

Planning for Complexity: Building Response and Recovery Capacity by Learning from the Experiences of Special Populations

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What's Our “Why?”

- ▶ Build the capacity of health and related systems (including the degree to which Title V maternal and child health programs are visible and actively engaged) across jurisdictions to deliver evidence-based and equity-centered emergency responses.
- ▶ Influence processes (planning and training, policy development, program implementation, funding and resource allocation, partnership prioritization, etc.) to ensure that the unique, complex needs of women, children, and families are elevated in emergency preparedness, response, recovery, and mitigation activities.

Outreach to Achieve Equity & Diversity

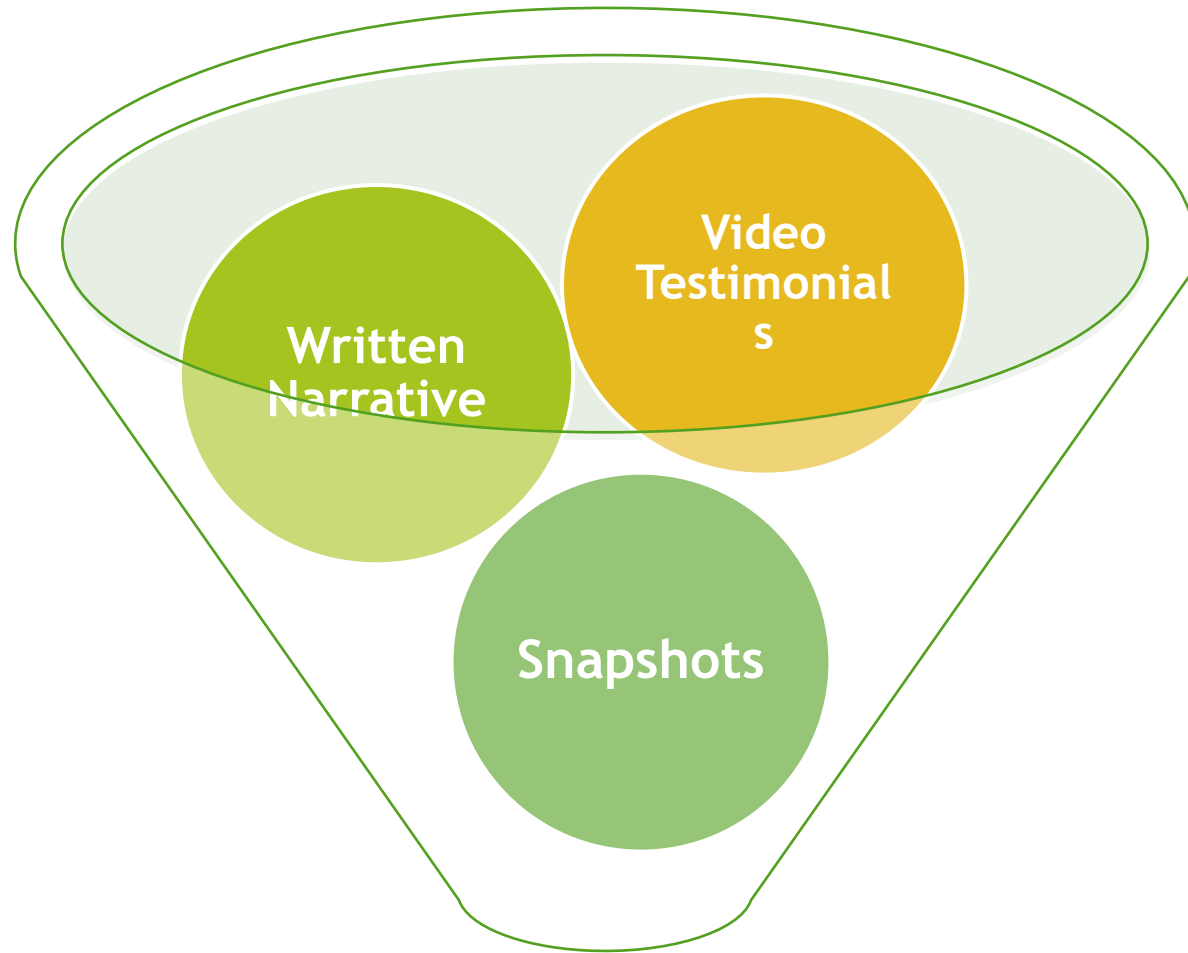
MCH/CYSHCN
Directors

MCH
Practitioners

Family Leaders

Community
Organizations

- ▶ Intentional recruitment strategy
- ▶ Personal outreach to cultivate new voices at the table
- ▶ Genuine diverse representation to guide the work in an authentic way
- ▶ Who are key partners in Planning - Response - Recovery
- ▶ How do families know “where” to go



Anthology!

BUILDING RESILIENCE FROM LIVED EXPERIENCE



NAME

Cassandra Sines

SUMMARY

In this [brief written narrative](#), a mother of children with special health care needs describes her family's experience navigating uncertainty at the outset of and during the COVID-19 pandemic.

KEY WORDS

Services and supports
System leadership and communication
Mental health

SYSTEMIC FACTORS ADDRESSED

Ableism
Fragmentation / silos
Policitization of public health



LOCATION

Kansas

EMERGENCY TYPE(S)



Disease Outbreak

MAJOR TAKEAWAYS



FOR INDIVIDUALS AND FAMILIES
Be clear about what "safe" means for your family, and understand that you help manage your stress, and make difficult decisions together.



FOR HEALTH AND RELATED SYSTEMS
Children and youth with special health care needs require a significant amount of support through the education system, so advanced coordination on where health is effectively prioritized during emergencies.



FOR COMMUNITIES
Decision makers should be actively seeking the perspective of families with complex health needs in developing and setting public safety guidance.

BUILDING RESILIENCE FROM LIVED EXPERIENCE



NAME

Louisiana Department of Health
(Cheryl Harris, Jantz Malbrue, Ngoc Huynh)

SUMMARY

In this [brief written narrative](#), Louisiana Title V leaders discuss how Hurricane Ida (2021) impacted the state's newborn screening program – including efforts to implement their continuity of operations plan with limited communication capacity and how they made modifications to address new challenges as they arose.

KEY WORDS

Systemic leadership and communication
Newborn screening
Continuity of operations
Staff support
Infrastructure and interoperability

SYSTEMIC FACTORS ADDRESSED

Poverty
Communication access
Health care access
Population mobility



LOCATION

Louisiana

EMERGENCY TYPE(S)



Natural Disaster or Severe Weather

MAJOR TAKEAWAYS



FOR INDIVIDUALS AND FAMILIES

Even during an emergency, you should still get the time-critical services and resources you need. There are people responsible for ensuring you have access even though it may not be from the provider or place you normally receive those services.



FOR HEALTH AND RELATED SYSTEMS

Every emergency situation is different but having a standard plan and revisiting it at strategic times with staff and community partners (e.g., labs, birthing hospitals) make it easier to modify practices and fulfill the most urgent responsibilities.



FOR COMMUNITIES

Investment in systems (e.g., web-based platforms for data management case surveillance) can help ensure that those displaced by severe weather can still receive screening and receive needed follow-up care, resources, etc.

The story summarized above was collected as part of a project supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS)

Video



How to Interact with This Resource



1. Under “Explore the stories”, you will find a collection of stories featuring a video or written narrative (with optional audio component) that will each take no longer than 10-15 minutes to review.



2. Using the brief description, choose which stories you would like to explore further. Click on the hyperlink to “View this story” and a new page will open up select the stories you want to access.



3. Navigate through the individual contributor pages to access the story (either in written or video format). Each story includes accessibility features, such as text-to-speech, on-screen captions, and full transcripts.

4. View/download the one-page snapshot which briefly summarizes major takeaways for individuals and families, health and related systems, and communities. As you explore, consider your spheres of influences and how you can be a catalyst for moving from intention to action.



5. Share these stories with decision-makers, work them into tabletop exercises or other staff trainings, or use them to start a dialogue with colleagues from your jurisdiction’s Public Health Emergency Preparedness and Response (PHEP) program.

AMCHP

ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

**Increasing Public Health Preparedness
Capability among MCH Programs**

Let's hear from you...

- ▶ Where do you see yourself in this scenario?
- ▶ Knowing your current infrastructure, how can you go from Good to Great?
- ▶ Pulling from your COVID-19 experience whereby you were asked to participate in activities/planning that were new to you, how did you elevate the MCH population?
- ▶ What are you proud of in terms of your contributions to assure MCH populations were considered in your states' approach?

Prepare a 'departing' emergency kit:

- ▶ Change of clothes and personal hygiene supplies
- ▶ *Medications (Medicaid will only cover one month)
- ▶ food and water (canned goods? Bars? Vitamins?)
- ▶ Cash and credit cards
- ▶ Identification for all individuals
- ▶ Important documents (policies, family records, bank and credit card accounts, inventory or video of valuables)
- ▶ First aid supplies, compass, whistle
- ▶ Flashlight: battery, solar or hand crank
- ▶ Weather radio, masks, manual can opener, utensils
- ▶ Disposable dishes, matches, lighter (or candles)
- ▶ Chargers/extra batteries, plastic bags

Prepare a 'stay in place' emergency kit:

- ▶ food and water
- ▶ how will you heat the food? (liquid cooking chafers + bracket)
- ▶ Flashlights or candles/lighter
- ▶ Battery-operated radio
- ▶ clothing and bedding appropriate for weather
- ▶ chopped firewood
- ▶ First aid supplies
- ▶ *Medications
- ▶ Gas-operated generator

Disability related items to consider:

- ▶ *second pair of glasses, hearing aids (batteries?)
- ▶ battery charger for wheelchairs + manual wheelchair
- ▶ Records of durable medical equipment (serial #s, etc)
- ▶ copies of prescriptions
- ▶ Medical alert bracelets
- ▶ list of allergies, list of physicians/specialists
- ▶ *Extra oxygen, insulin, catheters, medical supplies, etc
- ▶ laminated personal communication sheet
- ▶ List of contact info for 'circle of support' team members
- ▶ Know location of accessible shelters



Share Your Story

Let's take the next 5 to 10 mins
to share our stories with others
in the room.

Call to Action!

- ▶ As an individual, what steps can you take to center the human experience in PHEP?
- ▶ As a person with positional influence, what can you do to center the human experience in PHEP?

Call to Action!

- ▶ Check out the Anthology and share the stories with your network!
- ▶ Share your story. We want to hear from you!



PHEP@amchp.org