Simple Activities for Children and Adolescents

Activities with no supplies needed:

___ Tell stories.
___ Tell exaggerated "Stories" of the "old days" to entertain.
___ Put on mini plays or skits. Have children act out different characters.
___ Play "Story Building." One person starts the story, and then the
   other(s) add(s) to it.
___ Share secrets, most embarrassing moments, wishes, and/or dreams.
___ Make up different dances or dance to known songs (i.e., the hokie
   pokie). Have a dance contest.
___ Play "Name that Tune." One person hums a tune or says a line from a song and others try to guess
   the name of the song.
___ Play "Hide and Seek." Designate an area with clear boundaries. Have everyone gather around a landmark
   that will be home base. Pick a person to be IT. Whoever IT is closes his eyes and counts to a
   designated number while the rest of the players hide. Once the countdown is done, IT says "Ready or not
   here I come" then goes to look for, and find, the hidden players. The first player found will be IT for the
   next round. Repeat.
___ Play "Tag" or some variation. Examples include Freeze Tag (when people are tagged they freeze into
   position. Others who have not been tagged can unfreeze them by touching the frozen person or crawling
   through their legs). TV Tag (a player who is tagged by the person IT can be unfrozen by answering
   or naming something in a category that IT has established. Example - IT says "cartoons." When a player is
   tagged they can say the name of a cartoon to become unfrozen.) Finally, Duck, Duck, Goose (players sit in
   a circle. IT walks around gently tapping everyone on the head saying "duck." The person who is it will
   choose a different player to be it by touching their head as he passes and says "goose." She will get up and
   try to tag him before he gets to the empty spot in the circle.
___ Play "Simon Says." One player is designated Simon and the other players do whatever Simon says as long as
   he says the phrase "Simon says" before the command. If Simon does not say "Simon says" before the
   command, the players don't move. Any player who acts without hearing "Simon says" is out of the game.
   The winner is the last player left.

___ Play "Mother May I." One player stands far away from the others and is the "mother" while all of the
   other players stand in a group. Mother calls the name of one of the player and says "(insert name here),
   you may take (insert numbers) steps." The player then must remember to say "Mother may I?" before
   moving the allotted number of steps. Mother will either answer "yes" or "no." If the player fails to ask
   and takes a step without permission or moves prior to Mother's response she must goes back to the
   starting line. The first to reach Mother wins and is the new mother. Mother can also call out the
   types of steps being called (i.e., baby steps, giant steps).
Simple Activities for Children and Adolescents

- Play "Sound Search." Everyone sits still and identifies as many different sounds as possible.

- Play "Red Rover." Separate everyone into two equal teams. Have each team stand in a straight line, holding hands. The two teams should be facing each other, about ten yards apart. Team A decides who to "call over" from Team B and they chant, "Red Rover, Red Rover, we call (name) over!" The player from Team B who was called must run to Team A and try to break through the arms of the other team. If the person breaks through the line, they add to that team's chain. Continue playing until one team only has two people.

- Play "Wheelbarrow Races." Partner up and have teams of two line up at a starting line. One partner faces the finish line and places his/her hands on the ground and feet in their partner's hands. At a signal to start, the teams walk to the finish line this way. The first team to cross the finish line wins.

- Play "Marco Polo" on land. One player is IT and is blindfolded and spun around couple of times. IT closes his/her eyes and counts to 20 to allow other players time to move away and hide. The players stop where they are when IT reaches 20 and stay in those positions until the end of the game. IT yelling out "Marco" and the players have to respond with "Polo." IT uses these responses to find the other players. As the other players are tagged, they are eliminated from the game. The winner is the last person standing who has not been tagged.

- Play "Follow the Leader." Players line up and walk behind the leader, copying whatever the leader does.

- Play "Charades." One person (or team) acts out a movie, book, or TV show using only body language while others try to guess what she is acting out.

- Play "Encore." Assign common words to two teams who take turns trying to think of a song that contains each word. Each team must be able to sing at least eight words of the song in order for the turn to count.

- Play "20 Guesses." Think of a noun, cartoon character, singer, movie, book, television show, or sports star. Have the players take turns guessing what IT is thinking. Answer the guesses with yes, no, sometimes, usually, or rarely. When the 20 guesses are up, the players get a final guess. If no one answers correctly, the answer is given.

- Play "Rock, Paper, Scissors." Two people move their fists up and down three times while saying together "rock, paper, scissors." On the fourth downward motion each person chooses a gesture:
  * Rock: a closed fist
  * Paper: a flat, open hand
  * Scissors: index and middle finger extended out to look like scissors
  * Winning: Rock smashes scissors, scissors cut paper, paper covers rock.

- Exercise. Take a walk, do a dance, do yoga, stretch.

- Go outside at night and point out different constellations.

Red Rover ... Red Rover ... Let Sally Come Over ...
10 Tips for Keeping Children Safe in Winter

After a large snowstorm or blizzard, most children beg to go outside and build a snowman or go sledding. But low temps can lead to dangerous conditions for kids – and injuries too. These tips from our emergency response experts can ensure that kids stay safe and warm when temperatures drop.

Here are 10 Tips to Protect Children in Cold Weather:

1. **Layer up!**
   Bitter cold and snow can cause frostbite. Dress your child in several layers, and make sure their head, neck and hands are covered. Dress babies and young children in one more layer than an adult would wear.

2. **Play it safe.**
   Even when roads are closed to traffic, it’s not safe to play or sled in the street. Visibility may be limited due to snow banks and ice on the roads makes braking difficult.

3. **Beware of clothing hazards.**
   Scarves and hood strings can strangle smaller children so use other clothing to keep them warm.

4. **Check in on warmth.**
   Before kids head outside, tell them to come inside if they get wet or if they’re cold. Then keep watching them and checking in. They may want to continue playing outside even if they are wet or cold.

5. **Use sunscreen.**
   Children and adults can still get sunburned in the winter. Sun can reflect off the snow, so apply sunscreen to exposed areas.

6. **Use caution around fires.**
   Wood-burning stoves, fireplaces and outdoor fire-pits are cozy but can present danger – especially to small children. Use caution and put up protective gates when possible. If you’ve lost power or heat and are alternative heating methods like kerosene or electric heaters, be sure smoke detectors and carbon monoxide detectors are working.
7. Get trained and equipped.
Children should wear helmets when snowboarding, skiing, sledding or playing ice hockey. And to avoid injuries, teach children how to do the activity safely.

8. Prevent nosebleeds.
If your child suffers from minor winter nosebleeds, use a cold-air humidifier in their room. Saline nose drops can help keep their nose moist.

In drier winter air kids lose more water through their breath. Offer plenty of water, and try giving them warm drinks and soup for extra appeal.

10. Watch for danger signs.
Signs of frostbite are pale, grey or blistered skin on the fingers, ears, nose, and toes. If you think your child has frostbite bring the child indoors and put the affected area in warm (not hot) water. Signs of hypothermia are shivering, slurred speech, and unusual clumsiness. If you think your child has hypothermia call 9-1-1 immediately.
10 Tips for Keeping Children Safe in Extreme Heat

Extreme heat can cause illness and dehydration and even death. People who are at greater risk from the effects of heat include children, senior citizens and those who live in urban areas. Save the Children’s experts offer these steps to help keep children safe in extreme heat.

1. **Never leave children unsupervised in parked cars.**
   Even in less threatening temperatures, vehicles can rapidly heat up to dangerous temperatures. A child left inside a car is at risk for severe heat-related illness or death, even if the windows are cracked open.

2. **Seek shelter in cool areas.**
   Air-conditioning is the best form of protection against heat-related illness, so be sure to spend as much time in air-conditioned spaces (e.g., shopping malls, public libraries, heat-relief shelters) as possible during extreme heat waves.

3. **Stay informed.**
   Listen to local news and weather channels for health, safety and weather-related updates, including heat warnings, watches and advisories. Follow the guidance from local officials.

4. **Light clothing, heavy sunscreen.**
   Choose lightweight, light-colored, and breathable fabrics (such as cotton), as well as broad-spectrum sunscreen (with protection from both UVA and UVB sun rays) to protect you and your child from the heat and potential sun-related skin damage. Hats and umbrellas can be used to limit exposure to harmful rays.

5. **Drink lots of fluids.**
   Remember to drink plenty of liquids, regardless of your activity level. Check your baby’s diaper for concentrated (dark in color) urine, which can indicate dehydration. Fluids should be drunk before, during and
after being exposed to extreme heat. Also avoid hot meals as they may increase body heat.

6. **Know how to identify heat-related illnesses.**
   Learn symptoms and signs of heat-related illnesses/conditions such as heat stroke, exhaustion, cramps, and severe sunburn. If children show these symptoms, seek medical assistance immediately. Refer to the CDC website for a complete list of health conditions caused by extreme heat exposure, and how to remedy them.

7. **Get lots of rest.**
   Strenuous activities should be reduced, eliminated or rescheduled to the coolest time of the day. Make sure that children get lots of rest when they are active.

8. **Keep children entertained.**
   Children may become anxious or restless from being kept indoors. Plan ahead for indoor activities and games and limit the screen-time on TVs, phones and tablets.

9. **Reassure children.**
   Children may be afraid or stressed by effects of the heat, such as seeing dead animals. Remember that children take their cues from their parents and caregivers, so try to keep calm and answer their questions openly and honestly.

10. **Learn your caregivers’ disaster plans.**
    If your child’s school or childcare center is in an area that may experience extreme heat, find out what their plans are in the event of a heatwave.
10 Tips for Keeping Children Safe in a Flood

Floods are among the most frequent and costly natural disasters in the U.S. As much as 90% of all damage from natural disasters is caused by floods. Flooding typically occurs after heavy or prolonged rainfall, or the rapid melting of snow. While the effects of floods can be devastating, these safety tips for floods can help keep children safe.

Before a flood

1. **Talk about floods.** Spend time with your family discussing why floods occur and how to stay safe during a flood. Explain that flooding is a natural event and not anyone's fault. Use simple words that young children can understand.

2. **Consider flood insurance.** Standard homeowners insurance doesn't cover flood damage.

3. **Stay informed.** Use a NOAA Weather Radio or listen to a local station on a battery-powered device, radio or TV. Listen for what to do in a flood warning or watch. Evacuate if told to do so or if you feel unsafe.

During Floods

1. **Follow guidance of local authorities.** Elected officials and first responders are most informed about affected areas and most knowledgeable which flooded areas to avoid.

2. **Move to higher ground.** During a flood you should move to higher ground and avoid standing, flowing, or rising water.

3. **Keep children away from dirty water.** Keep children and pets away from hazardous sites and floodwater as it's likely to be dirty, carry bacteria, and vulnerable to electric shock.
4. **Keep children clean.** Wash children’s hands frequently (always before meals) and ensure they bathe after being exposed to flood waters or flood-damaged areas.

**After Floods**

1. **Ensure utilities are restored.** Before children return to flood-affected areas, ensure utilities such as electricity and plumbing are restored. Living and learning spaces (e.g., homes, schools, child care facilities) should be free from physical and environmental hazards.

2. **Limit children’s participation in recovery.** Children and teens should not be involved in clean-up efforts – they should return after the area is cleaned up. Before children return, these areas should be cleaned and disinfected, along with all toys, clothing, etc.

3. **Clean or discard contaminated toys.** Do not allow children to play with toys that have been contaminated by flood water and have not been disinfected. Materials that cannot be readily disinfected, such as stuffed animals or pillows, should be discarded.
10 Tips for Keeping Children Safe in a Wildfire

A wildfire is an uncontrolled fire often occurring in open areas like forests, fields or parks. Wildfires can begin unnoticed, but they spread quickly – igniting plants, trees and homes. Although they can be started by natural causes, four out of five wildfires are started by people's negligence with cigarettes, matches and campfires. While wildfires can certainly be scary, these steps can protect children both physically and emotionally.

Prepare

1. Talk about wildfires.
   Spend time with your family discussing why wildfires occur. Explain how to prevent them and what to do if one occurs. Use simple age-appropriate words.

2. Know your risk.
   Learn your area's risk of wildfires, particularly if you live near forests, in rural areas, or in a dry climate. Contact your local fire department, state forestry office, or other emergency response agencies for information on fire laws and wildfire risk.

3. Learn about caregivers' disaster plans.
   If your child's school or childcare center is in an area at risk for wildfires, learn their emergency plan and evacuation plan. You may be required to pick up children from another location. Review these plans with your children.

4. Practice evacuation drills.
   Practice so that children can evacuate quickly and safely if a wildfire occurs. Plan and practice two ways out of your neighborhood, in case one route is blocked.

During a Wildfire

5. Stay informed.
   If a wildfire is approaching, listen regularly to local radio or TV stations for updated emergency information. Follow the instructions of local officials as they will know safest evacuation route.
6. Have supplies ready.
If you must evacuate, wear protective clothing such as sturdy shoes, long pants (denim, cotton or wool is best) and long-sleeved shirts and gloves. Lock your home and take a disaster supplies kit with you.

7. Avoid smoke and fumes.
Keep children, babies and infants away from areas where there is smoke or fumes, and stay indoors if possible. Smoke produced by the wildfire may cause breathing problems or contain poisonous toxins.

After a Wildfire

8. Use caution when returning to a burned area.
Get permission from fire officials before returning to a burned area. Look out for hazards such as fallen wires and ash pits and be alert as fire re-ignition may be possible.

9. Clean up safely.
Follow public health guidance on safe cleanup of fire ash and safe use of masks. Keep children away from burned sites until cleanup is complete.

10. Limit media exposure.
Protect children from seeing too many sights and images of the wildfire, including those on the internet, TV or newspapers.
10 Tips for Helping Children Cope with Disaster

After a disaster, parents, teachers and caregivers look for advice on how to help children cope with the after-effects. These 10 tips from Save the Children's emergency response experts can ensure that children get the support they need – well after the disaster is over.

1. **Limit TV time.**
   While it's important for adults to stay informed about the disaster, TV images and reports may be confusing and frightening for children. Watching too many reports of the disaster can overwhelm children.

2. **Listen to your children.**
   See what they know – or understand – about the disaster before responding to their questions. Children can experience stress when they don't understand dangerous experiences. Try to identify your children's fear of disasters. Then, talk to them to help ease their concerns.

3. **Give children reassurance.**
   Let them know that adults are doing everything they can to protect them. Be sure they know that if an emergency occurs, their safety is your main concern. Children should know they're being protected.

4. **Be alert for significant changes in behavior.**
   Caregivers should be alert to any significant changes in children's sleeping patterns, eating habits, and concentration levels. Also watch for wide emotional swings or frequent physical complaints. If any of these actions do happen, they will likely lessen within a short time. If they continue, however, you should seek professional help and counseling for the child.

5. **Understand children's unique needs.**
   Not every child will experience a disaster in the same way. As children develop, their intellectual, physical and emotional abilities change. Younger children will depend largely on their parents to interpret events.
Save the Children

Older children and adolescents will get information from various sources, such as friends and the media. Remember that children of any age can be affected by a disaster. Provide them all with love, understanding and support.

6. **Give your children extra time and attention.**
   Children need attention to know they are safe. Talk, play and, most importantly, listen to them. Find time to engage in special activities with children of all ages.

7. **Be a model for your children.**
   Your children will learn how to deal with these events by seeing how you respond. The amount you tell children about how you're feeling should depend on the age and maturity of the child. You may be able to disclose more to older or more mature children but remember to do so calmly.

8. **Watch your own behavior.**
   Make a point of being sensitive to those impacted by the disaster. This is an opportunity to teach your children that we all need to help each other.

9. **Help your children return to a normal routine.**
   Children usually benefit from routine activities such as set eating times, bedtime, and playing with others. Find out you're your children's school is will return to normal hours. Ask teachers or counselors how much time will be dedicated to discussing the disaster in an age-appropriate way.

10. **Involve children in volunteer work.**
    Helping others can give children a sense of control and security and promote helping behavior. Include children in volunteer activities (once it is safe to do so). Helping people who are in need can bring about a positive outlook.
"Comfort for Kids"

Your Care Kit

This kit contains special items to help children cope with stress & anxiety they may be feeling. This kit is an effort of the Child Care Aware® of Southern Missouri—An Operating Agency of the Council of Churches of the Ozarks, churches & volunteers in the Springfield area.

How do I use the Care Kit?

You can use these items to help your child cope with stress using the basic tips below.

- **Lotion**: rub the lotion on your child’s hands and/or feet. You can ask if they’d like to rub lotion on your hands too. Gentle hand or foot massage can be very soothing.

- **Bubbles**: ask your child to practice deep & controlled breathing by blowing the biggest bubble they can. Then ask them to blow as hard as they can, creating many small bubbles—repeat.

- **Play-Doh**: ask your child to squish the Play-Doh as hard as they can with their hands, letting it squish between their fingers. Then ask them to repeat using their bare feet. Finally, ask your child to mold an item that makes him/her happy & discuss.

- **Crayons**: your child can use crayons for creative drawing on blank paper or notebook paper. You can provide topics such as “something that makes you sad” or “something that helps you calm down.” Discuss your child’s drawing & answer their questions honestly.

- **Journal, Notebook or Sketch Pad**: these can be used for creative drawing with crayons or pens. Some children may like to journal about how they are feeling. Tell your child he/she can choose to share parts of the journal or drawings with you. Focus on listening if they do share.

- **Rubber Ball or Stress Ball**: ask your child to squeeze the ball gently, followed by squeezing the ball very hard. Talk about how stress & anger have different levels, from small to very large. Children can squeeze or bounce their stress ball based on their level of stress.

- **Stuffed Animal**: your child may enjoy sleeping with or carrying around a stuffed animal, even if he/she is an older child. These are also helpful for pretend play.

- **Stickers**: award your child with a sticker for completing one of these activities. Scented stickers allow children to use their sense of smell, which helps them interpret their surroundings.

- **Fruit Snacks**: chewing these gummies allow children to use their sense of taste & the hard chewing motions can be stress relieving.
Tips for Talking With and Helping Children and Youth Cope After a Disaster or Traumatic Event:
A GUIDE FOR PARENTS, CAREGIVERS, AND TEACHERS

Adult support and reassurance is the key to helping children through a traumatic time.

Children and youth can face emotional strains after a traumatic event such as a car crash or violence. Disasters also may leave them with long-lasting harmful effects. When children experience a trauma, watch it on TV, or overhear others discussing it, they can feel scared, confused, or anxious. Young people react to trauma differently than adults. Some may react right away; others may show signs that they are having a difficult time much later. As such, adults do not always know when a child needs help coping. This tip sheet will help parents, caregivers, and teachers learn some common reactions, respond in a helpful way, and know when to seek support.

PRESCHOOL CHILDREN, 0–5 YEARS OLD

Very young children may go back to thumb sucking or wetting the bed at night after a trauma. They may fear strangers, darkness, or monsters. It is fairly common for preschool children to become clingy with a parent, caregiver, or teacher or to want to stay in a place where they feel safe. They may express the trauma repeatedly in their play or tell exaggerated stories about what happened. Some children’s eating and sleeping habits may change. They also may have aches and pains that cannot be explained. Other symptoms to watch for are aggressive or withdrawn behavior, hyperactivity, speech difficulties, and disobedience.

- **Infants and Toddlers, 0–2 years old,** cannot understand that a trauma is happening, but they know when their caregiver is upset. They may start to show the same emotions as their caregivers, or they may act differently, like crying for no reason, withdrawing from people, and not playing with their toys.

- **Children, 3–5 years old,** can understand the effects of trauma. They may have trouble adjusting to change and loss. They may depend on the adults around them to help them feel better.

Possible Reactions to a Disaster or Traumatic Event

Many of the reactions noted below are normal when children and youth are handling the stress right after an event. If any of these behaviors lasts for more than 2 to 4 weeks, or if they suddenly appear later on, these children may need more help coping. Information about where to find help is in the [Helpful Resources](#) section of this tip sheet.
EARLY CHILDHOOD TO ADOLESCENCE, 6–19 YEARS OLD

Children and youth in these age ranges may have some of the same reactions to trauma as younger children. Often, younger children want much more attention from parents or caregivers. They may stop doing their school work or chores at home. Some youth may feel helpless and guilty because they cannot take on adult roles as their family or the community responds to a trauma or disaster.

- **Children, 6–10 years old,** may fear going to school and stop spending time with friends. They may have trouble paying attention and do poorly in school overall. Some may become aggressive for no clear reason. Or they may act younger than their age by asking to be fed or dressed by their parent or caregiver.

- **Youth and Adolescents, 11–19 years old,** go through a lot of physical and emotional changes because of their developmental stage. So, it may be even harder for them to cope with trauma. Older teens may deny their reactions to themselves and their caregivers. They may respond with a routine “I’m okay” or even silence when they are upset. Or, they may complain about physical aches or pains because they cannot identify what is really bothering them emotionally. Some may start arguments at home and/or at school, resisting any structure or authority. They also may engage in risky behaviors such as using alcohol or drugs.

How Parents, Caregivers, and Teachers Can Support Children’s Recovery

The good news is that children and youth are usually quite resilient. Most of the time they get back to feeling okay soon after a trauma. With the right support from the adults around them, they can thrive and recover. The most important ways to help are to make sure children feel connected, cared about, and loved.

- Parents, teachers, and other caregivers can help children express their emotions through conversation, writing, drawing, and singing. Most children want to talk about a trauma, so let them. Accept their feelings and tell them it is okay to feel sad, upset, or stressed. Crying is often a way to relieve stress and grief. **Pay attention and be a good listener.**

- Adults can ask the teens and youth they are caring for what they know about the event. What are they hearing in school or seeing on TV? Try to watch news coverage on TV or the Internet with them. And, limit access so they have time away from reminders about the trauma. Don’t let talking about the trauma take over the family or classroom discussion for long periods of time. **Allow them to ask questions.**

- Adults can help children and youth see the good that can come out of a trauma. Heroic actions, families and friends who help, and support from people in the community are examples. Children may better cope with a trauma or disaster by helping others. They can write caring letters to those who have been hurt or have lost their homes; they can send thank you notes to people who helped. **Encourage these kinds of activities.**

- If human violence or error caused an event, be careful not to blame a cultural, racial, or ethnic group, or persons with psychiatric disabilities. This may be a good opportunity to talk with children about discrimination and diversity. **Let children know that they are not to blame when bad things happen.**

- It’s okay for children and youth to see adults sad or crying, but try not to show intense emotions. Screaming and hitting or kicking furniture or walls can be scary for children. **Violence can further frighten children or lead to more trauma.**

- Adults can show children and youth how to take care of themselves. If you are in good physical and emotional health, you are more likely to be readily available to support the children you care about. **Model self-care, set routines, eat healthy meals, get enough sleep, exercise, and take deep breaths to handle stress.**
Tips for Talking With Children and Youth of Different Age Groups After a Disaster or Traumatic Event

PRESCHOOL CHILDREN, 0–5 YEARS OLD
Give these very young children a lot of cuddling and verbal support:

- Take a deep breath before holding or picking them up, and focus on them, not the trauma.
- Get down to their eye level and speak in a calm, gentle voice using words they can understand.
- Tell them that you still care for them and will continue to take care of them so they feel safe.

EARLY CHILDHOOD TO ADOLESCENCE, 6–19 YEARS OLD
Nurture children and youth in this age group:

- Ask your child or the children in your care what worries them and what might help them cope.
- Offer comfort with gentle words, a hug when appropriate, or just your presence.
- Spend more time with the children than usual, even for a short while. Returning to school activities and getting back to routines at home is important too.
- Excuse traumatized children from chores for a day or two. After that, make sure they have age-appropriate tasks and can participate in a way that makes them feel useful.
- Support children spending time with friends or having quiet time to write or create art.
- Encourage children to participate in recreational activities so they can move around and play with others.
- Address your own trauma in a healthy way. Avoid hitting, isolating, abandoning, or making fun of children.
- Let children know that you care about them—spend time doing something special with them, and make sure to check on them in a nonintrusive way.

A NOTE OF CAUTION: Be careful not to pressure children to talk about a trauma or join in expressive activities. While most children will easily talk about what happened, some may become frightened. Some may even get traumatized again by talking about it, listening to others talk about it, or looking at drawings of the event. Allow children to remove themselves from these activities, and monitor them for signs of distress.
When Children, Youth, Parents, Caregivers, or Teachers Need More Help

In some instances, a child and his or her family may have trouble getting past a trauma. Parents or caregivers may be afraid to leave a child alone. Teachers may see that a student is upset or seems different. It may be helpful for everyone to work together. Consider talking with a mental health professional to help identify the areas of difficulty. Together, everyone can decide how to help and learn from each other. If a child has lost a loved one, consider working with someone who knows how to support children who are grieving.4 Find a caring professional in the Helpful Resources section of this tip sheet.

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Helpful Resources

Substance Abuse and Mental Health Services Administration Disaster Technical Assistance Center (SAMHSA DTAC)
Toll-Free: 1-800-305-3515
Website: http://www.samhsa.gov/dtac

Treatment Locators

Mental Health Treatment Facility Locator
Toll-Free: 1-800-789-2647 (English and español)
TDD: 1-866-889-2647
Website: http://findtreatment.samhsa.gov/MHTreatmentLocator

MentalHealth.gov
Website: http://www.mentalhealth.gov
MentalHealth.gov provides U.S. government information and resources on mental health.

Substance Abuse Treatment Facility Locator
Toll-Free: 1-800-662-HELP (1-800-662-4357)
(24/7 English and español); TDD: 1-800-487-4889
Website: http://www.findtreatment.samhsa.gov

Hotlines

National Suicide Prevention Lifeline
Toll-Free: 1-800-273-TALK (1-800-273-8255)
TTY: 1-800-799-4TTY (1-800-799-4889)
Website: http://www.samhsa.gov
This resource can be found by accessing the Suicide Prevention Lifeline box once on the SAMHSA website.

Disaster Distress Helpline
Toll-Free: 1-800-985-5990 Text “TalkWithUs” to 66746
Website: http://disasterdistress.samhsa.gov

Child Welfare Information Gateway
Toll-Free: 1-800-4-A-CHILD (1-800-422-4453)
Website: http://www.childwelfare.gov/responding/how.cfm

Additional Behavioral Health Resources

National Child Traumatic Stress Network
Website: http://www.samhsa.gov/trauma/justica
This behavioral health resource can be accessed by visiting the SAMHSA website and then selecting the related link.

Administration for Children and Families
Website: http://www.acf.hhs.gov/
Ideas for Engaging Families in Disaster Planning

See next page for sample flyer

- Hand out copies of the program's disaster plan. This may be a copy of LIC 610 / 610A, or it may be a more detailed plan. Consider handing out copies of the Emergency Disaster Plan Addendum for Child Care Providers that you may have filled out as part of the Step-By-Step Guide. Walk families through the various sections of your disaster plan. Answer any questions that may come up. Consider explaining the job actions assigned to staff, particularly the Security, Attendance, and Reunification Coordinator, the Communications Coordinator and the Supervision and Care Coordinator.

- Hand out the Child Emergency Information Form that you have on file for each child to their family. Make sure they review the information carefully and update the form as needed. Include Special Health Care Plans as well. Collect all the forms.

- Hand out Wallet Cards that contain information on relocation sites and contact information. Make sure each individual gets one. Speak in-depth with families about the information on the cards. Explain how to get to the relocation sites and why you selected those sites.

- Discuss options for alternate modes of communications that your families would use. Find out which families use Facebook, Twitter, or other social media sites. Discuss setting up a group email chain or group text message that could be used to relay important emergency information.

- Ask about unique needs that families might have in disaster situations. For example, some parents may be emergency response workers such as doctors, law enforcement, utilities workers, or fire fighters who may not be able to leave work to pick up their children in a disaster. Some families might have special communication needs or long commutes. Children in families with unique needs may need extra emotional support in disaster situations.

- Activity: Bring out craft materials (paper, pens, crayons, colored pencils, magazines, newspapers, scissors, glue, glitter, etc.) and have parents create a comfort note for their children. Keep these notes in your long-term emergency supplies.

- Share information on preparing for disasters at home and encourage families to involve their children in their home emergency preparedness as much as possible.

Family resources to share:

- Sesame Street's Let's Get Ready Toolkit www.sesamestreet.org/parents/topicsandactivities/toolkits/ready

- FEMA's Family Emergency Plan Template

- FEMA's Family Communication Plan Template
  www.fema.gov/media-library-data/0e3ef655f66e22ab632e284f626c2e9e/FEMA_plan_parent_508_071513.pdf

- The Center for Disease Control's website on preparing a home emergency kit (print out the infographic)
  http://emergency.cdc.gov/preparedness/kit/disasters/

Share information on helping children cope with disasters and trauma.

Resources to share:

- www.savethechild.org/cope (print out the infographic)

- Zero to Three's web page on Disaster Relief and Trauma
  http://main.zerotothree.org/site/PageServer?pagename=key_disaster&AddInterest=1142

- CCHP Health and Safety Note, Young Children and Disasters
  http://cchp.ucsf.edu/YoungChildDisasterNote

- Child Care Aware's web page on Crisis and Disaster Resources
  www.naccrcr.net/programs-services/crisis-and-disaster-resources

- www.fredrogers.org/parents/special-challenges/tragic-events.php
Disaster Preparedness Meeting

Families, you won’t want to miss this important meeting!
Help us keep your child safe!

- Receive a copy of our program's emergency disaster plan.
- Get a laminated wallet card with important information you will need to reunite with your child in the case of relocation.
- Review and update your child's emergency information.
- Create a customized comfort note for your child to help them cope in an emergency.
- Learn how to communicate with our program during a disaster.
- Take home resources on creating a disaster plan for your family and on how to help your child thrive after a disaster strikes.

Date:

Time:

Meeting Location:

RSVP:

Additional Information:
FAMILY EMERGENCY COMMUNICATIONS PLAN CHECKLIST

Communication can be difficult during emergencies. Electricity may be out, cell phone towers could go down and local systems may be overwhelmed making it difficult to reach those you love most. Use these tips to create a family emergency communications plan and help ensure that when disaster strikes, you can stay connected.

☐ Talk About Emergency Plans with Children.
Teach them that communication is important during emergencies so that we can know where family members are and that they are safe. Identify emergency contacts, evacuation routes and meet-up locations. If children are not with family when a disaster strikes, reassure them that there are caring adults, like teachers, coaches and first responders that will be working to keep them safe. Let them know you will be trying to reunite with them as soon as it is safe to do so.

☐ Consider a Landline: Landline phone connections can often work even when cell phones are down. These lines are also associated with addresses that may make it easier for emergency responders to find you.

☐ Remember to Text: Remind family members that text messages often get through in an emergency even when a cell phone call can’t. So in emergency, if your first call doesn’t work, try to text your contact.

☐ Identify Emergency Contacts: Every family should be equipped with at least three primary emergency contacts: A family member (for children this should be their parent or guardian); a local friend or relative; and an out-of-town contact. Having an out-of-town contact is critical as large-scale disasters may take down local communications and someone outside the affected area is better able to monitor the situation. Write down emergency contacts’ home phone numbers, cell phone numbers, emails, home address and social media names. Keep this information easily accessible on cards in your bag and/or the refrigerator. Try to memorize as much of this information as you can.

☐ Share Your Information: Give your emergency contact information to all child care providers, schools, programs, neighbors and babysitters. Make sure everyone has several ways to reach you or an identified emergency contact in case of an emergency.

☐ Program ICE Contacts. All family cell phones should have “ICE” (In Case of Emergency) contacts programmed into the contact list with all family phone numbers plus in- and out-of-town contacts. These entries should start with ICE then have the name of the contact.

☐ Update the Plan. Things change: Update the family communications plan as needed especially as friendships and neighbors change and children mature. Review the plan every 6 months and update at least once a year.

☐ Know Caregiver Plans: Ask child care providers and schools about their emergency communications protocol. If a disaster occurs, how will you be notified? Will there be auto-calls, texts or emails and are you signed up for these alerts?

www.SaveTheChildren.org/GetReady
**Wallet Cards**

Make copies of the page as needed. Fill out the cards, cut them out and fold them in half. Laminate the cards or have a store laminate them for you.

<table>
<thead>
<tr>
<th>Child care provider:</th>
<th>Relocation site #1:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>Address:</td>
</tr>
<tr>
<td>Alternate:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Out of area contact:</td>
<td>Relocation site #2:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Address:</td>
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<tr>
<td>Alternate:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Status update location:</td>
<td>Code word:</td>
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<tr>
<th>Child care provider:</th>
<th>Relocation site #1:</th>
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<td>Phone:</td>
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<td>Out of area contact:</td>
<td>Relocation site #2:</td>
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<td>Phone:</td>
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<td>Alternate:</td>
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<td>Status update location:</td>
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<td>Relocation site #2:</td>
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<td>Alternate:</td>
<td>Phone:</td>
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<td>Status update location:</td>
<td>Code word:</td>
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</tbody>
</table>
# Getting to Know Me

Use this form to introduce new people to your child and their health conditions or diagnoses.
Tip: Save a copy of the completed form on your computer to update when you need it.

<table>
<thead>
<tr>
<th>My name:</th>
<th>Nickname:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of birth:</td>
<td>Today's date:</td>
</tr>
<tr>
<td>Parent/Caregiver name:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Parent/Caregiver name:</td>
<td>Phone:</td>
</tr>
<tr>
<td>A little about me: (interests, hobbies, favorite things)</td>
<td></td>
</tr>
</tbody>
</table>

**My strengths:** (things that are easy for me)

**My challenges:** (communication, feeding, learning, mobility, social, energy, behavior)

**My life in the community:** (school, place of worship, my favorite places)

**My diagnosis or diagnoses:**
Things to know about my health or condition:

My equipment and assistive technology devices: (braces/orthotics, walker, wheelchair, communication devices, home O₂, insulin pump, suction)

My current medicines/doses:

My allergies and dietary restrictions:

Things to avoid: (activities, procedures)

Ways you can be helpful to me:

This form is available at www.cshcn.org/planning-record-keeping/documents/
Para conocerme mejor

Esta forma es para presentar a su niño y sus problemas de salud o diagnóstico médico a otras personas.
Idea: guarde una copia del formulario con sus respuestas en su computadora para actualizarla cuando sea necesario.

<table>
<thead>
<tr>
<th>Mi nombre:</th>
<th>Apodo:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fecha de nacimiento:</td>
<td>Fecha de hoy:</td>
</tr>
<tr>
<td>Nombre del padre/cuidador</td>
<td>Teléfono:</td>
</tr>
<tr>
<td>Nombre del padre/cuidador</td>
<td>Teléfono:</td>
</tr>
</tbody>
</table>

Acerca de mí (intereses, pasatiempos, lo que más me gusta)

Lo que me resulta más fácil: (las cosas que son más fáciles para mí)

Lo que más trabajo me cuesta: (comunicación, alimentación, aprendizaje, movilidad, socializar, energía, comportamiento)

Mi vida en la comunidad: (escuela, iglesia, mis lugares favoritos)

Mi diagnóstico/s:
Cosas para saber sobre mi salud o afección médica:

Equipos y tecnologías de asistencia: (férulas/ortesis, andador, silla de ruedas, dispositivos para comunicación, oxígeno, bomba de insulina, equipo de aspiración)

Mis medicinas/dosis actuales:

Alergias y restricciones dietéticas:

Lo que debo evitar: (actividades, procedimientos)

Cómo me pueden ayudar:

Esta forma está disponible en www.cshcn.org/planning-record-keeping/documents/
# In Case of Emergency

Child's name: ___________________________  Today's Date: ____________

<table>
<thead>
<tr>
<th>Nickname:</th>
<th>Birth date:</th>
</tr>
</thead>
</table>

Primary language/communication mode:

Home address:

Secondary address:

<table>
<thead>
<tr>
<th>Parent/Caregiver:</th>
<th>Relationship:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent/Caregiver:</td>
<td>Relationship:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Emergency Contact:</td>
<td>Relationship:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Emergency Contact:</td>
<td>Relationship:</td>
<td>Phone:</td>
</tr>
</tbody>
</table>

Diagnosis:

Allergies or dietary restrictions:

**Relevant health history:** (recent surgery, current status)

<table>
<thead>
<tr>
<th>Medications</th>
<th>Dose/Time</th>
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<tbody>
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</tbody>
</table>

Medical records are on file at:
Phone:
Fax:
<table>
<thead>
<tr>
<th>Hospital Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preferred hospital:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>ED phone:</td>
</tr>
<tr>
<td>Secondary hospital:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>ED phone:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physician Information</th>
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</thead>
<tbody>
<tr>
<td>Doctor to call in an emergency:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
</tr>
<tr>
<td>Primary care doctor:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
</tr>
<tr>
<td>Specialist:</td>
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<td>Phone:</td>
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<td>Fax:</td>
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<td>Specialist:</td>
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<tr>
<td>Specialist:</td>
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<td>Phone:</td>
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<td>Fax:</td>
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<tr>
<th>Preferred Pharmacy</th>
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<tbody>
<tr>
<td>Name:</td>
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<td>Phone:</td>
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<tr>
<td>Fax:</td>
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<table>
<thead>
<tr>
<th>Insurance Information</th>
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<tbody>
<tr>
<td>Insurance provider:</td>
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<tr>
<td>ID#:</td>
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<tr>
<td>Phone:</td>
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</tbody>
</table>

**Important baseline health information:** (vitals, neurologic or cognitive function)

**My equipment and assistive technology:** (braces/orthotics, walker, wheelchair, communication devices, home O₂, insulin pump, suction)

**Most important things to know about me in an emergency:** (fears, behaviors)

**Things that calm me down when I am scared or in pain:** (distractions, songs, books, toys, breathing exercises)

This form is available at www.cshcn.org/planning-record-keeping/documents/
En caso de emergencia

Nombre del niño: ___________________________  Fecha de hoy: ___________

Apodo: ___________________________  Fecha de nacimiento: ___________

Idioma principal/modo de comunicación: ___________________________

Dirección: ___________________________

Dirección (secundaria): ___________________________

Padres/cuidadores: ___________________________  Relación: ___________  Teléfono: ___________

Padres/cuidadores: ___________________________  Relación: ___________  Teléfono: ___________

Contacto de emergencia: ___________________________  Relación: ___________  Teléfono: ___________

Contacto de emergencia: ___________________________  Relación: ___________  Teléfono: ___________

Diagnóstico: ___________________________

Alergias o restricciones dietéticas: ___________________________

Historia médica relevante: (cirugías recientes, estado actual)

<table>
<thead>
<tr>
<th>Medicamentos</th>
<th>Dosis/horarios</th>
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</thead>
<tbody>
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</tbody>
</table>

Expedientes médicos archivados en:
Teléfono: ___________________________
Fax: ___________________________
<table>
<thead>
<tr>
<th>Información del hospital</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital que prefiere:</td>
<td></td>
</tr>
<tr>
<td>Dirección:</td>
<td></td>
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<tr>
<td>Teléfono:</td>
<td></td>
</tr>
<tr>
<td>Teléfono de la Sala de Emergencias:</td>
<td></td>
</tr>
<tr>
<td>Hospital secundario:</td>
<td></td>
</tr>
<tr>
<td>Dirección:</td>
<td></td>
</tr>
<tr>
<td>Teléfono:</td>
<td></td>
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<tr>
<td>Teléfono de la Sala de Emergencias:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Información del médico</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor para llamar en una emergencia:</td>
<td>Teléfono:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
<tr>
<td>Pediatra de cabecera:</td>
<td>Teléfono:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
<tr>
<td>Especialista:</td>
<td>Teléfono:</td>
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<td>Especialista:</td>
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<td>Especialista:</td>
<td>Teléfono:</td>
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<td>Fax:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Farmacia que prefiere</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nombre:</td>
<td>Teléfono:</td>
</tr>
<tr>
<td></td>
<td>Fax:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Información del seguro</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Proveedor de seguro médico</td>
<td>ID#:</td>
</tr>
<tr>
<td></td>
<td>Teléfono:</td>
</tr>
</tbody>
</table>

| Importante información médica de referencia:| (signos vitales, función neurológica o cognoscitiva) |

| Equipos y tecnologías de asistencia:        | (férulas/ortesis, andador, silla de ruedas, dispositivos para comunicación, oxígeno, bomba de insulina, equipo de aspiración) |

| La información más importante en caso de emergencia: | (miedos, comportamientos) |

| Lo que me calma cuando estoy asustado o dolorido: | (distracciones, canciones, libros, juguetes, ejercicios de respiración) |

Esta forma está disponible en www.cshcn.org/planning-record-keeping/documents/
What's the Plan?

Use this form to gather your thoughts and questions before appointments. You can also write notes during the appointment and keep track of things you need to follow up on, such as scheduling the next appointment, following up with another provider, or picking up medication.

<table>
<thead>
<tr>
<th>Child's name:</th>
<th>Provider:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Date of appointment:</td>
</tr>
</tbody>
</table>

Questions or concerns: (What do I want to talk about today?)

What do I hope to have happen?

Notes or next steps:

This form is available at www.cshcn.org/planning-record-keeping/documents/
¿Cuál es el plan?

Use esta forma para anotar ideas y preguntas antes de las citas. También puede tomar notas durante la cita para no olvidarse de las cosas que necesita hacer. Por ejemplo, programar la siguiente cita, ver a otro proveedor de atención médica o recoger medicinas.

<table>
<thead>
<tr>
<th>Nombre del niño:</th>
<th>Fecha de la cita:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proveedor de atención médica:</td>
<td></td>
</tr>
<tr>
<td>Preguntas o dudas (de qué me gustaría hablar hoy)</td>
<td></td>
</tr>
</tbody>
</table>

¿Qué me gustaría que ocurra hoy?

Notas o cuáles son los siguientes pasos:

Esta forma está disponible en www.cshcn.org/planning-record-keeping/documents/