

DANIELLE AUGUSTIN: Hello and welcome everyone to today's webinar Prepared4ALL including disability and local emergency planning. We would like to thank all of you for joining us today. Before we begin there are housekeeping items and logistics we want to go through. First off, because this is webinar format all attendees automatically have their cameras and microphones turned off.

If you have technical issues please use the chat feature and let us know what's going on in a team member will reach out to assist you. We also have a Q&A feature that you will see at the bottom of your Zoom window so if you have questions throughout the presentation you can type them in their. There will be time at the e for questions or we will read them out loud as appropriate. We also have cart captioning available and if you would like to access it please click the CC button to view subtitles. If you wish to make them smaller or bigger click on the button again.

A new Zoom feature includes the ability to move the caption box to your preference. There is also an American sign language interpreter in this session. To and her video hover over her screen and click the three small dots in the top right corner. You can also click view in the top right corner to adjust your speaker viewing preferences.

This meeting is being recorded and will be available in a few days following this event as well as a written transcript from the captioner. We want to thank you all for coming and joining today and I will turn over to Adriane to get us started.

ADRIANE GRIFFEN: Welcome to today's webinar. We are excited to share with you about our Prepared4ALL initiative. First just wanted to give a shout out and acknowledge our team. We do this together, with you in a few folks at AUCD have temporarily come on board to help get this off the ground. I want to give a shout out and acknowledge Sue Wolf-Fordham, Lex Owen and Danielle Augustin who you just heard from. I just wanted to acknowledge this group here today.

What I wanted to do first was give you a quick overview of the prepared for all initiative and then we will get in to more specifics. Overall what we are trying to do is build capacity for disability organizations locally to develop relationships with emergency managers and public health planners to increase disability inclusion in planning and preparedness conversations and efforts.

Our primary audience is disability organizations. Secondary audiences are those emergency managers, public health professionals, healthcare professionals. But primarily we are looking to get the disability organizations locally get a seat at the emergency planning table.

A quick overview with the program model. We have three different components with this effort that are guided by the community of partners, our national advisory committee, the Subject Matter Expert's. We have town halls which compliment our online training in a disability coaching program. With that said I will shift the virtual podium over to you Sue.

SUE WOLF-FORDHAM:

Can you hear me? OK. This is our program model. It starts at the top with our community of partners. Stakeholder input has been super important for this project and we have an advisory committee comprised of representatives of local disability – I'm sorry – of national disability organizations that have local branches or affiliates and we have subject matter experts in the field. Together they inform all parts of the project. Next, as you can see on the left and the green square the next part are town hall meetings.

They are monthly. They are intended for the local disability organizations we work with as well as other planning partners. Those who attend the town halls are welcome to take our Prepared4ALL whole community online training and you see that in the middle box on the screen.

And then another component is our disability inclusion coaches. These are students and trainees internetwork who have also taken the course who are doing research and hands-on learning in providing support to the local disability organizations. Together the local disability organizations and the coaches are forming partnerships with local emergency and public health planners.

The goal of this project is what we call "a seat at the table." What that means will look different for each community. Here is a couple of examples. It may be a literal seat at the local emergency planning table for a group of disability community representatives. It may mean submitting comments on the local emergency plan. It could mean working with partners to identify gaps in the local plan and strategizing how to close the gaps.

It could mean sharing information about how to combine qualified sign language interpreters for emergency shelters or COVID vaccine dispensing sites. It could also mean reviewing alerts, warnings, public education and other communications intended for the disability community.

What I particularly like about this project is it is very flexible. It can be tailored to the needs of the community. And I think that is very important because, as we all know, every community in the US is a little bit different.

We have three main programs can -- program components. The online training course which is an eight module course that can be taken two ways. You can take it straight through and earned a certificate or you can take a lesson at a time and that capability should be available shortly. We have the town hall meetings for the local disability organizations. We call them are affiliates and partners. And we have the disability inclusion coaches, that is our students and trainees.

I think it is back to you Danielle.

DANIELLE AUGUSTIN: It is. As mentioned one of our three pieces is our online training course which is called prepared for all whole community inclusive emergency planning. To start it off I will show a quick teaser video that we have that gives a good -- good overview of what our training is all about.
(Video Plays)

SPEAKER:

The Prepared4ALL whole community...

DANIELLE AUGUSTIN: Just a quick overview. The nature in which the training is set up we wanted to be an immersive experience. We have set it in this fictional town of Disasterville and knowing that emergency preparedness is a serious topic so we wanted to bring a little bit of lightheartedness to the training so we named it Disasterville and we have characters who have good names as well.

Really the learners when they take the training is taking on the role of Terry trainee who is a local disability professional from a nearby town that is coming to Disasterville to learn about whole community emergency planning and how they can implement it in their own communities.

They are guided by three main characters which we call the mentors. The first one on the far left is Carrie. She is the local ADA corner in the middle we have PJ who is the local public health preparedness planner and on the far right we have EM who is the local emergency manager. The learners guided by these three people are in professionals in their own different areas to learn about the whole community.

As Sue mention, we have 8 different lessons. The first one is a welcome and explanatory piece for the overall process and how it applies to COVID-19. You can see throughout we have infused COVID-19 and the pandemic in the considerations there because it's something going on right now we are all dealing with. The second is called the Prepared4ALL process in action emergency dispensing sites/COVID-19 vaccines. It is the concepts for the overall process. We then get into the effects of disasters and COVID-19 of people with disabilities.

Lesson four is the piece that might be new content knowledge for disability professionals. We go into the American emergency management system in providing that foundational level of knowledge to be able to understand emergency planning.

Lesson five we talk about disability demographics, community living, communication and accessible meetings. This piece is about taking what you already know is a disability professional and learning how to meaningfully engage in learn that information to get by.

Lesson six is about the ADA, the Americans With Disabilities Act and how it applies to disasters and pandemics. Lesson seven is the whole emergency planning philosophy. And then lesson number eight is applying all and bringing it all together for community stakeholder meeting.

We are going to take this opportunity now to do some screen sharing and show you all what the website looks like and do a little demo. I do have to say before we jump in, a huge thank you to the University of Kentucky Human Development Institute for helping us bring this training to life and hosting on their platform. We absolutely cannot of done it without them in their team.

We will give you a demo of a couple different lessons and really some of the interactive components you will have the ability to take part in with this training. The first one we are going to look at is a snippet from lesson three which is called the effects of disasters on COVID-19 and people with

disabilities. This specific topic is called impacts an emergency disasters.

You will see here in this image we have created a wonderful set of characters that are inhabitants of Disasterville. In this image we have community members of different ages, genders, abilities and races. Darren downtown Disasterville near a grocery store. They are all wearing facemasks. Some people are walking in groups and some are sitting down at tables talking into people have service animals with them.

I will go ahead and read some of the dialogue. Here is Carrie one of the characters we mention.

Terry says let's keep walking and talking. As I was saying, some committee members, local planners, other local officials don't understand the importance of emergency planning within for people with disabilities or they may think it's someone else's job. Prepared4ALL means for all. And she runs into characters PJ and EM. She says I was just talking about some planners knowledge and gaps. PJ comes in and says I've been thinking about this a lot. Here you will find a thanks but. This is a spot in the training or we are encouraging folks to stop and reflect on the question in its applicability to everyday life in the real world situation.

PJ asks that the learner suppose a local emergency planner ask you why they should include people with disabilities and local emergency planning. Something I think is a very common question that folks can get asked. So they ask what can you say if your post with this question.

Again, we encourage folks to stop and they see this thought bubble think spot but and we provide them with some sample answers. An example of something they can say is people with disabilities now and can express their own needs best. Don't guess what local residents with disabilities need. Simply ask them. Another suggestion would be it's best practice to include people with disabilities in the planning process and it's part of the whole community inclusive emergency planning.

Then go on to EM our emergency manager and he says if someone asks you why this matters, you could also talk about health and equity. And local emergency planning is at the core of it a health issue. Skipping down a little bit we see him say that people with disabilities are 2 to 4 times more likely to die or get injured in an emergency or disaster compared to people without disabilities. That's another reason why we need to be Prepared4ALL.

And then we introduce some other characters. This is Caesar. He is a businessperson and he uses a motorized wheelchair and has a service dog named Ginger. He goes on to speak to his experience having Ginger and having a service animal and shelter situations so we really diving two different characters who are modeled after, of course, real people who experience these things in their everyday life and how to navigate that.

Another think spot where we ask some questions. We meet another character called Rafe. He is an invisible disability. He experiences a mental health issue which is PTSD or posttraumatic stress disorder. He is talking about sharing his real-life experience writing a book on real disaster experiences on people with disabilities. So making it conversation and immersive.

Lastly, one more thing on this page that we want to show is we do incorporate real-life situations that happen and use it as learning experiences. We have an example here from a past emergency. This is from an emergency shelter in New York in 2012. The photo shows a staircase leading into an emergency shelter. There is a handwritten sign that is directing folks with accessibility needs to request assistance at the security desk. However, the security desk is at the top of the flight of stairs. So just really showing an example of how there is a lot of work to be done in this doesn't happen every day in emergency management and disasters in our world.

With that I will switch gears to Sue and we will jump into lesson four.

SUE WOLF-FORDHAM:

Lesson four is about the American emergency management system. Our research showed us that folks in the disability community needed more information about emergency management and public health preparedness and folks in the planner community needed more information about disabilities. This is particularly geared to people who don't know the emergency management system which is really a system of systems.

In this scene the focus is on how to connect with both emergency managers and public health preparedness planners. At the top of the page you can see three mentors Carrie, PJ and EM. They are having a meeting and wearing face mask. Carries a service animal, a miniature horse is next to her. The dialogue starts with EM the emergency planner. He says the goal for your action team is to connect with your local emergency and public health planners, and develop a relationship and ultimately get a seat at the local emergency planning table.

Can we scroll down a little bit more, Danielle? When engaging with local planners, your Action Team should tailor its messages to specific audiences. So here we are telling disability organizations that different messages may resonate with emergency managers and with public health preparedness planners. Likewise, we want the planners to no different messages may resonate with the disability community.

There is going to be a table we are going to see. The introduction to the table reads "below are messages about including people with disabilities and local emergency planning. See how the same message may be adjusted for either emergency managers or public health preparedness planners."

I'm going to read a few examples. The first item is inclusive emergency planning is better for the community. For emergency managers their planning priority is figuring out how to save the most people in an emergency. If they see inclusive planning as part of this work they may understand the importance of it much better. For public health preparedness planners there, similar to managers, is improving health outcomes. In the context of improving community health, then that ties to public health priorities.

Again, examples of tailoring messages depending on the values and priorities that the audience holds. Another example in the table is the message of how a whole community or inclusive approach to

planning is efficient. Here the messages have been tailored to reflect the goals of the groups we discussed. So for managers we want to emphasize a responding to identified needs of the disability community before an emergency could save lives. For example, making sure all emergency alerts are available in alternate formats such as American sign language, large print and braille. This would ensure people who are deaf, blind or have low vision are not left behind after -- during an evacuation. For public health planners whole community planning can improve public health outcomes. Example, knowing the number of people with disabilities and anticipating their functional needs prior to an emergency allows health departments to better prepared to respond quickly and equitably to people with disabilities during an emergency.

This decreases negative public health impacts such as COVID spread or water contamination. As the lesson continues, the learner encounters more strategies for engaging with local emergency and public health preparedness planners. I think Lex is going to take us through lesson seven.

LEX OWEN: Hi everyone. Thanks, Sue. Lesson seven goes deeper into whole community inclusive planning, emergency planning. Here we are introduced to some new ideas. Ideas that might be new to folks in the disability community including access and functional needs and the CMIST framework. We will actually go more into detail about those two concepts.

These are two concepts that have been developed to help planners better understand the needs of people's with disabilities during emergencies, disasters and pandemics. But since the disability community does not always know these terms, this part of the training seeks to build a common language you can use in your local partnerships.

The image at the top of the screen shows seven community members wearing face masks, seated around a table in a small meeting style room. The dialogue starts with Marco who is a deaf baby wearing character who uses American sign language to communicate. He is pictured with his wife Frannie and they had their baby Juniper. Both Frannie and Marco where facemasks and speak together. We show that Marco is communicating using sign in the dialogue says now that you know the basics about whole community, we should talk about access and functional needs in the CMIST framework which can be useful in thinking about how to meet needs during emergencies.

And then we have PJ who is again recalling the public health preparedness plan. At this town. He gives some important context about these concepts and how to apply them in a community planning. PJ says according to the US Department of Health and Human Services, office of the Assistant Secretary for preparedness and response or ASPR for short about half the people in the US have temporary or permanent conditions that limit their ability to act during a disaster. These people have access or AFN for short.

Rachel, another community member we are meeting. Rachel is a White woman with salt-and-pepper hair. She wears a White T-shirt and blue jeans. She has a glucose monitor reflecting her status as a type I diabetic. Rachel says ASPR says that regardless of a specific diagnosis or label some people have access or functional needs that may interfere with their ability to access and receive medical emergency services before, during or after a disaster pandemic the COVID-19.

Then we get a deeper understanding of what this really looks like for folks. We have a description of who are we really talking about what we are talking about access and functional needs. So reading a little bit here we have access based needs which are that all people must have access to certain resources such as social services, accommodations, information, transportation, medications to maintain health, and so on. People with access needs face challenges accessing emergency services or resources.

And then function based needs refer to restrictions or limitations an individual may have that requires assistance before, during, and/or after a disaster or public health emergency. So people with functional needs may need help to function during emergencies, disasters or pandemics like COVID-19.

So we are really trying to understand and inclusive framework of who might need assistance and have certain needs during a disaster response. And thus, it is really important to plan to include those folks in the plans.

Here we are really expanding this to think about the whole community. What we have on the screen is an image we adapted from ASPR in this list out different populations that may have access and functional needs. For each of the icons there is an accompanying word. I will read this out right now. Children, people who live in nursing homes, group homes for people with disabilities and longer-term facilities, older adults, pregnancy, people with disabilities, people with chronic health conditions, substance abuse disorder, people experiencing homelessness, people with limited English proficiency and non-English speakers, people with limited transportation access, people with low socioeconomic status.

Really what we have here is a really broad tent and thinking about all the different people in the community that may experience needs either access based or functional needs during an emergency. What we are really trying to do here is include disability in this framework and also highlight the particularities of the needs that folks with disabilities may have as part of this access and functional needs. We also included some specific kind of issues that are related to COVID. I will read this.

Due to COVID, there are additional people may have access and functional needs, per the Centers for Disease Control and Prevention. Racial and ethnic minorities. People who have intellectual and develop mental disabilities. People living in rural communities. People in correctional and detention facilities. Newly resettled refugee populations. Those are populations that planners and communities they want to pay particular attention to as being particularly vulnerable.

The rest of this topic goes on to provide examples from Disasterville from characters who describe their own access and functional needs. For instance, we have Rachel who again is a type I diabetic reliant on insulin. So we can imagine that during a disaster if she was unable to have access to insulin or refrigeration to keep the insulin cold, she would then have an access and functional need.

We also have PJ our emergency preparedness planner who identifies as nonbinary and has a physical disability. He may experience discrimination based on transphobia especially in shelters that are

segregated by gender. This is really a taste of the training. We wanted to kind of do a little bit of a demonstration to show you the kinds of things we are focused on and give you a sense of what it is like to participate in the training.

We have a number of interactive questions and we showed you a little bit of that. We really want to give folks a sense of really imagining how a community could work and can work and does work. That is our training.

DANIELLE AUGUSTIN: Let me pull the sides back up. I will pass it over to Adriane. Thanks Danielle, Lex and Sue for going through the short teasers of the longer training. We hope that is helpful for all of you. We want to just say thank you again to our partners at HDI at University of Kentucky for the work for pulling the online training together. Next I want to talk about the role of local disability organizations as local partners, local affiliates if you will for our Prepared4ALL initiative.

We really see the local disability organizations as key critical arms, if you will, of the local outreach efforts. What we have done here is really just highlighted for you three ways you can engage in a local level as a Prepared4ALL affiliate or partner. First and foremost we hope you're able to go online and take the training. This is a great way to increase your knowledge around emergency preparedness and really build out your skill set, your self-efficacy around that and I would also add that the lessons in the online training are very applicable to COVID testing, COVID vaccination distribution sites, all of it is relevant to public health challenges we are living through at the moment. I would encourage you to take the training either in its entirety. There is a certain section or lesson you would like to take a deeper dive into it is available that way as well.

Another way to engage as a local partner or local Prepared4ALL affiliate is to attend the town halls. These happen on the third Wednesday of the month 1 p.m.-2 p.m. Eastern time. These are spaces for you to bring whatever you are working on and really collaborate with colleagues across the country and live time. We encourage you to check those out and we will talk more about those in a second.

We encourage you as a local partner, local affiliate to engage trainees. We know even beyond the AUCD network their public health trainees that mining practicum hours or perhaps emergency managers that might need hands-on training experience. The prepared -- Prepared4ALL. We would encourage you to think about that as well.

Next, wanted to take a deeper look at the affiliate partner role give a shout out to our colleagues at the Florida Department of Health. Here are a group of our colleagues pictured in a vaccine event they hosted. Really as a prepared for all affiliate and local partners you are the boots on the ground, you are the ones doing the work and across race -- grassroots community-based level. That is the role we hope you can really take the prepared for all initiative and apply it in a local way.

Next just a plug for the affiliate and partners to join us at the monthly town halls. These have been really valuable spaces where you can get together virtually and problem-solving network. It's really an amazing space where you can bring an issue and get live time feedback and advice from colleagues across the country. We look at this as a way to scale build but also network. Know that you are not in

this alone. There is ongoing support with the monthly town hall as well. If you are not ever able to make it we archive the recordings on our website and we tend to utilize these as a time and space to focus on strategies really reflecting on how are you strong? Ways that you are able to leverage an honor where you are but leverage your strengths and share strategies with each other so that we are able to build and share the successes.

We do it intentionally guide these town halls with learning agendas so that we are able to really think through the ways that the conversation flows in that it connects back to some of the content we just shared with all of you in the online trainings as well. Next up in our time with you today I'm going to actually turn it back to Danielle so we can hear from our -- from one of our Prepared4ALL affiliates.

DANIELLE AUGUSTIN: This is Danielle. Next thing we want to do is highlight one of our affiliates, Roseanne. She has been a wonderful partner in this work and coming to the town halls and bringing her successes and challenges in engaging with the group. We want to give her a space and a little bit of time to talk about her experience.

ROSANNE RUSHING:

Hi. This is Roseann. I am the public health program director at Gallaudet University. I would like to thank Adriane, Lex and Danielle, everyone with the Prepared4ALL program. It has been wonderful. I will first talk about my experience at Gallaudet and what we are doing and then we will move on to my experience as an affiliate.

At Gallaudet this is really been a new topic and especially, I think it has come to the forefront with COVID as it has for other organizations. You know, I forget when it was, maybe two weeks ago, I was tired of constantly advocating for people to really step up to the plate with inclusive and accessible site testing, communication. In this group has been great. Fortunately, as a result of that DC health has reached out to us and we are working with the DC office and disability rights and helping them create accessible communication for COVID for vaccinations and testing and we are hoping then after COVID is over that we will continue that relationship and they will continue presenting with accessible communication for their emergency planning and for wider public health issues.

We were also fortunate that the FEMA office of equal rights reached out to us at Gallaudet and let us know they have an accessible site at Greenbelt Metro station. I went to their site last week and it was extremely impressive. They have ASL interpreters. They have deaf blind interpreters and you present in the line and they will have an interpreter follow you throughout the whole space. Through the check in process, your vaccine, the waiting area. It was extremely impressive and, you know, it reminded me within the training when EM says to develop a relationship with your local planners to get a seat at the table and that is been extremely helpful and now we have this, not only the relationship with DC health but we have the relationship with FEMA.

After I am finished I will put in the chat the link to that site. We are actually planning with FEMA at the Greenbelt site to do a Gallaudet day and encourage all deaf and hard of hearing people and their families to come to the Greenbelt site and just make it an accessible day for all persons with disabilities.

I will let you know when we select that day and take a picture hopefully and also put that in there Prepared4ALL website. Lastly at Gallaudet we are still in the midst of working on our deaf leadership and emergency preparedness course. Shared before we were on the road and working with an affiliate in Puerto Rico and everything was set for us to go and really learn from the deaf and hard of hearing community in Puerto Rico and with their disaster risk reduction and emergency preparedness especially around increase in hurricanes in Puerto Rico and unfortunately because of COVID that did not happen. But we are moving forward with the certificate and that will be available to people outside of Gallaudet as well. It is mostly going to be taught in ASL. We are looking at how we can include others who ASL is not their first language. So we are including people from Puerto Rico, how can we include Puerto Rican sign language or other sign languages for those who would like to attend.

That course is going to be two summer sessions. The first summer session will be at Gallaudet and the second summer session will be in the field. Again, we have all these great things I'm extremely grateful to Prepared4ALL. For me the biggest benefit of this program, not only that I'm learning from the program but that I have created this support system that I did not have previously especially in relationship to preparedness and emergency planning. And, you know, like I said before last week or the week before I was down and feeling not apathetic but feeling like I don't know if I'm just pushing too hard and nothing is getting done and Adriane and several of the affiliates were really supportive and said don't give up, keep trying. Keep knocking on doors, keep pushing.

And really that helped me and encouraged me and that it was the following week that DC Health said we are willing to include you in the office of disability rights and really get going with this initiative. So I appreciate that. The other part I really enjoy is the sharing of tools during our meetings. I have learned a lot from all of the affiliates and a lot of them also have tools in ASL which is been extremely helpful. Just to be able to increase my network and have everybody share in all of these tools and experiences to really strengthen the response. I am extremely appreciative and I look forward to what is to come. Lastly, I would also like to say thank you very much for providing ASL interpreters for the meetings and providing cart services and also for providing an accessibility statement for the webinars and for the meetings. That is also been an extreme challenge in the age of Zoom and webinars that for each meeting I have to email the organizer and say is this going to be accessible so I can share with my colleagues. I truly, truly appreciate AUCD's advocacy for that and inclusion. Thank you.

DANIELLE AUGUSTIN: I can't overstate enough how wonderful it has been to have you on board we are excited to continue to work with you. I will turn it over to Lex to talk about our disability conclusion coach role.

LEX OWEN: I wanted to talk about the third aspect of our program which is the disability conclusion coach practicum role. These are opportunities for AUCD trainees or other public health or interested students or early career professionals to complete a customized internship or capstone project as part of this role. There is a few things that make this unique. We have tried to provide a framework that is rooted in the approach of Prepared4ALL which really emphasizes collaborative problem-solving and partnership building.

This is a sense in which we are trying to provide capacity building opportunities for students, trainees and early career professionals while also using their growth and their skill building to support local affiliates on the ground as they do this work of inclusive emergency planning. We have designed this program to be really customized and flexible depending on what program students are in. What their background and interests are. For instance, we have one person who is getting their PhD in school psychology so she is choosing to do a project about inclusive emergency planning and schools, public schools.

So making sure students with disabilities and their families are included in that process. So really looking at where do our kind of values and priorities meet the passions and experiences of these folks who are doing really good work.

The other thing I wanted to emphasize is we are really wanting to provide some training around that coaching aspect. So really thinking about how do we create these leaders, these young leaders, to be able to provide opportunities to help folks on the ground meet their goals and do this work through some frameworks around guiding inquiry. Not coming in and saying I have a Masters degree or I have this degree but really saying helping these disability inclusion coaches learn the skills around things like motivational interviewing and appreciative inquiry our approach is rooted in action research and trial and error problem solving so we are trying to provide opportunities for these disability inclusion coaches to practice those skills. And really work with local folks on the ground.

As a part of this program, disability inclusion coaches also have the opportunity to conduct their own research. I also wanted to mention that like our affiliate town halls, which disability inclusion coaches and trainees are welcome to join what I think of as the general affiliate town halls, we also have specific town halls focused just on school building and networking related to disability inclusion coaches. Those are every fourth Friday at 1:30 p.m. When I am finished here I will drop those links in the chat for you all. You know, we had an opportunity to hear from Roseanne an incredible Prepared4ALL affiliate and I wanted to also give you a chance to meet Morgan Flynn who is an incredible disability inclusion coach. Morgan is in Idaho UCEDD training. She is just starting this internship. From the minute I met her she had a ton of ideas and passion around what she wanted. I wanted to give Morgan an opportunity to talk about what she has been doing now and is looking forward to continuing in the future. Morgan I will let you take it away.

MORGAN FLYNN:

Hi everyone this is Morgan. I'm a student at the University of Idaho working as an interdisciplinary training with Idaho center on disabilities and human development. Through the Prepared4ALL initiative I am acting as a disability inclusion coach and I'm working to mobilize our center and connect with the local public health and networks where I am in Idaho. I'm using the prepared for all initiative to complete a practicum capstone project and more specifically I will conduct some research. As it has been mentioned in this meeting that people with disability are disproportionately impacted by the COVID-19 pandemic so in a response I'm going to send out surveys to self advocates and those who will be living in Idaho and I'm going to ask them about their experiences during this pandemic.

My goal is to obtain data, section off in the social determinants of health, and analyze areas where we

can improve emergency preparedness and rural communities. Idaho is filled with rural communities and I want to specialize and focus in those areas. It is a very extensive project. I would not be able to take this all on my own without the help and resources provided by Prepared4ALL initiative. Their online training program has helped me understand the importance of plain language in this has allowed me to adjust my survey to be accessible for all.

Before I took the training I did not know a lot about that, so the training has really, really helped for myself. I'm also having biweekly meetings with Lex and Adriane this is allowed me to do my own project but I'm also getting sites -- insights from professionals in the industry already. There helping me go in the right direction. I am a student and am very new to this field and am only in my second year but being a disability inclusion coach means I'm getting to implement what I've learned in my university courses and apply my knowledge through pre-existing program all my helping my community. And that is what I really like about the Prepared4ALL initiative. It is planned out for me to succeed. As a student I'm learning a lot but I'm able to implement what I already know from school.'

My research project, hopefully, and the data I collect will be shared with other Idaho organizations. Just last week I was in a emergency preparedness coalition meeting with the state of Idaho representatives. Life data is going to be shared with the Idaho State Independent living Council and the Council for the deaf and hard of hearing. As I said this program has helped me as an individual and as a professional. And learning to speak publicly and them also giving the responsibility to represent my UCEDD in a larger field. I'm learning a lot from this program. I'm excited to continue through the summer. And through the connections I have made from Prepared4ALL initiative and here in Idaho I'm able to help rural communities create a more inclusive emergency preparedness for their community. I want to send out a huge thank you to everyone involved. I'm looking forward to getting this project started. I'm hoping the data and the research I do is able to help more rural communities outside of Idaho as well.

LEX OWEN: Morgan, thanks so much for being here with us and sharing a little bit about your experience. It is really exciting actually. It is such a great example of how this national framework can really work well matching together and weaving into the local community. You were able to already make some amazing connections in your state and in your community. Look forward to continue working with you. I will hand it off to Sue who will lead us into the next component.

SUE WOLF-FORDHAM:

Just to let you know Danielle, my video is blocked. And now it is not. Morgan, you are a very hard act to follow. I wanted to say we welcome everyone's involvement and engagement in this project and something I stressed before, this is a very flexible project meeting you where you are and there are many ways to participate.

So you could be like Morgan and involve students or trainees. The link is... You can attend the monthly affiliate and partner town hall meetings on the third Wednesday of every month 1 p.m.-2 p.m. Eastern time. Emergency and public health preparedness planners and other interested folks are welcome and of course our main audience, disability organizations. [HTTPS:\\bit.ly/monthly town halls](https://bit.ly/monthly_town_halls).

Take the online training. All modules at once first certificate or take it all a cart when we say.
<https://bit.ly/Prepared4ALLonline>.

Again flexibility is the key. You can be the boots on the ground in your community by making outreach to disability organizations and to local planners and forming partnerships. You can do something for your community. You can receive ongoing support and assistance from our team and we will meet you where you are. We also want to hear about your successes and we want to share them with others.
<http://bit.ly/vaccinesuccess>.

ADRIANE GRIFFEN: We really want to acknowledge the sharing for Morgan as well as you Roseann. Those were terrific. For those of you joining us virtually today we invite you to join us. Please email us at Prepared4ALL@aucd.org Or join our listserv. Really looking forward to collaborate how we can get this information get the networks going in your areas to make sure people with disabilities have a seat locally. Thank you all so much for joining us today. With that said we have a couple minutes if you have any questions feel free to use the chat to voice those now. We will do our best to use the last few minutes overtime together to get your responses. While we are waiting for the chat questions, I want to acknowledge the two partners who joined us today for their time and willingness and commitment for not only the Prepared4ALL initiative but all the work they are doing locally as well. Thanks again Morgan and Roseann.

I am seeing love in the chat for good information. The webinar will be recorded and archived in the AUCD's library. We hope this is an ongoing resource for those of you who have joined today. You might want to share this information with other colleagues. Know that that will be available to you as well. You are welcome. Thank you for the love in the chat. How can we engage local officials and emergency planners in our communities and neighborhoods to be inclusive of all?

OK. That is the million dollar question isn't? That is what all this work is about. I would encourage you to take the training and go to lesson eight where there is a workbook on how to do the community planning.

SUE WOLF-FORDHAM:

I wanted to say that we have a survey that informed our work. The survey told us that local officials and emergency planners want to engage with the disability community, they want to be involved in inclusive emergency planning but they don't really know how to do it. I think with that backdrop if you're on the disability side making outreach, offering resources, offering engagement sounds simplistic but it will go a long way and throughout the training we provide some tips and tricks to doing that. Also we provide communication materials for disability organizations to use to make that outreach. If you want a script, we have a script. If you need an elevator speech we have an elevator speech. If you are planner and want to make outreach to disability organizations, you can take those materials and tweak them and in some cases use them as is.

We provide a lot of the tools that you might need. I know there isn't one right answer to this question because I have been in this field a long time, but I think we provide a number of possible answers and strategies.

DANIELLE AUGUSTIN: One thing I wanted to add too is, you know, it's perfectly fine if you do not have experience in emergency preparedness. That is kind of the model we take. Take stock of what you do have. The skills, personnel, like Sue said if you have a training about disability inclusion that you typically offer to health professionals, just take advantage of what you have and don't be afraid because as Sue said, the emergency planning committee really does want to engage people with disabilities so bringing to the table what you have and they can bring what they have and that sets up the stage for meaningful collaboration.

ADRIANE GRIFFEN: Thank you. I want to thank everyone for your time today. We really doing and appreciate your active engagement throughout the hour. We do encourage you all, I will pop this in the chat, stay in touch by email or fill out the interest form. That is [HTTPs:\\...](#) thank you all so much. We look forward to collaborating with you so we can all be Prepared4ALL. Thank you so much and take care.