I. Introduction

DHS with the Houston’s Mayor’s Office of People with Disabilities jointly hosted a listening session at the Metropolitan Multi-Services Center. In attendance were representatives of non-governmental organizations, service providers, community members, and government partners representing the DHS Office for Civil Rights and Civil Liberties (CRCL), Federal Emergency Management Agency (FEMA), the State of Texas, and the City of Houston. Introductory speakers included:

- Kevin Hannes, Federal Coordinating Officer, FEMA
- Linda Mastandrea, Director, FEMA Office of Disability Integration and Coordination (ODIC)
- Marvin Odum, Houston Mayor’s Chief Recovery Officer
- Regis Phelan, Acting Director, FEMA Office of Equal Rights (OER)
- Cameron Quinn, DHS Officer for CRCL
- Maria Town, Director, Houston Mayor’s Office for People with Disabilities
- Barry Wilkerson, Deputy Budget Director, State of Texas

The listening session began with Ms. Town welcoming attendees and encouraging participation of those in attendance to further efforts to strengthen access for persons with disabilities in disasters. Ms. Town noted that Texas and Houston had to drive their own recovery efforts.

Officer Quinn explained that the purpose of the meeting was to hear about concerns and experiences related to the impact Hurricane Harvey had on individuals with disabilities in Houston and the surrounding areas. She asked that participants also share “what worked,” or effective practices. By better understanding these experiences, and in partnership with the state and local entities, including non-profit organizations, she noted that we can do more to improve preparedness, response, and recovery for persons with disabilities in time for the next hurricane season and other disasters.
Officer Quinn explained that CRCL has jurisdiction to investigate disability-related complaints alleging violations of Section 504 of the Rehabilitation Act of 1973 (Section 504), as well as under CRCL’s statutory authority, 6 USC 345. These investigations provide CRCL a powerful avenue to make meaningful and timely policy changes, and in many instances to resolve the specific issue raised. However, the office’s ability to conduct investigations depends on hearing from individuals who have such allegations making us aware of their specific concerns. Officer Quinn provided the email address to file complaints (CRCLCompliance@hq.dhs.gov) and encouraged attendees to share the information with other community members and constituents who may wish to file complaints.

II. Issues/Concerns, Comments, and Effective Practices shared by participants including representatives of non-governmental organizations, service providers, and community members.

A. Communication Access for People with Disabilities

- **The Government**¹ Should Improve Access to 911 for Deaf Populations - A participant shared examples of deaf individuals who would be calling 911 centers from their video phones and also had to prepare to evacuate their homes at the same time. Deaf persons are held captive by their communication devices and were waiting on the line to connect with 911 for hours without being able to evacuate. Others reported difficulty in connecting to 911 altogether.
  
  - Failures of text to 911 were reported by participants.
  - One participant noted that improvements in 911 communications are needed.

- **The Government Should Improve its Communication with the Deaf Population** - Greater use of ASL interpreted videos (with certified deaf interpreters and ASL interpreters who are native to the region producing the videos). These videos can be posted to county and city websites. Greater use of Facebook and other social media recommended. The Facebook page for deaf survivors was an example of the use of social media to communicate effectively.

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¹“The Government” or “Governments” as used here refers to federal, state, territorial, or local governments, depending upon which of these entities has a role or responsibilities in the area described.
o Video phone numbers should be set up and announced to the public before a disaster.

o The FEMA town hall or workshop for the deaf community worked well; it was broadcast throughout the Houston area and beyond. Community members gave kudos to Maria Town and FEMA; it was noted that a lot of work was done and that there is a need to put these practices in place in advance of a disaster.

➢ The Government Should Establish a Call Center Separate from 911 With Video Phone Access - There were challenges with using Video Remote Interpreting by first responders as well as at FEMA Disaster Recovery Centers (DRCs). There were connectivity issues and issues due to linguistic nuances. Using local interpreters was recommended. Having certified deaf interpreters was also recommended.

  o There was a suggestion that FEMA announce to the community where the interpreters will be in advance (at DRCs).

  o There was a suggestion to provide a phone number so that people can call ahead of time and request an interpreter. FEMA put this in place after several requests by community members.

  o ASL interpreters on TV screens were often blocked or distorted by cameraman or other objects on the screen. It was a question of the cameraman (or TV production personnel) not knowing what they were doing. Similar issues occurred with captioning.

➢ The Government Should be Prepared to Communicate with People with Disabilities and the Elderly Who Do Not Have Internet Service – There are challenges associated with directing the public to “go online” for everything. This is a frustration and very challenging for many seniors who don’t “go online.” A back-up plan is needed for those individuals who don’t have the ability to “go online” and this is especially important in the event electronic communications are cut off.

  o People are told to go online to find their loved ones who had been relocated from nursing homes but not all older people can do this.
➢ The Government Should be Prepared to Communicate with All People with Disabilities - People with disabilities in different areas of the city were late in being rescued because no one knew where they were. Participants told us some type of revamping of the communication system is needed so these people can be identified and rescued. They were people who have had strokes and who have Alzheimer’s who nobody knew where they were located. According to participants, a new process where people can self-identify if they have access or functional needs (see also “state registry” below).

➢ The Government Should Proactively Considering in Planning Efforts that Power and Communication Access May Go Down - Community members’ recommended proactive outreach needs to happen before a disaster to people who may not have smartphones or access to a computer.

  o Many people did not have power; they had no way to call 9-1-1. It’s important to think about people who do not have smart phones.

  o What if Houston had lost all communication? There needs to be planning that takes that this into consideration. “Pick up points” should be established in advance.

➢ Effective Practice: Work of the Houston Mayor’s Office for People with Disabilities - Several participants commented that Maria Town did a great job in getting information out to the community and making people aware of warning, resources, and other important information. There are many people, however, without emails and without power so it’s not sufficient to rely on this.

B. Preparedness and Evacuation

➢ The Government Should Use Effective Means to Identify People Who Need Assistance before an Emergency - Several participants individually expressed an array of concerns about registries in general and about the State of Texas registry in particular. A participant stated that for some reason the State’s registry was not used. Another participant reported that the registry was not activated because there was no evacuation order. Additionally, it’s important to consider that some people don’t self-report and why. To change this, it’s important for
individuals to have trust in what the government is saying; the “trust factor” should be considered. The FCC has just granted Houston permission to do neighborhood targeting and that might offer a solution.

➢ **Pre-Establish a Network of Partners and Contacts in Communities** - There is a need to work better with organizations/non-profits on communicating with communities since these organizations have built trust and know the needs of the communities they serve. Funneling information to trusted organizations to get the word out was recommended.

➢ **The Government Needs to Provide Training for First Responders** - Training for first responders is needed. There is a need for greater awareness of the impact of some of the messaging on the community. Messaging such as “get up to the attic with an ax” created panic among elderly residents. People were scared to death. Consider the impact of certain messaging on community members such as persons with Alzheimer’s. Messages should be more nuanced.

  - First responders also need to be trained on what is life-threatening for an already vulnerable population. A few inches of water in your house is life threatening when you need dry and stable power for a ventilator or to power a wheelchair.

  - First responders yelled for individuals to come out of their homes without regard to communication disabilities. Increased training for first responders was recommended.

➢ **The Government Should Proactively Identify People with Disabilities and their Needs as Part of Preparedness Planning** – Better local identification and local community access needs to be part of the planning process. For example, people who use wheelchairs and people who use ventilators, respirators, will have to leave equipment behind and put themselves at greater risk. This all needs to be addressed, specifically how to address the issue of people being notified of approaching disaster.

  - With evacuation planning, it’s important to remember that there is no one size fits all.
o There is a need to take into consideration children with autism in evacuation and sheltering; there is a need to recognize that there are sensory issues that should be considered.

o Wheelchair losses were significant and there are associated problems with insurance companies when trying to replace wheelchairs.

o Having pick-up points planned in advance was recommended.

o More aggressive planning is needed to prepare for and to meet the needs of nursing home residents. There were reported issues involving Medicaid rules and waivers, and return of individuals into badly damaged facilities.

o Concerns were noted regarding long-term care facilities and where the residents of these facilities were taken during the evacuation. A better process is needed.

o Similarly, there were concerns and questions about evacuating persons with mental illness and their ability to receive continuity of care, including having access to needed medication.

o With respect to planning, a participant noted that people with disabilities should be part of preparedness exercises.

o Something that worked well was a non-profit in the deaf community establishing a Facebook page that became an important source of information for deaf people who didn’t have communication with 9-1-1.

o A participant noted that it was good that staff from group homes were able to take care of the residents but they might not have been eligible for overtime pay.

o Being reconnected to power is critical for persons who rely on electricity in their homes, not just for hospitals.
Service providers should be part of emergency plan development since they know what the needs are, and then can in turn get the emergency information out to these communities.

C. Sheltering

- The Government Needs to Provide Better Access to Shelters – It’s important to recognize that for those in the outskirts of the city, it’s more difficult to access shelters. Lack of accessible transportation was a factor.

- The Government and Shelter Providers Need to Improve Access for Persons with Disabilities in Shelters – Many issues with accessibility of shelters: therapists being turned away at shelters; lack of accessible showers and no accessibility features at some shelters sometimes long after the shelters were established; lack of quiet areas at shelters. At the George R Brown Convention Center, told there was a quiet space, however, at the space indicated people playing basketball in the area. For a few days, insulin was not available. There was a need for bariatric equipment.

- It’s important to recognize that some people have difficulty standing in line. There could be very long lines. Some don’t have the stamina to stand in line. There was a recommendation to train shelter volunteers to recognize when someone needs assistance with mobility. In addition, some people, once at the shelter may need assistance with mobility because of the size of the space that they did not need at home.

- There was a recommendation to have a “box to check” upon coming into a shelter so that individuals can identify whether they have a disability. There was nothing in place to identify whether an individual entering a shelter had a disability. For example, if someone is deaf or hard of hearing, they would have been able to check a box on a form at a shelter. In addition to a process to indicate a disability upon arrival at a shelter, persons with disabilities can then be provided resources and phone numbers to help meet needs of that specific population.
Shelters should have video phones and captel phones available so people can make calls themselves, whether it be to call family members or hotels. All shelters should have visual announcements on TV monitors. There are resources for the deaf community in Houston, such as deaf resource specialists, but shelters did not have access to these resources in place.

Reports that one member of an organization said the shelter was not “conducive” to persons in wheelchairs, that shelters did not allow for privacy especially for people in wheelchairs. One non-profit noted that they had heard that specific shelters in Florida had been set up for persons with disabilities and that it may be something the City of Houston should consider.

There needs to be training for the various types of shelter personnel: e.g., registration, medical, security. Training should include awareness on what to do with if they see what looks like a dangerous situation for a deaf person, also to recognize when someone needs a mobility aid.

Local resources were great. ADA specialists were paired with police officers. In some shelters, however ADA specialists were turned away.

Sorensen Communications was reaching out and offering to set up video phones at the shelter, but who are the people they need to contact to make this happen?

Effective Practice: Registering Survivors - Effective practice/success story of registering survivors at “missing persons” table at shelters. A gentleman was reunited with his family that was located at another shelter in that manner.

Effective Practice: Transit System and Dialysis Needs - According to one of the participants, one of the things that worked well this time is that as the City’s transit system got back up online, the first thing that was done was to make sure that individuals in shelters who needed dialysis could get to dialysis centers. Volunteers rerouted persons with dialysis appointments if their usual center was flooded. There was an intentional focus on those who used dialysis to make sure that they got...
what they needed because the demand was so large.

D. Access to FEMA Resources and Programs

- **FEMA Should Improve Access to its Application** - Instructions on the FEMA application were described as obscure. FEMA advised people to go to a Disaster Recovery Center (DRC) to get assistance with the application yet people did not receive useful or timely assistance at DRCs.

  - There is no box on the form that says “disability” for persons who have disabilities to check or to identify what their needs are. The form needs to be improved.

  - Many people reached out to the Houston Commission on Disabilities at the Commission’s meetings to express grave concerns about the FEMA application process.

  - Difficulties for blind people to fill out the applications.

  - Difficulties for people to complete an application whose native language is not English.

  - The wording on the FEMA application is unusual. The FEMA application doesn’t say “disability accommodation.” The wording needs to be simplified.

  - Difficulties for deaf people to complete the FEMA application.

- **FEMA Should Clearly Communicate about Access to ASL Interpreters at Disaster Recovery Centers (DRCs)** - While FEMA indicated that there were interpreters at the DRCs when deaf people showed up, they would have to wait for hours for the interpreter to show up.

  - FEMA should publish and announce to the community at which DRCs interpreters would be located or provide a number where deaf persons can call and request an interpreter at a specific DRC.
FEMA Should Clearly Communicate the Timeline for Benefits Applications and Appeals - FEMA process to obtain money to rebuild is difficult. Recovery does not happen without money and FEMA will give people 21 days to submit claims, according to the community members, but people may not be home or will not have access to the internet during that time. Even though there is an appeal process that provides a certain number of days, it is still not enough time.

- A FEMA helpline might be needed to help with appeals.
- People were denied assistance in Harvey because in previous disasters, they were told to carry flood insurance. Flood insurance is too cost prohibitive for some, especially older fixed-income residents. This should be looked at in future planning since we want to help individuals remain self-sufficient in their homes.
- Special Application Process – Questions raised by the community members about whether FEMA had discretion to have a special application period or reopen the application period for people with disabilities. Can FEMA do anything to give people with disabilities more time to access resources?

E. Services and Supports for Recovery

Government, Organizations, and Businesses Should Work Together to increase the Supply of Affordable, Accessible Housing

Concerns were raised about people in “poor” neighborhoods being approved by FEMA at a lower rate. Low income renters are afraid to ask landlords and delayed or deferred maintenance impacts housing for survivors. There are very few resources for low income renters. Many could not pay for flood insurance.

- There is an affordable housing crisis and this seriously impacts the recovery for families with children with disabilities. Very little housing for rent for families.
- There are concerns were noted about landlords raising the rent or deposit amount when persons with disabilities arrive to rent a house or apartment. It was reported that FEMA would call and a landlord will quote a deposit amount and then the landlord would
raise it when the person showed up. Landlords will tell FEMA that housing is available and when the person shows up, it is a different story.

III. Conclusion

Officer Quinn thanked community members and organizations that participated in sharing feedback on some of their frustrations and issues. There will be ongoing conversations on how we can improve the process before the next disaster.

Officer Quinn mentioned the upcoming listening sessions in other locations and the value of these listening sessions in helping to identify priorities that we need to consider moving forward. Ms. Town concluded by thanking DHS and FEMA and noted that while there is eagerness to see what comes out of the listening session at the national level, the community is interested in what can change at the local level.