Assessing the Impact of Hurricane Katrina on Persons with Disabilities

Executive Summary
January 2007

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Funded by the National Institute on Disability and Rehabilitation Research (H133B000500-04B)
Background

In late 2005, a report was issued by the U.S. House of Representatives Select Bipartisan Committee to Investigate the Preparation for and Response to Hurricane Katrina. It documents 90 specific failures at all levels of government in planning and response to Hurricane Katrina and the other Gulf Coast storms of 2005. Despite its comprehensiveness, this document pays little attention to the unique challenges associated with ensuring that the needs and priorities of persons with a wide range of physical and cognitive disabilities are met before, during, and after a disaster.

Building on prior work of investigators from the University of Kansas and University of New Mexico, including the CDC/ATPM funded Nobody Left Behind project at the University of Kansas, the National Institute on Disability and Rehabilitation Research (NIDRR) sought to address this gap by funding a research project to identify major barriers faced by centers for independent living (CILs) and emergency managers in responding to the needs of people with disabilities with Hurricane Katrina. Through a combination of surveys, focus groups, and interviews in six research sites in the Gulf Coast states, investigators gathered information on the experiences of respondents and developed recommendations to address gaps in policy, planning, and practice.

Key Findings

There were significant gaps in three broad areas:

- pre-disaster planning by CILs, individuals with disabilities, and local emergency management agencies;
- pre- and post-disaster communication and information sharing within CILs, between CILs and consumers, and between local emergency management agencies; and
- pre- and post-disaster coordination between CILs and other disability agencies, local and regional emergency management organizations, and community supports.

2. www.nobodyleftbehind2.org
Recommendations

1. An initiative should be developed that places statewide independent living councils (SILCs) in a leadership role that brings together disability organizations and emergency management organizations in all states.

2. Disability organizations, including CILs and SILCs, should initiate planning for campaigns targeted at local and state emergency managers to separate the needs of people with disabilities from other persons with so-called “special needs.”

3. Staff and consumers of CILs should implement systematic training and education so that increased numbers of people with disabilities will have personal disaster plans.

4. An education and training curriculum should be developed around effective organizational disaster response and recovery plans for CILs across the country. This should include content specific elements of an organizational disaster plan, materials that can be used by the leadership and staff of CILs and technical assistance to CILs for developing and implementing these plans.

5. User friendly, evidence-based research findings should be made available to assist CILs, other community-based organizations, and interested people with disabilities to help them understand how existing emergency planning and response systems from around the country operate.

6. State emergency management officials should be encouraged to designate one or more disability contacts at the city and county level as first responders or relief providers for inclusion in emergency operations centers when a disaster strikes.

7. Community wide efforts should be put in place that identify persons with disabilities in need of additional services in a disaster and should be developed to link these persons to services required to either evacuate or “shelter in place.”

8. Community wide efforts need to be put in place that can identify functional supports, including accessible transportation, durable medical equipment, alternative communication systems such as screen readers, sign language interpreters, etc., personal assistive services, and accessible shelters for persons with disabilities in a disaster. Systems need to be developed to link these goods and services to individuals who need them during evacuation and when in shelters.

9. Investments need to be made at the community level to provide back-up community supports for persons with disabilities in disaster effected areas whose abilities to function independently are dependent upon maintaining access to social and medical services.
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View the full Katrina report on the web at:

This report was prepared by Glen White, Michael Fox, and Catherine Rooney at the University of Kansas Research and Training Center on Independent Living and Tony Cahill at the University of New Mexico. This report reflects information obtained from in-depth interviews with CIL and Emergency Preparedness Directors and staff in Alabama, Mississippi, and Louisiana. The National Institute on Disability and Rehabilitation Research funded the research comprised in the Executive Summary and Final Report on: Assessing the Impact of Hurricane Katrina on Persons with Disabilities (H133B000500-04B). The views expressed in this report are not necessarily those of NIDRR, the University of Kansas, or the University of New Mexico.

Document Print Date, January 2007.