

Preparing for Emergencies with Mental Health in Mind

Nydia Ntouda: On today's webinars, we have Neal Horen and Maria Eugenia Vazquez Betancourt, and they will introduce themselves today. Neal, you can take it away.

Neal Horen: Thank you, my friend. Welcome everybody. [Cough] I'm Neal Horen, I'm the co-principal investigator and co-director of the National Center on Health, Behavioral Health, and Safety. I'm here with one of the people actually on this call who's taught me about emergency preparedness response and recovery from our center. Maria Eugenia is one of our training and technical assistance specialists at our center.

We're both super excited because this is work we've really been pushing for quite some time. There are folks on this call like Jason and Maria Pagano from Puerto Rico who really have been people that I've learned from. As I look in the chat and see folks from Presque Isle, Maine to Flagstaff, Arizona, the one thing we all have in common, maybe it's the heat these days, but it's also everyone is dealing with emergency preparedness, response, and recovery.

That may vary based on where you are and the kinds of things that you're dealing with. But we have been spending a lot of time thinking about particular aspects. Our center works on all aspects of emergency preparedness, response, and recovery, but in particular, Maria Eugenia and I are on the behavioral health side of our center. On the next slide, I'll talk a little bit about what we're going to try and accomplish in the next short amount of time to get folks thinking about what we think is a pretty important component of all of this. If we can get to the next slide, please.

We're going to really look at tools and strategies that will help people be more prepared for natural disasters and other emergency situations. We're going to focus on the social-emotional aspects. Those are the social-emotional aspects for children and families in the program as well as for all of you for staff as well. We know that planning for things that you hope will never happen can be frightening for folks, can be overwhelming.

We also know that the more you're prepared, the better able you will be to take care of children, families, and staff. We are going to spend some time talking about how we integrate mental health strategies, think about what we know about trauma that may occur after folks have been through a disaster or an emergency. We're going to spend some time thinking about today what does your EPRR, your emergency preparedness response and recovery plan, what does that look like?

Hopefully, when you leave here, you'll have an idea of wow, we've done a great job. We've really thought about our focus on mental health and the social-emotional well-being of everybody. Or we've got a great opportunity here to do a little bit more work on our plan. We'll take some time to think about how to promote strategies that think about how to address the impact on mental health.

One of the things that I've learned over the last 20 years of doing this work is there's a tremendous impact on mental health that oftentimes is not obviously our first priority because we want to think about safety and shelter and the basic necessities. Very quickly we can see

that mental health becomes a pretty crucial issue so we want to think about how we identify some of those strategies, and to think about the strategies that we might use to foster recovery, after something happens, are there things that we can be doing? Those are our objectives.

Hopefully, we're going to reach them because then you'll do this evaluation that everyone has sort of is going to get here at the end. One thing that we'll try and do is make it as interactive as possible. As Nydia mentioned, we'll try and answer questions. We probably won't get to every single question. We're an actual center. We're here. If questions come up, you can always come back. But we'll also do some more interaction. We'll do some polls and different things like that so we can really have your input.

Please, if you have questions, if there are things that come up, put it in there. We'll try and get to that either in the moment if we can, or we'll try and save it for the end. With that, I'm going to turn it to my partner here, Maria Eugenia, just my work partner, my wife won't get upset. She's my partner at work, not my partner. All right, so I'm going to let you take it over.

Maria Eugenia Vasquez Betancourt: Hello, good afternoon. Happy to be here with you all. Let's start to warm up today with the Menti, next slide, please. Today's Menti, the first one that we're going to have today is for you to think and just share with us what is your biggest barrier to an emergency preparedness plan? Our colleagues from behind scenes are going to share now with us. We have there the link and the code to use to answer that question so everyone can see your answers.

You will get surprised to see we have also the QR code that if can be easy for you to access the Menti. I love to see this question up here and mostly to see the answers because you will see through the answers that there is a lot of similarities and barriers between other programs, other programs and grantees around the nation and territories. You will see that you will have similar barriers. Share with us.

Multiple sides, knowledge, OK, it's pumping up. Oh, my goodness. It's going too fast. OK, geographical spread, education, consistency, knowledge, I see knowledge few times. Communication is yes, is so important. Yes, consistency, multiple sides, follow up, also yes, that's one of the biggest barriers sometimes. We don't have time to follow up to complete the communication or to have those teachable moments with the staff or families to complete this plan, to have this plan.

Ready, prepare, trainings, finding a location to go, special needs, reunification. Happy to see the part of a special needs because that's something that we need to be very careful of and aware of. What are the special needs that you may have for certain part of the staff, the personnel, children, staff turnover? Yes, that's a big one these days, following up with training staff.

For that, we're going to talk a little bit about that during this webinar, about some strategies that you can use to have this plan integrated in your calendar, in your year calendar so you don't escape that. Knowledge, again, rural areas or isolated areas. That's important, too. Yeah, that's a big one too. Thank you very much for all to share with us. It's great to see.

Can we go back again to the slide deck? Thank you very much. I asked you all before, what is your biggest barrier to an emergency preparedness plan first then. Let's think what is emergency preparedness? The term of emergency preparedness refers to the steps you take to make sure you're safe before, during, and after an emergency or a natural disaster.

The goal of this workshop as Neal was mentioning to give you some thought strategies and also give you some steps of preparedness, so you don't have all these barriers that you just mentioned before or at least not that you're going to have any barrier to complete your preparedness plan but at least to decrease all those barriers.

An emergency preparedness plan that focuses also on the ways to support positive interactions will help to meet the unique developmental needs of infants, young children, and also the staff, right, all the team that is working with you and with children, who's taking care of children every day. Recently, we need to consider as well additional natural and technological disasters. Young children exposed to the need to active shooters, and this needs to be also part of your drills as well.

Also pandemic preparedness is something that we need to consider as well. It's an ongoing process. With that being said, it's kind of a little bit of the introduction of things that you need to identify as an ongoing process of review, revise your plan and to add what you need to maybe to remove what is not working right now. That's why it's so important to be prepared, review, and complete the steps of the preparedness plan.

Next slide, please. Talking about steps, this is why I mention that because we have an emergency preparedness plan, we have some steps to follow. Here is the 10 emergency preparedness steps for being ready or being prepared for emergencies. For me, I just see this, and it's like oh, my God, this is a lot. You have mitigation. You have community partnership. You have hazard assessment, communication, some word that I saw in the Menti of as a barrier.

Roles and responsibilities, facility safety, emergency supplies, reunification procedures, relocations, drills these are 10 steps that are suggested for you to have a robust and a complete preparedness plan. We see this, and we may think, oh, my goodness, I'm already overwhelmed with all these steps that I need to complete. For some of you even maybe you must think about well, bring brings back some memories of feeling the latest disaster or tragic events.

Today, we'll break these steps down into smaller steps. Hopefully, we can give you some strategies to make you feel the support, and for many people to try to give you more organization's tools to continue advocating for children that you care and for, all this stuff that you care about. Next slide, please. That's you, Neal.

Neal: A couple of things, one, before we go too far, I should mention that for some of you, this may be hard to talk about. You've been through some sort of emergency. You've been through some sort of a disaster. While those who know me know that I sometimes like to joke around a bit, this is serious, and for some may be hard to listen to. If you need to take care of yourself, this is where we're going to start.

Because when we think about being prepared emotionally for disasters or emergencies, sort of hard. Many times, they are – they just sort of happen. They're not something you get two

weeks notice, there'll be an emergency on Tuesday. We really know that when people have gone through a traumatic event, it can create a number of losses, emotional losses, physical losses, loss of property, things like that.

Those kinds of losses oftentimes can stir up anxiety, uncertainty about the future, things like that. Adjusting is hard. I couldn't even adjust to the new yogurt and granola we had in the house today much less the kinds of things that we're talking about. But what we do know is that when you are more emotionally prepared or as emotionally prepared as you can be, that can reduce your stress and anxiety.

The lower your stress and anxiety, the more likely you are to be able to use your frontal lobe and your problem-solving skills. If you can manage stress on a more regular basis, it will help you cope more effectively during more challenging circumstances. How do you build that? You do the kinds of things that most of us have probably talked about over and over again in many ways. Those include taking care of yourself, making time for things like yoga and deep breathing and meditation and walking, those kinds of things.

Now, I know that some of you are back chatting to your friend. "This dummy is telling me yoga is going to help." We're not saying that this is the answer. We're saying that these are the kinds of things that can be helpful. If you practice on a daily basis some sort of technique that allows you to slow your breathing down, that will be something you'll call upon when things are more stressful. Looking for making manageable changes, change is hard.

But if you become more skilled at adapting and being flexible, then you'll be more likely to be ready when you need to call upon those skills. Decreasing some of the less healthy coping behaviors – smoking, drinking, overeating, under eating, those kinds of things that we oftentimes refer to as well when I'm stressed, I ... Let's start to think about what are the healthy ways in which to deal with stress so that you start to use those even more.

What I've seen in all the kinds of disasters that I've worked on, what I've seen is that the folks who seem to be able to call upon skills that are already in their skill set, they seem a little bit better able to deal with what's right in front of them. What's right in front of you is also an unprecedented thing that you never expected would happen, being grateful. Working on that more positive attitude towards life and then making some time for yourself.

We oftentimes, we're Head Start. We tend to say I don't I don't have any free time. Making some free time in which you have some healthy habits, which you start to think about your mental energy a little bit can really be helpful. You're going to need that in order to offer support to children, families, yourself, and other staff in times of emergency.

Before we move to the next slide, there was a question and we do have some yoga lovers here, which is good. There was a question about you had mentioned a technological disaster. I don't know if you want to just take a minute as you move on to your next slide to just sort of let folks know what you meant by that.

Maria Eugenia: Thank you, Neal. Yes, I did answer the question on the Q&A box. It's a technological is more like man-made disaster that will take over for instance, if the hospital has systems, technological systems to keep machines breathing, working for breathing things like

that. People can just hack this technology systems and can make a big emergency. It's kind of more man-made human, I gotta use this term better, human made disaster, and it's divided into technological disaster.

Also, I have another question on the Q&A Box is where I can get or establish these steps? Your partners the steps that I just mentioned before for emergency preparedness plan. This is suggested by FEMA, by ready.gov. This something that we suggest for you to follow in order to have as I mentioned before like a robust like a line plan, and you don't miss post-tests ...
[Inaudible]

As Neal was mentioning strategies or how to take care of yourself, he was mentioning about ways that you can manage stressful situations and develop a positive attitude. You may also may think, next slide, please. One of the steps that we're suggesting here, the preparedness plan is the community partnership. This also will help you with all that emotional part of preparedness.

Because if you formed this partnership with your local emergency workers, local public health, you will release some weight from your shoulders in the process of preparedness. Somebody also we may have experienced some disasters that you have never experienced. I believe that Neal mentioned this in the beginning of the presentation that you may be somebody from Puerto Rico, from Oklahoma. We have different disasters. Different disasters are local.

I may have not many tornadoes warnings here in Puerto Rico, but some other people may have. Imagine yourself receiving a new staff member in your program, and these people, this person doesn't know nothing about hurricanes. This person has not been able to, not have the experience of being in preparedness process of a hurricane and this person is moving to a place that may have hurricane season.

You may need to have this part in your steps preparedness plan like trainings, like a part of mitigation and introduce these new staff member to all this process or this plan that you may have already but also integrating partnerships with your local emergency workers, local public health, inviting these local workers to participate in maybe in their health service advisory committee that you may also would like to create.

Again, this is part, these steps are a part for you to have something more organized. At the end of the day, it will decrease the stress. Maybe you will react better or more effectively in the moment of a disaster or emergency. I don't know if I did complete my part of this slide and also answered the question from the other colleague from the Q&A because I can continue, I'll continue talking. But we can keep going through the presentation.

Next slide, please. You all can see how all these steps will get integrated together and then up to date. You will have all the parts checked out from the plan that you may need to have in order to respond more effectively to an emergency or disaster. We continue here with the community partnership. I mentioned before about that part of releasing, really take a little weight off your shoulders when you're just integrating personnel and experts from out of your programs.

Those help can see that this community partnership that we also talk about in the EPR manual. You can find this ECLKC website. It's important to utilize this community throughout the emergency cycle, like prepare through the response and also and the cycle of the recovery. Because your community is also a great place to gather resources for emergency readiness.

There is may be also like nonprofit organizations or emergency community committees that can have information like hard copy papers that you can duplicate and share in your programs with their families, with your staff. Also creating this relationship will help as I mentioned the weight of the role responsibilities that perhaps at the time of making your plan, you realize I'm missing so many things, where can I reach out this kind of information?

Of course, we're here to help better and to assist. But also you may find in your community some already created committees, emergency committees that may be able to be part of that partnership. Also, in addition to being prepared and developmentally appropriate emergency preparedness plans for safety, developmentally, developing and maintaining safe, stable, and supportive relationship is crucial. Being prepared before a disaster happens, trust me, makes it easier to cope also during an emergency and recover faster after an emergency.

Think about this also. Community partnership, by talking to children about these community helpers, these first responders, doctors, firefighters, police officers. For example, as part of your community helper partnership strategies, when you're preparing your plan, you invite one day a police officer from your local precinct to come to speak to your three years old classroom. Five months later, there is an altercation maybe between two parents in your parking lot, and you have to call the police.

This is the first time you have had to do something like this in your program and you are nervous as you're not sure if calling the police was the best response because children are there. However, you just have that chance to have already this same policeman to be recognized by your class, by your children because it was the same officer who spoke to them to them in class, in the classroom. And is the same one who arrives at the scene.

It can be easier for children as well to understand that these helpers, community helpers are there to help, are there to assist you. Thinking about familiarity, setting and connecting yourself with disaster resources even before you need them will prepare you for immediate, efficient, and effective action. I got to say. I'd like you to take a moment and to please think about who in your community you will reach out to or do you think that you may even need to contact, that you haven't never contacted.

Next slide, please. Have any other question. I'm sorry I didn't check the box. Neal, help me out. If you see any question because I can continue talking here.

Neal: I'm here for you. I'm part of your community. I'll let you know.

Maria Eugenia: Thank you. I appreciate it. I feel safe now. Here we have the hazard assessment. This is one or one other of the steps from your emergency preparedness steps. When planning and getting prepared before an emergency, you're thinking about all the things that could go wrong, can be frightening, or can induce even previous trauma. Information and gather it from

parents or caregivers about children's experience. Help staff recipients respond to children needs or even understand the meaning of behavior in children.

You may think this information can be specific, especially important in understanding children responses to emergencies when they may be reminded of early negative experiences. Sometimes questions about family configuration and relationships, even custody issues and restraining orders will prepare staff for difficult situations that may arise.

Many of recipients report at least one experience of being surprised when a non-custodial parent or parent incapacitated by drugs or alcohol arrived to pick up a child. When reviewing your recipient's release policies, this is a good suggestion that it will help. It will be helpful to have an open conversation about these issues. This information is crucial to having prepared preparation for a possible disaster.

This can be part also of, I know this can be sensitive topics for you to be open and to ask parents, "Hi, I'm your teacher's child, and I need your information about if there's any custody issues. " Things like that can be kind of sensitive so this can be part of the intake. This also can be the time to educate and prepare your caregivers about your recipient's emergency response plan.

Caregivers need information on emergency notifications, relocation sites, and procedures of reunification. That is important to review maybe your caregiver parent handbook and allow parents to ask questions not only at the intake but also throughout the year. Maybe if you just reviewed your plan and identify that you had made some changes for example for relocations, have this continuous communication with parents, maybe through the parent newsletter. This can be used to convey all this information.

For instance, at times were disasters were more obscure. For instance, like March, the beginning of tornado season or June, which is the hurricane season. Think about these strategies, then you can have some more information about the families and the part of having like to get to know more about children, you're children [Inaudible] in the classroom. You can be more attentive on how to respond or because this child you already know that have been through all this trauma before because of natural disaster or human made emergencies situations.

Some tips that I think well, I want to share with you to consider about sensitive topics that I mentioned before like for instance keep in mind that it may feel like intrusive. I said sensitive. Now, I say it a little bit intrusive to ask parents, caregiver questions about their personal lives. However, detailed information will support your ability to provide high quality service. Try to introduce this question as I said before, at intake.

When discussing sensitive topics it may be also helpful to keep in mind by including these questions to the standard intake packet or also to get to know parents more and ask parents about how they are feeling about requesting all this information. Be sensitive, culturally sensitive as well when you are asking these questions.

Think about the importance of communication between parents and staff. This can be also a good opener, a good strategy to open the communication between parents and staff. Ask how

child, how the children experience impact of any previous disaster or any previous emergency, things like that, strategies like that. Possible question is maybe like "what about your family, your community or culture?" Get to know that information ahead of time.

Let's continue with the part of the communication with the next slide, please. Many reputable government and professional organizations have created already toolkits to support emergency preparedness plans. You can use them. You can use these forms as well to have open conversations with parents like you will find this information from your fire department, poison control department, and Child Protective Service, local Child Protective Service offices. Of course, also law enforcement may have some information about how to manage or how to respond in different situations of emergency. This can be also good tips that you may have included as part of your promotion of preparedness in your program.

Next slide, please. Also thinking of the tips or documents that you may use, I mentioned before from other reputable government, or professional organizations. Part of the communication specifically thinking about the social and emotional health is to include the child's experiences. There as I mentioned before, ask parents and expressions, how you're working to manage emotions and ability to establish positive and rewarding relationships with others, with children, with your own colleagues, and your programs.

This part of the communication was just another step in your list of preparedness plan, not only about this expert on law enforcement or CDC or but also inside of your program with the parents, with the caregivers of these children, with your staff. How are you addressing these communication to get to know your staff physical safety or physical needs, physical needs from children, children with special medical needs?

How you can establish this communications, for instance, not only children with special needs, but also medical needs that may have from their weekend when he was playing around, and he broke a bone, and he shows up on Monday and you have an emergency, and he has – help me out, Neal, the thing that you put on the arm or whatever once broken.

Think about those details and how you can have previous communication of all those details and details with your staff and also include partnerships to help you out how to address all these needs, all these maybe needs in your buildings like a safety exit for children with special needs, wheelchair, those details, this part of also of the partnership, but also with the communication, with family, with your staff.

As you can see, the core features of emotional development include the ability to identify and understand one's own feelings, to accurately read and comprehend emotional states in others and to manage strong emotions and their expressions in a constructive manner. This is part of the National Scientific Council.

What I just mentioned is the part of just consider that all the things that you're doing not only for the part of being secure, the windows or your building to have a ramp in your building, but also the part of the social and emotional perspective to include those partnerships, to include those that communication, that to have that open communication with families with staff and even with children on daily basis to help them express their emotional level, their feelings it can be so helpful during a moment of an emergency.

Next slide, please. With this being said about communication, partnership, let's do it let's do another Menti. Let's go ahead and do another Menti and share with us what role does the mental health consultant play in the disaster preparedness process in your program. Here the question in top of the screen, you have the code also you can see probably you can see the QR code. No, no QR? OK, just use the code number.

Neal: Maria Eugenia, I see lots of opportunities for folks if the ones are saying none. I will say I know I don't have a lot of time for this, but in the places that I think have had some pretty successful responses to disasters and emergencies, the mental health consultant has oftentimes been a critical player. Usually, it's because they've been a very integrated part of that program.

Now, we're getting to see that for some huge critical role, a huge role. We don't have one. We won't to tell you that that's a Program Performance Standard that we want you to be able to get your mental health consultant, and we really want to help folks figure that out. But you've seen a wide range of responses on this.

Maria Eugenia: Yeah, but I love this Menti exercise because we have a lot of people in this webinar today. For those also that just responded none, you may have a bunch of good ideas and how to integrate a mental health consultant in this process of preparedness, disaster preparedness or emergency preparedness. Teachers, relationships, reflective supervision, that's so important as well because you have different stages.

You have before, during, and after the emergency, also it can be a great resource for you to have. Thank you all for sharing. Neal?

Neal: Yeah, so let's get back to our slides. I know we have about 20 minutes. I want to just talk a little bit here that when you're thinking about safety, I want you to think about emotional safety. Well, there's a sort of a social-emotional component that we want you to think about here. Ask again if you have a mental health consultant, what is their role? Just think about that when you invest in the safety.

Psychological safety is oftentimes when we talk about, but in terms of social-emotional well-being, it really can help decrease fear. It can increase morale. It can decrease fear. But what we from a lot of experiences, there's really oftentimes two steps that people take in an emergency. Either they step up or they step back. This is something that people are oftentimes no matter how many drills you've done may be really challenging.

When something happens during working hours, you really want to have a plan that keeps everybody safe and helps people stay as calm as possible. Now, I say that. If I'm being completely honest, I don't have to try and keep a classroom of 15 two-year-olds quiet and calm. It's challenging. We know that. But the more that we've sort of prepared and practiced and done these kinds of things, the more likely we are to be able to do it in the moment.

We also know, though, that those kinds of disasters, those kinds of emergencies, you may be away from your family, from your friends. It can be really stressful, too. The more that you have made a plan that everybody's going to stay safe, that they're going be able to calm as much as

possible, that really is dependent on staff knowing their roles, every staff. Again, in the most effective responses that I've seen, everybody knows what they're supposed to do.

It's really about letting them start to think about what role can I play? I'm a person who's been through lots of emergencies. I know that I can stay calm. I really want to be able to do this. But really knowing all that is important and also thinking about from a social-emotional perspective, are there things that may cause somebody to become more stressed or upset?

Power outage, if somebody for some reason gets very upset when there's no lights, if there's somebody who when they hear wind, and they've been through a hurricane or a tornado, as soon as they hear hard winds, it can sort of trigger for them or set them off. You want to start to think about those kinds of things. Thinking about who's going to fill these roles, and we'll talk about here on the next slide, please, is sort of to think about who's going to do these most effectively.

Instead of just saying, well, you're going to do this and you're going to do this, you're going to do this. I don't know why I'm talking like Oprah's giving away cars, but this is really who feels like they're best suited, most comfortable, doing particular things. Then start to make some of those assignments. Take that input from your staff. You can have the best plan at ever, sort of written down on a piece of paper. But if no one knows about it, no one knows how to respond, it doesn't really matter.

It may be having some time to really talk this through and think about the different stages of an emergency. Mental health is a key part of all of these, but really thinking about what does it take to be prepared psychologically, emotionally, socially, emotionally to be prepared for an emergency or disaster, what does it mean to be able to do something in the midst of the emergency and after?

To Maria Eugenia's point in the chat, it is difficult. That turnaround, and I think Maria Eugenia had that on one of the slides, the idea that you may have people who are brand new, and it has got to be put into your orientation, right, your health manager orientation, your mental health manager, your mental health consultant. New staff should be intimately familiar with what the plan is. That can be as you point out very challenging when we have so much staff turnover.

It could be even worse if something happens. I just want to put this out there. But you have to think about those stages and then really start to think about what are we going to do in terms of, say mitigation? I'll turn it back over to you, Maria Eugenia on the next slide.

Maria Eugenia: Yeah, I agree, Neal. As you see all these steps like you said, "Oh my goodness, there's a lot of things to do," but being proactive is empowering. As soon as you start your plan and can see there are all these things that are worth mentioning here and apply an approach to promote, protect, and care for mental health, everything will go smoother in the process of getting this plan altogether, putting all together.

Neal mentioned about new staff members. This is something that I always suggest to programs is to consider to have this in your calendar, to establish this in your meetings, specific meetings in your calendar so you can just approach this and this slide says here, being proactive with this.

You don't stay until last minute until the month before the hurricane season to start to review in your plan.

This also will decrease the stress and anxiety from staff, from families even, from family members that we already have been going through an emergency before. Hey, what's going on? Where's your plan? What are you doing? What's your strategies? Who's going to be able to help us if something happens? Who's going to be taking care of my children if something happened? Consider to add that in your agenda and your calendar year calendar so you can have drills included there. You can have time to review this plan.

Next slide, please. You can have time to create this great product that we are just putting together. This is something that you should also consider, the part of the social- emotional perspective to get ready and to prepare for and to respond to an emergency, which is we call it the emotional backpack. While preparing your emergency preparedness plan, consider also together you may have already a bucket or a go bag with supplies like maybe diapers or water bottles or food or blankets or things like that, radio. But also consider having an emotional backpack ready to go.

Children feel safe when they are with familiar adults. Consider in your plan to have this backpack not only in your drill process but also physically backpack, a backpack that you can use during evacuations. It's important for teachers to stay with their group when an emergency happens. You might want to have this kind of backpack for your drills to practice with children daily basis about what is a tornado. What is a hurricane? What is a flood, what to do, how to respond with when a violent event happen in your program?

When children are more familiar with this responses, and you use maybe strategies that you may have in this backpack, it will help a better cope with this situations, for instance items that you may have in this backpack, to comfort kids and also yourself. Because this is also for yourself as the adult response to responding to this emergency, to this violent situation. Is for instance, you can have a blanket, you can have a change of clothes.

But also, you can have things familiar for children that you've been using daily basis. This can include phrases that you may have been using in class during drills or mindful exercise, like, for example, let's take a deep breath, like talk the turtle, or let's count slowly to 10 or these things. You can have a paper in your desk specifically backpack so you can grab and go maybe to shelter in place.

You can have this exercise done with your children and shelter in place so they can maybe feel more comfort or more or feel safe with you in that difficult situation and stressful time of just running out from one building to another when the emergency occurs, also maybe to have a list of calming phrases to children, also maybe to have reflective calming phrases for yourself, too.

Also, most important. The most important thing, to have a list of children in your classroom, contact information for families, maybe some specifics if the child has any medical specification, so you can have everything in that backpack. At the time of the emergency you just can grab and go. Sometimes we just stress out, freak out when the emergency occurs. You have cheat sheets there and ready to go so you yourself feel more secure, to be able to be more responsive with this situation like yours.

Next slide, please. I mentioned about a little bit of a relocation, about moving shelter in place. This evacuation process, first of all, consider what's the best place facility for this relocation. Give informed families about where are you going to be relocating to of course, consider displays to have to be established already with the transport with a need to specific needs for the children, for instance wheelchairs or the cribs so you can have a space enough space to take children and adults to be safe in shelter.

Next slide, please. Here, we have this table that I divided for you all to maybe if you want to print out, review, add, edit. These are some tips for you to consider when you're doing the relocation process, when you're there in that strange different for children place to be for, maybe you can be this relocation place, this shelter in place for a few hours, maybe even days.

Take time to listen. Take time to listen children concerns and answer as simple as honest as you can. Give children reassurance. Assure children that everything is going to be OK, and it's normal to feel how they're feeling. Allow children to have some control over their environment. Allow our children to have some time and space to play. Maybe, for instance, in that backpack, you can have some stress balls or even calming bingo which have this those this resources that I'm mentioning here.

You can find in the resources link page so you can look later on. Also, consider to be sensitive to emotions. I know this hard, sometimes when emergency occurs. But I'm positive that if you do these drills to take your time to get prepared, you will be more prepared to manage your own emotions and to be sensitive for children's emotions and be more effectively responsive. Give children extra time and attention. Find time for a special activities with children.

As I mentioned in the backpack, you can even add something that you usually use in your classroom from the calming area in your classroom or something particular that they're familiar with, like personal item maybe that they're very familiar with. They can have this time, and they can go to a normalcy as fast as possible.

Next slide, please. To go to normalcy even though there in this children's place new building different from them. Here's a continuation of the relocation process. Sometimes consider the children is going to be feeling afraid of the situations. Again, if it's more as you have these drills, and you have this plan prepared, and ready, the soft, it will be more easier or I'm trying to get the right word here. But it's going to be the process of the transition will be softer, if I can use that term, softer or easier to manage and later on, to cope as well.

Next slide, please. The relocation, you spend some time with children there and shelter in place. You spend a lot of time with children playing, keeping them keeping them entertained, talking to them, understanding their feelings. But also, you have all the persons out there from the shelter in place, which are the parents, the caregivers for the children. Consider the reunification part is really important. It's the same important as all the parts all the steps from your plan, plan for children to be able to have the oldest information on time with the parents, caregivers.

You have the backup emergency contact list in that backpack that may help you to complete this reunification faster for the benefit of everyone, for your own benefit, for the children, for adults, caregivers that are outside waiting for these children. Children and adults who have

experienced stress or loss either on the program or during their emergency or even at home because maybe you may have also children that had to go through the natural disaster and emergency at home may have a difficult coping process. If you can just get, help them get this process smoother it will be easier for them to cope.

Next slide, please. I'm just trying to run here, Neal. This is your slide. Yes, I know we have ...

Neal: We're good. We're all good

Maria Eugenia: Oh, we're good.

Neal: Yeah, we got five minutes. We're fine. I think that one thing to keep in mind is that at times, there is no issue around reunification. There is a short term sort of thing that has occurred. There are disasters. We know after Katrina, Hurricane Irma, Maria, children may be separated from their family for some period of time, could be a long time. Make some space. Obviously, we want safety first, physical safety but also about making space, space to listen, space for breaks, all the things that Maria Eugenia was talking about in terms of relocation. Those are really important. Why are they important?

Because on the next two slides, I'm going to show you things that you've probably seen any number of times. On the next slide, just a reminder about being trauma-informed, the four Rs, realizing what happened to somebody, not what's wrong with somebody, but what happened. Recognizing that sometimes you may see something and that's actually because a child or an adult, quite honestly is experienced trauma. Responding in a way that's actually supportive of addressing the needs of that child or that adult, and how to approach with more constancy and self-regulation, the kind of thing that if we can't regulate our own emotions, we can't ask children to.

Then resisting re-traumatization, if you're stressed, it's going to be really hard not to be really curt in your answers and things like that. There's a lot more about this as a whole separate training, same for the next slide, which is really about the six principles. And all of this is from, and it's in your resources from SAMHSA, Substance Abuse Mental Health Services Administration.

But we talk about things, about safety, about ensuring physical safety, obviously primarily, and then also emotional, psychological safety. Being trustworthy and transparent. Offering that sort of our shared experiences are really about we are trying to help one another in office, that we're all in this together. I've seen this time after time in natural disasters and emergencies, and sadly, more often than not, shootings and things like that. Just keep those kinds of things in mind and also this sort of cultural, historical, and gender issues and the impact that they are going to have as you adapt trauma-informed approach.

Next slide, please.

Maria Eugenia: Yes, Neal, as you mentioned that we're not alone. We are here together in this. I'd also like to share always the drills in tabletop exercises. Tabletop exercises are really good a helpful exercise for staff, children, families to practice. We can share these strategies to families as well, and suggest to families to have a preparedness plan in their home as well so they can respond quickly and safely during an emergency.

Practicing helps staff understand their roles and responsibilities. Maybe reflect during tabletop exercise, that we can have another training about this, specifically, too, reflect on how you will address the trauma from disaster. Maybe open, have these open conversations during the tabletop exercise. How will you include families in the discussion? Consider even how will you make your short staff members have plans for their own families, too.

Sometimes we think staff is going to be there almost even some programs, call themselves like we were first responders like staff from programs like first responders. Yes, you are sometimes because you're just in the middle of the tornado warning one day during a class. Make sure that staff members also have plans for their own families. Explore this during tabletop exercise. Plan this exercise, too.

Next slide, please. We have here ... consider also the importance of disparities. This is a social determinants of health. One of the Menti, one of you or two of you mentioned like rural areas or areas that are really isolated. Either those are part of disparities. Not every house has water quality or indoor air quality, access to health care, easy access to health care. Consider that those specifically when you're maybe doing your plan.

For instance, here in Puerto Rico when Maria, Hurricane Maria hit, passed by, happened, there were several programs that did a hub in their own program, family hub. Consider maybe that as part of you can assist your families, even your own staff. Part of disparities that you may consider as well is housing, food, social support. Consider those aspects to have also community partnerships.

Consider part of the other disparities is the children with disabilities, speech, children with a visual impediment, hearing impediment, what strategies you may have for these children at the moment of emergency. Consider as well environmental part of this kind of emergencies, like toxic exposures, like inequities or equity. Consider all this as well in part of your program in your plan.

Next slide, please.

Neal: Maria Eugenia, I'm just going to jump in because I know.

Maria Eugenia: We're out of time.

Neal: Well, some folks need to hop off to the next call, and we could talk about this for two more hours. We don't want, we're going to talk about disparities in a minute or two is probably not going to get us where we want but to get folks to start to think about this. What we really want you to do is to start to think about what do you have and what do you need? What's in your emergency preparedness response and recovery plan around social-emotional well-being of children, families, and staff? What's not in there? What strategies do you need to start to think about? Who do you need to assign to these sorts of things? Start to think about that planning as quickly as you can.

Because as you all, many of you or not your own programs begin to do your pre-service and planning and things, welcoming new staff, welcoming new children, families. This would be really great time to start to think about not just your plan but how you are going to incorporate

mental health, social-emotional well-being in there. I know we're over. I want to thank everybody for great questions and comments. There's way more to come on this.

We mentioned we have some prototypes on the backpacks. We, I saw a couple of questions in there. We'll back on some of these as well. Thanks, everybody, for your time and enjoy the rest of your day.

Maria Eugenia: Check out the resources link and complete the evaluation. Thank you very much. Thank you, Neal.

Nydia: Thank you so much once again to our presenters Neal, Maria Eugenia for this very timely information today. If you have more questions, you can go to MyPeers or write to health@ecetta.info. The evaluation URL will appear when the webinar ends. Do not close the Zoom platform or you won't see the evaluation pop up. Remember that after you submit the evaluation, you will see a new URL and this link will allow you to access, download, and save and print your certificates. You can subscribe to our monthly list of resources also using that URL. You can find our resources in the health section of ECLKC or write us at health@ecetta.info. Thank you all again for your participation today. Kate, you can go ahead and close the Zoom platform.