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April 2, 2012

W. Craig Fugate

Administrator

Federal Emergency Management Agency (Room 832)

500 C Street, SW

Washington, D.C. 20472-3100

Dear Mr. Fugate:

On behalf of the American Academy of Pediatrics (AAP), a professional organization of 62,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults, I write to thank you for your commitment to the needs of children during disasters and offer comments on Presidential Policy Directive-8 (PPD-8) National Frameworks and the Federal Interagency Operational Plan.

During your time as FEMA Administrator, children have had a strong and compelling ally on disaster preparedness issues, and the Academy is grateful for the attention you have given to helping address the specific needs of children during emergencies. As you know, children represent approximately 25 percent of the nation's population and are uniquely vulnerable in the case of an emergency. Children require specific medical care including drugs, biologics, and medical equipment that is appropriate for their use as well as mental health needs that vary from adults and may change over time. Separation from parents and guardians and the possibility for exploitation of minors after a disaster are all-too-real and should be considerations in preparedness and response efforts. In other words, special attention must be paid to our nation's ability to meet children's needs before, during and after disasters.

In reviewing the Frameworks and the Federal Interagency Operational Plan, we are pleased to see that children's needs are addressed in several places. Specifically, family reunification, behavioral health, and the need for linguistically appropriate communication are all included in these documents. We strongly support their inclusion. However, children are often included with other populations such as seniors and those with disabilities. Children are one-quarter of our population, and documents such as the Frameworks should address children's needs directly, not as part of a "special," "vulnerable" or "at-risk" population that may also include many other important populations. For example, when stocking emergency supplies at a shelter, authorities must consider specific needs of children and families such as diapers, infant formula, and places for mothers to breastfeed. Also crucial to disaster preparedness, response and recovery for children is the role of pediatricians. The AAP and other child-serving organizations play a vital role in promoting preparedness among providers and families and in building community resiliency and recovery in the aftermath of a disaster.

Additionally, education should be included as a recovery support function in the National Disaster Recovery Framework Federal Interagency Operational Plan. We recommend that FEMA add a seventh recovery support function to the Plan that includes child care facilities and schools. The return to school as soon after a disaster as possible is crucial to the mental and behavioral recovery of children. These sites should include educators and counselors who are equipped to help children deal with feelings of fear and grief. Additionally, education is inextricably linked to the economy, a recovery support function. Without schools or child care facilities where children can go, parents and guardians cannot go back to work. Recent disasters have shown that the re-opening of schools and child care facilities where children can go and begin to recover from grief, fear or loss associated with a disaster is critical to the recovery of the whole-of-community.

Thank you for your continued commitment to meeting the needs of children. If the Academy can be of help to you, please do not hesitate to contact Tamar Magarik Haro in AAP's Department of Federal Affairs at 202-347-8600.

Sincerely,

/s/

Robert W. Block, MD, FAAP  
President

RWB/bd