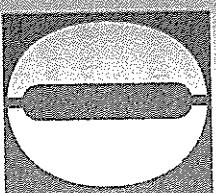


There are more elements to the collective production of isolation than we have explored thus far. After examining the demographic trends, cultural changes, housing arrangements, and gender patterns that help explain why certain individuals died in the heat, we can assess whether there are any broader community- or neighborhood-level conditions that contribute to the vulnerability or security of city residents. It is to this matter, and specifically the question of how an urban area's ecology affects the health and welfare of its residents, that the social autopsy turns next.

CHAPTER TWO

Race, Place, and Vulnerability

Urban Neighborhoods and the Ecology of Support



In 21 July, while Chicago still simmered from its week of treacherous heat, a team of researchers led by the U.S. Centers for Disease Control and Prevention arrived in the city to conduct an urgent epidemiological investigation into the risk factors for heat-related mortality. The project was ambitious for a quickly planned inquiry; yet, as one city official who helped coordinate the research explained, "the CDC is an extraordinarily powerful and rich organization, and when they come they bring an army." The case-control study design called for researchers to compare matched pairs consisting of one heat wave decedent and one survivor of similar age who lived nearby, either on the same street or in the neighborhood. Holding constant the age and location of the subjects, the epidemiologists would be able to determine a set of individual-level factors—such as living alone, having a medical problem, or owning an air conditioner—that affected a person's capacity to survive the heat. The scientific challenge was to locate the personal characteristics that proved most consequential during the catastrophe. But the "main objective," lead researcher Jan Semenza and his collaborators would later write, "was to identify public health strategies for reaching people at risk and preventing deaths in future heat waves."¹

With roughly seven hundred heat wave victims scattered around Chicago, the CDC team had to select a random sample of decedents large enough to generate reliable findings but not so great as to overwhelm their resources. The research staff—which included roughly eighty participants—decided to visit and inspect the residences of 420 pairs of victims and controls; interview a friend, relative, or neighbor who knew the decedent well enough to answer questions about their social networks; medical conditions, and daily routines; and complete a standard survey questionnaire for each case. "It was a gigantic operation," Se-

menza explains. "We had to do more than eight hundred interviews and we obviously couldn't do them ourselves. We drummed up support from all kinds of agencies. We got all different kinds of people who were willing to go out into the streets. And it's hard to get through this questionnaire, especially with the relative of a decedent. It was a painful job." The team acquired death certificates, police reports, and a list of the names and addresses of persons older than twenty-four years of age who had died between 14 and 17 July and whose death certificates listed heat or cardiovascular disease as a primary, contributing, or underlying cause of death.² The official records led the researchers to the doors of the decedents' former residences; once there, they searched for a matching person (or case) by tossing a coin to determine their direction and walking from unit to unit until the paired individual emerged.

Using this method, the CDC completed the research for 339 matched pairs, or 678 persons, as well as an additional 33 unmatched decedents between 21 July and 18 August. After conducting a statistical analysis of the survey responses, the CDC team honed in on a series of risk factors that heightened the probability of death during the crisis, and the findings were ultimately published in the most prestigious medical journal in the United States, the *New England Journal of Medicine*. Among the most significant conclusions were that city residents were more vulnerable if they did not leave home daily, had a medical problem, were confined to bed, lived alone, or lacked air-conditioning, access to transportation, and social contacts nearby.³ These findings were disseminated to an international audience of public health agencies and medical practitioners, and they have been influential in shaping morbidity and mortality prevention strategies in U.S. cities where heat waves are common.

What the epidemiological study did not do, however, is move beyond the population risk factors to identify the social environmental conditions that elevate or reduce the probability that residents would survive the heat. By studying matched pairs culled from the same location, the CDC researchers ruled out the possibility that their study would capture neighborhood or regional differences in heat wave mortality or the broader social context of the catastrophe.⁴ If there were risks of living in an impoverished, institutionally depleted, or politically neglected neighborhood or region, the CDC analysis would not help to identify them. The CDC study directs the attention of public health agencies to the particular set of individuals who are most vulnerable to heat-

related problems, but not to the places where such problems are likely to be concentrated. In recent years, a number of scholars have called attention to the ways in which the social ecology and political economy of urban areas affect the health and welfare of residents during normal times,⁵ but few have asked whether such conditions alter health risks in extreme events. There were clear spatial patterns in mortality during the heat wave. Yet (as we will see in chapters 4 and 5) much of the official and journalistic discourse about the event, such as the summary statements that "all community areas in the city were affected" by the disaster, render these trends invisible.

Sociological theories and qualitative research techniques make it possible to conduct a different kind of epidemiology. Rather than ending an investigation with individual-level information, we can add a layer of regional or social ecological analysis to the study of urban health—for both extreme events and everyday, typical situations. Demographers and geographers can use census tract or neighborhood-level data to assess the extent to which place-specific conditions—such as land-use and development patterns, segregation, violence, and microclimate— influence health risks in disasters. The geographer Karen Smoyer, for example, shows that in the 1980 St. Louis heat wave "low-mortality tracts were predominantly in the cooler, more affluent and more stable south and west sections of the city"; whereas the high-mortality tracts were concentrated around the relatively warm central business district and the declining neighborhoods with low housing density and depleted population bases. These findings are largely consistent with the few studies of the geography of heat wave vulnerability that preceded Smoyer's work, which show significant associations between disaster mortality and neighborhood poverty, low-quality housing, lack of vegetation, and concentrated urban heat island effects.⁶

The spatial distribution of mortality in the 1995 Chicago disaster shared some characteristics with heat waves in other cities, but with a distinctly local pattern.⁷ The map of the Chicago community areas that experienced the highest heat-related death rates (fig. 23) shows that the community areas hit hardest are concentrated on the South and West Sides of the city, the historic Black Belt where the city's African Americans have been concentrated and segregated.⁸ This map is particularly striking because it illustrates a block of high-death areas, beginning at Burnside in the south and banking west before it reaches the most affluent areas on the North Side where residents had less difficulty protecting themselves from the heat. Although several predominantly

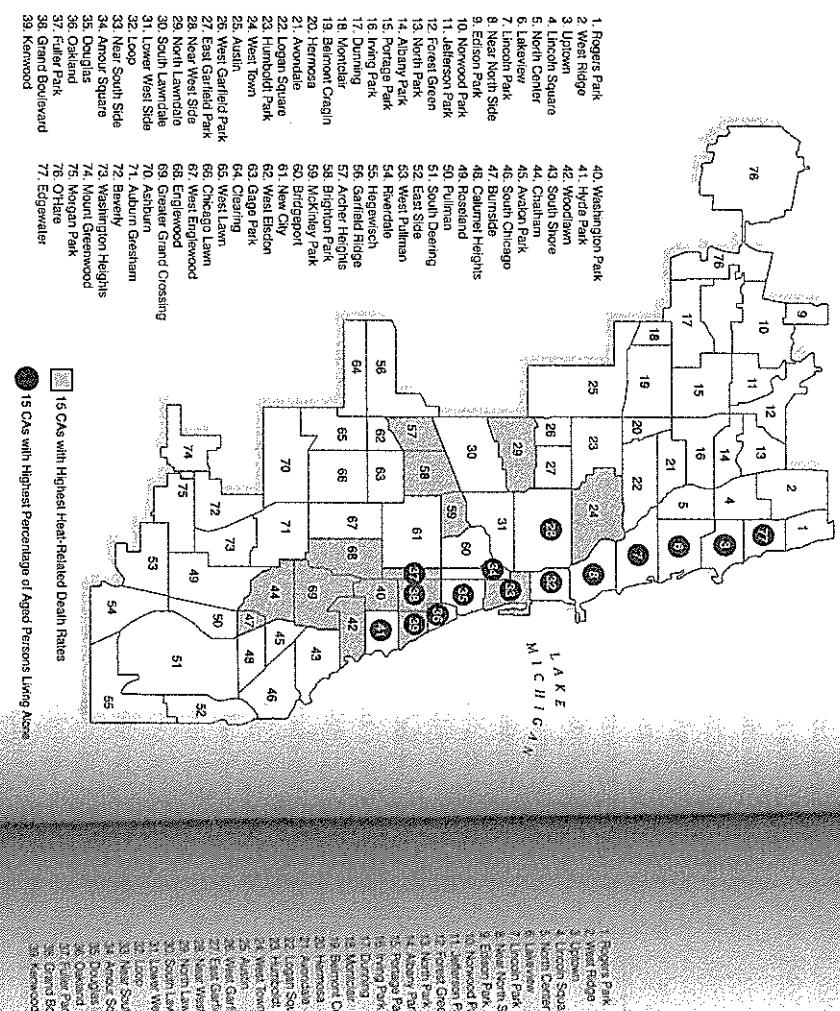


Figure 23. Chicago community areas with the highest heat-related mortality rates and highest proportion of elderly persons living alone. The top quintile is represented on the map.

African-American community areas had exceptionally low heat wave mortality rates, there was a clear clustering of deaths in Chicago's segregated black regions.

The heaviest concentration of high-death areas is in the region immediately south of the Loop, beginning at the Near South Side, progressing south into the old Black Belt and beyond to the newer African-American communities, such as Woodlawn and Chatham, east and farther south; another pocket with high mortality rates starts west of the Loop in the Near West Side area, extending through the western portion of the city. As figures 24 and 25 show, both of these large regions are notable for their high levels of poverty and violent crime.⁹ Another cluster of heat-related mortality is on the Near Southeast Side, which

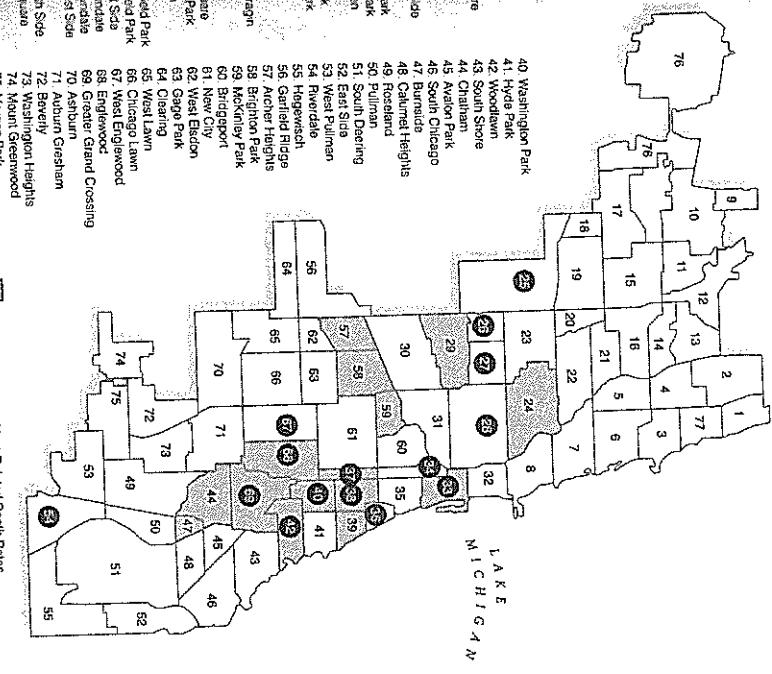


Figure 24. Chicago community areas with the highest heat-related mortality rates and highest violent crime rates. The top quintile is represented on the map.

as figure 23 shows, is distinctive for its concentration of seniors and elderly people living alone. Table 3, which shows the community areas with the highest heat wave death rates, is equally striking. Of the fifteen community areas with the highest death rates during the heat wave, ten contain populations that are between 94 and 99 percent African American, and another is 77 percent black.¹⁰ The four remaining community areas are distinctive for other reasons. West Town, which is a largely Latino and Puerto Rican region, faced elevated heat mortal-

ity risks because it has more Chicago Housing Authority senior public housing units than any other community area in the city. Archer Heights, McKinley Park, and Brighton Park, the three contiguous com-

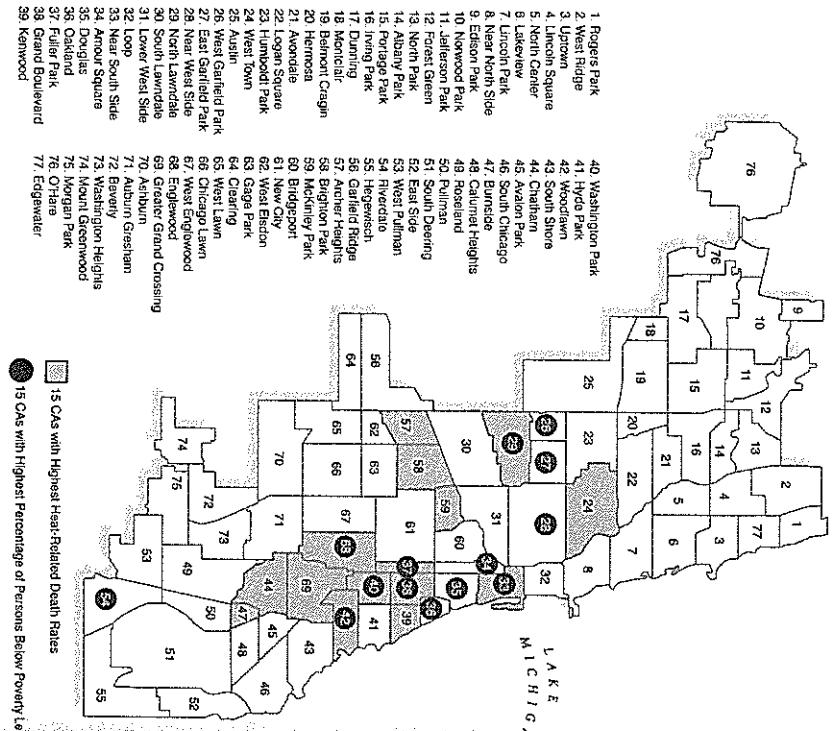


Table 3. Chicago Community Areas with the Highest Heat-Related Death Rates

Community Area	Population	Heat-Related Deaths per 100,000 Population	Percent Black	Percent Population 65+	Percent Population Lost, 1960–90	Overall Crime, Rank, 1994–95 (77 CAS)
Fulterville Park	92	99	19	64	1	1
Woodlawn	73	96	18	66	8	8
Archer Heights	54	0	21	13	56	56
Graham	52	99	18	39	15	15
Washington Park	51	99	11	56	2	2
Grand Boulevard	47	99	14	55	3	3
McKinley Park	45	0	13	21	46	46
North Lawndale	40	96	9	62	18	18
Chatham	35	99	19	16	30	30
Newwood	33	77	15	56	31	31
Englewood	33	99	11	50	13	13
Veterans Town	32	10	9	37	38	38
Brighton Park	31	0	15	15	50	50
Burnside	30	98	6	0	21	21
Near South Side	29	94	13	34	5	5
Chicago	7	39	12	—	—	—

Data based on 521 heat-related deaths located by Illinois Department of Public Health (1997), Chicago Fact Book Consortium (1995), and City of Chicago, Department of Public Health (1996).

Figure 25. Chicago community areas with the highest heat-related mortality rates and highest proportion of persons below poverty level. The top quintile is represented on the map.

because the red-brick and blacktop buildings ubiquitous in the region intensify the indoor heat,¹¹ and because the historically Polish communities concentrated there (especially in McKinley Park and Brighton Park) have aged in place while new, mostly Latino residents move in, leaving the white elderly culturally and linguistically isolated from the emergent populations.

The maps illustrate a clear correlation between heat-related mortality and certain community area conditions, and Illinois researchers used statistical research similar to Smoyer's to further investigate the sources of these varying death rates. After the disaster Tieffu Shen and his colleagues at the Illinois Department of Public Health found that relative to other regions, community areas with high levels of violent

crime and high proportions of elderly residents were significantly more likely to experience heat wave deaths.¹² The group did not examine whether there was also an association with the proportion of community area residents living below the poverty line, so the study yielded no information about place-based deprivation and vulnerability. Public health colleagues were convinced that there were reliable and significant differences in the neighborhood-level mortality risks, but they left it to others to explore and explain them.

In the years following the heat wave, however, no official or scientific report did revisit the issue of place-based risks, and subsequent public discussions and policy debates about heat-related health risks have not moved beyond individual- or population-level conditions. A smattering of quantitative evidence about heat waves in Chicago and St. Louis has shown that certain community area characteristics, such as poverty, high senior populations, lack of vegetation, and high crime, are associated with high heat wave mortality rates. But although demographers have ample data to examine these conditions, no studies have explained how neighborhood environments imperiled or protected residents during the extreme summer climate, and no qualitative research has identified significant contextual conditions that lie outside the

scope of standard statistical data sets on urban regions.¹³ Part of the reason for this absence is that community studies designed to identify the mechanisms through which neighborhood conditions affect the health and security of residents require intensive fieldwork and deep engagements with local residents, institutions, and public places. Without such research it would be impossible to learn whether community-level practices that fall outside the scope of quantitative studies—such as the ways in which residents use sidewalks and public spaces, the role of commercial outlets in stimulating social contact, the strategies through which residents protect themselves from local dangers, and the role of community organizations and institutions in providing social protection—affected the mortality rates.

The enormous amount of personnel, resources, and time that would be necessary to replicate the scale of the CDC heat wave study at the community area level makes it impossible to conduct an identical analysis.¹⁴ Yet smaller-scale projects that focus on particular areas can deepen our understanding of the relationships among place, health, and risk during extreme events as well as normal times. Blending the CDC's case-control method with techniques honed by generations of urban sociologists, I turned my attention to a matching pair of neighboring Chicago community areas that have strong demographic similarities but drastically different heat wave mortality rates. The comparative case study would lack the large scale and predetermined variables of the CDC epidemiological inquiry, and it would no doubt be difficult to establish all the connections between the neighborhood social environments and the specific contexts in which residents died alone. But deep and intensive scrutiny of the two community areas would introduce novel ways of understanding place-based vulnerability or protection and, in turn, generate insights into how the social and ecological conditions that are unmeasured in conventional surveys affect the capacity of residents to survive the heat.¹⁵

MATCHING PAIRS

Like the CDC epidemiologists, my first challenge was to find a matching pair of cases that experienced different outcomes during the disaster. Since previous studies of place-based conditions that influenced heat wave mortality highlighted the significance of poverty, crime, elderly inhabitants, and lack of vegetation, I searched for two residential areas with similar compositional makeup on each of these measures and population levels high enough to generate reliably contrasting death rates.¹⁶ One set of neighboring community areas on the West

Table 4. Characteristics of North Lawndale and South Lawndale

Condition	North Lawndale	South Lawndale	Chicago
Senior poverty level	26%	22%	16%
2X below poverty level	71%	62%	41%
Poverty level	44%	22%	18%
Population aged 65 years or older	4,029	3,965	334,046
Seniors living alone	956	1,256	106,792
Percent aged 65 years or older	8.5%	4.0%	12%
Percent seniors living alone	24%	31%	32%
"Minority" population	99%	94%	58%
Heat-related deaths	19 (96% black)	3 (85% Latino)	521
Heat wave death rate	40/100,000	4/100,000	71/100,000

Source: Chicago Fact Book Consortium (1995) and Lawlor, Anggren, and Gomberg (1993).

Side appeared to provide such a contrast: North Lawndale, which experienced 19 heat-related deaths for a rate of 40 per 100,000 residents; and South Lawndale (colloquially known as Little Village), which had 3 deaths and a rate of less than 4 per 100,000 residents—ten times fewer than North Lawndale. The two areas share more than a name. In the 1990s North and South Lawndale had similar microclimates and almost identical numbers and proportions of seniors living alone and seniors living in poverty. The community areas, then, naturally controlled for the weather and the subpopulation of people thought to be most at risk of heat wave death.

According to most observers, the obvious difference in the populations of the community areas was the ethnoracial composition of the residents. In North Lawndale 96 percent of the population was African American, whereas in Little Village 85 percent of the official population was Latino. Public health researchers had found that Chicago's African Americans faced the greatest risk of mortality in the heat wave, while Latinos were most likely to survive; after the heat wave, government officials, journalists, and scholars alike puzzled over the question of why, despite high levels of poverty and risk, Latinos fared so much better than blacks and whites.¹⁷

Though the areas are easily distinguishable to those who know them, an outsider who sees North and South Lawndale on paper would have little reason to believe that they would experience such great mortality disparities during the heat wave. As table 4 shows, the two Lawndales had almost identical numbers and proportions of seniors living alone and seniors living in poverty. In Little Village 1,256 seniors, or 31 per-

Table 5. Reported Overall Violent Crimes: Districts 10 and 11, 1994-95

Violent Crimes	11th District	10th District	Chicago
Number	4,714	2,973	218,894
Victimization rate	10/100,000	4/100,000	8/100,000
City rank (out of 77 community areas)	18	59	—
			Source: City of Chicago (1996). The Eleventh Police District contains much of North Lawndale, and the Tenth includes Little Village and a slice of North Lawndale.

cent of the elderly population, lived alone, compared with 956, or 24 percent of the elderly population, in North Lawndale. Each of the areas also had distinctive risk factors. Although both had high levels of poverty relative to the rest of Chicago, North Lawndale, where 71 percent of local families earned below twice the poverty level and 44 percent lived below the line, was worse off than South Lawndale, where the poverty rates were 62 percent and 22 percent.¹⁸ As table 5 shows, North Lawndale also had higher levels of violent crime; but it is important to note that in 1994 and 1995 its crime rate was not in the top quintile of Chicago's high-crime areas. The risks specific to Little Village stem from its high population of the people whom policy makers and scholars call cultural or linguistic isolates, who fit the demographic profile of the Chicago residents most likely to die in the heat. Roughly 46 percent of the seniors in Little Village were white "old-timers" who aged in place when the younger generations left, whereas only 2 percent of the seniors in the mostly African-American North Lawndale were white.¹⁹

To date, the most prominent explanations of the variance in death rates between the two areas, and between African Americans and Latinos more generally, have focused on the ethnoracial composition of the groups.²⁰ The two most popular cultural arguments that attempt to explain the variance in death rates are, first, that Latinos are accustomed to the heat and have strategies for coping with it because many have recently lived in hot Latin American climates. One of my Latino informants summed up this position when he told me that "people south of the border are more used to the heat. You have to realize that in the south of Mexico or Cuba or Puerto Rico the average temperature is about eighty-five or ninety degrees." The second cultural explanation is that Latino seniors benefit from strong multigenerational and extended family ties that facilitate close contact during normal times as well as crises. As another informant opined, "Among the three big groups that we have in Chicago—the Caucasians, the African Americans, and the Latino people—the Latino group tends to be the

less isolated group. . . . Latinos are the ones that probably get a little bit closer to their own families."

The primary "racial" argument, which I heard from a large number of Chicagoans when I discussed the heat wave with them, is that there is something about the physiology of Latinos that protects them from the heat.²¹ "I guess naturally we are more equipped to resist the heat," one of my Latino informants told me. "I would say that there is something in our skin or our genes that makes us a little bit more comfortable with the heat." Another informant, this one a white woman who works with seniors regularly, added that Latinos' "metabolism and body chemistry. . . . lends itself more to coping with high temperatures." None of these arguments provide a persuasive account of the differences in heat wave mortality between North Lawndale and Little Village. The racial argument is rooted in mythology rather than science. Not only is there no credible scientific evidence that Latinos have genetic or physiological traits that allow them to withstand the heat, there is also no distinct Latino "racial" type that unifies the heterogeneous groups having Latin-American ancestry, including residents of Little Village.

Cultural arguments concerning adaptation to the heat and family ties are also unsatisfying. For although social scientists and service providers often distinguish among ethnically organized cultures of care, there is little evidence that these caring practices and routines are inherent features of a group's identity. The claim that older Latinos are strongly connected to friends and family through multigenerational networks and extended family ties might be persuasive at first glance, especially given the important traditional role of the grandparent in Latino communities. But there are at least two reasons to treat it with caution. First, recent surveys of Mexican-American seniors have found that the native-born Mexican-American elderly are significantly more likely to live away from and out of regular contact with their children than are foreign-born Mexican-American seniors.²² Clearly, ethnicity alone cannot explain this difference, but variations in the social environment in which Mexican Americans live can account for much of the cultural change. Second, many scholars argue that African Americans also have, or have had, both strong multigenerational family networks, extended family ties, and highly-respected and well-integrated grandparent figures.²³ Again, ethnicity alone cannot explain differences in support networks for the elderly.

The other claim, that some groups are acculturated to the heat because their members once lived in a warm climate, would likely be as

applicable to Chicago's older African Americans, the majority of whom were born in the southern region of the United States and have ancestral roots in Africa, as it would be for any other group in the city. Yet as we have seen, older African Americans experienced the highest death rates of all ethnoracial groups. Finally, both the "racial" and ethnic arguments about the differences in community area mortality rates overlook a crucial part of the heat wave story: *the social environment of Little Village protected not only the area's Latino population, but the culturally or linguistically isolated white elderly, who were at high risk of death as well.*

Together, these findings show that if in Chicago social connections proved to be more tenuous in North Lawndale than in Little Village, or among African Americans more generally, we will have to explain why this is the case and not simply attribute the differences to ethnicity or "race." For if it is true that the social support practices vary within groups as well as between them, a strong cultural argument about networks of care and support requires taking a closer look at the social environments of the two community areas.²⁴

VARIATIONS IN THE SOCIAL ENVIRONMENT OF POVERTY

It takes only a few minutes of observation in the two community areas, or even a casual drive on Cermak Road, the border between the neighborhoods with the railroad line to the west, to see that the two Lawndales are, as numerous residents on both sides of the tracks told me, "totally different worlds." Most residents and outside observers differentiate the areas by the ethnoracial characteristics of the two distinctive local groups, but the differences extend far beyond the identities of the populations. To begin, North Lawndale and Little Village differ in their *ecological characteristics*—what Robert McKenzie called the "spatial and temporal relations of human beings as affected by the selective, distributive, and accommodative forces of the environment," or the spatial distribution of people and institutions that organize a local area. The two areas also differ in their *social morphological conditions*—which Marcel Mauss defined as "the material substratum of societies, that is, the form they assume in settling across the land, the volume and density of their population, the manner in which it is distributed as well as the ensemble of things that serve as the basis for collective life."²⁵ The social ecology of a community area is the foundation for local social life, the soil out of which social networks grow and develop or, alternatively wither and devolve.²⁶ Thus, urban regions such as North Lawndale and Little Village can be distinguished not only by the identities of their

inhabitants, but also by the structure and texture of their social and physical environments.

The prevailing U.S. tradition of thinking about urban poverty, however, involves focusing on poor people and their individual characteristics rather than on places and their social ecological features. This logic is most apparent in the culture of poverty arguments about the ways in which the practices of poor people contribute to the production of their own deprivation, but it informs more liberal theories as well. Yet most contemporary urban scholars argue that high population density undermines social cohesion within neighborhoods. Jane Jacobs draws highlights the spatial context of social order in the city.²⁷ Although there is also a rich heritage of research on city neighborhoods that distinguishes between *high density* and *overcrowding*, which suffocates residents and stifles community life. According to Jacobs, density and public activity are necessary preconditions for vigorous neighborhood social networks. Residents of city neighborhoods without comfortable and secure streets and sidewalks, without places that draw people out of their homes and into the public, are more likely to suffer from literal isolation and social distance.

This chapter argues that place-specific social ecology and its effects on cultural practices account for much of the disparity in the heat wave mortality rates for the two Lawndales. The local social environment has a strong impact on older residents, for whom health problems that limit mobility can make it difficult to access places out of the neighborhood. In North Lawndale, the dangerous ecology of abandoned buildings, open spaces, commercial depletion, violent crime, degraded infrastructure, low population density, and family dispersion undermines the viability of public life and the strength of local support systems, rendering older residents particularly vulnerable to isolation. In Little Village, though, the busy streets, heavy commercial activity, residential concentration, and relatively low crime promote social contact, collective life, and public engagement in general and provide particular benefits for the elderly, who are more likely to leave home when they are drawn out by nearby amenities.²⁸ During the heat wave, these local conditions directly affected residents of the two community areas by constraining (in North Lawndale) or creating (in Little Village) the possibilities for social contact that helped vulnerable Chicagoans to survive.

AN ABANDONED COMMUNITY

Despite a recent resurgence of economic development, the major streets and the majority of the residential areas in North Lawndale bear

the marks of decades of abandonment by factories, businesses, and residents, and of the devastating fires sparked in riots after the death of Martin Luther King Jr. in 1968. The physical landscape of North Lawndale's largest thoroughfares and many of its residential streets is dominated by boarded or dilapidated buildings, rickety fast-food joints, closed stores with faded signs, and open lots where tall grass and weeds, broken glass, and illegally dumped refuse give testament to the area's decline. North Lawndale lost roughly 50 percent of its housing stock (which fell from 30,243 units to 15,686 units) and about 60 percent of its population between 1960 and 1990, and the social and ecological consequences of these changes have been devastating for the residents who remain.³⁰

The decay of the local infrastructure has gone hand in hand with the decline of the community's manufacturing, commercial, and residential presence. In the early twentieth century North Lawndale was a magnet for Polish and Czechoslovakian immigrants, many of whom benefited from or were attracted by the major employers clustered around the local railways, such as the Western Electric Company, Sears, Roebuck and Co., and the McCormick Reaper Company (International Harvester, which later became Navistar International Corp.) nearby. The population doubled from 46,226 to 93,750 between 1910 and 1920 when Russian Jews arrived en masse. By 1930 the community area was bursting with residents and retailers and had reached a population density two times above the general city rate. Roosevelt Road became a commercial and cultural core of Chicago's Jewish community, and sixty synagogues, many of which exist as churches today, sprouted up around it. Douglas Park to the south, Garfield Park to the north, and Franklin Park to the east offered refuge from the tightly packed streets. Grand houses and apartment buildings made of limestone and brick provided a touch of elegance to the residential blocks.

Jews remained the majority group in the area during the 1930s and 1940s, but most local residents rented their homes instead of buying them and the community never established deep roots in the area. In 1939, for example, 81 percent of the housing units in North Lawndale were tenant occupied.³¹ In 1940 only 380 African Americans lived in North Lawndale, but when the second wave of black migration from the South brought thousands of African Americans to the West Side of Chicago during the 1940s, whites throughout the city grew anxious about an incipient "invasion" that would transform and stigmatize their neighborhoods. Once the stream of African-American migration reached North Lawndale, more than seventy-five thousand white resi-

Year	Population	Population Change (%)	Population White (%)	Population Black (%)
1950	100,489	—	87	13
1960	124,937	+24	9	91
1970	94,772	-24	3	96
1980	61,523	-35	2	97
1990	47,296	-23	2	96

dents abandoned their neighborhood. Roughly one hundred thousand blacks replaced them during the 1950s alone.

By 1960 North Lawndale had completed one of the most rapid and complete ethnoracial transition processes in U.S. urban history, turning over from almost 90 percent Caucasian to more than 90 percent African American in a single decade (table 6).³² Although the composition of the population had changed, local factories and tertiary businesses continued to provide tens of thousands of working-class jobs to area residents. "Most people here could walk to work," one long-time resident told me. "Sears, Harvester, Western Electric, those companies were on the main line." There was no shortage of poverty within North Lawndale's black community, but the predominantly industrial economy generated enough demand for labor to support Lawndale families, and it paid workers enough to animate the area's public and commercial life. "It was a regular neighborhood then," long-time resident Ernie Stewart recalled. "We had lots of stores, meat markets, laundries, everything."

TURNING OVER

The fate of the area began to change in the late 1950s and 1960s, when the first stages of Chicago's industrial decline undermined the foundations of North Lawndale's economy. International Harvester, which once employed fourteen thousand laborers, left the community at the end of the 1960s. Sears, Roebuck, and Co. closed down the original Sears Tower (fig. 26) on Homan Avenue and moved its world headquarters, along with roughly seven thousand jobs, from Lawndale to the Loop in 1974. The catalog distribution center, which it left behind, stayed in the area and provided work for some three thousand employees until 1988, when Sears took it out of the neighborhood. Western Electric gradually shifted its facilities out of Lawndale and trimmed its labor pool until the Hawthorne plant, which had employed forty-three

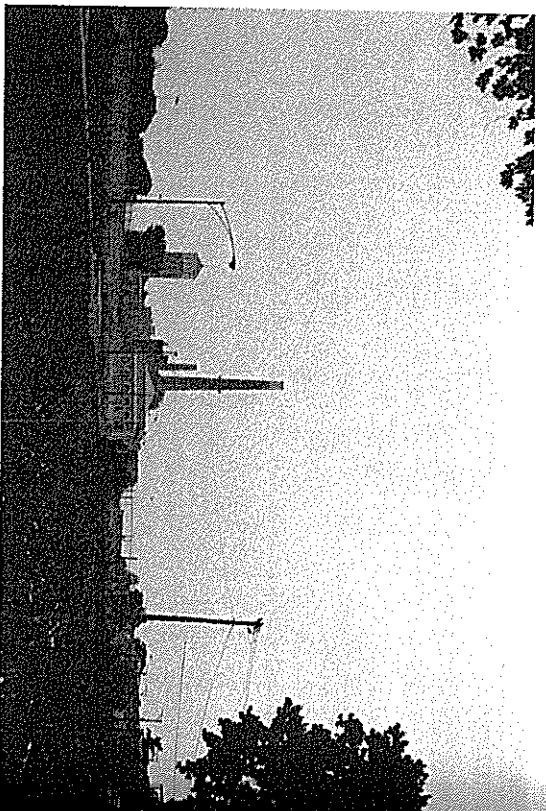


Figure 26. An open lot near the original Sears Tower in North Lawndale.
Photo by Caitlin Zaloom.

thousand people, shut its gates for good in 1984. By 1970, 75 percent of the businesses that had been in the area in 1950 were gone, and in the 1980s and early 1990s North Lawndale experienced little economic growth. The impact of these losses extended into other sectors of the labor market as well, undermining the economic foundations of local banks, small businesses, food stores, restaurants, and entertainment facilities. The loss of this second-tier commercial economy deflated the area, removing not only jobs but goods, resources, and places for socializing and congregating as well. Lawndale residents lacked *places to go* in the neighborhood as well as *places to work*. "The stores closing down affected everything," a long-time resident told me. "There's not very much in the streets for people to do here anymore."

The collapse of North Lawndale's commercial institutions and local economy was devastating for the public life of the area.³² As Jane Jacobs argues, a substantial quantity of stores and other public places spilling along the sidewalks of a district is the basic requisite for establishing public safety through informal social control. Commercial institutions draw residents and passersby out into the sidewalks and streets, inviting foot traffic and promoting social interaction among consumers, merchants, and people who simply enjoy participating in or observing public life. Moreover, Jacobs explains, stores and restaurants bring "storekeepers and other small businessmen [who] are typically strong

proponents of peace and order themselves; they hate broken windows and holdups; they hate having customers nervous about safety," and they therefore play a vital role in preserving the quality of the public areas surrounding them.³³ Streets and sidewalks are the city's "most vital organs," but if they lose their animating institutions they break down, becoming instead the sources of violence, insecurity, and fear. By 1970 the loss of factories and stores had undermined the basis of collective life in the area, and in the next three decades the situation would only grow worse.

With few jobs, stores, or other public amenities to attract them to the area and a depleted infrastructure after the 1968 riots, the more mobile North Lawndale residents fled the area—almost as quickly as the local Jewish population had a few decades before. Between 1970 and 1990, roughly one-half migrated outward, leaving behind empty homes as well as the neighbors who were either committed or condemned to stay. The area entered a cycle of withdrawal and decline that the political scientist Wesley Skogan has characterized as a typical pattern of decay: "When communities become unpleasant to live in, and encounters leave people feeling uneasy and unsafe, many residents will try to leave. . . . Families and members of the middle class tend to leave first, often to be replaced by unattached and transient individuals. Those who cannot leave physically, withdraw psychologically, finding friends elsewhere or simply isolating themselves."³⁴ As these residents left, North Lawndale's community experienced transformations similar to those that Chicago's white population had undergone in previous generations: families and extended kinship networks were spatially separated as children or parents went to other African-American neighborhoods in the segregated city, suburban areas, or out of the metropolitan region. By the 1990s, members of African-American families that had once lived in North Lawndale were dispersed throughout the region, and their distance from one another limited their capacity to support the elderly.

In 1995 most of Chicago's poor black neighborhoods looked nothing like the crowded Rust Belt ghettos prevalent in the postwar years, and neither family nor extended family networks were rooted in local ecologies that facilitated close contact as well as they did during the 1950s and 1960s.³⁵ Migration and dispersion have changed the nature of family ties, with relatives communicating by phone or making occasional visits to one another rather than living in the area. Proximity matters during crises because it is easier and more convenient for people to provide emergency or casual support to their relatives if they



Figure 27. "Bombed Out": an empty lot in the residential area in North Lawndale. Photo by Caitlin Zaloom.

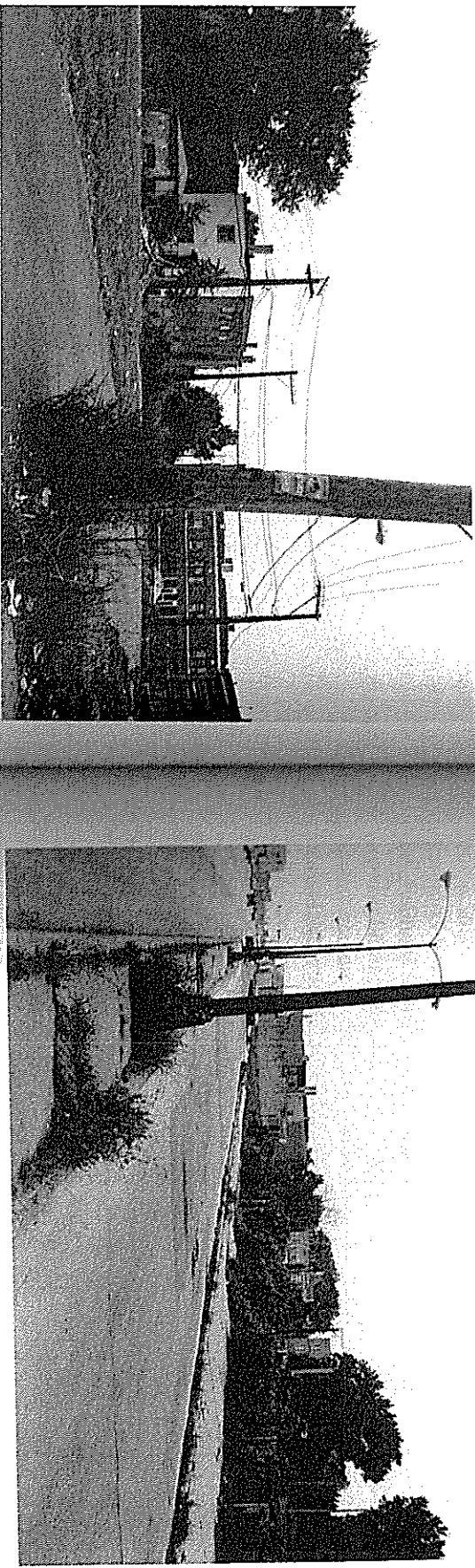


Figure 28. Another empty lot in once-prosperous North Lawndale. Photo by Caitlin Zaloom.

live nearby; moreover (as we saw in chapter 1), it is particularly important for seniors because family members are more likely to check up on the elderly when they reside in the same area. The spatial fragmentation of family networks heightened the vulnerability of older African-American residents throughout Chicago during the heat wave.³⁶ In North Lawndale, the dangerous social ecology produced by decades of continuous abandonment and neglect rendered local seniors even more at risk (figs. 27, 28, and 29).

THE VIOLENCE OF EVERYDAY LIFE

The depleted physical infrastructure of North Lawndale has affected every aspect of neighborhood life. When I asked residents to describe the major streets that anchor their neighborhood, "bombed out" was the phrase that recurred most. As the editor of one of the community newspapers explained, "North Lawndale looks like a war zone. It has been bombed out. There's not very much infrastructure." Sarah Jones, who has lived in North Lawndale for more than forty years, used similar language to characterize the streets. "Sixteenth Street is almost null and void. Ogden Avenue has nothing. This used to be a car-dealing community. Now we only have one left." A few blocks down from her, another long-time resident drew a similar picture: "You ain't got no

houses. You got nothing but lots. . . . All this land you lookin' at and you don't see people. You ain't even got no store open. And Roosevelt [Road] used to be full of stores." Her perception is well founded. According to one local development organization, more than 40 percent of the land in North Lawndale was vacant in 1990. A woman in her thirties complained about the difficulties of living in an area that has so few resources and so little public life: "There's no grocery store, no Walgreens, no pharmacy, nothing for us here. . . . On this street, from here to Twenty-sixth Street [the major commercial artery of Little Village], Twenty-sixth Street is the only place you can see life. All of the places here are deserted."³⁷

During the heat wave, as in their everyday lives, older North Lawndale residents had few incentives to leave their homes and seek relief or social contact in public places. The area lacked the social and commercial attractions that draw people—especially the elderly—out doors.³⁸ Unable to pick up many desired products on foot, residents had to drive or be driven several miles to the closest suburb to get staples such as fresh vegetables and medications that are easily available in other parts of the city.³⁹ Darcy Baker is similar to many others in the neighborhood in that, as she explained, "I never shop in this area." Few older residents walk to do their shopping or to take in the local street life, and the sidewalks are often devoid of foot traffic during the day as well as at night. During an interview, a nurse who runs a geriatric clinic at a nearby hospital argued that local dangers and the lack of decent food stores represented a genuine public health crisis in the community. "There's a high incidence of obesity and all of the things associated with that—hypertension, diabetes, renal failure. Nutrition is a big issue in this community. And I think it's lack of exercise . . . also poor diet [that are responsible]. I spend a lot of time with counseling. People say it's not safe to walk. And so I don't know how I can get them to walk when they don't feel safe. They don't want to go out of their house. And a lot of them say, well, the things that they like, like vegetables, are expensive and hard to find. . . . The food is a big issue."

North Lawndale's older residents not only lack animated public spaces and basic resources that pull them into the streets; they also face a range of local social and spatial pressures that push them to remain at home. A booming informal economy in illicit drug trade, a range of local social and spatial pressures that push them to remain at home. A booming informal economy in illicit drug trade, the formal commercial economy that once supported the neighborhood, and the violent conflicts among young dealers and gang bangers who battle for territory and market share have made North Lawndale a dangerous region, day and night. In 1995, a group of residents in one

of the neighborhood's many criminal hot spots told me, drug dealers occupied several corners in the area. "They were up and down this block, all day long," a neighbor emphasized. Although residents generally felt safe around the local youths whom they had known all their lives, they fear getting caught in gang cross fire when there is trouble.

And there is often trouble. According to statistics from the Chicago Police Department and processed by the Chicago Department of Public Health, in 1994 and 1995 there was roughly one violent crime for every ten residents of North Lawndale.⁴¹ The local police district, whose central office is close to the northern border of the area and whose territory encompasses parts of East and West Garfield Park as well, was considered "one of the hottest [most dangerous] areas around" by all the officers I met. One day, as a group of officers derided the Los Angeles Police Department for botching the O. J. Simpson investigation and explained that their experience handling homicides would have assured a conviction, a local sergeant told me that "one year of work in the Eleventh [District] is a career of training." "After working here," another veteran officer continued, "you're ready for anything."

During one of my visits to the District 11 police station, Officer Fred Handler, a veteran who had earned several advanced degrees while working on the force, brought me over to a computer terminal and showed me the crime statistics for the surrounding area. Even he was surprised to see the extent of the action. We decided to check the district's arrest figures going back from that day to the year before. District 11, which contains a little less than one hundred thousand residents, had been the site of more than twelve thousand narcotics arrests, an average of roughly thirty-three per day, during that year alone—*in this same area where residents accused the police of letting dealers do their work with impunity and local alderman Michael Chandler explained that "open market drug sales are allowed here by police decree,"* but there was no way to turn back to the computer, Fred clicked in to see the reported activity during the heat wave. The temperatures between April and July 1995 were hot enough to reduce the action, or at least the arrests in the region,⁴² but there were still 134 narcotics arrests, and 58 arrests in the Eleventh District (fig. 30).

Crime levels this high make it impossible for the overwhelming majority of the people who live in North Lawndale and want nothing to do with drugs and violence to feel secure. "Of the people who live here, 9 percent of them are not involved in any way in guns, drugs,

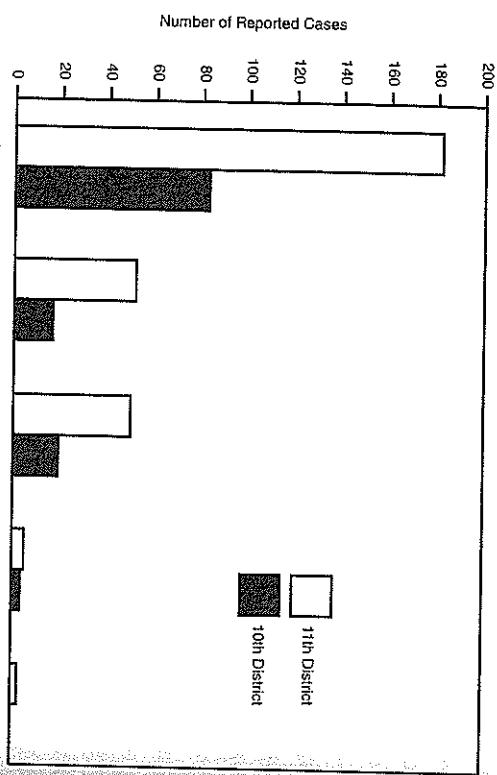


Figure 30. Reported crimes per one hundred thousand residents: Police Districts 10 and 11, July 12–19, 1995. Source: Chicago Police Department.

that are involved, they are going to walk all over us unless we organize and do something positive." Fighting against local drug dealers and other law breakers would be easier if they all lived in North Lawndale themselves. But, as one resident told me, "a lot of the guys who are selling rocks and blows [slang for crack and heroin] around here don't come from the neighborhood. There's nothing we can do to them."

Another reason that it is difficult for North Lawndale residents to fight the violence and the drug trade and establish more security in their neighborhoods is that the social ecology of the area attracts and fosters dangerous underground activity. Social scientists have long argued that young people who have no formal jobs or sources of respect in mainstream society will be lured into the drug trade, which offers income, community, and social recognition.⁴³ But street-level drug dealers also come to North Lawndale because the spatial conditions in the area facilitate their work. The open corners and fields, empty lots with tall grass and high cover, abandoned buildings with free spaces, and dark streets with poor lighting create relative security for dealers at the same time that they instill insecurity among residents. The economic, political, and physical abandonment of North Lawndale—processes that current residents were not responsible for or had no control over—has made the area a hub for an underground market organized around violent struggles over management decisions and territorial

control. The spatial conditions in the area account for much of the danger that North Lawndale inhabitants experience in their daily lives, and exert strong pressures on the most precarious and insecure residents to seek protection by staying at home.⁴⁴ "Safety is the major issue here," a resident told me, and the neighbors' own understanding of the significance of space motivates and directs local organizing.

The proximity of North Lawndale residents to the unruly world of drug trafficking means that, as one woman explained a few weeks after

two young people had been killed on the street next to her home,

"Everybody's afraid of being caught in other people's problems. They might be driving around and doing drive-by shootings. And even if you're not in the gangs . . . you're afraid of a shooting like this."⁴⁵ Darcy Baker, who has lived in North Lawndale for more than forty years, told me that in her neighborhood the problems were particularly bad in the mid-1990s. "If you were standing here [in 1995] you'd see someone selling drugs on every corner . . . groups of people. . . . There were dealers standing in front of your home, hiding drugs in your yard. We spent all our money planting flowers and putting grass down, and they were hiding their drugs *in front of our house*. . . . There were bullets coming down our block. You couldn't sit out any longer. We used to sit outside all night and just talk and do whatever. But that's changed."

"EVERYBODY HERE IS VERY CAUTIOUS"

As much as the North Lawndale community tries to maintain a peaceful and stable neighborhood, action in the streets that residents cannot thwart on their own undermines the basis for the kinds of collective life that might have protected isolated residents from the heat. Elijah Anderson has observed that "the awareness of this constant danger fosters anxiety and skittishness even among decent people,"⁴⁶ the most vulnerable and fearful of whom protect themselves by staying at home.

The cautiousness one finds among all local residents, and the fear appropriate in others, restricts the public activity of the area for the elderly as well as for the younger and healthier people who are best positioned to support them.⁴⁷ "Fear prevents people from going out," Alderman Chandler explained. "That's real."

Living with fear, and even organizing one's routines around it, is a consequence of residing in high-crime areas with violent drug markets in the streets and a degraded public infrastructure. The impact of proximity to violence is particularly acute for the elderly, who are not only susceptible to street crime, but also vulnerable to serious physical injury as a consequence of an attack. Many of the middle-aged residents of

North Lawndale observed that, as Sarah Jones put it, "seniors here are always afraid to go outside." Yet Mrs. Winter, a North Lawndale resident in her seventies, took a more moderate view when she explained that although "most everybody you talk to [here] is scared, during the day most people don't mind [the danger] too much." A few blocks from her, Ernie Stewart tried to articulate the process of coping with the crime that has become an embedded feature of the local environment: "For me, it's caution, not fear. Everybody here is very cautious." Ernie's cautiousness filters into his daily habits and establishes the borders in which he lives. He feels safe within the few blocks that he considers his neighborhood, but he rarely walks outside of this area; moreover, like most of the local elderly, he rarely walks outside at night. Among his peers, though, Ernie is notably healthy and active, and his willingness to walk even a few blocks from his home makes him more of a risk taker than the other seniors.

Mrs. Freeman, an old-timer in her seventies, was typical of the seniors who felt comfortable in front of their homes and around young people they knew well but did not like to stray far from their own blocks and avoided encounters with strangers. She lived on a street that, like most others in the area, was frequented by drug dealers and users, including many whom she knew. Mrs. Freeman expressed comfort with the kids on her street but concern about their deeper intentions and the company they keep. "The kids around here all know me and they won't mess with me themselves," she declared. "They don't mess with me. They know me like the back of their hands. But they get their friends and they have them do it. They tell them who's got what." Fear of being burgled while she is out of the house further compounds Mrs. Freeman's insecurity. She believes that the local youths watch her and are waiting for an opportunity to break in, and her conviction was strengthened when a neighbor found a local man trying to force open her back door. "It's hard leaving your house," she told me, "especially in this neighborhood. People are looking to see who's out. They'll come and rob you."

Long-time residents of North Lawndale internalize and naturalize their strategies for coping with crime. Newcomers, though, have to be instructed on how to manage the dangers of living in the area, and the advice they receive from local residents carries with it the folk knowledge that grounds residents' protective strategies. Sister Mary, a black nun in her thirties who had come from Africa to work and live in a local church, summed up the tips that she had picked up from her neighbors: "Don't go out at night. Don't walk on my own. Don't stand

somewhere by an empty building. It's risky to be there. It's risky to be here. It's risky. If you want to go to the store you have to come and take me out in the street to go to the store and buy something. . . . And, you know, I believe that whatever can happen at night can happen during the day too. Even the night doesn't make much difference once you are in a place where the people kill."

During an interview, Father Michael, an African Priest in his thirties, told a similar story.

I had no fear until they told me, oh no, it's not safe. These people steal on the corners and so on. They might cause trouble. . . . They would tell me that there would be drive-by shootings. They would fight among themselves, but I would be caught in the crossfire and I would be shot. And some feared even that if you walk they can come and snatch you. I've never experienced that but people have warned me. . . . And those whom I work with, they always tell me to be careful. Don't go through the alley. It can be dangerous. You never know. . . . I've never experienced it but I have had people who have experienced it. I have talked to some and I've seen the news on TV. So I took precaution. But at the beginning I had no idea.

This building, it's been shot at several times. The windows in front, they've just been replaced. They shoot at it, not intending to shoot at the church but they are shooting among themselves and then the bullets come. If we were in the office then you would have had a bullet in your head.

The concentration of gang violence and drug dealing in the area has altered the social and physical landscape, making public life less attractive and viable for everyone who lives there. The degraded physical ecology of the area also imposes a specific set of dangers for the elderly. Old people in all parts of Chicago complain about the difficulties of navigating across broken sidewalks, rickety stairways, and forbidding open spaces left dark by burnt-out street lamps.⁴⁸ The fear of falling is a real concern of senior citizens, who know all too well that a stumble from which they once would have recovered could cripple or kill them when their bodies become frail. In North Lawndale, where the city government has done little to repair streets, sidewalk alleys, and empty lots in the area and poverty prevented many residents from making major repairs on their homes, porches, and stairways, the condition of the physical environment contributes to the local seniors' sense of precariousness and increases the risks of leaving home. *The social costs of fear in and of the streets made a brutal ap-*

pearance during the heat wave, when the barriers North Lawndale residents established to keep themselves safe became the sources of their demise.

SOCIAL TIES IN THE UNRAVELING NEIGHBORHOOD

The pressures that restrict opportunities for social contact in North Lawndale do not make social cohesion altogether impossible nor render sociability within the neighborhood undesirable: local residents work hard to overcome the burdens of their environment and support one another. There is a considerable variation in residential transience and stability among the blocks within North Lawndale. Some have relatively high levels of home ownership and residential stability, and others have high levels of vacancy, tenancy, and turnover. One notable feature of the more stable (if not less violent) areas that I observed is that the residents, many of whom had lived on their street since the 1950s, were deeply rooted in and engaged with life on the block: they knew not only what the major issues, events, and problems on their street were, but also the people who were involved with them. They rarely had the resources that they needed to adequately address local problems and concerns, but residents of at least certain blocks in North Lawndale had the intimate familiarity with their neighbors and their neighborhood that is typical of those of the most cohesive communities.⁴⁹ North Lawndale residents suffered not from lack of knowledge about their neighbors or from disorganization, in the lay sense of the term, but from local pressures and challenges that overwhelmed their capacity to respond.

I made this observation during one of my initial visits to the community, when a long-time resident of a relatively stable block with three empty lots, two abandoned buildings, and a booming drug trade set against rows of solid limestone buildings led us up her street, then sat on her stoop and proceeded to tell stories about the families living in each house around her. "I know everybody on my block," she asserted, and she could account for several generations that she had seen on the street. In fact, keeping close tabs on neighbors and neighborhood activity was one of the strategies that North Lawndale residents used to reduce their vulnerability to violence and other local social problems and to gauge which other members of the community they could trust. The important distinction is that residents have less reason to be attuned to the older members of the community than they do to others, since shut-ins or recluses pose little threat to anyone other than themselves. For many residents, living in the violent area required knowing

the scene, but they needed such practical knowledge so that they could avoid as well as participate in public life.

Throughout North Lawndale, though, there are two main sources of informal community participation: the church and the block club. Residents joke that the two institutions exist in such great numbers that one would think that their neighborhood would be the most holy and the most organized area on earth. For example, a local directory of services in North Lawndale produced by a community organization in 1988 lists 120 churches around the area and 73 block clubs within it.⁵⁰ Why, then, were these institutions unable to protect the most vulnerable residents of the area during the heat wave?

CHURCHES AND BLOCK CLUBS

African-American churches, from the large congregations that number in the thousands to the midsize corner chapels and the storefront varieties with a mere handful of congregants, have long been one of the main anchors of social life in black urban communities in general, and of black Chicagoans in particular.⁵¹ Since the mid-1990s, when welfare reform legislation and other urban policies removed federal support for the urban poor and delegated more responsibilities to local organizations, the church has reemerged in numerous political and academic debates as a possible source of regeneration in low-income black urban communities.⁵² There is good reason to look closely at the role that churches play in the social support systems in North Lawndale. For by examining the challenges that religious institutions face when they try to support residents of poor neighborhoods, we can identify potential strengths and shortcomings of faith-based solutions to the problems of urban danger and deprivation.

Not all residents of church-rich areas such as North Lawndale belong to local congregations, and although neighborhood churches often assist people outside of their congregations, it would be difficult for them to actively track down people who need help even if they had incentive to do it. Providing protective and supportive services to people with limited mobility and extreme needs is a difficult job, even for organizations that are explicitly designed to do this. It may be true that, as the Mayoral commission studying the heat wave concluded, service providers are most effective when they are "reaching out to those who are most isolated and fearful through networks they already know and not do this work effectively unless they, too, have financial and material support."

Other conditions further complicate the task of protecting vulnerable local residents through the churches. North Lawndale residents, like those in all urban neighborhoods, often attend churches in other areas of the city rather than those nearby. Similarly, churches in North Lawndale often had large memberships from other parts of the city. Residents who were most active in the neighborhood had generally gotten to know the leaders of the closest church that was involved in community work, thereby maintaining ties with both their congregations outside of North Lawndale and the local religious leadership. But these local activists, whose vocation or avocation involves supporting and protecting others, are usually not the people who need to be supported and protected by the church. Residents who attended churches outside their neighborhood but were less locally engaged were only loosely connected to church networks near their homes. If the religious community in which they were active was too far away to provide social support during normal times or crises such as the heat wave, it is unlikely that the local church group would know to look out for them.

Generally, though, it is the lack of time and resources rather than the lack of social commitment that undermines churches' contributions to the local community. The clergy in most of the churches are not paid to be full-time religious leaders, and the church leadership is made up of people with busy schedules of their own. Religious officials and active members have to work other jobs and take on "the Lord's work" in their spare time. Providing adequate support for people living in extreme poverty, and particularly for older people living alone who need help with shopping, cooking, and cleaning, demands more time and attention than most church networks have to offer.

Churches and church-based networks in North Lawndale did reach out to local seniors and sick people during the heat wave, and their efforts surely protected a number of vulnerable residents. But the conditions in which churches operate in North Lawndale—including the nonparticipation of many residents, the dispersion of different religious communities and leaders, the extreme poverty of the area, and the dangerous environment that undermines public life—make it impossible for these institutions to fill in all the gaps in the city social net.⁵⁴ Churches play a major role in supporting neighborhood social, political, and even economic activity, and when they work with other local organizations and state agencies they can be even more effective. But offering sufficient levels of these key support services requires human and financial resources that religious organizations with additional missions find difficult to provide.

The other major institutions that help support local social networks are block clubs, which have long been a core part of Chicago's neighborhood communities but have become even more popular in recent years, as the local government has actively promoted them.⁵⁵ Organized by residents as a means of asserting local control and establishing standards for public behavior and property maintenance, block clubs can be a key resource in building social cohesion in neighborhoods. These associations can provide a formal structure that facilitates residents' efforts to check up on one another during emergencies such as a heat wave or to work collectively to address various social problems. "We come together, we network, we make sure we bring the social services to the community and take care of our needs," explained a local leader who has organized many of the North Lawndale block clubs into a larger collective. But block clubs also require certain conditions and human resources to succeed, conditions that are difficult to achieve in neighborhoods with as much turnover, poverty, and violence as North Lawndale.

The most basic resource necessary to build a strong block club is a core group of active residents who are rooted in and committed to their block to the extent that they are willing to spend time and energy fighting threatening characters from the world of the street in order to control their neighborhood. Proponents of community organizing models that encourage residents to "take back the streets" like to tell stories about small groups of old women who have forced drug dealers off of their blocks by sitting outside on folding chairs and writing down the license plate numbers of all the cars that drive through the area. "You only need a few dedicated people, and you can beat back the dope dealers and rebuild your communities," one advocate of neighborhood reclamation programs proclaimed.

Although there are numerous examples of successful campaigns to reclaim neighborhoods,⁵⁶ taking back the streets can be difficult work in practice and residents have to be strongly motivated to fight. If they value the territory and they do not live there themselves, dealers will retaliate against the block club, intimidating residents with threats of various sorts and, in a tactic I saw several times during my fieldwork, taking down block club signs to symbolically deny the neighbors' claims to the street.⁵⁷ On her stable block, Dorothy Graham told me how she initiated a project to clean up one of the empty lots on the street and turn it into a neighborhood garden.

The grass and weeds had been, oh, somewhere between three and five feet high, and I went out there with a saw and a mower to cut them

down. You know, I needed to go to the neighbors' and get some of their electrical equipment to get that grass down. It was that high.

Now, I'm working in there, cleaning things up, and then some dumb person walks over and tells me to stop because his gang needed the weeds for its business. He told me, "You shouldn't be cutting that grass."

And I said, "Why not?"

He said, "We need that grass."

They like open, grassy places that are unkempt so that they have a place to hide their drugs. And this way when the police come around and catch them they can't go down and find the drugs.

We had a lot of drugs, prostitutes, and drive-by shootings then. Like everyone else, I had been complacent. But then we got fed up.

So I looked up at this young man, and I told him, "I don't care what turf you claim, you're in the wrong place when you're here. You got your thing that you need and we have our thing that we need. Right now we need a clean neighborhood and if cutting this down takes something away from you then I apologize but I will continue."

And he looked at me funny, but then he just walked away.

It took commitment to the area as well as courage to stand up to the young man in this way, and had Dorothy not been so invested in the area she might not have been willing to do it.

The trouble with some blocks in North Lawndale is that the high turnover of residents has both depleted the supply of old-timers who have strong emotional and financial ties to the area and unraveled or loosened local social networks, so that neighbors are not as personally attached to one another as they may be in other areas. Urban sociologists and city planners have long argued that residential stability is one of the keys to local social cohesion, and much of the reason for this is that it takes time and shared experience of various events and issues to develop bonds of affiliation, obligation, or reciprocity that are strong enough to motivate collective action or social support.⁵⁸ In North Lawndale, where decades of out-migration and economic dislocation have destabilized the community and 77 percent of the homes are occupied by tenants, the conditions that facilitate efforts to build strong block associations exist only on the most stable streets.

Strong block clubs can anchor efforts to establish cohesiveness and assert local control, but since they rarely get the participation of the very old and the young people in the neighborhood who most need support, they have to make a targeted effort to reach out to them. The block meetings I visited were attended and organized mostly by women

SOUTH LAWNDALE: GROWING LITTLE VILLAGE

Cross just one street south of North Lawndale, though, and immediately the landscape changes. Although a statistical snapshot of South Lawndale (Little Village) shows that the community shares with North Lawndale comparable proportions of poor seniors, seniors living alone, and people living below twice the poverty line, the social ecology of the two areas could not be more distinct. The empty lots and abandoned buildings so prevalent in the African-American area give way to dense concentrations of busy sidewalks, active commerce, and residential buildings packed with more inhabitants than they can hold. The public discourse concerning the two areas focuses on the ethnoracial identities of their dominant populations, yet the contrast in the public spaces of Little Village and North Lawndale is equally extreme. Whereas the social morphology of North Lawndale undermines the collective life of the area, the material substratum of busy streets, dense residential concentration, proximate family habitation, and booming commerce in Little Village fosters public activity and informal social support among area residents. Although many residents are concerned about crime in the area and there is an active network of local gangs,⁵⁹ in 1994 and 1995 Little Village ranked fifty-ninth out of seventy-seven Chicago community areas in its overall violent crime rate—almost three times lower than the rate for North Lawndale and more than twice as low as the general level for Chicago—and violence had not significantly compromised the quality of public life in normal times.⁶⁰

Older residents reap special benefits from these ecological conditions

because the amenities and the vital public spaces that surround them draw seniors out of their homes and into the sidewalks and streets. Once in these public places, the elderly can make social contacts with neighbors, proprietors of nearby stores, community institutions, and service providers that older shut-ins find difficult to establish.

During the heat wave the elderly in Little Village were doubly protected from the dangers of isolation. First, the action in and relative security of the local streets pulled older people into public places where contacts could help them get assistance if they needed it. Second, the array of stores, banks, and other commercial centers in the area provided seniors with safe, air-conditioned places where they could get relief from the heat. Seniors felt more comfortable in and are more likely to go to these places, which they visit as part of their regular social routines, than the official cooling centers that the city established during the heat wave. Older whites who have stayed in Little Village as it has become predominantly Latino were the most vulnerable local residents during the heat wave, yet they, too, were protected by the local ecology. The robust public life of the region draws all but the most infirm residents out of their homes, promoting social interaction, network ties, and healthy behavior.

The differences in the ecological foundations of Little Village and North Lawndale have helped to establish a rigid physical border between the two communities that deepens the ethnoracial divide. Residents of Little Village explained that there is "a fixed line between us and North Lawndale," and political organizers, church leaders, and economic developers similarly noted that "if we plan events near or in Lawndale, people won't come" because "going over there is like going to a foreign land." There is also a symbolic separation of the two areas that maps onto the ethnoracial and ecological differences.⁶¹ In the 1950s, as Albert Hunter has written, white residents of South Lawndale mobilized to change the community name to Little Village and placed large painted signs on many railroad overpasses which read 'Welcome to Little Village' in "an attempt to distinguish the area from the neighboring community of North Lawndale,"⁶² whose stigma they wanted to avoid. As the area turned over from white to primarily Latino after the 1950s, local residents became even more aggressive about marking the territory as distinct from Lawndale. There are numerous signs claiming the area as Little Village, with the largest of them being a giant arch at the east entry to Twenty-sixth Street (or *Calle Mexico*), the main commercial artery of the community, that greets visitors with the words "Bienvenidos a Little Village."



Figure 31. Commercial activity supports a booming street life on Twenty-sixth Street in Little Village. Photo by Rona Falcott.

A visitor need only go a few steps beyond the arch to see that the community, and especially its commercial strips, is bursting at the seams with shops, people, and activity. Twenty-sixth Street (fig. 31), as local boosters and economic developers were eager to tell me, is by some measures the second busiest commercial strip in Chicago, after Michigan Avenue. Just as residents of North Lawndale described their once-flourishing commercial roads such as Sixteenth Street as "bombed out," nearly all of my informants in Little Village used the

word “booming” to convey the feel of Twenty-sixth Street—just ten blocks away—and the area around it. During my fieldwork I observed that, as resident Miguel Ramirez put it, “the streets here are always busy [fig. 32], from early morning to 9:30 p.m. there are people outside”—“more people than there is room,” pointed out Daniel Nardini, the editor of a community paper. On weekends the traffic jams from shoppers and visitors to the area are so thick that it can take an hour to travel a few miles. During all but the coldest months, the sidewalks are lined with street vendors (fig. 33) peddling fruits, flowers, *aguas frescas*, *helados*, *churros*, and other goods; in fact, they are so prevalent that local business owners worry about losing revenues and have organized a campaign to keep them off the streets.

“Twenty-sixth Street is the heart of the area,” explained Ricardo Munoz, the alderman of a ward covering much of Little Village. “It pumps economic vitality into the community and the residents are the blood.” According to Frank Aguilar, president of Little Village Chamber of Commerce, stores and businesses on Twenty-sixth Street employ more than fifteen thousand workers, and much of their wages go back into the local economy. The vigorous circulation of people and goods has animated the surrounding streets as well: by the late 1990s stores, small businesses, and local organizations began opening up all over the area even on largely residential streets. It is apparent that, as Nardini put it, “people are always coming and going and buying things.”

South Lawndale has long been a little village of sorts. According to a local historian, the community area is “arguably Chicago’s oldest working-class neighborhood, with roots stretching back into the 1830s,” even though most parts of the area were not formally annexed by the city government until 1869 and 1889.⁶³ The ethnic solidarity of the local community facilitated the creation and cultivation of Chicago’s famous Democratic political machine, which was founded by neighborhood hero and Chicago mayor Anton Cermak in Little Village’s Twenty-second Ward. The community then consisted largely of people of Czechoslovakian, German, and, after 1910, Polish descent, migrants who came to South Lawndale for the same industrial jobs at the McCormick Reaper plant and the Western Electric Company that attracted people to North Lawndale a few blocks away. The community area experienced its first period of major growth in the late nineteenth and early twentieth centuries, but it boomed after the Douglas Park branch of the city’s elevated train network arrived in the area in 1890 (and opened another station in the northwestern corner in 1902), providing better access to downtown and other city regions. By 1920 there were

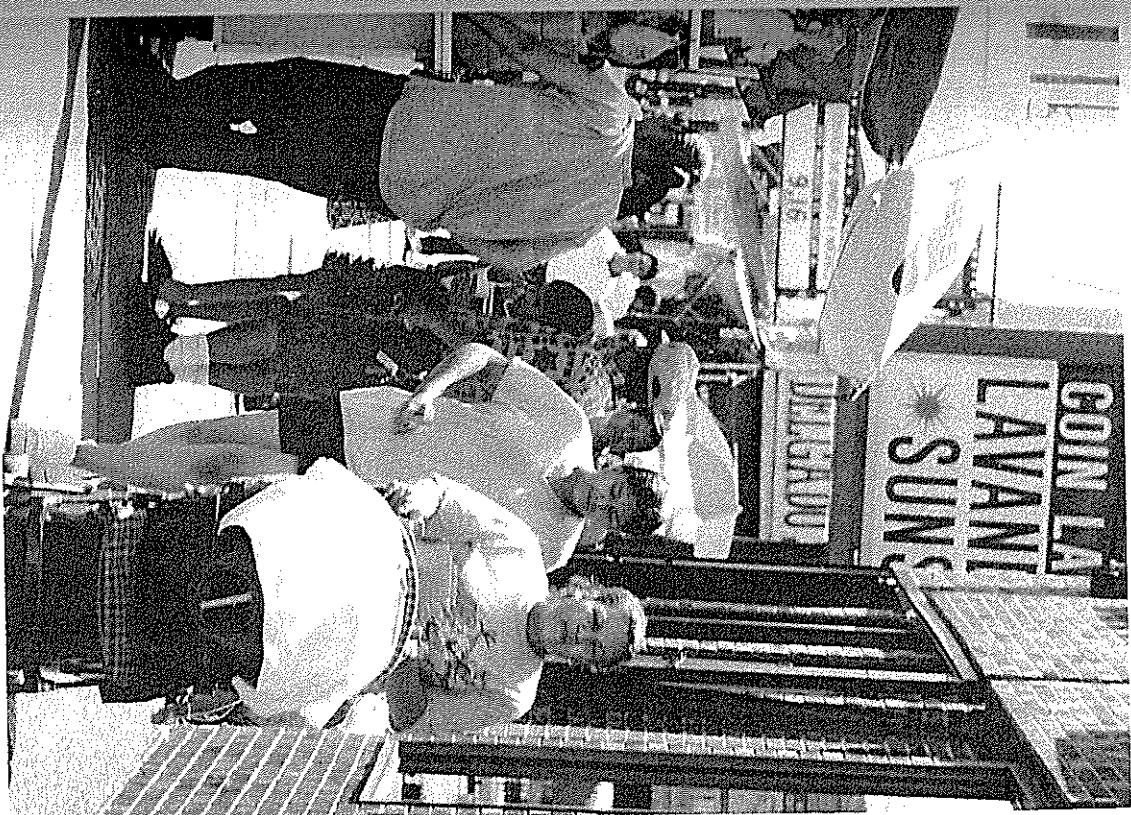


Figure 32. “The streets here are always busy.” Photo by Rona Talcott.

more than eighty-four thousand local residents, with “only a few vacant lots remaining in the southwestern part of the area.”⁶⁴

South Lawndale’s white ethnic population was caught up in the wave of Chicago residents who took advantage of state-subsidized opportunities to move to the suburbs, and in the process distance themselves from the African Americans who were moving into North Lawndale

Table 7. Population in South Lawndale (Little Village), 1950–90

Year	Population	Population Change (%)	Population White (%) [*]	Population Hispanic (%)
1950	66,977	—	98%	NA
1960	60,940	-9	94	NA
1970	62,895	+3	86	NA
1980	75,204	+20	45	74
1990	81,155	+8	27	85

^{*}The Hispanic category was first used in the census in 1980, and most Hispanic residents of South Lawndale were classified as white before this change. In the 1980 and 1990 censuses respondents could count themselves as both white and Hispanic.



Figure 33. Street vendors attract shoppers outdoors. Photo by Rona Talcott.

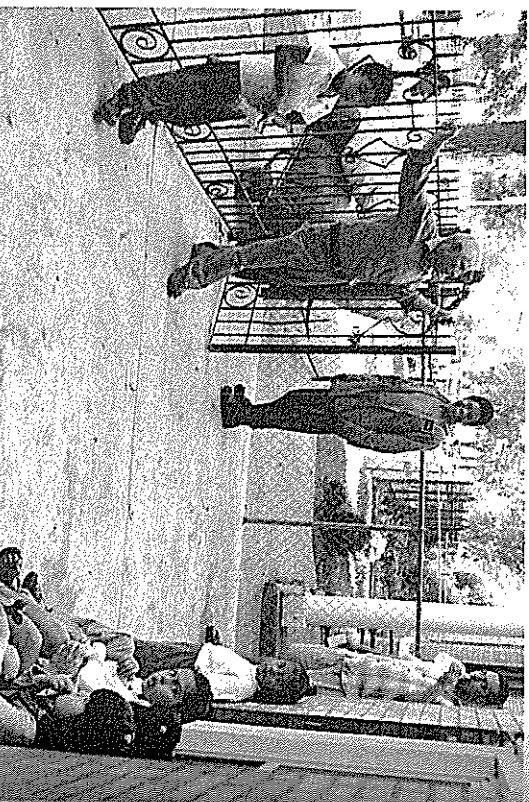


Figure 34. A family relaxes in the yard on a hot day. Photo by Rona Talcott.

and parts of Little Village as well, in the 1950s and 1960s (table 7). The out-migration in Little Village was more gradual than in North Lawndale, though, in part because in 1940 the home ownership rate of 35 percent in Little Village was more than twice the rate in North Lawndale, where only 16 percent of the homes were owner occupied.⁶⁵ The relatively slower pace of suburban out-migration from Little Village meant that the area did not open itself to African Americans to the extent that North Lawndale did, and instead local realtors marketed housing in the area to the city's growing Mexican-American communities as well as to Mexican immigrants. Beginning the mid-1950s, Mexican Americans who had been displaced from their Near West and North Side homes by urban renewal programs and new highways took refuge in Little Village, and by the late 1960s the area had acquired a decidedly Latino identity. In one telling sign of the transformation, the Bohemian Settlement House, which had been founded in 1896 and was a major community institution, changed its name to Casa Aztlán in 1970.⁶⁶

There are at least two reasons that Little Village was spared the fate of North Lawndale and other predominantly African-American communities in Chicago. The first has to do with processes of exclusion and oppression that we conventionally call racism, but which require more analytic specification because the loaded term connotes no identifiable and specific set of social or institutional practices. Douglas Massey and Nancy Denton capture part of the process in their argument that North Lawndale "became a wasteland" while Little Village evolved into "a beehive of commercial activity" because of "the degree of segregation" in North Lawndale.⁶⁷ Yet the differences between the two areas—both of which are dominated by so-called minority populations and had few whites—clearly extend beyond segregation. Unlike Afri-

can Americans in North Lawndale and several other Chicago community areas, Latinos in Little Village did not experience the particular constraints of ghettoization, the rapid and continuous abandonment of institutions and residents, or the arson and violence that contribute to the destruction of the local social ecology.⁶⁸ The second crucial reason that Little Village developed into a commercial and residential hub is that since the 1960s the area has become a magnet for Mexican and Central American migrants and immigrants as well as for Mexican Americans already in Chicago, groups whose presence in the city has increased dramatically while the population of whites and blacks has declined.⁶⁹ The continuous migration of Mexican Americans to this community area has replenished its human resources and regenerated the commercial economy of retailers and small local businesses such as food stores, travel agencies, health-care providers, and telecommunications companies. While North Lawndale lost more than half of its population between 1970 and 1990, Little Village grew by roughly 30 percent. There are only a handful of abandoned buildings and empty lots in the area, and those that exist are sure to be developed quickly in what *Chicago* magazine has dubbed one of Chicago's "hottest real estate markets."⁷⁰ In Little Village," Frank Aguilar told me, "there is no such thing as an empty lot." In 1995, the year of the heat wave, the commercial vacancy rate was about 2.5 percent, compared with rates four times as high downtown and many times more than that in North Lawndale, where commercial vacancy is common.

"THE STREETS HERE ARE ALWAYS BUSY"

The active street life in Little Village attracts older and younger residents into the public areas where informal interactions and casual observations of others are typical forms of social cohesion. Many of the elderly I interviewed explained that during the heat wave they sought relief in the air-conditioned stores on Twenty-sixth Street, just as they do on ordinary summer days. Not only did elderly residents in Little Village have less to fear on the sidewalks and streets than did their neighbors in North Lawndale: living in a region with busy commercial traffic and active streets, they also had more incentive to go outdoors and walk to places where they could get relief. The rich commercial resources and a flourishing sidewalk culture animated public areas throughout the neighborhood; and there were always people, including seniors with their pushcarts full of groceries and small bags of goods, in the streets when I did my fieldwork. "Street life," as Gerald Suttles argues, "is a vital link in the communication network of the

[neighborhood] and, as a result, governs much of what the residents know of one another."⁷¹ This remains true in Little Village today, where the sidewalks are primary conduits for social contact and control. The relative security of these public areas makes it easier for residents of Little Village—even the older whites—to engage with their neighbors and participate in community events.

But in addition to this instrumental role in facilitating social integration, safe sidewalks, local retailers and grocers, and vigorous public activities provide intrinsic benefits for the health and welfare of local residents, particularly seniors. As Dr. John Herman, a neighborhood physician, explained, "People walk more here. That's healthy. People get more sunshine, so they get more vitamin D and less osteoporosis. They feel better." Health workers in North Lawndale found it difficult to get older residents to exercise because seniors felt vulnerable walking outdoors. In Little Village, though, walking was part of the daily routine for most of the older residents I interviewed, especially during the warmer months. Unlike their neighbors in North Lawndale, many of whom drive to the suburbs or Little Village to shop, Little Village seniors had ample reason to be outdoors. According to the glossy *Business Directory* published by Little Village Chamber of Commerce, there were seventy-one grocery stores of various sizes in the area in 1998, fifteen bakeries, ninety-six restaurants, thirty discount stores, and two department stores. There is also an active and cash-driven market in health and medical services as well as several not-for-profit providers, with dozens of clinics and alternative medical suppliers offering care to residents who have no health insurance. The commercial life is particularly important to local seniors, for it not only draws them out when they need goods or services but also gives them an excuse to leave home when they are feeling lonely or bored.

With one of the largest commercial strips in Chicago and a specialized market for Mexican products, Little Village is, in the words of several local residents, "a kind of self-contained community." As one long-time resident explained,

We've got a lot of people in Little Village who don't leave Little Village if they don't have to. And that includes older white ethnic groups. For example, our neighbor. Until my wife took her downtown a month before she died, the last time she was downtown was in 1940. She hadn't been there in fifty-five years. She was ninety-two years old.

People stay here because they like walking to the stores. They can get their food here. They can go to the bakery. Little Village has a lot of

banks [in 1998 there were seven major banks on Twenty-sixth Street alone, and six others in the area, with more on their way], so if they want to save their money they can do that here.

These resources pulled everyone into the streets. As Father Cesario noted, "Kids are out. Old people are out. People are shopping. The commercial attraction is just phenomenal. There's really no need to get in the car and go anywhere. You can certainly do things without walking distance and people do."

Although the high population density and active commercial sector imposes certain strains on local residents, including cramped living quarters and traffic congestion, they also foster tight social networks among families and neighbors and support a relatively secure physical environment. In sharp contrast with North Lawndale, in Little Village the local ecology has strengthened family and friendship ties that may have been weakened by migration, because proximate conditions encourage and even force social interaction.⁷² Latino residents do not necessarily perceive the residential crowding and busy streets as unpleasant or desirable. "People here are living on top of each other," Javier Montes told me. "We're crammed into a little bit of space." Long resident Rosa Hernandez, a young woman in her twenties, explained, "I feel trapped in this neighborhood sometimes. I need to get out of here or I start to choke." Further, during one day of my fieldwork, a few minutes after a North Lawndale community leader had explained that open lots and empty space were causing much of the neighborhood's trouble, the director of Little Village Chamber of Commerce opined that "the biggest problem in Little Village would basically, there is no room."

Some of the more recent immigrants noted the irony that as though they have traveled from home, they see many of their old *compañeros* and grandfathers, few of the seniors I met in the community commented that they were overworked by their families. Their experiences illustrate how the cultural practice of caring is embedded in an urban ecology and economy—including the clustered households of multi-generational networks; the busy sidewalks, and the relative security of neighborhood neighborhoods—that promote social support even while creating strains. During the heat wave the synergistic relationship between the dual dispositions of the dominant local group and the neighborhood ecology allowed residents of Little Village to leave their homes, bring up vulnerable residents, and minimize the impact of the heat. There are many parts of Chicago in which fear of crime and the creation of public space has pressured older residents to shut themselves into their homes during the day as well as at night, but in Little Village even the old and frail residents felt comfortable going out ex-

cept I live two blocks from my mother. My dad lives [a few blocks away]—my parents are separated. So they're here."

Grandparents play a particularly important role in the many Little Village Latino families in which parents are working long hours and have little time for child care or other family activity.⁷³ Since working-age Latinos were likely to be toiling in one or more low-wage jobs, they relied on grandparents and other family members to look after children and help with other domestic work. The integration of older family members into the lives of their children, grandchildren, and great-grandchildren results not only from cultural values dictating that, as a Latino service provider for the local elderly put it, "it's important to take care of these elders . . . that they are still kept around," but also because these elders are important for the family because they have something to offer. "Families around here can't afford to leave the older folks alone," reported that "it's phenomenal the number of elderly who are willing to go outside to pick up the kids and take them home" after school. Some of my informants commented on the townside to these conditions. Some of my informants commented that the low-wage economy in which they were embedded made it necessary to turn their mothers into "a kind of slave with no rights." But others had a more sanguine view. "We have to realize that they are more or less getting a kick out of it," Miguel Ramirez observed.

Though there was a gendered structure to the domestic work in Little Village, with grandmothers doing far more unpaid labor than grandfathers, few of the seniors I met in the community commented that they were overworked by their families. Their experiences illustrate how the cultural practice of caring is embedded in an urban ecology and economy—including the clustered households of multi-generational networks; the busy sidewalks, and the relative security of neighborhood neighborhoods—that promote social support even while creating strains. During the heat wave the synergistic relationship between the dual dispositions of the dominant local group and the neighborhood ecology allowed residents of Little Village to leave their homes, bring up vulnerable residents, and minimize the impact of the heat. There are many parts of Chicago in which fear of crime and the creation of public space has pressured older residents to shut themselves into their homes during the day as well as at night, but in Little Village even the old and frail residents felt comfortable going out ex-

cept late at night. As Jacobs argues, "a well-used city street is apt to be a safe street. A deserted city street is apt to be unsafe. . . . There must be eyes on the street."⁷⁴ During the heat wave, older residents of Little Village who would have been vulnerable to the heat had they stayed

community's safer and more middle-class southwestern corner accounted for some of this confidence. The real problems, he explained, are on the north side of the area, where Latino and black youths are closer together and the gangs are more active.

at home were secure enough in their neighborhood to brave the outside, visit local stores or neighbors, and get the care that they needed. As a leader of a local Catholic church recalled, "During the peak hours of the heat you would not think twice about getting outside. You heard these stories of people who were locked into their houses for fear of coming out. That definitely wouldn't be true on a summer day here. The streets, especially in summer, are quite safe. There are isolated incidents. But the streets are vibrant until about ten o'clock at night."

We have already seen that in 1994 and 1995 the violent crime rate in Little Village was roughly three times lower than it was in North Lawndale and two times lower than in Chicago as a whole, setting a general social context in which Little Village residents had less to fear than did other city dwellers. These trends were visible during the end of the heat wave, when the Tenth Police District, which includes Little Village (and a slice of North Lawndale), and the Eleventh Police District, which contains much of North Lawndale, had great disparities

Residents believed that gang activity was on the rise while I was in Little Village, becoming a top priority for the community at precisely the moment when the neighborhood economy had begun to boom and property values to climb. At several community policing meetings attended by residents complained that they were hearing gunshots after dark and growing concerned that, as one mother remarked, "gangs" controlled the area at night.⁷⁵ Yet the ubiquity of "decent" public activities counteracted the threats of danger and disorder, preserving a safe environment during most hours of the day despite occasional instances of violence. "Even though we have gangs, people still feel comfortable in the streets," noted Father Morales, one of the few Latino Catholic religious leaders in the area. "You walk around and you see people sitting on front steps everywhere." Casual street users provide the watchful eyes that, as Jacobs argues, facilitate neighborhood safety. "We look out for each other in our neighborhood," reported James Grabowicz, one of the white old-timers who had remained in the area. "If something is going on we'll see it and call each other or the police."

CENTRALIZED CHURCHES

11 reported 181 batteries, 52 robberies, 51 assaults, 4 attempted rapes, and 2 homicides for every 100,000 residents⁵⁵ (see fig. 80). Thus free from neither crime nor fear, residents of Little Village had a reason to feel safer in the streets than did the inhabitants of most other parts of Chicago.

According to the local residents I got to know, one of the reasons that they can easily manage walking or hanging out in the streets is that there is a clear spatial and temporal order to violence in the area, with most of the action taking place at night and in clusters of areas that are off the major thoroughfares. In general, one resident explained to a police officer during a community meeting, "most of the violence we have happens at night;" and although several older residents I interviewed told me that they were growing more fearful of gang violence and avoided the streets after dark, many others told me

even this common self-protection strategy to be unnecessary. Frank Krusk, a white old-timer who had spent his life in Little Village insisted, "I am not afraid of my neighborhood. We walk in the streets at middle of the night when we come home." Frank's location within

The ethnic/racial makeup of local religious institutions had turned along with the neighborhood, and the same buildings that had anchored the community life for the area's Poles, Czechs, and became predominantly Latino places where Spanish was the dom-

inant language, services took on a Latin-American style, and cultural events were based on Latino traditions. Although few of the church leaders were Latino, most pastors and administrators spoke fluent Spanish. Many of the churches conducted special services and events in English or Polish for the handful of white members who remained participants in religious life, but church leaders throughout the area expressed concerns that local changes had estranged the old-timers and that the clergy possessed neither the human nor cultural resources required to alleviate the difficulties of aging alone in the neighborhood. "We have plenty of old-timers living alone here," Father Morales explained. "The old-timers more than the Hispanics. And it's a sad story sometimes because we can't bring [the services] to them. Service for that kind are important, but there are limitations and we can't do much unless you have somebody on the staff. It's really hard to do it with volunteers." Like the churches in North Lawndale, most religious institutions in Little Village worked hard to assist local seniors but recognized that the job required time, money, organization, and labor that they could not offer.

As in North Lawndale, churches in Little Village played roles in many realms of neighborhood life, but in the latter community, religious institutions placed special emphasis on helping immigrants and Spanish speakers cope with the pressures and demands of living and working in Chicago. In addition to offering social, political, vocational, and health services and programs similar to those provided by churches in North Lawndale, religious organizations in Little Village offered courses in English as a second language, helped recent immigrants connect with social and economic networks, and counseled newcomers from rural areas who had difficulty acculturating to the urban environment. In a city where the political and community organizations are generally foreign and intimidating to migrants, many newcomers find that the Catholic Church is the most familiar and trustworthy source of stability and support.

The most significant difference between the religious institutions in North Lawndale and Little Village was the relative centralization of the Latino churches, which were predominantly Catholic and structurally tied to and supported by the Archdiocese of Chicago. Although the pastors were mostly white men who had moved to the neighborhood within the last few decades, the church leadership, membership, and support networks were more rooted in community life than were their counterparts in many North Lawndale religious centers. Most church

participants, pastors, and administrators lived in the area, often within walking distance of the churches themselves, providing an ecological basis for place-based projects and facilitating the delivery of various support services. "The church is a center for socializing," Father Morales said. "People make *compañeres* at church."

There were, however, costs as well as benefits stemming from the affiliation between neighborhood churches and the broader Catholic Church. Unlike many of the smaller churches in North Lawndale, the Catholic churches in Little Village received substantial resources and support from the centralized archdiocese. These resources proved invaluable during difficult times and helped local religious organizations maintain their services and programs despite the relative deprivation of many of their members. But the archdiocesan support came at a price. Representative of and responsible to a larger religious institution, the Catholic churches in Little Village struggled to be as responsive to the particular and changing demands of local residents as smaller, more grassroots churches were able to be. Some of the Little Village residents I met had left the Catholic Church in favor of evangelical denominations because, they felt, the new churches were more attentive to their needs. When I did my fieldwork, though, these converts were in the minority of the strongly Catholic Little Village religious community.

With large Catholic churches dispersed throughout the area, residents had little difficulty finding a place to anchor their religious or, in some cases, social activities. Most of the churches are busy throughout the week because they run parochial schools and host numerous events and programs. Father James, who presides over a church with several thousand members, explained as we sat outside the church school: "On different nights we can have eight different activities going on outside of the church in our meeting halls. And a lot of people come to us. Sunday morning we have a Polish mass which is very small. It's in Polish. We also have an English mass that's a bit larger, maybe one hundred people. And two Spanish masses. They are the largest, four to five hundred people." On Sundays the major weekly masses draw more than ten thousand people, most of them Little Village residents, out of their homes and into the local churches. According to Father Green at Saint Michael's Church, "We are the fourth-largest parish in the archdiocese. We have about five thousand people who come on Sunday. We have mass every hour and a half from 7:30

in the morning to 4:30 at night. Easter we probably have ten thousand Ash Wednesday we have fifteen thousand. Everything here is on the same magnitude."

Ultimately, though, it is the severity of the local problems rather than the size of the local churches that most determined the capacity of vulnerable residents to survive emergencies such as the heat wave and withstand the daily pressures of urban marginality. Although there were some areas of commonality, the challenges that stemmed from poverty and transition in the Little Village community were distinct from those that troubled residents of North Lawndale. A greater number of seniors lived alone in Little Village than in North Lawndale, but they suffered from linguistic isolation and status transformation (from becoming ethnic minorities in the neighborhood) more than from the kinds of insecurity, fear of the streets, loss of local resources, and literal isolation that threatened seniors in North Lawndale.

Little Village community leaders have good reason to build formal social networks for local Latino seniors. In the 1990s Latino residents of the area have experienced firsthand what other ethnic groups in Chicago have already witnessed: the rise of interfamily dispersion, suburbanization, and increasing social and spatial distance between seniors and younger generations. Acculturating to social practices and migration strategies typical of most other communities in Chicago, working-age Latinos in Little Village have begun moving to the suburbs, leaving parents and other older relatives behind as they make their go at the American dream. In our interviews, Chicago-area social workers expressed concern that cultural myths about Latino intergenerational family ties had in fact rendered invisible or unstated the indisputable demographic trend toward Latino isolation that they had witnessed in their work.⁷⁸ "The older generation of Hispanics are beginning to be left alone by their families," the director of one service agency explained to me. "And because no one likes to talk about it, isolation is all the more dangerous." Protected by proximate family and friendship ties during the 1995 heat wave, Latino seniors in Little Village are unlikely to be so well positioned in the coming generations. Ethnically cultivated dispositions common among Latinos may have helped to keep recent generations of families together in places like Little Village, but the social trajectory and spatial dispersal of Latino families are already threatening such cultures of care.

Like the CDC epidemiologists who conducted the case-control study, when I ended my fieldwork on Chicago's West Side,

searched for ways to determine whether the sources of risk and protection that I had observed in North Lawndale and Little Village were apparent in other parts of the city. In casual observations in other regions I found patterns of ecological decay in high heat mortality areas and relatively robust social morphology in places with better survival rates. Field notes taken in three community areas with high heat death rates, for example, describe the commercial strips and public spaces in terms that would fit the landscape of North Lawndale as well.

Area 1: A small area with little commercial activity and virtually no retail stores. Most blocks are lined with dilapidated and boarded-up abandoned houses, vacant lots full of rubble or trash, and small storefronts. [There is] only one commercial strip, but it only includes a check cashing service and a few empty storefronts.

Area 2: The main commercial strips are rundown, but there are a few small retail stores and old industrial buildings. The streets are wide, and there is little or no street life. There are many empty storefronts, boarded-up buildings, and large lots of empty open space.

Area 3: Many of the buildings were once used for commercial purposes, but the windows are boarded and the signs are old, faded, and falling apart. The only stores are little groceries and a check cashing service. Besides that there are virtually no shops—only empty lots. The area feels abandoned. One side of the street looked incredibly deserted and bombed out.

Such superficial descriptions should be treated with caution because they do not reflect deep knowledge about the ways that elderly or other residents use the spaces. It was impossible to replicate the intensive ethnographic study in every Chicago community area, but the research does attest to a set of ecological contexts and social processes that helped to explain how place-specific conditions affected heat wave mortality rates. In addition, it suggests that the widespread ecological impacts of urban abandonment and deprivation have altered the social environments of many Chicago communities in ways that population-level data have not revealed.

Once we identify these social ecological conditions we can integrate them against standard demographic evidence to consider the significance of specific conditions in the city.⁷⁹ Table 3, for example, shows that several Chicago areas, such as Fuller Park, Woodlawn, Washington Park, and Englewood, shared the high levels of abandonment—some lost as

Table 8. Chicago Community Areas with Lowest Heat Wave Death Rates

Community Area	Heat-Related Deaths per 100,000 Population	Percent Decline, 1960-90	Percent Black	Overall Violent Crime Rank (77 CAS)
Beverly	0	10	24	70
Ashburn	0	4	10	62
Riverdale	0	5	98	11
East Side	0	11	0	54
Calumet Heights	0	10	93	39
Montclare	0	10	0	61
Auburn Gresham	3	0	99	19
Garfield Ridge	3	16	13	60
West Lawn	4	13	0	65
South Lawndale (Little Village)	4	-33	9	59
City of Chicago	7	22	39	—

Source: Data based on 521 heat-related deaths located by Illinois Department of Public Health (1997), Chicago Fact Book Consortium (1995), and the City of Chicago, Department of Public Health.

of the fifteen areas lost more than one-third—and violent crime that make public life intimidating for elderly residents; and table 8 shows the reverse: in a city that lost more than 21 percent of its residents between 1960 and 1990, all but two of the ten community areas with the lowest heat wave death rates lost less than 11 percent of their population base; the others, which lost 16 percent and 13 percent, were still below the city's rate. Moreover, the three predominantly African-American community areas with exceptionally low death rates, Riverdale, Auburn Gresham, and Calumet Heights, lost only between 0 percent and 10 percent of their residents in the decades preceding the heat wave—a rare pattern among Chicago's African-American regions just as the CDC's epidemiological study identified individual-level risk factors for heat wave mortality, the ethnographic assessment of how community-level social environments affect the capacity of Chicago regions to survive the disaster located a series of place-based, social ecological conditions that heighten health risks during extreme events and normal times. Areas with low mortality rates were distinctive not because of their ethnic or racial compositions. As can be inferred from table 8, of the ten areas with the highest heat wave survival rates three were more than 90 percent African-American, two were officially more than 39 percent Latino, and five were predominantly white. But in most cases they did not suffer greatly from ecological depletion, the

collapse of local infrastructure and commerce, population decline, and high levels of violent crime;⁸⁰ and in others, such as Little Village, they gained vitality while the rest of the city declined.

The areas with high mortality levels also had distinctive compositional and ecological features. Previous studies of heat wave mortality have shown that residents of places with high poverty, concentrated elderly populations, poor housing, and low vegetation are especially vulnerable to extreme summer weather; and the Illinois Department of Public Health found that residents of Chicago community areas with high levels of violent crime also faced elevated risks of death in the 1995 disaster.⁸¹ This analysis adds several place-specific risk factors, some of which, such as the quality of public spaces, the vigor of street-level commercial activity, and the centralization of support networks and institutions, concern the social morphology of regions; others, such as the loss of residents and the prevalence of seniors living alone, concern population-level conditions.

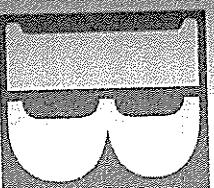
The principal contribution of this approach is that it deepens our understanding of the reasons that different community areas and different groups had such disparate experiences during the heat wave. As is typical in contemporary health research and public policy discourse, much of the discussion about the group-specific health outcomes during the heat wave has been cast in ethnic or racial terms, with ethnic difference or cultural variation serving as explanations for ethnic mortality rates. The tale of the neighborhoods suggests that a key reason that African Americans had the highest death rates in the Chicago heat wave is that they are the only group in the city segregated and ghettoized in community areas with high levels of abandoned housing stock, empty lots, depleted commercial infrastructure, population decline, degraded sidewalks, parks, and streets, and impoverished institutions.⁸² Violent crime and active street-level drug markets, which are facilitated by these ecological conditions, exacerbate the difficulties of using public space and organizing effective support networks in such areas. There is little evidence that during the heat wave the most isolated and vulnerable residents of places like North Lawndale suffered because members of their community did not care about them. Yet there is good reason to believe that residents of the most impoverished, abandoned, and dangerous places in Chicago died alone because they had in social environments that discouraged departure from the safe houses where they had burrowed, and created obstacles to social protection that are absent from more tranquil and prosperous areas.

Chicago officials might not have been able to identify the social and

ecological conditions that threatened the health of residents on the city's South and West Sides when the heat arrived in 1995, but they were familiar enough with the typical patterns of health and vulnerability in the region to predict at least some of the spots where the extreme environment would prove most devastating. While Chicago residents and communities improvised their survival strategies to withstand the unbearable climate, city agencies scrambled to mount a political response that would fill in the gaps. A coordinated program for providing emergency medical care and social service support would be essential for a successful public health intervention. But, as the next chapter shows, the obstacles to organizing such a campaign were too great for most city agencies to overcome.

CHAPTER THREE

The State of Disaster *City Services in the Empowerment Era*



because city governments often fail to recognize the danger of extreme heat in time to initiate preventive care programs, disaster management during heat waves typically begins when paramedics and police officers respond to requests for urgent medical attention or reports of death. Victims of heat stress and heatstroke require immediate but simple interventions, such as immersion in ice or treatment with intravenous fluids, since the longer they remain overheated and dehydrated the more likely they are to die or suffer permanent physical damage. When officials in the Health or Fire Departments observe a dangerous climate or an unusual number of calls coming in to the emergency service network, they are expected to alert the city government's command center and, if necessary, ask for special support. In Chicago, as in many U.S. cities, the Fire Department manages the paramedics division and administers the city's emergency response programs.¹ Positioned on the front lines of the city service delivery system, workers in the Fire and Police Departments are often the first to see an emergent crisis. Their challenge is to convince high-ranking officials, opinion makers, and city agencies to recognize the problem and mobilize resources for an appropriate response. This process requires overcoming the enduring obstacles that stand in the way of public support for the most vulnerable citizens, many of which are visible in the political history of the heat wave.

Clark Staten, a retired Fire Department commander who had worked as a city paramedic for twenty years and participated in emergency response efforts during the 1983, 1986, and 1988 heat waves, remembers the 1995 disaster vividly. In 1995 Staten was directing the Emergency Response and Research Institute, a local think tank that evaluates emergency service programs and monitors Chicago's network of emergency care. He explained that many of the paramedics who

worked during the heat wave view the city's emergency response as the worst expression of longstanding divisions within the Fire Department and systemic shortcomings of the city government's service delivery programs. "I was talking with friends of mine in Texas and Nebraska as the heat wave was coming towards us, so we were tracking the problem. I began to see that there were scattered heat deaths with the weather pattern, and then it came here and settled." On Thursday, 11 July, before the first heat-related deaths were reported, Staten's organization issued a press release to warn the public and city agencies about the encroaching trouble. "With the temperatures and humidity at dangerous levels, the air quality diminishing, and no end in sight, in some parts of the country, the Emergency Response and Research Institute is urging extreme caution. . . . The recent heat wave has already resulted in the untimely deaths of several people in the Midwest and Southwestern part of the United States and more heat injuries or even deaths can be expected."² Staten, who had served for two years as the public information officer for the Chicago Fire Department, issued the press release because his experience had taught him that "the city would react if the press picked up the story in advance. But when we told the press before Friday they essentially blew it off."

On Friday Staten stayed in contact with the paramedics and observed their response. The Fire Department handled more than one thousand calls that day, and when it was finished 188 Chicago residents had perished in the heat. According to Staten, "probably the first person to discover that there was a heat emergency was an Emergency Medical Services supervisor, because they got similar reports from several different teams. I was listening to the scanners, and they were saying, 'Sorry, there's no ambulance available. Sorry, there's no ambulance available. Sorry, there's no ambulance available.' And [the paramedics] were saying, 'Hey, we've got another DOA. Hey, we've got another DOA. Hey we've got another DOA.' Then you hear, 'sorry, it will be a few hours before we can get a wagon over there.' Or, 'yeah, we're at the Medical Examiner's, and we're seventeenth in line.'"

The crushing demand for emergency services coupled with the logjam at Cook County Morgue to overload and delay the city's urgent care system. Observers of Chicago's health-care facilities have long warned that there are at least two problems with the local service infrastructure. First, the city's supply of fifty-six ambulances and roughly six hundred paramedics is inadequate to meet either regular or exceptional demands for care, and the typical response time of seven minutes often extends to twenty minutes or more in normal conditions.³ Moreover,

standing divisions in the Fire Department, where firefighters outnumber paramedics seven to one and emergency medical workers complain of second-class treatment from administrators and City Hall, leave paramedics with little capacity to obtain new public resources even though they handle 50 percent more calls than firefighters.⁴ Second, the city's hospitals and trauma centers are concentrated on the North Side, creating a segregated geography of medical care that adds to the vulnerability of the relatively poor and polluted communities on the South and West Sides, where residents are most likely to need urgent or sustained medical attention. "We had been complaining about this for a long time," one paramedic explained, "partly because when hospitals go on bypass [whereby they close their emergency rooms to new patients] we're the ones who have to deal with the problem."

When the heat moved into Chicago, the city's supply of ambulances and paramedics proved insufficient to handle the crisis, and the Fire Department sent its equipment and firefighters into the streets to deliver health support. The city's medical centers filled their emergency care facilities beyond capacity and twenty-three of the area's forty-five hospitals went on bypass status, turning away people in need of urgent care even though the consequences of heatstroke are more severe when victims do not receive immediate medical attention.⁵ The problems were particularly grave on the South and Southeast Sides, where residents who developed heatstroke or heat stress faced even greater obstacles to care than those to which they had grown accustomed. According to an Illinois state senate report, "With 23 hospitals on bypass status at various intervals during the period July 13–16, 1995, very few, if any, hospitals on the South and Southeast Sides of Chicago were available to accept patients delivered by emergency ambulance."⁶

Robert Seates, a deputy chief paramedic in charge of monitoring emergency services on the South Side during the heat wave, found it hard to believe what the city government was doing.

By monitoring the radio I was noticing that it was exceedingly busy, extremely busy. All of the sudden, you're getting call after call after call after call, and the fire engines and fire trucks are being dispensed to people's homes for calls. Paramedics would get in the ambulance and wouldn't see the firehouse until the next morning. Regular platoon goes from eight o'clock in the morning to eight o'clock the next morning. But some people worked 26, 27-, 28-hour days. I mean, here you are in hundred-degree heat, and you're not getting any rest. Your air condi-

the capability to get a total of 145 ambulances out there. We could have put additional fire companies in. If nothing else, we had all kinds of sterile water and we could at least cool people down, but you need somebody to pull the trigger.

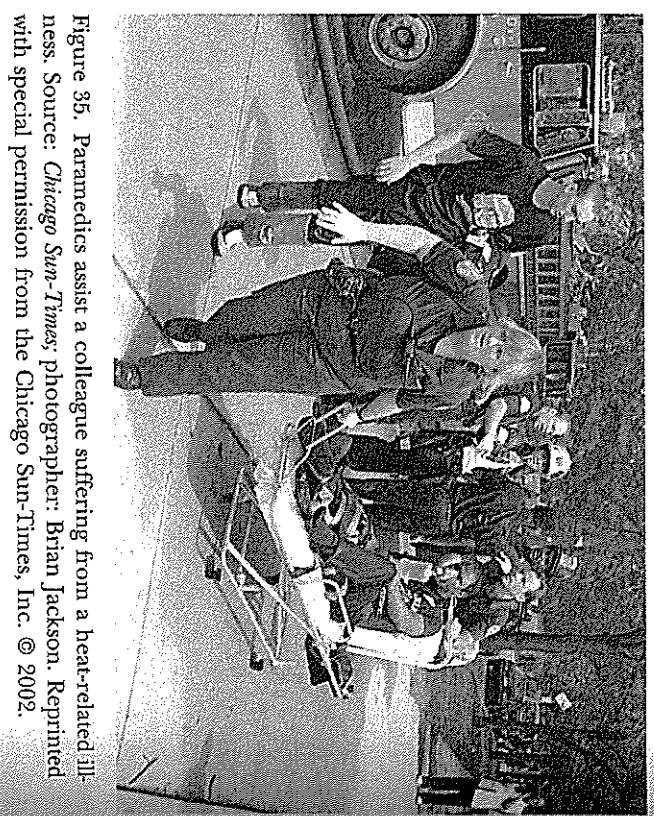


Figure 35. Paramedics assist a colleague suffering from a heat-related illness. Source: *Chicago Sun-Times*; photographer: Brian Jackson. Reprinted with special permission from the Chicago Sun-Times, Inc. © 2002.

ning anyway, and you're sweaty, and it's worse than trying to work out in a sauna.

Hospital workers throughout the city noticed the toll that such labor was taking on the personnel. "Paramedics that were coming in here [delivering patients]," said the clinical director of a North Side hospital, "were so dehydrated that they were very close to being patients" (see fig. 35).

A thirty-year veteran who is now the director of emergency medical services for the local firefighters' union, Scates was well aware of what the emergency response system should do in the situation:

This is what the Fire Department could have done. First off, what they could have done was institute a recall, they could have put everybody who was off duty back to work. And they could have put more ambulances out. At the time we had 59 ambulances, but 3 of them are steadily assigned to O'Hare Airport, so there's only 56 that actually work within the city limits. They could have put up an additional 15 ambulances. If that hadn't been enough, they had the ability to institute what they call a MABAS, mutual aid boxed alarm system, and get another 70 ambulances from the suburbs. They could have gotten 30 more from the Northwest Side suburban areas and 40 more from the Southwest Side. So we had

The city's emergency response programs require not only that administrators trust the officers who report from the field, but also that they pass vital information on to higher levels in the command center. During the heat wave, paramedics complain, internal divisions within the Fire Department and an administration of firefighters with insufficient experience managing public health crises blocked the lines of communication and stalled the city's response.

Paramedics in the streets were never able to activate a greater city effort, but the public reports of massive mortality broadcast on radio and television captured the attention of Mayor Richard M. Daley's administration. "When complaints really started coming in" and the media began reporting on the death tolls, Scates remembered, "Mayor Daley called down and had Commissioner Orozco come back from Florida. But the thing is that some of those lives could have been saved [before then]. We could have had enough people to get them, to put fluids in them, to cool them down." Several problems slowed the response. The Fire Department had no centralized system for monitoring the number or the nature of the requests for service. The fragmented structure of the department, in which each unit operates indepen-

dently and shares little data with top administrators, muted the many requests to sound an alarm. Moreover, several paramedics allege that the Fire Department leadership, which was dominated by firefighters at the time, would not issue a recall or request additional resources from the city government because they distrusted the reports coming in from field officers. "The question," Staten explains, "is whether they listened to the people who did recognize it, and the answer is 'no.' It's not clear to me that they took the EMS reports seriously."

High-ranking Fire Department officials told another story. During state senate hearings on the heat wave, the commissioner of the Chicago Fire Department stated plainly that the city's weak emergency response stemmed from failures among paramedics, police officers, and other street-level bureaucrats who, in his view, did not signal the crisis. "Nobody indicated that we needed more personnel or supplies," he told the senate committee. "Our field supervisors told us, 'we're holding our own.' We needed something to trigger the mechanism. Nobody pulled the trigger."⁸ Few people outside the department have ever questioned this account, but it is clearly at odds with the testimony of several paramedics who worked during the week.

Robert Raica, an Illinois state senator and paramedic, dismissed the commissioner's line. "Instead of saying, 'we're in error,' they actually blame it on the people in the streets. It seems like there was a total breakdown in communication at the command level."⁹ Perhaps the most serious charge of city paramedics is that Chicago officials and Fire Department leaders refused to call in additional ambulances and emergency health workers because the "reinvented" city government has cultivated an ethic of fiscal austerity among administrators that trumps even the most urgent requests for resources to combat a health crisis. Scates excoriates city officials for their concern with "saving money regardless of the expense to people's lives" and accuses the Fire Department administrators of "reckless indifference to the citizens of this city." Scates, Staten, and other paramedics complain that the city's refusal to update and expand its emergency care system, as well as its reluctance to recall off-duty officers and bring in additional ambulances during the heat wave, reflects a systemic prioritization of cost containment over life preservation. The philosophy, Scates says, is "We're not going to spend the money. We want maximum performance out of minimum manning, which is totally ridiculous in public safety because if you don't have the proper amount of people out there you're going to start losing buildings. The Fire Department believes in not filling at least 5 percent of the budget, [which] makes them look

like good managers. You hold the line, you don't spend the money, you turn it back in, and the mayor pats you on your head." Scates and his colleagues are convinced that the practice has compromised the mission of their agency. "We're supposed to be in the business of patient care. We're the Fire Department."

According to then-Health Commissioner Sheila Lyne, though, the Fire Department's inaction had little impact on the city's emergency response. "Fire got blamed for the ambulances taking too long to get places," she explained. "But it wasn't going to matter. . . . I think the people were going to die anyway." Other city officials also speculated that there were few negative health consequences stemming from the problems with the city's emergency medical response system. Yet their position conflicts with recent epidemiological studies showing that prompt, appropriate medical treatment of heat-related illness can save lives and increase the probability of recovery from heatstroke. According to an article published in the *Annals of Internal Medicine*, during the 1995 heat wave Chicago health officials and physicians were insufficiently trained to treat heat illness properly, and many patients did not receive proper treatment upon admission to a health-care facility.¹⁰ There were grave consequences for the city's failure to institute an immediate response. Without a warning from the Fire Department, which is in charge of disaster management, the city government did not recognize the crisis and failed to organize a multiagency emergency response before the death toll began to rise. A study by researchers from the U.S. Centers for Disease Control and Prevention indicates that a sweeping effort to contact and support vulnerable Chicagoans might have saved many lives. "A decreased risk of death was found among the people [city of Chicago social workers] contacted," but the city government did not put enough street-level workers into the streets.¹¹

According to local journalists, Mayor Daley was vacationing at a family retreat in Michigan during the first days of the heat wave, and initially no one notified him about the heat wave casualties. "What could we have done about it anyway?" one "top Daley source" asked the press. "We were doing all we could."¹² Top officials in several other departments, including Health and Fire, were also out of town vacationing in the early days of the crisis, and they learned no more about the situation in the city than the public. As Health Commissioner Lyne recalled, no one put the administration on alert.

⁸I was on vacation that week. I wasn't very far, though. I came back Friday evening to Chicago and I saw the news. But I didn't get it. I didn't get it

Friday evening. On Saturday I was here in my office. And nobody called or said anything. On Sunday I was in my office trying to get caught up, and somebody called me from the mayor's office about using an office as a cooling station. And that didn't strike me as too much. On Monday morning when I came in there was a note on my desk from our public relations person because then everybody knew that a great number had died. And I have to tell you that *I really still wasn't getting it at all.*

By Saturday, 15 July, the scene at the Cook County Medical Examiners Office had captivated the attention of the same newspaper journalists who had downplayed earlier warnings from the Emergency Response and Research Institute, and when city officials saw the stories they realized that they had to take action. By the end of the weekend the Fire Department had called in additional officers and ambulances, but much of the damage had already been done. Media reports played a crucial role in stimulating a political reaction. Although paramedics and police officers had been calling for support, a high-ranking member of the Health Department recounted that it was not until "the TV showed the lineup of patrol cars with the bodies at the morgue [that] everybody got serious about this thing."¹³ Even then, however, the city government's most public actions involved mounting a public relations campaign to deny the death attributions from the Medical Examiners Office, defend the service delivery system, and accuse other members of the metropolitan community—including the heat wave victims—of causing the crisis.

On Tuesday, 18 July, the *Chicago Sun-Times* reported that "the city apparently ignored its own guidelines for declaring a hot weather emergency, and waited until Saturday—when bodies began piling up at Cook County Morgue—to implement its heat emergency plan."¹⁴ For although several officials were already arguing that no one in Chicago had realized the risks imposed by extreme heat, the city Health Department had established a model heat emergency plan several years before and had failed to follow it during the disaster. The sweeping problems with the local government's response infuriated some city residents, activists, and political leaders. Seates was so outraged by the Fire Department's refusal to meet its responsibilities that he accused the city of committing "murder by public policy" and, along with the department's chief paramedic, resigned his rank.¹⁵

The National Weather Service issued a more tempered yet equally critical assessment in an official report on the disaster. "Despite timely NWS warnings, forecasts, advisories, and statements and effective me-

dia coverage of the event, the information either failed to reach or was not used effectively by the people who could have prevented heat-related deaths. . . . City officials had neither the experience nor the emergency response capabilities to translate the physical characteristics of the heat wave into human impact."¹⁶

Angered by reports from his colleagues in the Chicago Fire Department one week after the disaster the paramedic and Republican state senator Robert Raica convened a public hearing to evaluate the govern-

mental response to the crisis. The senate summoned representatives from the Chicago Office of the Mayor, the Department of Health, the Police Department, the Fire Department, the Transit Authority, the Housing Authority, the Park District, Commonwealth Edison (the city's primary electrical power supplier), private ambulance companies, the Illinois Department of Public Health, the Illinois Emergency Management Agency, and hospitals from Cook County to participate. Several community organizations and advocacy groups also had a chance to speak.

In his open letter introducing the committee's findings, Senator Raica wrote: "As a paramedic for the Chicago Fire Department and Chairman of the Illinois Senate Public Health and Welfare Committee, I became deeply troubled about the huge loss of life and thus felt it necessary to hold investigative hearings to determine what happened during the heat crisis. The goal of the hearings was to determine what steps were taken by government officials and health care providers during the heat crisis and what steps could be taken now to prevent such a tragic incident from occurring in the future."¹⁷ The final report is a thin document consisting mainly of twenty-one enumerated situations uncovered by the committee as well as policy recommendations for addressing each of them in future heat disasters. In clear and pointed language the list documents a number of gaps and shortcomings in the city's response to the crisis, portraying the local government as unprepared for the emergency and noting the extent to which city agencies failed to coordinate their efforts. The findings highlighted a number of problems with the city's service delivery and medical response system that were less apparent in other accounts of the trauma. The following passages from the report reveal the most urgent conditions.

* Some (city) departments, such as the Chicago Police Department, filled in extra personnel on the weekend to help with the crisis. The Chicago Department of Health and the Chicago Fire Department both testified that they did not call in extra personnel.

- There was no crisis declared by the Fire Department and no extra personnel were called in because there is no mechanism in place to automatically trigger a crisis response.

- There were at least 55 instances of ambulance response times greater than 30 minutes, including one instance of a response time in excess of 70 minutes.

- During the period of July 13–16, 1995, 23 hospitals were on bypass status (the emergency rooms refused to admit new patients) for some portion of those days. Ambulances were diverted several miles out of their normal territory to deliver patients to hospitals not on bypass status, creating an even further stressed Emergency Medical Services System.

- During the heat crisis, 18 hospitals in the Chicago area were on bypass at the same time. The Chicago Fire Department testified that they were not aware that such a large number of hospitals were on bypass status simultaneously.

- During the heat crisis there were instances where public transit air-conditioned buses were requested by the Chicago Fire Department for use as portable cooling stations for school children and other persons. Those buses were often not available and arrived only after lengthy delays.

- The Chicago Department of Health was apparently not aware of the magnitude of the crisis at area hospitals over the weekend of July 15 and 16.

- The Cook County Medical Examiner was overwhelmed with the number of bodies his office was required to examine. The Chicago Police Department was asked to assist in transporting the bodies of victims to the morgue; however, officers in the field are not normally equipped for this type of duty.

Summing up these findings, the committee concluded that "there were significant individual efforts to protect the health and safety of Cook County residents. However, the system as a whole failed."¹⁷ Reflecting back on the event, some city officials agree with this assessment. "Everyone was busy," explained John Wilhelm, the deputy commissioner of the Chicago Department of Public Health and the chairman of the Mayor's Commission on Extreme Weather Conditions. "The police were busy, fire people were busy, human services (too). But it wasn't coordinated." Health Commissioner Sheila Lyne shared this observation. She recalled that when a press relations officer briefed her on conditions in the city, "I remember saying, 'you know, I don't think we did it right.'"

THE STATE OF DISASTER

If the city of Chicago's reaction to the heat crisis seems exceptionally flawed, what happened during the disaster is hardly surprising when it is placed in the context of the local government's typical mode of addressing deprivation and vulnerability in the city. The city's response expressed fundamental characteristics of the local government's methods for managing urban problems; several of these are particular to the era of reinvented governments, administered with techniques and system values honed in the private sector and recently adapted to public institutions. Situated in a competitive market for goods and services, the entrepreneurial state demands aggressive behavior from everyone in the system, including top officials, administrators, employees, contracting firms, and even the citizens who receive services. Chicago's city government in the mid-1990s was an exemplary case of an entrepreneurial state, as it was marked by (1) a concern with quality management and efficiency that pushed it to (2) outsource an unprecedented proportion of its services to private organizations, through which it (3) treats citizens as individuated customers or consumers in a market of public goods. This managerial strategy (4) demands that residents become "smart shoppers" of city services and (5) rewards consumers who have access to and mastery of information about state programs and policies. But it also carries the potential to (6) disproportionately empower residents who are already endowed with the forms of social and cultural capital necessary to navigate through bureaucratic systems while in effect (7) punishing people who are least likely to have the social skills and resources necessary to obtain goods and services that they are most likely to need. Operating in an age of intense media scrutiny in which managing public opinion is a key goal of governance, the reinvented local government is particularly concerned with its public image and that of the city's major public spaces. Public relations professionals and downtown planners play key roles in the local state, and their work is a crucial component in city politics.¹⁸

There is little reason to believe that Chicago's earlier modes of governance would have mobilized a more effective response to the crisis. The crucial comparison, then, is not between the reinvented government and the machine politics of years past, but between the current techniques of program management and the emerging risks to and needs of the city's vulnerable citizens.

In conventional accounts of disaster the government appears exclusively as a reactive institution whose involvement with the event begins after the catastrophe hits or as identifiable dangers approach. Yet well-

fare states are also stratifying agencies that help produce division and insecurity even when they aim to provide social protection and states have historically played key roles in heightening as well as minimizing the risks that extreme environmental events will exact a high human toll.¹⁹ Examining what different government agencies did or did not do during the heat wave uncovers only the most visible and immediate relationships between urban politics and the disaster. Understanding how the city shared or did not share accountability for the heat wave mortality requires placing its disaster management techniques within the context of Chicago's typical mode of governance and provision of social protection during the 1990s.

The heat wave of 1995 hit Chicago when the city government had gained local support and international praise for developing an exemplary set of reforms. The Mayor's Office had streamlined and downsized several agencies, with services long provided by full-time, in-house personnel contracted out to private sector organizations and reassigned to new programs; and Chicago had created an effective marketing campaign to promote the city to tourists, convention planners, and businesses. Though only embarking on the economic boom that would carry it through the 1990s, Chicago was beginning to show the signs of a renaissance. In preparation for the Democratic National Convention of 1996, the city government embarked on a massive beautification program to spruce up the streets, sidewalks, and parks around the downtown area, placing designer street lamps along roads and planters in the center of major thoroughfares. Daley, like his father before him, would make Chicago appear pristine and prosperous regardless of what was happening beneath the surface.²⁰

Perhaps most important, Daley had initiated major reforms of the two largest city programs: the much maligned public school system, which the *Chicago Tribune* had labeled the "worst in the nation" in a book-length investigation published in 1992; and the Police Department, which would be subjected to an investigation from human-rights organization Amnesty International during Daley's term. In the free spirit of the entrepreneurial state, Daley named the new head of the school system the chief executive officer rather than superintendent and subsequently downsized the agency by firing most of the top administrators. In March of 1995, *The Economist* ran a feature on "Daley, the manager," complimenting Daley for proving himself a capable leader, fiscally responsible administrator whose reforms earned the city an upgrade in its Standard and Poor's bond rating system plus millions of dollars in revenues from privatized city services such as towing. At the

summer of 1995 began, Chicago appeared to be a city that was back to work.²¹

Yet at a time when public programs were beginning to measure their effectiveness according to the number of employees they had cut from the rolls rather than by the number of people they had lifted out of poverty or distress, the local political climate had clouded out general concerns about Chicago residents who had not benefited from the boom. As the city poured millions of dollars into beautification programs around downtown, the local Policy Research Action Group argued that it was reducing the personnel budgets for "programs that are critical to addressing the economic and social priorities of low and moderate-income residents." According to 1990 census figures, roughly 396,000 Chicagoans lived in tracts with a poverty rate of 40 percent or above, making the city the third-largest site of concentrated deprivation in the United States. It was impossible for the city government to adequately address such inequality with the resources made available to it by the federal and state governments, and it would be unreasonable to expect Daley's administration to wage a full-fledged war on poverty on its own. But, according to studies by the Neighborhood Capital Budget Group, a local organization that monitors the use of the city budget and works on other issues of redistribution, during the 1990s the city government proved unwilling to make the fiscal contributions to the urban poor that it could have afforded. One study, for example, showed that forty-nine out of fifty wards in Chicago "will not receive sufficient funds to make even the most basic infrastructure repairs... . The City plans to spend nearly half of its economic development capital in just 10 wards . . . while the bottom 10 will receive less than 5 percent." Yet this news generated little attention or public concern when it was released. In the 1990s, it seemed, the method for dealing with urban inequality was to put it out of sight.²²

The collective refusal to address poverty and isolation in Chicago during the prosperous 1990s was a crucial component of the cultural and political context of the heat wave. Chicago's commission reports and high-ranking officials have explained the city government's poor response to the heat emergency as the result of an acute failure to recognize the risks imposed by the climate. An effective public health response to any external threat requires awareness of the potential dangers it imposes as well as knowledge about intervention strategies that protect people at risk of harm; and administrators at several city agencies as well as the Mayor's Office maintain that—despite the warn-

mained unaware of the risks facing the city. As one high-ranking official in the Chicago Health Department explained, “It never happened [before]. We didn’t know.” The National Weather Service study on the disaster found that the city government’s failure to recognize the encroaching health threat did indeed render it unable to respond. “One reason for the general unpreparedness of the communities affected by the July heat wave,” the report stated, “was that neither local officials nor the community at large recognized the potentially lethal nature of the extreme heat.”²³

There is no question that officials at the highest levels of Chicago’s government did not understand the potential hazards generated by the blend of extreme climatic and social environments. But a closer look at the city’s strategy for managing the crisis shows that structural conditions of the metropolitan government better account for the full political reaction to the disaster, which included the bureaucratic production of official knowledge about the heat deaths, a concerted effort to manage the public representations of the catastrophe, and conventional health work.²⁴ Five key features of the current mode of urban governance proved particularly consequential during the heat crisis.

1. *The delegation of key health and support services to paramilitary organizations*, such as the Fire and Police Departments, where administrative systems and top officials are not always attuned to the new demands for such “soft services.”²⁵ This division of political labor creates an organizational mismatch between the capacities and responsibilities of government agencies that administer crucial health and welfare programs.

2. *The lack of an effective system for organizing and coordinating the service programs of different city, county, state, and federal agencies*, resulting in a complex but decoupled political structure that reproduces important functions and has no clear lines of accountability.²⁶

3. *The lack of political will and public commitment to provide basic resources necessary for the protection of city residents* whose poverty or frailty renders them in need of support, but whose condition has become a normal, acceptable, and taken-for-granted feature of urban life.

4. *The expectation that city residents, including the elderly and frail, will be active consumers of public goods*, expert “customers” of city services made available in the market rather than “citizens” entitled to social protection. This market model of governance creates a systemic service mismatch, whereby people having the weakest capabilities and greatest

needs are the least likely to get them. In Chicago, it has also generated an everyday energy crisis for the elderly poor.

5. *The practice of governing by public relations* and relying on image-making projects for deflecting attention from city problems. In some cases, such as the heat wave, these projects take the form of official denial. Formal refusals to recognize the severity of various conditions both constrains city officials interested in addressing the problem and leaves the suffering citizenry more invisible and vulnerable.

This analysis of the politics of disaster is divided into two sections. This chapter examines how the first four modes of governance listed above compromised the city government’s organizational capacity to provide effective support services to Chicago residents during the heat wave. Drawing upon fieldwork alongside the city workers who constitute the faces of the state, this account shows how everyday conditions of bureaucratic and service work in city agencies constrain the local government from providing the social protection expected of it. Chapter 4 scrutinizes the fifth mode of governance, politics by public relations, by tracing the city’s representations of the disaster and placing its campaign to *spin its way out of the crisis* in the context of similar political efforts.

If the immediate political challenge posed by the heat wave contained the problem of providing emergency care and support for vulnerable residents, the deeper question the disaster raises concerns the capacity of contemporary government agencies to protect an aging society of atomized and sometimes isolated citizens whose families, friends, and personal finances cannot provide for their social and medical needs.²⁷ Many of the emerging risks for today’s urban elderly, such as lack of social support, family contact, specialized medical services, expensive pharmaceutical drugs, and flexible transportation, go beyond those that local and federal programs were designed to address.²⁸

Finally, the political debates surrounding the heat wave suggest disagreement about the extent to which governments should be responsible for the protection and support of old and vulnerable citizens. In an era of sweeping “welfare reform,” citizens of and officials in government everywhere are being forced to rethink fundamental questions about the extent to which they hold states accountable for safeguarding the public health and welfare. For example, after floods in Nicaragua killed nearly ten thousand people in 1998, citizens gathered and screamed “murderer” to their president as he drove through towns to

offer symbolic support for regions whose vulnerability the government had long tolerated. But in Chicago and other U.S. cities hit hard by crises, the dominant political culture of individual responsibility does not promote such understandings of disaster. Nonetheless, "the heat wave provokes a whole set of public health issues [we'll face] in the future because we have so many elderly people living alone,"³² asserted Chicago resident Quentin Young, former president of the American Public Health Association. If trends of rising isolation, extreme inequality, family dispersal, and housing insecurity among the aged continue, residents of cities like Chicago will have to decide what kinds of risks they are willing to accept and what kinds of government protection they expect.

FACING THE HEAT: THE POLITICS OF ACCOUNTABILITY

According to many vocal Chicagoans, including prominent members of the local media, the idea that the city government shared any responsibility for the catastrophe was ludicrous, even corrupt. John Kass, the *Chicago Tribune* columnist who was working the City Hall beat during the heat wave, editorialized that critics of the government's response were merely projecting their own anxiety over abandoning their own responsibilities. "The bleating of city officials," he wrote, "obviates the guilt many feel while leaving their elderly to live alone. . . . Trying to blame the mayor for an act of God is not only unfair, it also does an injustice by wrongfully framing the debate. The question presumes not only that government could have done something, which is arguable, but should have done something to avert the disaster."³³ Cindy Richards, a member of the *Chicago Sun-Times* editorial board, took a similar position. "Time was," she opined, "that neighbors took care of each other. They kept an eye on the lady who lives upstairs. They bought groceries for the struggling family down the block. They took in their sister's kids when she couldn't care for them. Not so anymore. When scores of elderly residents succumbed to the sweltering heat, residents and community activists didn't ask how they could have worked to prevent some of these deaths. They asked why the city hadn't done more. Unfortunately, we have been conditioned through years of ever-burgeoning government to expect Big Brother will take care of all things. . . . It seems that neighborliness is a skill we will have to re-learn."³⁴

There were few viable sources of opposition to Daley in 1995, and the mayor's stronghold on Chicago's public politics made it difficult

for any strong voices of dissent to emerge. Political activists concerned about the disaster did not contest the argument that families and communities held great responsibility for protecting their vulnerable members. But in addition to insisting that their constituents worked assiduously to overcome the exceptional risks they regularly faced, a small group of dissenting political groups refused to let the city government off the hook. Community groups and activists representing the people most affected by the heat wave argued that there were, in fact, specific ways in which the city government had neglected its responsibilities to protect residents and preserve the public health. Their ability to make such a case was complicated by the disjunction between the coarse vocabulary for referencing "the government" or "the state" that is readily available for citizens who make claims on the city, and the fine-grained distinctions between the numerous actors and agencies that constitute a governing regime.

In cities such as Chicago, the organizational complexity of a decentralized city government coupled with the bureaucratic slipperiness of overlapping city, county, state, and federal jurisdictions make it difficult to pinpoint the lines of political accountability. Moreover, as Charles Perrow has shown, such complexity is in itself a threat to public safety because it increases the probability that accidents and unexpected occurrences will result in disastrous consequences.³⁵ In the heat wave, for example, the Cook County Medical Examiners Office diagnosed the medical causes of mortality and established the official death reports; the Chicago Department on Aging opened cooling centers for seniors who needed relief; the Illinois state senate conducted hearings to investigate the nature of the city's emergency programs; and the National Weather Service issued extreme heat warnings before the disaster began. All of these actions were part of the government's response to the heat.

Working within such a complicated political field, groups that tried to assess the local government's accountability for the disaster shifted the terms of the debate from the generic question of how welfare states should protect residents to the matter of how specific government agencies and actors failed to fulfill their obligations. Metro Seniors in Action, an advocacy group for some ten thousand Chicago elderly, complained that city agencies had not only ignored their pleas to activate special support programs during the heat wave, but also turned down the organization's offer to provide the city with volunteer workers. Sidney Bild, an active Metro Seniors spokesperson, reported, "We were contacting the city to find out what it was doing and to urge them

to reach out to seniors in every way that it could. More and more seniors are living on their own, so personal responsibility is a given. But beyond that, in an urban setting, there are certain things that people cannot do for themselves. There's very little that any civic organization can do in these circumstances. It has to be the efforts of the city to go to organizations and say 'we will work with you, how can we facilitate it?'

A civic organization doesn't have a program. But we were willing to call people and we did." Bild argued that, despite the city's familiarity with dangerous heat and its extant heat emergency plan, no city leaders stepped up to direct a coherent policy response. "Coordination was attempted, but it was sort of like a Keystone Kop comedy," he remarked.

Metro Seniors was particularly upset over the Police Department's failure to utilize the trained and dedicated senior officers and neighborhood relations officers whom the agency had promised to place in every one of its twenty-five districts. According to Bild, "A senior officer means that he is assigned to seniors . . . to [look out for] the welfare, the safety, and the health of seniors. That is all the job is supposed to entail. That is a total duty." Metro Seniors' newsletter reports that during a February 1995 meeting with the organization, some four months before the heat wave, "the Superintendent [of police] promised that the Senior Citizens Unit would be fully reinstated. He promised to assign a trained senior officer to every district, to work only on senior issues. He promised that the senior officers would meet once a month. He promised that Sgt. Joseph Maratto would coordinate the officers' work. It turns out that the Superintendent was just trying to pacify us." Irene Nelson, chair of the Metro Seniors Crime Committee, explained that the heat crisis "confirmed our worst fears" because before the heat wave the organization had been warned that the Senior Units were not operating as promised. "We heard from some Senior Officers that regardless of the Superintendent's promises to us, there really was no Senior Unit. Many said they were still doing work unrelated to senior citizens and had never even met Sgt. Maratto."³³

The organizational mismatch whereby the city assigned to the Police Department responsibilities that administrators as well as officers did not want to accept had created barriers to program implementation, the significance of which Metro Seniors struggled to make public. In its newsletter, Metro Seniors "claimed that had the Senior Citizen Police Unit been fully operational in July, hundreds of heat related deaths could have been avoided" because officers would have been in the streets spreading warnings about the dangerous environment and urging residents to contact their elderly neighbors.³⁴ But, as in the fire

Department, which is another paramilitary organization that local government increasingly use to provide health and social support services, no one in the police force activated an emergency prevention program. Metro Seniors was skeptical that the Senior Units were ever in place.

ORGANIZATIONAL MISMATCH: SOCIAL PROTECTION AND COMMUNITY POLICE

According to some critics of the local government, the Police Department's failure to institutionalize and activate senior officers to conduct preventive health and safety work expressed other problems with Chicago's Alternative Policing Strategy (CAPS, the city's system of community policing) as well. Police officers are the most prominent faces of the state on the streets and sidewalks of Chicago, the official agents who visibly represent the government and enforce its legal standards in the daily life of the city. The police have historically played important roles in the delivery of protective services to city residents and, as the historian Eric Monkman has shown, have been particularly involved in the social control and regulation of the urban poor.³⁵ Like the paramedics, in the heat wave Chicago's police officers were on the front lines of the city's response to the disaster. With hundreds of cases of mortality to investigate around the city and no other agencies available to deliver corpses to the morgue, Chicago delegated the difficult jobs of recording the deaths and handling the bodies to its police force. Officers involved in the disaster told me that it had been "one of the most difficult things [they had] ever done" and remembered it as "awful, gruesome work."

As it would during a routine death investigation, the Police Department dispatched officers to investigate each case. But during the heat wave the police were unusually busy. "I'll never forget that week," an officer working on the South Side told me. "I did a few of those calls, three I think. There were apartments with the windows closed and the floors chained, no air-conditioning, no fans. The smell was foul, just death." When they reached the homes of the deceased, the responding officers followed the standard procedures of investigation, asking the neighbors or relatives when they had last seen the victim, inquiring about the person's social activity and medical history, and searching the rooms for signs of foul play. The police were responsible for recording their findings on official police reports, copies of which they would later turn over to the Medical Examiners Office.

Once they completed an investigation, officers were charged with tagging the body and delivering it to the morgue (fig. 36). This is

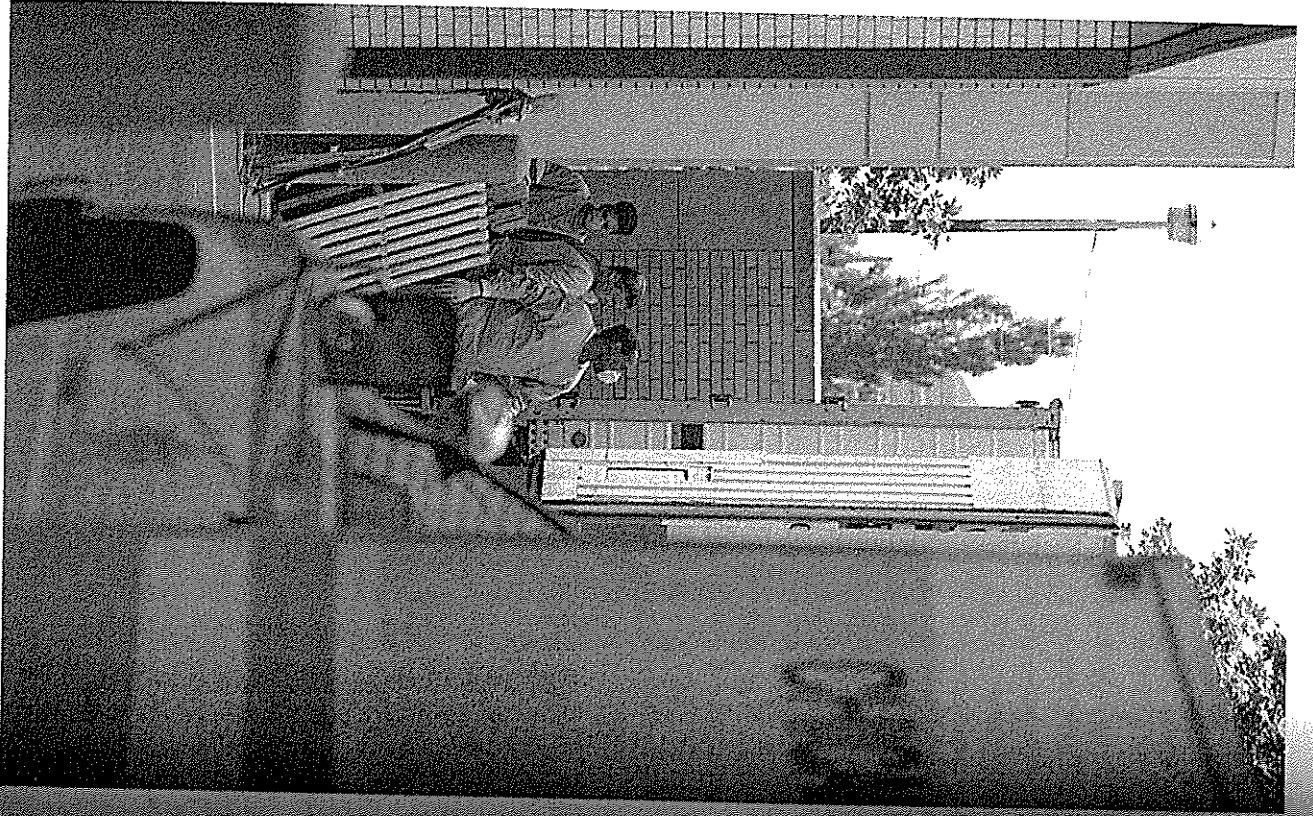
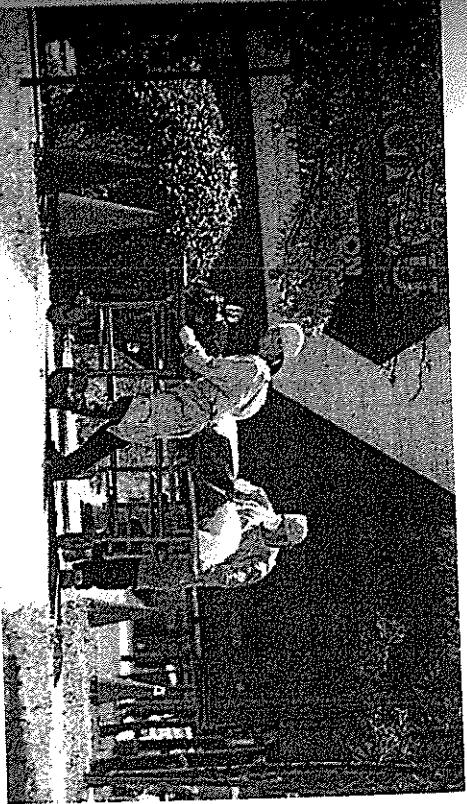


Figure 37. Cutting a victim into the Cook County Medical Examiners Office. Source: *Chicago Sun-Times* file photo. Reprinted with special permission from the Chicago Sun-Times, Inc. © 2002.



lays a physically and emotionally difficult part of the job, but the condition of the corpses and the intensity of the heat made it even more unpleasant. The traffic at the morgue (fig. 37) added another layer of difficulty, since it could take hours to turn the body over to the medical examination staff and process the police reports. According to a reporter covering the scene for a city news wire, "we get homicides, some unusual cases, but never, ever, ever like this. The times that I've been there, I've seen police officers bring bodies. Maybe they're in and out for about 20 minutes, and they leave. Today, an hour and a half, or a line that wraps around the entire parking lot."³⁶ While they waited, most officers volunteered to help the mortuary staff load other cadavers onto carts and into the building. The work was interminable, but it constituted an essential part of the city's disaster management. If the Police Department's explicit function was to help dispose of the victims' remains, it also served the important implicit role of producing official knowledge about the conditions in which the victims died. This information would be crucial for the scientific and political investigations of the disaster.

But if the extent of the work assigned to city police officers was unusual, the nature of the work was not. For Chicago's Police Department, especially in the new system of community or neighborhood policing, *disaster is expected to do much more than enforce the law. During the 1995 Chicago along with many other U.S. cities reorganized its police force around an elaborate community policing program designed to*

Table 9. Full-Time Personnel for Chicago City Agencies, 1990s

Agency	1991	1995	1998
Police	16,243	17,441	17,532
Health	2,160	1,750	1,644
Human Services	1,074	580	477
Housing	345	255	195

Source: Alexander 1998.

appease both advocates for more law and order in government and grassroots community groups that had fought for police reform. Community Oriented Policing Services, a multibillion-dollar federal grant program that was part of the 1994 Crime Bill, provided ample federal resources for cities to use if they showed interest in and capacity for developing community policing programs. Thus while the federal government reduced funding for other city services and discouraged the formation or continuation of supportive programs for the poor during the 1980s and 1990s, it created new fiscal incentives for cities to expand their policing capacities and encouraged local governments to rebuild around their law enforcement agencies. The city of Chicago successfully tapped into these federal funds, bringing the Police Department's annual budget up from \$629 million in 1991 to \$817 million in 1995 and \$923 million by 1998. In sharp contrast with other city agencies, which reduced their permanent staffs and outsourced their services in the 1990s, these resources allowed the Police Department to increase its full-time personnel by more than one thousand employees over the decade (table 9).

Although CAPS resembles many other new community Policing programs, one distinctive mark of Chicago's system is the extensive service delivery and community relations responsibilities assigned to neighborhood police officers. CAPS is designed not only to make community police officers the brokers for basic city services such as infrastructure repair, closing and clearing abandoned buildings and empty lots, and removing graffiti, but also to provide more face-to-face contact between officers and residents. Under Chicago's program, all officers, and not simply special units, are part of CAPS; and in addition to traditional law enforcement work they are expected to be neighborhood organizers, community leaders, liaisons to other city agencies, and necessary, service providers. Central among these services is the protection of old and vulnerable city residents who needed special attention and support. The Chicago Police Department had operated special units designed to attend to the elderly since 1982, when it created the

Senior Citizens Services Division. But under CAPS the department pledged to establish closer ties with senior citizens and to look out for them during crises. The restructuring of police work so that officers are more familiar with the dynamics of the neighborhoods they patrol and more personally connected to neighborhood residents has played a major role in the political legitimization of CAPS. The myth of the community police officer as watchman or sentry, the contemporary equivalent to the precinct captain of Chicago's machinist past, is crucial to the program's popularity. The heat wave, which was the first major test of the program, offered an early sign of how difficult the reorganization of police work would be in practice; and subsequent studies have shown that the challenge remains unmet.³⁷

Chicago inaugurated CAPS in April 1993, when it initiated experimental programs in four police districts. By December of 1994, six months before the heat wave, the system had been implemented in all twenty-five city districts. In theory, the city's community Police officers, and the Senior Units in particular, should have been able to use their networks with neighborhood social groups and the local elderly to target assistance to the people most in need. "That's what CAPS should be all about," North Lawndale alderman Michael Chandler explained. "They could have city services checking up on these people. You've got seniors, don't just wait until there's a heat wave." During the disaster, however, none of the system leaders recognized the department's responsibility or capacity to protect vulnerable citizens by performing duties that fell outside the range of traditional law enforcement practice but were expected of the force in the new program. "We failed to pull the trigger because we just didn't see it," one CAPS leader told me in words that sounded strikingly similar to those used by the fire commissioner after the disaster.

During the heat wave the city learned that if community police officers are to succeed in their roles as service providers and community workers, they must be trained to recognize and react appropriately to dangerous social conditions that were outside their purview under conventional policing strategies. Chicago has already developed a retraining program for its officers in which it attempts to expand the scope of police practice. But, as the authors of the most comprehensive analysis of the program report, "virtually every sworn trainer we interviewed spoke negatively about the three-day skill-building sessions." Chicago officers were upset about community policing projects because most officers did not want to do "what they signed up for." Officers did not want to be "pooper-cooper police," and they said so. At the outset, dealing

with peoples' concerns sounded too much like social work, and having all of the people's problems dumped on them sounded like too much work.³⁸

Most of the police officers I met in my fieldwork are skeptical about the new duties assigned to them as community officers, and they have resisted the push to give up their old ways.³⁹ Officers often told me that they had joined the force because they wanted to "do something good" or "help the community," yet few had expected or desired to do the neighborhood relations work that they considered to be the soft labor of feminine social workers. Police organizations cultivate an ethos of masculine toughness and risk taking in its officers, and the introduction of community service responsibilities threatens this style. Indeed, once members of the department had been acculturated to the dangerous work of policing streets, they seemed unlikely candidates for the kinds of community work that neighborhood relations and senior service programming required. In the new system, officers feared that the jobs once reserved for the cops who could not cut it or for workers in the service sector would be assigned to everyone.

In practice, though, police personnel in Chicago's most violent and crime-ridden neighborhoods—precisely the areas that foster isolation and withdrawal among older and more fearful residents—found that the high demands of conventional law-and-order policing made it nearly impossible for them to do the neighborhood relations tasks expected of them. Even maintaining beat integrity (staying within a small area of a few square miles), which is the fundamental prerequisite for community policing, was difficult to achieve. Although there are great variations in the crime rates among Chicago police districts, the Police Department does not assign personnel to match the distribution of criminal activity, and it therefore leaves officers in high-crime areas with more policing responsibilities than they can handle. As one officer working around North Lawndale explained, "If we wanted to we could make arrests from the time our shift starts until the time it ends. But we can't keep up with the action here. There's too much going on."

Riding along, or sitting in the backseat as officers worked their regular shifts, I learned firsthand why it is so difficult for even the most well-intentioned members of the force to do the work of sentries and community leaders when they are policing the high-crime areas of the city. Problem-oriented neighborhood policing, the kind of practice that would allow officers to identify isolated seniors, people with special needs, and emerging local concerns, requires that officers have both sufficient time

to work proactively and spatial boundaries that foster intimacy with specific area and its residents. In police districts with high arrest rates, officers spent their shifts *reading* to the crime reports and requests for emergency service that flow unceasingly from the command center to the patrol cars over the radio wires. As we drove hurriedly past the borders of the beats to which we had been assigned and responded to one urgent call after the next, it became clear that there was neither time nor space to fulfill the human service responsibilities assigned to community police officers. "In other districts," the officer riding shotgun told me, "they might be able to stay on beats a little better. But here we have to be all over the district based on the calls we get." We had responded to two calls from within our beat during the eight-hour shift, but we had spent the rest of the time outside the area.

There are, to be sure, other forums through which officers can do the neighborhood relations work of community policing. Primary among these are the monthly meetings held in each of Chicago's 279 beats, which have become the most consistent venues for mediation and collective planning between the city government and citizens or community groups, and the formal events sponsored by the department's Neighborhood Relations Offices. But recent studies show that the organizational culture and vocational challenges of police work make it difficult to cultivate enthusiasm for human service or sentry work among police personnel. As Skogan and colleagues report, "Many officers were not particularly interested in getting involved in non-criminal problems and clung instead to a very traditional view of their job. To them, problem solving did not look much like 'real' police work."⁴⁰ The failure of local officers and Senior Units to protect the isolated and vulnerable elderly during the heat wave was not simply a consequence of the Police Department's inability to recognize an acute problem and to activate an appropriate response. It was also a symptom of the underlying difficulties with the service delivery system CAPS was designed to implement in theory but had trouble achieving in practice. Like the Fire Department administrators who struggled to manage the paramedic and public health responsibilities now central to their organization, police officials forced to transform their paramilitary organization to meet new service demands were unable to adjust in time to ward off the crisis.

MALIGN NEGLECT: THE POLITICAL WILL

TO TOLERATE DEPRIVATION

While Metro Seniors voiced specific concerns about the Police Department, a group of South Side community leaders levied general criti-

cisms of the city's response and argued that insufficient service delivery in their part of Chicago was a longstanding problem. Alderman John Steele, in the predominantly black Sixth Ward, complained that the city had neglected the health and welfare of residents in his area before and during the heat crisis; and U.S. Congressman Bobby Rush criticized City Hall for an "arrogance of power," claiming that "the lack of action by the city administration and the pass-the-buck mentality of Mayor Daley resulted in a gaping, bottomless hole in Chicago's safety net for the elderly." Cooling mechanisms were sitting empty while the elderly were dropping dead in their apartments because the city failed to activate any mechanisms warning of the severe danger of the heat.⁴² The Task Force for Black Political Empowerment and a number of African-American politicians joined voices to denounce City Hall for its refusal to attend to the health crisis on the South Side. Robert Starks, a professor in the Inner-City Studies Program at Northeastern Illinois University, was outraged that city commissioners had not done more to provide emergency health services to the African-American elderly. In an editorial published by the *Chicago Standard News*, Starks opined that "the city's response to this crisis in our communities constitutes Criminal Neglect!" and called for the commissioners of several city agencies to resign.⁴³ In a subsequent discussion he argued that "it was simple callousness on the part of those who were responsible. They said that they didn't know what was happening, that they hadn't been warned. But everyone knew. We knew. The people in our communities knew. It's just that the city wasn't listening."

The South Side leaders were furious, but not surprised, by what they viewed as the city's disregard for the lives of African-American seniors during the heat wave. Such neglect, they argued, was typical of a government that refused to commit the resources necessary to protect an increasingly aged and isolated black population. They might have been surprised to learn that many officials and street-level workers at the Department on Aging agreed. According to Don Smith, who became department commissioner in 1989 and was still in office in 1995, in the mid-1990s the agency was struggling because its secure funding from the federal government was shrinking at the same time that the number of very old seniors and seniors living alone in Chicago was increasing, adding to the department's burden. Chicago's Department on Aging, which was among the first local governmental departments in the United States to focus specifically on the urban elderly, managed an impressive range of supportive and innovative programs. Yet its

struggle to garner sufficient resources has made it impossible for the agency to meet the needs of a booming, aging elderly population. City service workers commonly operate under difficult conditions and are typically unable to meet all the demands placed upon them. Our department gets over eight thousand calls a month for case management requests," an Information and Assistance worker for the agency reported. "So you can understand how much we need to do."⁴⁴ Facing cuts in its secure funding, in the 1990s the Department on Aging was forced to increase its dependency on private foundations and other grant-making organizations for program support. In the middle and late 1990s, though, external funding for redistributive programs was in short supply, pushing some of Chicago's departments into fiscal hemorrhages even though the state and federal governments were accumulating budget surpluses. As the Policy Research Action Group reported in its study of the city budget, "City of Chicago programs designed to address priorities of low-income communities, other than public safety, are extremely dependent upon grants from state and federal governments and foundations. Unfortunately, the level of grants coming to the City of Chicago that low and moderate-income residents depend on have declined substantially over the last few years."⁴⁵

While the Police Department expanded to historic levels, the Department on Aging reduced its full-time staff and hired less expensive part-time and temporary employees. City governments have long contracted out many of their human services to private organizations, but in the 1990s Chicago and the Department on Aging outsourced more of their major programs to private and nonprofit institutions that agreed to do the work of the state despite the limited budgets available to them. As I spent time alongside social workers and home care providers for Chicago seniors, it became clear that underservice of Chicago's poor elderly is a structural certainty and everyday norm. The competitive market for gaining city contracts provides perverse incentives for agencies to underestimate the costs of services and overestimate their capacity to provide them. The agencies I observed had bargained themselves into responsibilities that they were strained to provide and taken on or inherited caseloads that required more resources than they could afford. "Most entrepreneurial governments promote *competition* between service providers," David Osborne and Ted Gaebler write in *Reinventing Government*,⁴⁶ and under certain conditions delegating more public services to the private sector can improve the level of support, but competition can undermine the working conditions for human

service providers if it fosters efficiency yet compromises the time and human resources necessary to provide quality care. "My seniors love to see me," case manager Mandy Evers, an African-American woman in her late twenties, told me. "The problem is I never have enough time to get to them. You wouldn't believe how many people I have to keep track of here."

According to Mandy and a group of her colleagues at one of Chicago's largest social service organizations, the isolated seniors reputed to be unwilling to accept help are, most often, desperate for human interaction, attention, and support. While acknowledging that seniors who live alone are often wary of strangers and concerned about the possibility of scam artists and criminals who might prey on them, these social workers had developed strategies for gaining their clients' trust. Regular communication, if only by phone, was crucial for maintaining the lines of social contact and the loose bonds of trust. The problem was that their organization's contract with the city has left them with a small staff and, in the words of one case manager, "about two times more clients than we can possibly handle." Charged with the responsibility to visit their clients at least twice a year, most caseworkers I shadowed and got to know reported that they were managing to get to them once annually, at best. Seniors could receive more attention if they aggressively solicited it from the city or their service agency, but few of the people Mandy and her colleagues worked with were disposed to be so demanding.

Insufficient funding and staffing of social support organizations left isolated and homebound seniors on the periphery of formal assistance networks, but the standard operating practices of city and private service workers further marginalized elderly Chicagoans who lived in segregated African-American neighborhoods and housing projects. Like service workers in other Chicago industries and agencies, social workers and case managers for the elderly were generally anxious about making home visits to black residents of Chicago's most disreputable areas. In practice, these mundane concerns limited the city's capacity to support the most vulnerable and poor African Americans, particularly seniors and the disabled. What resources the local government committed to health and human services, in other words, were diminished by constraints in the street-level bureaucracies that enact policy on the ground.

Some of the caseworkers I got to know, including many African Americans, disliked working in these "no-go" areas because they believed that the risks to their personal safety were too high.⁴⁶ Although

their agencies were mandated to serve everyone eligible for benefits in their districts, individual workers had some discretionary powers over which clients they would handle. If they had enough experience with the organization or a colleague who would help them out, social workers could avoid jobs they considered too dangerous to perform. Several social workers I met were willing to visit clients in Chicago's stigmatized areas but only under special conditions. The general requisite was that the client be willing to accept a visit early in the morning. Every agency I visited had adopted an informal and unwritten policy of making rounds in predominantly African-American housing projects or very poor black neighborhoods before noon, and some workers tried to avoid them after 10:00 A.M. "When I'm going to this part of the city, I always leave by 8 A.M. at the latest," Mandy told me when I met her at that hour for a drive to some low-rise housing projects on the Near West Side. "I figure I can beat the gang-bangers and trouble-makers if I get out early. They're still trying to sleep off whatever they did the night before. But by lunchtime they're out again, and I try to be too."

When I observed the same practice of early visitation among other social workers, I asked the director of one city program if her department recommended that the staff make morning visits. "We certainly do," she responded. "We figure the bad guys aren't out of bed yet. And it works better." This service delivery strategy was understandable to Chicago seniors who had adopted similar routines for going out in their neighborhoods. Yet the mornings-only visitation policy constrained the options for service delivery and reception among residents of stigmatized black neighborhoods. The social distance between seniors residing in Chicago's most troubled areas and the state agents responsible for serving them helps to account for the gulf of understanding that separated city workers from isolated seniors during the heat wave. It also explains why political leaders on the South Side accused the city of neglecting the needs of their communities, and why some have not given up the case.⁴⁷

SHOPPING FOR SERVICES IN THE EMPOWERMENT ERA

The rhetoric of abandonment and vulnerability used by Chicago's dissident political figures stands in sharp contrast with the language of empowerment and consumerism promulgated by the city government. City agencies promote themselves as purveyors of information about city services and programs to citizens who are expected to become smart shoppers of public goods. Driven by the logic that consumers of city services will not act effectively unless information enables them to

make good choices, city agencies regularly hire expensive advertising and marketing firms to publicize their work.⁴⁸ As officials explain it, Chicago residents who need public assistance must also be able to activate support networks and make appropriate choices about the services they want and the programs they prefer. In principle, the concept appeals to city residents frustrated by old political bureaucracies, but many service providers for the elderly are convinced that the market model of government generates a *political mismatch* between service delivery programs that demand activist clients and an increasingly elderly population whose isolation and frailty hinder their capacity to claim the assistance they need.

Studies of urban politics and public health programs have consistently shown that local governments and the organizations that contract with them are more responsive to the demands of elite constituents than to citizens having the fewest resources and the least clout.⁴⁹ According to local social workers and case managers, Chicago residents with the lowest levels of education, the weakest ties to mainstream institutions such as government agencies and churches, and the least resources are also poorly prepared to claim the public benefits—from health care to prescription drugs to Social Security income—to which they are entitled. Cultural capital, in the form of skills necessary to hurdle complicated bureaucratic obstacles to care, and social capital, in the shape of networks of service providers and social support systems, are priceless possessions in the entrepreneurial government. But so, too, are other social characteristics that are atypical of the most frail and needy seniors: a disposition to aggressively demand public goods as entitlements, then to demand even more assertively after being turned away on the first try; and a social and spatial position that places one in sight of service providers and in reach of networks of information about available programs. Welfare historian Robert Halpern argues that “it has become a truism that those most in need of supportive services are precisely those least likely to have access to or to participate in them.”⁵⁰ A system of service delivery that rewards the most capable threatens to make these inequities even more severe.

Stacy Geer, a seasoned advocate of Chicago seniors who spent much of the 1990s helping the elderly secure basic goods such as housing and energy, insists that the political mismatch between more entrepreneurial service systems and isolated seniors contributed to the vulnerability of Chicago’s elderly during the heat wave. “The capacity of service delivery programs is fully realized only by the seniors who are most active in seeking them out, who are connected to their family, church,

neighbors, or someone who helps them get the things they need,” she pointed out. In some circumstances, the aging process can hinder seniors who were healthy and financially secure for most of their lives. Geer explained, “As seniors become more frail their networks break down. As their needs increase, they have less ability to meet them. The people who are hooked into the Department on Aging, the AARP, the senior clubs at the churches, they are part of that word of mouth network and they hear. I know, just from doing organizing in the senior community, that you run into the same people and the same are active in a number of organizations.”⁵¹ City officials, including several members of the Department on Aging, agree that such active seniors are also the people most likely to go to cooling centers on hot summer days or to call friends or local organizations to request support. Yet seniors who are marginalized at the first, structural level of social networks and government programs are then doubly excluded at the second, conjunctural level of service delivery because they do not always know how to—let alone how to—activate networks of support. Those outside the loop in their daily life are more likely to remain so when there is a crisis. This certainly happened during the heat wave, when relatively active and informed seniors used official cooling centers set up by the city while the more inactive and isolated elderly stayed home, and relatively protected residents of subsidized hotels received more attention and care than residents of most for-profit buildings.

THE EVERYDAY ENERGY CRISIS

During the 1990s, however, not even the best-connected city residents knew where to appeal if they needed assistance securing the most basic of primary goods: home energy and water. In Chicago, the combination of cuts to the budget of the federally sponsored Low Income Home Energy Assistance Program (LIHEAP) and a market-model managerial strategy for punishing consumers who are delinquent on their bills has placed the poor elderly in a permanent energy crisis. Facing escalating energy costs (even before prices soared in 2000), declining government subsidies, and fixed incomes, seniors throughout the city express great concern about the cost of their utility bills and take pains to keep their fees down. While the average Illinois family spends roughly 6 percent of its income on heat-related utilities during winter months, for low-income families the costs constitute nearly 35 percent.⁵²

Poor seniors I got to know understood that their utility costs in the summer would be unaffordable if they had air conditioners. Epidemiologists from the CDC estimate that “more than 50 percent of the deaths

related to the heat wave could have been prevented if each home had had a working air conditioner," and surely this would be an effective public health strategy.⁵³ Yet the elderly who regularly struggle to make ends meet explain that they could not use air conditioners even if they owned them because activating the units would push their energy bills to unmanageable levels. Along with the pressing needs for cash, the cost of electricity is a major reason that the beneficiaries of pilot programs to provide air conditioners to the poor have often sold the units rather than installed them. But the everyday energy crisis was pressing even during moderate temperatures. The most impoverished seniors I visited kept their lights off during the day, letting the television, their most consistent source of companionship, illuminate their rooms. Fear of losing their energy altogether if they failed to pay the bills has relegated these seniors to regular forms of insecurity and duress so fundamental, and yet so difficult for policy makers and the public to see, that their daily crisis goes largely unnoticed.

Initiated by the U.S. Department of Health and Human Services in 1978 and fully implemented in 1980, LIHEAP grants are made to the states, which develop their own criteria for determining eligibility and often supplement the funds. The LIHEAP budget peaked at \$2.1 billion in 1985, at which time states used the funds to subsidize both home heating and cooling for the poor.⁵⁴ Beginning in the early 1980s, however, political support for the program, and in turn the money allocated to it, has diminished, falling to roughly \$1 billion in real dollars by the year of the heat wave and finding its way back to the congressional cutting block. Illinois, like most other states with severe winters, not only has been unable to provide energy subsidies in summer it also runs out of funding for winter support early in the season. According to Chicago Department on Aging workers, LIHEAP was the program that almost all of their seniors needed but could never get.

Programs such as LIHEAP fall into the category of conventional policies that provide rather than enable, so it is not surprising that critics of redistributive social protection policies, and Republicans in particular, have spent years campaigning to eliminate energy subsidies for the poor. During the week of 17 July 1995, as the heat wave deaths were still being counted, the U.S. Senate initiated a vote to end the LIHEAP program and finally settled on a compromise that skinned 10 percent or one hundred million dollars, from the budget. And on 19 July the Illinois Commerce Commission held hearings in which state officials announced that Illinois' funding for LIHEAP would be cut by 25 percent that winter regardless of the federal legislation. A few months later

the U.S. House of Representatives joined cause with their congressional colleagues in the Senate, refusing to vote on a 250-billion-dollar funding bill for the Education, Health and Human Services, and Labor Departments unless they could eliminate LIHEAP entirely. The program ultimately suffered an additional funding cut but survived the congressional session. Ironically, as the environmental historian Ted Steinberg shows, during the same term that Congress trimmed its energy support for the poor it expanded the federal government's commitment to subsidize insurance companies and home owners who suffer property damage in disasters—even if direct reductions to social protection programs would be necessary to pay for the support. According to Steinberg, "What the new budgetary calculus means is that the poor will pay twice for natural disasters, as they continue to be left out of the relief equation and then are made to bear the costs of that very same relief effort through cuts in social spending."⁵⁵

Already resigned to energy deprivation in 1995, during and after the heat wave an even more fundamental problem, loss of water, would become a pressing concern for Chicago's most impoverished seniors. Deprived of other methods of cooling, young residents in Chicago's low-income neighborhoods opened more than three thousand fire hydrants in the heat wave, triggering a militant response from local police officers. The city, which in 1995 had not yet installed special hydrant caps that release light streams of water, put police on order to crack down on teens who refused to accede to its repeated warnings. Soon thereafter local journalists declared that a "water war," in which more than one hundred crews roamed Chicago in search of open hydrants and police and young residents exchanged bullets in a battle for the most basic public good, had broken out in the streets.⁵⁶ The city Water Department was unable to maintain water pressure in the most affected neighborhoods, leaving clusters of residents without water for hours as the deadly heat seared into the streets. Similar water shortages plagued Chicago Housing Authority buildings, where electric water pumps shut down during the power outage and left the projects without energy or water. Residents of the Rockwell Gardens Projects on the Near West Side had no water for more than a day, and several people in the Randolph Towers on the South Side complained that their traps were dry for three consecutive days. Broken water pumps at a South Side station caused water outages around the area. "I'm very agitated and *hot!*" an African-American woman in the Morgan Park area told a local television reporter. "Look at us. It's ridiculous. We don't have drinking wa-



Figure 38. A frustrated Chicagoan shows reporters that her apartment has lost all water pressure during the heat wave. Source: ABC7. Courtesy of WLSTV.

What no one in Chicago could anticipate was that, long after the city had restored its capacity to supply water, the local government would begin a policy of turning off the taps of Chicago residents who were unable to pay their water bills. Impoverished and ill seniors whose fixed incomes were too low to cover their water bills were not spared from such treatment. In the pure spirit of the entrepreneurial state, by the late 1990s the Chicago Water Department had decided that the most effective way to handle delinquent customers was to cut off their supply and punish them with heavy fees. City officials hoped that adopting a strategy similar to the one they used to collect parking fees—depriving debtors of the resource they have mishandled—would help turn the Water Department into a greater revenue generator for the city.⁵⁷ What they failed to consider, however, was that water, unlike a car, is a resource that people need to survive, and that the punitive policy would likely prove most devastating for the Chicago residents whose lives were already most devastated.

Predictably, the policy took a major toll on the city's poor elderly, including some of the seniors I had gotten to know. In a 1998 discus-

sion, one Water Department employee who handles "shut-off" cases told me that he could not make a special exception and turn the water back on in the home of one senior with a severe illness whose doctor had called to complain, because the case was not unusual: "I get requests like that all the time. Constantly. I've got people coming to me everyday with stories like that. So what am I supposed to do?" For this administrator, if not for his department, the prevalence of shut-offs was a sign of irresponsible consumer spending rather than a signal that the agency's policy response had endangered the lives of the very people that the city government, with its special programs to support the elderly, promises to protect.

WELFARE STATES AND EXTREME EVENTS

Extreme events and disasters pose exceptional challenges for governments and societies, but their potential to cause physical damage and social suffering makes them crucial tests of social protection systems. As public health scholar Rodrick Wallace explains, "Extreme events—'emergencies' . . . delimit and define our lives, both individually and in community. The ability to control both the occurrence and the consequences of such extremes is the hallmark of effective government, a government which retains the 'mandate of heaven.'"⁵⁸ When a government mismanages a crisis it can use its experience as a guide for building new forms of social protection, but doing so requires an open assessment of how its policies support or imperil its constituents. In the years following the heat wave Chicago has expanded its programs for supporting seniors during heat crises, developed a system for tracking isolated seniors and contacting them when there is severe weather, and continued its Benefits Eligibility Checklist and enrollment service. These programs will help to protect Chicago's elderly during future heat crises, yet they only begin to make up for other deficiencies in the city government's service delivery system.

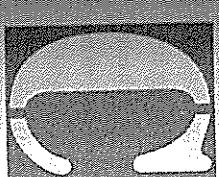
In the meantime, the four features of urban governance explored in this chapter—(1) the delegation of key health and support services to paramilitary organizations that were not designed to deliver them, (2) the lack of an effective system for organizing and coordinating the service programs of different agencies, (3) the lack of a public commitment to provide basic resources, such as health care and energy, necessary for social protection of the vulnerable, and (4) the expectation that frail and elderly citizens will be active and informed consumers of public goods—will continue to create risks for city residents. Such

organizational changes, political priorities, and market-based reforms are increasingly common in today's reinvented governments, and the story of the heat wave suggests that they deserve further scrutiny.

In Chicago, as in other cities, the popularity and legitimacy of these reforms is as much attributable to the city's capacity to manage its image through sophisticated marketing and public relations work as it is to the effectiveness of the programs. Whether in everyday city politics or extreme and unusual events, powerful image-making projects can compensate for shortcomings in other parts of the government's work. During the heat wave, as the next chapter shows, the city's most effective response to the dangerous environment was not a public health program, but a public relations campaign.

CHAPTER FOUR

Governing by Public Relations



Chicago is a city of big stories, and one of the greatest legends of the modern metropolis concerns another recent disaster, the blizzard of 1979. Historians quibble over the political significance of the series of punishing snowstorms, which buried the city in powder and ice for weeks. But among Chicago residents there is consensus that the blizzard caused at least one casualty: the mayoral tenure of Michael Bilandic.¹ A recent study of Chicago politics provides a succinct representation of how the event affected the 1979 mayoral primary, in which Bilandic campaigned against the underdog Jane Byrne. "Until the very close of what had been a pleasingly uneventful administration, Bilandic was considered a shoo-in. However, when two huge snowstorms struck the city in January 1979, the response of city agencies was slow and quite erratic. At one point, the Chicago Transit Authority sought to maintain schedules on the Dan Ryan 'el' line by skipping stations on the black Near South Side, thereby excluding thousands of African-American commuters from the public system. Though Byrne's anti-machine credentials were always suspect, on primary day in February, she carried 15 of 19 black majority wards."² Chicagoans came to believe that mismanaging the extreme weather had cost Bilandic his job. When the heat arrived in 1995, everyone in City Hall knew that the stakes of the crisis could be high.

One reason that the snowstorm proved so politically damaging was that, unlike the heat wave, it blocked the circulation of people and goods in the city, shutting down businesses, closing schools, and inconveniencing the most powerful constituencies in Chicago as well as the disadvantaged. In other words, the blizzard was a universal disaster, whereas the heat wave created crises for only a small and politically marginal portion of the city. In addition, in 1979 Mayor Bilandic was mired in a mayoral campaign against a credible opponent, and his po-