Communication During THE Emergency: A Functional Approach

Sponsored by:
The Disability Emergency Planning Committee
A subgroup of the Washington County Department of Emergency Management
Welcome

• History of the Efforts
• Why we are Here
• Introductions of Speakers and Committee Members
Why we are here

- Create an opportunity to answer questions about ways to better help each other as we do training for people with functional needs and as you serve them in emergencies.

- Increase understanding for EMS and other emergency responders to improve their experiences of helping a person with functional needs.

- Provide quality information and experience in interacting with people who have functional limitations especially in the area of communication.
Who we are

• Getting to know the speakers and the committee members
  • Becky
  • Julie
  • Rocky
  • Jonna
  • Roberta
  • Bonnie
  • Other members present
Types of Emergencies/Disasters we might have in AR

- fire
- tornado
- flood
- earthquake
- winter weather
- lightning
- Pandemic Flu
WHERE HAVE WE BEEN?

We don’t think of people with disabilities like we used to. Things are changing!
Society’s view of People with Developmental Disabilities

- Helpless
- Fragile
- Needs protection
- At risk
- Dehumanized
- No value
- Asexual
Stereotypes or Labels
Self Advocacy = Empowerment

Self-advocacy is a movement. It is led by people with disabilities. This movement is based on a simple idea: individuals don’t have to change to fit society. Rather, society must change to treat everyone fairly.

The goal of self-advocacy is to reshape society. We want to bring basic civil rights and equality to all.

Advocating Change Together
People who are Deaf

- Consider themselves as a cultural group
- Deaf Culture does not identify being deaf as a disability – it’s just Deaf
Social Model versus Medical Model

• The Social Model views disability as a consequence of environmental, social and attitudinal barriers that prevent people with functional limitations from maximum participation in society.

• The Medical Model holds that disability results from an individual person’s physical or mental limitations, and is largely unconnected to the social or geographical environments.
How Many

Figure 2.

Percentage of the Civilian Noninstitutionalized Population With Any Disability by Age and Sex: 2000

(For more information on confidentiality protection, sampling error, nonsampling error, and definitions, see www.census.gov/prod/cen2000/doc/sf3.pdf)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
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<tr>
<td>5 to 15</td>
<td>7.2</td>
<td>4.3</td>
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<tr>
<td>16 to 64</td>
<td>19.6</td>
<td>17.6</td>
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<td>65 and older</td>
<td>40.4</td>
<td>43.0</td>
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Source: U.S. Census Bureau, Census 2000 Summary File 3.
United States and Arkansas

- US - According to the US Census of 2000, people with disabilities represent 19.3 percent of the 257.2 million people who were aged 5 and older in the civilian noninstitutionalized population or nearly one person in five. Fifty percent of people over age 65 have some form of disability.

- Arkansas – 22% according to BRFSS
Figure 3.
Percentage of the Civilian Noninstitutionalized Population With a Disability by Age and Type of Disability: 2000

(For more information on confidentiality protection, sampling error, nonsampling error, and definitions, see www.census.gov/prod/cen2000/doc/sf3.pdf)

Source: U.S. Census Bureau, Census 2000 Summary File 3.
Term “Special Needs”

- The term “special needs “doesn’t always work” because in emergency planning and response because it doesn’t provide the guidance to operationalize the tasks needed.

  June Isaacson Kailes, Disability Policy Consultant

- We still do see the term being used in emergency management – though the trend for the information is more geared towards the functional needs framework.
Combine A Common Framework

• It is important to understand the range of function based needs within the population with a disability.
  – This approach leads to a common framework which is function based and designed to improve resource management in any type of incident.
  – Provides a flexible framework, built on five essential function based needs: medical, communication, supervision, maintaining functional independence, and transportation.

• Addressing functional limitations includes;
  – both people who identify as having a disability,
  – and the larger range of people who do not identify as having a disability, but do have limitation in hearing, seeing, walking, learning, language, and understanding.
Combine Functional Needs Framework for Emergency Planning

- Communication
- Medical
- Independence
- Supervision
- Transportation
Goal of Emergency Management

• determine the nature and extent of the patient’s condition while trying to ascertain whether the patient has preexisting medical problems.
  – This can be complicated when communication is difficult
Communication Challenges for First Responders

• Three Areas creating challenges for communication for emergency responders

• The person examined must be able to
  – Input – Receiving
  – Process – Understanding
  – Output – Replying
Of course we also know ----

- The person may be unconscious – communication then is not as important.
- You may use others to get needed information.
- You know what to do from an emergency standpoint – there are protocols and steps.
- This training is not to change what you already know to do – it is to help familiarize you with some things you may see or that could be used to assist.
Technology

• For people without functional limitations – technology makes things easier.

• For people with functional limitations – technology makes things possible.
Stephen Hawking, physicist, person with ALS and AAC user

Stephen Hawking during the press conference at the National Library of France to inaugurate the Laboratory of Astronomy and Particles in Paris and the French release of his work *God created the integers*. 
Becoming Individually Prepared
Prepare Now - Communication

• Think through what a rescuer might need to know about you and be prepared to say it briefly, or keep a written copy with you:

I cannot read. I communicate using an augmentative communication device. I can point to simple pictures or key words which you will find in my wallet or emergency supply kit.

I may have difficulty understanding what you are telling me, please speak slowly and use simple language.

I forget easily. Please write down information for me.

• Developed and Distributed By: Independent Living Resource Center San Francisco
  http://www.prepärenow.org/cogdis.html
Application in EMS situations - Augmentative Communication Device

- “I have a severe pain in my stomach – it has been hurting for over a week.”

- *If at all possible – Let the person use the system that is familiar to them.*
Application in EMS situations – Point to Pictures

Medical Visual Language Translator
Point To Pictures
Communicate Instantly

Unfolded Size:
22.75” x 11”
(57.75 cm x 28 cm)

Ships folded:
3.75” x 5.5”
(9.5 cm x 14 cm)
Application in EMS situations –
Point to Pictures - Medical Cue Card
Application in EMS situations –
Speak slowly and Use Simple Language

• Simple language = an approach, style or method to communication that begins with the needs of the person you are speaking to, in order for the person to understand the information
Becoming Individually Prepared
Prepare Now - Communication

• Determine how you will communicate with emergency personnel: if there is no interpreter; if you do not have your hearing aid(s) or your assistive listening device. Store paper and pens.

• Consider carrying pre-printed copy of key phrase messages with you such as
  – 'I speak American Sign Language (ASL) and need an ASL interpreter,'
  – 'I do not write or read English.' "If you make announcements, I will need to have them written or signed."

• Developed and Distributed By: Independent Living Resource Center San Francisco
  http://www.preparenow.org/deaf.html
Application in EMS situations
Sign Language
Application in EMS situations

Assistive Listening Device

- Allows people who are hard of hearing to have amplification.
- Similar to the use of hearing aids.
- Eliminate background noise if at all possible.
Prepare Now - Communication

• Determine how you will communicate with emergency personnel if you do not have your communication devices (augmentative communication device, word board, artificial larynx).

• **Communication Aids**

• Store copies of a word or letter board, paper and writing materials, pre-printed messages and key phrases specific to an anticipated emergency, in all your emergency kits, your wallet, purse, etc.

• Developed and Distributed By: Independent Living Resource Center San Francisco
  http://www.preparenow.org/eqlcoms.html
Application in EMS situations
Word Board
Application in EMS situations – Letterboard

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<td>Bryan (brother)</td>
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<td>Nemo</td>
<td>Teddy</td>
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<td>Grandpa Thomas</td>
<td>Timothy</td>
<td>Sean</td>
<td>Jeff</td>
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<td>Mrs. Smith (my teacher)</td>
<td>Mrs. Jones (Teaching Assistant)</td>
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<td>Manuel</td>
<td>Sara</td>
<td>Nicky</td>
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- I'll try to spell
- I'll give you the first letter
- I'll give you a clue
- Let's start over
- Forget it!!
- Ask
- Get my Communication Book/device
- Bathroom
- Break
Walking the Walk

• An activity simulation of the experiences of people with communication and/or other functional limitations as they go through an emergency
Activity and Panel Discussion

- Feedback from Group – list on a flip chart
- Questions and Discussion with the panel.
In Summary

• See the person, not the disability.
  – Most importantly, understand that people with functional limitations (disabilities) know their own needs
  – Also understand that how we refer to people has a lot to do with how we treat them.
    • ACT 975 of 2009

• Thanks for your participation in the training and for the work you do everyday!!!!!!!!!!!!!!!