



**University at Albany
Center for Public Health Preparedness**

Grand Rounds Series

**Thursday, January 12, 2006,
10–11 a.m. & 4-5 p.m. (EST)**

**The University at Albany Center for Public Health Preparedness and the
UC Berkeley Center for Infectious Disease Preparedness (CIDP)**

Present:

Planning for the Needs of Special Populations



Speaker:

Âna-Marie Jones, Executive Director
Collaborating Agencies Responding to Disasters

www.FirstVictims.org



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Call-In

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Evaluation

<http://tinyurl.com/dadp6>



Learning Objectives

- Learn which populations have 'special needs' related to emergency preparedness and disaster response
- Understand why people with special needs remain underserved and unprepared
- Learn about an alternative approach to reaching and serving the preparedness, response and recovery needs of our most vulnerable populations



CARD History Collaborating Agencies Responding to Disasters

- 24/7 Media Attention – 1989 Loma Prieta Earthquake pre-empted the World Series.
- Government, Red Cross and traditional response organizations could not address the level of need and diversity of need over the short-term or long-term.
- United Way of the Bay Area stepped forward to help community based organizations and their clients with special needs. These organizations helped create a "Vision" of a humane, inclusive, prepared community.
- CARD's "no fear, no threat message" curriculum was created in support of this vision.

"People with Special Needs" A Working Definition

In the context of emergencies and disasters:

- Members of our community with little or no ability to successfully address, implement or be fully responsible for their own emergency preparedness, response and recovery.
- People whose life circumstances leave them unable or unwilling to follow emergency instructions, as well as anyone unable or unwilling to fully access or use traditional disaster preparedness and response services.







People with Special Needs

Physically Disabled: Ranges from minor disabilities causing restriction of some motions or activities, to totally disabled requiring full-time attendant care for feeding, toileting and personal care.

personal ♦ community ♦ infrastructure

People with Special Needs

Mentally Disabled: Ranges from minor disabilities where independence and ability to function in most circumstances is retained, to no ability to safely survive independently, attend to personal care, etc. This also includes people whose mental illness makes them a danger to themselves or others.

People with Special Needs

Blind: Includes the range of visual challenges and impairments - low vision, night blindness, color blindness, depth perception challenges, situational loss of sight, etc.

Deaf: Includes late-deafened, hearing impaired, hard-of-hearing and the range of hearing challenges and impairments such as situational loss of hearing, limited-range hearing, etc.

People with Special Needs

Medically Dependent / Fragile: Includes people dependent on life sustaining medications such as with HIV/AIDS and diabetes, or are dependent on medications to control conditions and maintain quality of life such as pain or seizure control medications etc.

Medically Compromised: Includes people with multiple chemical sensitivities or weakened immune systems, and those who cannot be in (or use) public accommodations for a variety of reasons.

People with Special Needs

Seniors: Includes frail elderly, aged, elder citizens, older persons and the range of people whose needs are often determined by their age and age-related considerations.

Clients of the Criminal Justice System: Includes ex-convicts, parolees, people under house arrest, registered sex offenders, child molesters, etc.

People with Special Needs

Limited English or non-English speaking: Includes monolingual individuals as well as those with limited ability to speak, read, write or fully understand English.

Homeless or Shelter Dependent: Includes those marginally or temporarily housed or in shelters for abused women and children.

People with Special Needs

Culturally Isolated: Includes people with little or no interaction or involvement outside of their immediate community. This is the broad meaning of the words 'culture' and 'community', including religious, ethnic, sexual orientation, etc.

Chemically Dependent: Includes substance abusers and others who would experience withdrawal, sickness or other symptoms due to lack of access, such as methadone users.

People with Special Needs

Children: Includes babies, infants, unattended minors, runaways and latchkey kids – anyone below the age of majority.

Single Parents: Includes lone guardians, others with formal or informal childcare responsibilities – especially those with no other support systems.

People with Special Needs

Poor: Includes extremely low income, without resources, without political voice, limited access to services and limited ability to address their own needs.

Geographically Isolated: No access to services or information, limited access to escape routes, or geography overwhelmingly determines lifestyles, habits, behaviors or options.

People with Special Needs

Persons Distrusting of Authorities: Includes people without documentation, political dissidents, and others who will not avail themselves of government, American Red Cross or other traditional service providers due to a variety of reasons.

People with Special Needs

Animal Owners: Includes owners of pets, companion animals or livestock – especially those who will make life and death decisions based on animals, such as refusing to evacuate or go to a shelter if it means separating from an animal.

People with Special Needs

Emergent Special Needs: Includes those developing special needs because of the disaster, such as spontaneous anxiety/stress disorders, or recurrence of a dormant health condition, etc.

Transient Special Needs: Includes people temporarily classified as special needs due to a temporary condition or status – such as tourists who will need care until they can leave, those who can't see until glasses are replaced, etc.

“Traditional” Emergency Services Agencies

- Department of Homeland Security
- Government
- American Red Cross
- Military (Army, Navy, Air Force, Marines, etc.)
- Fire Departments
- Police Departments
- Offices of Emergency Services

Mass Care ≠ Special Care

Disaster Response ≠ Emergency Preparedness



Mass Care ≠ Special Care Disaster Response ≠ Emergency Preparedness

- Top-down command structure
- Disaster-focused
- Response-driven
- Inherent bureaucracy issues
- Success depends on compliance, standardization, shared protocols, etc.
- Infrastructure maintenance is critical
- Challenged by change
- Exclusionary appearance/practices

Traditional Disaster Services Model

- Short-term commitment of national resources
- Mass care (i.e., “general public”)
- Externally supported
- Focused on disaster-caused needs
- “Survival of the fittest”
- Not viable in bioterrorism incidents or public health emergencies such as SARS, pandemic flu, or where containment is the desired response

CARD/CBO Disaster Services Model

- Long-term commitment to local resources
- Special care (i.e., customized)
- Internally supported
- Focused on ongoing community needs
- “We are only as strong as our weakest link”
- Viable in all types of incidents including those that do not trigger mobilization of traditional emergency services resources

**Faulty Assumption:
If “we” tell “them” to, they will do it.**

Information is NOT

- Inspiration
- Implementation
- Legislation
- Incentive for participation

Wrong Campaign Strategy

Branding campaigns by mass care, disaster response agencies **DO NOT** translate into specific, measurable, preparedness results for people with special needs.

WHO DO YOU SERVE?	Disaster Registry	NERT/CERT/Coast Guard (OFLAP)	Preparedness Presentations	Website(s)	Personal Preparedness	Community Preparedness	Infrastructure Preparedness
Do your programs: address economic recovery / impact?							
Do they serve:							
seniors/elderly?							
mobility impaired?							
low/no vision?							
low/no hearing?							
medically fragile?							
medically/chemically dependent?							
mentally disabled?							
infants/children/teens?							
battered women/children?							
single parents?							
owners of pets?							
limited/no English speakers?							
culturally isolated?							
low-income/poor?							
geographically isolated?							
registered offenders/ex-convicts?							
undocumented persons?							
homeless/shelter dependent?							
transients/emerging needs?							

CARD (Collaborating Agencies Responding to Disasters) ♦ phone: (510) 451-3140 ♦ fax: (510) 451-3144 ♦ www.FirstVictims.org



How You Can Help

1. Link to www.FirstVictims.org
2. Join CARD’s listserves
3. Share CARD with others



Don't reinvent the wheel

Thank You!



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CARD Thank You to Our Supporters!



CARD’s work in the community is made possible with generous support from:

United Way of the Bay Area
Pacific Gas and Electric Company
Alameda County Operational Area
California Earthquake Authority

City of San Leandro
City of Dublin

U.C. Berkeley Center for Infectious Disease Preparedness

Evaluation

<http://tinyurl.com/dadp6>

February 9, 2006

Threats of Water Contamination

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