

Schools and Disasters

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Schools Are an Epicenter of Recovery

- Provide food, shelter, medical resources, and psychological resources.^{1,2}
- Establish normalcy and routines.^{3,4}

Recommendations

1

Schools are a key screening site.

2

Place services in schools.⁵

3

Target services to our most vulnerable children.

1. Schools are a key screening site.

92% of the world's primary school-aged children attend school.⁶

Disaster Impact on Children: Physical Health

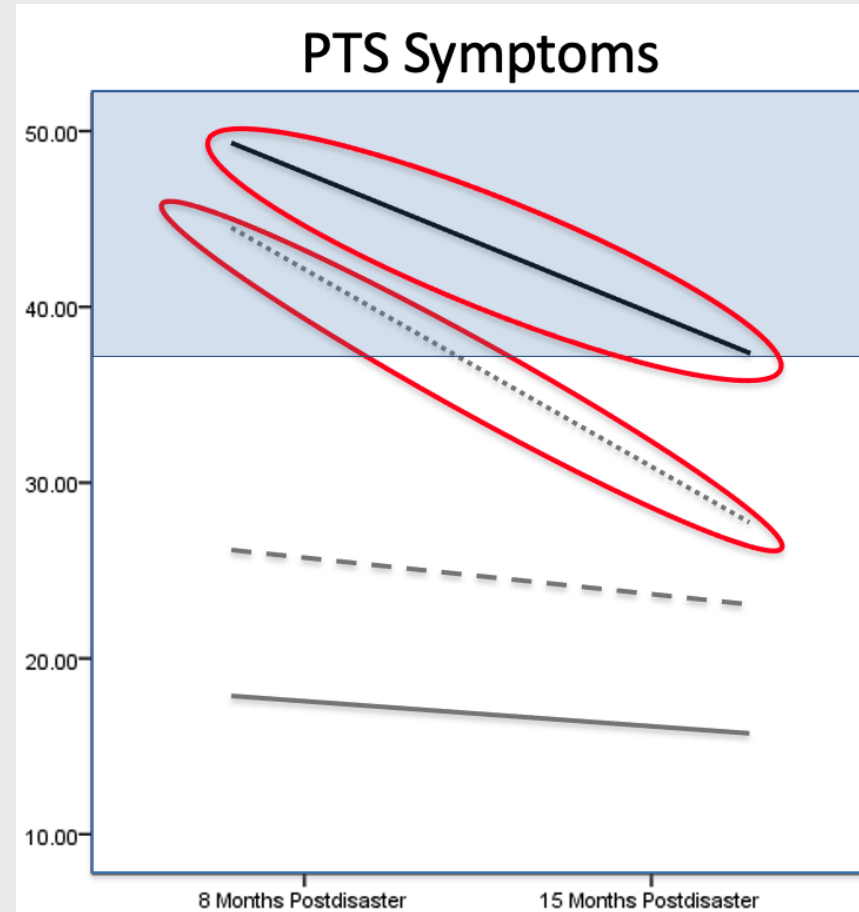
- 9-18% increase in **acute illnesses** (e.g., diarrhea, fever, respiratory illness).⁷
- Heightened **somatic symptoms** (e.g., headaches, nausea, lethargy).⁸

Disaster Impact on Children: Mental Health

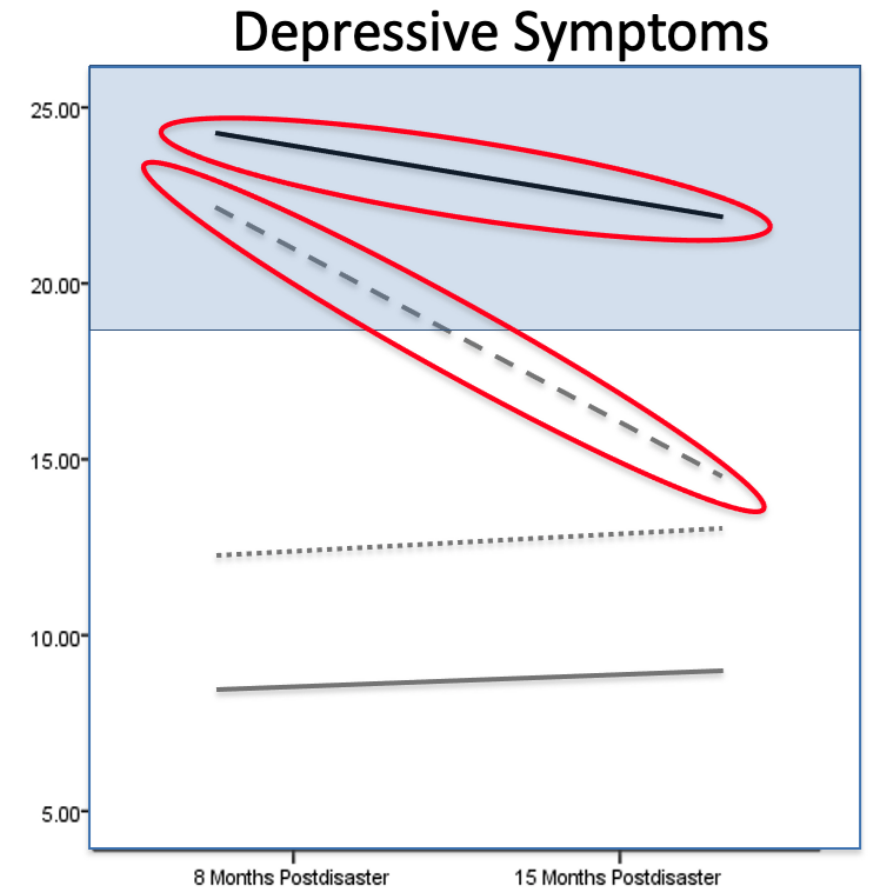
- Up to 50% experience **post-traumatic stress symptoms**.^{8,9}
- **Depression & anxiety** symptoms.¹⁰⁻¹²
- Chronic symptoms **observed even 4 years after disaster**.¹³

Long-Term Follow-Up

329 Children Assessed After Hurricane Ike (2008)



$F(3, 271) = 18.13, p < .001.$



$F(3, 271) = 14.53, p < .001.$

- 1) PTS and Depression
- ⋯ 2) PTS-Only
- - - 3) Depression-Only
- 4) No PTS or Depression

Disaster Impact on Children: Schooling

- School closures and high rates of absenteeism.¹⁴
 - Hurricane Katrina: **196,000 students had to change schools,**¹⁵ and approx. **50,000 students did not attend school** for the rest of the academic year.¹⁶
- Deficits in learning and memory processes.¹⁷
 - Hurricane Floyd: **achievement scores lowered by 5-15%.**¹⁸

Risk Factors: Exposure

- Other forms of **violence or trauma**.
 - 2010 Haiti earthquake & violence exposure: higher mental distress, suicidal ideation, and numbers of sexual partners.¹⁹
 - Hurricane Katrina & community violence: higher levels of post-traumatic stress symptoms.²⁰
- Multiple potentially **life-threatening disaster events**.
 - Seeing trees fall, seeing windows break, being injured, or witnessing someone else be hurt.²¹

Other Risk Factors

- **Perception of danger** during disaster.²²⁻²⁴
- **Multiple stressors** during recovery period.
 - Parents changing or losing jobs, moving, family death or illness.^{12,25}
- High number of **missed school days**.
 - Results in lower grades or drop out.²⁶
- Belonging to **underserved or marginalized groups**.
 - Poverty, minoritized groups, and temporary or unstable housing **increase likelihood of risk factors**.^{9,27-}

2. Place services in schools.

Evidence-Based Programs (EBPs)

- **EBPs decrease mental health symptoms** among children exposed to traumatic events.³⁰
- **Barriers.** Cost, availability, transportation, childcare, staffing.

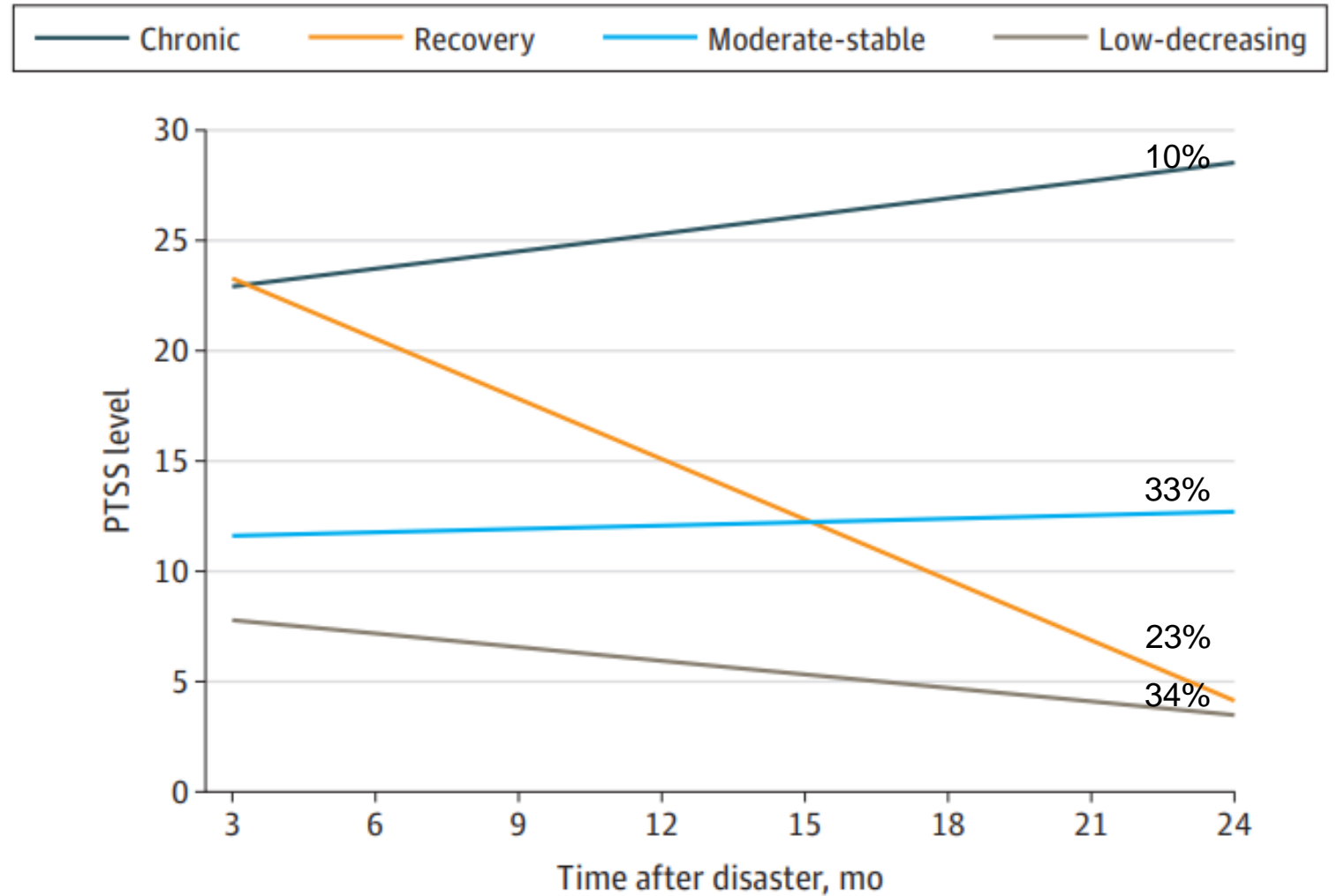
Accessibility Increases When Services Are Placed In Schools

After Hurricane Katrina, Project Fleur-de-Lis offered free, evidence-based mental health services to targeted children.³¹

Offsite Clinic	Services Placed in Schools
37% of children accessed services.	98% of children accessed services.

3. Target services to our most vulnerable children.

Youth reactions over time ($n = 1707$).³²



Youth Respond Differently

Socially Vulnerable Schools

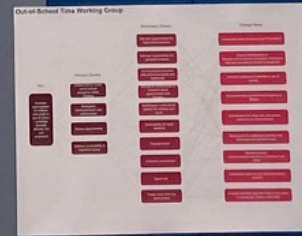
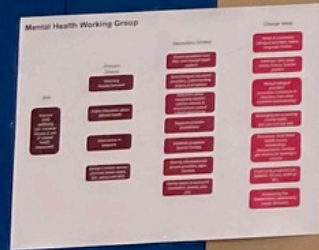
Government Accountability Office [2022 Report](#)

- **Emotional:** Difficulty obtaining mental health services.
- **Academic:** Increased vulnerability to learning loss.
- **Financial:** Lack of financial resources for recovery projects.
- **Physical:** Longer times using temporary learning spaces.

30+
LOCAL LEADERS

DIVERSE
STAKEHOLDERS

CONNECTIONS
DEVELOPED OVER 1.5
YEARS



PLAN AHEAD

Concluding Remarks

1

Schools are a key screening site.

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Place services in schools.⁵

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Target services to our most vulnerable children.

Thank You!



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