

News You Can Use
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Disaster Readiness and Response for Families with Young Children

In recent years, families in the United States have faced a number of significant traumas and crises. From the terror attacks of September 11, 2001 to the devastation of Hurricanes Katrina and Rita, families with young children have felt the impact of these disasters in unimaginable ways. Families have experienced loss, separation, physical and emotional trauma, increased stress, chaos, and the most vulnerable members of families – infants and toddlers – have been witness to it all. Fortunately, programs like Early Head Start are uniquely designed to provide a comprehensive approach to helping infants, toddlers, families and staff devastated by these events. Early Head Start staff can help parents understand how trauma and crisis affects very young children, and how parents and early childhood programs can help young children make sense of their world that has been turned upside down. The following article examines disaster readiness and response issues for families and young children from two perspectives – an Early Head Start program affected by the recent hurricanes and a TA specialist who has lived and worked through many hurricane seasons.

Regina Coeli Child Development Center

In the late summer/early fall of 2005 our nation watched in horror as Hurricanes Katrina and Rita devastated the gulf coast region of our country. These storms uprooted whole families, communities and cities. Affected families and children were absorbed by relatives, friends, shelters, community centers and churches located in neighboring communities less affected by the storms. One hundred and fifty Head Start programs were forced to close, and on September 7, 2005 the Administration for Children, Youth and Families (ACYF) issued a Program Instruction authorizing fully operational Head Start programs to enroll any families and children who evacuated their homes as a result of Hurricane Katrina. Enter Judy Loyde, Executive Director, Ola Magee, Infant/Toddler Specialist, and the staff at Regina Coeli Child Development Center (CDC) in Robert, LA. —a beacon of hope for many children, families and staff affected by this disaster.

Location

Regina Coeli CDC, located 55 miles north of New Orleans, LA and 50 miles east of Baton Rouge, LA, services six parishes—Ascension, Livingston, St. Helena, St. Tammany, Tangipahoa and Washington Parishes. Because St. Tammany and Washington Parishes were in the eye of the storm when it hit on August 29 there was massive damage to the homes in these areas. The other four parishes were minimally affected, but most of the area was without power and water for up to 1 month. Power was restored on September 6, 2005 in Robert where Regina Coeli's administrative offices are located.

Services for Staff

Regina Coeli received donations from all over the United States and Ms. Magee remembers, “A preschool parent support group from Palo Alto, CA sent us a freight truck loaded with supplies for children and families.” Ms. Loyde stated that the “Louisiana Head Start Association provided \$10,000 in cash to support our staff whose homes had been damaged or destroyed.” This donation helped staff with some of their immediate material needs. She added, “We really needed mental health support for our staff because many of us were coming to work without power, with damage and destruction to our own homes, and not knowing if some of our loved ones were dead or alive.” As a result, Regina Coeli contracted with mental health counselors in all six parishes and provided private, anonymous counseling services for staff members who needed these services. The program hired five teaching staff that had been displaced by the storm from the New Orleans area. When staff feel cared for they are more available to care for infants, toddlers and families.

Services for Infants, Toddlers and Families

Initially funded to serve 168 infants and toddlers, that number quickly rose to as many as 300 in the days after the storm. Regina Coeli opened as quickly as possible, and reestablished daily routines for infants, toddlers and their families. Daily routines in the lives of vulnerable families with very young children helped promote a sense of safety and security. Ola Magee stated that, “The number changes as new families come and other families move on.” The staff worked “around the clock” for the first four months enrolling children and helping families get needed services. Locating concrete resources (i.e. food, shelter, clothing) in the days after the storm was critical for young children and families being served because everything was destroyed and local stores were closed. Parents were in need of diapers, formula, baby food, baby beds and clothing. Many infants and toddlers needed medical attention but the storm also displaced pediatricians and other family health care providers. Staff called on longstanding partnerships and newly developing relief efforts to collect the items that families needed. They provided weekly “home visits” to all local shelters and provided services to infants, toddlers, and prenatal services to pregnant mothers. Staff always left developmentally appropriate games, toys, clothing and other supplies as needed for families at the completion of each home visit. Center staff were also able to locate clothing sources, and clothing and diapers were brought to the center. MercyCorp, a non-profit agency working to support disaster victims, donated baby beds and infant/toddler comfort kits that included age appropriate toys, small stuffed animals, inflatable balls, and books on social emotional support.

Helping young children feel safe and cared for is critical in the aftermath of any disaster. Establishing and maintaining predictable routines with Regina Coeli families was an important step in creating feelings of safety and security for the adults as well as the children. Securing basic resources for families further allowed parents and caregivers to regain control of their lives and meet the needs of their young children. Families were then able to focus on developmental issues and play by participating in the home visits and using infant/toddler toys supplied by the home visitors. Once these recovery efforts were put into place, families could begin healing after the trauma by engaging with their children again, and reconnecting to the larger community.

Mental Health Services

Regina Coeli employs a fulltime licensed mental health professional to assist in meeting the mental health needs of children and families. These services were immediately bolstered with the addition of contracted mental health professionals to provide disaster counseling to families and play therapy for the children. These staff members created a complete, new mental health training program for staff and parents entitled: *New Hope for New Friends; Strategies for Coping in the Aftermath of Hurricane Katrina*. Louisiana State University staff from the School of Allied Health Services also volunteered with the program providing mental health counseling and classroom assistance from September 2005 until January 2006. Teachers and parents also received training from the mental health professional on specific strategies to respond to infants and toddlers. Judy Loyde shared the following strategies used by Regina-Coeli teachers and parents to support their young children.

1) Be flexible.

Re-establishing daily routines is critical to helping young children feel safe after a traumatic event. It is equally important for adult caregivers to be flexible in order to respond to infants and toddlers when and where necessary. Young children's needs vary depending upon the setting, situation or event. Some infants and toddlers may need more time before participating in a daily routine, a group socialization experience, or even playing with certain toys in certain places. Understanding the very young child's individual needs help caregivers as they plan activities to support their children.

2) Be emotionally present for the children.

Very young children who have endured trauma can "relive" the event by triggers such as sights, smells and sounds that remind them of the experience. Knowing this, adult caregivers can be prepared to soothe and comfort young children who become visibly upset. Young children often deal with their emotions through behavior and play. Adult caregivers can be especially attuned to any unusual signs of distress in an infant or toddler.

3) Nurture the nurturer.

Caring for infants and toddlers is a huge responsibility and can be overwhelming, particularly for adult caregivers who have experienced the same trauma. Therefore, adult caregivers must be very aware of their own triggers and how the traumatic experience could affect their ability to support very young children. Simply put, adults who are nurtured and supported through crises are in a better position to support infants and toddlers.

4) Develop a Family Safety Plan.

Apart from being prepared for any future disasters, developing a Family Safety Plan is an important step for parents because it helps them to feel empowered, in control of their lives and those of their families, and less vulnerable. Empowered caregivers are better able to create safe, secure and stable environments for very young children.

Services for Displaced Adults

Regina Coeli opened a training center for displaced parents and other adults to prepare them for work with the EHS program. There was a need to fill several positions in the EHS program because some staff had to evacuate before the storm and were unable to return for work. Training focused on preparing adults to work with young children in teacher aide positions, administrative positions and janitorial work. Adults were trained in daylong sessions from 8:30 am-3:30 pm. Degreed and experienced staff specialists who were well versed in the types of training needed conducted the training. Additional follow-up was done at the sixteen centers to determine if more individual training was needed. Conducting this training allowed staff to: a) make the training specific to the EHS program needs, b) control the number of trainees per session, and c) instill into trainees EHS philosophies and goals. The challenges of conducting the training were that it was very time consuming for staff, and not all of the trainees referred met the criteria for working with infants and toddlers. The program was charged with locating other resources for these trainees. Although providing adult training was time consuming for some staff, Regina Coeli's holistic response to the community was not disrupted. Adults who were not being trained but were in need of food stamps and services were connected to the Red Cross and FEMA, and transportation was provided.

Lessons Learned

Reflecting on their experiences during the past 6 months, Ms. Loyde and Ms. Magee both agree that support comes "from the top" and that the administration has to commit to doing what it takes to get through a crisis of this magnitude. A responsive and supportive Board of Directors also helps. Ms. Loyde added that, "Staff must be flexible, compassionate and have the ability to think creatively about how to best serve children in a crisis."

A Similar Perspective

Ellie Hirsh, the local T/TA Specialist from Region II, has lived and worked on the island of St. Croix in the U.S. Virgin Islands for the past 26 years. The island of St. Croix is considered a "Shelter in Place" which means that residents do not evacuate to another location with the threat of a hurricane. The only people who evacuate are those who live in the lower-lying areas on the coast. People move to shelters, schools and with family and friends—generally places that have kitchens where food can be stored in case these places have to be occupied for more than a few days. Having experienced many hurricane seasons including Hurricanes Hugo in 1989 and Marilyn in 1995, Ms. Hirsh offered the following thoughts related to disaster responsiveness.

Family Stress

The aftermath of a hurricane is the hardest on families because of the stress of being without power, clean water, food and refrigeration. Families with infants and toddlers find it particularly difficult because they may not have diapers or food for their babies. Families may have to buy food day by day because there is no place to keep it fresh. Once after a hurricane hit the island, Ms. Hirsh, who worked for the Early Intervention Program at that time, recommended that all programs serving vulnerable families with young children visit those families as soon as the roads were cleared. The infants and toddlers she saw communicated their reactions to the traumatic event through

their play, behavior and mood. For example, one two-year old who had lost the roof of her home during a hurricane put roofs over everything she played with after the disaster. Her clingy behavior with her mother also gave clues as to her emotional state after the event. In another example, a five-year old boy was very angry at having lost everything in the storm. The service provider, recognizing how critical secure attachments are for young children during a crisis, encouraged his mother to allow him to express his anger.

For caregivers, living through a major hurricane and losing everything is much like a death. In fact, Ms. Hirsh watched many caregivers go through the stages of death and dying (e.g. denial, anger, bargaining, depression and acceptance) as outlined by Kubler-Ross (1969) while simultaneously attempting to rebuild their lives.

Supporting Infants, Toddlers, and Caregivers after a Hurricane

The Early Trauma Treatment Network (Ippen, Lieberman and Van Horn, 2005) and ZERO TO THREE (2005) both outline helpful ways to support infants, toddlers and caregivers after a Hurricane:

- **Safety First**

One of the most important things caregivers can do for infants and toddlers before, during and after a crisis is to help them feel safe. As soon as possible after the event occurs re-establish a predictable routine and stick to it. If you read to your children at a certain time everyday, resume that activity. If you sang songs together before the crisis, continue to sing as part of the routine. Reassure your toddler that when you go away you will come back. Very young children are often better able to function when they know what to expect next.

- **Express Feelings**

Infants and toddlers may express themselves differently during and after a traumatic event than before the event occurred. Infants may cry more, become more fussy and difficult to soothe. Soft music may be one way to help soothe an infant who has experienced a crisis. Toddlers may have temper tantrums, or become clingy. Encourage safe expression of feelings through cuddling or holding your child, and for older children through drawing or storytelling.

- **Have Fun**

Try to find ways to have fun with your children as laughing and being silly together helps to relieve stress. Maybe your infant or young toddler likes being tickled, or maybe you have a “game” (e.g. something like peek-a-boo) that you enjoy. Laughter can also be a healing power for both caregivers and young children alike during difficult times.

- **Reconnect with Community**

Caregivers must take care of themselves in order to be at their best for very young children who have experienced a disaster. Reconnecting to support systems in the community is one way caregivers can stay connected and ask for assistance.

Talking with a mental health professional or joining a support group of others who have also experienced the crisis is a great way to share with people who have similar fears, concerns and can understand.

Living in a world in which public safety can be an issue at any time can leave many caregivers and parents feeling ill at ease and uncertain about solutions. Very young children, who are often in tune with caregiver's and parent's moods and feelings, also experience this tension. Caregivers who are supported in a crisis, whether through concrete resources like food, shelter, clothing, or through talking with a mental health consultant, are better able to support and nurture traumatized young children. It is only when these basic needs are met and sustained that very young children, families and communities can begin the road to healing after the trauma.

The following resources are listed as a guide to help caregivers and parents of young children find solutions and cope with living in the aftermath of a disaster.

RESOURCES YOU CAN USE

Publications

Federal Emergency Management Agency [FEMA](2004). *Are you ready? An in-depth guide to citizen preparedness*. Washington, DC: Author.

Website: <http://www.fema.gov/areyouready/>

Kubler-Ross, E. (1997). *On Death and Dying: What the Dying have to Teach Doctors, Nurses, Clergy and their Families*. New York: Simon & Schuster.

Osofsky, J.D. (2002). *Helping young children and families cope with trauma in a new era*. In Zero To Three, E. Fenichel (ed.). Washington, DC: ZERO TO THREE.

Rice, K.F., Groves, B.A. (2005). *Hope and healing: A caregiver's guide to helping young children affected by trauma*. Washington, DC: ZERO TO THREE Press.

Fact Sheets

Ippen, C.G., Lieberman, A.F., and Van Horn, P. (2005). *After the Hurricane: Helping Young Children Heal*. The National Child Traumatic Stress Network, Early Trauma Treatment Network, Child Trauma Research Project, University of California: San Francisco.

ZERO TO THREE (2005). *Coping after Katrina: Support for families with babies and toddlers*. Washington, DC: ZERO TO THREE.

ZERO TO THREE (2005). *Little listeners in an uncertain world: Coping strategies for you and your young child after traumatic events*. Washington, DC: ZERO TO THREE. Website: www.zerotothree.org/coping

Websites

New York University Child Study Center (articles about supporting children in the aftermath of Hurricane Katrina)
www.aboutourkids.org

Self study for parents and educators helping children cope with feelings caused by floods and other disasters.

<http://www.familyinfoserv.com/pdf/anniestories.pdf>

The National Child Traumatic Stress Network

<http://www.nctsnet.org/nccts>

ZERO TO THREE

www.zerotothree.org