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Environmental Scan: Emergency Management Policies and Programs for People with Disabilities in Canada

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Table of Contents

About the MacEachen Institute

The [MacEachen Institute for Public Policy and Governance](#) at Dalhousie University is a nationally focused, non-partisan, interdisciplinary institute designed to support the development of progressive public policy and to encourage greater citizen engagement. Founded in 2015, the Institute is governed by four Dalhousie University faculties (Health, Law, Management, Arts and Social Sciences) and the Vice President (Research and Innovation). The Institute aims to serve as the place provincially, regionally and nationally for robust public policy debate, discussion and research. The Institute engages scholars, students and community members in the development of policy options and policy research. The Institute builds connections with the community, creates an impact with policy-focused research, and connects local issues to national discourse.

Opening Note

Given the time constraints around information collection for this project, it is understood that the report is not a comprehensive catalogue of all emergency measures for people with disabilities in Canada. The goal of this environmental scan is to begin to capture and understand the current environment – around current approaches, policies, procedures, programs, laws/by-laws, and best practices in emergency measures management for people with disabilities across Canada. This includes public safety events (e.g. natural disasters, flooding, fires, industrial accidents, acts of terrorism), public health events (e.g. viral disease outbreaks); and how current general emergency measures management plans integrate the needs and accessibility requirements of people with disabilities.

Definitions

"Access-based needs": The United States Department of Health and Human Services defines access-based needs as the resources all people must have access to "such as social services, accommodations, information, transportation, medications to maintain health, and so on."[1]

"Disaster Risk Reduction (DRR)": The United Nations Office for Disaster Risk Reduction (UNDRR) describes DRR as reducing disaster loss, preventing the emergence of new risk and building resiliency. This approach shifts the focus from disaster response to "risk-proofing the start of any development investment."[2]

"Disability": The *Accessible Canada Act* defines "disability" as "any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment — or a functional limitation — whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person's full and equal participation in society."[3]

"Emergency Management": The Canadian *Emergency Management Act* defines emergency management as "the prevention and mitigation of, preparedness for, response to and recovery from emergencies."[4]

"Functional Needs": The United States Department of Health and Human Services defines functional-based needs as "restrictions or limitations an individual may have that requires assistance before, during, and/or after a disaster or public health emergency".[5]

 "Inclusive Disaster Risk Reduction": Humanity & Inclusion (HI) uses the term Inclusive Disaster Risk Reduction (DRR). According to HI, Inclusive DRR works to reduce vulnerabilities of marginalized groups and increase their capabilities in recognition of their right to actively participate in DRR initiatives. Resiliency is enhanced by addressing vulnerabilities, increasing coping capacity and empowering members of the community.[6]

"Person-Centred Emergency Preparedness" (PCEP) - (PCEP) is defined as an approach to emergency preparedness that assesses the individual strengths of persons with disabilities and their support networks. This includes the strengths of persons with disabilities to self-assess their own needs and take targeted action to advocate for the supports they will need during an emergency.[7]

"Vulnerability": The Hyogo Framework for Action defines vulnerability as "the conditions determined by physical, social, economic and environmental factors or processes, which increase the susceptibility of a community to the impact of hazards."[8] The Sendai Framework also uses this definition.

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[1] United States Department of Health and Human Services. "At-risk individuals". 2019. Retrieved from: https://www.phe.gov/Preparedness/planning/abc/Pages/atrisk.aspx

[2] United Nations Office of Disaster Risk Reduction (UNDRR). "Our Work". March 2019. Retrieved from: https://www.undrr.org/about-undrr/our-work

[3] Government of Canada. "The Accessible Canada Act". 2019. Retrieved from: https://laws-lois.justice.gc.ca/eng/acts/A-0.6/page-1.html#h-1153395

[4] "Emergency Management Act". 2007. Retrieved from: https://laws-lois.justice.gc.ca/eng/acts/E-4.56/page-1.html#h-214338

[5] United States Department of Health and Human Services. "At-risk individuals". 2019.

[6] Lafrenière and Walbaum, 2017, p. 34

[7] Villeneuve, 2019, p. 16

[8] United Nations Office for Disaster Risk Reduction. "Sendai Framework for Disaster Risk Reduction", 2015. Retrieved from: https://www.undrr.org/, p. 10

Executive Summary

Sponsor and Purpose of the Study

This research project was sponsored by Employment and Social Development Canada (ESDC). The Canadian federal and provincial governments are committed to advancing accessibility in their respective jurisdictions. The purpose of this project was to scan Canadian federal, provincial and territorial jurisdictions for existing approaches, best practices, policies and procedures that exist at the intersection of persons with disabilities and emergency management.

This project is meant to be initial scanning work of policies and programs to support persons with disabilities during an emergency; it is not a comprehensive catalogue of all emergency measures for persons with disabilities in Canada.

Scope and Method: Federal, Provincial and International Jurisdictional Scan of Public Documents on Persons with Disabilities and Emergency Management

We use the *Accessible Canada Act* definition of "Disability" in this report. The Act defines "disability" as "any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment — or a functional limitation — whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person's full and equal participation in society."

This environmental scan includes: (1) a review of publicly available material in Canadian and selected international jurisdictions; and (2) the results of a survey we conducted of Canadian federal, provincial and territorial jurisdictions about their emergency management policies and programs.

Our review was conducted between September 2019 and March 2020. We examined relevant documents from Canada, Canadian provinces and territories, the United Kingdom, the United States, Europe, Australia and New Zealand. We also reviewed publicly available information from not-for-profit organizations (e.g. Red Cross).

For the purposes of the study, we used a cybernetic understanding of control, which examines a system's ability to gather information, set standards and change behaviour. We collected and analyzed data according to these three themes.

This report focuses on Federal and Provincial/Territorial programs; however, many relevant programs and policies lie within local authorities (e.g. municipal governments). Canada also has many diverse geographic and demographic contexts to consider, and this report only considers these when presented in jurisdictional documents. Persons with disabilities who reside in institutions are only discussed in the report when their specific circumstances were raised by jurisdictions.

Finally, most survey data were collected by the end of February 2020, approximately two weeks before COVID-19 was declared a global pandemic. Therefore, the study does not refer intentionally to challenges that emerged as a result of the global pandemic.

Context: Many people have disabilities; people with disabilities are diverse as are their networks and capabilities

According to the 2017 Canadian Survey on Disability (CSD), approximately one in five Canadians aged 15 years and over has at least one disability that impacts their day-to-day life.[9] Challenges and barriers can be compounded for persons with disabilities, as they can experience multiple forms of discrimination and disadvantage. Intersections of age, race, disability, gender, sexuality, indigeneity, immigration status and socio-economic status can accentuate the barriers a person may face.[10]

When considering emergency response, government encourages persons with disabilities to develop personal support networks. Persons with disabilities, however, face particular challenges when integrating with the general public that may hinder their capacity to develop support networks. Persons with disabilities may not be employed or enrolled in school, for example. It is also important to consider needs at the individual level, rather than treat persons with disabilities as a homogenous group.

Context: Emergencies increase uncertainty and put systems under enormous stress; vulnerable populations can become more vulnerable

There are several types of emergencies—fires, floods, natural disasters, chemical spills, disease outbreaks, violence, for example—and no emergency is exactly like the previous one. Emergencies occur in a legal, ethical, financial, public, environmental and institutional context; there can be time pressure, shifting conditions, unclear goals, degraded information and team interactions. They can involve a few people in one place, or millions spread out over countries.

Difficult questions about how to allocate limited resources come to the fore during emergencies. The physical and intellectual challenges and surprises that operational staff face can be trying, if not overwhelming. Public, private and not-for-profit sectors have improved emergency response over the last decades by adopting numerous policies and practices. Nevertheless, the strain exerted on a system during an unplanned event can make vulnerable people even more vulnerable as available resources become scarce and people's risk exposure increases.

Context: National and international commitments to improving support for persons with disabilities during emergencies already exist and continue to grow

Concern for persons with disabilities in emergency management has been growing nationally and internationally since the introduction of the United Nations Convention on the Rights for Persons with Disabilities. There is also agreement across several Western jurisdictions that the access and functional needs of persons with disabilities should be integrated within each stage of an emergency—planning, response and recovery. A functional needs approach is understood to enhance Disaster Risk Reduction, as well as individual and community resiliency.

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[9] Statistics Canada. "A demographic, employment and income profile of Canadians with disabilities aged 15 years and over, 2017". Canadian Disability Survey. November 2018. Retrieved from: https://www150.statcan.gc.ca/n1/pub/89-654-x/89-654-x2018002-eng.htm

[10] City for All Women Initiative (CAWI) and City of Ottawa. "People Living with Disability: Equity & Inclusion Lens Snapshot". 2017. Retrieved from: https://documents.ottawa.ca/sites/documents/files/disabil_ss_en.pdf, p. 3

Information is decentralized but not disaggregated

Given the complexity and time-sensitive nature of emergency response, information-sharing is crucial to success. There is no one central repository of information. In the past, some jurisdictions tried to compile databases of information for vulnerable persons, but these databases were challenging to maintain.

Although it is accepted that collecting disaggregated data by sex, age, gender and disability is good practice, it is implemented inconsistently.[11] The lack of collection and analysis of disaggregated disability data can mean that decision-makers are less motivated to design age-, gender- and disability-appropriate programs.[12]

Standards vary as do practices for developing and reporting on them

Many governments have implemented standards to outline accessibility of public programs and services. The *Accessible Canada Act* demonstrates the Federal Government's commitment to support persons with disabilities and remove barriers throughout society. Many provinces and territories across Canada have also implemented accessibility legislation that covers provincial and territorial jurisdiction.

With a variety of jurisdictions across the country, some variation is to be expected. However, it raises questions about fairness and creates challenges for coordinating across jurisdictions. Moreover, many jurisdictions directly include persons with disabilities when developing standards. This is considered best practice but not all jurisdictions do it. Finally, there is at times a dearth of performance data on how effectively public agencies serve persons with disabilities during emergencies. More performance metrics can help to strengthen accountability and benchmark performance and monitor progress over time.

Stigma is a challenge; focus on functional needs, not disabilities

Behaviour change often includes training and awareness programs. Many jurisdictions have implemented programs, and some have introduced Functional Needs Frameworks (FNF) to support inclusive and person-centred emergency preparedness.

While standards are a focus for many government organizations, the non-profit organizations often focus on addressing stigma and negative perceptions of persons with disabilities. They cite stigma as a key barrier preventing persons with disabilities from fully participating in emergency management initiatives.

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[11] IFRC, 2018, p. 100
[12] IFRC, 2018, p. 98

Areas for improvement, COVID-19 and further studies

Many organizations, particularly in the not-for-profit sector, have recommended areas in which government can improve performance with respect to persons with disabilities and emergency management. Many of these recommendations are outlined in the section that summarizes reports by the not-for-profit sector (Part D in this report).

The COVID-19 pandemic has called attention to support for persons with disabilities during an emergency. COVID-19 has demonstrated that emergencies like this one require a whole-of-society response that includes public, private and not-for-profit organizations, as well as the general public, particularly in circumstances that are changing rapidly.

Importantly, while there are many observations in this report that can help improve emergency management as it relates to pandemics, COVID-19 will almost certainly raise new issues and perspectives that were not captured by this report.

Part A

1. <u>Introduction</u>

There is a lack of understanding about the current state of emergency measures for people with disabilities. Persons with disabilities are often innovative and adaptive in their daily lives, and by centring persons with disabilities throughout each state of the emergency management process we can enhance the emergency preparedness and resiliency of our communities.

Reports following disaster events have emphasized the increased risk persons with disabilities often face. A study by the Office of the UN High Commissioner for Human Rights in 2015 indicates that persons with disabilities are disproportionately affected by disasters and can be four times as likely to die in a disaster event.[13] For example, in the 2011 earthquake in Japan, the mortality rate for persons with disabilities who had registered with the Government was twice as high as for the general population.[14] An international study by Humanity & Inclusion found that 75% of persons with disabilities feel excluded from humanitarian responses.[15]

The vulnerabilities of persons with disabilities are accentuated by the fact that persons with disabilities can be invisible (i.e., not seen) in emergency management systems. Persons with disabilities often face barriers to accessing information about disasters and consequences, there is insufficient inclusivity in current response efforts (e.g. evacuation, communications, assistive devices, emergency services, and accessible shelter and transportation), and they face increased risk of long-term consequences of distress caused by an emergency situation.[16] A global survey in 2013 with nearly 5,500 respondents across 126 countries further illuminated challenges that persons with disabilities face in emergency situations.[17] The survey findings indicate the following:[18]

- Only 20% of respondents would be able to evacuate without difficulty in a sudden event. This percentage increased to 38% if appropriate advance warning was provided.
- Only 31% of respondents have someone always around to help them evacuate and 13% assert that they never have anyone who can help them during an evacuation.
- Over 70% of respondents have no personal disaster preparedness plan, less than 20% are aware of a community disaster management plan and only 14% of those indicate being consulted on the plan. Half of the respondents indicate interest in participating in Disaster Risk Reduction (DRR) initiatives.

Disaster risk reduction occurs in a legal, economic, demographic, public, environmental and institutional context. These various contexts influence how organizations interpret and respond to risk, which is exacerbated by the amount of knowledge an organization has about a risk. The

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[13] International Federation of Red Cross and Red Crescent Societies (IFRC). "Left out of the Loop." World Disasters Report, 2018. https://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2018/10/C-04-WDR-2018-4-loop.pdf , pp. 92-93

[14] Lafrenière and Walbaum, 2017, p. 33

[15] Lafrenière and Walbaum, 2017, p. 33

[16] Lafrenière and Walbaum, 2017, p. 34

[17] Lafrenière and Walbaum, 2017, p. 33

[18] Lafrenière and Walbaum, 2017, pp. 33-34

importance of knowledge in reducing risks emphasizes the need for data specifically related to emergency preparedness and persons with disabilities to develop services and programs.

During an emergency, resources are constrained and persons with disabilities can be some of the most vulnerable. In addition to equipping persons with disabilities with information and resources to support themselves in an emergency, it is imperative that all organizations involved in emergency management have the knowledge, skills and resources to support persons with disabilities. There are often various levels of government and external organizations involved in emergency management, and diverse jurisdictions possess their own contextual differences that necessitate specific approaches. Therefore, it is important to ensure that considerations for persons with disabilities become integrated in emergency management practices by understanding the specific policy contexts and determined best practices.

To understand our ability to control an emergency response, we need to understand the three elements of a control mechanism: gathering information, setting standards and changing behaviour. By applying these elements of cybernetic control of a system to emergency management practices with respect to persons with disabilities, we can analyze the influence of these control mechanisms on achieving desired outcomes. Here, we use control to refer to the ability to maintain a system in a desired state, and if any of the three components – information gathering, standard setting and behaviour modification – is absent then "a system is not under control in a cybernetic sense" .[19]

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[19] Quigley, Kevin, Bisset, Ben, and Mills, Bryan. *Too Critical To Fail: How Canada Manages Threats to Critical Infrastructure.* 2017.

1.1. Summary of Demographic Information Regarding Persons with Disabilities in Canada

Understanding the demographic trends of the population of Canadians with disabilities is vital to identifying approaches to support these persons in emergency situations. Knowledge of where they are located, the types and severity of their needs and how best to support them through emergency situations will define whether emergency management processes are successful, viable and inclusive.

According to the 2017 Canadian Survey on Disability (CSD), approximately one in five Canadians aged 15 years and over has at least one disability that impacts their day-to-day lives.[20] The CSD acts as the primary source of data for Canadians with disabilities. The CSD defines person with a disability as someone who reports being "sometimes," "often" or "always" limited in their daily activities due to a long-term condition.[21] The survey population included Canadians aged 15 years and over as of the 2016 Census of Population (May 10, 2016) and living in private homes. It is important to note that the survey did not include data from persons living in collective dwellings such as institutions, Canadian Armed Force bases or First Nations reserves.[22] The lack of data regarding the prevalence of disabilities on First Nations reserves is an important consideration because this population reports disabilities at nearly twice the rate of all Canadians – including rates of disabilities for children.[23,24] The populations not included in the CSD are also important to consider in emergency management.

According to the 2017 CSD, the six provinces/territories reporting the highest overall proportions of persons with disabilities are Nova Scotia, New Brunswick, Prince Edward Island, Yukon, Manitoba and British Columbia.[25] **Table 1-1-A** shows the results of the 2017 CSD categorized by province and age group.

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[20] Statistics Canada. "A demographic, employment and income profile of Canadians with disabilities aged 15 years and over, 2017". Canadian Disability Survey. November 2018. Retrieved from: https://www150.statcan.gc.ca/n1/pub/89-654-x/89-654-x2018002-eng.htm

[21] Statistics Canada, 2017

[22] Statistics Canada, 2017

[23] Enarson and Walsh, 2007, p. 46

[24] Assembly of First Nations. "First Nations and First Nations Persons with Disabilities Engagement on Federal Accessibility Legislation March 2017 Report (Draft)". March 2017. Retrieved from: https://www.afn.ca/first-nations-persons-disabilities-first-nations-engagement-federal-accessibility-legislation/, p. A5)

[25] Statistics Canada. Table 13-10-0374-01 "Persons with and without disabilities aged 15 years and over, by age group and sex, Canada, provinces and territories". 2019.

Table 1-1-A: Results of the 2017 Canadian Survey on Disability by Province/Territory and Age Group[26]

	Overall %	15-64	15-24	65+
Canada	22.3	18.8	13.1	37.8
Nova Scotia	30.4	27.3	21.1	41.3
New Brunswick	26.7	23.0	17.5	39.8
Prince Edward Island	26.0	22.8	15.7	37.7
Yukon	25.2	22.6	14.1	41.9
Manitoba	24.8	20.6	13.1	43.9
British Columbia	24.7	20.5	13.4	41.7
Saskatchewan	24.3	20.6	14.1	41.1
Ontario	24.1	19.8	13.6	43.1
Newfoundland	23.6	21.4	16.4	32.2
Alberta	21.7	18.6	13.6	41.0
Northwest Territories	20.0	17.9	8.8	40.7
Nunavut	18.2	16.5	9.5	44.4
Quebec	16.1	14.0	10.4	32.8

Challenges and barriers can also be compounded for persons with disabilities, as they can experience multiple forms of discrimination and disadvantage. Intersections of age, race, disability, gender, sexuality, indigeneity, immigration status and socio-economic status can accentuate the barriers a person may face.[27] In addition, those reporting a disability often have more than one. Of those who reported a disability in the CSD, 29% had one type of disability, 38% had two or three disabilities and 33% had four or more.[28]

Given the importance of personal support networks, it is key for governments to understand the challenges persons with disabilities face when integrating with the general public and the impact on their capacity to develop support networks, such as likelihood of unemployment or not being in school, and the subsequent lack of access to those potential support networks. Moreover, statistical trends show that the likelihood of possessing a disability increases with age and considering that, overall, Canada has an aging population, there will likely be a growing number of persons with disabilities. This, in conjunction with the increasing rate and severity of natural disasters, will likely mean greater numbers of people left vulnerable to disaster events.

Finally, culture change is necessary to alter attitudes and perceptions towards persons with disabilities and can itself be a barrier to participation, as the view of disability as a deficiency is a "deep attitudinal barrier" throughout general society that has shaped infrastructure, policies and practices.[29] Persons with disabilities should lead the development of policies and programs that impact them, which can also work to advance changes in culture and attitudes towards persons with disabilities.

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[26] Statistics Canada. Table 13-10-0374-01 "Persons with and without disabilities aged 15 years and over, by age group and sex, Canada, provinces and territories", 2019

[27] City for All Women Initiative (CAWI) and City of Ottawa. "People Living with Disability: Equity & Inclusion Lens Snapshot". 2017. Retrieved from: https://documents.ottawa.ca/sites/documents/files/disabil_ss_en.pdf, p. 3

[28] Statistics Canada, 2017

[29] CAWI and City of Ottawa, 2017, p. 7

2. **Methodology**

To create a report that accurately reflects the actions taken by the Federal and Provincial/Territorial Governments to serve persons with disabilities during an emergency, the environmental scan includes: (1) a review and analysis of publicly available material and (2) a survey of each Canadian province and territory about its emergency management policies and programs. We reviewed publicly available material for legislation, policies, procedures and best practices to support persons with disabilities during emergencies. Publicly available material from the United Kingdom, United States, Europe, Australia and New Zealand has been reviewed and summarized to provide additional insight into best practices.

For each of the jurisdictions, the web content of every relevant emergency management organization was reviewed for policies, procedures, guidelines, resources, programs and relevant legislation (e.g. *Emergency Measures Act* and comparable legislation) relating to serving persons with disabilities during emergencies. Publicly available information and material from not-for-profit organizations (e.g. Red Cross), specifically those serving persons with disabilities, was also reviewed. Additionally, submissions to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) were reviewed. These submissions detail actions taken by the Federal and Provincial/Territorial Governments with respect to implementation of the UNCRPD, including Article 11 that encourages States Parties to take all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including armed conflict, humanitarian emergencies and natural disasters.

We developed a survey informed by findings from the review of publicly available materials. Survey questions centred on the themes of cybernetic control – information gathering, standard setting and behaviour modification – and frame our discussion and analysis of results. Questions were focused on the facts, or details, about programs and policies in place that are relevant to supporting persons with disabilities during emergencies. Questions were not designed to collect opinion-based responses about the effectiveness of a given program or policy, but to gather facts regarding relevant programs and policies. The survey was then distributed by Employment and Social Development Canada (ESDC) to departments in the Federal and Provincial/Territorial Governments. In addition to the survey, respondents were asked to provide feedback on the literature review information collected to that point. The literature review information in this report reflects that feedback.

There are limits to the data collected. This project is meant to be an initial scan of policies and programs to support persons with disabilities during an emergency. The scope is primarily high level and focuses on Federal and Provincial/Territorial programs; however, many relevant programs and policies lie within local authorities (e.g. municipal governments). The needs of persons with disabilities in institutions (e.g. seniors' residences) are also important to outline, as well as the needs of persons with disabilities within the community. In this report, persons with disabilities in the institutional context are only discussed in the report when indicated by a specific jurisdiction (e.g. roles of health departments and roles for institutionalized populations during an emergency). Survey responses were not collected from all jurisdictions for several reasons, primarily limits on jurisdictional capacities resulting from emergencies, the most significant being the outbreak of Coronavirus (COVID-19). Canada also has many diverse geographic contexts to consider, and this report only considers these when presented in

jurisdictional documents. Intersections of age, race, indigeneity, gender, disability, ethnicity, primary language and other social factors also influence the necessary support to persons with disabilities in emergency situations. These are mentioned when raised in jurisdictional information, however, they not thoroughly discussed in the report. These are vital considerations, especially as the rates of disability are higher for First Nations, Inuit and Métis populations.

3. Discussion of Results

3.1. Information Gathering: Decentralized but Not Disaggregated

Disaster risk reduction (DRR) occurs in a legal, economic, demographic, public, environmental and institutional context. These various contexts influence how organizations gather, interpret and respond to risk. The importance of knowledge to reduce risks emphasizes the need for data to develop services and programs specifically related to emergency preparedness and persons with disabilities.

Information is not centralized but is often shared by departments that provide services to persons with disabilities. Additionally, some jurisdictions source information from utility companies that have indicated special power needs (e.g. to power ventilators and other assistive equipment). In the past, some jurisdictions have tried to compile databases of information for vulnerable persons, but these databases were challenging to maintain. Information-sharing between departments and service agencies is key, especially as many jurisdictions prioritize information at the local and community level. This is especially important when considering policies to ensure that persons with disabilities can live in the community. The dispersal of persons with disabilities is an important consideration when gathering information.

Representation of persons with disabilities and related organizations within emergency management committees and organizations is also important to consider. The research emphasizes that persons with disabilities should lead and be centered in DRR initiatives. Across jurisdictions, there were mechanisms to engage persons with disabilities and related organizations, however, there were only a few examples of direct representation for persons with disabilities in the emergency management context (e.g., Manitoba Disability Emergency Management Network).

The complexity of the emergency management field can cause challenges relating to information-sharing. As there are many actors across government departments, levels of government and external organizations involved in emergency planning, response and recovery. This complexity means that effective information-sharing is especially important.

Some jurisdictions have implemented *MedicAlert Connect Protect* to support emergency services. This external service allows individuals to sign up and create profiles detailing their needs, and emergency services can access this information.

Currently, there are efforts by the Federal Government to integrate statistical and spatial information (geography) to map known vulnerable areas. This information has been used to support provincial/territorial emergency response efforts.

Globally speaking, the lack of effective data collection and analysis is a large factor in the exclusion of persons with disabilities from planning for emergency situations, as programs cannot be appropriately tailored to meet the needs of specific groups when there is insufficient data.[30] Moreover, in an emergency situation, situational information is key to effective response

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[30] International Federation of Red Cross and Red Crescent Societies (IFRC). "Left out of the Loop." World Disasters Report, 2018. https://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2018/10/C-04-WDR-2018-4-loop.pdf, p. 98

actions.[31] The lack of collection and analysis of disaggregated disability data means that decision-makers are less incentivized to design age- and disability-appropriate programs, and are therefore less accountable for integrating the needs of vulnerable populations into emergency risk responses.[32]

While it is accepted that collecting disaggregated data by sex, age, gender and disability is good practice, it is often implemented inconsistently .[33] It is important to recognize the intersectionality of identities, and how factors such as age, sex, gender and disability can compound an individual's experience of oppression and use disaggregated data to establish a more holistic understanding of the needs of a specific community.[34] Furthermore, it is important not only to consider the needs of persons with disabilities in programs, but also to identify opportunities to leverage their unique position within their families and communities.[35]

Humanity & Inclusion identified steps that can be taken to address data collection and sharing between organizations. These include conducting Inclusive vulnerability and capacity assessment (VCA) at the household, community and institutional levels and sharing these results.[36] This further emphasizes the importance of information-gathering (both method and types of data collected) and information-sharing that has been prevalent in best practices regarding emergency management and persons with disabilities.[37]

3.2. Standard Setting: Standards Vary as Do Practices for Developing and Reporting on Them

It is common for many of the observed jurisdictions to have standards for access to public programs and services by persons with disabilities. Many of the international jurisdictions observed have implemented accessibility legislation and disability strategy frameworks.

There are also many standards in place at the Federal and Provincial/Territorial level to ensure full access for persons with disabilities in public programs and services. All provinces and territories have implemented human rights legislation.[38] Many jurisdictions have also implemented their own accessibility legislation. Some jurisdictions (e.g. Ontario and Manitoba) also have accessibility requirements that apply to the private and non-profit sectors.

Many jurisdictions have a Disability Office or comparable organization that provides advice on government programs and services, often including emergency management. Manitoba has implemented a Disability Emergency Management Network (DEM-Net) that includes representation of the provincial Disabilities Issues Office, community disability organizations and

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[31] IFRC, 2018, p. 98

[32] IFRC, 2018, p. 98

[33] IFRC, 2018, p.100

[34] IFRC, 2018, p.100

[35] IFRC, 2018, p.101

[36] Lafrenière and Walbaum, 2017, p. 62

[37] Lafrenière and Walbaum, 2017, p. 62

[38] McColl, Mary Ann; Jaiswal, Atul; Jones, Shannon; Roberts, Lynn; Murphy, Caitlin. "A Review of Disability Policy in Canada, Third Edition". Canadian Disability Policy Alliance. December 2017. Retrieved from: http://www.disabilitypolicyalliance.ca/wp-content/uploads/2018/01/A-Review-of-Disability-Policy-in-Canada-3rd-edition-Final-1-1.pdf

emergency responders.[39] DEM-Net was founded to build connections between emergency managers and the disability community. Some of the tasks include developing training, creating resources and ensuring that needs of persons with disabilities are addressed in all emergency planning.[40]

Several Canadian provinces and territories have published their own emergency preparedness guides for persons with disabilities and special needs, or at least they share the Federal Emergency Preparedness Guides for Persons with Special Needs. Many emergency preparedness standards centre on the need for individuals to be able to care for themselves for 72 hours. The provincial/territorial emergency preparedness guides often include recommendations for specific actions relating to contextual considerations (e.g. considerations of geographical and social contexts).

Many jurisdictions have agreements with private and non-profit organizations to support emergency response efforts. These agreements are often outlined in a contract, memorandum of understanding or letter of undertaking. These agreements often state that the needs of all persons are expected to be met, including access needs for persons with disabilities.

There are jurisdictional challenges with implementing consistent standards, as there are many levels of government involved in emergency response, starting with local governments and going to the federal level when necessary. This can impact the degree of coordination during an emergency response. The standards in place are often enforced through human rights complaints or reporting processes. Many jurisdictions participate in after-the-fact reporting exercises where the public can provide feedback about the emergency response. The publication of after-the-fact reports and "progress reports" are also not uniform across the provinces and territories and is an area that can be improved to further ensure accountability, as well as inform future changes to policies and programs.

3.3.   Behaviour Modification: Stigma is A Challenge; Focus on Functional Needs, not Disabilities

Behaviour modification often takes the form of educational and awareness initiatives, as well as training programs. This area is the most challenging to address, as stigma towards persons with disabilities is a prevalent issue and deeply engrained in society. Societal perspectives of persons with disabilities too often focus on impairment instead of the person.

The Minister's Foreword of the NWT Disability Strategic Framework emphasizes that attitudes towards persons with disabilities can create more barriers than a disability. [41] Many non-profit agencies serving persons with disabilities during emergencies identify stigma and attitudinal barriers as key challenges to address. The title and mission of the New Zealand Disability Strategy, *Towards a non-disabling New Zealand,* also reinforces that the focus should be on the

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[39] Convention on the Rights of Persons with Disabilities, 2014, p. 38

[40] Independent Living Resource Centre. "Disaster and Emergency Management Network, Manitoba (DEM-Net)". 2019. Retrieved: https://www.ilrc.mb.ca/projects/demnet/

[41] Government of the Northwest Territories. "Equity, Accessibility, Inclusion and Participation - NWT Disability Strategic Framework: 2017 to 2027". December 2017. Retrieved from: https://www.ntassembly.ca/tabled-documents/equity-accessibility-inclusion-and-participation-nwt-disability-strategic-framework, p. iii

elimination of barriers that prevent equal access and participation rather than focusing on the specific disability.[42] Particularly in the emergency management context, persons with disabilities are stigmatized as liabilities whereas they should be valued for their innovation, resilience, adaptive capacity and knowledge to address vulnerabilities and enhance community resiliency.

Globally, there has been a shift towards international frameworks (e.g. Sendai Framework) that emphasize person-centred approaches to emergency management where disabilities lead, and are central to, emergency management initiatives founded on principles of universal design. These principles are captured in national emergency management frameworks, including the Federal Government's *Emergency Management Strategy for Canada – Towards a Resilient 2030.*[43] Additionally, Humanity & Inclusion (HI) uses the term "Inclusive Disaster Risk Reduction (DRR)", which works to reduce vulnerabilities of marginalized groups and increase their capabilities in recognition of their right to actively participate in DRR initiatives. Resiliency can be enhanced by addressing vulnerabilities, increasing coping capacity and empowering members of the community.[44]

Functional needs assessment approaches also demonstrate changes in perceptions of disability, as these approaches shift away from an impairment focus to a needs focus. Instead of centring preparedness on a specific impairment, functional needs assessments are used to identify the access needs to address. This ensures that the needs are the focus, not the specific disability. In particular, the Partnership for Inclusive Disaster Strategies,[45] Government of British Columbia (i.e. the British Columbia Emergency Management Organization),[46] and Disability Alliance British Columbia[47] all advocate for the importance of FNFs.

Training is also a key element of behaviour modification. All jurisdictions offer some emergency management training or support the coordination of such training. Often staff and volunteers that support emergency social services, run emergency health services and operate emergency shelters receive specific training to support persons with disabilities. There are also training options designated for local authorities to support emergency preparedness at the local level.

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[42] Ministry of Social Development. "New Zealand Disability Strategy 2016–2026". November 2016. Retrieved from: https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/read-the-new-disability-strategy/

[43] Public Safety Canada. "Emergency Management Strategy for Canada – Toward a Resilient 2030". 2019. Retrieved from: https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/mrgncy-mngmnt-strtgy/mrgncy-mngmnt-strtgy-en.pdf, p.9

[44] Lafrenière and Walbaum, 2017, p. 34

[45] Partnership for Inclusive Disaster Strategies, 2017

[46] Disability Alliance BC, 2016, p. 5

[47] Martin, 2009, pp. 6-8

Part B

3. Canadian Policy Context

3.4. Federal Level

Canada has demonstrated a commitment to safeguard the rights of persons with disabilities to support their full participation in society. Legislation to support this exists at each level of government – in Canada's Constitution, in federal, provincial and territorial (F-P/T) human rights legislation, codes and guidelines, and in specific areas relating to social services and employment.[48] The *Accessible Canada Act* defines "disability" as "any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment – or a functional limitation – whether permanent, temporary or episodic in nature, or evident or not, that, in interaction with a barrier, hinders a person's full and equal participation in society."[49]

At the federal level, there are many laws, strategies, policies, and voluntary codes of practice to ensure federally regulated entities are accessible to persons with disabilities. These include federally regulated transportation (air, rail, marine, interprovincial buses), banking and telecommunications services.[50] The *Canadian Charter of Rights and Freedoms* (the *Charter*) supports the rights of persons with disabilities to access information and services on an equal basis to Canadians without disabilities, including their right to access information and determine a place of residence.[51] Section 15 of the *Charter* provides equal protection under the law for all citizens, and outlines specific protections for marginalized groups such as persons with disabilities.[52]

The *Accessible Canada Act,* which came into force on July 11, 2019, benefits all Canadians by helping to create a barrier-free Canada through the proactive identification, removal and prevention of barriers to accessibility wherever Canadians interact with areas under federal jurisdiction. The *Act* provides for the development of accessibility standards in partnership with stakeholders, particularly persons with disabilities, to create new accessibility regulations that will apply to sectors under federal jurisdiction.[53] Additionally, the *Canadian Human Rights Act* provides protected ground against discrimination due to personal characteristics, such as disability. This *Act* also requires federally regulated private sectors (e.g. telecommunications, banks) to offer services that are accessible to all users.[54] In some cases, advisory groups have

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[48] Convention on the Rights of Persons with Disabilities. "First Report of Canada". Government of Canada. 2014. Retrieved from: http://www.ccdonline.ca/media/international/Convention%20on%20the%20Rights%20of%20Persons%20with%20Disabilities%20-%20First%20Report%20of%20Canada.pdf, p. 1 & p. 9

[49] Government of Canada. "The Accessible Canada Act". 2019. Retrieved from: https://laws-lois.justice.gc.ca/eng/acts/A-0.6/page-1.html#h-1153395

[50] Convention on the Rights of Persons with Disabilities, 2014, p. 10

[51] Convention on the Rights of Persons with Disabilities, 2014, pp. 13-14

[52] Essential Accessibility. "An Overview of Canada's Accessibility Laws: A Look at the Old and the New". June 2019. Retrieved from: https://www.essentialaccessibility.com/blog/canadian-accessibility-laws/

[53] Employment and Social Development Canada. "Making an accessible Canada for persons with disabilities". December 2019. Retrieved from: https://www.canada.ca/en/employment-social-development/programs/accessible-people-disabilities.html

[54] Essential Accessibility, 2019

informed government policies and services to better meet the needs of those with disabilities, including the Canada Transportation Agency's Advisory Committee on Accessible Transportation.[55]

The Government of Canada takes many approaches to meet the accessibility needs of persons with disabilities, particularly with respect to access to accessible information. For example, the Government ensures that published information is available in a variety of formats (e.g. braille, large print, audio recording) upon request and that digitally published information adheres to the Web Content Accessibility Guidelines (WCAG 2.0).[56] Moreover, the Canadian Radio-television and Telecommunications Commission (CRTC) requires wireless service providers to offer at least one accessible mobile handset and support text messaging for emergency communications services. [57] This helps to ensure that all Canadians, including those with disabilities, have access to the information they need to stay safe.[58] In addition, the CRTC requires all broadcasters to offer described video and captions on all of their programming and adhere to quality standards.[59]

Indigenous Services Canada (ISC) works collaboratively with partners "to improve access to high quality services for First Nations, Inuit and Métis with a vision to empower Indigenous peoples to independently deliver services and address the socio-economic conditions in their communities, including emergency services.[60] The activities of ISC are primarily guided by the departmental plan. During an emergency, ISC works closely with the First Nations and Inuit Health Branch (FNIHB), particularly regarding information-sharing. The FNIHB identifies the highest priority individuals to ensure response activities will meet the given needs. The FNIHB's Primary Health Care Authority, especially, provides support during health-related emergencies, including the provision of emergency social services. Moreover, the FNIHB is responsible for ensuring that accessible transportation and shelter options are available.

ISC provides funding to address the accessibility of shelter facilities. Emergency service providers, such as the Canadian Red Cross and the International Federation of Red Cross and Red Crescent Societies, help ensure that evacuation facilities are appropriate for all evacuees, including accessibility of facilities to cook, bathe and use toilets. The accessibility of shelter facilities can be assured by formal agreements (e.g. service agreement, MOU) or through an informal agreement that outlines roles and responsibilities.

To assist in developing effective initiatives, both the Government of Canada and Provincial/Territorial Governments produce statistical reports on persons with disabilities.[61] Statistics Canada uses statistical and spatial (geographic) information to map vulnerable areas using many data points and vulnerability indexes (e.g. age, disability, income). At the national

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[55] Convention on the Rights of Persons with Disabilities, 2014, p. 5

[56] Convention on the Rights of Persons with Disabilities, 2014, p. 13

[57] Canadian Radio-television and Telecommunications Commission (CRTC). "Accessibility of telecommunications and broadcasting services, Broadcasting and Telecom Regulatory Policy CRTC 2009-430", July 21, 2009. Retrieved from: https://crtc.gc.ca/eng/archive/2009/2009-430.htm

[58] Canadian Radio-television and Telecommunications Commission (CRTC). "Implementation of the National Public Alerting System by wireless service providers to protect Canadians, Telecom Regulatory Policy CRTC 2017-91", April 6, 2017. Retrieved from: https://crtc.gc.ca/eng/archive/2017/2017-91.htm

[59] Convention on the Rights of Persons with Disabilities, 2014, p. 11

[60] Government of Canada. "Indigenous Services Canada." March 2020. Retrieved from: https://www.canada.ca/en/indigenous-services-canada.html

[61] Convention on the Rights of Persons with Disabilities, 2014, p. 8

level, the Canadian Survey on Disability is the primary source of information on Canadians aged 15 and over with disabilities.[62]

Gender-based Analysis Plus (GBA+) is an analytical process to assess how diverse groups of individuals (e.g. women, men, non-binary people) may experience policies, programs and initiatives. Its mandate is to develop new policies and programs within the Federal Government. GBA+ acknowledges that many social factors (e.g. race, ethnicity, religion, age, mental and physical availability) influence, and potentially intersect with, an individual's experience of a policy or program. GBA+ helps assess and identify vulnerable populations, such as persons with disabilities, as "priority one" individuals. The Government has renewed its commitment to GBA+ and is strengthening implementation throughout all Federal departments, as emphasized in the Action Plan on GBA+ (2016–2020).[63] All Federal departments are mandated to use GBA+ when accessing policies and programs.

3.4.1. Summary of *An Emergency Management Framework for Canada – Third Edition*

At the federal level, *An Emergency Management Framework for Canada – Third Edition* (May 2017), is a key policy document on emergency management. While it does not specifically address vulnerable populations, the document speaks broadly to vulnerabilities in society. For example, in the glossary, the term "disaster" references "a vulnerable community",[64] which includes persons with disabilities. In relation to informing the public about an emergency, the Framework addresses the need for clear communications in stating "public alerting communicates warning messages that a disaster is imminent and provides the public with recommended actions to manage an emergency."[65] This includes public alerts and options for alternative forms of emergency alert.

Considerations for persons with disabilities in emergency management have been a focus for the Government of Canada. This commitment is demonstrated through the whole-of-society approach to emergency management highlighted in the *Emergency Management Strategy for Canada – Toward a Resilient 2030*.[66] The Strategy highlights the importance of collaboration between F-P/T governments and other partners, such as municipalities, Indigenous peoples, non-profit organizations, the private sector, critical infrastructure owners and academics.[67] The Strategy emphasizes that emergency first responders are under the jurisdiction of local or P/T governments, and thus informed by each jurisdiction's context and capacity.[68] The Strategy recommends that governments reduce risks by decreasing the vulnerability of people and property, while recognizing that variables such as age, race, gender, disability and socio-

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[62] Statistics Canada, 2017

[63] Status of Women. "Action Plan on Gender-based Analysis (2016-2020)." May 12, 2016. Retrieved from: https://cfc-swc.gc.ca/gba-acs/plan-action-2016-en.html

[64] Public Safety Canada. "An Emergency Management Framework for Canada-Third Edition". 2017. Retrieved from: https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/2017-mrgnc-mngmnt-frmwrk/index-en.aspx, p. 21

[65] Public Safety Canada, 2017, p. 12

[66] Public Safety Canada. "Emergency Management Strategy for Canada – Toward a Resilient 2030". 2019. Retrieved from: https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/mrgncy-mngmnt-strtgy/mrgncy-mngmnt-strtgy-en.pdf, p. 9

[67] Public Safety Canada, 2019, p. 2

[68] Public Safety Canada, 2019, p. 2

economic status can intersect and accentuate the vulnerabilities of specific populations. This recognition is key to building resilient communities.[69,70]The Strategy advocates a whole-of-society approach to emergency management; its first priority is that governments at all levels should include more diverse voices at both the operational and decision-making levels of emergency management processes.[71] This collaborative approach is effective in engaging more partners in emergency management processes, as well as ensuring that the set processes reflect the diverse needs of all people.[72] In addition, the commitment to include persons with disabilities in emergency management processes is emphasized through federal support of research and development projects (e.g. a project with the Neil Squire Society to increase awareness of accessibility issues relating to emergency services that are delivered through mobile devices).[73]

3.4.2. Summary of Canada's Emergency Preparedness Guide for People with Disabilities and Special Needs

The Government of Canada encourages citizens to prepare and take care of themselves for the first 72 hours of an emergency.[74] Therefore, it is important that communities throughout the country are as resilient as possible. While disasters can impact everyone, persons with disabilities often face more challenges in emergency situations, such as a reliance on electricity, and having accessible transportation and methods of communication. The *Emergency Preparedness Guide for People with Disabilities and Special Needs* is meant to support persons with disabilities and their caregivers in preparing for emergency situations.

The Guide is based on the Government of Ontario's *Emergency Preparedness Guide for People with Disabilities/Special Needs.*[75] The Public Safety Canada version is a collaborative effort between Employment and Social Development Canada, Public Health Agency of Canada, Canadian Red Cross, St. John Ambulance, Salvation Army and the Government of Ontario.[76] The Guide includes checklists for emergency kits, including one for service animals, tips for persons with disabilities and for caregivers in an emergency, and a personal assessment.[77] The personal assessment form encourages persons with disabilities to identify their functional abilities.[78] This information is used to support emergency first responders in providing effective assistance.[79] Using the form, persons with disabilities can indicate their functional abilities (e.g. sight, hearing, mobility, ability to care for oneself), as well as any special needs or other specific supports they require.[80] The checklist templates include sections to list prescriptions and contact

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[69] Public Safety Canada, 2019, p. 3
[70] Public Safety Canada, 2019, p. 7
[71] Public Safety Canada, 2019, p. 10
[72] Public Safety Canada, 2019, p. 10
[73] Convention on the Rights of Persons with Disabilities, 2014, p. 4
[74] Public Safety Canada. "Emergency preparedness guide for people with disabilities and special needs". 2010. Retrieved from: https://www.getprepared.gc.ca/cnt/rsrcs/pblctns/pplwthdsblts/index-en.aspx, p. 4
[75] Public Safety Canada, 2010, p. 2
[76] Public Safety Canada, 2010, p. 2
[77] Public Safety Canada, 2010, pp. 7-11
[78] Public Safety Canada, 2010, p. 26
[79] Public Safety Canada, 2010, p. 26
[80] Public Safety Canada, 2010, p. 25

information for doctors and members of their personal support network.[81] The guide includes specific emergency preparedness information and considerations for various types of disabilities, including mobility, non-visible disabilities (e.g. communication, cognitive, mental health, allergies, epilepsy, diabetes, heart disease), hearing, vision, seniors with special needs, and persons with disabilities residing in high-rise buildings.[82] Recommendations include labelling instructions for assistive devices, preparing emergency plans to account for functional needs, key information on personal networks, and considerations for medication.

A common element of emergency preparedness for persons with disabilities is establishing a personal support network, defined as at least three people who would be able to support a person with a disability during an emergency (e.g. neighbours).[83] These people must know where emergency kit(s) are stored, how to use any assistive equipment in an emergency situation and be well practiced to execute the necessary escape plans. The Guide also suggests that a member of the personal support network be located at a distance to ensure that at least one member would be unaffected by a disaster.[84] Public Safety Canada has also developed an online tool to help individuals create emergency plans tailored to their specific needs. Step 4 of the tool recommends that persons with special needs establish a support network composed of people familiar with how to address their specific needs.[85]

3.4.3. **Summary of Public Safety Canada**

The Government of Canada considers the following ten population groups as "vulnerable" or "high risk": seniors, persons with disability, Indigenous people, medically dependent persons, low-income residents, children and youth, persons with low literacy levels, women, transient populations, new immigrants and cultural minorities. The Government of Canada does not have set definitions for "vulnerable" or "high risk", but the above population groups are identified in the *Integrating Emergency Management and High-Risk Populations: Survey Report and Action Recommendations* (2007) by the Canadian Red Cross.[86]

At the federal level, *An Emergency Management Framework for Canada – Third Edition (May 2017),* is the key policy document addressing emergency management. Although the Framework does not specifically address the needs of vulnerable populations, it generally discusses addressing vulnerabilities in society which can include persons with disabilities. For example, in the glossary, the term "disaster" references a "vulnerable community".[87] This demonstrates the importance of considering vulnerabilities in society as part of emergency

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[81] Public Safety Canada, 2010, pp. 27-29

[82] Public Safety Canada, 2010, pp. 12-25

[83] Public Safety Canada, 2010, p. 6

[84] Public Safety Canada, 2010, p. 6

[85] Public Safety Canada. "Make an Emergency Plan". Get Prepared. 2019. Retrieved from: https://www.getprepared.gc.ca/cnt/plns/plan/mrgnc-pln-en.aspx

[86] Canadian Red Cross. "'Integrating Emergency Management and High-Risk Populations: Survey Report and Action Recommendations." December 19, 2007. Retrieved from: https://www.redcross.ca/crc/documents/3-1-4-2_dm_high_risk_populations.pdf

[87] Public Safety Canada. "Emergency Management Framework for Canada". 2017. Retrieved from: https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/2017-mrgnc-mngmnt-frmwrk/2017-mrgnc-mngmnt-frmwrk-en.pdf, p. 21

management. The Framework addresses the importance of clear and accessible communications, including alternative formats.[88]

Federal emergency management bodies are often inter-departmental and include representation from different institutions to reflect the multidisciplinary nature of emergency responses and risks. Representatives on these bodies generally come from organizations (e.g. Ministries) with a related mandate. A noted consideration is that federal institutions often have a single formal representative on these bodies, which creates a challenge for an organization trying to address the full range of activities within their organization. It is expected that federal organizations will coordinate internally to bring concerns to the relevant emergency management bodies. Representatives of federal organizations working with a specific vulnerable group are not often represented on emergency management bodies unless the organization's mandate specifically addresses the needs of a vulnerable population (e.g. Indigenous Services, Status of Women).

Public Safety Canada has had two bodies that could include members of civil society (i.e. external to government) to represent high-risk population groups, one of which is no longer used. The Domestic Group on Emergency Management (DGEM) is currently dormant, but once included representation from first responders, medical and nursing associations, veterinary associations, NGOs (e.g. Red Cross and St. John Ambulance), Indigenous associations and the Federation of Canadian Municipalities. The DGEM, however, did not include specific representation for persons with disabilities. Canada's Platform for Disaster Risk Reduction (DRR) is another such body that is still operational; however, it has experienced reduced activity. While there is little representation of high-risk groups (the exception being national Indigenous organizations),Canada's Platform for DRR is led by a diverse steering committee that includes representation from a variety of emergency management governance bodies (e.g. federal, federal-provincial-territorial, civil society, private sector, academia) with a small number of elected representatives.

Generally, Public Safety Canada has not had consistent direct representation of vulnerable populations (e.g. seniors, persons with disability, medically dependent persons, low-income residents) on federal inter-departmental bodies. The recent launch of Canada's National Dementia Strategy has enabled greater progress with respect to persons with Alzheimer's and dementia. Public Safety Canada is actively engaged with the Public Health Agency of Canada's Dementia Policy Committee and ESDC's Interdepartmental Committee on Seniors to address emergency management issues within these bodies. There is representation for deaf, deaf-blind, and hard of hearing (DDBHH) organizations, particularly regarding emergency alerts and communications.

There is existing infrastructure to collect data relating to persons with disabilities via the Search and Rescue (SAR) section of the National Emergency Management System; however, such data have not been actively sought. Public Safety does not currently maintain a database with information relating to emergency management and persons with disabilities. Public Safety is not an operational organization but acts as a policy organization. It relies on data from Statistics Canada (e.g. Survey on Emergency Preparedness in Canada, 2014), particularly regarding public awareness of emergency management.

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[88] Public Safety Canada. "Emergency Management Strategy for Canada – Toward a Resilient 2030", 2019, p. 12

The Emergency Management Public Awareness Contribution Program provides funding to increase the level of preparedness and readiness of vulnerable groups to natural hazards.[89] Recipients of this funding are required to consult existing public awareness research on emergency preparedness and resilience in Canada (e.g. Survey of Emergency Preparedness), link to existing public awareness campaigns (e.g. Flood Ready), and apply their own body of research, expertise in emergency management and experience working with vulnerable communities. Recipients are expected to work closely with Public Safety Canada to ensure consistency in messaging and approach across public awareness activities led by Public Safety Canada and the general emergency management community. While persons with disabilities are not identified as a target population for this funding, there are many intersections with low-income Canadians, seniors, women and Indigenous communities. The program's objectives are to:

- Develop and nationally distribute public awareness products tailored to the specific needs, risks and barriers of vulnerable populations;
- Incorporate multiple methods of delivering public awareness, such as web, social media and printed materials;
- Establish a metrics mechanism, monitor the impact and evaluate the effectiveness of public awareness products; and
- Target three or more of the following vulnerable groups of Canadians:
  o Low-income;
  o Seniors;
  o Women;
  o New Canadians;
  o Indigenous communities.[90]

Furthermore, Public Safety Canada promotes emergency planning for seniors, children, persons with disabilities and animals (e.g. service animals) through corporate and Get Prepared social media channels (e.g. Facebook, Twitter, LinkedIn).

3.4.3.1. National Public Alerting System and Emergency Communications

Canada has a National Public Alerting System (NPAS) that provides emergency management organizations across the country with the ability to quickly warn the public about emergency events through a variety of methods (radio, cable and satellite television, email, text services and on compatible wireless devices).[91] Public alerting is a collaborative process and involves Federal-Provincial/Territorial (FPT) governments and industry partners, and has resulted in the *Alert Ready* campaign to raise public awareness about the NPAS.[92] Both the CRTC and the Canadian Wireless Telecommunications Association (CWTA) distribute alerts and collaborate with DDBHH organizations in particular to ensure alert methods are accessible. This has resulted in a video series for public alerts in ASL and LSQ (Langue des Signes Québécoise or

[89] Public Safety Canada. "Emergency Management Public Awareness Contribution Program". 2019. Retrieved from: https://www.publicsafety.gc.ca/cnt/mrgnc-mngmnt/mrgnc-prprdnss/pblc-wrnss/index-en.aspx

[90] Public Safety Canada. "Emergency Management Public Awareness Contribution Program". 2019. Retrieved from: https://www.publicsafety.gc.ca/cnt/mrgnc-mngmnt/mrgnc-prprdnss/pblc-wrnss/index-en.aspx

[91] Public Safety Canada. "National Public Alerting System." April 2018. Retrieved from: https://www.publicsafety.gc.ca/cnt/mrgnc-mngmnt/mrgnc-prprdnss/ntnl-pblc-lrtng-sstm-en.aspx.

[92] "Alert Ready." 2020. Retrieved from: http://www.alertready.ca/

Langue des Signes du Québec). The CWTA has responsibility over wireless developments in Canada and represents service providers in the wireless sector. To ensure the accessibility of wireless services, the CWTA has a Wireless Accessibility Committee that guides its activities.[93]

The first Common Look and Feel (CLF) Guidance (2013) document contains policy decisions and recommended practices for public alert distributors and developers through NPAS, including audio content considerations such as Text to Speech.[94] The CLF aims to make alerts more readily recognizable by the Canadian public. It is important to ensure that practices be implemented to reduce differences between distribution mediums. In 2014, the CRTC mandated that all television and radio broadcasters use emergency alerts that reasonably comply with CLF guidelines, which are used to measure the degree of compliance. In 2017, the CRTC mandated that emergency alerts through wireless devices should follow CLF guidelines. In May 2019, the CWTA released the ASL and LSQ video series about NPAS that includes closed-captioning, voice-over and transcripts.[95]

The CRTC sets accessibility standards to ensure that all broadcast and wireless information (e.g. emergency alerts) is delivered completely and clearly to all Canadians, including persons with disabilities. For example, *AlertReady.ca* provides alternative formats of emergency alerts (e.g. alert tones). The CRTC also requires wireless service providers to make available for purchase at least one accessible phone compatible with the NPAS. The CRTC has two regulatory policies that guide the accessibility of telecommunications and broadcasting services, as well as implementation of the NPAS:

1) *Accessibility of telecommunications and broadcasting services,* Broadcasting and Telecom Regulatory Policy CRTC 2009-430, 21 July 2009;
2) *Implementation of the National Public Alerting System by wireless service providers to protect Canadians,* Telecom Regulatory Policy CRTC 2017-91, 6 April 2017.

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[93] Canadian Wireless Telecommunications Association (CWTA). "Councils and Committees." N.d. Retrieved from: https://www.cwta.ca/about-cwta/leadership/committees/

[94] Public Safety Canada. "National Public Alerting System: Common Look and Feel Guidance Version 2.0." March 29, 2018. Retrieved from: https://www.publicsafety.gc.ca/cnt/mrgnc-mngmnt/mrgnc-prprdnss/npas/clf-lng-20-en.aspx

[95] Canadian Wireless Telecommunications Association (CWTA). "New video series provides Wireless Public Alert information for Deaf, Deaf-Blind, and Hard of Hearing consumers." May 28, 2019. Retrieved from: https://www.cwta.ca/blog/2019/05/28/new-video-series-provides-wireless-public-alert-information-for-deaf-deaf-blind-and-hard-of-hearing-consumers/

3.5. Provincial and Territorial Level

In collaboration with the Government of Canada, the provincial/territorial governments have a large role in supporting persons with disabilities. The Constitution invests legislative and executive powers in both levels of government, and both have the responsibility to address the needs of persons with disabilities. Both may also collaborate with the private and non-profit sectors to fully support persons with disabilities.[96]

When looking to provincial/territorial policies and programs, it is important to consider the contextual factors of each jurisdiction (e.g. geographical, governance, social contexts). Provinces and territories across Canada have unique contexts that influence their practices. There are many geographical and social contexts to consider, such as rural communities, northern communities, coastal communities and areas with lower income. Each province and territory has a specific *Emergency Measures Act* that outlines the roles and responsibilities relating to emergency management and each has an emergency management organization that is responsible to coordinate emergency responses. It is also important to consider the role of local governments in emergency management and ensure activities are coordinated across levels of government.

As previously mentioned, departments that provide services to persons with disabilities share information among themselves. Some jurisdictions source additional information from utility companies about individuals who have indicated special power needs (e.g. to power ventilators and other assistive equipment). In the past, some jurisdictions have tried to compile databases of information for vulnerable persons, but these were challenging to maintain. It is also important to consider policies that ensure persons with disabilities can live in the community, as dispersal of persons with disabilities throughout communities is an important factor when gathering information.

Each province has introduced human rights or comparable legislation. Several provinces/territories have enacted accessibility legislation, and some have specific disability strategies and action plans. Many also have a Disability Issues Office or comparable organization to guide public programs and services. Provinces and territories often enter into agreements with private (e.g. medical suppliers) and non-profit organizations (e.g. Red Cross, St. John Ambulance) to provide emergency response services. These agreements are often formed by memorandums of understanding, or comparable contracts, and contain language that services must be accessible to all people in a given jurisdiction.

Training and awareness regarding emergency preparedness are often facilitated through the provincial/territorial Emergency Management Organization (EMO) or similar.

The sections below detail policy approaches taken in each province or territory to support persons with disabilities relating to emergency management. Each is discussed in relation to the themes of information gathering, standard setting and behaviour modification.

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[96] Convention on the Rights of Persons with Disabilities, 2014, p.3

3.5.1. Note about *MedicAlert Connect Protect*

MedicAlert Connect Protect is a service used by provinces and municipalities across Canada. While not related to a specific jurisdiction, it provides a method to collect data regarding vulnerable persons. *MedicAlert Connect Protect* provides emergency responders with quick and secure access to a subscriber's digital medical profile using the unique ID number engraved on *MedicAlert* tags. The service also provides family notification services. Many police services across the country subscribe to *MedicAlert Connect Protect* as shown in **Table 3-2-1-A**.[97]

Table 3-2-1-A: Provincial and Municipal Police Services Subscribed to *MedicAlert Connect Protect*

Western Canada	Central Canada	Atlantic Canada
- Saskatchewan Police - Winnipeg, MB - Abbotsford, BC - Calgary, AB - Corman Park, SK - Edmonton, AB - Estevan, SK - Moose Jaw, SK - Prince Albert, SK - Regina, SK - Vancouver, BC - Weyburn, SK - Wilton, SK	- Ontario Provincial Police - Brockville, ON - Durham, ON - Gananoque, ON - Hamilton, ON - London, ON - Niagara, ON - Orangeville, ON - Ottawa, ON - Owen Sound, ON - Peel, ON - Sault Ste. Marie - Shelburne, ON - Smiths Falls, ON - Toronto, ON - West Grey, ON - York, ON	- Royal Newfoundland Constabulary - Charlottetown, PE - Kensington, PE - Summerside, PE

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[97] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from:
https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect

3.5.2. **British Columbia**

3.5.2.1. **Legislation, Policies, Directives, Guidelines and Documents**

The Province of British Columbia has committed to be the most accessible province for persons with disabilities by 2024.[98] One pillar of this goal is to integrate the needs of persons with disabilities in emergency planning. Ensuring that each community implements the Functional Needs Framework (FNF) is one way to achieve this.[99] In British Columbia, there are two legal sources that stipulate the Government's duty to accommodate, the *BC Human Rights Code (BCHRC)* and the *Canadian Charter of Rights and Freedoms*.[100] The *Human Rights Code* ensures that persons with disabilities have access to government services and facilities. In addition, the *Guide Animal Act* guarantees that those with guide animals are able to access spaces, services and facilities.[101] There are also supports to make certain that persons with disabilities have the freedom to choose where they reside. The Choice in Supports for Independent Living and the Home Adaptations for Independence program are both intended to support persons with disabilities to be able to live at home.[102]

The *All Hazards Plan* from Emergency Management British Columbia (EMBC) outlines the responsibilities for relevant government departments (e.g. Health, and Children and Family Services) during an emergency, as well as the role of organizations outside of the public sector that provide assistance during an emergency.[103] During an emergency, the Ministry of Health is responsible for providing services to care for persons with disabilities.[104] Non-governmental partnerships are coordinated through the Integrated Disaster Council of British Columbia (IDCBC), and contributions include addressing any unmet needs of citizens after an emergency, sheltering and relocating animals, coordinating supplies from private partners, and managing donations.[105]

Police services in two of the largest cities, Abbotsford and Vancouver, have subscribed to *MedicAlert Connect Protect*.[106] This service allows first responders to access the digital profile of a subscriber to help identify persons and any relevant medical information, as well as assist with notifying family members. This information is accessed and managed digitally.

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[98] Disability Alliance BC. "A functional needs framework for every community: a Toolkit for local governments". 2016. Retrieved from: http://disabilityalliancebc.org/dabc-eptoolkitcmist2016/, p. 5

[99] Disability Alliance BC, 2016, p. 5

[100] Martin, 2013, p. 3

[101] Convention on the Rights of Persons with Disabilities, 2014, p. 49

[102] Convention on the Rights of Persons with Disabilities, 2014, p. 49-50

[103] Emergency Management British Columbia (EMBC). "The All Hazard Plan." Province of British Columbia. April 2012. Retrieved from: https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/provincial-emergency-planning/embc-all-hazard-plan.pdf, p. 38

[104] EMBC, 2012, p. 48

[105] EMBC, 2012, p. 38

[106] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect

The city of Vancouver has also developed a web resource to support persons with disabilities prepare for emergencies.[107] This resource emphasizes the importance of establishing a personal support network and includes a personal assessment checklist to account for individual needs.[108] To create a personal support network, it is recommended that a communication plan be made to keep in contact in an emergency and that members of the personal support network have access to the home and copies of important documents (e.g. medical information). This resource recommends that caregivers should also be aware of emergency plans that can be communicated to medical professionals, such as prescription medication is being taken by the person with a disability. It is recommended that a week's supply of medications be readily available. The city of Vancouver recommends preparing emergency plans for pets, as well as pet emergency preparedness kits. Emergency planning for pets can include developing a "buddy system" with neighbours, family and friends to care for or evacuate pets in case of emergency. This resource also includes information on vehicle emergency preparedness including how to drive safely in a given disaster, such as an earthquake and items to include in a vehicle emergency kit.

3.5.2.2. Training Programs and Initiatives

Emergency Management BC offers a series of webinars on emergency management best practices, strategies and technologies.[109] The webinars include, but are not limited to:

- Hazard, Risk and Vulnerability Analysis (HRVA) – A Tool for Community Risk Assessment
- Gender and Disaster
- Environmental Emergency Program and Local Authorities
- Implementing a Community Notification System
- Disaster Financial Assistance and the Transition from Response to Recovery
- First Nations Coordination Unit, Critical Infrastructure Assessment Tools and Resources
- Business Continuity Management
- Building Resilient Communities, Community Preparedness – Resources, Tools & Tips,
- Working with Volunteers, Mass Care, Evacuation Planning
- After Action Review and Implementation Process
- Emergency Operations Centre (EOC) Leadership and Management
- Data and Information Management in the EOC
- Delivering Effective Discussion-based Exercises
- Social Media and Emergency Management
- Emergency Operations Centre (EOC) Activation.[110]

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[107] City of Vancouver. "Emergency planning for people with disabilities and special needs." 2019. Retrieved from: https://vancouver.ca/home-property-development/safety-tips-for-people-with-disabilities-and-special-needs.aspx
[108] City of Vancouver, 2019
[109] Government of British Columbia. "Emergency Management Webinars". 2019. Retrieved from: https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/emergency-management-bc/emergency-management-training-and-exercises/em-training-program/emergency-management-webinars
[110] Government of British Columbia. "Emergency Management Webinars". 2019

Emergency Management BC, with the support of the Justice Institute of British Columbia, offers a sponsored training program for local government staff, Public Safety Lifeline Volunteers (PSVL), Temporary Emergency Assignment Management System (TEAMS) personnel, the Provincial Regional Emergency Operations Centres (PREOC) staff, and the Provincial Emergency Coordination Centre (PECC) staff.[111] The following courses are offered:

- Planning for Community Disaster Recovery
- EOC Essentials
- EOC Applied Training
- HRVA, EOC Operations
- EOC Logistics
- Planning for Community Disaster Recovery
- EOC Finance, Community Evacuations
- Information Officer
- Psychosocial Resilience in Disasters.[112]

Furthermore, EMBC coordinates province-level exercises to test emergency plans, train staff and test facilities and equipment. These exercises enable personnel to build relationships with key partners.[113] EMBC also offers a series specifically for coastal emergency exercises.[114]

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[111] Government of British Columbia. "Emergency Management Training Program". 2019. Retrieved from: https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/emergency-management-bc/emergency-management-training-and-exercises/em-training-program

[112] Government of British Columbia. "Emergency Management Training Program". 2019

[113] Government of British Columbia. "Emergency Management Exercise Program." 2019. Retrieved from: https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/emergency-management-bc/emergency-management-training-and-exercises/exercise-program

[114] Government of British Columbia. "Emergency Management Exercise Program." 2019

3.5.3. **Alberta**

3.5.3.1. **Legislation, Policies, Directives, Guidelines and Documents**

The Government of Alberta has committed to ensuring that buildings are accessible and barrier-free to persons with disabilities, as emphasized in the *Alberta Building Code*, *Barrier-Free Design Guide* and the *Safety Codes Act*.[115] Moreover, the *Alberta Fire Code 2006* stipulates that and Fire and Safety Plans for buildings must include provisions for any person requiring assistance.[116] In addition to ensuring a barrier-free built environment, the Government provides funding to individuals for devices such as wheelchairs and communication devices, and for modifications to a family home to improve wheelchair accessibility.[117] This means that it has programs in place to support persons with disabilities to live at home, in accordance with the *Alberta Human Rights Act,* which promotes the full inclusion of persons with disabilities to live and participate in their communities.[118] Furthermore, the Government ensures equitable access to all citizens to information through its *Alternative Communications Policy*.[119]

Similar to the Public Safety Canada guide, Calgary has developed its own resource to support persons with disabilities, including their caregivers, to prepare effectively for emergencies.[120] Like the Federal guide, the Calgary Guide contains specific considerations for various types of disabilities (e.g. hearing, vision, mobility, non-visible disabilities such as mental health), as well as a Personal Assessment Checklist.

Police services in the largest cities in Alberta, Calgary and Edmonton, subscribe to *MedicAlert Connect Protect*.[121] This service allows first responders to access the digital profile of a subscriber for relevant medical information and to assist with notifying family members. This information is accessed and managed digitally.

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[115] Convention on the Rights of Persons with Disabilities, 2014, p. 45
[116] Convention on the Rights of Persons with Disabilities, 2014, p. 45
[117] Convention on the Rights of Persons with Disabilities, 2014, p. 45
[118] Convention on the Rights of Persons with Disabilities, 2014, p. 47
[119] Convention on the Rights of Persons with Disabilities, 2014, p. 46
[120] Calgary Emergency Management Agency (CEMA). "Persons with Disabilities Guide". The City of Calgary. 2015. Retrieved from: https://www.calgary.ca/CSPS/cema/Documents/CEMA-Persons-with-disabilities-guide.pdf.
[121] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect

3.5.3.2. Training Programs and Initiatives

The Government of Alberta offers the following training programs for individuals to gain knowledge and skills to provide support during an emergency:[122]

- Basic Emergency Management (BEM). This course provides information on emergency management principles, key partners and requirements of relevant legislation.
- Emergency Social Services. This course trains emergency social services personnel to support people during an emergency, such as evacuees. This course Is recommended for community staff responsible for emergency social services programs, municipal leaders, First Nations and provincial emergency management personnel.
- Exercise Design 100. This course outlines the basic concepts of exercise program management and process to actively participate in an exercise design team.
- The Incident Command System (ICS) 100. This course provides an overview of the ICS (the standardized management system) to organize responses to emergencies. ICS I-200. This course provides information to operate within the ICS and is for those who may have a supervisory position within the command system.
- Municipal Elected Officials (MEO). This course provides local governments with knowledge of emergency management principles, key players involved in emergency management and legislative requirements.
- Scribing for Emergency Management. This course prepares individuals to act as scribes during an emergency. It teaches scribing methods, best practices and how to use these skills during training exercises.

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[122] Government of Alberta. "Online Training Courses." Retrieved from: https://www.alberta.ca/online-emergency-management-courses.aspx

3.5.4. **Saskatchewan**

3.5.4.1. **Legislation, Policies, Directives, Guidelines and Documents**

The *[Saskatchewan Human Rights Code](...)* requires that persons with disabilities have access to public services (e.g. transportation, facilities, communications) on an equal basis with others including equal access to transportation, communications, facilities and services.[123] The Code protects persons with disabilities from discrimination in housing, and supports their right to live independently.[124] The Government of Saskatchewan works to meet obligations for accessible communications by providing, upon request, information in accessible formats such as braille and large print.[125]

The Government of Saskatchewan has created a guide for homeowners in preparing for emergencies titled ["Homeowners: Disaster Prevention and Preparedness"](...).[126] It has recommendations, including specific considerations for persons with special needs. For example, when making emergency plans and evacuation plans, it is recommended that any special needs be taken into consideration (e.g. medications and assistive devices).[127]

The [Stakeholder Insights Report of the Flood and Natural Hazard Risk Assessment](...) section summarizes stakeholder feedback on perceptions and observations about the Province's preparedness for natural disasters. In the report, stakeholders highlighted that all individuals have a role in emergency preparedness and ensuring communities are as self-sufficient as possible.[128] One item raised is that cross-training local emergency responders and various agencies would be effective to ensure mutual preparedness, particularly in northern communities where expertise about the local context and people can be vital.[129] It was also recognized that certain communities and individuals are more vulnerable to flood impacts than others, including seniors, residents in remote areas, northern communities and First Nations communities.[130] It was further recognized that during evacuations there are specific challenges in supporting vulnerable individuals and communities.[131] It is crucial that relationships be developed with community leaders to ensure the most accurate information is conveyed and the best possible communications strategies are implemented. This is especially important for Northern communities.[132] Overall, they are often more resilient than other communities in natural disasters as local knowledge and experience are so valuable and vital to effective problem-solving.[133]

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[123] Convention on the Rights of Persons with Disabilities, 2014, p. 41
[124] Convention on the Rights of Persons with Disabilities, 2014, p. 43
[125] Convention on the Rights of Persons with Disabilities, 2014, p. 43
[126] Government of Saskatchewan. "Homeowners: Disaster Prevention and Preparedness". Disaster Prevention and Preparedness. 2019. Retrieved from: https://www.saskatchewan.ca/residents/environment-public-health-and-safety/emergency-management/municipality-disaster-prevention
[127] Government of Saskatchewan. "Homeowners: Disaster Prevention and Preparedness"
[128] Corkal, 2018, p. 12
[129] Corkal, 2018, pp. 12 & 13
[130] Corkal, 2018, pp. 12-13
[131] Corkal, 2018, p. 16
[132] Corkal, 2018, p. 67
[133] Corkal, 2018, p. 67

Many jurisdictions in Saskatchewan subscribe to *MedicAlert Connect Protect*, including the Saskatchewan Provincial Police Service and police services in Corman Park, Estevan, Moose Jaw, Prince Albert, Regina, Weyburn and Wilton.[134] This service allows first responders to access the digital profile of a subscriber to identify relevant medical information and assist with notifying family members. This information is accessed and managed digitally.

The Saskatchewan Emergency Operations Advisory Council (EOAC) includes representation from all Crown corporations, ministries and agencies across government, including those serving persons with disabilities. The Ministry of Government Relations leads the planning for emergency exercises.

The majority of communities in Saskatchewan that face evacuation are First Nations communities. Health clinic staff in each community maintain "hot lists" of persons who require support in an emergency, including those with disabilities. Therefore, the community health clinics are responsible for collecting, managing and maintaining information regarding persons with disabilities who require support in an emergency. The health staff in First Nations communities have valuable knowledge about local residents and are best positioned to understand the vulnerabilities of persons in their community. Each clinic has its own method to collect the data and maintains authority over their own data. The Chief and Council are also able to access this data. The Saskatchewan Health Authority liaises with local health clinic staff during an emergency to ensure all relevant health information is shared, including information on persons with disabilities. This ensures that appropriate supports (e.g. medical assistive devices) can be put in place during emergency processes, such as an evacuation. The Ministry of Social Services (MSS) is responsible to establish evacuation shelters. The MSS works closely with the Ministry of Health and community leaders to ensure all evacuated persons have their needs met, including communication needs. For example, residents who are not proficient in English are identified and supports are made available as needed (e.g. staff who can speak First Nations languages and translated signage). The MSS works with both the provincial and local health staff during an emergency to enable effective information-sharing because support to persons with disabilities is determined on an individual basis, and not guided by a specific policy, to ensure their needs are appropriately met.

The accessibility of shelter and transportation options is also confirmed. Post-event feedback is sought through after-actions reviews, particularly following an evacuation, where the appropriateness and effectiveness of the shelters and transportation methods used are reviewed. The format of the after-actions reviews varies from community to community (e.g. in-person meetings, surveying residents). This feedback is assessed and "quick wins" are integrated as soon as possible whereas complex suggestions are evaluated individually. Reports regarding each event are kept and reviewed annually to ensure progress is ongoing.

During an emergency, services may be provided by a third party. The MSS has agreements with the Canadian Red Cross to support service provision during an emergency. While the agreements do not specifically address the needs of persons with disabilities, the agreements are designed to ensure the needs of all persons will be met, including those with disabilities.

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[134] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect

3.5.4.2. Training Programs and Initiatives

The Government of Saskatchewan [offers emergency management courses:](#)[135]

- ICS 100: Incident Command System (ICS). This online course is intended for anyone working in emergency management and provides information on the ICS. ICS 200 provides more in-depth information for those with supervisory positions within the ICS. ICS 300 expands further upon this for information regarding expanding incidents. ICS 400 is for those with management roles within the ICS for complex incidents.
- ICS 100: Basic Emergency Management (BEM). This classroom course provides information on the ICS and basics in emergency management.
- Emergency Operations Centre (EOC). This course provides information about working at an EOC.
- Emergency Plan Development Workshop. This workshop outlines the legislative requirements and policies relating to community emergency plans and processes.
- Wildland Fire Suppression Course. This course is for firefighters and persons who directly and indirectly address wildland fires in Saskatchewan below the forest fringe. This course outlines fire behaviour, safety, equipment, aircraft, communications and tactics that can be used to fight a wildland fire.

MSS staff working in emergency shelters are required to be trained to administer the services provided at a shelter. This training outlines duties and expectations to meet the needs of all residents, including persons with disabilities. Before a person can become a staff member at a shelter, they must take this mandatory training. Schedulers maintain a list of all staff who have completed the training and are responsible to staff shelter location. Persons with disabilities were directly involved in the development of this training and the training package is reviewed every year.

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[135] Government of Saskatchewan. "Emergency Management Courses". 2019. Retrieved from: https://www.saskatchewan.ca/residents/environment-public-health-and-safety/emergency%20management/emergency-management-and-fire-safety-courses

3.5.5. **Manitoba**

3.5.5.1. **Legislation, Policies, Directives, Guidelines and Documents**

Similar to accessibility legislation passed in Ontario, the *Accessibility for Manitobans Act* (AMA) was passed in 2013.[136] The legislation sets the stage for development of accessibility standards (regulations) for public, private and non-profit sectors in five major areas: customer service, employment, information and communications, design of public spaces and transportation.[137] The AMA outlines the role of the Accessibility Advisory Council to make recommendations to the Minister regarding accessibility priorities, content of accessibility standards, timelines for implementation and long-term accessibility goals.[138] Members are appointed to the Accessibility Advisory Council by Cabinet, and membership must include persons with disabilities or their representative organizations, and representatives from organizations that would be subject to accessibility standards.[139] The Advisory Council may establish expert committees to provide input during the process of developing standards.

The Government of Manitoba has outlined processes under the AMA to create accessibility standards. Public consultations are held to develop accessibility standards and the Advisory Council also consults with a variety of disability organizations.[140] The Council may advise and makes recommendations for accessibility standards to the Minister responsible for AMA. Once a standard is enacted as a regulation, it becomes law. The following steps outline the process to create an accessibility standard:

1. The Accessibility Advisory Council develops a discussion paper that serves as the basis for public consultations.
2. The public provides its feedback (e.g. in-person and electronically).
3. The Advisory Council uses the public feedback to prepare a draft standard for the Minister responsible for the AMA.
4. The Minister considers the proposal and makes the council's proposal public.
5. The government's response is posted on the Disability Issue Office's website for public comment.
6. The council reviews and develops a report to the Minister on suggested amendments.
7. The minister makes final amendments to the proposed standard and then it is presented to Cabinet for approval.[141]

The Manitoba Emergency Measures Organization (MEMO) created a brochure as an emergency preparedness resource for people with special needs.[142] It was developed with contributions from the Manitoba Seniors Directorate, Manitoba Health, Manitoba Family

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[136] Government of Manitoba. "Accessibility for Manitobans Act." December 2013. Retrieved from: http://www.accessibilitymb.ca/law.html

[137] Government of Manitoba, 2013

[138] Government of Manitoba, 2013

[139] Government of Manitoba, 2013

[140] Government of Manitoba. "How Standards are Created". *The Accessibility for Manitobans Act (AMA).* 2019, Retrieved from: http://www.accessibilitymb.ca/how-standards-are-created.html

[141] Government of Manitoba, "How Standards are Created". 2019

[142] Manitoba Emergency Measures Organization. "Emergency Preparedness for People with Special Needs. Government of Manitoba." N.d. Retrieved from: https://www.gov.mb.ca/emo/pdfs/specialneeds.pdf

Services, Office of the Fire Commissioner and Manitoba Environment.[143] The guide is meant to inform individual/family emergency plans and includes specific tips on the accessibility requirements for various types of disability (e.g. mobility, hearing, vision, seniors).[144] The guide emphasizes the need to implement a "buddy system" or a personal support network of family, neighbours, friends and co-workers.[145] In residential living situations, the guide recommends that emergency planning should involve building managers and residents.[146] It is also recommended that persons with special needs establish a planning committee with their workplace, school, community centre or any other relevant organizations to address needs in advance of an emergency.[147] In addition to the guide, the Manitoba Seniors and Healthy Aging Secretariat and MEMO developed a brochure of emergency information for seniors.[148] It includes information for specific types of emergency events (e.g. storms, floods, fires), evacuation tips and emergency checklists.[149]

MEMO has established *Operational Guidelines for Evacuations* in which provisions are stipulated to address any special needs in the evacuation plan.[150] The populations identified as needing additional considerations are: nursing home residents, the disabled and institutionalized persons.[151] The guidelines include an evacuation planning worksheet that includes considerations for persons with disabilities, such as the number of such persons located in an evacuation area.[152]

Many partners have a role in emergency management and have specific responsibilities that impact persons with disabilities. Schedule 2 of the *Manitoba Emergency Plan* outlines responsibilities of government departments. The Department of Family Services and Consumer Affairs leads the Provincial Evacuation Planning Committee and provides training to municipalities and communities to deliver emergency social services.[153] This department is also responsible for coordinating emergency accommodations and reception centres.[154] The Department of Health, Seniors and Active Living (formerly the Department of Health, Healthy Living, Citizenship, and Youth) is primarily responsible for managing healthcare-related services in an emergency by coordinating with F-P/T Governments, and non-governmental organizations (NGOs).[155] The department is also responsible for coordinating any ground medical evacuations

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[143] Manitoba Emergency Measures Organization, "Emergency Preparedness for People with Special Needs. Government of Manitoba." p. i

[144] Manitoba Emergency Measures Organization, "Emergency Preparedness for People with Special Needs. Government of Manitoba." p. ii

[145] Manitoba Emergency Measures Organization, "Emergency Preparedness for People with Special Needs. Government of Manitoba." p. 5

[146] Manitoba Emergency Measures Organization, "Emergency Preparedness for People with Special Needs. Government of Manitoba." p. 9

[147] Manitoba Emergency Measures Organization, "Emergency Preparedness for People with Special Needs. Government of Manitoba." p. 9

[148] Manitoba Seniors and Healthy Aging Secretariat and Manitoba Emergency Measures Organization. "Emergency Information for Seniors." N.d. Retrieved from:
https://www.gov.mb.ca/seniors//publications/docs/emergency_information_for_seniors_05.pdf

[149] Manitoba Seniors and Healthy Aging Secretariat and Manitoba Emergency Measures Organization, N.d.

[150] Manitoba Emergency Measures Organization. "Schedule 6: Operational Guidelines For Evacuations (Manitoba)". Retrieved from: https://www.gov.mb.ca/emo/provincial/mep.html

[151] Manitoba Emergency Measures Organization, "Schedule 6: Operational Guidelines For Evacuations (Manitoba)", p. 18

[152] Manitoba Emergency Measures Organization, Schedule 6: Operational Guidelines For Evacuations (Manitoba), 2018, p. 26

[153] Manitoba Emergency Measures Organization, "Manitoba Emergency Plan Schedule 2", p. 5

[154] Manitoba Emergency Measures Organization "Manitoba Emergency Plan Schedule 2", p. 5

[155] Manitoba Emergency Measures Organization, "Manitoba Emergency Plan Schedule 2", p. 6

and ensuring the continuity of health cate to institutional and community-based health services.[156] Schedule 3 of the *Manitoba Emergency Plan* details the NGOs involved in emergency management and the services they provide (see **Table 3-2-6-A**).

Table 3-2-6-A: Some of the services and NGOs listed in Schedule 3 of the *Manitoba Emergency Plan*

• Canadian Red Cross – Provides social services • Manitoba Hotel Association Inc. – Emergency shelter	• Salvation Army – Emergency food, clothing and shelter • St. John Ambulance – Medical services

With respect to the *Emergency Plan*, the effectiveness of the response, particularly recovery, is impacted by the use of all available community resources, including NGOs, faith-based organizations and volunteer organizations.[157] Organizations such as these are identified as helpful not only for equipment, but also for expertise or existing connections with vulnerable populations.[158]

In April 2019, Manitoba passed the "Accessible Employment Standard Regulation". Persons with disabilities were consulted during its development. When the regulation is in full force, it will require "all employers in the province to consider reasonable accommodations at various stages of the employment cycle", including recruitment, emergency preparedness and training.[159] This regulation applies to employers in the public, private and non-profit sectors and encompasses full-time and part-time employees and seasonal workers. Sections 15 and 16 of the regulation require employers to ask employees to identify barriers they would face during emergencies and to create individualized emergency plans, when applicable.[160] If an employee has an individualized accommodation plan (per section 12 of the standard), the plan must include workplace emergency response information. It is important to recognize that not all persons requiring support during an emergency will have an individual accommodation plan. Employers (e.g. supervisors, managers) will need to work closely with employees who experience barriers to share information and create individualized emergency response information. The employer must also seek the employee's permission to share information from the individualized emergency plan with relevant supports within the organization. Compliance with this regulation will be phased in between 2020-2022 to support organizations to meet the necessary requirements. Awareness initiatives (e.g. newsletter articles, meetings, presentations) regarding emergency preparedness for persons with disabilities in the workplace have also been implemented.

Manitoba has established a Disability Emergency Management Network (DEM-Net), which is a coalition of the Manitoba Disability Issues Office, community disability organizations, seniors' organizations and emergency responders.[161] This network comprises volunteer organizations

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[156] Manitoba Emergency Measures Organization, "Manitoba Emergency Plan Schedule 2", p. 6

[157] Manitoba Emergency Measures Organization, "Manitoba Emergency Plan", 2018, p. 20

[158] Manitoba Emergency Measures Organization, "Manitoba Emergency Plan", 2018, p. 20

[159] Government of Manitoba. "Accessible Employment Standards Regulation". *The Accessibility for Manitobans Act.* April 5, 2019. Retrieved from: http://web2.gov.mb.ca/laws/regs/current/_pdf-regs.php?reg=70/2019

[160] Government of Manitoba, "Accessible Employment Standards Regulation", *The Accessibility for Manitobans Act.* April 5, 2019.

[161] Convention on the Rights of Persons with Disabilities, 2014, p. 38

and was created to ensure emergency management processes effectively support and include persons with disabilities.[162]DEM-Net was founded to build connections between emergency managers and the disability community. Some of the tasks include developing training, creating resources and ensuring that needs of persons with disabilities are addressed in all emergency planning.[163] **Table 3-2-6-B** lists some of the member organizations of DEM-Net.[164]

Table 3-2-6-B: Member organizations of DEM-Net

• Society for Manitobans with Disabilities (SMD) • Deaf Centre Manitoba Inc. • Resource Centre for Manitobans who are Deaf-Blind • Canadian Paraplegic Association (MB) Inc. (CPA) • Independent Living Resource Centre (Winnipeg) (ILRC) • First Nations disABILITY Association of Manitoba Inc. (FNDA) • Canadian Council of the Blind • Manitoba League of Persons with Disabilities (MLPD) • Multiple Sclerosis Society of Canada – Manitoba Division (MS Society)	• Manitoba Brain Injury Association (MBIA) • Manitoba Committee of Seniors (MCOS) • Disability Issues Office (DIO) • Salvation Army • City of Winnipeg – Access Advisory Committee, Universal Access Coordinator and Community Services Department • Winnipeg Regional Health Authority – Disaster Management Program • Manitoba Health • Manitoba Seniors & Manitoba Seniors & Healthy Aging Secretariat • Public Safety Canada – Emergency Management Policy

While there is no specific legislation or policy relating to emergency management and persons with disabilities, it does exist for general accessibility.[165] Whenever necessary, MEMO and Emergency Social Services (ESS) liaise with the Disabilities Issues Office (DIO). Moreover, ESS consults with Provincial Government programs (e.g. Children's disAbility Services, Community Living disAbility Services). To ensure that vulnerable residents have been identified, ESS also coordinates with Regional Health Authorities. Following Hurricane Katrina, the DIO worked with organizations in emergency management and with disability organizations to create the Disability Emergency Management Network. Although the network is inactive, the Independent Living Resource Centre continues to provide the tools created online and offer in-person training.[166]

MEMO does not provide services directly to individuals or collect information to share but consults with other organizations (e.g. Regional Health Organizations, Children's disAbility Service, Community Living disAbility Services). Since the response to emergency events occurs at the local level, information remains at this level. Each of these organizations collects and manages its own data, and therefore has its own lists that can be cross-referenced. Continuity

[162] Convention on the Rights of Persons with Disabilities, 2014, p. 38

[163] Independent Living Resource Centre. "Disaster and Emergency Management Network, Manitoba (DEM-Net)". 2019. Retrieved from: https://www.ilrc.mb.ca/projects/demnet/

[164] Independent Living Resource Centre, 2019

[165] Manitoba Disability Issues Office. "Accessibility Legislation". N.d. Retrieved from: https://www.gov.mb.ca/dio/accessibility_legislation.html

[166] Independent Living Resource Centre. "Keeping all of our community safe." 2020. Retrieved from: https://www.ilrc.mb.ca/projects/demnet/index.htm

of care is the responsibility of the relevant department. These data are stored in the existing organizational databases (e.g. Community Living disAbility Services, Children's disAbility Services) and ESS does not have access to this information. For example, ESS provides the postal codes of areas affected by an emergency and each organization (e.g. Community Living disAbility Services) cross-references the postal code with its records to ensure continuity of care to its clients. In turn, an organization (e.g. a Regional Health Authority) may reach out to ESS to confirm that a client has appropriate accommodations. ESS notes the extra needs of evacuees (self-declared) in its database.

3.5.5.2. Training Programs and Initiatives

The Disabilities Issues Office (DIO), situated in the Department of Families, has developed practical tools to help employers meet their responsibilities under this regulation. The DIO has created a Workplace Emergency Response Information Toolkit that includes tips and sample emergency plan templates. Moreover, the DIO has tools aimed at specific sectors, such as public,[167] private and non-profit businesses.[168] It also offers free workshops to help organizations prepare for compliance deadlines.

The Manitoba EMO facilitates emergency management training on mitigation, preparedness, response and recovery.[169] It designs, develops and coordinates emergency management training opportunities throughout the province. Available online courses include:

- Emergency Management (EM) 100. Foundations of Emergency Management. This course provides an overview of emergency management in Manitoba and is intended for persons responsible for emergency preparedness and response within communities or organizations.
- Incident Command System (ICS) 100. This course offers an introduction to the ICS to provide individuals with the skills to act in a supporting role during an event.
- Emergency Operations Centre 100. An Introduction to Emergency Operation Centres (EOC). This course provides information on the roles, responsibilities and operations involved in the EOC.
- Emergency Social Services (ESS) 100. This course provides an overview of the social services implemented during an emergency, including food, shelter and comfort. The course is intended for community staff and volunteers.
- Emergency Management Overview for Elected Officials (EO) 100. This course includes information on the Manitoba Emergency Management System, municipal emergency management program, requirements of the *Emergency Measures Act,* and the role of elected officials. Despite its title, the course is available for any person wanting a general understanding of Emergency Management in Manitoba.

The Manitoba EMO also offers Municipal Emergency Workshops that provide updates on the Manitoba EMO, a presentation on the provincial agency, a presentation on the Thompson Fire

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[167] Government of Manitoba. "Accessible Employment for the Public Sector". 2019. *The Accessibility for Manitobans Act.* Retrieved from: http://www.accessibilitymb.ca/public-sector-employment.html

[168] Government of Manitoba. "Accessible Employment for Businesses and Non-Profits". 2019. *The Accessibility for Manitobans Act.* Retrieved from: http://www.accessibilitymb.ca/business-and-non-profit-employment.html

[169] Manitoba Emergency Measures Organization (EMO). "Manitoba EMO Emergency Management Training". 2018. Retrieved from: http://manitobaemotraining.ca/course/index.php?categoryid=9

Plan, an interactive demonstration of Web Emergency Operations Centre (EOC), discussion exercises and a table top exercise.[170] Workshops are also offered that cover Emergency Social Services (ESS), media awareness, municipal continuity planning, exercise design, disaster financial assistance and significant weather preparedness.[171] The *Manitoba EMO Training Policies* indicate that emergency management training should reflect Manitoba's risk environment, current processes and legislation.[172] The policy specifies audiences that are a priority to train, such as municipal/community emergency coordinators, municipal/community emergency management staff, members of the Manitoba government, private organizations and NGOs with roles in emergency management, general Manitobans, other provincial/territorial government agencies, general Canadians and members of the international community.[173]

According to the Manitoba EMO, Schedule 6 – *Operational Guidelines for Evacuations*, a Hazard/Risk Vulnerability Assessment (HRVA), is identified as a tool to determine vulnerabilities in a community.[174] A HRVA can also support identifying evacuation routes and locations for reception facilities.[175] Schedule 6 also identifies detailed information about populations at risk. Moreover, evacuation plans in place in institutions (e.g. schools, nursing homes) should be considered when developing general evacuation plans.[176] Knowing the approximate number of persons in a given geographic area during both day and night is recommended for the following populations: adults, elementary and secondary students, hospital patients and elderly/special needs.[177] Schedule 6 outlines some of the key roles and responsibilities involved in the evacuation process. Local police traditionally have responsibility for the evacuation process (the Incident Commander may recommend an evacuation) and ESS is the responsibility of the Emergency Operations Centre ESS Director.[178] Schedule 6 also outlines that any provisions to evacuate special needs populations, including children in school and child-care centres, institutions (e.g. hospitals, nursing homes), incarcerated persons, women and children in transition homes and transient populations should be identified.[179]

There is no specific training, guidelines or workshops for staff who serve persons with disabilities, however, having representation for specialized services on the emergency management is encouraged in current training. The *Accessible Employment Standard Regulation* will require that the following persons take training regarding accessible employment, including keeping employees who experience barriers safe during emergencies: persons who recruit, select or train employees, supervisors, managers and those who coordinate employees, persons responsible for promoting, redeploying or terminating employees and persons developing and implementing an employer's employment policies and practices. In addition, employers with 50 or more employees will have to create and document

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[170] Manitoba EMO. "Municipal Workshops". 2019. Retrieved from: http://manitobaemotraining.ca/course/index.php?categoryid=18

[171] Manitoba EMO. "Municipal Workshops". 2019.

[172] Manitoba Emergency Measures Organization (Manitoba EMO). "EMO training Policies". October 19, 2017. Retrieved from: https://www.gov.mb.ca/emo/lms/training_policies.pdf, p.1

[173] Manitoba EMO, 2017, p.1

[174] Manitoba Emergency Measures Organization. "Schedule 6 - Operational Guidelines for Evacuations". 2017. Retrieved from: https://www.gov.mb.ca/emo/provincial/mep.html

[175] Manitoba EMO, 2017, p. 8

[176] Manitoba EMO, 2017, p. 8

[177] Manitoba EMO, 2017, p. 8

[178] Manitoba EMO, 2017, p. 14

[179] Manitoba EMO, 2017, p. 18

an accommodation training policy, including a summary of the content of the training and when the training is to be provided.[180]

A formal review of the effectiveness of the *Accessible Employment Standard Regulation* will take place in 2024, at which time the regulation's provisions related to keeping employees with disabilities safe during emergencies will, it is anticipated, be evaluated. The formal review will be undertaken by the Accessibility Advisory Council, established under the *Accessibility for Manitobans Act* to make recommendations to the Minister of Families on accessibility priorities, content of accessibility standards, timelines for implementation and long-term accessibility goals.[181] Cabinet appoints members to the Accessibility Advisory Council and membership must include persons with disabilities or their representative organizations, as well as representatives from organizations that would be made subject to accessibility standards.[182]

Provincial emergency management plans are high level and do not prescribe specific actions, which is the responsibility of local authorities (e.g. municipalities). ESS includes scenarios regarding persons with disabilities in provincial exercises and encourages local authorities to do this as well.

Manitoba has established a Compliance Secretariat to monitor and enforce requirements under various accessibility standards, including the Accessible Employment Standard Regulation. Under the Accessibility for Manitobans Act, inspections can take place and orders and administrative penalties can be issued to organizations that are not compliant with an accessibility regulation, including the Accessible Employment Standard Regulation.

The MEMO follows the Government of Manitoba's accessibility standards for web design. Government communications (e.g. Alert Ready National Public Alerting System) assume users have necessary equipment/capability to receive information on various platforms (e.g. TV, radio, internet). While not a responsibility of the MEMO, ESS encourages local authorities to ensure their plans have accessible options for reception centres as well as shelters. Many local authorities do not have transportation options due to capacity issues. Regional Health Authorities coordinate patient transport for hospitals and personal care homes. ESS does not use contracted services, but where applicable these considerations would be included in agreements. It also does not receive municipal emergency plans and is not able to monitor them. Any feedback received by ESS is shared with local authorities for best practices. Feedback is not directly received from persons with disabilities, as MEMO's activities are strategic and it does not engage with individuals.

The Disabilities Issues Office, within the Department of Families in Manitoba, is developing training material regarding accessible employment, including accessible emergency preparedness. The DIO has developed a Workplace Emergency Response Information Toolkit that is being shared with a wide range of employers in Manitoba to support this work and promote compliance with the standard (regulation).[183] When developing this training, the DIO consults and works closely with persons with disabilities.

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[180] Government of Manitoba, "Accessible Employment Standards Regulation", *The Accessibility for Manitobans Act.* April 5, 2019.

[181] Government of Manitoba, 2013

[182] Government of Manitoba, 2013

[183] "Toolkit to Keep Employees with Disabilities Safe" Retrieved from: http://accessibilitymb.ca/pdf/workplace_emergency_toolkit.pdf

3.5.6.   **Northern Canada**

The On Thin Ice project has led to several projects related to emergency preparedness for persons with disabilities in Northern Canada.[184]

The project is committed to improving the security, well-being and inclusion of persons with disabilities in emergency preparedness in the North by building relationships between persons with disabilities, first responders, community leaders and NGOs.[185] The project has developed a handbook to support emergency preparedness for people with disabilities. It was developed with the Council of Yukon First Nations, Integrated Emergency Management Solutions, Nunavut Department of Family Services, NWT Emergency Measures Office, NWT Disabilities Council, Nunavummi Disabilities Makinnasuaqtiit Society, Yukon Council on disability, Yukon Department of Health and Social Services and the Yukon Emergency Measures Organization.[186] The handbook details additional considerations for various types of disability, including:

- People with mobility disabilities[187]
- People who are blind or have visual disabilities[188]
- People with cognitive disabilities (including fetal alcohol spectrum disorder)[189]
- Deaf people and people with hearing disabilities[190]
- People with communication and speech-related disabilities[191]
- People with non-visible disabilities[192]
- People who use electric or battery-operated assistive devices[193]
- People with service animals[194]

[184] On Thin Ice Project. "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. N.d. Retrieved from: http://onthiniceproject.ca/tools-resources/

[185] On Thin Ice Project. "Facilities Accessibility Checklist." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. March 2014. Retrieved from: http://onthiniceproject.ca/tools-resources/, p. 2

[186] On Thin Ice Project. "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. N.d. Retrieved from: http://onthiniceproject.ca/tools-resources/

[187] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 37-39

[188] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 40-41

[189] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 42-43

[190] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 44-45

[191] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 46-47

[192] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 48-49

[193] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 50-55

[194] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." pp. 56-57

Indigenous people with disabilities are particularly vulnerable to disasters in the North, as there is often a lack of individual preparedness, insufficient training to respond to emergencies, and inaccessible transportation and accommodation.[195] The handbook asserts that it is important to consider a range of disabilities and include people with disabilities in emergency planning whenever possible.[196] Some specific factors to consider when planning to support persons with disabilities in an emergency include:

- The degree to which the individuals in the community are prepared
- Availability of accessible communications methods
- The level of training on how to support persons with disabilities
- Availability of accessible vehicles
- Degree of accessibility of emergency shelters[197]

The handbook emphasizes the importance of establishing a personal support network of people with the specific knowledge required to support the person with disabilities, and including someone who is unlikely to be impacted by the same disaster.[198] Those who support persons with disabilities should be given specific instructions on the types of medications or use of assistive devices as required.[199] The handbook also recommends that evacuation plans be developed for a person's home, work and places they go regularly.[200] Special considerations should also be made if the person lives in a multi-unit building – such as informing the building manager about any special needs. It is recommended that the person contact their local emergency services to provide information about any special assistance required during an evacuation.[201] In some Northern communities, it may be necessary to evacuate by air and plans should be made for this possibility with the recognition that normal weight limits do not apply to assistive equipment.[202]

While not included in the territorial summary sections below, these projects are discussed in the Special Projects section of this report (Section 7.1).

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[195] On Thin Ice Project. "Final Disability Inclusive Emergency Preparedness Handout." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. N.d. Retrieved from: http://onthiniceproject.ca/tools-resources/, p. 1

[196] On Thin Ice Project, "Final Disability Inclusive Emergency Preparedness Handout", p. 2

[197] On Thin Ice Project, ""Final Disability Inclusive Emergency Preparedness Handout", p. 2

[198] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook" p. 9

[199] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook" p. 22

[200] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook" p. 29

[201] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook" p. 22

[202] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook" p. 33

3.5.6.1. Northwest Territories

3.5.6.1.1. Legislation, Policies, Directives, Guidelines and Documents

According to the Northwest Territories *Emergency Act*, the Emergency Management Organization (EMO) is responsible for public awareness, establishing policies and programs, and supports the coordination of emergency responses by local governments.[203] The NWT EMO is under the Department of Municipal and Community Affairs.[204]

The Northwest Territories (NWT) *Human Rights Act (HRA)* imposes on service providers the duty to accommodate the needs of persons with disabilities in public services.[205] The Residential Tenancies Act also enforces that the HRA applies to housing, and that persons with disabilities have the right to choose their place of residence.[206] Moreover, the Access to Information and Protection of Privacy Act outlines how personal information can be collected, used and disclosed.[207]

The Territorial Emergency Response Committees is the main emergency planning forum and supports coordination of emergency responses across levels of government. The member agencies have designated responsibilities for emergency management and include representatives from Federal agencies.[208] **Table 3-2-7-1-A** lists membership of the TERC.[209]

Table 3-2-7-1-A: Membership of the Territorial Emergency Response Committee

Territorial Membership	Federal Membership	Private Sector Membership
- Director, Emergency Services Division (Chair) - EMO Coordinator - Executive, Director of Communications - Health and Social Services - Justice (RCMP) - Environment and Natural Resources - Finance - Transportation - Public Works and Services	- Regional Director, OCIPEP - Industry Canada (now Innovation, Science and Economic Development Canada) - Environment Canada - Fisheries and Oceans Canada - Canadian Coast Guard - Indian and Northern Affairs Canada (now Crown-Indigenous Relations and Northern Affairs Canada and Indigenous Services Canada) - Parks Canada Agency - Canadian Forces Northern Area	- Northwestel - NWT Power Corporation - Northland Utilities Limited - YK Amateur Radio Society

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[203] Legislative Assembly of the Northwest Territories. "Emergency Act". 2014. Retrieved from: https://www.assembly.gov.nt.ca/content/emergency-management-act, pp. 4-5

[204] Legislative Assembly of the Northwest Territories, 2014, p. 5

[205] Convention on the Rights of Persons with Disabilities, 2014, p. 54

[206] Convention on the Rights of Persons with Disabilities, 2014, p. 55

[207] Convention on the Rights of Persons with Disabilities, 2014, p. 55

[208] Municipal and Community Affairs, 2001, p. 3-1

[209] Municipal and Community Affairs, 2001, p. 3-1

The NWT *Emergency Plan* highlights that non-government volunteer organizations and private-sector organizations should be included in departmental and community emergency planning to support emergency responses.[210] The *Emergency Plan* highlights that accurate public information is essential to effective emergency management.[211] During an emergency, the Department of Health and Social Services is responsible for facilitating emergency health services, services for acute care and mental health contingency planning, and the acquisition of medical supplies.[212]

The Government of the NWT (GNWT) includes guidelines in the *Emergency Plan* to partner with external organizations for emergency responses. Agreements can made with private and non-profit organizations, and are often arranged through a memorandum of understanding or a letter of undertaking.[213] Examples of agreements with the private sector can include utility companies, telecommunications agencies, construction companies, safety equipment specialists, as well as transportation and air transportation agencies.[214] Examples of non-profit partners include St. John Ambulance, Salvation Army and the Canadian Red Cross.[215]

The GNWT is committed to ensuring effective supports and programs for persons with disabilities. In 2017, the it launched the *Equity, Accessibility, Inclusion, and Participation: NWT Disability Strategic Framework: 2017–2027.*[216] Collaborating partners include: the GNWT; disability partners from the Alberta–NWT Office; CNIB; Hay River Committee, Persons with Disabilities; NWT Association of Communities; NWT Disabilities Council; Foster Family Coalition of the NWT; NWT Seniors' Society; and the Yellowknife Association for Community Living.[217] The Framework is founded on four interconnected goals: person and family centred; inclusion and accessibility; awareness, education and training; and coordination, evaluation and reporting.[218]

In partnership with stakeholders, the GNWT has created an inventory of the available programs and services for persons with disabilities and their caregivers.[219] The inventory was developed in partnership with the NWT Housing Corporation, Department of Education, Culture and Employment, Department of Health and Social Services, Department of Justice and the Department of Municipal and Community Affairs.[220] These services include but are not limited to training to integrate persons with disabilities in emergency planning (provided by the EMO), duty

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[210] Municipal and Community Affairs. "Northwest Territories Emergency Plan". Government of the Northwest Territories, 2001. Retrieved from: https://www.maca.gov.nt.ca/sites/maca/files/resources/maca_public-safety_nwt-emergency-plan_2001.pdf, pp. 1-7

[211] Municipal and Community Affairs, 2001, p. 1-8

[212] Municipal and Community Affairs, 2001, p. A-2-3

[213] Municipal and Community Affairs, 2001, p. A-12

[214] Municipal and Community Affairs, 2001, p. A-12

[215] Municipal and Community Affairs, 2001, p. A-14

[216] Government of the Northwest Territories. "Equity, Accessibility, Inclusion and Participation - NWT Disability Strategic Framework: 2017 to 2027". December 2017. Retrieved from: https://www.ntassembly.ca/tabled-documents/equity-accessibility-inclusion-and-participation-nwt-disability-strategic-framework, p. iii

[217] GWNT, 2017, p. iii

[218] GWNT, 2017, p. 13

[219] Government of Northwest Territories (GNWT). "GNWT Programs and Services for Persons with Disabilities Inventory". February 2018. Retrieved from: https://www.hss.gov.nt.ca/sites/hss/files/resources/gnwt-disabilities-inventory.pdf

[220] GNWT, 2018, p. 1

to accommodate injury and disability policy, NWT Human Rights Commission and a Health and Social Services systems navigator.[221]

The Framework highlights goals relating to information gathering. For example, developing methods in collaboration with the NWT Bureau of Statistics to create a comprehensive population projection, including each of the health and social services administrative regions.[222]

In the Minister's foreword, the Honourable Glen Abernethy highlights that attitudes can create more barriers than impairment. The Minister highlights the contributions of organizations and individuals to "challenge attitudes and beliefs; to break down barriers to full and equal participation; and to recognize and champion the contributions that persons with disabilities make in our society".[223]

3.5.6.1.2. Training Programs and Initiatives

The GNWT offers first responder training, including courses for Emergency First Aid, Emergency Medical Responder, First Responder (Advanced First Aid), Standard First Aid, and Wilderness First Aid.[224] In the *Action Plan for Improving Support to Community Governments in the NWT – Progress Report,* the Government of the NWT outlines its objective to implement online introductory emergency management training for municipal staff and assess community emergency management training needs.[225]

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[221] GNWT, 2018, p. 23

[222] GWNT, 2017, p. 31

[223] GWNT, 2017, p. iii

[224] The Government of the Northwest Territories. "First Responder Training." *Municipal and Community Affairs.* 2019. Retrieved from: https://www.maca.gov.nt.ca/en/services/first-responder-training

[225] Government of the Northwest Territories. "Action Plan for Improving Support to Community Governments in the NWT – Progress Report". May 2018. Retrieved from: https://www.maca.gov.nt.ca/sites/maca/files/resources/2018-05-24_progressreport-support_for_comm_govts_attachment.pdf, p. 19

3.5.6.2. Nunavut

3.5.6.2.1.   Legislation, Policies, Directives, Guidelines and Documents

In 2010, the governments of Canada and Ontario and several private organizations jointly developed the *Emergency Preparedness Guide for People with Disabilities/Special Needs.* To broaden access to the document, the Government of Nunavut is translating this document into Inuktituk and Inuinnaqtun and will distribute it to community members and residential facilities.[226] The Nunavut *Human Rights Act* prohibits discrimination based on a range of factors, including disability. Nunavut's Department of Culture, Language, Elders and Youth has also collaborated with McGill University's Canadian Deafness Research and Training Institute and the Nunavummi Disabilities Makinnasuaqtiit Society to preserve and promote Inuit Sign Language.[227]

The *Consolidation of Emergency Measures Act* enables the Emergency Management Officer to coordinate emergency responses, monitor and test emergency management programs, and ensure adherence to set policies and standards.[228] Each municipality must have an Emergency Management Officer. Nunavut Emergency Management (NEM) also provides advice and guidance and ensures compliance with mandatory legislation and policies regarding emergency management.[229] The NEM highly recommends that all persons in Nunavut be able to be self-reliant when travelling on the land and prepare to support themselves for 72 hours.[230]

The Nunavummi Disabilities Makkinnasuaqtiit Society is a key organization in Nunavut that advocates for persons with disabilities to be involved and actively participate in all aspects of life.[231]

The Government of Nunavut also supports the Rick Hanson Foundation, a not-for-profit that supports persons with spinal cord injuries. The organization works to create practical solutions, such as purchasing assistive devices and technologies.[232]

3.5.6.2.2.   Training Programs and Initiatives

The Nunavut Municipal Training Organization provides training for ground search and rescue volunteers.[233] NEM is working on a direct delivery program to train and update Community Emergency Response Plans and Search and Rescue training in Nunavut.[234]

[226] Convention on the Rights of Persons with Disabilities, 2014, pp. 52-53

[227] Convention on the Rights of Persons with Disabilities, 2014, p. 53

[228] Department of Community and Government Services. "Consolidation of Emergency Measures Act". Government of Nunavut. August 24, 2010. Retrieved from: https://www.gov.nu.ca/sites/default/files/emergency_measures_act_consolidation.pdf, p. 10

[229] Nunavut Emergency Management. "About Us". N.d., Retrieved from: https://www.gov.nu.ca/community-and-government-services/information/nunavut-emergency-management-0

[230] Nunavut Emergency Management. "About Us".

[231] Nunavummi Disabilities Makkinnasuaqtiit Society. "About". N.d., Retrieved from: https://nuability.ca/

[232] Convention on the Rights of Persons with Disabilities, 2014, p. 52

[233] Nunavut Municipal Training Organization. "Programs and Courses." 2019. Retrieved from: https://www.nmto.ca/programs-and-courses

[234] Nunavut Emergency Management (NEM). "Annual Report". 2017. Retrieved from: https://assembly.nu.ca/sites/default/files/TD-95-5(2)-EN-Nunavut-Emergency-Management-Annual-Report-2017.pdf, p.3

3.5.6.3. **Yukon**

3.5.6.3.1. Legislation, Policies, Directives, Guidelines and Documents

The Yukon *Human Rights Act (HRA)* legislates that people with disabilities have the right to reasonable accommodation for persons with disabilities in all public services.[235] The Government of Yukon also supports the right of people with disabilities to choose to live independently. It also requires that any facilities operated by Yukon's Health and Social Services department have protocols to include provisions for persons with disabilities in emergency plans.[236]

The *Civil Emergency Measures Act* designates an Emergency Planning Officer to formulate and recommend plans to address any peacetime disaster or war emergency.[237] The Emergency Planning Officer is the manager of the Yukon Emergency Measures Organization (YEMO). YEMO, under the Department of Community Services, is the agency responsible for coordinating the territory's preparedness, response and recovery during major emergencies and disasters.[238] It provides many links to resources to support emergency preparedness, including links to other territorial and state emergency management offices, resources from the Government of Canada, non-profit organizations such as the Red Cross and St. John Ambulance and resources from the On Thin Ice project.[239]

The Government of the Yukon emphasizes the importance of preparing household emergency plans and emergency kits.[240] For persons with disabilities, it highlights the Government of Canada's *Emergency Preparedness Guide for People with Disabilities and Special Needs* and the On thin Ice project's guide, *Emergency Planning and Preparedness for People with Disabilities in Canada's North.*

The Yukon Government Emergency Coordination Plan aims to provide a comprehensive framework of strategies including the high-level roles and responsibilities across government departments.[241] The plan highlights the Emergency Coordination Group (ECG), which supports coordination of emergency management in Yukon.[242] The five permanent work groups under the ECG are: Prevention/Mitigation; Preparedness; Response; Recovery; and Communications.[243] Membership primarily consists of Yukon Government representatives appointed by Deputy Ministers or CEOs of public departments and corporations.[244] Additional representatives may be

[235] Convention on the Rights of Persons with Disabilities, 2014, pp. 56-57

[236] Convention on the Rights of Persons with Disabilities, 2014, p. 57

[237] Government of Yukon. "Civil Emergency Measures Act". 2002. Retrieved from: http://www.gov.yk.ca/legislation/legislation/page_c.html, p. 1

[238] Government of Yukon. "About Emergency Measures Organization (EMO)". 2014. Retrieved from: http://www.community.gov.yk.ca/emo/about_emo.html

[239] Government of Yukon. "Emergency Measures Organization (EMO Links)". 2009. Retrieved from: http://www.community.gov.yk.ca/emo/links.html

[240] Government of the Yukon. "Make an Emergency Plan". 2020. Retrieved from: https://yukon.ca/en/emergencies-and-safety/emergency-preparedness/make-emergency-plan

[241] Government of the Yukon. "Emergency Coordination Plan". December 2011. Retrieved from: https://yukon.ca/en/yukon-government-emergency-coordination-plan , p.1

[242] Government of Yukon, 2011, p. 73

[243] Government of Yukon, 2011, p. 78

[244] Government of Yukon, 2011, p. 74

invited on an as-needed basis, including representatives from municipal/First Nation governments, the Federal Government and mutual aid providers.[245]

The Department of Community Services is responsible for coordinating all emergency medical services equipment and personnel in the Yukon. Additionally, it is in charge of the training and equipping of Ground and Inland Search and Rescue teams and promoting individual emergency preparedness to the public.[246]

Emergency Social Services is responsible for coordinating public reception centres, emergency shelters, feeding and personal services, which encompass counselling, financial assistance, coordination of alternative shelter for domestic pets and the care of persons with special requirements and in special care facilities.[247]

3.5.6.3.1. Training Programs and Initiatives

Training for emergency preparedness is a shared responsibility among departments, the Public Service Commission and YEMO.[248] Departments are responsible for ensuring that appropriate personnel are properly trained to carry out departmental emergency management duties.[249] YEMO ensures that specific emergency management training courses are available to Departments and Corporations.[250]

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[245] Government of Yukon, 2011, p. 75
[246] Government of Yukon, 2011, p. 39
[247] Government of Yukon, 2011, p. 43
[248] Government of Yukon, 2011, p. 8
[249] Government of Yukon, 2011, p. 8
[250] Government of Yukon, 2011, p. 8

3.5.7. **Ontario**

3.5.7.1. Legislation, Policies, Directives, Guidelines and Documents

The Government of Ontario was the first jurisdiction to enact legislation and regulations that enforce the accessibility of services and information. The *Accessibility for Ontarians with Disabilities Act,* 2005 (AODA) lays the foundation for province-wide accessibility regulations.[251] These accessibility standards seek to achieve accessibility for Ontarians with disabilities with respect to goods, services (e.g. information and communications, transportation), facilities, accommodation, employment, buildings, structures and premises.[252] AODA and its standards apply to public- and private-sector organizations in Ontario that have one or more employees (full-time, part-time, seasonal or contract). This includes the Government of Ontario, municipalities, not-for-profit organizations and businesses. AODA requires that proposed accessibility standards are developed by Standards Development Committees and submitted to the government to be considered for adoption into regulation. These committees must be made up of people with disabilities or their representatives, industries impacted by a standard and any relevant Ministries.[253]

AODA contains mandatory accessibility standards – the Integrated Accessibility Standards Regulation (IASR) – in five key areas of daily living: customer service, information and communications, transportation, design of public spaces and employment. The *Customer Service Standards* impact organizations that provide goods, services or facilities to the public.[254] The *Information and Communications Standards* require organizations that release public safety information to provide such information in an accessible format upon request.[255] These standards also require all organizations with 50 or more employees to adhere to the Web Content Accessibility Guidelines (WCAG) 2.0 Level A by January 1, 2014, and adhere to WCAG 2.0 Level AA by January 1, 2021.[256]

Under the Employment Standards, organizations must provide employees with disabilities with personalized workplace emergency safety information to prepare for potential workplace emergencies.[257] Furthermore, the Transportation Standard under the IASR includes requirements for transportation service providers to establish, implement, maintain and document emergency preparedness and response policies that provide for the safety of persons with disabilities. Transportation service providers are also required to train all staff and volunteers on the safe use of accessibility features and equipment, and on emergency response and preparedness procedures that provide for the safety of persons with disabilities.

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[251] Convention on the Rights of Persons with Disabilities, 2014, p. 5
[252] Government of Ontario. "Accessibility for Ontarians with Disabilities Act." 2005. Retrieved from: https://www.ontario.ca/laws/statute/05a11
[253] Government of Ontario, 2005
[254] Convention on the Rights of Persons with Disabilities, 2014, p. 34
[255] Convention on the Rights of Persons with Disabilities, 2014, p. 35
[256] Convention on the Rights of Persons with Disabilities, 2014, p. 35
[257] Committee on the Rights of Persons with disabilities, 2014, p. 36

Emergency Management Ontario provides an online tool for individuals and households to input their emergency preparedness action plans.[258] According to the website, over 13,700 emergency plans have been uploaded.[259] The form includes sections for specific preparation steps, tips for community-specific hazards and special needs (e.g. persons with disabilities).[260]

The Government of Ontario Office of the Fire Marshall and Emergency Management and the Accessibility Directorate of Ontario (now the Ministry for Seniors and Accessibility) have created a guide to support persons with disabilities in preparing for emergencies.[261] The guide lists considerations for specific types of disabilities, such as those relating to mobility, vision, hearing, non-visible disabilities, seniors with special needs, and persons living in high-rise buildings. **Table 3-2-8-A** lists the organizations that contributed to the guide.[262]

Table 3-2-8-A: Organizations involved in the development of the *Emergency Preparedness Guide for People with Disabilities / Special Needs.*

• Canadian Diabetes Association • Canadian Hearing Society • Canadian MedicAlert® Foundation • Canadian Red Cross • Centre for Independent Living in Toronto (CILT) Inc. • CNIB • Global Affairs Canada	• Learning Disabilities Association of Ontario • Multiple Sclerosis Society of Canada, Toronto Chapter and Ontario Division • National (USA) Organization on Disability Headquarters • SOS Emergency Response Technologies • Spinal Cord Injury Ontario • The Canadian Hearing Society • Toronto Rehabilitation Institute

Several police forces in some of the largest jurisdictions in Ontario subscribe to *MedicAlert Connect Protect*.[263] These include the Ontario Provincial Police, Brockville, Durham, Gananoque, Hamilton, London, Niagara, Orangeville, Ottawa, Owen Sound, Peel, Sault Ste. Marie, Shelburne, Smiths Falls, Toronto, West Grey and York. This service allows first responders to access the digital profile of a subscriber to help identify persons and any relevant medical information, as well as assist with notifying family members. This information is accessed and managed digitally.

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[258] Emergency Management Ontario. "Make an Emergency Plan". 2016. Retrieved from: https://beprepared.emergencymanagementontario.ca/myplan/CreatePlan.aspx

[259] Emergency Management Ontario, "Make an Emergency Plan", 2016

[260] Emergency Management Ontario, "Make an Emergency Plan", 2016

[261] Government of Ontario Office of the Fire Marshall and Emergency Management. *Emergency Preparedness Guide for People with Disabilities / Special Needs.* April 2018. Retrieved from: https://www.emergencymanagementontario.ca/english/beprepared/diversegroups/PeoplewithDisabilities/disability_guide_english.html

[262] Government of Ontario Office of the Fire Marshall and Emergency Management, 2018

[263] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect

3.5.7.2. Training Programs and Initiatives

Emergency Management Ontario offers [courses to train emergency responders](#) on a variety of topics, including supporting persons with disabilities.[264] Available training courses include:

- Exercise Programs: An Introduction. This is a self-study course that provides information on basic concepts of managing exercise programs.
- Accessible Customer Service for Emergency Responders. This course is a self-study and online that has been developed with the Accessibility Directorate of Ontario (ADO). It provides emergency responders with information to support persons with disabilities and special needs.
- Basic Emergency Management (BEM). This course provides an overview of emergency management in Ontario, including the *Emergency Management and Civil Protection Act* and the roles and responsibilities of all levels of government and other organizations involved in emergency management.
- Exercise Program Management. This course provides information to develop, conduct, control, evaluate, and implement post-exercise requirements for a discussion-based exercise (e.g. Tabletop Exercises).
- Note Taking. This course teaches best practices in notetaking for emergency management professionals.
- Community Emergency Management Coordinator (CEMC). This course provides information to develop and maintain a Municipal Emergency Management Program, as required by the *Emergency Management and Civil Protection Act* and *Ontario Regulation 380/04*.
- Provincial Emergency Management Coordinator (PEMC). This course provides information to develop and maintain an Emergency Management Program as required by the *Emergency Management and Civil Protection Act and Ontario Regulation 380/04.*
- Introduction to Incident Management System (IMS). This course provides information about the IMS in Ontario, including functions, concepts and principles of the Incident Management System (IMS).
- Basic Incident Management System (IMS). This course prepares individuals to implement IMS for simple incidents, including IMS functions, involved organizations, incident facilities, resource management and communication management.
- Incident Management System (IMS) in EOCs. This course prepares participants to implement IMS and support operations of an EOC (Emergency Operations Centre).
- Intermediate Incident Management System (IMS). This course will prepare you to perform leadership roles within an expanded IMS structure during a complex incident involving multiple organizations.

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[264] Emergency Management Ontario. "Course Catalogue". Retrieved from:
https://training.emergencymanagementontario.ca/TPOnline/TPOnline.dll/EMO_Public_Courses

3.5.8. **Quebec**

3.5.8.1. Legislation, Policies, Directives, Guidelines and Documents

The Government of Quebec passed human rights legislation for persons with disabilities starting in 1978 with the *Law ensuring the exercise of the rights of people with disabilities with a view to their educational, professional and social integration (Act).* This *Act* has been since updated to continue to ensure persons with disabilities are able to access services.[265] The *Act* is founded on three objectives: promote the social integration of people with disabilities; outline responsibilities for partners with regard to people with disabilities and their families; and establish the Quebec Office for Persons with Disabilities (Office) with the duties and powers of a watchdog, evaluator and advisor to the Minister and other organizations (public and private).[266] Moreover, The role of the Office as an advisor to Government is enshrined in this legislation.

In addition to the *Act*, the Government of Quebec adopted the policy *In its own right: for a real exercise of the right to equality* (2009). The Office is responsible for coordinating implementation, including its monitoring and evaluation. The purpose of this policy is to increase the social participation of people with disabilities over a ten-year period. It is founded in legislation, including the *Charter of Rights and Freedoms (Quebec)[267] and* the *Act.[268]* It is also based on a renewed conception of social participation. The Human Development Model – Disability Production Process (MDH-PPH) shows how social participation is the result of multiple influences between the characteristics of a person and the elements of their physical and social environment, such as barriers like prejudice, lack of resources, lack of accessibility in the home or school, difficulty obtaining accessible information.[269] The policy aims to improve living conditions, ensure basic needs are met and ensure full participation in society for persons with disabilities. The three challenges within the policy aim to make Quebec "a more inclusive society, a united and fairer society, as well as a society that respects the choices and needs of people with disabilities and their families."[270]

The Quebec Office of Disability also provides resources and tools to help organizations develop their own action plans to advance inclusion of persons with disabilities. An annual action plan for people with disabilities is the planning tool required by section 61.1 of the *Act.* The *Act* mandates that action plans be produced annually by the following organizations: Departments and public bodies that employ at least 50 people; integrated health and social services centres

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[265] Convention on the Rights of Persons with Disabilities, 2014, p. 31

[266] Quebec Office for Persons with Disabilities. "Law ensuring the exercise of the rights of people with disabilities with a view to their educational, professional and social integration". March 19, 2019. Retrieved from: https://www.ophq.gouv.qc.ca/loi-et-politiques/loi-assurant-lexercice-des-droits-des-personnes-handicapees.html

[267] Government of Quebec. "Charter of Rights and Freedoms." December 2019. Retrieved from: http://legisquebec.gouv.qc.ca/fr/ShowDoc/cs/C-12

[268] Government of Quebec. "Law ensuring the exercise of the rights of people with disabilities with a view to their educational, professional and social integration". December 2019. Retrieved from: http://legisquebec.gouv.qc.ca/fr/ShowDoc/cs/E-20.1

[269] International Network on the Disability Production Process (RIPPH). "The Model". 2020. Retrieved from: https://ripph.qc.ca/modele-mdh-pph/le-modele/

[270] Quebec Office for Persons with Disabilities. "Full-fledged policy". September 2017. Retrieved from: https://www.ophq.gouv.qc.ca/loi-et-politiques/politique-a-part-entiere.html

(CISSS); integrated university health and social services centres (CIUSSS) and non-merged establishments (ENF); and municipalities with at least 15,000 residents. The action plans outline concrete actions to advance social participation of people with disabilities and must be made public.

The Ministère de la Sécurité publique is required to produce an annual action plan regarding the inclusion of persons with disabilities. In the [2018–2019 Annual Report](), identified objectives included:

- Follow up on the government policy, "Access to documents and services offered to the public for people with disabilities" by adequately addressing complaints from people with disabilities.
- Support the justice system to adapt to the needs of people with mental health problems.
- Promote the safe access of people with disabilities to establishments frequented by the public and to apartment buildings.
- Ensure accessibility of the premises provided during meetings in the municipalities affected by a disaster.
- Facilitate access to disaster services for disabled people affected by the disaster.
- Promote the hiring and integration of people with disabilities in the Department.
- When renovating buildings or constructing new ones, ensure that the necessary infrastructure to reduce obstacles for those with disabilities has been planned in advance.
- Ensure the safety of people with disabilities during an evacuation.
- Disseminate the "Action Plan with regard to people with disabilities 2018–2019" and publish all relevant information aimed at raising awareness of customers, partners and staff towards persons with disabilities.[271]

The Government of Quebec has implemented a policy on ["Access to documents and services offered to the public for people with disabilities."]() The policy mandates public bodies to offer the highest quality services to people with disabilities to ensure communications methods meet the various access needs for persons with disabilities.[272] The purpose of this policy is to enable people with disabilities to have equal access to public services and information. Government bodies are required to offer alternative formats of documentation and assistive communications equipment, and adhere to web accessibility standards (WCAG 2.0).[273] To improve the accessibility of the web content disseminated, public bodies and government enterprises must comply with the *[Standard on Web Accessibility]()*.[274] This means that all web content must comply with requirements in WCAG 2.0.[275] The Government of Quebec has a set of guiding principles, the *Modernization of Web Accessibility Standards: Approach and Guiding Principles for Modernization.*[276] Additionally, the *Digital Communications Optimization and Government Web*

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[271] Government of Quebec. "Plan d'action à l'égard des personnes handicapées 2018-2019." 2018. Retrieved from: https://www.ophq.gouv.qc.ca/plans-daction/ministeres-et-organismes-publics-assujettis-a-larticle-611-de-la-loi.html#c12342

[272] Quebec Office for Persons with Disabilities. "Policy Access to documents and services offered to the public for people with disabilities." January 8, 2020. Retrieved from: https://www.ophq.gouv.qc.ca/loi-et-politiques/politique-de-lacces-aux-documents-et-aux-services.html

[273] Convention on the Rights of Persons with Disabilities, 2014, p. 32

[274] Government of Quebec. "Web Accessibility". 2009. Retrieved from: https://www.tresor.gouv.qc.ca/ressources-informationnelles/architecture-dentreprise-gouvernementale/standards-et-normes/accessibilite-du-web/

[275] Government of Quebec, "Web Accessibility", 2009

[276] Government of Quebec, "Web Accessibility", 2009

Presence Strategy outlines a unified government web platform (Quebec.ca) to optimize user experience and standardize the web environment.[277]

In its "Statement of Citizen Services", the Ministère de la Sécurité publique outlines its service commitments.[278] To the general public, the Ministry states that it will provide information on public safety and customer relations, education and awareness on public safety, and reporting and information on public safety emergencies.[279] For services to businesses and municipalities, the support the Ministry provides can include drafting annual fire declarations and activity reports, as well as fire risk coverage plans.[280] For services to disaster victims, it offers financial aid programs and post-disaster emergency response.[281] The Ministry also outlines its commitment to ensure customers can access services through various means and adapt its services for persons with disabilities. It emphasizes its commitment to serve customers competently with courtesy, timeliness and in a way that is responsive to their needs.[282] Furthermore, the Ministère de la Sécurité publique has created a disaster preparedness guide for municipalities.[283]

3.5.8.2. Training Programs and Initiatives

The Government of Quebec promotes first aid training through the Canadian Red Cross, St. John Ambulance, Heart and Stroke Foundation and the ACT Foundation.[284] The Government of Quebec also promotes the "Hero in 30 Training Course" through the Heart and Stroke Foundation that instructs individuals in cardiopulmonary resuscitation (CPR without ventilation) called "Hero in 30©."[285]

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[277] Government of Quebec, "Web Accessibility", 2009

[278] Government of Quebec. "Statement of Citizen Services". 2016. Retrieved from: https://www.securitepublique.gouv.qc.ca/en/ministry/service-statement.html

[279] The Government of Quebec, "Statement of Citizen Services", 2016

[280] The Government of Quebec, "Statement of Citizen Services", 2016

[281] The Government of Quebec, "Statement of Citizen Services", 2016

[282] The Government of Quebec, "Statement of Citizen Services", 2016

[283] Sécurité Publique Quebec. "Prepare for disaster response: A guide for the municipal sector in establishing general disaster preparedness". 2020. Retrieved from: https://www.securitepublique.gouv.qc.ca/securite-civile/soutien-partenaires/soutien-aux-municipalites/preparation-municipale/preparation-generale/guide/en-ligne.html

[284] Government of Quebec. "Training". 2019. Retrieved from: https://www.quebec.ca/en/employment/career-planning-management/training/first-aid-training/

[285] Government of Quebec, "Training". 2019

3.5.9. **New Brunswick**

3.5.9.1. **Legislation, Policies, Directives, Guidelines and Documents**

The New Brunswick Emergency Measures Organization (NBEMO) works to prepare the province for emergencies. Its responsibilities include training first responder agencies on protocols to identify persons with disabilities during a disaster.[286] New Brunswick supports persons with disabilities in their right to live independently through home support services and the Disability Support Program.[287] Provincial legislation such as the *Right to Information and Protection of Privacy Act* and the *Personal Health Information Protection and Access Act* outline how data can be collected, used and disclosed and requires the government to provide individuals in an accessible manner with the information that has been collected about them.[288]

The *New Brunswick Emergency Measures Plan (Provincial All-Hazards Plan)* is expected to provide a coordinated and effective response to emergencies by the Government of New Brunswick. This plan falls under the authority of the *Emergency Measures Act*,[289] which came into effect in June 1978. This Act established the NBEMO, outlines authorities and guides responsibilities for emergency planning and response.[290] NBEMO organizes the province into 12 zones, each with a regional emergency management coordinator who aides local authorities in coordinating local and provincial efforts to improve emergency planning and responses.[291] Municipal governments are required to have their own EMO, as well as an EMO committee with an emergency plan in place.[292] According to the "Community Status Reports", the Province of New Brunswick has confirmed that 87% of communities in the province have emergency preparedness plans in place and the remaining 13% are "actively planning."[293]

While it is primarily the responsibility of individuals to care for themselves in the first 72 hours of an emergency, the *All-Hazards Plan* outlines the scaled levels of emergency response from local to national levels.[294] The purpose of the *Plan* is to facilitate a coordinated response to emergencies by all provincial departments and stakeholder agencies and supported by the Government of Canada.[295] Local governments are expected to serve as the primary responders in an emergency situation, neighbouring municipalities are the second level of intervention, followed by the Provincial Government and the Government of Canada as necessary.[296] Regional Emergency Management Coordinators (REMCs) are responsible for facilitating

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[286] Convention on the Rights of Persons with Disabilities, 2014, p. 28
[287] Convention on the Rights of Persons with Disabilities, 2014, p. 29
[288] Convention on the Rights of Persons with Disabilities, 2014, p. 29
[289] Department of Justice and Public Safety. "Province of New Brunswick All Hazards Plan (Provincial All-Hazards Plan)" Government of New Brunswick. June 2017. Retrieved from: https://www2.gnb.ca/content/dam/gnb/Departments/ps-sp/pdf/emo/provincial_all_hazards_plan-2017.pdf, p. i
[290] Department of Justice and Public Safety, 2017, p. i
[291] New Brunswick Emergency Measures Organizations (NBEMO). "Municipal Emergency Preparedness". 2019. Retrieved from: https://www2.gnb.ca/content/gnb/en/departments/emo/municipal-emergency-preparedness-plan.html
[292]Department of Justice and Public Safety, 2017, p. 18
[293] New Brunswick Emergency Measures Organization (NBEMO). "Community Status Report". 2019. Retrieved from: https://www2.gnb.ca/content/gnb/en/departments/emo/community_statusreport.html
[294] Department of Justice and Public Safety, 2017, p. 17
[295] Department of Justice and Public Safety, p. ii
[296] Department of Justice and Public Safety, p. 5

escalating levels of emergency response among local governments with the Provincial Emergency Action Committee (PEAC) in charge of coordinating emergency responses at the provincial level.[297] Membership on the PEAC is determined by the Director of Emergency Management within NBEMO. REMCs collaborate with local and municipal governments, NGOs and the private sector to promote emergency readiness.[298] Organizations primarily responsible for emergency preparedness and response include the Provincial Government, EMO, Fire Marshall's Office, Policing Services, Ambulance New Brunswick, Department of Social Development – Families and Children & Seniors and Long-Term Care, Regional Director of Public Safety Canada, NB Power and NGOs (e.g. Red Cross).[299]

During an emergency, the flow of accurate information is important. The Executive Council Office (ECO) is responsible for coordinating all public information initiatives during an emergency with a member of the ECO appointed as the Director of Emergency Information Services.[300] A translation unit and audio-visual specialists are also incorporated into emergency communications strategies.[301]

To ensure an effective and collective response to emergencies, all resources within a community should be employed. This includes volunteer organizations, social service groups and other civic-oriented organizations that can provide a range of knowledge and expertise.[302] Documents such as a memorandum of understanding can be used to make arrangements for the provision of services.[303] **Table 3-2-10-A** shows the key organizations involved in emergency management.[304]

Table 3-2-10-A: Key Organizations Involved in Emergency Management in New Brunswick

• Emergency Measures Communication Group • Civilian Air Search and Rescue (CASARA)	• Canadian Red Cross • Salvation Army • St. John Ambulance • RCMP

The Department of Social Development (Families and Children and Seniors and Long-Term Care) (SD) is responsible for coordinating emergency social services to receive and care for evacuees, including lodging, feeding, registration, personal services, coordination with NGOs (e.g. Red Cross), evacuation for persons with special needs, identifying possible emergency shelters, and ensuring sheltering options for service animals.[305] Each individual is assessed on a case by case basis, including their need for assistive devices, medications, or other supports. SD provides services to disabled individuals, programs or financial assistance. It also oversees Adult Residential Facilities and Nursing Homes. Legislation is held by the Minister of Social Development for oversight of Adult Residential Facilities and Nursing Homes. Individuals

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[297] Department of Justice and Public Safety, p. 5
[298] Department of Justice and Public Safety, p. 14
[299] Department of Justice and Public Safety, pp. 9-10
[300] Department of Justice and Public Safety, p. 14
[301] Department of Justice and Public Safety, p. 14
[302] Department of Justice and Public Safety, p. 20
[303] Department of Justice and Public Safety, p. 20
[304] Department of Justice and Public Safety, p. 21
[305] Department of Justice and Public Safety, p. C-20-21

residing in these adult community resources (residential facilities) are required to participate in emergency evacuation drills at the facility at minimum monthly. Home Support Agencies that have contracts to provide home care to SD clients are also required to identify a process on how to manage services to vulnerable clients in the event of an emergency.

The Red Cross, Department of Education and Early Childhood Development, and Department of Health are also responsible for persons with disabilities in an emergency.

Any communication mediums in the event of an emergency are the responsibility of NBEMO communications. SD holds a contract for interpreter services with the New Brunswick Deaf and Hard of Hearing Services Inc. and any SD client requiring interpreter services can request these services by reaching out of the New Brunswick Deaf and Hard of Hearing Services Inc.

There is no one provincial registry that includes information on persons with disabilities. Efforts to develop registries of residents with disabilities and senior residents have been undertaken without success. There are, however, organizational/departmental databases of persons with disabilities. SD serves clients with disabilities through the disability support program, long-term care program and adult community resources. SD is able to look up individuals with disabilities if they are clients of the Department's programs (e.g. income assistance, subsidized housing, disability support program, long term care). Additionally, NB Power has a database of customers who require power for medical equipment or medication refrigeration. There are other government and community agencies that may have the ability to look up persons with disabilities (e.g. Extra-Mural program, Vitalaire). Adult residential facilities are required to identify and share an emergency plan with the agency that regulates them. In the event of loss of power or other major incidents, SD follows up with each individual agency directly to determine whether they have enacted their plan and whether they need additional support.

The most often updated and tested emergency plan that SD is connected to is the Point Lepreau Nuclear Off-Site Emergency Plan. This applies to one region in the province. The population within a 20-km radius of the plant is well documented, including any persons with disabilities. The Manager of Nuclear Preparedness within the NBEMO updates the plan continuously. The updated plans are distributed electronically every six months, but demographic data are updated less frequently.

The Red Cross criteria for accessibility are used to determine suitable reception centres, shelters and accommodations. The agency assesses individuals upon arrival at reception centres and those individuals requiring services in consideration of their disability are provided for. The Red Cross uses a detailed accessibility assessment as part of its shelter/reception centre survey. This includes disability parking, wheelchair accessibility, barrier-free washrooms, braille on elevator plates, etc. Public Health, Mental Health and Ambulance NB are all represented at a reception centre and individuals are referred to services as needed.

SD requires the Red Cross to have accessible options for reception centres, sheltering and accommodations. The contract with Red Cross ensures services are provided to all New Brunswick residents, including those with disabilities. The Red Cross also provides emergency social services to residents of New Brunswick during an emergency. The Red Cross does not facilitate training particular to serving individuals with disabilities during a response. The Red Cross evaluates evacuated individuals with disabilities and will place them in commercial accommodations as opposed to congregate facilities. Additionally, the Red Cross provides assistive equipment when necessary.

The Government of New Brunswick implements an after-action review following every emergency, which is coordinated through the NBEMO. If there are concerns brought during after action reviews, the corresponding emergency procedures are modified accordingly. Any recommendations from the after-action review are detailed in a report and are assigned to the appropriate departments. Progress is monitored by Department of Public Safety. SD does not have the mandated responsibility to enforce requirements.

3.5.9.2. Training Programs and Initiatives

NBEMO is the lead organization for emergency training. The NBEMO offers courses to train persons for an emergency at both a basic and advanced level. For basic training, the NBEMO offers a Basic Emergency Management as a self-study to learn to plan for emergencies and understand operations that occur during emergencies. Additionally, the province offers a course about the Incident Command System (ICS). This course is offered in person by ICS service providers or online as a self-study, and overviews, basic terminology, common responsibilities, and the ICS organization overall. There is also advanced-level training on the Emergency Operations Centre (EOC) for officials to learn operations and procedures of the EOC. Additionally, there is a course on Emergency Public Information (EPI) that specifically focuses on media relations during an emergency.[306]

New Brunswick has several provincial disability organizations and stakeholders, including, the Premier's Council on Disability and the New Brunswick Disability Executive's Network that can be consulted with respect to the provision of support to persons with disabilities during an emergency.

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[306] NBEMO, "Course Description", 2019. Retrieved from:
https://www2.gnb.ca/content/gnb/en/departments/emo/course_description.html

3.5.10. **Nova Scotia**

3.5.10.1. **Legislation, Policies, Directives, Guidelines and Documents**

The Province of Nova Scotia is committed to promoting accessibility as demonstrated by the introduction of the Nova Scotia *Accessibility Act* in April 2017.[307] The aim of this legislation is to remove barriers for persons with disabilities to access public goods and services, information and communications, transportation, employment, built environment and education.[308] The *Act* established two bodies, the Accessibility Directorate and the Accessibility Advisory Council, to support the Government in furthering accessibility goals throughout the province. The Accessibility Directorate administers the Accessibility *Act* and works to address needs of persons with disabilities regarding provincial policies, programs and service delivery by making recommendations to the Government.[309] The Accessibility Directorate is composed of an Executive Director and staff that are appointed by the Minister.[310] The Accessibility Advisory Council comprises representatives from stakeholder organizations impacted by enforcement of the *Accessibility Act* – with the majority of members being persons with disabilities.[311] The Advisory Council can suggest new policies, assess existing practices, set priorities in the creation of accessibility standards and outline long-term accessibility goals for the Province.[312] Nova Scotia's Building Code Regulations and the Universal Accessibility Plan promote barrier-free design of buildings and accessibility of communications and services such as transportation.[313] The Government of Nova Scotia also supports the right of persons with disabilities to live independently.[314]

Nova Scotia Environment has a webpage dedicated to providing information for persons with disabilities in emergencies. It contains specific considerations to assist those with disabilities, including vision, hearing, mobility and dependence on medication.[315] It also has information about Nova Scotia Power's Critical Customer Care Program, where persons with disabilities can register that they have medical devices requiring electricity.[316] This ensures that those who register will be a priority to have power restored.

After Hurricane Juan and "White Juan", the Persons with Disabilities Emergency Preparedness Committee was formed to help persons with disabilities prepare for different types of

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[307] Government of Nova Scotia. "Accessibility Act". ". Retrieved from: https://www.nslegislature.ca/legc/bills/62nd_3rd/3rd_read/b059.htm

[308] Government of Nova Scotia, "Accessibility Act", 2017

[309] Government of Nova Scotia, "Accessibility Act", 2017

[310] Government of Nova Scotia, "Accessibility Act", 2017

[311] Government of Nova Scotia, "Accessibility Act", 2017

[312] Government of Nova Scotia, "Accessibility Act", 2017

[313] Convention on the Rights of Persons with Disabilities, 2014, p. 25 & 26

[314] Convention on the Rights of Persons with Disabilities, 2014, p. 25

[315] Nova Scotia Environment. "Emergencies and Extreme Weather Events - People with Disabilities or Medical Conditions". Government of Nova Scotia. September 2018. Retrieved from: https://novascotia.ca/dhw/environmental/people-with-disabilities-medical-condition.asp

[316] Nova Scotia Environment, 2018

disasters.[317] The Committee created _Are you ready? Nova Scotia's Guide to Disaster Preparedness_ in collaboration with the organizations listed in **Table 3-2-11-A.**[318]

Besides general emergency preparedness information for persons with disabilities, the Guide addresses specific types of disabilities, including mobility, vision, hearing, speech, mental health and seniors.[319] A key recommendation is to establish a personal support network and ensure it is involved in preparing an emergency plan, evacuation plan and a plan for any service animals.[320] For individuals dependent on medicine, the guide recommends that they register with the Vial of Life Program, which provides a sticker to be placed on the fridge to alert emergency responders to medicine inside.[321]

Table 3-2-11-A: Organizational Collaborators on _Are You Ready? Nova Scotia's Guide to Disaster Preparedness._

• CNIB • Canadian Mental Health Association (Nova Scotia) • Canadian Paraplegic Association of Nova Scotia • Canadian Red Cross • Deafness Advocacy Association Nova Scotia • Department of Community Services • Government of Nova Scotia • Halifax Regional Emergency Measures Organization	• Independent Living Resource Centre • Nova Scotia Disabled Persons Commission • Nova Scotia Emergency Management Office • Nova Scotia League for Equal Opportunities • People First Nova Scotia • Society of Deaf & Hard of Hearing Nova Scotians

The Nova Scotia Emergency Management Organization (NSEMO) is not a first responder and does not conduct evacuations or wellness checks. Therefore, NSEMO does not manage a database relating to persons with disabilities. There are registries operated by Nova Scotia Power and some larger municipalities, and NSEMO works with these organizations to ensure necessary actions are conducted. The _Emergency Management Act_ and regulations govern NSEMO's activities. Emergency response occurs at the local level. As such, all municipalities are required to have an emergency management coordinator, emergency management committee and emergency management plan. Emergency planning for persons with disabilities is not currently mandatory but is encouraged. Communications Nova Scotia shares NSEMO's communications with the public during an emergency and has related accessibility policies. There are processes to ensure those accessing 911 services can do so through alternative methods, such as texting.

The Critical Infrastructure Resiliency Committee is NSEMO's only committee. It comprises owners and operators of critical infrastructure and has representation from the Department of Justice (which houses the Accessibility Directorate) and several provincial departments that offer services to persons with disabilities and other vulnerable populations. The representative

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[317] Persons with Disabilities Emergency Preparedness Committee. "Are you ready? Nova Scotia's Guide to Disaster Preparedness: Tips for Persons with Disabilities and Tips for Frail or Older Seniors". Government of Nova Scotia. 2008. Retrieved from: https://novascotia.ca/coms/department/documents/EmergencyPreparedness.pdf, p. iv

[318] Persons with Disabilities Emergency Preparedness Committee, p. 34

[319] Persons with Disabilities Emergency Preparedness Committee, p. iv

[320] Persons with Disabilities Emergency Preparedness Committee, pp. 6-10

[321] Persons with Disabilities Emergency Preparedness Committee, p. 18

from the Department of Justice is the main point of contact with the CI Resiliency Committee. Staff from NSEMO participate on other provincial committees.

It is required that provincially operated emergency shelters be accessible. These facilities are managed by the Canadian Red Cross through a contract with Community Services. Some municipalities have provided transportation in the past and continue to do so as part of their emergency management plan. As part of a Provincial department, NSEMO must follow Provincial procurement regulations.[322]

Following any events where NSEMO has provided a response, After-action reports are prepared and there are opportunities during this process to identify issues affecting persons with disabilities within provincial departments, municipalities, critical infrastructure partners and other participants involved in the emergency. Emergency plans are updated and included in the training and exercising program to test their efficacy. After-action reporting has been adopted as an essential tool to capture lessons learned and feed into the continuous improvement cycle. NSEMO welcomes feedback from persons with disabilities through its municipal Emergency Management Coordinator, the Accessibility Directorate or any other advocacy organization. The Emergency Management Strategy for Canada was adopted in 2019. It includes priorities involving a whole-of-society approach to emergency management mitigation, preparedness, response and recovery. Federal, provincial and territorial partners have not yet reached consensus on an implementation plan, but work is underway. Once complete, NSEMO will apply the implementation plan to its policies, planning and practices.

3.5.10.2. Training Programs and Initiatives

Emergency management training is highly recommended for those with the responsibility to safeguard others and municipalities are encouraged to participate. NSEMO staff are not first responders and are not usually involved in tactical operations during or after emergencies. NSEMO provides training to municipalities to assist in their preparedness for, response to and recovery from emergencies. Municipalities choose whom they wish to invite to their emergency management training and those personnel may represent a variety of first responders and key stakeholders. Most of the emergency management training that NSEMO offers was developed from the experience and expertise of seasoned emergency management professionals and is recognized as a national standard.

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[322] Government of Nova Scotia. "Procurement." N.d. Retrieved from: https://procurement.novascotia.ca/

3.5.11. **Prince Edward Island**

3.5.11.1. **Legislation, Policies, Directives, Guidelines and Documents**

The PEI Emergency Measures Organization has primary responsibility for emergency management, including supporting persons with disabilities.[323] In the Government of Prince Edward Island's *[All Hazards Emergency Plan](#)*, the Department of Family and Human Services is responsible for training employees to provide emergency social services (e.g. shelter and reception centres), and supporting seniors and persons with special needs during an emergency.[324]

Some of the police services in the largest jurisdictions, including Charlottetown, Kensington and Summerside, subscribe to *MedicAlert Connect Protect*.[325] This service allows first responders to access the digital profile of a subscriber to help identify persons and any relevant medical information, as well as assist with notifying family members. This information is accessed and managed digitally.

PEI's Disability Support Program provides assistance to persons with disabilities through funding for specialized transportation services and assistive devices.[326] The Government of PEI also supports the right of persons with disabilities to live independently.[327] Other relevant legislation includes the *Freedom of Information and Protection of Privacy Act,* which establishes a right of access for an individual seeking records under the *Act* to obtain requested information in an accessible manner.[328]

The Government's *[Municipal Emergency Program Guide](#)* outlines a number of considerations for municipalities when planning for emergencies.[329] For evacuations, these include the need for effective training for emergency responders, understanding the roles and responsibilities of the organizations involved and accessible communications.[330] The Guide also outlines considerations for emergency social services, which municipalities are responsible for in collaboration with the Provincial Government, Canadian Red Cross, Salvation Army and other service organizations.[331] Essential services include clothing, lodging, food, personal services and inquiry services.[332]

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[323] Convention on the Rights of Persons with Disabilities, 2014, p. 22
[324] Government of Prince Edward Island. "All Hazards Emergency Plan". Emergency Measures Organization. October 24, 2017. Retrieved from: https://www.princeedwardisland.ca/en/publication/all-hazards-emergency-plan, p. 39
[325] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect
[326] Convention on the Rights of Persons with Disabilities, 2014, p. 21
[327] Convention on the Rights of Persons with Disabilities, 2014, p. 23
[328] Convention on the Rights of Persons with Disabilities, 2014, p. 23
[329] Emergency Measures Organization. "Municipal Emergency Program Guide". Government of Prince Edward Island. 2018. Retrieved from: https://www.princeedwardisland.ca/en/publication/municipal-emergency-management-program-guide
[330] Emergency Measures Organization, 2018, p. 18
[331] Government of Prince Edward Island, 2018, p. 63
[332] Government of Prince Edward Island, 2018, p. 63

The PEI Office of Public Safety has created an *Emergency Preparedness Guide*[333] which emphasizes that any emergency plans and kits need to take special needs into account.[334] The Guide was developed with input from the PEI Council of People with Disabilities.

The Departmental Emergency Services Officer (DESO) is responsible for Emergency Social Services (ESS). This position is under the Department of Social Development and Housing, which is responsible for services for persons with disabilities. The DESO has connections with staff in several service areas who can liaise with organizations and with individuals with disabilities.

With respect to information-gathering, the Government of PEI provides programs and services to eligible persons with disabilities and collects administrative data (e.g. home addresses) for these clients. Community organizations also provide services to people with disabilities, many through contractual relationships with government, and government liaises with them regularly. These organizations are required to maintain data related to their service provision and make it available to government if required. There would be significant overlap in information between these two sources.

The provincial 72-hour Emergence Preparedness Guide was developed with input from the Executive Director of the PEI Council of Persons with Disabilities, the provincial Seniors' Secretariat, and a representative from a local NGO that provides day programming/group home services for persons with cognitive disabilities.[335] In addition to this input, provincial EMO has specialized presentations on disaster preparation for various groups, including those representing persons with disabilities. Municipal training sessions include a section on awareness of vulnerable populations and the special requirements these populations may have in the event of an emergency.

Provincial messaging during an emergency is developed for all persons, including members of vulnerable communities such as persons with disabilities. Provincial EMO uses multiple platforms for public alert messaging during an emergency (e.g. television, mobile phones, radio, print, the internet and social media). For clients with disabilities who have the technology to receive these messages (e.g. emergency alert mobile apps), the message is sent out in appropriate formats. Interpretation services are available to provincial EMO staff via a 1-800 service that provides instant translation in over 100 languages. PEI has adopted web content standards to make the provincial website accessible to persons with visual impairments using reader technology. All provincial web content editors are trained in these standards and use them when creating content.

Shelter locations in PEI are not predefined; however, most locations that would be used as shelter during an emergency would be fully accessible to provide services to all citizens. All public transit buses in the capital area are fully accessible, as are a number of school buses throughout the province. Providing accessible transportation during an emergency in rural areas outside the public transit routes is more difficult as there may not be an accessible school bus readily available in the area. However, since it takes less than five hours to drive across the province, this means that a bus does not have to be locally situated to be made available on short notice. All external (i.e. outside government) emergency services contracts require that

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[333] Prince Edward Island Office of Public Safety. "Your Emergency Preparedness Guide". Prince Edward Island. N.d. Retrieved from: https://www.princeedwardisland.ca/en/information/justice-and-public-safety/emergency-measures-organization

[334] Prince Edward Island Office of Public Safety, p. 6

[335] Prince Edward Island Office of Public Safety

services be provided to all persons affected by the emergency. For example, the Government of PEI contracts emergency social services through the Canadian Red Cross (CRC).

The Department of Social Development and Housing contracts with the CRC for the provision of Emergency Social Services for emergency events that require large-scale deployment. CRC volunteers are not trained specifically to work with persons with disabilities, but they are trained to expect that persons involved in an emergency will have a higher level of need and stressors and CRC staff are trained to watch for and service these needs as they occur.

The PEI EMO does not have a post-event reporting structure that seeks feedback from specific groups such as persons with disabilities; however, the PEI EMO has a continuous improvement and feedback cycle following an emergency response. This cycle includes seeking input from public organizations such as NGOs or not-for-profit groups whose clients or key demographics have been involved with that emergency response effort and this would include groups representing persons with disabilities.

The provincial EMO operates under the powers of the *Emergency Measures Act*.[336] Additionally, each department has its own emergency plan with sections relating to the provision of service to their client base. The Department of Social Development and Housing's plan includes the following statement: "Leveraging existing relationships with our community partners to support seniors and people with special needs."

3.5.11.2.   Training Programs and Initiatives

The PEI Emergency Measures Organization (EMO) provides emergency management training for those responsible to respond to an emergency in their community.[337] Training course are available on the following topics:

- Exercise Design 100. This self-study course covers how to design an exercise. Exercise Design 200. This extension of Exercise Design 100 outlines the principles and the five phases of exercise design to test organizational emergency management plans.
- Incident Command System (ICS) 100. This self-study course outlines the basics of the ICS. Incident Command System (ICS) 200 is a follow-up to ICS 100 and provides additional information on the features, principles, responsibilities and organizational structure of the system. Incident Command System (ICS) 300, an extension on ICS 200, focuses on complex events. It includes details on the "planning process, organizational and staffing structures, employing unified command, assessing and setting objectives, and demobilizing from larger incidents."[338]
- Basic Emergency Management (BEM). This course provides an understanding of emergency management processes, including mitigation, preparedness, response and recovery.
- Emergency Public Information. This course outlines basic principles of crisis communications, including "tips for working with the media, understanding target audiences,

[336] Government of Prince Edward Island. "Emergency Measures Act". December 2017. Retrieved from: https://www.princeedwardisland.ca/en/legislation/emergency-measures-act
[337] Government of Prince Edward Island. "Register for Emergency Management Training". February 2017. Justice and Public Safety. Retrieved from: https://www.princeedwardisland.ca/en/information/justice-and-public-safety/emergency-management-training-courses
[338] Government of Prince Edward Island, "Register for Emergency Management Training", February 2017

drafting key messages, communicating through social media, and writing a crisis communications plan."[339]

- Emergency Operations Centre (EOC). This course prepares individuals to assume a role on an EOC team, including how to support a multi-service emergency response.

The PEI EMO provides emergency management training at regular intervals. This training is based on providing services to all citizens with the knowledge that each person has needs specific to their situation and that people require different levels of service in the event of an emergency. The PEI EMO provides training and educational resources such as the 72-hour *Emergency Preparedness Guide* and municipal training programs that emphasize awareness of vulnerable populations. The *Guide* was developed with input from the PEI Council of Persons with Disabilities. As training is provided, feedback is gathered and leads to continual improvements that focus on all citizens, not specifically persons with disabilities.

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[339] Government of Prince Edward Island, "Register for Emergency Management Training", February 2017

3.5.12. **Newfoundland and Labrador**

3.5.12.1. **Legislation, Policies, Directives, Guidelines and Documents**

The administrators of Newfoundland and Labrador's Emergency Social Services Program hold regular meetings with the Coalition of Persons with Disabilities Newfoundland and Labrador (COD-NL) to ensure the needs of persons with disabilities are included in emergency protocols.[340] The *Personal Health Information Act* outlines how personal health information can be collected, used and disclosed.[341] The Provincial Government also ensures that persons with disabilities can access any necessary information in a variety of formats (e.g. braille, FM systems, accessible websites and speech-generating devices).[342] The Province also supports the right of persons with disabilities to live independently.[343] The Government of Newfoundland and Labrador has introduced a provincial Inclusion Strategy and action plans for implementation.[344]

The Royal Newfoundland Constabulary subscribes to *MedicAlert Connect Protect*.[345] This service allows first responders to access the digital profile of a subscriber to help identify persons and any relevant medical information, as well as assist with notifying family members. This information is accessed and managed digitally.

The COD-NL has created a guide to help first responders and community leaders support persons with disabilities in an emergency and ensure emergency planning is inclusive.[346] This guide was developed in collaboration with the Red Cross, City of Mount Pearl, City of St. John's, the Government of Newfoundland and Labrador, Municipalities Newfoundland and Labrador, various Disability Organizations, Professional Municipal Administrators and Public Safety Canada.[347] The guide emphasizes the importance of directly involving persons with disabilities in all stages of emergency planning.[348] By law, under the *Service Animal Act*, service animals are allowed to accompany their owners and any services for persons with disabilities much take needs such as this into account when preparing emergency accommodations and transportation.[349] The guide also includes a self-assessment questionnaire to list members of the individual's personal support network, instructions for medication and assistive devices, details about the disability and instructions regarding service animals.[350]

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[340] Convention on the Rights of Persons with Disabilities, 2014, p. 19
[341] Convention on the Rights of Persons with Disabilities, 2014, p. 20
[342] Convention on the Rights of Persons with Disabilities, 2014, p. 20
[343] Convention on the Rights of Persons with Disabilities, 2014, p. 20
[344] Government of Newfoundland and Labrador. "Access. Inclusion. Equality." N.d., Retrieved from: https://www.gov.nl.ca/cssd/disabilities/strategy/
[345] MedicAlert Connect Protect. *MedicAlert Foundation of Canada.* 2019. Retrieved from: https://www.medicalert.ca/Programs/MedicAlert-Connect-Protect
[346] Coalition of Persons with Disabilities Newfoundland and Labrador (COD-NL). "Shared Responsibility, A Resource for First Responders and Community Leaders". March 2015. Retrieved from: https://codnl.ca/emergency-preparedness/, p.i
[347] COD-NL, 2015, p. ii
[348] COD-NL, 2015, p. 5
[349] COD-NL, 2015, pp. 14-16
[350] COD-NL, 2015, pp. 26-27

3.5.12.2. Training Programs and Initiatives

Fire, Emergency and Corporate Services Branch provides [training on emergency preparedness](#).[351] Available courses include:

- Basic Emergency Management. This course is intended for officials from all levels of government, emergency management coordinators, emergency responders, volunteers, private sector representatives etc. The course provides information on mitigation of, preparation for, response to and recovery from emergencies.
- Emergency Operations Centre Management (EOCM). This course is intended for members of an EOC and provides information on activating, organizing and exercising an EOC.
- Incident Command System (ICS). This course provides information on the province's ICS, which coordinates an emergency response.
- Exercise Program Management. This course provides knowledge and skills to develop, conduct, evaluate and implement post-exercise requirements for a discussion-based exercise (e.g. a Tabletop Exercise).
- Crisis Communications Workshop. This is intended for municipal staff and politicians, local service district representatives, fire department officials and other emergency service organization representatives and provides information on communications before, during and after emergencies. The course introduces the Crisis Communications Guidebook for Municipalities and Emergency Fire Responders for use before, during and after an emergency or disaster.
- Basic Public Information Officer. This workshop is for municipal/local service district and/or fire department officials and other emergency service organization representatives and provides information on media relations and communications during a disaster.

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[351] Government of Newfoundland and Labrador. "Emergency Service Courses." Fire, Emergency and Corporate Services. Retrieved from: https://www.gov.nl.ca/fes/training/emcourses.html

Part C

4. <u>International Legal and Policy Context</u>

4.1.   Summary of the International Policy Context

The focus on persons with disabilities in emergency management has been rapidly growing nationally and internationally since the introduction of the <u>United Nations Convention on the Rights of Persons with Disabilities</u>, especially during the past five to ten years. International frameworks such as the Sendai Framework recommend centring persons with disabilities in emergency preparedness initiatives and implementing principles of universal design. Humanity & Inclusion uses the term "Inclusive Disaster Risk Reduction (DRR)", which emphasizes the need for inclusive principles in emergency preparedness efforts. Furthermore, the <u>Dhaka Declaration</u> calls for all stakeholders, including governments and non-government entities, to include persons with disabilities in their implementation of the Sendai Framework and Sustainable Development Goals.[352]

Canada is a party to the UNCRPD, which asserts the rights of persons with disabilities. [353] It states that all parties will ensure and promote the "full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability".[354] Measures include taking legal or administrative action to ensure equality for persons with disabilities in all policies and programs.[355] Article 11 relates specifically to situations of risk and humanitarian emergencies, and asserts that "countries must account for the protection of persons with disabilities in situations of risk (e.g. armed conflict, humanitarian emergencies, and natural disasters)".[356] States Parties to the UNCRPD must report to the Committee about progress implementing the Convention, including activities relevant to Article 11.[357]

The sections below outline some of the key international policy frameworks and documents that guide many countries on approaches to emergency management and rights of persons with disabilities. Where possible, these policies are discussed in relation to information gathering, standard setting and behaviour modification.

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[352] Dhaka Conference on Disability & Disaster Risk Management. "The Dhaka Declaration on Disability and Disaster Risk Management 2015+¹". May 2018. Retrieved from: http://dkconf18.modmr.gov.bd/wp-content/uploads/2018/05/Dhaka-Declaration-2018.pdf, p.1

[353] United Nations. "Convention on the Rights of Persons with Disabilities (CRPD)". December 13th, 2006. Retrieved from: https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html

[354] UNCRPD, 2006

[355] UNCRPD, 2006

[356] UNCRPD, 2006

[357] United Nations, "Elected Members of the Committee on the Rights of Persons with Disabilities", 2019

4.2. Sendai Framework

In 2015, the UN member states, including Canada, agreed to implement the Sendai Framework for Disaster Risk Reduction (DRR). The Sendai Framework follows on the "Hyogo Framework for Action (HFA) 2005–2015: Building the Resilience of Nations and Communities to Disasters".[358] The key difference is that the Sendai Framework focuses on disaster risk management as opposed to disaster management.[359] It emphasizes that DRR necessitates all-of-society engagement and requires inclusive and accessible participation.[360] To effectively reduce risks, those disproportionately affected by disasters because of age, race, gender, disability or cultural perspective should be a specific consideration in DRR.[361]

The Sendai Framework emphasizes the following four priorities:

> Priority 1 – Understanding disaster risk (e.g. vulnerability, capacity, exposure of persons and assets, hazard, environment).[362]

> Priority 2 – Strengthening disaster risk governance to manage disaster risk (e.g. national, regional and global levels) and ensure coherence between initiatives at various levels.[363]

> Priority 3 – Investing in disaster risk reduction for resilience by both the public and private sectors is "essential to enhance economic, social, health and cultural resilience of persons, communities, countries and their assets, as well as the environment".[364]

> Priority 4 – Enhancing disaster preparedness for effective response, and to "Build Back Better" in the recovery phase.[365] Specifically, this priority states that women and persons with disabilities should publicly lead and promote "gender-equitable and universally accessible approaches" during emergency response and recovery stages.[366]

The Sendai Framework advocates for a people-centred approach to DRR and asserts that to be effective, DRR practices must be multi-sectoral, multi-hazard, inclusive and accessible.[367] Relevant stakeholders such as women, youth, persons with disabilities, poor people, migrants, indigenous peoples and the elderly should be included in the design and implementation of DRR policies and programs.[368] With respect to persons with disabilities, the Sendai Framework emphasizes that perspectives of persons with disabilities and their advocacy organizations be

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[358] United Nations Office for Disaster Risk Reduction. "Sendai Framework for Disaster Risk Reduction", 2015. Retrieved from: https://www.undrr.org/, p.5

[359] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.5

[360] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.10

[361] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.10

[362] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p. 36

[363] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p. 36

[364] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.36

[365] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.36

[366366] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.36

[367] United Nations Office for Disaster Risk Reduction, 2015, Sendai Framework", p.10

[368] United Nations Office for Disaster Risk Reduction, 2015, Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – Canada". February 11, 2014. Retrieved from: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=4&DocTypeID=29 p.10

considered when assessing disaster risks and designing mitigation strategies (e.g. principles of universal design).[369]

4.3. Dhaka Conferences (2015 & 2018)

In 2015 the Dhaka Conference on Disability & Disaster Risk Management released the Dhaka Declaration to act as guidelines to support the inclusive implementation of the Sendai Framework and Sustainable Development Goals. The conference registered a total of 414 participants, of which 28% were female and 34% were persons with disabilities. Conference attendees came from 25 countries, including Afghanistan, Chile, England, Scotland, United States of America, Vietnam, Hong Kong, Kenya, Japan, India, Palestine, South Africa and Switzerland. Canada did not participate in the 2015 Dhaka Conference.

In May 2018, a follow-up Dhaka Conference was held and signatories established updates to the 2015 Dhaka Declaration to reaffirm it as a guideline for all stakeholders, including governments and non-governmental entities, to include persons with disabilities in their implementation of the Sendai Framework and Sustainable Development Goals.[370]

Motivated by the recognition that disasters have a disproportionate impact on persons with disabilities, the Dhaka Declaration encourages governments at all levels and organizations across all sectors to cooperate to establish inclusive risk-management policies and practices. As the numbers of disasters increase, the impact on vulnerable populations is of growing concern. Reports from 2004–2014 indicate that the mortality rate for persons with disabilities was two to four times greater than for other population groups.[371] Climate change also has a disproportionate impact on individuals in poverty, and persons with disabilities account for 20% of the poorest people globally.[372]

Persons with disabilities are often excluded from disaster risk management processes and decision-making at local, regional and national levels. The first "Living with Disability and Disasters" survey indicated that 85% of persons with disabilities across 137 countries had not participated in a community-based disaster risk-management reduction process, and half of those respondents indicated interest in participating in such an exercise.[373] This survey was developed by the United Nations Office for Disaster Risk Reduction (UNDRR). The Sendai Framework for Disaster Risk Reduction 2015–2030 included persons with disabilities in its development and was guided by the concept of being people people-centered.[374]

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[369] United Nations Office for Disaster Risk Reduction, 2015, p. 23

[370] Dhaka Conference on Disability & Disaster Risk Management. "The Dhaka Declaration on Disability and Disaster Risk Management 2015+1". May 2018. Retrieved from: http://dkconf18.modmr.gov.bd/wp-content/uploads/2018/05/Dhaka-Declaration-2018.pdf, p.1

[371] Dhaka Conference on Disability & Disaster Risk Management. "The Dhaka Declaration on Disability and Disaster Risk Management". December 2015. Retrieved from: https://www.preventionweb.net/english/professional/policies/v.php?id=47093, p.1

[372] Dhaka Conference on Disability & Disaster Risk Management, 2015, p.1

[373] Dhaka Conference on Disability & Disaster Risk Management, 2015, p.1

[374] Dhaka Conference on Disability & Disaster Risk Management, 2015, pp.1-2

The Dhaka Declaration notes that gender, age, disability, culture, geography and socio-economic circumstances, and any intersection thereof, factor into the degree of impact of disasters have on individuals and communities.[375] The Sendai Framework and the UNCRPD call on signatories to address vulnerabilities, discrimination, marginalization and inequality in disaster risk management at all levels of government.[376]

The Dhaka Declaration calls for governments and stakeholders to:[377]

- Implement UNCRPD and other human rights legislation to ensure the full participation and inclusion of persons with disabilities in disaster risk-management processes. There is a specific action for Disaster Risk Management Committees at all levels to ensure representation for persons with disabilities, with considerations given to gender, in at least two countries per region by the end of 2017.
- Meaningfully engage persons with disabilities, including disabled people's organizations (DPOs) at all levels, to implement the Sendai Framework. There is a specific action for at least two countries per region to create inclusive Community Risk Assessment and Risk Reduction Action Plan Frameworks for disaster risk management that identify and address barriers to participation in decision-making for persons with disabilities by the end of 2017.
- Strengthen governance, partnership and cooperation by encouraging collaboration between local and national governments, private sector, NGOs, academia, DPOs and the general public. There is a specific action to establish multi-stakeholder platforms to implement the Sendai Framework in at least five countries per region by the end of 2017.
- Integrate disaggregated data on gender, age and disability.
- Ensure that governments and other stakeholders set up an effective mechanism and guidelines to collect sex, age and disability disaggregated data at pre- and post-disaster situations. There is a specific action for at least two countries per region to establish mechanisms and guidelines to collect these data and inform stakeholder organizations about appropriate practice by the end of 2017.
- Promote empowerment and protection by supporting inclusive community-based risk management initiatives, risk analyses and data collection to inform early warning systems and disaster preparedness plans at all levels. There is a specific action to develop people-centred multi-hazard early warning systems in at least two countries per region by the end of 2017.
- Remove cultural, economic, social, physical, communication and behavioural barriers to reduce impacts of disasters on persons with disabilities by enhancing self-reliance of persons with disabilities at all levels by implementing 'build better' and resilient universal design approaches.

The Declaration calls for the removal of barriers throughout society to reduce the impact of disasters on persons with disabilities.[378] This is of particular importance for tools and devices relating to technology, information and communications.[379] Specific actions include that at least two countries per region will use the universal principles of design to enforce accessible and resilient infrastructure developments, including schools, hospitals and shelters, by the end of

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[375] Dhaka Conference on Disability & Disaster Risk Management, 2015, p.3
[376] Dhaka Conference on Disability & Disaster Risk Management, 2015, p. 3
[377] Dhaka Conference on Disability & Disaster Risk Management, 2015, pp. 3-4
[378] Dhaka Conference on Disability & Disaster Risk Management, 2015, p. 4
[379] Dhaka Conference on Disability & Disaster Risk Management, 2015, p. 4

2017. Any lessons learned are to be shared in regional and global consultations.[380] Two countries per region are also called on to support replicating technology and devices to encourage inclusive emergency responses by the end of 2017.[381]

In May 2018, a follow-up Dhaka Conference was held and signatories incorporated updates to the 2015 Dhaka Declaration to reaffirm the Declaration as a guide for all stakeholders, including governments and non-government entities, to include persons with disabilities in their implementation of the Sendai Framework and Sustainable Development Goals.[382] The second conference included representatives from Governments, DPOs, UN agencies, professionals, the private sector and academics from 32 countries.[383]

Over the past decade, disasters have cost US$520 billion and have disproportionately impacted persons with disabilities because this population has a disaster mortality rate two to four times higher than other population groups.[384] The UNDRR survey highlighted that the main reason for this is the exclusion of persons with disabilities from disaster risk-management processes.[385] The Declaration highlights commitments to persons with disabilities in emergency responses as outlined in the UNCRPD Article 11, 2030 Agenda for Sustainable Development Goals, the Sendai Framework, Paris Climate Agreement and World Humanitarian Summit.[386]

The Declaration calls on governments, regional entities, the private sector and other stakeholders to:[387]

- Ensure a people-centred approach by encouraging the participation and leadership of persons with disabilities and DPOs within disaster risk-management at all levels of government. Specific actions include assuring gender and age representation on Disaster Risk Management Committees, development of inclusive Community Risk Assessments and Risk Reduction action plans. Particular consideration should be given to addressing barriers limiting participation of persons with disabilities at decision-making levels. An additional specific action is to have at least 20 countries integrate the reporting, implementation and monitoring of the Sendai Framework, as outlined in the 2015 Dhaka Declaration, into a global platform by April 2019.
- Strengthen governance, partnership and cooperation by increasing collaboration between all levels of government, the UN, NGOs, DPOs, academia, professionals, the private sector and general public to implement the Sendai Framework. A specific action is to have at least 20 countries engage in multi-stakeholder platforms to implement the Sendai Framework.
- Integrate disaggregated data on sex, age and disability throughout each phase of disaster risk management, and ensure effective mechanisms are implemented and guidelines are followed in the collection of these data. A specific action is to have at least 20 countries implement effective mechanisms and guidelines to collect and analyze disaggregated data on sex, age, gender and disability to inform disaster risk management policy and practice, including monitoring the implementation of the Sendai Framework by 2021.

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[380] Dhaka Conference on Disability & Disaster Risk Management, 2015, p. 4
[381] Dhaka Conference on Disability & Disaster Risk Management, 2015, p. 4
[382] Dhaka Conference on Disability & Disaster Risk Management, 2018, p. 1
[383] Dhaka Conference on Disability & Disaster Risk Management, 2018, p. 1
[384] Dhaka Conference on Disability & Disaster Risk Management, 2018, p. 1
[385] Dhaka Conference on Disability & Disaster Risk Management, 2018, p. 1
[386] Dhaka Conference on Disability & Disaster Risk Management, 2018, p. 1
[387] Dhaka Conference on Disability & Disaster Risk Management, 2018, pp. 1-3

- Promote empowerment by supporting inclusive and accessible community-based disaster risk-management initiatives, including data collection and analysis, to inform risk-management initiatives at all levels of government, such as early warning systems and disaster preparedness plans. One specific action is to have at least 20 countries develop accessible multi-hazard early warning systems by 2021. The second specific action is to have the UN Inter-Agency Standing Committee endorse guidelines on the inclusion of persons with disabilities in humanitarian action by the end of 2021.
- Encourage self-reliance of both persons with disabilities and caregivers at all levels by removing social, cultural, economic, physical and behavioural barriers. This movement can be supported by engaging and guiding the private sector to use 'build better' and resilient universal design approaches, particularly with respect to information communication and technology and devices for disaster risk reduction. Specific actions include at least 20 countries implementing universal design principles to build resilient infrastructure, ensure access and affordability of technology and devices used in emergency responses at all levels, and improve accessibility of services for persons with disabilities that promote psychosocial wellbeing and social protection by the end of 2021.
- Report on progress in implementing the Dhaka Declaration 2015 and 2018 and incorporate this in action plans to implement the Sendai Framework. An additional action is to have most countries endorse and report on implementing the Dhaka Declaration 2018 by 2021.
- Declare disaster risk reduction as a national priority in coordination with other governments and DPOs at all levels and report on progress in implementing this Declaration and inclusive implementation of the Sendai Framework. A specific action is to have DPOs and organizations working in disability and disaster risk reduction review the progress made on the inclusive implementation of the Sendai Framework in their areas by the end of 2021.
- Encourage knowledge sharing among governments, UN agencies, DPOs, NGOs, academia and the private sector to enhance inclusion of persons with disabilities in disaster risk management. A specific action is to have at least 20 countries establish initiatives to share knowledge.

4.4. United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

The sections below summarize information collected from the *Consideration of reports submitted by States parties under article 35 of the Convention* on the Rights of Persons with Disabilities for each jurisdiction (Canada, United Kingdom, United States, European Union, Australia and New Zealand).

4.4.1. Canada's Submission to the UN Committee on the Rights of Persons with Disabilities

Canada is a party to the UNCRPD which states that all parties will ensure and promote the "full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability".[388] Measures include taking legal or administrative action to ensure equality for persons with disabilities in all policies and programs.[389] Article 11 relates specifically to situations of risk and humanitarian emergencies, and asserts that "countries must account for the protection of persons with disabilities in situations of risk (e.g. armed conflict, humanitarian emergencies and natural disasters)".[390] The UNCRPD also outlines the concept of "universal design" to refer to the design of products, environments and programs that are accessible to all without necessary adaptation or accommodation.[391]

The Committee on the Rights of Persons with Disabilities monitors the implementation of the Convention by the States Parties.[392] The Committee is composed of 18 independent experts who are elected to the committee.[393] States Parties to the UNCRPD must report to the Committee about progress implementing the Convention within two years of signing on, and every four years thereafter.[394] The Optional Protocol of the UNCRPD empowers the Committee to examine individual complaints and evidence of "grave and systemic violations of the Convention."[395] The Committee also has the ability to elaborate on the meaning of provisions made in the Convention.[396]

Canada is expected to submit reports to the United Nations on its implementation of the UNCRPD and collaborates with P/T governments on the report via Canadian Heritage and the

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[388] UNCRPD, 2006

[389] UNCRPD, 2006

[390] UNCRPD, 2006

[391] UNCRPD, 2006

[392] United Nations Office of the Human Rights Commissioner (UNOHRC). "Elected Members of the Committee on the Rights of Persons with Disabilities". Committee on the Rights of Persons with Disabilities. 2019. Retrieved from: https://www.ohchr.org/EN/HRBodies/CRPD/Pages/Membership.aspx

[393] United Nations. "Committee on the Rights of Persons with Disabilities." 2019. Retrieved from: https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/committee-on-the-rights-of-persons-with-disabilities-3.html

[394] United Nations, "Elected Members of the Committee on the Rights of Persons with Disabilities", 2019

[395] United Nations, "Elected Members of the Committee on the Rights of Persons with Disabilities", 2019

[396] United Nations, "Elected Members of the Committee on the Rights of Persons with Disabilities", 2019

Continuing Committee of Officials on Human Rights (CCOHR). In the *Consideration of Reports submitted by States parties under article 35 of the Convention* to the Committee on the Rights of Persons with Disabilities, the Government of Canada reported on steps taken to address Article 11 of the UNCRPD.[397] This article pertains to the responsibility of States Parties to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters. In this submission, in 2014, the Government of Canada identified its comprehensive emergency management framework as inclusive of the needs of persons with disabilities.[398]

The Government of Canada collaborates with P/T governments on the drafting of these reports. The following highlights some of the examples of provincial activities that have been identified in Canada's 2014 report to the UN. It is important to note that these reports to the UN have a limited word count, and therefore are not an exhaustive list of all activities to support persons with disabilities.

- British Columbia: Community Living British Columbia's website Icanbesafeonline.com, launched in 2011, was recognized as Canada's first website dedicated to educating adults with developmental disabilities and their families on accessing the internet safely.[399]
- Alberta: Alberta Fire Code 2006 is identified for its requirement for buildings to have Fire Safety Plans that include provisions for the emergency evacuation for persons who require assistance.[400]
- Saskatchewan: the right of persons with disabilities to access information was highlighted by Saskatchewan's initiative to ensure that information is accessible to persons with disabilities in a timely manner and with no additional cost.[401]
- Manitoba: Disability Emergency Management Network Manitoba is highlighted as a coalition of community disability and seniors' organizations, emergency responders and Manitoba's Disabilities Issues Office.[402] This network is responsible for educating and meeting the needs of persons with disabilities.[403]
- Yukon: All facilities under the authority of the Health and Social Services department have emergency processes in place to ensure that the needs of persons with disabilities are included in emergency plans.[404]
- Nunavut: The report highlighted translation efforts by the Government of Nunavut to translate the *Emergency Preparedness Guide for People with Disabilities/Special Needs* into Inuktituk and Inuinnaqtun to ensure it is more accessible to residents.[405]

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[397] Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – Canada". February 11th, 2014. Retrieved from:
https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=4&DocTypeID=29
[398] Committee on the Rights of Persons with disabilities, 2014, p. 14
[399] Committee on the Rights of Persons with disabilities, 2014, p. 52
[400] Committee on the Rights of Persons with disabilities, 2014, p. 47
[401] Committee on the Rights of Persons with disabilities, 2014, p. 44
[402] Committee on the Rights of Persons with disabilities, 2014, p. 39
[403] Committee on the Rights of Persons with disabilities, 2014, p. 39
[404] Committee on the Rights of Persons with disabilities, 2014, p. 58
[405] Committee on the Rights of Persons with disabilities, 2014, p. 54

- Northwest Territories (NWT): The Government of the NWT works with the CNIB to provide residents with sight-related disabilities counselling services, education and coordination, rehabilitation services, assistive devices and specialized training.[406]
- Ontario: The Information and Communications Standards are identified as a requirement for organizations that prepare emergency information to provide this information publicly in an accessible format upon request.[407] In addition, under the Employment Standards, organizations must provide employees with disabilities with personalized workplace emergency safety information to prepare for potential workplace emergencies.[408]
- Quebec: the right of persons with disabilities to access information and services was highlighted by Quebec's requirement for Government agencies to offer adaptive communication equipment, comply with three web accessibility standards and ensure access to documents and services for persons with disabilities.[409]
- New Brunswick: The New Brunswick Emergency Measures Organization was identified as the unit responsible to coordinate provincial preparedness for emergencies, including training and advising responder agencies on processes to identify and assist persons with disabilities during disasters.[410]
- Prince Edward Island (PEI): The PEI Emergency Measures Organization was identified as the unit responsible for the development and coordination of an overall provincial emergency management program, including response strategies for persons with disabilities. Additionally, the 911 Administration Office collaborated with the PEI Chapter of the Canadian Hard of Hearing Association to develop guidelines for making a 9-1-1 call, for persons who are hard of hearing.[411]
- Nova Scotia: The right of persons with disabilities to access government services was highlighted by the Nova Scotia Public Service Commission Sign Language Interpreter Services Policy for interpreters to be made available for the deaf and hard-of-hearing.[412]
- Newfoundland: The Government of Newfoundland and Labrador's Emergency Social Services Program reported to have hosted information-gathering sessions with the Coalition of Persons with Disabilities to ensure their needs are included in emergency processes.[413]

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[406] Committee on the Rights of Persons with disabilities, 2014, p. 56
[407] Committee on the Rights of Persons with disabilities, 2014, p. 36
[408] Committee on the Rights of Persons with disabilities, 2014, p. 36
[409] Committee on the Rights of Persons with disabilities, 2014, p. 34
[410] Committee on the Rights of Persons with disabilities, 2014, p. 30
[411] Committee on the Rights of Persons with disabilities, 2014, p. 24
[412] Committee on the Rights of Persons with disabilities, 2014, p. 27
[413] Committee on the Rights of Persons with disabilities, 2014, p. 21

4.4.2. United Kingdom's Submission to the UN Committee on the Rights of Persons with Disabilities

The Government of the United Kingdom is expected to submit reports to the United Nations on its implementation of the UNCRPD. In the *Consideration of Reports submitted by States parties under article 35 of the Convention* to the Committee on the Rights of Persons with Disabilities, the EU reported on steps taken to address the Articles of the UNCRPD.

In Great Britain, the *Equality Act* protects all citizens from discrimination based on gender and disability.[414] The Government has also recognized the importance of disabled people's user-led organizations (DPULOs) in communicating and sharing information with persons with disabilities, as well as advocating for persons with disabilities to decision-makers.[415]

The UK Government has established an e-Accessibility Forum, composed of representatives from government, industry and voluntary organizations, to implement the "eAccessibiity Plan" to ensure services are inclusive.[416] The Minister of Disabled Persons aims to incorporate articles of the UNCRPD into departmental policy-making frameworks.[417]

With regards to persons with disabilities and emergencies, the *Civil Contingencies Act (2004)* requires those responsible for emergency services (e.g. local authorities, fire and police services, health services) to have plans in place for each stage of an emergency that integrates needs of persons with disabilities.[418] Accessible information has been identified as a key focus going forward.[419] The *Equality Act* includes provisions to ensure accessible formats for communication and all public services are expected to have accessible communications methods.[420] Furthermore, the UK recognizes the importance of changing attitudes and addressing stigma towards persons with disabilities, particularly in the health sector or labour force.[421]

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[414] Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – United Kingdom of Great Britain and Northern Ireland". July 3, 2013. Retrieved from: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fGBR%2f1&Lang=en, p.14

[415] Committee on the Rights of Persons with Disabilities, 2013, p. 16

[416] Committee on the Rights of Persons with Disabilities, 2013, p. 17

[417] Committee on the Rights of Persons with Disabilities, 2013, p. 60

[418] Committee on the Rights of Persons with Disabilities, 2013, p. 19

[419] Committee on the Rights of Persons with Disabilities, 2013, p. 19

[420] Committee on the Rights of Persons with Disabilities, 2013, p. 35

[421] Committee on the Rights of Persons with Disabilities, 2013, p. 45

4.4.3. European Union's Submission to the UN Committee on the Rights of Persons with Disabilities

The EU is expected to submit reports to the United Nations on its implementation of the UNCRPD. In *the Consideration of Reports submitted by States parties under article 35 of the Convention* to the Committee on the Rights of Persons with Disabilities, the EU reported on steps taken to address the Articles of the UNCRPD.

In its 2014 submission, the EU highlighted the "Electronic Communications Framework Directive" that aims to "establish a harmonised framework for the regulation of electronic communications services, networks, associated facilities and services, and certain aspects of terminal equipment to facilitate access for disabled users."[422] The communications framework is part of a Telecommunications Package that included the "Universal Service Directive" on universal services relating to electronic communications networks and services, including emergency services.[423] The "Radio and Telecommunications Terminal Equipment (R&TTE) Directive" requires equipment to be designed to be used by persons with disabilities.[424] In 2012, a proposal was made for a directive aimed to establish standards for web accessibility of all public sector websites.[425] EU institutions already adhere to a standard of web accessibility,[426] as well having audit processes to assess web accessibility.[427]

The EU also reported on initiatives to ensure civil protection and provide humanitarian aid for persons with disabilities.[428] In this report, a process was highlighted in which persons with reduced mobility could contact the 24-hour emergency number to enable fire officers to assist during an emergency or evacuation.[429] Furthermore, the Work Forum on the Implementation of the UN Convention supports information-sharing and mutual learning among EU institutions, Member States, international bodies and organizations representing persons with disabilities.[430]

The European Disability Strategy (2010–2020) mandates collecting statistics and data "that reflect the barriers preventing people with disabilities from exercising their rights", including disaggregated data.[431]

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[422] Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – European Union". June 5, 2014, pp. 18-19. Retrieved from:
https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=4&DocTypeID=29
[423] Committee on the Rights of Persons with Disabilities, 2014, pp. 18-19
[424] Committee on the Rights of Persons with Disabilities, 2014, p. 19
[425] Committee on the Rights of Persons with Disabilities, 2014, p. 19
[426] Committee on the Rights of Persons with Disabilities, 2014, p. 73
[427] Committee on the Rights of Persons with Disabilities, 2014, p. 73
[428] Committee on the Rights of Persons with Disabilities, 2014, p. 21
[429] Committee on the Rights of Persons with Disabilities, 2014, p. 74
[430] Committee on the Rights of Persons with Disabilities, 2014, p. 68
[431] Committee on the Rights of Persons with Disabilities, 2014, p. 59

4.4.4. **Australia's Submission to the UN Committee on the Rights of Persons with Disabilities**

The Government of Australia is expected to submit reports to the United Nations on its implementation of the UNCRPD. In the *Consideration of Reports submitted by States parties under article 35 of the Convention* to the Committee on the Rights of Persons with Disabilities, Australia reported on steps taken to address the Articles of the UNCRPD.

The Australian and State and Territory and Local Governments have developed a National Disability Strategy (NDS). The strategy aims to promote social inclusion for persons with disabilities by reducing barriers and includes a framework to promote, protect and monitor the implementation of the UNCRPD.[432] The Government of Australia has also created a Disabilities and Carer Council to provide expert advice on developing and implementing the NDS. This Council includes representation of persons with disabilities and their families, carers, industry and union representatives, as well as academics. The Council released a report on the consultations entitled *Shut Out: The Experience of People with Disabilities and their Families in Australia,* which identified a number of systemic obstacles to full participation by persons with disabilities.[433] The National Disability Agreement (NDA) asserts the commitment by all Australian governments to improve outcomes for persons with disabilities at all levels.[434] NDA aims to ensure equal access to government services.[435] Additionally, all Australian states and territories have disability action plans to ensure access and inclusion for persons with disabilities across public sector entities.[436]

To address Article 11 for situations of risk and humanitarian emergencies, the Government of Australia developed the "National Principles for Disaster Recovery" in partnership with territory and state governments, as well as the Australian Red Cross.[437] These "National Principles" emphasize that disaster recovery efforts should support the most vulnerable.[438] Furthermore, these National Principles have been integrated into resources offered by various Australian States (e.g. Victoria and Queensland).[439]

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[432] Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – Australia". June 7th, 2012. Retrieved from: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fNZL%2f1&Lang=en, pp.9-10

[433] Committee on the Rights of Persons with Disabilities, 2012, pp. 9-10

[434] Committee on the Rights of Persons with Disabilities, 2012, p. 10

[435] Committee on the Rights of Persons with Disabilities, 2012, p. 10

[436] Committee on the Rights of Persons with Disabilities, 2012, p. 11

[437] Committee on the Rights of Persons with Disabilities, 2012, p. 15

[438] Committee on the Rights of Persons with Disabilities, 2012, p. 15

[439] Committee on the Rights of Persons with Disabilities, 2012, p. 15

4.4.5. **New Zealand's Submission to the UN Committee on the Rights of Persons with Disabilities**

The Government of New Zealand (NZ) is expected to submit reports to the United Nations on its implementation of the UNCRPD. In the *Consideration of Reports submitted by States parties under article 35 of the Convention* to the Committee on the Rights of Persons with Disabilities, New Zealand reported on steps taken to address the Articles of the UNCRPD.

The Government of NZ has made efforts to consult and partner with persons with disabilities, including the establishment of the Office for Disability Issues, the Ministerial Committee on Disability Issues (led by the Minister of Disability Issues), specialized disability advisory groups, the Human Rights Commission and the Mental Health Commission.[440] Moreover, the Government of NZ helped fund the creation of the Pacific Disability Forum in 2004 to bring together Pacific disabled persons' organizations.[441] The Pacific Disability Forum includes representation of Pacific Nations outside of New Zealand, including but not limited to Tonga, Samoa, Fiji, Australia and Papua New Guinea, and continues to represent Pacific persons with disabilities today.

Anti-discrimination laws are in place to ensure public access to infrastructure, transportation and communications.[442] The Government of NZ communicates with the public through a variety of formats (e.g. braille, audio, video) and promotes web accessibility standards.[443] Assistive technology to communicate may also be provided by Government.[444] Additionally, NZ Sign Language (NZSL) is recognized as an official language, which allows for its use in legal proceedings and provisions to use interpreters when communicating with the Government.[445] The Government of NZ has also implemented specific initiatives to address the needs of the Māori and Pacific people, particularly persons with disabilities. Health and disability service standards recognize the importance of integrating the values and beliefs of Māori and Pacific people to ensure services meet individual and cultural values and beliefs.[446]

The Government of NZ recognizes that stigma is a key barrier preventing persons with disabilities from fully participating in society, and therefore changing attitudes is highlighted as a primary goal of the Human Rights Commission.[447] Improving data collection is also identified as a key goal for the Government of NZ.[448]

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[440] Committee on the Rights of Persons with Disabilities. "Consideration of reports submitted by States parties under article 35 of the Convention – New Zealand." March 31, 2011. Retrieved from: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fNZL%2f1&Lang=en, p.7

[441] Committee on the Rights of Persons with Disabilities, 2011, p. 43

[442] Committee on the Rights of Persons with Disabilities, 2011, p. 12

[443] Committee on the Rights of Persons with Disabilities, 2011, pp. 13-15

[444] Committee on the Rights of Persons with Disabilities, 2011, p. 33

[445] Committee on the Rights of Persons with Disabilities, 2011, p. 33

[446] Committee on the Rights of Persons with Disabilities, 2011, p. 33

[447] Committee on the Rights of Persons with Disabilities, 2011, p. 36

[448] Committee on the Rights of Persons with Disabilities, 2011, p. 43

Emergency management practices also must meet the needs of persons with disabilities, including emergency planning and response.[449] Resources have been developed to support emergency preparedness, particularly for persons with disabilities.[450]

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[449] Committee on the Rights of Persons with Disabilities, 2011, p. 15
[450] Committee on the Rights of Persons with Disabilities, 2011, p. 15

5. <u>International Strategies to Integrate Persons with Disabilities into Emergency Management</u>

5.1. Summary of International Strategies to Integrate Persons with Disabilities into Emergency Management

There is agreement across international jurisdictions (e.g. United States, European Union, United Kingdom, Australia, New Zealand) that the access and functional needs of persons with disabilities should be integrated at each stage of an emergency – planning, response and recovery. Not only is this an effective approach to DRR and enhancing resiliency at the individual and community levels, but the accessibility of emergency management services is mandated under international law. Article 11 of the UNCRPD asserts the rights of persons with disabilities to access support during an emergency.

It is evident that data collection about persons with disabilities is a key focus for many jurisdictions; however, issues with the aggregation of data and lack of data about specific populations (e.g. Indigenous, First Nations) is evident across jurisdictions. While data collection and are necessary to address needs of persons with disabilities, they can be ineffective without appropriate data collection and management processes.

Standard setting has also been a primary area of action to address the rights of persons with disabilities in various jurisdictions. Many have implemented human rights legislation to protect persons with disabilities from discrimination based on disability. Standards are also evident in the many resources that governments have created. These include resources about how persons with disabilities should support themselves in an emergency and how emergency responders can support persons with disabilities. While standards are important to outline what can be expected in a process, they can be meaningless without appropriate monitoring and enforcement.

While many jurisdictions have made advances in key areas, such as information and communication practices, the integration of persons with disabilities and their advocacy organizations into emergency planning and response processes continues to be a recommended area of focus. Additionally, many governments have created training and educational resources to support persons with disabilities to prepare for an emergency. Many jurisdictions outline practices to collect data, share information and develop standards; however, many jurisdictions further note that efforts to change negative attitudes and behaviours have been challenging. There is recognition that negative behaviour and attitudes towards persons with disabilities can themselves be barriers to participation. Therefore, there is a need to address stigma and change behaviour towards people with disabilities, and this includes perceptions that focus on the disability as opposed to the person. This can be seen in person-centred and functional needs assessment approaches to emergency preparedness, as well as education and training programs to reduce stigma. While this area is challenging to address, it is evident that many jurisdictions are making progress to change perceptions of persons with disabilities, particularly within emergency management.

The sections below detail information collected from international jurisdictions (United Kingdom, United States of America, European Union, Australia, and New Zealand) relating to their internal policies and practices to integrate the needs of persons with disabilities into emergency management processes.

5.2. United Kingdom

The United Kingdom implemented the *Disability Discrimination Act* in 1995.[451] This *Act* prohibits discrimination against persons with disabilities, particularly in the areas of employment, education, transportation, and access to goods and services.[452] The *Act* also established the National Council (now replaced by the Equality and Human Rights Commission).[453] In 2010, the *Equality Act* was implemented to reduce socio-economic inequalities and expand on efforts to prevent discrimination on the basis of personal characteristics (e.g., disability).[454]

The UK's Department for International Development has released a *Disability Inclusion Strategy* to guide international aid efforts and outline the Government's commitment to support persons with disabilities in international development activities.[455] In the 2019 Queen's Speech from the Throne, the Government outlined plans to establish a National Disability Strategy in 2020.[456]

In the United Kingdom, the "Preparing for Emergencies: Guide for Communities" emphasizes the importance of involving community members to enhance the resilience of the community. Some of the key features of resilient communities include effective communication and engagement of community members, awareness of risks and vulnerabilities, coordination with local emergency responders and optimization of existing knowledge and resources.[457] The following five steps are identified as supporting community resiliency:

- Begin by considering who the members of your community are and what communities you belong to
- Get in touch with existing local networks you can work with
- Choose a community representative for your emergency plan

[451] Government of the United Kingdom. "Disability Discrimination Act". 1995. Retrieved from: http://www.legislation.gov.uk/ukpga/1995/50/contents

[452] Government of the United Kingdom. "Disability Discrimination Act". 1995.

[453] Equality and Human Rights Commission. "About Us". 2020. Retrieved from: https://www.equalityhumanrights.com/en

[454] Government of the United Kingdom. "Equality Act". 2020. Retrieved from: http://www.legislation.gov.uk/ukpga/2010/15/contents

[455] Disability Rights United Kingdom. "Government announces plans for a National Disability Strategy". Retrieved from: https://www.disabilityrightsuk.org/news/2019/december/government-announces-plans-national-disability-strategy

[456] Department for International Development. "DFID's Disability Inclusion Strategy 2018 to 2023". Government of the United Kingdom. December 2018. Retrieved form: https://www.gov.uk/government/publications/dfids-disability-inclusion-strategy-2018-to-2023

[457] United Kingdom. "Preparing for Emergencies: Guide for communities". September 2016. Retrieved from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/552867/pfe_guide_for_communities.pdf, p. 5

- Establish a Community Emergency Group (or incorporate preparedness activities into an existing group)
- Develop a Community Emergency Plan.[458]

One of the key recommendations for emergency preparedness from the Government of the UK is for individuals to ensure they have adequate insurance coverage, particularly for flooding. Additionally, the Government recommends that individuals have emergency plans in place and prepare an emergency kit in advance, including considerations to relocate if they could not access their home in an emergency, and transportation options.[459]

To ensure emergency plans account for access and functional needs it is important to identify vulnerabilities in a community and establish methods to share this information with the local emergency responders. Local organizations, particularly, have valuable information about vulnerabilities in a community.[460] Furthermore, it is important to account for vulnerabilities throughout each stage of an emergency – planning, response and recovery.

The Government of the UK has created a toolkit to help communities create an emergency plan. The toolkit is intended to provide information on approaches to develop a community emergency plan.[461] This toolkit emphasizes the importance of identifying the community, personal connections between community members, the most vulnerable people, community skills, and resources and key locations.[462]

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[458] United Kingdom, "Preparing for Emergencies: Guide for Communities", 2016, p. 10
[459] Cabinet Office. N.d. "Preparing for Emergencies". Government of the United Kingdom. Retrieved from: https://www.gov.uk/government/publications/preparing-for-emergencies/preparing-for-emergencies
[460] United Kingdom, Community Emergency Planning Toolkit, p. 5
[461] United Kingdom. "Community Emergency Plan Toolkit". September 2016. Retrieved from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/552869/community_emergency_plan_toolkit.pdf, p. 3
[462] United Kingdom, Community Emergency Plan Toolkit, 2016, p. 3

5.3.   United States of America

The *Americans with Disabilities Act* (ADA) is a civil rights law that prohibits discrimination against people with disabilities in employment, access to public buildings and access to all government programs.[463] The ADA *Amendments Act (ADAAA)* further mandates that persons with access and functional needs be included in disaster plans for communities under Title II (i.e. State and Local government entities). Moreover, the ADA *Accessibility Guidelines (ADAG)* outline requirements for public buildings and facilities to be considered accessible under Title II and Title III of the ADA. In 2004, Executive Order 13347 – Individuals with Disabilities in Emergency Preparedness – created the Interagency Coordinating Council on Emergency Preparedness and Individuals with Disabilities (ICC). The ICC aims to ensure that the Federal Government "accounts for the safety and security of people with disabilities during disasters".[464] The ICC is composed of representatives from the Environmental Protection Agency, General Services Administration, Health and Human Services, Department of Transportation, Department of Justice, the U.S. Access Board, the National Council on Disability and the Federal Communications Commission.[465] The *Post-Katrina Emergency Reform* Act amended the *Homeland Security Act* of 2006. The aim of the Act was "to strengthen the Department of Homeland Security (DHS)/FEMA's ability to prevent, prepare for, protect against, respond to, and recover from disaster".[466] This resulted in the establishment of new roles within DHS, including the position of National Disability Coordinator (NDC). The Act also mandates the inclusion of people with disabilities, including "evacuation plans, accessible housing, and regional disability coordinators".[467]

5.3.1.   **Resources**

The United States Department of Health & Human Services has several resources to support jurisdictions in inclusive emergency management, including the integration of access and functional needs into emergency plans. The *Public Health Service (PHS) Act* mandates that considerations for "at-risk individuals" should be addressed in emergency plans and adhere to applicable requirements outlined in the *Americans with Disabilities Act (ADA).* The CMIST – Communication, Maintaining Health, Independence, Services and Support, Transportation – framework is recommended as a flexible approach to defining at-risk individuals to address a broad set of common access and functional needs (e.g. pregnant women, children, the elderly).

The listed resources include the Centers for Disease Control and Prevention (CDC) and Prevention Public Health Workbook on defining and reaching "vulnerable and at-risk populations" in an emergency to help planners better communicate emergency information,

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[463] United States Department of Health & Human Services. "Access and Functional Needs". Public Health Emergency. August 8, 2016. Retrieved from: https://www.phe.gov/Preparedness/planning/abc/Pages/afn-guidance.aspx

[464] United States Department of Health & Human Services, 2018

[465] United States Department of Health & Human Services, 2018

[466] United States Department of Health & Human Services, 2018

[467] United States Department of Health & Human Services, 2018

such as by establishing a Community Outreach Network (CON) of trusted community leaders to support effective and trusted information-sharing with communities.[468]

A toolkit has been developed for "State and Local Planning and Response" that highlights considerations for various types of disabilities and was developed with the support of the U.S. Department of Health and Human Services.[469] In particular, this guide includes strategies to monitor performance and evaluate emergency management processes. Strategies in the toolkit include the identification of vulnerable populations, direct involvement of persons with disabilities in all planning levels and acknowledging the value of their insights, preparing the community to support persons with disabilities, coordinating response efforts with relevant organizations, and promoting community resilience for special needs populations and an approach to emergency management.[470]The Federal Emergency Management Agency (FEMA) has also developed a guide to support various jurisdictions in developing and maintaining comprehensive emergency operations plans that incorporate access and functional needs into the planning.[471]

The American Disability Association (ADA) emphasizes that government has the responsibility to protect residents and visitors, including by establishing emergency shelters. Shelters are sometimes operated by government agencies, but more commonly by state and local governments or third-party organizations (e.g. American Red Cross).[472] Shelters must provide equal access to safety, food, services, comfort, information and sleeping arrangements and all these functions must be accessible to persons with disabilities.[473] The ADA has created an addendum to its "Toolkit for State and Local Governments" that outlines practices to ensure the accessibility of shelter facilities.

The ADA has created a toolkit for state and local governments with a chapter dedicated to ensuring accessibility of emergency programs and facilities.[474] This toolkit includes consideration for accessibility needs throughout each step of the emergency management process, such as preparation, notification, evacuation and transportation, sheltering, medical services, and transition back to the community.[475] The kit advocates ongoing advance planning with direct input from persons with disabilities as key to ensuring accessibility needs can be met. It identifies voluntary registries as helpful to ensure persons with disabilities are supported in an

[468] Department of Health and Human Services, Centers for Disease Control and Prevention, and Office of Public Health Preparedness and Response. "Public Health Workbook To Define, Locate, and Reach Special, Vulnerable, and At-risk Populations in an Emergency." 2018. Retrieved from: https://emergency.cdc.gov/workbook/index.asp

[469] Ringel, Jeanne S., Anita Chandra, Malcolm V. Williams, Karen A. Ricci, Alexandria Felton, David M. Adamson, Margaret Weden, and Meilinda Huang, Enhancing Public Health Emergency Preparedness for Special Needs Populations: A Toolkit for State and Local Planning and Response. Santa Monica, CA: RAND Corporation, 2009. https://www.rand.org/pubs/technical_reports/TR681.html

[470] Ringel et al., 2009

[471] Federal Emergency Management Agency. "Developing and Maintaining Emergency Operations Plans: Comprehensive Preparedness Guide (CPG) 101 Version 2.0." 2010. Retrieved from: https://www.fema.gov/media-library-data/20130726-1828-25045-0014/cpg_101_comprehensive_preparedness_guide_developing_and_maintaining_emergency_operations_plans_2010.pdf

[472] American Disability Association. "ADA Best Practices ToolKit for State and Local Governments. Chapter 7 Addendum 2: The ADA and Emergency Shelters: Access for All in Emergencies and Disasters." 2012. Retrieved from: https://www.ada.gov/pcatoolkit/chap7shelterprog.htm

[473] ADA, 2007

[474] American Disability Association (ADA). "ADA Best Practices ToolKit for State and Local Governments-Chapter 7." 2007. Retrieved from: https://www.ada.gov/pcatoolkit/chap7emergencymgmt.htm

[475] ADA, 2007

emergency. The toolkit includes many accessibility considerations for various areas of emergency management, including alert and communication, transportation, shelter, social services, incident management, and recovery.

Advance planning and ensuring facilities and programs are accessible often go hand in hand. For example, it is important to ensure that shelters will have access to sufficiently trained staff and volunteers. The ADA emphasizes the necessity of pre-planning and involving persons with disabilities in this process. It is also imperative to recognize the rights of persons with disabilities to make choices about where to shelter themselves and the importance of keeping families together. Moreover, eligibility criteria for residents to stay in shelters should not exclude persons with disabilities, including service animals. Reasonable modifications should be made to facilitate access to kitchen and food spaces in shelters, as well as sleeping arrangements, to ensure these services are accessible to everyone. Furthermore, accessibility of communication approaches and the shelter facilities are key considerations. This includes provisions for people to access medical assistive equipment, medication and supplies for service animals. The process to transition people from the shelter back into their communities must also be supportive and meet the needs of persons with disabilities.

In 2014, the National Council on Disability released the report, *Effective Communications for People with Disabilities: Before, During and After Emergencies.*[476] The report emphasizes the need to improve access to emergency services for deaf and hard of hearing individuals, and all people with disabilities.

The National Association for the Deaf outlines the following best practices for emergency communications:

- Set aside disability accommodation funds within the emergency budget, including funds for sign language interpreters and captioning.
- Include representatives from the deaf and hard of hearing community in all emergency planning and development of policies.
- Establish processes to immediately secure the services of qualified American Sign Language (ASL) interpreters during emergency press conferences.
- Ensure that the ASL interpreter secured for the emergency press conference is completely visible during the broadcast.
- Ensure that broadcasters can provide quality live captioning for all emergency broadcasts.
- Ensure that all emergency information provided online is fully accessible and includes captioning and ASL interpretation.
- Provide ongoing inclusive and accessible training to the deaf and hard of hearing community and to emergency management planners.
- Structure all Disaster Recovery Centers to be fully accessible to deaf and hard of hearing individuals.
- Incorporate texting capability with all N-1-1 services.

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[476] National Association of the Deaf. "Position Statement on Accessible Emergency Management for Deaf and Hard of Hearing People". 2016. Retrieved from: https://www.nad.org/about-us/position-statements/position-statement-on-accessible-emergency-management-for-deaf-and-hard-of-hearing-people/

5.4. European Union

The "Major Hazards and People with Disabilities" document was developed from the European and Mediterranean Major Hazards Agreement (EUR-OPA).[477] The toolkit outlines the following requirements that are key to the success of emergency management initiatives":

- Persons with disabilities should have equal access to emergency programs and services.
- Supports should be tailored to a wide spectrum of access and functional needs.
- Political authorities, public administrators and civil protection authorities should be involved in planning for the care of persons with disabilities.
- Emergency plans should consider the needs of persons with disabilities on an individual basis as opposed to categorically.
- The location and emergency needs of persons with disabilities should be known in advance of an emergency.
- Institutional and care facilities should have additional emergency planning provisions in place.
- Training programs should be in place for all persons involved in emergency planning, management and response on how to improve services for persons with disabilities, including operating medical and assistive devices.
- The "Design for All" principle should be in place for communication and alert processes to automatically meet the needs of persons with disabilities.
- Needs of persons with disabilities should be addressed in alert, emergency transportation, evacuation, sheltering and recovery processes
- Emergency responders should maintain a professional and non-discriminatory attitude toward people with disabilities.
- There should be processes in place to ensure no one is left behind in pre- or post-emergency evacuation.

The EUR-OPA Agreement promotes improvements in emergency planning, disaster response and risk mitigation for people with disabilities through its project on People with Disabilities in Disaster Preparedness and Response.[478] The Toolkit: Major Hazards and People with Disabilities has been developed for emergency personnel to promote resilience at the national, regional and local levels. The Toolkit acknowledges that needs and expectations change, and that advanced knowledge and technology can be used to improve resiliency.[479] It looks at seven success factors: political commitment, coordination and continuity, networking, strategic planning, knowledge management, identification and optimization of resources, communication.[480]

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[477] Alexander, David and Sagramola, Silvio. "Major Hazards and People with Disabilities." European and Mediterranean Major Hazards Agreement (EUR-OPA). 2014. Retrieved from:
https://www.coe.int/t/dg4/majorhazards/ressources/pub/MajorHazards_Disability_2014_en.pdf
[478] European Association of Service Providers for Persons with Disabilities. "Outcomes of the conference on People with Disabilities in Disaster Preparedness and Response." 2014. Retrieved from: https://www.easpd.eu/en/content/outcomes-conference-people-disabilities-disaster-preparedness-and-response
[479] European Association of Service Providers for Persons with Disabilities, 2014
[480] European Association of Service Providers for Persons with Disabilities, 2014

In April 2019, the Parliament of the EU issued "Directive (EU) 2019/882 of the European Parliament and of the Council of 17 April 2019 on the accessibility requirements for products and services".[481] The directive aims to ensure the accessibility of electronic communications services, including emergency communications, in all its Member States.[482] Providers are encouraged to ensure emergency communications are simultaneously accessible in a variety of formats (e.g. voice, text, video) and Member States are to ensure that emergency communications are accessible to all end-users, including persons with disabilities.[483] The Directive recommends that communications measures be interoperable across Member States and reflect standards itemized in other EU Directives (e.g. Directive (EU) 2018/1972). Accessibility of emergency communications is to be ensured regardless of whether the service is publicly provided or channeled through a third party.[484]

In addition to emergency communications, Directive (EU) 2019/882 outlines accessibility requirements for the built environment. Service providers are responsible for ensuring accessibility of public spaces, including but not limited to equipment and facilities, evacuation routes and concepts for emergency planning, communication and orientation via more than one sensory channel and protection from hazards.[485]

5.4.1. *European Disability Strategy 2010–2020*

The European Union and its Member States have a strong mandate to improve the social and economic situation of people with disabilities and recognize that the rate of disability is likely to increase as the population ages.[486] The EU and its member states are parties to the UNCRPD and also have their own legislation in place to prohibit discrimination of people with disabilities (e.g. Charter of Fundamental Rights of the EU and the Treaty on the Functioning of the EU (TFEU)).[487] The European Disability Strategy 2010–2020 focuses on eliminating barriers with eight main areas for action, including Accessibility, Participation, Equality, Employment, Education and training, Social protection, Health, and External Action. This strategy was developed from the results of the EU Disability Action Plan 2003–2010 and consultation with Member States, stakeholders and the general public.[488] The Strategy asserts that the EU and its Member States should promote the rights of persons with disabilities in the EU's external action, including emergencies and humanitarian aid.[489]

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[481] Parliament of the European Union. "Directive (EU) 2019/882 of the European Parliament and of the Council of 17 April 2019 on the accessibility requirements for products and services." *Eur-Lex.* April 2019. Retrieved from: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv:OJ.L_.2019.151.01.0070.01.ENG&toc=OJ:L:2019:151:TOC

[482] Parliament of the European Union, April 2019

[483] Parliament of the European Union, April 2019

[484] Parliament of the European Union, April 2019

[485] Parliament of the European Union, April 2019

[486] European Commission. "European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe". November 2010. Retrieved from: https://ec.europa.eu/eip/ageing/standards/general/general-documents/european-disability-strategy-2010-2020_en, p. 3

[487] European Commission, 2010, p. 3

[488] European Commission, 2010, p. 4

[489] European Commission, 2010, p. 9

5.4.2. **The European Accessibility Act**

The *European Accessibility Act* aims to make it possible for people with disabilities to fully participate in society by ensuring accessibility of products and services, such as:

- Computers and operating systems;
- ATMs, ticketing and check-in machines;
- Telephones and smartphones;
- TV equipment related to digital television services;
- Telephone services and related equipment;
- Audiovisual media services;
- Services related to air, bus, rail and waterborne passenger transport;
- Banking services;
- E-books; and
- E-commerce.[490]

5.4.3. ***European Disability Rights Agenda (2020–2030) and European Pillars of Social Rights***

The European Disability Forum (EDF) is an umbrella organization of persons with disabilities that defends the interests of 80 million Europeans with disabilities and is composed of organizations representing persons with disabilities across Europe.[491] The EDF works with the European Commission to introduce strategies and initiatives for persons with disabilities. The "European Disability Rights Agenda 2020–2030" extends the previous Disability Strategy 2010–2020 and aims to address the Articles of the UNCRPD, Sustainable Development Goals (SDGs) and the European Pillar of Social Rights (see below).[492] The EDF calls for adequate funding and human resources to implement the UNCRPD, including for the implementation and monitoring of initiatives.[493] Another key consideration for the "Disability Rights Agenda" is improving data collection; in particular, the EDF recommends collecting disaggregated data on disability.[494] The EDF asserts the importance of involving persons with disabilities throughout the planning, implementation and monitoring processes for the "Disability Rights Agenda".[495] Accessibility of the built environment and transportation are key concerns for the "Disability Rights Agenda", as well as the development of affordable assistive technologies.[496]

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[490] European Commission. "European Accessibility Act." Employment, Social Affairs, & Inclusion. 2015. Retrieved from: https://ec.europa.eu/commission/presscorner/detail/en/IP_15_6147

[491] European Disability Forum. "The European Disability Rights Agenda 2020-2030: Following on from the Disability Strategy 2010-2020." 2019. Retrieved from: http://www.edf-feph.org/disability-strategy-europe-2020, p. 10

[492] European Disability Forum, 2019, p. 3

[493] European Disability Forum, 2019, p. 4

[494] European Disability Forum, 2019, p. 4

[495] European Disability Forum, 2019, p. 4

[496] European Disability Forum, 2019, p. 6

The "European Pillar of Social Rights" aims to deliver "new and more effective rights for citizens".[497] It builds on 20 key principles grouped under three themes:

Equal opportunities and access to the labour market

1. Education, training and life-long learning
2. Gender equality
3. Equal opportunities regardless of gender, racial or ethnic origin, religion or belief, disability, age or sexual orientation
4. Active support to employment

Fair working conditions

5. Secure and adaptable employment
6. Wages
7. Information about employment conditions and protection in case of dismissals
8. Social dialogue and involvement of workers
9. Work-life balance
10. Healthy, safe and well-adapted work environment and data protection

Social protection and inclusion

11. Childcare and support to children
12. Social protection
13. Unemployment benefits
14. Minimum income
15. Old age income and pensions
16. Health care
17. Inclusion of people with disabilities, including the right to fully participate in the labour market and society
18. Long-term care
19. Housing and assistance for the homeless
20. Access to essential services (e.g. energy, transport and digital communications).

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[497] European Commission. 2017. "The European Pillar of Social Rights in 20 principles"
Retrieved from: https://ec.europa.eu/commission/priorities/deeper-and-fairer-economic-and-monetary-union/european-pillar-social-rights/european-pillar-social-rights-20-principles_en

5.5. Australia

5.5.1. National Disaster Risk Reduction Framework

The Australian "National Disaster Risk Reduction (DRR) Framework" highlights that investments in DRR can not only prepare communities for disasters, but can also promote economic, social and environmental benefits.[498] The Framework also emphasizes that enhancing resilience is a responsibility shared by governments and industry leaders, as well as individuals and communities. A coordinated approach is necessary to bring together the key players in DRR such as infrastructure, emergency management, social policy, health, community development, energy and the environment.[499]

The Framework emphasizes that factors such as health, economic resources and social capital impact a person's resilience to a disaster.[500] Moreover, it highlights that the barriers disadvantaging vulnerable populations are accentuated in an emergency and that investments in DRR across natural, social and built environments can reduce vulnerabilities. Additionally, the Framework emphasizes the broader social and economic benefits that an investment in DRR could return.[501] An effective DRR approach requires governance approaches that integrate relevant stakeholders and clearly outline designated roles and responsibilities.[502]

DRR requires governance mechanisms that include all relevant stakeholders and clearly identify roles and responsibilities. One key role of this governance mechanism is to ensure all relevant stakeholders are informed about various risks and understand how those risks can be transferred.[503] The Framework identifies a "nationally-owned and multi-stakeholder led coordination mechanism" than could unite cross-sectoral expertise to implement and monitor DRR initiatives cross government levels.[504]

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[498] Government of Australia Department of Home Affairs. "National Disaster Risk Reduction Framework". 2018. Retrieved from: https://knowledge.aidr.org.au/resources/national-disaster-risk-reduction-framework/, p. 3
[499] Department of Home Affairs, 2018, p. 4
[500] Department of Home Affairs, 2018, p. 5
[501] Department of Home Affairs, 2018, p. 16
[502] Department of Home Affairs, 2018, p. 18
[503] Department of Home Affairs, 2018, p. 18
[504] Department of Home Affairs, 2018, p. 18

5.5.2.   Australia's National Disability Strategy

The Government of Australia's *National Disability Strategy* outlines a ten-year plan to improve life for Australians with disabilities and their families.[505] The Strategy builds on the report "Shut Out: The Experience of People with Disabilities and their Families in Australia (2009)" and responds to many of its findings.[506] It also supports the obligations of Australia as a signatory to the UNCRPD.[507] The Strategy was developed in partnership with the Council of Australian Governments (COAG) and the Australian Local Government Association to coordinate a shared vision for an inclusive Australia.[508]

The Strategy emphasizes specific considerations for Aboriginal and Torres Strait Islander people with disabilities, as they often face additional barriers to full participation in society.[509] Moreover, the prevalence of disability is significantly higher for these populations.[510]

The Strategy promotes leadership for a "community-wide shift in attitudes to look beyond the disability"[511] and recognizes that everyone has a responsibility to change attitudes and responses towards persons with disabilities.[512] It is based on a social model of disability and recognizes that "attitudes, practices and structures are disabling and can prevent people from enjoying economic participation, social inclusion and equality".[513]

The Strategy has the following objectives:

- "establish a high-level policy framework to give coherence to, and guide government activity across mainstream and disability-specific areas of public policy"
- "drive improved performance of mainstream services in delivering outcomes for people with disability"
- "give visibility to disability issues and ensure they are included in the development and implementation of all public policy that impacts on people with disability"
- "provide national leadership toward greater inclusion of people with disability".[514]

The Strategy covers six policy areas:

- Inclusive and accessible communities (e.g. physical environment, public transport, digital information and communications technologies, and civic life).[515]
- Rights protection, justice and legislation (e.g. anti-discrimination measures, advocacy, electoral and justice systems).[516]

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[505] Australian Government Department of Social Services. "National Disability Strategy 2010-2020". 2011. Retrieved from: https://www.dss.gov.au/our-responsibilities/disability-and-carers/publications-articles/policy-research/national-disability-strategy-2010-2020, p. 8
[506] Australian Government Department of Social Services, 2011, p. 8
[507] Australian Government Department of Social Services, 2011, p. 16
[508] Australian Government Department of Social Services, 2011, p. 8
[509] Australian Government Department of Social Services, 2011, p. 25
[510] Australian Government Department of Social Services, 2011, p. 25
[511] Australian Government Department of Social Services, 2011, p. 9
[512] Australian Government Department of Social Services, 2011, p. 18
[513] Australian Government Department of Social Services, 2011, p. 15
[514] Australian Government Department of Social Services, 2011, p. 9
[515] Australian Government Department of Social Services, 2011, p. 9
[516] Australian Government Department of Social Services, 2011, p. 9

- Economic security (e.g. jobs, financial independence, housing).[517]
- Personal and community support (e.g. inclusion, participation in the community, person-centred care and support).[518]
- Learning and skills (e.g. education, life-long learning).[519]
- Health and well-being (e.g. health services and the interaction between health and disability systems).[520]

The Strategy promotes the following approaches:[521]

- Involvement of people with disability.
- Community engagement (e.g. whole-of-community support for inclusion of people with disability).
- Universal approach (e.g. products, services, environments, communities).
- Life course approach (e.g. Person-centred—policies, programs and services).
- Independent living.
- Interconnectivity (e.g. of government initiatives).

5.5.3.   Research from the Australian Institute for Disaster Resilience

In their integrative review of experiences of persons with disabilities in natural disasters, the authors identified three themes emerging in the literature: the challenges faced by people with physical disabilities; impacts of natural disasters on people with physical disabilities; factors that enhance resilience to disaster events.[522] This study found that people with physical disabilities are less likely to evacuate their homes or are more likely to wait longer before evacuating due to accessibility concerns (e.g. transportation, sheltering, service animals).[523] Lack of support to prepare, evacuate and recover were highlighted as key issues, as well as absence of social support (e.g. personal support network) and lack of accessible and quality emergency communications.[524] Financial burdens from property damage can also impact the ability of persons with disabilities to recover from an emergency.[525] The authors found that the literature advocates strengthening personal support networks to enhance resiliency and studies reported persons with disabilities feeling empowered from sharing their knowledge and lived experience.[526] This review highlights that persons with physical disabilities who have lived

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[517] Australian Government Department of Social Services, 2011, p. 9

[518] Australian Government Department of Social Services, 2011, p. 9

[519] Australian Government Department of Social Services, 2011, p. 9

[520] Australian Government Department of Social Services, 2011, p. 9

[521] Australian Government Department of Social Services, 2011, p. 23

[522] Quail, Jennifer, Barker, Ruth, and West, Caryn. "Experiences of individuals with physical disabilities in natural disasters: an integrative review". Australian Institute for Disaster Resilience. July 2018. Retrieved from: https://knowledge.aidr.org.au/resources/ajem-jul-2018-experiences-of-individuals-with-physical-disabilities-in-natural-disasters-an-integrative-review/

[523] Quail et al., 2018

[524] Quail et al., 2018

[525] Quail et al., 2018

[526] Quail et al., 2018

experiences dealing with disasters have valuable insight into disaster planning and response activities, including educating community members.[527]

It is vital that persons with disabilities be directly involved in emergency preparedness initiatives. As a signatory to the Sendai Framework for Disaster Risk Reduction 2015–2030, Australia has agreed to support persons with disabilities to prepare for an emergency.[528] Person-Centred Emergency Preparedness (PCEP) has emerged as an approach that assesses the strengths of persons with disabilities and their support networks to self-assess their own needs and take targeted action to advocate for the supports they will need during an emergency.[529] PCEP encourages persons with disabilities to self-identify their capabilities and function-based support needs in eight areas: communication, management of health, assistive technology, personal support, assistance animals, transportation, living situation, social connectedness.[530] The PCEP method was co-designed with 115 stakeholders from the disability, community and emergency services sectors.[531] It was also field-tested in New South Wales with people with disability and their community health and support providers.[532] PCEP supports the aims of the National Strategy for Disaster Resilience and the National Disaster Risk Reduction Framework by (1) "defining person-centred responsibilities of people with disability to reduce their risks" and (2) "optimising the capability of service providers to contribute to disability-inclusive risk reduction through person-centred planning".[533]

There are also specific considerations to ensure accessibility of emergency shelters. The Sendai Framework emphasizes that understanding vulnerability is one of four priorities for action. The Framework acknowledges the context-specific needs of persons with disabilities during disasters and promotes universal access to evacuation vehicles, resources and emergency shelters. However, emergency shelters are often not purposefully planned or built to accommodate the needs of all people with disabilities[534] Three main themes emerge from the literature on experiences of persons with disabilities in shelters, including "Physical environment (e.g. natural environment, human-made environmental changes and technology), Social environment (e.g. support, communication, relationships and social services), and Attitudinal environment (e.g. culture, norms and ideology)".[535] Communication is a key concern, as shelter residents must receive emergency updates and directions on how to access emergency social services.[536] Additionally, staff and volunteers working in shelters should be trained to effectively support persons with disabilities (e.g. using assistive devices, supporting persons with service animals).[537] This study also found that the attitudes of community members and authorities

[527] Quail et al., 2018

[528] Villeneuve, Michelle. "Increasing involvement of people with disability." *Australian Institute for Disaster Resilience.* 16-17. October 2019. Retrieved from: https://knowledge.aidr.org.au/resources/ajem-october-2019-increasing-involvement-of-people-with-disability/, p. 16

[529] Villeneuve, 2019, p. 16

[530] Villeneuve, 2019, p. 17

[531] Villeneuve, 2019, p. 16

[532] Villeneuve, 2019, p. 16

[533] Villeneuve, 2019, p. 17

[534] Malpass, Andrée, Quaill, Jennifer, West, Caryn, and Barker, Ruth. "Experiences of individuals with disabilities sheltering during natural disasters: an integrative review." Australian Institute for Disaster Resilience. 60-65. April 2019. Retrieved from: https://knowledge.aidr.org.au/resources/ajem-april-2019-experiences-of-individuals-with-disabilities-sheltering-during-natural-disasters-an-integrative-review/, p. 60

[535] Malpass, 2019, p. 62

[536] Malpass, 2019, p. 62

[537] Malpass, 2019, p. 63

impact the experiences of persons with disabilities in shelters, as stigma can be a barrier to accessing services and support.[538] Meaningful engagement of people with disabilities and emergency managers is necessary to reduce risks and meet the functional needs of all persons. A functional and needs-based approach, rather than a disability-focused approach, may be more appropriate for emergency managers in meeting the needs of people with disabilities, particularly in emergency shelters.[539]

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[538] Malpass, 2019, p. 64
[539] Malpass, 2019, p. 64

5.6. New Zealand

5.6.1. National Emergency Plan

Emergency services in New Zealand (NZ) include NZ Police, NZ Fire Service, National Rural Fire Authority, rural fire authorities, and health and disability services.[540] The Ministry of Health and other health sector agencies plan in advance to provide services in any emergency.[541] The objective of health and disability service providers in an emergency is "to provide services to minimise the consequences of the emergency for the health of individuals and the community."[542] The defining principles are to maintain an efficient emergency management structure (local, regional and national levels), provide services that meet needs to the greatest extent possible, and enhance the resiliency of health and disability services as much as possible.[543] In an emergency, the Director-General of Health has responsibility for health and disability services during all phases of emergency management on behalf of the Minister of Health.[544]

NZ has national Emergency Plans in place for different types of emergencies, including the National Emergency Plan and National Health Emergency Plan (NHEP). NHEP influenced the creation of the Pandemic Action Plan (NZIPAP).[545] In an emergency, the primary information resource for the health and disability sector is HealthEMIS for local to national levels.[546]

The Government of NZ works with many organizations and agencies during emergencies. For example, the Office for Disability Issues provides information and coordination to assist persons with disabilities. Non-profits such as the Red Cross, St. John Ambulance and Salvation Army also contribute.[547]

The *Guide to the National Civil Defence Emergency Management Plan* asserts that there are two inter-related factors to emergency readiness –organizational readiness of the agencies and organizations responsible to provide services (e.g. Government and Red Cross) and community readiness of individuals, families, businesses and communities to sustain themselves in an emergency (e.g. resiliency, emergency preparedness).[548]

The guide also emphasizes the importance of information being fully accessible. "Accessibility" can refer to the built environment, as well as information and communications systems.[549] Accessible communication approaches include using translation and interpreters (e.g. NZ Sign Language (NZSL) – an official language in NZ), video and live captioning, images and

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[540] Ministry of Civil Defence and Emergency Management. "Guide to the National Civil Defence Emergency Management Plan." 2015. Retrieved from: https://www.civildefence.govt.nz/cdem-sector/plans-and-strategies/guide-to-the-national-civil-defence-emergency-management-plan/, p. 8-2

[541] Ministry of Civil Defence and Emergency Management, 2015, p. 11-1

[542] Ministry of Civil Defence and Emergency Management, 2015, p. 11-3

[543] Ministry of Civil Defence and Emergency Management, 2015, p. 11-3

[544] Ministry of Civil Defence and Emergency Management, 2015, p. 11-4

[545] Ministry of Civil Defence and Emergency Management, 2015, pp. 11-5–11-6

[546] Ministry of Civil Defence and Emergency Management, 2015, p. 11-10

[547] Ministry of Civil Defence and Emergency Management, 2015, pp. 14-10–14-11

[548] Ministry of Civil Defence and Emergency Management, 2015, p. 18-2

[549] Ministry of Civil Defence and Emergency Management, 2015, p. 28-5

alternative text, large print formats and web accessibility guidelines. The Government of NZ offers a toolkit for accessibility requirements.[550]

5.6.2. New Zealand Disability Strategy

In 2016, NZ released the *New Zealand Disability Strategy 2016–2026,* founded on the principles of Te Tiriti o Waitangi ("Treaty of Waitangi"), the UNCRPD and ensuring that persons with disabilities are involved in decision-making that impacts them.[551] The Strategy has eight outcome areas: education, employment and economic security, health and wellbeing, rights protection and justice, accessibility, attitudes, choice, and leadership.[552]

The Strategy highlights some key areas of focus, including the disparity between Maori and Pacific persons with disability and the non-Indigenous population, the growing multiculturalism of NZ, NZSL's status and use as an official language, impacts of gender on disability, and an aging population increasing the number of persons with disabilities.[553] The Strategy also acknowledges that both Te Reo Māori and NZ Sign Language are official languages of NZ.[554]

The Strategy implements two approaches (short- and long-term) to accomplish its goals, a whole-of-life approach to social investment, as well as specific and mainstream services.[555] Data collection and have been identified as key barriers to advancing inclusion for persons with disabilities.[556] Additionally, changing attitude is highlighted as a key outcome for the Strategy, recognizing that this is an area that needs to be improved and can lead to broader positive impacts.[557]

The NZ Disability Action plan is intended to be the vehicle to achieve the goals of this Strategy. This plan identifies priorities in implementing the Strategy and encourage institutional learning across government agencies and integration of the values and principles of this Strategy.[558]

5.6.3. Towards a Non-Disabling New Zealand (Disability Strategy)– Annual Report

The NZ Government Office of Disability Issues releases annual reports on their strategy *Towards a non-disabling New Zealand.* The 2019 Annual Report identifies several frameworks in place to address barriers to persons with disabilities, including:[559]

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[550] Ministry of Civil Defence and Emergency Management, 2015, p. 28-5
[551] Ministry of Social Development. "New Zealand Disability Strategy 2016–2026". November 2016. Retrieved from: https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/read-the-new-disability-strategy/, p. 6
[552] Ministry of Social Development, 2016, p. 7
[553] Ministry of Social Development, 2016, p. 14
[554] Ministry of Social Development, 2016, p. 13
[555] Ministry of Social Development, 2016, p. 14
[556] Ministry of Social Development, 2016, p. 20.
[557] Ministry of Social Development, 2016, p. 35
[558] Ministry of Social Development, 2016, p. 43
[559] Office for Disability Issues. "Towards a non-disabling New Zealand: The annual report from the Minister for Disability Issues to the House of Representatives on implementation of the New Zealand Disability Strategy". Government of New Zealand.

1. United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).
2. New Zealand Disability Strategy 2016–2026 (Disability Strategy).
3. Disability Action Plan 2019–2023.
4. *Accessibility Charter* and Accessibility Guide.

The *Accessibility Charter* mandates that public sector agencies make information technology and communications accessible. Agencies that have signed on submit updates on the progress of Action plans every six months.[560]

The Ministry of Social Development works in partnership with the Access Alliance, comprising representatives from Disabled People's Organizations, disability service providers, and community and disability organizations that advocate for accessibility legislation.[561]

The report notes that NZSL is a threatened language and details the responses Government has taken to address this, i.e. increasing professional development opportunities for NZSL teachers, establishing a five-year plan, creating an Online Hub for NZSL resources and developing NZSL Interpreter Standards for government agencies.[562]

December 2019. Retrieved from: https://www.odi.govt.nz/nz-disability-strategy/about-the-strategy/new-zealand-disability-strategy-2016-2026/2017-annual-report/
[560] Office for Disability Issues, 2019, p. 12
[561] Office for Disability Issues, 2019, p. 14
[562] Office for Disability Issues, 2019, p. 31

Part D

6. <u>Non-Profit Organizations and Strategies to Integrate Persons with Disabilities into Emergency Management</u>

Emergency management organizations rely on partnerships with various non-profit organizations, NGOs and voluntary organizations. Some common voluntary organizations across the jurisdictions are the Red Cross, St. John Ambulance and Salvation Army. Overall, disaster risk reduction (DRR) is a collaborative process among the public, private and voluntary sectors, particularly in addressing social vulnerabilities. Furthermore, community resilience depends on the capacity of the voluntary sector and establishing effective partnerships with high-risk populations.[563] The organizations below have long-term experience, in Canada and internationally, in supporting high-risk populations including people with disabilities in emergency events, and have outlined best practices for those working in this area.

6.1.   Summary of International and Canadian Non-Profit Organizations' Strategies to Integrate Persons with Disabilities into Emergency Management

Despite variances in jurisdictions, many non-profit organizations that serve persons with disabilities, particularly during emergencies, advocate similar themes to ensure the success of emergency management practices.

Data collection and information- sharing are key issues. It is important that jurisdictions collect disaggregated data on disability to gain valuable insights and create emergency programs and services.

Setting standards is also important. Many organizations advocate for feedback from vulnerable populations to be integrated into after-action reports. Additionally, persons with disabilities should lead the development of standards to ensure effectiveness of such standards. Many standards currently exist in the form of human rights legislation; however, many inequalities and service gaps have continuously been identified. Therefore, there needs to be more attention paid to how learning from after-action reports is integrated into new emergency planning processes.

While standards are a focus for many government organizations, non-profit organizations focus on addressing stigma and negative perceptions of persons with disabilities because these are often cited as barriers to participation. Many organizations identified that stigma continuously excludes persons with disabilities from participating in emergency planning processes or being aware of available services and supports. Changing behaviour in this area is a challenge but

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[563] Enarson, Elaine and Walsh, Sara. "Integrating Emergency Management and High-risk populations: Survey Report and Action Recommendations." Canadian Red Cross. December 19, 2007. Retrieved from: https://www.redcross.ca/crc/documents/3-1-4-2_dm_high_risk_populations.pdf, p. 20

shifting attitudes from focusing on the disability to the access and functional needs of the person has been identified as an effective approach to inclusive disaster risk reduction. Many education and training programs have been developed to reduce stigma and change perceptions about persons with disabilities with respect to emergency management.

The sections below detail information on programs and best practices identified from non-profits that support persons with disabilities in emergencies.

6.2. Strategies from International Non-Profit Organizations

6.2.1. Humanity & Inclusion

Humanity & Inclusion (HI) is an independent aid organization working with the effects of conflict and disasters on those in poverty and generally excluded from society.[564] HI works directly with vulnerable persons, particularly those with disabilities, to respond to needs and promote respect for human dignity and fundamental rights.[565] One of HI's areas of expertise is disaster risk reduction and integrating persons with disabilities into emergency responses.[566]

In times of emergency, local communities are often first to respond and provide services until additional support arrives. Therefore, it is imperative that communities are empowered with knowledge, skills and resources to enhance their resiliency.[567] At-risk groups such as persons with disabilities can be more integrated in DRR by assessing their current levels of inclusion and furthering inclusion initiatives through awareness, training, understanding of best practices, advocacy and coaching DRR professionals.

HI uses Inclusive Disaster Risk Reduction (DRR) to reduce vulnerabilities of marginalized groups and increase their capabilities in recognition of their right to actively participate in DRR initiatives. Resiliency can be enhanced by addressing vulnerabilities, increasing coping capacity and empowering members of the community.[568] HI identifies the four following elements of inclusive DRR:

- Ensure the meaningful participation of all those at risk based on age and disability at the individual and group levels to identify and reduce risks.
- Promote diversity of people, sectors and levels of intervention.
- Encourage tailored approaches grounded in "do not harm" ethics and "leave no one behind".
- Build resilience for all by removing barriers for marginalized persons.[569]

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[564] "Our Mission." Humanity & Inclusion, N.d. Retrieved from: www.hi.org/en/our-mission

[565] "Our Mission." Humanity & Inclusion

[566] "Our Mission." Humanity & Inclusion

[567] Lafrenière, Annie and Walbaum, Véronique. "Inclusive Disaster Risk Reduction". Handicap International. 2017. Retrieved from: http://www.hiproweb.org/uploads/tx_hidrtdocs/PP13_InclusiveDRR.pdf, p. 38

[568] Lafrenière and Walbaum, 2017, p. 34

[569] Lafrenière and Walbaum, 2017, p. 36

6.2.1.1. Recommended Areas for Improvement

From 30 years of experience across 60 countries, HI has identified eight barriers to vulnerable persons in accessing services:

- Inadequate policies
  - Policies are not tailored to the specific needs of vulnerable persons, not implemented, not adequately funded or ineffectively monitored.
- Lack of capacities in the services
  - Services are insufficient, non-existent or providers are unable to adapt to the needs of vulnerable persons.
- Lack of participative approach
  - Lack of representation, consultation and participation of vulnerable persons in decision-making processes
- Stigmatization
  - Vulnerable people, such as those with disabilities, can be stigmatized by communities, institutions and governments, which can contribute to negative attitudes and biases towards them.
- Inadequate funding
  - Funding is insufficient or not adapted to the priorities of vulnerable persons.
- Lack of data
  - Data are often insufficient to adequately assess the needs of persons with disabilities and further limit public and private organizations from responding to or advocating for those needs.
- Insufficient individual opportunities
  - Persons with disabilities need to be actively involved in their own empowerment and there is a lack of opportunities for individuals to develop capacities and self-resiliency.
- Extreme disruptions to routine and environment
  - Following a disaster event there can be displacement and political instability, and critical infrastructure may not be accessible.[570]

The inclusivity of DRR programs can be improved by assessing the current level of inclusion in DRR practices and working to advance them through awareness, information-sharing, training, collection and dissemination of good practices, advocacy, and coaching of DRR practitioners, otherwise referred to as the AIATAC approach (Assessing, Informing, Awareness-raising, Training, Advocacy, Coaching).[571] The purpose should be to empower people with disabilities and their caregivers to build resiliency at the individual level.[572] It is important to use a coordinated and interconnected approach to synergize with activities on the local, territorial, national and international levels.[573] Inclusive alert systems exemplify the importance of

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[570] Lafrenière and Walbaum, 2017, pp. 36-37

[571] Lafrenière and Walbaum, 2017, p. 43

[572] Lafrenière and Walbaum, 2017, p. 43

[573] Lafrenière and Walbaum, 2017, p. 49

implementing DRR systems that are well connected from the local to the national level.[574] Data collection and analysis are important in enhancing resiliency to risks.[575]

Inclusive DRR initiatives at the individual and community level include:

- Supporting the development of individual disaster plans.
- Promoting the most-at-risk individuals as models in DRR practices.
- Establishing a community task force that includes representation from the most vulnerable groups and including the needs of these groups in all processes.
- Implementing community-based DRR from the local to national levels.
- Assigning clear and specific roles to community representatives in emergency response organizations. Where appropriate, designing policy and legal frameworks with consultation from vulnerable groups.
- Ensuring the most-at-risk groups are able to review and inform disaster preparedness plans and programs.
- Investing in, developing and strengthening people-centred, interconnected, multisectoral and multi-hazard inclusive early warning systems tailored to the needs of users, including people with disabilities.
- Raising awareness and encouraging training for DRR stakeholders to improve inclusivity of their programs and practices. Regular practicing of mock exercises is also crucial to ensuring their effectiveness.[576]

The following steps can address data collection and sharing between organizations. This further emphasizes the importance of data collection (both method and types of data collected) that has been prevalent in best practices regarding emergency management and persons with disabilities.

- Conduct inclusive vulnerability and capacity assessment (VCA) at the household, community and institutional levels and disseminate the results to decision-makers
- Publish Inclusive VCA results in accessible formats
- Collect and disseminate disaggregated data on age, gender and disability.
- Collect and map data on hazards
- Accessibility audits and mobility mapping
- Public post-disaster reviews and lessons learned.[577]

[574] Lafrenière and Walbaum, 2017, p. 49
[575] Lafrenière and Walbaum, 2017, p. 62
[576] Lafrenière and Walbaum, 2017, pp. 57-58
[577] Lafrenière and Walbaum, 2017, p. 62

<u>Urban planning, Housing, and Shelter</u>

Shelters play a key role in emergency situations and must be made accessible to all users. Since housing is a process and not simply a product, HI has identified the following considerations for housing and shelter before and after disasters:[578]

Risk Reduction Stage

- Participatory risk mapping (methodology VCA): Assess the accessibility of shelter with key stakeholders for all groups or individuals at risk.
- Participatory Approach for Safe Shelter Awareness (PASSA): a participatory method of disaster risk reduction (DRR) related to shelter safety.
- Conduct necessary adaptations to ensure the accessibility of any buildings that would be used as shelters (e.g. schools, hospitals).
- Supply assistive devices at the emergency shelter (e.g. wheelchairs, crutches, walking frames, white canes, portable toilet seats).
- Review existing emergency plans and national regulations with specific mention of accessible shelters.
- Raise awareness about disaster preparedness to identify accessible shelters and evacuation routes.
- Practice emergency exercises to test accessibility of evacuation plans and shelters.
- Consult people with disabilities about sheltering.[579]

Emergency Response Stage

- Ensure that emergency assessment tools (pre- and post-disaster) are inclusive of persons with disabilities and data are disaggregated by age, sex and type of disability.
- Integrate disability issues into design standards and any agenda to deal with sheltering.
- Determine accessible options for shelter.
- Organize inclusive distribution systems, including home delivery for devices and medications.
- Collaborate with DPOs to outline contents for shelter kits.
- Provide information about shelter in accessible formats.[580]

Recovery Stage: Build back better, safer and in line with universal design:

- Advocate for universal design, safer building codes and preventive measures in all reconstruction initiatives.
- Connect with DPOs that have not yet been engaged.
- Revise and update shelter response strategies.
- Establish partnerships with other sectors when needs are identified that exceed the expertise of the shelter program.[581]

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[578] Lafrenière and Walbaum, 2017, p. 94
[579] (Lafrenière and Walbaum, 2017, p. 93
[580] Lafrenière and Walbaum, 2017, pp. 93-94
[581] Lafrenière and Walbaum, 2017, p. 94

6.2.2.   **International Federation of Red Cross and Red Crescent Societies**

The [International Federation of Red Cross and Red Crescent Societies (IFRC)](#) facilitates international assistance following natural and man-made disasters in non-conflict situations. The IFRC supports disaster preparedness efforts and promotes humanitarian values.[582]

6.2.2.1 Recommended Areas for Improvement

Lack of effective data collection and analysis is a large factor in the exclusion of persons with disabilities in emergency situations. Programs cannot be appropriately tailored to meet the needs of specific groups when there are insufficient data.[583] Moreover, in an emergency situation there is a need to respond quickly and lack of situational information can impede response actions.[584] The lack of collection and analysis of disaggregated disability data means that decision-makers are less incentivized to design age- and disability-appropriate programs, and are therefore less accountable to integrate the needs of vulnerable populations in emergency risk responses.[585] When collecting and analyzing data relating to seniors, it is important to give consideration to sub-age groups (e.g. 60-69, 70-79) and not treat the population aged over 60 as homogenous.[586] While it is accepted that collecting disaggregated data by sex, age, gender and disability is good practice, it is often implemented inconsistently.[587] It is important to recognize the intersectionality of identities, and how factors such as age, sex, gender and disability can compound an individual's experience of oppression. Disaggregated data can be used to establish a more holistic understanding of the needs of a specific community (Age and Disability Consortium, 2015)."[588] Furthermore, it is important not only to consider the needs of seniors and persons with disabilities in programs, but to identify opportunities to leverage their unique position within their families and communities.[589] Improvement to the collection, analysis and sharing of data relating to seniors and persons with disabilities should be a focus of humanitarian response organizations at all levels. Poor data management and sharing impedes persons with disabilities from participating in emergency management processes and can limit the effectiveness of services and programs.[590] Disaggregated data based on sex, age, gender, and disability can be more impactful as it allows decision-makers to consider the needs of those with intersectional identities.[591]

Access to information is also of vital importance to persons with disabilities. Communication methods that do not account for various access needs exclude persons with disabilities from

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[582] The International Federation of Red Cross and Red Crescent Societies (IFRC). 2019, www.ifrc.org/en/who-we-are/governance/.

[583] International Federation of Red Cross and Red Crescent Societies (IFRC). "Left out of the Loop." World Disasters Report, 2018. https://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2018/10/C-04-WDR-2018-4-loop.pdf, p. 98

[584] IFRC, 2018, p. 98

[585] IFRC, 2018, p. 98

[586] IFRC, 2018, p. 98

[587] IFRC, 2018, p. 100

[588] IFRC, 2018, p. 100

[589] IFRC, 2018, p. 101

[590] IFRC, 2018, p. 107

[591] IFRC, 2018, p. 107

receiving information and being able to act upon it.[592] While it is important to consider how persons with disabilities receive information, it is also important to ensure that they are able to provide feedback on services to encourage their improvement.[593] Persons with disabilities and their representative organizations possess specific information and expertise to support emergency responses, but this knowledge is often underutilized as it is not coordinated into mainstream institutions and processes.[594]

Responses need to be inclusive, including partnerships, staffing and communications, which involves enhancing relationships and direct participation of humanitarian response organizations, governments, DPOs and older people organizations (OPOs), and those they represent to ensure programs and services are informed by their needs and capabilities.[595] Allocating specific funding within program budgets to respond to the needs of marginalized persons has been recommended to ensure programs are tailored to these needs, such as accessible communications.[596]

Donors and international funding organizations should encourage relationship-building with organizations at the local level. Some of the best practices to serve persons with disability are led directly by people with disabilities. Therefore, funding organizations should ensure that approved projects respond to the needs of marginalized persons and directly include them at each stage of the development process to incentivize the inclusion of perspectives that are too often excluded.[597]

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[592] IFRC, 2018, p. 102

[593] IFRC, 2018, p. 102

[594] IFRC, 2018, pp.104-105

[595] IFRC, 2018, p. 108

[596] IFRC, 2018, p. 108

[597] IFRC, 2018, p. 109

6.2.3. **Partnership for Inclusive Disaster Strategies**

The Partnership for Inclusive Disaster Strategies (the Partnership) is an American organization that globally advocates for equal access to emergency programs and services and "full inclusion of the whole community before, during and after disasters."[598] Established in 2016, the Partnership is made up of local, national and global disability rights, emergency management, public health, and community organizations, primarily in the United States.[599] The Partnership supports disability organizations at the local, state and national levels and advocates for the development of public policy, training and educational opportunities, and quality community engagement.[600] The Partnership focuses on including all access and functional needs into emergency management, including excluded older adults, pregnant women, those with low language proficiency, the homeless and other marginalized and stigmatized populations.[601] The core values of the Partnership are equal access, inclusion and independence and belief that community readiness can be achieved through a "shared and unwavering commitment to accessibility, universal design and reasonable accommodation before, during and after disasters", including planning, exercises, alerts, evacuation, transportation, sheltering, medical care and temporary housing.[602]

6.2.3.1. Recommended Areas for Improvement

The Partnership asserts that the values inherent in access, inclusion and independence are vital to "achieving and sustaining community-wide disaster resilience". The Partnership offers a variety of programs and services, including but not limited to: Access and Functional Needs Assessments, After Action Reports, Community Resilience, Emergency Plan Design and Review, Emergency Preparedness and Disaster Funding, Evacuation and Shelter Accessibility Planning, Individual and Family Preparedness, Training (onsite, remote and e-learning), Universal Design, and Stakeholder Engagement.[603]

The Partnership for Inclusive Disaster Strategies has produced a report detailing concerns and feedback from persons with disabilities from around the world on their experience during disasters in 2017. The Partnership emphasizes that the right of equal access to disaster services is affirmed in legislation; however, despite legal protection and over a decade's worth of "lessons learned" documents this obligation is often unfulfilled.[604] Some key failure areas identified in the report are: alerts, "actionable" information and instructions, evacuation,

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[598] Partnership for Inclusive Disaster Strategies. "About the Partnership." 2017. Retrieved from: http://disasterstrategies.org/index.php/about-pids

[599] Partnership for Inclusive Disaster Strategies, 2017

[600] Partnership for Inclusive Disaster Strategies, 2017

[601] Partnership for Inclusive Disaster Strategies, 2017

[602] Partnership for Inclusive Disaster Strategies, 2017

[603] Partnership for Inclusive Disaster Strategies, 2017

[604] Roth, Marcie, Isaacson Kailes, June, and Marshall, Melissa J.D. (May 2018). "Getting It Wrong: An Indictment with a Blueprint for Getting It Right." Partnership for Inclusive Disaster Strategies". Retrieved from: http://disasterstrategies.org/application/files/3615/2718/6466/5-23-18_After_Action_Report_-_May__2018.compressed.pdf

sheltering, medical care, access to life-saving goods and services, registration process for disaster services (e.g. FEMA, state/territory emergency programs), transition back to the community, and investments in disaster mitigation and recovery.[605]

Examples of failures include denial of equal access to disaster programs and services for individuals with legal protection from discrimination. Many of these failures have greater impacts for persons with disabilities and result in separation from families and communities, illness, unnecessary institutionalization and death.[606] It was also found that in the absence of government actions, the generosity, or charity, of organizations and individuals was the only resource to address gaps in services.[607] The report asserts that generally speaking, government failures to adequately resource persons with disabilities during emergency events highlight imbalances in government's priorities and its capacity to meet obligations. The authors warn that reliance on charity, volunteerism and donation systems cannot be a supplement to government action. Donation systems, while always a wonderful symbol of whole community commitment, must not be the government's substitute for meeting its obligations."[608]

The report highlights key legal documents informing the American emergency and disability context:[609]

- *Robert T. Stafford Disaster Relief and Emergency Assistance Act (Stafford Act),* as amended;
- *Post-Katrina Emergency Management Reform Act*;
- *Rehabilitation Act* of 1973, as amended;
- *Americans with Disabilities Act (ADA),* as amended 2008;
- *Fair Housing Act* of 1968, as amended;
- *Architectural Barriers Act* of 1968;
- *Communications Act* of 1934, as amended;
- *Individuals with Disabilities Education Act (IDEA)* of 1975, as amended;
- Executive Order 13347 (July 22, 2004), – Individuals with Disabilities in Emergency Preparedness.

The report includes findings from stakeholder consultations on the experience of persons with disabilities during disasters throughout 2017. These findings primarily address inequalities in access to various emergency services and programs, and most notably in access to communications, medical services and recovery resources. The list of findings includes:[610]

- Deficiencies in equal access in areas critical to disaster survival and community resilience
- Equal Access to Department of Homeland Security (DHS) Programs and Services
- Equal Access to Programs and Services of the Department of Health and Human Services (HHS)
- Maintaining Health
- Meeting the Durable Medical Equipment Needs of People with Disabilities

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[605] Roth et al., 2018, p. 8
[606] Roth et al., 2018, p. 9
[607] Roth et al., 2018, p. 10
[608] Roth et al., 2018, p. 45
[609] Roth et al., 2018, p. 35
[610] Roth et al., 2018, p. 11

- Health Plans
- Emergency Plans for Long Term Care Facilities
- Unnecessary Institutionalization
- Equal Access to Effective Communication
- Equal Access throughout Planning and Execution
- Emergency Registries
- Equal Access to Evacuation Services
- Sheltering
- Disaster Recovery Centers (DRCs) and Remote Registration for FEMA Assistance
- Food and Water Distribution
- Distribution of goods
- Housing
- Intersectionality and equal access to disaster programs and services
- Equal Access to Education for Students with Disabilities.

6.2.4. **American Red Cross**

The American Red Cross created a guide titled ["Disaster Safety for People with Disabilities"](#) that highlights considerations for individual persons with disabilities in preparing themselves for an emergency. A key recommendation in the Guide is to establish a personal support network of at least three family members, neighbours, friends or co-workers.[611] Specific needs for personal care, medical equipment and assistive devices – particularly those dependent on electricity – and service animals are also key considerations listed in the guide.[612] The guide asserts the importance of planning for evacuation, including transportation needs.[613] Having a plan in place to reach out for help is also a consideration highlighted in the guide.[614] Additional considerations for persons with disabilities include planning for power outages, having a back-up cellphone, connecting to a medical alert system, storing extra assistive devices that do not require electricity, developing methods to communicate needs to emergency responders (e.g. instructions to use assistive devices).[615]

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[611] American Red Cross. "Disaster Safety for People with Disabilities". 2019. Retrieved from: https://www.redcross.org/get-help/how-to-prepare-for-emergencies/disaster-safety-for-people-with-disabilities.html, p.3
[612] American Red Cross, 2019, pp. 4 -5
[613] American Red Cross, 2019, p. 4
[614] American Red Cross, 2019, p. 5
[615] American Red Cross, 2019, p. 10

6.3. Strategies from Canadian Non-Profit Organizations

6.3.1. Canadian Red Cross

In 2007, the Canadian Red Cross, with the support of Public Safety Canada and the Public Health Agency of Canada's Centre for Emergency Preparedness and Response launched the Canadian Emergency Management and High-risk Populations Project.[616] The project was to analyze the integration of the needs of high-risk persons in emergency management processes at the federal, provincial and territorial levels.[617] The result of this project was recommendations for a national framework that emphasizes the complexity of social vulnerabilities as a result of social marginalization through environmental, political, cultural and social factors.[618] The report uses the term "high-risk populations" instead of "vulnerable persons" to recognize that the focus of emergency responders should be to meet the greatest need through a functional limitations approach.[619]

The report identified ten high-risk, or most socially vulnerable, groups in Canada: seniors, persons with disability, Indigenous residents, medically dependent persons, low-income residents, children and youth, persons with low literacy levels, women, transient populations, and new immigrants and cultural minorities (can include visible minorities).[620] The leaders of this project sought to understand how the needs of high-risk populations have been incorporated into emergency management processes, as well as identifying challenges to ensuring effective partnerships between voluntary organizations and governments at the federal, provincial and local levels.[621] A total of 48 emergency management agencies and 89 volunteer organizations were surveyed. The respondents identified that there were significant gaps in meeting the needs of high-risk persons; both emergency management and voluntary organizations work to meet needs of high-risk persons but often lack capacity, and networking between organizations must increase at all levels.[622]

6.3.1.1. Recommended Areas for Action

The report emphasizes the need to focus efforts and involve high-risk populations to improve knowledge building, communications and advocacy capacity building (e.g. training), and roles and responsibilities (e.g. policy directives, funding incentives, practical guidelines).[623] The findings of this project support the need for a national initiative to reduce social vulnerabilities in disasters. The report emphasizes the importance of a national initiative to ensure the involvement of persons with disabilities in emergency management processes. Furthermore, effective partnerships with the voluntary sector are important to strengthen community

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[616] Enarson and Walsh, 2007, p. 4
[617] Enarson and Walsh, 2007, p. 4
[618] Enarson and Walsh, 2007, p. 4
[619] Enarson and Walsh, 2007, p. 4
[620] Enarson and Walsh, 2007, pp. 4-5
[621] Enarson and Walsh, 2007, p. 5
[622] Enarson and Walsh, 2007, p. 5
[623] Enarson and Walsh, 2007, pp. 5-6

resilience.[624] The survey results show that emergency management organizations at the local level support engagement with high-risk populations more than provincial/ territorial or the federal governments.[625] Specific training protocols appeared to be a core activity for only half of the surveyed organizations.[626] Furthermore, even fewer organizations reported having established policies or guidelines in place to support high-risk populations.[627]

International experts in DRR have recognized the value of participatory risk assessments that identify both vulnerabilities and capacities. These assessments enhance DRR by mapping the resources, capacities and vulnerabilities present in each community.[628] Effective stakeholder engagement encourages a collaborative risk assessment process that can empower both individuals and communities – increasing overall community resilience.[629] Effective partnerships can also ensure that the most relevant local and in-depth knowledge can be provided to emergency responders.[630] It is crucial that such information be integrated into emergency plans and processes.[631]

This report emphasizes the importance of DRR initiatives that address social vulnerabilities of high-risk groups, as these vulnerabilities can be accentuated during an emergency event. The report highlights that effective stakeholder engagement, information-sharing, training and structuralized policies are necessary to ensure communities are able to respond to the needs of high-risk populations.

6.3.2. **Disability Alliance British Columbia**

In 2006, the BC Coalition of People with Disabilities established the Emergency Preparedness for People with Disabilities Committee (EPPDC).[632] As part of emergency planning workshops, the EPPDC created "A Shared Responsibility: The Need for an Inclusive Approach to Emergency Planning" to outline best practices to address the needs of persons with disabilities in emergency planning.[633] It is recognized that enhancing collaboration, particularly between health authorities, Emergency Social Services (ESS), municipalities, community-based organizations (e.g. DPOs and OPOs), medical equipment suppliers and pharmacare would reduce costs to governments and communities over the long term.[634] Designed with individuals with disabilities, community organizations, first responders and government officials in mind, this guide works to support these stakeholders to advance the following areas: Communication,

[624] Enarson and Walsh, 2007, p. 43
[625] Enarson and Walsh, 2007, p. 32
[626] Enarson and Walsh, 2007, p. 33
[627] Enarson and Walsh, 2007, p. 33
[628] Enarson and Walsh, 2007, p. 43
[629] Enarson and Walsh, 2007, p. 22
[630] Enarson and Walsh, 2007, p. 22
[631] Enarson and Walsh, 2007, pp. 22-23
[632] Martin, Karen. "A Shared Responsibility: The Need for an Inclusive Approach to Emergency Planning". BC Coalition of People with Disabilities. 2009. Retrieved from: http://disabilityalliancebc.org/exsumm_asharedresponsibility/, p. 2
[633] Martin, 2009, p. 2
[634] Martin, 2009, p. 4

Medical Needs and Functional Independence, Personal Preparedness, Training and Transportation."[635]

The report notes an increasing percentage of people with disabilities in Canada, particularly as the population ages. In addition, more persons with disabilities are living independently. Thus, ideally, emergency planning for persons with disabilities would be integrated with general emergency planning. Separate planning practices further exclude the needs of persons with disabilities from programs and services. Persons with disabilities can contribute to emergency response efforts when their requirements for independence are maintained.[636] The report also indicates that persons with disabilities may be inappropriately placed in hospitals when they do not require medical care, and recommends that responders not assume that caregivers will be readily available to a person with disability during an emergency. Furthermore, it is noted that persons with disabilities have been forced to abandon assistive devices to be evacuated and persons with disabilities are often unable to get timely and accessible transportation.

This report outlined the following key points:

- Many people with disabilities and seniors use assistive devices to function independently (e.g. mobility aids, communication aids, medical equipment, service animals).
- Some persons with disabilities depend on life-sustaining equipment and rely on regular access to power.
- Many people with disabilities rely on medications.
- During an emergency, people with disabilities can become separated from caregivers, assistive devices, service animals and medications.
- Some persons with disabilities may require support or supervision.
- Early identification of vulnerable persons and planning in advance can support persons with disabilities to maintain their health and independence.[637]

6.3.2.1. Recommended Areas for Action

The following are the key recommendations of the report:

Planning phase:

1. There is a need for coordinated protocols and procedures to acquire and distribute medications.

2. Any reception centres and shelters need the ability to refrigerate. Create an inventory of facilities with the capacity to access backup power.

4. Collaborate with partners to identify vulnerable people.[638]

Response phase:

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[635] Martin, 2009, p. 2
[636] Martin, 2009, pp. 4-5
[637] Martin, 2009, p. 3
[638] Martin, 2009, pp. 3-4

> 1. Ensure essential medical supplies and assistive devices can be procured and replaced, particularly in reception centres. One approach is to develop agreements with medical suppliers and any existing equipment loan programs.
>
> 2. Ensure there is psychosocial support available at all reception centres.[639]

Recommendations and actions by the BC Coalition of People with Disabilities and the Medical Needs Task Force for British Columbia and Canada include:

- Emergency planners should integrate the needs of persons with disabilities in general emergency planning. It is recommended that the FNF be used to plan for the needs of all members of a community.
- The Provincial Emergency Program should incorporate the FNF into its provincial emergency planning and guidelines.
- Emergency planners should implement the Social Organization Framework to improve understanding of social networks to better prepare communities and enhance community resiliency.
- Community-based organizations should be involved in each stage of emergency planning. Funding programs should be developed that aim to increase the capacity of communities.
- Multiple methods should be used for public emergency communications, including accessible formats.
- Any technologies utilized must be inclusive to the needs of persons with disabilities with considerations given to availability, affordability, accessibility and acceptability to various at-risk population groups.
- Specialized teams can be created through collaborations between Emergency Social Services, health authorities and NGOs that work with persons with disabilities.
- Reception centres and shelters should be developed and selected with universal access considered. Persons with disabilities should be integrated with the general population during an emergency and should not be sent to separate shelters unless there are complex medical needs. Levels of necessary supervision should be considered for individuals who require it.
- There should be robust and comprehensive planning to ensure supplies of medications and assistive devices in an emergency.
- Accessible transportation must be coordinated to improve evacuation processes, including considerations for time available to load assistive equipment and ensure accessible pick-up points.
- Persons with disabilities should not be separated from their assistive devices. If it is absolutely necessary to do so, processes should be in place to tag, recover and reunite the equipment with the owner.
- Any post-disaster reviews, including national reports, should involve persons from the disability community and other vulnerable populations to improve emergency plans.
- There should be collaborative efforts made by the Provincial Emergency Program, Emergency Social Services, and health emergency management, BC Coalition of People

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[639] Martin, 2009, p. 4

with Disabilities, the EPPDC and community-based organizations to address the needs of persons with disabilities.[640]

Disability Alliance BC has developed a toolkit to support organizations at the local level to:

- Integrate the FNF into their emergency planning and response;
- Increase their local capacity to respond to the needs of people with disabilities in emergencies and disasters; and
- Acknowledge the Provincial Government's commitment to the Emergency Preparedness building block of Accessibility 2024 at the local level.[641]

The FNF looks at five categories, referred to as CMIST: Communication, Medical, Functional Independence, Supervision and Transportation. Consideration of these categories encourages local governments to establish robust emergency responses. The FNF can ensure emergency response plans meet the needs of many vulnerable populations (not limited to persons with disabilities) and can therefore improve resiliency for the community as a whole.[642] The guide includes fillable worksheets to outline considerations for each of the five categories. The worksheets require the identification of tasks, persons responsible for the task, necessary resources and timelines.

One key theme is the importance of inclusive communication strategies. The guide recommends that organizations ensure all information is accessible by using multiple methods for public emergency communications, including alternative formats for people with disabilities.[643] The guide also emphasizes the importance of and collaboration between various organizations. The toolkit recommends creating teams familiar with the FNF and the coordination of efforts between health authorities and NGOs.[644] After Hurricane Katrina in the United States, the Special Needs Assessment of Katrina Evacuees (SNAKE) report recommended the creation of a team to address needs of persons with disabilities and seniors in emergency management processes.[645] Such teams should include representation from all levels of emergency management practice and organizations familiar with seniors and persons with disabilities.[646] These teams would be responsible to disseminate information, allocate resources and coordinate services among disability organizations to ensure accessible transportation, supply of medication and assistive devices, and accessible shelters and reception centres.[647] One example of a specialized team is the Functional Assessment and Service Teams (FAST), a component of the California Department of Social Services' (CDSS) established in 2007 under its disability-specific plan.[648] FAST consists of government employees and NGO staff with expertise working with persons with disabilities and supporting emergency

[640] Martin, 2009, pp. 6-8

[641] Disability Alliance BC. "A functional needs framework for every community: A toolkit for local governments". 2016. Retrieved from: http://disabilityalliancebc.org/dabc-eptoolkitcmist2016/, p. 5

[642] Disability Alliance BC, 2016, p. 5

[643] Disability Alliance BC, 2016, pp. 8-9

[644] Disability Alliance BC, 2016, p. 21

[645] Disability Alliance BC, 2016, p. 21

[646] Disability Alliance BC, 2016, p. 21

[647] Disability Alliance BC, 2016, p. 21

[648] Disability Alliance BC, 2016, p. 21

response efforts.[649] FAST has been effective at ensuring that persons with disabilities are able to access necessary resources, such as information, services, shelter and transportation.[650]

The toolkit further emphasizes the importance of integrating functional needs of persons with disabilities in shelter planning, as it is imperative that shelters are universally accessible. Consideration should be given to sheltering caregivers, service animals and assistive devices.[651] Building the capacity of communities should be a priority for local governments. Therefore, municipal emergency management programs should engage vulnerable populations to ensure emergency plans are inclusive. The guide includes communication and interaction tips specific to various types of disabilities.[652] Furthermore, community organizations should be engaged at each stage of emergency planning and response.[653]

It is imperative that local governments provide accessible services to all users during an emergency. An "all people all hazards" approach is helpful to orient emergency planners to ensure the inclusivity of all plans, processes and services.[654] Emergency management is a coordinated effort involving multiple sectors. It is important that volunteers and staff understand requirements for their duty to accommodate persons with disabilities, as many volunteers may be unaware of their responsibilities.[655] This guide was developed with three goals:

- Contextualize the legal duty to accommodate in emergency management processes
- Promote the FNF as the best approach to account for all needs within a community
- Provide resources to support governments establishing inclusive emergency plans that meet the duty to accommodate.[656]

One of the biggest challenges to inclusive emergency planning can be changing perspectives rather than the implementation of new programs.[657] Emergency programming can be made more inclusive by changing perspectives, engaging the capacities of the community, and innovative and inclusive uses of existing resources.[658] Creating specific programs for persons with disabilities furthers their exclusion from active participation; instead, efforts should be made to ensure existing plans and procedurals account for all the functional needs of a given community.[659] Moreover, supporting disability needs is more effective when approached from a functional rather than a disability perspective.[660] Therefore, all those involved in emergency planning should be trained to implement the FNF to better understand the necessary supports to ensure functional independence of all people in the community. This includes ensuring access to communications, medication, transportation, assistive devices, and other access and

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[649] Disability Alliance BC, 2016, p. 21
[650] Disability Alliance BC, 2016, p. 22
[651] Disability Alliance BC, 2016, p. 22
[652] Disability Alliance BC, 2016, p. 22
[653] Disability Alliance BC, 2016, p. 22
[654] Martin, Karen. "Creating Safe Communities: Local Governments' Legal Duty to Accommodate People with Disabilities in Emergency Response." BC Coalition of People with Disabilities. 2013. Retrieved from: http://disabilityalliancebc.org/creating-safe-communities/, p. 19
[655] Martin, 2013, p. 3
[656] Martin, 2013, p. 19
[657] Martin, 2013, p. 5
[658] Martin, 2013, p. 5
[659] Martin, 2013, p. 10
[660] Martin, 2013, p. 10

functional needs. .[661] It is important to draw on the specific knowledge, expertise and capacities of local communities when planning for emergencies, as communities often possess valuable information about themselves that can advance local emergency preparedness.[662]

Communities are invaluable during an emergency and can take on various forms, including:

- Community partners (local government coordinators and planners, emergency social services and first responders)
- Informal networks (family, friends, neighbours and co-workers).
- Formal networks (community organizations, social service organizations, faith-based organizations, schools and government programs).[663]

Networks provide support to individuals during an emergency. Many people are a member of at least one network; however, people can be excluded from these networks – particularly persons with disabilities, seniors and those in poverty. Local governments have a central role to play to connect excluded persons to community networks, as these connections can enhance resilience and therefore reduce vulnerability to disaster events.[664]

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[661] Martin, 2013, pp. 12-13
[662] Martin, 2013, pp. 12-13
[663] Martin, 2013, p. 16
[664] Martin, 2013, p. 16

7. <u>Special Projects Regarding Emergency Preparedness in Northern Canada</u>

7.1. *On Thin Ice* Project

On Thin Ice is committed to improving the security, well-being and inclusion of persons with disabilities in emergency preparedness in the North by building relationships between persons with disabilities, first responders, community leaders and NGOs.[665] The On Thin Ice project has developed a handbook to support emergency preparedness for people with disabilities living in the North. The handbook was developed with the Council of Yukon First Nations, Integrated Emergency Management Solutions, Nunavut Department of Family Services, NWT Emergency Measures Office, NWT Disabilities Council, Nunavummi Disabilities Makinnasuaqtiit Society, Yukon Council on disability, Yukon Department of Health and Social Services, and the Yukon Emergency Measures Organization.[666] The handbook details considerations for various types of disability, including:

- People with Mobility Disabilities[667]
- People who are Blind or have visual disabilities[668]
- People with Cognitive Disabilities (including Fetal Alcohol Spectrum Disorder)[669]
- Deaf People and People with Hearing Disabilities[670]
- People with Communication and Speech-Related Disabilities[671]
- People with Non-Visible Disabilities[672]
- People Who Use Electric or Battery-Operated Assistive Devices[673]
- People with Service Animals[674]

Indigenous people with disabilities can be particularly vulnerable to disasters in the North, as there can often be a lack of individual preparedness, insufficient training to respond to

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[665] On Thin Ice Project. "Facilities Accessibility Checklist." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. March 2014. Retrieved from: http://onthiniceproject.ca/tools-resources/, p. 2

[666] On Thin Ice Project. "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. N.d. Retrieved from: http://onthiniceproject.ca/tools-resources/

[667] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 37-39

[668] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 40-41

[669] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 42-43

[670] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 44-45

[671] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 46-47

[672] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 48-49

[673] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," pp. 50-55

[674] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," pp. 56-57

emergencies, and inaccessible transportation and accommodation.[675] This handout asserts that it is important to consider a range of disabilities and include people with disabilities in emergency planning wherever possible.[676] Specific factors to consider when planning to support persons with disabilities in an emergency include:

- The degree to which the individuals in the community are prepared
- Availability of accessible communication methods
- The level of training on how to support persons with disabilities
- Availability of accessible vehicles
- Degree of accessibility of emergency shelters[677]

The handbook emphasizes the importance of establishing a personal support network of people with the specific knowledge required to support the person with disabilities, including someone who is unlikely to be impacted by the same disaster.[678] Those who support persons with disabilities should be given specific instructions on medications or use of assistive devices as required.[679] The handbook also recommends that evacuation plans be developed for a person's home, work and places they go regularly.[680] Special considerations are recommended if the person lives in a multi-unit building, such as informing the building manager about any special needs. It is recommended that the person contact their local emergency services to provide information about special assistance required during an evacuation.[681] In some Northern communities, it may be necessary to evacuate by air and plans should be made for this possibility with the recognition that normal weight limits do not apply to assistive equipment.[682]

The *On Thin Ice* project team researched international best practices for emergency management practices inclusive of persons with disabilities.[683] The best practices outline effective communication strategies, accessible sheltering and provision of accessible transportation.[684] These best practices were also considered in the context of the North, recognizing that emergency strategies implemented in the South may not meet the needs of northern communities.[685] Given the remoteness of northern communities and extreme weather conditions, first responders and communities must self-prepare for emergencies and be

[675] On Thin Ice Project. "Final Disability Inclusive Emergency Preparedness Handout." Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. N.d. Retrieved from: http://onthiniceproject.ca/tools-resources/, p.1

[676] On Thin Ice Project, "Final Disability Inclusive Emergency Preparedness Handout", p. 2

[677] On Thin Ice Project, ""Final Disability Inclusive Emergency Preparedness Handout", p. 2

[678] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 9

[679] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 22

[680] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 29

[681] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 22

[682] On Thin Ice Project, "Emergency Planning and Preparedness for People with Disabilities in Canada's North – A Handbook," p. 33

[683] Higham, Stephen, Qureshi, Aqeel, and Leduc, Nathaniel. "On Thin Ice: Suggested Best Practices for Northern Emergency Planning." On Thin Ice Project, Global Alliance for Accessible Technologies and Environments (GAATES) and the Government of Canada. Retrieved from: http://onthiniceproject.ca/tools-resources/, p. 3

[684] Higham et al., p. 3

[685] Higham et al., pp. 3-4

prepared to support themselves for as long as possible.[686] Therefore, it is vital that those with and without disabilities work together in an emergency and that community members, volunteers and first responders receive training and/or knowledge on how to best support persons with disabilities.[687] Community partnerships have been identified as an effective approach to emergency planning, as some community groups may have vital experience, knowledge and connections to support persons with disabilities in emergencies.[688] Strong community networks are also valuable resources in an emergency, as a community that is well connected may have informal communication networks.[689] Identifying and utilizing community leaders in the emergency planning process is considered a best practice.[690]

It is also recommended that emergency management organizations (EMOs) and broadcasters create a multimedia library of emergency messages and signage in various accessible formats. This ensures that information can be communicated quickly to all parties.[691] This should be used in conjunction with a Voluntary-Alert subscription service, where individuals register to receive emergency messages in accessible formats.[692] Consideration should also be given to ensuring that all forms of communication – radio, television, internet, social media, telephone, smartphone apps, person to person and signage – are accessible to persons with disabilities.[693]

Transportation and shelter are key considerations when supporting persons with disabilities in an emergency. Accessible means of transportation must be available to support people with disabilities, particularly during an evacuation. Transportation options can include buses, taxis, air travel, personal vehicles and recreational vehicles (e.g. snowmobiles).[694] Shelters must be accessible to persons with disabilities during an emergency. It is recommended that EMOs create a voluntary registry for persons with disabilities so they can detail any assistance they might need during an evacuation.[695] A variety of facilities should be considered to ensure shelters are accessible and consideration should especially be given to accessible washrooms, accessible reception space, options for parking, sheltering service animals and cold storage for medication.[696]

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[686] Higham et al., p. 5
[687] Higham et al., p. 5
[688] Higham et al., p. 6
[689] Higham et al., p. 6
[690] Higham et al., pp. 6-7
[691] Higham et al., p. 7
[692] Higham et al., pp. 7-8
[693] Higham et al., pp. 8-14
[694] Higham et al., p. 15-17
[695] Higham et al., p. 19
[696] Higham et al., p. 19-21

Part E

8. Conclusion and Areas of Further Study

The focus on persons with disabilities in emergency management has been growing rapidly nationally and internationally since the introduction of the UNCRPD, especially in the past five to ten years. International frameworks such as the Sendai Framework recommend centring persons with disabilities in emergency preparedness initiatives and implementing principles of universal design. Humanity & Inclusion also uses the term "Inclusive Disaster Risk Reduction (DRR)", which emphasizes the need for inclusive principles in emergency preparedness efforts.

It is evident that inclusion of people with disabilities in emergency management has become a focus for many governments and will continue to increase in importance, particularly as the population ages and the frequency of costly natural disasters increases. The implementation of accessibility legislation and strategies to support persons with disabilities throughout Canada also means there are greater public expectations regarding access and delivery of public services. Moreover, development of programs and policies to help persons with disabilities live independently means that efforts to enhance community-level resiliency will continue. The recent outbreak of Coronavirus (COVID-19) has also emphasized the importance of inclusive emergency preparedness, response and recovery.

Emergency management is a complex field and there are many actors involved across government departments, throughout various levels of government and across jurisdictions. The organizational complexity of this can cause coordination challenges, especially when gathering information and setting standards. Since there are many jurisdictions and authorities involved in emergency management, there are often different standards in in place.

It is important to consider the contextual factors of each jurisdiction (e.g. geographical, governance, social contexts) when examining its policies and programs, which often reflect various contextual considerations. For example, NZ has made NZ Sign Language (NZSL) a national language whereas many jurisdictions have mandated that emergency communications be accessible, including the use of sign language interpretation.

The research emphasizes the importance of identifying the access and functional needs of all people in a given jurisdiction in advance of an emergency. Effective planning and disaster preparedness have been identified as effective strategies for DRR. Functional and access needs should also be accounted for in all stages of emergency management, including alert and communication, response and recovery. This requires inclusive engagement and coordination across levels of government and stakeholders.

There can appear to be tensions between recommendations for individual-level resiliency efforts and mandated support to persons with disabilities. In Canadian emergency preparedness strategies and guides, it is expected that all people can support themselves for 72-hours. However, authorities are mandated, through legislation or policies, to support persons with disabilities and ensure access and functional needs are met to participate in public services and programs (e.g. emergency management). Community-level resiliency efforts and a whole-of-society approach are recommended to ensure that access and functional needs at the community level are addressed.

There are limits to the information compiled in this report. This project is meant to be an initial scanning work of policies and programs to support persons with disabilities during an emergency. The scope of this project is primarily high level and focuses on Federal and Provincial/Territorial programs; however, many relevant programs and policies lie within local authorities (e.g. municipal governments). Canada also has many diverse geographic contexts to consider, and this report only considers these when presented in jurisdictional documents. Survey responses were not collected from all jurisdictions due to several factors, primarily limits to jurisdictional capacities resulting from emergencies, the most significant being the outbreak of COVID-19. Intersections of age, race, indigeneity, gender, disability, ethnicity, income, primary language and other social factors also influence the necessary support to persons with disabilities in emergency situations. These are not thoroughly discussed in the report but are vital considerations.

COVID-19 has demonstrated that emergency responses require a whole-of-society response – public, private and not-for-profit organizations, as well as the general public. Addressing challenges in coordination is necessary to ensure that information is effectively shared, especially in an emergency when circumstances may be changing rapidly. Subsequent reports analyzing our response to COVID-19 will likely identify additional lessons to improve how we can advance inclusive disaster risk reduction across Canada.

Across jurisdictions there have been many emergency management activities that have centred on information gathering, standard setting and behaviour modification. With respect to information gathering, key considerations include collecting disaggregated data based on age, gender, disability, race and other social factors to effectively measure the success of strategies and action plans. Information-sharing between stakeholders is also a key consideration. Representation of persons with disabilities and related organizations within emergency management committees and organizations is also important to consider. The research emphasizes that persons with disabilities should lead and be centered in disaster risk reduction (DRR) initiatives. There are also many standards that have been implemented at the international, national and provincial/territorial level. Many of these are enforced through human rights processes. Behaviour change continues to be an area of focus, as challenging the stigma and negative attitudes towards persons with disabilities can be difficult. There is a shift occurring in international, national and provincial/territorial emergency management policies and programs toward being inclusive, person-centred, focused on functional and access needs instead of the disability itself, and recognizing the value of the knowledge and lived experience of persons with disabilities to enhance community resiliency.

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Appendix A: Complete List of Survey Questions

These questions were included in the survey sent to emergency management contacts in federal, provincial and territorial organizations.

<u>Information Gathering</u>

Representation of persons with disabilities or related organizations in emergency management committees within Governments.

1.) Among emergency management committees in your jurisdiction (e.g. Emergency Management Committee, Emergency Management Program Committee), are there members from organizations that represent persons with disabilities (e.g. stakeholder groups, not-for-profit organizations, advocacy groups) and/or are there members with lived experience with disabilities (i.e. individuals with disabilities representing their experience)? Please describe.

2.) If no, is there a role on the committee responsible to liaise with organizations or individual persons with disabilities? Please describe.

3.) If there is additional information to provide concerning the inclusion of persons with disabilities or organizations that represent them in your jurisdiction with respect to emergency management, please provide it here.

Data access, authority, and management of jurisdictional information relating to persons with disabilities.

4.) Is there a process to collect and manage (i.e. add, modify, and delete) data to identify the location of persons with disabilities (e.g. Registry, database)? If so, please describe.

5.) If you responded "yes", how is data collected? Is there a specific role that is responsible for collecting data? If so, what role is responsible for collecting this data?

6.) If you responded "yes", how is data managed (i.e. kept up to date) to ensure the integrity of the data (i.e. What are the practices to ensure the accuracy and completeness of stored data)?

7.) What role(s) has authority over and access to this data?

8.) If data management is outsourced (i.e. managed by an organization outside Government), please describe the agreement and role of the external organization, and the process by which the government agency interacts with the external organization.

9.) Are there processes to manage data collected by industries directly regulated by your level of government (e.g., Federally, such as telecommunications, airlines and transportation, banks, and Provincially/Territorially, such as housing, and healthcare) relating to persons with disabilities and emergency management?

10.) If there is additional information concerning management of data relating to persons with disabilities that relate to emergency management in your jurisdiction, please provide it here.

<u>Standard Setting</u>

Involvement of persons with disabilities in emergency planning / exercises <u>before an emergency event.</u>

11.) Please describe the ways in which persons with disabilities are involved in planning emergency plans, training, and evacuation processes?

12.) If there is additional information regarding participation of persons with disabilities in advance of emergencies in your jurisdiction, please provide it here.

Considerations for persons with disabilities <u>during an emergency event.</u>

13.) Are there communication resources/ tools readily available in various accessible formats? Please describe (e.g. What formats are available? Are there interpretation services? What Web content standards or guidelines in place?)

14.) Are there accessible shelter and transportation options available for person with disabilities in an emergency? Please describe.

15.) Is there a mechanism to evaluate the accessibility and effectiveness of emergency shelter and transportation options for persons with disabilities? Please describe.

16.) If there is additional information regarding persons with disabilities during emergencies in your jurisdiction, please provide it here.

External contracts and services

17.) What requirements, if any, apply to external organizations (i.e., private sector or not-for-profit sector emergency planning and procedural requirements) with regards to emergency management and persons with disabilities (e.g., required emergency planning or accessibility for persons with disabilities for organizations that have a certain number of employees) .

18.) Are specific considerations for services to persons with disabilities included in external (i.e. private sector and not-for-profit) agreements that relate to emergency management (e.g. contracts, memorandums of understanding, agreements, with organizations like the Red Cross, for example.)? Please provide details.

19.) If there is additional information regarding external contracts concerning emergency response and persons with disabilities in your jurisdiction, please provide it here.

<u>Behaviour Modification</u>

Considerations for persons with disabilities <u>after an emergency event.</u>

20.) In which ways are the experiences of persons with disabilities included in post-event reporting (e.g. audits, reports, and reviews)? Please describe. (i.e. How is feedback from persons with disabilities sought following emergency events?)

21.) In which way are the experiences and feedback from persons with disabilities integrated into future emergency planning (e.g. updating emergency plans, creating new training programs, risk assessment practices)? Please describe.

22.) In which ways do you monitor progress to ensure recommended changes are adopted?

23.) If there is additional information regarding the reporting of experiences of persons with disabilities following emergencies in your jurisdiction, please provide it here.

Training and Education

24.) What training or educational resources (e.g. guidelines, workshops), if any, are available for personnel serving persons with disabilities that relate to emergency management (e.g. first responders and emergency social service workers)? Please describe.

25.) If so, is this training a requirement for emergency management staff? Do you monitor the percentage of staff that have taken the training?

26.) If so, were persons with disabilities, or related organizations, a part of the development of these resources? Please describe.

27.) What is the process to develop new training or educational resources that relate to emergency management and persons with disabilities?

28.) If there is additional information regarding training emergency responders to support persons with disabilities during emergencies in your jurisdiction, please provide it here.

Enforcement of policies and practices

31. What methods are used to enforce requirements for when working with persons with disabilities on emergency management issues? (e.g. training requirements, reporting.)

32. If there is additional information regarding enforcement of policies and practices regarding emergency responders and persons with disabilities in your jurisdiction, please provide it here.

<u>Additional Information</u>

Related policies, plans, and documentation

33. What are the key documents/ policies relating to emergency responses, particularly relating to persons with disabilities, in your jurisdiction?

34. If there is any other information relevant to how your jurisdiction integrates considerations for persons with disabilities in emergency management, please provide it here.