

Working with Students with Disabilities in a Disaster

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Don't Assume



Some Statistics

- 54 million people in the United States have a disability
- 58% of people with disabilities do not know whom to contact about emergency plans in the event of a disaster
- 32% of people with disabilities say plans have not been made to evacuate them from their workplace

Comprehensive School Safety Plan

- Ed Code § 32282 (a) The comprehensive school safety plan school include...

Comprehensive School Safety Plan

- § 32282 (B)... “Disaster procedures, routine and emergency, including adaptations for pupils with disabilities in accordance with the Americans with Disabilities Act of 1980 (42 U.S.C. §12101 et. seq.)

History and Politics

- Handicapped vs. disabled
- Political advocacy
- Categorical programming
- P.L. 94-142
- IDEA, the Individuals with Disabilities Education Act

Who Needs To Be Aware

- Medical staff
- Emergency responders
- Volunteers
- Students
- Other teachers
- Classified staff
- Administrators

Levels of Disabilities

- Mild
- Moderate
- Severe
- Profound

Categories of Disability

- Sensory disabilities
 - i.e., deafness, blindness
- Developmental or cognitive disabilities
 - i.e., mental retardation, some neurological disorders
- Mobility disabilities
 - i.e., paralysis, amputation

Alphabet Soup

- IDEA
- IEP
- Tri
- Annual
- TMR
- SED
- SLD

Alphabet Soup (Cont.)

- VH
- Deaf
- D/HH
- Mob
- PH
- SLD/A
- More and more

Disabilities

- Autism
- Deaf-blind
- Deafness
- Hearing impaired
- Mental retardation
- Multiple disabilities
- Other health impairments

Disabilities

- Orthopedic impairments
- Emotional disturbance
- Speech or language
- Visual impairment including blindness
- Traumatic brain injury
- Specific learning disabilities

Communication

- Oral
 - Aided (extra batteries)
- Manual
 - Findex spelling (emergency vocabulary)
 - American Sign Language (its own language)
- Augmented
 - Picture books
 - Communication boards
 - Communication devices

Most Important Things to Have

- One week supply of food-special diets
- Non-electric can opener
- One week supply of food for your service animal
- An adequate supply of water
 - One gallon per person per day
- Several flashlights and car lights
- Ten-day supply of medication and instructions

Most Important Things (Cont.)

- First aid kit specializing in health care
- Battery-operated radio or TV (car)
- Whistle
- Fire extinguisher
- Wrench for gas turn off
- Garbage bags, closeable container and gloves

Medications

- Storage
 - Clearly labeled
 - Accompanied by copy of doctor's orders
 - Safely and securely with limited access
 - Routinely updated

Medications

- Additional considerations for storing medication
 - Identify students and staff taking medicines daily, at home
 - Identify students and staff with short-term disabilities and maladies
 - Update routinely

Specialized Equipment

- Manual back-ups for electrically and battery-operated equipment
 - Battery back-ups
 - Extra batteries
 - Portable generators
 - Solar chargers
- Instructions for working with specialized equipment (i.e., wheelchairs)
- Specialized transportation

Specialized procedures

- Specialized lifting and carrying techniques
- Specialized feeding techniques and equipment
 - Allergies
 - Dietary restrictions
- Use of augmentative communication devices (\$)
- Behavior management techniques
- Specialized health care procedures

Working with Individuals with Vision Disabilities

- Announce your presence
- Speak naturally and directly; do not shout
- Offer assistance, but let the person explain what help is needed
- Describe the actions to be taken in advance
- Allow the individual to grasp your arm or shoulder lightly for guidance
- Warn of narrow passages, ramps, doorways, etc.

Working with Individuals with Vision Disabilities (Cont.)

- When guiding a person into a chair, place his or her hand on the back of the chair
- If leading several people with visual impairments, ask them to hold each others' hands
- During evacuations, ensure people with impaired vision are not left unattended

Working with Individuals with Hearing Disabilities

- Flick the lights when entering a hearing-impaired person's area
- Establish eye contact, do not cover your mouth or turn your face away
- Never chew gum
- Use facial expressions and hand gestures as clues
- Use paper and pencil
- Do not allow others to interrupt you when you are giving information

Working with Individuals with Hearing Disabilities (Cont.)

- Be patient
- Provide the individual with a flashlight for signaling his/her location
- Learn a number of “signs” to assist communication in a disaster

Working with Individuals with Learning Disabilities

- Understand that their perception of written instructions or signs may be confused:
 - Divide directions or information into simple steps; and
 - Give one direction at a time.
- Acknowledge that their sense of direction may be limited:
 - Provide an escort; and
 - Use simple signals and symbols

Working with Individuals with Learning Disabilities (Cont.)

- A person's ability to understand speech is often better developed than his/her vocabulary. Be sure to give individuals with learning disabilities sufficient information
- Individuals with cognitive or learning disabilities should to be spoken to and treated in an age-appropriate manner

Evacuation Planning Considerations

- Can wheelchairs be moved over or through the area?
- Can this area be secured to prevent students from wondering off?
- Can this area protect against the elements?
- Can the area provide for electrical outlets or generators?
- Do we have enough people to get the job done?

Working with Assistive Animals

- Do not pet or offer food to any assistive animal without the permission of the owner
- Understand that when the animal is wearing a harness, it is on duty
- Plan for the animal to be evacuated with its owner
- Hold the animal's leash and not the harness if asked to provide assistance

Disaster Psychology



Vicarious Trauma

The process of emotional changes in the rescuer:

- Responders' empathic engagement with survivors; and
- Responders coping with the trauma of others while providing assistance.

Possible Psychological Symptoms

- Irritability, anger
- Self-blame, blaming others
- Isolation, withdrawal
- Fear of recurrence
- Feelings of being stunned, numb or overwhelmed
- Helplessness
- Mood swings
- Sadness, depression and grief
- Denial
- Concentration and memory problems
- Relationship conflicts/marital discord

Possible Physiological Symptoms (Cont.)

- Loss of appetite
- Headaches and chest pain
- Diarrhea, stomach pain and nausea
- Hyperactivity
- Increase in alcohol or drug consumption
- Nightmares
- Inability to sleep
- Fatigue and low energy

Team Well-Being

Community Emergency Response Team (CERT) leaders should:

- Provide pre-disaster stress management training;
- Brief personnel before response;
- Emphasize teamwork;
- Encourage breaks;
- Provide for proper nutrition;
- Rotate personnel;
- Phase out workers gradually;
- Conduct brief discussions; and
- Arrange for a post-event debriefing and reporting.

Strategies for Reducing Stress

- Get enough sleep
- Exercise
- Eat a balanced diet
- Balance work, play and rest
- Allow yourself to receive as well as give, remembering that your identity is broader than that of a helper
- Connect with others
- Use spiritual resources

Critical Incident Stress Debriefing

Six phases:

- Introduction and a description;
- Review of the factual material;
- Sharing of initial thoughts/feelings;
- Sharing of emotional reactions to the incident;
- Instruction about typical stress reactions;
- Review of the symptoms; and
- Closing and further needs assessment.

Phases of a Crisis

- Impact
- Inventory
- Rescue
- Recovery



Traumatic Crisis

Traumatic events people may experience or witness:

- Actual or potential death or injury to self or others;
- Serious injury;
- Destruction of homes, neighborhood or valued possessions; and
- Loss of contact with family/close relationships.

Traumatic Stress

Traumatic stress may affect:

- Cognitive functioning;
- Physical health; and
- Interpersonal reactions.



Mediating Factors

- Prior experience with a similar event
- Intensity of the disruption to the survivors' lives
- Individual feelings that there is no escape, setting the stage for panic
- The emotional strength of the individual
- The length of time that has elapsed between the event's occurrence and the present

Stabilizing Individuals

- Assess the survivors for injury and shock
- Involve uninjured people in helping
- Provide support by:
 - Listening; and
 - Empathizing.
- Help survivors connect with natural support systems



Avoid Saying . . .

- “I understand”
- “Don’t feel bad”
- “You’re strong. You’ll get through this”
- “Don’t cry”
- “It’s God’s will”
- “It could be worse” or “At least you still have...”

Managing the Death Scene

- Cover the body; treat it with respect
- Have one family member look at the body and decide if the rest of the family should see it
- Allow family members to hold or spend time with the deceased
- Let the family grieve

Informing Family of a Death

- Separate the family members
 - Use a quiet, private place
- Have the person(s) sit down, if possible
- Make eye contact
- Use a calm, kind voice
- Inform family members using the following words: “I’m sorry, but your family member has died. I am so sorry”

Who Are People With Disabilities?

- Nearly four million people require the assistance of another person for daily living activities such as getting dressed, eating and bathing
- Eight million Americans have limited vision
- 28 million Americans have a hearing loss
- 1.5 million people use a wheelchair
- More than 7 million people have mental retardation