Let’s Inclusively Plan: Some Stories, Mistakes and Advice

By Justin Sorg, Emergency Services Planner

“Inclusive planning” in emergency preparedness. Sounds like a good idea, so let’s talk about it. Along the way, I’d like to share some of my experiences with inclusive planning — specifically the challenges, benefits and rewards of including persons with disabilities and other access and functional needs into emergency planning efforts.

My name is Justin Sorg. I am an emergency services planner at the Mid-America Regional Council (MARC). MARC is a nonprofit association of city and county governments and the metropolitan planning organization for the bistate Kansas City region. I primarily support the region’s emergency management community through the development of regional planning initiatives such as mass care, mass fatality management and mass evacuation. I also support our regional Mental Health and Functional and Access Needs Subcommittee. More on that later.

So what is “inclusive planning”? In my opinion, it’s simply involving the right people with the right expertise and/or experience in the planning process to inform and validate a plan, whatever it may be. I don’t think this idea is anything special or new; but for a long time, in a lot of cases, and for a variety of reasons, the right people haven’t always been at the planning table. Often, persons with disabilities or other access and functional needs were the most under-represented in the planning process. My experiences in my position in the Kansas City region were no different. While the region has long recognized the benefits of collaborative planning and has successfully engaged disability advocacy groups and service provider organizations in past emergency preparedness planning initiatives, in general, we lacked actual representation from persons with disabilities in the community.

Following FEMA’s November 2010 release of Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters, we understood the need to refocus our planning efforts to ensure access and functional needs considerations were integrated into emergency plans. To help meet this need, we reformulated the existing, successful Mental Health Subcommittee of our Regional Homeland Security Coordinating Committee into a Mental Health and Functional and Access Needs Subcommittee. The mission of the Mental Health and Functional and Access Needs Subcommittee was to use the model framework of the Mental Health Subcommittee to:

1) Develop a network of subject matter experts, community organizations, advocacy groups, government agencies and individuals with mental health, functional and/or access needs to identify the challenges faced by those with mental health and functional and access needs during times of disaster or emergency.
2) Devise plans, procedures, guidelines and resources to overcome those challenges and ensure equal access to goods and services for the whole of the community.
3) Communicate those plans to emergency response professionals and the larger community.

The subcommittee’s first meeting was March 11, 2011. We had great representation from community organizations, advocacy groups and government agencies, but it wasn’t until October 2011 that we were able to identify persons with disabilities to participate. As it turns out, just because you put “access and functional needs” in the meeting title, doesn’t mean people with access and functional needs will just show up. You actually have to actively recruit them. We are lucky to have great partners in the states of Kansas and Missouri as well as FEMA Region 7 who were able to connect us both to agencies that
support persons with disabilities and to individuals with disabilities. Which brings me to my first tip for emergency planners: if you don’t already know them, get to know your local and state ADA coordinators and social service agencies. They are a huge resource. Also get to know your FEMA Regional Disability Integration Specialists. They can provide a lot of valuable guidance and direction.

At that October meeting, in addition to NGOs, service provider organizations and government agencies, we had commitments to attend from a range of participants with disabilities: some were blind, some were deaf and some used wheelchairs. *This is going to be real ‘whole community’ planning,* I thought to myself at the time, rather satisfied I’d helped orchestrate such a diverse committee. That feeling of self-satisfaction quickly faded when I received a quick and embarrassing lesson in accessibility. Though I did remember to get a sign language interpreter, I overlooked having Braille copies of the meeting materials made. It was something I’d never had to do before. Didn’t even cross my mind. And while I did arrange to have accessible transportation for the members who used wheelchairs, I didn’t realize the transport vehicles were taller than the entrance overhangs to our building. So, rather than getting dropped off in the rear of the building (where I should have directed them) they were dropped off on the sidewalk of a busy roadway during a blustery October afternoon. Before the meeting even began, I had unintentionally excluded those we had specifically tried to include. Fortunately for me, these members were more understanding than I would have been.

I don’t tell this story just to highlight my obvious poor planning skills, but really to underscore the value and necessity of inclusive planning. Just because I had never had to get something translated into Braille doesn’t mean there wouldn’t be that same need during or following a disaster. And just because I didn’t understand the limitations of accessible transportation doesn’t mean those same issues couldn’t negatively impact say, an evacuation, and should be accounted for pre-event. The real benefit of inclusive planning is perspective. The more ways a problem can be viewed, the more solutions can be divined. I consider myself pretty creative, but until that October day, I had no idea as to how something I found so routine, like going to a meeting, could present a challenge to someone else. This exemplifies the importance of including persons with disabilities and other access and functional needs into emergency planning.

It is equally important for persons with disabilities to want to be included in the emergency planning process. Everyone has unique circumstances and needs; unless those needs are expressed or observed it’s (1) difficult for someone not in those same circumstances to spontaneously identify needs and arrive at answers to meeting them; and (2) almost impossible to ensure any plan is properly reflective of those community needs. I’ll take the liberty to speak on behalf of all planners here: we love it when people are fully engaged in the planning process and offer their opinions, corrections and additions. We need input. Sure, we can sit in the corner and come up with a plan all by our lonesome, but why waste time drafting something not worth the paper it’s written on?

Which brings me to my second tip: Don’t be afraid to engage persons with disabilities in the planning process. Whenever I begin a new planning project, I always have two concerns: my credibility with the planning team and a lack of expertise on the topic. Prior to my current position, I had almost no exposure to working with people with disabilities. When asked to support the Mental Health and Functional and Access Needs Subcommittee, I’m not going to lie, I was nervous. I didn’t really know how to act around people with disabilities. I was afraid I might accidentally do or say something offensive. I wasn’t so much worried about political correctness, but more with actually hurting someone’s feelings. I really think this uncertainty is often a barrier to including persons with disabilities into emergency planning. Sometimes, when facing the unknown, it’s just easier not to face it. I can tell you from
experience, there’s nothing to fear. If people with disabilities show up to a meeting about integrating access and functional needs considerations into emergency planning, chances are they want to be part of the solution. If you give them the same basic respect and dignity everyone should be afforded, they’ll likely help you work through any uncertainty. As a friend with a disability once told me, “I accommodate you more than you accommodate me.”

Now is a good time for my tip 2(a): If you have a disability, don’t be afraid to get involved in the planning process. As planners, we’ve heard the message, “nothing about us, without us” and are certainly 100 percent in agreement. So now we need you. I know emergency planning is not the most exciting topic ever and across the board the American population in general doesn’t care a lot about preparedness. But, planning is a two-way process. A crop is only as good the seeds planted. In the early days of the Mental Health and Functional and Access Needs Subcommittee, we learned several of the committee members had incorrect or unrealistic expectations about the capabilities of local governments to meet their needs in disasters. Without input, there’s likewise a danger that local governments will make incorrect assumptions about the capabilities or needs of those with access or functional needs.

This is a good transition to my final tip: Once you establish an inclusive planning team, give them something meaningful to do. Nobody likes to meet just to meet and participants have to feel like they’re contributing something. What the Mental Health and Functional and Access Needs Subcommittee decided to work on was developing an Access and Functional Needs Emergency Resource Directory. The directory is intended to help emergency managers, emergency planners and first responders locate resources to assist persons with functional and access needs within the Kansas City region during times of emergencies or disaster. The unique thing about this resource directory is that it isn’t just a phonebook listing of companies and agencies. Subcommittee members directly contacted the majority of the listed agencies to inquire if and how they could support efforts during disasters; what their limitations are and if they would like to be connected to emergency preparedness efforts. It is a small piece in a larger effort to establish a network of community partners capable of fostering resiliency across the region. We recognize this is just a baby step; but we feel it’s important to continued progress and demonstrates the value of the subcommittee and contributions from its members.

I hope you’ve found this at least somewhat useful. I’m certainly no expert and am under no illusions we have all the answers here in the Kansas City region or that our work is done. Maintaining participation and enthusiasm will always be a struggle. If nothing else, at least you can learn from my mistakes. Happy planning.