THE SOCIAL ECOLOGY OF HURRICANE KATRINA: RE-WRITING THE DISCOURSE OF "NATURAL" DISASTERS

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Introduction

It is increasingly difficult to distinguish natural events from those influenced by human actions. In disaster mental health literature, there are usually three categorizations of disasters: natural, technological and complex (Rosenfeld, Caye, Ayalon, & Lahod, 2005). Technological disasters refer to such events as oil spills, nuclear power plant explosions and chemical spills and emissions. Complex disasters usually mean acts of violence or terrorism, such as the September 11 attacks or the violent tragedies of Oklahoma City and in the community of Columbine, Colorado. Natural disasters refer to occurrences such as hurricanes, Tsunamis, earthquakes, floods, tornadoes, mud slides, and volcanic eruptions.

Although many 'natural' disasters are caused by the shifting of tectonic plates or the interactions of bodies of water with atmospheric conditions, they are not separable from the consequences of human actions. Increased human settlement of flood plains, hillsides prone to mudslides and other areas vulnerable to 'natural' disasters place increasing numbers of people at risk, for example. As international agreements such as 1997 Kyoto Protocol and the 1992 United Nations Framework Convention on Climate Change (UNFCCC) attest, scientific communities across the globe have long identified 'natural' events such as the melting of polar ice caps which increase the risk of flooding and the frequency and severity of storms as consequences of human actions.

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Furthermore, researchers in various fields including public health, economics, geography, and environmental sciences have established that the risk factors are not random. The ongoing environmental risks for poor people and people of color are consistently higher than for white people and those who are economically privileged (Faber & Krieg, 2001; NAS, 2002; Quintero-Somaini, 2004). The socially disadvantaged are more likely to live near chemical plants, landfills, and other contaminated lands. There is a greater likelihood that they will be living in more vulnerable, substandard dwellings served by older, less well maintained infrastructures (e.g. roads, sewers). They are more prone to be living in overcrowded, environmentally risky areas. Much of public housing, built during the 1950s and 1960s, tends to cluster in areas that are along major transportation routes, reclaimed land or adjacent to industrial facilities (Cutter, 2005). The effects of disasters on those living in such already compromised environments are predictably worse; the most disadvantaged members of the most disadvantaged communities suffer the greatest losses when disaster strikes (Kaniasty & Norris, 1999).

Hurricane Katrina was, according to President Bush, "one of the worst natural disasters in our nation's history" (CNN, 2005). But given the facts outlined above, the devastations of Katrina cannot be properly understood as the results of a force of nature of human manufacture. The tally of damage and destruction suffered by the Gulf Coast in the wake of the hurricane was indeed profound. More than 1000 lives were lost; homes and property were destroyed. Included in the debris of vanished businesses, jobs and obliterated communities and neighborhoods were the remnants of scattered families and shattered lives. But the damages incurred were not randomly distributed. The level of devastation and the predicted likelihood of recovery of neighborhoods and

communities corresponded with the amount of political and socio-economic capital held by neighborhoods and communities prior to the hurricane. Why does then, the discourse of "natural disaster" persist? What are the consequences of constructing Katrina as a "natural" rather than a manufactured disaster? What material consequences ensue from such a construction and whom does such a construction benefit?

We analyze in this paper the significance of this discourse of "natural disasters" through the framework of social ecology, "a coherent radical critique of current social, political, and anti-ecological trends" as well as "a reconstructive, ecological, communitarian, and ethical approach to society," a radical view of ecology and of social/political systems originally associated with the work of Murray Bookchin (Vanek, 2000)}. Since its development in the 1960's, the concept of social ecology has been used in various fields outside of environmental ecology as a frame through which to highlight "the dynamic relations between people and their surroundings" (Stokols, 2000). We use the term here to indicate our view that a complex interaction of factors constitutes the unique set of circumstances which shape the effects of a particular disaster. The social ecology of model contests, in this sense, the neutralist discourse of "natural disasters" by underscoring the numerous interdependent *social* forces which shape the context in which disasters occur. These forces include the political economy, which refers to the historically contingent, recursive interactions between politics and economics (Evans & Stephens, 1988), which forms the context of what is possible, probable, and actually done in anticipation of and response to natural disasters. The dynamics of racism and discrimination interact with the political economy and contribute to critical decisions,

which shape the social ecology of 'natural' disasters', such as where toxic chemicals are stored and whether or not levies are adequately fortified.

The Social Ecology of Natural Disasters – the case of Katrina

The destruction wrought by the Hurricane Katrina was profound and multilayered. The breached levees resulted in the flooding of up to 80% of the city with water rising 25 feet in some places(Centers for Disease Control and Prevention & U.S. Environmental Protection Agency, September 17, 2005). Potable water and food were unavailable; there were no stores or restaurants at which to purchase them, and no banks or ATMs at which to obtain money to purchase goods even if they had been available. There was no electricity and no phone service with which to report such problems even if there had been any municipal services to which they could be reported. Transportation was severely curtailed and streets were covered with contaminated mud, branches, clapboards, shingles, and nails, which made even walking hazardous. Life without air conditioners in the stultifying heat posed not only discomfort but serious health risks, particularly for the elderly and infirm. Along with the loss of private property such as houses and household goods, parks, meeting spaces, civic offices, recreational facilities— infrastructure of public life—were damaged, often beyond repair. Daily routines, critical for all, but particularly for children, were ruptured with no foreseeable return.

Viewed through the lens of social ecology, disasters, including those constructed as "natural" ones, occur within a context, a complex social terrain constituted through the interaction of many social forces. We know, for instance, that four of the greatest risks for suffering adverse consequences in natural disasters are overcrowding, poor infrastructure of dwellings, poor health and nutrition, and political instability (Rosenfeld,

Caye, Ayalon, & Lahod, 2005). To put it simply, poor populations, and particularly poor minority populations who tend, in the U.S., to be more likely to be poor than whites, are more likely than the wealthy and the privileged to suffer adverse effects of natural disasters. The effects of a "natural" disaster are not random, in other words. They cannot be conceived as isolated effects solely attributable to a "naturally" occurring phenomenon but must be understood to the effects of existing social inequalities. That "Thousands and thousands of modest houses in low-lying urban neighborhoods and others in white and black suburbs were inundated while the higher-value French Quarter and downtown remained dry" (The Brookings Institution Metropolitan Policy Program, 2005, p.1), cannot be explained simply as a fact of nature.

Furthermore, past resources influence the acquisition of future resources, and after a disaster, already socially isolated and oppressed populations find it incommensurately more difficult to recover (Kaniasty & Norris, 1999). Poor people and people of color are less likely to have savings, insurance, access to credit, friends and relatives with resources to spare, and other cushions which help people to recover from disasters (Brown et al., 2003; Shapiro, 2004). When they are relocated they are more likely to encounter prejudice, hostility, cultural insensitivity than to feel as if they are in a place where they feel comfortable, secure and valued (Wilkerson, 2005, October 9). They are also more apt to be the subjects of narratives, whether through words or pictures, which emphasize negative tendencies, exaggerate pathology, and exacerbate low morale. In other words, not only the immediate effects of a disaster, but the long term recovery possibilities from a disaster are, therefore, mediated by the socio-economic structures in which communities and individuals are emplaced prior to a disaster. "What happened to

greater New Orleans when Katrina struck had a lot to do with what was happening there before the disaster—that is plain." (The Brookings Institution Metropolitan Policy Program, 2005, p.20)

The specificities of Katrina's impact on New Orleans starkly illustrate these points. 67.3% of New Orleans' population (compared to 12.3% for the U.S.) prior to the hurricane were African American (The Urban Institute, 2005). Even in a markedly poor city (27.9% of the city was poor compared to 12.4 % for the U.S.), African Americans families were disproportionately poor, comprising 91.2 % of the total of poor families of all races in the city. New Orleans was a city of great disparities, a city of distinct neighborhoods highly segregated by color and income (Cose, 2005, September 19). Of its 177 census tracts there are 81 in which none of the respondents to the 2000 Census identified themselves as Non-Hispanic White. In these 81 tracts 89% identified themselves as Black. Likewise, there are 35 tracts in which none of the Census respondents identified them selves as Black. In those tracts 83% of the population listed White as their race on the Census. Forty seven percent of whites in New Orleans live in census tracts where none listed their race as "Black only" on the 2000 Census. Socioeconomic status follows these lines of segregation. Over all in New Orleans the median household income is $27,133, for Whites it is $40,390 and for Blacks it is $21,485. One percent of white households and 8% of black households receive public assistance. Overall, 28% of New Orleans residents live below the poverty line. Among Whites, however, only 11% live below the poverty line while 35% of Blacks live below the poverty line. "As a result, blacks and whites were living in quite literally different

worlds before the storm hit" (The Brookings Institution Metropolitan Policy Program, 2005, p. 6).

For Blacks and many other people of color, the consequences of high rates of poverty and racial segregation have been ruinous. Within the context of the U.S., the kind of political instability the disaster literature cites as a risk factor is well demonstrated by the fact that pre-Katrina New Orleans suffered a murder rate 10 times the national average (MSNBC, 2005). The New Orleans police force was plagued by corruption in the years prior to the hurricane and was accused of misconduct and brutality both during and after the storm (Foster, 2005). Given the city's staggering poverty rates coupled with the well-established facts that "Evidence of racial and ethnic disparities in healthcare is, with few exceptions, remarkably consistent across a range of illnesses and healthcare services" (The National Academy of Sciences, 2002), it is unsurprising that ill health and nutrition were evident in New Orleans. As a whole, the population of New Orleans experiences a high burden of infectious diseases. Compared to the State of Louisiana overall, New Orleans has 2.76 times the state's rate of tuberculosis cases, 1.35 times the state's rate of Syphilis cases, 1.8 times the state's rate of Gonorrhea cases and 1.96 times the state's rate of Chlamydia cases. Of the 12,090 people living with HIV/AIDS in the State of Louisiana, 4,483 of them live in New Orleans, a very high number considering that New Orleans represents about 10% of the population of the state. These statistics serve as a proxy for the overall health of the city's residents and suggest a high disease burden and poor pubic health.

The term "natural disaster" with its connotations of an event outside of human control and manufacture – in other words, outside of the realm of the political– belies the

social ecology of Hurricane Katrina. This observation is not meant to negate the power

of nature, but rather to underscore that the ecology of the disaster encompassed much

more than the fact of the hurricane itself. The areas worst affected by Katrina were those

populated by poor people of color, already living under risky environmental conditions in

dangerous and unstable neighborhoods.

> In this regard, Katrina's impacts were not just massive, but uneven. Broad as it
> was, the destruction was not uniform. Black people and poor people bore the
> brunt of the devastation because—for the most part—they lived most often in
> the lower-lying, more flood-prone sections of the city, such as Mid- City or the
> Lower Ninth Ward. Or as the Louisiana State University geographer Craig
> Colten observes: "With greater means and power, the white population occupied
> the better-drained sections of the city, while blacks typically inhabited the
> swampy `rear' districts." (The Brookings Institution Metropolitan Policy
> Program, 2005, p.13)

In New Orleans, "hydrology and topography have long intersected with race, class, and

sociology" (The Brookings Institution Metropolitan Policy Program, 2005, p.13). The

levees that broke were obviously of human manufacture but more importantly, the web of

decision making involved in their lack of fortification, despite repeated warnings from

various sources, were political judgments made with the foreknowledge of which

neighborhoods and which communities would suffer most from such decisions. It

represented "a malign intersection of weather and water with a man-made social and

racial topography that had been created over decades"(The Brookings Institution

Metropolitan Policy Program, 2005, p.20).

The evacuation plans instituted prior to the hurricane, a plan constructed upon the

assumptions of a particular normative lifestyle, called for a mass departure protocol

predicated on the use of privately owned cars. However, "the metropolitan area's sharp

geographical differences in household type and well-being ordained that those who lived

in flooded areas were less likely to own their homes and more likely to live in rental apartments, include children living in single-parent households, and lack access to a car" (The Brookings Institution Metropolitan Policy Program, 2005, p.17). Both the decision to channel funds away from the levee projects and to formulate a plan for evacuating the City via private means may have been plans targeting the greatest good for the greatest number. But they were formulated within a calculus of entrenched social and economic hierarchies which assign differential values to different neighborhoods, communities, and populations. As such, they were plans which left behind those who did not fit the designated normative order, the most vulnerable members of society. They include the aged, the infirm, the poor, population subgroups whose literal and socio-economic mobility are compromised even under the best of circumstances.

The difference between the discourse of "natural disasters" and that of social ecology can perhaps be better understood in terms of differential locating of the narrative frame. A natural disaster discourse frames the issues of damage and recovery narrowly and linearly, while the discourse of ecology frames the issues widely and complexly. The former construction begins the narrative with the onset of a precipitating event such as a hurricane, and limits the tally to the damages specifically and directly linked to the hurricane event. The latter, ecological construction locates the beginning of the narrative much earlier, taking into its accounting the prior existing inequalities and vulnerabilities which mediate the risks for adverse effects. It includes in its reckoning a wider and far more complex web of social phenomena that mediate the kind of damages an individual or a community suffers.

Thus, from the perspective of a "natural disaster" discourse, Hurricane Katrina can be framed as a single event, a storm that gathered and caused destruction when it made landfall. From the social ecological perspective, however, the narrative of the disaster would recognize the differential impact of the hurricane; it would encompass the ongoing neglect of the City of New Orleans and its poor and largely black neighborhoods by the federal government. This assessment of damages would take into account the particular geographic location of African Americans in economically devastated, low-rent and low-lying neighborhoods in New Orleans which were disproportionately damaged by the storm. That narrative necessarily includes the historical exploitation and oppression of African Americans in the U.S., a story that reaches back centuries and features the institution of slavery, the Civil War, the "Black Codes," Reconstruction, and the legacies of racism that was structured into the New Deal and other subsequent social welfare programs (Frymer, Strolovitch, & Warren, 2005). In other words, Katrina would be placed within the context of a larger history of discrimination which has resulted in the current political economy of stratification that leaves particular populations with diminished economic, political and social capital to utilize for storm protection and recovery. A narrative framed from the perspective of social ecology would not formulate the problem as the result of a random encounter with a natural disaster.

The social ecology model challenges the validity of the discourse of 'natural' disasters. From our perspective, the pervasive formulation of the series of events surrounding this hurricane as a "natural" phenomenon is a construction that occludes the complex reality of the events and the socio-political context in which they occurred. This view that the devastation wrought in Hurricane Katrina's wake was the results of an

inescapable force beyond human control obscures the economic and social factors which mediate —magnify or minimize—the impact of disasters on the communities and people who experience them. This formulation serves to mask the underlying social stratification and oppression that shape the kind of impact disasters have on different places and populations. It serves as a cover for the political exploitation and ineptitude that impede socially just recovery efforts, and supports the perpetuation of discriminatory practices towards the poor

Since Hurricane Katrina, the nation (and world) witnessed the President of the United States addressing a dark and empty New Orleans, flooded in the glare of arc lights fueled by a generator brought in for the purpose of this staged event (as the city had no electricity), vowing that the city would be rebuilt. But what did this mean? It is clear that New Orleans must be rebuilt, and that this task cannot be accomplished without massive governmental support. It is equally clear that New Orleans should not be restored to its former racially divided, poverty-stricken, flood-prone design. "To replicate such a place more or less as it was now that the storm is over would be not just short-sided and wasteful, but wrong.(The Brookings Institution Metropolitan Policy Program, 2005, p.2). Viewed from the social ecology perspective, however, that "what was happening before Katrina owes at least in part to government policies, including federal ones" (The Brookings Institution Metropolitan Policy Program, 2005, p.20). The government's past history in New Orleans, its public housing policies responsible for building and maintaining racially segregated enclaves of poverty, its highway development projects which promoted mass settlements of reclaimed wetlands and flood plains, all begs the question of what kind of city it will rebuild.

What will be rebuilt, and for whom, and how? Already people are losing homes as they default on mortgages. Others are being evicted for non-payment of rent (Davis, 2005). Demoralized and dispirited residents are selling their property at bargain prices, often to speculators who take advantage of their desperation (Davis, 2005). Will the poor be able to return to their pre-disaster neighborhoods? Will people of color find that the segregated quarters where they lived in poverty are now no longer available to them because they are developed for middle and upper middle class white people? Are we in the midst of witnessing massive "ethnic cleansing" in the wake of the hurricane (Davis, 2005)?

Who will rebuild New Orleans and at what cost? There is already much debate about how such rebuilding should be funded and whether other programs for those in need should be slashed to pay the costs (Reidl, 2005). To date, the federal government has not adequately funded reconstruction of the devastated Gulf Coast. In the absence of reliable concrete offers of federal aid, the State of Louisiana is engaged in a similar debate: what programs should be slashed in order to rebuild schools, roads, homes and other infrastructure in distressed areas (Steinhauer, 2005,)? Who will perform the labor and at what wages? Who will and will not return to the city? What contractors will benefit from the rebuilding effort? Will a federal government which has consistently allowed corporations to exploit the exigencies of war and disaster as opportunities for profit, use Hurricane Katrina as an opening for the privatization of cities—rebuilt by Halliburton, under contracts that pay construction workers wages below federal guidelines? Will environmental regulations be relaxed even further? Will reconstruction draw in those who can afford to buy and rent the new townhouses (affluent immigrants),

while former residents (poor emigrants) are scattered and disappear from public consciousness?

The post-disaster phase of Hurricane Katrina is in its emergent phase. As the focus of the nation's attention to the disaster begins to fade, however, those with political and economic power who wish to exploit the situation can operate without fanfare, away from the glare of television cameras and public scrutiny. To continue to view these series of devastations as a "natural" disaster rather than one of human, that is societal, manufacture, would be to allow such exploitation to happen with impunity. As a society, we would witness without noticing, the massive reshaping of communities with profound losses to many and profits for a select few. We must examine the social ecology of Katrina not only to better understand events now in the past, but to aid in formulating a recovery that acknowledges the multiple social forces that construct and maintain social inequities.

Social Ecology of Health and Human Service Responses

Employing a social ecology construction of Hurricane Katrina rather than as a purely 'natural' disaster has implications for how clinicians and other health and human service workers can effectively respond to those in most need. Social workers, counselors, psychologists, nurses, doctors and other health and human service workers traditionally are deployed after disasters in an effort to mitigate the losses and suffering of survivors. Thousands of people are helped by their efforts. Yet, if responders only focus on the immediate needs of people, and attempt to respond to all persons and communities in a neutral fashion, the economic and social inequities and disparities we have described will not only be left undisturbed, but further reinforced. The maxim that

the 'personal is the political', while always true is particularly salient when responding to "natural" disasters.

Transforming Organizations

Many health and human service workers respond by volunteering with national and local charities, government entities and non-government organizations (NGOs). As we have argued elsewhere (Park & Miller, In-press), such organizations are never neutral. They have their own histories, values and assumptions which shape who responds, which populations are reached or not reached and how people are served. The have their own political economies and social ecologies which reflect the "enduring inequalities" (Tilly, 1998) discussed above.

Thus the first place where health and human service workers should try to advocate for those who are socially and economically vulnerable is within the organizations and agencies which employ or deploy them. Key questions to ask are who receives services, who provides services, and are services culturally responsive? Due to the social ecology of disaster, there is usually greater need in those communities which have the greatest vulnerabilities and the fewest resources. Those communities contain the people who have the highest degree of risk – due to age, health status, income (Zakour & Harrell, 2003) as well as social, cultural and linguistic isolation. If services are proffered in a general, blanketed fashion such people and communities are less likely to hear about, seek and receive services. Targeted outreach is essential to reaching those who are most in need.

Cultural responsiveness is also called for. This includes linguistic competency providing familiar goods and services, to understanding worldviews, values and cultural

styles. Far too often services are provided with a one size fits all orientation, and the one size reflects mainstream, Eurocentric U.S. values and customs. For example, most of the Vietnamese population in Biloxi did not speak English. Many were not comfortable sharing their problems with strangers or talking about feelings in front of their loved ones. They were used to a diet of rice and seafood and yet were receiving supplies of peanut butter and MREs.

Then there is the issue of who is providing services. Many large charities and government organizations are staffed by white, middle class people (Park & Miller, In-press). Until such entities have workers and volunteers who actually look, speak and understand the world from the many vantage points of those affected by 'natural' disasters, it will be difficult to adequately serve non-white, non-middle class communities. Class, race, and ethnic bias are endemic in major relief organizations and this will continue to be the case until there are massive shifts in staff diversity.

But the task for social workers and other health and human service personnel who respond to disasters goes well beyond training the workforce. It will be necessary for disaster relief and response organizations to transform themselves into systems that are multi-racial and multi-cultural; that are not bastions of white, Eurocentric privilege. This means completely overhauling of every aspect of these organizations: mission statements, personnel practices, staffing and promotion policies (Donner & Miller, 2005). It will also require re-examining the paradigms, theories and concepts used to guide disaster relief. For example, the American Red Cross was founded in the 19th century to attend to wounded soldiers, a mission that called for neutrality and impartiality (Park & Miller, in-press). That perspective is inadequate for organizations that respond to domestic

"natural" disasters where great inequality and social divisions existed before the disaster and continue after it. An "impartial" perspective inevitably reinforces and contributes to these very social disparities. What is called for is an approach which grasps the social ecology of disasters and actively engages in outreach and culturally responsive services to communities that have the greatest need.

Pre-disaster Planning

Health and human service workers are usually deployed after a disaster strikes and are involved with disaster mitigation, recovery and rebuilding. As we have argued, the pre-disaster political economy and social ecology greatly influences who is most vulnerable and at greatest risk. Pre-disaster planning involves assessing which people and groups live in already vulnerable areas. Pre-disaster planning is often conducted by government bureaucracies, leaving out the voices and ideas of local citizens. By initiating grass roots organizing, clinicians can help people work toward anticipating their needs, and mobilizing their resources and assets at times of adversity. Another way for clinical social workers, counselors and therapists to contribute to the mental health of potential disaster survivors is to work with major charities and government organizations to plan prevention and mitigation strategies *before* disaster strikes. Such planning would also include developing, training and supporting local, indigenous people as resources for their own high risk communities.

Post-disaster Macro-Planning

As clinical social workers ranging from Bertha Reynolds to Jerome Sachs have consistently argued, the personal is political and the private troubles of counseling have their analogs in public policies and practices. Most clinicians are deployed after a

disaster to offer direct crisis services to individuals, families and groups. Few are engaged in large scale planning, mobilization or decision making. To some extent, this pattern is reinforced by the impulse to do what clinicians have been trained to do: counsel and respond to survivors, using their interpersonal skills. As important as this is, it is equally vital to work at the level of systems planning and community intervention to craft and implement response and service strategies that are mindful of social ecology and that actively seek to achieve greater equity and social justice. In concrete terms this can mean serving as American Red Cross supervisors or managers, or supporting local planning councils which have meaningful participation from those who are politically underrepresented. Pre and post disaster planning require that clinicians actively work in the political realm and strive to influence organizations, systems and communities.

Expanding Disaster Discourses

Since the discourses surrounding 'natural' disasters reinforce biases and inadvertently promote inadequate and socially unjust relief efforts, it is essential for clinicians to energetically engage in public discourses. Clinicians are allowed unique access to the inner lives and social realities of storm victims, and have not only the capacity but the obligation to make the links between their disaster related problems, entrenched social oppressions, and inadequate social policies.

It is astonishing that one of the major discourses after Hurricane Katrina was the rediscovery of poverty and racism in the U.S. (Alter, 2005). The high rates of poverty and ingrained patterns of racism and segregation in New Orleans and the surrounding areas have been well known to health and human service workers for many decades. How is it possible that we were unable to share this knowledge with other U.S. residents?

This points to the necessity of engaging in public discourses about social ecology before disasters strike, and of taking advantage of the seams in hegemonic, subjugating discourses that are opened up by large scale calamities. If every clinician engaged in post-disaster response wrote a narrative which was shared with others – either in a professional presentation, letter to the newspaper, op-ed piece, poem, or other form of public expression – there would be many voices contesting the pre-disaster consensus of normalcy. It is also important to keep those narratives in the forefront of public consciousness. The newly found awareness of inequality is already fading from the public eye and will eventually disappear until the next 'natural' disaster lays bare the foundations of social inequality. Ultimately, we hope there will be ongoing discussions about the social ecology of disasters at many levels: in organizations, within communities, across regions, in state and federal legislatures, and in a variety of media sources.

Conclusion

We have argued that much about 'natural' disasters is un-natural. And while we cannot completely control floods and hurricanes, we do certainly influence the factors which increase risk and vulnerability. We have contested the discourse of "natural"' disasters and have argued that formulating effective pre-disaster plans and post-disaster relief programs require the acknowledgement of the social ecology which shape pre-disaster vulnerability, disaster losses, and the potential for post-disaster recovery. We urge clinical social workers and the many other health and human service workers who responded to Hurricane Katrina to continue their work even after their clinical duties are over. We encourage clinicians to take participate in pre-disaster planning and in the

implementation of socially just post-disaster services. Equally important is the sharing

the stories of their work and of their client's struggles. In making the links between those

struggles and the larger social and political forces of inequality explicit, clinicians can

actively influence the shape of public discourses. As Lani Guinier (1998, p.311) has

stated, "the challenge ahead is to lift more voices," because "if we succeed, it will be

because Americans of all walks of life join together, moved by a new vision of social

justice that they themselves have made."

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