Food Supply and Emergency Feeding In Civil Defense

By PAUL B. MURPHY, LEONARD R. TRAINER, B.S., and JAMES M. HUNDLEY, M.D.

The need for feeding the homeless and injured as soon as possible after a disaster has been demonstrated repeatedly. Emergency feeding is important not only to maintain the nourishment of the affected individuals, but it is essential for morale purposes. The experience of Great Britain during World War II demonstrated that a hot drink and a warm meal immediately after a disaster often marked the point at which individuals began to pull themselves together.

A community which can organize mass feeding within several hours after a disaster vividly demonstrates that it is still functioning, and this demonstration tends to allay anxiety and panic. Of equal importance in maintaining morale and in allaying public anxiety is the resumption of

Mr. Murphy is food consultant for the Federal Civil Defense Administration and was chairman of the United States delegation to the Combined Conference on Administrative and Scientific Aspects of Food in Civil Defense, London, November 26-December 13, 1951 (see Public Health Reports, July 1952, p. 607). Mr. Trainer is director of the food distribution branch, Production and Marketing Administration, Department of Agriculture. Dr. Hundley is consultant on nutrition for the Federal Civil Defense Administration.

This paper is based on material presented at the London conference. A second paper, by Dr. Hundley, which follows on page 864, outlines the primary characteristics of emergency food reserves. normal food wholesaling and retailing at the earliest possible moment. Finding food in the shops where the public is accustomed to seek it constitutes a major step in the return to "normalcy" and additional evidence that the community is functioning and will survive the disaster. Furthermore, this enables those who can remain in their homes to procure food and thus relieve the burden on public feeding facilities.

Disasters from natural causes are not strangers in the United States. Many organizations, especially the Red Cross, have had extensive experience with this type of problem. However, man-made disasters, which atomic weapons could produce, pose problems of a magnitude and complexity not experienced in this country. Should one or more of our major cities be subjected to atomic attack or to intensive conventional bombing, the resources of large sections or regions might have to be mobilized. A nationally integrated plan is necessary.

The Federal Civil Defense Administration (FCDA) has developed plans and recommended organizational patterns which can be adopted with reasonable uniformity in all parts of the Nation and which should result in the activation of State and local units capable of meeting any anticipated situation when functioning singly or collectively.

Food Supply

The National Level

It is evident that after attack the requisite supplies of food should be available whenever and wherever needed for mass feeding and for home consumption. The basic plan calls for necessary food supplies to be available in normal commercial channels rather than in special stockpiles or reserves. Two Federal agencies—FCDA and the Department of Agriculture (USDA)—share primary responsibility at the national level. Both agencies with full recognition of the interdependence of their respective responsibilities have developed a joint plan for emergency feeding.

The Department of Agriculture has the basic responsibility for the Nation's food supply and for securing maximum food production to meet all needs, including emergency feeding. Further, USDA is responsible for directing food distribution-except actual rationing-so that necessary supplies will be available. USDA has the responsibility of instituting cooperative programs with the food industry and with food wholesalers and retailers to assure that the system of commercial food distribution carries sufficient food inventories to meet both current consumption and emergency food needs. In an actual emergency, USDA will effect any regional or national redirection of food distribution which may be requested by the Federal Civil Defense Administration to assure delivery of food supplies to damaged cities and to reception and evacuation areas as soon as possible after attack, or to areas affected by civil defense operations. USDA also is responsible for assuring adequate food supplies during reconstruction and rehabilitation pending the reestablishment of normal food distribution channels.

Federal Civil Defense Administration works closely with USDA in implementing the above plans and in obtaining the voluntary cooperation of the entire food industry on a nation-wide basis. The fullest cooperation of the food industry and the food trade is essential at national, State, and local levels if the plans outlined are to function effectively.

Federal Civil Defense Administration has the further responsibility for perfecting and sponsoring operational plans which will translate the national plan into effective functioning programs at the State and local levels. FCDA Policy Memorandum No. 10 and FCDA Advisory Bulletin No. 78 have been distributed to all State and major local civil defense units. They describe in detail the State and local plans recommended.

Leadership in the State

FCDA recommends that, at the State level, the governor or the civil defense director appoint a civil defense food director who is thoroughly familiar with the food industries in the State. In most instances, the food director should be a volunteer from leaders within the food industries of the State. The food director

Leadership Channels for Emergency Feeding

NATIONAL . . . Federal Civil Defense Administration Department of Agriculture STATE Governor and Civil Defense Director Civil Defense Food Director-Chairman of Food Advisory Committee Food Advisory Committee-1 member from each local food advisory committee LOCAL Civil defense directors in major trade centers Civil defense food advisory committees Directors of emergency feeding in civil defense Department of Agriculture consultants Representatives of local food industries

would serve as chairman of the State food advisory committee which would include one member selected from the membership of each local food advisory committee.

Caterers and restaurateurs

Volunteer workers

The State civil defense food advisory committee should perfect, with civil defense supply and transportation divisions cooperating, plans to procure and transport necessary food. A uniform plan of voluntary controls covering the

sale of food for the entire State should be developed in the event of attack.

Local Leadership

A local civil defense food supply advisory committee should be appointed by the local civil defense director in each major jobbing center in the State. The area supervisors of the food distribution branch, Production and Marketing Administration, USDA, are available for consultation in choosing the centers. The local committee should include local representatives of all the important fields of the food industry.

The local food committee functions the same as the State committee but is limited to respective local areas. In addition, the committee must establish a working relationship with local leaders in charge of emergency feeding. Estimates of the food requirements for feeding the homeless, for feeding in hospitals, and for feeding essential civil defense workers and other groups must be obtained so that the food committee can determine the magnitude of its task in light of available resources.

Precise definitions of responsibility must exist among the various local divisions of civil defense assigned to activities related to emergency feeding. The local units must have a clear channel to their respective State and regional organizations, and they, in turn, to their national organization.

Emergency Feeding

Advance planning is essential. Each local civil defense unit must develop an organization capable of preparing and serving meals on a mass basis with limited facilities. Normal water supplies may be unavailable. Public utilities will undoubtedly be disrupted. Electricity and gas for cooking may be unavailable. Plans must be considered for using alternative cooking fuels—bottled gas, solid fuels, or emergency generators—and for cooking with improvised equipment. Thousands of meals may have to be served under primitive conditions and with only a few hours' notice.

A director of emergency feeding must be appointed in each local civil defense unit. The existing facilities for the mass preparation of food must be surveyed. Sites must be selected

for feeding the homeless, the injured, and evacuated groups. The selection must be done in consultation with local leaders who are responsible for medical services and for other civil defense divisions. Plans must be made to feed essential civil defense workers engaged in fire fighting, rescue work, and repair of public utilities. Because workers may have to be fed where they are working, the transportation of prepared food will be another problem.

The facilities of caterers and restaurateurs should be fully utilized. Arrangements should be formalized with these groups so that they can secure food and go into action with a minimum of delay when authorized to do so by competent authority.

The importance of advance planning and organization for emergency feeding cannot be overemphasized. It is obvious that the best food supply arrangements will be useless if personnel and facilities are not available to transform the raw food supplies into nourishing, acceptable meals. It is also obvious that many workers will have to be available and trained.

Recruitment and Training

Groups of volunteers must be recruited, organized into teams, trained, and assigned to the selected feeding centers. The experience and "know how" of dietitians, nutritionists, home economists, commercial chefs, as well as church groups, and such public feeding groups as school lunchroom personnel, should be utilized in training activities. The existence of experienced local Red Cross units in many areas constitutes a valuable resource not to be overlooked.

Coordination of Activities

The activities of the emergency feeding group must be coordinated with other aspects of mass care—clothing, shelter, and evacuation.

It is especially important to establish a sound working relationship between the emergency feeding program and health services. The responsibility for feeding in temporary hospitals and in first-aid stations, for the training of the necessary workers to prepare and distribute the food, and for provision of the required quantities of food must be clearly understood. Any special foods or abnormal quantities of specific food items which will be required by the medical services should be known in advance in order to arrange necessary procurement.

The sanitation services also have important functions in emergency feeding not only with respect to food sanitation but also to safe water supply, garbage disposal, and to the special problems posed by atomic, biological, or chemical warfare.

International Rheumatic Fever Study

An international cooperative study of rheumatic fever, the first of its kind, has been under way since early 1951 at 13 research centers in the United States, Great Britain, and Canada. Scientific investigators of the three nations are measuring the comparative values of treating rheumatic fever with one of the hormones—ACTH or cortisone—or with salicylates. Although the acute symptoms of rheumatic fever usually subside with all three agents, no clear difference has as yet been established in the rate of completeness of this improvement, according to the preliminary report of a panel of investigators.

A summary statement of the findings in the preliminary report was presented in June to a joint scientific session of the Council on Rheumatic Fever and the American Rheumatism Association in Chicago. The text follows:

"A group of investigators in the United Kingdom, Canada, and the United States initiated in January 1951 a cooperative study on the relative value of ACTH, cortisone, and salicylates in the treatment of rheumatic fever and the prevention of rheumatic heart disease. The plan of study provides for uniform criteria for the diagnosis of rheumatic fever and for the degree of rheumatic activity required for the admission to the study, the random allocation of patients to the three treatment groups, a defined dosage schedule of the drugs for a fixed period of time, a specified period of observation following treatment, and a long-term follow-up schedule. It also lays down precisely the fre-

quency and type of clinical and laboratory observations to be carried out on each patient.

"To date, in all three countries, 658 cases have been admitted to the study, and the analysis of rather less than half of these is the basis of the preliminary report. These cases were analyzed for changes in those symptoms, signs, and laboratory observations usually considered important in evaluating the course of acute rheumatic fever. In the type of cases admitted to the trial and with the regimen of treatment laid down, it appears that individual symptoms, signs, or laboratory observations may have been affected more favorably by one or another of these three drugs, but no consistent pattern is evident. In short, no firm conclusions can at present be drawn concerning the drug most effective in the control of the acute illness. The cases have not been under observation sufficiently long to provide data on the prevention of rheumatic heart disease.

"Admission of new cases to the study will be brought to an end later this year. It is anticipated that a total of 750 cases will be available in all three countries for complete and detailed analysis of the effects of the drugs on the acute course of the disease and later, after adequate follow-up, on the prevention of rheumatic heart disease."

Funds for the international study are being supplied by governmental and voluntary health agencies in the three nations and include the National Heart Institute of the Public Health Service, Federal Security Agency.