

Center for Disability Rights, Inc.

CDR Policy Position: Emergency Preparedness

Disabled people have often been afterthoughts in emergency and disaster management and planning. Time and again our community has paid the price for not being considered. We have been left out of evacuation strategies. We have encountered inaccessible shelters. We frequently run into emergency responses that don't engage our languages or methods of communication. Not accounting for the needs of the disability community in emergency and disaster response violates the Americans with Disabilities Act.

Disaster responses have often been sites of disability discrimination. As with other forms of oppression, disability discrimination is often experienced intersectionally. Like the Disability Community, Poor communities and Communities of Color are often disproportionately impacted by disasters and the responses to them, and people live in multiple communities get the brunt of it even harder. For this reason it is important to consider intersectional communities in every aspect of emergency/disaster response.

While the particulars of any disaster are not wholly foreseeable, many of the Disability Community's requirements are well documented, and agencies and planners have no excuse for not meeting them. The following is CDR's guidance for all agencies and organizations involved in Disaster planning.

- Centers for Independent Living (CILs)
- Community organizations
- Disability specific organizations
- FEMA
- First responders (Paramedics, law enforcement, Fire Department)
- Hospitals
- Protection & Advocacy organizations
- Schools
- Social Services
- State & Local government and their various agencies
- The Red Cross
- The State National Guard

Plans are Beside the Point: Planning is Everything

Having a specific plan for an emergency or disaster is less valuable than the act of planning. It is the difference between having an escape route and having a map with every possible way out.

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The reality of any emergency/disaster situation is that things will occur that can't be anticipated. Planning allows you to deal with whatever comes up. All stakeholders should be engaged in their own emergency preparedness planning and those plans should be shared with the partnership as a whole. This planning must include both organizational and personnel preparation. The coalition should come together for regular exercises to play out and rehearse emergency responses. Not only will these serve to better prepare everyone to respond to a real emergency but it can also highlight unforeseen gaps in planning.

Things to Consider in Planning

An Inventory of Stakeholder Capacities

Knowing what all of your stakeholders bring to the table is vital to responding to a need in a given situation. Capacities to keep track of include:

- Accessible Transportation & Drivers
- Supplies of Durable Medical Equipment
- Food, Water and Toiletry Supplies
- Sign Language interpreters
- Pharmacy & Emergency Medical Supplies
- The Physical accessibility and capacities of shelters (the numbers they can hold safely)

The planning process that must also include development of disaster specific Memoranda of Understanding (MOUs), agreements used by agencies to define the roles and relationships between and among agencies and other organizations during a disaster.

Outreach and Education

Coalitions in general and local and state agencies in particular need to reach out to the Disability Community. This is a vital part of the planning process and necessary to understanding the needs of the community within a given local context. It is also useful in developing both the agencies' and the community's ability to communicate effectively with one another, a skill that will be crucial in the midst of a disaster. Outreach is also necessary to disseminate information to the community on what to do during a disaster or emergency situation.

Evacuation

Not all emergencies require evacuation, however, the ones that do highlight the need for disability inclusive planning. Not only is there a need to identify accessible transportation options, but state and local emergency management officials must have access to them when the need arises. This should be part of the MOU with any paratransit, school district, CIL or anyone else who might have accessible vehicles that could be used during a disaster. Included in these considerations is the need for people who can drive and operate these vehicles. Ambulance services are only ever a very partial solution for accessible transport and only where there is an MoU in place ensuring that evacuees will be charged for their own evacuation. Ambulances rarely are able to accommodate power wheelchairs and a person should only be separated from their chair as a last resort when no other options are possible. Having a

comprehensive communication strategy with built in redundancies is also critical to executing a successful and safe evacuation.

Shelters

Shelters must be accessible to all. **There is no disaster loophole in the ADA** that allows for segregated emergency shelter solutions. Accessibility must be a primary consideration in the identification of shelters. Alternative shelters for people with disabilities violate the rules set forth in Title II of the ADA. Disabled people's right to live in the community does not go away in a disaster. For this reason shelters must be evaluated for accessibility as part of the selection process. Access considerations must take into account the whole shelter experience, including parking, entry, signage, navigation within the site, bathroom and shower facilities, as well as the use of accessible communication strategies when the shelter is in use. Shelter workers must be trained to accommodate people with disabilities as well as of the potential scope of such accommodations.

When the shelter is in use, accessibility and in particular navigability by people using mobility devices such as walkers and wheelchairs must be ensured at all times. Not only must doors be wide enough for mobility devices but the hardware for opening them must be accessible for people with both reach and dexterity issues. Paths must be kept clear of boxes, luggage and other items. These same paths must also be clear of overhead or wall mounted objects that jut out into pedestrian pathways which can be hazards for blind people or those with low vision. Accessibility also means accommodating sensory integration needs; among other things this means having a quiet room where light levels can be adjusted. It is recommended that fluorescent lighting be avoided in these rooms. Furnishings should be comfortable. It can be helpful to have weighted blankets and stim toys.

Often during evacuation, people are forced to leave much of their equipment behind. Shelters must be stocked with durable Medical equipment. Items that will often be useful include:

- Walkers
- Manual Wheelchairs
- Canes
- Hospital beds
- Crutches
- Hoyer Lifts
- Commode/Shower chairs
- Bed Pans
- Blood Sugar monitors/test strips
- CPAP devices and accessories
- Nebulizers
- Suction pumps
- Incontinence supplies

CILs can be helpful in acquiring some of this as they often have large stocks of spare equipment for loan and donation. Equipment can also be solicited from nursing facilities and local hospitals. Some of these items are likely to run out during an extended shelter stay. Planners

should have a list on hand of where these supplies can be acquired as needed, particularly high volume items like incontinence supplies.

Under the Americans with Disabilities Act, it is a requirement that shelters accommodate service animals with their owners. **Service animals are not pets and should never be separated from their owners.** Space for their care, toileting, and feeding must be available within all shelters.

Communications

Effective communication is in many ways the lynchpin of any emergency or disaster response. Communications must be made accessible to all. This means any and all written materials need to be available in braille and in a screen reader accessible format. Any emergency announcements made either at press conferences or on television must include an on screen ASL interpreter at all times as well as Computer Assisted Real Time Transcription Services (CART) to offer captioning. Shelters must be equipped with video phones and WiFi so Deaf evacuees can contact loved ones through either Video Relay Services or text. It is also important to have a hearing loop system available. Augmentative and alternative communication devices must be on hand, for non-speaking individuals.

Something to avoid

While many have called for community registries of people with disabilities, CDR opposes this for several reasons. People move and fail to update their addresses, making registries out of date and wasting the time of first responders or relief workers trying to get in touch with these people. People on registries often assume that it means someone will automatically come for them and are less pro-active in their own response to an emergency or disaster. Finally, there is simply too long a history of lists of vulnerable people being used to the detriment of the people they purported to serve.

The Center for Disability Rights, Inc. (CDR) is a non-profit service and advocacy organization devoted to the full integration, independence and civil rights of people of all ages with all types of disabilities.