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**BEFORE THE COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
Subcommittee on Economic Development, Public Buildings and Emergency Management**

U.S. HOUSE OF REPRESENTATIVES

Chairwoman Norton, Ranking Member Diaz-Balart and distinguished Members of the Committee, I am pleased to offer testimony today regarding catastrophic incidents and what our nation must do to better manage long-term disaster recovery efforts.

My name is Joe Becker, and I have led the national disaster relief program for the American Red Cross for more than five years. During this span, we have responded to a number of devastating natural and human-caused disasters, including four of the five largest domestic hurricanes. Today I will focus my testimony on the key issues impeding the long-term recovery of survivors of catastrophic incidents. Specifically, I will discuss housing issues, case management, citizen preparedness, and building resilient communities. Economic recovery, health care, and infrastructure concerns can best be addressed by others.

As you know, catastrophic incidents are defined by the National Response Framework as “[A]ny natural or manmade incident, including terrorism, that results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, and/or government functions.” During the past ten years, we have experienced two domestic catastrophic events - the attacks on our nation on September 11, 2001 and Hurricane Katrina. The considerations offered in this testimony are shaped in large measure by observations from the response to these two events, and from the changes that were triggered by comprehensive reviews of these responses.

While September 11 and Hurricane Katrina were devastating events, we face very real threats that would make each of those events look small by comparison. Major metropolitan areas with populations significantly larger than those hit by Katrina are also vulnerable to hurricanes, and earthquake threats in densely populated areas would require responses several times the scale of Katrina. The scale and consequences from human-caused disasters have been well documented.

Without a doubt, we know that we will likely face disasters in the future that will cause human need on a scale many times greater than we witnessed in any previous event.

Housing: A Significant National Shortcoming

The most obvious issue for disaster survivors in long term recovery is the severe shortage of intermediate and long-term housing. The solutions to this issue must take into account infrastructure needs, population densities, special needs requirements, cultural sensitivities, and potential dispersion of evacuees over great distances. Solutions must also clearly delineate roles across federal, state, and local government as well as NGOs.

As we move toward solutions to the housing shortage, the Red Cross is working closely with our partners to develop guidelines for operation of large “mega-shelters” that could make longer-term use of congregate shelters a more viable option. However, note that we view this as an interim solution, as use of shelters for extended periods creates significant emotional and physical stress. Extended use also has economic implications for the community, as it is unable to use the shelter facility (school, convention center, etc) for its original purpose. Our goal remains to move residents from shelters to more stable housing as soon as possible. A comprehensive, flexible set of housing options is what will make this transition possible.

Historically, much of the effort to address the housing shortage has been directed at development of viable manufactured housing solutions to augment existing vacant residential units. While there is utility in manufactured housing, this option should be viewed as a tool and not as an all-encompassing solution. The key to a successful approach is building a flexible menu of options that can be deployed based on the varying needs of communities. Rental assistance, existing Department of Housing and Urban Development (HUD) housing stocks, housing repair programs, transitional housing and manufactured housing have all demonstrated value in different recovery scenarios, and these programs should all be expanded. The simple truth is that the sum of the existing options for interim housing is still too small to meet the needs caused by a catastrophic disaster – and it will prove inadequate in the next large scale disaster. At a certain scale of event, there will still be housing needs that can only be met through resources outside the community. As we have seen, the result of a lack of housing in an affected area is the permanent relocation of large numbers of people. Just as the affected communities are trying to rebuild their economies, their workers and consumers are not able to return home due to a lack of housing options.

As we have seen from recent events, wide geographies can be affected in a catastrophic disaster, and our planning must identify solutions that can vary greatly from community to community. For example, mobile homes are not feasible in densely populated urban areas, and often not desirable in hurricane-prone coastal areas. Rural areas pose significant challenges as well, as it is difficult to ensure that the necessary infrastructure is available to support newly relocated populations. A menu of options for use by state and local governments “on the shelf” in pre-disaster planning is the desired end state.

Adequate housing solutions require more than just buildings; we also need to establish the necessary infrastructure for human and social services (security, healthcare, sanitation, day care, schools, shops, public transportation, etc.), to meet basic day-to-day family needs. In catastrophic disasters where large numbers of survivors are displaced over wide areas, the lack of social services amplifies the client need even when appropriate housing facilities can be provided. The provision of these services

requires close cooperation and clear role delineation between government units as well as NGO organizations able to meet the human needs.

As you know, the Post-Katrina Emergency Management Reform Act (PKEMRA) called on FEMA to create a National Disaster Housing Plan to address these kinds of issues. From this work, a National Disaster Housing Task Force was created to be the focal point of planning and implementation of the disaster housing strategy. This is critical work, to be sure. However, the Task Force is not funded, and participating agencies have been limited in the extent to which they can support this absolutely essential work. Moving forward, the American Red Cross supports strong consideration of additional funding to permanently support and expand this working group. Funding could enable participating agencies to hire full time members for the Task Force so that its important work can be completed and solutions to this critical gap can be identified.

The National Disaster Housing Task Force should develop a series of recommendations that FEMA endorses for housing survivors after a large scale event. This menu should be developed with the participation of state and local government, tribal units, business and non-profits. In addition, it should include a variety of housing solutions that have been researched, designed, prototyped, and contracted that meet urban and rural needs. These solutions should then be readily available to state and local governments whose own housing task forces would create local plans long before the disaster strikes.

A February 2009 special report on *Deficiencies in Federal Disaster Housing Assistance* prepared by the Subcommittee on Disaster Recovery of the Senate Committee on Homeland Security and Governmental Affairs recommended that regulations be simplified and that the Stafford Act be amended to provide enhanced assistance for catastrophic disasters. The American Red Cross supports these changes in principle, and also believes that it would be beneficial to more clearly define the roles of the various organizations that should be a part of the long-term solution. FEMA, the National Disaster Housing Task Force, the FEMA National Advisory Council, HUD, and the American Red Cross all have a significant role in developing the solutions. Ultimately, the country needs a menu of acceptable options that could be used by state and local governments on a case-by-case basis, planned in advance and on the shelf.

Case Management – Integration Needed

Like the term “catastrophic,” the term “case management” has many definitions. The Council on Accreditation (COA) defines case management as services used to “plan, secure, coordinate, monitor, and advocate for unified goals and services with organizations and personnel in partnership with individuals and families.” Effective case management is critical to the recovery efforts of survivors of catastrophic disasters—and of all disasters. Far too often, individuals and families “fall through the cracks” and do not receive the types of resources necessary to assist in their recovery. In addition, many individuals and families have pre-disaster conditions that have never been addressed, which compound their post disaster needs. The Red Cross trains case managers to be the primary advocate for their clients, and a good case manager understands both the clients’ needs as well as the resources available.

Often there are chronic, persistent needs following a disaster, and case management can continue for years. Today, nearly four years after Hurricanes Katrina and Rita, there are still nearly 2,000 families in temporary housing units in Louisiana. While there is some disagreement about exactly what should

be done to help these families, we all agree that coordination of resources across the many organizations that are working with these families is critical.

A key function of the caseworker in any organization is this coordination role. The Red Cross has nearly 12,000 trained caseworkers in our Disaster Services Human Resources (DSHR) system, and we are refining our training programs to place more emphasis on this increasingly important function. While there are practical limits to our resources, we have a strong understanding of the network of relief options available, and our volunteer caseworkers can connect affected individuals to the right organizations. After Katrina, various federal agencies created or expanded their own case management capabilities – FEMA, HHS, and HUD in particular provided these capabilities. What remains to be addressed is a comprehensive solution to case management that integrates these collective efforts.

Citizen Preparedness – Moving the Needle

Disasters can put individuals and families in an unfamiliar and frightening environment. And yet the true first responders in a catastrophic event are citizens themselves--people helping friends, families and themselves. There is no question that citizen and community preparedness helps to build resilient communities. Every individual and family that prepares before a crisis enables response agencies to focus on the most critical needs first. Further, those individuals that have taken basic steps are less likely to experience post-traumatic effects. Mental health studies have shown that individuals who have appropriate tools and mechanisms to address unexpected situations are more likely to return quickly to pre-disaster status. We need to make the necessary investments as a country to encourage citizen preparedness. The American Red Cross, DHS/FEMA and many states and cities have standardized citizen preparedness language to provide a consistent and compelling message for citizens. The three steps in this message for preparedness are common across all types of disasters and simple to follow, and yet we are barely moving the needle on the percent of those who are prepared.

The American Red Cross has learned in recent years that there are two key levers that can move citizens to become prepared – schools and employers. If a child comes home with an assignment to show the family emergency plan, parents are moved to act. If a worker comes home with a request from a supervisor that the family knows what it will do in an emergency so the employee can report to work, preparedness happens. By partnering with schools and businesses, we are making progress. But more must be done by government to partner with schools and businesses to prepare.

Building Resilient Communities

On a different note, big disasters can also present a potential opportunity. Depending on the nature of the disaster, communities may have a window of opportunity to introduce mitigation and urban planning measures. While many communities are overwhelmed simply trying to rebuild what was lost in a disaster, many are in a position to both rebuild and mitigate future disaster effects with appropriate attention to building codes and local regulations. Homes can be built to better withstand disasters and to take advantage of new green building options. Businesses can align themselves to emerging needs in the community. Infrastructure can be restored with additional back-up systems in place. It is clear that mitigation pays dividends.

However, in order for mitigation and urban planning measures to be put into effect, recovery planning needs to be initiated quickly. Preparedness planning now means that recovery planning can be initiated sooner, and the community can rebound more quickly. Government can play a major role by

making key investments and working with community and national organizations. To assist in the rebound, the country needs a well developed National Recovery Framework that emphasizes the critical role local communities and states play following disasters, outlines considerations and options, and brings resources from government, the private sector, and other entities into the recovery process.

In May 2008, I testified before the Senate Homeland Security and Governmental Affairs Committee regarding the mass care and medical surge needs to respond to a nuclear attack on the United States – a specific type of catastrophe that has unique capability shortfalls. Some of the issues raised are relevant to today’s discussion. First, the national capacity to deliver timely, appropriate, and consistent public information in a nuclear scenario is not in place. Second, decontamination capabilities vary widely among cities and are unlikely to exist with sufficient capacity. And third, it is unlikely that public donations will support the capacity needed to deliver services on the scale that can be forecasted in a nuclear or other catastrophic event.

Recommendations

As we continue to respond to disasters, we are gaining a deeper understanding of the effects and limitations of a catastrophic event. Moving forward, a number of practical steps can and should be taken to increase readiness and improve mass care capabilities. These recommendations can be summarized in the following four steps:

1. Fund and monitor the National Disaster Housing Task Force as it creates housing options, plans, templates and operational capability;
2. Integrate federal casework management among the various agencies to coordinate support for client needs beyond living facilities in long term recovery;
3. Further develop a national recovery framework that provides clarity to state and local officials on options and methods for meeting long term needs; and
4. Include mitigation and citizen preparedness in pre-disaster planning templates for state and local government.

Conclusion

Madam Chairwoman and distinguished Members of the Subcommittee, thank you for providing me with the opportunity to testify before you today. This great nation continues to make improvements in our ability to respond to and recover from disasters, and we are learning the lessons from our past disasters as we strengthen our capabilities.

I thank you for your work in this area, and look forward to our continued work together on these critical issues.

I am happy to take any questions.

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