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Disability Awareness Training

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Niagara University FR DAT

- Website; fr-dat.com, etc; links, community resources, training information, on line training,
- FR DAT office
- One stop disability information center
- Future planning; on-line training, podcasts, apps, disability specific training
First Responders during an emergency

- Family/caregiver
- Neighbor
- CERT member
- (Registry)
- First Responder (as defined)
- Emergency management
(Self) Preservation

- Cognitive ability to do so
- Physical limitations that challenge that
- Ignore or actually put themselves in harms way
Benilda Caixeta

July 31, 1954 –August 29, 2005

Unable to evacuate before or during hurricane Katrina, Benilda told me the water was rushing into her home just before her phone went dead. Her body and her wheelchair were found floating inside her home several days later.
Disability awareness helps “to remove barriers so that responsible, self-sufficient people with disabilities can assume risks, make choices and contribute as they wish... this is a vision in which we all win.”
Inclusion

A term used by people with disabilities and other disability rights advocates. All people should freely, openly, and without pity accommodate any person with a disability without restrictions or limitations of any kind.
Diversity

- Racial
- Ethnicity
- Religious
- Cultural
- Gender
- Generational
- Sexual orientation
- Disability
Acceptance

An expression of the feelings we develop about ourselves and about diverse groups. Some level of understanding must come before achieving any genuine acceptance of other people. This is particularly true for those with different abilities, customs, values, and sexual orientation.
Behavior

Refers to our ability to interact with different people. It indicates our ability to perform tasks with comfort and ease in our interactions with people who are different from us.
Knowledge

The foundation for all other areas. Information about other people is necessary before we can understand someone else’s feelings, thoughts, and motives. Only then can we begin to know how our own feelings, thoughts, and routines impact others.
1. Disability Awareness
2. Accessibility/Accommodations
3. School/Transition
4. Employment
5. Spirituality
6. Advocacy
7. Municipalities (Emergency Mgmt)
8. Transportation
9. Recreation/Leisure
10. Person First
11. Health Care
Emergency Preparedness

Main objectives:

1. The needs of people with disabilities are adequately addressed PRIOR to an emergency

2. Ensure that people with disabilities are INCLUDED in the planning process

3. Identifying WHO you are responding to and where they are located
Emergency Preparedness - Common Miscues

- Separating service animals from their owners
- Not allowing evacuation chairs in hallways
- Do not involve the disabled community in the planning process
- Whether individuals with disabilities should evacuate immediately or wait for fire fighters
- Not recognizing ‘hidden disabilities’ (respiratory, cardiac, mental health issues)
Emergency Preparedness

What might the individual with a disability need?

1. Durable medical equipment
2. Medications
3. Adaptive equipment
4. Assistive technology
5. Transportation
6. Other health/medical needs
Access and Functional Needs Registry

Acquisition of necessary information on population in your jurisdiction

Used for;
- notification of evacuation
- prioritization of evacuation
- pre-assign transportation and shelters
- pre-allocate scarce resources
- pre-admission to hospitals

Cons; data gathering lengthy process, constant updating, possible legal issues
Emergency Preparedness—What does prepared mean?

1. The person recognizes they have a disability that will need additional attention and assistance
2. The person has critical information readily available
3. The person establishes a support network
4. Has personal needs ‘ready to go’
Emergency Preparedness-What does prepared mean?

1. EM has identified sites that house/serve IWDs
2. EM has had contact with service provider administration and reviewed their plan
3. EM has identified shelters to ensure they are accessible and can serve IWDs
4. EM has educated local fire depts, EMTs, volunteers, and govt officials of IWDs needs and the plan
5. EM reviews on an annual basis
6. Individuals in the community
7. Transportation
8. Communication
“My experience tells me if we wait and plan for people with disabilities after we write the basic plan, we fail.”
Craig Fugate, FEMA Administrator
Washington, DC August 4, 2009-testifying before the Senate Ad hoc committee on Disaster Recovery
“Unfortunately, despite the obvious importance of accounting for the unique needs of individuals with disabilities in planning emergencies, New York City’s emergency plans, like many state and local emergency plans throughout the nation, fail to do so.”
NYSILC Emergency Preparedness

- UAlbany Disability Law Clinic Questionnaire
- Current Agenda
- NYSEMA representative
NYS OEM human services committee

- Meets quarterly
- State office representation
- NYSEMA represented
- Agenda items
- NYMEP, others
Americans with Disabilities Act

- Title II-Emergency Management
- ADA Coordinator
- Project Civic Access
- Accessibility
- Committee on Disabilities
DOJ Guidance to state/local governments

The Americans with Disabilities Act and other laws apply in:

- Preparation
- Notification
- Evacuation and transportation
- Sheltering
- First aid and medical services
- Temporary lodging and housing
- Transition back to the community
- Clean up
- Other emergency and disaster-related programs, services, and activities

No State or local government, or its contractors, in providing services may, by law, policy, or contract, provide services below those standards without violating federal law.
Effective Communication

Whatever is written or spoken must be as clear and understandable to people with disabilities as it is for people who do not have disabilities.
Communication

- Verbal
- Written
- Sign
- Facial
- Body
- Augmentative

Always with respect, without apprehension, and age appropriate
Planning Support Materials
Not an Information Brochure
HOME FIRE PREVENTION HABITS

Most home fires start from heat sources like kitchen stoves, space heaters, electrical sparks, or open flames such as candles or lighters. Planners should know all the heat sources at home and learn habits of managing them safely.

Use the six avenues of safe use of home heat or fire on the back of the Active Planner to help your planner assess and improve their fire prevention habits. Stress the importance of making prevention habitual, especially during holidays or when the weather turns cold and more heat is used.

**Cooking Safety**
Fires that start from cooking are the most reported home fires in the US. Planners who cook at home should use safe cooking habits. The kitchen can be one of the most hazardous rooms in the home.

**SAFETY HINTS:**
- Stay in the kitchen while cooking on the stove.
- Keep paper towels, curtains, or other things that easily catch fire at least 3 feet from the cooking surface.
- When cooking with pots or pans, keep tight-fitting lids at hand; they can be used to smother a fire that starts in a pot or pan.

**Electrical Safety**
Overloaded outlets, frayed extension cords and light bulbs that tip for their bases can start a fire. Circuit breakers that trip frequently may signal hidden danger.

**SAFETY HINTS:**
- Inspect extension cords and replace any that are frayed or undulated; use multi-outlet power strips.
- Keep rags and furnishings off extension cords.
- Buy and use light bulbs that are the right size, not too many watts for where they are used.

**Smoking Safety**
People who smoke at home should stay alert. Falling ash with a lit cigarette can set a cloth or bed on fire. 33% of fatal home fires start with smoking, lit cigarettes dropped into a wastebasket can start a fire in seconds.

**SAFETY HINTS:**
- Smokers at home should smoke outdoors.
- Use deep, sturdy ashtrays on a flat surface.
- Keep ashtrays away from things that burn.
- Stay awake and out of bed when smoking.
- Smoking and oxygen tanks don’t mix.

**Heating Safety**
People use space heaters, fireplaces or wood stoves to supplement furnace heat. These heat sources cause many fires in unattended chimneys, clutter that’s too close, or where unattended.

**SAFETY HINTS:**
- Space heaters need space. Keep space heaters at least three feet from things that burn easily.
- Stay awake and in the room when using space heaters, wood-burning stoves, or fireplaces.
- Keep things that burn easily at least five feet away from furniture or woodstoves.
- Have chimneys inspected and cleaned yearly.

**Candle Safety**
There are many decorative and other uses for candles, but a lit candle is an open flame, and a potential fire hazard. In a power loss, use battery powered lights, not candles.

**SAFETY HINTS:**
- Set candles in sturdy tip-proof holders.
- Turn candles only when you are awake and in the same room with them.
- Keep candles at least three feet away from anything that could catch fire easily.

**Matches and Lighters**
When planners use matches or lighters they should think of fire danger from the open flame. Be careful using them to light candles, cigarettes, barbeque grills, or fires in the fireplace. Keep them out of the reach of children, preferably in a locked cabinet.

**SAFETY HINTS:**
- Surface matches and lighters out of children’s reach and sight.
- Use child-resistant lighters and remember that no lighter is child-proof.
- Teach children the dangers of playing with fire.

**Fire Additional Copies Can Be Requested At**
www消防安全planner.org

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For more information and to order free sets of the planning materials for your organization:

www.firesafetyplanner.org
Definitions

Statistics

• 18.6% of the U.S. population 16-64 years
• 41.9% of the U.S. population 65 years and over

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<th>Area 13</th>
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<th>Any Disability</th>
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<th>Mental Disability</th>
<th>Self-care Disability</th>
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<td>United States</td>
<td>257,167,527</td>
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Numbers

Intellectual Disability; 2-3% of population (7M)
Cerebral palsy; 700,000 Americans
Post-polio syndrome; 1M survivors (433,000 report paralysis)
8M Americans with visual impairment
Stroke; 4.5M survivors
3.2M wheelchair users
910,000 people in Assisted Living facilities
Autism; 1 in 88 (50) children