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Including the Whole Community in Emergency Preparedness and Response

Virginia Public Health Emergency Preparedness Seminar

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Purpose

- The purpose of this presentation is to address how emergency preparedness professionals can integrate their planning processes.

- This presentation is not intended to provide, nor is it a substitute for legal services.

- If you require such professional advice or services, please seek the advice of a qualified professional in your area.

Learning Objectives:

- **Engagement** vs. outreach during planning and exercising to learn about needs.

- **Building trust** before emergency occurs.

- **Identifying community champions** to support desired outcomes

Outcomes:

- Identify best practices to help emergency professionals integrate access and functional needs throughout their planning processes.

- Change the emergency management culture from one of planning for, to one of planning with, access and functional needs stakeholders.

- Raise awareness of the legal requirements of the ADA and other civil rights protections in emergency preparedness

Virginia Inclusive Emergency Management Initiative

What is the

Virginia Inclusive Emergency Management Initiative?

The **Virginia Inclusive Emergency Management Initiative (VIEMI)** is a collaboration between the Virginia Board for People with Disabilities (VBPD) and the Virginia Department of Emergency Management (VDEM) to improve emergency preparedness, response and recovery for Virginians with disabilities and/or other access and functional needs.

VIEMI is made possible through Public Health Workforce Funds (PHWF) provided through the U.S. Administration on Community Living (ACL),

Access and Functional Needs

What are

Access and Functional Needs?

Everyone needs <u>access</u> to resources to <u>function</u> during an emergency, regardless of who we are or where we live.

People with disabilities and other access and functional needs may require assistance and/or accommodations before, during, and/or after a disaster in functional areas, including but not limited to: **communication, transportation, maintaining independence, support, safety and health care.**

Access and Functional Needs

People with access and functional needs includes people with:

- Disabilities (e.g., physical, cognitive, sensory, developmental)

- Limited English proficiency and/or low literacy

- Chronic health needs

- Limited access to transportation

Access and Functional Needs

(Continued)

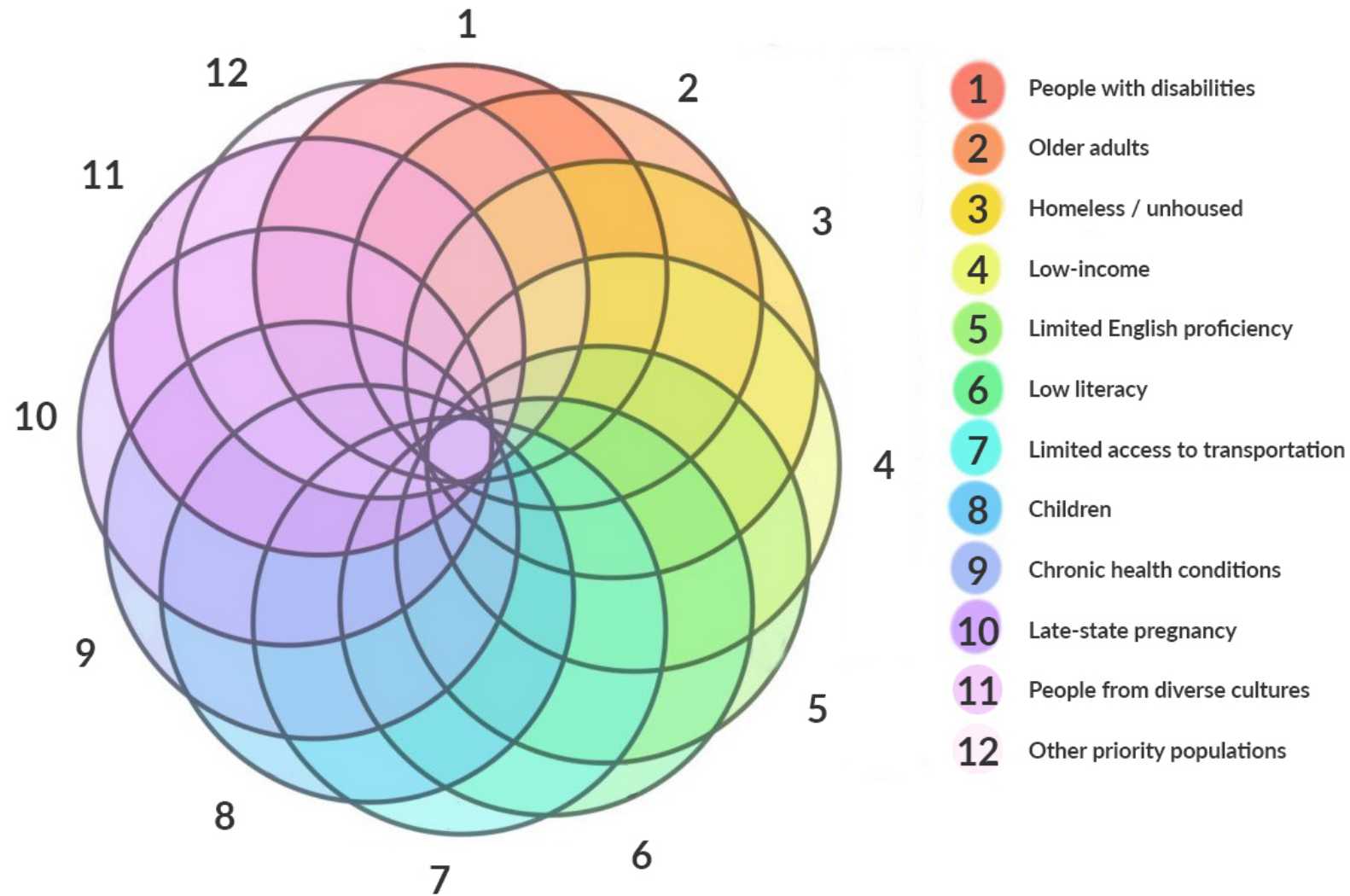**People with access and functional needs also includes people who are:**

- Older adults

- Experiencing homelessness/ housing insecure

- Low-income

- Children

- In late-stage pregnancy

- Living in institutional settings

- From diverse cultures

- In tribal communities

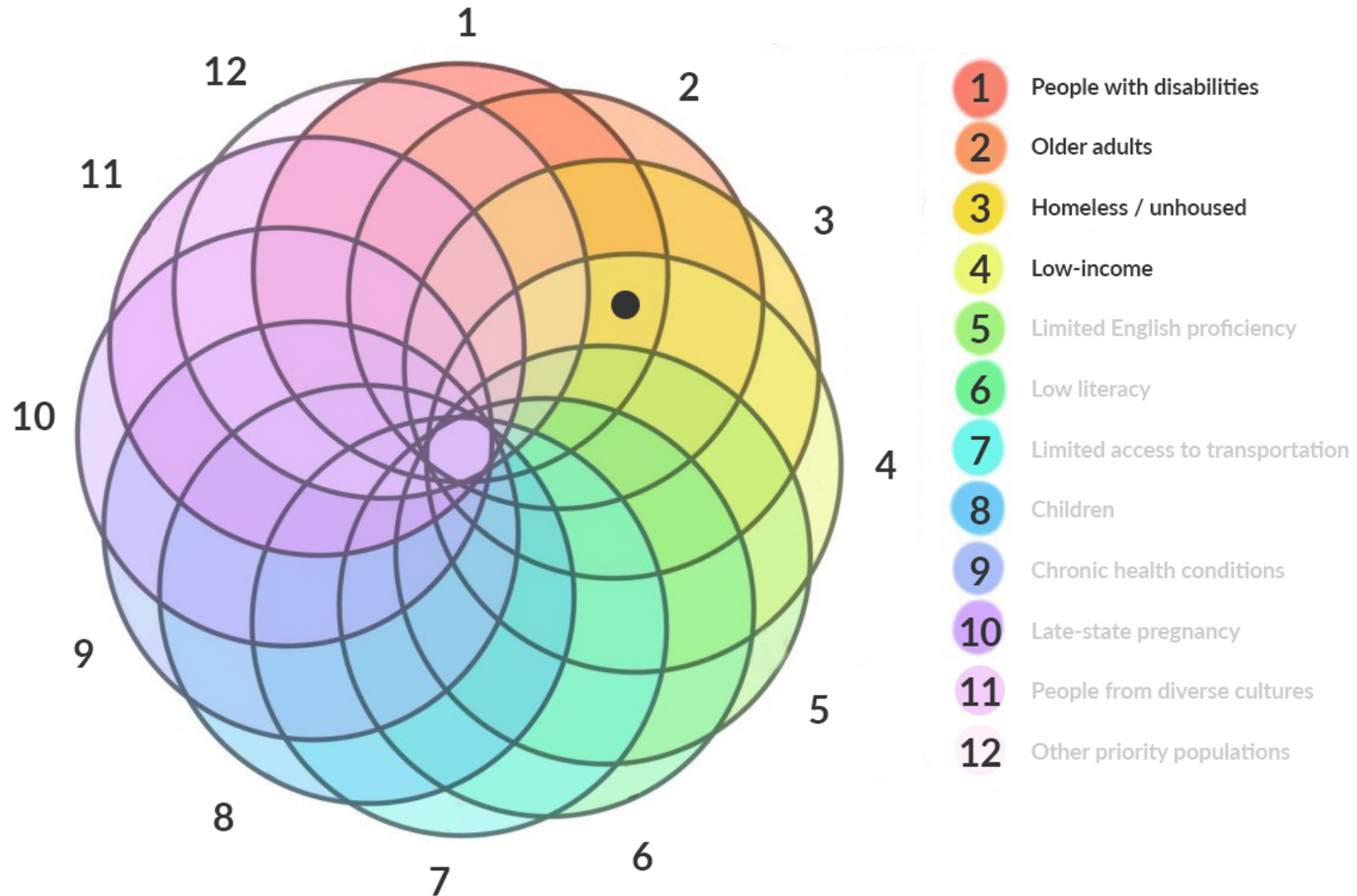# Other Priority Populations

People with access and functional needs also include:

- People with limited access to internet/broadband

- People who live in rural/sparsely populated areas

- Veterans

- LGTBQ+ Community

- People who live/work in settings that put them at increased/higher risk of harm

AFN Intersectionality

Legend:

1. People with disabilities
2. Older adults
3. Homeless / unhoused
4. Low-income
5. Limited English proficiency
6. Low literacy
7. Limited access to transportation
8. Children
9. Chronic health conditions
10. Late-state pregnancy
11. People from diverse cultures
12. Other priority populations

AFN Intersectionality

1	**People with disabilities**
2	**Older adults**
3	**Homeless / unhoused**
4	**Low-income**
5	Limited English proficiency
6	Low literacy
7	Limited access to transportation
8	Children
9	Chronic health conditions
10	Late-state pregnancy
11	People from diverse cultures
12	Other priority populations

"Disasters are always inclusive. Response and recovery are not, unless we plan for it."

-June Isaacson Kailes, Disability Consultant

The Whole Community Approach

- Plans must comply with the Americans with Disabilities Act (ADA). Children and adults with disabilities are entitled to equal opportunity to participate in programs, services, and activities in the most integrated setting (FEMA, 2010). To achieve and sustain equal access and full inclusion before, during and after disasters, Whole Community Planning is required.

- "The Whole Community" Planning approach to emergency management means to implement solutions that serve the entire community and leverage the resources that the entire community brings to the table.

- Community-based planning is the concept that planning must not only be representative of the actual population with the community, but also must involve and engage the whole community in the planning process (Martinez, 2022).

Why Inclusive Emergency Management?

- Emergency professionals strive to create secure and resilient communities.

- Emergency plans that are not integrated marginalize individuals with access and functional needs and can lead to higher rates of hardship, death or injury before, during, and after emergencies.

- Emergency professionals must be prepared to lead proactive, collaborative, and cooperative planning efforts with access and functional needs stakeholders to create, revise, and evaluate their emergency plans.

- Titles II and III of the ADA prohibit discrimination on the basis of disability and requires emergency managers to communicate effectively with individuals with access and functional needs.

COMMUNITY ENGAGEMENT

1 in 4
adults in Virginia
live with a disability.

CDC, 2023

24
Percent

VIRGINIANS HAVE A
DISABILITY
(CDC, 2023)

9.2
Percent

VIIRGINIANS DO NOT HAVE AN
INTERNET SUBSCRIPTION (ACS, 2021)

- **16.5% Virginians speak a language other than English at home.**
  (American Community Survey, 2021)

- **16.3% Virginians are 65 years and older**
  9.9% Virginians are 65 to 74 years old
  4.7% Virginians are 75 to 84 years old
  1.7% Virginians are 85 years old and over (ACS, 2021)

- **10.2% Virginians live in poverty**
  13.1% under 18 years old
  9.7% are 18-64 years old
  8.0% are 65 years old and over (ACS, 2021)

- **96,000+ Virginians gave birth in the last 12 months**
  (ACS, 2021)

- **5,975 Virginians are homeless on a given night**
  (National Alliance to End Homelessness, 2023)

Percentage of Adults in Virginia by Functional Disability Type
(CDC, 2023)
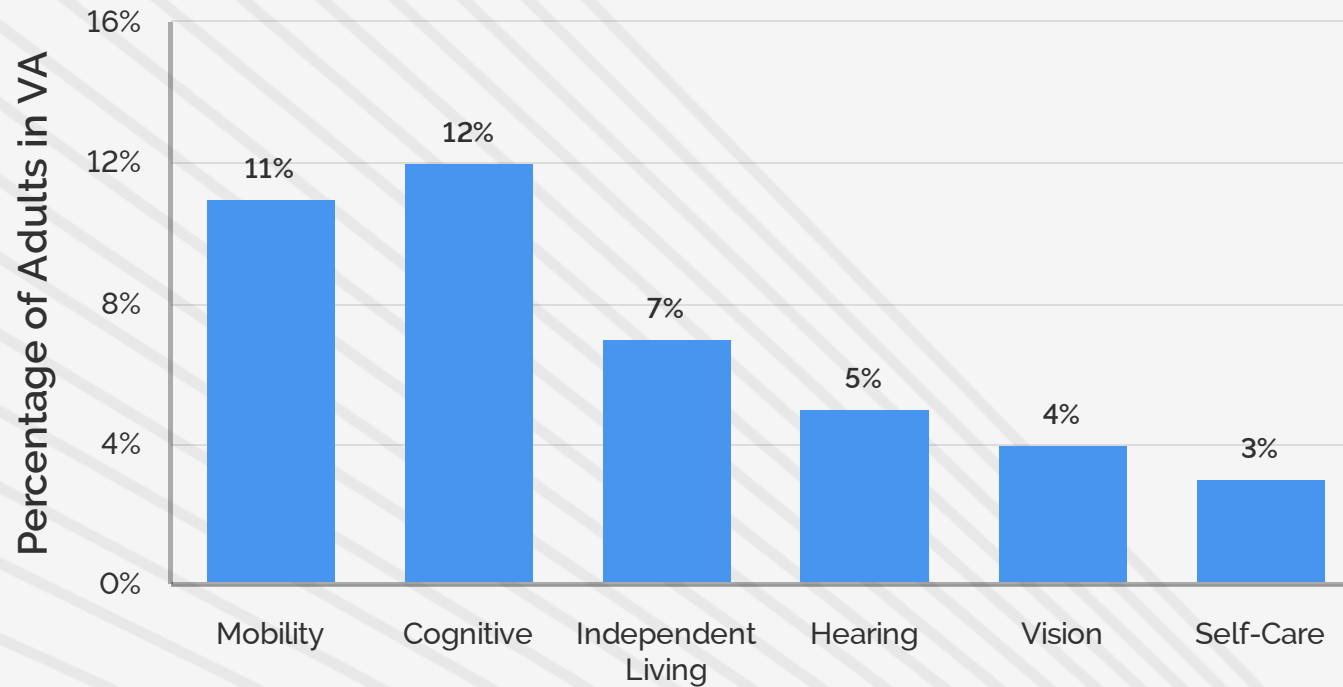
Functional Disability Types:

Mobility: Serious difficulty walking or climbing stairs

Cognitive: Serious difficulty concentrating, remembering, or making decisions

Independent Living: Serious difficulty doing errands alone, such as visiting a doctor's office

Hearing: Deafness or serious difficulty hearing

Vision: Blind or serious difficulty seeing, even when wearing glasses.

Self-Care: Difficulty dressing or bathing

Paradigm Shift

"DISABILITY ONLY BECOMES A TRAGEDY WHEN SOCIETY FAILS TO PROVIDE THE THINGS WE NEED TO LEAD OUR LIVES."

Judy Heumann

STATE DEPARTMENT SPECIAL ADVISOR FOR DISABILITY RIGHTS. CO-FOUNDER OF WORLD INSTITUTE ON DISABILITY. LEADER OF DISABILITY RIGHTS MOVEMENT SINCE 1970, PAVING THE WAY FOR THE ADA.
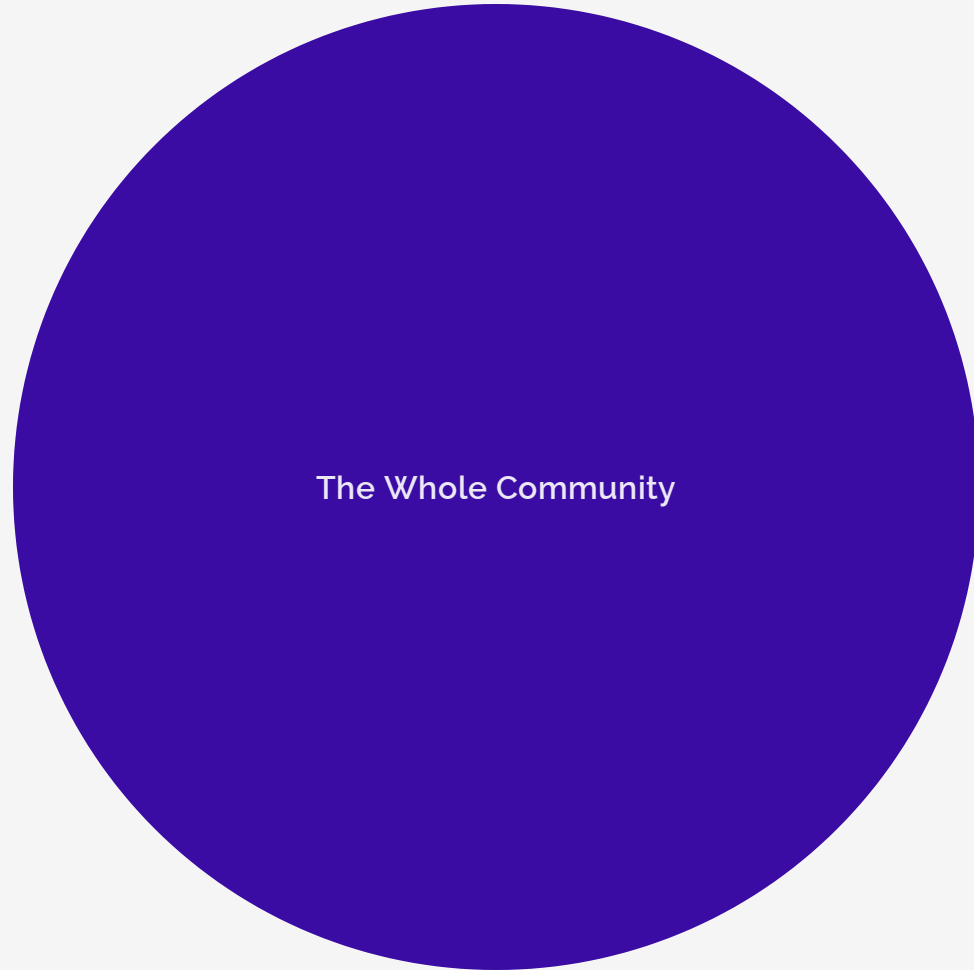
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The Whole Community Approach

(National Disaster Recovery Framework)

The Whole Community

The Whole Community Approach

People with access and functional needs are **a part of** **The Whole Community**, not apart from it.

The Whole Community

People with
Access and
Functional Needs
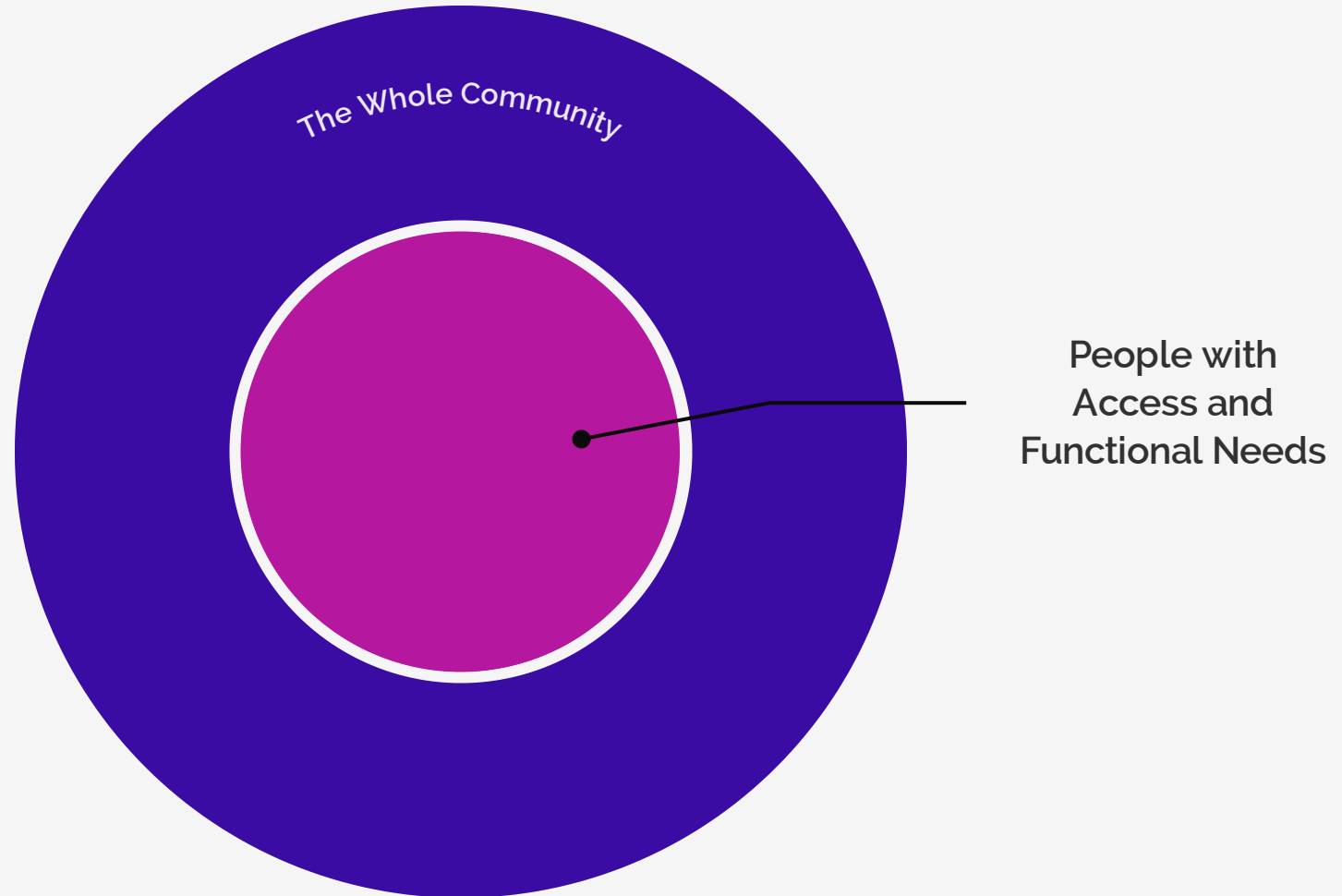
The Whole Community INCLUDES Disability

Disability Cuts Across ALL Access and Functional Needs and ALL of The Whole Community

The Whole Community

People with Access and Functional Need

People with Disabilities
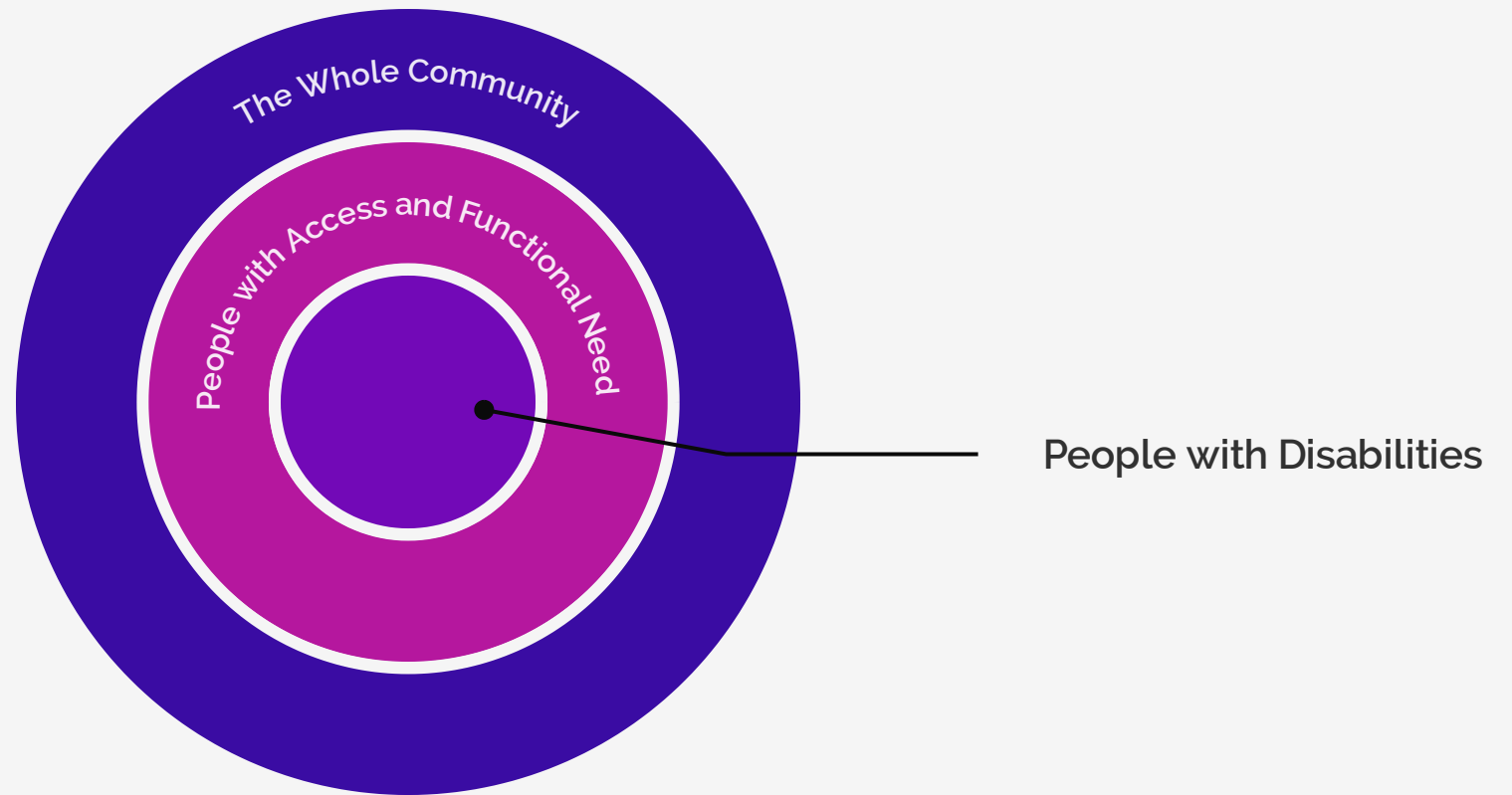
Reminder: The Disability Community is Diverse.

Example: People with Hearing Difficulties

The Whole Community

Access and Functional Needs

People with Disabilities

People with Hearing Difficulties

The Disability Community is Diverse.

The Whole Community

Access and Functional Needs

People with Disabilities

People who identify as Deaf

People who identify as hard of hearing

People who identify as deaf

People who do not disclose and/or associate hearing difficulties with identity
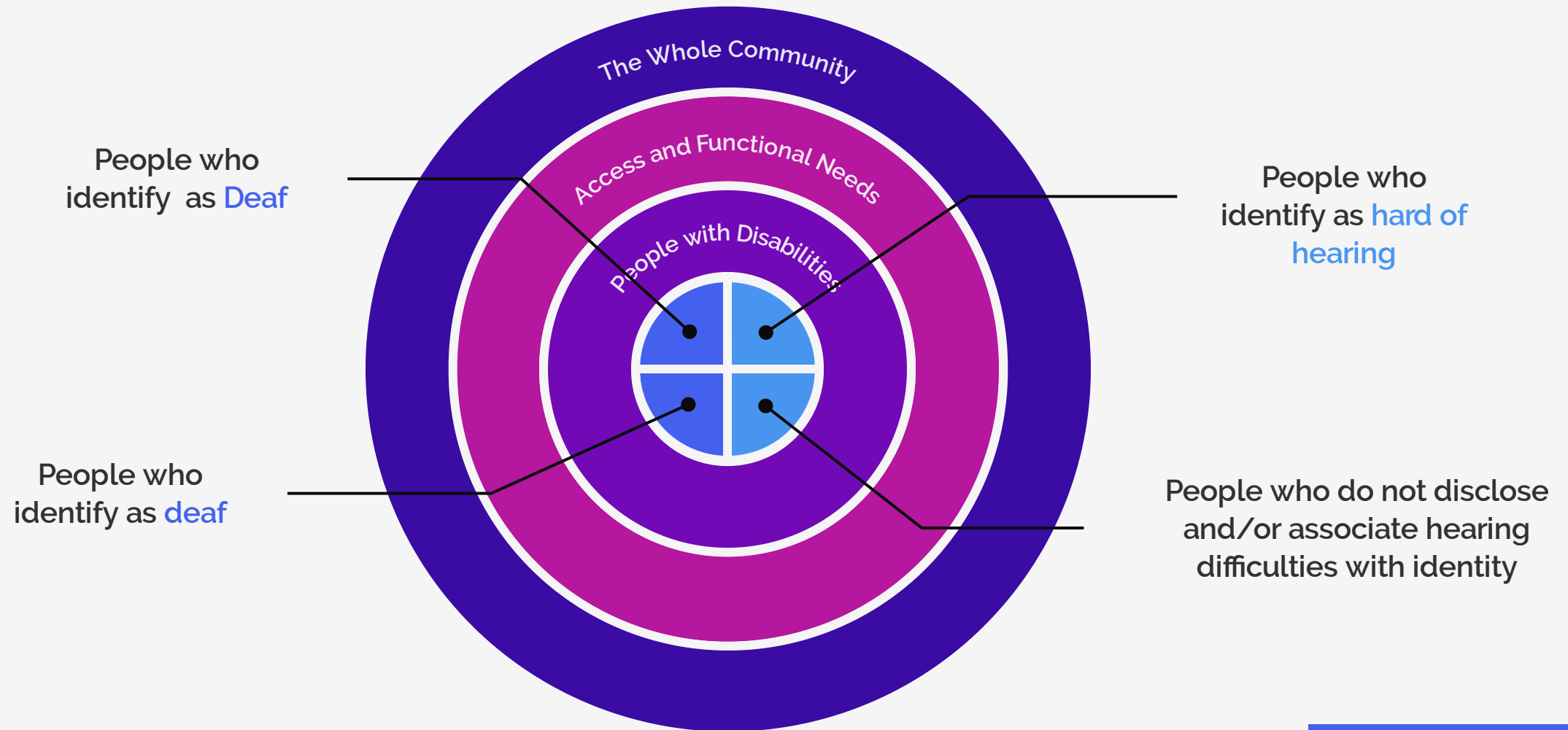
Note: Not to Scale

Community Engagement

Effective practices to engage people with disabilities and individuals with access and/or functional needs, and the organizations that serve them, during the planning and implementation of emergency preparedness, response and recovery.

Makes sure that people with disabilities, are involved in meaningful ways in all aspects of:

- Planning

- Response

- Recovery

Moving from "planning for" to "planning with"

Language Guidelines

- Language influences behavior.

- Emergency managers should model inclusive language as a powerful means of being respectful and thoughtful of all people.

- Note the following inclusive language guidelines and best practices throughout the planning process:

- People-first language should beused

- Use terms consistent with the integration mandate in theADA

- Always be respectful andstraightforward

- Refer to a person's disability only if relevant

- Avoid terms that lead to exclusion

The CDC offers the following examples of people-first language:

- Person with a disability

- Person who has a communication disability

- Person without adisability

- Person who uses a wheelchair

- Person with an intellectual, cognitive, developmental disability

- Person with aphysical disability

- Person with epilepsy or seizure disorder psychiatric disability

- Person with multiple sclerosis

- Person who is hard of hearing

- Person with cerebral palsy

- Person who is deaf

- Accessible parking or bathrooms

- Person who is blind/visually impaired

Nothing about us without us.

Engage people with disabilities and AFN in planning and exercising to learn about needs.

Example: Planning for the Whole Community

- Preparedness and Planning – What needs to be done on the access and functional needs side before setting up testing or vaccination sites?

- Community Outreach and Information Sharing – What is needed to reach the whole community before they come to the testing/vaccination site?

- Registration and Scheduling – What is important for inclusive registration processes?

- Site Setup – What are consistent planning principles to ensure all sites are accessible and meet the needs of all clients and visitors?

- Transportation – What is needed for everyone in the community to be able to get to and from the testing/vaccination sites?

- Assessing and Adapting Sites – What can be assessed during the testing/vaccination process to continuously adapt to meet the real-time needs of the community?

© 2011 June Isaacson Kailes, Disability Policy Consultant, Artist: Karin Melberg Schwier

Do this

Disaster Exercise

Disaster Exercise

© 2011 June Isaacson Kailes, Disability Policy Consultant,
Artist: Karin Melberg Schwier

Integrating individuals with access and functional needs throughout the planning process generates multiple benefits including:

- Creating better products. Integrated plans are more inclusive, relevant, far-reaching, and effective. They encompass a variety of perspectives.

- Gaining Community Buy-In Older adults, individuals with disabilities, and people with access and functional needs have historically been marginalized in the emergency planning process.

- Inclusion and integration of community stakeholders builds trust, partnership, and buy-in.

- Meeting Legal Requirements The Americans with Disabilities Act (ADA) requires equal access.

Build trust before an emergency occurs.

Inclusion

(Continued)

Practice inclusivity by:

- Having sign language interpreters on videos (not legally required but an important practice)

- Address conscious and unconscious disability bias by:
  - Providing continuous training by experienced disabled people
  - Modeling bias awareness and mitigation strategies

Building Trust

- Ask to be invited to the tables of disability-led organizations

- Attend meetings and events of disability-led organizations

- Request to be added to group/organization distribution lists

- Ask the organizations about the needs and interests of the local disability community

- Connect and build relationships with local disability leaders with experience and interest in emergency preparedness

Building Trust

- Go to tables of other groups that represent of serve people with access and functional needs. Learn about their needs and interests.

- Ask to be added to these group/organization distribution lists.

- Connect with community leaders with experience and interest in inclusive emergency preparedness

- Invite a diverse group of community leaders to the table.

- Develop relationships with disability-led organizations including:
  - Centers for Independent Living
  - Disability Coalitions
  - Disability-specific organizations:
  - Local affiliates of Deaf organizations
  - Local affiliates of blind organizations

Building Trust

Ongoing training and preparedness with community partners:

- Use subject matter experts

- Form partnerships

- Recruit qualified representatives

- Engage community emergency response volunteer groups

- Community Emergency Response Team (CERT)

- CMIST Response Teams

Identify Community Champions.

Inclusive Emergency Preparedness Support

- Access and Functional Needs Coordinators (AFNC)

- Access and Functional Needs Officer (AFNO)

- ADA Coordinators

- Centers for Independent Living (CILs)

- Virginia Board for People with Disabilities

- VEST Access and Functional Needs Advisory Committee

- CMIST Response Teams or FAST Teams (when available)

Access and Functional Needs Officers and Coordinators

VEST Organizational Chart

- Governor's Situation Room
- State Coordinator
  - VEST Bureau Chief
    - Access & Functional Needs Officer
    - VDEM Executive Team
    - Diversity, Opportunity & Inclusion Officer
    - JIC Manager
      - Writer
      - Traffic Manager
      - Graphic Designer
      - Webmaster
      - JIC/Plans Liaison & Scribe
    - External Affairs Chief
      - Elected Official Liaison
      - VEST Policy Group Coordinator

Field PIO Supervisor/JIC Lead
- Field PIO Staff
- News Conference Coordinator
- Photographer
- Videographer

As needed or as staffing permits

- COVIMAT
- VEST Lead
  - Health & Safety Officer
  - Private Sector Coordinator

Operations Section Chief
- Regional Support Branch Director
  - East
  - West
- Human Services Branch Director
  - ESF 6,8,11,17
- Emergency Services Branch Director
  - ESF 4,9,10,13,16
- Infrastructure Branch Director
  - ESF 1,2,3,12,14
- Adjunct Emergency Workforce Coordinator
- Radiological Emergency Preparedness Task Force (War Room)
- RSFs

Planning Section Chief
- Deputy Planning Section Chief
- Situation Unit Leader
  - Data Management Unit
- GIS Unit
- Geospatial Program Analyst
- Training
- Data Analyst Unit
- JIC/Plans Liaison & Scribe

Logistics Section Chief
- Resource Management and Coordination Unit
  - Mission Manager
  - Resource Management Specialists
  - Accommodations Unit

  ESF 7

- Information Systems Unit
  - Computer Operations Support
  - Application Support
  - VITA Support Team
- Logistics Support Unit
  - Logistics Support Unit Leader
  - Logistics Liaison
  - Food Leader Unit
  - Food Unit

  VEOC Facility and VEST IT Support

Finance & Admin Section Chief
- Personnel Unit
- Procurement Unit
  - Sr. Procurement Specialist
  - Buyer Specialist

- Virginia EMAC A-Team
- Staging Arm Strike Team
- PODS Strike Team
- PPDS Strike Team
- SNS Strike Team

Recovery Section Chief
- Deputy Recovery Section Chief
  - Recovery Coordinators (4)
- Deputy Recovery Section Chief
  - Recovery Coordinators (4)

Emergency Support Functions

ESF 1: Transportation
ESF 2: Communications
ESF 3: Public Works & Engineering
ESF 4: Firefighting
ESF 5: Emergency Management
ESF 6: Mass Care
ESF 7: Logistics Management & Resource Support
ESF 8: Public Health & Medical Services
ESF 9: Special Operations
ESF 10: Oil & Hazardous Materials Response
ESF 11: Agriculture & Natural Resources
ESF 12: Energy
ESF 13: Public Safety & Security
ESF 14: Under Development
ESF 15: External Affairs
ESF 16: Military Affairs
ESF 17: Volunteer & Donations Management

Barrier Busting!

Communication Barriers

Policy Barriers

Attitudinal Barriers
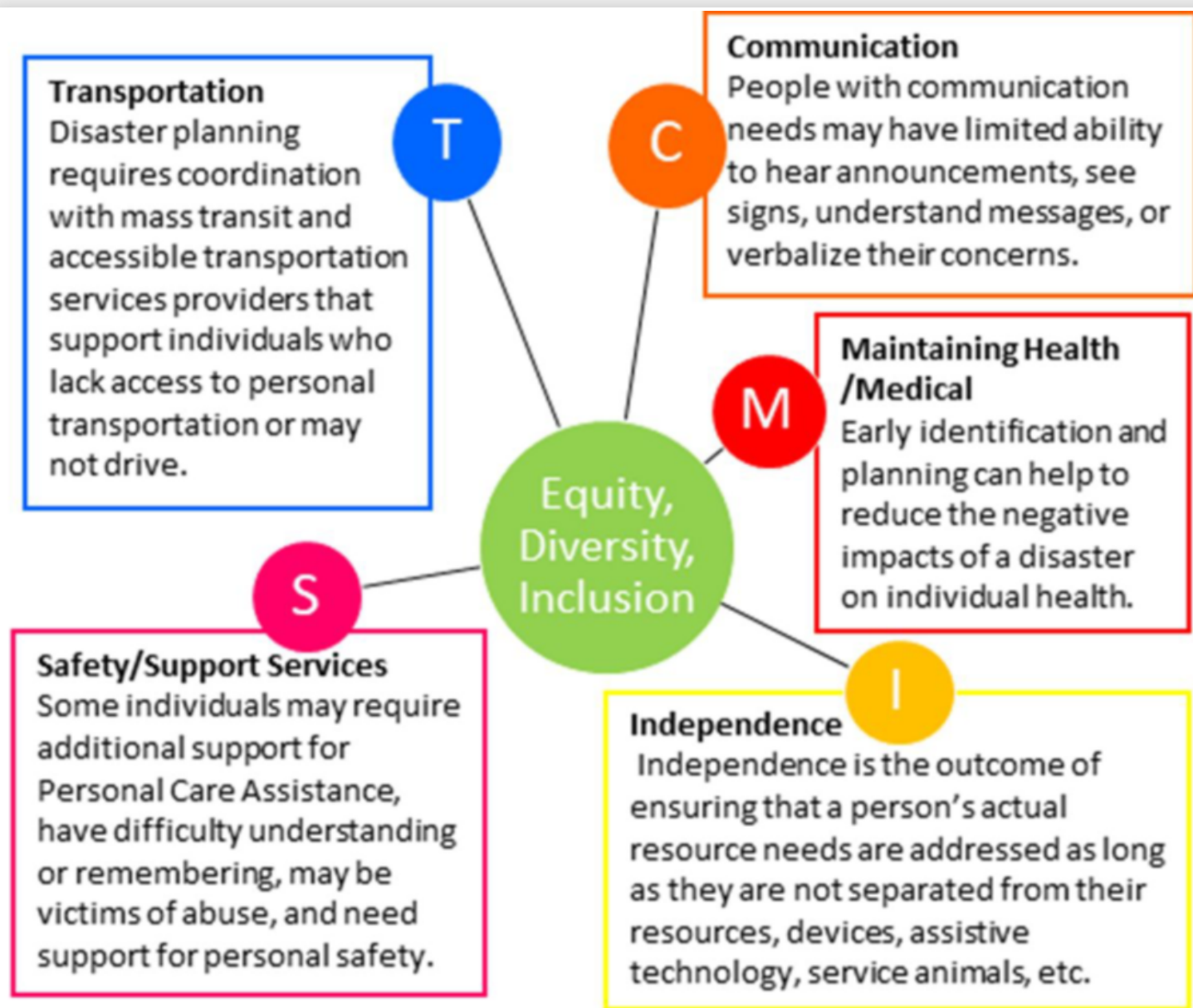
Physical Barriers

Programmatic Barriers

CMIST Framework

- Communication

- Maintaining Health

- Independence

- Support, Safety and Self-Determination

- Transportation

Transportation
Disaster planning requires coordination with mass transit and accessible transportation services providers that support individuals who lack access to personal transportation or may not drive.

T

Communication
People with communication needs may have limited ability to hear announcements, see signs, understand messages, or verbalize their concerns.

C

Maintaining Health /Medical
Early identification and planning can help to reduce the negative impacts of a disaster on individual health.

M

Equity, Diversity, Inclusion

S

Safety/Support Services
Some individuals may require additional support for Personal Care Assistance, have difficulty understanding or remembering, may be victims of abuse, and need support for personal safety.

I

Independence
Independence is the outcome of ensuring that a person's actual resource needs are addressed as long as they are not separated from their resources, devices, assistive technology, service animals, etc.

CMIST Response Teams/ Functional Assistance Services Teams

- On-Site Environmental Accessibility Assessments

- Functional Needs Assessments

- Information and Technical Assistance Support

- Community Outreach

- Emergency Response Interpreter (Languages)

- Future Considerations

IDENTIFYING PARTNERS AND RESOURCES

Centers for Independent Living

Potential Partners

- Centers for Independent Living

- ADA Coordinators

- Area Agencies on Aging

- Community Services Boards

- Disability Service Agencies

- Virginia Department for the Blind and Vision Impaired (VDBVI)V

- Virginia Department for the Deaf and Hard of Hearing (VDDHH)

- Virginia Board for People with Disabilities

Potential Partners

- Individuals and Communities

- Advocacy groups and disability service providers (e.g., Independent Living Centers and Regional Centers)

- Animal shelters and rescue groups

- Community leaders

- Faith-based, community-based and non-profit organizations

- Government agencies at all levels

- Tribal Governments

- Local planning councils

- Public and private transportation agencies

- Schools

- Volunteer organizations

- Private Sector representatives

Operationalizing Community Engagement During the COVID-19 Pandemic

Karen Brimm

Access and Functional Needs Officer

Virginia Emergency Support Team (VEST)

2020-2022

COVID-19 Community Engagement Examples:

- AFN Partners

- VDH Office of Health Equity
  - Community Outreach
  - Community Engagement

- Health Equity Guidance
  - Testing and Tracing
  - Input from Non-State Partners

- Partners in Prayer and Prevention

- Faces of Virginia

Disability Rights are Civil Rights.

Americans With
Disabilities Act Turns 30

Disability Rights Legislation

- Rehabilitation Act

- Architectural Barriers Act (ABA)

- American with Disabilities Act (ADA)

- Robert T. Stafford Act of 1988

- Civil Rights Act of 1964, Title VI

- Fair Housing Act

- Telecommunications Act

- Civil Rights of Institutionalized Persons Act

- Individuals with Disabilities Education Act

- Post- Katrina Emergency Management Reform Act

- 21st Century Communications and Video Accessibility Act of 2010

Section 504 of the Rehabilitation Act of 1974

Section 504 of the Rehabilitation Act

- Protects qualified individuals from discrimination based on their disability.

- The nondiscrimination requirements of the law apply to employers and organizations that receive financial assistance from any federal department or agency.

Americans with Disabilities Act

Americans with Disabilities Act

Title II: Prohibits discrimination based on disability in services, programs, and activities provided by state and local government entities.

Title III: Relating to nondiscrimination on the basis of disability by public accommodations and in commercial facilities.

ADA Definition of "Disability"

- A person who has a physical or mental impairment that substantially limits one or more major life activities

- A person who has a history or record of such an impairment

- Or a person who is perceived by others as having such an impairment

Americans with Disabilities Act

- Applies to all phases of emergency management: planning, mitigation, response and recovery
- Protections apply to all EM activities, including:
  - Community Engagement
  - Preparedness
  - Communication/Notification
  - Evacuation
  - Transportation
  - Sheltering
  - Housing

Virginians with Disabilities Act

Virginia Requirements

- **Code of Virginia:** Virginians with Disabilities Act requires "…all agencies to provide, in a comprehensive and coordinated manner……those services necessary to assure equal opportunity to persons with disabilities in the Commonwealth."

- **Executive Order (EO) 41 (2019) –** Whole of Community approach to Emergency Preparedness

- **COVEOP –** Coordinate responsibilities in State Coordinated Regional Shelter (SCRS) Plan and provide an AFN Coordinator for Mass Care Sites

- **SCRS –** VDEM – Identify, Train, and provide AFN Officer for the VEST and AFN Coordinator(s) for SCRS(s).

ADA Emergency Preparedness Cases

ADA Emergency Preparedness Cases

- *California Foundation for Independent Living Centers v. City of Oakland*

- *Communities Actively Living Independent and Free v. City of Los Angeles, et al*

- *Brooklyn Center for Independence v. Bloomberg*

- *United Spinal Association v. District of Columbia*

- *Voglewede et al v. City of San Antonio, Texas*

Example: Evacuation Plans

- Address community areas without transit

- Engage the AFN community and providers in training, drills and exercises

- Include plans for door-to-door communication and factors that determine when the method should be activated

- Identify individual communication tools available to responders

- Include integration and coordination with disability and aging transit providers, volunteer programs, disability and older adult service systems and other communication plans

- Include input from people with access and functional needs, including deaf/hard of hearing, deaf-blind, blind/low vision, cognitive disabilities, older adult, and transportation-under resourced communities.

"There are very few people even with the most severe disabilities who can't take control of their own life. The problem is, the people around us don't expect us to."

-Ed Roberts

"Faith is taking the first step even when you don't see the whole staircase." - MLK, Jr.

Take Away #1:

Identify the Person who Knows ADA Principles

Take Away #2:

Has this person been included in planning sessions?

Take Away #3:

Who can you begin to connect with to get the ball rolling?

Questions?

Thank You!

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