NATIONAL EMERGENCY MANAGEMENT SUMMIT February 3-5,2008 – Washington, DC

**Special Populations:** 

Vulnerable, Silent and Compromised

Disaster Planning for Citizens with Intellectual and NeuroDevelopmental Disabilities

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## COMMON BEHAVIORAL TRAITS

- Frustration Tolerance
- o Impulsivity
- Self-Esteem
- Attention Sustainability
- Co-morbid Mood Disorders

## ADAPTIVE FUNCTIONING

- Communication
  Self-Care
  Home Living
  Social / Interpersonal Skills
  - o Community Resource Use

## ADAPTIVE FUNCTIONING

- Self-Direction
- Academic Skills
- o Work
- Leisure Activities
- o Health
- o Safety

#### ADAPTIVE BEHAVIOR

Social
Conceptual
Practical

#### • The Field of "Emergency Management"

- Cultural Influences of Vulnerability
- o "Classquake"
- "Calculation of Vulnerability"
- o "The Role of Flight"

• Perpetuating Dependency

- o Risk Assessment
- Various Coping Mechanisms
- o "Embodiment"
- Expectations of Support Infrastructure

Explaining Natural Disasters
Symbolism
Social Organization
"Adaptive Flux"
"Marginality"

Economic Upheaval
Assembly and Seclusion
Relocation Sites
"Dependence"

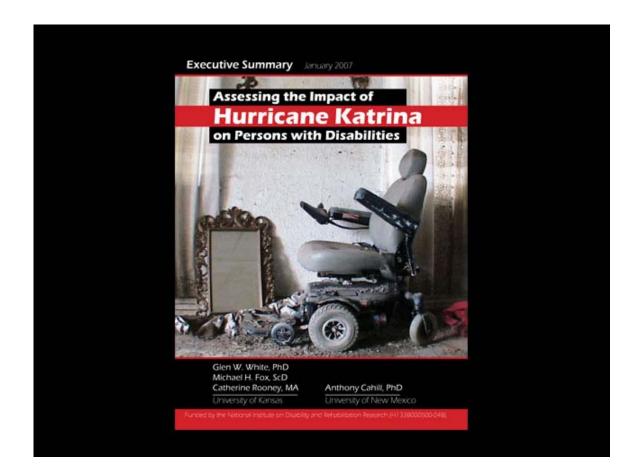
o Polypharmacy
o Medical Issues
o Duel Diagnosis
o Communication Barriers
o Diets and Dysphagia

Adaptive Equipment
Communication Devices
Assistive Technology
Behavioral Issues
Human Rights

Seizure Disorders
Ambulation
Continuity of Care
Sensory Processing
Constancy of Environment

"Chronobiology"
"Self Determination"
Continence
Confusion

## University of Kansas Impact Study



# Key Findings

 Pre-disaster Planning
 Pre and Post Disaster
 Communication and Information Sharing

Pre and Post Disaster Coordination

Nobody Left Behind Research Major Findings

### University of Kansas

Limited Inclusion of PWD

- Low Level Understanding of the "Special Needs Community"
- Mobility Needs
- Inadequate Information about "People in Service Areas"

 Time that Displaced PWD's Stayed with Extended or Surrogate Families

#### GAPS IN PRE-DISASTER PLANNING

 Personal Preparedness Plans
 Limited Disaster Planning Skills in the Special Needs Community

#### GAPS IN PRE AND POST DISASTER INFORMATION SHARING AND COMMUNICATION

Knowledgeable Sources Untapped
Whereabouts of PWD Unknown
Government Talking to Government

#### GAPS IN PRE AND POST DISASTER COORDINATION

- Disconnect between "Special Needs Community" and Emergency Mgmt. Agencies
- Devaluation of Special Needs Community by Emergency Mgmt. Agencies
- Mass Care Shelters Refused PWD
- Restoring the "Civic Fabric"

Recommendations

 Leadership Role Initiative for Special Needs Community
 Defining the Needs of PWD

 The Garbage Pail Classification of "Vulnerable Populations"

#### RECOMMENDATIONS

- Need for Systematic Training and Education in Disasters in the Special Needs Community (SNC)
- Availability of Evidence Based Research Findings for SNC
- Creation of a "Play Book"

### RECOMMENDATIONS

- Designation of a Disability Contact when Emergency Operations are Activated
- "Functional and Medical Support Sheltering"
- Community Based Registries of People Needing Assistance

#### RECOMMENDATIONS

#### Community Based Registries of Resources for PWD

## **RFID Implantable Chip**



## Roadblocks to Human Use of RFID

Dr. Rick Rader holds a microchip that could be implanted beneath a patient's skin for medical identification. The tiny chip, about the size of a grain of rice, is visible in the middle of the circle.

## Chips spark ethics concerns

Orange Grove clients would be in first group studied for ID implants

#### BY EMILY BERRY STAFF WRITER

Medical ethics experts are questioning a proposal to implant medical identification microchips in the arms of developmentally disabled clients at Orange Grove Center.

"That's pretty disturbing and kind of surprising in that anyone would allow that to occur." said Dr. Stuart Finder, a director at the Center for Biomedical Ethics and Society at Vanderbilt disabled people, pregnant

#### WHAT'S NEXT

Dr. Richard Seelig, vice president of medical applications at VeriChip Corp., will meet with the Orange Grove Human Rights Committee at noon today.

University Medical Center. "Typically, the idea of using

vulnerable people - children,

women, prisoners, a whole variety of categories - we normal-Finder said.

Morton J. Kent Habilitation Cen- Orange Grove clients. The ter at Orange Grove Center, is advocating cooperation in a study with the maker of the VeriMed implantable device. He arranged meetings Thursday and today for one of the company's Grove medical committee memphysicians with leaders at Orange Grove and Erlanger hospital.

Dr. Rader said VeriChip Corp., the Delray Beach, Fla., ly say that's not a good idea," Dr. company that manufactures the device, has agreed to provide Dr. Rick Rader, director of the free implants for as many as 100 clients would be the subjects in the first group study of the application of the device, which normally costs \$200, he said.

See IMPLANTS, Page A9

STAFF PHOTO BY KATHLEEN GREESON

Dr. Rader and other Orange

#### THE SNAKE PROJECT

The Numbers Game
Defining Special Needs
Levels of Shelters

## THE SNAKE PROJECT RECOMMENDATIONS

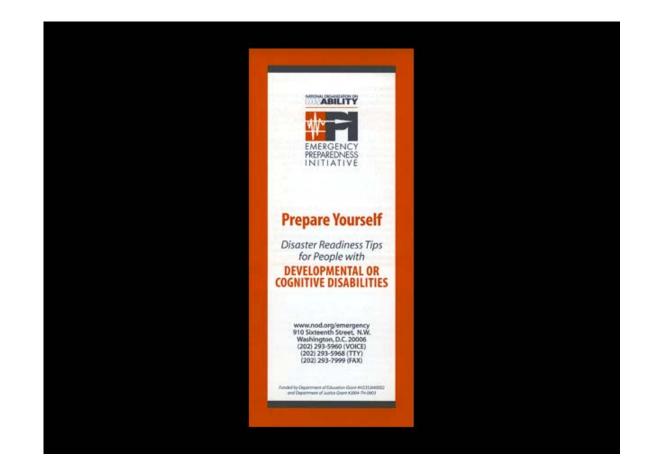
- Employ The "Pearls"
- Replace Durable Medical Equipment (DME)
- Maintain Families and Community Placement
- o Ask! Ask! Ask!

### THE SNAKE PROJECT RECOMMENDATIONS

- Federal Financing for Medical Necessary Services
- Supplemental Government Funding
- Philanthropic Organizations
- Availability of Accessible Information

## THE SNAKE PROJECT RECOMMENDATIONS

Service CoordinationCross Training



## Senate Bill to Assist PWD in Disasters Fails

109TH CONGRESS Ist Sussion       S.         To address the needs of individuals with disabilities is emergency planning requirements and relief efforts in the event of a major disaster, to increase the accessibility of replacement housing built with Federal funds following Hurrirane Katrina and other major disasters, and for other purposes.         IN THE SENATE OF THE UNITED STATES         Mr. HAJAGIN introduced the following bill, which was read twice and referred to the Committee on         IN THE SENATE OF THE UNITED STATES         Mr. HAJAGIN introduced the following bill, which was read twice and referred to the Committee on         IN THE SENATE OF THE UNITED STATES	
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1 Be it enacted by the Senate and House of Representa-	
2 tives of the United States of America in Congress assembled,	
3 SECTION 1. SHORT TITLE.	
4 This Act may be cited as the "Emergency Prepared-	
5 ness and Response for Individuals With Disabilities Act	
6 of 2005".	

#### THE SNAKE PROJECT TAKE HOME MESSAGE

"We, as a nation, can do more to improve the outcomes for people with disabilities and the aging population the next time disaster strikes – and there will be a next time."