Caring for Non-injured and Non-ill Children in a Disaster:

A Guide for Non-Medical Professionals and Volunteers
Introduction

Since children comprise nearly a quarter of the United States population, they will likely be impacted by any natural or man-made disaster that occurs. Children have certain physical and developmental characteristics that put them at greater risk and increase their vulnerability during disasters, so it is vital that their unique needs are addressed before, during and after a disaster event. Appropriately planning for and addressing the needs of children are steps toward decreasing their risk of injury, illness and maltreatment.

Non-medical professionals such as law enforcement officers, fire fighters, public health workers and emergency managers as well as volunteers (those responsible for coordinating and staffing shelters, Medical Reserve Corps (MRC) and Community Emergency Response Team (CERT) members) may find themselves in the position to care for, watch over or consider the needs of non-injured and non-ill children during and after a disaster. Because these individuals may not normally care for children on a day-to-day basis, they may not be aware of the specific needs of children.

This guide was designed as a resource for individuals and groups who may have to consider the needs of children during times of disaster. It includes a basic understanding of how children react to disasters and responders/volunteers; the specific needs (physical and emotional) of children of all ages; tips on caring for and talking to children; information on children with chronic medical or behavioral conditions [Children with Special Health Care Needs (CSHCN)]; and caring for unaccompanied children.

The following age groups are used throughout this guide:

- **Newborn** (Birth to 1 month)
- **Infant** (1 month to 1 year)
- **Toddler** (1-3 years)
- **Pre-school** (4-6 years)
- **School age** (7-12 years)
- **Adolescent** (13-18 years)
Understanding Children’s Reactions

Children react to events and people based on their age and developmental level. The chart below has general information on the emotional and physical/behavioral reactions that children may have following a traumatic event or disaster. Please note that during stressful situations, children may regress and exhibit behavior typical of a younger child (for example a toddler that has been potty-trained may temporarily regress and need the use of diapers).

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Emotional Reaction</th>
<th>Physical/Behavioral Reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn</td>
<td>• Anxiety when separated from caregiver(s)</td>
<td>• Exaggerated startle reflex • Crying/fussiness • Irritability • Feeding problems • Sleeping problems</td>
</tr>
<tr>
<td>Infant</td>
<td>• Fear of separation • Anxiety when separated from caregiver(s)</td>
<td>• Exaggerated startle reflex • Crying/fussiness • Irritability • Feeding problems • Sleeping problems</td>
</tr>
<tr>
<td>Toddler</td>
<td>• Fear of separation • Worry/anxious • Sadness • Missing people/things</td>
<td>• Clinging to caregiver(s) • Crying/fussiness • Irritability • Regression • Feeding problems • Sleeping problems/nightmares • Aggression • Hyperactivity • Tantrums</td>
</tr>
<tr>
<td>Age Group</td>
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<td>-----------</td>
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</tr>
</tbody>
</table>
| Preschool | • Fear of separation  
• Fear of being alone  
• Helplessness  
• Powerlessness  
• Passivity  
• Magical thinking-feel that they caused the event or it occurred to punish them | • Aches and pains  
• Confusion-not understanding that the danger is over  
• Sensitivity to noise  
• Regression  
• Clinging to caregiver(s)  
• Eating problems  
• Sleeping problems  
• Crying  
• Not talking  
• Re-enact incident repeatedly |
| School age | • Withdrawal  
• Fearfulness  
• Sadness  
• Guilt-feels responsible  
• Anger  
• Increased interest in details about death due to their increased understanding of death | • Aches and pains  
• Confusion  
• Poor concentration  
• Eating problems  
• Sleeping problems  
• Attention seeking  
• Regression  
• School avoidance  
• Aggression  
• Fixated on the event  
• Irritability |
| Adolescent | • Withdrawal  
• Fearfulness  
• Sadness  
• Hopelessness  
• Detached  
• Shame/guilt  
• Overwhelmed | • Aches and pains  
• Poor concentration  
• Sleep changes  
• Acting out  
• Irritability  
• Substance abuse  
• Isolation  
• Avoidance  
• Abrupt social and attitude changes  
• Dangerous or risk taking behavior |
What Children Need

The following pages provide information on the physical and emotional needs of children based on their age group, during and after a disaster. It also includes tips on how to talk to children based on age and developmental level. It concludes with information on the needs of Children with Special Health Care Needs as well as unaccompanied children [those who have been separated from their caregiver(s)].
Newborns

**Nutrition Needs**
- Breast or bottle fed only
- 2-3 ounces/feeding every 2-3 hours

**Safety and Security Needs**
- Use a crib/bassinet if available
- Discourage caregiver(s) from sleeping in same bed/cot with newborn
- Place newborns/infants on their backs to sleep
- Avoid soft surfaces for sleeping
- Keep with caregiver(s), if possible
- Protect from abduction/maltreatment

**Emotional/Mental Health Needs**
- Keep with caregiver(s), if possible
- May be soothed by being bundled, having something to suck on or being rocked

**Hygiene Needs**
- 8-12 diapers per day
- Clean diaper changing surfaces after each use and disinfect daily with 1:10 bleach solution
- Sponge baths in a basin with warm water & gentle soap 2 times/week

**Tips**
- Hold newborns as much as possible
- Keep warm
  - Lose body heat easily
  - At risk for hypothermia
- Avoid loud noises and bright light
  - Speak softly
- When washing newborn linen/clothes, rinse thoroughly and use baby laundry detergent, if possible
- If mother is breast feeding:
  - Provide clean, private area
  - Encourage mother to drink plenty of fluids
  - Provide access to power outlet for breast pump and a place to clean bottles

**Hygiene Needs**
- 8-12 diapers per day
- Clean diaper changing surfaces after each use and disinfect daily with 1:10 bleach solution
- Sponge baths in a basin with warm water & gentle soap 2 times/week
Infants

Safety and Security Needs
- Use a crib/bassinet if available
- Discourage caregiver(s) from sleeping in same bed/cot with infant
- Place infants on their backs to sleep
- Avoid soft surfaces for sleeping
- Keep with caregiver(s), if possible
- Protect from abduction/maltreatment

Tips
- Hold infants as much as possible
- Use simple words and speak softly
- Keep warm
  - Young infants lose body heat easily
- Avoid loud noises and bright lights
- Provide age appropriate toys and distractions (see inventory list on p.13 for examples)
- Provide safe areas for infants to crawl and/or walk (older infants)
- When washing infant linen/clothes, rinse thoroughly and use baby laundry detergent, if possible

Nutrition Needs
2-4 months:
- Breast or bottle fed only
- 3-4 ounces/feeding every 3-4 hours
4-6 months:
- 4-5 ounces/feeding (breast or bottle) 4 times/day
  - Baby food (i.e. rice cereal)
6-9 months:
- 6-8 ounces/feeding (breast or bottle) 4 times/day
  - Baby food and mashed table food
9-12 months:
- 6-8 ounces/feeding (breast or bottle) 4 times/day
  - Soft bite-sized pieces of food

Hygiene Needs
- 8-12 diapers per day
- Clean diaper changing surfaces after each use and disinfect daily with 1:10 bleach solution
- Use a basin, warm water, gentle soap and cloths to bathe infant 2-3 times/week

Emotional/Mental Health Needs
- Keep with caregiver(s), if possible
- Familiar objects can be soothing
- Will react to caregiver’s stress

Young infants lose body heat easily
Toddlers

Nutrition Needs
• Table food is appropriate
• Soft bite-sized pieces
• Avoid foods that can cause choking (i.e. hot dogs, grapes, chunks of meat)
• Consider potential food allergies

Tips
• Provide age appropriate toys and distractions (see inventory list on p.13 for examples)
• Provide a safe area for child to play
• Keep to their normal routine as much as possible including favorite rituals

Safety and Security Needs
• Protect from abduction & maltreatment
  • Use appropriate sized beds
  • Establish family sleep areas and bathrooms if possible

Hygiene Needs
• 6-10 diapers per day
• Clean diaper changing surfaces after each use and disinfect daily with 1:10 bleach solution
• May use slip-on type diapers during potty training
• Previously potty trained toddlers may regress & temporarily need diapers during/after disaster

Emotional/Mental Health Needs
• Keep with caregiver(s), if possible
• Offer plenty of reassurance (physical & verbal)
  ◦ May cling to caregiver(s); like to be held
  ◦ Will react to caregiver’s stress
• Limit exposure to TV programs and adult conversations about the events
• Monitor for ineffective coping
**Preschool**

**Nutrition Needs**
- Table food is appropriate
- Finger foods for younger children
- Avoid foods that can cause choking (i.e. hot dogs, grapes, chunks of meat)
  - Consider potential food allergies

**Safety and Security Needs**
- Protect from abduction and maltreatment
- Establish family sleep areas and bathrooms if possible

**Emotional/Mental Health Needs**
- Keep with caregiver(s), if possible
- Offer plenty of reassurance (physical & verbal)
  - Reinforce that the events are not their fault
- Limit exposure to TV programs and adult conversations about the events
  - Monitor for ineffective coping

**Hygiene Needs**
- Previously potty trained children may regress (i.e. bed wetting)
- Designate one staff/official to monitor bathrooms for safety

**Tips**
- Answer questions honestly and with simple explanations
- Provide age appropriate toys and distractions (see inventory list on p.13 for examples)
- Provide a safe area for child to play
- Keep to their normal routine as much as possible including favorite rituals
- Observe for physical complaints
School Age

**Nutrition Needs**
- Regular table food
- Consider potential food allergies

**Hygiene Needs**
- Ensure privacy in bathrooms and showers
- Provide separate bathrooms for each gender
- Designate one staff/official to monitor each bathroom for safety

**Tips**
- Provide a safe area for child to play
- Provide opportunities for social outlets, if possible
- Provide age appropriate toys and distractions (see inventory list on p.13 for examples)
- Provide opportunity to resume normal activities (i.e. school), if possible
- Provide clear, honest, and concrete information and answers to questions
  - Provide information about changes (i.e. routines, moving, what is going to happen)
  - Observe for physical complaints

**Emotional/Mental Health Needs**
- Encourage time with caregiver(s), if possible
  - Encourage child to talk about feelings/fears but do not force
  - Offer reassurance
- Validate fears, difficulties and feelings
- Discuss common reactions to stress, trauma and disasters
- Share own response and ways of coping
  - Monitor for ineffective coping

**Safety and Security Needs**
- Protect from abduction & maltreatment
  - Protect from harm during anger outbursts, nightmares
- Observe for and discourage risk taking behaviors

**Hygiene Needs**
- Ensure privacy in bathrooms and showers
- Provide separate bathrooms for each gender
- Designate one staff/official to monitor each bathroom for safety

**Nutrition Needs**
- Regular table food
- Consider potential food allergies

**Tips**
- Provide a safe area for child to play
- Provide opportunities for social outlets, if possible
- Provide age appropriate toys and distractions (see inventory list on p.13 for examples)
- Provide opportunity to resume normal activities (i.e. school), if possible
- Provide clear, honest, and concrete information and answers to questions
  - Provide information about changes (i.e. routines, moving, what is going to happen)
  - Observe for physical complaints
Adolescent

**Tips**
- Address teen directly
- Provide honest and clear information and answers to questions
- Keep informed about any new updates
- Allow for participation in decision making and response activities, if possible
- Provide time to interact with peers, if possible
- Provide opportunity to resume normal activities (i.e. school), if possible
- Be reasonably flexible with rules, academic and behavioral expectations

**Nutrition Needs**
- Regular table food
- Consider potential food allergies

**Hygiene Needs**
- Ensure privacy in bathrooms and showers
- Provide separate bathrooms for each gender
- Designate one staff/official to monitor each bathroom for safety
- Provide sanitary napkin and tampon supplies for females

**Emotional/Mental Health Needs**
- Encourage opportunities to talk about feelings/fears in a private setting, but do not force
- Discuss common reactions to stress, trauma and disasters
  - Educate teen about risks of substance use and illegal behaviors
  - Share own response and ways of coping
  - Monitor for ineffective coping

**Safety and Security Needs**
- Protect from harm during anger outbursts, nightmares
- Observe for and discourage risk taking behaviors

**Safety Needs**
- Provide opportunity to resume normal activities (i.e. school), if possible
Children with Special Health Care Needs (CSHCN)

Examples of Common Disorders/Conditions: Autism, Cerebral Palsy, seizure disorders, hearing loss, Down Syndrome, Muscular Dystrophy, mental health disorders

Nutrition Needs
- Based on age, developmental level and pre-existing conditions
- Examples of special considerations
  - Tube feedings/spoon feed
  - Swallowing difficulties
  - Medical disorders with dietary considerations, such as diabetes

Hygiene Needs
- Based on age, developmental level and pre-existing conditions
- Large, more accessible bathrooms/shower facilities may be needed
- Older children may use diapers
  - Provide private area with enough space to allow for changing
  - Clean diaper changing surfaces after each use and disinfect daily with 1:10 bleach solution

Emotional/Mental Health Needs
- Based on age, developmental level and pre-existing conditions
- Those with history of psychiatric/behavioral disorders are at increased risk for Acute Stress Disorder (ASD) and/or Post-Traumatic Stress Disorder (PTSD)

Safety and Security Needs
- Protect from abduction & maltreatment
  - Use appropriate sized and accessible beds
- May need access to power outlets to charge medical and/or mobility equipment

Tips
- Establish family areas to allow for quiet and more private spaces
- If caregiver(s) are present, ask to determine the special needs of the child
- Contact local medical supply vendors for assistance with equipment, medications, oxygen restock, wheelchairs, etc.
Unaccompanied Children

Caring for Unaccompanied Children

- Identify a pediatric safe area
- Area should have strict security access control
- Use sign in and sign out sheets for area
- Assign at least one staff member to supervise the area and use the following as a guide to escort and care for unattended children:
  - At least 1 adult to 4 infants
  - At least 1 adult to 10 preschool children
  - At least 1 adult to 20 school-age children

Steps to Reunite Unaccompanied Children

- Notify Emergency Operations Center of all unaccompanied children
- Take pictures of all unaccompanied children if a camera is available
- Contact resources to help reunite children:
  - American Red Cross
  - National Center for Missing and Exploited Children
  - Department of Children and Family Services
- Work with local authorities/above agencies and follow shelter guidelines to verify guardianship before releasing unaccompanied child. Obtain the following:
  - Address and phone information
  - Copy person’s ID/document information from ID
  - Ensure person describes/identifies child correctly
  - Obtain proof of guardianship, if possible
Recommended Supplies for Children

The following recommended supply list provides an overview of some of the items children may need. It should be used as a guide and is not meant to be an all-inclusive list.

### Nutrition, Hygiene and Sleeping Supplies

<table>
<thead>
<tr>
<th>Baby formula</th>
<th>Pacifiers</th>
<th>Slip-on type diapers (size 4T-5T)</th>
<th>Wash cloths/towels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby food/cereal</td>
<td>Toddler feeding spoons/forks</td>
<td>Diaper wipes</td>
<td>Portable cribs, bassinets, play pens</td>
</tr>
<tr>
<td>Oral electrolyte replacement</td>
<td>Manual breast pumps with bottles</td>
<td>Container for soiled diapers</td>
<td>Laundry baskets (can be used for infant bed; use minimal bedding)</td>
</tr>
<tr>
<td>Sports drinks</td>
<td>Hand sanitizer</td>
<td>Diaper rash ointment</td>
<td>Bed sheets</td>
</tr>
<tr>
<td>Baby bottles and nipples for bottles</td>
<td>Cloth diapers/other small towels for spit ups</td>
<td>Toddler toilet seat (potty chairs)</td>
<td>Lightweight hypoallergenic blankets</td>
</tr>
<tr>
<td>Plastic bowls</td>
<td>Disposable changing pads</td>
<td>Infant wash (soap)</td>
<td>Baby laundry detergent</td>
</tr>
<tr>
<td>Sip cups</td>
<td>Diapers (size 1-6)</td>
<td>Infant bathing bins</td>
<td></td>
</tr>
</tbody>
</table>

### Age Appropriate Toys/Distractions

<table>
<thead>
<tr>
<th>Infants/Toddlers</th>
<th>Preschool/ School Age</th>
<th>Adolescents</th>
<th>General</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musical/light toys</td>
<td>Plastic animals, action figures, cars</td>
<td>Teen rated games</td>
<td>Bubbles</td>
</tr>
<tr>
<td>Pop-up toys</td>
<td>Building blocks</td>
<td>Video/electronic games</td>
<td>Balls</td>
</tr>
<tr>
<td>Mirrors</td>
<td>Books</td>
<td>Journal and writing supplies</td>
<td>Coloring books and supplies</td>
</tr>
<tr>
<td>Shape sorters</td>
<td>Dolls</td>
<td>Books and magazines</td>
<td>Arts and craft supplies</td>
</tr>
<tr>
<td>Stacking rings</td>
<td>Elementary school rated games</td>
<td>Activity sets</td>
<td>Music</td>
</tr>
<tr>
<td>Activity blocks</td>
<td>Foam balls</td>
<td></td>
<td>Stickers</td>
</tr>
<tr>
<td>Teething rings</td>
<td></td>
<td></td>
<td>Sculpting clay</td>
</tr>
<tr>
<td>Board books</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beginner toy cars</td>
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</tbody>
</table>

For safety and infection control reasons, only provide toys that are washable, nontoxic, not easily broken, with no small parts that could present a choking hazard to children. Consider including some toys/objects that could be given to the child to keep (small new stuffed animals, cars, stickers, coloring books/crayons, etc.).
Resources

Illinois Department of Children and Family Services
24/7 hotline: 1-800-25-ABUSE (22873)

Illinois Department of Human Services
Crisis Help Information Line
1-800-843-6154

Illinois Emergency Management Agency
1-217-782-7860

Illinois Poison Control Center
24/7 hotline: 1-800-222-1222

National Center for Missing and Exploited Children
24/7 hotline: 1-800-THE LOST (1-800-843-5678)

Links

American Academy of Pediatrics Children & Disasters
http://www2.aap.org/disasters/index.cfm

American Red Cross
www.redcross.org

Illinois Emergency Medical Services for Children (EMSC)
www.luhs.org/emsc

FEMA 4 Kids
http://www.ready.gov/kids/
References


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