

**APPLESEED HURRICANE KATRINA PROJECT
BIRMINGHAM CITY REPORT**

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BIRMINGHAM

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I. INTRODUCTION

After Hurricane Katrina hit the Gulf Coast on August 29, 2005, it carried its wind and rain inland some 330 miles north to Birmingham, where wind toppled trees and cut power lines for days. In this environment, approximately 20,000 evacuees from the coast sought aid and refuge in Alabama's largest city. An estimated 1,500 of those evacuees remain in Birmingham today. By all accounts, Birmingham and Jefferson County could have handled additional evacuees thanks to the professionalism of the organizations and public servants discussed below and to the open-heartedness of Birmingham's citizens, nonprofits, faith-based organizations and businesses. All of these groups were inspired by Governor Bob Riley's repeated request that Alabamians treat Hurricane Katrina evacuees "like our own."

Birmingham is the largest city in Alabama, with a population of approximately 240,000, and is located in Jefferson County, with a population of approximately 662,000. The Birmingham Metropolitan Statistical Area (MSA) has a population of approximately 1,100,000.

One must travel approximately 340 miles from New Orleans, Louisiana, or approximately 330 miles from Gulfport, Mississippi, to arrive in Birmingham.

Birmingham's geography and climate render it vulnerable to tornadoes, forest fires, flash floods, hurricanes and even earthquakes. Emergency management officials and disaster relief organizations in the region frequently respond to such incidents, yet representatives of all such agencies indicated that the response to Hurricane Katrina was by far the most challenging they had experienced to date.

The city's initial response was described generally as a success. For the most part, sheltering and temporary housing efforts ran smoothly. The Alabama Bureau of Tourism and Travel, through its toll-free telephone number and website, served as a central source of information for evacuees, volunteers and responders about hotels and motels, shelters and other housing accommodations. Local agencies, and later the Federal Emergency Management Agency (FEMA), established central hurricane recovery centers where evacuees could apply in person for various types of assistance and connect with agencies that could address their short-term and long-term needs. These "one-stop" centers were described by service providers as a model for the region and were cited by evacuees as a wonderful resource.

Most of the evacuees who arrived during the first four months after Hurricane Katrina and remain in Birmingham have moved into permanent housing, acquired furnishings, established utilities and enrolled their children in school. Many have found jobs and have begun to establish economic security. Birmingham's Unmet Needs Committee (UNC), a collaborative, case-management approach to meeting long-term needs of those affected by disasters, helped hundreds of families to become established in Birmingham. The Birmingham Chapter of the Red Cross has not received direct requests for assistance from storm evacuees since March 2006.

However, not all evacuees have landed so gracefully, and service providers note that a significant evacuee population has existed and continues to exist only marginally in Birmingham. Evacuees who arrived in the city more than four months after Hurricane Katrina have found it much more difficult to obtain assistance from FEMA and other agencies — and evacuees are still arriving and requesting assistance with housing, school enrollment and health care. Because many types of assistance were or are only available to families with children, evacuees without children and the elderly have experienced a less supportive safety net. As evacuees have dispersed from centralized shelters and temporary housing to permanent housing throughout the greater Birmingham area, transportation has emerged as a salient need. Many evacuees do not have cars, and they have found Birmingham public transportation to be an impractical means to navigate the city. Evacuees without their own mode of transportation have had great difficulty finding jobs, and without jobs, will not have the means to support themselves after temporary rental assistance terminates. Finally, many service providers are concerned about the lack of mental health resources in the Birmingham area and worry that the psychological after-effects of the evacuation that only now are surfacing are not being addressed.

Many evacuees did not accept how difficult it would be for them to return to their homes on the Gulf Coast, and so they did not take advantage of initial offers of assistance with long-term needs, such as job training, employment, health care or counseling. Now evacuees are much more dispersed, and agencies with suitable programs for those evacuees do not have a good means to identify and offer their services to evacuees. In Birmingham, where approximately 20% of families live below the poverty line, impoverished evacuees who have chosen to stay in Birmingham are especially vulnerable.¹ They do not have the “savvy” of long-

¹ United States Census Bureau, *Census 2000 Demographic Profile Highlights*, at http://factfinder.census.gov/servlet/SAFFacts?_submenuId=factsheet_0&_sse=on (last visited Aug. 4, 2006).

term Birmingham residents, who know the city and its systems, to access the resources available to them. It will take outreach, caring and continued vigilance to ensure that all evacuees continue to find success and stability in Birmingham.

Rare is the evacuee who requires only housing help, or only legal assistance. Indeed, the five discrete topics discussed in this report reflect interconnected human needs, and it is important to develop holistic ways to address those needs. For example, transportation needs were identified in all areas – from looking for housing to finding a job and going to a hospital. The absence of an effective and large public transit system in Birmingham was offset initially by the transportation services offered by numerous private citizens and community and faith-based groups. Evacuees need a permanent transportation solution to avoid being stranded – yet helping evacuees with this type of need is not the direct responsibility of a doctor, teacher or employment center. Coordination among service providers and communication with those in need is particularly vital now, because establishing evacuees as permanent and self-sufficient members of the Birmingham community will require the cooperation of all governmental entities, public and private aid providers, faith-based groups and individual volunteers and professionals.

II. IMMEDIATE RESPONSE

On Tuesday, August 30, 2005, Birmingham learned that it would be receiving evacuees displaced by Hurricane Katrina and officials began implementing their plans for sheltering and meeting the immediate needs of the evacuees arriving from the coast. The Jefferson County Emergency Management Authority (JCEMA) coordinates the countywide response to any natural disaster together with the mayor of each city in the county and with the local chapters of the American Red Cross and United Way of Central Alabama (UWCA). Each city in the county is represented on the JCEMA, and the mayors of those cities elect the chair.

A. Shelters.

There are two major Red Cross shelter sites in Birmingham. One is located at the Birmingham-Jefferson Convention Complex (BJCC) and has a capacity to house 900 evacuees. The other is situated at the 15,000 square foot main concert hall of the city-owned Boutwell Auditorium (Boutwell), which was used as a shelter after Hurricane Dennis in 2005. The Red Cross could not activate Boutwell as a shelter after Hurricane Katrina because workers were installing a metal, overhead catwalk in the main concert hall at the time; however, other portions of Boutwell were used to house a disaster recovery center later in the relief process. Between the BJCC shelter and other, smaller shelters, approximately 4,000 storm evacuees were served in Red Cross shelters in the Birmingham area.

Because the BJCC shelter and local hotels started filling quickly, the Governor contacted the JCEMA and asked it to prepare to house and shelter a large influx of evacuees. In addition to the BJCC, other, smaller shelters were also activated. In total, Birmingham estimated it could accommodate 5,000 evacuees.

1. BJCC Shelter.

The BJCC shelter was the largest Red Cross shelter in the city, with a capacity of 900, and it opened on August 29, 2005. The Red Cross provided food, and the members of the Baptist Association of Jefferson County cooked hot meals using portable kitchen facilities. No showers were available for evacuee use at the BJCC, so the Baptist Association of Jefferson County also brought in a shower trailer, and the Red Cross provided comfort kits and towels to evacuees.

In addition to the cots and sleeping area in the main exhibition hall, the BJCC shelter had a registration table; a jobs board; a medical area, including a triage center, a pharmacy and crisis

counseling; and a receiving point for donations (most of which were eventually given to the Salvation Army or Goodwill for distribution to Hurricane Katrina affected persons).

On September 13, 2005, the Red Cross had to close the BJCC shelter because the space was scheduled for other uses. The Red Cross worked with evacuees to ensure that all had relocated to another shelter, temporary housing or permanent housing.

2. Medical Needs Shelter at Alabama State Fairgrounds.

Birmingham's Veterans Administration Hospital coordinated immediate services for evacuees flown in as part of the first-ever activation of the federal National Disaster Medical System (NDMS). Pursuant to NDMS protocol, physicians and paramedics were called to a hangar at the Birmingham International Airport to receive reported thousands of evacuees with urgent medical needs arriving from New Orleans. The scene in New Orleans was grim — desperate to leave, victims of the storm were literally hanging on to the wings and landing gear of the planes and preventing most planes from taking off — but infrastructure there had been so badly damaged that there was no good way to communicate this information to Birmingham. Ultimately, Birmingham physicians and paramedics waited for hours in the hot airport hangar only to triage and transport to local hospitals approximately 100 acute care patients who were successfully flown in from New Orleans. In addition, NDMS placed approximately 100 nursing home patients, who arrived unexpectedly on NDMS flights, in local nursing homes.

At the request of Governor Bob Riley, the Jefferson County Department of Public Health and JCEMA set up a medical needs shelter at the Alabama State Fairgrounds with a capacity of 250, although evacuees in residence there peaked at fewer than ten. Evacuees eligible for use of medical needs shelters included those who were bedridden or who needed uninterrupted electrical power to run durable medical equipment. However, during NDMS triage, many such evacuees were transferred directly to nursing homes. Insulin-dependent diabetics and blind

people, who had learned to self-manage their disabilities, were able to function in regular shelters.

In addition to establishing the medical needs shelters, much of the medical help provided by the Jefferson County Department of Public Health related to dispelling misinformation (e.g., no cholera or malaria concerns), arranging for the anticipated influx of people who would require placement in the medical needs shelter, planning for triage and transportation of evacuees arriving by bus and air, setting up the shelter, arranging for food, power, telephone, and staffing and helping evacuees with prescription refills.

B. One-Stop Centers.

1. Boutwell Auditorium Hurricane Recovery Center.

Birmingham hosted a “one-stop” hurricane recovery center at the city-owned Boutwell Auditorium from September 7 to September 23, 2005. JCEMA, the city of Birmingham, the Red Cross and the UWCA collectively decided to set up the hurricane recovery center at Boutwell, which was a natural choice because it was across the street from the BJCC shelter and was already approved as a Red Cross shelter facility. According to a number of observers, Birmingham’s Boutwell hurricane recovery center was the first local government-provided “one-stop” center to be organized following the storm, and the model was quickly emulated elsewhere as itinerant volunteers spread the word of its success to other cities.

The timeline for establishing the hurricane recovery center was short — it was operational within two days of the decision to establish it at Boutwell. City workers from the Departments of Public Works and Information Management Services equipped Boutwell with eight-foot tables and chairs, photocopy machines, 25 computer terminals with internet access and 50 telephone lines to telephones and fax machines. The organizations providing services and information at Boutwell included the American Red Cross, the Salvation Army, the United

States Department of Housing and Urban Development, the Social Security Administration, the Alabama Department of Human Resources (DHR), the Jefferson County Committee for Economic Opportunity, the Jefferson County Center for Workforce Development (JCC), the Birmingham Jefferson County Transit Authority, the Housing Authority of the Birmingham District (HABD), the Birmingham Public Schools, the University of Alabama at Birmingham, the Birmingham Water Works Board, Alabama Power and Alagasco. Nearby conference rooms were used to distribute checks or debit cards provided by the American Red Cross, DHR and other agencies. Evacuees could obtain supplies, meals and meal assistance, register for emergency and non-emergency aid, fill prescriptions, obtain bus tokens, register their children in public school, search for employment and generally learn more about the Birmingham area.

Over 3,000 evacuees arrived the first day, and they had to wait in line outside in mid-80 degree temperatures. More than one observer stated that “emotions were high” on the first day, and the lobby scene was at times “chaotic.” After the first day, a waiting area of 650 chairs was established in the 9,000 square foot exhibition hall. With the new waiting area and the improved flow of people through the building, tensions were eased.

The hurricane recovery center was open during business hours, although volunteers and staff often arrived at 7:00 a.m. and stayed well past 6:00 p.m. Evacuees registered upon their arrival and were assigned numbers. In small groups, they were called downstairs and led through the foyer where the agencies were located. The Salvation Army provided food and beverages, which were distributed by Boutwell staff and volunteers to those waiting to be called downstairs. The Red Cross also provided personal items to the evacuees. Emergency medical services were located on site after the first day. The Birmingham Police Department was present both in front of and inside Boutwell and the Birmingham Fire Department also established a

presence at the center. Local dentists and doctors arrived and provided free evaluations and services to evacuees.

Significant financial assistance was available at Boutwell:

- DHR offered Hurricane Katrina evacuees the opportunity to apply for and receive a one-time grant of up to \$1,100, based on family size, through its “STAR program.” If evacuees opted for the STAR program, they were required to wait six months before applying for Temporary Assistance for Needy Families (TANF) through DHR. Approximately 375 evacuees applied for assistance through the STAR program, while another 15 to 20 evacuees applied for TANF.
- The Salvation Army provided in-kind and financial assistance to evacuees, including assistance with rental and utility deposits, car repairs and work uniforms or tools needed for work. It is estimated that the Birmingham Salvation Army assisted approximately 1,800 families during the hurricane response.
- Initially, the Red Cross provided debit cards to each family with a value based on family size. There was so much demand for the cash assistance that the Red Cross ran out of debit cards and had to use paper disbursement orders, and, when those ran out, a local bank was brought in to issue cashier’s checks to evacuees. The Birmingham chapter provided financial assistance to approximately 5,500 families of evacuees through the end of October 2005, and thereafter, those in need of assistance applied for assistance through the national office.

Some evacuees who received cash assistance or cash cards were robbed. Evacuees without identification were not able to open a bank account for safekeeping of these funds. Banking assistance at one-stop centers might have helped to alleviate these issues.

Overall, the evacuees interviewed were pleased with the warm welcome they received and the efficiency of the process. Many evacuees did not have their own access to transportation but relied on public transportation or church buses from shelters, hotels and other housing to travel to the hurricane recovery center. Many church buses parked in front of Boutwell, ready to take evacuees where they needed to go. Evacuees reportedly traveled to the Birmingham hurricane recovery center from neighboring states because they heard the services were so good there. The atmosphere at the hurricane recovery center was characterized as “busy” and “like Grand Central Station.” Other participants described the process as “smooth.”

2. FEMA Disaster Recovery Center.

FEMA opened the Lake Villa Disaster Recovery Center (DRC) on September 23, 2005 and assisted 3,559 FEMA applicants before it closed the DRC on December 2, 2005. The DRC was located at an old hospital in the Eastlake neighborhood that had recently been renovated for conversion to a halfway house, and many of the rooms were used as temporary FEMA housing. The DRC had the capacity to house up to 600 people in private rooms with private baths. Although some observers cited issues with drugs and prostitution at the DRC, in general it was viewed as a decent temporary living situation.

FEMA staff and FEMA-approved service providers were housed in the basement of the DRC building, which was open from 8:00 a.m. to 6:00 p.m. daily. Although the media likened the DRC to the Boutwell hurricane recovery center, this was not an accurate comparison. FEMA provided only limited services at the DRC, such as technical assistance with its own loan and other assistance applications, but it did not offer registration services or schedule inspections. A smaller group of local organizations provided ongoing assistance at the DRC than did at Boutwell, both because FEMA did not accommodate emergency services or distribution of food

or tangible goods at the DRC, and because some organizations could not spare the staff that would be needed to establish a presence at a recovery center for such an extended time period.

C. Long-term Assistance.

1. The Unmet Needs Committee.

Over 40 agencies, community groups and faith-based organizations throughout Birmingham participated in the UNC, a collective, case-management approach to disaster recovery first utilized after an F5 tornado hit west Jefferson County, Alabama in 1998. The UWCA and the Community Foundation of Greater Birmingham revived the UNC in the wake of Hurricane Katrina, and it met weekly from October 2005 through the spring of 2006, when the number of cases began to decline. Over time, the number of agencies actively participating each week dwindled from approximately 40 to approximately 10. The UNC opened cases for over 1,000 households and provided over \$350,000 in financial assistance, as well as housing referrals, clothing, informational counseling, mental health referrals and donated furniture.²

2. Hurricane Katrina Resettlement Program.

Since April 2006, UWCA has been managing a \$15 million grant to support evacuees with long-term needs such as childcare, housing, job training and transportation solutions. The grant money must be disbursed by August 31, 2006, and it is planned to be disbursed in two phases. In the first phase, eligible families may receive up to \$12,000 of cash assistance. In the second phase, individuals will be eligible to receive further long-term assistance. The UWCA has hired five case managers to help it administer this grant, and it expects to help over 1,200 families or individuals.

² Harry Brown and Kate Nielsen, *Hurricane Katrina Relief and Recovery Update* (May 28, 2006), at <http://www.foundationbirmingham.org/katrinafundinfo.htm> (last visited Aug. 2, 2006).

In connection with its administration of this grant, the UWCA is utilizing a web-based database for tracking contacts with evacuees. The system was created by the same software company that developed the Homeless Management Information Software (HMIS) used by McKinney-Vento Homeless Assistance Act grantees. Modeled on HMIS, the database was designed specifically for tracking contacts with Hurricane Katrina evacuees. In the future, this information could be used to coordinate services for, or outreach to, evacuees.

D. Interagency Coordination.

Observers noted a number of challenges with respect to interagency coordination. It was noted that a central telephone hotline for would-be volunteers is as essential as a hotline for evacuees, so that service providers can focus their energies on serving evacuees and on training, rather than coordinating, volunteers. FEMA did not establish a presence in Birmingham initially, so there was a lack of federal coordination and, to some extent, communication with local entities, creating another level of confusion for service providers and evacuees. Although FEMA worked closely with many local faith-based organizations, it did not coordinate as closely with local chapters of some of the national service providers, and, as a result, at times these organizations lost opportunities to assist or reach out to evacuees. At the state level, the Governor is currently supporting federal legislation that would allow state agencies to use available state and federal resources during emergencies without first having to wait for FEMA or other federal agencies to give approval to, or coordinate such usage with, the state.

III. HOUSING

The general sense among service providers in Birmingham is that most middle- to upper middle-class evacuees were able to quickly stabilize their housing situation after the hurricanes. In contrast, middle to lower middle class evacuees may have asked for and received more help

along the way but by now have secured housing and are well situated in a permanent living solution. Now, a third group of evacuees is surfacing and asking for assistance. In some cases, they have been staying with friends or relatives who were existing only marginally themselves before they added evacuees to their household and who also need help with food, utilities and other costs in order to continue to support the evacuees. In other cases, evacuees in the third group had some resources that were sufficient for a few months but are now depleted, often because of relocations to multiple cities or unsuccessful attempts to return to the coast. In still other cases, they have never secured permanent housing and may not be capable, physically or emotionally, of sustaining themselves financially in permanent housing.

Additional questions still remain about the evacuees who currently have permanent housing. How well will evacuees who are receiving short-term rental assistance transition to paying their own rent? Will evacuees leave Birmingham to try and make a return to the coast, only to come back and find their housing situation to be much more challenging?

Although local data were not available as of the date of publication, as of June 28, 2006, FEMA reported that 36,375 individuals and families in Alabama had received housing assistance totaling \$89.2 million, including \$63.4 million in rental assistance.³

A. Temporary Housing.

Several types of non-shelter housing were utilized by evacuees. Some stayed in unofficial shelters or private housing provided by the faith-based community. Others found refuge in the homes of friends, family or even complete strangers, who would come to shelters and offer them a place to stay. A number of these evacuees were never counted because they

³ Federal Emergency Management Agency, *Ten Months After Katrina: FEMA Aid To Alabama Tops \$690 Million* (Jun. 28, 2006), at <http://www.fema.gov/news/newsrelease.fema?id27300> (last visited Aug. 2, 2006).

never applied for aid through any of the large, national providers of help. Many stayed only temporarily, to wait out the storm.

A significant number of evacuees moved from emergency shelters to temporary housing funded by FEMA through its Section 403 program. A FEMA trailer camp, located at Oak Mountain State Park about 22 miles south of Birmingham in Shelby County, provided temporary housing for 90 evacuee families. A number of area hotels and short-term rentals also housed evacuees temporarily. Finally, temporary housing was made available for 600 evacuees at the Lake Villa DRC. The DRC closed December 2, 2005, the hotel assistance program ended February 6, 2006, and the last trailer was removed from Oak Mountain State Park on June 6, 2006. As of January 2006, nearly 6,000 households in the Birmingham MSA, and over 135,000 households in Alabama, had applied for FEMA assistance.⁴ As of June 28, 2006, FEMA reported that 3,939 Hurricane Katrina evacuees still lived in temporary housing facilities in Alabama, including 1,243 travel trailers.⁵

1. Hotels.

As of February 2006, 811 rooms were occupied in 158 Alabama hotels under the FEMA Section 403 program. We interviewed the general manager of one Birmingham hotel that reached out to FEMA temporary housing sites to invite evacuees to stay. The hotel worked with FEMA to be pre-approved as a temporary housing location, and negotiated a per diem rate for those stays comparable to its customary daily rates. The general manager expressed only positive reactions to the FEMA payment system — she had no issues with using the online

⁴ Legal Services Alabama, Inc., *Rebuilding Lives: Alabama's Legal Response to Disaster, A Report to the ABA House of Delegates* (Feb. 13, 2006).

⁵ Federal Emergency Management Agency, *Ten Months After Katrina: FEMA Aid To Alabama Tops \$690 Million* (Jun. 28, 2006), at <http://www.fema.gov/news/newsrelease.fema?id27300> (last visited Aug. 2, 2006).

system and never had an issue with receiving payment from FEMA for the rooms on a timely basis.

Two floors of the hotel were used to house over 30 evacuees, the bulk of whom were in residence from October 2005 through February 2006. Six families received FEMA approval to stay through mid-March, and only one remained as of the date of our interview.

This hotel provided evacuees with services above and beyond the traditional hotel services, providing a hot breakfast and dinner each day, as well as a telephone line for use by evacuees to make no-cost, long-distance calls. They also made vans with drivers available to the evacuees each afternoon so they could run errands and travel to various locations to receive help. Finally, evacuee families were provided with a microwave/refrigerator unit for each room. The hotel did not expect, and no government agency provided, any financial help in paying for these services.

In general, things ran smoothly. There were some plumbing issues because the rooms were being used as homes, and many evacuees were likely forced to wash dishes in the hotel bathroom sinks. There were also some challenges around cleaning the rooms, as evacuees became quite protective of their new homes.

2. Trailer Camps in Alabama State Parks.

Governor Bob Riley and Conservation Commissioner Barnett Lawley announced on September 1, 2005 that the Alabama State Parks would be used as temporary FEMA housing facilities for evacuees. Evacuees were housed in 13 of Alabama's 22 state parks. The state park nearest to Birmingham, Oak Mountain State Park, hosted 80 FEMA trailers and also made 10 cottage units available for evacuees with special medical or health needs or disabilities. Initially, all 90 units were filled. Evacuees were in residence from September 7, 2005 to June 2, 2006. In March 2006, FEMA moved the bulk of families who had not yet found permanent housing to

another FEMA trailer camp in Dothan, Alabama. The housing was provided based on a monthly rental rate negotiated with FEMA and comparable to usual rental rates. FEMA does not anticipate using state parks to house evacuees in the future, as the remote location of the state parks made it difficult for evacuees to integrate into their host communities.

A number of evacuees left Birmingham and attempted to return to their destroyed homes in the coastal areas. In many cases, those evacuees had received rental assistance, moved into a home in Birmingham, then attempted to return to the coast to live. In most cases, the evacuees who attempted a return to the coast ultimately had to come back to Birmingham, either because housing was too expensive or no housing was available, or because of confusion about FEMA trailer housing. Evacuees from St. Bernard's Parish staying at Oak Mountain were reported to travel home each weekend to do clean up work at their homes, and would drive one to two hours away to stay at the nearest hotel on Saturday night in between long work days on the weekends. One evacuee from New Orleans reported that his apartment had been repaired after the storm, but his rent had gone up from \$350 per month to \$800 per month.

B. Long-Term Housing.

Longer-term housing solutions also varied. FEMA made long-term rental assistance available to qualifying evacuees who had registered prior to the April 10, 2006 deadline. Approximately 94 families in Birmingham qualified for rental vouchers provided through the HUD-administered Katrina Disaster Housing Assistance Program (KDHAP) or Disaster Voucher Program (DVP). A few evacuees applied for and received housing through HABD.

Local real estate agencies that brokered low income housing and low-priced houses attempted to do some outreach to evacuees staying at local hotels and trailer camps. However, a number of evacuees had bad credit, so bad that rental or mortgage applications were being rejected even for low-cost rentals. In addition, it was difficult or impossible for evacuees to

provide a reference or job history that could be verified because many past employers were not themselves reachable after the storm. Finally, many of the evacuees from the Ninth Ward in particular did not have identification of any sort, either because they did not drive in New Orleans or because they hurriedly left home in the middle of the night, after the levies broke and water began flooding into their bedrooms. Had a federal guarantee or other backstop credit been available to these evacuees, they might have been able to find affordable housing much more easily.

1. Public Housing and Rental Assistance.

HABD had staff onsite at BJCC and the Boutwell Auditorium hurricane recovery center and also made it possible to apply five days per week for all types of housing and housing assistance at one central location. Normally, rental assistance, public housing and other programs receive applications at three different locations and only on one day each week. The deposit requirement for public housing was waived for several months for evacuees. HABD verified past residence in public housing using HUD's online system. If so verified, HABD did not conduct a credit check or employment check or verify income, but it did conduct a criminal background check. However, many individuals who were living in public housing at the time of the storm were not found in the HUD system because their presence had never been reported to HUD, and so they had to go through the full application process. HABD gave evacuees a preference for public housing and Section 8 waiting lists, although this practice created some frustration among the local community members who had been on Section 8 waiting lists for quite some time.

HABD coordinated some additional services for evacuees. HABD shuttle vans provided transportation from the shelters to see the public housing sites. HABD solicited contributions from the community for a Disaster Relief Fund and used the money to purchase mattresses,

toiletries, personal items, bed frames, cooking supplies and linens for evacuees who leased public housing. Evacuees sometimes had difficulty understanding the layout of the city and the different neighborhoods where HABD or voucher-approved housing was located. HABD compiled a map with zip codes so the applicants for housing could quickly identify the school district or attendance area within which various housing units were located and see how close the units were to the locations of actual or potential jobs.

To the extent that HABD or the Disaster Relief Fund were not asked or were not able to provide extra assistance, the faith-based community became involved. For example, at Marks Village, a housing community of HABD, a few evacuees arrived with only a suitcase of clothes. New Life Harvest Ministries, based at the community center in Marks Village, ensured that local church congregations came together and provided needed household items.

HABD reports that there were many more applications than placements in public housing, although there was not a waiting list and there was plenty of housing available. As of September 12, 2005, HABD had received 135 applications for public housing, of which only 66 had requested units and only seven had leased units. These statistics, and the experiences of HABD staff, indicate that a number of the individuals who initially applied for public housing at the Boutwell hurricane recovery center decided to seek alternate housing solutions. As evacuees became more knowledgeable about the city, they may have developed a preference to live in a particular school system or decided that they could afford to live in private housing.

HABD also administered both the KDHAP and DVP rental voucher programs, which are HUD-regulated, temporary rental voucher programs available to evacuees of Hurricane Katrina. KDHAP received some temporary FEMA financial support, while DVP was solely HUD-funded. KDHAP provided a sliding-scale rental voucher, as well as assistance with security

deposits, utility deposits and some ongoing utility payments, to evacuees who had lived in public housing, received rental assistance or were homeless prior to the storm. The final deadline to apply for KDHAP was March 11, 2006. HABD is the only housing authority in the region that also administered DVP. There is no income test for DVP vouchers, meaning that clients can apply a DVP voucher toward a rent that exceeds the approved amount and work to make up the rent differential. At times, the HABD has fronted the rental deposit for DVP clients where it would make or break their ability to afford to rent an apartment. HABD is still placing some evacuees in homes through DVP.

Issues arose during the transition from KDHAP to the DVP. The transition created an administrative burden on HABD, and it was challenging for HABD staff to break news to the evacuees that the amount of assistance and types of assistance would be less and fewer. Local housing authorities were less likely to participate in and offer DVP vouchers because DVP was more complex for the housing authorities — they were asked to provide transportation to sites and temporary shelter. HABD had a social services department and a transportation department that covered these extras, but another housing authority without such support probably would not be able to secure funding necessary to meet those extra requirements.

As of October 17, 2005, 49 housing vouchers had been issued and five of those recipients had been housed. At that same time, 539 units were available for disaster voucher placement, including 424 houses, 104 apartments and 11 duplex units. As of June 15, 2006, 94 families had qualified under DVP or KDHAP through HABD, but only 49 of those families had actually signed a lease. The remainder were looking for housing but had not yet found housing that they wanted that would also accept the DVP voucher. As with the low utilization of available public housing, it was speculated that the families did not want to place their voucher with one of the

many landlords who offered voucher placements through HABD because they preferred to live in the attendance area of a handful of particular school districts.

There will be some challenges for evacuees when KDHAP and DVP assistance ends. If they were receiving Section 8 assistance in their home state, KDHAP and DVP recipients can request portability of their Section 8 vouchers. HABD expressed confidence that it could absorb the additional voucher clients, but local housing advocates noted that many Birmingham residents have been waiting for months to receive a Section 8 voucher and placement. There may be challenges in this transition for evacuees as well. While DVP has no income test, Section 8 does, and so some DVP recipients may find that they earn too much income to be eligible for Section 8. In addition, while DVP has no rental cap, the Section 8 program only funds rent up to a capped amount, based on fair market rental for the area. Therefore, some DVP recipients may find that they must move to lower-cost rentals in order to obtain Section 8 approval. Likewise, evacuees who are receiving KDHAP assistance also receive some utility assistance and will need help transitioning from rental and utility assistance to rental assistance alone, or to no assistance.

The Jefferson County Housing Authority housed a small number of evacuees as well through its “shelter plus care” program. The County has over 700 beds in this program, which is part of the homeless continuous care system. The participating housing authority provides the shelter, while a partner agency provides care, such as counseling, disability assistance or medical care. It is estimated that the Birmingham area currently needs 1,200 more such permanent, supportive housing beds for disabled individuals who are homeless or marginally housed. Thus, evacuees who qualify for shelter plus care, likely the most vulnerable among the evacuee

population, will have to sign up at the bottom of long waiting lists to receive help through this program once any temporary rental assistance ends.

2. Section 408 Rental Assistance.

FEMA's Section 408 long-term assistance program provides cash assistance for qualifying families to be applied toward rental housing. This program assisted many evacuees, but it was not without its gaps in coverage. Prior to placing renters, an outside contractor would run a background check, including a criminal record check and a credit check. Because many evacuees had poor credit or no credit, and because Birmingham already has a shortage of affordable housing, it was challenging to find landlords who would accept evacuees with credit issues as tenants, even with rental assistance in place. Tenants had to pay their own damage deposits and utility connection costs, a prohibitive amount for many evacuees. FEMA is not permitted to provide long-term assistance to undocumented individuals, so that led to some gaps in coverage. Finally, FEMA assisted households based on their living situation prior to the disaster — meaning that if a household had become separated and one household member had received the household's full allotment of assistance, other household members could not be helped. Although FEMA disseminated information to help evacuees understand and navigate these policies, there were still significant gaps in coverage.

Looking forward, there are a number of questions about what will happen when Section 408 assistance is discontinued. Generally, Section 408 assistance is available for up to 18 months or until the household has a permanent housing plan, whichever is shorter. FEMA is just now starting to ask households receiving Section 408 assistance to provide a permanent housing plan, and, based on the information it receives, may start terminating assistance for certain evacuees. It is unclear whether federal legislation will authorize an extension of Section 408 assistance beyond the 18-month maximum; if not, however, those families that have

not developed a permanent housing plan may be forced to take over responsibility for payment of rent before they are able to afford it.

IV. HEALTH CARE ISSUES

Birmingham and Jefferson County were ready, willing and able to provide immediate medical assistance to Hurricane Katrina evacuees. The Jefferson County Department of Health estimates that between 15,000 and 20,000 Hurricane Katrina evacuees arrived in Jefferson County and that, as of June 2006, approximately 1,500 remained. One hospital administrator indicated that “the crush” dwindled down after about two weeks. According to the Mayor’s office, over 44% of Alabama’s medical resources are located in Birmingham, and by all accounts, Birmingham and Jefferson County were prepared to receive additional evacuees with medical needs.

Birmingham’s Veterans Administration Hospital coordinated immediate services for evacuees flown in as part of the first-ever activation of NDMS. The Birmingham Regional Emergency Medical Services System (BREMSS) matched evacuee needs with available hospital beds. Alabama’s Medicaid Commissioner worked with the federal government to enable Louisiana, Mississippi and Alabama to operate as a “single state” when providing Medicaid services to evacuees, meaning that Alabama physicians could serve out-of-state evacuees and be assured of receiving the appropriate Medicaid compensation.

Despite Alabama’s chronic shortage of psychiatrists and psychologists, the system was able to manage psychiatric casualties. Numerous evacuees received care, and a small number were hospitalized due to psychiatric issues. The medical director of Alabama’s Department of Mental Health and Mental Retardation (DMH/MR) cautioned that approximately one year after Hurricane Katrina, evacuees’ resilience could wear thin, resulting in mental health issues or

symptoms of such issues, including, for example, post-traumatic stress syndrome, marital discord or drug use.

Medical care for local residents does not appear to have been impacted significantly by the presence of Hurricane Katrina evacuees. For example, DMH/MR made an immediate policy decision to stock all mental health centers with a generous supply of essential medications so that there would be an uninterrupted supply of psychotropic medications for in-state and out-of-state patients with serious mental illness regardless of financial status. The University of Alabama at Birmingham Health System (UABHS) performed elective surgeries as scheduled.

A. Public Sector Response.

BREMSS is a locally funded system that matches patient needs with available hospital beds. BREMSS' centralized computer system operates 24 hours a day, seven days a week, and maintains a "real time" inventory of available hospital beds at 15 area hospitals. When an ambulance driver or other paramedic transports a sick or injured patient, the paramedic contacts BREMSS to locate the most appropriate hospital for that patient. BREMSS was actively involved in the federal NDMS response and has been praised as a rational and reliable source of information and planning since Hurricane Katrina. BREMSS' executive director indicated that BREMSS is slated to receive a prestigious national award, the Mitretek Innovations Award in Homeland Security.

Birmingham's implementation of federal NDMS protocol showed that private hospitals, paramedics, and the Veterans Administration Hospital could work together efficiently to welcome, triage and place arriving patients in appropriate health care facilities. Local hospitals worked cooperatively with their competitors, and physicians and paramedics accommodated sometimes conflicting priorities of immediate treatment versus immediate transport of arriving

patients. Birmingham's NDMS program was prepared to care for significantly more evacuees than it received.

B. Public-Private Partnerships.

A unique partnership exists in Birmingham between Samford University's McWhorter School of Pharmacy and the Jefferson County Department of Public Health. Samford students routinely spend part of their clinical rotation with the Department. In the days and weeks immediately following Hurricane Katrina, this partnership was expanded to support evacuees who were stranded in Birmingham without medications. Pursuant to a standing order issued by the Department's Health Officer, Samford pharmacists wrote 30-day prescription refills for medications other than narcotics for evacuees, even without prescriptions from their local providers. This emergency measure served as a convenience for evacuees and kept local emergency rooms from being overwhelmed by evacuees seeking prescription refills.

C. Private Sector, Faith-Based Community and Individual Participation.

Local pharmacies filled prescriptions for evacuees, sometimes regardless of evacuees' ability to pay. These efforts were hailed as one of the most effective interventions at stabilizing the medical and psychiatric needs of patients. Critical care transport from UABHS was among the first medical evacuation units to arrive in New Orleans, evacuating six infants and two adults within 48 hours of the storm's passing, and eventually transporting a total of 21 patients. One physician indicated that virtually all of his colleagues and friends had personally taken in, or knew well someone who had personally taken in, a Hurricane Katrina evacuee. In this physician's words, Birmingham's response to Hurricane Katrina "reconfirms the human spirit" and the "goodhearted" nature of people.

A local faith-based organization, MPower Ministries, provides no-cost medical care to needy patients through volunteer doctors and nurses and donated medical supplies. MPower

expanded its free clinic hours from two days per week to five days per week after Hurricane Katrina. A private donation has enabled MPower to continue to supply evacuees with refills of the single free, three-month supply of prescription medications generally provided to patients. Partly as a result of this service, MPower's volunteer providers have continued to provide follow-up care to upwards of 150 evacuees to date.

D. Mental Health.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is part of the United States Department of Health and Human Services. Through an interagency agreement with FEMA, SAMHSA supports immediate, short-term crisis counseling and ongoing emotional recovery of evacuees of disasters. SAMHSA received high praise from the Medical Director of DMH/MR. Of particular comfort to the Director was SAMHSA's commitment to locate out-of-state hospital beds to which psychiatric admissions could have been transferred if Alabama's hospitals had become overcrowded due to Hurricane Katrina. Happily, these transfers were not needed.

In addition, at least two local organizations provided crisis counseling and needs assessment at various sites, including the Boutwell Auditorium hurricane recovery center. A number of staff members from Gateway Crisis Counseling, a local nonprofit, worked at needs assessment centers to help evaluate evacuees and determine the array of mental health services needed. In addition, counselors from Jefferson-Blount-St. Clair Mental Health Authority were funded through a FEMA program called "Project Rebound" to provide crisis counseling for Hurricane Katrina evacuees starting in October of 2005. Project Rebound counselors' role is to assess evacuees who call for assistance and refer them to other resources, whether counseling resources or other resources. A dedicated telephone line receives calls from evacuees who feel they are in crisis. Reaching out to evacuees in the various "one-stop" centers and FEMA

temporary housing sites, Project Rebound counselors offered individual and family therapy sessions and outside referrals. Three staff members remained as of the date of the interview.

As with Project Rebound, existing grants fund crisis counseling or case management services for evacuees in order to facilitate their resettlement. However, case managers and crisis counselors cannot make successful referrals for long-term counseling if no appointments are available or if co-payments are prohibitively high. The mental health care system in the Birmingham area is strained. There is currently a waiting list for county-provided mental health services in Jefferson County. Only a handful of nonprofit organizations provide low- or no-cost mental health services, and the faith-based community also provides a great deal of free counseling, but most providers in that network do not have clinical backgrounds. Given the high correlation between homelessness and psychological issues, expanding mental health outreach and services available to evacuees is especially important, because many evacuees face the end of FEMA or HUD disaster-related rental assistance in only a few months, and without emotional stability, they may not be able to achieve the financial stability required to take over responsibility for their own rent. Of the evacuees that are still receiving assistance or only just now seeking assistance, it is likely that a substantial portion is in need of long-term mental health or substance abuse recovery assistance, possibly including supportive housing.

E. Liability Concerns.

Medical liability was an unresolved topic of discussion prior to Hurricane Katrina. Many health care providers structured their Hurricane Katrina response with an eye toward potential law suits. In some circumstances, this approach resulted in fewer care givers to treat evacuees and a call for clear federal immunity for appropriate care of displaced persons. The General Counsel of Alabama's Department of Public Health believes that Alabama law protects certain emergency and volunteer workers serving under the auspices of the state government from civil

liability if they are acting in good faith and within the scope of their functions and duties. In fact, mechanisms are needed to ensure that appropriate care is provided. For example, a Red Cross shelter in Birmingham received services from a volunteer physician who was eventually asked to leave when that provider was found not to have a current medical license. Another volunteer physician had to be convinced that charts of patients seen by that volunteer should remain the responsibility of the volunteer, rather than be transferred to the local health department, which had not vetted that particular physician.

F. Insurance Coverage.

A number of concerns around health care were raised by those who work with lower-income evacuees. One set of concerns is whether evacuees are taking advantage of the health insurance options available to them or, if not, how they are accessing the care they need. Cooper Green Hospital, the Jefferson County hospital, provides a HealthFirst card entitling low income County residents to low- or no-co-payment medical services. The HealthFirst Plan temporarily waived its one-year residency requirement for evacuees if they could show a valid form of identification with an address in the affected areas of Louisiana or Mississippi. However, the waiver only applies through August 31, 2006, at which time evacuees will have to re-enroll to continue receiving coverage. None of the three Birmingham evacuees interviewed have health insurance. Two of the evacuees interviewed have neither seen a doctor nor obtained refills for prescription medications left behind in New Orleans. Access to free prescription refills provided by organizations such as MPower Ministries is helpful but is probably not a long-term solution for evacuees with chronic ailments. Evacuees who have been living in temporary housing, who are stripped from their social and commercial networks, may find it very difficult to obtain insurance coverage, find a doctor and seek care — but this is exactly what they should be encouraged to do.

G. Medical Records.

Most evacuees arrived in Birmingham without medical records and many evacuees did not know the names of their prescription medications. Alabama residents currently have access to a service that could help alleviate this problem. Emergency Patient Information (EPI) is an online service sponsored by Blue Cross and Blue Shield of Alabama. This free service allows any Alabama resident, regardless of insurance coverage, to register important contact names, phone numbers and medical history information, so that medical workers can access this information in an emergency.

H. Decision Making.

There were numerous examples of spontaneous, “quick-on-your-feet,” decisions. These decisions illustrate that disaster response is an art as well as a science, and that the art of disaster response often includes a common sense approach to restrictive protocols observed under more standard circumstances. For example:

- The standard requirement that a physician examine a patient before prescribing medication was ignored briefly by the Department of Public Health, resulting in an efficient, short-term solution to evacuees’ medication needs, as described in Section B.3. above.
- The first evacuation air craft sent out by UABHS was in the air before receiving clearance to land in New Orleans.
- Shortly after Hurricane Katrina hit, Alabama’s Medicaid Commissioner told Medicaid providers they would be compensated when treating Hurricane Katrina evacuees who had crossed state lines. Weeks later, after negotiating a waiver with the federal government, the Commissioner received assurances that the federal government would stand behind this compact.
- Red Cross protocols require that the Red Cross “control” buildings housing Red Cross shelters. Most faith-based organizations are reluctant to place their buildings under Red Cross control. Consequently, these faith-based shelters were unlicensed and ineligible for official assistance from trauma counselors. DMH/MR made special arrangements for counselors to help out in many of these unlicensed shelters.

- The requirement that an individual be hospitalized for three days before being admitted to a nursing home was waived for nursing home patients arriving in Alabama from nursing homes in Louisiana.
- When fuel supplies ran short, the federal government eventually permitted off-road diesel, which is colored red, not taxed and “off limits” for on-road vehicles, to be used by emergency vehicles.

In contrast, bureaucracy associated with federal and state aid resulted in delays and missed opportunities. For example:

- Alabama’s Medicaid Commissioner urged Alabama Medicaid providers to apply for approximately \$5,000,000 in uncompensated care funds designated for those who provided Medicaid-covered services to non-Medicaid eligible individuals as a result of Hurricane Katrina. Funds unclaimed as of June 30, 2006, must be returned to the federal government. As of mid-June of 2006, less than \$200,000 worth of claims had been submitted to the Commissioner. Due to Medicaid rules, these funds were not available to fund such services as pain management or substance abuse treatment for evacuees.
- Immediately following Hurricane Katrina, DMH/MR had to use precious time and resources to write grants to obtain federal funds to help evacuees. The FEMA crisis counseling grant process required the Department to justify its application for funds based on the number of impacted individuals. This information was difficult to compile because FEMA did not have accurate counts of impacted individuals, except for those registering in shelters. Unlicensed shelters were “off the radar screen,” but they played an essential role in the Hurricane Katrina response. The Department had to write more than one grant, because each grant was time-limited and applied only to counties declared eligible for disaster relief. A block grant process could be a more appropriate funding vehicle for placing good counselors into shelters in a timely manner.

V. EMPLOYMENT ISSUES

In the first month or so after the evacuees arrived, very few of the evacuees were interested in looking for employment. Many of the evacuees were concerned with satisfying immediate needs such as shelter, food and health care. Several organizations offering employment services observed that their programs were not as well utilized by evacuees as they would have hoped, perhaps because evacuees were hesitant to accept that they would be staying in Birmingham for a long period of time. Many of the organizations interviewed believed that employment services would have been better utilized if they had been offered several months

later, after the immediate needs of the evacuees had been met and after those evacuees still in Birmingham had resolved to stay in the area. Employment assistance will be a long-term assistance effort, especially because the unique circumstances of the Katrina evacuation led many evacuees not to express an interest, at least initially, in finding work. Unfortunately, the organizations that offer this type of assistance do not have access to the data that would allow them to identify unemployed evacuees remaining in the Birmingham area.

A. Assistance Finding Employment.

1. Job Listings Website.

The Birmingham Regional Chamber of Commerce, Tech Birmingham, and JCC created a website entitled BirminghamOpenArms.com, which went live approximately one week following Hurricane Katrina. The Chamber asked its members to post jobs, and about 2,000 jobs were posted within 24 hours. The website is hosted by JCC, and it is still active.

Tech Birmingham also set up a “Tech Village” that allowed evacuees to access computers and phones. Many of the computers were donated or recycled. The Village was set up only a short walk from the initial intake location. The existence of the job website was also advertised in the media and on news channels. For those who could not access the job website, information about the available jobs was compiled into booklets delivered to the Boutwell Auditorium hurricane recovery center. There were not any direct costs to the job compiling process, because the booklet printing services were donated by a Chamber member.

2. Career Centers.

Alabama’s Office of Workforce Development administers the provisions of the Workforce Investment Act (WIA), passed by Congress in 1998. The Office of Workforce Development “works with the Alabama Workforce Investment Board and Local Workforce

Investment Boards to integrate employment, training and career development programs,” and operates 30 “One-Stop” and 31 satellite employment centers throughout the state.⁶

JCC received \$175,000 in federal National Emergency Grant (NEG) funds around September 20, 2005. The NEG funds allowed JCC to provide short-term training and employment assistance to evacuees. JCC spoke with approximately 450 evacuees and helped find employment for about 60 evacuees. As of the date of this report, it still receives approximately 10 to 15 calls per month from evacuees looking for employment assistance. Evacuees are being referred to JCC by local shelters, churches and organizations such as the Red Cross and Salvation Army. The NEG grant expires on September 30, 2006, and the JCC is currently seeking continued funding streams to continue its evacuee assistance.

The Jefferson County WIA Career Center was one of the groups that had a presence at the Boutwell auditorium. Its focus during Hurricane Katrina recovery was on jobs and education, and it offered evacuees assistance with preparing resumes, locating potential employment and obtaining necessary education (e.g., computer training, community college courses, etc.) for job changes.

The WIA Career Center had a staff of 16 when Hurricane Katrina hit. Some of the employees set up tables at Boutwell, while other employees remained at the main office. Evacuees needing services were transported to the center, which had extended hours. Transportation posed a challenge because Birmingham does not have a well-developed public transportation system; many churches offered bus services and volunteers offered cars.

⁶ Alabama Department of Economic and Community Affairs, Office of Workforce Development, *at* <http://www.adeca.state.al.us/Workforce%20Development/default.aspx> (last visited August 2, 2006).

Funds were made available to the WIA Career Center through reciprocal agreements with Mississippi and Louisiana WIA organizations, as well as federal grants applied for by the State of Alabama. The Governor also made some discretionary funds available through WIA, so there was support on the State level as well.

The WIA Career Center placed approximately 40 to 50 workers in jobs through its programs, and WIA Career Center representatives thought that the Birmingham Career Center placed many more workers. As one example, the WIA Career Center helped an evacuee who had worked as a bartender at a yacht club before the storm to enroll in training to become a heavy equipment operator. Like many service providers, the WIA Career Center eased its customary supporting document requirements during this time, accepting any type of identification rather than requiring evacuees to provide a particular form of identification.

The Birmingham Career Center, another comprehensive “One-Stop” Center managed by Alabama’s Office of Workforce Development, participated in the UNC and provided employment services initially at Boutwell Auditorium, and then at Lake Villa Hospital. Specifically, the Birmingham Career Center registered evacuees for employment and contacted prospective employers. The Birmingham Career Center continues to provide employment services to several evacuees per month.

The Alabama Workforce Investment Area (AWIA) provided similar services to the 65 counties in its area of responsibility. In addition, the offices of the AWIA maintained a toll-free assistance number in its office in Montgomery until mid-November 2005, fielding approximately 1000 calls from evacuees in about 25 different states. The AWIA came to appreciate the value of simply having information—such as working telephone numbers and valid contact

information for various services—as did many of the organizations that were involved in the relief efforts.

3. Job Fairs.

Numerous job fairs were held in Birmingham for evacuees. One example is the job fair organized by the business consulting firm of Fowler, Williams & Means, LLC (FWM) and Birmingham View magazine. FWM surveyed its business contacts to locate available jobs and determined the types of skills required for those jobs. They then sought out evacuees through the local shelters and churches and interviewed them to determine if they had the skills required for the available jobs. Birmingham View primarily handled the media aspects of the job fair. FWM estimates that they talked with between 200 and 300 evacuees. FWM’s goal was to assist the evacuees in making initial contact with appropriate businesses. (Once initial contact was made, FWM had no further contact with the prospective employer and the evacuee, and has thus been unable to quantify the number of evacuees who accepted part-time or full-time employment through this job fair.) This job fair was unique in that it paired specific evacuees with specific jobs for which they had already been pre-screened; other job fairs held in Birmingham were deemed to be more general and not specifically targeted.

4. Other Workforce Development.

The Alabama Department of Postsecondary Education (ADPSE) was recently awarded a \$34 million dollar grant for Workforce Development from the U.S. Department of Labor. According to ADPSE, Alabama has been aggressively pursuing competitive grants for workforce development and believes that Alabama has won more grants in this area than any other state. ADPSE is using the grant to provide short-term training for “good” jobs (i.e., good paying, high-demand jobs, sometimes with potential for union membership) in growing industries within the state (e.g., welding for the growing shipbuilding industry). Many of these programs are free to

Alabama residents, and all were extended free of charge to hurricane evacuees. In addition, GED test fees and tutoring costs were waived for evacuees. Finally, to the extent an “out-of-state” attendance quota would normally be imposed on a training program, that quota was lifted for evacuees. ADPSE had a presence at Boutwell Auditorium and advertised its services through the newspapers and organizations such as the Red Cross, but, due to privacy issues, it was thwarted in some early attempts to reach out directly to evacuees.

B. Unemployment.

The Alabama Unemployment Division has indicated that it received approximately 10,000 unemployment claims from residents displaced by Hurricane Katrina. Of these, approximately 7,000 claims were from displaced Alabama residents, and most of the remaining 3,000 claims were from Mississippi and Louisiana residents. The out-of-state claimants have since been handed off to their resident states and the Unemployment Division subsequently has no information as to how many of these residents are still receiving unemployment benefits. Of the 7,000 Alabama residents who initially filed unemployment claims, approximately 200 are still receiving benefits.

C. Transportation.

One of the challenges experienced during displaced evacuees’ job searches was transportation. One must drive in Birmingham, but many Hurricane Katrina evacuees did not own cars in New Orleans (they did not need to have them there because the city was compact and the public transportation network was cohesive). Birmingham has a public transportation system that involves infrequent bus runs and limited service hours, so public transportation alone is not an effective or reliable mode of travel. Those working with evacuees consistently cited transportation as one of the top three unmet needs of evacuees in Birmingham, as did each of the evacuees interviewed.

Assistance for transportation was initially provided by many agencies. Many organizations, from BHA to churches, from FEMA to the City, provided shuttle bus transportation to and from major housing sites or the DRCs. The UWCA and JCEMA (and undoubtedly others) gave out bus tokens. Traveler's Aid received \$15,000 of donations from a variety of sources, including the UWCA and the Community Foundation of Greater Birmingham and used the funds to assist approximately 475 families with a variety of travel-related needs — up to \$100 of gasoline, bus tickets either home or to meet with family in other cities, monthly bus passes for local transit and up to \$250 per vehicle to make car repairs. Hurricane Katrina evacuees could receive these types of assistance up to two times — once by providing a FEMA number and an identification card showing they were from an affected area, and a second time through a social worker referral. This funding has now been exhausted and evacuees (like anyone else) can only receive the usual Traveler's Aid assistance for bus tickets home. Traveler's Aid reports that it is still receiving requests for gasoline assistance from evacuees who have received such assistance in the past.

Another global issue with respect to transportation was the lack of driver's licenses among the evacuee population, either because the evacuees did not have licenses in their home states, or because they were left behind in the rush to escape flood waters. To apply for a driver's license in Alabama, applicants must have a birth certificate, which requires several weeks to arrive from Louisiana and costs \$28.00 to request. Those without a valid driver's license have to take a road test — and must furnish a vehicle in which to take the road test. Under state law, Traveler's Aid could not provide gasoline assistance without a valid driver's license and liability insurance. Louisiana allowed parishes to waive this requirement to receive

Traveler's Aid assistance temporarily, and the Birmingham chapter honored this waiver for residents of those areas during that time frame.

Providing transportation to and from centers that provide job training and assistance can be important. As noted, evacuees without cars were not able to rely on Birmingham public transportation to navigate the city. If possible, it would also be a good practice to provide temporary transportation to and from jobs that may ultimately be found.

D. Long-term Effect.

Overall, the employment picture in the greater Birmingham area has not been impacted significantly by the presence of the evacuees. In the last year, it is estimated that the overall population of the greater Birmingham area has increased by about 0.5 to 1% from a base population of about 1.1 million, and the employers in Birmingham have absorbed this increase fairly easily. This view is consistent with the observations of DHR, which are that requests for family assistance or food assistance have not increased substantially as compared with pre-Hurricane Katrina levels. Any evacuees who remain in Birmingham appear to have integrated into the Birmingham workforce.

VI. EDUCATION ISSUES

As soon as the school districts located in and around the Birmingham area learned about the impact of Hurricane Katrina, they began preparing to enroll new students. The Alabama State Department of Education made several policy decisions, described below, to encourage parents to register their children in school, thus bringing some semblance of normalcy to their lives.

Quarterly enumerations of evacuee students published on the website of the State Department of Education enabled us to identify the five school districts in the greater Birmingham area enrolling the largest number of evacuee students, per the table below:

DISTRICT	EVACUEE ENROLLMENT AS OF	
	September 21, 2005⁷	March 22, 2006⁸
Birmingham City	263	131
Homewood City	66	60
Hoover City	131	67
Jefferson County	172	302
Shelby County	231	119
DISTRICTS' TOTAL	863	679
STATE TOTAL	5,685	4,291

We interviewed four of the five school districts listed above: Birmingham City Schools, Homewood City Schools, Jefferson County Schools and Shelby County Schools. Shelby County Schools, located in Birmingham's MSA, took in many students because the Oak Mountain State Park trailer camp was located within the district.

Among other issues, the two most salient issues faced by the Birmingham area school districts were providing transportation for evacuees and identifying students with special needs. Some school districts do not provide transportation at all for their students, and, therefore, evacuees in these districts were tasked with finding their own transportation to school. In such districts, carpooling parents volunteered to include evacuee students in their carpools. For

⁷ State of Alabama Department of Education, *Displaced Student Membership for September 21, 2005*, at <http://www.alsde.edu/general/HKERA/Sep21Window.pdf> (last visited Aug. 4, 2006).

⁸ State of Alabama Department of Education, *Displaced Student Membership for March 22, 2006*, at http://www.alsde.edu/general/HKERA/Mar22_DisplacedStudents.pdf (last visited Aug. 4, 2006).

students with special needs, some school districts did not learn until well into the school year whether a student required special assistance, while other school districts performed Individualized Education Program (IEP) assessments early on to identify any special needs students.

Birmingham school districts also bore the initial financial burden of welcoming Hurricane Katrina students into its classrooms. The federal McKinney-Vento Homeless Assistance Act, which funds services to homeless students, applied nearly automatically to Hurricane Katrina evacuees. Birmingham public and private schools permitted Hurricane Katrina evacuees to begin classes and waived most if not all fees and tuition without knowing whether they would be compensated for their proactive behavior.

Counseling students who were traumatized by their evacuation experiences was a large concern at the school districts. Group counseling sessions instituted soon after the start of the school year were cited as being especially helpful. Counseling is expected to be an ongoing need and the school districts want to make sure they are attentive in this area.

A. Primary and Secondary Education.

1. Alabama Department of Education.

In responding to the evacuees of Hurricane Katrina, the Alabama Department of Education waived several requirements to enroll students in schools. These included proof of immunization, proof of athletic participation, payment of certain fees and presentment of transcripts.

Soon after Hurricane Katrina, the U.S. Department of Education assembled a focus group of Hurricane Katrina evacuee parents from Birmingham. Some of the greatest concerns expressed by parents at that time were social acceptance, obtaining supplies, settling in and academics. The U.S. Department of Education listened to the concerns of the parents and

instructed the Alabama Department of Education to enroll the students in school with assurances that federal assistance would be provided later — and it was, in the form of the federal Hurricane Education Recovery Act (HERA), which provided for up to \$6,000 per general education student and up to \$7,500 per student with disabilities.

To track enrollment as required to apply for HERA assistance, the Department requested a reporting of evacuee students from each school district every two months beginning in September 2005 and throughout the school year. The federal government was not able to fully fund all state requests for HERA assistance, and so the Department received only approximately \$4,300 per general education student. Additional funding was being debated in Congress as of June 2006.

Based on the experience of trying to obtain evacuee student records from Louisiana and Mississippi, the Alabama Department of Education has decided to implement a system whereby students' permanent records are stored redundantly, at both the local level and the state level.

2. Shelby County Schools.

Shelby County Schools received a large number of student evacuees partly as a result of the shelter at Oak Mountain State Park. A service provider who worked with evacuees at the park observed that the number of students taking the school bus declined over the course of the year as parents decided to home school their children, perhaps explaining some of the decline in student enrollment in the district over the same time period.

The Shelby County Homeless Services division was responsible for the enrollment of Hurricane Katrina evacuees, and the division used federal McKinney-Vento Homeless Assistance Act funds, the Shelby County Needy Fund, funds from the UWCA and donations to a Hurricane Relief Fund to assist in meeting evacuee needs. An intake form was used to determine

each student's living situation (shelter, hotel, doubled up with family, etc.) and gather information about services or other support needed.

Students who needed general medication, glasses and medication to treat asthma were immediately supplied with such items. In addition, because no student records, and therefore no IEPs, were initially available to the district, and because some parents were unaware that their child had an IEP, some special needs students were not designated as such until after classes had started.

Immediately following Hurricane Katrina and as an ongoing concern, Shelby County Schools ensured that school counselors were and are available for students in need of counseling. Because post-traumatic stress may not be evident in students immediately and because evacuee students may need ongoing assistance and counseling to continue to cope with their tragedy, counseling plays a large part in continued assistance. Shelby County Schools maintains a ratio of approximately one counselor for every 400 to 500 students.

After the end of the school year, Shelby County Schools enrolled four or five students in summer school, at no cost to the students, in an effort to bring them up to grade level. Shelby County Schools expects many of the 108 students enrolled as of March 21 to return. Counseling and academic support needs are the two issues most likely to be presented by evacuees in the fall.

3. Jefferson County Schools.

Jefferson County Schools faced many of the same problems as Shelby County Schools, with a few more students on the rosters. Jefferson County Schools reported that their evacuee students were very well dispersed and were integrated in the classrooms with no major problems. IEP evaluations were performed on students who stated they had special needs and on other students who were identified as having special needs.

In 1998, Jefferson County Schools faced a devastating tornado that proved fatal to some students and parents of the county. As a result, counselors at the Jefferson County Schools were well prepared to counsel students who lived through Hurricane Katrina and expect that such counseling will be an ongoing process. Jefferson County Schools expects that most of its Hurricane Katrina students will return for the 2006-2007 school year.

4. Birmingham City Schools.

Birmingham City Schools conducted outreach at the BJCC shelter to enroll school-aged children located there. Representatives from the district were also present at the Boutwell Auditorium hurricane recovery center to enroll students. The district, accustomed to a busing system, easily provided transportation from BJCC to the school sites.

Birmingham City Schools utilized federal Title I funds, donations from the UWCA and many personal donations to support Hurricane Katrina evacuees. The district provided some of these funds to the YMCA, which provided after-school programs and assisted students and their families living in shelters to become more established in Birmingham.

With the next school year, Birmingham City Schools, like all other schools in Alabama, will assist with the coordination of immunization for students lacking immunization records. The waiver of immunization from last year's school year will not spill over into the 2006-2007 school year, and all students must show proof of immunization.

5. Homewood City Schools.

The majority of students who came to Homewood at the beginning of the school year were living in hotels, apartment and motels. Few, if any, lived in shelters. In general, Homewood City Schools assigns students to a school within a three-mile radius, but provides no school transportation. The lack of transportation was one of the biggest issues at Homewood

City Schools. Fortunately, it did not take long for Homewood families to find carpool solutions to assist evacuee families.

Throughout the school year, Homewood City Schools administration strived to convey a “how can we help you” tone. No funding was received for the first six to eight months after the storm; however, using money received from churches, Parent-Teacher Organization fundraisers and other donations, the school district was able to maintain its helpful approach, settling many students into academics and sports at no cost to their families. In addition, because Homewood City Schools maintains a low student to teacher ratio in any normal school year, the district did not need to hire new teachers, and therefore there was no increase to the salary budget.

Homewood City Schools stated that extracurricular activities, especially sports, brought many of the students together. Because of the Department of Education’s athletic waiver, students who participated in sports at their hometown schools were able to participate in sports at their new Alabama school. Having a vibrant athletic program probably played a big part in the camaraderie of the new and veteran students.

After the 2005-06 school year, Homewood City Schools enrolled approximately 30% to 50% of elementary evacuee students in summer school; however, very few middle school and high school evacuee students enrolled in summer school. Low attendance, perhaps attributable to families’ travels to and from the coast, and more typical teenage issues were two issues the district noted among older evacuee students.

6. The Catholic Diocese of Birmingham.

The Catholic Diocese of Birmingham began admitting students on September 1, 2005, and enrolled approximately 235 students throughout 29 schools over the course of the school year. The most enrolled at one school was 40 students. Students attended schools based upon the district in which they lived. When the students enrolled, their tuition, uniforms, textbooks

and after-school care were all free of charge. Within six weeks of the initial enrollment, about one-third of the students left the schools they were attending and by December 25, about one-half of the students were gone. The bulk of the remainder of the students left the schools they were attending by the end of the school year. The Diocese anticipates that they will have no more than ten students returning for the 2006-07 school year.

The funding received by the Diocese was a mixture of federal funding and donations. The Diocese did not expect to receive federal funding and was therefore pleasantly surprised when the government provided reimbursement funds based on students enrolled.

B. Postsecondary Education.

ADPSE was created as a result of Alabama's desire to consolidate its community college, training, vocational rehabilitation and workforce development initiatives. When students began arriving in Alabama after the storm, the community colleges offered free tuition to those students who were attending a community college in Louisiana or Mississippi. The president of each community college campus was given the authority to waive tuition and the production of transcripts and, to the extent available, offer dormitory rooms, meal cards and books to students at no charge. This plan was criticized because funding had not been established; however, ADPSE, like the Alabama and U.S. Departments of Education, decided to enroll the students in school, make them comfortable and figure out the funding later. Alabama was the only state in the region with a consolidated postsecondary education system offering free tuition statewide, making it simple for evacuees to understand the policy and enroll. Texas, for example, has a number of separate community college districts, and those districts each decided independently how to handle evacuee enrollment and tuition.

The four-year college system in Alabama did not share ADPSE's "open-door" policy. In fact, one four-year college raised questions about the Postsecondary Department's actions,

implying that the waivers were illegal because the waivers were based on in-state tuition rates and they should have been based on out-of-state tuition rates.

The number of students enrolling in programs did not warrant the hiring of new teachers, and as a result, ADPSE was able to absorb much of the cost. ADPSE required the students to enroll in classes by mid-September (September 15 to 20) so that they would not miss a substantial portion of the classes offered for the semester.

Early in the process, 115 students were placed in an Alabama community college. More students enrolled for the spring semester; however, the free tuition was no longer offered to incoming students but was provided to continuing students on a case-by-case basis. At that time, the continuing evacuee students were able to apply for federal Pell Grants and other federal education loans.

A young male evacuee who enrolled at Snead State Community College exemplifies ADPSE's support of evacuees. He was evacuated first to Houston, and then he moved to Alabama solely to enroll in Snead State, which provided him a dormitory room, meal card and books. This young evacuee became the manager of the Snead State basketball team, ended up with a full scholarship to finish at Snead State and will go on to the University of Alabama to work on his bachelor's degree. While there are no hard numbers available, ADPSE believes that many evacuees who came and attended community college in Alabama likely stayed in Alabama.

VII. LEGAL SERVICES

Alabama's response to evacuees' legal services needs involved a coordinated statewide effort. Key was early recognition of the need to bolster the preexisting disaster response and legal services infrastructure to serve a record number of evacuees without compromising service

to their traditional client base. Led by Legal Services Alabama (LSA), a broad cross-section of the Alabama legal community on a pro bono basis developed and implemented a plan to leverage limited resources through coordination, technology and an adoption of best practices from preeminent legal service providers throughout the country. This pro bono effort of the Alabama legal community included lawyers, law professors, law students and paralegals. Alabama's legal community also made substantial financial and non-legal contributions, including direct monetary donations, food, water, clothing and other disaster-related necessities. To a large extent, they appear to have succeeded.

A. Legal Services and Disaster Response Background.

In many ways, Alabama's legal services community was uniquely positioned to adopt a new service model in the wake of disaster the scale of Hurricane Katrina. To begin with, it had broad general experience with servicing legal needs arising from localized catastrophic events.

The Alabama State Bar (ASB) had contracted with FEMA to staff its disaster legal assistance hotline. Funded by FEMA, the hotline went operational whenever a disaster area was declared in Alabama. Staffed by volunteers from the ASB's Young Lawyers Committee (YLC), the hotline operators gathered information from callers and forwarded it by email to volunteer legal professionals for information and advice. Past experience taught that, even in the wake of localized disasters, the service model employed by the ASB/FEMA hotline often resulted in delayed advice to evacuees whose circumstances made them difficult to locate and track. The hotline had limited hours, could not handle complaints or cases involving FEMA and only operated for a limited amount of time after a disaster.

To supplement these efforts, LSA prepared and made available free of charge a general disaster assistance manual, "Recovering From Hurricanes and Other Natural Disasters: Your

Legal Rights.” The manual addressed situations that typically arise after a disaster and helped to fill gaps created by the limited nature and duration of the ASB/FEMA hotline.

LSA’s recent history also helped it anticipate and focus on issues relevant to the coordinated implementation of legal services that would prove critical to adequately assisting both Hurricane Katrina evacuees and traditional clients. Formed in 2004 through a merger of three separate legal services organizations, LSA was already responsible for providing legal services to those in need statewide. This broad responsibility necessitated a level of planning and coordination that may not have been present at a more localized legal service provider. It also provided insight into the way a centralized service model could leverage resources to stretch the traditionally limited funding and staff available to legal services providers.

B. Recognizing Need for a New Disaster Response Model.

Immediately after Hurricane Katrina struck, Alabama implemented its existing protocols for delivery of legal services in the wake of a disaster. The ASB/FEMA disaster legal assistance hotline began operating the next day and was the first such hotline in the country to open after the storm. LSA quickly recognized, however, that the combined effect of significant in-state damage and the presence of a high number of out-of-state evacuees rendered Alabama’s prior model for delivery of temporary additional legal services to localized disaster evacuees wholly inadequate. The evacuees of Hurricane Katrina meeting legal service eligibility guidelines were numerous and their legal needs were likely to evolve and continue for years to come.

In response, the second day after landfall, LSA created a single point of contact (POC) for coordination and implementation of its response to Hurricane Katrina. The following day, LSA began updating its disaster assistance manual to reflect new information and issues peculiar to Hurricane Katrina. Updated daily, the manual was available online at www.lawhelp.org/AL

and the Alabama State Bar website, www.alabar.org. The updated manual provided basic information regarding the legal issues most likely to be relevant to Hurricane Katrina evacuees.

LSA also immediately surveyed legal services programs in California, Florida, Georgia, North Carolina, New York, South Carolina and Texas regarding the most common legal needs found after a disaster. Combined with the lessons learned from prior experiences with localized natural disasters, LSA prepared a “Disaster Legal Needs Timeline” that was disseminated internally and used externally as a starting point for discussions of a larger, coordinated legal services response to Hurricane Katrina.

Two weeks into the Hurricane Katrina disaster, the Coordinated Legal Response meeting was presided over by ASB President and LSA Board member Bobby Segall. In attendance were representatives from the Circuit Court Clerks, the Alabama Association of Paralegals, FEMA, Alabama Emergency Management Agency, the Alabama Attorney General’s Office, Governor Riley’s Deputy Legal Counsel, the ASB’s Executive Director, the Directors of ASB and Mobile Volunteer Lawyer Programs, LSA’s Executive Director, Disaster Response Team Director and Assistant Director and the Cumberland, Jones and University of Alabama Law Schools. The groups finalized the roles each would play and agreed to share information. Following LSA’s lead, the other participating groups each designated a single POC responsible for their organization’s efforts.

With the general support of the Alabama Bar and various government agencies, LSA then prepared a formal Disaster Legal Assistance Plan (DLAP). The DLAP set forth a strategy for increasing the quality and quantity of legal services available to Hurricane Katrina evacuees while ensuring the continuation of existing services to those Alabama residents not affected by

Hurricane Katrina but also in need of legal services. It stressed achievement of these objectives through the implementation of three general programs:

1. Community Education Through Written Materials.

In addition to the updated “Know Your Legal Rights” disaster assistance manual, LSA developed and distributed dozens of simple and easy to understand FAQ flyers and informational brochures covering discrete topics relevant to evacuees’ likely legal needs. It also provided descriptions of the various available legal services and the procedures for utilizing them. These written materials were distributed directly to evacuees by staff and volunteers and placed in courthouses, libraries, community centers, churches, human service agencies and the offices of non-profit providers. Relatively inexpensive and portable, these brochures allowed LSA to reach a great number of evacuees, educate them about the availability of legal services and answer basic disaster-related questions. This freed LSA personnel to provide more substantive help to victims.

2. Centralized Case Management.

Critical to the revised legal services disaster model was LSA’s implementation of a new statewide toll free disaster legal assistance hotline and intake system. The system’s purpose was to compliment the ASB/FEMA hotline and to free existing legal service providers from the onslaught of clerical tasks associated with responding to evacuees’ initial requests for legal assistance. This allowed them to focus on their core capabilities - providing legal advice and representation to needy individuals.

The new hotline, started for less than \$1 million through an initial allocation by LSA, Access to Justice Funds allocated by the Alabama Law Foundation and other funds awarded following Hurricane Katrina, was designed to stay open until the last Hurricane Katrina related legal services case was closed. Its anticipated yearly operating budget is \$500,000.

The system was employed at four separate intake centers located in Montgomery, Huntsville, Birmingham and Mobile. It employed a networked, web-based case management system with centralized database and sophisticated call routing technologies. The call centers were each linked through networked software. A paralegal/intake specialist assisted by an attorney screened the initial calls (especially for income eligibility) and inputted essential caller data into the central database.

The intake specialist then provided community resource referrals for non-legal questions, and referred brief legal questions to an attorney coordinator who would provide timely legal advice if appropriate. Where extended representation was required, the completed intake and case files were referred to an LSA staff attorney who in turn referred the clients to statewide volunteer lawyers specifically recruited for disaster response (each with access to the same case information by e-mail). The LSA staff used the information gleaned in the referral process to identify trends and gaps in legal services being requested by and provided to Hurricane Katrina evacuees and shared these insights with other legal service providers, giving guidance regarding the best use of existing resources and identifying areas in need of additional support.

Intentionally placed in strategic urban centers, the hotline staffing was supplemented by private bar, law and social worker volunteers when available. Together with the additional volunteer support, the centralized nature of the technology platform allowed the coordination of calls between offices and a helpful redundancy in the program's infrastructure. It did not matter where a given screener or attorney was working. As they were received, calls were placed in a queue to be answered by the next available representative regardless of their location. The various offices could operate separately or together depending on the circumstances. Thus, the offices were reasonably able to remain open from 8 a.m. to 8 p.m. Monday-Friday and 9 a.m.

to Noon on Saturday without any one staffer having to work more than one evening or weekend a month. Any center could also take over operations for another center or even the entire state should it be affected by a disaster or power outage. Eventually the hotline used two toll free numbers — one for English callers and one for Spanish callers. Beyond its immediate use during Katrina, it is expected that this same centralized case intake program will provide a long-term benefit to LSA's operations. The same infrastructure can easily be adapted for use outside a disaster to provided greatly enhanced legal services generally.

3. Capacity Building through Training.

In addition to the physical infrastructure, LSA worked to leverage limited human resources by providing disaster response training. In this way, it worked to build the capabilities of the paralegals and attorneys staffing the call centers as well as those LSA and volunteer attorneys and paralegals providing extended representation to needy clients (each of the call center employees was a new hire whose cost was figured into the overall program budget). Among other things, LSA sent the statewide call center director through the legal hotline sessions track at the National Legal Aid and Defender Association (NLADA) Conference and to witness the actual operation of two of the premier legal services hotlines in the country. It also sent one experienced attorney from each LSA field office to disaster legal assistance training in Atlanta sponsored by the Georgia State Bar so that they and the administrative staff could keep LSA's field office open during their mandatory disaster training in late October 2005. As new staff members and volunteers were added to the LSA, they would receive in-house training from qualified LSA personnel.

C. Typical Legal Issues Presented by Hurricane Katrina Evacuees.

Consistent with LSA's experiences during other natural disasters, the types of legal problems experienced by Hurricane Katrina evacuees in Alabama evolved over time. During the

first phase, problems related to immediate physical needs such as obtaining approval for FEMA benefits, housing and food. During the next phase, evacuees became increasingly focused on collecting insurance proceeds for lost or damaged housing. Also at this time, family law issues arose related to lost or damaged wills and child custody issues surfaced from families separated during the initial evacuation or later search for housing and jobs. The third phase, now emerging, involves consumer issues associated with fraud, performance issues related to contracts to repair damaged property, as well as personal finance and bankruptcy issues associated with prolonged job loss or the end of short-term disaster assistance benefits. As of January 2006, LSA had opened 415 Hurricane Katrina-related cases and had assisted over 1000 evacuees.⁹

Insurance issues present particular difficulties in maintaining long-term representation for needy clients. This is because the insurance companies resisting coverage have tremendous resources and the cases can be expensive and time consuming. LSA's budget and service structure is not generally designed to support this type of representation and it is often difficult to find volunteer lawyers willing to take such cases.

⁹ Legal Services Alabama, Inc., *Rebuilding Lives: Alabama's Legal Response to Disaster, A Report to the ABA House of Delegates* (Feb. 13, 2006).