

TAKING CARE OF KIDS?

ARE YOU PREPARED FOR AN EMERGENCY?



ARE YOU A PARENT?

PREPARE:

Know your child's school/childcare provider's emergency plan & how they will contact you. ¹²



RESPOND:

Stay as calm as you can. Parents' moods can worry children. ¹

If you need to go to a shelter, bring any medications your children need. Also, bring small toys that will make them feel at home. ¹⁵

RECOVER:

Connect with your community for services and social support—schools, daycare, Easter Seals, interfaith groups, Save the Children, youth groups, & more! ^{7,8,14}

The quicker you can restart regular routines, the sooner children will feel normal again. ⁵

ARE YOU AN EARLY CHILDCARE CENTER?

PREPARE:

Check your state's disaster plan—if childcare providers are not included, you will not receive financial assistance from FEMA after a disaster. ¹²

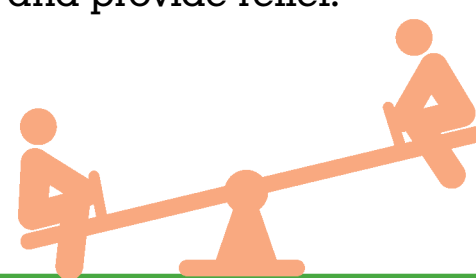
Sheltering in place might be necessary—be prepared with enough food and a plan for reuniting children with families. ³



RESPOND:

Work with local officials to stay open if possible—childcare centers may be a necessary safe haven for families. ³

Stay in contact with state and local offices of children and family services so they can assess your need and provide relief. ³



RECOVER:

Children express thoughts and concerns through playing. Keep an eye on their actions for signs of suffering. ²

Get involved with working groups or children's task forces if active—this is very effective for recovery. ¹⁴

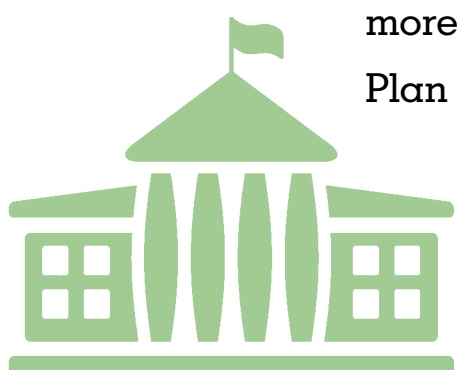


ARE YOU A SCHOOL?

PREPARE:

Know the safest part of the school for each type of disaster and where to shelter in place. ⁴

Involve kids in disaster response plans and think about more than just fires! Plan and drill! ^{1,6}



RESPOND:

Provide evidence-based psychosocial disaster recovery programming with the help of state and other agencies. ¹⁷

Work together with parents so that real-time needs for students, including students with disabilities, are met. ¹⁸

RECOVER:

Sacrifice perfection to return to "normal"—give kids a chance to rebuild their lives. ⁴

Provide extra services or longer hours if you can. Giving parents time to address family needs will help the community bounce back faster. ⁴



ARE YOU A PEDIATRICIAN?

PREPARE:

Connect with local public health organizations to share info on planning needs for kids. ¹⁰

Work with local health departments to develop just-in-time training on children's concerns that responders can take during an incident. ¹³



RESPOND:

Be a resource in the community! Families trust pediatricians for answers—link up with jurisdictions to be a subject-matter expert. ¹³

Engage with the State Department of Children and Families to assess and intervene in cases of child abuse after disasters. ¹⁷

RECOVER:

Work with the community! Children's needs following a disaster are about the whole community, not just pediatric partners. ⁹

Take care of yourself—doctors who aren't well can't care for sick kids. Take breaks, sleep, and lean on social supports. ¹¹



KEY TO SUCCESS

PUBLIC-PRIVATE PARTNERSHIPS ARE ESSENTIAL!

Link up with organizations in your community during disaster planning and recovery ^{5,9,17}

LOOKING FOR RESOURCES?

The **American Academy of Pediatrics** has resources for many groups taking care of children, filtered by disaster or audience type.

Videos and activities for kids and families:

- **Sesame Street**
- **Computer games**
- **Flat Stanley activities**

Tips for psychological first aid in schools:

- **Helpful Hints for School Emergency Management**
- **National Children's Disaster Mental Health Concept of Operations (can be used by schools and communities to improve response to children's mental health needs¹⁶)**

Visit Save the **Children's Get Ready. Get Safe** page to find checklists for parents and child care centers, and to see if your state is disaster-ready for children!

For more details about this graphic and the IOM workshop Medical and Public Health Preparedness, Response, and Recovery Considerations for Children and Families, click the workshop speakers' names below to view their presentations, or visit the **meeting page**.

SOURCES

- (1) David Abramson, NCDP
- (2) Judy Bezon, CDS
- (3) Janice Molnar, NYS DCF
- (4) Angie Besendorfer, Joplin
- (5) Ann Masten, UMN
- (6) Ashley Houston, FEMA Youth
- (7) Patricia Wright, Easter Seals
- (8) Peter Gudaitis, NYDIS
- (9) Jonathan White, ACF

- (10) Esther Chernak, Drexel
- (11) David Schonfeld, Cincinnati
- (12) Linda Smith, ACF (presentation not available online)
- (13) Evelyn Lyons, Illinois
- (14) Kathy Spangler, Save the Children
- (15) Mary Casey-Lockyer, Red Cross
- (16) Merritt Schreiber, UC-Davis
- (17) Allison Blake, NJ DCF
- (18) Richard Devylder, DOT

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