

REALTIME FILE

Pacific ADA Center
ADA NATIONAL NETWORK LEARNING SESSION:
ONE YEAR AFTER HURRICANE HARVEY, HOW IS HOUSTON
MAKING ITS DISASTER PLANNING DISABILITY INCLUSIVE?
SEPTEMBER 13, 2018

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>> Lewis Kraus: Welcome to the Emergency Management and Preparedness Inclusion of Persons 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 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.

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This is the fifth 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 webinars provide an opportunity for emergency managers, people with disabilities, and others with access and functional needs, first responders, planners, community organizations, and other community partners to exchange knowledge and information on promising practices in an inclusive emergency preparedness and management for the whole community.

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 www.adapresentations.org/schedule.php. These monthly webinars occur on the second Thursday of the month at 2:30 p.m. eastern, 1:30 central, 12:30 mountain, and 11:30 a.m. pacific time. By being here you are on the list to receive notices for future webinars in the series. Those notices go out two to three weeks before the next webinar and open that webinar to registration.

You can follow along on the web platform with the slides. If you are not using the webinar platform, you can download a copy of today's presentation at www.adapresentations.org/schedule.php.

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, type in the chat box area or press control m and enter text in the chat area. If you are listening by phone and not logged into the webinar, you may ask your questions by e-mailing them to adatech@adapacific.org.

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Before we begin today I just wanted to say to our colleagues, friends, and family in the path of Hurricane Florence that we understand why you might not be here live but we hope to see you in the archive and we hope everyone prepared well and their plans do a good job of including people with disabilities.

And it's a fabulous segue into today's National Network Learning Session titled, "One Year After Hurricane Harvey, How is Houston Making Its Disaster Planning Disability Inclusive?" Hurricane Harvey hit the Houston area about one year ago. And in this presentation, Maria Town of the Houston Mayor's Office of Disability takes a look back at the inclusive planning Houston has done in preparing for emergencies, the success of the planning

during the event, and the recovery issues for people with disabilities. She will also review response tools that were unsuccessful during the hurricane and look at new one that could impact readiness, preparedness and resiliency.

Today's speaker is Maria Town, the Director of the Mayor's Office for People with Disabilities in the city of Houston. In this role she advocates for the rights and needs of citizens with disabilities, serves as a liaison between the mayor, city council, city departments and other public and private entities on matters pertaining to people with disabilities in Houston and establishes local and national partnerships to advance inclusion. Her most recent work has focused on Hurricane Harvey response, recovery, and expanding supported employment options in Houston.

Town is a former Senior Associate Director in the Obama White House Office of Public Engagement where she managed the White House's engagement with the disability community and older Americans. Prior to this, Town was a Policy Advisor at the Department of Labor's Office of Disability Employment Policy, or ODEP. While at ODEP, Town led and coordinated numerous efforts to improve employment outcomes for youth and young adults with disabilities. A recipient of The Arc of Greater Houston's Achievement Award, she was recently named to the Susan Daniel's Disability Mentoring Hall of Fame.

Maria, I'm going to turn it over to you.

>> Maria Town: Thanks very much, Lewis.

Hello, everyone. This is Maria Town. Thank you all for joining us today. I want to echo what Lewis mentioned earlier. For anyone who is in the path of Hurricane Florence, we're thinking of you and understand why you can't be with us today but hope that this information can be useful for you in the future.

So Hurricane Harvey hit one year and two weeks ago today. A lot has happened since then. And how is Houston making its disaster planning disability inclusive? That's what we will talk about today. And I'm just going to jump in since Lewis gave such a great introduction.

The first thing is I wanted to tell you all a little bit more about the Mayor's Office for People with Disabilities. The Mayor's Office for People with Disabilities was established in 1993, shortly after the signing of the Americans with Disabilities Act. We serve as the primary advocate for the rights and needs of citizens with disabilities in the Houston area. We also serve as a liaison between the mayor, city council, city departments and other public and private entities on matters pertaining to people with disabilities in Houston. And we work very closely with the Houston Commission on Disabilities.

The Houston Commission on Disabilities is a 16-member volunteer body that is appointed by the mayor. They are advocates and work on a range of issues from housing and tenancy to emergency preparedness to transportation and community integration. On this slide is a picture of the Mayor's Office for People with Disabilities team. It's a picture of five people posing on an inclusive playground. And I am the person in the hot pink sneakers.

One of the reasons that I wanted to put this picture up and talk about the MOPD is because like many municipal disability entities across the United States, we are a very small but mighty team. So Houston is home to approximately half a million people with disabilities and we are the only Mayor's Office for People with Disabilities in the entire State of Texas. And this became a pretty critical point during the immediate response to Hurricane Harvey.

So how do we actually -- how does the Mayor's Office for People with Disabilities work on making Houston more inclusive for those half million people with disabilities? We

conduct training and awareness programs like the one we're doing today. The city of Houston, like many sunbelt cities in the United States, makes sidewalk fixes the responsibility of the abutting property owner, except if you are a person with a disability and broken sidewalks create an access barrier for you.

So we work with Public Works to get sidewalks fixed. We also provide free visual fire alarms to people who are deaf or hard of hearing. We provide free legal clinics to people with disabilities through a collaboration with vocational rehabilitation. We provide employment services. We also do some case management and social work. And we, finally, provide policy and program recommendations to the mayor's city, state leaders, and private entities.

You'll note that nowhere in the outline of our responsibilities or our mission have I mentioned an explicit responsibility towards emergency management, disaster preparation sponsor resiliency. But because of Houston's position in the United States, its geography and frequency of disasters here, it has become a large part of what we do.

On August 28, as Harvey was making direct contact with Houston, what did we do, the Mayor's Office for People with Disabilities? Again, we have a very small team. In fact, two of the folks that y'all saw in the five-person picture of volunteers, but we have a very big mission and a very big population to serve, a population that was particularly vulnerable during Hurricane Harvey.

One of the biggest things that we did was we engaged in community coordination. Before Harvey hit, we began to organize daily calls with disability community stakeholders across the effected region. This included Centers for Independent Living, individuals who were experiencing difficulties, state partners like the Health and Human Services Commission, Managed Care, organizations, condition-specific organizations like Autism Rescue Angels, also a local autism organization in the city of Houston, among many, many others. And we also engaged national partners.

Again, as I mentioned, we are the only Mayor's Office for People with Disabilities in the entire State of Texas. So even though our charge is specific to the city of Houston, we became a coordinating body for the entire effected region and we worked with these community partners to expand our capacity and to also enhance their own capacity to engage in direct support work for individuals.

Through these calls we were able to identify issues and trends in the disaster response process and communicate those to other emergency management leaders and help get them resolved. And many issues came up, and I can get into that later. But these daily calls persisted for almost three months after the storm hit and transitioned to weekly calls and now monthly calls during the recovery process. As a result of these calls, two separate coalitions were formed. One coalition was focused on -- or is focused on inclusive education during disasters. And another coalition was focused on intellectual disability and accommodations during disasters.

So we are still, again, convening as a larger group and those two separate coalitions continue to work to advocate particularly at the state level for better emergency response solutions for people with disabilities.

Another major thing that we did during Hurricane Harvey was replacement of durable medical equipment and medical supplies again, working with partners across the state and across the country we received donations of numerous wheelchairs, rollators, shower chairs, all different kinds of equipment, catheters especially. And working out of a city multi-service center, we were able to establish a inventory and distribution process, relying on

a lot of efforts of volunteers.

And on this slide you can see a picture of an enormous number of wheelchairs waiting to be distributed to shelters. So in addition to doing direct durable medical equipment replacement for individuals, we were also able to be in touch with not only shelters in the Houston area but also shelters in much smaller, less resourced areas in Texas to get them the equipment that they needed.

During a disaster, many individuals are overwhelmed either with just the disaster occurring -- you know, perhaps having to evacuate or move family members -- and there's a lot of information that is put out into the ether, whether it's over television, over social media, through e-mail blasts or on websites. And it was difficult during Harvey for individuals to get access to consistent and accurate information, in part because there was so much information coming from everywhere. So the Mayor's Office for People with Disabilities would put together daily updates that would go through certain pieces of information that were particularly relevant to the disability community.

One very critical part of this was active public transit and paratransit services. And honestly that required keeping up with the Houston Metro, Twitter feed as they would post which bus lines were running. But we were able to do that so that individuals could be overwhelmed and still know that they had access to accurate information. And this wound up actually being quite beneficial to not only folks out there in the community but to emergency managers who were embedded in the Houston Emergency Center as they were focused on managing shelter needs and other communication needs for things like the mayor's press conferences. They were able to get these daily briefings from us that contained information about what was happening in the disability community and also accurate information about things like school closures and it became helpful for them as well, which was an unanticipated benefit.

As I mentioned, related to the community coordination calls we also were quite engaged with liaising between emergency responders, city, state, and federal departments. And I can talk through a couple of examples of what that looked like.

During Harvey, one of the major issues that Houston experienced was that our 911 lines became overwhelmed as did our 211 lines. And 211, typically referrals for social services here in Houston. It's a national system.

As a result of these lines becoming overwhelmed, individuals would either call the Mayor's Office for People with Disabilities directly or they would call the Disability Disaster Survivor Assistance Hotline that was set up by the Partnership for Inclusive Disaster Strategies. And through those phone calls we were able to connect to call in to the Emergency Responder Operation Center and help get emergency responders deployed to places where folks needed life-saving rescue.

One particular example of an effective liaising with federal departments came -- actually more during the recovery process as FEMA began to deploy in the Houston area. We were able to work with both the Federal Emergency Management Agency, FEMA, and the Department of Homeland Security to report out when people with disabilities experienced access barriers to either signing up for FEMA assistance or engaging in another part of the FEMA assistance process and were able to help them get interpreters assigned to various Disaster Recovery Centers and work with individuals to help them advocate for themselves and get accommodations through the FEMA process.

During Harvey, the city of Houston operated a super shelter at the Georgia Brown

Convention Center which hosted more than 10,000 guests. And Harris County operated a super shelter at the NRG Reliance stadium, which hosted a similar number of guests. We were able to work with the shelter managers and the shelter leadership to kind of keep a running tab on what needs they had so whether they needed more wheelchairs or they needed more medical supplies and then work with the folks who donated the supplies to get those over to shelters.

And this was particularly an interesting process. Towards the end of people's shelter stays, one of the things that I have sort of become a broken record on with our shelter managers is that you may have individuals who do not use any sort of access device in their daily lives but when you put them into a super shelter like a giant convention center, they do need a cane for mobility assistance or a wheelchair for mobility assistance. And the longer people stayed in the shelters, the more wheelchairs they needed. And we were able to essentially medical an inventory over a longer period of time to make sure that people had what they needed.

We were also able to visit smaller shelters that were set up by the American Red Cross and work with FEMA to determine if the shelters had adequate resources for people with disabilities. Again, working with FEMA and other local partners and local organizations, get shelters or resource that they needed.

And finally, probably the biggest thing that we did and continue to do is advocacy on behalf of individuals and communities. Again, a year after Harvey -- and we'll talk more this -- but we continue to hear from individuals who are struggling to get access to management services who are struggling to get the monetary supports that they need in order to get their lives back in order, and we work with either community partners or work directly with agencies like the Department of Homeland Security to advocate on their behalf.

So let's talk about some realities a year after Harvey. And I've already sort of alluded to this. The city of Houston has a cost effective area, \$4.2 billion have been to effected residents in Houston. We had a little over 26,000 folks file flood insurance claims. We had 136,000 people approved for FEMA individual assistance claims. And of that, approximately 29,000 individuals assistance registrations were those who identified as having access and functional needs.

The reason I'm going through those numbers is in part, because I want everyone to be very clear that these are underreported. Throughout the kind of Harvey FEMA assistance process it became very clear that the questions people needed to answer in order to note a sort of access or functional need or note their disability status were very, very unclear. And one of the persistent issues that we faced during Harvey was that an individual filled out and submitted an application for FEMA assistance but hadn't known to respond to particular questions with their access needs because it was so convoluted. And we would have to work with FEMA to enable the individual to edit their application so that their needs could be more accurately reflected. So we know certainly that that 29,000 number is lower than the actual number of people with disabilities who may have filed claims for individual assistance.

Houston is also the most diverse city in the United States. One in every four Houstonians are foreign-born and we have a large undocumented population. Seen with the approved registrations for individual assistance that 136,000 number -- the number of Houstonians who live here needed that assistance were much larger but many families, many households had an undocumented family member did not feel safe registering for FEMA assistance. Our own city of Houston data analysis shows that 169,000 residential buildings in

Houston were effected, which accounts for 317,000 households. And a year later, we still have not received any community development block grant disaster recovery dollars or the federal dollars that Congress had approved to be used for recovery for this particular disaster.

Some more reality after Harvey. The city and the county -- voters approved a \$2.5 billion flood bond. The city of Houston has established 14 Neighborhood Resiliency Centers. Because a big part of our recovery process has been figuring out -- determining a way for the recovery process to be very community-centered. So establishing what we're calling NRCs embedded in the neighborhoods that received the most damage or are experiencing the greatest recovery need has been a part of that strategy.

And the reason that I kind of articulate this point is Harvey was a fairly unique storm. On the slide I say that Harvey was equal opportunity in its destruction but not in its aftermath. If you look at a map of Harvey's rainfall and flooding, areas across the city are sort of equally affected. As opposed to other disasters like Katrina, we didn't see an overwhelming number of neighborhoods that have focused in lower economic status as getting more flooding. Some of Houston's most affluent neighborhoods received the most significant flooding. However, in the recovery process in Harvey's aftermath, that's where we've seen a lot of disparities start to occur. And so with these NRCs, we have tried to be thoughtful in placing them in both areas that received significant flooding but also have a population of individuals that may experience barriers in the recovery process.

Another piece of context that's very important to note in Houston's recovery process, particularly as it relates to people with disabilities is that we are navigating Harvey recovery while continuing to recover from previous disasters. So Houston has had -- I'm going to mess up the numbers. I think it's three catastrophic flooding events in the past five years. And many of the residents who are experiencing the greatest impact from Harvey were also flooded during the Memorial Day floods of 2016 and were also flooded during Isaac.

So on this slide you see two pictures. One picture is of the mayor greeting a woman who is sitting in a chair. She's 73 years old. Her house flooded during Harvey. Her house flooded during Isaac and currently she cannot return home.

And then in the lower picture is of a gentleman sitting in his front yard getting his haircut. He has a prosthetic leg. He's another individual who his house has yet to be made habitable since Harvey and we're a year out.

And part of this context is that Houston residents are experiencing a lot of storm-related anxiety. The mental health needs for the communities, especially children, have really increased. So that's something that we've been cognizant at the Mayor's Office for People with Disabilities and how we organize our own work around this being sensitive to those needs.

So how have we really become more inclusive since all of this happened? A big part of what we've been doing is getting a seat at the tables. I make tables plural because there are so many different rooms and tables to be in as it relates to disaster preparedness, response, and recovery. So before Harvey, the MOPD was not a part of the city's sort of disaster planning infrastructure and now we're a part of the Recovery Leadership Team and we have been named a part of the State of Texas' Division of Emergency Management Disabilities Planning Subcommittee. We are hopeful that that particular distinction will give us a better relationship with the state entities who often control the mobilization of particular resources during a disaster.

The Houston Commission on Disabilities Committee on Disaster Preparedness and

Emergency Response has now been connected to and is a partner with the city's Office of Emergency Management, our Department of Public Works and Housing. And the Housing Department has embarked upon engagement, specific engagement, of the disability community on the Texas General Land Offices Action Plan. So we had to submit an action plan to the state that articulated how we would spend the \$1.15 billion that the federal government had allocated to Houston for Harvey's rebuilding. And through working with the MOPD, the Housing Department focus on the disability community in getting their feet back for that particular action plan.

And finally, the MOPD has started its own tables so we have begun to convene disability-specific groups to garner community-driven recommendations for inclusive preparedness and response. We have put together a group of [Inaudible Off-mic] who are deeply committed to improving inclusive emergency management in Houston. They are now in the process of finalizing a memo that goes through a prioritized recommendations for what the city can do to be even more prepared for the Deaf community. And we've done similar -- a similar thing for intellectual disability advocates.

Another success that we've seen when it comes to more inclusion in disaster preparedness is new requirements for city repair of public and private construction. As much as I don't like to look at disasters as opportunities, Harvey did create an opportunity for Houston to become much more inclusive both during times of disasters and beyond. Houston Public Works developed an accessibility requirement for all public and private construction projects of 50,000 or more. So these are buildings that were affected by the storm and so the requirement is essentially, you know, four buildings that were not up to code before have to be made up to code and for buildings or for entity that push back on the process, there is a variant that they can apply for but the MOPD is a reviewer in that variance assessment.

And then now, as we do build out the requirements for the programs that will be funded, eventually funded, by the Community Development Block Grant DR dollars, we are looking into visibility requirement for homes that are either built or rebuilt using those dollars, which I hope will pave the way for a advisability ordinance for the whole city. And on this slide you will see a map of the Harris County flood plains.

During Harvey, one of the biggest lessons learned was around the efficacy of emergency registries. In Texas we have a tool called the State of Texas Emergency Assistance Registry. And the city of Houston along with any other municipality or region in the state can access it. And with STEAR, individuals can voluntarily register to note that they might need assistance during an emergency.

Throughout the immediacy of Harvey, the MOPD, along with many others, consistently asked, you know, has STEAR been activated, has STEAR been activated? And then we began to hear from individuals with disabilities who would let us know, "I don't understand. I was registered and no one came." "I registered and no one came to help me." We would hear from folks that were power chair users who had water coming into their homes who said, you know, "I registered to STEAR, I called 211, and I didn't get any assistance." And what we learned is that the protocols for STEAR within the city of Houston were to only activate it during an actual evacuation. In Houston, no evacuation was ordered. And not here to figure out whether that was right call or not but the reality is no evacuation was ordered and therefore STEAR was not activated.

The MOPD worked with Harris County to activate parts of STEAR but only six people were called. And, again in a city of 500,000 people with disabilities, and a county with

even more people with disabilities, the fact that only six folks were called who were registered in a state database is pretty deplorable.

So now we are exploring and developing new tools and protocols to contact people with disabilities during disasters. Some of the new tools are tools that utilize social media to do better realtime tracking of where people are and what they're experiencing. And the other protocols are working with Metro and local Managed Care organizations among others to memorialize a process for wellness checks for people with disabilities during disasters and really building on existing publicly available data to get a better sense of where people with disabilities are in the city to inform our planning process going forward.

And on this picture -- I'm sorry, on this slide is a picture of an article from the "Texas Tribune" saying after Harvey questions remained about the registry whether it helped people with disabilities. There's a picture of a man being pushed in a rollator, wearing a raincoat, and being pushed into the shelter.

Since we advocated for individuals with disabilities during Harvey, we have continued to advocate for both individuals and at the assistance level since Harvey and during the recovery process. So the Houston Commission on Disabilities crafted a letter to the Recovery Leadership Team and other recovery partners that articulated tenants of inclusive recovery. So the building requirement that I mentioned earlier are a direct result of that letter. And then as we build out the requirements for the rebuilding program that are being established now, they will also rely on that letter.

Houston hosted a FEMA and Department of Homeland Security Civil Rights Office listening session focused on the experiences of individuals with disabilities during Harvey. And on this slide you can see a picture of that listening session. It was a room full of community advocates. And that experience was actually very neat for me because after being on the phone with most of these folks every day for months, I finally got to meet these folks in person. It was like a family reunion was happening but we were all pretty upset and vocal about our needs.

And finally, we have continued to advocate at the federal and state level for greater funding, community-driven solutions, and some changes to FEMA; one of which is -- would be changing the questions on the FEMA Individual Assistance Form that can allow for better disability members to come through. And right now we are crafting a statement articulating our disappointment in FEMA's decision to reduce their number of Disability Integration Advisors.

One of the other things that may be a -- made the response and recoveries from Harvey unique was that Hurricane Isaac -- I'm sorry, not Isaac, Jose and Maria hit within two weeks of Harvey and so something that happened often was the Red Cross was deploying accessible portable showers to Houston and then they would turn around and get rerouted to Florida. And Florida needed them, right, but it meant that many of the resource that would have come to Houston with a disaster of this magnitude were then split across multiple disasters all of which were hugely significant.

Thankfully Houston is a very giving and a very can do city. We actually wound up with a sort of wealth of resources and did not have an appropriate place to store a lot of the durable medical equipment that we received and so we were able to work with multi-non-profits based in Texas, some based in Georgia, to ship durable medical equipment and consumable medical supplies to Puerto Rico so that disaster survivors there could get what they needed.

In this slide there's a picture of pediatric wheel chairs that are all piled up on a truck

and a picture of a group of volunteers sitting in front of a truck that's filled with medical supplies. Working with the Puerto Rican protection and advocacy provider, equipment was distributed across the island with a particular focus on individuals and families coming from lower socioeconomic backgrounds.

And the great thing about our work with the Puerto Rican disability kind of survivor community, disaster survivor community, is that we have been able to work together to push sort of a shared policy and advocacy agenda at the federal level. And we've also been able to sort of swap stories around working with a state that may not necessarily be agreeable to the locality we're working in.

So, for example, Houston is a blue city in a very red state. We have had to try to push the state to give the city access to its rainy day fund. And Hurricane Harvey was the largest rainfall that the United States has ever seen and the state has still not allowed the state to use any of the rainy day fund for recovery needs. And many community advocates in Puerto Rico are having similar experiences. And so it's been great to sort of come together and become more resilient together.

One of the other things that we've done since Harvey, especially since durable medical equipment became such a big part of what we did, we have worked and are working to develop and maintain an inventory of durable medical equipment that can be distributed to individuals and organizations during emergencies. And this is particularly important for cities like Houston, again, because we regularly have flooding emergencies. Because we're in Houston, a giant, you know, Petra Chemical city, we can also have chemical emergencies, fires, drought, etc., heat emergencies, cold emergencies, etc. So it was important for us to cultivate this inventory.

And for cities in California where you know you've got, you know, fires that are hitting in the same places pretty consistently, this would be a good thing to think about. However, it's not the most straight forward process. When you're trying to figure out how to maintain an inventory of durable medical equipment during disasters, you have to think about location and frequency of disasters. So a question for us is: If we know Houston floods regularly, where do we store this equipment in a place that's unlikely to flood? Because that does us no good if we put it in a place and that place floods, we can't get to it.

Another part is local population needs. One of my biggest lessons learned from Harvey was a need for donated bariatric equipment. A lot of the equipment that was donated to Houston was standard sized in the United States, there's a thing as they get population of people who are larger in ROBs and much of what we needed was larger wheelchairs, larger rollators, larger shower chairs, and we could not get enough supplies to fill that need quickly enough.

Another need that we had was a need for iPads that were used as augmented communication devices for people who were non-verbal. Often folks used them as behavior management tools who are autistic. And it was very difficult to get working donated iPads to fill that need.

Other considerations for inventories is thinking about expiration dates of products, so things like catheters, and not wanting to store too many of them in case you're at a kind of a lull with disasters. And the other is climate control if you're storing anything with specific formulas or medicines that need to be refrigerated.

One of the other things that we've done very effectively since Harvey is build relationships. I've gone through a lot of this already. But truly we wouldn't have been able to

accomplish what we accomplished, particularly in the immediacy of the disaster and the recovery period if we hadn't had those relationships with the community and with other partners. And now a lot our time has been focused on really cementing those relationship and also expanding them.

So a problem that we confronted during Harvey was that we were getting income from individuals with significant needs that they were in Beaumont or [Indiscernible] or other parts of the state that we didn't necessarily have our relationships with. So we've taken -- we've made an intentional effort to reach out to other local emergency management partners in case something like this happens again.

We've also worked to expand capacity for accommodation services in shelters and for emergency responders. So we have begun to work with Houston police, Houston fire department, along with other emergency managers to begin to train them on disability competency and disability rights. We've also put a lot of time and effort into articulate something shelter management improvements that need to happen around accessibility protocols.

And on this slide there are three pictures. These are all taken at the shelter. One is a picture of a desk that says Deaf Services, sign language interpreting with the picture of the I love you sign. Another is a set of volunteers at a table with a sign that says Mobility Center. And another photo is of a set of hearing aids donated by the Dallas Hearing Foundation.

The pictures on here are a really great moment. And they're a great example of what community can do. But the reality is, is that community shouldn't have had to put together a Deaf services table. One should have existed in the shelter. Communities shouldn't have had to put together a mobile center. One should have existed in shelter.

And so we have engaged in two shelter planning exercises and an evacuation exercise to sort of break the exercises and highlight weaknesses and issues and determine solutions around better accommodating access needs and shelters. We are also pursuing getting American Sign Language emergency alerts that will be sent to the Deaf and Hard of Hearing community and eventually getting an ASL fluent 911 responder that can work through video phone.

Related to expanding capacity, our city Department of Homeland Security has begun to expand their CERT training and is building out CERT training for both the Blind community and a cross-disability community CERT training. We are very lucky in Houston to have an existing community of Deaf folks who are CERT trained and very invested in CERT training.

So the Mayor's Office for People with Disabilities and the Department of Homeland Security have been working together to figure out how certain search protocols are translated to a Blind community with maybe -- I'm sorry, sighted volunteers and, again, what CERT training would look like in a cross-disability environment with many different kinds of access needs. And what we're hoping is that once we get this CERT curriculum polished, that we can send it to other communities and have them tested and see what really works.

I've already mentioned the shelter exercises a funny story from one of those exercises is we were practicing the protocol to track people in shelters in case they were evacuated so folks were lining up to get a wrist band with a bar code on it that would be scanned so that we would know that, you know, Maria Town was at the GRB, put on a bus and went to Dallas. And this sort of process is very important for the disability community because we want to know where people go and we want to be able to know that they were not institutionalized and things like that.

And most folks participating in the exercise were given role playing cards. Well, I noticed a primary part of the protocol was the wrist bands. All the information was sort of held on this wrist band. I turned to Jimmy and said, "What do you do if someone doesn't have arms?" And I think he thought I was just sort of being silly but I went through the whole process as a character who did not have arms and it was great to see that the person managing the wrist band process figured out a solution but how do we get that solution embedded in the protocol across this process? The next weekend, Mr. Jimmy actually saw someone without arms and he came up to me and said, "Maria, I get why you said that to me."

This moment was a success for me as an individual and a success for him as an individual but he then retired. So now we have to keep repeating this process over and over again. But it will be worth it because it will mean that lives were saved and people can have better experiences in shelters.

So related to that, again, that shelter, how do we memorialize that shelter process to know -- if someone doesn't have arms, we can give them a lanyard instead of a wrist band.

There were documents that were created during Harvey to answer persistent and sticky questions there were questions around inclusive education services during Harvey. So as schools closed, and I believe Houston saw almost 20% of its schools close at one point during Harvey, how students with disabilities would continue to receive free and appropriate education, how the service that they might receive in schools would continue to function. And the -- Texas put together some amazing documents that articulated how IDEA works during a disaster, how the [Indiscernible] act works during a disaster, and these were translated into multiple languages and we can have them at their ready in future disasters.

Another question came up around voting rights during disasters. Harvey hit at the end of August. There was an election, I want to say, in November as people were still recovering, still displaced, voting rights, Texas put together a great piece on that. And again, for folks thinking about Florence right now, the November election, that will be useful information for y'all.

There were additional questions that came up concerning organizations abilities to replace iPad and iPads and protocol around durable medical equipment loans. I said durable medical equipment replacement throughout the webinar but the reality is, is that when we provided someone with a replacement wheelchair, for example, it was specifically a loan because we want to make sure that they could get another wheelchair back through their home provider and Medicaid. And thankfully the Georgia Tech Pass It On Center put together a Wiki around their work to doing durable medical equipment replacement and consumer medical supply replacement. So a lot of the considerations and policy issues that came up during this process are memorialized and folks can learn from them for future disasters and hopefully add to them.

Finally, I put together two slides that have some resources related to emergency preparedness and inclusion of people with disabilities. The first slide has some resources from large organizations, the Centers for Disease Control, ready.gov of DHS, the Red Cross, and FEMA. I will say that the Red Cross disaster safety kind of planning tools for people with disabilities are quite good.

The second slide has resources that are more specific to Harvey and Texas and the 2017, 2018 hurricane season. The first one is the Partnership for Inclusive Disaster Strategies Integrating Disability Into Emergency Management, A Blueprint For Saving Lives. The second one is also from the partnership but it's their after action report called Getting It Wrong: An

Indictment with a Blueprint for Getting It Right.

Anyone who has been interested in this conversation today, I strongly recommend you read that after action report.

And finally, the guidance on special education during disasters, that is highlighted in this slide as is a resource by the Disability Rights Texas on Housing Rights: Information For People With Disabilities Impacted By Hurricane Harvey.

Again, one of the issues that we faced after Harvey was landlords raising rent, people who had been cut off from their jobs not being able to pay rent being evicted. So that document was important to memorialize as well so we could have the tools to help people advocate for themselves.

And now I want to open it up for questions. I know I've kind of gone through a lot of information. I'm very top any of your questions.

I will say, I am originally from south Louisiana. My family was directly impacted by Katrina. I had two relatives who died due to lack of dialysis during Katrina. And my grandmother had died also during Katrina, not necessarily as a result of it but it certainly didn't help. And coming to Houston, I knew that disasters would be a reality of my life and so it was very important to me that we made sure that no one died because of something that could have been prevented by creating access and inclusion.

So we didn't get everything right but we're trying to do better. And I'm very interested in your questions and comments.

The images on this slide, 9 one in the top is an image of a family in a gutted house after Harvey and they're watching the Houston Astros win the 2017 World Series. And then the second image is of the Astros' victory parade that was hosted in early November in Houston in 2017.

We are Houston strong.

>> Lewis Kraus: All right. Thank you so much, Maria. That was great.

Let me encourage all of you to put -- to send your questions into the chatroom there and we will be able to answer them. I will be reading them off for Maria as we go.

Let me just add a couple of things to what you had to say. One is I think the point you made about memorializing things is extraordinarily important. All of you who have been listening to these sessions over time and maybe have been doing things in your own jurisdictions to improve the way that emergency plans are made inclusive for people with disabilities. Do you think about how is it that it's going to happen, continue to happen, after you are not there anymore? And maybe if you're the one carrying the awareness and the information and the understanding, how that will continue on. So I think that memorializing point is a very good point.

The second point I wanted to make is also to remind everyone that there are a lot of resources that have come up in these webinars. You can get all of those in the archive section of www.adapresentations.org and review many of the things brought up by people over the last several years. As well as at our own www.adapresentations.org website in the emergency publications section.

With that, let's go to some questions. Maria, here's the first one.

What actions have been taken to improve the plan to activate the response for the registry for individuals who needed assistance?

>> Maria Town: Sure. That's a tough question to answer because each locality or region that accesses STEAR can establish their own protocol. So I can only speak for Houston. But we

are working to, one, create more STEAR data stewards so that more people like the MOPD can access the data. At the time of Harvey the MOPD was not an entity that could access the STEAR data. So that's one part of it.

Two, creating a framework where the STEAR database is active even when an evacuation is not ordered. And part of that has come with training or getting emergency managers to understand that stakes can be higher when you have a disability. Again, if you're someone who uses a vent or is power dependent and you've got two inches of water in your house, that's a need to evacuate. For someone else who is not power dependent, you might be ok. So we're building out a protocol for how that sort of wellness check would work based on areas that are very likely to flood, even if an evacuation isn't ordered.

And I really want to emphasize, though, that we are actively exploring other tools besides these registries. People with disabilities, and I'm a person with a disability myself, we exist in registries all the time whether it's because we received some kind of social service or public support or because we are a client of an Area Agency on Aging. And in the city of Houston, which, again, has 500,000 people with disabilities, the total number of STEAR registrants was 16,000. It's not a super useful tool. And we could use it better than we did. But what I don't want to create is this fence that if we just use steer better, that it's still going to be a helpful tool.

Does that answer the question?

>> Lewis Kraus: Yeah. I think so. We've got a couple of follow-up questions about registry and STEAR. Before I read them, I want to remind everyone that we had an entire webinar on registries. I think if you're very interested in this topic, you should go back and listen to that one. Although what Maria is talking about, about STEAR in particular, is particularly interesting.

So let's get those questions about the registry out of the way and then move on to other ones. So we have a question here.

Do you think STEAR will survive as it presently exists? Wherever that data exists eventually it should be available to any stakeholder who could be involved in the response and emergency. Who decides who it is available to?

>> Maria Town: Can you repeat the first part of that? I heard the second part.

>> Lewis Kraus: So the first question is, do you think STEAR will survive as it presently exists?

>> Maria Town: The answer to that is no. Yeah. Because it's already changed. So when Harvey hit, STEAR was managed by a contractor. And the state has decided to end that contract and now the state is taking on the primary responsibility for managing STEAR. At the time, this shift was concerning because when a contractor is managing the database that STEAR was their first and only priority and now that the state is managing it, it's one priority of many.

But the state has made some changes to STEAR. When Harvey hit, to really hammer this home, we were not able to pull reports of the STEAR data. So in order to get information out of STEAR, you would have to get a three-page printout on one person. You couldn't pull the number of people who registered who were blind or the number of people registered who lived in a particular zip code. And now the state is working on creating -- making sure that STEAR can actually do that.

But I think the third part of the question, everyone should be able to have access to the data and who gets access, part of that piece of all of this is if more people are going to have access to the data, data actually needs to be useful. And also there are issues around privacy. People who sign up for STEAR saying the state can have this information about me. Is

this something we really want to be going to, you know, community part in other words? If we do, how will those partners be so that they don't then use the information to sell people something or to take advantage of older adults?

There are some legal and ethical concerns around who has access to the data. But I think your point is well taken. And I think if more community members had been able to access the data, hopefully we would see people with disabilities having better outcomes. But I think it's really worth looking at, you know, the existing registries of folks with disabilities and how we could really empower a lot more people to have access to information about individuals with disabilities in their communities so that those wellness checks are easier. And we're not all hoping that STEAR or something like it is a silver bullet.

>> Lewis Kraus: Right. Great. And then just to put the final point on this, there's one last question about this.

For the registry, how would responders know if people evacuated?

>> Maria Town: They wouldn't. They would have to have gone to the home or made a phone call. For the six folks that were contacted from STEAR, we did hear from them. We heard that they were ok, that they were doing well. But that's the only way to know. And that, again, is part of the issue with registries. The existence of a registry like STEAR presumes that people with disabilities will live and be in it one place all the time.

For someone like myself, I have a mobility impairment. I have cerebral palsy. I live on the third floor an apartment building. During a disaster I'm not going to stay in my apartment. I'm going to go to a friend's home or a family home where I'm not reliant on an elevator. And where if I do have to go up a flight of stairs to remain safe, I am with people that I know and trust who can help me get down should the case arise. And so even if I was registered in STEAR in my apartment, a responder wouldn't know that I actually wasn't there.

So there are other tools out there, again, that work on sort of web crawling and social media which I think give a more accurate depiction of where people with disabilities are, where they need help during a disaster that may be more useful than STEAR. And that's what we found -- there's reports and I can send them to you -- on how first responders use social media during Harvey. And I think that's more behalf we're seeing in terms of how folks ask for help in addition to 911 calls and 211 calls.

>> Lewis Kraus: Sure. If you want to send me any reports, we can put it up on www.adapresentations.org in the archive next to your slides.

All right. Next question. Harvey formed and crossed the gulf quickly. Houston was criticized for not evacuating but the hurricane center left them little time to do that. Did the late or slow notice disproportionately impact people with disabilities?

>> Maria Town: I don't know and I am not sure if we have an analysis that can speak to that. What I can tell you is one of the reasons that Houston chose not to evacuate is because of the size of the city and because during Hurricane Rita, when evacuation was ordered, we had individuals who died in their cars.

The other thing worth noting is that even when evacuations are ordered, many people with disabilities cannot evacuate because they do not control their own mobility. Maybe they rely on transit. Maybe they rely on other people. Or maybe they don't have folks that they can depend on to evacuate with. There are so many reasons that someone with a disability may not be able to evacuate even when an evacuation is ordered. So even though I have no, again, analysis that can answer your question, I can say personally I do not think that that decision negatively impacted people with disabilities any more than a decision to evacuate

would have negatively impacted people with disabilities.

And during Harvey you'll note that in Houston, right, there were other examples of this in other places. And in Houston we didn't have stories of people in nursing homes being left behind. And part of the reason for that is, you know, nursing home staff went to their communities and were instructed to remain there and make sure folks were ok. Again, in other communities in Texas there were pretty bad stories of nursing home residents with water up to their waists but in Houston we didn't have that. And I think we would have had more of that was an evacuation ordered. But, again, that's anecdotal.

>> Lewis Kraus: Ok. Next question. Is FEMA receptive to your point about their application form and its confusion in identifying people with access and functional needs? I guess we can say what North Carolina has to say about this problem; can't we?

>> Lewis Kraus: Yeah. They have heard it many times. I have yet to see if they are going to take action to change it. We're going to keep pushing until they do.

>> Lewis Kraus: And I'm going to add there that in the listening sessions that Office of Civil Rights and Civil Liberties conducted throughout the year, that was part of the report that they heard as well. You can hear that webinar in our archives that the Office of Civil Rights described as well. So that point was made in those listening sessions.

Next question. Have you heard of or collaborated with Evacuteer in New Orleans, focuses on evacuating a city before an incident with particular focus on those unable to evacuate themselves?

>> Maria Town: No, I haven't. And now I want to look them up. That's a great suggestion.

>> Lewis Kraus: [Laughter] Ok. It's Evacuteer.

Next question. Good you -- did you use the resource from CMS called EMPOWER?

>> Maria Town: The EMPOWER list. By we I mean the Mayor's Office for People with Disabilities did not use the EMPOWER list during Harvey. We have used it since, again, in order to inform the recovery process and future disaster planning and future resiliency planning.

>> Lewis Kraus: Can you describe it briefly so that people know what we're talking about?

>> Maria Town: Sure. So CMS puts together a list of all of the Medicaid recipients in a particular zip code who are power dependent. So, again, this is a tool that could be used to complement or instead of a registry tool that already exists. We have definitely -- I have used it with our emergency management leadership to, you know, talk through or educate them on particular access needs and what we might need to think through for supporting communities that have a particularly large number of power-dependent people. It's been provided to our planning department, again when thinking about changes to flood plain ordinances. We've use it quite a bit.

>> Lewis Kraus: And I guess this was an interesting topic for people. Somebody asked, Would GIS be useful in locating people preparing for the disaster or after a disaster occurred? And before you answer, let me just say we've gone over this a few times in our webinars series so you should go back and look in those webinars to discuss this topic.

Go ahead, Maria.

>> Maria Town: I want to look into your past webinars, Lewis. I think it could. The question is always, where would we get the data from? What would the strengths and weaknesses of the data be? How would we use it? And admittedly I'm not a GIS person. So I want to say yes but I think -- I think it could.

One of the questions that we are trying to tackle is, you know, we have updated our

flood plains and we've updated the building requirements for building in flood plains in Houston and those building requirements involved elevating homes. When you elevate a home, you reduce house stock for particular home buyers with disabilities.

And let's say I was a resident of an elevated home and I had a lift on my home but then I couldn't go to any of my neighbors' homes. So you've also now significantly increased someone's potential for isolation which we know contributes to poor health outcomes and reduces their ability to be integrated into their community.

So how do you pair resiliency with Universal Design and inclusion? I think better sort of GIS mapping of disability and access and functional needs in communities could really advance a lot of those conversations. Because one of the communications differences that I come up against all the time is that -- you know, I'm an advocate. I think about problems in terms of people. And in my own work with the Planning Department and with Public Works and Engineering they're thinking about problems in terms of sort of technical specs. And it has been a big learning curve for me to try to navigate that communication. And I think if I had some sort of GIS data like what you're kind of proposing, it would be very helpful.

>> Lewis Kraus: And let me just add to that that both our center here at the Pacific ADA Center as well as in a joint research project among ADA Centers, we have been dealing with providing data about people with disabilities within counties so a county could know how many people there are. But I think you're going to run into the same or similar kind of an issue as we've talked about on the registry. You can know that that's how many people there are in a county but when a disaster hits, that's not necessarily the number of people who are there. People maybe have gone to work or gone for a visit or people are coming into work or coming in for a visit so the numbers will fluctuate. But they at least give you some baseline idea of the size of the community. So that's my two cents worth here on GIS maps.

And also, one other point about this that somebody wrote in and said Jefferson County, Colorado, has Smart 911 that allows people with disabilities to register and have their disability on 911 so when they call 911, the dispatcher can see the disability and have the appropriate responders go. And we had a session on Smart 911, like, two months ago. So you can go back and listen to that if that interests you.

>> Maria Town: And we have Smart 911 in Harris County and we have Texas 911 in Texas. So that could be another data source that we use for better planning.

Lewis, I think your point is really well made. When we try to, again, create a registry or figure out where people with disabilities are in a disaster, we're using stagnant data, there's going to be some real limitations so we could take existing data sources and create some really good, well-informed models. And personally I think those models are more useful in a planning and preparation and long-term resiliency planning context than they are in actual sort of response context.

And again, for Houston, all of our 911 systems failed because they were so overwhelmed. And I used to have the numbers on the top of my head with just how many calls we got in a 24-hour period. But planning backups for all of these tools, you know, if 911 is down, is smart 911 helpful? I don't know. I just vented a little bit. I'm sorry. [Laughter]

>> Lewis Kraus: [Laughter] That's all right.

The next question. My organization is responsible for training the state agencies that provide independent living services to older individuals with low vision. Do you have any recommendations on training that we should provide to professional that serve as vulnerable population for emergency preparedness?

>> Maria Town: I do. And we could have a much longer conversation about this offline. I would love to connect you some of our blind and low vision advocates here who have done some great work in supporting their community.

In response to Harvey -- again, probably a better conversation for offline. But one question that I would want folks to think about is how many of those older adults are smartphone users. A big need during a disaster is keeping those batteries charged, especially if they're using smartphones for sort of [Indiscernible] purposes or as an accessibility tool. This is going to sound very basic but making sure that people have their important documents together and that they are protected in a water-proof, plastic bag and they know what documents are where and can communicate what's on those documents to someone like an emergency responder or someone in a shelter to say, you know, these are my medication needs or this is my emergency contact, here's my documentation of X, Y, and Z. It's incredibly important.

One thing that I emphasize in general is practice. We practice and we want things to go well. And we need to practice for when things go wrong. We need to practice our own sort of getting together our preparedness kit. You know, what am I going to do if an evacuation is ordered? And also, if there's someone who has low vision in addition to other access needs, how am I going to communicate where certain things are in my home if I can't get to them? You know, how am I going to tell someone I need to take this medication at this point in the day and communicate to them where that bottle is or what's in the bottle? So things like that.

One of the difficulties -- I mean, probably in my opinion one of the greatest public health crisis that we faced and community faced during Harvey are older adults or folks sort of between middle age and senior status who have begun to acquire disabilities, often time it is blindness and low vision, who haven't yet had an opportunity to develop [Indiscernible] skills.

So we had one gentleman who had diabetes and had a lot of issues with his legs and had lymphedema in his legs. He needed new lymphedema leg wraps because his existing one had gotten flood water on them and his legs were getting infected. And he reached out to our office but he could not communicate -- he could not tell us what kind of leg wraps he had because he couldn't read the tag because he was by himself. We sent volunteers with the Red Cross out there to go to his home and read the tags on his leg wraps so we could get him what he needed.

But that was a situation where we had to tread very carefully with who we actually brought out to his home. Because what we didn't want is a trip out there to result in a call to adult protective services. So that's a pretty extreme example. But practicing and making sure that people know the important things that they news day in and day out that allow them to thrive.

>> Lewis Kraus: And just as an answer to the original question about providing training for older -- individuals with low vision about emergency preparedness, I do want to remind you that the ADA National Network, all of the centers, would be able to provide an answer to that and provide it themselves. You can get us at 1-800-949-4232.

Let's do one more question here and then I think we're going to have to end it.

Did Texas have the legislation that allows pharmacies to refill prescriptions on an emergency basis? In our state it is not tied to the issuing of an emergency declaration. If you have this, was it common knowledge in your state?

>> Maria Town: We did. I don't think it was a state policy. It was actually a federal one. I might have that wrong. I can go back and check. I know that there was policy that was one of the

piece that came in around that. And pharmacies were instructed to sell prescriptions on an emergency basis. But we did have a hard time actually getting pharmacies to fulfill their obligations on that end.

So we were lucky that Texas has the largest medical center in the world. So when particularly families of children that needed pretty specific and rare medications couldn't get their pharmacies to fill the prescriptions, we were able to work with pharmacies in some of the Houston-based, Texas center hospitals to get those prescriptions filled. But that is not a process that we should had to initiate. The pharmacies should have held up their end of the bargain. But that is an example of when they don't.

>> Lewis Kraus: Sorry. I was just going to say there is somebody on here who said that it was actually a federal thing. That happened after Katrina.

>> Maria Town: Yeah. Right. That's what I thought.

>> Lewis Kraus: All right. Well, we realize that many of you may have questions for Maria and apologize if you didn't get a chance to ask your question. You can contact your regional ADA Center and ask and they may be able to answer or you can get to Maria right there at the information there on the screen. To call us at the regional ADA centers dial 1-800-949-4232.

You will all receive an e-mail with a link to an online session evaluation. Please complete that evaluation for today's program as we really value your input and want to demonstrate our impact to our funder.

Thank you, Maria, for sharing your time and your knowledge with us.

Just a reminder to everyone, this session was recorded. It will be available for viewing next week at www.adapresentations.org/archives.php.

Our next webinar, October 11, continues our one-year anniversary reviews of last year's disasters. One Year After hurricane Maria, How Is Puerto Rico Faring and How Are They Planning for the Next Disaster? That will review the situation in Puerto Rico. We hope you can join us for that. Watch for your e-mail two to three weeks ahead of time for the announcement of the opening of registration for that webinar.

Thank you for attending today's session. Thank you, again, Maria. And have a good rest of your afternoon, everyone.

>> Maria Town: Thank you.