



# EMERGENCY RESPONSE TOOLKIT: AN EARLY RELATIONAL APPROACH

Early Educator Edition



**AIMHiTN**.org

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# Introduction

Tennessee is committed to the wellness and development of its youngest children and those who care for them. Beginning in 2013, Tennessee's Child Care Emergency Preparedness Code (Tenn. Code (Tenn. Code Ann. § 71-3-517 (2013)), required that childcare facilities develop written plans to protect children in emergencies. In 2016, TDHS Child Care Services developed an Emergency Preparedness Plan to support childcare providers with emergency preparedness, response, and recovery. To further this commitment, the Association of Infant Mental Health in Tennessee (AIMHiTN), through Tennessee Department of Human Services (TDHS) funding, has developed the Preparedness for Emergency Response in Tennessee Toolkit (PERTT): An Early Relational Approach. This toolkit aims to help childcare providers fulfill Tennessee Department of Human Services' requirements to have a Child Care Services Emergency Preparedness Plan. The toolkit has a specific focus on implementing emergency preparedness, response, and recovery procedures in a developmentally appropriate and trauma-informed manner to further infants' and young children's early relational development.



Emergency Response Toolkit: An Early Relational Approach is based on the science of early childhood development that affirms:

- Infants and young children are born ready to relate, communicate, and learn.
- Infants and young children are aware of and impacted by their caregivers and their environments.
- Early stress and trauma impact infants' and young children's brain development and well-being. It also affects their long-term development including both physical and mental health.
- While infants and young children are vulnerable to negative experiences, they are also very receptive to positive relational experiences.
- The health and development of infants and young children requires safe, stable, and supportive relationships and environments.
- Because of the impact of culture and environment, ensuring practices are individualized and accessible to support all children.
- Because children grow and develop well with consistent, positive relationships, supporting the health and well-being of caregivers is necessary to provide support to children.

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An Emergency Preparedness Plan that focuses on ways to support positive interactions will help meet the unique developmental needs of infants and young children who are particularly vulnerable to the impact of negative events, such as disasters. While emergencies and disasters are extraordinary events, they are not uncommon. Recently, in addition to natural and technological disasters, young children are exposed to the need for active shooter drills and pandemic preparedness. Tennessee is at specific risk for floods, tornadoes, and earthquakes. During a 2020 focus group conducted by AIMHiTN, childcare directors and Child Care Resource and Referral staff shared concerns about other emergency events that could impact young children including fires, gas leaks, a death of a child, parent, or childcare staff, child abduction, and responding to suspected child abuse or violence at the childcare site.

## Toolkit Organization

This toolkit is divided into three sections on (1) emergency preparedness, (2) emergency response, and (3) emergency recovery. Each section focuses on the early relational needs of infants, young children, and their families. Resources by disaster type are provided at the end of the toolkit.

## Relationships are Key to Supporting Emotional Development

A primary message of this toolkit is that relationships are crucial to supporting infants' and young children's healthy development and early relational health. While the importance of relationships does not end with childhood, it is during this time that children depend on relationships to stay safe, to learn to play and love, and to learn about their world.

Children also need relationships with adults to support them in managing their emotions. As caregivers and professionals working with children know, infants and young children come with big feelings that they cannot deal with on their own. Children learn to understand, express, and manage their feelings and behaviors through warm and supportive interactions with adults. The type of support children require depends on their developmental age. (Murray, et al., 2014).

For example:

- A crying infant needs an adult to soothe them by holding and rocking them.
- A toddler who cries because they want their friend's toy, needs an adult to calmly listen, validate their impatience and frustration, and help them find another activity.



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# Key Considerations for Emotional Regulation During Emergency Situations

When adults are able to tolerate, provide comfort, and be with children when they experience big feelings, children learn that feelings can be managed (Cassidy et al., 2017). Children who receive support with emotions early in life are better able to cope with emotions on their own and ask for help when they need it by the time they are 3 ½ to 5 years old (ZERO TO THREE, 2016).

- Both relationships and emotions might be challenged during an emergency.
- Both children and adults experience intense feelings such as fear or helplessness during emergencies.
- Children, adults, and professionals who have been exposed to adverse experiences early in their lives might have increased difficulty managing and coping after an emergency.
- All children, because of their early stage in life, will require extra support with emotional regulation during times of stress.



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## How to **PREPARE** for Emergencies Using an Early Relational Approach

As a childcare provider that supports infant and young children's social and emotional development, you are already taking the first steps in disaster preparedness. When disaster strikes, all children are impacted. Even when they are too young to understand, they experience the anxiety and stress of the adults around them and the changes that occur. While adults cannot completely shield and protect children when bad things happen, caregivers can prepare in advance to ensure that children's outcomes will be as good as possible. In addition to being prepared with developmentally appropriate emergency preparedness plans for safety, developing and maintaining safe, stable, and supportive relationships is crucial.

*"How you are is as important as what you do" in making a difference for infants, toddlers, and their families" (Pawl & St. John, 1998).*

Infant Mental Health professionals often cite this quote to emphasize the importance of a professional's way of "being" while relating to an infant or young child. "How you are" in your relationship with children provides them with a strong foundation and serves as a protective factor following disasters.



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**Table 1**

HOW YOU ARE	You try to be...
<b>RELATIONSHIP FOCUSED</b>	You know that children grow and develop in the context of relationships and that your relationships with children are key to their development and well-being. You work closely with children's parents and caregivers, knowing that maintaining communication and positive relationships with children's families is an important part of your role.
<b>FULLY PRESENT</b>	<p>As a busy professional, you strive to be fully aware of what is going on around you, keeping your attention focused on the child, children, or family who is there. You work to keep your attention on the present moment and relationship.</p> <p>For more information on mindfulness in early childhood, see <a href="https://www.zerotothree.org/?s=mindfulness%20in%20early%20childhood">https://www.zerotothree.org/?s=mindfulness%20in%20early%20childhood</a> resource from ZERO TO THREE and <a href="https://www.naeyc.org/resources/pubs/yc/mar2018/rocking-and-rolling">https://www.naeyc.org/resources/pubs/yc/mar2018/rocking-and-rolling</a> from NAEYC.</p>
<b>EMOTIONALLY AVAILABLE</b>	<p>You strive to not just be present, but also aware of your feelings and those of others. When infants and young children are overwhelmed by big feelings, you strive to support them without minimizing or denying their emotional experiences.</p> <p>This video from the Circle of Security International program describes "being with" children's emotions. The video is targeted towards parents, but the concept is also applicable to childcare providers. <a href="https://youtu.be/Vy3EwAQ0lwo">https://youtu.be/Vy3EwAQ0lwo</a></p>
<b>SAFE</b>	<p>You understand the importance of emotional as well as physical safety. You, as a childcare provider, create a supportive environment in which children know their needs will be met. This helps them feel secure and confident and ready to explore and learn.</p> <p>This video from the Circle of Security International program describes how children use adults as secure bases from which they can explore. The video explains why it is so important for childcare providers to strive towards a commitment to connect with the child(ren) in their care. <a href="https://youtu.be/1wpz8m0BFM8">https://youtu.be/1wpz8m0BFM8</a></p>



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**Table 1 Continued**

HOW YOU ARE	You try to be...
	<p>You notice when you feel frustrated by a child's or adult's behavior and pause to think of alternative ways to respond. You seek to understand what a child (or adult) is communicating when they show socially inappropriate or negative behaviors. Understanding children's behavior means that you are developmentally informed, culturally aware, and trauma-sensitive.</p> <p>These videos from the Connecticut Office of Early Childhood describes how early childcare providers can reflect on their reactions to children's behavior as well as different ways to understand young children's challenging behaviors.</p>
<b>RESPONSIVE RATHER THAN REACTIVE</b>	<p>Practice the Pause: Everyone feels frustrated or reactive at times. It is important to use skills that help you regulate – "Practice the Pause." This is a great activity for the childcare provider to practice themselves and with their children and families.</p> <ul style="list-style-type: none"><li>• To regulate yourself, try breathing deeply – or doing something else to manage your emotions.<ul style="list-style-type: none"><li>◦ Notice: What are you thinking? What are you feeling?</li></ul></li><li>• Talking to someone about your feelings might be helpful. Everyone needs help at times.</li><li>• Consider the situation or other person.<ul style="list-style-type: none"><li>◦ What might they be thinking and feeling?</li></ul></li><li>• Decide how you want to respond.<ul style="list-style-type: none"><li>◦ What will be most helpful in this situation?</li><li>◦ Check: Are you behaving in a way you would want the other person (or the children) to model?</li></ul></li></ul>
<b>CULTURALLY RESPONSIVE</b>	<p>You recognize that children (and adults) grow and develop in the context of their families, communities, and cultures. You are self-aware and examine your own cultural identity and initial judgments, understanding that certain children are more likely to be punished based on assumptions associated with race and gender rather than the children's actual behavior (Gilliam, 2005). You recognize the unique identity of each child, celebrating each child and their familial and cultural strengths. You work with families to learn about their hopes and dreams for their children and provide individualized opportunities to help each child succeed.</p> <p>For more information on culturally responsive care, see the Program for Infant/Toddler Care's (PITC) Six Essential Program Practices for Relationship-Based care.</p>



**Table 1 Continued**

**HOW YOU ARE**

You try to be...

**ENGAGED IN  
SELF-CARE & OPEN TO OTHERS  
PROVIDING SUPPORT WHEN  
NEEDED (COMMUNITY CARE)**

To be relationship-focused, fully present, emotionally available, safe, and responsive, rather than reactive, your own needs must be met. You seek advice or reflective consultation regularly. You practice self-care, support others, and allow others to provide support for you. This allows you to be available to meet the needs of the children and families with whom you work.

## Developing Your Disaster Plan:

### Knowing Disaster Planning Requirements and Available Tennessee Resources

Connecting with disaster resources before you need them will help you inform and encourage disaster planning for the families you serve. The State of Tennessee has multiple agencies and resources to support disaster planning and response.

**Tennessee Department of Human Services (TDHS).** TDHS provides tools and templates for childcare centers to meet emergency preparedness plan requirements, including:

- Scroll down to: Preparing Child Care Programs for Emergencies – A Six-Step Approach
- Scroll down to the TDHS Child Care Services Emergency Preparedness plan and to “additional resources”: Child Care Agency Emergency Preparedness Plan Template.
- TDHS Licensing Program Evaluators are available to review and monitor preparedness plans.

**Tennessee Childcare Resource and Referral Network (CCR&R).** Tennessee’s CCR&R coaches serve all 95 counties and provide training, including CPR/first aid and emergency preparedness, as well as technical assistance to support high-quality childcare.

**Tennessee Early Childhood Training Alliance (TECTA).** TECTA, with 8 sites in colleges and universities throughout Tennessee, supports childcare providers with professional development and advancement opportunities.

**Tennessee Disaster Support Network (TDSN).** TDSN, a TN Department of Health web-based resource, links to resources for use before, during, and following a disaster with a focus on responding to individuals with special needs.



**Tennessee Emergency Management Agency (TEMA).** Through regional offices, TEMA, a TN Department of Military agency, coordinates with stakeholders for disaster preparedness, response, and recovery in Tennessee. The website provides resources, regional contact information, and updated information regarding state-wide emergencies.

**Relationships are as important as resources.** Children develop and thrive in relationships and depend on others to meet their needs. This is also true of adults, especially in disaster situations. Supportive communities, accessible resources, and strong relationships are factors associated with post-disaster recovery. Thus, forming supportive and working relationships with peers and professionals is an important part of preparedness leading to effective disaster response. Encouraging families to take part in disaster preparedness events with community members can help develop better relationships.

**Ongoing communication to ensure that the relocation site is appropriate, available, and open is required to ensure that disaster plans can be carried out in the event of an emergency.**

## In Practice



As part of your community helper lesson plan for your 3-year-old classroom, you invite a police officer from your local precinct to come to speak to the children. Five months later there is an altercation between two parents in your parking lot, and you call the police. This is the first time you have had to do something like this at your center, and you are nervous as you are not sure if calling the police was the best response. You are relieved when you recognize that the police officer who spoke to your class arrives at the scene.

Familiarizing and connecting yourself with disaster resources even before you need them will prepare you for immediate, efficient, and effective action. The State of Tennessee has multiple agencies and resources to support disaster planning and response.



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# Developing Your Disaster Plan:

## Preparation, Response, and Recovery Resources

Many reputable government and professional organizations have created toolkits to support emergency preparedness, response, and recovery. These resources offer handouts and activity pages for children that can be copied and kept on file so they are readily available during an emergency.

**The Centers for Disease Control and Prevention (CDC)** developed Caring for Children in Disasters. While this website does not focus specifically on infants and young children, it provides general information related to preparation, response, and recovery, specific information on children with special needs, and a collection of websites for teachers and childcare providers.

**Child Care Aware® of America** is a national organization that provides support to Child Care Resource and Referral agencies and offers childcare specific resources for emergency preparedness and response for a range of emergency/disaster types.

**FEMA's Ready Kids, which includes Ready Educators and Organizations, and Ready Families** provides resources and links to support disaster preparation, response, and recovery. This resource offers general information and is not specific for infants and young children. It does include Prepare with Pedro, an activity book for children ages 5 through 8.

**The National Association for the Education of Young Children (NAEYC)** has resources to support young child educators in supporting children and families before, during, and after disaster and includes information specific for disaster planning in childcare.

**The National Child Traumatic Stress Network (NCTSN)** is a leader in developing trauma-informed resources and interventions. NCTSN developed the disaster mobile app, Help Kids Cope, which can be downloaded on Apple or android devices. Though the app does not exclusively focus on infants and young children, it helps adults (including parents and childcare providers) support children of all ages before, during, and after a variety of disasters.

The federal **Office of Human Services Emergency Preparedness and Response** has a website devoted specifically to the needs of Early Childhood Education Providers during the preparedness, response, and recovery phases of a variety of disasters. It includes links to childcare-related resources through FEMA and the Office of Head Start.

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**Save the Children** provides disaster preparation, response, and recovery information to parents and early childhood providers. General information including Disaster Checklist for childcare providers is available as well as disaster specific resources.

**Sesame Street** developed Handling Emergencies for both children and adults during the preparation and recovery phases of emergencies. In addition to information for adults, handling emergencies has videos, stories, and workbooks for young children. Preparation-specific materials are available at Sesame Street's Emergency Preparedness Let's Get Ready website.

**ZERO TO THREE (ZTT)** is a national organization focused specifically on infants, young children, and their families. In partnership with Save the Children, ZTT developed Shelter from the Storm: Resources for Early Care and Educational Professions to support providers meeting the social and emotional needs of young children before, during, and following a disaster. This resource is available in English and Spanish and has a companion guide for parents.



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# Emergency Preparedness Starts at Intake

Information gathered from parents or caregivers about children’s experiences helps Childcare Providers respond to children’s needs and understand the meaning of behavior. This information can be especially important in understanding children’s responses to emergencies when they may be reminded of earlier negative experiences.

Questions about family configuration and relationships, custody issues, and/or restraining orders will prepare childcare staff for difficult situations that may arise. Many childcare providers report at least one experience of being surprised when a caregiver(s) is incapacitated when arriving to pick up a child. When reviewing your center’s release policies, it is helpful to have open conversations about these issues.

This information is crucial in preparation for a possible disaster. Intake is also a good time to begin evaluating the families preparedness for emergencies.

Intake is also the time to educate and prepare caregivers about your center’s emergency response plan. Caregivers need information on emergency notification, relocation sites, and procedures for reunification. It is important to review the parent handbook and allow caregivers to ask questions, not only at intake but also throughout the year.

Example: Parent newsletters can be used to convey this information at times when disasters are more likely to occur (e.g. March, the beginning of tornado season in Tennessee).

## Tips for discussing sensitive topics

It may feel intrusive to ask parents questions about their personal lives. However, detailed information supports your ability to provide high-quality childcare services. Parents may choose not to provide the information. Even when this is the case, asking the questions may influence them to share information at a later time.

When discussing sensitive topics, it may be helpful to keep the following in mind:

- Include standard questions in an intake packet or interview, so families do not feel singled out as can happen when the questions are only asked after a child is identified as having challenging behavior.
- The goal of asking these questions is to understand the whole child. It is important to ask about family strengths and values as well as negative experiences.



## Sample questions to include in intake packet for relationship-based, trauma-sensitive childcare practice:

Many helpful questions are included in the DHS Child Application Sample Form.

(Note: These are sample questions. It may be helpful for your staff to have discussions about which questions you would like to add or to create your own questions.)

### Questions about family, community, and culture:

- Who lives at home with your child? (This can include family and friends that stay at your house periodically as well as your child's pets.)
- Who are other people outside of your home that help to care for your child?
- How do you discipline your child? (For example, do you use physical discipline, time out, removal of privileges, rewards for positive behaviors...?)
- Has your child attended childcare in the past? What did you/your child like about that childcare? Was there anything you/your child did not like about that childcare?
- How would you describe your family's culture?
- What are special traditions/routines in your family?

### Questions about child's emotions and temperament:

- What five words would you use to describe your child?
- How do you know if your child is happy? What makes your child happy?
- How do you know if your child is sad? What makes your child sad?
- How do you know if your child is scared? What makes your child scared?
- How do you know if your child is angry? What makes our child angry?
- How do you know if your child is frustrated? What makes your child frustrated?
- What helps to soothe your child?
- Does your child have a special security blanket, stuffed animal, or something else that comforts them?
- What is special/unique about your child?



### Questions about events that may have impacted your child:

- Has your child experienced the death of anyone close to them?
- Has your child ever been separated from you for a long period of time due to changes in custody, child welfare involvement, or any other reason?
- Has your child seen or heard violence in your home?
- Has your child seen or heard violence in the community?
- Have there been any negative events in the past that have impacted on your child (e.g., car accident or natural disaster)?
- Have there been any recent changes in your family or in your child's life? Please keep us updated of any events that may impact your child.



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# Preparing For Emergency Response:

## Considering Adverse Childhood Experiences and Disaster

Several of the above questions refer to early adverse experiences. Adverse Childhood Experiences (ACEs) were first recognized in 1995 in a groundbreaking research study conducted by the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente (Felitti, et al., 1998). The original study showed that children under 18 years of age who had been exposed to a traumatic or stressful event such as exposure to domestic violence, physical or sexual abuse, or neglect which often occurs in a household with drug or alcohol problems, have a significantly increased risk as an adult for chronic health conditions (cancer, diabetes, heart disease), mental health issues (depression, anxiety, PTSD), risky behavior (early pregnancies, HIV, STDs, alcohol or drug abuse), or early death.

**Children who have experienced early childhood adversity are often less able to cope with later adversities and may be more negatively impacted by a disaster.**

As the number of ACEs a child experiences increases, so does the likelihood of negative health and behavioral outcomes. Disasters whether they are natural or technological (“man-made”) can be extremely stressful and traumatic for young children and their caregivers, with the impact on the young child depending on the support and protection provided by their parent or caregivers. When a significant disaster occurs, children and families may experience many losses, ranging from the loss of housing to the loss of a close family member, friend, or pet.

They may also experience more global losses, such as changes in community-routines and places familiar to children. Because of the unpredictable nature of disasters, children may experience anxiety, which can contribute to ACEs and potential longer-term impacts on the child’s health and wellness. Knowing a child’s history of adverse childhood experiences provides you with information that is important in understanding and building a relationship with that child. With this information, you can develop individualized plans to support the child who is impacted by a disaster.

For more information on Adverse Childhood Experiences and the Developing Brain:

- **TCCY ACEs Building Strong Brains Tennessee**
- **Harvard Center for the Developing Child**



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## In Practice



As a center director, you follow Tennessee's Child Care Facility Emergency Preparedness requirements and conduct monthly fire drills. You know that many of the young children have difficulty with fire drills and cry when they hear the loud noise. Eighteen-month-old Sally is a new child in your center. She was brought by her grandmother who obtained custody of her after her mother's arrest. The grandmother shared the information that this was not Sally's mother's first arrest.

After a fire drill, you noticed that Sally cried like the other children but that she had a hard time calming when the provider held her and was clingy and weepy for the rest of the day. You noticed this pattern repeating after the next two fire drills.

You wonder about Sally's response. Although you're not sure, you think she may be reacting to the loud alarm and wonder if because of her experiences, she has a hard time calming after stressful events. You also wonder if the fire alarm reminds her of police sirens. You make a note of this in your disaster plan for children who may need special attention.



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# Supporting Infants and Young Children During Disaster Drills

Tennessee DHS Child Care Agency Emergency Preparedness Plan requires that:

- Children are prepared for emergencies through monthly fire drills and another disaster drill conducted once every six months.
- These disaster drills should replicate the conditions of a real emergency.

Disaster drills can be especially frightening for younger children who are still learning the difference between fantasy and reality; however, if conducted in a developmentally appropriate manner, emergency drills can help both children and adults be more prepared and feel more empowered when there is an actual emergency. The following are developmental considerations for disaster drills (Schonfeld et al., 2020).

- Preparing children for the drill helps decrease the likelihood of distress.
- Inform caregivers of drills so they can help prepare the child.
- Children with developmental delays, disabilities, or histories of trauma may require additional preparation.
- As part of preparation for drills, remind children of coping skills you have taught them.
  - Sesame Street has videos to teach coping skills. For example, "How to Self Hug with Abby Cadabby."
- Let children know that a drill does not mean there is an emergency but that drills are what they do to learn how to be safe if there is an emergency.
- Let children know that emergencies do not usually happen and that the drill does not mean something bad will happen.
- When conducting drills, focus on the fact that children are learning how to be safe rather than focusing on the danger of the event.
- Watch for children who become upset by the drill, placing the children's current needs before the drill.
- Praise children for following directions.
- Listen to and watch the children to learn how they feel and what they understand about the situation.
- Talk to the children after the drill about what happened. Help children build empathy for others by normalizing children's natural fear reactions during the drill.

Social stories (stories that help children understand expectations for specific situations) can be used to prepare children both for emergency drills and actual emergencies. These stories use clear and simple language to describe a social situation and expected or appropriate behaviors.

- **The Center on the Social and Emotional Foundations for Early Learning** provides more information on social stories.
- **Conscious Discipline** developed activities and a social story to help children cope with fear.
- **The Institute for Childhood Preparedness** developed social stories for fire drills and tornado drills. You can read these stories directly, use them as templates to better fit your own fire and tornado drills, or use them as templates for other types of emergency drills.



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## How to **RESPOND** to Emergencies Using an Early Relational Approach

The primary aim of disaster preparedness and response is safety. Much of disaster planning focuses on concrete planning for physical safety. For example, TDHS emergency preparedness plans include specific information on frequency of smoke detector inspection, evacuation routes, and relocation sites so that physical safety is maximized if a disaster occurs. However, just as physical safety must be addressed, the State of Tennessee also recognizes the importance of emotional safety.

During emergencies, whether large-scale disasters or smaller-scale crisis events, it is natural for adults and children to respond with strong emotions. These emotions can help you act quickly to ensure your own safety as well as the safety of those around you. However, it is important to balance this sense of urgency with regulated emotions and an “in-charge” presence. It is your ability to remain calm, take control, and be supportive that will support infants’ and young children’s mental health during emergencies. Infants and young children are uniquely sensitive to the anxiety and worry of adults. Because they depend on and follow the lead of adults to know how to respond to events going on around them, they can be even more sensitive during a crisis.



Infants’ and young children’s responses to emergencies are largely determined by watching the responses and reactions of their parents and caregivers. Helping caregivers and parents understand their own responses to stressful situations can help them alert children to an emergency without causing alarm.

The TDHS Emergency Preparedness Plan requires that staff be alerted to an emergency without alarming the children.



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## Tips on supporting infants and young children during an emergency response:

- To help others, you must first make sure that you have taken care of yourself. The adage, “put your oxygen mask on first,” speaks to the fact that if you have not taken care of yourself, you cannot take care of others. Check in with yourself. Pause and take a deep breath (or use whatever strategy works for you) so that you can fully attend to your own and the children’s needs.
- Remember that there has been much preparation for this unexpected event. There is an emergency response plan that will guide your response.
- Give clear directions that the children will be able to follow.
- Your tone of voice should convey the seriousness of the situation while also conveying your care and concern.
- Reassure infants and young children that what you are doing is to keep them safe. This is an important message even if you are also concerned about safety.
- If it is safe, sing songs, tell stories, and provide physical comfort.
- Listen to and watch the children to learn what they understand about the situation.
- Putting words to scary, overwhelming, or confusing experiences and feelings is helpful for everyone, including infants and young children. Use simple and developmentally appropriate language to provide basic but accurate information about what is happening and what you are doing.



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## Table 2

HOW YOU ARE	You try to be...
<b>RELATIONSHIP FOCUSED</b>	You remember that children understand and respond to emergencies based on your response. Your protection and way of relating will impact how children cope during the emergency and how they recover after the emergency ends. You seek to reunite children with their families as soon as possible.
<b>FULLY PRESENT</b>	You are aware of the situation and the needs of the children and families.
<b>EMOTIONALLY AVAILABLE</b>	You notice your own emotional response first. You check in with yourself and manage your own emotional reaction so you can be ready to respond to the emotional needs of the children and families you serve.
<b>SAFE</b>	You focus on physical safety while also remembering the importance of emotional safety. Your tone conveys urgency as well as warmth. You talk to children (and their parents) in a way that lets them know you are working to protect them.
<b>RESPONSIVE RATHER THAN REACTIVE</b>	You understand that children (and adults) may not react as you would expect or wish and that their reactions may be based on their previous experiences. When you feel frustrated or confused by a behavior, you remember that behavior communicates a need. With this understanding you respond in a manner that will ensure safety.
<b>CULTURALLY RESPONSIVE</b>	You recognize that responses to disaster are determined, in part, by the child's and family's culture. While ensuring safety, you focus on the unique needs of each child and family.
<b>ENGAGED IN SELF-CARE &amp; COMMUNITY CARE</b>	You recognize that you are also experiencing an emergency and that your own physical and emotional well-being is important. You do what you need to do to care for yourself, support others, and allow others to support you.





You are the head teacher in an infant classroom during an active shooter incident. When you hear your director call for “lockdown” over the intercom, you lock and barricade your door. You are terrified; you look over at your co-teacher who appears terrified as well. You are aware that although the infants don’t understand what is going on, they understand the tone of your voice. You take a slow deep breath and mouth to your co-teacher, “I can’t believe this is happening.”

You both begin to move the children away from doors and windows. Based on your training, you are in the practice of talking to children, and you always tell the babies what you are doing when you pick them up. As you pick up each child you whisper, “It’s not safe; we’re all going to sit together.” You sit in the middle of the room, remember to silence your cell phone, and quietly hum as you rock the children.

## What to Expect from Infants and Young Children During an Emergency

There is no single way that adults or children will respond to a crisis. A child’s response will depend on their temperament, their previous experiences, and the responses of the adults around them. As always, children will demonstrate their needs through behavior, and, as caregivers, it is important to understand the meaning of this behavior. However, during a crisis, when adults’ emotions are strongly activated, slowing down to consider a child’s needs can be difficult. A provider can easily determine how to respond to a child who appears frightened or indicates a wish to be held, but some behaviors are more difficult to interpret. The following list describes reactions that may be observed during an emergency. Note, this list is meant to promote thinking about the possible meaning of children’s behavior. All children are different, and behavior has different meanings depending on the situation and the child. It is important to remember that children do not choose to engage in challenging behaviors. During emergencies, behavior is often a reflexive response to danger. For children who have previous exposure to trauma, behavior may be based on how their brains and bodies have learned to respond to difficult situations.

- **Overactivity.** A child who displays excessive activity during an emergency may be displaying a natural “fight or flight” response to fear.
- **Noncompliance/Refusal to move.** A child who doesn’t follow directions to get in line may be displaying a natural “freeze” response to fear.
- **Staring off into space/Ignoring directions.** Some children respond to trauma by disconnecting themselves from the distressing event. This may be their way of responding to fear.



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- **Silliness/Laughter.** When children's bodies are activated by stress, they may engage in behavior that appears playful and not appropriate to the situation. Silliness may be a child's way of discharging excessive energy when scared.
- **Moving towards danger.** Most children and adults move away from danger; however, some seem to seek out danger. These may be children who are accident prone. While this behavior is the opposite of what is expected, it may represent another response to fear, and, like all the others, demonstrates that the child has a need for the adult to keep them safe.
- **Appearing undisturbed.** Some children who do not appear distressed may be more upset than they appear. Researchers have found that a subset of children have learned to cope with stressful situations by not appearing distressed though their fear is evident based on their physical response (e.g. elevated heart rate) (Gander & Buchheim, 2015).

Some children with flexible temperaments may have minimal responses to emergencies. It is important that providers do not overlook these children as all children have a need for support, communication, and reassurance. It is also helpful to remember that children are unlikely to respond in the same ways as adults. Specifically, children can be described as having short emotional attention spans. They are more likely to show many emotions - positive, neutral, and negative. They also may return to play even during stressful events. This does not mean that they are not affected by the crisis, but is a sign of children's push towards positive development.

## Tips for Evacuation and Relocation

Children feel safe when they are with familiar adults. If there is an evacuation, it is important that childcare providers stay with their group and that children are reunified with their families as soon as possible. During and following large scale disasters, emergency volunteers may arrive to help with infants and children at shelter or relocation sites. Ideally, the sites will have special play areas for the children. Make sure that a familiar adult stays with the children.

In addition to maintaining proximity with familiar caregivers, children will do best during disaster if, as much as possible, familiar routines and objects are available. In preparing your emergency toolkit to take with you in the event of evacuation, you will want to travel as light as possible and bring only necessary items. These may include a first aid kit, infant formula, diapers, and blankets. Packing blankets that are the same as those the child already uses on a day-to-day basis will offer consistency and comfort even in the midst of disaster. It is also helpful to have caregivers provide items for an emergency comfort kit that can be taken with each child in the event of evacuation. Items in comfort kits may include:

- blanket
- change of clothes
- small stuffed animal, book, or toy
- family picture
- comforting note from caregivers that the provider can read to the child.
- Age-appropriate activities such as coloring pages and crayons, playdoh, singing, or story-telling,



If a parent is not able to provide the items for a comfort kit, use on-site supplies to make sure that each child has their own kit.

## Additional Resources on Evacuation and Relocation:

- Child Care Prepare: Infant Toddler Emergency Evacuation.

## Parent Notification

Emergencies and disasters are associated with lack of predictability and control. Factual information about the event and next steps is a primary mechanism for decreasing fear. In the absence of this information, people often assume the worst and may spread misinformation. Because of this, clear communication between adults during disaster is of utmost importance.

### **The TDHS Emergency Preparedness Plan requires a written procedure for parent notification.**

The TDHS Emergency Preparedness Plan Template has a sample form for parent/guardian emergency contact information. It is suggested that the form be updated following each new child enrollment and during monthly emergency plan reviews and printed each time new information is added. It is important to have updated and full contact information (more than one telephone number if possible) for caregivers and all other emergency contacts. Save the Children recommends having an emergency contact outside of the local area for each child in case local services are not operating.

The following tips support effective communication during disaster and might be helpful in notifying caregivers during emergency events.

- Provide basic information in a clear and concise manner.
- Expect to repeat yourself. It is difficult to take in and remember information in times of crisis.
- Only provide factual and accurate information. If you do not know the answer to a question, let the person know you will seek the information and get back to them.
- When people are scared, they may lash out in anger. When making notification calls to caregivers, expect that some people will blame or yell at you. Know that this is not your fault.
- Remember the importance of “how you are.” This is just as important with caregivers as with children.

A sample of a Parent/Guardian Emergency Contact Information form can be found from the Tennessee Department of Human Services website.



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# How to Support **RECOVERY** Following Disaster

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## The Importance of Childcare in Disaster Recovery

Remember, infants and young children grow, develop, and recover through relationships with the adults who care for them. As part of the childcare community, you provide services not only to the child but also to that child's family. Following disasters, you are likely to interact with caregivers who are experiencing distress and who will seek support and resources from you. Because of the importance that families place on childcare and because childcare facilities may be one of the few services operating following large-scale disasters, families will benefit if childcare providers offer information on children's disaster recovery. Your positive interactions with caregivers will help support positive interactions with their children.

Following a community-wide disaster, children, families, and childcare providers are all likely impacted and recovering. Each may be dealing with their own stresses and concerns. Therefore, recovery services need to consider the stress that childcare providers and support staff may also be experiencing.

While this toolkit focuses on the importance of building supportive relationships between young children and childcare providers to aid recovery following disaster, supporting children's well-being requires having and rebuilding strong communities with adequate resources and supports that are integrated into childcare settings. Recovery depends on advance preparation that includes not only having adequate resources, but also preexisting relationships and ways to communicate across systems (Murray et al., 2015). When communities are strong and provide childcare with support, the childcare providers have the internal and external resources to meet the needs of children and families.



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## Key concepts in stress/trauma response

- Every person who has been involved in a disaster will have some type of emotional reaction. These reactions are expected. When people are threatened, they react.
- Adults and children react to stress and trauma differently based on their culture and their developmental age/stage.
- Not everyone who is exposed to a disaster or emergency event will experience mental health problems.

Researchers have identified several patterns of response following trauma (Bonanno & Mancini, 2012; Masten & Obradovic; Tedeschi & Calhoun, 2004).

- Resilience
  - Most individuals fall into this category. They have a response to the disaster, but this response does not interfere with their everyday functioning. Just like having a stress response does not mean that the individual is weak or has failed, resilience is not a characteristic or success of the individual. Rather, people described as resilient have protective factors within themselves, their families, and their communities.
- Normal Response and Recovery
  - Individuals with this pattern show a stress response following the event. The response begins to decrease within months after the event and resolves over time.
- Chronic Dysfunction
  - Individuals with this pattern have a severe response following the disaster, and symptoms remain without getting better more than a year after the event. Few individuals have chronic problems. For individuals who do, referral to mental health services is important.
- Delayed Onset Response
  - This is another response pattern that is rare though it occurs in a small group of people. Individuals with a delayed response have some symptoms after the disaster, and the symptoms become increasingly severe more than a year following the event. Individuals whose symptoms get worse over time should be referred to mental health services.



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- Post-traumatic growth
  - Post-traumatic growth occurs when people who have experienced disaster or other types of trauma show positive changes after the event. These changes may include:
    - A greater appreciation of life
    - Closer, more meaningful relationships
    - A sense of increased personal strength
    - Ability to see new possibilities
    - A richer spiritual life
  - Post-traumatic growth has been described in older children, adolescents, and adults rather than in young children who are just developing their understanding of the world and relationships and, therefore, are not yet able to demonstrate changes in these areas. For those who experience post-traumatic growth, it is possible to experience this type of growth along with post-traumatic stress or other mental health symptoms.

The type of response an individual will have following a disaster is dependent on multiple factors including characteristics of the traumatic event, the individual, the family and other relationships, and the community. With protective factors in each of these areas, infants and young children will have more of the necessary components to be able to recover and move forward following disaster.

**Table 3**

	PROTECTIVE FACTORS	RISK FACTORS
<b>CHARACTERISTICS OF THE DISASTER</b>	<ul style="list-style-type: none"> <li>• Short, single incidents</li> <li>• Little personal impact based on the event</li> <li>• Not separated from caregivers</li> <li>• No perception of threat or actual threat to self or loved ones</li> <li>• Trauma occurring within caregiving relationships (e.g. interpersonal violence)</li> </ul>	<ul style="list-style-type: none"> <li>• Prolonged, repeated incidents</li> <li>• Significant and direct impact (e.g. damage/loss of belongings or home, interrupted daily routines, parent's loss of job)</li> <li>• Separated from caregivers</li> <li>• Perception of threat or actual threat to self or loved ones</li> <li>• Trauma outside of interpersonal relationships (e.g. natural disaster)</li> </ul>
<b>CHARACTERISTICS OF THE INDIVIDUAL</b>	<ul style="list-style-type: none"> <li>• No previous exposure to trauma/disaster</li> <li>• Older age for children who are better able to use language to make meaning and have developed coping skills</li> </ul>	<ul style="list-style-type: none"> <li>• Previous exposure to trauma/disaster</li> <li>• Younger age, before a child is able to understand what is happening or has developed coping skills</li> </ul>



**Table 3 (continued)**

	PROTECTIVE FACTORS	RISK FACTORS
<b>CHARACTERISTICS OF THE RELATIONSHIPS/FAMILY</b>	<ul style="list-style-type: none"> <li>Caregiver's adaptive response to the disaster</li> <li>Close attachment relationships</li> <li>Positive connections among family members</li> </ul>	<ul style="list-style-type: none"> <li>Caregiver's difficulty functioning following the disaster</li> <li>Lack of secure attachment relationships</li> <li>Conflictual relationships among family members</li> </ul>
<b>CHARACTERISTICS OF THE COMMUNITY</b>	<ul style="list-style-type: none"> <li>Strong social and community networks</li> <li>Strong cultural/spiritual supports</li> <li>Positive childcare environment</li> <li>Disaster planning and supports in place childcare and community</li> </ul>	<ul style="list-style-type: none"> <li>Lack of community and social networks</li> <li>Lack of cultural/spiritual supports</li> <li>Lack of support and resources in childcare environment</li> <li>Lack of disaster planning and supports in the childcare and community</li> </ul>

(Bonanno, Westphal, & Mancini, 2011; Masten, 2015; Masten & Obradovic, 2008; Moore et al., 2016)

## Recognizing Stress/Trauma-Related Responses in Infants and Young Children

Knowing signs of stress and trauma that are common at different ages can help childcare providers recognize problems and respond appropriately. Infants and young children respond to trauma, disasters, and loss in many different ways. Some may show disorganized and dysregulated behaviors, others may withdraw, and still others may react like nothing has happened. Some children may show these reactions soon after the event while others may seem to be doing fine for weeks or even months and then some event may trigger anxiety or dysregulated and troubling behaviors.

Just like during the disaster itself, some children with flexible temperaments may have minimal responses to emergencies. It is important that providers not overlook these children as all children have a need for support, communication, and reassurance after they have experienced an emergency. It is helpful to remember that children are little adults, and they display emotions differently. Specifically, children can be described as having short emotion attention spans. They are more likely to move back and forth between positive, neutral, and negative emotion and will return to play even during stressful events. This does not mean that they are not affected by crisis but is a sign of children's push towards positive development.



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Recognizing symptoms of stress or trauma requires knowledge of a child's behavior prior to the event since disaster-related responses generally represent a change from the child's previous behavior. Similarly, it is important to have knowledge of typical development to differentiate developmentally-appropriate behavior from responses associated with disaster.

For more information on typical developmental milestones, see CDC's Developmental Milestones Checklists. These checklists describe typical behaviors for children at 2, 4, 6, 9, and 18 months and at 1, 2, 3, 4, and 5 years and will help you differentiate trauma responses between age groups.

## In Practice



Sam is an eight-month-old boy who has been at your center for four months. Several weeks ago, his family's house was destroyed by a fire. Prior to the fire, Sam never had any difficulty separating from his parents. Soon after the fire, you notice that Sam has begun to cry when his parents leave him. You wonder if this is a trauma response to the fire. You also know that separation anxiety commonly starts between the ages of seven and nine months. Before assuming the crying is a trauma-related response, you seek more information.

Jessica is a 24-month-old girl who has been at your center for a year-and-a-half. She has always displayed a flexible temperament, but over the past month you notice that she easily cries and is aggressive with other children. You know two-year-old children are not yet able to manage their feelings and often show frustration through aggression, so you don't mention the change to Jessica's mother. After three weeks, Jessica's aggression is becoming worse, and you decide to ask her mother if she has noticed a similar change in behavior at home. Jessica's mother responds she has and says, "Everyone warned me about the 'terrible two's';" I was waiting for this." You continue to ask questions, and Jessica's mother tells you that the arguing between her and her husband got so loud that a neighbor called the police about a month ago. She says Jessica was asleep so she didn't know what happened. You wonder if Jessica's behavior is related to what's going on at home, saying, "I'm so sorry. It sounds like it has been a hard time for everyone. Is it ok if I keep checking in with you and asking how things are going at home?" You know that children are highly sensitive to their caregiver's moods and more aware of their environments than their caregivers sometimes think they are. You decide to look for opportunities for ongoing conversations with Jessica's mother about how to best support Jessica.



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## Stress/Trauma Responses in Infants Under One Year

Very young infants under one-year show distress through their bodies, for example, by startling easily or holding their bodies in a rigid, stiff way. Problems in eating, sleeping, and elimination are common after disaster.

Below is a list of possible stress/trauma reactions to look for in infants. Remember that a behavior can have many different meanings, and the items on the list may be signs of distress after disaster. However, before assuming a trauma reaction, consider other possibilities such as illness or a temporary state (for example, is the baby sleepy or hungry?). If you are concerned about a baby's reaction, it is important to refer the family to an infant mental health professional.

- Sad or bland affect
- Lack of eye contact
- Lack of responsiveness
- Intense, prolonged crying
- Unresponsiveness to soothing
- Rejects being held or touched
- Prefers "strangers" to familiar caregiver
- Muscular rigidity, restlessness, agitation, intense startle response
- Feeding, sleeping, or elimination problems
- Weight loss



## Stress/Trauma Responses in Young Children

Young children find it difficult to adjust to change which is why routines and listening to them is so important. Also, they do not understand the implications of the disaster or the finality of loss, but they know something in their life has changed. Young children have not yet developed their own coping skills and depend on the adults around them, including childcare providers, to help them through difficult times. Their reactions will also depend on the impact of the trauma on caregivers and environments.

Some behaviors are commonly seen in very young children following a disaster or other traumatic events. Regression to an earlier behavioral stage is common; a child may engage in bedwetting after being toilet trained or thumb sucking after this behavior has stopped. They may show increased anxiety and fear of strangers, being alone in the dark, or imagine "monsters" in their room. They may also become clingier to a caregiver or provider showing separation anxiety when they used to feel comfortable in a setting. They may not want to leave home to go to childcare, preschool or other places in the community. Other changes may include fussiness with eating, changes in sleep habits including difficulty going to sleep or staying asleep. Dysregulation in behaviors and emotions is also common including aggressive or withdrawn behaviors.



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Experiencing a disaster can also affect play with a young child repeating the same play over and over. Younger children tend to have a self-focused lens, so they might be afraid that something they thought or did caused bad things to happen.

A list of possible stress/trauma reactions to look for in young children is described below. Remember that a behavior can have many different meanings, and the items on the list might be signs of distress after disaster. However, before assuming a trauma reaction, consider other possibilities such as illness or a temporary state (for example, Is the child sleepy or hungry?). If you are concerned about a young child's reaction it is important to refer the family to an infant or early childhood mental health professional.

- Sad or bland affect
- Crying, whimpering, screaming
- Not able to be soothed
- Frightened facial expression
- Immobility, aimless motion, trembling, muscular rigidity
- New fears that cannot be resolved
- Fear of being separated
- Increase in clingy or needy behavior
- Being withdrawn, avoiding interactions
- Lack of interest in usual activities
- Sensitive to loud noises, jumpy, or anxious
- Preoccupation with safety
- Emotional outbursts including anger and aggression
- Physical complaints (stomach aches, headaches, change in appetite.)
- Changes in sleep patterns
- Regression in developmental milestones
- Feeding, sleeping, or elimination problems
- Difficulty concentrating
- Seeming spaced or zoned out
- Repeated play or talk about the trauma with no resolution and blunted or intense affect
- Precocious competence in self-care or attempts to care for adults



**Table 4**

HOW YOU ARE	You try to be...
<b>RELATIONSHIP FOCUSED</b>	You understand that your relationships with children are key to their post-disaster response and recovery. You support both children and their families in recovery as you understand that how adults respond to disaster will influence how children respond.
<b>FULLY PRESENT</b>	Following a disaster, it might be more difficult to be present as your mind is more likely to wander back to the disaster or to other present concerns. You are forgiving of yourself when this occurs as it is natural. You notice when your mind wanders and bring it back to the present moment to focus on the child, children, or family in front of you.
<b>EMOTIONALLY AVAILABLE</b>	You recognize that children display symptoms in the context of relationships and might behave in ways that push adults away at the same time they need them the most. You are consistently available to children (and their families), being with their strong feelings that may include sorrow, fear, and rage, while helping them express their feelings in an appropriate and safe manner.
<b>SAFE</b>	You recognize that young children think adults are all powerful and can keep them safe; therefore, a disaster may result in broken trust, and children might relate differently to you than before. You ensure a safe physical environment as well as a safe emotional environment by being appropriately flexible while also being consistent, keeping routines, and setting limits.
<b>RESPONSIVE RATHER THAN REACTIVE</b>	You understand that children and adult behavior has meaning and that behavior which may feel annoying or disrespectful is communicating a need. You notice when you feel hurt or frustrated and seek to understand the situation from different perspectives. You ask questions and wonder about possible meanings of behavior as you try different ways of responding.



**Table 4 (continued)**

HOW YOU ARE	You try to be...
<b>CULTURALLY RESPONSIVE</b>	<p>You recognize that post-disaster responses are determined, in part, by the child's and family's culture. For example, a protective response in some cultures for children and families is to sing and dance as an important part of the recovery.</p> <p>You also recognize that sociocultural factors, such as poverty, lack of resources, language barriers, and discrimination, may influence a family's ability to recover from disaster. You strive to break down barriers that families face and focus on the unique needs of each child and family.</p>
<b>ENGAGED IN SELF-CARE &amp; COMMUNITY CARE</b>	<p>Working in childcare is hard. Disaster work is hard. Whether or not you also have experienced the disaster, disaster work is associated with highly-charged emotions and complex needs. To do this work, you know that your well-being is important. You practice self-care, support others, allow others to support you, and receive consultation. You allow yourself the same grace and compassion you hold for others.</p>



# Supporting Infants and Young Children Following Disaster

Responding to trauma reactions in infants and young children might be especially difficult following disasters that have impacted communities since adults are often coping with their own emotional reactions. Children always depend on adults to protect and support them. However, the adults may question their own safety and ability to keep children safe. Following a disaster, children need adults to hear, acknowledge, and respond to their feelings even when they do not express themselves in ways that are easy to understand. They need extra support in managing their emotions and making sense of what has happened.

Since infants and young children can pick up the stress of adults, supporting and seeking support for yourself as well as children's other caregivers is the first step in supporting infants and young children. (see pages 32 – 34 for more information).

As always, how you are in your relationships with children and families is a key component to their recovery following a disaster.

## Supporting Infants Under One Year Following Disaster

Following a disaster, infants do not have the words to understand the frightening event(s) they experienced, but they do “remember” the trauma in the emotional and body-based feelings that accompanied it (Van der Kolk, 2015). For this reason, supporting infants after trauma means helping them feel comfortable, safe, and secure in relationships. While they might not understand the words you use to comfort them, they understand your tone of voice and the tension or relaxation in your body. As they begin to understand language, the words you use will help them make meaning of their feelings. Most importantly, as you hold and create a safe environment, the infant's body will have a restored sense of safety. Consider the following list when working with infants who have experienced disaster or other types of trauma.

- It is important to notice what calms the infant and helps them regulate their bodies and emotions.
- Pay attention to the types of touch, movement, music, and lighting that soothes the infant and surround them with what makes them comfortable.
- Maintain routines and consistent care as much as possible.
- Use gentle touch and a soothing tone of voice.



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- When an infant is scared or upset or when scary things are happening around the infant, make sure they are with a familiar caregiver.
- Provide support to the caregiver, including helping the caregiver find resources to meet basic needs such as food and housing.

## Supporting Young Children Following Disaster

While being in supportive relationships with young children following a disaster, there are important things that you can do to help them in the following areas:

- Focusing on developmentally-appropriate activities, play, and learning
- Managing their bodies, emotions, and behaviors
- Building trusting relationships with adults
- Responding realistically to danger and recognizing the difference between the danger of the past and the safety of the present (if the present is, in fact, safe)
- Understanding scary and confusing experiences (Lieberman, Ippen, & Van Horn, 2015)

### In Practice



You are a provider in a four-year-old classroom and have just returned to school after a two-week closure due to a sickness. One student did not return because he tested positive for the sickness. During circle time, you notice that your class is unusually active and aggressive. You say, "I know we have been away for a while. We need to follow our rules and sit criss-cross apple sauce. I wonder if anyone is missing their friend Jaylen." Pause and listen for what the children have to say. Correct any misinformation. For example, if someone says, "Jaylen died," explain that "Jaylen is sick. Usually when children are sick, they get better." You continue, "Since Jaylen isn't feeling well, let's make him a card after we finish our story."

## Here are additional ways to guide caregivers and professionals in supporting young children in the context of their development and culture.

**Provide extra affection and attention.** Consider scheduling extra time if a disaster or a community violence has taken place. After a disaster or other traumatic event, children will need additional support. When possible, spend individual quiet time with each child. Children may want to be by your side more often or seek more physical attention. This is normal after something scary happens. If the child wants to talk, listen to them. If the child wants to be held, hold them. If the child is clingy, be patient, and if the child shows fears, provide support without dismissing or minimizing their fears. When children get the additional attention they need, they will be more likely to return to their typical levels of play.



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**Return to routines and normalcy as appropriate.** When possible, maintain regular routines such as circle time, mealtime, and nap time. When old routines are not possible, establish new routines since consistency is important in helping children feel safe and secure.

While maintaining classroom rules and setting limits on inappropriate or unsafe behavior, it is also important to recognize that after disaster there will be changes. Some children might respond with behavioral challenges, so flexibility will be required.

**Play.** Play is the most important work of children. It helps them develop, learn, express feelings, and relax. Provide props (for example, in dramatic play) for children to act out their experience of disaster, but do not force or over-encourage this type of play. Allow children to play both individually and with peers. Offer soothing activities like singing, coloring, or listening to music. Encourage physical play and activities so children can release anxious energy.

**Teach relaxation skills.** It is never too early to help children learn ways to manage their feelings. Toddlers can learn simple breathing exercises. Some suggestions and examples can be found in our website resource section like the videos listed below.

Sample Resources:

- Daniel Tiger’s Close Your Eyes, Snuggle, or Take a Deep Breath, You Can Do What Helps You Rest.
- Sesame Street Big Bird’s Comfy-Cozy Nest supports children in relaxation, visualization, and using adults to help them manage feelings.

**Encourage expression of thoughts and feelings.** Show children that you are interested in their thoughts and feelings about what happened. Not all children are verbal or express themselves best through language.

Tips for Providers to Encourage Expression:

- Watch and listen without interrupting.
- Avoid asking too many questions, or correcting.
- Paraphrase what the children say.
- Give words to describe their play.
- Label emotions children display. Example: “You have tears running down your face, you might be sad?” “You are stomping your feet and yelling, are you angry?”
- Validate their feelings and experiences. Example: A child describes a tornado as a monster. “That tornado was so loud and scary, I can see how it sounded like a monster. Tornadoes happen when the wind gets so strong that it makes a loud noise and can hurt our houses and buildings.”
- Watch and listen for children who blame themselves and reassure them that it was not their fault.
- Let children know you appreciate them sharing and that they can continue to talk with you.



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During your lunch break, you look at your phone notifications and see that there was a shooting at a nearby office building. You later find out that the mother of Jennifer, a 30-month-old girl in your classroom, was killed. Jennifer's aunt, who is on the list of relatives you can release her to, calls and says she's on her way to pick Jennifer up. You call your CCR&R consultant who agrees to join you to meet with Jennifer's aunt. When the aunt arrives, she's crying. The consultant asks if she would like support in telling Jennifer that her mother has died. Jennifer's aunt cries harder and says she didn't know if she should tell her niece what happened and was thinking she'd tell her that her mother had to go out of town for work.

The consultant validates how hard the situation is and explains that it is important that Jennifer be told the truth. Jennifer may not understand the meaning of death, but she will see a lot of relatives crying and will know that something happened to her mother. She will also miss her mother and may think that her mother doesn't want to come home to be with her if she is not told the truth. The consultant shares that it helps to explain death to children by saying that death means a person's body doesn't work anymore, that the person can't talk, walk, run, eat, or play anymore. The consultant also stresses that it is important to remind Jennifer that other adults are there to take care of her. Jennifer's aunt agrees. She wants to wait until she gets home to the rest of her family to tell Jennifer that her mother has died.

**Share stories.** Reading storybooks about disaster written at an developmentally-appropriate level are a helpful way to begin conversations about a child's experience of disaster. Some children have an easier time talking about a character's experience rather than their own. There are freely available stories about disaster online for public use. For example,

- Children's Health Queensland Hospital and Health Services developed a series of stories entitled, Birdie's Tree: Growing Together through Natural Disasters. This series can be found at [and](#) includes stories about Birdie and the Virus, the Fire, the Cyclone, the Very Hot Day, the Big Sickness, the Flood, the Drought, the Earthquake, and Relaxing with Birdie.

As the provider, make sure to read the story yourself first. You'll want to leave out any parts of the story that are not developmentally appropriate or relevant to your situation; you can adapt the story to fit your circumstances. As you would when reading any story, encourage children's questions, comments, and involvement while reading. Share the stories you read to the children with caregivers, so they have similar language to talk about the disaster.

**Let children help when it is safe.** Disasters are associated with a lack of control. Both children and adults feel better when they can help themselves and others. Plan activities that give children and caregivers control over their environments. For example, children can draw cards for family members of a child who has died. If there was a natural disaster that destroyed the playground, children can plant flowers to make the playground pretty again.



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**Watch for trauma triggers.** Trauma triggers can be anything that reminds the child of the disaster or trauma. A trigger can be a place, object, sound, smell, time of year, type of weather, or feeling. Since it can be hard to know what a child's trauma triggers are and if a child is responding to a trauma trigger, it is helpful to look for patterns in a child's behavior. It is also helpful to wonder if a child is being triggered by something if they misbehave "for no reason." Often when children misbehave "out of nowhere," they are responding to a trauma trigger about which adults are unaware. When adults are aware of triggers, they can help the child make a connection between the trigger and their feelings or behaviors. It can also be helpful for the adult to share their feelings in an developmentally-appropriate way. For example, on a rainy day after there has been a tornado, a childcare provider might say, "Rainy days remind me of the tornado, and make me feel scared. This is a regular rainy day. Let's get our musical instruments out and play inside."

**Limit media coverage.** Given children's cognitive development, they do not understand that events portrayed on the news are not occurring in real time, and they might think the disaster is happening over and over again each time. Limit the amount of news and potentially violent television and movies that children (and adults) watch. In addition to limiting exposure to media, remember that children are very aware of what adults are saying even when the adults think children are not listening. Protect children from heated or stressful discussions. If children do overhear the news or other discussions you wish they would not have heard, acknowledge what the children heard or saw, explain it to them in a developmentally appropriate manner, and reassure them that you are there to keep them safe.

**Refer for mental health services if needed.** Infant and early childhood mental health clinicians provide evidence-based social, emotional, and behavioral support to infants, young children, and their families. Most infant and early childhood mental health providers:

- Start with an assessment that involves the caregiver(s) alone to understand the issue that needs to be addressed as well as the child's and family's strengths, difficulties, and needs.
- Meet with caregiver(s) alone to offer support and to help them understand and respond to their child's reactions to trauma.
- Work with caregiver(s) and child together to strengthen the parent-child relationship when it has been impacted by trauma.
- Work with caregiver(s) and children using methods like play to help the child share their thoughts and feelings around the emergency event.

The Association of Infant Mental Health in Tennessee (AIMHiTN) has a list of infant and early childhood mental health resources which can be found at <https://AIMHiTN.org/resources/tennessee-resources>.



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## It is important to remember that recovery from disaster or trauma takes time.

Trauma reactions develop as a way to adapt to a stressful situation and survive. For example, a child who has been exposed to a fire that destroyed their house is more likely to be on the lookout for fire. Similarly, a child who has experienced neglect including food deprivation is likely to hoard food. Even when the behaviors are no longer necessary, they often persist. It can be frustrating for adults who know a child is safe and well fed to have a child that continues to display these behaviors. At these times, it helps to remember that behavior has meaning and that the behaviors are not simple defiance. Mental health support can help both children and adults cope with the long-term impacts of trauma.

## Supporting Caregivers Following Disaster

Family engagement is a key component that supports positive development for children in childcare. Caregivers often turn to childcare providers for information and support following disasters, and it is important that providers be prepared to support caregivers as they navigate their own and their children's recoveries. Hosting caregiver meetings is a good way to offer information and resources and to provide opportunities for social support for caregivers who feel isolated.

### Tips on supporting caregivers following disasters:

- Recognize that caregivers may feel powerless to keep their children safe.
- Help caregivers understand the power of their relationships with their children and how important those relationships are in children's recovery.
- Focus on and point out caregivers' successes.
- Notice if caregivers are having difficulty with their children's reactions. They may label children's trauma reactions as "behavior problems," "bad," or "defiant." They may call their child a "crybaby" or "scaredy cat." Listen to caregivers' concerns and offer information.
- Prepare caregivers by normalizing common trauma reactions in children and offering information about how caregivers can help children after a disaster.
  - Psychological First Aid: Parent Tips for Helping Infants and Toddlers after Disasters offers information about common disaster responses in infants and young children and how parents can respond to those reactions. This handout is available in multiple languages and can be downloaded and copied.
  - The CDC website offers information and links on Helping Your Child Cope with Disaster and is available in English and Spanish.
  - Ten Considerations for Infants and Young Children After Disasters and Violent Events: General Handout for Parents. See page 36.
- Caregivers may want quick fixes when their children are having behavior problems or other reactions following a disaster. Validate the caregivers' frustrations while helping them understand the children's behavior in the context of disaster.
- Help caregivers find ways to talk to their children about the disaster. Discuss the ways you are talking about it in childcare and share any handouts or books you are using with the children.



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- Be familiar with community resources and have an updated list of resources including food pantries, parent support groups, mental health referrals, financial assistance, etc.
- Be aware of misdirected anger. When feeling helpless or scared, caregivers may blame or yell at you. Know that this is not your fault.

## Self- and Community-Care

It is noteworthy that this section is entitled self- and community-care. Self-care is of utmost importance to effectively support children and their families. However, it is also necessary to recognize that true self-care requires adequate community resources, agency supports, funding, and societal recognition and respect for the importance of the childcare providers and their roles. Furthermore, just like infants and young children thrive in the context of relationships, adults also need relationships to support their well-being and recovery. In community care, responsibility for care is shared. When childcare providers are able, they notice and provide support if another staff member is having difficulty (Sambile, 2018).

Tennessee supports its childcare providers through resources such as CCR&R and TECTA... which are described on page 8 of this toolkit.

When impacted by a disaster, be aware of signs of stress. Common reactions include:

- Nightmares or upsetting thoughts and images of the event that come to mind
- Avoidance of thoughts, situations, or other reminders of the event
- Strong feelings of sadness, helplessness, anxiety, anger
- Feeling overwhelmed, confused, or emotionally numb
- New or renewed fears, jumpiness, difficulty with sleep, problems with concentration

Remember, these can be normal reactions to very stressful events. With adequate resources, supportive communities, and the help of family and friends, most people gradually feel better. However, if the symptoms remain or interfere with your work, relationships, or life satisfaction, seek support from a mental health professional who specializes in trauma.

Even if you have not been directly exposed to disaster, working with children who have experienced disasters or other traumas can lead to burnout or secondary traumatic stress (Stamm, 2010).

- Burnout is associated with feelings of exhaustion, lack of work satisfaction, feeling unproductive in your work, difficulty coping with work-related responsibilities, and distancing yourself from your work.
- Secondary traumatic stress occurs when you repeatedly hear stories of disaster or trauma. Secondary traumatic stress symptoms are similar to the traumatic stress symptoms you may have if you are directly exposed to disaster. For more information on secondary traumatic stress, the National Child Traumatic Stress Network has many resources.
- Helping others who have been through disasters or other traumas can have positive impacts and lead to compassion satisfaction which is the pleasure you receive from feeling effective in your work and your ability to help others.



## Tips on self-care after disaster:

Watch for risk factors of Burnout and Secondary Traumatic Stress like:

- Measuring your self-worth by how much you help others
- Unrealistic expectations of yourself and others
- Perfectionism and critical self-view
- Fearing others will judge you if you show weakness
- Avoidance of feeling or showing feelings
- Having difficulty receiving emotional support
- Having a personal trauma history
- Not having a balance in your work and personal life

## Following disaster:

- Take care of yourself – try to eat healthy meals, get enough sleep, and exercise
- Spend time with other people. Resist the tendency to isolate yourself from your support, such as trusted friends, family, or your spiritual community.
- If it helps, journal or talk about how you are feeling. However, it may be difficult for you to listen to the distress of others when they need to talk, so use your own judgment.
- Get back to your everyday routines. Familiar habits can be very comforting.
- Give yourself permission to feel moody, nervous, or blue. Take time to grieve and cry.
- Instead of trying to do everything at once which can be overwhelming, do one thing at a time.
- Try not to make and major life changes during a stressful time.
- Do something that feels good to you.
- Turn off TV news and stay away from media reports. If you need to be knowledgeable, look at the news once in the morning and once in the evening.
- Ensure you are taking breaks from the event.

## Tips for childcare organizational care:

How childcare staff are in their relationships with children, impacts the well-being of children. Similarly, how organizations are with their staff impacts their staff's well-being. To support childcare staff, organizations might:

- Appreciate and recognize how hard this work can be.
- Provide/receive necessary education (e.g. on the impact of trauma).
- Provide a safe environment and opportunities for staff to debrief and share their experiences and concerns without fear of judgement.
- Model self-care/emotional support.
- Provide time and resources for staff to practice self-care (e.g. staff development days, breaks, lunch, a social break room, a quiet break room).
- Notice and intervene if another staff member is having difficulty.
- Receive reflective consultation.
- Connect with AIMHiTN for additional resources.



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# Disaster-Specific Resources

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## Supporting Infants and Young Children Around Tornadoes

### Before a Tornado

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by tornadoes.

Regularly review your tornado plan with caregivers, plan regular tornado drills, and keep updated contact information.

### What childcare providers might say or do: \*



#### For young children

"Today we're going to learn about tornadoes. Tornadoes don't usually happen, but sometimes when there's a really bad storm, the wind starts swirling and gets so strong it can knock things down. In a little while, you're going to hear a loud alarm that will tell us it's time to practice how to be safe if there's a tornado. I'll be right here with you."

### During a Tornado

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your tornado emergency plan. Ask for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe.

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say or do: \*



### For infants

"That loud sound made you cry. I'm going to pick you up, hold you, and keep you safe."



### For young children

"That loud siren is telling us there's a really big storm. We need to go to our safe place away from the windows."

"The tornado messed up our building. The windows broke, and there's lots of glass and stuff everywhere. We need to stay in the bathroom where it's safe until Ms. Suzie tells us we can come out. I'll stay with you."

## After a Tornado

Children who have had their personal lives or normal routines impacted are more likely to show reactions following a tornado. Notice times when children are reminded of the tornado. It's not always possible to know, but common reminders include sirens, dark, windy, or rainy days.

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Expect that some children will show emotion and behavior dysregulation. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. Childcare providers can help model this skill by talking to caregivers about the disaster. When children hear adults talking about experiences and feelings, they know they can too.



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## What childcare providers might say or do: \*



### For infants

"You still cry when you hear loud noises. I'm going to pick you up, hold you, and keep you safe."



### For young children

"I wonder if this rain and wind scare you because you remember when the rain and wind were so big that your house was messed up." Pause, listen, and ask questions. Correct any misinformation. "This storm sounds loud and scary, but it's a regular storm. We can play inside to stay dry and safe."

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.

**For more resources specific to tornadoes, please use the QR code below.**



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tools



We receive warnings of severe weather using:

The designated safe gathering location inside the building is:

To alert staff without alarming children, we:

Severe weather procedures are posted at the following locations:



# Supporting Infants and Young Children Around Floods

## Before a Flood

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by floods.

Regularly review flood plans with caregivers and keep updated emergency contact information. Ensure your plan for floods is updated and check supplies regularly.

## What childcare providers might say/do: \*

### For young children



Use your lesson plan on weather to teach children about floods. Explain, “Rainwater is good for the earth. It gives the plants and animals water they need. Sometimes when it rains a lot and the rain comes down really fast, there can be too much water, and there is a flood. If we ever have a flood and water got in our building, we’d go to the big school down the street to stay safe and dry.” Pause throughout to listen to any remarks, respond to questions, and clarify any misinformation.\*

## During a Flood

As a childcare provider, always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your flood emergency plan. Call for help if you need it.

It is important that providers talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them they are there to keep them safe. Keep the following in mind when talking with children about floods:

- Be honest.
- Use simple language that is appropriate for the children’s ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to volume and tone of voice. They notice emotions, facial expressions, and body language.

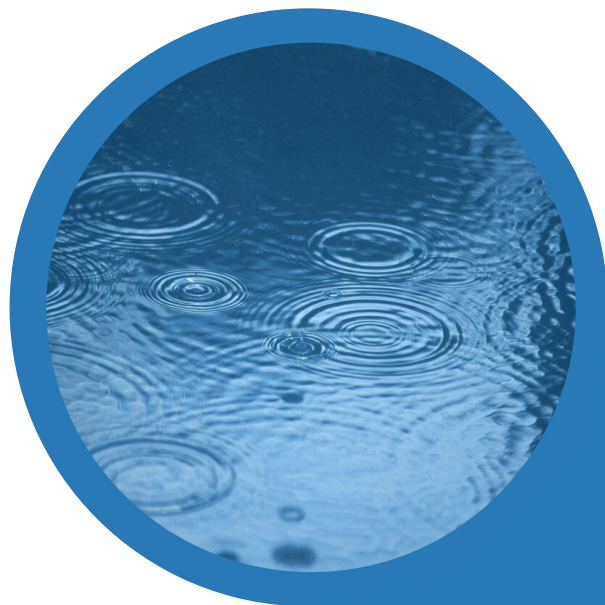


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## What childcare providers might say or do: \*



### For infants

"I'm going to pick you up and put you in your car seat. We'll get in the van and go to a place where it's safe and dry."



### For young children

"It's raining really hard and fast. There is a flood warning, and we need to go where it's safe and dry. Everyone go to your cubbies and get your bags and then line up. I think the loud thunder can be a little scary. Let's all take a big belly breath and then we'll walk together to the van."\*

Pay attention to what you say to other adults even when you do not think children are listening.

## After a Flood

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Expect that some children will show emotion and behavior dysregulation. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Childcare providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Children who have had their personal lives or normal routines impacted are more likely to show reactions following a flood. Notice times when children are reminded of the flood. It is not always possible to know, but common reminders include thunder, lightning, sirens, dark, windy, or rainy days, wet clothes, broken or messed up toys.



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## What childcare providers might say or do: \*



### For infants

"You hear thunder like you did when it flooded. Let's sing a song." You sing your or the baby's favorite song about rain.



### For young children

"I wonder if this rain and wind scare you because you remember when it rained so much that our building flooded, and our toys got all ruined." Pause, listen, and ask questions. Correct any misinformation. "This storm sounds loud and scary, but it's a regular storm. We can play inside to stay dry and safe."

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.

**For more resources specific to floods, please use the QR code below.**



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To determine if our facility is in a flood plain, we have contacted:

To receive flood warnings, we have:

To alert staff without alarming children, our response plan is:



# Supporting Infants and Young Children Around Earthquakes

## Before an Earthquake

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by an earthquake.

Regularly review your earthquake plan with caregivers and keep updated emergency contact information. Keep your earthquake plan updated and plan regular earthquake drills.

### What childcare providers might say or do: \*

#### For young children



"Today we are going to learn about earthquakes. Earthquakes don't happen often. When they do, the rocks that are deep underground can move and make the earth shake. When this happens, we stay safe by dropping to the ground, getting under a strong table, and holding on until the shaking stops. I'll show you."

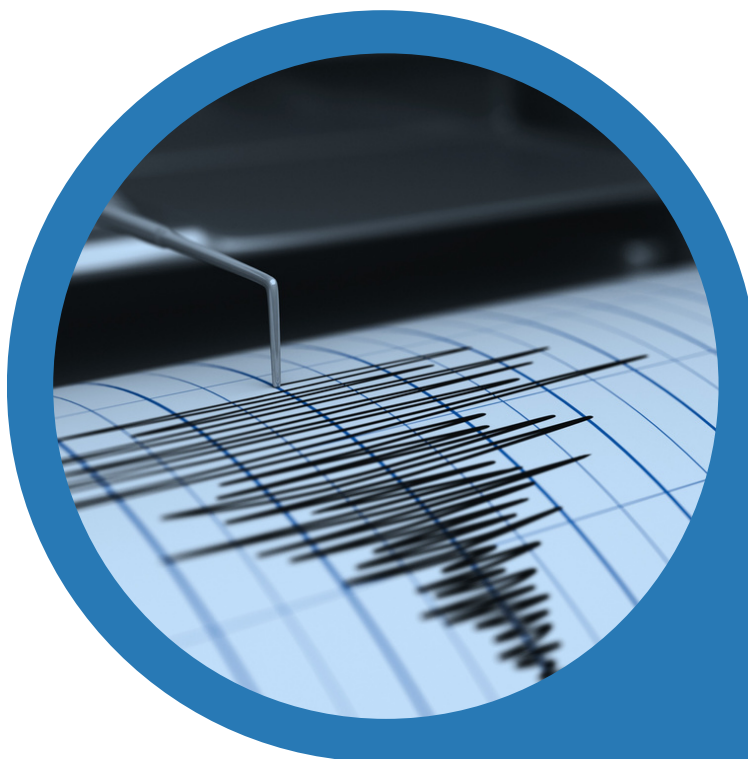
## During an Earthquake

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your earthquake emergency plan. Call for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe. Keep the following in mind when talking with children about earthquakes:

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say/do: \*



### For infants

"I'm going to pick you up and keep you safe."



### For young children

While physically supporting the child in following your directions, you say, "I hear a loud sound and the earth is shaking. Quickly, drop, cover, and hold on."

"That was an earthquake. It made things fall down all around us. Sometimes after a big earthquake the earth will shake a little more. Let's stay where we are for a little while. We can sing a song together while I come around and make sure everyone is safe."

Pay attention to what you say to other adults even when you do not think children are listening.

## After an Earthquake

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Expect that some children will show emotion and behavior dysregulation. Be available to provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Children who have had their personal lives or normal routines impacted are more likely to show reactions following an earthquake. Notice times when children are reminded of the earthquake. It is not always possible to know, but common reminders include loud sounds, when a heavy object drops and causes shaking, or broken toys.



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## What childcare providers might say or do: \*



### For infants

"Baby, your body gets so jumpy and stiff when you hear a loud noise. I'm going to rub your arms and legs, hold you, and rock you." You hum softly as you do this.



### For young children

"I wonder if it's been hard to rest during rest time because that's when the earthquake happened. I think you may feel scared. Let's stand up and get the shakes out of our bodies. Wiggle and shake along with the child. If the child is having a hard time sleeping you can sit next them, rub their back, let them know you are there and you will keep them safe. If they have a favorite music or sound to listen to when going to bed you can put that on as well.

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

\*Note: These are examples. Use your own words and describe your own plan.

**For more resources specific to earthquakes, please use the QR code below.**

## EARTHQUAKES



Children and staff know how to crouch, protect to their heads and necks, and hold on. If inside, everyone should shelter under tables and cover their heads. If outdoors, everyone should stay outdoors and avoid trees, fences, power poles/lines, and other potential falling debris.

**After an earthquake**, our plan is:



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# Supporting Infants and Young Children Around Fires

## Before a Fire

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by a house or wildfire.

Regularly review your fire plan with caregivers and keep updated contact information. Ensure you keep your fire plan updated and plan regular fire drills.

### What childcare providers might say/do: \*

#### For young children



"Today we're going to learn about what to do if there is a fire. Fires don't usually happen. When they do, we need to leave the building to be safe. Later today, you're going to hear a loud alarm from the smoke detector, that will tell us it's time to practice what we would do when there is a fire. When you hear the alarm, it's important to use your listening ears. I'll tell you what you need to do, and I'll be with you the whole time."

## During a Fire

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your earthquake emergency plan. Call for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe. Keep the following in mind when talking to children about fires:

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say/do: \*



### For infants

"I'm going to pick you up. I know I'm moving quickly but I'm keeping you safe."



### For young children

"I hear a loud fire alarm. That means it's time to line up. Quickly! Just like we practiced. Remember I'll be with you the whole time."

## After a Fire

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Expect that some children will show emotion and behavior dysregulation. Be available to provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Watch for changes in children's behavior and emotions. Notice times when children are reminded of the fire. It is not always possible to know, but common reminders include sirens, fire trucks, things that have been burned, or seeing people upset.



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## What childcare providers might say/do: \*



### For infants

"Baby, ever since the fire, you want me to hold you. I will hold you if you need me to." You hold the baby and notice when the baby is ready to play or explore. "I see that you're looking at the blocks. Would you like to go play?" You walk to the blocks and notice the baby's body language to see if they're ready to be put down.\*



### For young children

You notice your child, Alicia, fighting over a toy with her friend, Lacy. You say, "It looks like you're having a hard time sharing. Alicia, I see that's the special bear that the firefighters gave to you when the house burned down. Lacy, that's Alicia's special toy. Let's go find a special toy you can play with."\*

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.

**For more resources specific to fires, please use the QR code below.**



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Our fire alarm signal is:

Our all-clear signal is:

If necessary, the person(s) who will shut off utilities using clearly written instructions posted at each utility control or shut off point is:

There are two evacuation routes from every room and the routes are posted in each room. To ensure that all children are cared for, our evacuation procedure is:

If required, the temporary shelter is located at: (Include name and address)

Following an evacuation, the check-in station where parents may pick-up their children is located at:

The frequency at which all fire extinguishers are inspected is:

The frequency at which all smoke detectors and/or fire alarms are inspected is:



# Supporting Infants and Young Children Around Gas Leaks, Chemical Spills, or Potentially Hazardous Materials Incidents

## Before a gas leak, chemical spill, or hazardous material incident

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by disasters.

Regularly review your disaster plan with caregivers and keep updated contact information. Keep your plan updated.

### What childcare providers might say/do: \*



#### For infants

Knowing that infants look to you to understand the world, you use your tone of voice and facial expressions to communicate safety and danger and your actions to keep them safe. It is important for you to be patient if you have to use repetition to get your children to safety.



#### For young children

You speak to children about safety, focusing on how they can be protected rather than focusing on the dangerous situations. You sing songs about safety and protection.

## During a gas leak, chemical spill, or hazardous material incident

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your gas leak, chemical spill, or hazardous material emergency plan. Call for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe. Keep the following in mind when talking to children about hazardous incidents:

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say/do: \*



### For infants

You notice the smell of gas and say “I smell a funny smell. I am going to call Ms. Suzie so she can check and make sure it is safe to stay inside.” You grab your emergency kit and check to make sure all the children are with you as you leave.



### For young children

You have just received notification that there is a gas leak and that you need to evacuate, “Class, everyone get in line, please. That funny smell we’ve been smelling means that it’s not safe to stay inside. We’re going to all go outside together.” You grab your emergency kit and check to make sure all the children are with you as you leave.\*

Pay attention to what you say to other adults even when you don’t think children are listening.

## After a gas leak, chemical spill, or hazardous material incident

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Behaviors like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Children who have had their personal lives or normal routines impacted are more likely to show reactions following a gas leak, chemical spill, or hazardous material event. Notice times when children are reminded of the event. It is not always possible to know, but common reminders include smells, alarms, or seeing adults upset.



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## What childcare providers might say or do: \*



### For infants

After your building has been closed for several days and some of the children are fussy at drop off. You say, "It's hard when we haven't been together for a few days. I missed you so much. I'm so glad we're back together."\*



### For young children

You see three children in the dramatic play area acting out the event. One pretends to be a fire fighter, one a teacher, and one a student. You observe without interrupting, knowing that play is how children learn about the world and feel a sense of control when scary things have happened.\*

You notice Jerilyn is sitting in the corner crying. You say, "I see you are crying. Can I sit here with you?" You wait silently for a few minutes until Jerilyn says, "I washed my hands and didn't turn off the water tight." You are confused and say "You didn't turn off the water tight?" Jerilyn continues to cry, until you realize that Jerilyn may be connecting her actions to the gas leak evacuation yesterday. You say, "Jerilyn, do you think we had to leave the building yesterday because you did not turn the water off tight?" Jerilyn nods, and you say, "Jerilyn, that was not your fault. We had to leave the building because of a gas leak. The gas leak happened because a pipe broke. It wasn't anyone's fault. We called the plumber. The plumber fixed the leak so we are all safe." Jerilyn gives you a hug and then hands you a book and asks you to read it to her.

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to their concerns and share any concerns you have. Work together to find ways to best support the child.

---

\*Note: These are examples. Use your own words and describe your own plan.

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In the event of a hazardous materials incident, our **response plan** is:



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# Supporting Infants and Young Children Around Impaired Caregivers, Child Abuse, and Violence at the Childcare Center

## Before the event

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by an impaired caregiver, child abuse or witnessing violence.

Regularly review your policies with caregivers, as a childcare provider, and keep updated contact information. Ask caregivers to let you know about any changes in custody or personal events that might impact their children.

## What childcare providers might say or do:

During an intake with a family enrolling their child, you review all procedures and say, “My main job is to care for and keep your child safe. For example, sometimes we have family friends or relatives come to the center to pick up a child, but the person is not someone I’m authorized to release the child to. Caregivers sometimes get upset because they are busy which is why they asked someone else to pick up their child. Even when caregivers get upset, “I will only allow your child to leave with someone you have previously authorized. I will always do what I need to do to keep your child safe.” You also tell the caregiver that you are a mandated reporter and explain the procedures you follow if you suspect child abuse.\*

## When there is an impaired caregiver, suspected child abuse, or violence at the center

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your emergency plan. Ask for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe.

- Be honest.
- Use simple language that is appropriate for the children’s ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say or do:

Two parents arrive at the childcare to pick up their child, they begin to argue and then physically fight. At the front office, you try to intervene. When you are not successful, and the fighting continues, you call the police.

### For infants



"You are crying so hard. I think you heard your mama and papa yelling in the hall. I know you want to go to mama or papa, but we're going to stay in here. I'll hold you."\*



### For young children

One teacher speaks individually to the child who hears their parents fighting. The other teacher talks to the group and says, "Everyone hears the loud voices in the hall. Sometimes grownups fight, and it can be scary." Pause and listen to what the children have to say and respond to any questions. "What should we do when we get angry at our friends and want to yell and fight?"

Pay attention to what you say to other adults even when you don't think children are listening.

## After there is an impaired caregiver, suspected child abuse, or violence at the center

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Children who have had their personal lives or normal routines impacted are more likely to show reactions following the event. Notice times when children are reminded of the incident. It is not always possible to know, but common reminders include loud noises, arguing, police sirens, separation, seeing adults upset, or being upset themselves.



## What childcare providers might say/do: \*



### For infants

"You cry so much, I think that there is so much going in your life that your body has a hard time feeling calm. I will hold and rock you." You continue to speak to the baby in a soft, gentle tone. As the baby calms, you engage in play.



### For young children

Dalton, the child whose caregivers were fighting arrives the next morning with his grandmother. You say "Good morning Dalton, who brought you here today?" Dalton responds that his MawMaw did. The grandmother says, "Dalton is going to stay with me for a little while." You say to Dalton, "Sometimes when kid's parents fight so much, they need to stay with their MawMaws. I'm glad you came to school today." You pause and listen to what Dalton has to say and continue, "I think you may have some big feelings today. Ms. Erica wants you to go with her and show her how you're feeling on the feelings chart." You stay to speak with Dalton's grandmother about the situation.\*

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.

**For more resources specific to impaired caregivers, please use the QR code below.**



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# Supporting Infants and Young Children Around Active Shooter Drills and Incidents

## Before an active shooter

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by a violent incident.

Regularly review your active shooter plan with caregivers and keep updated contact information. Be aware from the initial intake of children who may have been exposed to violence or trauma and may be more reactive.

Caregivers should be prepared to talk to their children in advance of the drills and describe what will happen, why it is being done, and reassure their children that they will be safe. Also, caregivers should be told by the childcare provider that they will be available to answer any questions and provide support.

### What childcare providers might say or do: \*

During an intake with a family enrolling their child, you review all procedures and say, “My main job is to care for and keep your child safe. I tell every caregiver from the beginning how I do that and that we will be carrying out active shooter drills to be prepared for any emergency situation.” You share your protocol and ask caregivers to share questions and concerns.

## During an active shooter incident

Always check in with yourself first. If you feel overwhelmed or frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your active shooter plan and be able to explain and provide support to the children as needed. Ask for help if you need it.

Tennessee Department of Homeland Security recommends (1) Evacuate (if possible), (2) Hide (if evacuation is not possible), (3) Take action (direct confrontation is a last resort if your life or the lives of their children are in danger).

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe.

- Be honest.
- Use simple language that is appropriate for the children’s ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.



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## What childcare providers might say/do: \*



### For infants

When you hear your director say the code word over the intercom, you lock and barricade your door. As you pick up each infant, you whisper, "It's not safe; we're all going to sit together." You sit in the middle of the room, remember to silence your cell phone, and quietly hum as you rock the children.\*



### For young children

You hear code word for an active shooter and then hear gun shots. One teacher runs to barricade the door. You say, "Children, I need you to all follow me." A child says, "That was a gun." You respond, "That was a gun shot. Follow my directions. We're going to sit right here together and be really quiet." You remember to mute your cell phone and put your finger to your lips to remind the children to be silent. Your co-teacher begins to cry. You whisper to the children, "Ms. Becky is crying; I think she may be scared. I think we all may be scared. Let's all practice our belly breathing." You and your co-teacher wrap your arms around as many children as possible. You notice other children are holding each other's hands.

Pay attention to what you say to other adults even when you do not think children are listening.

## After an active shooter incident

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Notice times when children are reminded of the active shooter incident. It is not always possible to know, but common reminders include loud noises, closed in spaces, seeing people upset, seeing people in uniforms, or seeing strangers.



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## What childcare providers might say/do: \*



### For infants

Since the active shooter incident, many parents have removed their children from your center. You notice the infants who remain are having difficulty at drop off and that caregivers are staying longer, are tense and jumpy, and reluctant to leave their children. You think that the children's difficulty is associated with their caregivers' anxiety. When Nora and her mother, Ms. Dickson, arrive, you say "Nora, I think it's hard for you to leave your mama, and Ms. Dickson, I think it's hard for you to leave Nora." You pause to listen to Ms. Dickson and respond, "A lot of people are feeling scared. I am too. I wanted to let you know that we're scheduling a caregiver meeting. We're going to talk about how to help the children after what happened and about the changes we've made to increase security. I think it will be helpful for caregivers to be together. We all need support right now. "\*"



### For young children

You hear a child tell his friend, "Next time there's a bad guy, I'm going to bring a knife and kill him. You immediately respond, "We don't talk like that!" After the words come out of your mouth, you realize that the child is letting you know he may be scared, may think he could have stopped the situation, and may be trying to gain a sense of control. You get on the child's level and say, "I think you have a lot of big feelings about what happened". You are ready to explain in simple terms that his feelings may be because someone came in the school and hurt people, but as he starts talking, other children come over and share their experiences. You listen, reflecting back what they say, highlight their feelings, talk about how well they listened and did what they needed to do, and focus on how you will keep them safe.\*"

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.

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## Active Shooter Drills and Incidents



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# Supporting Infants and Young Children Around Death, Grief, and Loss

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## Before the death/loss

Having a safe, stable, and supportive relationship serves as a protective factor for children who are later impacted by death, grief, or loss.

At intake, ask caregivers about children's experiences around grief and loss. If the child has recently experienced loss, ask how the family explained the loss to the child and about any rituals or spiritual beliefs that would be helpful for you to know. Let caregivers know that you want to stay updated on important events in the child's life and that if the family experiences any loss or other life changes (e.g. moves or separations), you would like to be able to support them.

### What childcare providers might say or do: \*

At intake, you ask all caregivers about children's experiences, including those related to death, because you know that grief might impact a child's behavior and that issues related to death often come up in your classroom, most commonly when a child's family member or pet has died. You say to the parent of a 3 ½-year-old girl, "One of the things that's important to me in enrolling your child is to really understand your child. The more I know, the better I'm able to meet her needs." You ask questions including those suggested in this toolkit. You further explain, "Sometimes children talk to each other about things like a going to a funeral or saying someone is in heaven. Since these are such personal topics, caregivers are sometimes surprised when their children come home and talk about what their friends say. Is there anything that you would like me to know about your family's spiritual or religious beliefs?"\*

## After the death/loss

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of grief, assure them you and other adults are there to care for them and keep them safe. Keep the following in mind when talking to children about grief and loss:

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

Pay attention to what you say to other adults even when you don't think children are listening.

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.



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Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Notice times when children are reminded of death/loss. It is not always possible to know, but common reminders include people with the same role as or who looks like the person that died (for example, a grandmother picks another child up may remind another child of their grandmother who recently died), feelings of sadness, or seeing other people upset or crying.

## What childcare providers might say/do: \*



### For infants

Rachel has been crying all day; she stops and reaches out when Becky, the office manager, comes in. You say to Becky, "I think you remind Rachel of her mom. Y'all have the same long, brown hair. If you have a minute and want to hold Rachel, that would be ok." You say to Rachel, "You miss your mama so much."\*



### For young children

You find out a child in your 4-year-old classroom was in a car accident and died. You are shocked. You can't imagine your center without this bright, active child who seemed to carry joy and laughter wherever she went. You decide to consult with a parent at your center who is also a child therapist. She offers the following advice about talking to children about death.

- Use simple and honest words to explain what happened.
- It is ok, and even helpful, to use the word death. Children do not understand words like "passed away," "gone," "lost," or "resting in peace." Using these words can be confusing for children because they have a hard time understanding the permanency of death.
- It is helpful to explain that the person's body stopped working and that the person can no longer talk, move, eat, breathe, or play.
- When someone dies from illness, it is important to let children know that while some people die from serious illness, most of the time when people get sick, they get better.
- It is ok to let children know that you are sad.
- Let children know that it is ok to feel sad and also to continue to play and have happy times.

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

\*Note: These are examples. Use your own words and describe your own plan.



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# Supporting Infants and Young Children Around a Pandemic

Having a safe, stable, and supportive relationship serves as a protective factor for children who are impacted by a pandemic.

Regularly review your emergency plan with parents and keep updated contact information.

Always check in with yourself first. If you feel overwhelmed or feel frozen, pause and take a deep breath (or use whatever strategy works for you) so that you can effectively follow your pandemic emergency plan. Ask for help if you need it.

It is important to talk to children even before they understand the words. Talk about what is going on around them. In times of danger, assure them you are there to keep them safe.

- Be honest.
- Use simple language that is appropriate for the children's ages.
- Let children know what is happening next.

How you speak to children is as important as the words you use. Children respond to your volume and tone of your voice. They notice your emotions, facial expressions, and body language.

Pay attention to what you say to other adults even when you do not think children are listening.

Infants and young children will share their thoughts and feelings through behavior, emotions, play, and, when they are able, language. Watch and listen closely. Behavior like defiance, aggression, regression, or withdrawing can mean children are trying to process how they feel. Other examples of dysregulation may occur as well. Providers should try to be available to help caregivers provide support.

Remember that it is ok, and even helpful, to talk about what happened. When children hear adults talking about experiences and feelings, they know they can too.

Children's pandemic-related stress will depend on the impact it has had on their family. For example, children whose families are healthcare providers, whose caregiver has lost their job, or who has a family member that is sick may have more behavioral and emotional reactions.



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## What childcare providers might say/do: \*



### For infants

A new infant is enrolled in your classroom. You meet the family outside, stand over six feet apart, greet the child without your mask, and then say, "Now I'm going to put my mask on to keep you safe."\*



### For young children

You overhear from Mikey that he doesn't want to play in the arts and crafts center with Grace because she is wearing a mask. You learn from the caregiver that Grace is encouraged to wear a mask to prevent illness during a pandemic. You quickly intervene saying, "Grace wears a mask to prevent from getting sick, but that does not mean Grace is sick. Any person can get sick, but we all can wear masks and wash our hands to be as safe as possible." You help the children start on their art projects.

As much as possible, keep regular structure and routines while expecting that children may need extra attention and reassurance.

Communicate with children's caregivers. Listen to caregivers' concerns and share any concerns you have. Work together to find ways to best support the child.

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\*Note: These are examples. Use your own words and describe your own plan.

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# Handout 1

Children grow, learn, and thrive through sensitive and responsive relationships with adults.

## In supportive relationships, children learn...



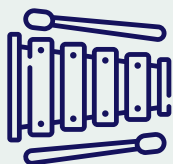
### How to calm and deal with big feelings.

Children are not born with the ability to manage their emotions. Holding, rocking, or quietly speaking to a child who is scared, angry, disappointed, or overexcited will help them become calm. Over time, they will learn ways to calm down on their own or seek out support when they need it.



### What is safe and what is dangerous; what is acceptable and what is not?

Children need adults to keep them safe. Children watch you closely and learn about safety and appropriate behavior based on your responses. They will learn what makes you scared or angry and how you control your emotions.



### It's safe to explore, play, and learn.

When children trust that you will support them in managing their emotions, keep them safe, and be there when they need you, they can focus on their "work" of playing and learning.



### How relationships work.

Children interact with a few, special adults. When you treat a child with care and kindness, the child learns that most people are caring and kind. In turn, they learn to be caring and kind towards others.

**Relationships Matter:  
You Are Important in the Life of a Child.**



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# Handout 2

## Ten considerations for infants and young children after disasters and violent events

### ***In Supportive Relationships, Children Learn***

1. Infants and young children are impacted by disasters and trauma. They are not “too young” to notice but may not have the language or skills to tell you how they feel. How they react and their recovery often depends on the resources in the community and the responses of their caregivers.
2. Infants and young children exposed to disasters and trauma may show how they feel through changes in their behaviors and emotions.
  - a. They may cry more, be more clingy or more withdrawn.
  - b. They may show regression (like bedwetting after being trained or loss of language skills).
  - c. They may show new fears, sleep problems, or repeatedly play about what happened.
  - d. They may have more difficulty paying attention and be more defiant, active, or aggressive.
  - e. Very young babies will respond with changes in crying, eating, sleeping, and eliminating, and by startling easily or having a rigid body posture.
3. Risk factors from different disasters or traumas may add up, resulting in increases in stress response.
4. It is important to be hopeful. With community and family support, most children will recover after disasters or violent events.

### ***Ways to Help Infants and Young Children***

5. Children need support from caregivers, teachers, and other adults.
6. Reestablish routines for infants and young children after disasters or other violence; try to provide opportunities for them to play, relax, and recover.
7. Infants and young children need extra attention and affection after a disaster or violent event.
8. Be prepared to listen to a young child. Find out what they know, answer any questions, explain what is happening in a way they can understand.
9. Watch for trauma triggers (things that remind your infant/young child of the event). When children misbehave for no apparent reason, they may be responding to a trauma trigger.

### ***Support for Adults***

10. Self-care for the adults who are caring for young children is very important. If available, it is important that adults use community resources, support others, and allow others to support them.



# Tuning In

## How to read an infant's cues and respond appropriately

It's so important to read a child's cues and respond in a nurturing and appropriate way. Responding to a child's cues with nurturance is not always easy to do, but it makes your attachment with them secure. Let's take a few minutes to look at how you're tuning into the children in your care.

It is especially important to consistently respond to a child in a nurturing way after a disaster in order to help them know their needs are important and will be met.

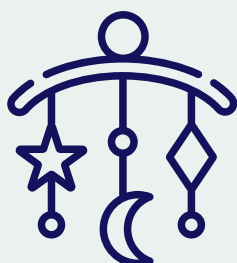
### **Here are some questions to help with tuning in:**



- What is this child(ren) feeling or experiencing right now?
- What cues are they telling me with this?
- Are they stressed out? If so, why?
- What do they need or want from me right now?
- What words could I use to describe what they are telling me?



- How can I use my voice and touch to communicate that I understand and care?
- What else could I do to comfort, help, or have fun with them?
- How could reviewing these questions regularly help the children in my care and make our attachment even stronger?



- What part of getting in tune with the child(ren) feels challenging?
- What are some messages you heard when you were a child or in the past that makes it hard to be in tune with the children?
- What are ways you are overriding messages you may have from your past that impact being in tune?

# Growing Together

The importance of communication with children after an emergency or disaster



Talking with children after a disaster can feel challenging. Childcare providers may be tempted to not talk about it, but this can cause distress and confusion for the children. Children will most likely hear others talking about the disaster and may make up incorrect details in their brain if they don't have the information.



It is important to talk with children about the disaster in an appropriate way. Be aware that you do not have to go into disturbing details. Here are some steps that may be helpful:

1. Provide a brief developmentally appropriate statement of what occurred.
2. Validate how your children may be feeling.

## Example:



There was a tornado that happened close by last night. You may be feeling scared and anxious. "I'm here to keep you safe by knowing about the weather and moving us to a safe space in our building if there is ever a storm."

## Other Helpful Communication Tips:

It is helpful for you to state how the child(ren) may be feeling, even if you don't understand it.

Say things like, "I'm here with you," "It's okay to feel sad or scared," "I know this is hard," instead of saying, "It's okay!" "You're fine!" Making statements like this can make the child feel misunderstood and alone.

You can share some things you do to help yourself feel safe and calm. "I like to read a book when I'm feeling worried. Would you like to read together?"



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# Infants and Disasters

Even before infants can understand what is going on around them, they are strongly impacted by what happens in their environments. Infants' bodies and brains react to stressful events, and when they experience chronic stress, the stress can impact their physical development as well as their ability to feel safe and relate to others.

A safe, stable, and supportive relationship with a caregiving adult helps infants during disaster and is a key factor contributing to infants' post disaster recovery.

## ***Following disaster, signs of stress for young children may be:***

- Frequently seeming sad
- Lacking interest in the environment or in other people
- Intense, prolonged crying
- Difficulty being soothed
- Rejecting touch
- Having muscular rigidity, restlessness, agitation, or intense startle response
- Feeding, sleeping, or elimination problems

## ***How to support infants and caregivers following disaster:***

- Notice what calms the infant.
- Surround the infant with the types of touch, movement, music, and lighting that makes them comfortable.
- Maintain routines and consistent care.
- When an infant is scared or upset or when scary things are happening, make sure the infant is with a familiar caregiver.
- Provide support to the infant's caregiver.



# Disaster Drills: Supporting Infants and Young Children

Disaster drills can be scary for infants and young children. They often include loud noises and involve changes in routine. It is important that caregivers prepare young children for any disaster drill as young children may have difficulty telling the difference between a drill and a real emergency. The following recommendations will help support infants and young children during or after disaster drills.





- Let caregivers know in advance when the drills are planned. Provide information about the sequence of activities to expect during the drills so they can help prepare the children.
- When possible let children know that when a drill happens, it does not mean there is an emergency. Explain, although emergencies are unlikely to happen, drills help them learn how to be safe.
- Children with developmental delays, disabilities, or histories of trauma may be more likely to become upset during the drill. Be sure that they are appropriately prepared.
- Watch children carefully during the drill as they may become upset. As always, put the children's current needs before the drill.
- Encourage children to use the coping skills they have learned previously during the drill.
- During the drill, praise children for following directions and thank them for their participation.
- Listen to and watch the children to help learn how they feel and what they understand about the situation.
- Talk to the children after the drill about what happened.
- Help children build empathy for others who might be frightened by normalizing children's natural fear reactions during the drill.



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# Supporting Infants and Young Children During Emergencies

During emergencies, it is natural for both adults and children to react with strong emotions. These emotions can help you act quickly and ensure your own safety as well as the safety of the children in your care. Infants and young children will watch your responses to understand the safety or danger of the situation and respond based on how they see you react. The following recommendations will help support infants and young children during an emergency.

Check in with yourself. Pause and take a deep breath (or use whatever strategy works for you) so that you can respond with regulated emotions and an “in-charge” presence.	
Use the emergency response plan you have developed as your guide.	
Give clear directions that the children will be able to follow.	
Your tone of voice should convey the seriousness of the situation while also conveying care and concern.	
Reassure infants/young children that what you are doing and what they need to do will keep them safe.	
If it is safe, sing songs, tell stories, and provide physical comfort.	
Listen and watch the child(ren) to learn what they understand about the situation.	
Use simple and developmentally appropriate language to provide basic but accurate information about what is happening and what you are doing.	



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# Supporting Caregivers Following Disasters

As part of the childcare community, you provide services not only to children but also to children's families. Following disasters, you are likely to interact with caregivers who are experiencing distress and who will seek support and resources from you. Your positive interactions with caregivers will help support caregivers' positive interactions with their children.

## ***Tips on supporting caregivers following disasters:***

- Listen to caregivers' concerns.
- Recognize that caregivers may feel powerless to keep their children safe.
- Help caregivers understand the power of their relationships with their children and how important those relationships are in children's recovery.
- Help caregivers recognize the importance of their well-being to be able to provide the care that their child needs.
- Focus on and point out caregivers' successes.
- Prepare caregivers by normalizing common trauma reactions in children.
- Offer information about how caregivers can help children after a disaster.
- Help caregivers find ways to talk to their children about the disaster. Discuss the ways you are talking about it in the childcare setting and share any handouts or books you are using with the child.
- Be familiar with community resources and have an updated list of resources including food pantries, mental health referrals, social support, financial assistance, etc.
- Be aware of misdirected anger. When feeling helpless or scared, caregivers may blame you or yell at you. Know that this is not your fault.



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