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**MATERNAL AND CHILD HEALTH
THROUGHOUT THE DISASTER
CYCLE**

**A Partner/Non-Governmental
Perspective**

FEMA Definition of Functional Needs Support Services

Individuals requiring Functional Needs Support Services may have **physical**, **sensory**, mental health, **cognitive** and/or intellectual disabilities affecting their ability to function independently without assistance



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Access and Functional Needs are Universal

Access and functional needs are met thru the provision of physical, programmatic and effective communication access to the whole community, accommodating individual requirements through universal accessibility and/or specific actions or modifications.

This includes assistance, accommodation or modification for mobility, communication, transportation, safety, health, health maintenance, or any situation which limits an individual's ability to take action in an emergency.





Preparedness

- Sound the Alarm Campaign
- Pillowcase project
- Prepare with Pedro



Personal Preparedness

- **Make a plan:** How would you evacuate? Do you have a trusted support system to assist you?
- **Make a kit:** Include copies of important papers, your medications and pharmacy info, checklist of DME and other equipment you may need to maintain independence/perform activities of daily living, any sensory supports you or a family member may need to help cope with the shelter environment, i.e., self-soothing and communication items/devices.
- **Know your community plans:** Where does your community plan to shelter individuals? What are the evacuation routes? Is accessible transportation to shelters available and reliable?



RESPONSE



REUNIFICATION

- Unaccompanied Minor plan
- National Center for Missing and Exploited Children: Missing Children data base
- Safe and Well

Red Cross Sheltering Philosophy

- Shelters must be, first and foremost, places of comfort and safety which accommodate the broadest range of needs
- Shelters must be accessible to those affected
- Shelter workers and managers must be strong advocates for their clients
- Clients must be supported and empowered to remain independent, proactive participants in their own recovery



Maternal and Child Considerations

Support to Pregnant Women

- Increased need for hydration
- Evaluation of the Emergency Medical System transport
- Inclined head cots

Support to infants and toddlers

- Safe Sleep options
- Diapers
- Formula
- Diaper changing areas, sanitation, waste disposal, hand washing stations

Diapering

 **Diapering**

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1 Keep **supplies** ready.
- 

2 Protect the surface with clean, non-porous disposable paper.
- 

3 Keep **one hand** on child at all times.
- 

4 Place soiled diaper in a container lined with a plastic bag.
- 

5 Wipe front to back. Use each cloth or towel only once.
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6 Diaper and dress the child.
- 

7 Wash your hands and the child's. Assist child back to the group.
- 

8 Place soiled clothes in a plastic bag.
- 

9 Remove disposable paper. Clean and sanitize.
- 

10 Wash your hands.
- 

11 Dry hands.
- 

12 Dispose of towel in a container lined with a plastic bag.

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Medical Needs Versus Access and Functional Needs

- Functional needs do not equate to a “medical” condition and do not require a medical shelter
- Placement in medical shelters can result in separation from family, friends, neighbors and caregivers
- Can jeopardize the health and safety of the entire community by creating unnecessary surges on emergency medical resources



C-MIST

- Communication
- Maintaining Health
- Independence
- Safety, Security and Self-Determination
- Transportation

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Health Needs Accommodated in a Congregate Population Shelter

Health Related Need	Congregate Shelter	Medical Shelter
Dialysis: <ul style="list-style-type: none"> • Hemo • Peritoneal 	Stable with access to hemodialysis services. Access to clean area and supplies for peritoneal dialysis. Disruption of access with diet control for 3-5 days.	Disruption of access to services and/or lack of supplies or diet control
Ambulation (walker, cane, crutches, wheelchair) <ul style="list-style-type: none"> • Arthritis • Osteoporosis • Parkinson's Disease • Muscular Dystrophy • Neuromuscular disorders 	Ambulates with replacement of durable medical equipment Bedridden with own care giver or replacement of caregiver	Unresolved declining health status requiring invasive procedures unable to be monitored by general population volunteer
Contagious disease and/or infection (ex. MRSA, VRE, TB, respiratory infection, diarrheal illness)	Controlled with medication/oral hydration/diet modification or replacement of current medications with shelter ability to provide isolated area for client	No isolation ability at general population shelter. Need for intravenous hydration.
Mental Health	Controlled with client's own meds or replaced meds. Controlled due to accommodation of quiet area, area for pacing, on site mental health professionals, client's own caregivers, volunteers to support supervision of dementia clients from the home setting.	Forensic mental health clients, uncontrolled on oral medication



Emergency Medical System for Children



- <https://www.luriechildrens.org/globalassets/documents/emsc/disaster/other/childrenwithspecialhealthcareneedsreferenceguide.pdf>
- <https://www.cdc.gov/ncbddd/disabilityandsafety/emergency.html>



Behavioral Health Needs

Children's disaster/trauma responses may vary depending upon developmental stage:

- 1 – 6 startling easily in response to loud noises, bed wetting & other regressive symptoms, sleep problems, clinginess, acting out event through play
- 7 – 11 anger and aggression, sleep problems, loss of interest in usual activities, school performance problems, preoccupation with safety & danger
- 12 – 18 increased withdrawal, self-destructive behavior, concentration problems, school performance problems, anxiety, sleep problems

Support to Breastfeeding Mothers

What to eat

- Include protein foods 2-3 times per day such as meat, poultry, fish, eggs, dairy, beans, nuts and seeds.
- Eat three servings of vegetables, including dark green and yellow vegetables per day.
- Eat two servings of fruit per day.
- Include whole grains such as whole wheat breads, pasta, cereal and oatmeal in your daily diet.
- Drink water to satisfy your thirst. Many women find they are thirsty while breastfeeding; however, forcing yourself to drink fluids does not increase your supply.
- Dietary restrictions from pregnancy do not apply to breastfeeding moms.
- Vegetarian diets can be compatible with breastfeeding. If you avoid meat, make sure you eat other sources of iron and zinc such as dried beans, dried fruit, nuts, seeds and dairy. If you avoid all animal products (vegan diet) you will need to take a B12 supplement to make sure your baby does not develop a B12 deficiency.

Privacy

Examples of Accommodation

- Modify kitchen access for breastfeeding mothers or pregnant women who may need additional access to water and snacks.
- Modify feeding times or access to snacks for small children who may eat several times a day.
- Provide way-finding assistance to those with low vision
- Provide assistive technology for visual, non-verbal or non-English communicators



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Support to Children



Considerations for Children

- Play Area
- Safe Outside Space for running games
- Decrease of event stimuli: Turn off TVs rebroadcasting event footage continually
- Quiet areas
- Sensory kits for children with Autism
- Toys that can be cleaned easily
- Single use for soft toys
- Hand sanitizer before and after entering or leaving play area. Consider hand washing station in these areas.
- Return to school routine as soon as possible.

Peanut and Allergies



- Peanut and other allergies are on the rise
- Construct a NUT free snack and eating area

Dietary Needs

- Infant food
- Pureed diet for child with medical needs
- Tube feedings
- Specific Formula for allergies and intolerance of milk products.
- Storage concerns of formula



Helping Children Cope with Disaster

Support parents/guardians to think of the following:

- Encourage dialogue & answer questions
- Limit media exposure
- Make time for them & for yourself
- Stick to a routine to the degree that you can & rely on existing support networks when possible
- Recognize risk factors (e.g. direct exposure to the disaster such as being evacuated or seeing injured individuals, loss or serious injury to family or friends, temporary housing, parent's unemployment, loss of personal property)

Best Practices During Response

- Rapid deployment of Disability Integration, Disaster Health Services and Disaster Mental Health leadership and workers to support Mass Care
- Immediate set-up of video phones and VRI app-enabled smartphones in shelters
- Distribution of sensory kits to children and adults needing support to cope with the shelter environment



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Best Practices During Response

- National MOU partnership with NDRN and collaboration between P&A agencies and Red Cross to identify and resolve accessibility issues in shelters
- Local collaboration with Centers for Independent Living and other stakeholder organizations to meet immediate needs, distribute emergency supplies, and facilitate short and long term recovery



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RECOVERY



Community Planning

- Review Current Plans
- Identify Stakeholders
- Community Gap Analysis
- Identify Resources & Establish Relationships



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Considerations for Human Services Programs

- Continuity of Services during disaster
- Participation with Long Term Recovery planning groups.
- Capacity of community services

Puerto Rico Long Term Recovery

- Solar panels for schools
- Solar panel back-up for community wells
- Grants to micro agriculture
- Grants to Federally Qualified Health Centers to support community resilience and increase psychological support to children

Planning Key Considerations

- Planning and responding with partners is key
- Functional Needs Support Services Guidance does not require stockpiling supplies, but the ability to secure resources when needed
- Include Functional Needs Support Services at all phases of the disaster cycle



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Planning Key Considerations Cont.

- Exercise and evaluate your integrated community plan with real people
- Interact with your community to learn about potential access and functional needs
- Plan inclusively to meet the needs of the whole community



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Resources

- Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters http://www.fema.gov/pdf/about/oddc/fnss_guidance.pdf
- Department of Justice web site, http://www.justice.gov/publications/publications_a.html
- **Federal government website for people with disabilities, their families, friends and organizations that serve them. Can subscribe to various publications related to training, accommodations, advocacy, etc.** <http://www.disability.gov>
- **Tips for First Responders 5th Edition**
<http://cdd.unm.edu/dhpd/pdfs/FifthEditionTipssheet.pdf>
- **Children in Disasters** <http://www.cdc.gov/childrenindisasters/>
- **People First Language** <http://tcdd.texas.gov/resources/people-first-language/>
- Preparedness, Response and Recovery Consideration for Children and Families
<https://www.nap.edu/catalog/18550/preparedness-response-and-recovery-considerations-for-children-and-families-workshop>.



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Questions/Discussion



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