



**STATE OF CONNECTICUT**  
OFFICE OF PROTECTION AND ADVOCACY FOR  
PERSONS WITH DISABILITIES  
60B WESTON STREET, HARTFORD, CONNECTICUT 06120-1551

October 31, 2006

Dear Disability Group Leader:

This is to inform you of several important initiatives to improve emergency preparedness for people with disabilities and senior citizens in Connecticut, and to request both your assistance implementing them, and any feedback, questions or suggestions you may have regarding this important area.

As you probably know, in the wake of Hurricane Katrina and other recent natural disasters, emergency management officials and advocates for seniors and people with disabilities have been paying increasing attention to inclusive disaster planning. All aspects of emergency preparedness are being re-examined: public communications and notification systems, responder training, personal preparedness guidelines, evacuation planning, short-term sheltering strategies (including shelter-in-place supports), long term housing and support needs, and coordination with health care and human services providers.

Because Connecticut is periodically hit with major hurricanes, blizzards, ice storms and other weather emergencies, one of our first priorities has been ensuring that locally designated emergency shelters are accessible and able to accommodate the needs of people with disabilities and senior citizens. This summer a group of disaster management professionals, state agency representatives and advocates began meeting to discuss these issues and to recommend improvements. Following the group's recommendations, the Department of Emergency Management and Homeland Security (DEMHS), the Department of Public Health (DPH) and the Office of Protection and Advocacy for Persons with Disabilities (OPA) have recently launched a joint initiative to assist municipalities in locating and developing "universally accessible shelters". Copies of the letter announcing this initiative and the Department of Justice publication that were recently sent to local elected officials are enclosed.

Borrowing from the concept of "universal design", universally accessible shelters are intended to be capable of meeting the short-term sheltering needs of most people living in a community, whether they have an identified disability or not. Universal accessibility means meeting certain standards for physical and communications accessibility; being equipped with basic infrastructure capabilities, such as auxiliary power generation and telecommunications and internet access; and, perhaps most

importantly, offering a reasonably flexible administrative climate that is welcoming to people. It is not expected that universal shelter staff will provide individual supervision, personal care assistance, or other services not typically available through volunteer shelter workers. However, people who depend on others for this type of assistance, or who need specialized equipment would not be turned away if they bring these with them to a universally accessible shelter. In addition, individual municipalities could elect to provide enhanced shelter staffing and other services within, or adjacent to a suitable universally accessible shelter as part of an overall plan to meet the needs of residents with heightened health care needs.

This model represents a departure from previous paradigms which assumed that most people with disabilities (including many seniors) would be directed to separate “special needs shelters”, segregated from others who would be housed in “general population shelters”. The shift in emphasis is in line with contemporary demographic realities: as our population ages and as technology has advanced, many more people with functional support needs are living independently in our communities. The “special needs population” has now grown so large, and includes so many people living in so many different situations that the term has lost much of its meaning as a planning concept. Rather than relying on categorical or diagnostic labels, national experts are now recommending a more inclusive approach - one that recognizes the many different ways people meet their functional needs on a daily basis, and supports these individuals in maintaining their independence during emergencies and other major infrastructure disruptions.

It is important to note that even a universally accessible shelter is not intended to meet the needs of absolutely everyone. More specific sheltering plans still need to be made for people who: 1) have very serious health-related conditions; 2) depend on complex medical technology; 3) require frequent monitoring and attention from skilled health care professionals; or 4) require care and support from others but cannot count on their own support network being available in an emergency. In fact, individual emergency plans anticipating a variety of scenarios - not just evacuation and congregate shelter - should be made for every community member living in these circumstances. It is expected, however, that local shelters that follow the principles of universal accessibility will be able to serve many people who would previously have been re-directed to more remote special needs shelters, thereby minimizing disruptions in peoples’ lives and reducing the number of individuals for whom specialized supports and transportation must be provided

Perhaps the greatest benefit of this universal approach is an increased likelihood that people most in need of public shelter in an emergency will actually seek it in a timely way. Various studies of recent disaster experience in different parts of the country suggest that uncertainty about accessibility and accommodations in evacuation and shelter facilities leave many seniors and people with disabilities reluctant to comply with evacuation warnings and orders. So do worries about being separated from personal support networks (e.g. family members, friends and other helpers). And, for some, the prospect of entering a “special needs” environment evokes images of institutionalization, raising anxieties about losing independence - perhaps even permanently losing a cherished independent living situation. While other factors, such as language barriers, group identity, and economic status clearly impact public responses to emergency warnings and

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instructions, it is clear that perceptions and concerns about the location, capabilities and administrative practices associated with emergency shelters also heavily influence people's behavior. Ensuring that community shelters are, and are understood to be accessible, equipped and reasonably administered will likely help in this regard.

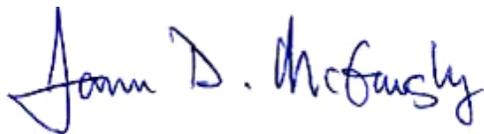
Successfully implementing this strategy depends on two related efforts:

1. a systematic assessment, planning and training process involving local emergency managers, planners and consumer interest groups, geared toward ensuring that congregate emergency shelters meet criteria for universal accessibility, and that additional contingency plans are developed for people who need them; and,
2. a major outreach and education campaign aimed at encouraging senior citizens, people with disabilities, their families and those who work with them to understand local plans and capabilities, to realistically consider their individual needs and circumstances, and to make appropriate personal preparedness plans.

OPA, DEMHAS and DPH, as well as the Department of Social Services (DSS), the Department of Mental Health and Addiction Services (DMHAS), the Department of Mental Retardation (DMR), the UCONN Health Center's Center for Excellence in Developmental Disabilities and the American Red Cross will be working together to support both of these initiatives by developing materials, providing training, assisting with accessibility assessments, and identifying common resource needs. However, the success of these parallel initiatives, and, ultimately, the safety of people with disabilities and seniors depends on active participation by senior and disability interest groups in local preparedness efforts. It is in everyone's interest to make sure that local plans will meet peoples' real needs, and to develop working relationships with local emergency responders before a disaster unfolds. Our motto has long been: "NOTHING ABOUT US WITHOUT US". We are now being invited to the table, and it is time to step up and participate.

Please take a few minutes to complete the attached questionnaire and return it to me at the address indicated, or by email at [James.McGaughey@po.state.ct.us](mailto:James.McGaughey@po.state.ct.us) . The information you provide about contacts within your community and your recommendations will guide us as we plan these initiatives. In addition, please indicate whether you are interested in receiving periodic updates on emergency preparedness issues, or know of others in your community who should be involved in these initiatives.

Sincerely,



James D. McGaughey  
Executive Director

JDMc  
Enclosures

## Questionnaire

Please complete and return by November 17 to:

**Via Facsimile: 860-297-4305**

Name of Person preparing questionnaire: \_\_\_\_\_ Telephone: \_\_\_\_\_

1. Please describe your current organization's level of involvement with emergency/disaster preparedness planning in your community:

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2. If you are not currently involved with emergency planning in your community or region, would you be interested in becoming involved?

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3. Do you know of people or groups involved in disability or senior citizen issues in your community who might be interested in helping to advise on local preparedness plans? If so, please provide contact information:

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4. If you are involved in emergency preparedness planning in your community, or are interested in becoming involved, what types of information or support would you find useful?

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5. Would you be interested in obtaining training and networking with others who are interested in disability and senior citizen concerns in emergency/disaster preparedness?

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6. Do you know of any organizations or interest groups in your community that might be interested in hosting a presentation on personal preparedness planning for seniors and/or people with disabilities? If so, please provide contact information.

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7. Are you interested in receiving periodic updates on developments in emergency preparedness for people with disabilities and seniors, and if so, what is the best way to send them to you (e.g. list address, email address, etc.)

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**(Return Instructions on Reverse Side – thank you)**

**Mail in the enclosed envelope to:**

**James D. McGaughey, Executive Director  
Office of Protection and Advocacy  
for Persons with Disabilities  
60B Weston Street  
Hartford, CT 06120-1551**

**or**

**Fax to 860-297-4305**

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