



CALIFORNIA  
**PARTNERSHIP TO END  
DOMESTIC VIOLENCE**

Together, We're Stronger.

# Emergency Preparedness Toolkit

A Guide for Domestic Violence Organizations

Brought to you by the Partnership's Capacity-Building Team



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## Introduction

Emergencies are inevitable; but by developing safety plans and procedures in advance, your organization can effectively identify and address impending hazards, as well as prepare effective measures to aid recovery after the event. The Partnership's Emergency Preparedness Toolkit includes a compilation of trusted emergency preparedness resources and guidance materials. Whether you work for a residential or non-residential domestic violence program, this toolkit can help you plan for and respond to emergencies.

Preparing a safety plan with this toolkit can:

- Prevent re-traumatization for survivors in shelter and non-shelter settings;
- Prevent fatalities and injuries;
- Provide confidence for community stakeholders

As your statewide domestic violence coalition, the Partnership is always here to provide customized technical assistance to support you in your emergency preparedness and response efforts. We can also connect local programs to support cohesive regional responses to emergencies. Please contact our help desk at [info@cpedv.org](mailto:info@cpedv.org) to request support. We are ready to assist you!

As Dr. Elaine Enarson states,<sup>1</sup>

"Disaster planning is not often a priority in battered women's shelters or transition homes, where your work focuses on daily survival issues. But your shelter is the only home women in crisis have, and it will be directly or indirectly impacted should a major disaster hit your neighborhood.

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<sup>1</sup> "Domestic Violence Advocacy: A Disaster Response (Facilitator Guide)." The National Domestic Violence Hotline. 2014. 1-62. Web. 21 June 2016. <<http://www.thehotline.org/resources/download-materials/>>.

Working through worst-case scenarios to assess risks, vulnerabilities, and resources will help your program respond when shelter residents need you more than ever. Staff, volunteers, and board members will also benefit as potential disaster victims and as emergency responders to shelter residents and clients.”

DISASTER PLANNING FOR SHELTERS:  
Guidelines for Staff, Volunteers, and Boards  
<http://www.emforum.org/vlibrary/appendxa.htm>

### **Why Have an Emergency Plan?<sup>2</sup>**

Besides the major benefit of providing guidance during an emergency, developing the plan has other advantages. You may discover unrecognized hazardous conditions that would aggravate an emergency situation and you can work to eliminate them. The planning process may bring to light deficiencies, such as the lack of resources (equipment, trained personnel, supplies), or items that can be rectified before an emergency occurs. In addition an emergency plan promotes safety awareness and shows the organization's commitment to the safety of workers.

The lack of an emergency plan could lead to severe losses such as multiple casualties and possible financial collapse of the organization.

An attitude of "it can't happen here" may be present. People may not be willing to take the time and effort to examine the problem. However, emergency planning is an important part of company operation.

Since emergencies will occur, preplanning is necessary. An urgent need for rapid decisions, shortage of time, and lack of resources and trained personnel can lead to chaos during an emergency. Time and circumstances in an emergency mean that normal channels of authority and communication cannot be relied upon to function routinely. The stress of the situation can lead to poor judgment resulting in severe losses.

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<sup>2</sup> "Emergency Planning." Government of Canada, Canadian Centre for Occupational Health and Safety. 22 Jan. 2016. Web. 22 June 2016. <<https://www.ccohs.ca/oshanswers/hsprograms/planning.html>>.

# **Step-by-Step Protocols for Emergency Preparedness and Response: Armed Persons/Intruders; Fire Alarm (False/Real); Bomb Threats; Floods and Earthquakes**

## **I. Armed Persons/Intruders<sup>3</sup>**

It's difficult to prepare for an armed person on the grounds of the facility or inside of the building. However, awareness of proper procedure for handling an armed person is important, even if the location of your building is undisclosed. The most important concern is safety.

### **Safety-Planning Questions**

- Are the windows in the shelter bullet-proof? Do all of the windows have locks?
- Is there a procedure for letting unknown people into the shelter?
- Is there a sign prohibiting weapons inside the shelter? Even if the person is trusted, weapons can stress residents and staff and should be kept out of the shelter.
- Is there a security system in place? Can the security system inform police of an intruder if phones are unavailable?
- Is a lock-down procedure in place? Is this procedure in the employee handbook? Are at least two employees educated on initiating lock-down?
- Is there an annual drill where employees can simulate an armed intruder situation?
- Is there a daily headcount?
- Do you have an intercom system?

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<sup>3</sup> Missouri Coalition Against Domestic and Sexual Violence (Staff). "The Resource: Technical Assistance from Your Coalition: Planning for the Unexpected." 1-8. National Online Resource Center on Violence Against Women. 1 Jan. 2015. Web. 21 June 2016. <[http://www.vawnet.org/Assoc\\_Files\\_VAWnet/MCADSV-Planning-Unexpected\\_Dec2014.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/MCADSV-Planning-Unexpected_Dec2014.pdf)>.

## **In the event a hostile, unauthorized individual ("intruder") gains entry into your property:<sup>4</sup>**

**1.** The staff person discovering the intrusion should immediately do an 'all-call' stating: "Staff alert in/at \_\_\_ (state where the intruder is (e.g., reception, staff conference room, front door, etc.)." An 'all-call' is established by picking up the handset of the phone, pressing the intercom button, then the page button, and then speaking clearly into the handset. This page should be heard throughout *most* of the property.

**2.** The staff person discovering the intrusion should then immediately call 911, telling the sheriff's office where the intruder is, using compass directions (e.g., the staff conference room is on the northwest corner of the building; the toddler playground is on the southeast corner of the fenced-in property, etc.). A map of the property with these compass directions should be posted in the Resident Advocate's (R.A.)/Direct Services Manager's office, the Administrative Assistant's office, and the mailroom, as well as at exits, and intermittent throughout the facility's hallways. The staff person should also clearly state what behaviors the intruder has demonstrated (e.g., throwing things, attempting to break in, making threats), and if the intruder is carrying anything that could be used as a weapon.

### **3. FOR RESIDENTIAL STAFF:**

a. Upon hearing the "Staff Alert" call, the Resident Advocate (or other designated staff member), with cell phone in hand, will first lock the hallway door at the program participant phone area, and then begin to quickly but calmly lead all residents into a safe area, making sure that all residents and children are accounted for. Once all residents and children are accounted for, lock the door that leads into the main hallway of your facility. After securing the program participants, calm them by advising them that an intruder has been spotted on the property, but that law enforcement has been called, and that they are located in the safest area of the building.

b. Staff outside of the shelter area (e.g., in the reception area, storage room, or

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<sup>4</sup>Rivers-Cochran, Julie A., Joy M. Kruppa, and Sharon Youngerman. "Disaster-related Preparedness & Trauma Information Packet." 1-23. National Online Resource Center on Violence Against Women. Florida Coalition Against Domestic Violence, 11 July 2006. Web. 21 June 2016.  
<[http://www.vawnet.org/summary.php?doc\\_id=2530&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2530&find_type=web_sum_GC)>.

administrative wing) need to pay close attention to the location of the intruder announced in the "Staff Alert." For safety reasons, **under no circumstances should a staff member cross the path of the intruder.**

#### **4. FOR NON-RESIDENTIAL STAFF:**

Staff in the administrative or reception areas should immediately gather up their program participants and take them to the exit farthest away from the location of the intruder. All staff should be familiar with the primary and secondary routes for emergency exit.

**5.** If a window is broken in the shelter and the alarm goes off, no one should ever go toward the sound.

Recommended emergency procedures:

- a. All building occupants should converge into the Resident Advocate's office. The Resident Advocate on duty should then check the security keypad on the R. A. office wall to determine the zone location of the potential breach of security.
- b. As the opening of a window or door may activate the alarm, the Resident Advocate shall then check the zone to determine if there is a true emergency.
- c. Kentronics will automatically be notified by the alarm and call the shelter to determine if a true emergency exists. If there is no emergency, the Resident Advocate is to give the caller the code number, which is written on the bottom of the R.A. phone. If there is a true emergency, the Resident Advocate shall make up a false code number, which will cue Kentronics to notify CCSO for immediate dispatch.

### **Non-Emergency Procedures**

At intake, shelter residents should be advised of the meaning of a "Staff Alert" call, and of the importance of responding immediately to this call by rounding up their children (if present) and reporting to the (pre-determined) designated area. The screen door on the porch needs to be locked at all times, and the deadbolt on the door leading from the shelter to the porch should be kept locked when there is no one on the porch.

It is recommended that Intruder Alert drills occur at least quarterly, allowing all shifts the opportunity to practice this important drill. These drills should be documented in the shift report, and the Shelter/Direct Services Manager shall log these drills in an

emergency procedures folder, noting date, time, and any comments or suggestions for corrective action. Additionally, if an unknown person comes to the shelter after dark, no one is to be admitted through the gate without confirmation. At no time should a staff person exit the building to meet an unknown person.

➤ The following scenario should be followed in the event of an uninvited visitor who may pose a threat to the shelter:

- a. Call 911- tell the operator your location inside of the building, (e.g. northeast dining area).
- b. Notify all program participants and staff and lead them to a designated area where there are no windows, and multiple escape routes.
- c. Secure a cellular phone in the event the phone lines are damaged.
- d. If there is a threat of gunfire, everyone should get as close to the floor as possible and stay away from doors and windows.

## **II. Fire Alarm (False/Real)<sup>5</sup>**

**When the fire alarm sounds, the staff should assume that an emergency exists, whether or not smoke or flames have been noted. It is imperative to think and act quickly.**

**1.** If smoke or fire is noted, available staff should aid the residents who are in eminent danger. Call 911 or press the panic button, if possible. Tell the operator the name and address of the shelter/organization, your name and the situation. Remember to use directional coordinates, if possible, (e.g. the shelter faces the south; if the fire is in the playroom, tell dispatch the alarm is coming from the eastern side of the building). As calmly as possible, direct everyone to stay together and to get away from the fire and toward the street. Wait for the fire rescue team.

**2.** If smoke or fire is not evidenced, the alarm box in the first storage area in the administration wing should be accessed. On the alarm box will be either a yellow or red light flashing.

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<sup>5</sup> Rivers-Cochran, Julie A., Joy M. Kruppa, and Sharon Youngerman. "Disaster-related Preparedness & Trauma Information Packet." 1-23. National Online Resource Center on Violence Against Women. Florida Coalition Against Domestic Violence, 11 July 2006. Web. 21 June 2016.  
<[http://www.vawnet.org/summary.php?doc\\_id=2530&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2530&find_type=web_sum_GC)>.



(Please note that section a-b may or may not be applicable to your organization's alarm system.)

- a. The red light indicates excessive heat or smoke in a certain area of the home. If the red light is glowing, determine which floor is in danger and follow the procedure above.
- b. If a yellow light is glowing, the alarm may be silenced. To silence the alarm, press the trouble silence button above the light. The security system provider (ADT) should be contacted to report the problem and to provide further instruction.
- c. When any danger exists, the shelter/non-shelter residents should be guided to a place of safety as quickly as possible.
- d. All staff and residents should remain together.
- e. Staff should ensure that everyone is present.
- f. If someone is missing, the rescue workers should be advised as to who is missing and the number and location of their room.
- g. A program participant roster will be kept in the R.A.'s room, which staff should take with them prior to any emergency procedure.
- h. The Shelter/Direct Services Manager and the Executive Director should be notified of the emergency as soon as safety allows. It is important that the Shelter/Direct Services Manager and the Executive Director are notified of any unusual or dangerous situation, however, the safety of the residents and staff is the first priority.

### **III. Bomb Threats<sup>6</sup>**

#### **Bomb threat received by phone**

- 1.** The caller receiving the calling should see if someone else is available, write a note instructing them to use another phone to contact the County Sheriff's Department by dialing 911 so they can attempt to trace the call. This should be done only if it can be done without any distraction that may make the caller hang up prematurely.

(To locate the California Sheriffs' Offices contact information for your county, visit this link: <https://www.calsheriffs.org/sheriffs-offices.html>)

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<sup>6</sup>Rivers-Cochran, Julie A., Joy M. Kruppa, and Sharon Youngerman. "Disaster-related Preparedness & Trauma Information Packet." 1-23. National Online Resource Center on Violence Against Women. Florida Coalition Against Domestic Violence, 11 July 2006. Web. 21 June 2016. <[http://www.vawnet.org/summary.php?doc\\_id=2530&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2530&find_type=web_sum_GC)>.

**2.** Listen carefully to the details of the threat and try to keep the caller talking until the answers to the following questions have been obtained.

- When is the bomb going to explode?
- Where is the bomb right now?
- What kind of bomb is it?
- What does it look like?
- Where are you calling from?
- Did the caller place the bomb? Why?
- Carefully note the following:
  - The exact words of the caller.
  - Any distinctive voice characteristics.
  - Any background characteristics/noises

**3.** When the caller hangs up, **please do not hang up your phone.** As soon as the caller hangs up, note the time, and using a different phone call 911. The staff member should identify themselves as being from YOUR CENTER and notify the County Sheriff's Department of the bomb threat providing them with whatever information is requested.

**4.** The staff will advise the individuals present at the shelter of the threat. The Executive Director is to be notified as soon as possible.

**5.** The staff member on duty will make every effort to calm program participants.

**6.** If necessary, program participants should ready themselves for evacuation by congregating at the front door of the shelter. They should wait for law enforcement presence before opening the door or exiting the building whenever this seems reasonable.

**7.** Evacuation should be carried out in a calm and orderly manner and should use the following steps:

- a. All staff and program participants will exit the shelter as a group and walk through the front door of the shelter.
- b. A head count will be taken by the senior-most staff member on duty to ensure that everyone has vacated the facility.

8. If desired, the agency will cooperate with law enforcement and press all appropriate charges if a suspect is identified.
9. Evacuees may return to the shelter two hours after the alleged time of detonation (if one was given by the individual(s) making the threat) or after law enforcement advises that the situation is clear.
10. In the event the shelter is damaged or there is suspicion or threat of future damage, residents and their children will be provided shelter at an alternate shelter facility until the crisis is resolved. The Executive Director will assess the situation and options available and determine the most appropriate course of action for the safety of the program participants and staff. Residents and their children who are in the most potential danger from their partner causing harm will be transported first to a place of safety.
11. Under no circumstances should anyone address representatives of the media except the Executive Director or the President of the YOUR CENTER Board of Directors.

### **Bomb threat received by mail**

1. The individual who receives the bomb threat should allow no one to handle it.
2. Everything about its receipt should be documented.
3. Individual receiving the bomb threat should notify the County Sheriff's Office (911).
4. Until law enforcement arrives:
  - a. Make all necessary searches carefully – **please do not touch anything!**
  - b. Look for something suspicious, out of place.
  - c. Search from waist height to ceiling, then from waist height to the floor. Search in pairs if possible.
  - d. If something is suspicious – **please do not touch anything!**
  - e. Evacuate the area.
  - f. Don't disturb anything in the area.
  - g. Secure the area from a safe distance and wait for law enforcement.
5. Building occupants should ready themselves for evacuation by congregating at the front door of the shelter. They should wait for law enforcement presence before opening the door or exiting the building whenever this seems reasonable.

6. Evacuation should be carried out in a calm and orderly manner using the following steps mentioned in the previous section.

## IV. Floods<sup>7</sup>

### Safety-Planning Questions

- If you are in an area near a levy or dam that is at risk for breach, do you know the escape route and time available to move as many people as you might have in shelter?
- Do you have life vests or other rescue devices?
- Have you had contact with local authorities and developed a plan in the event they need to assist with evacuation?
- Who can make the decision to evacuate those seeking services?
- How will transportation be handled?
- What items from your program need to be removed from the offices in order for you to maintain minimal operations? These could include a checkbook, computer with accounting program, access to grant files and resident files for those being evacuated.

### How to Prepare for a Flood<sup>8</sup>

You'll be better prepared to withstand a flood if you have the following items available – packed and ready to go in case you need to evacuate:

- Water—at least a 3-day supply; one gallon per person per day
- Food—at least a 3-day supply of non-perishable, easy-to-prepare food
- Flashlight(s)
- Battery-powered or hand-crank radio

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<sup>7</sup> Missouri Coalition Against Domestic and Sexual Violence (Staff). "The Resource: Technical Assistance from Your Coalition: Planning for the Unexpected." 1-8. National Online Resource Center on Violence Against Women. 1 Jan. 2015. Web. 21 June 2016. <[http://www.vawnet.org/Assoc\\_Files\\_VAWnet/MCADSV-Planning-Unexpected\\_Dec2014.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/MCADSV-Planning-Unexpected_Dec2014.pdf)>.

<sup>8</sup> "Flood Safety." American Red Cross. 2016. Web. 22 June 2016. <<http://www.redcross.org/get-help/prepare-for-emergencies/types-of-emergencies/flood#/Respond>>.

- Extra batteries
- First Aid kit
- Medications (7-day supply) and medical items (hearing aids with extra batteries, glasses, contact lenses, syringes, cane)
- Sanitation and personal hygiene items
- Copies of personal documents (medication list and pertinent medical information, deed/lease to home, birth certificates, insurance policies)
- Cell phone with chargers
- Family and emergency contact information
- Map(s) of the area
- Rain gear
- Camera for photos of damage

## **Responding Appropriately During a Flood**

- Listen to area radio and television stations and a NOAA Weather Radio for possible flood warnings and reports of flooding in progress or other critical information from the National Weather Service (NWS)
- Be prepared to evacuate at a moment's notice.
- When a flood or flash flood warning is issued for your area, head for higher ground and stay there.
- Stay away from floodwaters. If you come upon a flowing stream where water is above your ankles, stop, turn around and go another way. Six inches of swiftly moving water can sweep you off of your feet.
- If you come upon a flooded road while driving, turn around and go another way. If you are caught on a flooded road and waters are rising rapidly around you, get out of the car quickly and move to higher ground. Most cars can be swept away by less than two feet of moving water.
- Keep children out of the water. They are curious and often lack judgment about running water or contaminated water.
- Be especially cautious at night when it is harder to recognize flood danger.
- Because standard homeowner's insurance doesn't cover flooding, it's important to have protection from the floods associated with hurricanes, tropical storms, heavy rains and other conditions that impact the U.S. For more flood safety tips and information on flood insurance, please visit the National Flood Insurance Program Web site at [www.FloodSmart.gov](http://www.FloodSmart.gov).

## Floods by Mechanical Dysfunction<sup>9</sup>

More than one MCADSV member program has had to confront the flood of broken pipes, water damage and—in one extreme case—a flood of raw sewage. In that case, well, it literally hit the fan. Not only did they have to deal with foul water damage, but also the biological clean-up of a facility that couldn't be entered for weeks. Another program experienced a pipe break on the second floor, causing water damage throughout the building.

- Do you know where the water shut-off valve is for the building? Is there more than one for different sections of the building?

In both flood scenarios, **be cautious and on the lookout for the growth of mold**. Many people have allergies to a variety of different mold types, excluding the toxicity of black mold. This too generally requires a specialist to assist you in getting to the source and making sure that clean-up is thorough.

## V. Earthquakes<sup>10</sup>

### Establish Priorities

Take time before an earthquake strikes to write an emergency priority list, including:

- Important items to be hand-carried by staff; other items, in order of importance
- Items to be removed by car or truck if one is available
- Things to do if time permits, such as locking doors and windows, turning off the utilities, etc.

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<sup>9</sup> Missouri Coalition Against Domestic and Sexual Violence (Staff). "The Resource: Technical Assistance from Your Coalition: Planning for the Unexpected." 1-8. National Online Resource Center on Violence Against Women. 1 Jan. 2015. Web. 21 June 2016. <[http://www.vawnet.org/Assoc\\_Files\\_VAWnet/MCADSV-Planning-Unexpected\\_Dec2014.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/MCADSV-Planning-Unexpected_Dec2014.pdf)>.

<sup>10</sup> "Being Prepared for an Earthquake." Centers for Disease Control and Prevention. 16 Jan. 2014. Web. 21 June 2016. <<http://emergency.cdc.gov/disasters/earthquakes/prepared.asp>>

## Write Down Important Information

Make a list of important information and put it in a secure location.

Possible items to include on your list:

- Important telephone numbers, such as local police, fire, paramedics and medical centers
- Names, addresses, and telephone numbers of your insurance agents, including policy types and numbers
- Telephone numbers of the electric, gas, and water companies
- Name and telephone number of your landlord or property manager
- Important medical information, such as allergies, regular medications, etc.
- Your bank's or credit union's telephone number, account types, and numbers
- Radio and television broadcast stations to tune to for emergency broadcast information

## During an Earthquake—Indoor Safety<sup>11</sup>

In most situations, you will reduce your chance of injury from falling objects and even building collapse if you immediately:

- **DROP down onto your hands and knees** before the earthquake knocks you down. This position protects you from falling but allows you to still move if necessary.
- **COVER your head and neck** (and your entire body if possible) under the shelter of a sturdy table or desk. If there is no shelter nearby, get down near an interior wall or next to low-lying furniture that won't fall on you, and cover your head and neck with your arms and hands.
- **HOLD ON to your shelter** (or to your head and neck) until the shaking stops. Be prepared to move with your shelter if the shaking shifts it around.

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<sup>11</sup> "During an Earthquake: Indoor Safety." Centers for Disease Control and Prevention. 16 Jan. 2014. Web. 21 June 2016. <<http://emergency.cdc.gov/disasters/earthquakes/during.asp>>.



**Please DO NOT stand in a doorway.** You are safer under a table. In modern houses, doorways are no stronger than any other part of the house. The doorway does not protect you from the most likely source of injury—falling or flying objects. Most earthquake-related injuries and deaths are caused by falling or flying objects (e.g., TVs, lamps, glass, bookcases), or by being knocked to the ground.

You can take other actions, even while an earthquake is happening, that will reduce your chances of being hurt.

- If possible within the few seconds before shaking intensifies, quickly move away from glass and hanging objects, and bookcases, china cabinets, or other large furniture that could fall. Watch for falling objects, such as bricks from fireplaces and chimneys, light fixtures, wall hangings, high shelves, and cabinets with doors that could swing open.
- If available nearby, grab something to shield your head and face from falling debris and broken glass.
- If you are in a kitchen, quickly turn off the stove and take cover at the first sign of shaking.
- If you are in a bed, hold on and stay there, protecting your head with a pillow. You are less likely to be injured staying where you are. Broken glass on the floor has caused injury to those who have rolled to the floor or tried to get to doorways.

## **During an Earthquake—Outdoor Safety<sup>12</sup>**

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<sup>12</sup> "During an Earthquake: Outdoor Safety." Centers for Disease Control and Prevention. 16 Jan. 2014. Web. 21 June 2016. <<http://emergency.cdc.gov/disasters/earthquakes/outdoorsafety.asp>>



**If you are outside, it is best to stay outside,** and stay away from buildings utility wires, sinkholes, and fuel and gas lines.

The area near the exterior walls of a building is the most dangerous place to be. Windows, facades and architectural details are often the first parts of the building to collapse. Also, shaking can be so strong that you will not be able to move far without falling down, and objects may fall or be thrown at you. Stay away from this danger zone—stay inside if you are inside and outside if you are outside.

If outdoors, move away from buildings, utility wires, sinkholes, and fuel and gas lines. The greatest danger from falling debris is just outside doorways and close to outer walls. Once in the open, get down low (to avoid being knocked down by strong shaking) and stay there until the shaking stops.

## **Automobiles**

If you are in a moving automobile, stop as quickly and safely as possible. Move your car to the shoulder or curb, away from utility poles, overhead wires, and under- or overpasses. Stay in the car and set the parking brake. Turn on the radio for emergency broadcast information. A car may jiggle violently on its springs, but it is a good place to stay until the shaking stops. If a power line falls on the car, stay inside until a trained person removes the wire.

When you drive on, watch for hazards created by the earthquake, such as breaks in the pavement, downed utility poles and wires, rising water levels, fallen overpasses and collapsed bridges.

## **Practice Drills**

By planning and practicing what to do if an earthquake strikes, you can learn to react correctly and automatically when the shaking begins. During an earthquake, most deaths and injuries are caused by collapsing building materials and heavy falling objects, such as bookcases, cabinets, and heating units. Learn the safe spots in each room of your facility.

## **Populations with Access and Functional Needs**

### **VI. Planning, Preparedness, and the Law<sup>13</sup>**

Emergency planners and others need to know their legal and ethical responsibilities for planning for people with disabilities.

#### **Americans with Disabilities Act**

The Americans with Disabilities Act (ADA) was enacted into law on July 26, 1990. It stipulates that "governments [as well as some private and commercial businesses] be accessible to people with disabilities" (DOJ 2007a, p. 1). Accessibility includes physical access but also addresses "how programs, services, and activities are delivered" (p. 1).

Disability is defined by the ADA as a "mental or physical impairment that substantially limits one or more major life activities" (DOJ 2007a, p. 5). Barriers to accessibility can include architecture, policies and procedures, and communication methods. "Effective communication means that whatever is written or spoken must be as clear and understandable to people with disabilities as it is for people who do not have disabilities" (DOJ 2007b, pp. 1 & 2). "Effective communication" is determined by the situation. For example, a passing situation may require only minimal assistance, such as a written note, instructions that are read aloud, or personal assistance in finding a location. Other situations—those that are "more complex or lengthy"—require more assistance, such as qualified interpreters, captioning, or the use of computer terminals (DOJ 2007b, p. 4).

Regardless of the auxiliary aid or service used, primary consideration must be given to the method that provides the person with a disability the greatest sense of security and understanding. According to the Office for Civil Rights ADA Fact Sheet ([www.disabilityinfor.gov](http://www.disabilityinfor.gov)), public entities must serve people with disabilities and eliminate barriers to ensure that programs, services, buildings, and communication are accessible to people with disabilities.

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<sup>13</sup> "Effective Emergency Management: Making Improvements for Communities and People with Disabilities." National Council on Disability. 1-514. 12 Aug. 2009. Web. 23 Jan. 2016.  
<[http://www.ncd.gov/rawmedia\\_repository/50b76caf\\_054c\\_491d\\_ae88\\_587c096d8b3a.pdf](http://www.ncd.gov/rawmedia_repository/50b76caf_054c_491d_ae88_587c096d8b3a.pdf)>

## **The ADA recommends planning ahead for effective communication with people with disabilities, and identifying resources for auxiliary aids and services.**

This includes determining early on how to copy documents into Braille, find qualified interpreters, and train all employees to recognize the need for effective communication with people with disabilities (DOJ 2007a). All Public Safety Answering Points (PSAPs), such as 911 and other emergency services, “must directly receive TTY calls without relying on an outside relay service or third-party services” (DOJ 2007c, p. 2). Telephone emergency services are required to be as effective for users of TTY as they are for nonusers. This is measured in relation to “response time, response quality, hours of operation, and all other features offered” (p. 2). Furthermore, the ADA requires that PSAPs must maintain and provide backup capability for all TTY equipment.

Emergency planners must plan ahead to effectively provide services and communicate with people with disabilities before, during, and after an emergency. Emergency planners must also advocate for policies that best protect and maintain the independence of people with disabilities as they prepare for and navigate emergency situations.

### **Individuals in need of additional response assistance may include those who:<sup>14</sup>**

- Have mental and/or physical disabilities;
- Are elderly;
- Are children;
- Are from diverse cultures;
- Have limited English proficiency or are non-English speaking;
- Are transportation disadvantaged

These lessons show **four areas** that are repeatedly identified as most important to people with disabilities and older adults:

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<sup>14</sup> “State of California Emergency Plan.” Cal OES Governor’s Office of Emergency Services. 1-190. 23 Jan. 2009. Web. 01 June 2016. <<http://www.caloes.ca.gov/PlanningPreparednessSite/Documents/00%20SEP%207-01-09%20covrev%20%2812%29.pdf>>.

1. Communications and Public Information: Emergency notification systems must be accessible to ensure effective communication for people who are deaf/hard of hearing and blind/low vision.
2. Evacuation and Transportation: Evacuation plans must incorporate disability and older adult transportation providers for identifying and the movement of people with mobility impairments and those with transportation disadvantages.
3. Sheltering: Care and shelter plans must address the access and functional needs of people with disabilities and older adults to allow for sheltering in general population shelters.
4. Americans with Disabilities Act (ADA): When shelter facilities are activated, the state will work with local officials to ensure they accommodate the provisions of the (ADA).

## **Type of Disability<sup>15</sup>**

The National Organization on Disability (NOD) identifies three types of disabilities of concern for emergencies and disasters: **mobility, sensory and cognitive**. This report uses the NOD definitions given below ([www.nod.org](http://www.nod.org), see Emergency Preparedness Initiative):

### **1. Mobility**

This term refers "primarily to persons who have little or no use of their legs or arms. They generally use wheelchairs, scooters, walkers, canes, and other devices as aids to movement."

Concerns for people with mobility disabilities might include:

- Sheltering expeditiously for a rapid onset event, such as a chemical spill.
- Losing durable medical equipment during an evacuation.
- Returning home from a shelter over debris-covered roads.

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<sup>15</sup> "Effective Emergency Management: Making Improvements for Communities and People with Disabilities." National Council on Disability. 1-514. 12 Aug. 2009. Web. 23 Jan. 2016. <[http://www.ncd.gov/rawmedia\\_repository/50b76caf\\_054c\\_491d\\_ae88\\_587c096d8b3a.pdf](http://www.ncd.gov/rawmedia_repository/50b76caf_054c_491d_ae88_587c096d8b3a.pdf)>.

- Tearing out damaged wallboard, carpeting, and the like from the effects of floodwaters.
- Reoccupying a home before it has been cleared of items shaken loose by an earthquake.
- Returning home at all to a structure in the floodplain and consequently being forced to relocate or enter a congregate care facility, leading to a loss of independence.

## **2. Sensory**

This term refers to “persons with hearing or visual limitations, including total blindness or deafness.”

Particular concerns that might arise for someone with a sensory disability could include the following:

- Being able to read educational and training materials on emergency preparedness that were developed in a format that is not accessible; FEMA materials, for example, while available online, are unusable for many people with sensory disabilities.
- Hearing warning messages or seeing the area of concern on televised weather maps.
- Understanding what the meteorologist is saying if they turn their back or fail to offer closed-captioned information.
- Navigational and other challenges in shelters and in temporary housing.
- Being among the last to learn of recovery programs and resources that fail to disseminate information in accessible formats.

## **3. Developmental/Cognitive**

The terms “developmental” and “cognitive” most commonly include conditions that may affect a person’s ability to listen, think, speak, read, write, do math, or follow instructions.

Concerns that may arise for people with developmental or cognitive disabilities include the following:

- Difficulty understanding instructions, including those that vary from source to source. Fear of a first responder or other person with whom the individual is unfamiliar. Isolation in a shelter environment if separated from a family member, friend, or caretaker.

- Confusion over how to use a given prophylactic, for example, in a pandemic.
- Having an official assume that the individual does not understand procedures or messages when in fact they do.
- Lack of access to needed resources because of a location's failure to provide ADA-specified accommodations.

## **Intersecting disabilities**

Although the NOD materials focus on separate circumstances, it is important to remember and understand that disabilities often intersect and overlap. An individual may, for example, have both mobility and 47 sensory disabilities. Coupled with issues of income, age, gender, and culture, the goal of ensuring safety in the context of disaster becomes increasingly complex. In addition, stockpiling extra food, water, and emergency supplies is probably out of the question because of the person's limited income.

Emergency managers and voluntary organizations often work side by side in a disaster context to provide relief and recovery assistance. Yet these same key resources often remain distant from people with disabilities and disability organizations. The National Council on Disability (NCD) report calls for greater connectedness among emergency management and the full range of voluntary organizations, including disability organizations, agencies, and advocates. Such collaboration can make a difference by leveraging collective resources to solve the problems faced by people with disabilities in a disaster situation.

## Best Practices: Emergency Preparedness and Response

### VII. Preparedness<sup>16</sup>

Research on preparedness shows that people who believe themselves "prepared" for disasters often aren't as prepared as they think. According to a national study conducted by ready.gov,

- Forty percent of survey respondents did not have household plans;
- 80 percent had not conducted home evacuation drills;
- Nearly 60 percent did not know their community's evacuation routes;
- Nearly 20 percent of survey respondents reported having a disability that would affect their capacity to respond to an emergency situation, but shockingly only one out of four of them had made arrangements specific to their disability to help them respond safely in the event of an emergency.

Becoming more prepared in case of an emergency is easier than you might think. Whether it's your home, your neighborhood, your place of business, or your school, you can take a few simple steps to prepare your community. We must all embrace our individual responsibility to be prepared – in doing so, we contribute to the safety and security of the nation as well.

### **When preparing for crises, the National Domestic Violence Hotline recommends that domestic violence programs implement the following:**<sup>17</sup>

1. A disaster specialist or team depending upon the size of the organization that may include employee(s) and volunteer(s).
2. An all-hazards plan and separate protocols for all types of potential emergencies (e.g., fire; bomb threat; armed person/intruder; earthquake; flood, etc.).

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<sup>16</sup> "Community Preparedness: The Facts." Ready.gov. Web. 24 June 2016. <<https://www.ready.gov/community-preparedness-toolkit>>.

<sup>17</sup> "Domestic Violence Advocacy: A Disaster Response (Facilitator Guide)." The National Domestic Violence Hotline. 2014. 1-62. Web. 21 June 2016. <<http://www.thehotline.org/resources/download-materials/>>.

- Develop checklists for each of these potential emergencies.
- One protocol for each disaster type (some overlap may occur).
- Each protocol should include a timeline, and should outline specific staff instructions.
- Staff roles should be clearly defined with clear instructions pre-, during and post-disaster.

**3.** A committee to review the initial plan and review it annually.

**4.** A yearly budget for start-up and replacement supplies.

**5.** PRACTICE, PRACTICE, PRACTICE! Understand that the best laid plans will have flaws in any crisis, disaster or emergency. Planning and practice is helpful to generate confidence to make decisions in the face of uncertainties.

**6.** At minimum, disaster protocols ought to include everything listed on the slide.

**7.** All staff must be made aware of any changes with policies disseminated annually.

**8.** Attempt to update policies after each disaster as new information will always emerge to help in preparing for the next disaster.

**9.** Assign staff to research literature published after major disasters anywhere in the world. Government and other disaster-related organizations will update their websites with helpful information. Academic publications will follow a year or so after.

**10.** Brainstorm and create a tangible action plans for worst-case scenarios.

**11.** Organizational leaders are responsible for disaster planning, policies, and implementation. Often communities used to disaster warnings become apathetic and used to false alarms or have a false sense of security from survival stories passed down in the family. Many people along the Gulf Coast of Mississippi did not heed Katrina evacuation warnings thinking that their ancestors survived 1969's Hurricane Camille which was Category 5, and many were swept away by the unprecedented storm surge. Despite official warnings, 235 people died there, aside from the levee situation in New Orleans.



## **There are a number of emergency preparedness issues that remain of great concern:**<sup>18</sup>

- How we determine warning signs of a disaster or threat.
- How and when we notify people of potential problems.
- How we ensure public safety and order.
- How we respond to survivors in a disaster when normal response systems are in chaos.
- Where we evacuate and shelter evacuees.
- How we keep people safe in emergency shelters. How we help people rebuild their lives.
- How we rebuild healthy communities. What we provide in the long term to help individuals and families heal.

The processes of planning, communication, resource sharing, execution, mid-course correction, and evaluation of the overall response to a disaster or emergency needs to be well thought-out long before these events occur. We clearly are not yet at a point where we have mastered the planning and response needed for effective emergency preparedness, but each experience and problem also presents an opportunity from which we can learn.

The challenge that faces us as individuals, organizations, and systems of government is to take the information gleaned from historical experiences with disaster and emergency and use it to forge an integrated response system that meets the needs of survivors, staff, and upholds and bolsters local programs and services.

### **VIII. Response**<sup>19</sup>

The actions taken in the initial minutes of an emergency are critical. A prompt warning to employees to evacuate, shelter or lockdown can save lives. A call for help to public emergency services that provides full and accurate information will help the dispatcher

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<sup>18</sup> West, Helga, Judy Benitez, Bonnie Zampino, and Elaine N/a. "After the Crisis Initiative: Healing from Trauma after Disasters." Resource Paper: Victims of Violence in Times of Disaster or Emergency. 2006. 1-9. National Online Resource Center on Violence Against Women. Web. <[http://www.vawnet.org/summary.php?doc\\_id=2520&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2520&find_type=web_sum_GC)>.

<sup>19</sup> "Emergency Response Plan." Ready.gov. Web. 24 June 2016. <<https://www.ready.gov/business/implementation/emergency>>.

send the right responders and equipment. An employee trained to administer first aid or perform CPR can be lifesaving. Action by employees with knowledge of building and process systems can help control a leak and minimize damage to the facility, communities and the environment.

**When responding to crises, the National Domestic Violence Hotline recommends that domestic violence programs respond in the following ways:**<sup>20</sup>

**1.** During the emergency it is important to **support the choice of the survivor** whether they choose to evacuate with the residents or return to their family and even their partner causing harm.

a. With safety planning, brainstorm solutions with the survivor starting with the people and resources closest to them. We'll reference friends and family, and from there think of neighbors, faith-based organizations (fellow church-goers, clergy, pastor, etc.), after-school programs (coach, staff, tutor, etc.).

b. Try to consider all of the possible safety nets that this person could have.

c. Advocates are encouraged to initiate the safety planning process with survivors by asking exploratory questions. Given disrupted legal systems and social services, survivors should be encouraged to collectively safety plan with those around them to tap into the resources that still remain.

d. For instance,

- **Validate the survivor's concerns and feelings.** It's easy for a survivor to minimize the experience of abuse, especially if they feel responsible for others (e.g. children, elders, other community members, neighbors, etc.).
- **Ensure the referred shelter or emergency location has adequate safety protocols.** Is the shelter well lit? Are bathrooms located in a central area? What security measures does the shelter take in case of an interpersonal conflict or assault? Is it possible to set up a separate shelter for especially vulnerable individuals?

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<sup>20</sup> "Domestic Violence Advocacy: A Disaster Response (Facilitator Guide)." The National Domestic Violence Hotline. 2014. 1-62. Web. 21 June 2016. <<http://www.thehotline.org/resources/download-materials/>>.

**2.** Appoint someone in charge of evacuation, another in charge of services (hotlines, counseling, court) to ensure cancellations and transfers are properly communicated and someone in charge of supplies to bring (diapers, formula, food, water, toiletries, medications, etc.).

- If possible, evacuate residents to the nearest domestic violence shelter. If no shelter is available, identify the closest emergency shelter.
- If evacuation is possible, be sure to fill up on gas and if safe, fill a gas storage container as back up. Gas stations frequently run out of gas before and immediately following disasters.
- Be sure all confidentiality issues have been planned for and ask for releases when applicable, safe and appropriate.
- Be sure the person relocating to sustain operations has updated information, including alternative numbers for clients, employees, emergency contacts and volunteers.

### **3.** Evacuation to an Emergency Shelter

- Assess appropriateness of shelter with each resident/non-resident.
- Create safety plans with survivors around staying at the shelter, returning to partner or staying with relatives.
- Rotate shelter staff so there is someone there 24 hours.
- Introduce yourself to guards and notify them right away if a batterer or a batterer's ally is seen at the shelter.
- Anticipate emotional reactions.

### **4.** Offer continuous services

If possible, continue providing emotional support through counseling and group work. Because everyone reacts to crisis differently it is necessary that services be available to address their current emotional needs as well as their past abuse and trauma. These emergency situations can be triggering and can cause a survivor or staff member to experience anxiety, depression, PTSD (or exacerbate existing issues) and therapeutic services can help reduce that possibility. (Enarson, E. 1998).

### **5.** Rolling and sharing services

If possible, roll program Hotline to sister programs, state hotline (if available) or National Domestic Violence Hotline. Consider referrals to nearby available agencies and think creatively about sharing office space and supplies with other organizations.

## **Survivor Assistance in the Aftermath<sup>21</sup>**

While the Salvation Army, Red Cross, and other organizations and agencies rally to respond to tragic events, their focus is generally on crisis response (e.g., how to satisfy basic and immediate human needs like food, water, and shelter). Similarly, crisis intervention—more personalized services offered when a crisis takes place and perhaps unhealthy coping mechanisms threaten individual or family functioning—can be enormously helpful in the aftermath of disaster or emergency. Both crisis response and crisis intervention can help to lay the foundation for reducing anxiety and educating survivors and their families on trauma, post-traumatic stress disorder, and common disaster responses.

It is clear, however, that longer-term trauma support is essential, especially for those with pre-existing trauma, substance abuse, or psychiatric histories. History shows us that while many individuals will make a full psychological recovery within 12 to 24 months following a disaster; post-event stressors such as the disruption of basic needs, stressful life events (e.g., loss of a home or job, displacement), and loss of internal and external resources (e.g., a sense of control or social ties) can make healing even more difficult (Kilpatrick & Freedy, 1994).

Even under the best of circumstances following a crisis, survivors often need support far beyond crisis intervention, often for periods of two years or more. We also know that every individual heals differently and at a personal pace. In order to minimize the social, cultural, familial, and personal impact of destructive events, we need to ensure that programs and services are available for a longer period of time and gain a deeper understanding of who may be at risk or have a more difficult time in the aftermath.

The National Center for Post-Traumatic Stress Disorder provides the following mental health risk factor profile (Kilpatrick & Freedy, 1994):

- Lower income
- Increasing age

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<sup>21</sup> West, Helga, Judy Benitez, Bonnie Zampino, and Elaine N/a. "After the Crisis Initiative: Healing from Trauma after Disasters." Resource Paper: Victims of Violence in Times of Disaster or Emergency. 2006. 1-9. National Online Resource Center on Violence Against Women. Web.  
<[http://www.vawnet.org/summary.php?doc\\_id=2520&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2520&find_type=web_sum_GC)>.

- Prior mental health problems
- Prior violent crime victimization
- Prior history of other traumatic events
- Pre-existing non-traumatic (but troubling) events
- Intense initial emotional reactions to disaster
- Perceived threat of serious injury or death (to self or family) during disaster
- Higher post-disaster rates of non-traumatic events
- A lack of necessary resources in the post-disaster period (e.g., family stability, stable employment, social support)
- Higher rates of unhealthy post-disaster coping behavior

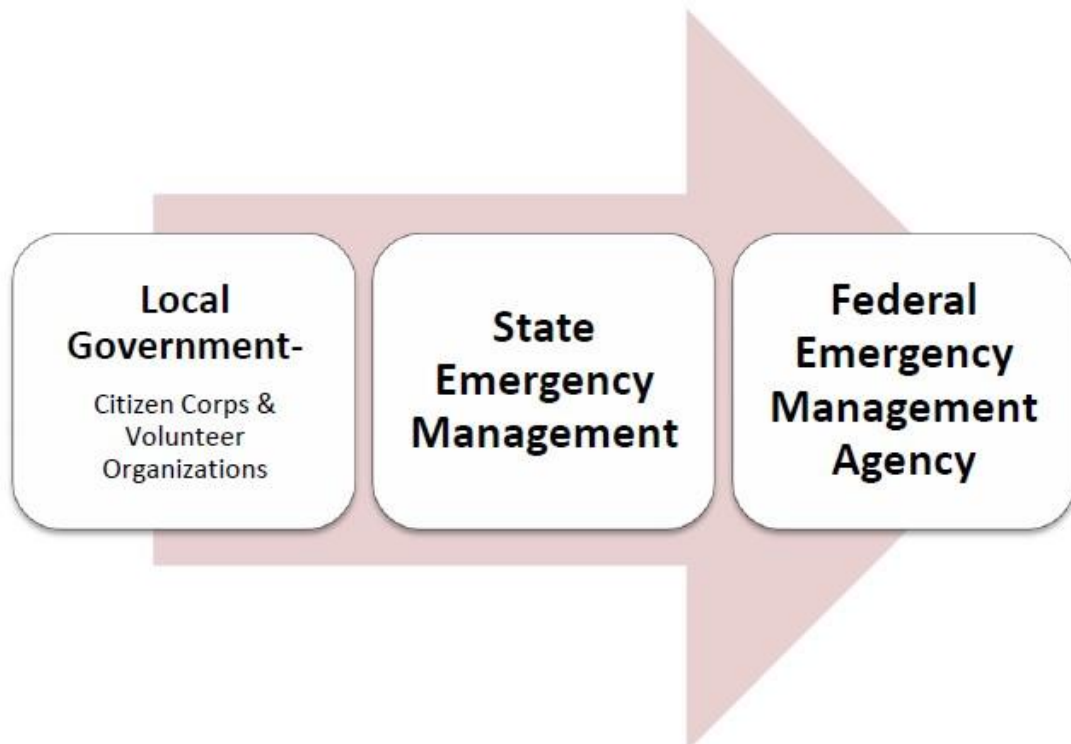
For survivors who have experienced crime and may not have the knowledge, resources, access, or capacity to reach out for help, service providers within the criminal justice system and victim assistance communities need to be especially assertive and understanding to ensure that core victim rights are upheld and that services can be established for those in need.

Other providers need to also consider that some of the individuals and families being served may have experienced violent crime, and it is therefore essential that they have an understanding of early signs of trauma, reporting protocols, and safety procedures. Good community connections and collaborations will help to bridge services from one community to the next so that all wounds—physical, emotional, and spiritual—can receive attention. Violent crime survivors can have an especially difficult time coping in the aftermath of disaster.

The shock, loss of safety, increased anxiety, fear, and absence of traditional supports can trigger feelings and reactions from earlier traumas. Because survivors may not understand the relationship between “what’s happening now” and “what happened back then” regarding trauma, it is imperative that we foster greater public understanding of the nature and impact of trauma and the interrelation between trauma, substance abuse, and mental health concerns and how this experience can affect health, ability to focus, relationships, sleep, emotional state, and more. Service and healthcare providers, employers, community groups, families, and individuals all need to have a sense of how trauma may impact people and relationships.

## Disaster Response and Management<sup>22</sup>

### Disaster Response Structure



**Step 1:** National Weather Service or National Hurricane center will notify the county/city local government of the impending storm/disaster.

**Step 2:** Local government enacts emergency plan and deploys local entities: law enforcement, firefighters, EMS and other para-professionals.

**Step 3:** Voluntary groups are deployed as needed

- Community Emergency Response Teams (Citizen Corps, Fire Corps, Medical Reserve Corps) which focus on disaster preparedness and disaster response skills and provide emergency support when conventional emergency services are overwhelmed.

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<sup>22</sup>"Domestic Violence Advocacy: A Disaster Response (Facilitator Guide)." The National Domestic Violence Hotline. 2014. 1-62. Web. 21 June 2016. <<http://www.thehotline.org/resources/download-materials/>>.

- The Red Cross, which was chartered by Congress to coordinate disaster response services, including shelter, food, emotional health services and basic human needs.
- Salvation Army and other charitable and faith-based programs.

**Step 4:** If the local government needs further assistance, the State Emergency Management Team is notified.

**Step 5:** Federal Emergency Management Agency (FEMA) is contracted by the governor if state resources become overwhelmed. FEMA is the lead federal agency for emergency management and supports, but does not override, state authority. For more information, visit [www.fema.gov](http://www.fema.gov).

## **IX. Conclusion**<sup>23</sup>

To ensure that survivors, staff, and community members heal and have the best support possible in the aftermath of disasters, we need to focus on collaboration, education, communications, and sustained trauma-informed support. Together we can bring about positive change so that future times of disaster will be managed with sensitivity, response, and coordination.

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<sup>23</sup> West, Helga, Judy Benitez, Bonnie Zampino, and Elaine N/a. "After the Crisis Initiative: Healing from Trauma after Disasters." Resource Paper: Victims of Violence in Times of Disaster or Emergency. 2006. 1-9. National Online Resource Center on Violence Against Women. Web.  
<[http://www.vawnet.org/summary.php?doc\\_id=2520&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2520&find_type=web_sum_GC)>.



## **Emergency Preparedness and Response Resources**

American Red Cross, Preparing for Disaster for People with Disabilities and other Special Needs

[http://www.redcross.org/images/MEDIA\\_CustomProductCatalog/m4240199\\_A4497.pdf](http://www.redcross.org/images/MEDIA_CustomProductCatalog/m4240199_A4497.pdf)

Cal OES, State of California Emergency Plan

<http://www.caloes.ca.gov/cal-oes-divisions/planning-preparedness/state-of-california-emergency-plan-emergency-functions>

Canadian Centre for Occupational Health and Safety, Emergency Planning

<https://www.ccohs.ca/oshanswers/hsprograms/planning.html>

National Council on Disability, Effective Emergency Management: Making Improvements for Communities and People with Disabilities

[http://www.ncd.gov/rawmedia\\_repository/50b76caf\\_054c\\_491d\\_ae88\\_587c096d8b3a.pdf](http://www.ncd.gov/rawmedia_repository/50b76caf_054c_491d_ae88_587c096d8b3a.pdf)

Ready.gov, Community Preparedness Toolkit

<https://www.ready.gov/community-preparedness-toolkit>

The National Domestic Violence Hotline, Disaster Response Curriculum

<http://www.thehotline.org/resources/download-materials/>

The National Online Resource Center on Violence Against Women, Disaster-related Preparedness & Trauma Information Packet

[http://www.vawnet.org/summary.php?doc\\_id=2530&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2530&find_type=web_sum_GC)

The National Online Resource Center on Violence Against Women, Natural Disasters: Power and Control Wheel

[http://www.vawnet.org/Assoc\\_Files\\_VAWnet/FCADVDisasterPowerControlWheel.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/FCADVDisasterPowerControlWheel.pdf)



The National Online Resource Center on Violence Against Women, The Resource-  
Technical Assistance from Your Coalition: Planning for the Unexpected

[http://www.vawnet.org/Assoc\\_Files\\_VAWnet/MCADSV-Planning-Unexpected\\_Dec2014.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/MCADSV-Planning-Unexpected_Dec2014.pdf)

The National Online Resource Center on Violence Against Women, Victims of Violence  
in Times of Disaster or Emergency

[http://www.vawnet.org/summary.php?doc\\_id=2520&find\\_type=web\\_sum\\_GC](http://www.vawnet.org/summary.php?doc_id=2520&find_type=web_sum_GC)