

THE PUBLIC HEALTH.

MEETING THE EMERGENCY IN FLORIDA.

The four essential requirements in the emergency period of a disaster are—medical and nursing care; supplies, *i.e.*, food and clothing, and shelter—consequently when the tragedy in Florida occurred the disaster relief units at Red Cross National Headquarters in Washington, and in the Chapters in the area, began to function. In practically everyone of the States there is a Red Cross Nursing Field Representative who is responsible for the supervision of the rural public health, and other nursing activities which may develop under the auspices of a Red Cross Chapter. The Nursing Field Representative of Florida was out of the State on a vacation. She was asked to report as promptly as possible. The storm occurred on September 19th, and she reached Miami by the morning of the 21st, accompanied by the Medical Director of the American Red Cross. They found a good local citizens' committee already organised, in which the Red Cross Chapter was participating. The sick and injured were the first consideration. This meant additional nurses and doctors. All local resources were utilised, such as hospitals, but as there are rarely vacant beds, emergency hospitals and first-aid stations were promptly organised.

As soon as the word of the disaster reached National Headquarters of the American Red Cross in Washington, the National Director of Nursing communicated by telegraph at once with the State and Local Committees in Florida and the adjacent States, telling them that nurses would probably be needed and to hold groups in readiness for assignment. This does not mean they were detached from the work that they were doing, but they were contacted, and the question of their availability was determined. One must understand the organisation of the American Red Cross Nursing Service in order to know what we mean by State and Local Committees. These are composed of nurses who are responsible for recruiting nurses for the Red Cross Nursing Service and who hold the names of all enrolled Red Cross nurses in their territory. These are under the general direction of the Committee. It has many other duties but this is the primary function. The members serve entirely without compensation.

There are in the United States and its Insular and Foreign possessions something over 200 State and Local Committees, upon which between 1,400 and 1,500 enrolled Red Cross nurses serve voluntarily. The Committees in Florida hold between 300 and 400 nurses on their list. Naturally these were first utilised. Many nurses not enrolled were also used, for the Red Cross policy is to use local resources as far as possible in order to save expense, and also to give employment to those who may have suffered from the disaster. As information from the outlying districts was received, it became apparent that additional nurses would be required. The committees in the adjacent States of Georgia, Alabama, Tennessee and South Carolina were immediately authorised to assign groups varying in size from three or four to twenty or more. The staff finally included 341 nurses.

As soon as possible Miss Olive Chapman, who formerly served as Director of Nursing, first in the Mountain and then in the South-Western Division of the American Red Cross, and who had directed the nursing in other disasters, including the memorable "tri-state" in 1925, was asked to proceed to Florida and assume the general direction of all the Red Cross Nursing activities in the disaster area. The Red Cross established its headquarters in Miami. It has been said that it was not unusual for a thousand or more people to call at the office each day, asking for assistance, making inquiries for relatives, etc. One of the first steps taken by the American Red Cross in any disaster is to report

to the State and Local Health authorities, and ask if it can be of service. This contact was very promptly made, and in conference the disaster area was zoned. Eight zones were established, in which a special unit, including a Manager and Nursing Director, with an adequate staff, were placed. As this particular disaster was caused by wind and rain, as well as water from the sea and Lake Okeechobee, which overflowed its banks, the question of epidemics of disease became a serious one, especially as wells and cisterns had been invaded by the surface water. Consequently, the nurses chosen as Zone Directors were those with special experience in public health nursing. Thousands of people were inoculated with anti-typhoid vaccine, and families were followed to their homes where nursing assistance was given as needed. It has been estimated that between 18,000 and 20,000 families were homeless. These are scattered through 13 counties, the majority, however, being in Miami. There were 329 deaths, about 6,500 injured, excluding slight ones. It was estimated that over a thousand were serious. Certain villages were entirely destroyed, some being under water. The reconstruction and rehabilitation work, however, has proceeded with great rapidity, as a large number of social workers were put to work on this problem. The last report states that 269 are now on duty. The nursing staff is gradually being reduced, and at present about 100 nurses are being utilised.

The contributions for this disaster made to the American Red Cross from all parts of the United States and foreign sympathisers amount to nearly four million dollars. All of this money will be used in the interest of the sufferers themselves, the cost of administration being assumed by the National Headquarters office. The story of rehabilitation is a very interesting one. For example—the Red Cross is already replanting the citrus trees in certain localities where they were entirely uprooted. Seeds are being supplied to the farmers, also farm implements, etc., and homes are being rebuilt. Individual awards, however, are based on the need of the individual and not the loss.

It was, indeed, the last straw when the tornado, accompanied by torrential rains, which broke over Cuba, also swept through the devastated area in Florida. While it was not as severe as the former, there was considerable damage, and some loss of life. The effect upon the people, however, was tragic. This storm broke on October 20th. Two hundred nurses were mobilised, ready for service, 115 of these were called out. A unit of 15 was held in readiness to proceed to Key West if needed. In Miami and other points where refugees were housed temporarily in schools, lodges, churches, etc., one to six nurses were detailed to each for the care of refugees who might be ill due to exposure or injury during the storm. As the storm raged throughout the night there was no sleep for anyone, and the nurses spent the night allaying the fears and anxieties of the refugees.

While details of organisation incident to such a disaster are informative and interesting, in justice one should return to the Local Committees of nurses, the quiet workers, so to speak, who round up the nurses for service and send them into the area upon orders from the National Director. It seems a simple matter to send a telegram from National Headquarters to the Chairman or Secretary of a Committee, asking to have twenty Red Cross nurses ready for assignment to duty should their services be required, but what about the members of the Committee who must do this work? They are usually busy nurses, employed in various ways. It means hours of telephoning for them, for the nurses are widely scattered over their territory, and the majority may be busy. It is no easy task to detach a nurse from her work, for while the nurse recognises her moral responsibility to the Red Cross as a member of its enrollment, others may not. She, however, is never ordered into service. It may be necessary to secure a substitute for her. Institutions,

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