

PACIFIC ADA CENTER  
EMERGENCY MANAGEMENT AND PREPAREDNESS:  
INCLUSION OF PERSONS WITH DISABILITIES  
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>> LEWIS KRAUS: Welcome to the Emergency Management and Preparedness: Including People with Disabilities Webinar Series. I'm Lewis Kraus from the Pacific ADA Center, your moderator for this series. This series of webinars is brought to you by the Pacific ADA Center on behalf of the ADA National Network. The ADA National Network is made up of 10 regional centers that are federally funded to provide training, technical assistance, and other information as needed on the Americans with Disabilities Act. You can reach your regional ADA Center by dialing 1-800-949-4232. Realtime captions is provided for this webinar. The caption screen can be accessed by choosing the CC icon in the meeting control toolbar. To toggle that meeting control toolbar on, press the alt key. As always in our session, only the speakers have audio. If you do not have sound capabilities on your computer or prefer to listen by phone, you can dial 1-669-900-9128 or 1-646-558-8656. And use the webinar ID of 872-0730-7836. And the passcode of 742075. Again, there's a reminder here that the webinar is being recorded, and you will be able to get it at ADAPresentations.org in the archives section next week. This is the eighth year of this Webinar Series which shares issues and promising practices in emergency management inclusive of people with disabilities and others with access and functional needs. The series topics cover emergency preparedness and disaster response, recovery, and mitigation, as well as accessibility and reasonable accommodation issues under the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, the ADA, and other relevant laws. Upcoming sessions are available at ADAPresentations.org under the Schedule tab in the emergency management section. These monthly webinars occur on the second Thursday of the month at 2:30 eastern, 1:30 central, 12:30 mountain and 11:30 a.m. Pacific time. Being here, you are on the list to receive notices for future webinars in this series. The notices go out two to three weeks before the next webinar and open that webinar to registration. You can follow along on the webinar platform with the slides. If you are not using the webinar platform, you can download a copy of today's PowerPoint presentation at the ADAPresentations.org web page in the Schedule section. At the conclusion of today's presentation, there will be an opportunity for everyone to ask questions. You may submit your questions using the chat area within the webinar platform. The speakers and I will address them at the end of the session, so feel free to submit them as they come to your mind during the presentation. To submit your questions, you may type them into the chat area text box if you are using keystrokes, you can press alt-H and enter the text in the chat area. If you are listening by phone and not logged into the webinar, you can ask your question by emailing them to [adatech@adapacific.org](mailto:adatech@adapacific.org).

That's [adatech@adapacific.org](mailto:adatech@adapacific.org). If you have any technical difficulties during the webinar, you can send a private chat message to the host by typing in the chat window. Again, you can use your keyboard to press alt H to access the chat box and enter your message. Or you can email us at [adatech@adapacific.org](mailto:adatech@adapacific.org). Or if you need to, you can call us at 510-285-5600.

Today's ADA National Network Learning Session is titled "Achieving Whole Community Inclusion in Emergency Management." Are you planning with for or planning with the whole community? Ensuring inclusion is a daunting task with many variables to consider that impact all of your agencies' core capabilities. Do you have inclusion assigned as a secondary responsibility for a member of your team? Should you be thinking bigger, dedicating a full-time person -- position, I should say -- that focuses on insuring equity and equality is considered in all phases of emergency management? Colorado is one state that has taken the latter route and they have a blueprint that can help you achieve a similar outcome in your state. This presentation will help you understand equity and inclusion and identify your subject matter experts in both disciplines. You also will learn strategies to ensure you are effectively planning with and for everyone in your community.

Today's speakers are Michael Houston. Mike is the Regional Disability Integration Specialist for region 8 based in Denver, Colorado. Prior to taking this position, Michael was the Disability Integration Adviser of the National Incident Management Assistance team East 1. And prior the team he began his FEMA career as the Regional Disability Integration Specialist for Region 4. Michael is legally deaf. The result of a head injury suffered as a young child. He is a child of deaf adults and fluent in American Sign Language. Sadie Martinez is the Colorado state Division of Homeland Security and Emergency Management's access and functional needs coordinator. Her role focuses on coordinating the development and operations of the statewide network of contracted local access and functional needs integration emergency planners. She supports state agencies and local jurisdictions in the development of inclusive, whole community Emergency Operations Plans that adequately account for people with access and functional needs, emergency preparedness workshops, and serves as the access and functional needs subject matter expert during state-level planning initiatives. Michael and Sadie, I will now turn it over to you.

>> Welcome, everyone. We appreciate you having us and be able to show our story. Michael, do you want to do an introduction as well?

>> MICHAEL: No, this is awesome to be a part of this. You know, we all of us have an interest in preparedness, responding to disasters, recovering from disasters, that's really the most important thing, being able to recover, and, you know, just learning how do I get involved, how do I help myself, how do I help my community? So I think this is going to be a fun discussion today. I'm looking forward to it. I think what is going to be interesting, obviously, I represent FEMA at the federal government level and Sadie is at the state level with Colorado. We want to highlight -- I'm very fortunate to have Sadie as a partner and we'll be able to highlight that relationship and how it really helps us to get where the rubber meets the road and that's at the local level. So with that I'll pass it back over to you.

>> SADIE MARTINEZ: Can we go to -- the title of our presentation today is "Achieving Whole Community Inclusion in Emergency Management." If we can go to the next slide, please. So today we're going to talk about the learning objectives for today's webinar is being able to have an understanding of equity and inclusion, equality and identifying your subject matter experts in both disciplines, learning strategies to ensure that you are effectively planning for your community, in your community, and with your community. We like to tie this to our ADA Title 2 and Title III and how when we work together our Title 1 partners can be part of the planning process. And so I'm back over to you, Michael. I think this one is back over to you real quick.

>> MICHAEL: I just wanted to say that today we're going to have two perspectives. My perspective is going to be from the federal side, and Sadie will be on the state side, the ADA Title 2, Title 3, but on the federal side we have Section 504 and whole host of federal laws and that as an agency, FEMA -- we are tasked by Congress within the Stafford Act to coordinate the whole of the federal government for response. So there are a lot of other federal agencies and resources that we collaborate on the federal side, but also when you talk about with Sadie on the state side, how does that come together? Again, you're going to get from two perspectives. Mine is federal and Sadie will be more state and local. Sadie.

>> SADIE MARTINEZ: Thank you. Yes, so I always, as I Bert understand it, I think of federally-funded, state-supported or managed, and locally-executed. And Michael and my partnership are from the federal to the state and working together to engage locals, which is where the whole community resides. Our desired objective is to arrive at a planning with, not just a planning for. And the federal side includes that equity, diversity and inclusion. So... yay, awesome! Next slide, please. Michael, this is up to you.

>> MICHAEL: Today we're going to talk about community emergency management. As Sadie alluded to, planning with the whole community. I hope you don't tire of the phrase, but the end game is planning with and not planning for. How do we get to that? When you talk about the whole community -- we look forward to hearing your questions. I have to preface this by -- I don't presume to know what people are facing, what challenges you're facing, where you live, who you work with, what your gaps are, so I would encourage to have dialogue by asking questions, but, you know, hopefully beyond just today's presentation we'll be able to strike up conversations ongoing after this presentation. So having said planning with the whole community, we're going to ensure inclusion in the agency core capabilities. And inclusion, as you know -- I don't know if you know this, but on the federal side you know, we provide a lot of technical assistance, financial aid, so on and so forth, to state jurisdictions who then, you know, collect all the counties that reside within the state and all of those counties have cities and communities and neighborhoods and individual homes. So that's a lot. That's a lot of responsibility. And often what we have seen in a lot of states, and you're going to hear us say terms like ESF. And ESF is short for emergency support function. And there are a number of functions that people bring expertise. For example, ESF1 is Department of Transportation. So that is highway, buses, things of that nature. So when we talk about inclusion as signed as a responsibility for a member of your team, we're talking about ESF5, emergency support function 5, which is the state emergency

management. And I'll give you another one. ESF8 is public health. So when you think about pandemic, think about COVID, that is led by Health and Human Services, CDC, other organizations within that ESF8 bubble, and it's coordinated and supported by ESF5, emergency management. And there are a number of other emergency support functions that lend their expertise and skill sets to that overall operation. So when we talk about inclusion assigned as a responsibility for a member of your team, oftentimes that ESF5, the state emergency management level, they don't necessarily have the capacity -- very few states have someone like Sadie who is coordinating for the state, the state of Colorado. So it's not -- we have a term that is "other duties as assigned." So we want to avoid other duties as assigned. Because as we know, when you get a team of 10 people on the emergency management people and you have multiple disasters, plus a pandemic and a lot of other social unrest and things we have seen over the last couple of years, they can overwhelm that staff. If you don't have somebody thinking about the whole community and all that entails, it can get lost in translation if it's just other duties as assigned. So we're going to be talking about the value of dedicating a full-time position that focuses on insuring equity and equality. That's a fairly -- it's always been around, equity and equality and diversity, but this year under this current Biden administration, there's been a lot of focus on equity, especially when it comes to the vaccination process. So there's been a spillover of equity, not just focusing on vaccinations but on all operations. So that's going to be something we talk about. And then lastly we'll have -- you will have an opportunity to learn from Sadie Martinez straightaway how Colorado went about getting her position, how they started from not having one to having her and now they're growing her position to have actually a team. Sadie, you want to add anything to that before we move to the next slide?

>> SADIE MARTINEZ: No, thank you, Mike.

>> MICHAEL HOUSTON: Okay, so next slide. Go ahead, Sadie.

>> SADIE MARTINEZ: Go ahead, I'm sorry.

>> MICHAEL HOUSTON: No, no, it's okay. It's good.

>> SADIE MARTINEZ: We wanted to try to make sure that we tagged this and connected it to some of these federal and -- federal laws and different things, and the ADA laws, and this one kind of ties into the Title 2 connection with the emergency support function 5, when there's an Incident Command System and the relationship between the federal -- between FEMA, the state and the local jurisdictions.

It also is in emergency management plans. Here in Colorado, we even tied them into these -- we have some self-assessment, which is the Colorado emergency preparedness assessment, and the local jurisdictions can use that to see how their planning, organization, equipment, training and exercise plans are tied into their whole community inclusion. We also have the hazardous material plans as well. And for short I even put those little memory tools, because that's how I remember. But that one is called the hazmat plans. And then there's also the threat and hazard identification and risk assessment, the THIRA plans, and stakeholder preparedness reviews, the SPRs. And these all come together with that whole community inclusion, that federally-funded,

state-managed, locally-executed. And the interconnectedness of the emergency support functions into the command, subject matter experts, and it's just all weaving in and out of there. And also access and functional needs planning tool. And then community inclusion maps. We have a community inclusion map in Colorado. It has resources maps and geographical information systems which tie to data and demographics. That just helps us better understand what kind of resources people are going to need access to in order to function during emergencies and disasters and how we can ask some of those subject matter experts and stakeholders to be part of the conversation.

The other area, the planning with the whole community is cross relationships. So, again, Mike was talking about that on the previous slide about the emergency support function partners. And then our stakeholders. And so in Colorado, this Access and Functional Needs Program is the people resource to support the how-to-dos that are tied to the must-dos and the need-to-dos in the ADA legislation as well as in the federal mandates and those different areas. We already know those are out there, so we're here to help try to resolve how do we do that. But there's where a lot of the gap comes from. And then we want to challenge it to keep going forward and getting lessons learned, which then changes behaviors as we move forward in different emergency management events, disasters or emergencies. The local plans of access and functional inclusion, again, you're going to hear this a lot again. The plan with approach versus the plan for approach. It's easy to put people in your plan. I see this both ways. I see this in stakeholders planning for emergency managers but not talking to emergency management, and vice versa is a, emergency management having a plan for the community but not including the people who are going to be doing the boots on the ground, the work that is happening there. And so we talk about that on the top-down and the bottom-up. We're squishing that sandwich. We're sandwiching that whole community inclusion.

And then the federal, it includes equity, diversity and inclusion due to lessons learned from, like, COVID, and also our civil unrest that came from the Black Lives Matter that happened -- or at the same time as COVID was happening, and those response. So there's times that there's other -- there's lots of different events happening at the same time.

All right, well, with that... go ahead

>> MICHAEL HOUSTON: I don't want to presume everyone on this call understands -- I assume everyone can see or is following along with the slides that we're providing, but incident -- I just want to give a quick overview for a basic understanding. So when we talk about incident command systems, otherwise known as ICS, federal, state and local, when there's a disaster -- so let's use the current disaster in Colorado. There were two counties last year that experienced wildfires, and so then they exceeded the capability of that county. Those two counties, they had what Sadie mentioned, SPR. All of that is pre-disaster -- they're assessing what they may face. The hard part about doing that is you don't know what the variables are. You don't know exactly what might come. It could be a flood. How big? How bad? You might have a fire, but you don't know how big the fire is going to be you don't know how many homes perhaps have been wiped out. You don't know what infrastructure is impacted. You can forecast, you can guess, but until the actual disaster happens...

So the Incident Command System is post-disaster. Some of the stuff that she is talking about with the emergency management plans, from my perspective on the federal side, FEMA has a number of public-facing program areas like hazard mitigation planning, for example, we approve state plans. And so the state collects all of the counties who do these assessments on what types of threats they may see or experience, and what kinds of impacts that they may have and what kind of shortfalls they may have, which then tells us what kind of needs they are going to need when the disaster happens to respond and also recover.

So when we talk about these Colorado emergency preparedness assessment, what does this mean to you? Colorado emergency preparedness assessment, it hazard identification and risk management, stakeholder preparedness, all of these things that Sadie mentioned are efforts underway at the state level that they collect of all their counties, right? And then they have one big giant hazard mitigation plan. When a disaster happens, two counties in Colorado, it exceeded their capabilities, so they went to the state, the governor, and they said, hey, we need assistance. This is beyond us. We're not able to respond. So then the governor works with the hazard mitigation, Sadie's team, and response, they go out and do a preliminary damage assessment to see if they need a certain threshold, so does the state have to take this disaster on, or if it exceeds a certain threshold for the state, they may then be able to submit a request to FEMA to come in and turn on the FEMA resources. So not all disasters get FEMA assistance. There are certain thresholds that have to be achieved. So what does this all mean to you on the call? If your emergency manager is making plans for you and you have a disability or access or functional need, say you don't have a car, or limited income, a single mom or single parent I should say, and you have limited resources, those kinds of things. Maybe you are deaf or use foreign languages for communication. So I have a need, and there is a gap. If you're not already communicating those gaps with the emergency manager, they're not already going to capture that as part of their threat assessment. And they're not going to capture what gets submitted to the state and the state submits a hazard mitigation plan to FEMA to approve which releases a lot of federal dollars to their facility. So, again, when we talk about planning with versus planning for, unfortunately there are a lot of gaps when it comes to the individual in the ---and the community based disability, ethnicity, language, what have you, they're not necessarily connected with the emergency managers. So therefore that plan is not reflective of that jurisdiction's population. So that's when we start to see gaps in disaster response. So if it's not in the plan, if they're not planning for it, and we see a handful of people that fall through the cracks, typically, for one reason or another they don't receive the recovery assistance they need and then ongoing beyond the disaster they never really recover and they become a negative statistic. So it's super important that we are encouraging both ways, as Sadie said before, there are disability groups that plan for disabilities but they're not connected to emergency managers, and vice versa. It's really important from my perspective that we are trying to encourage states. Again, what I talked about earlier, it's not other duties as assigned, it's a full-time job that needs to be dedicated, like what Sadie is doing, to make sure the state is thinking when working with local jurisdictions, which is where all of you reside, to make sure we're being as comprehensive as we can in the preliminary stage, the planning side. So that when disasters happen, the Incident Command System that gets started in

response, they have a better idea of what they're dealing with and who has -- what people's needs are. So those cross relationships that Sadie mentioned become super important, because if stakeholders are involved, I can think of you -- how many remember Hurricane Harvey in 2017, I deployed to Texas following that hurricane, be I was most moved -- that was a fairly large geographical disaster, but I was most moved what happened in Houston, because that just sat off the coast and band of rain dumped 50 plus inches of rain in Houston, and half a million people lost their cars to flooding, people were stuck in homes. But then for some reason they tapped into volunteers, the navy, if you remember the term, a bunch of people with flat-bottomed boats from Louisiana came over to help evacuate people from flooded homes, they needed low flat bottom boats and the emergency agencies didn't necessarily have the resources to do that. So the fact that the Cajun Navy came in was a huge plus. That's where the community, the stakeholders are helping the response. So having those conversations are super critical. I'll give one more example in Utah. There's wildfires that was impacting some agriculture. Some people won't leave their homes without their animals. I'm not just talking about dogs and cats. Sometimes they have horses or other agricultural animals, and the police department in one small town, they were having difficulty getting people to evacuate because they didn't want to see people lose their life, because fire is nothing you want to mess with. But they only had one trailer that could remove horses. So I think they had a four-horse capability, but they had talked about this as an issue. Maybe they could have worked out a mutual aid agreement with other farmers in the area that have trailers that could come in similar to the Cajun Navy and they would have been able to tap into other resources as part of the plan so people get reimbursed for their effort. We'll talk more about that later. I just want to paint that picture of the importance. When we say planning with, not planning for, it goes to both sides. Emergency managers have the burden to plan. We also as people with disabilities, we need to make sure they know what our needs are. They need to know, so we need to engage them, so we have a meaningful conversation. So with that, Sadie, I pass it back to you and you can jump to the next slide.

>> SADIE MARTINEZ: Thank you, Mike. I always love listening to how you eloquently explain it, because it helps me better understand and I'm happy we're able to share that now with this group.

So now we're going to share the story of how -- the story of Colorado and how this position actually got into its place, or supporting emergency support function 5 or office of emergency management. We're insuring inclusion and your agency's core capabilities. Well, in 2012, the Center for Independent Living and one -- one of the Centers for Independent Living, we have nine here in Colorado, but one of them that was in the area of Waldo Canyon fire really responded to that fire and that disaster and trying to help fill -- tried to work with emergency management with filling the gaps of transportation, communication, and maintaining help. Those were the big key walkaways they actually did after an after-action report. We'll talk about my contact information at the end and I can send you that report. But they identified that transportation and public transportation, a lot of people with disabilities rely on public transportation, and when the buyer happened, the Office of Emergency Management used their public transportation to help evacuate the affected area, which then had a

cascading effect on the people who were not affected by the fire. And so that was a great lesson learned, and wanted to work with emergency management, and through that, they have been able to have -- through that event, they were able to identify the need for somebody at office of emergency management focusing on whole community inclusion of people with disabilities as well as people with access and functional needs. They also identified communication needs, such as keeping -- getting an ASL interpreter as part of the effective communication disseminating out. And so learned some good and promising practices from that, to be able to start having the placement and working with public information officers and media to help feel that gap as well. And then maintaining health, a better understanding that sometimes a bunch of good people are trying to do good things, however, emergency management may not be aware of it when a faith-based organization is standing at their own shelter to help their community who engages in that church, and how can we better plan with that faith-based organization to identify if there's going to be any resource needs of -- resource needs or resource gaps that are happening there. And so that was through there what happened is that Center for Independent Living started advocating and working with legislation to get funding tied to access and functional needs role in the emergency support function 5 area. Human services and public health normally do on a regular basis provide those kind of whole community inclusion mindsets. Emergency support functions usually rely -- 5, emergency management, usually relies on those other two to help with that. Sometimes we need it also -- or we have learned that we needed it also in our emergency management role. And so they worked with legislation to actually put some funding tied into emergency management to have this role now included in the -- in Colorado's office of emergency management. And through there they -- the Center for Independent Living also offered recommendations on how to try to keep getting it right, by planning with and filling some of those resource needs and gaps that are tied to legislation and the how-to portions.

Well, in this funding, it's about also helping the local jurisdictions identify some of those resources needed to help save as many lives and property as possible, whole community included. And so we use some of that funding to help resource that -- help -- use funding to help fill those resource gaps. We do that through different ways, such as the Access and Functional Needs Program did some small dollar grant awards. It's also tied in some of the emergency management performance grants objectives and missions, and so those are some different areas. It's also tied into the Section 504, the Rehab Act, and it's deliverable. So really trying to better understand what that looks like and how can it be done as you receive funding in emergency management. And how it's also funded is in those relationships, building memorandums of understanding or memorandums of agreements. Because then we know what is expected of us as we work together with emergency management, not just deploying ourselves and then expecting -- all the costs associated with it and expecting funding back when nobody -- you know, when each side didn't understand what each other is doing. And if it's contracted correctly, then when declarations happen, public -- the partners are then having the capability of getting public assistance eligibility for the funds that were tied to that response of that event, emergency or disaster. And then Section 504 of the Rehab Act is also included in the deliverables. So, you, as an organization, or you as emergency management working with your stakeholders, just trying to better

understand how we work together with that. Again, it's out there, but sometimes it's hard to understand it, because it's all legal jargon, and we want to be able to put it into shared language where we could all understand what we're trying to do there. And most importantly managing our expectations and knowing our limits. Sometimes we have a very small organization. We just don't have the funds available to be able to help in that response unless you're getting reimbursed for that service that we're providing. Otherwise it could cause even a cascading effect of your business. And so we try to take local experiences that have led to my current role, and with it, it's now from the ground up and now led from the top down. So you see how it was a local experience that helped forge what happened -- the movement here in Colorado has come. So there's cross-relationships that can be more robust with like the Centers for Independent Living experience and other advocates that are in your area.

>> MICHAEL HOUSTON: Sadie, just one thing. I just want to talk a little bit about one of the sub-bullets called "Contracted Co-Equity for Public Assistance Eligibility." FEMA has pretty robust requirements when it comes to eligibility to get reimbursed. Typically a disaster happens and the general rule is costs. So if we have to bring in -- I am just going to use sign language, for example, crazy numbers. If the state needed to employ sign language and they didn't have a plan for using sign language interpreters and they're asking FEMA to bring in outside resources to supply that gap, so FEMA goes out and does a contract for \$100,000 to provide sign language interpreting for that disaster, the state is going to be on the hook for 25,000. So typically a 75/25 cost here. Now, what is that benefit of public assistance eligibility? If you had had a conversation -- let's say you are -- I'm going to use a real-world example. In 2016 I deployed to Baton Rouge, Louisiana, for one of the 500-year floods, the entire Baton Rouge parish was flooded, a lot of homes were lost and I think we almost brought in about 4,800 manufactured homes to help people have temporary long-term housing in opposed to staying in a shelter or hotel room. And we moved -- because of the feasibility, East Baton Rouge, this is where all the resources are, where the doctors' offices are, employment, grocery stores, if you will, schools. All of that resources right there in Baton Rouge, and we had to move people, because we had to find locations to put these manufactured housing on pads. So we brought in the Army Corps of Engineers to build out these parks, as it were. So a lot of these were in surrounding parishes, maybe 50 or 75 miles away from Baton Rouge. If you didn't have a car, because about 7500 people lost their cars and most people -- outside of Baton Rouge, there's no buses. Just in the city of Baton Rouge you have public transportation. If you move -- just go 30 miles in any direction and all of a sudden you don't have public transportation anymore. If you lost a car and we're getting you out of a shelter or hotel room to put you in a long-term temporary housing for up to 18 months and put you over here in a neighboring parish or county, in other words, and you needed to get to your doctor's office, which is in Baton Rouge, you didn't have a car, and there wasn't public transportation, how is that going to happen? So what ended up happening, we created a wraparound services workgroup to talk about you know, access to grocery stores and access to transportation, things of that nature. We brought in ESF1, which is transportation. They created temporary routes and brought in buses and drivers and gas money and paid for that manpower to do all that. But what we also learned in that process is the Area Agency on Aging, which is a part of Health and Human Services

under the division of human services, the seniors aging department, they have organizations at the county level that have vehicles, accessible vehicles. You see it all the time. People getting a ride from home to pharmacy, back home again. There's accessible transportation. The emergency managers ended up tapping into their vehicles for that assistance in providing accessible transportation, because some of these Greyhound Buses did not -- in fact, most Greyhound Buses don't have accessibility for people that use wheelchairs, for example. So we had to tap into other resources, and they found that all of a sudden not only did they have -- they were taxed from a capacity standpoint to serve the area they reside in, they were not affected necessarily by Baton Rouge's flood. They now had to add on a bunch of people that they add to their capabilities, which exceeded it. And so they were like, we've got people working overtime, we have wear and tear on our vehicles because we're taking extra trips and mileage, gas expenses. So all of a sudden FEMA starts saying, it wasn't part of your plan. Maybe it's not necessarily eligible to get reimbursed. So people are not going to want to help if it's going to -- if it's something they have to pay out of pocket and get nothing in return. So I say all that to say this... the value of engaging with the emergency managers from a resource capability, when we talked about previously the THILA, the flood assessment, when you do these stakeholder preparedness review and see, oh, my goodness, in my community I have 2000 people that are stay-at-home. They are home-based services and require transportation. And I don't have as an emergency manager, I don't have that capacity to supply that ride. So I need to find an outside source. And rather than go to the federal government, if that's \$100 million, you know, that's \$25 million that the state or county would have to pay and most budgets may not be able to absorb that. My point is if we have conversations pre-disaster and say I've got posters and flat-bottomed boats in case we have a flood, a wildfire, I can help you. But I'm going to need a little bit of help in return. If that becomes part of that emergency manager response plan and articulated in that plan that is submitted to the state, which is submitted to the federal government, mitigation plans, if that is captured pre-disaster, then recovery officer that works for the state can then have a robust conversation with all of these resources that are coming to bear and articulate exactly what gets eligibility and what doesn't. And so what gets eligibility gets absorbed into the capacity, the capabilities. What doesn't then becomes a strategy for the state. How do I support this? Because counties go to the state. The state helps counties. The federal government helps the state and together we help counties. So understanding that ICS structure and how all that flows, it's not always a FEMA issue. Sometimes it's a state issue. Sometimes it's a local jurisdiction, and definitely a lack of collaborative communication at that local level. So if we can build a robust bridge, if you will, bridge the gap of bringing people together, and we'll talk about this in a couple of slides, but having that conversation about what resources do I need or don't have and finding ways to build that into your plan, so it becomes potentially part of an eligibility reimbursement thing, it's less of a cost here, but more of a reimbursement to the state. So there's a lot of good positives involved with that and reduces the complexity of FEMA and the bureaucrats that happens at the federal level. Sometimes it takes time to work things to get approval. But if it's talked about pre-disaster and it's all iron-clad part of the plan, chances are you are going to have more reimbursable capabilities which then brings to bear more resources and participation from stakeholders, the whole community tipping

in to help -- neighbors helping neighbors. So just again, managing the expectations and knowing your limits becomes important. So if I only have four vehicles and the state is asking me to tap into all four and I have a clientele list of 30 people that I provide rides with and now all of a sudden the emergency managers are taking my resources, how do I serve those that weren't directly impacted by the disaster? We don't want another disaster, people not being able to go to the doctor's office, for instance. So those real conversations have to happen at the local level. So I hope that clarifies a little bit. I know there's a lot to absorb, but we're here to answer questions. With that, Sadie, I'm happy to move to the next slide.

>> SADIE MARTINEZ: Thank you, Michael. So as we're listening to that, we also know that the best way to do that is have an inclusion assigned as a responsibility for a member of your team. Not other duties as assigned. Otherwise it doesn't get done. I always think when we tell everybody -- somebody go take the trash out, nobody takes the trash out unless we give an assignment to them. So as we think about that, we also need that person to be able to coordinate. It requires a person to be able to record that. I think also as ADA coordinators at times, sometimes your job role is something different but you're also the ADA coordinator. Well, you know, being able to do some of those jobs, it requires 100%, not just every once in a while as that role. Such as the ADA liaisons that may be in a position in your organizations or in different areas. And so we want to make sure that there's an opportunity that there's somebody assigned to it. Because when that happens, we're able to support the how to do it, the how am I able to tie it to the laws and regulations for whole community inclusion? Such as the Section 504, the Rehab Act, the ADA and effective communication, the Section 504 -- 508 of the Rehab Act, there's lots of stuff out there, but when we're not doing it on a regular basis or we're not doing it as my assignment, I'm not really able to understand how to do it. I just know that it's supposed to be out there kind of thing. When we assigned somebody in that responsibility and in that role, it helps with the equity in there. And so before I go into talk about the Colorado's growth story, Mike, do you want to add anything else on that?

>> MICHAEL HOUSTON: I'll give a view of what I do. Sadie is in Colorado and going to talk about that, but my role as a federal -- I'm in Region 8, Montana, north and South Dakota, Wyoming Utah and Colorado. And there are a lot of rural communities, people that are out there. Not like Denver or LA where there's lots of resources, but when you get out into -- in some places like Wyoming they even call them frontier. You know, you're out there on your own, so it becomes even more important that we communicate our capabilities. So when you talk about other duties assigned, I look at my role and I have six states that I'm -- six Sadies that I'm trying to get them to work with their counties to we can better understand what their gaps are. But also I'm working with the divisions and program areas in Region 8, the hub of FEMA, and all of their public-facing activities, mitigation, response, recovery. Recovery has individual assistance, public assistance. All of these different program areas who provide when a disaster happens these resources. I have to prepare them to have programmatic solutions in place in case they come across somebody that needs something that we didn't think of. And so we can't say you can't have access to FEMA because, you know, we didn't think about

that. No, no, no. The Section 504 says no otherwise qualified person can be excluded. That's pretty strong language. So as an agency with strict laws and rules and regulations passed by Congress and so forth, we have to have programmatic guidance. So, you know, if my role -- if I didn't have -- if Region 8 didn't have me in there talking to the FEMA side as well as engaging on the public side, the Sadies and the states and counties, then perhaps FEMA would not know how to work through gaps that they come across. So my job, my role, other duties assigned, nobody is created equal when it comes to expertise. They know how to deliver a program but they don't know how to bend the rules to make sure we're meeting an unmet need. And we talk about all the functions that come into play and all of the resources and typically they also don't have a disability adviser helping in their own discipline. My role and Sadie's role becomes bigger. If we're lacking, if the state and federal government is lacking those positions, then the program areas that deliver the things that people need to respond are not -- by definition they're not going to be equitable. They're not going to think of everybody in that whole community. So, again, having other duties assigned means there will be gaps. And gaps sometimes mean people die or sometimes people don't recover and they become an unwelcome statistic. They may lose their home, they're now homeless. It could have been avoided. There's a lot of unforeseen consequences that we talk about, and we also bring our expertise and disaster operations, so that it's fluid. We have opportunities to analyze gaps and say, here are some courses of action to help you mitigate this potential violation of civil rights, if you will. So, again, if you don't -- if there's other duties assigned, you don't know what that person may or may not know in addition to their area of responsibility, so when you have someone like myself and Sadie working together, I have a special title with Colorado, as Lewis mentioned before, I studied before I came to Region 8 I was on the IMAT team at headquarters. And they went to big disasters, hurricanes, big disasters rather than some of the smaller one-county or two-county type disasters, but when I deployed out here, my predecessor in Region 9, Roxy was there before me and established relationships with stakeholders. When I came in, together we were able to utilize our presence to have a listening session, before we... a word for saying, we're out of here, our job is finished, we're going back home. We had a chance to establish a listening session with stakeholders at the community level to talk with senior planners for Colorado Homeland Security emergency management to talk about what worked and what didn't in a major flooding event that took place in September of 2013 in Colorado, so still in some way or another doing work from that disaster.

So, again, if it's other duties assigned you're gambling, and people deserve more than that. All right, Sadie, I'll hop off my soapbox there and give it back to you.

>> SADIE MARTINEZ: No problem, Mike. We're going to talk a little bit about Colorado's growth story. So now that we actually have this access and functional needs coordinating position in the state at the state and the office of emergency management, we started seeing that, you know, we started seeing the growth of equitable -- you know, information now being shared across Colorado in different languages, including asking for accommodations, different things that sometimes are missed, when too many people are doing it and don't understand. And it's not that they're -- they're not bad people. There are a bunch of good people trying to do good things. They're just not --

it's as other duties assigned and not really understanding the purpose of it. So we started out with just myself, and we were trying to build contractors out in the different all hazards regions, and notice that, you know, sometimes people just don't even understand what we're really trying to do there. And we weren't able to be successful. We tried a few course of actions of trying to bring in other people. And as we're trying to do course of action, the demand or the request of having the resource, the people resource, the access and functional needs coordinator, to be included, started becoming bigger and bigger. And then I started at the end of 2018, literally middle of November in 2018. 2019 we started having some great momentum doing workshops across all of Colorado, trying to understand where everybody was at, and then helping them meet their goals as they keep growing their whole community inclusion. And towards the end of 2019 we had a getting it right conference where we partnered up with some national subject matter experts from the partnership for inclusive disaster strategies to help us try to start talking about how do we fill those -- you know, we already know the problem. How do we now find ways to fix those problems? By working together in that planning with approach. And simultaneously we were trying to find -- make sure our materials were reaching out to the community, and I'm going to drop in the chat what we started doing with our all hazard resources, preparedness resources. We started getting ASL videos that were captioned and voiced, as well as put this information in different languages. We're still growing that as we keep seeing the need in there. We also were gaining that wonderful momentum. And then all of a sudden this worldwide pandemic hit us. Well, what happens with that is that we have relationships, but, boy, those cascading events started taking its toll with one person, and I've got to say, I wasn't one person. I had the support of our -- we had a statewide -- a state-level Homeland Security advisory council access and functional needs subcommittee and I had to pull in and ask my partners at our assistive technology to come in and help where I was just being pulled in too many different places. I had to ask our other subject matter expert that sits on the panel who has -- I think at least 30 or 40 years of experience with whole community inclusion and emergency management to come in and start helping me out, as all of our other partners who were on there, which it includes stakeholders who are tied to whole community inclusion and emergency management, as well as our emergency support function partners, emergency support function 8 and emergency support function 6, human services and public health. And I know I'm speaking to the choir here, but that's all of -- think about everybody who was affected by that pandemic, the COVID, and everybody was responding, because there was just not enough -- we all needed to come into it together. And so we all tried to do our best. And through that we -- you know, we also had civil unrest that was occurring as well, that we had to respond to, as well as fires, as well as snowstorms, as well as all the other stuff, and so what we did, I finally got the opportunity to expand my team. And so now I have two other whole community inclusion planning specialists who have joined our team to help still multiply what we're trying to do here in Colorado. And as we do that, we're going to start being able to get even deeper into that local area to be able to keep growing that access in functional needs assigned duties person to be able to support emergency management, as well as stakeholders and partners during emergencies and disasters. And so with that, that is kind of our story, quickly. But I wanted to be able to share that information.

So with that I'm going to go on to the next slide. So when we have this position that focuses and ensuring equity and equality in all phases of emergency management, we actually start getting lessons learned from real-world events. And with that what we do is I call lessons learned changed behaviors. Because we could have after action reports, but if nothing is getting done with those after action reports, then what we do is we repeat the problem again. And that is when we start having chronic situations or chronic resource gaps that happen that then are cascaded or they're multiplied at a higher level when there's areas that were under resourced and under supported in our communities prior to the event. And so we are looking at the situation of the emergency or the emergency disaster event that we need to get those resources to all of our community members. And so we have learned so many wonderful real-world examples -- real-world examples from when we were in COVID, a lot of our other states were reaching out to us in Colorado, and us in Colorado are reaching out to our partners in California and North Carolina who have some programs that are working really well, and all of us started needing to network, and due to the concurrent disasters and COVID, we decided to start meeting at -- nationally at a state level to help share good and promising practices and lessons learned right away instead of waiting until after COVID, because as we see, we're already -- we're still in COVID. We're not done with COVID. And so in there, some of the examples was, how are we getting personal protective equipment to our home and community-based community members? When that's a whole different partner that hasn't been at the emergency preparedness table? And so what we did is we started working together on identifying who are those providers? How can we get this personal protective equipment to community members who are in need of that? And who are also more at risk of getting the virus. We also looked at language access, such as ASL interpreters, ensuring that they were next to the governor or after that we learned how to do picture-in-picture and get a better crisp view of ASL interpreters in the camera, so the information is getting disseminated realtime to people who use ASL. Also information getting to people who speak different languages as well.

We also did data collection with the social vulnerability index identifying age, disability and ethnicity. Because those were under-resourced prior to. Those chronic areas, those chronic under-resourced areas before an event. So now we -- and if relationships aren't built prior to, now we have to go and make sure that we have trusted community members who can help us multiply what we're doing. So we can save as many lives and the lives and things, property that people have during emergencies and disasters. Also we identify access to food during lockdowns without transportation resources. When we think about people with access and functional needs, our shared language here in Colorado with emergency managers, stakeholders, and me as just a person is what resources do I need access to in order to function during emergencies and disasters? We use the C-MIST model. We need communication resources, maintaining health or medical resources, independence resources, support services and safety resources, as well as transportation resources. And the reason why we focus on that is because history has shown us over and over those resources are the resources that people needed that lost their lives. So we want to try to save as many lives as possible by making sure those resources are available. That monthly call is an excellent collaborative platform for states to work with other states, peer-to-peer,

including our stakeholders and partners, our state level partners or national level stakeholders and partners to observe, listen, and lend support and guidance as needed. This all started with a conversation between Mike and I. Mike started seeing the need come in, the request come to him as a Regional Disability Integration Specialist. I started seeing it as a partner in different states coming in. So we started that meeting. We are going to go into next Monday, or on Monday -- we'll be going into our 16<sup>th</sup> meeting. I can't get over that it's already been that long that we've been meeting and collaborating and learning from and with. So with that I'll go on, unless, Mike, you have something more to add on this slide, I'm going to go ahead and hand it over to you.

>> MICHAEL HOUSTON: I just want to say a couple things, one on the data collection, it's an equity effort. Think of those in the community that may have, for whatever reason, distrust of government, whatever that government level is, federal down to the local jurisdictions. It could be language. It could be ethnicity. It could be undocumented. It could be whatever. But within all of those groups, there are people who have access and functional disabilities and people with needs. If they don't get those needs likely they're not going to recover. And likely life gets harder. So it's so important that we get a Bert understanding when we encourage planners to know who is in your community. And then conversely get those community members to be involved in that process. So it's really important. And as far as the 16<sup>th</sup> call, that is mind boggling to me as well. Remember the first call, my colleague in Region 10, Danielle, she said, hey, I have in Alaska an ADA coordinator who his job was an ADA coordinator for the government. But he got pulled into -- if you remember what happened in Alaska, they had a big earthquake just outside Anchorage, so he got pulled into the Emergency Operations Center there and became the de facto Disability Integration Adviser. He no longer was doing his ADA coordinator job. So that was one year. Then the next year they had a bunch of fires in Alaska. And he had to maintain all the -- all of a sudden he felt like he was taken up residence in the Emergency Operations Center. He couldn't go back to his day job. The following year COVID happened. All of a sudden this one guy who is trying to manage the complexity of what Alaska is in terms of geographical challenges, transportation challenges, communication capabilities, he's like, I'm overwhelmed. And so he reach out to his Danielle and the regional specialist and said can we have a conversation with Sadie, perhaps you can shed some light. And then I got to thinking, you know, we facilitated that call. Sadie, why don't we do something -- I'm sure he's not alone. I'm sure there are people in the country that are drowning and could use some help, some guidance, advice, what have you. So this call started in May of last year with seven participants. I think it was seven states total, has grown to what now -- 76 invitees, is that right, Sadie?

>> SADIE MARTINEZ: Actually, it's up to 80 now, yes.

>> MICHAEL HOUSTON: It's up to 80. From the first call to now, there's been ongoing compilation of data collected from people asking questions or how they have done something or what have you that another state didn't think about and they're like, oh, can we touch base with you after the call? And help us out and this, that and the other. It's a network of sharing resources and capabilities that maybe others hadn't thought about. So rather than having it go unknown, let's get together and have a national state-led call that Sadie has been leading, and they have been contributing. And so a

lot of them come from the public health side, because a lot of states are very robust in the seamless model that Sadie alluded to, a lot of that resides in public health in that sphere of Health and Human Services, so there's a lot of representation, but then there's not a lot of emergency managers, which is where the rubber meets the road when it comes to FEMA, when it comes to federal dollars and recovery, response, all that. That falls under ESF5. It's important to understand all these different ESFs, the different responsibilities and roles and how the interconnectedness and having that task force that comes together and brings everything together as far as equities to look at problem and tackle it together with not just one lens but with multiple lenses. So I think I'll leave it at that. It's really good stuff to see that monthly call grow, because as a federal agent, I get to step back and watch states helping states, which is awesome. Peers helping peers. That's really effective. So with that, Sadie, next slide.

Yes, so we're going to go back, and we kind of have been already telling you about how our blueprint, how we formed our blueprint. And so now we're going to talk about how our blueprint -- let's see, I got tongue tied there. Our blueprint can help you achieve a similar outcome in your state. So here in Colorado, this is how we have it formatted. The access and functional needs coordinator sits in the ESF5 area in the plan section, in our office of emergency management. And then the state Emergency Operations Center, this also sits in the plan section of the Emergency Operations Center. We also have -- we also try to have a language or try to help others understand that there's ADA coordinators that can help you through all your compliance, all of your laws and all of those areas, if you have those kind of questions. What we're doing with our access and functional needs coordinator role is we are a people resource. We are the one that is helping you learn how to do it. We're not the AFN or the ADA police. We're not there to try to tell you what you're doing wrong. We're trying to help you get it right. You do self-assessments, you have ADA coordinators that can help you with all of those other areas, so we're here to help fill that gap. We also are filled in the incident command coordination, emergency support functions. We also have regional disability inclusion specialists, civil rights advisers, and in our core groups that help us as we go in and are asked about, hey, how can we make this whole community inclusive? So we start helping them and guiding them like we did with that collaboration of community-based testing sites, alternative care facilities or sites, vaccination sites, the joint information center. We have the inclusion of our emergency support function 8 lead focusing on the access and functional needs portion of that C-MIST area. And so the C-MIST resource areas. And I'll drop that in the chat so you can be -- I use that as a memory tool in there. And then we also started add listening session at our state-wide access and functional needs resource and information share meeting. So as the events were happening, we started -- in COVID we started those meetings in COVID. We were going twice a week. Then we went to once a week. Then we went to once every other week, and then once a month. We are going to do next week will be offering our -- I believe our 37<sup>th</sup> meeting from the time that we started. This is a great opportunity for emergency managers, our stakeholders, our advocates, our community members to join us so we can all learn what we don't know, because we just don't know. And then we could also have lessons learned and changed behaviors as we go through it.

And in those lessons learned sessions and during the event. So that's how we're able to do this and keep us focused on building our whole community inclusion with our Colorado blueprint.

And so with that, that's where we have that portion. Do you want to add anything else in this slide, Mike?

>> MICHAEL HOUSTON: Thank you, Sadie. Before we mention ICS, Incident Command System, the federal, state, local, when a disaster happens, because Colorado took the initiative to go and fulfill a position, the coordinator that Sadie has, she has been collaborating with all her in-state peers, the Homeland Security advisory council and resides on that and we have a robust ESF6 and connections, and I get deployed as an adviser and FEMA sent out civil rights adviser to make sure you comply with civil rights. Doing this together we become a robust task force. Data is great. When you look at the data of your population and the complexities of that data, what is even better than data is analytics. If you have a team of four or five or six, seven, eight, multitudes of counselors, there's safety. We have all the areas of expertise and skill sets that come together and we see a problem like community-based testing sites, we learned that the Colorado Department of Public Health and environment, they had a playbook for that, hastily put together, because we think about pandemics, but when we are actually in a pandemic things kind of happen rapid-fire. When we went through the playbook and found a lot of gaps that would have led to populations being excluded. So as a team, you're able to collectively look at that product, that playbook and able to offer a lot of courses of actions to insert in that playbook to ensure that all statewide community-based testing sites would be considering whole community inclusion. Because of that they absorbed everything that we have to offer. So maybe if Colorado didn't have that, there was another duty assigned and somebody hadn't been coordinating all the assets in Colorado, it might have been harder to create this robust task force, so we would not have had the outcome potentially that we had in Colorado. So, again, analytics are awesome. I think it's far better than data. Everybody can get data, but what do you do with that, what does that mean? Where are the gaps and I packets? How do we take -- impacts? How do we take it and provide as a team, that's what a task force is, a strike team would be anybody with similar skill sets like search and rescue. But a task force, we have all of these different disciplines that come together and create this super team so to speak with different responsibilities and we're able to have a much broader analytical team that can come up with what whole lot more courses of action to mitigate gaps. That's where the whole creating a position that coordinates that at the state level, it's so helpful for the federal agencies to then collaborate on that ICS together and collect all of those expertise together in a task force to really serve that local districts and where communities reside. I think the lessons learned from this, I think Colorado learned from that. Sadie is one person. This was a lot. They're like, we need to get you more help. Hopefully FEMA will do the same thing. I'm one person and manage six states. It's a lot. But if I ever have more people, I think more things can get done. There's always opportunities for lessons learned, how to improve, how do we innovative? How do we learn from past disasters to get better at what we do going forward. So that was a mouthful. I'll stop at that, Sadie, and we can go on to the last slide.

>> SADIE MARTINEZ: Awesome. Well, thank you so much, Mike. So our last slide is really asking you to call -- have a call to action. And those steps. And when you do that, have the local state level whole community -- whole community and emergency management conversation and action plan. How can we do that? That's what we're trying to help with that, is learning how to do it, not just telling you to do it kind of thing. And so that is what we're asking you to do with your partners, your emergency management partners, your stakeholders and your community. Also, we're inviting you to join our national access and functional needs call to help -- to be a resource as well as bring up some of those needs that you're meeting in your area and we can -- we can all work together finding our stakeholders, our partners, our multipliers to be part of that. Earlier I put in the -- I put into the chat, and also this information is on the slides that Lewis had put out at the beginning or had sent you to at the website. These slides are available with this information as well as he's going to send it out afterwards as far as I understand.

So with that, I --

>> MICHAEL: I've got a couple things to add in closing. I'll give a real-world example of call to action what I do at the federal level when I'm in states. You know, Utah is one of my six states and I have a robust relationship with the emergency management. They do not have a person like Sadie in Utah. The ESF8, the Department of Public Health, they do have access and functional needs coordinator adviser kind of person who advises on that side. When COVID hit, you know, the social unrest happened, vaccinations, all of that, lieutenant governor formed what they called a vulnerable population task force to try to address the populations of Utah. When you think about what we talked about today, the responsibility jurisdiction of responsibilities, ESF5 being emergency management, ESF8 public health officer, both report to the governor. So when you look at what I saw, what I did, I analyzed that task force. This is awesome you're doing this, but looking at the people at that table, robust smart people at the table, but you're missing subject matter experts from disability groups, ethnicity groups, public health, maybe from emergency management. And so perhaps we could be creating what I call a triangle effect, and that is emergency management doesn't have a Sadie but they could send a liaison or they could find a way to send a liaison as part of that vulnerable population task force, as well as public health doing the same thing, and rather than just if governor thinking about just the whole state, now we also have participation from emergency management and public health, which broadens that stakeholder outreach as it were. So that was a course of action that I offered to state. Now, they're going to figure out what works best for them. Hopefully they will see. I think they have recognized it's not assigned and may be in process because they called and asked Sadie to participate, hey, can you tell us how you did stuff in Colorado? So, again, that's much easier for me to get a state helping other states so that they can learn from peer to peer, but those are some of the calls of actions that we need to get involved with. So people who are deaf don't want to get involved in advisory council, then how are planners going to know how to provide services to the deaf? They're going to plan for, not with. So the call to action is to get involved with emergency management, start with your local emergency manager where you live. You can get involved with their local planning commission and become a voice. It could also be a county. It could also be the state. Your voices are important, your perspective -- it's not

a complaining session you're not doing this or that. It's more about the whole. What do deaf people, for example, have a need for? What do people who are in an ethnicity group have a need for. As you come together, emergency managers will learn from that. I did see one of the questions in the chat was talking about registries. I think registries are a tool in a toolbox. I don't think -- you know, some people look at registries as the end-all be-all and I think it's a false positive. I think if that's what you're relying on, the variable, if you have a registry, that's fine. But the variable is you don't know if that person is going to be home, you don't know if the cell service is going to work, they may be in a different location. You know, people in emergency management may quit and get another job, retire, move on for whatever reason. You know, things change. So typically don't typically maintain those registries. And so, again, I think it provides a false sense that people are going to come save me when, in fact, people need to be planning, what do you need? Because your needs are different from another person's needs. And if you have 1,000 people on a registry, it's just an evacuation, but with that comes a whole 'nother can of worms. What evacuation assistance do you need? When you go to a location, what assistance do you need from there? Forward movement to -- it just becomes very complex. So I think it's better to have a conversation about that planning level at the local level as they assess what their risks are and then when they confer with the state, this is what our plan is, the state collects and compiles all of that. There may be a place for registries, but, again, I just think it's a tool in the toolbox, not the only tool.

So, again, I just think the value is really in that whole community conversation, people being willing to come and be part of a bigger group to say, hey, we need to get better how we plan and respond to the whole community.

So with that, again, I echo what Sadie said. I welcome you to join the monthly call and get on board and share your perspectives, learn. There's a lot of good information that comes and goes and is shared and captured. Sadie has been capturing ongoing, all of that information that has been collected. It's not proprietary. So all of a sudden now you have this humongous playbook of strategies that other states have done that you might not have thought about, so on and so forth and it becomes available to all. So that to me is really awesome. So with that I do greatly appreciate the opportunity to join Sadie today and I think, Lewis, Sadie, if you don't have anything further, we can maybe move to a Q&A session.

>> SADIE MARTINEZ: Yes. Thank you.

>> LEWIS KRAUS: Thank you, Mike and Sadie. This is time to submit questions in the chat window if you have not already and we'll get to those in a moment. I do want to clarify a couple of things. One is this call that they have. People have been interested in how to join. While Sadie did put it in the chat window we are aware that some you do not have the capability to copy it from the chat. So you can call us or contact us at [adatech@adapacific.org](mailto:adatech@adapacific.org) and we'll send you the links that have come out during this session. Okay? And that would be -- that will be the way to solve that.

All right, now, let's take a couple of questions here. How close are you working with county voluntary organizations active in disasters? Can you give us an example of how you're collaborating with the VOAD or do you have MOUs established?

>> SADIE MARTINEZ: With that question, we actually, in our state level access and functionally subcommittee, our chair of the Colorado VOAD, volunteer organizations active in disaster, actually sits in that and has a role in there, as well as partnering up with them as needed. So what we do is we work with them and through them at this time, and as we keep growing, our whole community inclusion, we'll get that even at a local level as we continue to grow with that whole community inclusion. Did that answer the question? And, Mike, do you have anything else?

>> MICHAEL: From the federal side I would say it's a little more challenging on the federal side from the volunteer agencies active in disasters. And since that, disability organizations by and large are themselves nonprofit in some way or another, but oftentimes they don't necessarily have a product to offer. I'll give an example. The Southern Men's Baptist group, they're well known for bringing food wagons. They go a disaster and cook hamburgers and hot dogs and feed the neighborhood. They have a service, a product to give. Look at Catholic Charities, they bring crisis counseling, all of those kinds of services. So when you look at VOAD, they're looking more from a federal side. What organizations can bring resources in that isn't necessarily covered by FEMA with taxpayer dollars? It's not going to be something -- FEMA is not going to feed all of the community members that maybe have been displaced by a flood. And so the Southern Baptist group bringing in these food wagons becomes a huge asset to that response. So what I would say on the federal side, if you're an organization that has a product to serve, because often like Independent Living Centers, they have services they provide to a specific clientele, but it's not necessarily available to everyone. I'm not saying that's fact, but bottom line, if there is something that you could offer, maybe counseling, maybe whatever, it might be then a subcontract capability under Catholic charities, for example. Those are worthwhile conversations and managing expectations and knowing what your limits are, what capacity, if I have vehicles I would like to donate, things of that nature, into that response capability, then it has to be part of that plan. What Sadie talked about earlier, the public assistance eligibility. So it's a little different on the federal side. At the state and local side it's great to get as many of these organizations together, because if you don't have a federal disaster oftentimes Red Cross or Salvation Army or Samaritan's Purse, they come and help even if there's not a federal declaration. There is a need there but I would say understanding what resource you can bring to bear.

>> LEWIS KRAUS: All right, let's move along here. So a couple of items that got brought up in the chat and were brought up by Sadie and Mike before about the question about registries and what C-MIST is have been subjects of previous webinars that went into depth about all of those. So you can go back to the archive of [ADApresentations.org](http://ADApresentations.org) and look at those sessions if you have a particular interest in those. We are getting a lot of questions here at the end, I don't know that we're going to get to them all. Let's try one here. So, I think since you're talking to a bunch of people who are here from California, this will be relevant for us here. How might the same strategies and practices be tailored for public safety power shutoff situations? How can the utilities initiating these PSPSs adequately engage the community to mitigate the associated risks?

>> SADIE MARTINEZ: I will tell you here in Colorado, one of the things that -- the strategies we use, because we were trying to target a certain demographic, we had listening sessions. We had a listening session where we listened to -- this example would have been our Latino Leaders listening session, and emergency managers listened in to learn some of what is going on there. Then next steps are to work together to help build those gaps. And so start the conversation. Reach out to somebody who is a community connector to be able to be part of those conversations. And so with that, that's what I would recommend, and how I would strategize that here in Colorado.

>> LEWIS KRAUS: All right. Let me add one more -- one comment, and then one more questions here. Somebody wrote, it's very important to know the difference between planning for and planning with. When Hurricane Maria hit Puerto Rico, there were no sign language interpreters and they had to request the assistance of FEMA to bring sign language interpreters to Puerto Rico. When they arrived in Puerto Rico they realized that the local people did not understand them. In Puerto Rico there is a lot of regionalism, including with the deaf population. This is an example of planning with. It is very important to know the difference between planning for and planning with. So, there you go. That was that comment.

Next question. Have you analyzed if social media channels with regular posts, short videos or infographics are effective on preparedness for disasters for people with disabilities, individual families or collectives?

>> MICHAEL: If I could, Sadie, if I could real quick, I know you have more to add. Social media is super helpful. That's how most people are connected these days. So Sadie mentioned earlier multipliers. So when we get -- if an emergency manager knows that I have, say, 10 different individuals that serve a population, whether it's language, whether it's disability, whatever the case may be, if I can get those 10 people to be -- I'm going to send you a message from external affairs or the joint information center out to the public, could you populate those messages through your channels, Twitter, Facebook, whatever the case may be, and then they can become that trusted source for the recipient, because they may know that person that sent the message but they may not know me through FEMA. So that builds that force multiplier capability of bolstering outward messaging as well as receiving unmet needs, emerging issues, like Puerto Rico, I'm sure there were a lot of messages that rose from the community level up that we were not able to see at the top level down. So it really takes that back-and-forth communication. I'm all for social media. I just think there needs to be a way -- you know, emergency managers don't always have the capacity to man that. So that might be something worthwhile to look into if you're looking to support your local agency, hey, we've got four or five volunteers that might be able to monitor social media, for example. That can become part of the plan.

>> LEWIS KRAUS: All right. Well, we realize that many of you may still have questions for our speakers and apologize if you didn't get the chance to ask your question. Their contact information is there on the screen if you would like to contact them directly. If your question involves the Americans with Disabilities Act, you can contact your

regional ADA Center at 1-800-949-4232. And they can answer that question for you. You will receive an email with a link to an online session evaluation after we're done here. Please complete that evaluation for today's program as we value your input and want to demonstrate the importance of this session for our funders. We want to thank Mike and Sadie today for sharing their time and knowledge with us, and a reminder that today's session was recorded and it will be available for viewing next week at [ADApresentations.org](http://ADApresentations.org) in the archives section. Our next webinar will be held on September 9<sup>th</sup>. We hope you can join us. Watch your email two weeks ahead for the announcement of the opening of registration for that session. And once again, thanks, Mike, and Sadie, and for all of you, have a good rest of your day and thank you for attending. Bye-bye!

>> MICHAEL: Thanks, everybody!

>> SADIE MARTINEZ: Thanks, everybody!