR state and local planning officials (Andrulis, Siddiqui, & Purtle, 2009; Chandra & Acosta, 2009). Two-thirds of FBCOs in the San Francisco area have not entered into formal preparedness/response agreements with other FBCOs or with city and county government, or participated in an interagency drill (Ritchie et al., 2008). Despite the limited collaboration in planning efforts, more than two-thirds of FBCOs surveyed are interested in joining a preparedness group or learning more about preparedness activities (Ritchie et al., 2008).
### Table 3. FBCO Collaboration in Preparedness Efforts

<table>
<thead>
<tr>
<th>Study Population</th>
<th>FBCO Collaboration in Preparedness</th>
</tr>
</thead>
<tbody>
<tr>
<td>67 organizations providing disaster-related social services (Zakour &amp; Harrell, 2003)</td>
<td>Organizations located in high-poverty neighborhoods had limited linkages to larger disaster-relief agencies (location not reported).</td>
</tr>
<tr>
<td>47 NGOs in New Orleans (Chandra &amp; Acosta, 2009)</td>
<td>After Katrina, NGO roles have not been formalized or integrated into local and state planning efforts.</td>
</tr>
<tr>
<td>Eight case studies of state faith-based and community liaisons (FBCLs) (Winston, Person, &amp; Clary, 2008)</td>
<td>Post-Katrina, three out of the eight FBCLs pursued building networks to increase FBCO participation in disaster preparedness. Collaboration is occurring in states (Florida, Texas, Alabama) that were impacted by Katrina.</td>
</tr>
<tr>
<td>Literature review and 16 key informant interviews in CA (Andrulis, Siddiqui, &amp; Purtle, 2009)</td>
<td>Limited collaboration occurs between agencies and across sectors in California. Web review found that only 10% of CBOs indicate collaboration with emergency preparedness efforts, although some collaborative efforts include many agencies not listed on Web sites. Eight out of 16 key informants indicated lack of communication, joint emergency plans, and preparedness workshops between EPR and CBOs.</td>
</tr>
<tr>
<td>Five affiliated national FBCOs and four local chapters (GAO, 2008b)</td>
<td>ARC has mutual aid agreements with The Salvation Army, Southern Baptist Convention (SBC), and Catholic Charities and 39 organizations with responsibilities for mass care under ESF-6. As an example, a feeding agreement exists wherein SBC prepares meals in mobile feeding units and ARC distributes them using emergency response vehicles. Informal agreements are also in place. Four major affiliated national FBCOs have taken steps to improve coordination with each other and governmental agencies. ARC has started to strengthen local partnerships.</td>
</tr>
<tr>
<td>81 FBCOs randomly sampled in San Francisco (Ritchie &amp; Tierney, 2008).</td>
<td>FBCOs have established intra-organizational linkages rather than inter-organizational linkages. More than two-thirds of FBCOs had not entered into formal preparedness/response agreements with other FBCOs or city or county government. Two-thirds had not engaged in an interagency or citywide drill. Despite limited partnerships, more than two-thirds of FBCOs are interested in joining a preparedness group or learning more information about disaster preparedness.</td>
</tr>
<tr>
<td>Five affiliated FBCOs and FEMA (GAO, 2008a)</td>
<td>NVOAD is successful at coordination by building relationships among members and sharing information. Generally target assistance to new members to better integrate them into network. Help standardize planned resources to use in response efforts.</td>
</tr>
</tbody>
</table>
Table 3. FBCO Collaboration in Preparedness Efforts (continued)

<table>
<thead>
<tr>
<th>Study Population</th>
<th>FBCO Collaboration in Preparedness</th>
</tr>
</thead>
<tbody>
<tr>
<td>26 interviews in 9 cities and 1 focus group of participants in Katrina response (Trader-Leigh, 2008)</td>
<td>Pre-Katrina, most FBCOs in the Gulf Region did not have pre-existing emergency response plans in place.</td>
</tr>
<tr>
<td>66 Emergency Managers (1 in each FL County), interviews with disaster victims and content analysis of articles about FL hurricane response (Kapucu, 2008)</td>
<td>In Florida, several community coordination strategies were used by EPR officials during the 2004 hurricane season including holding pre-season coordination meetings with CBOs (80%). Also, EPR planners held regular meetings on hurricane-related issues with public officials and CBOs (77%) and engaged in pre-season coordination with local media (70%). Emergency managers’ use of community coordination strategies was positively correlated with ratings of positive community feedback response to Florida hurricanes in 2004. 71% of community respondents rated public managers as able to communicate critical information in a timely manner to CBOs.</td>
</tr>
<tr>
<td>16 FBO shelters in New Orleans (Pant et al., 2008)</td>
<td>Only 4 of the 16 (25%) shelters had disaster plans before Katrina, and staff at 2 of the 4 received training from ARC.</td>
</tr>
</tbody>
</table>

Focused on gaining the perspectives of emergency planners in each Florida county about CBO coordination strategies, Kapucu (2008) found that managers perceive high levels of pre-hurricane-season coordination with CBOs, public officials, and local media. Interviews with community respondents and the emergency management system’s positive media portrayal highlight the community’s agreement with these high ratings of emergency management coordination activities. Although these findings differ from other studies previously described, the disparate findings indicate that there is likely local, regional, and situational variation in CBO coordination activities. This study does not distinguish between FBOs and CBOs, or affiliated and unaffiliated organizations, so it may be that local FBCOs are not represented in the study’s findings.

Taken together, the 10 studies indicate that there is room for improvement in the coordination of activities as part of emergency planning efforts. The GAO finds some evidence of the improvement of coordination activities between the larger nationally affiliated FBCOs such as ARC and local partners and FBCOs. Also, the communication and information sharing among NVOAD members were found to be improving, although some of the long-time members mentioned a focus of resources on newer members (GAO, 2008a). At the state level, faith-based liaisons in locations with a high number of Katrina evacuees began the process of forming FBCO networks to help identify capacity levels and share information (Winston, Person, & Clary, 2008). These efforts may or may not be sustained due to budget and staffing

cuts at ARC and NVOAD (GAO, 2008b) and the reassigning of state faith-based and community liaisons to other non-disaster–related tasks.

**FBCO Collaboration in Hurricane Katrina Response Efforts**

Table 4 highlights seven studies that examined FBCO collaboration in Hurricane Katrina response efforts. All studies find that FBCOs collaborated with each other to some degree in response activities (De Vita et al., 2008; Evans, Kromm, & Sturgis, 2008; Hull et al., 2006; Pipa, 2006). One study finds that FBCO collaboration activities did not differ by whether the FBCO was affiliated with a larger national disaster (e.g., ARC) or social service agency (e.g., Child Welfare League of America) (De Vita et al., 2008). Although studies highlight inter-organizational collaboration, one comprehensive mixed method study finds little FBCO collaboration with the formal emergency response system (De Vita et al., 2008; Pipa, 2006). Although there may not have been high overall levels of collaboration between FBCOs and EPR systems during the Katrina response, a qualitative research study finds that African American ministers helped broker relationships with the emergency response system, indicating that there is likely to be variation in collaboration activities, depending on the characteristics of FBCOs examined.

Although most studies do not distinguish between affiliated and unaffiliated FBCOs, two studies examined coordination activities among affiliated FBCOs and found mixed results. The Government Accountability Office (GAO, 2008a) found that NVOAD’s role of coordinating its FBCO members and providing information and communication was not effective during Hurricane Katrina, but suggests that NVOAD is taking steps to correct the communication issues that arose during the Katrina response. In contrast, although ARC’s service delivery role during Hurricane Katrina has been criticized (GAO, 2005), one study included on Table 4 of a small number of FBO shelters finds that a core group (60%), actively coordinated with ARC, were designated as ARC shelters and received ARC resources (Pant et al., 2008). Although ARC was an important partner, Pant et al. (2008) also find that FBO informal networks also helped in the coordination of sheltering activities by transporting supplies. Generally, these informal networks were formed ad hoc during the response by personal relationships and word-of-mouth.
Table 4. FBCO Collaboration in Hurricane Katrina Response Efforts

<table>
<thead>
<tr>
<th>Study Population</th>
<th>FBCO Collaboration in Response Efforts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Five affiliated FBCOs and FEMA (GAO, 2008a)</td>
<td>NVOAD’s information coordination and communication strategies were found not to be effective during Katrina.</td>
</tr>
<tr>
<td>26 FBCO interviews in 9 cities and 1 focus group of participants in Katrina response (Trader-Leigh, 2008)</td>
<td>African American ministers helped to broker relationships with the larger disaster-response community during Katrina.</td>
</tr>
</tbody>
</table>
| 16 FBO shelters responding to Katrina (Pant et al., 2008) | Shelters worked with both ARC and informal networks to coordinate services.  
More than 60% of the shelters worked with ARC as the central coordinating body.  
88% attempted to become ARC-affiliated and 75% were granted ARC shelter status. All were certified when opened or within 1 week.  
Half worked with informal networks to coordinate sheltering activities.  
81% of the FBOs were contacted by formal disaster response agencies such as ARC or FEMA, and 9 out of the 13 found the contact helpful to service delivery.  
All shelters used informal networks to help assist with service delivery and contacted these groups based on personal relationships and word-of-mouth referrals.  
Help from informal networks included transport and delivery of supplies. |
| 8 FBCOs responding to Hurricane Katrina (De Vita et al., 2008) | FBCOs collaborated with each other.  
Much lower FBCO collaboration with formal response system.  
Cross-group communication was minimal among groups providing emergency assistance, especially concerning volunteers and donation distributions. |
| 200 FBCOs responding to Hurricane Katrina (De Vita et al., 2008) | Two-thirds of FBCOs collaborated with other FBCOs groups.  
There were no significant differences in collaboration between FBCOs affiliated or unaffiliated with a larger national agency.  
Few FBCOs worked with governmental agencies. |
| FBCOs in New Orleans after Hurricane Katrina (Pipa, 2006) | There was a lack of a national or local coordinating structure to formally integrate FBCOs in response. |
| 80 FBCOs in Louisiana (Evans, Kromm, & Sturgis, 2008) | FBOs were willing to cross faith lines and form partnerships and interfaith coalitions during the Katrina response.  
FBCOs were able to mobilize resources by drawing on support from a network of FBOs throughout the country. |
| 127 FBCOs and 46 in-depth interviews in Louisiana (Hull et al., 2006) | FBCO establishing partnerships with each other to meet complementary needs was noted as a best practice.  
Partnering was noted in four service areas: food distribution, logistics management and services, children’s services, and case management. |
Identified FBCO Strengths

The empirical research literature identifies several strengths of FBCOs in EPR. One of the main successes cited consistently across government and policy reports and peer-reviewed articles is the strong participation of the FBCO sector in the response to Hurricane Katrina. Other successes of FBCO in emergency preparedness and response noted in the empirical literature include:

- a long history with and high levels of experience providing short-term emergency services that match the services needed in the acute phase of a disaster;
- quick response time;
- flexibility to serve needs as they arise, such as family reunification;
- specialization in a small number of service needs to optimize resources;
- ability to form ad hoc partnerships with other FBCOs to serve complementary needs (e.g., making food and delivering to FBCO shelters);
- close proximity to high hazard risk areas and high poverty locations in urban and rural areas;
- perceived trust and legitimacy among community members;
- strong motivation and commitment to helping families in times of crises;
- ability to mobilize private sources of immediate funding from volunteer base or national affiliated organization (with some connection to longer-term funding opportunities through local foundations);
- ability to address religion and spirituality, identified as key coping mechanisms in response to disasters; and since Katrina, increased development of disaster plans and expressed interest in training.

Identified FBCO Limitations

A consistent limitation of FBCOs responding to Hurricane Katrina was the lack of established relationships with the emergency response system, which led to poor cross-sector collaboration. The lack of coordination led to several challenges with implementing response efforts and the inability to meet some needs, for example in waste management and sanitation removal. Other limitations to FBCO participation in EPR include:

- low staff and funding levels pre-disaster;
- lack of prior emergency response experience, training, and credentialing;
- high costs (monetary and staff burn out);
- limited funding for preparedness and limited reimbursement for FBCO participation in emergency response;
- constrained capacity to deliver a high volume of services in the long term;
- limited number of staff designated with responsibilities for coordinating disasters or participation in preparedness efforts;
limited formal partnerships developed with EPR officials that coordinate activities; and
limited experience and systems developed to manage the high volume of donations and
volunteers.

Research Limitations
Although FBCOs’ successes are generally agreed upon across all the identified studies, there are several methodological limitations that should be noted when interpreting the research results. For example, there were no negative FBCO responses noted in terms of service delivery or participation in the Hurricane Katrina response effort; however, only a limited number of studies include interviews with EPR officials to gain their perspectives on FBCO response. Other methodological limitations of the current literature include the following:

Affiliated and unaffiliated FBCOs are grouped into the same category.
Most study populations are drawn from small and non-random samples.
In several reports, only limited descriptions of the sampling strategy are provided. For the qualitative studies, often the respondent selection process and the types of stakeholders interviewed are unclear.
There are limited interviews that represent the national, state, and local EPR perspectives on FBCO preparedness and response.
Studies are cross-sectional (one-time interviews).
There is a lack of data or FBCO records about services provided and clients served during Hurricane Katrina.
Limited data are collected that allow for the estimation of FBCO surge capacity.
Studies do not go beyond description of FBCO preparedness or response to examine effectiveness.

Examples of Program Approaches
Local-level FBCOs responded to some recent large-scale disasters in unprecedented numbers. Because of their often ad-hoc participation in disaster response efforts developed to meet immediate needs and fill in service gaps, a comprehensive program model to engage FBCOs in emergency planning and response management activities has not been implemented. The research and policy literature highlights that after Hurricane Katrina both formal and informal approaches were developed to capitalize on the strengths of FBCOs’ recent participation in disaster response and relief.

Examples of four emerging approaches to increasing FBCO participation in EPR include (1) providing EPR and FBCO staff with training programs that raise awareness about each other’s activities and, as a second step, provides direct service training opportunities; (2) building FBCO capacity through funding and technical assistance based on assessed organizational needs; (3) coordinating emergency planning and network-building efforts
between state/local emergency management groups, national voluntary agencies such as ARC and NVOAD, and local FBCOs; and (4) developing systems to manage volunteers, manage goods distribution, and keep track of community assets, clients, and expenses. The strategies identified in the document review are not mutually exclusive and include some overlap. For example, in practice, providing linkages to training activities also helps build relationships necessary for collaboration and the coordinating of EPR activities. The strategies represent different components that can add up to a comprehensive approach.

This section provides examples of emerging program approaches identified from the empirical research literature, Internet searches, and expert recommendations. Some of these program approaches have been formally evaluated, but most have not. The emerging approaches described in this section are illustrative of examples developed in the field and are not intended to be exhaustive or to serve as recommendations. Many initiatives designed to increase FBCO participation include multiple program approaches.

1. Providing Training Programs and Educational Materials

Training Domestic NGOs Using International Humanitarian Relief Curriculum

In 1997, the Sphere Project was created by international NGOs and the International Red Cross and Red Crescent movement to achieve two objectives. First, to improve the quality of assistance offered to those affected by disaster and to enhance the accountability of the humanitarian system in disaster response, the project developed a set of universal minimum standards in humanitarian relief services. The second objective was to train NGO staff on these minimum standards of care.

The project developed a training program specifically to educate NGO staff working in global relief efforts about how to achieve these minimally acceptable relief standards for water, sanitation, and hygiene promotion; food security, nutrition, and food aid; shelter and settlement; and health services. This Handbook has been modified over time to identify additional needs (such as educational assistance) of people affected by humanitarian and natural disasters. The Sphere Project offers trainings to NGO staff in domestic and international settings, e-learning, and training of trainers. Training modules include the humanitarian charter, the project cycle, disaster preparedness, and health and nutrition.

Web site: http://www.sphereproject.org/

Increasing Awareness of EPR and Training Chaplains To Be Emergency First Responders

Several chaplain education programs have integrated EPR educational modules to train chaplains to participate at different levels of disaster response. Several of these programs are geared toward chaplains who work with law enforcement agencies, but there are also efforts to train chaplains in basic disaster counseling skills for work within the incident command.
structure (Koenig, 2006). Training for chaplains does not appear to be standardized and can include modules from a variety of sources, including ARC, NIMS, or “homegrown” curricula. In addition to training, guidebooks specifically targeted to religious leaders are also available. These guidebooks typically explain existing disaster plans, describe how to develop disaster plans for congregations, and provide information about disaster mental health needs.

Examples of training programs and guidebooks are provided in the following Web sites:

http://firstresponderchaplains.org/
http://www.ipfca.org/training.asp
http://www.homeland-crisis.org/

Increasing EPR Staff Awareness of Spiritual Care Needs During Disasters

In 2006, the Emotional and Spiritual Care Committee of NVOAD designed a guide aimed at educating emergency managers about the emotional and spiritual needs of responders and local residents during disasters and various care responses to these needs. Spiritual needs include struggles of faith and meaning, and the desire for religious/spiritual resources and rituals. Emotional needs include the need to gather with mourners. The guide provides suggestions of the types of faith-based providers who can help provide spiritual care. Faith-based providers can include prepared chaplains, clergy, and spiritual leaders who are part of pre-planned response efforts. Also, the guide makes clear to EPR staff that community faith leaders can be harnessed at different points during a response effort. One example includes recruiting FBO staff to visit and talk to people in shelters about spiritual or emotional concerns that they want to discuss.

Web site: http://www.nvoad.org/Portals/0/Light_Our_Way_LINKS.pdf

Linking FBCOs to Trainings Conducted by FEMA and Nationally Affiliated Voluntary Organization Training

Citizens Corps, started in 2002, is a FEMA-coordinated grassroots strategy that aims to join together government and community leaders to involve citizens in emergency preparedness and resilience activities. The program helps coordinate volunteer activities and provides training opportunities through the Community Emergency Response Team (CERT) program. Started in 1993, CERT local programs educate individuals about disaster preparedness and then train them in basic response skills, such as fire safety and disaster medical operations. The program is taught in the community by a trained team of first responders who have completed a CERT train-the-trainer course conducted by a state training office or FEMA’s Emergency Management Institute.

In 2009, FEMA reported that increased funding for citizen preparedness is available to states, which in turn provide funding to local governments for starting and expanding CERT training. A recent nationally representative survey conducted by ICF Macro International found
that 10% of respondents participated in CERT training in 2003 and 2007 (DHS, 2009b). A
greater percentage of respondents attended CPR training (35%), first aid skills training (33%),
or a meeting about how to be prepared for a disaster (23%). Over two-thirds of respondents
indicated willingness to participate in a 20-hour training course. Approximately 23% of
individuals had given some time in the past 12 months to support emergency responder
organizations such as Neighborhood Watch, ARC, or local police or fire departments.
Respondents who took trainings or had given up some time to support organizations were
significantly more likely to be “somewhat religious” (24%) than to be “barely religious” (17%).


Since Hurricane Katrina, national voluntary organizations such as ARC have started to
offer more trainings targeting minority populations and churches. For example, one partnership
to provide training opportunities includes the National Association for the Advancement of
Colored People (NAACP) and ARC. In 2006, in the aftermath of Hurricane Katrina, NAACP
partnered with ARC to provide free disaster relief training in several Gulf States. It is reported
that the partnership came about due ARC’s limited response to address the needs of minority
communities (Raeschaun, 2006). NAACP members are recruited at the NAACP regional and
state conferences and from within the organization’s branches and college chapters. Religious
leaders from African American churches interested in certifying churches as disaster relief
providers are also targeted for ARC trainings. Recently, the National Baptist Convention
signed a memorandum of understanding with ARC to provide an orientation and equipping
exercises to the National Baptist Convention regional and state disaster coordinators (Smith,
2009).

One state-level initiative to increase training of faith communities is the Missouri Faith-
Based Homeland Security Initiative. The primary goal of the initiative is to help local faith-
based groups obtain training and information needed to sustain communities in the first 72
hours of a large-scale crisis. The initiative provides information and training to communities;
encourages faith-based groups, churches, and community members to take ARC and CERT
trainings; and emphasizes communication plans as essential to emergency response and
relief.


2. Building FBCO Capacity in EPR Through Funding and Technical Assistance

Local Intermediary Organizations Linking FBCOs and EPR

Collaborating Agencies Responding to Disasters (CARD) is a group of more than 250
nonprofit organizations serving vulnerable groups in multiple counties around San Francisco
and Oakland, California, that collaborate to help develop disaster preparedness plans and
services. CARD trains and prepares CBOs for disasters and links local CBOs with state and
county relief agencies. The program takes a bottom-up approach, tailoring programs to diverse
populations while also adhering to the state-mandated Standardized Emergency Management System. Along with ARC and school districts, CARD has a seat at the Alameda County Office of Emergency Services Emergency Operations Center (Lichterman, 2000). Funding for CARD initially was provided by ARC, but it now receives grant money from other sources as its presence has grown.

Andrulis, Siddiqui, and Purtle (2009) report that CARD has been successful in building trust with constituents and has used its status in the community to encourage partnerships between community organizations and the public sector. It has also played the role of liaison between CBOs and the county public health and emergency management agencies. One study found that CBO staff who enrolled in the CARD trainings believe that some of the information in the trainings, when compared to the basic information provided in ARC trainings, would be more inspiring in terms of mobilizing community members (ICF International & CirclePoint, 2008).


Federal Capacity Building Grants Targeting FBCOs

Although not directly funding FBCOs in EPR activities, the U.S. Department of Health and Human Services, Administration for Children and Families (ACF) established extensive capacity building programs targeting FBCOs (Wright, 2009). The Compassion Capital Fund (CCF), created in 2002, provides grants and intensive training to help FBCOs increase their effectiveness, enhance their ability to provide social services, expand organizations, diversify funding sources, and create collaborations.

CCF includes two approaches to capacity building: direct targeted capacity grants (known as “mini grants”) to FBCOs and subawards to FBCOs through intermediaries. The Targeted Capacity Building Program provides grants of up to $50,000 to expand FBCO capacity in five areas: leadership, organization, program development, revenue development, and community engagement. Organizations have a range of programmatic focus. Some promising practices identified include intermediaries that draw on their network of resources to introduce grassroots organizations to potential partners and funders that the organizations would not otherwise have access to, attempts to increase effectiveness of neighborhood coalitions by mobilizing new organizations to join the groups, and assistance to organizations in developing relationships and training to increase their impact (Fink & Sipe, 2008).

The CCF Demonstration Program funds intermediary organizations that act as bridges between the government and small organizations by providing training, technical assistance, and capacity building subawards. Grantees’ need to address specific social service priority areas and disaster relief efforts was not included as a programmatic focus. A survey of grantees showed that 88% of FBCOs receiving subawards and training reported improved outcomes for clients, and 90% reported an increased level of quality in services delivered (Abt Associates, 2007). An impact study is currently under way, so no results are yet available.
Although the CCF programs do not target specific program objectives, a wave of new funding, begun in 2009 and called the Strengthening Communities Fund (SCF), includes a focus on economic recovery efforts. The goal of SCF is to help nonprofit FBCOs contribute to the economic recovery and help ensure that information and services that are part of the American Recovery and Reinvestment Act of 2009 reach disadvantaged and hard-to-serve populations. SCF is made up of two separate grant programs: (1) a nonprofit capacity building program (typically $1,000,000) and (2) a state, local, and tribal government capacity building program (typically $250,000). Through this grant program, FBCOs will be included in a performance management system. A program evaluation is in the planning stages.

3. Facilitating FBCO and EPR Coordination and Networks

State-Level Faith-Based and Community Initiatives Linked to EPR Activities

Across the country, much of the collaboration efforts between state agencies, FBOs, and CBOs for disaster preparedness are unfunded (Winston, Person, & Clary, 2008). However, several states have created faith-based and community liaison (FBCL) positions within the state government that have responsibility for linking FBCOs to state agencies and providing networking and education opportunities. A growing number of state-level FBCLs focus on increasing coordination between state and local governments and FBCOs in disaster response efforts (Hurst & George, 2009). A study conducted by Mathematica Policy Research reports that three out of eight state-level faith community liaisons studied focus on disaster preparedness activities such as developing volunteer databases and lists of FBCO capacities, often in areas where natural disasters are more likely to occur, such as Florida, Texas, and Alabama (Winston, Person, & Clary, 2008).

One example of an FBCL focused on EPR activities is the Governor’s Faith-Based and Community Initiatives (GFBCI) in Alabama. A key focus of the GFBCI has been the integration of the state’s FBCO and volunteer communities into public emergency preparedness and response activities. GFBCI’s office manages Alabama Department of Homeland Security (ADHS) grants to Alabama Civilian Corps Councils, which are part of a locally focused disaster preparation and relief program. It also conducts its own Volunteer in Service to America (VISTA) disaster response and recovery team and contributes to “Be Ready Alabama” activities that help community members prepare for disasters. During a declared emergency, GFBCI takes on the role of operational center for managing volunteers and donations. GFBCI developed a computer database to link volunteers and donations to various organizations affected by Hurricane Katrina.

Local Coordination Between FBCOs and EPR

Following major hurricanes and storms in the 1990s, FBOs across Florida joined to form the Florida Interfaith Networks in Disaster (FIND). Currently, FIND is a network of FBOs; state, local, and national disaster relief and recovery groups; and community volunteers that work to
promote networking to prepare communities in Florida for disaster and provide spiritual aid. FIND helps faith leaders identify and address the needs of their communities, provides access to resources, and develops and supports community interfaith/interagency networks (CIINs). Providing quarterly workshops on disaster related topics, FIND builds networks across sectors such as businesses, faith organizations, allied social service agencies, and governmental emergency management agencies. FIND also helps members understand mitigation, identifies relevant projects, brings together key stakeholders (including the private sector), and helps access resources to facilitate mitigation plans.

Web site: http://www.findflorida.org/index.php?option=com_frontpage&Itemid=1

Following a spontaneous response to shelter three waves of evacuees from Hurricane Katrina, a local “mega-church” in Shelby County, Tennessee, formed a collaborative relationship with the Shelby County Office of Preparedness. To facilitate the coordination of disaster planning and response efforts with emergency management staff, the pastor, who is also a chaplain for the sheriff’s office, is helping the Shelby County Office of Preparedness to network with local churches. The approach is to have emergency management staff meet with each of the local pastors one-on-one to build trust and mutual understanding of church capacities and responsibilities in emergencies (C. Strickland, personal communication, November 18, 2009).

The Fritz Institute’s BayPrep program is developing a “community of practice” to facilitate collaboration, communication, and innovative partnership among practitioners from public, private, nonprofit, and foundation sectors. The goal is to assess and develop evidence-based standards for community preparedness that will help nonprofit and FBOs better partner with first responders and emergency management infrastructures.


Although there is limited information on the roles of historically black colleges and universities in disaster relief, these institutions have been noted as a potential local partner in helping minority communities prepare for weather emergencies and other hazards. These institutions can help educate students and communities about preparedness and response efforts. For example, in 2006, Tougaloo College’s Center for Civic Engagement and Social Responsibility hosted a faith-based disaster recovery workshop to teach first responders methods and best practices for providing services to individuals affected by disaster. The college provided the 2-day workshop in conjunction with the Jackson Area Long-Term Recovery Taskforce. The school also hosted a workshop titled “Response to Community Crisis: Lessons from Recent Hurricanes.” The workshop sought to promote cross-sector dialogue to determine response needs, provide a forum for presentation of best practices, and generate research projects on problems generated during disasters and strategies for promoting more effective methods of preparing for these problems.
4. Developing Systems to Manage Volunteers, Clients, and Organizational Assets

Volunteer Reception Centers

Volunteer Reception Centers (VRCs) are pre-determined locations where volunteers can be efficiently processed and referred to organizations in need of services. VRCs help in registration/orientation, data entry and coordination, volunteer identification, safety training, and facilities management. The Volunteer Management Committee of NVOAD recommends guidelines to establish procedures to handle unaffiliated volunteers within the VRC context.

Web site:  
http://www.nvoad.org/Portals/0/final%202008%20Managing%20Spontaneous%20Volunteers%20LR.pdf

Using the VRC approach during times of disaster, the Points of Light Foundation and the Volunteer Center National Network provide training and technical assistance on managing spontaneous volunteers through an agreement through the Corporation of National and Community Service (CNCS), a public-private umbrella agency that administers national community service programs. The training is intended for volunteers that participate in CNCS-sponsored programs (primarily AmeriCorps*VISTA), CNCS State Service Commissions, and national and state Voluntary Organizations Active in Disaster (VOAD). The training prepares participants to manage spontaneous volunteers and to assist at VRCs that process, screen, and manage spontaneous volunteers. The training includes lessons on disaster terminology and concepts, volunteer management practices, and a VRC simulation exercise.

Web site:  
http://archive.pointsoflight.org/programs/nsdt/

Virtual Warehouses

The Faith-Based and Community Initiative in Florida (called “Compassion Florida”) is located in the private, nonprofit Volunteer Florida Foundation (VFF), which was established by the Governor’s Commission on Volunteerism and Community Service. In 2004, following a number of hurricanes, the Governor established a recovery fund, “Florida Hurricane Relief Fund,” within VFF. A donation of goods and services component of the recovery fund includes a “virtual warehouse” called Neighbors to the Rescue (NTR). NTR was created to support hurricane recovery by creating a network of community-based volunteers that help people recover from disasters, and by developing systems for collecting and distributing goods and services. The virtual warehouse is a Web-based system where items and volunteer services can be listed and matched with needs. Once a match is made, NTR volunteers (often from FBCOs) contact the donor and arrange for the transfer.

Web site:  
http://www.neighborstotherescue.com/
**FBCO Asset Mapping**

Following the attacks of September 11, the NGO New York Disaster Interfaith Services (NYDIS), was established to coordinate recovery services and resources to best prepare for future disasters. NYDIS was able to create a communication network among a group of FBOs and establish memorandums of understanding with the city Office of Emergency Management (OEM) and the Human Services Council of New York City. To catalog the capacity of the local FBOs and also share information with the OEM, NYDIS developed a Web-based data management tool called HOWCALM (House of Worship Communitywide Asset and Logistics Management). This database lists churches and other FBOs, their assets, social services offered, expertise within congregations, and homebound congregants. Despite the planning benefits of this system, challenges with the data system include significant debt from software development and concerns about privacy, since the resource lists private contact information (Hurst & George, 2009).

Web sites: [http://www.nydis.org/index2.html](http://www.nydis.org/index2.html) and [http://www.n-din.org/download/HOWCALM%20EM.pdf](http://www.n-din.org/download/HOWCALM%20EM.pdf)

**Federal Disaster Case Management Systems**

The U.S. Department of Health and Human Services, Administration for Children and Families’ (ACF) disaster case management system (DCM) was established by the Post-Katrina Emergency Reform Act of 2006. ACF will deploy DCM within 72 hours of notification of a disaster, and DCM will remain in effect for 30 to 180 days. The process begins with meetings to coordinate federal, state, and local officials to assess initial direct service needs and to determine how the ACF DCM program can best support the state. These meetings cover the service needs of families affected by disasters and identify local organizations unaffected by the disaster to provide referrals. A national partner, contracted by ACF identifies, trains, and coordinates regional teams of paid and unpaid volunteers to provide initial triage and disaster case management services. The national partner is responsible for setting up a call center where victims can call to request DCM services, including needs assessments and disaster recovery plans. DCM staff will have a listing of local community resources for referrals that is verified regularly for accuracy. If there is power, there is a computerized case management system. In the event of a power outage, paper forms are used and the information is entered into the computerized system at a later time. At the end of the period, ACF will help transition DCM to existing state resources or a FEMA-funded, state-administered DCM program.


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**Summary of Research Implications for Program Development**

Since Hurricane Katrina, several formal and informal practices and programs emerged to increase FBCOs’ participation in EPR activities. Each study in this review includes
recommendations for further program development to facilitate FBCO participation. There is broad agreement across studies that FBCOs should supplement and not replace governmental activities. The recommendations reflect a continuum of policy and program options ranging from informal linkages to dedicated funding sources.

Recommendations include the following:

*Increase EPR training opportunities* for local FBCOs and cultural competence training for first responders, emergency managers, and FBCOs.

*Compile resource directories and databases of FBCO service provider capacity* to help EPR staff gain a better understanding of FBCOs that will help with emergency planning and response.

*Create a Faith-Based Community Primer Manual* to map out the EPR process and provide suggestions for how to understand interactions with government and first responders.

*Offer educational and information sharing opportunities* by establishing listservs, newsletters, Web sites, topical presentations, and networking opportunities that will encourage communication and collaboration.

*Increase FEMA’s coordinating and outreach role* by increasing the number of FEMA voluntary agency liaisons (VALs) or restructure FEMA staff to increase coordinating role with FBCOs.

*Increase the communication and coordination within affiliated FBCO disaster relief agencies* to increase local affiliate staff’s knowledge of pre-existing agreements and partnerships, and establish more effective communication between the larger FBCOs within NVOAD.

*Consider outreach efforts by local chapters of the large affiliated FBCOs* to local unaffiliated FBCOs to help build local capacity and widen the geographic service delivery range to target vulnerable areas.

*Provide dedicated funding sources to FBCOs* to directly increase service capacity.

*Clarify FBCO eligibility for DHS federal funding* and allow FBCOs to apply for Small Business Administration loans for operating losses sustained during a disaster.

*Streamline the reimbursement process for FBCOs* to make it easier for FBCOs to apply for funds to cover response costs and decrease state match requirements for block grants to help fund recovery efforts.

*Create a high level commission* comprised of senior ranking members of FEMA, ARC, and NVOAD to improve FEMA coordination with local FBCOs.

References


Appendix 1
Background on Emergency Preparedness and Response Organizations and Emergency Support Functions
### Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members Resource Directory

<table>
<thead>
<tr>
<th>Agency</th>
<th>Function</th>
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<tbody>
<tr>
<td><strong>NVOAD</strong></td>
<td>Facilitates and encourages collaboration, communication, cooperation, and coordination and builds relationships among members while groups plan and prepare for emergencies and disaster incidents. Assists in communicating to the government and the public the services provided by its national member organizations. Facilitates information sharing during planning, preparedness, response, and recovery after a disaster incident. Provides members with information pertaining to the severity of the disaster, needs identified, and actions of volunteers throughout the response, relief, and recovery process.</td>
</tr>
<tr>
<td><strong>Adventist Community Services (ACS)</strong></td>
<td>Distributes relief items such as drinking water, groceries, clothing, and more. Provides warehousing and other donation coordination services such as Points of Distribution (PODs) centers. Operates volunteer centers where community members can volunteer during disaster response. Provides victims with emotional and spiritual counseling.</td>
</tr>
<tr>
<td><strong>American Baptist Men/USA</strong></td>
<td>Provides cleanup, repair, and initial rebuilding. Short-term volunteers work cooperatively with Church World Service. Provides financial assistance to victims during both the relief and recovery stages. Operates volunteer centers to serve as clearinghouses for relief teams.</td>
</tr>
<tr>
<td><strong>American Radio Relay League (ARRL)—Amateur Radio Emergency Services</strong></td>
<td>Operators set up and run organized communication networks locally for governmental and emergency officials, as well as noncommercial communication for private citizens affected by the disaster. They activate after disasters have damaged regular lines of communications through power outages and destruction of telephone, cellular, and other infrastructure-dependent systems. ARRL volunteers serve as communications volunteers with local public safety organizations. In addition, in some disasters, radio frequencies are not coordinated among relief officials; therefore, amateur radio operators step in to coordinate communication when radio towers and other elements in the communication infrastructure are damaged. At the local level, “hams” may participate in local emergency organizations or organize local “traffic nets.”</td>
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Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members Resource Directory (continued)

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<tr>
<th>Agency</th>
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| **American Red Cross (ARC)**  | Provides Mass Care operations such as shelters and fixed and mobile feeding services for disaster victims and emergency workers in the affected area and distributes supplies and commodities.  
Provides emergency and preventive health services to people affected by disaster.  
Provides individual assistance at service delivery sites and through outreach, by referral to government and/or voluntary agencies through distribution or financial assistance.  
Provides services leading to reunification of family members in the affected area.  
Performs damage assessments.  
Provides emergency and preventive mental health services. |
| **Ananda Marga Universal Relief Team** | Provides food and clothing, shelters, and counseling and renders emergency medical services, sanitation, and short-term case management. |
| **Billy Graham Rapid Response Team** | Provides emotional and spiritual care and a national database of more than 3,200 crisis-trained chaplains and ministry volunteers. |
| **Brethren Disaster Ministries** | Engages a network of volunteers to repair or rebuild homes for disaster survivors who lack sufficient resources to hire paid labor, focusing on vulnerable communities.  
Provides trained, skilled project leaders to supervise volunteers.  
Cooperates with the local disaster recovery organization to enhance the long-term recovery of the community.  
Provides Maryland-based warehousing and distribution services through the Church of the Brethren’s Material Resources Center.  
Children’s Disaster Services (CDS) alleviates disaster-related anxiety in children through specially trained and certified volunteers.  
Provides children a safe, secure, and comforting environment in shelters and assistance centers.  
Offers specialized care for children experiencing grief and trauma.  
Educates parents and caregivers on how to help children cope. |
| **Catholic Charities, USA**    | Provides assistance, including direct financial assistance to communities, in addressing the crisis and recovery needs of local families.  
Performs initial damage assessments.  
Provides ongoing and long-term recovery services for individuals and families, including temporary and permanent housing assistance for low-income families, counseling programs for children and the elderly, and special counseling for disaster-relief workers.  
Provides relief stage services, including shelter and emergency food. |

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| **Christian Reformed World Relief Committee** | Provides fully equipped and trained Rapid Response teams for clean up, chain saw, and “mucking out.”  
Provides trained volunteer managers to assist the local community in the formation and operation of long-term recovery organizations.  
Provides community-wide unmet needs assessments for long-term recovery organizations.  
Provides construction estimating services using skilled volunteers.  
Provides accounting services for long-term recovery and Voluntary Organizations Active in Disaster (VOAD) organizations using volunteer Certified Public Accountants (CPAs).  
Provides skilled teams for long-term housing repair and construction.  
Provides chaplaincy services.  
Provides community development consultants after the recovery. |
| **Church World Service**                  | Provides advocacy services for survivors.  
Provides case management for low-income and marginalized groups.  
Provides emotional and spiritual care and physical rebuilding programs.  
Assists in long-term recovery of those in need.  
Restores and builds community relationships. |
| **Churches of Scientology Disaster Response** | Provides emotional and spiritual care for survivors, responders, and caregivers.  
Provides POD volunteers and management.  
Performs cleanup.  
Directs services to individuals with unmet needs.  
Provides volunteer coordination  
Provides on-site needs assessment and help.  
Provides volunteer assistance, such as shelter management, and other needs to other organizations. |
| **City Team Ministries**                  | Supports first responders during the rescue phase.  
Provides food, water, and shelter during the relief phase.  
Provides emotional and spiritual care and case management to assess the needs of victims.  
Is committed to the effort of rebuilding homes and communities. |
| **Convoy of Hope**                        | Facilitates relief efforts between churches and other organizations to help best serve the needs of survivors. With a fleet of trucks, a 300,000-square-foot warehouse, a Mobile Command Center, and using the first response POD model, provides resources and help to victims in the first days of a disaster. |

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### Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members Resource Directory (continued)

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<th>Agency</th>
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<tr>
<td><strong>Episcopal Relief and Development</strong></td>
<td>Sends immediate relief grants for such basics as food, water, medical assistance, and financial aid within the first 90 days following a disaster. Provides ongoing recovery activities through rehabilitation grants, which offer the means to rebuild, replant ruined crops, and counsel those in trauma. Delivers relief kits and other emergency supplies and food to emergency shelters and camps. Works primarily through Church World Service to provide disaster-related services. Performs rebuilding work for individual homes damaged during disasters. Helps residents restore the social and economic fabric of their communities by providing economic and educational opportunities and improving access to legal services and home ownership. Trains and equips local denominations to prepare for and respond to disasters that devastate their communities.</td>
</tr>
<tr>
<td><strong>Feed the Children</strong></td>
<td>Provides help to survivors of natural disasters occurring in the United States and around the world. Provides food, water, blankets, cleaning supplies, and other relief supplies to individuals and families affected. Through a subsidiary, picks up in-kind contributions from corporate warehouses and individual donors to any of its six regional distribution centers for either bulk distribution or directly to individual relief boxes for families.</td>
</tr>
<tr>
<td><strong>Feeding America</strong></td>
<td>Through its national network of food banks, collects, transports, warehouses, and distributes donated food and grocery products for other agencies involved in both feeding operations and distribution of relief supplies. Processes food products collected in food drives by communities wanting to help another disaster-affected community. Develops, certifies, and supports their food banks. Positions frequently used emergency food products and personal care items in strategic locations and regularly cycles inventories to ensure usage by survivors immediately following a disaster. Serves as a liaison between the food banks and the donors. Educates the public about the problem of, and solutions to, hunger. Specializes in disaster training for its network and continually improves standard operating procedures that enable member food banks to develop seamless, coordinated approaches to delivering disaster assistance.</td>
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| **Foundation of Hope—ACTS World Relief** | Is striving to be a National Incident Management System (NIMS)–compliant disaster response agency, able to respond within 24 hours of federally declared incidents.  
Has been most active in the Gulf Coast, which is Federal Emergency Management Agency (FEMA) Region IV; but is now expanding its organization nationwide and internationally.  
Currently provides services using a fleet of trucks, forklifts, heavy equipment, refrigeration trailers, tents, and support equipment  
Is establishing POD to rapidly and efficiently distribute goods within 6 hours of arrival by a common carrier.  
Cooks and distributes hot meals with self-contained mobile disaster kitchens of various sizes and capacities.  
Provides staging area or base camp management at the request of state or local emergency operation centers.  
Provides mobile public address systems (mobile sound stages).  
Provides debris removal and personal item recovery teams.  
Provides registration and coordination of unaffiliated volunteers within the impacted area using mobile volunteer registration centers to organize and form work teams to provide workforce resources assisting in recovery. |
| **Habitat for Humanity International** | Conducts community housing assessments for long-term recovery.  
Works with partner families to build or rehabilitate simple, decent, and affordable homes after a disaster.  
Offers construction and development technical assistance to communities.  
Facilitates community involvement and support during the long-term recovery process.  
Introduces alternative construction technologies (e.g., modular, panelized/structural insulated panel [SIP] housing) to communities to speed up the delivery of permanent housing solutions. |
| **HOPE Coalition America (Operation Hope)** | Supports disaster survivors by assisting with budgeting and developing financial recovery plans. In addition, provides pre-disaster preparedness seminars.  
emergency budget counseling.  
emergency Credit Management.  
assistance in working with creditors.  
referrals to government and private agencies.  
assistance with obtaining copies of destroyed financial documents.  
insurance claim assistance. |
Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members

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<tr>
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<tr>
<td>HOPE worldwide, Ltd.</td>
<td>Partners with ARC to help prevent, prepare, and respond to emergencies.</td>
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<tr>
<td></td>
<td>Uses a large international volunteer base.</td>
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<td></td>
<td>Is establishing, on all six inhabited continents, centers that are rooted in the community.</td>
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<tr>
<td></td>
<td>Creates networks of people, organizations, and governments that work together.</td>
</tr>
<tr>
<td>Humane Society of the United States</td>
<td>Provides assistance with animal rescue, handling, and transport in a timely and humane way. In particular, the organization assesses animal related needs. establishes and manages temporary emergency animal shelters. provides evacuation support. provides veterinary evaluation of animals. provides relocation and support of disaster-affected animal facilities. transitions support to local resources during the recovery phase. manages donations and volunteers, including emergent volunteers. serves as resource for individuals, animal-related organizations, and others concerned about the urgent needs of animals before, during, and after disasters.</td>
</tr>
<tr>
<td>International Critical Incident Stress Foundation</td>
<td>Provides emotional and spiritual care, pre- and post-incident training, risk and crisis communication, crisis planning and intervention with communities and organizations, and spiritual assessment and care.</td>
</tr>
<tr>
<td>International Relief &amp; Development</td>
<td>Distributes food and critical relief supplies.</td>
</tr>
<tr>
<td></td>
<td>Helps communities develop effective social services through collaborative efforts to improve roads, renovate schools, rebuild utilities such as water and sewage systems, and establish health facilities. Collaborates with other organizations to provide shelter and necessary tools such as financial counseling to disaster victims. Performs needs assessment and mapping.</td>
</tr>
<tr>
<td>Latter-Day Saint Charities</td>
<td>Provides food and other emergency supplies and kits during response.</td>
</tr>
<tr>
<td>Lutheran Disaster Response</td>
<td>Provides response efforts through a pre-selected group of Lutheran social service agencies with established standing in the affected communities. Provides spiritual and emotional counseling for affected persons. Helps in coordinating volunteer teams for cleaning up and rebuilding disaster-affected homes. Provides case management services for long-term recovery. Provides training and expertise on volunteer coordination, case management, long-term recovery, construction, and database management.</td>
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### Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members

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**Function**

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<tbody>
<tr>
<td><strong>Mennonite Disaster Services</strong></td>
<td>Assists disaster victims by providing volunteer personnel to clean up and remove debris from damaged and destroyed homes and personal property.</td>
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<tr>
<td></td>
<td>Repairs or rebuilds under-insured primary residence homeowners with emphasis on assisting with the special needs of vulnerable populations such as the elderly and people with disabilities.</td>
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<tr>
<td><strong>Mercy Medical Airlift (Angel Flight)</strong></td>
<td>Services of the Homeland Security Emergency Air Transportation System (HSEATS):</td>
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<td>Transports small, high-priority, non-hazardous cargo (including blood) up to 300–400 pounds (boxed) into disaster response areas when commercial ground or air transport are not available.</td>
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<td></td>
<td>Provides aerial reconnaissance of disaster area.</td>
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<td>Provides air transport of disaster response personnel and evacuees into/from/within the disaster area when commercial ground or air transport are not available.</td>
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<tr>
<td></td>
<td>Relocates special populations, including special “surge services,” using commercial air ambulance services (by pre-arranged memorandum of understanding only).</td>
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<tr>
<td></td>
<td>Coordinates, in cooperation with the National Business Aviation Association (NBAA), available corporate jet aircraft for disaster response.</td>
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<td>Provides management of large-scale airline-provided relocation movements in support of FEMA, ARC, and other organizations.</td>
</tr>
<tr>
<td><strong>National Association of Jewish Chaplains</strong></td>
<td>Provides spiritual crisis counseling, short-term pastoral care, and long-term pastoral counseling through its board certified and professionally trained chaplains.</td>
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<tr>
<td></td>
<td>Provides education and training in disaster spiritual care.</td>
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<tr>
<td></td>
<td>Helps organize volunteer disaster chaplains, through its association with ARC’s Critical Response Team and other professional chaplaincy organizations who want to provide immediate spiritual care services in the aftermath of disasters.</td>
</tr>
<tr>
<td><strong>National Baptist Convention USA</strong></td>
<td>Lessens the impact of disasters and potential catastrophic incidents by meeting the needs of communities through preparedness and mitigation.</td>
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<tr>
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<td>Provides the following services:</td>
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<td>- Mass care</td>
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<td></td>
<td>- Emergency assistance and casework</td>
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<td></td>
<td>- Emotional and/or spiritual care</td>
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<td>- Supporting services to state and local VOAD member agencies</td>
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<tr>
<td></td>
<td>- Recovery</td>
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<tr>
<td></td>
<td>- Donations management</td>
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<td></td>
<td>- Volunteer management</td>
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<tr>
<td></td>
<td>- Outreach and/or information and referral.</td>
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(continued)
Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members Resource Directory (continued)

<table>
<thead>
<tr>
<th>Agency</th>
<th>Function</th>
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</thead>
<tbody>
<tr>
<td><strong>National Emergency Response Team</strong> (NERT)</td>
<td>Provides coordinated emergency services with local, state, and federal governmental agencies and nonprofit agencies. Transports food and other disaster goods through trailer units. Provides communication services through trailers equipped with ham radios, scanners, and other instruments. Provides direct financial aid to victims. Provides home repair services for special needs groups such as the elderly.</td>
</tr>
<tr>
<td>National Organization for Victim Assistance</td>
<td>Provides social and mental health services for individuals and families who experience major trauma after a disaster, including psychological first aid, crisis intervention, crime victim resources, and crisis management consultation.</td>
</tr>
<tr>
<td>Nazarene Disaster Response</td>
<td>Provides clean-up and rebuilding assistance, especially to the elderly, persons with disabilities, the widowed, and those least able to help themselves. Works in the recovery phase by assisting with the emotional needs of disaster victims.</td>
</tr>
<tr>
<td>Noah’s Wish</td>
<td>The mission of Noah’s Wish is to save animals during disasters by providing rapid deployment of disaster response teams. operation of temporary animal shelters. rescue and evacuation assistance. veterinary care for disaster-related injuries or illness. short- and long-term foster care for animals. permanent placement for all unclaimed or surrendered animals. coordination and distribution of donated supplies and food.</td>
</tr>
<tr>
<td>Operation Blessing</td>
<td>Transports food and emergency supplies to disaster survivors. Assists in disaster medical relief. Provides direct financial assistance to victims.</td>
</tr>
<tr>
<td>Points of Light Institute/Hands On Network</td>
<td>Serves 83% of the American population and 12 international communities in nine countries through hundreds of affiliates. Helps people find volunteer opportunities in their local community, helps nonprofits manage volunteer resources, and develops the leadership capacity of volunteers.</td>
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Table 1.1 National Voluntary Organizations Active in Disaster (NVOAD) Members Resource Directory (continued)

<table>
<thead>
<tr>
<th>Agency</th>
<th>Function</th>
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<tbody>
<tr>
<td>Presbyterian Disaster Assistance (PDA)</td>
<td>Works primarily through Church World Service to provide volunteers to serve as disaster consultants. Provides funding for local recovery projects that meet certain guidelines. Provides trained volunteers who participate in the Cooperative Disaster Child Care program. Provides volunteer labor and material assistance at the local level. Supports volunteer base camps for volunteer groups assisting with the rebuilding efforts.</td>
</tr>
<tr>
<td>REACT International</td>
<td>Provides emergency communication facilities for other agencies through its national network of citizen band radio operators and volunteer teams.</td>
</tr>
<tr>
<td>The Salvation Army</td>
<td>Provides emergency assistance, including mass and mobile feeding, temporary shelter, counseling, missing person services, and medical assistance. Provides warehousing services, including the distribution of donated goods such as food, clothing, and household items. Provides referrals to government and private agencies for special services. Provides individual and family counseling. Recruits, trains, houses, and transports volunteers. Coordinates economic reconstruction efforts. Provides financial assistance to victims through case management to include housing needs and disaster-related medical and funeral expenses. Provides emotional and spiritual care.</td>
</tr>
<tr>
<td>Samaritan’s Purse</td>
<td>Provides emotional and spiritual care, clean-up assistance, and emergency home repairs.</td>
</tr>
<tr>
<td>Save the Children</td>
<td>Provides disaster-relief services for children in shelters, including food, clothing, diapers, and evacuation backpacks. Provides supervision in designated areas within shelters.</td>
</tr>
<tr>
<td>Society of St. Vincent De Paul</td>
<td>Provides social services to individuals and families and collects and distributes donated goods. Makes store merchandise available to disaster victims and operates retail stores, homeless shelters, and feeding facilities that are similar to those run by The Salvation Army. Provides warehousing facilities for storing and sorting donated merchandise during the emergency period.</td>
</tr>
<tr>
<td>Agency</td>
<td>Function</td>
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</table>
| **Southern Baptist Disaster Relief/North American Mission Board** | Provides mobile feeding units staffed by volunteers who prepare and distribute thousands of meals a day.  
Provides disaster child care mobile units, transport equipment, and supplies to a facility where trained workers provide safe and secure care for children.  
Provides units and trained volunteers to assist with clean-up activities, temporary repairs, reconstruction, chaplains, command/communication, and bilingual services.  
Provides water purification, shower, and laundry units and trained volunteers for disaster responses. |
| **Tzu Chi Foundation** | Provides emotional and spiritual care and medical and financial assistance. |
| **United Church of Christ** | Provides coordinators to organize volunteers for clean-up and rebuilding efforts and participates in response and long-term recovery efforts in communities affected by natural disasters. |
| **United Jewish Communities** | Organizes direct assistance, such as financial and social services, to Jewish and general communities in the United States following disaster.  
Provides rebuilding services to neighborhoods and enters into long-term recovery partnerships with residents. |
| **United Methodist Committee on Relief** | Raises and distributes funds equitably to the most vulnerable populations in affected communities.  
Provides case management services and related training for the long-term recovery of victims.  
Coordinates shipments of disaster-relief supplies and kits, including clean-up supplies.  
Provides spiritual and emotional care to disaster victims and long-term care of children impacted by disaster.  
Offers training in support of volunteer activities in disaster recovery. |
| **United Way of America** | Provides experience, expertise, and resources to local United Ways facing local, regional, state, or national emergencies.  
Gives direct grants to support disaster recovery, such as home repairs, food vouchers, and counseling.  
Serves as a resource and information guide for survivors, through its 2-1-1 call centers. |

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<table>
<thead>
<tr>
<th>Agency</th>
<th>Function</th>
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| **World Hope International** | - Has worked in five national disasters within the past 3 years.  
- As an organization, can initiate a volunteer response through the partnership of 1,500 Wesleyan Churches and their membership located within the United States.  
- Coordinates with churches and pastors in the disaster areas to establish distribution sites and housing facilities for volunteers.  
- Provides volunteers to clean up or gut houses or rebuild homes.  
- Has relief kits and tool resources available for disaster response. |
| **World Vision**       | - Trains and mobilizes community-based volunteers in major response and recovery activities.  
- Provides consultant services to local unaffiliated churches and Christian charities involved in locally designed recovery projects.  
- Collects, manages, and organizes community-based distribution for donated goods. |
<table>
<thead>
<tr>
<th>Emergency Support Function (ESF)</th>
<th>Scope</th>
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<tbody>
<tr>
<td><strong>ESF #1—Transportation</strong></td>
<td>Aviation/airspace management and control</td>
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<td>Transportation safety</td>
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<td>Restoration/recovery of transportation infrastructure</td>
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<td>Movement restrictions</td>
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<td>Damage and impact assessment</td>
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<td><strong>ESF #2—Communications</strong></td>
<td>Coordination with telecommunications and information technology industries</td>
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<td></td>
<td>Restoration and repair of telecommunications infrastructure</td>
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<td></td>
<td>Protection, restoration, and sustainment of national cyber and information technology resources</td>
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<td></td>
<td>Oversight of communications within the federal incident management and response structures</td>
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<tr>
<td><strong>ESF #3—Public Works and Engineering</strong></td>
<td>Infrastructure protection and emergency repair</td>
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<td>Infrastructure restoration</td>
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<td>Engineering services and construction management</td>
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<td>Emergency contracting support for life-saving and life-sustaining services</td>
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<tr>
<td><strong>ESF #4—Firefighting</strong></td>
<td>Coordination of federal firefighting activities</td>
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<td>Support to wild-land, rural, and urban firefighting operations</td>
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<td><strong>ESF #5—Emergency Management</strong></td>
<td>Coordination of incident management and response efforts</td>
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<td>Issuance of mission assignments</td>
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<td>Resource and human capital</td>
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<td>Incident action planning</td>
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<td>Financial management</td>
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<tr>
<td><strong>ESF #6—Mass Care, Emergency Assistance, Housing, and Human Services</strong></td>
<td>Mass care</td>
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<td></td>
<td>Emergency assistance</td>
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<td></td>
<td>Disaster housing</td>
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<td></td>
<td>Human services</td>
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<tr>
<td><strong>ESF #7—Logistics Management and Resource Support</strong></td>
<td>Comprehensive, national incident logistics planning, management, and sustainment capability</td>
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<td></td>
<td>Resource support (e.g., facility space, office equipment and supplies, contracting services)</td>
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(continued)
Table 1.2 Roles and Responsibilities of the Emergency Support Functions (continued)

<table>
<thead>
<tr>
<th>ESF</th>
<th>Scope</th>
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</table>
| **ESF #8—Public Health and Medical Services** | Public health  
Medical  
Mental health services  
Mass fatality management |
| **ESF #9—Search and Rescue** | Life-saving assistance  
Search and rescue operations |
| **ESF #10—Oil and Hazardous Materials Response** | Oil and hazardous materials (e.g., chemical, biological, radiological) response  
Environmental short- and long-term cleanup |
| **ESF #11—Agriculture and Natural Resources** | Nutrition assistance  
Animal and plant disease and pest response  
Food safety and security  
Natural and cultural resources and historic properties protection and restoration  
Safety and well-being of household pets |
| **ESF #12—Energy** | Energy infrastructure assessment, repair, and restoration  
Energy industry utilities coordination  
Energy forecast |
| **ESF #13—Public Safety and Security** | Facility and resource security  
Security planning and technical resource assistance  
Public safety and security support  
Support to access, traffic, and crowd control |
| **ESF #14—Long-Term Community Recovery** | Social and economic community impact assessment  
Long-term community recovery assistance to states, local governments, and the private sector  
Analysis and review of mitigation program implementation |
| **ESF #15—External Affairs** | Emergency public information and protective action guidance  
Media and community relations  
Congressional and international affairs  
Tribal and insular affairs |

Appendix 2
Background on Faith-Based and Community-Based Organizations (FBCO) Definitions

The empirical research literature highlights the lack of a consensus on a standardized definition of faith-based organizations (FBOs) and community-based organizations (CBOs). These definitional issues can cause confusion for governmental agencies, researchers, and service providers in classifying whether organizations are faith-based (GAO, 2006). Over the past decade, several researchers have proposed different definitions of categories of FBOs; less attention has been paid to formally defining CBOs and the differences between the two types of organizations. Generally speaking, implicit in the proposed typologies is that nonprofit human service organizations that are not classified as FBOs are considered to be CBOs.

The main issues in defining FBOs are twofold. The first includes the history and core values of organizations that currently have, or in the past have had, an affiliation with a religious denomination. The second is whether the services provided by organizations contain secular or religious components and how these elements are incorporated into service delivery. Religious content can be voluntary or mandatory, implied or explicit, and included in all activities or segregated (Roundtable on Religion and Social Welfare Policy, n.d.).

According to researchers at the Roundtable on Religion and Social Welfare Policy (n.d.), an FBO is an organization that has some type of recent or past affiliation with a religious denomination and for which these religious tenets and beliefs imbue the practices of social service delivery. Most employees in FBOs share the same religion, and the physical location and environment contain the “sounds and the symbols of that faith.”

There are several variations of this definition that range from a focus on faith integration into services to geographic scope of service delivery. Using a combination of geographic scope, size, and level of institutional faith, one framework that distinguishes between national and local FBOs may be useful to consider (Roundtable on Religion and Social Welfare Policy, n.d.). This framework includes the following four categories of FBOs that capture a broad range of involvement in service delivery:
1. **Congregation-Based FBO:** This category refers to an individual church, synagogue, or mosque or a religious institution that directly provides services without establishing a separate organization. These organizations generally include religious elements in many service activities, but can also establish separate secular service activities as needed to apply for federal grants.

2. **Independent Religiously Affiliated Nonprofits:** This category refers to a social service provider that is related to a religious community or congregation, but has established a separate nonprofit organization. These organizations may or may not have explicitly religious elements in service delivery. One example of this type of FBO would be a religious congregation that creates a secular nonprofit organization with a different Board to keep the administration and delivery of faith-based and secular services distinct. Another example includes a local social service provider that is not affiliated with a particular religious organization, but integrates religion directly into all aspects of service delivery (such as a privately funded prison ministry that is staffed primarily by volunteers).

3. **Large, National Religiously Affiliated Nonprofit Organizations:** This category refers to national organizations that are usually secular in service delivery, but have a shared religious identity visible in all aspects of the organization, including mission statements, hiring decisions, volunteer recruitment, and Board membership. Examples include The Salvation Army and Catholic Charities.

4. **Faith-Based Coalitions or Intermediaries:** This category refers to organizations that support the work of smaller religious institutions and organizations by helping to advance resources and interest in a particular cause as a coalition. A faith-based intermediary may act as an umbrella and have a fiduciary role to facilitate outside sources of support or provide technical assistance or training to FBCOs.
Appendix 3
Summary of Research Studies


*Data Set and Method:* This study involved a cross-sectional social network and spatial analysis of 67 organizations providing disaster social services and 25 organizations interested in providing these services in an unnamed metropolitan area.

*Data Collection Strategy.* This strategy included contacting 800 organizations listed in the Directory of Community Resources, contacting organizations reported to be active in recent floods, and collecting recommendations from county disaster offices that generated a final list of 100 potential organizations.

*Research Question:* Do low income populations have less access to prevention programs and disaster-relief services than other groups?

*Main Findings:*
A limited scope of relief services is available for low-income population due to a smaller number of organizations serving low-income residents and lower disaster capacity and network interaction of the local organizations.

These organizations have limited capacity due to lack of availability of trained volunteers in disaster and effective management practices of volunteers.

The disaster organizations considered peripheral to the disaster services network (only one single link with another organization) are mostly religious, health, and mental health organizations.

*Implications:* The geographic isolation of vulnerable populations and the organizations that serve them is a barrier to recovery after disaster. Improve connectedness of smaller, informal organizations to the disaster network by (1) conducting joint training programs between larger disaster network organizations and informal organizations, (2) widening the geographic service delivery ranges of disaster-relief agencies to increase access of vulnerable populations, (3) increasing disaster services capacity of the network by improving training of volunteers and paid staff, (4) increasing state and federal funding to build local capacity and
partnerships among organizations, and (5) reaching out to smaller community organizations located in underserved areas and including them in the planning process.


Data Set and Method: This study involved a cross-sectional quantitative and qualitative analysis of organizations in New Orleans, Baton Rouge, and other areas affected by Hurricanes Katrina and Rita.

Data Collection Strategy. This strategy included contacting 1,082 FBOs and CBOs in the Gulf Coast region, yielding 252 phone interviews. A survey was fielded to 694 organizations, and 153 responses were returned from 127 organizations. In addition, a community event was convened, and site visits included 46 in-depth interviews.

FBCO Definition: Faith-based organizations (FBOs) are defined as having a religious or faith-based affiliation and are usually associated with a larger denomination. NGOs are defined as organizations that do not have this orientation.

Research Questions: Did FBCOs have a beneficial impact during Hurricanes Katrina and Rita? What were the main services? What are the limitations and best practices? What made them effective?

Main Findings:
According to results from surveys and interviews, FBCOs provided beneficial services in 10 core services: shelter, food, medical service, personal hygiene, mental health and spiritual support, physical reconstruction, logistics management, transportation management, children’s services, and case management.

In some communities, FBCOs were the only organizations providing aid.

Limitations for the FBCOs providing services are that they are not included in government planning, the emergency plans do not address emergent needs such as pop-up shelters and transportation, there is inadequate coordination between government and national FBCOs, there are problems with access and credentialing, there are inadequate training and experience, there are high costs (monetary and staff burnout), there are unanticipated long-term service needs, and there are problems with addressing waste management and sanitation issues such as shelter, medicine, personal hygiene, and reconstruction.

Best practices developed include specialization, partnering, and preserving family unity in shelters.

Interviewees said that FBCOs were effective due to mission alignment, strong motivation, knowledge of community, and access to unique resources directly needed.

Implications: This study recommends the production of a “faith-based community primer” manual that maps out FBCOs and disaster response and a manual that allows FBCOs to
better understand how to interact with government in disaster-relief efforts. This study also recommends an analysis of the attributes of FBCOs and encourages government to support these organizations’ response efforts. In addition, local FBCOs should be included in planning, coordination, training, and information sharing.


Data Set and Method: This study involved a qualitative review of five large national voluntary organizations (i.e., ARC, The Salvation Army, the Southern Baptist Convention, Catholic Charities, and the United Way of America) active in providing disaster relief and collecting donations and estimates of capacity to provide services under different disaster scenarios.

Data Collection Strategy: This strategy involved a document review of federal and voluntary organizations and site visits to four areas considered high risk for disasters, including Miami, Florida. This also involved interviewing government officials at all levels of government, including FEMA voluntary agency liaisons (VALs), and voluntary agency officials from NVOAD and the state level Voluntary Organizations Active in Disaster (VOADs).

Research Questions: What are the roles of major national voluntary organizations in providing mass care and other human services in response to large-scale disasters requiring federal assistance? What is known about existing current capacity and what steps have these organizations taken since Hurricane Katrina to strengthen capacity? What are the remaining challenges in preparing for large-scale disasters?

Main Findings:

In response to weaknesses identified during Hurricane Katrina, the four voluntary agencies (ARC, The Salvation Army, Southern Baptist Convention, and Catholic Charities) that provide direct services are taking steps to strengthen and expand services by improving collaboration on services, logistics, and communications.

The ARC is specifically reorganizing chapters and developing stronger partnerships with local FBCOs, especially in rural areas.

Initial assessments suggest that a worst-case, large-scale disaster would overwhelm voluntary organizations’ current sheltering and feeding capabilities.

Implications: This study recommends that FEMA should update expectations for ARC in a catastrophic disaster, formulate steps to better incorporate voluntary organizations’ capabilities into assessment of mass care capabilities, and clarify whether states can consider voluntary organizations and local VOADs as potential recipients of federal funds.

**Data Set and Method:** This study involved a cross-sectional mixed methods analysis of FBCOs that provided hurricane-related human services in the Gulf Coast region using a telephone survey of 202 FBCOs (120 identified as FBOs and 82 secular nonprofits) and case studies of 8 local FBCOs that are unaffiliated with national organizations.

**Data Collection Strategy:** A detailed appendix describes the sampling strategy. The goal was to reach 200 randomly sampled organizations (i.e., 100 faith-based/100 secular) using two data sources in seven pre-selected geographic strata of primary, secondary, and tertiary impact in Louisiana, Mississippi, and a tertiary target area in Texas (i.e., the Houston Astrodome, where evacuees were housed). The two lists that were used to generate the universe of organizations included the American Church List, which is a comprehensive list of churches and congregations in the United States, and the National Center for Charitable Statistics (NCCS) database of all U.S. nonprofits that file annual Forms 990 with the Internal Revenue Service. (Nonprofits with less than $25,000 and religious groups are not required to submit these forms.) A total of 271 organizations responded to the survey, and 202 provided relief services and interviewed for the study. The response rate is estimated between 53% and 67%, depending on the assumption of whether an unable-to-contact organization was in operation.

**Affiliated versus Nonaffiliated FBCOs:** One survey question asks specifically about whether FBCOs are affiliated with a national organization such as a Catholic diocese, the Southern Baptist Convention, the YMCA, Boys & Girls Clubs of America, or the Child Welfare League of America. Approximately half of organizations indicated an affiliation with a national organization. This affiliation was more likely among FBOs (63%) than CBOs (38%). Cross tabs of FBCO characteristics by affiliation were calculated only in terms of collaboration. The survey indicated that a high proportion (68%) of FBCOs worked with one or more groups during relief and recovery efforts. There were no significant differences by affiliation.

**Research Questions:** What are the characteristics of FBCOs providing disaster human services? What were the services provided and to whom? What resources were used to deliver the services? What networks facilitated service delivery? What lessons can be learned from these efforts?

**Main Findings:**

A wide range of FBCOs participated in relief efforts, and budgets ranged from $500 to $1 million. Two-thirds had no prior experience in providing disaster relief after a hurricane. Half of FBCOs used some paid staff to deliver services, and three-quarters used some volunteers.

Approximately 70% of FBCOs provided emergency services such as food, water, clothing, and temporary shelter; less than half provided long-term services, and less
than 25% provided child care or job training. A notable exception for FBOs is housing rehabilitation. On average, FBOs ended services after 3 months, whereas secular nonprofits were more likely to stay for more than 1 year.

Records on the number of clients and the costs of providing services were not often kept. Donations were the most common sources of support; FBOs were more likely to receive private donations, whereas secular groups more likely to receive government support.

Two-thirds of FBCOs collaborated with other groups to provide services; half reported that the collaborations were new. Collaborations involved sharing resources, space, equipment, and supplies.

According to results from case studies, the traditional models (FEMA and ARC) for disaster response were overwhelmed and the magnitude of Hurricanes Katrina and Rita motivated FBCO participation. Some respondents suggested that FBCOs were beyond their capacities in providing shelter, and others emphasized the creative solutions developed to provide needed services such as communication and transportation.

Finding and maintaining FBCO staff was a challenge after the storm. Using volunteers was important, but this created a challenge, including the needs to house, feed, supervise, and debrief them.

Familiarity with local areas and perceived legitimacy were ways FBCOs were able to overcome distrust among traumatized residents. Traditional responders were often unfamiliar with local conditions, and as their knowledge developed, they were rotated out of service and a new team was added. These teams were often limited in their ability to make meaningful referrals to services.

All organizations in the case studies displayed interorganizational collaboration, often based more on social and professional networks than on established plans.

There was a lack of guidelines on how to distribute donated funds; if cases were outside formal case management, resources were allocated based on chance and informal contacts.

Specifics were lacking on how emergency response plans would further incorporate local FBCOs.

Implications: The EPR community needs a better understanding of the availability and capability of FBCOs. This community also needs to develop plans for longer-term service delivery in recovery efforts and incorporate the experience gained by FBCOs during Hurricane Katrina in planning. There is critical need for better coordination of providers; seek out the best FBCO performers with track records, the ability to work with affected populations, the ability to integrate and coordinate with other providers; and encourage FBCOs and government to develop systems for clearinghouses, managing donations, and allocating resources, volunteers, and emergency services.

*Data Set and Method:* This study involved convening NGO leaders to share lessons learned from Hurricanes Katrina and Rita and discuss ongoing challenges to the provision of long-term human recovery efforts.

*Data Collection Strategy:* This strategy used a semi-structured protocol to facilitate discussion with approximately 50 NGOs and EPR agencies. Participants submitted their top three challenges to long-term human recovery in Louisiana. A research team used constant comparative analysis to achieve consensus among researchers on key themes. A stakeholders' meeting validated key themes described below.

*Research Questions:* Is there a system to support long-term human recovery? Have NGO roles been formalized and integrated into local and state planning? How can state and federal agencies better engage NGOs to leverage resources in recovery?

*Main Findings:*

- NGOs indicated that, in Louisiana, there is no system of services or plan to support human recovery.
- The federal government does not sufficiently fund or support longer term recovery efforts. Specifically, this Act does not explicitly identify case management services provided by NGOs as eligible reimbursable expenses, requires states devastated by multiple incidents to provide matching funds, and does not include a mechanism to support innovative thinking about community strengthening.
- Scope, scale, and sustainability of response and recovery efforts have been insufficient in Louisiana. NGOs have faced delays in reimbursement.

*Implications:* This study recommends potentially developing a recovery-specific plan to guide long-term human recovery that includes clearer guidelines for NGO involvement, expanding the definition of case management to be included as a reimbursable expense, and providing direction for NGOs to participate in planning and service delivery. This study also recommends developing more efficient resource allocation process, such as FEMA using block grants to state/local governments post-disaster and decreasing state match requirements; revising the Stafford Act to incentivize rebuilding, which creates stronger human, health, and education infrastructure; and establishing pre-existing contracts with NGOs that can be activated quickly during an emergency.


*Data Set and Method:* This was an assessment of ARC’s September 11th Recovery Program (SRP), including the Recovery Grants Program (RGP), to help people directly
affected by the events of September 11th. A portion of the funds gave grants to CBOs to provide case management and mental health services to eligible individuals.

Data Collection Strategy: This strategy included conducting a telephone survey of 1,501 recipients of SRP services from ARC, telephone interviews with 66 community-based nonprofits that received RGP grants, site visits to 12 of these organizations, and a Web-based survey of 347 clients who received CBO services.

Research Question: What are the lessons learned from the SRP program efforts to provide long-term services in disaster recovery?

Main Findings:
CBOs emphasized the stigma for clients associated with receiving mental health services, particularly for immigrant communities and first responders, such as police, fire, and Emergency Medical Services personnel.

There is a need to understand the culture of the target group for services (e.g., race, ethnicity, occupation) and adapt the services so that they are appealing and reassuring.

Outreach is crucial to breaking down stigma and helping individuals traumatized during disasters receive mental health services.

Reaching children and youth with mental health services is challenging.

Provide recovery services and ongoing support for program staff to avoid burnout.

Implications: This study provides several recommendations for improving services. There are many recommendations specific to incorporating long-term recovery services in disaster planning. First, FBCO nonprofits should be included when planning and coordinating the team to help with response, but also to help reduce the stigma associated with mental health services because these groups may be more trusted by local residents than governmental agencies. Second, directories of recovery service providers should be compiled. Third, an entity should be designated that will be responsible for managing grants and donations. Fourth, longer term service needs should be identified. Fifth, procedures to “prequalify” local nonprofits to work with disaster teams should be established. Lastly, communication and collaboration should be encouraged by offering opportunities for networking and learning that will enhance referral networks. The disaster-relief planner should ask, “What do we want the service system to look like?”


Data Set and Method: This was an assessment of the role that faith community liaisons (FBCLs) play in the implementation of Charitable Choice regulations within states and local areas. “Charitable Choice regulations” refers to federal policies intended to “level the playing
field” for FBCOs to compete for federal funding across several programs, while allowing organizations to maintain their religious character.

*Data Collection Strategy:* This strategy included conducting case studies of FBCLs in eight state/localities (i.e., Florida, Texas, Alabama, New Jersey, Illinois, New Mexico, Virginia, Washington, DC) drawing on document review, site visits, and in-depth interviews.

*Research Questions:* What is the current status of FBCLs and what are the policies and practices developed to fill their roles? Are the policies and practices linked to effectiveness?

*Main Findings (related to EPR):*

Out of the eight states/localities studied, in three (i.e., Florida, Texas, and Alabama), FBCLs pursued issue-specific initiatives of importance to their states focused on disaster preparedness and response.

The focus of these efforts is more effective management of volunteers and donations. The suddenness and large scale of human needs created by disasters motivated FBCLs to create public-FBCO partnerships by harnessing resources and mobility of FBCOs, especially churches and smaller FBOs and volunteers.

*Implications:* Three specific FBCL activities were cited by study respondents as particularly effective as promising practice models. The first activity mentioned was that outreach, technical assistance, and educational activities such as roundtables and listservs helped to build relationships, increase information, and create lists for public agencies seeking to reach out to FBCOs. The second activity cited was that in-reach activities within FBCOs helped to increase knowledge and acceptance of partnering with governmental agencies. The third activity mentioned was that issue-specific collaborations appeared to contribute to effectiveness in building partnerships and capacity and understanding regulations. Alabama’s emergency management work was cited to have improved EPR capabilities of state FBCOs, and work in Texas in EPR helped to build relationships among FBCOs and interfaith groups.


*Data Set and Method:* This study involved cross-sectional quantitative analysis of urban and rural FBOs and CBOs.

*Data Collection Strategy:* This strategy draws on the Multi-City Survey of Social Service Providers (MSSSP) and the Rural Survey of Social Service Providers (RSSSP), which completed telephone surveys with 2,200 governmental and nonprofit social service providers in three cities and four rural areas. The surveys drew from databases of governmental and nongovernmental service agencies constructed for each site from community directories,
social service directories, county agency referral lists, phonebooks, and Internet searches. Churches listing social services were included in the sampling frame. All agencies were called to verify that they were operational, that they delivered services traditionally provided for low income populations (e.g., welfare-to-work, emergency assistance), and targeted low-income persons. The response rate was 68% for the MSSSP and 61% for the RSSSP.

**FBCO Definitions:** Respondents self-identified on surveys whether they were faith-based or secular nonprofit; if self-identified as being faith-based, additional questions were asked to further classify them as faith-integrated or faith-segmented organizations.

**Research Questions:** Are certain types of faith-based or secular nonprofit organizations more accessible to poor populations than others? How are FBOs and secular nonprofits funded? Is service provision more stable and consistent across FBOs compared to CBOs?

**Main Findings:**

Of the respondents, 60% identified themselves as secular nonprofit and 40% as FBOs. Of the FBOs, 70% identified themselves as faith-segmented and 30% as faith-integrated in urban areas; these percentages were more evenly split in rural areas.

FBOs in urban and rural areas are more likely to offer services that address immediate needs, such as emergency food or cash assistance, compared to offering services requiring trained professional staff such as mental health, substance abuse, or employment. (Faith-integrated organizations provide 88% emergency services compared to 50% for secular nonprofits).

FBOs have fewer resources than CBOs. Both organizations target poor populations. Of nonprofits, 63% draw the majority of their clients from within a 3-mile radius.

In urban areas, faith-integrated agencies are more accessible to residents of high-poverty neighborhoods than faith-segmented organizations. This suggests that places of worship and religious congregations located in high-poverty communities play an active role in providing assistance to the poor in local communities. Secular nonprofits are also quite accessible, but they are located further away.

Faith-integrated agencies are well located with respect to the location of poor clients, but they have low capacity and funding levels; faith-integrated organizations primarily rely on private donations. A sizeable share of faith-segmented organizations receives government funding.

All providers face funding hurdles, but the rural communities face a steeper challenge.

**Implications:** More attention needs to be paid to the mismatches between the locations of the more resourced organizations and the locations of clients in high-poverty areas. Space and facility needs of organizations should be taken into account by providing affordable office space for secular and faith-segmented nonprofits to locate near poor populations in high-poverty areas.
Data Set and Method: This study involved a cross-sectional assessment of the types of social services and spiritual messages that were provided by Baton Rouge area churches following Hurricane Katrina. A 26-item survey questionnaire was used to determine church characteristics and measure the types of services churches provided to Hurricane Katrina evacuees. The survey used open- and closed-ended questions. Closed-ended questions required respondents to select from “yes” or “no” answers and from a possible list of responses in other cases.

Data Collection Strategy: This strategy included contacting 603 churches by mail in the Baton Rouge, Louisiana, metropolitan area, yielding an initial response rate of only 10%. The Louisiana State University Public Policy Research Laboratory was then contracted by the researchers to administer the surveys through telephone interviews, yielding a response rate of 157 (26%) churches.

Research Questions: Have Baton Rouge area churches provided significant assistance to Hurricane Katrina evacuees? What were the main services and resources provided? What were their limitations?

Main Findings:
Of those churches that completed the survey, 136 (87%) reported providing services to Hurricane Katrina evacuees. Churches performed a vital function in feeding, clothing, and providing emergency financial assistance to the evacuees. Additional services provided included counseling, transportation, child care, and shelter.

Reconnecting—or attempting to reconnect—families that were separated during the evacuation process was also an important component of the services provided by these churches. Nearly half of them reported providing this service.

The largest proportion of churches reported receiving congregation donations to pay for their services. Less than 10% of the churches reported receiving federal or state relief aid to provide services.

Churches paid for evacuee care with congregational and private donations. Only one church reported receiving federal financing assistance.

The most limited and sought-after resource to make evacuee care more manageable was shelter and housing for evacuees. More immediate and better managed ARC and FEMA services were suggested as aspects that would also have facilitated the process.

Implications: Churches recommended preparedness, triage, and leadership for future church disaster responders. A pre-disaster plan containing congregation members’ contact information was also recommended. The churches also suggested that state governments
could provide financial support to local churches whose members and organizations are often asked to serve as true first responders after disasters.


   **Data Set and Method:** This study involved a qualitative research design that included the following:

   A literature search focused on exploring the role of African American religious leaders and FBOs in disaster and crisis response. This search informed the development of questions administered during the interviews and to the focus group, which consisted of nine different interdenominational religious leaders from New Orleans, Louisiana.

   Twenty-six one-on-one interviews were conducted with ministers who were first responders and storm survivors, second responders who worked in “receiving” centers in different cities, and third-line responders who focused on restoration, recovery, advocacy, social justice, and the future ability of African American FBOs to respond to disasters and crises.

   The researcher also engaged in on-the-ground field observations.

   This study also included a selective look at the role of Latino and Vietnamese religious leaders in response to the community crisis following Hurricane Katrina. They interviewed two Latino and one Vietnamese faith-based organization leaders.

   **Data Collection Strategy:** This strategy included identifying participants through a literature review, newspaper accounts, religious denominational directories, and theological seminaries. Names were also provided by ecumenical FBOs and ministerial alliances, nonprofit organizations, and immigrant services organizations.

   **Research Questions:** What were the roles played by African American ministers, churches, and faith-based institutions in response to the community crisis that occurred during and after Hurricanes Katrina and Rita? What was the role of Latino and Vietnamese religious leaders in response to the community crises in New Orleans?

   **Main Findings:**

   Most FBO leaders in the Gulf Coast region did not have pre-existing emergency response plans in place. Most had not attended public health preparedness or crisis management trainings. Yet, even without an emergency plan in place, African American ministers and their denominational institutions played multiple roles as first responders to Hurricane Katrina. These roles included mobilizing resources, providing direct services to survivors, brokering relationships with the larger disaster-response community, and serving as moral agents and social justice advocates on behalf of evacuees.

   The churches’ roles during Hurricanes Katrina and Rita differed depending on their size and location. All sizes of churches, and both rural and urban churches, were called into action, although most small churches reported that they often played support
roles to larger churches by providing food, clothing, and personnel to supplement those providing shelter and housing. Cities such as Baton Rouge (Louisiana), Houston and Dallas (Texas), Atlanta (Georgia), and Jackson (Mississippi) were major displacement centers for evacuees. Their mobilization depended upon ability, resources, and resource capacity.

African American leaders of churches and FBOs were called upon to perform extensive relief and recovery services because they deeply understand that religion is a key resource for members of African American communities attempting to cope with stress and disaster. They fulfilled their roles of early responders as soon as the disaster occurred in their communities, even though in most cases they themselves were victims of the hurricanes.

Although main-line churches and charitable organizations across America marshaled resources in response to Hurricane Katrina, members of the neediest and most vulnerable populations—primarily African Americans—did not benefit. Instead, African American church leaders stepped in to meet the needs of the most vulnerable populations.

With limited resources and only on-the-job training, African American clergy demonstrated remarkable leadership. African American, Latino, and Vietnamese FBO leaders shouldered a disproportionate burden in disaster relief.

**Implications:** There is a deep need for culturally informed responders, such as African American church and faith-based organization leaders, to be critical components of public health and social safety nets. African American, Hispanic, and Asian churches are full partners in emergency preparedness planning, response, and recovery efforts. These organizations are tremendous untapped resources that can serve as “field tested,” knowledgeable, and culturally competent community-based partners in emergency response efforts.

Funding support should be provided for African American, Hispanic, and Asian churches to strengthen their ability to serve as disaster response partners, particularly with respect to meeting needs of vulnerable populations.

Because these churches are positioned to play a vital role in community disaster planning and response, they require essential education, training, and technical assistance and adequate funding.


**Data Set and Method:** This study involved an in-depth analysis of the role of more than 80 FBOs in the aftermath of Hurricanes Katrina and Rita.

**Data Collection Strategy:** This strategy was not described in the report; however, contact information is listed for all of the participating organizations.

**Research Question:** What is the role that faith groups have played and continue to play in the region’s recovery and renewal since Hurricane Katrina?
Main Findings:

More than any other nongovernmental sector—and in many cases better than governmental agencies—faith organizations were also able to quickly and effectively deliver people and resources needed to help hurricane victims in need.

To many in the Gulf Coast region, faith groups were the first line of defense in seeking refuge from storms. Locally and nationally, faith institutions mobilized thousands of volunteers in the largest domestic disaster-relief effort to date. Volunteers found and delivered thousands of hot meals and supplies, shuttled families in need of transportation, and staffed mobile medical units to attend to those without care.

The swift and agile response of faith institutions in the immediate aftermath of the storms established their reputation as reliable and effective service providers.

Many storm victims viewed the services provided by faith organizations as the most reliable and effective in serving their needs. A Louisiana State University survey found that the state’s residents scored faith groups’ responses higher than those of the city, state, and federal governments. Louisiana gave a rating of 8.1 on a 1–10 scale, with 1 being “highly ineffective” and 10 being “very effective.” Respondents rated the New Orleans city government at 4.6, local governments other than New Orleans at 6.5, and the federal government at 5.1.

In the 3 years since Hurricane Katrina, the return of churches, synagogues, and mosques has been a driving force in the city’s overall recovery.

Faith organizations took leadership in dispatching tens of thousands of volunteers to the Gulf Coast region. In the first 2 years after Hurricane Katrina, more than 1.1 million volunteers provided more than 14 million hours of service. Faith-related groups were the single biggest sector represented among Hurricane Katrina volunteers.

A critical ingredient to the success of the faith response to the hurricane was the national outpouring of support from hundreds of FBOs. Faith-based organizations were unique in their ability to quickly mobilize resources.

Faith institutions displayed an extraordinary willingness to cross faith lines, forming groundbreaking partnerships and interfaith coalitions that contributed greatly towards the success of Hurricane Katrina emergency efforts.

The leadership of faith-based organizations in the wake of the storms has positioned them at the forefront of rebuilding initiatives.

Implications: Faith-based organizations, more than any other civil society organizations, bring a long-term vision, moral commitment, and coordinated expertise and resources that will be critical ingredients in rebuilding the region. As a result, they are a valuable voice for national action and should be taken into account as important voices when discussing about public health preparedness and crisis management planning.

Although the role of faith groups in rebuilding the Gulf Coast region has been crucial, they cannot replace the central role of government leadership in this task. They can only continue working as advocates for better public policy, bearing witness to the ongoing need to help Gulf Coast residents and serving as an example and catalyst for effective governmental actions.

*Data Set and Method:* This study involves a retrospective qualitative analysis that focuses on lessons specifically regarding the relief phase after Hurricanes Katrina and Rita. The aim of this effort is to add strong local perspective to the overall picture regarding the charitable response to the storms.

*Data Collection Strategy:* This strategy includes the studies and perspective of church, nonprofit, and foundation leaders in Louisiana and Mississippi who were active and instrumental in ensuring care during the 2 months after the hurricanes occurred. This study is based on personal interviews and the author’s own attendance at various meetings. It is limited in its geography to the special case of Louisiana and Mississippi, where many of those involved in leading efforts were also victims affected by the disaster.

*Research Questions:* How effective was the coordination between nonprofits and churches and the main governmental coordinating agencies? How is the relationship between the charitable sector and FEMA built?

*Main Findings:*

Local nonprofit agencies and religious congregations in Louisiana and Mississippi filled large gaps and played crucial roles in ensuring the safety and well-being of victims in the immediate aftermath of Hurricanes Katrina and Rita.

This was the first time many of these groups provided shelter and disaster relief in a substantial way. They increased the scope of their human services without regard for funds or the potential future strain on normal operations; some continued providing services even though they had sustained damage.

Local religious congregations, nonprofits, and other private and public entities were sometimes sheltering as many evacuees as ARC. Their adaptability and responsiveness demonstrated the strength of their local expertise, relationships, and capability to reach and serve vulnerable populations and communities.

No effective coordinating structure existed to integrate the multitude of charitable organizations that responded.

According to interviewees, FEMA’s relationship to the broader nonprofit sector was felt to be weak. FEMA assigns only one core VAL staff per each of FEMA’s 10 regions. One VAL can have primary responsibility for covering up to eight states.

FEMA does not traditionally reimburse organizations for general operating costs, even when incurred while providing assistance to disaster victims outside of the organization’s basic mission. Although FEMA modified its eligibility requirements, 55% of nonprofits and church agencies in Louisiana were still deemed ineligible for reimbursement in providing relief after Hurricane Katrina.

Local foundations and intermediaries adapted in innovative ways and became indispensable funding partners in supporting local agencies and faith-based organizations critical to relief efforts.
U.S.–based international humanitarian relief organizations, many responding to a domestic disaster for the first time, found success in applying many of their standard methods. Placing staff on the ground for extended periods and working in partnership with local intermediary agencies, the relief organizations funneled funds and resources quickly to locally based agencies.

**Implications:** This study made many recommendations. First, a high-level coordinating body should be developed with the capability to facilitate the involvement of a large number of local charitable agencies during catastrophic events and improve the coherence and effectiveness of response from multiple organizations. Second, a commission should be formed to glean lessons learned from the Gulf Coast relief efforts and channel those insights into the formation of this high-level coordinating body. Such a commission should be comprised of senior-ranking FEMA officials, peers from ARC and members of NVOAD, staff placed on the ground by U.S.–based international humanitarian relief organizations, and leaders from local responding nonprofits, faith-based organizations, and foundations in Louisiana and Mississippi. Third, preparedness funding should be significantly increased, and such activities must be broadened to include local nonprofits and faith-based organizations, both in training and decision making. Fourth, FEMA should significantly expand and develop its VAL staffing to better ensure the readiness and integration of the nonprofit sector into charitable response. Fifth, FEMA should create more flexible funding sources designed specifically to support charitable organizations; it is imperative that FEMA change standing policy to support general operating costs incurred by organizations when acting outside of its normal mission to provide necessary relief. Congress should create a special designation—to be invoked during exceptional disasters—mandating ARC to contribute at least 5% of its overall fundraising to local grant-making intermediaries for distribution to local nonprofits and faith-based organizations.


**Data Set and Method:** This study seeks to discover how pre-disaster coordination and planning affect disaster response by distributing surveys to counties and cities involved in the 2004 hurricanes. This study reviewed the Situation Reports before, during, and after the hurricanes and in-depth interviews with respondents whose countries were affected by three or more hurricanes in 2004.

**Data Collection Strategy:** There were several aspects of this strategy, including the following:

A survey was sent to emergency managers in all 67 Florida counties in autumn 2004, as well as to four cities with emergency operation centers (EOCs) and the state emergency management office. Following a pilot survey, three rounds of mailings occurred, generating 66 responses at a rate of 92%. Most of the questionnaires (83%) were completed by the addressees; the remainder (17%) were filled in by assistant directors or public information officers.
A review was conducted of the State Emergency Response Teams (SERT) Situation Reports before, during, and after the hurricanes. The Florida State Emergency Response Team produced Situation Reports, which were made available to the public daily and weekly, that outlined current response efforts being monitored by the State Emergency Operations Center (SEOC).

Twelve in-depth interviews were conducted over the telephone and in person with respondents whose counties were affected by three or more hurricanes during the 2004 hurricane season.

Research Questions: How did county emergency managers encourage a community response under conditions of repeated hurricane threats? How can the strategies used in Florida in other disaster contexts be applied? What conclusions can be extracted from the 2004 hurricane season to improve community coordination in future emergencies and catastrophes? How did emergency managers protect businesses, individuals, and property from natural dangers by creating disaster-resilient communities?

Main Findings:

FEMA was active from the beginning of the 2004 hurricane season, and the Florida Governor (Jeb Bush) declared a state of emergency during each of the four hurricanes. He authorized SERT to activate SEOC and prepare residents for pending disaster. Each of the 17 ESFs had a dedicated staff member in the EOC during response operations.

Successful participation in these pre-disaster, consensus-building emergency planning processes can lead to strengthened organizational response to disasters. Communicating with the public is also important before a storm is forecast and hits land. The communication of this and other messages seeks to make people listen and to take direction from trusted leaders.

In addition to pre-coordination meetings, respondents also agreed that effective coordination strategies included the development of strategies to counter rumors in a timely manner (80%), the development of a plan to alert all agencies of a threat (80%), and the use of information technology to improve communication and coordination among agencies (79%).

Community coordination and the strategies used are important parts of a community awareness and preparedness measurement.

Evidence suggests that although members of the public were aware of each event, they were not convinced of the immense danger surrounding them.

Emergency plans must include alternate methods of communication, so that in the event that communication is impossible, operations run as intended. Florida uses a state-wide radio system that allows emergency responders to communicate in a disaster, regardless of the frequency that they normally use.

Working closely with the media and relaying messages to the public are important aspects of disasters that necessitate planning. The media can help with or hinder a disaster response, depending on the level of cooperation with localities.
Effective emergency management must be bottom-up; state and local governments must take responsibility first. However, the federal government also has an important role to play.

**Implications:** This study made many recommendations. First, trust and relationships among community bodies must be developed before a disaster strikes. Community coordination involves complex interaction among multiple governmental agencies, nonprofit organizations, private business, and individual citizens. Large and seemingly unsolvable problems are best approached from a cooperative angle, combining resources and preventing duplication. Second, early in the season, when expectation of disaster is low, or after many quiet seasons, it is essential that public managers clearly inform the public about the possible dangers posed by hurricanes. Third, public managers can use local resources to produce hurricane dramatizations or other television specials—similar to what many people watch on the Discovery Channel. In addition to using local media sources as communication tools, public managers can address preparedness issues and communicate with the public during the off-season. Fourth, the use of a Community Emergency Response Team in every neighborhood creates a close social connection to those members of the community who may be disconnected from the community as a whole, such as those who do not speak English, the poor, and the homeless. Fifth, emergency plans must include alternate methods of communication so if communication is impossible, operations run as intended. Florida uses a state-wide radio system that allows emergency responders to communicate in a disaster, regardless of the frequency that they normally use.


**Data Set and Method:** This study used a multipronged approach to assess the current state of preparedness efforts for minorities in California and identify major barriers, programs, gaps, and priorities for meeting their specific needs across the spectrum of emergency preparedness. Three activities were included in the assessment: (1) reviewing literature on preparedness focusing on California; (2) identifying and reviewing content of Web sites originating from governmental and private-sector local, regional, and state organizations; and (3) conducting key informant interviews with individuals who represented a range of sectors, priorities, and expertise in preparing and responding to diverse communities.

**Data Collection Strategy:** The strategy for the literature review included conducting searches in PubMed/MEDLINE database and other engines. Major government, for-profit and not-for profit, community-based, academic, and foundation Web sites were visited to look for relevant reports or publications. A total of 148 Web sites met these inclusion criteria for further analysis.
Key informants were identified through various sources, including recommendations made by the research sponsors (in particular The California Endowment), recommendations made by our National Consensus Panel on Emergency Preparedness and Cultural Diversity (in particular representatives from California), and the Web-based review of organizations and programs. The sample of key informants included six private not-for-profit organizations, three county public health departments, two local emergency management and response organizations, three CBOs, two state agencies, and one academic researcher.

Research Questions: What are the barriers and challenges to meeting the needs of racially and ethnically diverse communities? Are there specific programs and strategies for addressing these barriers and challenges? What are the program and policy gaps and priorities to integrating these communities into preparedness planning and implementation?

Main Findings:

Research and interviews identified significant individual-level and institutional-level barriers adversely affecting the ability of culturally diverse communities to engage or be engaged fully in the spectrum of critical preparedness actions.

Individual-level barriers included economic factors, a lack of trust in emergency planning and response officials, language issues, and cultural and geographic isolation.

Institutional-level barriers hindering agencies’ ability to develop and execute culturally competent emergency preparedness strategies included insufficient funding, a lack of community input into the development of plans, and limited collaboration between agencies and across sectors.

Findings also illuminated a range of promising practices and strategies that agencies are implementing to address these barriers, including actively collaborating with the local community throughout the planning process, recruiting bilingual/multicultural staff, and conducting needs assessments.

Implications: Conclusions and synthesis of recommendations from the field suggest at least five areas for concentrating future actions. The first area is coordination of information, resources, and services across organizations, sectors, and regions. The second area is the creation of infrastructure support for developing culturally and linguistically appropriate programs and services. Specific and important actions identified include offering cultural competence training for first responders and service providers, diversifying the responder workforce to reflect the cultural and linguistic composition of communities, providing on-site interpreters, and evaluating and ensuring accountability of language resources and services. The third area is collaborating between public health/emergency agencies and the local community to foster trust and understanding. Essential preparedness actions, such as risk communication, training and education, and measurement and evaluation, require the full and active involvement of diverse communities. The fourth area is tailoring emergency preparedness plans and actions to the broader social, economic, and political circumstances of communities. The fifth area is assuring sufficient, sustainable, and flexible funding opportunities to meet the needs of diverse communities.

*Data Set and Method:* A survey was developed to (1) categorize the extent that FBOs were identified within the list of total operating shelters provided by ARC and FEMA in September 2005, and (2) examine local FBO sheltering operations in Mississippi after Hurricane Katrina. Questions were targeted at assessing effectiveness and efficiency of organizational operations, logistics, and planning.

*Data Collection Strategy:* A shelter was eligible to be interviewed if it was characterized as an FBO, opened in response to Hurricane Katrina, and in operation for more than 3 weeks post-Hurricane Katrina. The time restriction was included because of the rapid consolidation in the number of operational shelters from the second to the third week. This indicated that only the remaining shelters were able to transition from an acute emergency to a subacute emergency phase. Out of 32 open shelters, 17 were categorized as FBO–managed, and 16 agreed to participate in the study. Interviews were conducted with FBO shelter leaders. Survey questions attempted to evaluate the FBOs’ ability to publicize their services, recruit and maintain a volunteer base, procure and sustain resources, provide access to medical and nursing care, and offer access to enabling services such as Internet access and administrative support.

*FBCO Definition:* Researchers defined an FBO as “an organization, group, program, or project that provides human services and has a faith element integrated into their organization” (Rural Assistance Center).

*Research Questions:* What is the decision-making process of FBO shelters? What are the advantages and disadvantages of FBO shelters with regard to their abilities to initiate and sustain a steady emergency response?

*Main Findings:*

There is currently no standardized or validated survey tool to assess informal networks in the acute phase of a disaster.

In the first and second week after Hurricane Katrina, there were 195 and 134 shelters respectively, approximately half of which were operated by FBOs. In the third week following the disaster, a rapid consolidation occurred that left only 32 open shelters, 53% (17 out of 32) of which were FBO–managed.

Formal networks, such as ARC, were imperative for sustainability of practices because the majority of FBOs did not have a routine means of monetary support and supply lines. In addition to receiving monetary assistance, 63% of the FBO shelters coordinated with ARC as a central organizing body, and 38% (6 out of 16) cooperated with ARC consolidation plans.
All of the FBO shelters either contacted by the 18 separate, informal networks identified in the survey. These networks are not formally integrated into the disaster response incident command system or state disaster plans. All of the shelters relied to some extent on informal networks for assistance with the transport and delivery of material supplies and human resources.

The greatest identified strength of FBO shelters was that they were part of and proximal to affected communities, ensuring a committed and responsible effort to assist evacuees. Because of proximity to the disaster, FBOs were able to quickly determine the needs of evacuees and communicate those needs via faith-based, informal networks. The widespread availability of FBO informal networks is evidenced by the fact that 49% of all initial shelters were FBO–managed, and 53% of the shelters after 3 weeks were still FBO–based.

Additionally, FBOs were most often able to provide response services during the acute emergency phase or the 3 immediate weeks following the event of a disaster. A single leader or small executive board made decisions on behalf of the FBO, which led to flexibility and rapidity of decision making. The majority of FBOs also provided at least one enabling service to the evacuees, such as access to telephones, the Internet, or administrative support.

Identified weaknesses of FBO shelters were lacks of routine means of monetary support, formal disaster training and education, and uniform child educational and parental support programs.

Limitations of the study included the small sample size and the likelihood of recall bias when questioning volunteers because the shelters did not often formally document numerical information about the administration of their services.

Implications: Policy makers should attempt to integrate FBOs and other informal networks into formal disaster planning to improve their role and services. Formal training for FBOs should be initiated, and emergency services should be standardized.


Data Set and Methods: A research instrument/interview guide was created to obtain information on the preparedness activities of NGOs in the San Francisco Bay area. This study concentrates on four areas: (1) organization structure, (2) perception of disaster risk in the region, (3) disaster planning activities, and (4) information sources used in obtaining information about disaster threats and disaster preparedness. Survey participants were also asked to complete a 30-item checklist regarding emergency preparedness activities.

Data Collection Strategy: A pilot study completed in August 2007 elicited 12 completed interviews. Researchers then compiled a list of 614 organizations that met research parameters by requesting and obtaining databases from the City and County of San Francisco,
the Mayor’s Office of San Francisco, and the United Way 2-1-1 Helpline. Although the Fritz Institute provided an initial list of organizations, no verified “master list” of service-providing NGOs existed. After sorting the organizations into five broad categories, a stratified random sampling method was used to select 145 for a sample. Once an organization was selected, attempts to contact the organization were made by fax, telephone, and e-mail. The overall response rate was 55.9%. Out of 145 conforming organizations, 33 were non-responsive, 31 declined to be part of the study, and 81 accepted and completed an interview.

**FBCO Definition:** To qualify for the study, an organization had to be nonprofit, non-governmental, community or faith-based, and provide direct services to clients. Conforming organizations were sorted into five categories based on the services they provided: food, health, housing, social service, and multiple services.

**Research Questions:** To what extent are NGOs in the San Francisco Bay area participating in emergency preparedness activities? What are the perceptions of disaster risk among organizations involved in emergency preparedness and response? What are the sources used by these organizations to gain information about disaster threats and emergency preparedness?

**Main Findings:**

- NGOs engaged in disaster preparedness and response in the San Francisco Bay area are not found to be sufficiently prepared for the next major disaster.

- Most organizations have developed disaster plans that focus on internal organizational issues only, such as evacuation and staff notification, rather than supportive external linkages to other CBOs and the government.

- CBOs do not appear to be actively involved in resource-sharing with other organizations. Sixty-seven percent of organizations were found to have never entered into formal preparedness or response agreements with other nonprofits in the San Francisco Bay area, and 68% never entered into any agreement with the San Francisco city or county government.

- A solid majority (71%) of organizations expressed interest in joining the Community of Preparedness (COP), which is a cross-sector initiative to bridge the governmental agencies and NGOs involved in EPR, and 11.8% indicated that they were already involved with COP. More than 70% said they would like to have more information about disaster preparedness.

- Organizational representatives are aware of the likelihood of another major disaster and often understand how future disasters will negatively affect their organizations’ operations.

- Identified weakness of the organizations included a lack of essential preparedness activities, such as a failure to obtain an emergency generator or to have facilities inspected for structural safety. Approximately half of the organizations have not informed clients about what to expect in a disaster or trained staff in life safety measures.
The overall lack of preparedness is due to resource shortages, overwhelming staff demands and a lack of concrete guidance. The study found that CBOs need increased funding for disaster planning specialists, advice from consultants and experts, and additional funding for preparedness activities. Information gathered also revealed major supply chain vulnerabilities. The study found that the city’s major food kitchens are dependent on a single supply source, which could be compromised in the event of a major disaster.

Implications: Given that most organizations are overstretched in terms of finances and resources, it is unlikely that they will be able to sufficiently support needy and vulnerable populations in the event of a future disaster. Organizations should consider developing disaster plans that include external issues, such as linkages to other CBOs and the government.


Data Set and Method: This study involved the qualitative review of key FEMA and ARC documents and interviews with officials from FEMA, ARC, other major national voluntary organizations (The Salvation Army, Southern Baptist Convention) and emergency management officials from a selection of states (including Louisiana and Mississippi). Also conducted were reviews of NVOAD documents, interviews with NVOAD officials, a review of the FEMA Web site, interviews with officials within FEMA’s Public Assistance Program, FEMA’s VALs, local voluntary organizations, and state and local governments in the Gulf Coast region. Lastly, a review of reports on the response to Gulf Coast hurricanes was completed.

Data Collection Strategy: This strategy involved a document review of federal and voluntary organizations and interviews with voluntary organization officials and FEMA officials.

Research Questions: What was the rationale of DHS for shifting the primary role for coordinating mass care from ARC to FEMA, and what are potential implementation issues associated with this change? How well equipped is NVOAD to fulfill its role in the National Response Framework (NRF)? To what extent has FEMA addressed issues that arose after Hurricanes Katrina and Rita regarding the provision of mass care services to the disabled and elderly? To what extent have major national voluntary organizations made preparations since Hurricanes Katrina and Rita to better meet the mass care needs of the disabled and elderly? For the local voluntary organizations providing mass care after Katrina and Rita, what difficulties did they face in being reimbursed under FEMA’s Public Assistance Program and to what extent has FEMA addressed these issues?
Main Findings:

The mass care primary agency role in the NRF should be shifted from ARC to FEMA, mostly because the primary agency needs to be able to direct federal resources.

NVOAD is well suited for its coordinator role because it is not a direct service provider and it brings together voluntary organizations with diverse objectives and sizes; however, NVOAD’s staff limitations constrain its ability to effectively fulfill this role. Some of the larger and older member organizations believe that NVOAD is increasingly serving the needs of new, start-up disaster response organizations, rather than focusing on larger members. NVOAD’s response indicated that it is a strength of the organization to allow smaller members representation in ESF-6 function.

FEMA needs to improve mass care services for the disabled. Only ARC has taken steps to better prepare to meet the needs of this population.

Voluntary organizations faced difficulties (limitations in scope of program coverage and communications difficulties) in seeking reimbursement under the Public Assistant program.

Implications: First, FEMA should enhance the capabilities of its VAL workforce. Second, to improve information sharing responsibilities, NVOAD can assess its member information needs and improve its communications strategies. Third, to address disability issues, the study recommends that FEMA develop steps for coordinating. Fourth, FEMA should make the information on its Web site more user friendly, specifically the information about reimbursement opportunities for voluntary organizations.