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Guide to protecting people with disabilities

Guidance for educational institutions, for employers, for health and care providers, for hospitality/catering providers, etc.

For all those who are affected in a disproportionate number and degree compared to the rest of the population when a natural disaster occurs

EARTHQUAKE   FIRE   FLOOD   EXTREME CONDITIONS

What is the issue?

Large-scale natural disasters, such as fires, extreme weather, floods and earthquakes, are highly unpredictable and endanger many aspects of people's lives – health, safety, housing, access to food, water and more staple items, to name just a few. Modern and asynchronous mass media (newspapers, television, radio, social media, electronic media, etc.) are not only important channels of information and entertainment, but also important carriers of information and information to the public in cases where increased preparedness is required for imminent severe natural phenomena as well as during the development of large-scale natural disasters where human lives and property are threatened.

Various studies from all over the world have now shown that in the case of disasters of any type, people with disabilities are at the greatest risk and, compared to the rest of the population, they are affected in a disproportionate number. The same applies to many elderly people, to people with increased nursing needs and in general to all people with reduced autonomy, temporary or permanent.

The reasons are various:
- Because emergency preparedness and response systems are designed for the "average" person who can walk, run, drive, see, hear and respond quickly to instructions.
- Because to date, the needs for information and support of such groups are not recorded, studied and not adequately addressed by civil protection planning and crisis management centers.
- Because it has been documented that people from these groups have not participated in disaster management and risk reduction processes currently applied in their communities and have been excluded from decision-making and planning of such processes.
- Because the competent authorities have not taken care to maintain information and data (registries) of citizens who need additional assistance and present increased needs in cases of crises, so that they know/plan accordingly in advance.
- Because the majority of these people have never been informed about the importance of their own preparedness and how important it is to have prepared in advance their personal disaster/crisis preparedness plan.
- Because emergency human resources have never been trained in such communication and management skills.
- Because in a crisis or disaster, the concept of rights seems to be lost under the pressure of the immediate needs of all survivors.

And these are some of the reasons. However, the absence of adequate provision for disabled people in terms of escape plans and evacuation systems in infrastructure and buildings frequented, worked or visited by disabled people is still a critical factor. Such spaces typically include educational institutions of all levels, public/municipal service buildings, workplaces, health and care infrastructure, temporary accommodation and catering infrastructure, etc.

This Guide is addressed to managers of such facilities and focuses on disaster and emergency preparedness and evacuation issues. Especially with regard to issues of protection and security against risks and emergencies, disabled people and generally hindered people should be identified as high-risk groups and as priority groups. Not because they are superior or inferior to others, but because they are proven to be affected, killed or injured, in disproportionate numbers in disasters compared to the rest of the population (for example, see UNISDR 2013, 'Living with Disability and Disasters Research' presenting the results of the UN's first global survey of people living with disabilities on how to respond to disasters).

The protection and safety of people with disabilities in situations of danger is a vested right and obligation of all of us

With the ratification of the United Nations (UN) Convention on the Rights of Persons with Disabilities[1] with Law 4074/2012 (Government Gazette No. 88 A´/11.4.2012), the country undertook to implement the requirements contained therein and aim at the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities. Recognizing that in the case of disasters of any typology, persons with disabilities are at greatest risk and in relation to the rest of the population are affected in a disproportionate number, the Convention with articles 9 ("Accessibility") and 11 ("Situations of danger and emergency humanitarian needs") requires the implementation of measures aimed at:

- the protection and safety of people with disabilities in situations of danger, including emergency humanitarian needs and incidents of natural disasters,

- public and private bodies, which offer facilities and services that are open or provided to the public, take into account all forms of accessibility for people with disabilities,

- identifying and eliminating barriers and accessibility barriers for people with disabilities to information, communications and emergency services.

Who are disabled people?

The population group of people with disabilities is characterized by great heterogeneity. According to article 60 of Law 4488/2017 (Government Gazette No. 137 A'/13.09.2017) persons with disabilities "*mean persons with long-term physical, mental, intellectual or sensory difficulties*". It is an umbrella term that includes people from different disability categories. A grouping of the main categories of disability is as follows: (a) persons with motor disabilities (e.g. quadriplegia, paraplegia, etc.), (b) persons with sensory disabilities (e.g. deaf/hard of hearing, blind/ visually impaired), (c) people with a mental disability

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[1] Available at: https://www.esamea.gr/about-us/welcome-note/86-legal-framework/symbasi/547-symbasi-oie-gia-ta-dikaiomata-ton-atomon-me-anapiria

(e.g. people with manic depression, schizophrenia), (d) people with an intellectual/cognitive/developmental disability (e.g. people with autism), (e) people with other disabilities (e.g. people with Down syndrome), (f) people with chronic conditions (e.g. people with thalassemia, nephropathy, diabetes mellitus) and (g) people with severe and multiple disabilities.

How many people are disabled?

According to the Observatory on Disability Issues of the ESA, people with disabilities make up 24.7% of the country's population aged 16 and over, i.e., 2,231,197 out of a total of 9,016,247 people[2]. The invisibility of people with disabilities and chronic conditions is not related to the size of their population, but to the fact that some disabilities and chronic conditions are not visible and to the barriers (architectural, ergonomic, behavioural, etc.) of which existence places limitations on their social participation. If to the previous percentage are added those directly related to people with disabilities and chronic conditions (parents/guardians and wider family context), the segment of the public that has a direct interest in disability/chronic conditions issues increases significantly.

What factors determine the magnitude of harmful risk consequences for people with disabilities in situations of risk

According to the World Health Organization, for a population, the risk, i.e. the probability of harmful consequences (death, injury, loss/damage to property, etc.), from the occurrence of potential disasters, is proportional to the magnitude of the threat (i.e. the intensity of the phenomenon) to which the population is exposed and the vulnerabilities (e.g., the degree of vulnerability) of that population, but inversely proportional to its level of preparedness. Therefore, especially for populations with increased vulnerabilities (vulnerable populations such as people with disabilities and/or chronic conditions), improving emergency preparedness, i.e., the ability to respond, is a critical factor and requires advance awareness, information, planning and expertise.

Therefore, risk reduction, generally as a process before the occurrence of a potential disaster aiming at reducing or even eliminating its effects, must focus on three axes:
a) In the prevention of threats, i.e., in everything we can do in order to reduce the probability of the occurrence of a phenomenon and/or to reduce its intensity, such as for example anti-flood works, anti-fireworks, etc.
b) In the reduction of vulnerable points, i.e., in actions and measures to reduce the possibility of exposure and/or entrapment of the population in unmanageable situations and conditions, such as for example by securing escape routes/exits, the preventive relocation of high-risk persons more near escape routes/exits, etc.

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[2] More details are available at: https://www.paratiritirioanapirias.gr

c) To improve emergency preparedness, i.e., planning and training for an optimal response during the event and after a threat.

By taking targeted measures in advance to improve the protection and safety of people with disabilities everyone can be better prepared to face the various potential challenges in emergency situations.

Preparedness makes the difference!

During the World Trade Center bombing in 1993, a man with mobility issues was working on the 69th floor. With no plan or devices in place, it took over six hours to evacuate him. In the 2001 attack, the same man had prepared to leave the building using the help of others and an evacuation wheelchair he had procured and kept under his desk. The second time, it only took 1 hour and 30 minutes to get out of the building.

List the high-risk people you are responsible for

Your first step should be to search for and record disabled people who use the facilities and services under your responsibility, to the extent that your relationship with them (permanent, casual, transient) allows. Contact them, let them know about any existing contingency plans you have in place and, if the nature of the relationship allows, try to learn more about their degree of independence and their vulnerabilities. They and/or their loved ones are in the best position to recognize any barriers for themselves in your facility environment in relation to their functional abilities, so that together you can identify any possible needs for extra help during and after an emergency situation.

You should assess the situation and judge what the person will be able to do on their own and what help (Who, Where, When and How?) they might need before, during and after a threat occurs, taking into account all the possible outcomes of the threat, the capabilities of the individual, as well as new limitations that may arise due to the intensity of the phenomenon.

Designate specific individuals (anyone in the building, such as co-workers, friends/neighbors, administrators/janitors, staff, etc.) who will be ready to help, if required, within a short period of time during the occurrence of a threat but and after. People who can move around easily, go up and down stairs, etc., but have other limitations, can be helped by anyone. When a person a person with a (mobility) disability needs help from 1 person to escape, a good plan should identify at least 2, ideally more, people who are willing and able to provide assistance (and so on).

Discuss and agree with everyone how you will communicate and pre-determine possible safe meeting points, in case of evacuation, in case of shelter in place and for post-disaster.

Reduce their vulnerabilities and protect them

Make sure you take all the necessary protective precautions especially in the areas they will be using/frequenting. For example:

- Some of the Seismic Planning and Protection Agency's "Precautionary Measures for Earthquake Protection in Our Home" can also be applied to a hotel room, a person's office, a classroom, etc.
- You can consider whether additional fire precautions are needed, such as ensuring that alarms are accessible (e.g., audible to the deaf person) or that fire protected areas are accessible (e.g. can be reach them easily and autonomously by the person in a wheelchair) or even relocate the person accordingly (e.g. to an office/room closer to the ground floor).
- You can consider whether additional flood precautions are needed, such as ensuring that fire extinguishers are close by and accessible (e.g., they can be reached and used easily and independently by the person in a wheelchair) or even relocate the person accordingly (e.g., from the basement to a higher floor).
- Take care of alert issues (What's going on?) and your communications. For example, make sure there is a telephone that is accessible to the person and works without electricity (wired). Install visual notification devices (eg, if someone is ringing the doorbell or calling the phone, etc.) and alarm visualization devices, panic button applications, etc., as appropriate.
- Take care in the event that they need to take refuge on the spot in their place, i.e., in the event that an instruction needs to be given or the circumstances require them to remain for an extended period of time in the place where they were when the threat occurred. Consider together what "emergency supplies" should be gathered and stored on his premises.
- Arrange for their evacuation (Is there a way to evacuate/escape? Can they escape on their own or will they need help?). Consider together and ensure that escape routes are accessible and clear. It is recommended to install an automatic activation (safety) lamp at the exits of your premises. If the person uses a guide dog, you may need to work with the person to train them for emergency evacuation. Store an "evacuation/emergency wheelchair" near the stairwells on each floor.
- Ensure the autonomy of their vital equipment/supplies. For example, you may need to consider installing dedicated storage/refrigeration space for medications, generator for medical equipment, special powerbanks or UPS, etc.

Plan the evacuation

- Draw a plan with any temporary shelter/protection areas, alternative escape routes, emergency exits, etc. and note with what priority and under what conditions the person should choose them.

- Plan so that no one is left behind. People and animals. But also, devices, equipment, medicines, etc. which are highly necessary for the individual.

- Predetermine the procedure for evacuating the building after an earthquake without the use of an elevator, taking care in advance of the necessary adjustments to properly configure the spaces in terms of their accessibility.

- Develop alternative scenarios and backup plans (e.g., backup shelter, evacuation route, etc.).

- Choose a safe, person-accessible, meeting place outside the home and away from buildings, trees, telephone and power lines.

- The plan should be tailored for each person individually with appropriate information specific to the person for whom the plan is being made.

- The plan should also be regularly reviewed and implemented by all involved. People who have a service animal should practice evacuation drills with their service animals.

- Copies of the plan should be filed in appropriate locations for easy access and given, as appropriate, to assistants, supervisors, colleagues and friends of the person with a disability, facility managers and staff, first responders, volunteers etc. who may be first responders, etc.

Provisions for disabled people in evacuation systems

A typical building evacuation system consists of three components:
   a) The traffic/escape route
   b) Notification systems
   c) Directions to and along traffic/escape routes

   In all three of these elements there may be barriers for people with disabilities, which should be removed in time.

Movement/escape route

A traffic/escape route is a continuous and unobstructed movement corridor from any point in a building or facility to a safe outdoor area. The elements of a traffic route include, but are not limited to:

- rooms, doors, vestibules, corridors (fireproof), ramps, staircases

- any lifts, escalators/corridors

- places of temporary stay-refuge

- final exit (level or by alternative means, such as slides, evacuation stairs, elevators, etc.)

Emergency exits should be marked with suitable signage that is visible from all directions. In cases where not all traffic routes are accessible:

- the specific ones that are should be marked (arrows, exit) with the international symbol of accessibility

- the rest should include signs directing people to the accessible ones

It is considered functional if it meets one of the following criteria:

- A disabled person can cross it as a public road without assistance

- A person with a disability can move without assistance through the part of the traffic route necessary to reach a place of temporary stay-refuge for the disabled (until they are removed from the building)

The disabled person should be able to move from the place of temporary refuge to the final exit, even with the help of others. E.g., if height differences are involved, a lifting system or other evacuation equipment (slides, etc.) can be used, or the person can be moved by other people using a basket, special stretcher, stair descent device, etc.

Hazard warning systems

Hazard warning systems include, but are not limited to:

- alarms and

- announcement systems

E.g., bell, horn, audible announcements, special lights, text displays, vibration systems, etc. Ideally there should be an audio, visual and vibrational signal. There are also applications of new technologies such as personal notification devices released to the market recently (e.g., relaying the alarm system to the device).

On-site instructions

Directions to and along the traffic/escape route, which include the following, should be accessible to people with disabilities:

- marking (visual, tactile, etc.)

- information/instructions standardized (written, tactile, etc.) or automated transmitted through a public announcement system (audio, visual, etc.)

- live person-to-person instructions

For more information

Visit our portal at https://portal.4plus-project.eu and learn more about the civil protection of disabled people and disabled people in general.

NATIONAL CONFEDERATION
OF PEOPLE WITH DISABILITY

NATIONAL CONFEDERATION OF
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