



STILL AT RISK: CHILDREN ONE YEAR AFTER HURRICANE HARVEY

children
atRisk

HHCRC
HURRICANE
HARVEY
CHILDREN'S
RECOVERY
COLLABORATIVE


Save the
Children.

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Greetings,

As Mayor of Houston, I welcome the readers of *Still at Risk: Children One Year After Hurricane Harvey*. Not only did Harvey affect Houston's infrastructure, it also disrupted the well-being and lives of children and families. This report provides insight into the aftermath of Harvey as well as provides recommendations that will aid in Houston and the Gulf Coast's continued recovery.

Harvey was damaging to many neighborhoods, to industries and livelihoods alike. It affected every aspect of child and family well-being, including food access, childcare, education, health, and mental health. We envision that the information in this report will aid in the current and future recovery of Houston children. We have accomplished much since Harvey's August landfall, but the work is not yet done. I look forward to seeing our community continue to innovatively recover and become stronger.

Houston is not a city that stands alone; it is connected to the great state of Texas, the United States of America, and our world. Today, the collaboration of community and national organizations through the creation of this report shows a commitment to Houston's recovery. I find great joy in supporting these efforts and organizations, and I look forward to creating a stronger Houston *together*.

Houston strong,

A handwritten signature in black ink, appearing to read "Sylvester Turner".

Sylvester Turner
Mayor of Houston

Council Members: Brenda Stardig
Greg Travis
David W. Robinson
Controller: Chris Brown

Jerry Davis
Karla Cisneros
Michael Kubosh

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Jack Christie

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Martha Castex-Tatum

Steve Le
Mike Knox

HURRICANE HARVEY

By the Numbers*

\$125 billion
in damage and destruction

Nearly **3 million kids**
living in disaster-declared counties

1.4 million kids
missed out on at least one week of school

hundreds of thousands
of homes damaged

650+
child care programs
reported damage or were destroyed

Nearly **1 in 2** Texas legislators
represent a community impacted by Hurricane Harvey

* Eric S. Blake and David A. Zelinsky, *NATIONAL HURRICANE CENTER TROPICAL CYCLONE REPORT HURRICANE HARVEY*, https://www.nhc.noaa.gov/data/tcr/AL092017_Harvey.pdf (May 9, 2018).; Thomson Reuters Checkpoint, *Hurricane Harvey Federal Tax Considerations Associated With Disasters*, <https://tax.thomsonreuters.com/wp-content/pdf/checkpoint/Hurricane-Harvey-SR.pdf> (Sep. 20, 2017).; CHILDREN AT RISK, *Hurricane Harvey Keeps 1.4 million Students Out of Public Schools for at Least a Week*, <http://childrenatrisk.org/hurricane-harvey-keeps-1-4-million-students-out-of-public-schools-for-at-least-a-week/> (Aug. 31, 2017).; Collaborative for Children Rapid Needs Assessment results; David McClendon, *Who represents the 2.9 million Texas children affected by Hurricane Harvey?*, CHILDREN AT RISK, <https://childrenatrisk.org/who-represents-the-2-9-million-texas-children-affected-by-hurricane-harvey/> (Sep. 7, 2018).

Introduction

HARVEY HIT HARD

Hurricane Harvey was the most powerful storm to hit Texas in 50 years. Nearly 3 million children were affected by the catastrophic storm, which displaced more than 1 million people and damaged hundreds of thousands of homes in a path of destruction that stretched 300 miles.¹

Harvey was a hard-hitting storm and impacted the most vulnerable, our children, the hardest. The hurricane disrupted children from the get-go, making it impossible to start the 2017–18 school year on time. At least 1.4 million children – nearly 60 percent of whom are from low-income families – across 117 school districts in the Gulf Coast region missed at least one week of school due to Harvey-related closures.² All schools in the Houston Independent School District were closed for two full weeks, and many children were out of school or their child care programs for significantly longer periods of time. Families were displaced for weeks on end, some never to return, and homes and belongings were lost.

Hurricane Harvey is on record as the second costliest tropical cyclone, behind Hurricane Katrina, to ever impact the United States, with an estimated \$125 billion in damage.³ What's more, for many Texas children, feelings of safety, innocence and a desire to play – the essence of what it means to be a child – were lost because of Harvey, too.

EXAMINING HARVEY'S IMPACT ON CHILDREN

The Hurricane Harvey Children's Recovery Collaborative (HHCRC), led by CHILDREN AT RISK, represents more than 40 child- and family-serving agencies from across the nonprofit and public sectors who came together shortly after Harvey's landfall, working together to ensure efficient and effective recovery for all Texas children and families.

One year after Harvey, HHCRC, led by CHILDREN AT RISK and Save the Children, is releasing this report that examines the challenges faced by many sectors following the storm and offers specific recommendations to better help children and families in the current phase of recovery as well as to protect children in the lead up to and during the next disaster to hit America.

Hurricane Harvey revealed gaps for children in emergencies, but also revealed significant resilience across Texas – a community working together in incredible ways to fill gaps, serve children, and meet the needs of the most impacted children and families – and an outpouring of support from across America. In light of the positives, there's still a long way to go for children facing disaster and emergency in the United States.

CHILDREN'S UNIQUE NEEDS

Children have unique needs that make them the most vulnerable in a disaster. Our youngest children, infants and toddlers may require special food and supplies. They may have trouble verbalizing who they are, their parents' names, or where they live, which can hinder family reunification if separated by disaster. In addition, children have not fully developed coping mechanisms and techniques to deal with trauma, and rely primarily on the cues and support of their caregivers to cope.⁴

Disaster is scary for children and incredibly stressful for parents – connecting with insurance agents and adjusters and the government for assistance. Parents might not have the ability to fully support their child's feelings in the earliest hours of disaster, which further impacts children. Children need the routine of child care or school to help them feel safe and nurture their development, but when these educational services are inaccessible, learning and normalcy is lost. Without the right supports, a disaster can negatively affect children for the rest of their lives.⁵

Children rely on us, but Hurricane Harvey again proves that we are under prepared to best protect them.

EVACUATION SHELTERS

Protecting Children in the Immediate Aftermath of Harvey

🌀 Three-year-old Allen had fallen asleep on the drive to a Houston mega-shelter in the wake of Hurricane Harvey. Now he was awake in the middle of the night, finding it difficult to sleep on the stiff cot. Waking up in an unfamiliar setting, Allen did not realize that his mother was curled up on the cot across from his. Soon, he began to wander the maze of cots to find her and panicked in a dark shelter hosting more than 1,000 residents.

The first days after a disaster can be especially difficult for children, particularly if they've seen their home flooded, had to evacuate to an emergency shelter, lost a comfort item or pet, or been separated from a parent or caregiver. Nearly 3 million children were affected by Hurricane Harvey, and more than 1 million people across Texas's Gulf Coast region were displaced.⁶ An estimated 34,000 people fled to shelters – an estimated 8,500 were children.⁷ Many of these families stayed for days or weeks; some even stayed for months as they worked to rebuild their lives.

In the immediate aftermath of Harvey's landfall, Save the Children worked with national and state partners at the

Federal Emergency Management Agency (FEMA), U.S. Department of Health and Human Services (HHS) and the American Red Cross to assess and meet the immediate needs of children and families. It was clear from the beginning that more rigorous preparedness measures were needed at state and local levels to facilitate quicker and safer delivery of services to children. When Harvey struck, many partners including those in state and local government and shelter management and the nonprofit community collaborated in good will to fill gaps and aid children's recovery.

Emergency shelters can be scary places for young children, surrounded by strangers in an unfamiliar environment, with few if any activities to keep them busy while their parents cope with the stress of the disaster's impact. What is scarier is that during Hurricane Harvey, shelters did not immediately have basic child and infant supplies on-hand nor provide for basic child protection. For example, one shelter had nearly 25 infants and toddlers in cardboard boxes because of insufficient access to cribs and infant toddler supplies and supports on site.⁸

Another gap, and unfortunately all too common across the United States, is insufficient training or knowledge among shelter managers on child protection and family reunification. Many disaster volunteers are not screened for child safeguarding prior to directly serving children. This is even more concerning considering families seeking longer stays in public shelters traditionally face many other risk factors for trauma such as sexual abuse and poverty. These gaps make Allen's story, the lost toddler, even more unsettling. Thankfully Allen was found by a shelter worker who followed protocol and helped him find his mom, but it could have ended very differently. Additionally, and of critical importance, shelters in Texas, as is the case in many other states, do not routinely count children upon shelter intake, making it more difficult to ensure child safety and coordinate a response that adequately meets the needs of children and families.⁹



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

IN THE EARLIEST DAYS

In the immediate response phase, Save the Children, Church of the Brethren's Child Disaster Services, and local organizations including the YMCA of Greater Houston, helped provide activities and play areas for children who were now calling Texas shelters home. Save the Children provided its signature Child-Friendly Spaces program, which provides safe and protective play areas for children in shelters so kids can be kids. Child-Friendly Spaces enable children to begin to cope and recover through structured play while giving their parents and caregivers the opportunity to concentrate on addressing their family's immediate and long-term needs.¹⁰ Through this program, Save the Children served 313 children at seven mass care sites in Houston and San Antonio for days, weeks, and even months, until the final evacuation shelter in Houston closed in November. Child-Friendly Spaces are run by background-checked volunteers trained in child safeguarding. This program also screened and referred children who were at high risk and needed additional support services.

In coordination with local partners, Save the Children distributed tens of thousands of infant, toddler and child-centric materials at shelters and distribution points including portable cribs, hygiene kits, strollers, diapers, infant wash-basins and more. After shelters closed, distributions continued as families continued to rebuild while trying to make ends meet. Save the Children conducted 109 distribution events with local partners and in communities around Houston, Beaumont and Rockport. These distributions directly benefited 18,193 children and 5,652 adults.¹¹

EVACUATION SHELTER RECOMMENDATIONS

While government and nonprofit partners were able to band together and meet the needs of many children, we need to do more to ensure that when the next disaster strikes we can be better positioned to meet the needs of children at the onset of an emergency. Sheltering responsibilities are frequently shared among government agencies and nonprofit organizations. When coordinated and operating efficiently, this can maximize community resources. However, when coordination is lacking, it can result in gaps in services for the most vulnerable – our children.



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN



RECOMMENDATIONS

Implement Best Practices in Protecting Children in Mass Care Settings.

Ensure children's needs are considered in mass care planning. Count children at shelter in-take. Ensure volunteers are screened and trained in child safeguarding. Create a child reunification plan with an identified lead agency. Pre-stock child-specific supplies and have them on-hand. Have an established referral system for pediatric services including medical and mental health referrals in place.

Include Children in Local Emergency Plans.

Ensure child-specific guidance is included in local emergency plans by creating a Children's Annex that outlines key procedures in meeting children's needs before, during and after disasters. This should include guidance for mass care, child care and education restoration and recovery efforts.

Create Shelter Protocols that Focus on Children.

Implement clear and consistent child safety and protection protocols when establishing and operating any shelter that receives support from local, state or federal government agencies.



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

HOUSING

Bringing Back the Comforts of Home

Harvey destroyed homes. Families scrambled to salvage damaged roofs and flooded houses and children faced new and unfamiliar dangers such as downed power lines, increased risk of health problems due to exposure to mold and other contaminants, as well as mental health issues stemming from the trauma of losing the comfort and stability that a home provides.¹² With hundreds of schools and child care centers impacted by Harvey, parents had to juggle keeping their children safe and healthy while navigating the maze of post-disaster housing resources to protect themselves from displacement, fraud, foreclosure and financial adversity – unnecessary challenges that made it harder and slower for children and families to return to their safe and normal lives, prolonging and exacerbating trauma experienced by children.

In Houston, 60 percent of occupied homes are family households with children.¹³ Prior to Harvey, nearly 190,000 households in Houston were experiencing severe housing problems, either spending more than half their income on

housing or living in substandard housing conditions.¹⁴ Harvey further reduced adequate affordable housing including when many apartment complexes serving low- and very low-income residents flooded. Of the homes affected by Harvey, it is estimated that 45 percent are owned by households with an annual income less than \$50,000.¹⁵

In the storm's aftermath, the scramble to find, understand, and qualify for assistance and resources prevented families from stabilizing their housing situations for prolonged periods of time. Many low-income homeowners lacked clear deeds, making them ineligible for FEMA grants and other repair services.¹⁶ As a result, many homes experienced further damage because of delayed damage mitigation and repairs. Furthermore, many low-income homeowners were denied insurance claims because of alleged deferred maintenance prior to the storm.¹⁷ As a result of this vicious cycle, many families remain displaced, some in temporary housing, others in unsafe dwellings, and more who left the area all together.

IN THE EARLIEST DAYS

With strong support from charitable and philanthropic sources such as the Hurricane Harvey Relief Fund/Greater Houston Community Foundation and the J.J. Watt Foundation, nonprofit organizations were able to respond with immediate efforts to muck-and-gut and repair homes across greater Houston. Simultaneously, numerous case management organizations including BakerRipley, Catholic Charities, Jewish Family Services responded to families' immediate housing needs and identified temporary shelter using FEMA and philanthropic funds as well as in-kind donations. For example, New Hope Housing was able to move the homeless population out of emergency shelters at the George R. Brown Convention Center and NRG Stadium and into temporary housing because of donated motel rooms.

Avenue, a Houston-based nonprofit focused on building affordable homes and strengthening communities, immediately implemented disaster recovery services including home repairs, foreclosure prevention counseling and legal assistance.

Avenue's HUD-certified homebuyer education counselors served as "disaster recovery counselors," helping individuals and families navigate the unfamiliar terrain of applying for FEMA aid, unemployment benefits, advising on tenants' rights and being the critical connection to community resources intended to protect residents from displacement, fraud, foreclosure and financial adversity. In addition, organizations including Avenue, Houston LISC and Habitat for Humanity worked in partnership to and created a process to refer individuals who were in need of help.

HOUSING SECTOR RECOMMENDATIONS

Since Harvey, rents have increased and home purchases have slowed. Harvey exacerbated an already growing affordable housing problem in Houston.¹⁸ Rebuilding Houston and the surrounding communities will take years. Resources and services must focus on long-term solutions to housing security for families and children.



RECOMMENDATIONS

Fund Resilient Housing. Children need stability, and ensuring that housing repair and replacement programs enhance the resiliency of our housing stock will help families to avoid the trauma of displacement in case of future disasters. Funds should be prioritized to repair damaged homes and apartments, and to construct replacement family housing – including rentable properties – using resilient techniques such as elevating homes and utilizing wind-resistant roof shingles. Additionally, low-income homeowners should be assisted with home maintenance that will prevent damage in a future storm ensuring that families and children can stay in their homes and communities.

Offer More Pre- and Post-Disaster Relief Education. Harvey pointed out a critical need for increased hurricane preparedness information and education that addresses home ownership. Better education about flood insurance is key. Equally important is education about the importance of obtaining a clear title to your home, preparing your home to weather a storm, and home maintenance. Children and families undergo a great deal of stress navigating complex processes in the midst of an already stressful situation and having access to easily understandable information before and following a disaster can ease the burden.

Increase Access to Assistance and Serve the Most Vulnerable First. In the immediate aftermath of Harvey, private and philanthropically funded programs and nonprofits focused on serving vulnerable families knowing government resources would not be available quickly. However, government resources should be made more accessible to the families that need them the most, including those with children who have disabilities or chronic health, mental health, or educational needs. In addition, the process to qualify for government assistance should be easier to understand so nonprofits can focus less on being navigators and more on filling other critical gaps, like building housing, healthcare and restoring education programs.

FOOD

Nourishing Bodies and Minds During Crisis

☞ Hundreds of students' lives were disrupted when their beloved Varnett School's Northeast campus was devastated by floodwaters in the aftermath of Hurricane Harvey. The public charter school sustained significant damage and its entire population was displaced – students were relocated to the school's East campus for six months while their school was rebuilt. The surrounding community was devastated too, including the local grocery store. Access to food was instantly disrupted when Hurricane Harvey hit. Recognizing this community was in dire need of healthy food and other essential supplies, the Houston Food Bank positioned one of its disaster mobile food units at a safe location on Varnett's East campus to serve both schools' populations, helping to provide the nourishment and access families sought after the storm.

Limited access to healthy food sources was not isolated to one school, one neighborhood, or one community. It is an issue thousands of Texans faced following Hurricane Harvey. Even before the catastrophic storm, approximately six out of 10 students qualified for free and reduced-price meals.¹⁹ With prolonged school closures children lost access to healthy food, and children who were vulnerable before Harvey became even more at-risk for the limited resources available.

The U.S. Department of Agriculture (USDA) did take swift action to foster healthy eating programs across affected communities. For example, the USDA approved an eligibility waiver for all districts in disaster-declared counties allowing all students to eat free school meals and also allowed schools to provide meals to community members at no charge. By expanding eligibility through waivers, nearly 5 million additional meals were served in September and October 2017 in Harris County alone and Houston



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

Independent School District had the ability to serve more than 2 million additional meals to children in need.²⁰

Another emergency program that was authorized by USDA was the Disaster Supplemental Nutrition Assistance Program, or D-SNAP to Harvey-impacted households. D-SNAP allowed for individuals not enrolled or eligible for traditional SNAP benefits to receive food support if they met certain criteria. Across the gulf coast of Texas, more than 500,000 D-SNAP applications were approved, giving families funds to purchase groceries for one or two months for more than 1.6 million beneficiaries.²¹

In addition to the government's response to the impacts Harvey had on food access, the nonprofit community played a large role in the immediate recovery process, too. Soon after Hurricane Harvey, with an infusion of support from Feeding America and Feeding Texas, Houston Food Bank partner agencies opened to distribute food in affected areas. In addition, the Houston Food Bank established partnerships with 134 temporary agencies to expand access and augment distribution efforts.²² This collaborative approach enabled organizations to meet the needs of additional affected children and families.

IN THE EARLIEST DAYS

Many innovative and emergency programs were implemented across Harvey-affected communities to alleviate hunger and provide healthy and nourishing food to children and families. In the earliest days following the storm, the Houston Food Bank packed and distributed nearly 35,500 Disaster Backpacks.²³ These backpacks were filled with healthy foods and intended to alleviate immediate food needs caused by Harvey.

In addition, the Houston Food Bank deployed disaster mobile units, much like the one that became a staple on Varnett's East campus, to public and charter schools where transportation and other barriers made it difficult for families to pick up food from partner agencies. The disaster mobile units distributed food and other resources such as school supplies depending on each community's unique needs.

School closures created an unexpected need for child care so Houston-area organizations banded together to open daytime camp programs to serve children whose parents were back at work and continuing to rebuild following the storm. The Houston Food Bank provided breakfast, lunch, snacks and dinner to more than 9,500 children who participated in daytime camp activities.²⁴



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

FOOD SECTOR RECOMMENDATIONS

The Houston Food Bank and affiliated hunger-relief organizations across Texas continue to collaborate to serve children and families in need. But more needs to be done to ensure children get the healthy food and nourishment they need to grow up smart and strong.



RECOMMENDATIONS

Better Plan Before Disaster Strikes. Harvey proved that in disaster, organizations will align and collaborate to benefit children and families who need the most help. But having organizational agreements and standard operating procedures agreed to and in place before disaster strikes will enable hunger organizations to more effectively and efficiently distribute food. For example, coordinating backpack distribution points and staging products in advance of disaster would enable organizations to more quickly get food into the hands of individuals who need it most.

Encourage Collaboration to Increase Access to Federal Food Programs The USDA recognized the need for an emergency response and provided disaster waivers and accommodations following Harvey. To ensure aid programs available are highly utilized school districts, child care centers, and organizations must communicate these messages, assist one another and share best practices with new program applicants. When implemented widely across communities, food aid programs can support all children in disaster-impacted areas and ensure they have access to nutritious food.



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

CHILD CARE

Growing Our Nation's Youngest Minds

🌀 A few days after Hurricane Harvey struck the city of Victoria, Joni Council, Director of Kidversity Child Care, and her husband ventured out to check on her beloved center. They arrived to find Harvey's powerful winds had launched an air conditioning system from across the street directly into Joni's center. Water was spewing from the ceiling and the majority of classrooms were destroyed. At first, Joni and her family worked tirelessly to try and get her program up and running, but at times, it felt hopeless. Not only was the building damaged, but Kidversity lost many of the materials, supplies, books, toys, and education games vital to running a child care center. Over the years, Joni's program had become a pillar of the community. "We couldn't not re-open," Joni shared. "Some parents were threatened with being fired if they didn't go back to work, and I really missed the kids."

Joni's story is not one-of-a-kind: there are approximately 3,000 licensed child care programs in Houston and surrounding Harris County, plus another 100 programs in the Gold Triangle and Coastal Bend areas.²⁵ Every early education program was impacted by Harvey in some way and at the time of this report, more than 670 child care programs were significantly damaged or destroyed.²⁶ Some programs were closed for weeks and others have yet to reopen. For many care providers, there is uncertainty if their businesses will survive as debts continue to rise, insurance coverage is less than expected and families continue to relocate.

IN THE EARLIEST DAYS

Immediately after Harvey's landfall and over the past 12 months, Collaborative for Children in partnership with Save the Children, has been continuously collecting information about the recovery of child care centers in order to respond to the community's needs. As many as 80 percent of respondents reported being unsure of or having no flood insurance. Half closed, at least temporarily, in the immediate aftermath of the storm. To date, initial total damage estimates from child care providers assessed exceeds \$10 million.²⁷

Programs have reported concerns about the return of their staff and families with children enrolled in their programs as well as the need for financial assistance to replace ruined items and repair structural damage. Additionally, 66 percent of respondents who reported damage serve children that receive child care subsidies, meaning they serve largely low-income families who need child care in order to work or pursue higher education.²⁸

Recovering from a major disaster is hard for any business, but for private, for-profit child care programs, the majority of child care programs in the United States, recovery can be even more difficult. These programs are not eligible for FEMA disaster recovery assistance made available through the Stafford Act. To help fill this critical gap and in efforts to help restore access to child care programs as quickly as possible, Collaborative for Children and Save the Children launched a child care recovery grant program in October 2017 to help providers get the aid they need to reopen.²⁹ Through this initiative, child care programs have been able to replenish classroom materials, supplies and furniture; support facility and equipment repairs; and cover costs incurred as part of their emergency response.



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

CHILD CARE SECTOR RECOMMENDATIONS

While progress is being made, much more can be done at the local, state and national levels to ensure that the child care community can be better equipped to respond and recover from disasters.



RECOMMENDATIONS

Invest and Grow the Capacity of Child Care.

States should boost their assistance to local child care providers in the development and implementation of emergency plans. Including a child care and school representative in federal planning grants is another way to grow capacity. By investing in referral agencies, the result will be disaster resilience hubs that could help child care programs prepare or, respond to and recover from disasters. This can be through identifying a staff point person, allocating funds, and making more disaster trainings and sharing critical resources with care providers.

Allocate Non-Emergency Funding Streams to Recovery.

When disaster strikes, consider "non-emergency" state funding streams and recovery monies that could be allocated to support child care recovery like the Child Care Development Block Grant and Social Services Block Grant. These can help restore and sustain child care programs so critical to community recovery.

Amend the Stafford Act to Categorize Child Care As A Critical Service.

Congress should amend the Stafford Act to include private, for-profit child care as a critical service. This would place it in the same category as schools, which would alleviate the requirement for child care facilities to apply for Small Business Administration loans. By deeming child care as a critical service, providers would be able to access federal disaster recovery dollars. After Hurricane Harvey, the vast majority of damaged and destroyed child care programs have received little to no federal recovery funding.

EDUCATION

Return to Learning

☞ Hurricane Harvey destroyed school buildings and took away valuable learning hours, but for some, it was the displacement from school that may have taken the biggest toll. Having the opportunity to grow educational roots in the same school environment, with familiar teachers and fellow classmates helping to guide and cement students' experiences along the way, was lost for thousands of students across Texas.

Faced with a school building overtaken by floodwaters, Houston elementary school principal, Julie Dickinson knew her school's students needed to stay together in the aftermath of the catastrophic storm. Her efforts and dedication paid off: 99 percent of her student population returned for the first day of school a month after school was originally supposed to start in a new building. "Parents knew the kids needed the normalcy – you really can't provide better therapy than that," Principal Dickinson said. "They had each other."

As Principal Dickinson's school illustrates, the education sector was deeply impacted by Harvey. Teachers, staff and students displaced; educational materials, technology systems and playgrounds damaged; and buildings shuttered. The sector focused on assessments to understand the most pressing needs of students, teachers and staff as well as the damaged sustained school by school.



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

Individual school districts utilized various methods of communication such as phone trees to connect with staff and families to understand impact and need. Houston Mayor's Office of Education also worked in partnership with school districts to ensure children were accounted for.³⁰ As soon as it was safe, damage assessment teams were dispersed across local school districts to inspect, document and report damage incurred for every building.

Using knowledge gained about building damage and availability of staff, school districts made plans for when and how to reopen. The long delay in reopening meant children lost valuable learning time and made it difficult for parents to return to work and local economies to recover.

With mass displacement of students from their homes, some school districts allowed their students to continue attending the schools they were originally attending and zoned to, even if there were displaced and living at a different address. For example, Spring Branch ISD provided transportation to help get their widely dispersed students to their original schools.³¹ Districts also worked on reorienting students to the new school year or new campuses and training teachers, staff, counselors and social workers, understanding that the

trauma from Harvey would have a significant impact on mental health and learning.

EDUCATION SECTOR RECOMMENDATIONS

Despite the many challenges that are facing the education system, post Hurricane Harvey schools continue to do all they can to provide safe and supportive environments for their students.



RECOMMENDATIONS

Create Protocols for Securing Critical Information, Leading Needs Assessments.

On intake forms at shelters, include expanded areas for families to include critical information about their children's school district, schools and grade levels. School districts should liaise with shelter managers to locate all families and begin to understand needs of their affected families and students.

Incorporate Disaster Planning Into School Operating Procedures.

Ensure Safe Spaces for School-Aged Children are Available in Disaster-Affected Areas. School districts should endeavor to reopen up schools as soon as possible to return students to a daily routine. In the event this is not possible, districts should develop formalized partnerships with local nonprofits and the faith-based community to allow school-aged children to return to school. Providing a return to routine and normalcy for students will allow them to begin the healing process, help mitigate learning gaps and give families the ability to handle disaster-related issues and return to work.



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

HEALTH

Serving the Sick During Disaster

According to the 2015 National Assessment of Pediatric Readiness, less than half of hospitals have emergency plans that specifically address the care of children. Plus, the American Academy of Pediatrics warns current pediatric capacity among the nation's health care providers and hospitals may be insufficient in the case of a mass emergency that seriously injures or sickens large numbers of children.³²

The immediate impact of Hurricane Harvey on the region's health care and public health sector was unprecedented. More than 40 healthcare facilities – including hospitals, nursing homes, assisted living facilities and others – were evacuated.³³ Texas Children's Hospital, the largest pediatric provider in the region, closed multiple pediatric offices and urgent care clinics, in some cases for several months, due to damage from flooding. This impacted hundreds of providers and thousands of patients who were in need of resources and care. With the closures, many families likely had limited resources to seek care, effectively forgoing medical attention.

Following emergency management protocols, Harris County Public Health staff members were activated as first responders and positioned at three main locations: the emergency operations center, NRG Stadium shelter, or their usual work location. Their roles included monitoring health of neighbors staying at the large shelter, staffing pop-up clinics and facilitating health coordination. Although the majority of public health infrastructure remained fully operational during and following the storm, the Bear Creek Women, Infant and Children's (WIC) site was severely damaged and had to close. Operations were relocated to a nearby church until repairs were completed to continue to serve this vulnerable population.

Before Harvey made landfall, most of the region's hospitals activated their "ride-out teams," which included personnel that would be present and on-site for the entirety of the storm, ensuring care could be provided.³⁴



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

IN THE EARLIEST DAYS

During the hurricane, the Catastrophic Medical Operations Center was activated within the Houston Emergency Center and served as the central hub to coordinate critical medical movements. In partnership with the region's hospitals, the Operations Center coordinated with command centers at Texas Children's and Memorial Hermann hospitals to transport 33 pediatric dialysis patients from their homes to Texas Medical Center for treatment.³⁵ National Guard helicopters landed on Memorial Hermann's helipad and transferred patients to Texas Children's for treatment. In addition, National Guard helicopters airlifted critical pharmaceuticals and medical supplies to centers that were treating children during and immediately following the storm.

In the intermediate wake of Harvey, the region's health sector, like many others across the region, created internal support systems to help employees who were displaced from their homes, lost vehicles, had children who were displaced from school and more. Many healthcare institutions shifted staff to undamaged or alternate locations, which caused disruptions in business operations. In addition, the region's historically high uninsured rate was intensified by a population with potentially worsened health conditions because of the storm.³⁶ All these factors suggest the region's health sector was likely set back financially in the transitional wake of Harvey in excess of \$460 million according to the Texas Hospital Association.³⁷

HEALTH SECTOR RECOMMENDATIONS

Following Harvey, the Texas Hospital Association published a report outlining preparation strategies and priorities for future disaster responses for hospital systems. The partnership between hospital and public health actors is critical to improving emergency preparedness and response in the future.



RECOMMENDATIONS

Require Data Be Collected About Storm Impact by Health Centers.

In order to understand the full impact Harvey had and will continue to have on children and families, all health centers should collect information on how patients were affected by Harvey. In subsequent months, this data can provide valuable insight about disaster related disease, resource allocation and the overall recovery of children and families.

Prioritize the Recovery of Pediatric Health in Disaster-Affected Areas.

With closed clinic following Harvey, children's access to primary care and needed treatment was limited. Access to care through reopening clinics with high percentages of pediatric patients should be prioritized. Additionally, health providers should provide alternatives opportunities for primary care access through expansion of school-clinic partnerships.

Expand Post-Disaster Incentive Payments from Medicare and Medicaid and the Children's Health Insurance Program.

Health insurance plans can play a larger role in public health emergencies especially following a disaster such as Hurricane Harvey. Policies should be structured so that children and families can use healthcare services during and after potentially disruptive disasters.



PHOTO CREDIT: ELLERY LAMM, SAVE THE CHILDREN

MENTAL HEALTH

Focusing on Social and Emotional Well-Being

☞ The range of emotions and responses children and families experienced after Hurricane Harvey run the gamut: shock, anger, disappointment, fear, depression, empathy, strength, compassion and resilience. They have been affected and reacted in many different ways. For 12-year-old Natasha, the storm was the last straw. Hearing impaired and faced with many challenges in her young life, the aftermath of the storm seemed too much for her to bear. Natasha's house was not permanently damaged, but displaced family members were displaced and came to live with her. The chaos the storm brought, along with the disruption of her home life – her space, her room – caused her to shut down. For months, Natasha barely communicated at home, grew angry and became prone to outbursts both emotional and physical.

She began participating in a weekly emotional support program called Journey of Hope, developed by Save the Children after Hurricane Katrina. The program helps children and caregivers cope with trauma, reduce stress and become more resilient. Natasha became active in the program's group discussions and took naturally to one of the program's suggested outlets for expression – writing down her feelings and experiences in a journal. Now, her journal is never far from her reach and neither is her opportunity to cope in a healthy way. But not every child who has been emotionally scarred by Hurricane Harvey, like Natasha, has had that chance to start to heal.

A disaster has the ability to steal the very essence of what it means to be a child: innocence, the desire to play and feeling safe. Effects of a disaster can last a lifetime and it is critical to provide safe, stable and supportive environments where

they can express themselves and receive the help they need. Research from Children's Health Fund has shown children affected by large scale disasters are five times as likely to suffer long-term emotional issues than those not affected.³⁸

IN THE EARLIEST DAYS

For children both directly and indirectly impacted, Harvey brought high levels of emotional distress and fearfulness as they experienced instability in every aspect of their lives. Those escaping the floodwaters and living in shelters encountered significant mental health challenges in their attempt to cope with inordinate stress and uncertainty regarding the future.

Numerous mental health emergency responses were deployed during and immediately after Hurricane Harvey. To meet the emotional needs of children who experienced displacement, Save the Children established Child-Friendly Spaces in shelters to provide safe and protective play areas where children could begin to cope. Major area health systems, such as UT Health and Baylor, set up informal clinics at shelters to provide Psychological First Aid.

Planning and coordination efforts began across the Greater Houston Area to ensure that needed resources would be available and coordinated in the weeks and months to come. The Center for School Behavioral Health at Mental Health America of Greater Houston surveyed 26 area public and charter school districts to determine the immediate and short-term mental health needs and also convened a collaborative meeting for more than 100 school district and child-serving organizations to provide training in self-care and how to identify and support traumatized students.³⁹

The City of Houston Mayor's Office of Education began planning and coordinating efforts to assist more than 180 historically underserved schools that were significantly affected by Harvey within days of the storm's end. Through these efforts, evidence-based trauma recovery resources for children experiencing natural disaster were shared through social media. UNICEF representatives came to Houston and provided grants to organizations including The Center for School Behavioral Health at Mental Health America of Greater Houston, The Trauma and Grief Center at Texas Children's Hospital, First3Years and the Baker Institute at Rice University.⁴⁰ This funding helped provide trauma and mindfulness training for educators and parents as well as social and emotional development education for students who struggled to regain emotional well-being after the storm.

MENTAL HEALTH SECTOR RECOMMENDATIONS

While the Greater Houston Area made noteworthy strides in providing care for the mental well-being of children following Hurricane Harvey, the community must remain committed to ensuring accessible and sustained mental health services for children and their families. Children who receive such services can build mental health resiliency, whereas those whose needs are not met too often develop mental health problems such as depression and anxiety or engage in high-risk and unhealthy behaviors in attempts to self-medicate their pain, posing a threat not only to their current but future well-being.



RECOMMENDATIONS

Establish Mental Health Disaster Response Tracking System. A data collection and sharing platform to track all services each child, family and school is receiving is needed to ensure timely and unduplicated support. The platform should be easily accessible to providers and maintain a continuously updated site for parents and educators to access information and request assistance.

Adequately Fund Mental & Behavioral Health Supports for Children. Both recovery and building resiliency for future disasters must address the mental and behavioral needs of children. Within schools, educators should have access to trainings on signs and symptoms of students experiencing trauma and trauma-informed classroom strategies. Support staff specifically trained in mental health, such as counselors or social workers, should be readily available at each school.

Establish a Mental Health Grant Fund. Congress should establish a single, flexible grant funding mechanism to specifically support the delivery of mental health treatment services that address the full spectrum of behavioral health needs of children including treatment of disaster-related adjustment difficulties, psychiatric disorders and substance abuse.



PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

One Year On

A year later, the effects of Harvey linger in every sector. Families continue to relocate, repair bills continue to pile up and programs operate off thin profit margins with an uncertainty of potential closure.

Harvey challenged many institutions and organizations to consider the way of doing things and cemented the need for more preparedness and advance planning related to disaster response. Innovative ideas to address food insecurity, for example, are already underway with the Houston Food Bank launching School Markets. A pilot program in 30 middle and high schools, students lead School Market pantries and distribute food provided by the food bank.

Rebuilding Houston and the surrounding gulf coast communities will take years. Resources and services are rerouting to plan long-term solutions to housing security issues. Avenue's disaster recovery projects and programs will assist more than 1,450 families in home repair or finding replacement housing. An additional 5,000 families will benefit from increased access to homeowner education, health care and early childhood education services at a new community center.⁴¹

To fill critical gaps in early childhood education, Collaborative for Children and Save the Children will continue to offer the child care recovery grant program serving the most vulnerable communities. Within the program, there are

built-in critical quality pieces that help care providers recover and build back better as well as become better prepared for the next disaster. Every subgrantee receives an individual recovery plan, information on Texas Rising Star's quality improvement program and access to additional training and capacity building. This will help ensure that, across Texas, more children have access to quality learning environments and be in more prepared settings in the future.

For older children, schools continue to serve as the primary point of services for students through increased Communities In Schools support staff and an increase in wrap-around services to meet both the recovery needs and other basics needs of students and their families.

Despite being one-year post Harvey, the mental health impacts and needs of children do not end. Oftentimes the manifestations of trauma do not appear until eight to 10 months following the traumatic occurrence, peak at 18 months or two years after, and may last for years.⁴² Further, several challenges remain in the ability to focus on children's mental health recovery including attention being diverted away from important initiatives because of other basic needs or state-mandated tests. Community partners encounter roadblocks to launch programs to affected schools and consequently, trauma training and therapeutic services are not reaching all students and faculty in affected areas.



RECOMMENDATIONS

FIVE WAYS TO BETTER PROTECT CHILDREN



ENSURE CHILDREN HAVE A VOICE AT THE EMERGENCY PLANNING TABLE.

Too often children's needs are not represented in state and local emergency planning committees. States should have a Children's Needs Coordinator, such as a representative from the early education or public education sector, as part of their emergency response team, who can take a holistic view in connecting the many multi-disciplinary players responsible for children before, during and after disasters.



PRIORITIZE CHILDREN IN EMERGENCY FUNDING STREAMS. States need to dedicate more funding to emergency preparedness, response and recovery, with a specific focus on children. The biggest obstacle to supporting children during disaster responses is inadequate funding. Robust funding and strong accountability structures are required to meet the needs of children. While the United States invests billions of dollars to support emergency preparedness and response, children's needs are overlooked. In fact, of every \$10 in federal emergency preparedness grants, less than one cent goes toward activities targeting children's safety.⁴³



FOCUS ON EARLY CHILDHOOD EDUCATION RESTORATION. Getting children back to learning environments through child care and school is critical in helping them return to a normal routine and cope with the impact of disaster. Simultaneously, it enables parents to get back to work and revitalizes the local economy. Currently, significant funding gaps exist in education recovery. Schools may be rebuilt, but classroom supplies and educational materials often are not covered. And currently, FEMA does not provide recovery assistance to private, for-profit child care programs – the majority of early education programs. Child care should be deemed a critical service by the Stafford Act, therefore enabling providers to access these critical recovery dollars.



TRAIN EDUCATORS ON TRAUMA INFORMED CARE. The best way to determine an individual's recovery needs is risk screening – especially for children – which enables a personalized plan of care. Trauma should be assessed through a holistic lens, and training of educators, school staff, and behavioral health professionals can help ensure that trauma-informed health treatment is available for all children needing therapeutic services. Educators should have access to trainings on signs and symptoms of trauma, as well as trauma-informed classroom strategies.



PREPARE FAMILIES. All disasters are local – and the first line of response is often your own family. Yet, less than half of U.S. families report having an emergency plan. Communities should consider how they can best educate families on home preparedness measures through local communication channels and programs that deliver life-saving information. This includes opportunities to educate children about preparedness and safety skills that they can continue to hone and practice as they grow. Research shows that preparing children before a disaster helps them better respond during the event and cope with the aftermath, because it builds a child's sense of understanding and control.

BELLWETHERS OF RESILIENCE

Research from the National Center for Disaster Preparedness at the Earth Institute at Columbia University shows that children can be considered bellwethers of resilience.⁴⁴ How children cope with and recovery from a disaster is a strong indicator of how the community will bounce back.⁴⁵ That's because when a community is prepared and well positioned to take care of both its children and the services that care and provide for children, it's ready and able to take care of itself. It takes a whole community working together – government, businesses, schools, community organizations – to ensure that when disaster strikes, children's needs will be met.

In terms of practice, we still have a long way to go. Save the Children's 2015 National Disaster Report Card showed that 79 percent of the recommendations made in 2010 by the National Commission on Children and Disasters – based on lessons learned from Hurricane Katrina – remain unfulfilled.⁴⁶ While progress continues, it is slow, and implementation at the state and local levels is scattered and disjointed because of a lack of awareness and insufficient resources and funding.

Hurricane Harvey is not an anomaly, as researchers predict disasters will become more frequent and even more severe in future years. Now is the time to act – in Houston, in Texas, and across America – to better protect our nation's children in disasters.

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PHOTO CREDIT: SUSAN WARNER FOR SAVE THE CHILDREN

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