The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of UPS, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today’s vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and neighborhoods fashion more innovative, cost-effective responses to these needs.
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Recent disasters, especially Hurricane Katrina, have all too clearly demonstrated what can happen when disaster management plans are not strong enough. After Katrina, state child welfare offices lost contact with large numbers of foster and biological families. Amidst the destruction brought by the hurricane, contact took significant time to reestablish. The Annie E. Casey Foundation’s experience supporting Louisiana following hurricanes Katrina and Rita, along with the Foundation’s broader goal of protecting vulnerable children across the nation, has brought about this guide, which aims to help agencies across the country to prepare for future disasters.

This guide offers best practices for disaster management at child welfare agencies. Its recommendations are firmly rooted in published disaster-related research and the advice of human service and preparedness experts. It is not a reinvention of disaster management—much quality work has been done in this field—but a synthesis of experts’ recommendations, geared specifically toward child welfare agencies. A number of previously published resources on disaster management helped to inform this guide’s recommendations and they are referenced throughout the guide and in the Index of Resources. The guide’s recommendations are meant to be adaptable for use by agencies in states and tribes across the United States.

The Child and Family Services Improvement Act of 2006 federally mandates that all agencies have a disaster plan in place to address such basic and important issues as keeping in contact with foster families during and after a disaster. But, what is the best way to do this? Would it be the same during a terrorist attack or an earthquake? What would need to be done in advance of a disaster to make sure communication is possible? Because disasters and their effects are largely unpredictable—and because many disaster plans are guided by the disasters that have already occurred—this guide aims to help agencies to develop a comprehensive and dynamic disaster management plan. The hypothetical scenarios that begin each section of the guide are designed to prompt agencies to consider the full range of possible disasters (“all-hazards”) alongside the most likely events. And the guide highlights ways in which each element of a disaster management plan must suit the particular challenges faced by child welfare populations. It is organized according to common phases of disaster management: mitigation and preparedness, response, and recovery. But it is important to note that all of these phases must be planned for before a disaster occurs.

How can agencies, often pressed for time and resources, prepare for disasters that may happen far in the future, if at all? One answer lies in the many “dual-use” recommendations offered in this guide. Many preparedness measures can also serve to strengthen the agency’s ability to serve children and families on an everyday basis.

Many child welfare agencies are dangerously underprepared for the kinds of large-scale catastrophes that we are likely to see in the future. But agencies are also expert at protecting children from emergencies they face in their everyday lives. Hopefully, this guide can help agencies harness this expertise to offer vulnerable children and families protection from disasters.

This guide is not intended to be read sequentially, cover-to-cover. It is a toolkit that contains recommendations as well as numerous previously published preparedness resources. Readers may open this kit and turn from section to section to select its most useful tools as they build, repair, and strengthen agency disaster management plans.
Given the gap that may exist between what ideally would be done to prepare for disaster and what may practically be accomplished, the Checklist and Detailed List of Recommendations that follow aim to help readers navigate this guide and produce a strong disaster management plan.

The Checklist provides a starting point to help readers set some priorities. The four-page Detailed List of Recommendations will help readers quickly determine which sections of the guide will assist them as they work toward preparedness.

The following ten-item checklist is a starting point for agency staff members who are tackling what may seem to be an overwhelming task. It can help agencies determine the most urgent preparedness needs as they consider what level of planning may realistically be carried out.

- **Develop a disaster response plan.** (Who will do what when disaster strikes?)
- **Coordinate disaster management with federal, state, and local agencies, as well as with contracted providers.** (Have memoranda of understanding in place before a disaster occurs.)
- **Train staff members to carry out the plan.**
- **Conduct exercises to practice and improve the plan.**
- **Plan to track and communicate with families during and after a disaster.**
- **Plan to preserve and access essential records during and after a disaster.**
- **Plan to accommodate children and families entering the state during disasters elsewhere.**
- **Ensure that families have adequate individual disaster plans.**
- **Plan to get necessary funds to children and families during and after a disaster.**
- **Plan to help children and families being served to recover from the effects of a disaster.**
I. MITIGATION AND PREPAREDNESS

Section 1: Assess Agency Preparedness and Evaluate Current Disaster Management Plans
• Work together to protect children and families served by child welfare agencies from major disasters.
• Use this guide and its resources to improve child welfare agencies’ disaster management plans.

Section 2: Determine Biggest Threats and Consider “All-Hazards”
• Determine which disasters are most likely to occur in the region and learn how these threats might affect the agency.
• Become familiar with potential effects of the full range of disasters.
• Prepare for “all-hazards.”

Section 3: Allocate Responsibilities to Agency Staff Members
• Assign a specific staff member(s) to coordinate disaster management.
• Anticipate staffing needs required during disaster response.
• Inform staff members what is expected of them during and immediately following a disaster.
• Make sure an adequate number of alternates are assigned to each role.
• Prepare to perform Emergency Support Functions required by federal and state governments as well as to enact plans to protect children and families being served by the agency.

Section 4: Put Disaster Management Plans in Writing
• Put agency plans in writing.
• Keep written plans handy and at the forefront of the minds of agency staff members.
• Address all phases of disaster management in written plans.
• Write disaster response plans in a concise and clear format.

Section 5: Budget for Disaster Management
• Keep budget limitations in mind when designing disaster plans.
• Maximize the utility of funds by simultaneously improving agency preparedness and day-to-day operations.
• Advocate for and apply for funds to improve disaster preparedness and management plans.

Section 6: Coordinate Disaster Management with Other Agencies, with Providers, and with Community Organizations
• Coordinate preparedness efforts with states.
• Coordinate preparedness efforts with Offices of Emergency Management.
• Coordinate disaster preparedness with contracted providers.
• Make sure that child welfare agencies are full partners with other social service agencies at the state level and active partners at the local level.
• Establish written memoranda of understanding with police departments, fire departments, and schools.
• Collaborate with school authorities concerning individual children in state care.
• Coordinate disaster preparedness with other states’ child welfare agencies, and establish memoranda of understanding to facilitate disaster response and recovery.
• Collaborate with community groups to ensure that vulnerable children and families are protected as well as possible during a disaster.
• Coordinate plans for disaster response and recovery with courts.
• Coordinate disaster management plans with government plans for a national disaster response.
• Coordinate plans for disaster response and recovery with relief organizations such as the American Red Cross.
• Incorporate government standardized disaster management terms and practices into agency plans.
• Remember to forge and nurture relationships in advance of a disaster.

Section 7: Prepare to Manage Disasters that Strike an Agency Office
• Plan to manage disasters that strike offices directly.
• Minimize the office building’s susceptibility to damage caused by disasters.
• Post emergency instructions for the full range of possible disasters where everyone in the office can easily read and reference them.
• Integrate disaster response plans for the agency’s office building into the larger disaster management plan.

Section 8: Ensure that Families and Providers Have Viable Disaster Plans
• Ensure that biological families, foster families, and group care facilities have disaster plans in place.
• Ensure that family and provider preparedness is routine and required.
• Ensure that families have an adequate supply of prescription medication in their disaster kits.
• Urge families strongly to consider the following suggestions when making their plans: both short- and longer-term evacuation plans (for hurricanes, terrorist attacks, and many other large-scale disasters) should be established.
• Educate caregivers about how to discuss their disaster plan and its various contingencies with children in a sensitive and age-appropriate manner.
• Inform families which supplies are necessary for evacuation and for shelter-in-place.
• Carefully consider situations involving possible domestic violence when monitoring family disaster response plans.
• Help families to plan to care for their pets.

Section 9: Prepare to Protect the Families of Agency Staff Members Essential to Disaster Response
• Some agency staff members will be essential while a disaster is unfolding.
• Speak with essential staff about what their families would need to be safe.

Section 10: Ensure that Agency Staff Members Have Viable Personal Disaster Response Plans
• Require that agency staff members create strong personal disaster plans.
• Make sure staff members know how to contact the agency in the event of a disaster.
• Verify that staff members’ disaster plans are compatible with their work responsibilities during a disaster.
• Keep staff members’ disaster plans on file and update them regularly.

Section 11: Prepare to Communicate with Agency Staff, Providers, Children, and Families During and After a Disaster
• Establish redundant systems of communications for use during and after a disaster.
• Make sure you have the necessary technology to operationalize communications systems.
• Record contact information electronically, online and in out-of-area locations.
• Establish out-of-state 800 numbers in advance of a disaster and publicize the numbers.
• In addition to phone lines, provide other clear ways for staff members, providers, children, and families to access information.
• Educate staff about the National Emergency Child Locator Center, established by the National Center for Missing & Exploited Children (NCMEC).
• Channel all information to the public through a Principal Information Officer (PIO) or spokesperson.

Section 12: Prepare to Preserve and Access Essential Records During and After a Disaster
• Make essential records electronic and back them up out of state.
• Establish a procedure to make sure online records are updated and backed-up frequently and regularly.
• Protect paper files.
• Collaborate with other agencies that hold essential records about children and families being served.
• Plan to document agency activities during disaster response.
• Consider confidentiality when planning how and where to store, access, and share information.

Section 13: Prepare to Serve Children Who Enter the State Because of Disasters Elsewhere
• Plan to receive and serve children from other states.
• Plan specifically to accommodate youth who are in state care already and coming from other jurisdictions.

Section 14: Practice Disaster Response Plans
• Conduct agency-wide emergency exercises.
• Participate in national, state, local, and community exercises.
• Evaluate exercises and make improvements to disaster management plans.
• Be very cautious if conducting any exercises involving children.

Section 15: Enact Disaster Response Plans When Needed
• Enact the disaster management plan.
• Adjust the plan as needed.

Section 16: Address the Urgent Needs of Children and Families Immediately After a Disaster.
• Plan to get regular payments to children and families who will surely need them.
• Assess the needs of children and families immediately after a disaster.
• Disburse funds for urgent needs such as day care and emergency housing.

Section 17: Identify and Assist Children Newly in Need of Child Welfare Services
• Plan to locate and serve vulnerable children affected by the disaster.

II. RESPONSE
Section 18: Reevaluate Staffing to Accommodate a Disaster’s Impact

- Make sure that staff members’ caseloads are manageable after a disaster.
- If staff members are in short supply, try to attract new staff.

Section 19: Support Agency Staff throughout Disaster Recovery

- Make on-scene disaster leadership an explicit part of the job description for the agency’s top administrator(s).
- Ensure that staff members receive their paychecks.
- Safeguard staff members’ mental health.
- Provide encouragement, celebrate successes, and promote wellness.

Section 20: Help to Connect Children and Families with Disaster Recovery Funds

- Help to connect children and families with available disaster recovery funds.
- Be equitable and systematic when distributing any agency funds for recovery.

Section 21: Continue the Work of the Agency

- Decide how staff should strategically prioritize work.
- Reevaluate each child’s permanency plan and continue work toward long-term goals.
- Make use of post-disaster services provided by nonprofits and the government.

Section 22: Coordinate Mental Health Treatment for Children and Families

- Contract with needed mental health professionals, who may likely be scarce after a disaster.
- Provide opportunities for staff members to refresh their knowledge about trauma symptoms.
- Train child welfare workers to serve as a first line of defense against untreated mental health problems among children and families in their care.
- Have staff members educate parents and caregivers about how to monitor for mental distress in children.
- Instruct parents and caregivers how to talk with children about disasters—before, during, and after they occur.
- Remind parents and caregivers to safeguard their own mental health.
- Be aware of the stigma that mental health services sometimes carry.
- Be sure that mental health services are delivered in a culturally sensitive manner.
- Consider mental health when planning for every phase of response and recovery.

Section 23: Coordinate Treatment of Children’s Physical Health

- Make sure that children and families can use their health insurance and receive medical care after a disaster.
- Help children and families find a “medical home.”

Section 24: Help Ensure that Displaced Children and Families Find Housing

- Help find stable living situations for all children and families being served.

Section 25: Help Ensure that Children Attend School Regularly

- Make sure that children attend school regularly.
- Help to locate an educational environment that can help children recover from a disaster.

Section 26: Manage Through and Minimize Foster Parent Attrition After a Disaster

- Anticipate foster parent attrition after a disaster, and make plans to manage the situation.
- Make use of federally available funds to recruit foster families for displaced children.

Section 27: Capture Lessons Learned and Regularly Update Disaster Management Plans

- Capture lessons learned in an accessible and user-friendly format, and share the lessons with stakeholders.
- Review disaster management plans regularly.
PART I

MITIGATION AND PREPAREDNESS
Suppose that a child welfare agency located in a hurricane-prone region has a disaster management plan in place to deal with brief evacuations and limited damage to homes and infrastructure. The plan has served the agency well over the last decade, when several serious storms have come and gone without major consequences. But, suppose that a hurricane of much larger magnitude sweeps the area, causing major damage and requiring long-term evacuation by hundreds of thousands of families. Despite being well prepared for past disasters, the agency does not have the right plans in place to weather this catastrophic event. Staff members do not know where foster families have evacuated and if they are safe. They do not have access to files containing key information about children being served. They do not know how they will get crucial medicine to children and families, now out of state, who cannot use their state-specific Medicaid cards.

SECTION 1: ASSESS AGENCY PREPAREDNESS AND EVALUATE CURRENT DISASTER MANAGEMENT PLANS

Evaluate disaster management plans and make improvements.

LIKELY OBSTACLES

When up against major disasters, even good plans become inadequate. Planning is never finished. Even agencies that meet federal requirements for planning designated by the Child and Family Services Improvement Act of 2006 may likely need to be better prepared.

Many people will be taking care of themselves when disasters strike, so vulnerable populations need special attention. Children and families served by the nation’s child welfare agencies are among the Americans most vulnerable to disasters.

Many individuals—those living outside hurricane or earthquake zones, for example—may falsely conclude that they are immune to a disaster. This is simply not true; agencies in all geographic areas are vulnerable to disasters, both natural and manmade.

RECOMMENDATIONS

Work together to protect children and families served by child welfare agencies from major disasters. Agencies work hard every day to keep children safe, and this job becomes both more urgent and more complicated during and after a major disaster. Disaster management should be a collaborative effort and a priority.

Use this guide and its resources to improve child welfare agencies’ disaster management plans. The sections that follow outline likely obstacles and recommendations for all phases of disaster management, including mitigation and preparedness, response, and recovery. From start to finish, each of these phases requires careful planning, and the resources listed at the end of each section (and in the Index of Resources) will help agency staff members tasked with disaster management to design and implement plans to increase disaster preparedness, to respond to disasters, and to recover from disasters.
RESOURCES


What: This report details important measures that child welfare agencies should take before, during, and after a disaster. It includes extensive child-welfare-specific advice and contains detailed checklists to assist with agency disaster preparedness.

Where: http://muskie.usm.maine.edu/helpkids/rcpdfs/copingwithdisasters.pdf

Child Welfare Information Gateway: Disaster Preparedness and Response

What: This website provides links to many disaster-related resources for child welfare agencies.

Where: www.childwelfare.gov/highlights/disaster/prepare.cfm

Child Welfare League of America: Summary of S. 3525, the Children and Families Services Improvement Act of 2006

What: This concise report summarizes S. 3525, including its section on disaster preparedness.

Where: www.cwla.org/advocacy/pssfssummary06.htm

“NO ONE IS IMMUNE TO THE EFFECTS OF A DISASTER—AND IT IS IMPORTANT WE TAKE STEPS TO PREPARE.”

Suppose that a child welfare agency in a West Coast state is evaluating its written disaster plan and making improvements. With recent large-scale disasters in other parts of the country fresh in mind, administrators take an important step: they append their longstanding earthquake response plan to ready the agency for the kind of longer-term evacuation that might be required if huge storms or floods strike the region. Several months after the plan is updated, terrorists use a “dirty bomb” (also called a radiological dispersal device, or RDD) to attack a building near where many foster children live. Despite its newly updated disaster management plan, the agency is caught almost completely unprepared. Though provisions exist for serving families during short- and longer-term evacuations, staff and families are untrained in the procedures of “shelter-in-place.” The agency has no predetermined plan to reach out to families seeking safety within their homes.

SECTION 2: DETERMINE BIGGEST THREATS AND CONSIDER “ALL-HAZARDS”

While planning carefully for disasters that are most likely to strike a region, prepare an “all-hazards” disaster management plan that is adaptable to the widest range of possible events.

**LIKELY OBSTACLES**

There may never be enough resources allocated to child welfare agencies for disaster planning. This makes knowledge of likely disasters coupled with commitment to an “all-hazards” plan even more essential.

Child welfare agencies, like many organizations, may think more about the kinds of disasters that have occurred recently, overlooking other possible threats. An agency like the one described above may be extremely well prepared for some disasters and still be hit hard by other kinds of disasters.

**RECOMMENDATIONS**

Determine which disasters are most likely to occur in the region and learn how these threats might affect the agency. “Brainstorming sessions” may be helpful, but a “more formal approach is required” to “obtain the most accurate hazard analysis,” explains Jane’s School Safety Handbook. Agencies might choose to perform a “tactical site survey” that assesses the vulnerabilities of residential facilities and agency office buildings, as schools would. Of course, risk assessment is also necessary to protect children living with foster families. There are many ways to determine vulnerabilities and their potential impact on specific agencies, from hiring consultants to conducting self-assessments. Methods vary widely in cost. Agencies may choose to take advantage of community hazard assessments already performed by local offices of emergency management or public safety departments.

Become familiar with potential effects of the full range of disasters. The Federal Emergency Management Agency includes the following threats on its list of possible natural and man-made disasters: “Chemical; Dam Failure; Earthquake; Fire; Flood; [Hazardous] Material; Heat; Hurricane; Landslide; Nuclear; Terrorism; Thunderstorm; Tornado; Tsunami; Volcano; Wildfire.”

Prepare for “all-hazards.” “All-hazards” disaster management has become standard practice in disaster preparedness. It is important to have a disaster plan that accommodates the full range of...
possible catastrophes. Agencies should plan for both localized disasters and events that affect a large geographical area; for both evacuation or shelter-in-place; and for brief and long-term events.  

**RESOURCES**

**Ready America: Ready.gov**

What: An extensive disaster preparedness website. The “Be Informed” page explains the causes and effects of various natural and manmade disasters. The “Local Information” page provides a list of local agencies with preparedness responsibilities.

Where: www.ready.gov

**Centers for Disease Control and Prevention: Emergency Preparedness & Response**

What: A disaster preparedness website that includes disaster-specific pages with information about chemical agents, diseases, and other threats, from Anthrax to Wildfires.

Where: www.bt.cdc.gov

**National Oceanic and Atmospheric Administration: NOAA All-Hazards Monitor**

What: This website gives “detailed, current information on high-risk hazards as they occur,” including current radar and other weather data, and disaster alerts.

Where: www.noaawatch.gov

Department of Homeland Security: Homeland Security Advisory System

What: This website lets the public know the country’s current threat level (Low, Guarded, Elevated, High, Severel and discusses specific threats. In addition to the current threat level, the site lists “recommended activities” for the public.

Suppose that an agency has taken the important measure of assigning essential staff roles and responsibilities for disaster response. “Mike,” a supervisor, is in charge of initiating a phone tree to confirm that all staff members are safe. When a train carrying toxic chemicals derails in the area, Mike takes the appropriate measure by sheltering-in-place. His home phone is out of order so he cannot begin the phone tree. No other staff members know that someone needs to begin placing calls. Hours pass before agency administrators begin a haphazard attempt to contact everyone.

**SECTION 3: ALLOCATE RESPONSIBILITIES TO AGENCY STAFF MEMBERS**

Assign clear roles and responsibilities for disaster management to staff, and build in redundancy.

**LIKELY OBSTACLES**

If disaster management responsibilities are not allocated carefully, response plans may backfire. Amidst the chaos of a disaster, everything will become more difficult and stressful than usual. If jobs are not filled, or if the chain of command breaks down, safety will be jeopardized.

It is impossible to predict who will be available to work during a disaster. Staff members may be on vacation, or tending to family. Without built-in alternates, some disaster response jobs are bound to fall through the cracks, as in the above example.

**RECOMMENDATIONS**

Assign a specific staff member(s) to coordinate disaster management. For disaster preparedness to be efficient and effective, specific individuals must be charged with disaster management planning. This means coordinating all phases of disaster management: mitigation and preparedness, response, and recovery—and planning before a disaster occurs. This must happen at the system-wide level as well as within field operations.

Anticipate staffing needs required during disaster response. One useful strategy would be to form a central office team composed of front-line personnel, supervisors, regional managers, local managers, and others to address and plan for staffing issues, such as: reallocation of staff during and after a disaster, deployment of staff from other offices to pick up children of essential personnel at first sign of a disaster, the staffing of emergency shelters (if required of the agency), etc.

Inform staff members what is expected of them during and immediately following a disaster. What will the agency need to do to respond to the disaster? What is the chain of command? Who is qualified to perform each task? What are the essential functions of the agency? What day-to-day work must continue no matter what? Who will accomplish this work? When possible, align staff members’ disaster responsibilities with their job descriptions.
Make sure that an adequate number of alternates are assigned to each role. Build in redundancy. Planning should include an organizational succession plan in case the planned chain of command collapses. Decide who will perform a task if the person assigned is unable? And if the next person is unable?

Prepare to perform Emergency Support Functions required by federal and state governments as well as to enact plans to protect children and families being served by the agency. In addition to protecting the children and families they serve, child welfare agencies will more than likely be required to play a role in the broader emergency response. The federal government organizes the national emergency response around the National Response Framework (NRF), which details the various Emergency Support Functions (ESFs) that must be carried out by various agencies. Depending on the state, child welfare agencies may be responsible for an ESF—such as staffing emergency shelters, as is the case in Louisiana—and these responsibilities must be handled at the same time that agencies carry out the work of protecting children and families in state care. See Section 6 for further information about the National Response Framework and Emergency Support Functions.

“DISASTER PLANS SHOULD USE AN ALL-HAZARDS FRAMEWORK.”

**SECTION 4: PUT DISASTER MANAGEMENT PLANS IN WRITING**

Plans addressing all phases of disaster management should be captured in a concise, clearly written document and kept at all staff members’ fingertips.

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**LIKELY OBSTACLES**

Unwritten disaster plans could be quickly forgotten with frequent agency staff turnover. If a plan is not written down, how will new staff members learn it?

Disaster plans that are written down can be lengthy and cumbersome, making them difficult to learn and follow. Long and dense plans that rely heavily on jargon, codes, and acronyms—like the one described in the scenario above—may end up being misunderstood or may remain unread. Ada Dolch, who was Principal of the High School of Public Service in New York City during the September 11 attacks, explains that “viable safety plans must be genuine tools of management,” and warns that very long plans are likely to be “submitted and then not used because of their length.”

Overtaxed agencies might feel they do not have the time to write out thorough disaster management plans. Child welfare agency administrators and staff who are burdened with pressing work may balk at the idea of taking the time to write out plans that reach beyond minimum requirements of a bare-bones disaster response. They may be under the false impression that a disaster could never strike their area. Or, they may be so busy on a day-to-day basis that they find it very difficult to focus on possible crises in the future.

---

**RECOMMENDATIONS**

Put agency plans in writing. In coordination with other offices, each office should have written plans for disaster response that are specific to their own circumstances and staffing—plans that include telephone trees, chains of command, lists of essential staff members, etc. Information about each office’s disaster response plan should be on file at a central location, and backed up electronically.

Keep written plans handy and at the forefront of the minds of agency staff members. Plans, though written down, should also be part of the everyday lives of agency staff. Once the written disaster response plan is developed, essential staff are identified, and roles are established, it may be a good idea to create a succinct “cheat sheet” for each essential staff member to keep available—at work and at home, in written and electronic forms.

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Suppose that a child welfare agency makes an extraordinary effort to assess its current disaster plan and revise it thoroughly. Agency staff members take the essential measure of writing down the new plan, which offers a detailed account of how the agency will mitigate and prepare, respond to a disaster, and help families recover from the full range of possible events. The agency prints its disaster plan and distributes it to all agency staff. After this tremendous effort, however, the plan just sits on a shelf. At an overwhelming length of 200 pages, the plan remains unread by many. And, as months pass and staff turnover, fewer and fewer people at the agency are knowledgeable about the plan. When disaster strikes, everyone is caught unprepared.
Address all phases of disaster management in written plans. It is crucial to put in writing the steps an agency will take during all phases of disaster management: mitigation and preparedness, response, and recovery. Each phase requires planning. In addition to knowing that the agency will have to get children back in schools during the recovery phase, for example, agencies must plan and document how they will make this happen.

Write disaster response plans in a concise and clear format. Keep disaster plans as simple and accessible as possible, with as little jargon and as few acronyms as possible.

**RESOURCES**


What: This article in ERCMExpress includes a section called “Creating Plans Based on the Four Phases of Emergency Management.” It gives clear descriptions of each phase, along with suggestions for schools, which may be adaptable to similarly child-centered child welfare settings.


Disaster Recovery Journal: Disaster Recovery Planning (Part II of III)

What: This article, written by Geoffrey H. Wold, contains two helpful sections on formatting and writing a disaster plan (scroll down to “Standard Format” and “Writing Method”).

It also contains useful suggestions such as “use position titles (rather than personal names of individuals) to reduce maintenance and revision requirements.”

Where: www.drj.com/new2dr/w2_003.htm

“DUPLICATION IS NOT OVERKILL IN DISASTER PLANNING.”

Marketa Gautreau, Assistant Secretary for the Louisiana Office of Community Service.
Suppose that a local child welfare agency decides to take the important step of assessing and improving its disaster management plan. A team of five staff members reviews the agency’s existing plan and makes numerous recommendations. The team suggests: holding emergency planning training sessions for staff and families, equipping each child welfare manager with a satellite phone, hiring a new staff member to maintain the disaster management plan, overhauling the agency’s record-keeping software, and stocking each foster family’s home with a disaster supply kit. Each of these measures would surely improve preparedness or facilitate disaster response. To enact them at once, however, would prove very costly. Though many big improvements to the agency’s disaster management plan are proposed, none is actually carried out.

SECTION 5: BUDGET FOR DISASTER MANAGEMENT

Determine priorities, in order to create the best possible disaster management plan within the existing budget, and take measures to increase funds, when needed and possible.

LIKELY OBSTACLES

Ignoring budgeting constraints could make disaster management plans unfeasible. Proposing plans that are too expensive may mean that fewer preparations are made, as occurs in the example above.

RECOMMENDATIONS

Keep budget limitations in mind when designing disaster plans. Create the best possible disaster management plan with the resources available. “What you don’t want is unfunded mandates,” explains Dr. George Foltin, Associate Professor of Pediatrics and Emergency Medicine at New York University Langone Medical Center and co-editor of Pediatric Terrorism and Disaster Preparedness. “Figure out what your gaps are and what money is available, and make intelligent decisions.”

Maximize the utility of funds by simultaneously improving agency preparedness and day-to-day operations. Many disaster preparedness measures can serve a “dual-use,” explains David Berman, Associate Director of the New York University Center for Catastrophe Preparedness and Response. Training agency staff to monitor children for trauma and help them cope with bereavement can also be beneficial when there is no major disaster, for example.

Advocate for and apply for funds to improve disaster preparedness and management plans. Whenever possible, agency administrators should make funding for disaster management planning a priority.

RESOURCES

Congressional Research Service: Federal Disaster Recovery Programs: Brief Summaries

What: This report “summarizes federal disaster assistance programs for possible use by Members of Congress and staff in helping address the needs of constituents.” It may help alert child welfare administrators to grants available for improving disaster preparedness.

Suppose that a child welfare agency has a strong disaster plan in place. But when other agencies meet to devise state evacuation plans, the child welfare agency does not participate. Then, a major disaster strikes, separating hundreds of children from their families and scattering them to shelters across the state. Many of these children are preverbal and cannot tell shelter workers their names. Plans to protect children in state care are fully derailed when the agency is suddenly responsible for hundreds of new children. When this situation is resolved, the agency realizes there is another major flaw in its plan. Because it did not collaborate with other agencies, some families do not receive TANF and cannot use their Medicaid cards. Families out of state are unclear which agency—old or new—they should work with. The disaster plan, strong in isolation, quickly unravels when other agencies are involved.

**Likely Obstacles**

Child welfare agencies that do not coordinate and collaborate with other human services agencies and community groups may sacrifice the safety of children, families, or staff. Without collaboration, families might not receive needed income maintenance, as in the scenario above. Even a strong disaster management plan weakens if it conflicts with other agencies’ responses.

Child welfare agencies are likely to have at least two sets of responsibilities during a disaster. As described in Section 3, agencies may be charged with fulfilling an Emergency Support Function as part of the national disaster response, while also needing to carry out plans to protect children and families being served by their agencies. Without coordination, disaster response may be hindered.

Child welfare agencies that do not collaborate with other state and local agencies on disaster planning and response may miss an important opportunity to discourage the practice of separating children from families during evacuation. During the Hurricane Katrina evacuation, many children were separated from their families. This left even the youngest children scared and alone at shelters, while also creating bureaucratic problems for child welfare staff.

**Recommendations**

Coordinate preparedness efforts with states. Don Winstead, Deputy Secretary of the Department of Children and Families in Florida, a state that has weathered numerous serious hurricanes during the past several decades, recommends vertical and horizontal alignment of child welfare agency disaster response plans with robust state plans as well as with the plans of contracted providers. Winstead suggests one possible way to accomplish this alignment: providers’ plans may be appended to the agency’s plan, which in turn may be appended to a state plan. Working with states, agencies may also wish to have policy waivers and executive orders in place in advance of a disaster—waiving select licensure requirements during recovery, for example—to help them serve children and families.
Coordinate preparedness efforts with Offices of Emergency Management. These offices may be able to help facilitate and simplify important phases of disaster planning, for example, by sharing hazard vulnerability analysis and family preparedness materials.

Coordinate disaster management plans with contracted providers. All contracted providers should have disaster plans that follow a common format and are on file with their primary contracting agency.

Make sure that child welfare agencies are full partners with other social service agencies at the state level and active partners at the local level. Participate in collaborative disaster management planning and drills on the state and local levels whenever possible. This provides agencies with a good opportunity to learn best practices from other agencies. For example, without written agreements that permit families to receive an emergency Medicaid card in another state, the health of children and families may be at serious risk. Because the incidence of domestic violence will likely increase following a disaster, child welfare agencies should collaborate with agencies and providers working to prevent domestic violence to protect victims after a disaster. Regarding agency collaboration in general, the Finance Project recommends: “Integrating management of emergency response and recovery efforts; Engaging in collaborative disaster planning and preparation; Developing partnerships to address unmet needs or vulnerabilities; Building in operating flexibility; Cross-training staff; Co-locating essential human services to make them more accessible to those in need; and, Developing shared information and communication systems.”

Establish written memoranda of understanding with police departments, fire departments, and schools. Developing such written agreements at the local level will help ensure the smoothest possible disaster response.

Collaborate with school authorities concerning individual children in state care. Because children spend much of their time in schools, social workers, parents, or foster parents will want to share personal disaster response plans with school authorities to ensure that children are reunited with parents and caregivers in the event of a disaster.

Coordinate disaster preparedness with other states’ child welfare agencies, and establish memoranda of understanding to facilitate disaster response and recovery. In the event of major disasters, children have in the past been moved to other states. Should this happen in the absence of stable relationships among agencies, tracking and serving children in their new temporary or permanent locations may prove extremely difficult. Thinking about how such a situation might unfold and establishing written agreements with other state child welfare agencies in advance of an incident may be the minimum measure required to prevent conflict over jurisdiction and to provide necessary services to children and families. On occasion, agencies may be called upon to assist neighboring jurisdictions during and after a disaster. It may be helpful to determine in advance which staff members can lend help without interrupting services to families in the agency’s own jurisdiction. Agencies in states that share a border with Canada or Mexico should plan accordingly.

Collaborate with community groups to ensure that vulnerable children and families are protected as well as possible during a disaster. These organizations often have close relationships with vulnerable children and families. If an agency does not work with these organizations, disaster management may be less effective.

Coordinate plans for disaster response and recovery with courts. Agencies should anticipate limited access to courts following a disaster, and plan accordingly. Memoranda of understanding should be established with the courts detailing alternate ways of taking children into care after a disaster. And because court services are essential to children in the care of the state, agencies will want to learn where a court will move if hit directly by a disaster. They may also want to find out how essential court records will be preserved, what kinds of cases will be continued, and what kind of laws will be temporarily suspended in the event of a disaster. Also, with the help of the court, agencies may want to think about what kinds of confidentiality issues will raise obstacles to disaster response and recovery efforts, as well as how they can best preserve child confidentiality when an emergency occurs. As the Honorable Ernestine S. Gray, Judge of the Orleans Parish Juvenile Court in New Orleans
explains, it is important to think about how courts will hold hearings. Will there be video conferencing, for example? If so, is the necessary equipment available?

Coordinate disaster management plans with government plans for a national disaster response. Current federal disaster plans, detailed in the National Response Framework (NRF), call for numerous Emergency Support Functions (ESFs) to be fulfilled by various agencies. Agency staff members should be fully aware of their agency’s role in the national response, whether it be staffing special needs shelters—as was required of child welfare staff in Louisiana after Hurricane Katrina—or providing other services. Agencies should consider these responsibilities when designing or revising their disaster plans. See Section 3 for more information on the NRF and ESFs.

Coordinate plans for disaster response and recovery with relief organizations such as the American Red Cross. The Red Cross may handle ESFs—like sheltering—similar to those sometimes held by child welfare agencies. In addition, local chapters of the Red Cross will often accept invitations to offer disaster preparedness seminars. Such sessions may be useful for staff members and for children and families.

Incorporate government standardized disaster management terms and practices into agency plans. The NRF relies on several related systems to standardize disaster response across states and agencies. If a disaster were to strike a residential facility, as in the above example, these systems are intended to help organizations to offer a unified response without confusion about language, chain of command, and equipment. The National Incident Management System (NIMS) “represents a core set of doctrine, concepts, principles, terminology, and organizational processes that enables effective, efficient, and collaborative incident management.” NIMS is written to be adaptable to emergencies of all varieties and magnitudes. It aims to help jurisdictions and organizations to coordinate with one another during a disaster. Agencies may want to offer NIMS training to staff members with key disaster planning and response responsibilities.

Remember to forge and nurture relationships in advance of a disaster. “The time to engage in training and build relationships is not the day after a disaster,” explains Theresa A. Bischoff, CEO, American Red Cross in Greater New York. Agencies may want to designate liaisons who can build and maintain these relationships. Given the likelihood of staff turnover both within the agency and within other organizations, contact should be made early and often.

RESOURCES

The Finance Project: Managing in Emergencies: Enhancing Collaboration for Human Services

What: This 12-page report offers information and advice about collaboration during disasters. It also provides specific strategies for readers and further resources on “Collaboration and the Provision of Emergency Human Services.”

Where: [link]


What: This website “focuses on response and short-term recovery, articulates the doctrine, principles and architecture by which our nation prepares for and responds to all-hazard disasters across all levels of government and all sectors of communities.” The site includes extensive information about the NRF along with an annex detailing Emergency Support Functions.

Where: [link]


What: This website is a portal to resources related to NIMS, which was developed so “the responders from different jurisdictions and disciplines can work together better to respond to natural disasters and emergencies, including acts of terrorism.”

Where: [link]
**Suppose** that large storms hit a city that houses the state child welfare office. The office, which is in a high-rise building, is flooded, and needs to be evacuated. The storms also affect several adjacent neighborhoods, where a third of the city’s foster children live. It is time to activate the agency’s disaster response plan, but staff must evacuate the office. Staff members are unable to gather essential disaster management documents, files, and communication equipment without risking their safety. Because the agency did not prepare to manage a disaster from an alternative location, staff members cannot carry out plans to protect children and families from the storms and floods.

**SECTION 7: PREPARE TO MANAGE DISASTERS THAT STRIKE AN AGENCY OFFICE**

Plan to protect staff and carry out disaster management plans, even in the event that a disaster directly strikes agency offices.

**LIKELY OBSTACLES**

A disaster that strikes an agency office can be dangerous for everyone in the building. An unmanaged emergency puts the staff’s safety at greater risk.

If a disaster affecting the greater community also shuts down the agency office, as in the example above, it may become difficult for the agency to enact its disaster response plan. If the plan does not accommodate a possible office shutdown, the agency may not be able to protect children and families as well as it might have.

If a disaster shuts down an agency office, crucial services to children and families may be disrupted during recovery. Without planning, agency work may become difficult to impossible following the loss of usual office space.

Children and families may be visiting the agency office during a disaster. They may be at risk if not incorporated into the office’s disaster response plan.

**RECOMMENDATIONS**

Plan to manage disasters that strike offices directly. Make plans to respond to all hazards that may affect the building. Disaster management planners should consider basic questions such as how power or water can be shut off if necessary, whether there are phones that work without electricity, whether emergency exits are clearly marked, etc. Agencies should consider: if children and families may be in the building, how will they be kept safe?

Minimize the office building’s susceptibility to damage caused by disasters. Make sure paper files are as protected as possible from possible flood or fire, for example. It might also be a good idea to share office blueprints with police or fire departments.

Post emergency instructions for the full range of possible disasters where everyone in the office can easily read and reference them. When disaster strikes, people may be overwhelmed and forget what to do. A colorful instruction sheet may help keep staff members safe.
Integrate disaster response plans for the agency’s office building into the larger disaster management plan. If disaster strikes the office and the larger community, agencies need to be prepared to protect staff members and forge ahead with the response. Be prepared for an evacuation. Consider: Where will staff go to continue work? What will they bring? How will they be accounted for? Prepare to shelter-in-place at the office, if this is required. How will the building be sealed? What supplies—including food and water—will be stocked in the office? Will emergency generators be required? How will staff members with special needs be helped during an evacuation or shelter-in-place?

RESOURCES

U.S. Department of Labor’s Occupational Safety and Health Administration: Evacuation Plans and Procedures eTool

What: This website aims to help small businesses to write an Emergency Action Plan, and it may be of some help to agencies who need to incorporate office disaster management into their larger disaster management plan.


U.S. Department of Labor’s Occupational Safety and Health Administration: Fact Sheet: Evacuating High-Rise Buildings

What: This two-page fact sheet offers information about evacuating buildings taller than 75 feet in the event of a disaster. It includes checklists for both employers and staff.


“THE TIME TO ENGAGE IN TRAINING AND BUILD RELATIONSHIPS IS NOT THE DAY AFTER A DISASTER.”

Theresa A. Bischoff, CEO, American Red Cross in Greater New York.
Suppose that “Megan” (age 4) is new to the child welfare system when a tornado warning is issued in the Midwestern town where she lives. Megan, who has not yet adjusted to her home and foster family, is frightened, and she resists her foster mother’s efforts to bring her to the basement. Though Megan and her foster mother eventually find safety from harm downstairs, a tornado causes significant damage to the house, destroying its roof and scattering its contents. Megan is suddenly without all of her important documents—including her birth certificate and immunization history—and the asthma inhaler she needs.

SECTION 8: ENSURE THAT FAMILIES AND PROVIDERS HAVE VIABLE DISASTER PLANS Help families and providers to develop individualized disaster plans, and stay up-to-date as these plans change.

LIKELY OBSTACLES

Families served by the child welfare system often have limited financial resources, which can make both evacuation and shelter-in-place more difficult. Being prepared for disasters can be costly. Evacuating, even for short time periods, can require spending extra money on transportation and food. People with less money are less likely to have friends and family outside their immediate area, which may mean spending more money on a place to stay. Preparing to shelter-in-place also requires funds for supplies. The bigger a disaster is, the larger the disadvantage these children and families face. These considerations apply both to foster families as well as biological families receiving supervision and other services from the child welfare agency.

Providers who are responsible for services to children and families in agency care may not have an adequate disaster management plan. Without such a plan, children and families will be in greater danger during a disaster. The case of residential educational facilities for foster youth that were struck by the California wildfires of October 2007 reminds us that providers are vulnerable too. Providers also must perform the same disaster management planning undertaken by the agency and families. Such planning could be required as part of the contract process.

Children in state care often face new and different surroundings. While other children might be familiar with their home’s safest areas and know where their parents are likely to be found in an emergency, children like “Megan” need to be taught early and reminded often about their foster family’s disaster plan.

Children in foster care may also want to stay in touch with biological families during and after a disaster. Children evacuating or sheltering-in-place with their foster families may also be anxious to know that their biological parents and siblings are safe, and vice versa. This may require a higher level of coordination than other families’ disaster plans.

Domestic violence has been shown to increase during and after disasters. As reported in a 1997 study of Florida’s major 1992 hurricane, Hurricane Andrew, “The pressures of coping in post-Andrew south Florida sometimes escalate into acts of violence. In a survey of 1,200 homes conducted for the Florida Department of Rehabilitative Services two months after Andrew,
35 percent reported that someone in their home had recently been stressed to the point of losing verbal or physical control...Reports of domestic violence increased...The switchboard of Miami’s Helpline reported a 50 percent increase in spousal abuse calls.* Accessing local law enforcement as well as the domestic violence provider community will become more difficult during and after a disaster. Some child welfare cases involve domestic violence, including those cases where children remain in the home. If this is not accounted for in disaster plans, children and families may be in jeopardy.

RECOMMENDATIONS

Ensure that biological families, foster families, and group care facilities have disaster plans in place. Preparedness may be daunting to supervise, considering the caseload of agency staff members. At a minimum, however, families—foster families as well as biological families receiving services from the agency—and group care facilities must have essential supplies for sheltering-in-place as well as a basic evacuation plan that includes the provision of medical coverage at their destination. In addition, the needs of medically fragile children in foster and biological homes should be specifically addressed by each family’s disaster response plan. If agencies want help with preparedness education, local chapters of the American Red Cross are often willing to come to offices to conduct preparedness seminars and offer advice.

Ensure that family and provider preparedness is routine and required. Determine how the agency will educate biological families, foster families, and group care facility administrators about the most important elements of preparedness, namely plans for evacuation and shelter-in-place. Making disaster planning a routine part of foster parent training and certification is one recommended option. As part of this process, staff members may want to inquire about a family’s kin connections; they could be important to a successful plan. It is also critical to establish a system to receive regular updates from all caregivers, whether biological families, foster families, or group care facilities. Updates should be scheduled at the beginning of storm season, if there is one in the area, and at a minimum of once each year in any location.

Ensure that families have an adequate supply of prescription medication in their disaster kits. Families should refill necessary medicines well before their supply runs out. Prescription refill regulations may vary by medication, region, or insurance company. Double refills may be allowed during storm season and some insurance companies may suspend refill waiting periods when a storm watch is in effect.

Urge families strongly to consider the following suggestions when making their plans: both short- and longer-term evacuation plans (for hurricanes, terrorist attacks, and many other large-scale disasters) should be established. In both instances, families should decide where they will evacuate, how they will get there, and what they will bring. Selecting one nearby and one out-of-town meeting point should help accommodate a range of possible disasters. Families and providers should also make shelter-in-place plans (for some chemical threats and other localized disasters, for example). Families should discuss how they will secure their homes and providers should decide how they will secure their facilities in the event that it is safest to wait out a disaster there. Families should decide how they will find each other in the event of a disaster. Each family member should carry with him or her (perhaps on a laminated card) emergency contact numbers and email addresses for the other foster and biological family members. Also useful would be contact information for a friend or relative in another area who might help family members find each other if in-area calling is impossible. Families with individuals with special needs should make necessary plans to accommodate these needs.

Educate caregivers about how to discuss their disaster plan and its various contingencies with children in a sensitive and age-appropriate manner. Disaster planning should be approached carefully so children will not be unduly frightened. But, plans may need to be explained in order for children to remember and follow them.
Inform families which supplies are necessary for evacuation and for shelter-in-place. Supplies should be collected in advance and stored in one easily accessible, waterproof location. Items required for evacuation should be kept in a portable bag, for example, a backpack. The American Red Cross and FEMA recommend that the following items all be included in disaster kits: “Three-day supply of non-perishable food and manual can-opener; three-day supply of water (one gallon of water per person per day); portable, battery-powered radio or television and extra batteries; flashlight and extra batteries; first-aid kit and manual; sanitation and hygiene items; matches in water-proof container; whistle; extra clothing and blankets; photocopies of identification and credit cards; cash and coins; special items such as prescription medications, eyeglasses, contact lens solution, and hearing aid batteries; tools, pet supplies, a map of the local area, and other items to meet your unique family needs.” Agencies may want to consider providing selected essential supplies to biological and foster families, if this is viable within budget constraints. Encourage families to include in disaster supply kits a few items that might calm children during a disaster. Disasters can be frightening to children and small comforts may be especially welcome. Families may also want to take steps to safeguard children’s irreplaceable photos or keepsakes.

Carefully consider situations involving possible domestic violence when monitoring family disaster response plans. In Florida, a state that has been struck by numerous serious hurricanes in recent decades, domestic violence has been shown to increase after a disaster. It is therefore important to keep in mind the safety of those at risk of domestic violence when helping families devise disaster response plans.

Help families to plan to care for their pets. Since the Gulf Coast hurricanes, area disaster plans are more frequently including pet shelters that coordinate record keeping with shelters for humans, so that pet owners do not lose track of their pets. A list of such shelters may be made available to families.

RESOURCES


Federal Emergency Management Agency and the American Red Cross: Preparing for Disaster

What: This 14-page guide offers families step-by-step instructions on how to (1) get informed, (2) make a plan, (3) assemble a kit, and (4) maintain your plan and kit. It is clear and comprehensive, with information on natural disasters and terrorism, on evacuation and shelter-in-place. Agency staff may need to supplement with information on how to prepare children in a sensitive manner. Where: www.redcross.org/images/pdfs/preparedness/A4600.pdf

Federal Emergency Management Agency and the American Red Cross: Helping Children Cope with Disaster

What: This 12-page guide instructs parents and caregivers how to help children prepare for and cope with disasters. It provides instructions tailored to specific age groups. Where: www.fema.gov/pdf/library/children.pdf
U.S. Department of Health and Human Services: Disasters and Emergencies

What: This website provides information for families (as well as for businesses and responders) on how to plan for, prepare for, and respond to natural and manmade disasters. The “Natural Disaster” page and “Man-Made Disaster” page include a compilation of user-friendly fact sheets about how to respond to specific disasters from the CDC, the EPA, FEMA, and other organizations.

Where: www.hhs.gov/disasters

American Academy of Pediatrics: Family Readiness Kit

What: This 35-page kit is a colorful and accessible resource that instructs families on the nuts and bolts of being prepared for natural disasters. It includes preparation checklists for different natural disasters. Also available in Spanish (without checklists).

Where: www.aap.org/family/frk/frkit.htm

Centers for Disease Control and Prevention: Keep It With You: Personal Medical Information Form

What: This two-sided form is intended to be a “temporary record” detailing medical history and care for use during disasters, when records might be inaccessible. It is a simple form that can be partially filled out in advance and included in disaster kits.

Where: www.bt.cdc.gov/disasters/kiwy.asp

Ready America: Family Emergency Plan Worksheet

What: This two-page form can help families to design and remember their emergency plans. It asks for contact names and telephone numbers, the location of the regional meeting place, an evacuation location, etc.

It also includes templates for wallet-sized emergency plan cards that can be cut out and laminated.

Where: www.ready.gov/america/makeaplan

Florida Department of Children and Families and Florida’s Coalition Against Domestic Violence: Survive Domestic Violence AFTER the Hurricane

What: This brochure discusses the increased risk of domestic violence following a natural disaster and provides concrete advice for at-risk individuals.

Where: www.aecf.org/~/media/PDFFiles/DisasterGuide/Resource%208H.pdf

National Center for Missing & Exploited Children: Know the Rules: Safety Tips for Children Displaced in Natural Disasters and Their Caregivers

What: This tipsheet offers basic guidelines for keeping children safe during a disaster. It could be usefully posted in shelters.


PETS 911: Pets911.com

What: This website offers a directory of local emergency veterinary clinics, which is searchable by zip code, that may be able to help families protect their pets during a disaster.

Where: www.pets911.com
Suppose major floods hit a southeastern coastal region. Child welfare caseworker “Jillian” has an essential role in her agency’s disaster plan, but also wants to make sure her family is safe. Though Jillian is a dedicated worker, she evacuates with her husband and young daughter to a relative’s house 200 miles away, planning to return as soon as her family is safely settled. Travel is more difficult than Jillian anticipates, and it takes her four days to get back home. Jillian’s essential disaster response role, keeping track of children put in state care as a result of the disaster, remains unfilled.

SECTION 9: PREPARE TO PROTECT THE FAMILIES OF AGENCY STAFF MEMBERS ESSENTIAL TO DISASTER RESPONSE

Protect the families of staff members with essential roles in the agency’s disaster response so that these staff members can report to work and focus on their jobs.

LIKELY OBSTACLES

Fear for the safety of their own families may likely keep agency staff members with essential jobs from reporting to work. Even as staff members search for a safe place for foster families to live, they also may, like “Jillian,” be looking for a place for their own families to stay. A 2005 study of over 6,000 health care workers in New York found that between roughly 20 and 50 percent of workers would be unwilling to report to work during a disaster, with highest absenteeism for biological and radiological events. Workers named “concern for family” as the number one barrier to their willingness to work. Just as many physicians need to know that their loved ones are safe in order to do their important work, many child welfare agency staff members require the same. If staff members are unwilling to report to work during a disaster, response and recovery plans may be entirely ineffective.

RECOMMENDATIONS

Some agency staff members will be essential while a disaster is unfolding. Determine who these staff members are and plan to bring their families and pets to safety quickly so that staff members can concentrate on their jobs. Though this may seem to some administrators like an extravagance, these provisions may be the bare minimum required for staff members to work effectively or at all during a disaster.

Speak with essential staff about what their families would need to be safe. Finding out staff members’ biggest concerns may improve worker turnout when disaster strikes.
Suppose that “Neal,” a dedicated child welfare caseworker, is very diligent about soliciting disaster plans from the children and families he serves. Importantly, he keeps families’ contact information current, advises families to refresh disaster supplies, and makes sure family disaster plans are explained to children in a sensitive manner. Despite taking these essential measures, he, like the doctor who doesn’t make time for his or her own check-up, somehow never gets around to creating a disaster plan for himself and his family. When disaster strikes, Neal is injured. When immediate danger has passed and Neal is supposed to report to work, he is unable to do his job because he must address his family’s needs.

SECTION 10: ENSURE THAT AGENCY STAFF MEMBERS HAVE VIABLE PERSONAL DISASTER RESPONSE PLANS

Require agency staff members to develop personal and family disaster plans that keep them safe and allow them to return to work when needed.

LIKELY OBSTACLES

Dedicated child welfare staff members who help children and families to prepare for disasters may nevertheless neglect their disaster plans. “Only seven percent of Americans are prepared,” reports Theresa Bischoff, CEO, American Red Cross in Greater New York. If staff members like “Neal” fail to keep themselves safe, they will not be able to help others.

RECOMMENDATIONS

Make sure staff members know how to contact the agency in the event of a disaster. Whom should they call to check in? Do they have cell and home phone numbers of supervisors and other leaders? What if the phones are not working? More information may be found in Section 11.

Verify that staff members’ disaster plans are compatible with their work responsibilities during a disaster. Hopefully, the agency will be prepared to protect the children and families of staff members who must work during disasters (more information may be found in Section 9). These plans should be taken into account in staff members’ personal disaster plans. Many agency staff members will have disaster management responsibilities, and staff members’ personal plans should fit with their jobs as well.

Keep staff members’ disaster plans on file and update them regularly. Plans, which should include out-of-area emergency contact information, a designated location where the worker will evacuate, and other important information, should be filed with the agency office and kept current.

Require that agency staff members create strong personal disaster plans. Staff members should be held to the same high standard as children and families being served, and they should follow the same recommendations (more information may be found in Section 9) for designating an emergency contact, planning for evacuation, planning for shelter-in-place, assembling disaster supplies, planning to protect pets, accounting for special needs, etc.
Suppose that one child welfare agency has established what seems to be a strong disaster communications plan: the agency has designed a phone tree to track staff members and initiate its disaster response plan; it has contracted an out-of-state company to operate and staff a toll-free number that families may call during and after a disaster; and it has assembled a database of current emergency telephone numbers for all staff, providers, foster families, and biological families. When a major disaster strikes the area, landline telephones stop working, and mobile phones are jammed within the local area code. Without sufficient communication systems available, the agency is slow to enact its disaster response plan. Frantic biological parents must wait to hear that their children are safe, and weeks pass before the agency makes contact with all families being served.

SECTION 11: PREPARE TO COMMUNICATE WITH AGENCY STAFF, PROVIDERS, CHILDREN, AND FAMILIES DURING AND AFTER A DISASTER

Establish specific and redundant plans to track and communicate with staff, providers, children, and families during a disaster.

**LIKELY OBSTACLES**

Communication systems may fail. During and after natural or man-made disasters, usual methods of communication—including landlines, mobile telephones, text messages, PDA messages, traditional email, websites, television, and radio—may be partially or entirely inoperable, as in the above example. If agencies are unable to communicate with staff, providers, or with children and families, they may be unable to enact disaster response plans or to monitor the safety of staff and individuals being served.

The unique needs of the child welfare population make communication during a disaster both more important and more complicated. Agency staff, foster parents, residential facility staff, and biological families will all be concerned about and may be responsible for the safety of children in the agency’s care during a disaster. If communications systems are down or contact information is unknown, it may be extremely difficult for agencies to keep track of and help everyone.

**RECOMMENDATIONS**

Establish redundant systems of communications for use during and after a disaster. Agencies will need to create a communications plan that accounts for the major technological considerations—thus, it is not just a public affairs plan, but a communications plan designed to support operational integrity and coordination of efforts on behalf of children and families. As the Finance Project’s strategy brief Managing in Emergencies states, “shared information and communication systems are essential to coordinate disaster response and recovery efforts. Groups on the ground need access to real-time information as a disaster unfolds so they can assess and prioritize needs, coordinate their efforts with others, and address unanticipated developments. One of the tragic lessons of 9/11 was that the failure to properly equip emergency responders with communication devices in New York City significantly undermined the efficacy of the first responders because they could not obtain accurate information about the disaster and recovery efforts.”

Make sure you have the necessary technology to operationalize communications systems. Because it is impossible to predict exactly which...
communications systems will be working, agencies should plan to employ at least several. They will likely need to provide special equipment to agency staff. “Satellite phones can be a more reliable means of communication than cell phones, depending on the circumstances,” suggests Carolyn Atwell-Davis at the National Center for Missing & Exploited Children which deployed “Team Adam” to help reunify displaced children with their families after hurricane Katrina.22 Agencies may want to consider establishing a phone tree, a mass email system, and/or a text message blast to communicate with agency staff and families. Coping with Disasters and Strengthening Systems advises that agencies take the following measures: laptops will most likely be a component for a strong communications plan—make sure adequate battery power is available; “explore getting computers or mobile computing technology into the hands of as many staff and managers as possible”; in addition to satellite phones and computers, text messaging, blackberries, radios, powerful walkie-talkies, and GPS locators (if streets become unmarked) may be an important part of a strong disaster communications plan.23

Record contact information electronically, online and in out-of-area locations. If agency offices are shut down during a disaster, agencies will still need information to contact staff members, children, and families. Agencies might consider providing administrators with thumb drives containing emergency contact information, suggests Don Winstead, Deputy Secretary of the Florida Department of Children and Families.24 See Section 12 for further advice about electronic records.

Establish out-of-state 800 numbers in advance of a disaster and publicize the numbers. The call center contracted should be located out of state, toll-free from any location, and accessible to people with disabilities. Coping with Disasters and Strengthening Systems: A Framework for Child Welfare Agencies recommends: “It is helpful to draft scripts specifying what information you want from families, providers and youth who call in i.e., Are you safe? Where are you? How long do you plan to stay? Any problems we can help you with?l. Also consider what information you want to provide i.e., how to access services, information on the status of siblings, parents or children.”

In addition to phone lines, provide other clear ways for staff members, providers, children, and families to access information. Agencies should post information for staff members, providers, children, and families on a central website. Consider preparing pre-recorded television and radio messages that can be accessed and shared with the media during a disaster. It is a good idea for contracts with providers to be specific about requirements for disaster communications.

Educate staff about the National Emergency Child Locator Center (NECLC), established by the National Center for Missing & Exploited Children (NCMEC). Federal law established the NECLC within NCMEC and set forth a number of responsibilities, including the operation of an 800 number staffed 24 hours per day during disasters. The NECLC was activated during the California wildfires of 2007 and hurricanes Ike and Gustav in 2008.26

Channel all information to the public through a Principal Information Officer (PIO) or spokesperson. This “will maximize the likelihood of presenting consistent and accurate information to the public,” the Office of Safe and Drug-Free Schools advises.27 Agencies should help the media to help them. Internet and television news can be powerful tools for reuniting any separated children and families, explains Carolyn Atwell-Davis, Director of Legislative Affairs for the National Center for Missing & Exploited Children.28 Children’s privacy and confidentiality need to be carefully safeguarded during this process.

RESOURCES

JustPartners Inc. for the Annie E. Casey Foundation: Creating an Online Lifeline: A Web Portal for Emergency Preparedness and Disaster Recovery

What: This toolkit provides instructions for communities and organizations on how to develop a web portal for communicating critical information before, during, and after a disaster. Each of the seven sections begins with an easy reference preview of the content.

Where: www.aecf.org/~/media/PublicationFiles/AECF_Online_Lifeline_Final1.pdf
Suppose that wild fires engulf an entire region, decimating two child welfare offices. Thanks to the agency’s disaster response plan, no one is injured. But, all of the agency’s records, stored at its offices, are destroyed. Without information about children’s case histories, current placements, special needs, court deadlines, and permanency plans, the agency is in utter chaos. Months pass before all children being served are back on track.

**SECTION 12: PREPARE TO PRESERVE AND ACCESS ESSENTIAL RECORDS DURING AND AFTER A DISASTER** Back up essential records and protect them from disaster-related damage so that they may be accessed when needed.

**LIKELY OBSTACLES**

Paper files may be destroyed during a disaster. Disasters of all kinds can render paper records temporarily inaccessible or permanently ruined, as in the example above.

Without access to crucial contact information during and after a disaster, an agency may be unable to locate children and families or keep them safe. If agencies no longer have access to information, children may be in danger. When the immediate effects of the disaster have passed, agencies without any records may be unable to resume their important work.

Electronic records, when kept by agencies, are often out of date. Some child welfare agencies are not as diligent as they ought to be about updating electronic records.

**RECOMMENDATIONS**

Make essential records electronic and back them up out of state. Agencies must improve use of SACWIS or implement new systems to make sure that essential information is stored in electronic format, and that this information can be accessed from safe locations during and after a disaster.

Establish a procedure to make sure online records are updated and backed-up frequently and regularly. Administrators should implement a system to ensure that electronic records are updated thoroughly and regularly. Even when SACWIS systems are used optimally, there is always some delay before new information is inputted. It is therefore particularly important for staff members to update placement information, so they can determine whether a child or family is in a location affected by a disaster. Some jurisdictions require that social workers keep an updated paper copy of their caseload, with placement information, readily accessible. They require this information also to be shared with a disaster management coordinator in their office, who in
turn shares the information with a centralized—county or state—disaster coordinator monthly. This serves as a back-up to the SACWIS system and also ensures the information is in at least two physical locations, in case disaster strikes an office directly.

**Protect paper files.** Paper files, including case files, should be kept as safe as possible from damage—particularly by fire and water—during a disaster.

**Collaborate with other agencies that hold essential records about children and families being served.** Plans to store and access essential information for use during and after a disaster will be more efficient if coordinated with other agencies, for example, with courts. As records are protected or even salvaged, ensure that confidentiality is preserved as well. Regularly collecting basic components of school records, which may become inaccessible as a result of disaster, may be a good idea. This is a “dual-use” recommendation that could be helpful even in non-disaster situations.

**Plan to document agency activities during disaster response.** Even if caseworkers are able to access data from records backed-up at an alternate site, they may still be unable to input new information without access to their offices and computers. For this reason, it is important to have an interim protocol for documentation, so that services to children and families during a disaster can be recorded for later inclusion in records. In addition, such recording may be crucial as agencies apply to recover lost funds following a disaster.

**Consider confidentiality when planning how and where to store, access, and share information.** Redundancy and accessibility of information during a disaster is very important, but this must be carried out with confidentiality issues in mind.

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**RESOURCES**

**The National Archives: Disaster Response and Recovery**

*What:* This webpage lists numerous records’ preservation and salvage resources. It includes many links, including websites offering instructions about dealing with wet documents, books, photos, and other materials; lists of vendors offering recovery and salvage services; and a sample plan for preserving records.

Suppose that an earthquake in California causes massive damage to the state’s infrastructure, necessitating a large-scale evacuation. Across the country, child welfare agency staff members in New York, though sincerely sympathetic to Californians, breathe a sigh of relief at the fact that this catastrophe has not struck their area. Displaced Californians evacuate to Nevada. When Nevada’s facilities become overcrowded, however, people are evacuated by air to destinations all around the country. Several days after the quake, the New York agency has a sudden onslaught of new cases. They are caught unprepared.

**SECTION 13: PREPARE TO SERVE CHILDREN WHO ENTER THE STATE BECAUSE OF DISASTERS ELSEWHERE** Plan to accommodate children displaced from other states.

**LIKELY OBSTACLES**

Agencies focused on their own vulnerabilities may be unprepared to receive children from other states in need of services after a disaster. The Government Accountability Office recommended in 2006 that states create better plans for “placing children from other states.” Without such plans in place, as in the example above, children may be at risk.

**RECOMMENDATIONS**

Plan to receive and serve children from other states. Consider how agencies will assign these new cases, and how jurisdiction will be decided. Designate office liaisons to develop and maintain relationships with agencies from other states. Draft memoranda of understanding to facilitate interstate cooperation in the event of a disaster. See Section 6 for Resources to develop memoranda of understanding with other states.

Plan specifically to accommodate youth who are in state care already and coming from other jurisdictions. Written disaster plans should mention the need to handle such children carefully until the sending state provides records about each child’s specific characteristics and case history. For example, the hazard of housing a physically or sexually aggressive child with other more vulnerable children needs to be considered.
Likely Obstacles

Without practice, an agency may not be able to carry out its own disaster management plan or to participate effectively in the national response. Agency staff members who have not practiced the plan, like those described in the example above, may not know what to do amidst the chaos of a disaster. This could put the safety of staff members, children, and families at risk.

Agencies that do not conduct emergency exercises will be less likely to identify and ameliorate weaknesses in their plans. Testing plans may be the best way—or sometimes the only way—to bring to light issues in an agency’s planned disaster response. If not caught in advance, these issues could be very dangerous during a disaster.

Recommendations

Conduct agency-wide emergency exercises. There are a variety of ways to practice and test disaster response plans. The U.S. Department of Education and other federal agencies recommend the following types of emergency exercises: orientations, which are introductions to a crisis management program; drills, which allow participants to practice and test an element of the emergency plan; tabletop exercises, in which participants “analyze an emergency event in an informal, stress-free environment”; functional exercises, which test one or more functions of an emergency response during “an interactive, time-pressured, simulated event”; and full-scale exercises, which “evaluate the operational capability of emergency management systems in a highly stressful environment that simulates actual conditions.”

Participate in national, state, local, and community exercises. Exercising with other agencies is important to a smooth disaster response. Exercises may also help to determine whether an agency’s own disaster management plan is compatible with fulfillment of its Emergency Support Function (ESF) within the national plan. See Section 3 for further information about ESFs.

Evaluate exercises and make improvements to disaster management plans. Agencies should use what they learn during exercises to improve the development and execution of their disaster management plans.
Be very cautious if conducting any exercises involving children. Though drilling and exercising with children may be a good idea in some situations, a lot of care should be taken not to upset young people. “You have to realize that no matter how well you do it, a drill might sensitize children. After 9/11, some children were crying in the stairwell after a regular fire drill,” explains Dr. David Schonfeld, Director of the National Center for School Crisis and Bereavement.

RESOURCES


What: Though geared toward schools, this article in ERCMExpress may help child welfare agencies learn about the importance and implementation of disaster exercises. It includes a detailed explanation of various kinds of emergency management exercises and instructions for using these exercises to improve disaster preparedness and response.


What: HSEEP is an “exercise program which provides a standardized policy, methodology, and terminology for exercise design, development, conduct, evaluation, and improvement planning.” It offers detailed information about exercises conducted by the Department of Homeland Security and some other agencies.


“NO MATTER HOW WELL YOU DO IT, A DRILL MIGHT SENITIZE CHILDREN.”

Dr. David Schonfeld, Director of the National Center for School Crisis and Bereavement at Cincinnati Children’s Hospital Medical Center.
PART II

RESPONSE
Suppose that administrators at one state’s child welfare agency have spent a considerable amount of effort preparing disaster management plans. Wisely, they have considered all-hazards, held training exercises, collected emergency contact information, and updated communications systems. Staff members at the agency feel prepared for anything that comes their way. When a bioterrorist attack is launched upon their state, however, they find that the general plan, designed to fit the widest possible range of likely disasters as well as to adapt to specific threats, needs more adapting than they would have thought. There is some confusion as to who should evacuate and who should shelter-in-place. There is general fear about the yet-unidentified biohazard. And, last but not least, a large number of agency staff members are out of town at a conference, making staff scarce. Staff on hand do their best to adapt to changing circumstances.

SECTION 15: ENACT DISASTER RESPONSE PLANS WHEN NEEDED  
When disaster strikes, agencies should enact their plans and adapt to unanticipated situations.

LIKELY OBSTACLES
No disaster can be anticipated completely. Each specific disaster is accompanied by its own challenges, as demonstrated by the example above. When it becomes time to activate an emergency response plan, there will be fear, an abundance of unfamiliar situations, and—potentially—many other complications.

RECOMMENDATIONS
Enact the disaster management plan. When disaster strikes, agencies should activate their plans to get in contact with staff members, protect the families of staff members, perform their Emergency Support Functions (ESFs), track children and families, access crucial data, prepare for recovery, etc. See Sections 3 and 6 for further information about ESFs and their role in the National Response Framework.

Adjust the plan as needed. Marketa Gautreau, Assistant Secretary for the Louisiana Office of Community Services and the head of child welfare in her state, reports that the agency needed to maintain a policy of “rigid flexibility” to manage through hurricanes Katrina and Rita. 
**Suppose** that “Cameron” (age 16) and his foster family are forced to evacuate Chicago suddenly when a major disaster strikes their city. Because these events are, of course, entirely unexpected, Cameron and his family have only the clothes they are wearing and the cash in their wallets (very little) when they leave town. They are bussed to a shelter 200 miles from home. Once there, Cameron’s foster parents empty their checking accounts to replace the winter coats the family left behind during the emergency evacuation. Six days later, it becomes clear that weeks will pass before the family can return home. In the meantime, they have not received their regular checks from the child welfare agency. They have no cash and no change of clothes.

### SECTION 16: ADDRESS THE URGENT NEEDS OF CHILDREN AND FAMILIES IMMEDIATELY AFTER A DISASTER

Ensure that families receive routine income maintenance and disburse funding to address immediate and pressing needs, if possible.

#### LIKELY OBSTACLES

Families (and staff members) may be without money or essentials during and immediately after a disaster. Disasters can lead to monumental loss. In the aftermath, staff members and families like “Cameron’s” may be in desperate need of money for basic items like clothing.

Payment to families and staff members may be difficult to make in post-disaster conditions. It may be hard or impossible to know where to send paper checks. Mail services may be slow. Bank branches may be closed. The Louisiana child welfare system was using paper checks at the time of hurricanes Katrina and Rita, which made it very difficult to disburse much-needed money to families, who were hard to locate, to give one example.

#### RECOMMENDATIONS

Plan to get regular payments to children and families who will surely need them. The National Child Welfare Resource Center for Organizational Improvement recommends “using direct deposit to pay workers and providers so checks will automatically go to their bank accounts during disasters.” Information about collaborating on disaster planning with agencies that might offer help to foster families after a disaster—TANF, for example—can be found in Section 6. Information about connecting families with available stabilization or recovery funds—from FEMA or TANF, for example—can be found in Section 21.

Assess the needs of children and families immediately after a disaster. When hurricanes once again hit the Louisiana Gulf Coast during the summer of 2008, child welfare agency staff members had a system of forms and procedures in place to assess families’ situations and determine their most dire needs. This enabled the agency to better serve children and families, reported Charlotte Frilot, Assistant Regional Administrator Jefferson District/Greater New Orleans Region, Office of Community Services.
Disburse funds for urgent needs such as day care and emergency housing. Before disaster strikes, determine the agency’s role in providing such disaster services, and prepare accordingly. Decide how the agency will disburse discretionary emergency funds during and immediately following a disaster, if at all. Establish whether some agency money has been or may be set aside for helping foster families with dire situations during major events. Consider the fact that a little spending might allow foster families who have experienced a catastrophic loss to continue to foster, rather than giving up a child who would then need a new foster placement. (More information on managing through foster parent attrition can be found in Section 26.)

Marketa Gautreau, Assistant Secretary for the Office of Community Service in Louisiana and the head of child welfare during Hurricane Katrina, advises making some key decisions before disaster strikes. Consider: If the agency is going to provide individuals with clothes or personal items, what purchases will be permitted? Who will authorize those purchases? Will purchases over a certain amount need to be cleared with an administrator? How will agencies get money to families? Will they have the capacity to write checks? Who will have to sign off? In states where child welfare is county run, local agencies—who will best be able to assess loss—should secure this authority. Rigorous documentation regarding the use of funds during and after an emergency will be important when agencies apply to recoup losses.

Electronic Payments Network and NACHA—the Electronic Payments Association: Electronicpayments.org

What: This website is intended to “educate individuals, business professionals, and employees of financial institutions about electronic payments processed through the ACH network, including Direct Deposit, Direct Payment, and check conversion applications.” It includes basic information about how employers and individuals use direct deposit.

Where: www.electronicpayments.org
**LIKELY OBSTACLES**

Agencies focused on protecting the children and families already in their care may not anticipate that many new children may need services during and after a disaster. Children not previously part of the child welfare population may be in need of sudden aid, as in the example above. After Hurricane Katrina, the Louisiana Office of Community Services was called upon to open and staff a children’s shelter to house the many children who had been separated from their families during evacuation. This was unprecedented and unanticipated.

**RECOMMENDATIONS**

Plan to locate and serve vulnerable children affected by the disaster. A 2006 Government Accountability Office (GAO) report names the identification of new children and families in need of services as a top priority for state child welfare agencies. The Child and Family Services Improvement Act of 2006 now requires states to have such a plan in place. Agencies will want to consider how they will identify displaced children, where the children will be housed, and how they will assign staff members to these new cases. It is important to note rules concerning the sheltering of unaccompanied children with adults, for example.
PART III

RECOVERY
Suppose that a Tsunami strikes the West Coast. Families from flooded coastal communities relocate inland, either in temporary housing or with family and friends. Staff members from one local agency return to their office to find it completely uninhabitable. The agency moves its headquarters to a suite in the upper floor of a high-rise hotel and begins the process of finding children and families. As time passes, it becomes clear that most families will decide to relocate permanently. Staff members have few cases remaining in the deserted area. Meanwhile, a community 100 miles east is now inundated with displaced foster families, and staff members from the affected area try to figure out which local agency has jurisdiction. State agency administrators are slow to reorganize and some children and families do not get the attention they need.

SECTION 18: REEVALUATE STAFFING TO ACCOMMODATE A DISASTER’S IMPACT
After a disaster, agencies should ensure that staff members have optimal workloads.

**LIKELY OBSTACLES**

If many families are displaced by a disaster, the number of cases handled by one child welfare office may change dramatically, and numbers may continue to fluctuate long after a disaster. Agencies may no longer have the appropriate number of staff in each office. Reallocating staff to accommodate population shifts may be difficult.

Agencies may have additional emergency responsibilities long after a disaster. Marketa Gautreau, Assistant Secretary for the Office of Community Service and head of Child Welfare in Louisiana, reports that while agency employees in her state usually staff special needs shelters for several days after a hurricane, many were on shelter duty for six months after Katrina and Rita.40

Disasters may create a staff shortage. “In New York after 9/11 there were not enough jobs for local residents; in New Orleans after Hurricane Katrina there are not enough residents and jobs go begging,” writes David Dyssegaard Kallick, Senior fellow of the Fiscal Policy Institute.41 When staff members are in short supply in the general community, and when area organizations begin to pay more, child welfare agencies may have a hard time competing for staff. If nearby schools of social work shut down, the shortage may be compounded. If the disaster in question is a biological or chemical event, staff members may be sick and unable to work. Any staff leaves-of-absence may have an impact. In addition, a job shortage leads to its own significant problems for families being served, and thus new challenges for agencies.

Evacuations may lead to confusion over the jurisdiction of a child welfare case. If children and families evacuate to another jurisdiction, as in the example above, questions will need to be answered. How will case management be shared between the family’s original and new states, for example? If a family does not return, how much time will pass before the case is officially transferred to the new state system?

Disasters may change the composition of a community, creating a need for new skills among agency staff members. After hurricanes Katrina and Rita, for example, the Spanish-speaking population in New Orleans rose dramatically. Many agency staff members who do not speak...
Spanish suddenly needed to learn the language in order to communicate with children and families being served, reports Charlotte Frilot, Assistant Regional Administrator Jefferson District/Greater New Orleans Region, Office of Community Services.

**RECOMMENDATIONS**

Make sure that staff members’ caseloads are manageable after a disaster. Hiring more staff members, allowing staff members affected by the disaster to take leaves-of-absence, offering additional training in a new language, for example, and shuffling caseloads are among the measures that may be required to ensure that children and families are being served. The state office role is also critical when it comes to staffing, for it can bring in backup from unaffected areas.

If staff members are in short supply, try to attract new staff. If possible, agencies may want to try to budget for more competitive starting salaries, suggests Frilot. Agencies may want to build into contracts with private providers (who provide similar services such as case management) the option of contracting supplemental staff in the event of a disaster.
Suppose that a major disaster has severely debilitated the operations of a state’s child welfare agency. Staff members who have lost everything they own have nonetheless returned to their jobs. Supervisors who are hard at work at state offices appear to agency employees to be unconcerned with progress at the site of this disaster. Also, weeks of trauma and devastation take an emotional toll on the vast majority of staff members. For some, low morale and stress begin to hinder their work, and, despite best efforts, children are denied the help they badly need.

SECTION 19: SUPPORT AGENCY STAFF THROUGHOUT DISASTER RECOVERY

Offer leadership and on-scene moral support to agency staff after a disaster; staff members’ morale, mental health, and effectiveness depend upon it.

LIKELY OBSTACLES

Lack of moral support and leadership may be damaging to agency morale and effectiveness. Staff members, who may have overcome great obstacles and set aside thoughts of personal loss to return to work, may become disillusioned or angry if not sufficiently supported by their agency’s administrators, as in the example above.

Staff members’ mental health may be at risk. Agency staff will likely be victims of the same disaster with which they are helping others to cope, putting them at risk for both trauma and secondary trauma, sometimes called Compassion Fatigue (CF). Though staff members will be accustomed to helping children and families through difficult and even traumatic circumstances, disasters will likely create a more intense emotional environment. This may lead to CF, defined as “the experience of posttraumatic stress symptoms in trauma counselors as a result of listening to the trauma material of clients or exposure to a client’s or loved one’s trauma.” CF not only diminishes worker satisfaction, but also increases the likelihood that staff members may make poor professional judgments.

RECOMMENDATIONS

Make on-scene disaster leadership an explicit part of the job description for the agency’s top administrator(s). An early appearance by leaders at the location of a disaster is important, past disasters have proven. Agency heads should witness the extent of the disaster and find out firsthand what help is needed most. They may want to conduct debriefing sessions, tour the area, and show signs of encouragement and appreciation.

Ensure that staff members receive their paychecks. Banking may be significantly disrupted after a disaster, but staff members will require financial support to return to work.

Safeguard staff members’ mental health. Agency staff should be offered treatment for trauma and secondary trauma. Social workers may not feel they need such services, but they should be strongly encouraged by supervisors to participate. April Naturale, former Statewide Director for Project Liberty, the Crisis Counseling Program that was founded in response to the World Trade Center attacks of September 11th, advises that stress-management—including “crisis counseling, psychoeducation, narrative exercises,
stress management exercises, self-care instructions, post-deployment orientation, and evaluation”—can help social staff members cope with the stresses of disaster relief work. Also, knowledge about Compassion Fatigue can mitigate its effects, explains Laura Campbell, a social worker who has worked intensively with victims of hurricanes Ivan and Katrina. Researchers at the Urban Institute who studied the long-term services offered after 9/11 found that caseworkers benefited from periodic “debriefing” sessions or case conferences to allow staff members to share their own feelings and experiences, review problems, and receive help in handling troubling cases.

Provide encouragement, celebrate successes, and promote wellness. “Workers need to be reminded that they may not see ‘the fruits of their labor,’ and the work is often about planting seeds,” advises secondary trauma expert and child welfare caseworker David Conrad. “Supervisors and administrators must provide opportunities for caseworkers to celebrate their successes, and workers must be encouraged to embrace their own physical, psychological, and spiritual wellness to achieve the emotional balance they need to do this difficult work.”
likely obstacles

Bureaucracy may hinder the allocation of recovery funds to children and families. Money from the government and nonprofit organizations often flows to a region after a major disaster. But, if families or even agency staff members are not knowledgeable about all available funds, money may not be received where it is needed.

Demand for recovery assistance may likely surpass supply, especially among vulnerable populations. Even though major disasters prompt government assistance and private philanthropy, there will likely be more need for help than money available. “Individuals may bring multiple short- and long-term needs,” and agencies may need to “enhance their staff capacity, expand their service delivery capacity,” and rebuild “social service infrastructure,” cautions a report from the Finance Project.

recommendations

Help to connect children and families with available disaster recovery funds. Because the vulnerable children and families protected by state child welfare agencies are often economically disadvantaged, it becomes especially important for them to receive available money to assist with recovery. Agencies should help to educate families being served about what funding is out there, and help them to apply for it.

Be equitable and systematic when distributing any agency funds for recovery. Before disaster strikes, agencies must have a general process in place for disbursing emergency recovery funding, especially in states likely to experience wildfires, tornadoes, floods, and/or hurricanes.

resources

The Finance Project: Managing in Emergencies: Making Use of New Funds and Funding Flexibility for Human Services

What: This report offers information about emergency funding and human services, and includes useful information about financing recovery.


See Section 5 for further Resources related to the funding of disaster management.
Likely Obstacles

Disasters may be extremely disruptive to longer-term goals. Without proper planning, the exhausting and complex task of making acceptable temporary arrangements for affected children may delay progress toward permanency.

A disaster will likely create a variety of new obstacles to permanency. After a large-scale evacuation, children may be displaced, even to other states, as in the above example. They may be living in a different region from their caseworkers or biological parents. Less severe disasters may also have grave effects, including job loss for foster, biological, or adoptive parents. Services offered by providers may be discontinued. There may be damage to residential facilities. Foster parents may be unwilling or unable to foster after a disaster. The judge, lawyers, and social workers working on children’s cases may be reassigned. Numerous and unpredictable disruptions may occur.

Recommendations

Decide how staff should strategically prioritize work. Will the agency turn first to children in foster care, then to open CPS cases, then to open CPS investigations, for example? If facing impractical deadlines that the government will not waive, decide strategically how and when to conduct visits, reviews, etc. Prioritizing work may mean that some deadlines or requirements are missed.

Reevaluate each child’s permanency plan and continue work toward long-term goals. Agencies should assess children’s placement and revise permanency goals to accommodate changes brought about by the disaster. If the disaster has displaced a child from his or her caseworker’s jurisdiction, plans should be made or deadlines set for his or her return or for the case’s transfer.

Make use of post-disaster services provided by nonprofits and the government. A disaster will likely mobilize the government, nonprofit organizations, and even corporations to offer goods and services to people in the affected area. Agencies can help connect children and families they serve with help. Of course, like all
recovery measures recommended in this guide, the provision of post-disaster services should be planned in advance. The Urban Institute recommends “incorporating longer-term services into disaster planning.” Making lists of services that may be needed, determining possible eligibility requirements for such services, and compiling a directory of groups who may offer them will help agencies to jump-start the recovery process.

RESOURCES

AdoptUsKids: Case Planning Desk Reference for Emergency Situations

What: This 9-page guide contains a series of checklists aimed to help caseworkers gauge the safety and permanency needs of children displaced by a disaster and to help them make recommendations to the court. It includes a general checklist as well as checklists for: when “reunification is the plan,” when “transfer to relative/guardianship is the plan,” when “adoption is the plan and the child/youth is available,” when “adoption is the plan but child is not yet available,” and when “another planned permanent living arrangement (APPLA) is the plan.”

Suppose that terrorists attack a major West Coast metropolis, bombing public transportation routes. Seven-year-old “Alexandra,” who takes the bus to school with her foster mother each morning, is held with her classmates at school until evening, when the city is deemed safe and her foster mother can pick her up. In New York, 14-year-old “Nick,” also in foster care, watches many hours of television news coverage following the attacks. Six months after the bombings, Alexandra appears to her foster parents to be doing fine. She seems far more interested in her daily routine than in the possibility of future bombings, and she seems to ride the bus without fear, her foster parents report to their caseworker. Six months after the attacks, Nick is uncharacteristically acting out—skipping school. He pretends to get on the subway but spends the day at an arcade. Nick is normally a good student, and his foster parents cannot figure out what is causing his change in behavior.

**SECTION 22: COORDINATE MENTAL HEALTH TREATMENT FOR CHILDREN AND FAMILIES** Collaborate with mental health professionals and educate caregivers about how to monitor children's mental health and talk with children about disasters.

**LIKELY OBSTACLES**

Children in the care of child welfare agencies are among those most vulnerable to mental health problems following natural and unnatural disasters, including Post-Traumatic Stress Disorder (PTSD) and depression. While some people often conclude that foster children are made more durable by their difficult experiences, in fact, the opposite can be true. Children who have already suffered from trauma, loss, or displacement face bigger challenges than many others when coping with disasters and their aftermath. New trauma or loss brought on by a disaster often compounds the old. Economic disadvantage and a lack of stable routine can also put children’s mental health at greater risk. And disasters can trigger “a cascade of multiple losses and stressors”—separation from school and friends, lack of a feeling of safety, pervasive fear among caregivers, for example—that can build dangerously upon one another.

Parents, too, may have suffered many life losses and traumas, and may require the services of mental health professionals after a disaster. Without proper mental health attention, problems could escalate.

Mental health resources for children and families can be difficult to find or may remain unused after disasters, especially among economically disadvantaged people. Though mental health professionals usually arrive on the scene of disasters quickly, studies of September 11th and Hurricane Katrina have shown that help was often not adequate to meet demand and many parents do not seek mental health services for children in need.

Disasters can affect children geographically near to and far from the event: A child like “Nick,” in the above example, who is living across the country from a public bus attack, may be afraid to ride the subway in his own city.

Parents and caregivers want to believe that their child is coping well: Even attentive caregivers are sometimes overly optimistic about children’s resiliency and may miss more subtle signs of mental distress. And PTSD manifests itself differently in children of different ages. If a young child like “Alexandra” seems overly preoccupied with day-to-day routines, for example, it may be a sign that she is experiencing fear, trauma, or loss.
RECOMMENDATIONS

Contract with needed mental health professionals, who may likely be scarce after a disaster. Though mental health services may be difficult to find, problems are best caught as early as possible. Untreated trauma or difficulty coping with bereavement are serious problems that may grow over time. Local mental health professionals may be recovering from the very same disaster; bringing in help from outside the area may be a good idea.

Provide opportunities for staff members to refresh their knowledge about trauma symptoms. Instruct staff to be especially attentive to signs that children, parents, and caregivers are troubled or that they are experiencing PTSD or depression. There are certain periods following disasters when symptoms may reveal themselves. Symptoms vary according to age group, but signs to watch for include: “Depressed or irritable mood; neediness, clinginess, and difficulty separating; resistant and defiant attitude; difficulty focusing on tasks or activities; difficulties with classmates and peer group; social isolation or withdrawal; dramatic changes in academic performance; physical complaints (e.g., headaches, stomach aches); changes in appetite; sleep disturbances; toileting problems.” Staff members and caregivers should be especially attentive to children who have previously experienced trauma or bereavement and children who have pre-existing mental health problems.

Train child welfare workers to serve as a first line of defense against untreated mental health problems among children and families in their care. Because children’s mental and emotional distress is often untreated after disasters, there is a movement in the pediatric community to train pediatricians—who are more likely than psychologists to see these children in significant numbers—to monitor children’s mental health. Agency staff members are similarly well positioned to check on the mental health of children in the agency’s care and they should monitor children when it is possible. Agencies may want to equip social workers with mental health screening tools to facilitate this process.

Have staff members educate parents and caregivers about how to monitor for mental distress in children. Staff members will likely not be able to monitor all children’s mental health status vigilantly. Educating parents and caregivers how to monitor for symptoms according to each child’s developmental stage will help children get needed help.

Instruct parents and caregivers how to talk with children about disasters—before, during, and after they occur. A trusted adult who will listen is often what children need most—there is no one right thing to say. Caregivers should listen to children’s fears and questions, and respond truthfully and reassuringly. During and after disasters, caregivers should be encouraged to limit television time because overexposure to disaster news may lead to problems down the road.

Remind parents and caregivers to safeguard their own mental health. Parents need to take care of themselves, both for their own sake and because children respond to adults’ fear and stress.

Be aware of the stigma that mental health services sometimes carry. “Many individuals affected by September 11 lacked personal experiences with mental health services and were reluctant to seek such help,” reports the Urban Institute. Caseworkers should keep this in mind when connecting children and adults with mental health professionals after a disaster. They may want to offer a session introducing families to these programs.

Be sure that mental health services are delivered in a culturally sensitive manner. It may be necessary to connect children and families with bilingual professionals, or to distribute materials in languages other than English.

Consider mental health when planning for every phase of response and recovery. The ways in which any service is delivered can impact children’s mental health. Agencies should keep children’s mental health in mind as they decide how to provide shelter and food, for example.
RESOURCES

American Academy of Pediatrics: Children, Terrorism, and Disasters Toolkit

What: This two-page toolkit instructs pediatricians on how to teach parents and caregivers to help children to process the events of a disaster and to monitor children’s mental health. Child welfare workers, like pediatricians, may also serve as early responders, making this a useful resource. It offers concise and accessible guidelines about children and mental health.


National Center for Children Exposed to Violence at the Yale Child Study Center: Parents’ Guide for Helping Children in the Wake of Disaster

What: This 10-page guide for disaster relief workers could help child welfare agency staff members to talk with children about disasters and to monitor children’s mental health themselves. It could also help caseworkers to train parents to do the same. The guide contains detailed advice for speaking with children and a breakdown of symptoms according to stages of psychological development.


New York University Child Study Center: Caring for Kids after Trauma, Disaster, and Death

What: This 65-page guide, written by Harold S. Koplewicz, M.D., et al., offers detailed information and guidelines for helping children through trauma, disaster, and the death of a loved one. It includes separate sections on trauma, bereavement, terrorism, and natural disasters. It also has information on memorials and anniversaries of deaths.

Suppose that an industrial accident causes toxic chemicals to leak into a major metropolitan area. Though families follow the proper procedures for evacuation and shelter-in-place, several dozen children, including some who are in the care of the child welfare system, are exposed. They are rushed to the hospital where they are treated by doctors knowledgeable about children’s particular vulnerabilities to toxins. But several exposed preverbal children are unable to describe their symptoms to caregivers. Valuable time passes before they are treated.

SECTION 23: COORDINATE TREATMENT OF CHILDREN’S PHYSICAL HEALTH

Help to safeguard the physical health of children, who are often more vulnerable than adults to disaster-related injuries and long-term health problems.

LIKELY OBSTACLES

Lack of access to doctors and prescription medicine can have serious consequences for the health of children and their adult caregivers. Without proper planning, children and families who receive Medicaid might not be able to get needed medicine after an evacuation to another state, for example. Even with insurance, health care providers may be scarce. After Hurricane Katrina, for example, more than 6,000 doctors left the Gulf Region.63

Disasters cause injury, especially to children. Disasters lead to injury in a myriad of ways. Children may be especially susceptible to these injuries. For instance, children’s body surface area to weight ratio, greater than adults’, is one of the several reasons that children’s prognosis after chemical agent exposure may be worse, as in the example above. Children who do not yet speak may be unable to explain symptoms to doctors after any kind of disaster. Children, who have a higher baseline respiratory rate, are more susceptible than adults to radioactive fallout.64

The list of children’s vulnerabilities to many kinds of disasters goes on.

As an often-used saying in health care goes, “children are not small adults,” and thus often require different treatment. Children have significant anatomic, physiologic, immunologic, and developmental differences from adults that “affect children’s vulnerability to injury and response in a disaster,” reports the Agency for Healthcare Research and Quality. “Failure to account for these differences… increase[es] the child’s risk of serious harm and even death.”65

Poor health will likely be prevalent among disaster victims, especially those with fewer resources. Operation Assist’s 2006 survey of residents of FEMA-subsidized community housing in Louisiana six months after Hurricane Katrina found that “nearly half the children who had a personal medical doctor who knew their medical history—a ‘medical home’—before Katrina did not have one after the hurricane.” Many children requiring medication and equipment—asthma inhalers and nebulizers, for example—could not get it. Some families had difficulty using their insurance in a new state.66
RECOMMENDATIONS

Make sure that children and families can use their health insurance and receive medical care after a disaster. Without planning and help, children and families may be unable to use their Medicaid cards out of state, and may be without necessary medication—insulin or psychotropic drugs for example. (More information about establishing memoranda of understanding in advance of disasters to provide Medicaid services in other states can be found in Section 6.) Agencies must ensure that children and families being served receive treatment for injuries and illness during and after a disaster. Medication, vaccination, and other treatment may be required. Families may need help gaining access to doctors or using their insurance after a disaster. Doctors may be scarce, so it may be important to offer families extra help finding care.

Help children and families find a “medical home.” The continuity of care provided by a medical home can improve children’s health, according to current thinking among doctors. 67

DISASTERS CAN TRIGGER “A CASCADE OF MULTIPLE LOSSES.”

Dr. David Schonfeld, Director of the National Center for School Crisis and Bereavement at Cincinnati Children’s Hospital Medical Center.
Suppose that the home of “Karen’s” foster family is destroyed during a disaster. Karen and her family are relocated to temporary housing, where conditions are suboptimal. Because of lack of available permanent housing, a short stay stretches into several months.

**SECTION 24: HELP ENSURE THAT DISPLACED CHILDREN AND FAMILIES FIND HOUSING**

Help to connect children and families with the safest and most stable living arrangements after a disaster.

**LIKELY OBSTACLES**

Disasters of many kinds can displace families for long periods of time, or even permanently. Disasters may force children like “Karen” to leave their homes, forfeiting valuable stability.

Some temporary housing arrangements may be damaging to children’s well-being. Operation Assist’s 2006 survey of residents of FEMA-subsidized community housing in Louisiana six months after Hurricane Katrina found that “frequent relocation since the hurricane made it impossible for these families to become engaged in new health and education relationships and undermined the family’s ability to establish a sense of a predictable routine that would help their children to better cope with this difficult situation. On average, families moved 3.5 times since the hurricane, with some moving as many as nine times. Heads of household were not able to maintain their jobs, with no corresponding increase in public benefits to compensate for this economic loss.”

**RECOMMENDATIONS**

Help find stable living situations for all children and families being served. Given the precariousness of life in temporary housing and the importance of stability to the lives of foster children, helping children and families being served to locate the best possible living arrangements after a disaster should be a top agency priority.

**RESOURCES**

Federal Emergency Management Agency: Apply for Assistance

What: This webpage explains how people can apply for emergency assistance from FEMA, and it includes information on housing. It is divided into sections: before you apply; apply for assistance; and after you apply.

Where: www.fema.gov/assistance/index.shtm

U.S. Department of Housing and Urban Development: HUD Newsroom

What: This website contains a catalogue of HUD news stories. Press releases on this website may include links to information about HUD assistance for specific disasters.

LIKELY OBSTACLES

After a major disaster, children may have poor attendance rates or may not attend school at all. Numerous factors may keep children like “Pamela” from school: families may move from one temporary location to another, traumatized children may resist attending unfamiliar schools, or schools may be closed because of the disaster, for example. A study of children living in FEMA-subsidized community housing six months after Hurricane Katrina revealed that “over one-fifth of the school-age children who were displaced were either not in school, or had missed 10 or more days of school in the past month.”

Interruption of education puts vulnerable children at greater risk. There are clear educational disadvantages of not going to school. In addition, schools offer children a sense of routine; they “are essential to a child’s return to normalcy.”

By not attending school, children may also miss out on available help. Schools often provide post-disaster services, like health care and counseling, to children and even parents.

For children who do attend a new school, unfamiliar surroundings may require a difficult adjustment. Children may be lonely or frightened without their friends. Children may have to become accustomed to having a peer group with an entirely different racial, ethnic, or religious makeup than they are used to. They may be at a school where most other children were unaffected by the disaster.

In some schools, students may find fewer post-disaster services than in others. The availability of recovery assistance for displaced students will differ from school to school. After Hurricane Katrina, for example, “districts varied widely with respect to their ability to provide coordinated health and other social services to the displaced population…the opportunities for assistance students encountered was as much a matter of luck as planning,” reports Mary Driscoll, an Associate Professor of Educational Administration at NYU.

RECOMMENDATIONS

Make sure children attend school regularly. In most cases, school-aged children need to be placed in a stable educational environment as soon as possible after a disaster. Education, a sense of routine, and school-based services are all essential to children’s success and well-being. “Refusal to return to school and ‘clinging’ behavior” might be signs that a child needs professional help, advises the American Academy of Child and Adolescent Psychiatry. Caregivers may wish
to consider with professionals whether to keep a very young traumatized child at home with a nurturing caregiver, if warranted.

**Help to locate an educational environment that can help children recover from a disaster.**
Agency staff should be attentive to children’s special needs and to school diversity. Also, some argue that “it may benefit children if schools assign displaced students in schools together.”
Available recovery assistance may vary widely from school to school, and caseworkers should keep this in mind when striving to make the best possible arrangements for children.

**RESOURCES**

**National Center for Homeless Education: What Relief Agencies Should Know About the Educational Rights of Children Displaced by Disasters**

**What:** This two-page brief explains that “students who are displaced by disasters are generally covered by the McKinney-Vento Homeless Assistance Act,” which protects children’s rights to education. It offers straightforward details about this federal law and directs readers to related resources.

Even the most dedicated foster parents may be unable or unwilling to foster after a major disaster. Economic hardship and other factors might cause families to stop fostering after a disaster, as in the example above. This can lead to a general shortage of foster homes. The per capita number of foster children in New Orleans rose by more than 50 percent after hurricanes Katrina and Rita, while the number of available foster care beds fell, according to USA Today.\textsuperscript{75}

If foster parents stop fostering, children’s lives can be further disrupted by a damaging disaster. USA Today also reported the story of Shine White of New Orleans, who, after living in more than 20 foster homes, found one where he could flourish. Before Hurricane Katrina, Shine, an honor student, was calling his foster parents “Mom” and “Dad.” After the storms, Shine’s foster family decided—at the urging of their biological son—that it was time to stop fostering.\textsuperscript{76}

**Recommended Actions**

Anticipate foster parent attrition after a disaster, and make plans to manage the situation. Agencies may want to talk with foster families in advance about how to continue fostering after a disaster. They may want to prepare in advance to launch foster parent recruitment efforts during disaster recovery. Though some current foster parents may wish to stop fostering after a disaster, some new families may be prompted by the disaster to consider fostering. Agencies should think about ways to channel this goodwill.

Make use of federally available funds to recruit foster families for displaced children. Financial incentives might help this process.
Suppose that a complete power outage occurs during the height of summer in a major northern city. Residents are without lights, air conditioning, and refrigeration for nearly a week. The child welfare agency discovers that their emergency communication system is seriously flawed, and staff members must overcome enormous obstacles to make sure that children and families being served are safe and fed. Six months later, a major disaster strikes the area. Even though the agency knows that its communications plan will fail, no updates have yet been made and the agency faces the very same, very dangerous problems for a second time.

SECTION 27: CAPTURE LESSONS LEARNED AND REGULARLY UPDATE DISASTER MANAGEMENT PLANS

Improve disaster management plans, incorporating lessons learned from previous disasters.

LIKELY OBSTACLES

The risk of another disaster always exists. As back-to-back Gulf Coast hurricanes and the post-September 11 anthrax threats demonstrate, another disaster may always be right around the corner. If lessons learned are not captured, agencies may repeat grave mistakes in the event of another emergency.

RECOMMENDATIONS

Capture lessons learned in an accessible and user-friendly format, and share the lessons with stakeholders. After-action reports or other lessons learned documents should detail the strengths and especially the weaknesses of an emergency response and make recommendations for improved disaster preparedness and planning.

Review disaster management plans regularly. Agencies may want to assemble a team—including staff at all levels—charged with reviewing the disaster management plan annually. This keeps disaster management on the minds of staff and requires a review of which disasters are most likely to occur.

RESOURCES

U.S. Department of Education: After-Action Reports: Capturing Lessons Learned and Identifying Areas for Improvement

What: This issue of Lessons Learned describes the importance and key components of after-action reports. Though written with schools in mind, this document may likely help child welfare agency staff members who are charged with capturing lessons learned.

Where: www.eric.ed.gov/ERICDocs/data/ericdocs2sql/content_storage_01/0000019b/80/29/e4/a8.pdf
While this disaster preparedness guide for child welfare agencies offers guidance for “all-hazards” disaster management, at least one type of potential disaster lies outside of the guide’s principal focus: pandemic influenza. Pandemic flu “occurs when a new influenza virus emerges for which there is little or no immunity and for which there is no vaccine. The disease spreads easily person-to-person, causes serious illness, and can sweep across the country and around the world in a very short time.”

As is evident from the preceding sections, to prepare for natural disasters such as hurricanes and for most man-made disasters is to prepare for short- and medium-term evacuation from or shelter-in-place within an affected geographic region. To prepare for pandemic flu is to prepare for long-term shelter-in-place during a time of widespread illness and interruption and/or overload of basic, essential services such as food delivery and medical care. For this reason, the response to a pandemic flu requires a different but related set of measures than those discussed throughout this guide.

The exact likelihood, severity, and timing of a future pandemic flu cannot be predicted with certainty. Yet many scientists—who often cite the history and pattern of pandemic flus in the twentieth century, in particular the 1918 pandemic flu, which took the lives of approximately 675,000 Americans and 50,000,000 people worldwide—argue that pandemic flu poses a real and very serious threat. For this reason, it would be wise for child welfare agencies to consider pandemic flu when developing and improving disaster management plans.

Though pandemic flu preparedness is not addressed explicitly in this guide’s recommendations, the resources below offer a starting point for agency staff members charged with disaster management to consider how their agency might prepare for and weather a possible pandemic flu and work to prevent the spread of infection among children and families, especially those in out-of-home care.

**RESOURCES**

U.S. Department of Health and Human Services: Flu.gov

*What:* This website provides “one-stop access to U.S. Government H1N1, avian, and pandemic flu information.” It offers answers to Frequently Asked Questions, information about planning and response, data about current outbreaks, updates about research activities, and other resources.

*Where:* http://flu.gov
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Section 7: Prepare to Manage Disasters that Strike an Agency Office


Section 8: Ensure that Families and Providers Have Viable Disaster Plans


Centers for Disease Control and Prevention: Keep It With You: Personal Medical Information Form. www.bt.cdc.gov/disasters/kiwy.asp


Florida Department of Children and Families and Florida’s Coalition Against Domestic Violence: Survive Domestic Violence AFTER the Hurricane. www.aecf.org/~/media/PDFFiles/DisasterGuide/Resource%208H.pdf


PETS 911: Pets911. www.pets911.com

Section 11: Prepare to Communicate with Agency Staff, Providers, Children, and Families During and After a Disaster


Section 12: Prepare to Preserve and Access Essential Records During and After a Disaster

The National Archives: Disaster Response and Recovery. www.archives.gov/preservation/disaster-response

Section 14: Practice Disaster Response Plans


Section 16: Address the Urgent Needs of Children and Families Immediately After a Disaster


II. RESPONSE
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Section 20: Help to Connect Children and Families with Disaster Recovery Funds


Section 21: Continue the Work of the Agency


Section 22: Coordinate Mental Health Treatment for Children and Families


New York University Child Study Center: Caring for Kids after Trauma, Disaster, and Death. www.aboutourkids.org/files/articles/crisis_guide02.pdf

Section 24: Help Ensure that Displaced Children and Families Find Suitable Housing


Section 25: Help Ensure that Children Attend School Regularly


Section 27: Capture Lessons Learned and Regularly Update Disaster Management Plans


APPENDIX

Pandemic Preparedness


2 Marlene Wong, Jane’s School Safety Handbook (Virginia: Jane’s Information Group, 2004), 22.

3 Federal Emergency Management Association website. (See References.)

4 Tara Hill, interview. (See References.)


6 Dr. George Foltin, interview. (See References.)

7 David Berman, interview. (See References.)

8 Don Winstead, interview. (See References.)


10 Survive Domestic Violence AFTER the Hurricane. (See Index of Resources.)


12 The Honorable Ernestine Gray, interview. (See References.)

13 National Incident Management System: August 2007 DRAFT. (See Index of Resources.)


17 Preparing for Disaster website. (See Index of Resources.)

18 Survive Domestic Violence AFTER the Hurricane. (See Index of Resources.)


20 Theresa Bischoff, Working with Communities and Forging Partnerships to Respond to Emergencies, speech.


22 Carolyn Atwell-Davis, interview. (See References.)


24 Don Winstead, interview. (See References.)


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31 Dr. David Schonfeld, interview. (See References.)

32 Marketa Gautreau, interview. (See References.)

33 Marketa Gautreau, interview. (See References.)


35 Charlotte Frilot, interview. (See References.)

36 Marketa Gautreau, interview. (See References.)

37 Marketa Gautreau, interview. (See References.)


42 Charlotte Frilot, interview. (See References.)

43 Charlotte Frilot, interview. (See References.)


45 April Naturale, “Secondary Traumatic Stress in Social Workers Responding to Disasters: Reports from the Field,” 175.


51 Parents’ Guide for Helping Children in the Wake of a Disaster, 1. (See Index of Resources.)

52 Dr. David Schonfeld, interview. (See References.)


54 Parents’ Guide for Helping Children in the Wake of a Disaster, 5. (See Index of Resources.)

55 Dr. David Schonfeld, interview. (See References.)

56 Parents’ Guide for Helping Children in the Wake of a Disaster, 1. (See Index of Resources.)


58 Parents’ Guide to Helping Children in the Wake of a Disaster, 8. (See Index of Resources.)

59 Harold S. Koplewicz, M.D., et al., Caring for Children After Trauma, Disaster, and Death: A Guide for Parents and Professionals, 29. (See Index of Resources.)

60 Carol J. De Vita, et al., “Providing Long-Term Services after Major Disasters,” 2.

62 Dr. David Schonfeld, interview. (See References.)

63 Irwin Redlener, “Biological and Health Vulnerabilities,” speech.


65 George Foltin, et al., Pediatric Terrorism and Disaster Preparedness: A Resource for Pediatricians, 1.

66 David Abramson, et al., On the Edge: Children and Families Displaced by Hurricanes Katrina and Rita Face a Looming Medical and Mental Health Crisis, 2.


69 David Abramson, et al., On the Edge: Children and Families Displaced by Hurricanes Katrina and Rita Face a Looming Medical and Mental Health Crisis, 3.


71 David Abramson, et al., On the Edge: Children and Families Displaced by Hurricanes Katrina and Rita Face a Looming Medical and Mental Health Crisis, 4.


75 Peter Eisler, “Katrina rips up the few roots foster children had,” USA Today, April 23, 2007.

76 Peter Eisler, “Katrina rips up the few roots foster children had.”

77 Flu.gov website. (See Index of Resources.)

78 Flu.gov website; as David Waltner-Toews writes in The Chickens Fight Back, “Avian influenza, the so-called bird flu, has been described, by various people who should know these things—spokespeople from the World Health Organization (WHO) and the United States’ Centers for Disease Control and Prevention—as the single biggest threat facing the world. Not war, not starvation, not catastrophic climate change. Bird flu,” The Chickens Fight Back: Pandemic Panics and Deadly Diseases that Jump from Animals to Humans (Vancouver: Greystone Books, 2007), 6.
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