

This case study is the sixth in our series highlighting one of our 56 federally-funded state and territory programs funded under the [Assistive Technology Act of 2004 \(P.L. 108-364\)](#). To learn more and to locate your state/territory program, visit the [AT3 Center website](#).

A.T. PROGRAMS FOSTER EMERGENCY PREPAREDNESS

Natural disasters are occurring with increased frequency as the climate continues to change.¹ This compounds the challenges of people with disabilities who already struggle disproportionately when faced with man-made disasters (such as hazardous material spills, fires, groundwater contamination, transportation accidents, structure failures, explosions, and acts of terrorism). All of these can cause power outages, transportation issues, and other day-to-day difficulties for people who rely on Assistive Technology (A.T.). And this past year the COVID-19 pandemic has required even greater resourcefulness and creativity to ensure safe and timely access to basic services as well as COVID tests, vaccination locations, and sometimes medical treatment.

Acknowledging these challenges, many A.T. Act programs have devised strategies and tools to help people with disabilities retain access to the systems, equipment and devices they need during emergency situations. Here's a snapshot of some of the ways these programs are helping people prepare for and respond to disaster.

SENIOR AND DISABILITY REGISTRY

Part of emergency preparedness is knowing, in advance, who may need help and where they are located. In the U.S. Virgin Islands, the Department of Human Services, the Bureau of Motor Vehicles and the Virgin Islands Elections System created a registry for people 60 years and older and persons with disabilities so that they could be contacted to determine if they need assistance during an emergency.

VIUCEDD and the Virgin Islands State Assistive Technology Program assisted in the creation of the state disability registry by working with the CAC, VI ADA and VI Human services in advocating for its creation, helping to get the word out once it was created and providing feedback on tweaks and modifications to the form once it was created. They also added many people to the registry at various listening sessions conducted by the UCEDD in conjunction with ACL.

DISASTER/EVACUATION SHELTER ACCESSIBILITY KITS

This toolkit, created by the Maryland Technology Assistance Program (MDTAP), under the Maryland Department of Disabilities, is a physical toolkit with a variety of assistive technology devices serving a broad range of disabilities. These toolkits are deployed during emergencies to shelters across the state. The A.T. program and Department of Disabilities also created an Assistive Technology Kit User Manual to be used as a companion document providing guidance on the technology in the kit and best practices for use. These kits include items such as sound canceling headphones, writing aids, electronic magnifiers, low-tech communication boards, assistive listening devices, and other items that would be helpful in handling immediate needs of citizens in emergency shelters.

The Department partnered with Maryland Human Services (DHS) Office of Emergency Operations and Response to position the accessibility kits for rapid deployment. Maryland DHS collaborates on the distribution of accessibility kits during a mass care event and collection of data. The Maryland Technology Assistance Program manages and oversees the data collection of items used in the AT Toolkit during emergencies; this system allows for 24/7 access to assistive technology in shelters and recovery centers. The kits are returned annually for inventory processing.

DISABILITY DISASTER ACCESS & RESOURCES (DDAR) PILOT PROGRAM

Facing a record number of wildfires and unintentional emergencies, many communities in California also must contend with periodic Public Safety Power Shutoffs (PSPSs), during which the electric company turns off power to help prevent wildfires during severe weather.

[Ability Tools](#) is working to provide critical assistance and resources to empower customers with disabilities and older adults with Access and Functional Needs (AFN) to prepare and safely get through a disaster or emergency—including a PSPS event. California Foundation for Independent Living Centers (CFILCs) and Ability Tools launched the DDAR in 2020 with support from PG&E, Anthem Blue Cross, and American Red Cross.

This groundbreaking disaster program is working in coordination with 20 local [Disability Disaster Access & Resource Centers \(DDARCs\)](#) associated with CFILC. The program enables the local centers to provide individuals who use electric assistive technology or medical devices support in developing a personal preparedness plan, disaster preparedness training, access to backup portable batteries, accessible transportation, lodging and food resources during a PSPS event. Centers also support in emergency and disaster alert system enrollment as well as the Medical Baseline that is offered by utility companies and is established to provide warning to those who utilize electric powered medical devices. Lastly, centers are providing Personal Protective Equipment (PPE), to keep people safe during COVID-19.

SPECIALLY EQUIPPED EMERGENCY RADIOS

During a disaster, communication systems are often disrupted. Radio service, which is fairly reliable, is not accessible to people with hearing impairments, making them unable to get critical emergency alerts and information. This was the harsh reality for residents of the U.S. Virgin Islands, which was hit by two back-to-back Category 5 hurricanes in 2017.

To prepare for the inevitable next big storm, the Virgin Islands University Center for Excellence in Developmental Disabilities (VIUCEDD) and the Virgin Islands State Assistive Technology Program (VISTATP) devised a plan to purchase and distribute emergency radios to members of the disability community. With funds raised through VIUCEDD's GoFundMe campaign and the efforts of the Association of University Centers on Disability, the program has been able to provide specially equipped emergency radios to nearly 400 Virgin Islanders with disabilities. The radios are solar-powered or hand-cranked, and the radios gifted to people who are deaf or hard of hearing have strobe lights to alert them to critical incoming information.

VIUCEDD and VISTATP also provided demonstrations and training on how to use the emergency radios.

[CFILC and DOnetwork's COVID-19 Disability Community Advocacy and Information Toolkit](#)

Vaccine allocation and distribution is a complex process. In California, Ability Tools worked through the CFILCs' Disability Organizing Network ([DOnetwork](#)) to develop an advocacy toolkit on COVID-19 vaccine access in California for advocates, organizers and others in the disability community. The toolkit outlines the vaccine distribution process and provides advice on accessing vaccines. It also offers advocacy strategies and links to other resources.

ENSURING SHELTERS ARE ACCESSIBLE

When a disaster occurs, many residents are forced to evacuate their homes and move to a temporary shelter, yet many emergency shelters may not be prepared to accommodate the needs posed by various disabilities. In California, Ability Tools and CFILCs work with shelters across the state to ensure that accessibility guidelines are being followed and that AT reuse equipment is provided to individuals who were evacuated without their own AT or DME. CFILC and Ability Tools coordinates with the California Governor's Office of Emergency Services. That partnership allows Ability Tools to know which shelters are in need of support or resources. Staff either voluntarily work with the shelter to ensure that AFN are being met or are deployed by the State or County to assist at a shelter.

Similarly, in Maryland, MDTAP created a [Shelter Accessibility Standards for People with Disabilities](#) to guide shelters.

INCLUSIVITY OF COVID RESPONSE

The COVID pandemic—with its ever-changing protocols, guidelines, lock-down requirements and quarantine guidelines—has necessitated even more steps to ensure that everyone has access to the same information and services.

When California's Ability Tools realized that initial state COVID guidelines did not consider the needs of the disability community, they took a number of remedial steps, including:

- Working with policy makers to revise the guidelines, one of which was the State's earliest publication, California's Crisis Care Guidelines;
- Advocating for the prioritization of vaccine implementation for people with disabilities;
- Providing pop-up vaccine clinics at ILCs;
- Educating hospital providers to allow AT in hospitals;
- Working with FEMA and other vaccine staff to ensure both physical and programmatic access;
- Assisting in the development of materials in multiple languages to make the vaccine process easier for people with disabilities to navigate;
- Assisting the State in developing disability questions and making the vaccine website more accessible for all users; and
- Advocating for the State to provide accessible transportation at no-cost to individuals with disabilities who do not have their own transportation to and from vaccine sites.

In Maryland, MDTAP has been working to make sure that AT is available at vaccination sites, along with information in large print and braille, so that people with disabilities can understand instructions during the vaccination process. MDTAP has a designated IT accessibility team that monitors and evaluates COVID-response websites to ensure their accessibility. For example, one of the things they noted is that the maps available on the Department of Health's website for finding test and vaccination sites were not accessible. The IT team worked with the National Federation of the Blind to create a scaled-down Excel sheet accessible to people with visual impairment. Another accessibility gap they identified was in new COVID contact tracing apps being built, so the IT team worked with both Google and Apple to fix the problem.

ONGOING PREPAREDNESS

Even before the back-to-back hurricanes in the U.S. Virgin Islands, VIUCEDD and VISTATP had been training first responders on disability-specific responses. They also offered a program to equip individuals and groups with the tools and training necessary to best address emergency situations in their neighborhoods and schools before the arrival of first responders. [This series of in-person disaster preparedness training events](#) is hosted by Emergency Management Council of the U.S. Virgin Islands Government in association with the Virgin Islands Territorial Emergency Management Agency (VITEMA) throughout the territory as part of a national Community Emergency Response Team (CERTS) exercise.

The free, multi-day event educates volunteers about preparedness for the hazards that may impact their area and trains them in basic disaster response such as fire safety, team organization, light search and rescue, and disaster medical operations.

VIUCEDD and the Virgin Islands State Assistive Technology Program participated on the Emergency Management Council as the only representative from any disability organization immediately following the storms and have since continued to advocate for these processes.

THANK YOU

Many thanks to the sources who provided content for this case study: Lori Markland, MFA, ATA-Cert., Executive Director, Maryland Technology Assistance Program (MDTAP), Maryland Department of Disabilities; Christina N. Mills, Executive Director, California Foundation for Independent Learning Centers (which includes California's Assistive Technology Act Program); and Dr. Kimberly Mills, Senior Executive Director of the U.S. Virgin Island's State Assistive Technology Act Program, at the Virgin Islands University Center for Excellence in Developmental Disabilities (VIUCEDD).



Footnote

1. https://www.usgs.gov/faqs/how-can-climate-change-affect-natural-disasters-1?qt-news_science_products=0#qt-news_science_products

Preparation of this publication was financed by Grant Number 90ATTA0001-05-00 from the US Department of Health and Human Services, Administration for Community Living under provisions of the Assistive Technology Act of 1998, as amended (Public Law 108-364)