

A SHELTER IN THE STORM | By **Benedetta (Bess) Macri '98***Benedetta Macri '98*

Last Labor Day, Monday, September 5, I received a call from one of my professors, Dr. Mary Lindahl, the chair of the department of forensic psychology at Marymount University in Arlington, VA, where I am a graduate student. In the space of 30 seconds, she explained that the Mental Health Relief Services division of the American Red Cross, with whom she has worked for many years, had contacted her that morning and asked her to spend two weeks working with Gulf Coast residents who had been evacuated in the wake of Hurricane Katrina. Dr. Lindahl told me she could bring six students and asked me if I was interested. Just three days later, I found myself on a plane in Washington, D.C., headed for Montgomery, AL, where the

Red Cross had set up its hurricane relief headquarters.

At a brief orientation, we learned that we would be assessing and counseling survivors, both adults and children, in Brookhaven, MS, where a local Baptist church had been converted into a Red Cross shelter housing close to 150 evacuees from Louisiana and Mississippi, as well as 35 Red Cross volunteers. At a nearby Red Cross service center, evacuees could receive assistance checks and be seen by medical professionals. Like the rest of the country, I had spent much of the previous week watching news coverage of the hurricane, so I used the images I had seen on television in an attempt to prepare myself. I expected to find individuals in acute stages of shock, loss and grief. Based on news reports, I also expected some to be angry. I expected to feel sadness. Nonetheless, what I encountered was staggering.

The Red Cross service center was set up to serve a total of 500 families per day, yet when we arrived at 9 a.m., three hours before the center was scheduled to open, there were already thousands of people standing outside in the heat, many of whom had been waiting overnight. The evacuees were extremely grateful for the bottled water and food we handed out, even though this was limited to bags of chips and other snacks. There were many individuals with “special needs,” needs that were only exacerbated by the lack of resources. Several women carried newborn babies; some of the older evacuees were post-operative or on oxygen, and clearly struggling with the lack of shelter and seating.

I was walking back to the service center to get more water for distribution when one of these elderly evacuees, a woman who appeared to be close to 80, grabbed me by the arm. She explained that she had just had a mastectomy three days before, and that she

was having trouble breathing because of the cigarette smoke from other evacuees waiting on line. As I looked at her, I could see the bandages that were clearly visible through her clothing. I took her directly inside, where she was examined by paramedics, and then I spent several minutes interviewing her for aid—and marveling at this amazing woman. She had come to the center alone, but was staying with family nearby after becoming separated from her children during the storm. A lifelong resident of New Orleans, she got tears in her eyes as she described how Katrina had demolished the city. Though she knew where her children were, she had friends who could not be located, many of whom had tried to ride out the storm. As she left the center, she again took me by the arm and told me that she would never forget me. I told her the same.

Also unforgettable were the children and young adults we met, both at the Baptist church where we were staying and at a second shelter nearby. For close to two weeks, we lived with these children, many of whom were from impoverished sections of New Orleans, many of whom had lost what few possessions they had. Some had also lost family members; some came from families that were struggling not only with poverty, but also with substance abuse or mental illness. We talked with the children about their experiences. We played games and watched movies and ate meals together. And as they began to leave the shelters with their families, we all felt quite helpless. Likewise, many of the children cried and told us they didn’t want to leave. It became apparent that the positive attention they had received in this temporary shelter was, in many cases, more than they had ever gotten (or would get) at home. This realization saddened us and made us fear for their future; as mental health professionals, it also made us angry about the profound lack of resources available to these and so many other children.

Yet the feeling that truly characterizes my experience is gratitude. It was impossible not to feel lucky, not to be repeatedly struck by the difference between my life and the lives of many I met in Mississippi. The opportunity I had to attend Exeter is only one example, but it is particularly significant: It has led, directly or indirectly, to nearly every other significant experience in my life, both educational and personal. These experiences, in turn, led me to Mississippi and opened my eyes to the reality of a population of children I might not have encountered otherwise. Although I may never learn what happens to the children I met, their lives and their stories continue to affect my life on a daily basis. They will stay with me always. ■