Surviving Hurricane Michael - Helping Individuals with Serious and Persistent Mental Illness, Foster Families and Child Welfare Involved Families Prepare and Recover

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This article highlights the experiences of staff who responded to the needs of individuals, families, and communities following Hurricane Michael and is focused on the perspectives of individuals working in the field. The perspectives include staff working with individuals with serious and persistent mental illness, a foster family support services case worker, and a social worker for the Dependency Case Management Program. All perspectives come from individuals who work in the Big Bend Community Based Care system of care and are related to their experiences in preparing for and recovery following Hurricane Michael.

Hurricane Michael made landfall near Mexico Beach, Florida on October 10, 2018 as a Category 4 hurricane and was the strongest hurricane to make landfall in the continental US since Hurricane Andrew in 1992 (National Oceanic and Aerospace Administration, n.d.). Initially, the storm was not expected to be a major hurricane. It strengthened quickly and many in the affected communities were not prepared for the devastation.

This article is a collaboration between Big Bend Community Based Care and Central Florida Behavioral Health Network (CFBHN). Big Bend is a Community-Based Care Organization and a Managing Entity (ME) and serves the 18 counties in the panhandle or northwest part of the state. CFBHN is the Managing Entity that serves 14 counties on the west coast of Florida. As part of the contracts with DCF, the CBCs and MEs contract services for individuals, families, and communities in the event of a natural or human-caused disaster. The CBCs and MEs develop emergency response plans and conduct drills to prepare for events, provide crisis support immediately following an event, and contract ongoing recovery support. Support activities may continue for several years depending on the extent of the disaster.

The Florida Department of Children and Families (DCF) has contracted with private, not-for-profit organizations to provide child welfare and behavioral health contracting services. The child welfare services are provided through a comprehensive Community Based Care (CBC) System. The system combines child welfare case management and foster care services through an organization that has local community ownership to increase accountability, develop resources, and improve performance.

The Managing Entities (MEs) are also not-for-profit organizations responsible for ensuring availability of mental health and substance abuse...
“safety net” services for individuals and families who do not have the resources to access care. These organizations do not provide direct services, but contract through a network of provider partners who work together to develop a system of care that meets the needs of the specific communities.

Perspective from staff working with Individuals with Serious and Persistent Mental Illness (SPMI)

My name is Angela Lee, I have a master’s degree in clinical mental health, and I am a Component Director at a non-profit agency working with adults with SPMI. At the time of the hurricane, I was supervising a Level II residential program. The purpose of the program was to help people through the recovery process and prepare them for independent living. During the recovery period after the hurricane, I found that I had to be stronger than ever to put my feelings behind me so I could effectively help those that needed it most.

Several days before the storm, the staff were rushing around trying to anticipate what supplies would be needed if the town was without electricity or water. Finding supplies was difficult due to the demand from everyone in the community. In addition to securing supplies for clients, I was also concerned for my staff and family. I wanted to ensure all were well prepared and had evacuation plans. Due to the severity of the storm, it was decided to evacuate the clients to a local shelter. In addition to evacuating the clients, my 10-year-old son along with another staff member evacuated to the shelter with me and the clients. The clients and my son were having difficulty due to the uncertainty of what Hurricane Michael might bring.

Immediately after the hurricane, we could see the destruction the storm left behind at the shelter. Trees were down, signs bent, and electricity was out. Communication was down, so we were unable to speak with other family or staff to see how they were doing. Law enforcement officers, army reserve members, and Red Cross staff were busy ensuring all those staying in the shelter were safe and had the care they needed. I had to control my emotions because I had to try and keep my residents and my son calm. As part of the recovery, my son and several residents volunteered to help unload supplies of water and food as they were delivered to the shelter. Being able to contribute helped everyone keep their minds off the uncertainty regarding the condition of the residential home.

After a time, I was finally able to leave the shelter long enough to drive into town to observe what was left. Many roads were blocked, and
trees and power lines were down everywhere. Many homes were slightly damaged, while others were destroyed. I ran into one of my staff members crossing the street. She reported electricity was out everywhere and authorities were suggesting people evacuate, as it would be a long time before utilities could be restored. The residential group home was damaged—there was a hole in the roof that allowed rain to flood the house. Personal belongings were destroyed and I now had to work with other agencies to find new housing for my residents. I had to drive them from Panama City to Tallahassee to a new program. The clients were scared and worried because Panama City was their home, and now they were faced with starting over in a new place. After dealing with the immediate needs of the clients, we began to provide crisis counseling for people remaining in the shelter, as well as to the Red Cross and Federal Emergency Management Agency (FEMA) staff.

Two months after the storm, everything had changed. Utilities had been restored in some parts of town. Many people, including staff, remained homeless and had to make arrangements or move to other towns. In addition to the loss of homes, the facility was significantly damaged, which impacted our ability to provide mental health services that were provided prior to the storm. Since there is no safe building to provide counseling, staff provide the crisis counseling in the community. The agency has made every effort to ensure current clients have the psychiatric medications that are needed. It has been difficult to locate all of our clients to provide services, as many clients moved away, and we are unsure if they were able to establish services in their new residence.

There are thousands of mental health workers who are expected to help during times of crisis. These workers may be struggling to handle their personal emotions related to the devastation the storm brought to their family as they go out in the community to serve others in crisis. I know several staff who would smile and provide crisis counseling while struggling with their own anxiety and depression related to the impact the hurricane had on their own families.

My heart ached for my home town and the devastation it endured. Uncertainties remain as our town attempts to recover from this natural disaster. In the aftermath, I have noticed more people coming together to help one another out; friends and strangers rallying around each other to rebuild a strong community.

**Perspective from a foster family support services case worker**

My name is Taryn Tasker and I am the Foster Family Liaison for Foster Family Support Services at Life Management Center. My role is primarily
recruitment and retention of foster families in Circuit 14, which includes Holmes, Washington, Jackson, Calhoun, Bay, and Gulf Counties. Prior to the storm, the circuit was at a crisis-level need for foster homes. Hurricane Michael increased that need, as many of our current foster homes became unavailable. As the recovery period began, the support of the remaining foster homes also became a top priority.

As the storm approached, our team did whatever it could to ensure foster families had what they needed by helping them meet basic needs for themselves and for the children in their care. During the recovery, families were connected to resources, and when needed, our team helped them find temporary housing. We also organized a movie day for our foster parents and provided childcare so they could have a much-needed break.

More than 60 days after the storm, many of our foster families are still in great need. Many are displaced from their homes or at the very least had extensive damage. Typically, we have a Christmas sponsorship program for our foster kids, but due to the financial hardships of many of our families, we included all children in the home as well as the foster parents. This more than doubled our typical sponsorship needs, and our community, along with people from several states, contributed to ensure each of our foster families had a wonderful Christmas. Our families were overwhelmed by the outpouring of support and generosity.

It is hard for me to pick one story I would like to share. One instance that continues to come to my mind happened about three weeks after the storm. One of my main roles is recruitment of foster parents. I assumed that this would be nearly impossible after Hurricane Michael. Everyone in our area had experienced so much loss. Who in their right mind would decide at this point to become foster parents? At a temporary workspace with no air conditioning and unreliable phone and internet services, I received four inquiries through our website from people requesting information about foster care and adoption. I was completely floored. Then several weeks later, when we were able to hold a training class, a couple attended whose home had been destroyed by the storm. I consider it an even greater privilege to serve and support these kinds of people.

My husband and I are foster parents and currently have one child in our care. Although we were not in a mandatory evacuation zone, we evacuated during the storm. We made it through the storm safely, but unfortunately our Panama City home was destroyed. After staying briefly with family in Alabama, we returned to Panama City and began to pick up the pieces. We are living in the mother-in-law suite of our friend’s house
while our home is being repaired. My husband and I were fortunate that even though our workplaces were severely damaged, we still had employment. We both returned to work and are, along with the rest of the community, finding our “new normal”.

Foster parenting and working with individuals in the aftermath of Hurricane Michael presents unique challenges. Trying to help an already traumatized child and family through another trauma while you yourself are experiencing trauma is tough. The normal routines of life that help keep our kids grounded are suddenly gone. We have done our best to make a temporary living situation positive and add as many fun things as we can to our life for the child in our care and for others in foster care.

As I mentioned before, many of our foster families are still in temporary living situations. This means many of them cannot take any additional placements. Several have had to leave the area due to unemployment or the destruction of their homes. We also had several military families who were relocated. Some children have had to move from homes because their foster family left the area. This is emotionally hard for our children and the foster parents. It is another transition for children who need consistency and heart-breaking for the foster parents who have no control over home repairs, lost jobs, or military orders. Children are still coming into care, and with fewer licensed foster homes, a challenging situation rises to a crisis-level need.

Hurricane Michael has been the most devastating event to happen to our community. I immediately learned the incredible importance of having updated emergency plans and good contact information. Our Foster Family Support Team was able to contact most of our local foster families quickly to ensure their safety. I have also learned the value in having a network of agencies that help children and families. For example, Big Bend Community Based Care in Tallahassee was able to connect our foster families with many supplies that were needed. We have learned many things as foster parents, as child welfare employees, and as a community. The most important thing is that our community is full of strong, resilient, generous, hard-working, and caring people I have had the privilege of serving.

**Perspective from a social worker for the Dependency Case Management Program**

My name is Carla Gayle Wofford, BSW, DCM. I am a Social Worker for the Dependency Case Management Program at Big Bend and Children’s Home Society, in Panama City, Florida. My role is to ensure the safety of the children under Florida Dependency State Court Jurisdiction. I visit
children, parents, and foster parents every 23 to 30 days to provide referral services and link children and adults with resources for treatment, support, and recovery for families. My goal is to help achieve permanency for the children, whether it be reunification with the parents or relatives, or in a new forever home with adoptive parents.

In Florida, we are used to hearing about hurricanes in the Atlantic, Caribbean, and Gulf of Mexico. Hurricane Michael was no different. It was a couple of days before landfall that the preparation really started. We have had so many “near misses” that we had become complacent. In our lifetimes, we had seen and experienced a Category 3, at best. I was here for Eloise in 1975, which was a scary one. In Florida, you get use to the weather hype, and thankfully, most of the time there is more hype than substance. Unfortunately, not this time.

The day before the storm was to land, our leaders told us to drop everything we were doing and go and have a face to face visit with every child on our case load. Most of the children were out of school already, so it was a matter of visiting every home or location to document that each child was safe, and that their caregiver(s) had a safety plan.

I remember not feeling very worried about my own personal situation. I just believed that we would all be okay. I planned to ride out the storm in my home with my daughter and a co-worker.

I finished my last home visit on October 8, 2018 at 6:30 p.m. We were supposed to be spending the next day making preparations or getting out of town with our own families. I was relieved and glad that that most of the foster parents were taking their families and foster children out of the county and even out of the state. I was also concerned about our kids that were left with caregivers in mobile homes. We told them they could not stay in their mobile homes and that they would need to go to a shelter during the storm.

After the storm, everyone was in shock, and it felt good to just keep going; keep doing something, working, helping, planning, cleaning, and recovering. First were the sounds of the generators, then the chainsaws, and then the sirens of first responders. These were the sounds of the first two months after the storm. Line trucks (power trucks) were lined down streets everywhere. We welcomed them. It took three weeks before electricity was restored to my part of town, and even longer to get water and sewer services. Our city was different. It took a while, and then I noticed that the new normal began to feel normal. I did not want the chaos that was our city to feel normal.

I felt so lucky and blessed that I was able go back to work almost immediately after the storm. I returned to work on October 16, 2018. All of
my kids and families survived the storm without injury to their bodies. I cannot say the same for their minds or their emotions. Many of my parents, especially those struggling with any kind of addiction to substance abuse, relapsed during the storm. It was easy to understand why. I had often thought how much easier it would be to just numb out through the whole experience.

The kids were out of school for over a month. This was hard for the parents and the caregivers. It was a period when kids and parents spent more time together. Children and adults do not do well without structure. My job, visiting these families, is what kept me stable and motivated. I needed them just as much as they needed me. The kids and the families inspired me. They were determined to survive and determined to stay together.

As for our agency response, I think we could have prepared the parents better. After the storm, parents were frantic to know where their children were and if they were okay. Parents also wanted to know when their children would return, and how long it would take before they could resume visits with their children. For several weeks, some parents were not able to see their children, which was difficult. Most of the caregivers were great about maintaining contact with the parents of foster children.

I am proud of the way the child welfare community came together. We all managed to have Halloween, Thanksgiving, and Christmas among the ruins caused by Hurricane Michael. Some in our community are still suffering from the lack of housing, and there are parents not able to reunify with their children due to lack of housing.

As a case manager, I was able to experience a small part of what our kids go through in their lives. I have a better understanding of the disruption, uncertainty, loss of normalcy and of favorite possessions, and the feeling of security that we sometimes take for granted.

**Lessons Learned**

In Florida, hurricanes are a part of life, and everyone is encouraged to make preparations. For many, these preparations are overwhelming and become more complicated when working with individuals with SPMI and families involved in the child welfare system. It is important to remember that evacuation and emergency plans are important and agencies responsible for individuals and families must ensure that the plans are adequate and that resources are available to carry out the plans. Once the immediate emergency has passed, it is critical to quickly contact the families and individuals to ensure their safety and to assess needs. Some of those in care may need to be relocated due to a catastrophic loss, and
others may need immediate repairs. Staff supporting the effort must understand how to access the services needed. Most plans include preparations to meet immediate needs; however, the needs that extend beyond the immediate must also be part of the plan. The ability to get medications more than a week after the event and ensuring the parents of the children in care know how to contact their children and can visit them are only examples. Additionally, individuals and families in care may have a history of trauma, and dealing with another loss and the additional stress often complicates the recovery process.

Our work with individuals and families in care is critical. However, agency management must consider the impact of catastrophic events on staff who may also experience personal loss, trauma, and have needs. These needs may include access to adequate communication, transportation related to their job, and the needs of their own children and families. Staff members may be part of the recovery efforts and be part of families who need recovery assistance for physical and emotional needs.

In the aftermath of Hurricane Michael, staff members lost a sense of control and found support in the resiliency of the community, relying on one another for support, encouraging others to pitch in, and staying busy. Having a sense of purpose and making a difference were important to the staff and helped in the recovery for themselves, the community, and for the individuals and families they served. The importance of making a difference and watching the community rebuild cannot be understated. Hopefully, the lessons learned in the affected area will not be forgotten and will help improve the response during any natural or human caused disaster.