

**Center for Rebuilding Sustainable Communities after Disasters
(CRSCAD)**

McCormack Graduate School of Policy Studies ■ University of Massachusetts Boston

An international conference on
**Rebuilding Sustainable Communities with the
Elderly and Disabled People after Disasters**
July 12-15, 2010

Ryan Lounge, McCormack Hall, University of Massachusetts Boston

Conference Program and Abstracts

Co-sponsors

Center for Public Health Preparedness
Harvard School of Public Health, Harvard University



University College (CCDE), University of Massachusetts Boston



Gerontology Undergraduate Program (BA and Manning Certificate)
University of Massachusetts Boston

Technical assistance

U.S. Department of Homeland Security's Federal Emergency Management Agency (FEMA) works collaboratively with the Center for Rebuilding Sustainable Communities after Disasters (CRSCAD) in order to fulfill its mission to support U.S. "citizens and first responders to ensure that as a nation we work together to build, sustain, and improve our capability to prepare for, protect against, respond to, recover from, and mitigate all hazards."

FEMA Region I has provided topic-appropriate speakers and panelists for this conference.

Day 1: Monday, July 12

Registration, Informal Reception and Networking

3:00pm-4:30pm	Registration, Informal Reception and Networking
4:30pm-4:40pm	Welcome remarks Dennis Maxey Dean, University College (CCDE), University of Massachusetts Boston
4:40pm-5:00pm	Welcome remarks and Conference Program Review Adenrele Awotona Director, Center for Rebuilding Sustainable Communities after Disasters (CRSCAD), University of Massachusetts Boston
5:00pm-	Please enjoy our local Boston cuisine. We have included a list of area restaurants in your registration information package

Day 2: Tuesday, July 13

Panels 1-4: Effective Emergency Management with Elderly & Disabled People in New England, USA

(The sessions will be led by the United States Department of Homeland Security's Federal Emergency Management Agency (FEMA))

08:30am-	Registration
08:30am-08:40am	Welcome <ul style="list-style-type: none"> • W. Russell "Russ" Webster, Federal Preparedness Coordinator, FEMA Region I • Paul F. Ford, Acting Regional Administrator, FEMA Region I
08:40am-09:45am	Keynote Speaker 1 Richard Serino, Deputy Director, FEMA Keynote Speaker 2 Marcie Roth, Director, Office of Disability Integration and Coordination, FEMA
09:45am-09:55am	Break
09:55am-11:00am	Panel 1- Phases of Emergency Management <ol style="list-style-type: none"> 1. Jeanne Gallagher, Recovery Division Director, FEMA Region I 2. Mark Gallagher, Response Division Director, FEMA Region I 3. Gary J. Kleinman, Supervisory Regional Emergency Coordinator, Region I, US Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response 4. Kate McCarthy-Barnett, Training Coordinator for Emergency

	<p>Preparedness and Response, Rhode Island Department of Health</p> <ol style="list-style-type: none"> 5. Kevin Merli, Mitigation Division Director, FEMA Region I 6. W. Russell “Russ” Webster, Federal Preparedness Coordinator, FEMA Region I <p>Moderator: W. Russell “Russ” Webster, Federal Preparedness Coordinator, FEMA Region I</p>
<p>11:00am-11:15am</p>	<p>Break</p>
<p>11:15am-12:00noon</p>	<p>Panel 2: Preparedness</p> <ol style="list-style-type: none"> 1. Scott Graham, Disaster Services Director for the Northeast Area, American Red Cross 2. Gary J. Kleinman, Supervisory Regional Emergency Coordinator, Region 1, US Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response 3. Ronald Breazeale, Clinical Psychologist and One of the Founders, Maine Resilience 4. Kate McCarthy-Barnett, Training Coordinator for Emergency Preparedness and Response, Rhode Island Department of Health 5. Michael Philbin, Planning Department Coordinator, Massachusetts Emergency Management Agency 6. W. Russell “Russ” Webster, Federal Preparedness Coordinator, FEMA Region I <p>Moderator: W. Russell “Russ” Webster, Federal Preparedness Coordinator, FEMA Region I</p>
<p>12:00noon-1:00pm</p>	<p>Lunch</p>
<p>1:00pm-2:15pm</p>	<p>Panel 3: Mitigation <i>Mitigating Natural Hazard Risks Facing the Elderly and Special Needs Populations</i></p> <ol style="list-style-type: none"> 1. Marie-Annette “Nan” Johnson, Community Planner, FEMA Region I 2. Richard Zingarelli, Program Manager, Flood Hazard Management Program, Massachusetts Department of Conservation and Recreation 3. Ann St. Pierre, Executive Director, Melrose Housing Authority, Massachusetts <p>Moderator: Kevin Merli, Mitigation Division Director, FEMA Region I</p>

<p>2:15pm-2:30pm</p>	<p>Break</p>
<p>2:30pm-3:45pm</p>	<p>Panel 4: Response and Recovery <i>Providing Comfort and Support to Elderly and Disabled People in Response and Recovery</i></p> <ol style="list-style-type: none"> 1. Jarrett Devine, Logistics Section Chief, Incident Management Team, FEMA Region I 2. Michael R. Fawcett, Special Representative embedded at FEMA Region I, Government Operations Unit of American Red Cross National Headquarters 3. Elizabeth Fuhrman, Program Specialist, Individual Assistance Branch, Response, FEMA Region I 4. Jeanne Gallagher, Recovery Division Director, FEMA Region I 5. Mark Gallagher, Response Division Director, FEMA Region I 6. Gary J. Kleinman, Supervisory Regional Emergency Coordinator, Region I, US Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response 7. Carole Totzkay, Bioterrorism Preparedness Planner, Department of Health and Human Services, State of New Hampshire <p>Moderator: Raquel Ortiz, Emergency Management Specialist, Response, FEMA Region I</p>
<p>3:45pm-4:00pm</p>	<p>Break</p>
<p>4:00pm-5:00pm</p>	<p><i>Audience response to the presentations by the 4 panels - Q & A</i></p>

Day 3: Wednesday, July 14

Panel 5: A worldwide view - I

08:30am-	Registration
08:45am- 09:15am (including Q&A)	<p>Keynote Speaker – 3 Pamela L'Heureux, President of the International Association of Emergency Managers (IAEM)-USA <i>Necessary components for responding to, and recovering from, a disaster and what is necessary for a speedy short term recovery: personal insights</i></p>
09:15am- 11:45am	<p>Panel 5 - 15 minutes for each presenter</p> <ol style="list-style-type: none"> 1. Nanci Monaco, Buffalo State College, New York, USA <i>Factors Associated with Development of Secondary Depression vs. Resiliency Following Hurricane Katrina</i> 2. Oluwatoyin Olatundun Ilesanmi, Redeemer's University, Nigeria <i>Disaster experience of the elderly and the disabled: A Case of the Ife-Modakeke Crisis (in Nigeria)</i> 3. Joanna Maio, Coordinator for Members of Parliament at the federal and provincial levels, Canada <i>Palliative Care for patients and elderly people after disaster</i> 4. Sue Wolf-Fordham, University of Massachusetts Medical School, USA <i>Emergency Preparedness and Parents of Children with Disabilities and Special Health Care Needs: Research and Implications for Practice</i> 5. Shinobu Sakurai, Kana Kobayasi, Hiromi Kayano & Yuko Nkanishi, Mie University, Tsu City, Japan <i>Relation to Preparedness of Disaster prevention and the ADL of Elderly People Requiring Assistance for Disaster</i> 6. Ana Lucia da Silva Castro & Natália Utikava, Universidade de São Paulo, Brazil* <i>A new look at disasters: promoting food and nutrition security through community participation of the elderly and individuals with disabilities</i> 7. Diana María Contreras Mojica & Stefan Kienberger, Salzburg University, Austria, Europe* <i>GIS in the Vulnerability Assessment and Recovery Process in a Community with Elderly and Disabled People after Disaster</i> 8. Cheryl L. Killam, SFC Engineering Partnership, Inc. <i>Preparing for Emergencies: Individuals with Functional Needs</i> 9. Jonathan O'Dell, Massachusetts Commission for the Deaf and Hard of Hearing, Boston, USA <i>Implications of Hearing Loss for First Responders and Disaster Planners</i>

	<p>10. Yasamin O. Izadkhah and Vida Heshmati, International Institute of Earthquake Engineering and Seismology, Tehran, Iran <i>Vulnerability of elderly people in the aftermath of earthquakes</i></p> <p>Moderator (Introduction of panelists: 10 minutes) Carol Darcy</p>
11:45am-12:00noon	Break and Networking
12:00noon-12:45pm	<p><i>Audience response to the morning presentations - Q & A</i></p> <p>Moderator & discussant Carol Darcy</p>
12:45pm-2:00pm	<p>Lunch; and, Keynote Speaker - 4 Rosa Perla Resnick, Representative to the United Nations, International Association of Gerontology and Geriatrics <i>The United Nations Convention on the Rights of Persons With Disabilities</i></p>

*International Student Essay Competition winner

Day 3: Wednesday, July 14

Panel 6: A worldwide view - II

2:00pm-2:30pm (including Q&A)	<p>Keynote Speaker - 5 James O'Connell, Founder of the Boston Health Care for the Homeless Program (BHCHP) <i>Homelessness in the elderly</i></p>
2:30pm-4:55pm	<p>Panel 6 - 15 minutes for each presenter</p> <ol style="list-style-type: none"> Michelle A. Langill, University of British Columbia, Canada* <i>(Maggie Gibson is the stand-in for Michelle's presentation)</i> <i>Remembering the Forgotten: Older Adults with Dementia and Post-Disaster Rebuilding</i> ¹Maggie Gibson, ²Patti Gorr, ³Jane Swan, ³Gloria Gutman, ⁴Robert Roush, ⁵Rory Fisher, ⁵Laurie Mazurik, ⁶Sandi Hirst, ⁷Kelly Fitzgerald, ⁸Nabil Kronfol, Canada (¹St. Joseph's Health Care and Lawson Health Research Institute, London, ON; ²Division of Aging and Seniors, Public Health Agency of Canada; ³Simon Frazer University, Vancouver, BC; ⁴Baylor College of Medicine, Houston, TX; ⁵Sunnybrook Health Sciences, University of Toronto, Toronto, ON; ⁶University of Calgary, Calgary, AB; ⁷University of Zurich, Switzerland; ⁸Lebanese HealthCare Management Association, Lebanon.) <i>Activities of a Voluntary, International, Inter-Professional, Inter-Sectoral Partnership on Emergency Management and Older Adults</i>

	<p>3. Janet Popp, University of Massachusetts Boston, USA* <i>Utilizing a Fall Prevention Program during Post Disaster Reconstruction to Expand the Accessibility of U.S. Housing Stock</i></p> <p>4. Ken Lachlan (University of Massachusetts Boston, USA) and Patric Spence (Western Michigan University, USA) <i>The Elderly, Information Needs, and Disaster Preparation: Lesson Learned from the Gulf Coast and Implications for Rebuilding Sustainable Communities</i></p> <p>5. Karim Sahar, The Canadian Health Sciences Institute, Mississauga, Canada <i>Human Rights and Psychological Burnout of Caregivers and Disabled Persons</i></p> <p>6. Kevin “Kip” Thomas, Boston University School of Medicine, USA <i>Methods for Assessing and Developing Understanding of Resiliency in Communities</i></p> <p>7. Fadel Sultan Alkhald, Red Crescent, Abu Dhabi, United Arab Emirates (UAE) <i>Voluntary work and program guideline implementations for community elderly and disabled children in post-disaster reconstruction</i></p> <p>8. Mo M Telford, University of London & the Open University, United Kingdom <i>Making Sustainable Communities Work: the roles of Governments and Non-Governmental Organisations (NGOs) in post-disaster reconstruction</i></p> <p>9. Alessandra Marques Sohn; Giovanna Pereira Ottoni; and, Michele Schultz Ramos de Andrade, Universidade de São Paulo, Brazil* <i>Becoming disabled: Seeing this life changing experience as a disaster in the community</i></p> <p>Moderator (Introduction of panelists: 10 minutes) Rosa Perla Resnick, Representative to the United Nations</p>
<p>4:55pm-5:10pm</p>	<p>Break – Networking & Conversation</p>
<p>5:10pm-5:45pm</p>	<p><i>Audience response to the afternoon presentations: Q & A</i></p> <p>Moderator & discussant Rosa Perla Resnick, Representative to the United Nations</p>

*International Student Essay Competition winner

Day 4: Thursday, July 15

Panel 7: A worldwide view - III

<p>08:30am-08:45am</p>	<p>Keynote Speaker 6 D. Napoleon, Minister of State in the Ministry of Social Justice and Empowerment, Government of India <i>Advocating for the elderly and the disabled in India</i></p>
<p>08:45am-09:00am</p>	<p>Arbind Prasad, Joint Secretary in the Ministry of Social Justice and Empowerment, Government of India and M.K. Shanmuga Sundaram, Private Secretary to the Minister of State in the Ministry of Social Justice and Empowerment, Government of India. <i>Advocating for the elderly and the disabled in India – PowerPoint presentation</i></p>
<p>09:00am-11:00am</p>	<p>Panel 7</p> <ol style="list-style-type: none"> 1. Robin Lush, University of Massachusetts Boston, USA <i>Haitian Women With Disabilities: From Obstacles to Opportunities</i> 2. Kristen DeRemer, HelpAge International, Cambridge, USA <i>Humanitarian Response for Older People in Haiti: Three Months On</i> 3. Charles P. Scholes, State University of New York, Albany, USA and PAZAPA USA <i>PAZAPA, Serving Children with Handicaps in Jacmel, Haiti</i> 4. Sonja Darai, City of Somerville, Massachusetts, USA <i>People with Disabilities: Before and After Haiti's January 2010 Earthquake</i> 5. Ani Kalayjian, Meaningful World, New Jersey & New York, USA <i>ATOP of Meaningfulworld Team Returns From Haiti: Delivering BioPsychosocial and Eco-Spiritual Rehabilitation</i> 6. Harriet Epstein, An independent consultant, Massachusetts, USA <i>Disasters as an Opening to New Paths</i> 7. Hagitte Gal-Ed, Nu Skin Enterprises, USA <i>The Nerve to Change: A view of rebuilding after disasters from psychology of peace</i> <p>Moderator (Introduction of panelists: 10 minutes) Robin Lush, University of Massachusetts Boston</p>
<p>11:00am-11:15am</p>	<p>Break</p>

CRSCAD: July 2010 International Conference on Rebuilding Sustainable Communities with the Elderly and Disabled People after Disasters

11:15am-11:45am	<i>Audience response to the morning presentations: Q & A</i> Moderator & discussant Robin Lush, University of Massachusetts Boston
11:45am-12:15pm	Final plenary session – synthesis of conference outcomes and policy recommendations by moderators and facilitators
12:15pm-12:30pm	Public honoring of the five winners of the international student essay competition, Concluding remarks and Acknowledgements Adenrele Awotona Director, Center for Rebuilding Sustainable Communities after Disasters (CRSCAD), University of Massachusetts Boston

Abstracts of Presentations

Federal Emergency Management Agency (FEMA) Panel 1:

Phases of Emergency Management

Jeanne Gallagher, Mark Gallagher, Gary J. Kleinman, Kate McCarthy-Barnett, Kevin Merli and W. Russell "Russ" Webster

This panel will give an overview the Federal Emergency Management Agency, and of the phases of emergency management, and how they function in New England to provide services through programs and policies to vulnerable populations. We'll describe **basic** responsibilities, and how partners from FEMA Divisions and their state, Tribal, non-profit, business, and other federal partners work together to provide program services, and develop policies.

Federal Emergency Management Agency (FEMA) Panel 2:

Preparedness

Scott Graham, Gary J. Kleinman, Ronald Breazeale, Kate McCarthy-Barnett, Michael Philbin and W. Russell "Russ" Webster

This panel features speakers representative of key agencies in the preparedness phase of emergency management including: FEMA Region I Federal Preparedness Coordinator, Department of Health and Human Services, the Regional Advisory Committee, AIPSO (invited), American Red Cross regional coordinator, state representatives from Rhode Island and Massachusetts, and the Maine Resiliency organization. Panelists will provide brief overviews of their programs, challenges, and best practices and a discussion of the future possibilities focused on the special needs and elderly communities.

Federal Emergency Management Agency (FEMA) Panel 3:

Mitigating Natural Hazard Risks Facing the Elderly and Special Needs Populations

Nan Johnson, Richard Zingarelli, and Ann St. Pierre

The Mitigation panel will address opportunities and challenges that communities face in protecting the elderly and special needs populations from natural hazard events, and will identify approaches to achieve sustainable solutions. The panelists will very briefly describe programs and other resources available to help in building sustainable communities. An emphasis will be placed on avoidance of the hazard rather than simply a reduction of the risk. For flood hazards this could be accomplished by relocating facilities servicing the special needs populations to locations outside the Special Flood Hazard Areas. The panel will raise issues, and encourage the audience to actively participate in the discussion.

**Federal Emergency Management Agency (FEMA) Panel 4:
*Response and Recovery - Providing comfort and support to elderly and disabled people in Response and Recovery***

Jarrett Devine, Michael R. Fawcett, Elizabeth Fuhrman, Jeanne Gallagher, Mark Gallagher, Gary J. Kleinman, and Carole Totzkay

The Response and Recovery panel will address current Federal/State capabilities, such as sheltering, mass care, medical support to facilities, outreach, possibly through Community Relations, that can provide comfort and support to the elderly and people with disabilities during and after emergencies. The panel will also solicit ideas and techniques from the audience on how to collectively improve our support to this special community. We view “survivors” of an emergency and the public, in general, as members of the response and recovery team to ensure our communities are resilient, and those affected receive effective support.

**Voluntary Work and Program Guideline Implementations for
Community Elderly and Disabled Children in Post-Disaster
Reconstruction**

Fadel Sultan Alkhaldy

Everyone is vulnerable to disaster - though different individuals are not equally exposed to disastrous occurrences or to particular types of disaster. Some people are especially susceptible because they live in unusually hazardous environments, but others are vulnerable because of in-built characteristics which impair their ability to protect themselves from or respond to crisis situations. Fortunately, there are ways in which these deficiencies can be addressed. The tools and insights of the social sciences should have utility to disaster managers as they seek to improve their understanding of and communication with their communities in the context of hazard preparedness and response. In particular consideration of demographic structure and the principles of risk communication seem likely to pay dividends.

A disaster occurs when the impact on the community exceeds its normal coping resources for; there are needs to be prepared.

Arrange of awareness-creating devices - articles on, training people for standing together preparedness in local and regional, newspapers, radio interviews with emergency service personnel and hazard specialists, pamphlet, drops, and magnetized cards carrying information on appropriate before.

There are two underlying messages, which arise from this research along with the discussion. First, we need to know how to identify the elements most in need of help before and in times of crisis. Specially the elderly & disables. Second. Emergency-related communication must recognize this pluralism in the public by using a range of strategies

to alert people to danger and to appropriate threat-modifying behaviors. By understanding its community, the emergency management 'industry' will be able to serve it more effectively .as volunteer in our Red Crescent society; I will focus in my research on adapting the Voluntary work and program guideline. By using the following strategic plan in more details

Rebuilding Sustainable Communities with the Active Engagement of the Elderly and Persons with a Disability

Ronald Breazeale

In early 2007, Alpha One, the Independent Living Center for the State of Maine, began an ambitious project, Maine Resilience that would focus on building and maintaining the resilience of the citizens of the state of Maine. Alpha One, whose primary mission is to provide advocacy and support for the efforts of Maine citizens with a disability, saw the project as an opportunity to change the way people view persons with a disability. After Katrina there was considerable concern about how the elderly and persons with a disability could be "cared for" in a disaster.

Alpha One took a different approach. It was our belief that persons with a disability and the elderly who have already dealt with considerable adversity over the course of their lives know a great deal about resilience and have much to teach others. With this in mind, the first persons trained to serve as coaches and co-trainers for Maine Resilience were persons with a disability.

Over the last two and a half years, these individuals have assisted me in delivering over 25 workshops to an audience ranging from police to elderly housing staff to university resident assistants. Through storytelling the program teaches the skills and the attitudes that we know through considerable research can be learned and can build and maintain the resilience of individuals. If we are to create sustainable communities, we must focus on building and maintaining the skills and the attitudes of the individual citizens of these communities. In an area prone to flooding we often spend considerable time and expense reinforcing a bridge so it will not be washed away in the next flood. Likewise, we need to spend time, energy and expense reinforcing the skills and the attitudes of the individuals living there so that they will not be "washed away" by the same flood.

The Train-the-Trainer program, "Duct Tape Isn't Enough," that we have developed and used over the past three years will be reviewed, and we will discuss the lessons that we have learned from the project.

A new look at disasters: promoting food and nutrition security through community participation of the elderly and individuals with disabilities

Ana Lucia da Silva Castro & Natália Utikava

In Brazil, the most frequently occurring disasters are related to floods, which provoke destruction in homes and in the lives of the victims. In addition to material, social and psychological losses, the devastation of food production areas reduces the availability of

food to the population and, in parallel with the monetary difficulties for access to this food, a situation of food insecurity is established, which becomes alarming as the risk of hunger for the population rises, especially for those groups that are most vulnerable, such as the elderly and individuals with disabilities. The State's activity is restricted and does not reach the entire population, which finds itself required to mobilize and promote the restructuring of the social context.

What is proposed in this essay is not only special attention for guaranteeing the human right of adequate food for the elderly and individuals with disabilities, but also, primarily, the receptiveness of the community for the participation of these individuals in the processes of rescuing victims and post-disaster reconstruction, functioning as subjects of more sustainable community planning and promoters of food and nutrition security.

Keywords: disasters, floods, food (in)security, elderly, disabled people, community participation.

People with Disabilities: Before and After Haiti's January 2010 Earthquake

Sonja Darai

This paper's research focuses on the prevailing attitudes and resources available to people with disabilities before January 2010 and the resources and needs in post-earthquake Haiti. Many more people were able to be saved from death after being rescued but these survivors are living with amputated limbs and limited resources. In the first months after the disaster, these individuals and their families faced their own personal needs and concerns, prejudice within the community, but also lack of prioritization of needs for people with disabilities from international rescue and aid agencies.

Humanitarian Response for Older People in Haiti: Three Months On

Kristen DeRemer

The earthquake that struck Haiti on 12 January 2010 affected an estimated 200,000 older people aged sixty and over. Their homes were reduced to rubble, food and water became increasingly scarce, and they could no longer rely upon previous existing safety nets of community, family, health care, and other general services. Despite the results of the *Rapid Initial Needs Assessment for Haiti* (RINAH), which identified older people as one of two most vulnerable groups to be affected by the earthquake, the needs of vulnerable older people remain largely unaddressed in the midst of response efforts.

This paper provides a snapshot of whether and how the United Nations Cluster System and individual agencies have supported and integrated older people's needs into emergency response and relief efforts within the first three months after the earthquake. Data for this review was collected through a range of interviews with UN agencies, INGOs and NGOs working primarily in Port-au-Prince. Results were informed by identifying what is being done to address older people's needs; highlighting areas of good

practice; assessing challenges; and recommending ways forward to ensure a more comprehensive response to the needs of all vulnerable groups.

Experience from previous disasters demonstrates that older people are rarely considered in initial assessment data. This often leads to the neglect of including them in subsequent response and recovery efforts. Within Haiti, there has been a lack of consistent and formal recognition of older people's particular vulnerabilities or strengths, leading to inaction, rather than active development of appropriate or alternative age-friendly responses. As a result, Haiti's older population has largely been subsumed under the general assistance approach with varied levels of inclusion from one sector and agency to another.

Disasters as an Opening to New Paths

Harriet Epstein

The reconstitution of systems of care and organizations following disasters offers an opportunity to focus on the needs of elders and people with disabilities. This presentation will describe the process of developing the plan for a Resource Center for People with Disabilities in Kosovo in 2002. The Center was constructed and opened in 2003. The presentation will describe the involvement of: the consumer community, concerned providers and individuals, nongovernmental organizations, the UN and other international agencies as well as the Ministries of Education, Social Welfare and Labor, Health and the University of Prishtina. It will describe the ability of individuals and organizations to collaborate and construct new alliances to achieve shared goals. The development of the proposal and the Center demonstrate how the period following a disaster or conflict can be used to enable cooperation among previously unconnected communities.

The Nerve to Change: A view of rebuilding after disasters from psychology of peace

Hagitte Gal-Ed

When disaster hits, humanity hit rock bottom of vulnerability. Our being as a living kind is threatened, and the communal civilization we created through tens of thousands of years is put to extreme test. Whether a disaster happens by forces of the natural elements or by choices and actions of people, every disaster brings us back to the very edge of our being and knowing. As an existential experience, a disaster can be a horrific arena for a colossal dual between the worst and the best in humanity. The rebuilding of a community after disaster is a collective experience of transformational magnitude. In this dialogue of help, both the helper and the helped are changed forever. From this extraordinary experience of mutual change a new human reality emerges.

What is the nature of this developmental process, and what does it teach us about disasters and rebuilding after disasters?

I shall discuss this question in the context of Psychology of Peace by examining data I collected from three concrete examples in light of critical findings of recent studies in neurosciences, biological and cultural evolution, developmental psychology, and peace research Bibliography list available.)

My analysis will draw upon three case studies in progress:

1. The worldwide project to end starvation from malnutrition, the Mtalimanja Village in Malawi, the Seed of Hope, and the Force For Good Foundation of Nu Skin Enterprises. (Visual illustrations available.)
2. Spontaneous grassroots projects of reconciliation and peace building between Israeli and Palestinian members of bereaved families (Visual illustrations available.)
3. The ARTiculation© modality in processing trauma and leadership building with adolescents. (Visual illustrations available.)

These respective cases have a common epistemic ground and cognitive framework, which I defined as Dialogic Intelligence (DIN)© (2001; 2009.) I shall conclude my presentation with offering definitions of dialogic categories to assessing the efficacy of rebuilding communities after disasters.

Activities of a Voluntary, International, Inter-Professional, Inter-Sectoral Partnership on Emergency Management and Older Adults

¹Maggie Gibson, ²Patti Gorr, ²Jane Swan, ³Gloria Gutman, ⁴Robert Roush, ⁵Rory Fisher, ⁵Laurie Mazurik ⁶Sandi Hirst, ⁷Kelly Fitzgerald, ⁸Nabil Kronfol

Natural and human-made disasters are increasing world-wide, secondary to factors including climate change, human pressures on the environment, infrastructure failure and armed conflict. Mounting evidence internationally suggests that older people suffer disproportionately in disasters as a consequence of largely remediable factors that cross the four pillars of emergency management (preparedness, response, recovery and prevention/mitigation).

Since 2006, the Public Health Agency of Canada (PHAC) Division of Aging and Seniors (DAS) has spearheaded efforts to create new partnerships among the gerontology and emergency management sectors. DAS serves as a central coordinating body for three international working groups on older adults and emergency management, which are collaborating on knowledge development and exchange, as well as program and policy development.

This presentation will provide an overview of several of the activities in which members of the Health Professionals and Continuity of Health Care working group are engaged under the auspices of this partnership. Ongoing collaborations include a knowledge synthesis to develop recommendations for strengthening organizational resilience in the long term care (health and housing) sector that serves frail older adults, a knowledge translation project involving e-learning strategies for health care providers who provide geriatric care across health care sectors, exploration of the potential for both high and low

tech gerontechnology applications in emergency management contexts, pandemic ethics research collaboration, and contributing to a multi-year, participatory action research project on enhancing resilience and capacity for health which utilizes a function-based approach to design, implement and evaluate resilience-oriented interventions.

¹St. Joseph's Health Care and Lawson Health Research Institute, London, ON; ²Division of Aging and Seniors, Public Health Agency of Canada; ³Simon Frazer University, Vancouver, BC; ⁴Baylor College of Medicine, Houston, TX; ⁵Sunnybrook Health Sciences, University of Toronto, Toronto, ON; ⁶University of Calgary, Calgary, AB; ⁷University of Zurich, Switzerland; ⁸Lebanese HealthCare Management Association, Lebanon.

Disaster experience of the elderly and the disabled: A Case of the Ife-Modakeke Crisis (in Nigeria)

Oluwatoyin Olatundun Ilesanmi

Disaster is any calamitous events, especially one occurring suddenly and causing a great loss of life, damage or hardship, as a flood, airplane crash, or business failure (Blackslaw Dictionary). It strikes with sudden violence, tearing bodies, lives and families apart. Disaster loss is on the rise with grave consequences for the survival, dignity and livelihood of the elderly and the disabled in Nigeria. The age long Ife-Modakeke crises is one amongst so many violent clashes within this country that has negatively impacted the lives of the vulnerable groups. That such crisis will not reoccur is a wrong assumption, but what to do to minimize its impacts on these people group should be a matter of national concern. In Nigeria, safety needs of the elderly and the disabled prior to disaster must be ascertained. Hence, this paper attempts to measure the impact of such disaster on the elderly and the disabled with a view to proffer solution for future reoccurrences. Disaster Experience Scale (consisting of four sections measuring demographic variables, disability status, and disability assessment schedule and disaster experience) was used to determine the impact of the most recent Ife-Modakeke crisis on the elderly and the disabled. Result showed significance difference in the impact of the crises on the elderly and the disabled than ordinary people in the society.

Vulnerability of Elderly People in the Aftermath of Earthquakes

Yasamin O. Izadkhah and Vida Heshmati

Evidence from recent disasters illustrates how certain categories of people, such as the poor, the elderly, women-headed households, etc are at greater risk to disaster impacts. Elderly are considered as one of the most vulnerable groups in the society who suffer significantly from the undesirable consequences of a disaster such as an earthquake. An elderly person typically is defined as a person who is >65 years of age. Health problems, fixed incomes and lack of awareness about disasters are factors which can contribute to the vulnerabilities of the elderly people. Therefore, in the aftermath of a disaster, it is important to be supportive of older family members and become aware of some of their special needs and vulnerabilities as they may experience common reactions such as confusion, isolation, withdrawal, fear of losing independence, apathy or believing that

they are too old to start over again and many other issues. The elderly, along with the help of family and friends can plan for emergencies; share their disaster experiences as well as providing emotional support to the members of the family and neighbors. In the same time, local public and other special groups in the community have a responsibility to ensure that services provided to the elderly enable them to respond to and recover from a disaster as quickly as possible. In this paper, an attempt has been made to study why and how this special population is vulnerable to disasters. The paper also proposes recommendations for response, as well as mitigation efforts that address the root causes of social, physical, and psychological vulnerabilities and cultural differences of the elderly people, especially those living in earthquake-prone countries such as Iran.

ATOP of Meaningful world Team Returns from Haiti: Delivering BioPsychosocial and Eco-Spiritual Rehabilitation

Ani Kalayjian

Imagine your home has been destroyed; you have no running water, no electricity, and no food. Ten people from your family have been killed as a result of the earthquake. You are in shock and suffering from the after effects caused by these traumatic events. This stress-related condition is known as post traumatic stress disorder or PTSD, which is a prime focus of ATOP's post trauma healing in Haiti.

The first team for the Association for Trauma Outreach & Prevention (ATOP) of Meaningful world witnessed many people in this dire situation. Well over 50% of Haiti's population is suffering from these calamitous issues of survival. ATOP's first team recently returned from Haiti after connecting with and orienting the second ATOP team from Canada, who arrived to continue the psychosocial and spiritual rehabilitation. This team conducted a series of psychosocial rehabilitation programs to help the survivors recover from feelings of helplessness, fear, nightmares and uncertainty, which are normal symptoms after such a horrendous calamity. The ATOP team worked with teachers, orphans, adults and children in tent cities, hospitals, orphanages and the community at large. They also trained Social Workers and Psychologists. The second ATOP team continued the work until April 6. This presentation will have a short film and PowerPoint presentation reviewing the continued needs of the Haitian Community.

Preparing for Emergencies: Individuals with Functional Needs

Cheryl L. Killam, SFC Engineering Partnership, Inc.

People with disabilities or other *functional needs* have the right to be treated equally and have equal access to services and facilities. This does not change during emergencies. This presentation will address preparedness and response phases of emergency planning as they relate to individuals with functional needs, including providing accessible shelter facilities and effective methods of communication amongst other accommodations. The recent and successful grass-roots efforts of the elderly and disabled residents of a small New Hampshire town will be discussed as well.

The SFC Resources (Center for Universal Design, U.S. Department of Justice's ADA Checklist for Emergency Shelters and ADA Guide for Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities) will also be presented.

The Elderly, Information Needs, and Disaster Preparation: Lesson Learned from the Gulf Coast and Implications for Rebuilding Sustainable Communities

Kenneth A. Lachlan and Patric R. Spence

Age is a critical demographic variable that has received substantive attention in the risk and crisis literature in recent years. Disasters and other hazards may occur that leave certain age groups, such as children or the elderly, particularly at risk. Compounding this vulnerability, differences may be expected in how different age groups acquire, retain, and rate mediated information and risk messages. Differences in the acquisition and comprehension of emergency messages may have dire implications for elderly subpopulations in terms of crisis preparation, evacuation efforts, and subsequent rebuilding efforts following a major disaster.

Data were collected from Katrina refugees in relief centers following the evacuation of the Gulf Coast in 2005, and from metropolitan Houston residents following Hurricane Ike in 2008. Respondents were asked a number of scales and items addressing their media use, preferred sources for information about the event, perceptions of the adequacy of these emergency messages, and what types of preparations they had in place for the eventuality of a major disaster.

The results across both data sets indicate stark differences between the elderly and others along these outcomes. Elderly respondents were consistently more likely to depend on television and radio for information, expressed a greater desire for information, and expressed less satisfaction with the information they received. At the same time, elderly participants were less likely to have an emergency kit or evacuation plan in place in the time leading up to both storms. These results are discussed in terms of their implications for emergency management, and arguments are forwarded for community intervention programs that may be more effective in aiding the elderly than mediated emergency messages. The results are further discussed in terms of their implications for community rebuilding and the restoration of public trust among the elderly in the aftermath of a major disaster.

Remembering the Forgotten: Older Adults with Dementia and Post-Disaster Rebuilding

Michelle A. Langill

People with dementia are at very high risk for isolation, suffering and death during disasters (Huus, 2005). There are numerous reasons for elderly people with dementia to have difficulties during a disaster, including safety, cognitive, emotional, and disaster-related factors (O'Sullivan, 2009). This essay applies these factors to the recovery stage

of a disaster, and outlines several strategies for including older adults with cognitive impairment into the mainstream rebuilding effort.

Haitian Women With Disabilities: From Obstacles to Opportunities

Robin Lush

The World Health Organization estimates that nearly 10% of the world's population is made up of women with disabilities. The percentage of that population in Haiti jumped substantially as the result of injuries incurred in the January 12, 2010 earthquake.

Women comprise of more than half of Haiti's total population and with just under 50% of females as head of household, it behooves the Haitian people to move from a mindset where women with disabilities are ostracized, abused and neglected, to a place of inclusion and acceptance that this population could make a significant contribution to the rebuilding of their communities and their nation.

I will identify what obstacles women with disabilities in Haiti face, and explore how, with a shift in attitudes about that demographic, this devastated country can rebuild a state where all people have rights and women with disabilities can contribute to the revitalization of their homeland.

Palliative Care for patients and elderly people after disaster

Joanna Maio

Very often these days we hear the Doctors and Nurses talking to relatives of sick people about setting up palliative care for their loved ones that have come to a road block in the cure of their diseases. What does all this mean? Do people understand this term? Know what to expect and what are they embarking on.

In preparation for this paper, we had the opportunity of interviewing several people, both, from the field and patients along with family members. We wanted to find out if they understood the deep meaning of "Palliative Care" and how was this planning going to affect their loved ones. Much to my surprise, not a lot of people were able to give us a straight answer and there was lot of misconception and uncertainty of what to expect and how was this going to aid both family members and patients through this sensitive time. From the prospect of field workers we understood that they too have difficulty in explaining the entire concept to families and patients. They try to communicate as clearly as possible to them but very often they find resistance from both ends.

The purpose of this paper is to look into depth on this subject and to see how placing sick people or elderly people after disaster in a palliative care unit can help the families and aid the life of the sick person. Let's find out what "Palliative Care" means and what does it offer patients and family members. It is our hope you will learn from our research the real meaning of "Palliative Care" and how it would be applicable to different situations.

GIS in the Vulnerability Assessment and Recovery Process in a Community with Elderly and Disabled People after Disaster

Diana María Contreras Mojica & Stefan Kienberger

Mapping the location, facilities and social networks around elderly and disabled people, could be useful to increase the resilience in a community and undertake an efficient recovery process in developed and developing countries, and Geographic Information System (GIS) is a useful tool to carry out this process. This essay looks at how GIS can be used to understand the vulnerability and recovery of elderly and disabled people after a disaster. Disasters are a result of incompatible and uneven combinations of hazards and vulnerability conditions. Vulnerability is the degree of exposure to natural hazards, and this degree changes according to population demographics which includes, education level, gender, age, political, religious affiliation or physical or mental condition. The present essay addresses the topic of age and physical or mental condition with regard to their vulnerability level and their role in the recovery time. In many demographic studies and census exercises, a person aged sixty and above is considered as an elderly person. And according to the definition adopted by World Health Organization (WHO), disability is a broader term which involves “*impairments, activity limitations, and participation restrictions*”. According to the UN, in year 2000 there were about 590 million people above the age of seventy and this could be 1100 millions by 2025, with most of them located in developing countries, which are also more vulnerable to disasters. WHO in its report published in year 2005 established that around 7 to 10% of people in the world would have some kind of a disability. Elderly and disabled people are considered, *per se*, vulnerable groups in the community. The group of elderly and disabled (mentally and physically challenged) people usually has a high number of casualties due to the challenges they face during a disaster. GIS allows us in geo-referencing/ geo-coding (assigning a geographic address) this group of individuals thereby creating a spatial information about this group. This information is used as an overlay with the information of hazard-prone and more vulnerable areas. In this way it is possible to elaborate a plan to take care of elderly and disabled after the event and consider the scenario of their requirements and their social networks.

Factors Associated with Development of Secondary Depression vs. Resiliency Following Hurricane Katrina

Nanci Monaco

For the past 33 months, the author has been a part of a group of international mental health professionals working with displaced families following Hurricane Katrina. These families have been followed through immediate relocation to the New Orleans Convention Center or Superdome and subsequent long-term relocation to various other states. According to many displaced families, depression developed in two stages: primary depression in reaction to the immediate consequences of a natural disaster and secondary depression in reaction to subsequent events. Causes of secondary depression were attributed to: the failed policies of FEMA, difficulties receiving supplies, inappropriate care for first responders (leading many to abdicate their responsibilities to the public), failure to secure temporary shelter, failure to reopen schools in a timely

manner, problems with the temporary trailers provided, and massive communication problems and policy changes occurring in the days immediately following Katrina's landfall.

Interviews were conducted with parents of children affected by the Hurricane at various stages of their relocation process, focusing on their perceptions of problems with disaster relief and successful interventions. The Child Behavior Checklist was employed in order to obtain ratings of children's symptomatology; the Beck Depression Scale to obtain ratings of adult depressive symptomatology. Scores on the checklists were examined, along with data from structured interviews, in order to identify factors associated with ongoing depression versus those associated with resiliency. Psychological areas explored included: the attributional style of the individual, his/her perception of control in the recovery process, ratings of progress made toward personal recovery, ratings of governmental assistance, his/her perception of concern by other citizens unaffected by the Hurricane for the residents of New Orleans, his/her attribution as to why the levees failed, his/her perception of the role racism played in the relief efforts, and the role faith played in personal recovery. Other areas investigated included the ability to find employment, re-enrollment of children in schools, ability to secure appropriate housing, and the establishment of a support network. Patterns were identified which were associated with resiliency versus depression. Implications for the delivery of services to promote better psychological health for children and families following natural disasters will also be discussed.

Advocating for the Elderly and the Disabled in India

D. Napoleon

India is also prone to Disasters and is affected by floods, cyclones, earthquakes and even Tsunami, which struck India's east coast in 2004. India's capacity to deal with rescue and rehabilitation is stupendous and early warning systems based on satellite imagery are very timely and appropriate. Very often, Elderly currently 81 million and 36 million People with Disabilities have a harrowing time during disasters as much of relief and rehabilitation bypasses them.

WHO defines Health as "is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." The definition invited nations to expand the conceptual framework of their health systems beyond issues related to the physical condition of individuals and their diseases, and it motivated us to focus our attention on what we now call 'social determinants of health'. After disasters, health of the Elderly and PWDs are highly vulnerable and the Ministry has been implementing much of their work with NGO's like HelpAge India after Tsunami and other disasters and with a host of other NGO networks working on disability. The Ministry supports the civil society in a large way and has established networks across the country. These are relatively new developments but this helps in disaster risk reduction by way of community organizations, self help groups which act as buffers during major emergencies. Some of them have grain banks and community caring arrangements and volunteers who help in times of need.

The paper explores the community arrangements and work being done for elderly and disabled as a long term disaster risk reduction strategy. The Government of Tamil Nadu has combined health insurance and old age pensions as a means of social protection in addition to community protection measures. The paper explores the role of civil society and government in protecting vulnerable persons during disasters.

Implications of Hearing Loss for First Responders and Disaster Planners

Jonathan O'dell

According to the National Institute on Deafness and other Communication Disorders, 18 percent of American adults 45-64 years old, 30 percent of adults 65 to 74 years old, and 47 percent of adults 75 years old or older have a hearing impairment¹. Approximately 17 percent or 36 million American adults report some degree of hearing loss².

In 2011, the first of nearly 80 million baby boomers will reach age 65. By 2025, about one in five Americans will be older than 65. Hearing loss is the third most prevalent chronic health condition facing senior citizens³. Studies suggest elders are more at risk than any other population group during emergencies, disasters, recovery and rebuilding efforts.

It is essential that emergency service planners and providers understand specific communication needs and the existing communication barriers encountered when trying to share information with elders before, during and after emergencies. Efforts to rebuild sustainable communities must begin with a planning process that addresses the unique challenges posed by a significant percentage of that affected population with hearing loss.

In the aftermath of any large scale disaster, even those individuals with hearing loss, who were self sufficient, will require additional assistance and/or communication support, due to their reliance upon sophisticated electrically powered technologies and consumables, such as hearing aids, cochlear implants, assistive devices, and batteries, which will be non-existent or in extremely short supply. Deaf people who rely upon internet-based communication modalities and the presence of trained professionals such as sign language interpreters, may be without either, which complicates communication and information-sharing efforts.

This presentation, offered by the Massachusetts Commission for the Deaf and Hard of Hearing, provides an overview of their characteristics and communication preferences; variables that impact communication; communication strategies; assistive technologies; and offers suggestions for effective communication access in disaster planning and recovery.

Utilizing a Fall Prevention Program during Post Disaster Reconstruction to Expand the Accessibility of U.S. Housing Stock

Janet Popp

A fall prevention program should be part of recovery services for older adult survivors of natural disasters. In the United States, more than one third of adults 65 years and older will fall this year and almost 74% of these falls take place in the home. A fall prevention program would educate the older adult survivor about fall risk and encourage the use of universal design during home reconstruction. Applying universal design principles to single family home reconstruction would update housing stock in a disaster area so that occupants, including the baby boomer cohort, would more easily age in place. Furthermore, financial incentives would promote the use of universal design and participation in a fall prevention program. An effective evidence-based fall prevention program can reduce the incidence of falls 30-40%. Injurious falls would be averted, independence preserved, and healthcare spending significantly reduced.

“United Nations Convention on the Rights of Persons with Disabilities” and Optional Protocol

Rosa Perla Resnick

This presentation will examine the basic tenets of the “UN Convention on the Rights of Persons with Disabilities” and Optional Protocol. While the Convention contains specific articles on women and children, it does not include older persons. (Cross cultural issues with the UN Convention on the Rights of the Child will be noted.)

However, a thorough analysis reveals that it can basically be applied to the elderly as well, even more so when their physical and mental decline is generally recognized. In addition, due to those reasons they are more prone to suffer from emergencies, natural disasters, and environmental problems.

The important role of the UN’s various agencies, i.e. OCHA (Office for the Coordination of Humanitarian Affairs) and of United Nations affiliated NGOs, in protecting older persons’ rights will be highlighted. Recommendations for governments to develop policies and programs based on the Convention and for NGOs to implement them at the grassroots level of communities around the world will be reaffirmed.

Human Rights and Psychological Burnout of Caregivers and Disabled Persons

Karim Sahar

There is a strong relationship between the Psychological burnout of the caregivers and human right of the disabled persons, where 10% of the world’s population are disabled, and yet they are still looked down upon, and deprived of their rights. A person with disabilities who has not received the proper rehabilitation treatment will over time grow worse. This is why it is important to maximize the effort towards an independent,

successful, educated, and meaningful life for all persons with disabilities. persons with disabilities, as persons like ourselves, have the right to live with us and as we do. The physically disabled are at high risk for psychological problems.

With International Day of Persons with Disabilities, caregivers are important to play a role in helping these receivers achieve their academic goals and get started on a bright future through full participation, equalization of opportunity and development. Poverty and illiteracy lead to disability and discrimination, while disability prevention and rehabilitation lead to the full participation of all disabled people in the mainstream of life. Governments have a duty to ensure that the benefits of reform and development programs in every field also reach disabled citizens. we must protect and respect human rights and learn from the strategies and successes of others, such as landmines survivors and women.

Because disability discrimination also affects families of individuals with disabilities, Disabled persons have the right to medical, psychological, functional treatment, economic and social security and have the right to live with their families. Psychological Burnout is a term for the experience of emotional exhaustion, diminished interest (depersonalization) and reduced sense of personal accomplishment. Caregivers seem to have the highest proportion of burnout cases. Burnout reduces your productivity and saps your energy, leaving you feeling increasingly hopeless, powerless, cynical, and resentful. Emotional, spiritual and social support reduces stress and burnout for both caregivers and receivers.

The Four Stages of Burnout: Physical, Mental and Emotional Exhaustion, Shame and Doubt, Cynicism and Callousness, Failure, Helplessness and Crisis. Burnout usually has its roots in stress, so the earlier you recognize the symptoms of stress and address them, the better chance you have of avoiding burnout. The lack of control many caregivers feel over the situation is often compounded by other factors such as financial pressures, inadequate support, and poor management and planning skills. There are strategies for preventing caregiver burnout: educate yourself, join a support group, know your limits, accept your feelings, and confide in others. Learn as much as you can about hands-on care giving skills, Learn hands-on skills from physical and occupational therapists.

Relation to Preparedness of Disaster prevention and the ADL of Elderly People Requiring Assistance for Disaster in Japan

Shinobu Sakurai, Kana Kobayasi, Hiromi Kayano, Yuko Nkanishi

The natural disasters that have occurred in Japan in recent years have been characterized by elderly people accounting for many of the victims, and their proportions have become higher than those of others requiring assistance in disaster. Japan has become a super-aged society with a population aging rate of 22.1% against a background in which the number of elderly persons residing alone in the community has been increasing. Accordingly, in order to determine the actual state of preparations and to evaluation of activities of daily living (ADL) as the measure to cope with disasters by the elderly who

require assistance and to identify the physical functions that are regarded as governing the promptness and smoothness of evacuation behavior.

Methods: Data collection by a questionnaire survey to evaluation of ADL (The Functional Independence Measure) and preparedness for disaster, in October 2009. Subjects are 68 elderly persons 60 years old or over from whom ethical consent was obtained in small fisherman's village, Japan.

Results: In regard to an institution that would accept them in disaster; because the lower the subjects' ADL the more they had already found hospitals or facilities. However, these people who's ADL were not independent did not know about their regular medication, and it would be impossible to maintain their medication in disaster occurred without their doctor's descriptions. Moreover, the peoples have lower ability for cognitive part doesn't prepare to protect collapsed housing issues and to make sure of how to contact their forks. The results generally appeared to show a delay in the state of preparation for a disaster by those who had relatively low overall scores for the cognitive function items, striving to raise their cognitive function and providing a setting to advocating for supporting elderly people.

PAZAPA, Serving Children with Handicaps in Jacmel, Haiti

Charles P. Scholes

PAZAPA (meaning step-by-step in Haitian Creole) is an NGO in the Jacmel area of southeast Haiti that has a two-decade-long track record of meeting the needs of children with handicaps (www.pazapa.org). PAZAPA's missions are:

- Special education for the developmentally disabled
- Surgery, physical therapy, and rehabilitation for the physically handicapped
- A school for the deaf
- Rural outreach to children with handicaps
- Micro finance (Ti commerce) for families of handicapped children

The PAZAPA building in central Jacmel was destroyed by the earthquake. A detailed outline will be provided of how PAZAPA and its functions are being resurrected through hard work of its staff and director in Haiti, funds from PAZAPA USA, and the resources of large international aid agencies.

PAZAPA's future challenges are:

- Finding resources for the new PAZAPA building
- Extending PAZAPA's rehabilitation mission to recently injured children
- Replacing lost homes of families of the handicapped
- Revamping rural outreach to meet the needs of rural handicapped children and the related pre- and neo-natal needs of rural mothers.

Becoming Disabled: Seeing This Life Changing Experience as a Disaster in the Community

Alessandra Marques Sohn; Giovanna Pereira Ottoni; and, Michele Schultz Ramos de Andrade

Talking about disaster seems complicated from the moment one considers the meaning of such a word. If it is a priori to make reference to a misfortune, disgrace or fatality, perhaps it is not that difficult to apply. But how can one speak of someone else's life? How can one define an event as a disaster? It does not seem ethical to speak about it without considering the development of the facts.

The ways in which someone deals with an experience and how it affects their values and attitude towards life, is primarily only up to the person living the experience. With this in mind, an interest developed: Before trying to identify or explain anything it is important to seek proximity and acknowledge the point of views of the ones who has been asked to speak, to listen to the person/s involved and hopefully better comprehend how they have lived with that specific moment.

This essay is committed to the collection of reports from people who have become physically disabled in order to better comprehend the moment in which they suffered this rupture in the life, how they lived the experience of becoming disabled and all the changes experienced in their lives. How does this disaster echo in this person's life within a community, which community should be considered after this rupture, how is the community is linked to this experience, and is there a community actually linked to it in the first place? These questions form the base proposed in this present investigation. Deeming the event of becoming disabled a disaster is not intended, rather it is an investigation into the disruptions that this conflict can allude to in the life of those who are experiencing them, and if possible illuminate the feelings linked to this rupture.

It is believed that before talking about a sustainable community for disabled people, it is necessary to comprehend how these people live through the experience of becoming disabled and how it is relevant to them, considering the community concept. This investigation starts with the first-hand interviews of disabled people themselves, in other words, it is believed that through interviews with people with disabilities it is possible to better address their socio-cultural contexts in a way more consistent and clear with the realities that entail.

The aim is to briefly explain the geographic space in which the interviewees are situated, presenting a cross section of the city of São Paulo, enumerating the difficulties discussed in their interviews and developing a better comprehension of the socio-cultural context studied. When one speaks of community and socio-cultural context, one goes beyond the physical geographic space. One also refers to everything that involves the person, their environment and its implication on them as part of the community, what affects their lifestyles directly, their behavior, their attitudes and their values. Taking that as a belief, the way in which the disaster echoes in the life of people who become disabled is intrinsically linked with the context here considered: the city of São Paulo.

Making Sustainable Communities Work: The Roles of Governments and Non-Governmental Organisations (NGOs) in Post-Disaster Reconstruction

Mo M Telford

This paper examines the roles of governments and NGOs in post-disaster reconstruction in countries in the southern hemisphere, and their increasing reliance on external assistance, from northern countries, in the form of loans or grants to meet their post disaster reconstruction needs. The paper discusses the range of measures taken to ensure that the elderly and the disabled are properly considered and assimilated into sustainable communities, with representative governance systems which both facilitate strategic, visionary leadership and enable inclusive, active and effective participation by individuals and organisations. The paper argues for modern sustainable communities with sufficient range, diversity, affordability and accessibility of housing within a balanced housing market that also offer high quality, mixed-use, durable and adaptable buildings, using materials which minimise negative environmental impacts, and also offer buildings and public spaces which promote health and respect the rights and aspirations of all those who live there, including those of disabled people and the elderly. Recommendations focus on a multifarious programme which makes optimum use of local resources and promotes sustainable communities that have due regard for the needs of future generations in current decisions and actions.

Methods for Assessing and Developing Understanding of Resiliency in Communities

Kevin “Kip” Thomas

An area of pressing concern is addressing the needs at the local and regional level to provide healthcare and public health services in times of disaster. Focused attention and practical management systems must be developed in healthcare and public health which allow for better medical resource allocation to deal with the immediate and long term medical impacts of disasters. This includes the need to provide for immediate needs with medical supplies and address ways to better track individuals and patients to reduce family separation. The use of citizen involvement and collaboration are discussed as means to improve services delivery and address the uncertainty that various stakeholders have with respect to varying perceptions of potential outcomes. Mechanisms which incorporate the recognition of the differences in “knowledge claims” of experts and laypersons and the need to provide venues which allow for all stakeholders to express concerns are addressed. The implications of “wicked” problem solving, where no shared understanding of issues or problem resolutions exists, are addressed. Finally, collaboration techniques which incorporate structured information exchanges, under deliberative democratic principles, to address the ‘discontinuity gap in information’ are provided as a means to improve disaster planning modeling activities diverse populations including disabled and elderly groups.

Emergency Preparedness and Parents of Children with Disabilities and Special Health Care Needs: Research and Implications for Practice

Susan Wolf-Fordham

While natural or man-made disasters and emergencies may seem unlikely, 91% of Americans live in areas at moderate-to-high risk of these events and, according to some observers, the number and magnitude of disasters is increasing. Children with disabilities and special health care needs are particularly vulnerable to the disruptions caused by these events. Recent disasters such as Hurricane Katrina highlighted the vulnerabilities of individuals with disabilities and children; professionals in the field have expressed concerns about the vulnerability of children with disabilities and special health care needs.

The E.K. Shriver Center's emergency preparedness work includes developing self-advocate, provider and graduate fellow preparedness trainings, among other projects. From January to March, 2009 the Shriver Center conducted an online survey of parents of children with disabilities and special health care needs, in order to assess their emergency preparedness knowledge, needs and behaviors. Survey results suggest that while many respondent families recognize the importance of emergency preparedness, they have not engaged in commonly recommended disaster planning activities. Additionally, self-assessment of family preparedness did not appear to be based on the recommended preparedness activities. These survey results are being used to inform development of Shriver's emergency preparedness projects, including an interactive parent training, developed in collaboration with parents and emergency preparedness professionals, and designed to increase parent knowledge, skills and preparedness behaviors.

In this session we will describe research findings and the development of a pilot emergency preparedness training program for parents of children with disabilities and special health care needs. The goal of the training is to develop family resilience, minimize disaster vulnerability and speed recovery after disasters and emergencies. Attendance at this session will offer family members, policy makers, non-profit organization personnel and other participant's valuable information to help families challenged by disability prepare for emergency situations.

Biographical sketches of presenters and facilitators

Michele Schultz Ramos de Andrade graduated in Physical Therapy in 1997 and PhD in Morphological and Functional Sciences in 2005. The work with disable people aroused the interest in researching mechanisms of neuroprotection and neuroplasticity in central nervous system. Actually is Assistant Professor in Sciences of Physical Activity course at School of Arts, Sciences and Humanities of University of Sao Paulo and post-doc in Molecular Biology at Federal University of Sao Paulo. The previous experience like physical therapist inspirit the orientation of research about the inclusion of disable people in communities, like the megalopolis Sao Paulo. She is involved in coordination of projects about adapted physical activity. The areas of interest are: neuroplasticity, neurogenesis, neuroprotection, spinal cord injury, physical activity, social inclusion.

Adenrele Awotona is the founder and director of the Center for Rebuilding Sustainable Communities after Disasters, University of Massachusetts Boston (UMass Boston). He is the former Dean of the College of Public and Community Service at UMass Boston.

Professor Awotona has been a principal investigator on major projects funded by various agencies, including the Boston Foundation, the U.S. Department of Energy, the U.S. Department of Housing and Urban Development, the U.S. Department of Education, the British Government Department for International Development, the United Nations Center for Human Settlements, the United Nations Development Program, and the European Union. Through research, consultancy and teaching, he has professional experience in several countries in Europe, Africa, Asia, the Middle East, South America, and the Caribbean. He earned his Doctorate degree from the University of Cambridge, United Kingdom. He is a member of the Global Advisory Board of the Human Dignity and Humiliation Studies.

Professor Awotona's publications include: *Rebuilding sustainable communities for children and their families after disasters: A global survey* (edited, Cambridge Scholars Publishing, 2010); *Rebuilding sustainable communities in Iraq: Policies, Programs and International Perspectives* (edited, Cambridge Scholars Publishing, 2008); *Reconstruction after disaster: Issues and Practices* (edited, Ashgate, 1997); and, "Approaches to post-war reconstruction and development: lessons from Africa," *Habitat International*, Oxford, Vol.16, No.4. (1992).

Ronald Breazeale is a clinical psychologist and an Executive Director of Psychological and Educational Services in Portland, Maine, has worked in the field of mental health and substance abuse for over 30 years. He is a former president of the Maine Psychological Association and has served on the Executive Council of the American Psychological Association. Dr. Breazeale has for many years served on the Board of Alpha One. He has written extensively in the field of psychology and is the driving force behind the Maine Resilience Project.

Alpha One is Maine's Independent Living Center and the primary sponsor of the Maine Resilience Project. Maine Resilience began three years ago and has as its primary

mission to build and maintain the resilience of all Maine citizens through resiliency training. Through a grant from Homeland Security and contributions of time and money from volunteers, the program has conducted over 25 workshops and seminars and has developed a Train-the-Trainer package entitled, "Duct Tape Isn't Enough." Participants in the program have included fire and rescue personnel and police, as well as school teachers, social service and healthcare providers, university resident assistants, journalists and others who realize the critical importance of being able to adapt well and deal with adversity and tragedy.

Jennifer Brunson has been a contributing member of CRSCAD since July, 2008 as a research assistant. She graduated *summa cum laude* from the University of Massachusetts, Boston in the spring of 2010 with a B.A. in Political Science. She served as vice president of UMass Boston's Political Science National Honors Society. Prior to her work with CRSCAD, Jennifer volunteered with St. Augustine Health Campus, in Cleveland Ohio, a non-profit care center for seniors and adults with chronic illness.

Jennifer is working with CRSCAD Director, Professor Adenrele Awotona in the areas of Research, Marketing and PR. She also creates, publishes and distributes CRSCAD's electronic newsletter. She is the main point of contact for the Center as well as the July 2010 International Conference: *Rebuilding Sustainable Communities with the Elderly and Disabled People after Disasters*.

Ana Lucia da Silva Castro, 23 years old, is in her third year (5th semester) of Undergraduate studies in the Nutrition course of School of Public Health, University of São Paulo (Faculdade de Saúde Pública – Universidade de São Paulo). She is a trainee of the Instituto de Saúde / Secretaria do Estado de São Paulo-SP in the Research and Development Centre of the SUS (Sistema Único de Saúde), developing researches in the area of breastfeeding within the project which is evaluating the feeding habits of the first year of life (AMAMUNIC), and the protective effect of food or food groups in relation to pollution for taxi drivers and traffic controllers in São Paulo.

Sonja Darai has been with the City of Somerville in Massachusetts for over four years. She has a Master's in Intercultural Management and Sustainable Development. In her career, she's focused on issues such as emergency preparedness, family economic issues, the environment, indigenous people's cultural survival, and sustainable community development. She worked and researched in Nepal for over two years in community development in the water and sanitation field. While there, she designed and produced a technical picture-book manual for non-literate villagers on how to build a smokeless cook-stove with simple lines of text for those villagers who'd had some adult literacy education.

In the City of Somerville, Ms. Darai was the Executive Director for the Somerville Commission for Women until June 2008. For the Women's Commission, Ms. Darai has chaired the Somerville Anti-Violence Taskforce and the Somerville Financial Literacy Taskforce. Also, she has run the Teens Against Dating Abuse (TADA) program at

Somerville High School. Ms. Darai works also at the state level on coalitions and networks for equal pay, paid sick days, anti-violence advocacy and services, immigrant access to domestic violence services, and other issues impacting women.

In July 2008, Ms. Darai was appointed the Acting Executive Director of Somerville Commissions for Women, Human Rights, Multicultural Affairs, and People with Disabilities; with LGBT Issues. In this role, Ms. Darai works to provide leadership, support, and advocacy on key issues impacting human rights, women, diverse communities, persons with disabilities, and people from the lesbian/gay/bi/transgender communities. A key function of this role is to outreach to diverse communities and recruit Somerville residents to serve on the Commissions she serves.

Carol Darcy, a member of CRSCAD's International Advisory Board, received an Ed.D in Education Leadership and Curriculum Theory from Boston University, a Professional Diploma in Supervision and Administration from Bank Street College of Education, a M.S. in Early Childhood Education from Wheelock College and a B.S. in Elementary Education from Boston State Teachers College. She is a consultant to public and private schools (Pre-K through Middle School).

Currently, Dr. Darcy serves as the liaison for the World Organization for Early Childhood Education (OMEP) at the United Nation and served as Vice-President for the OMEP-US National Committee, 2003-2009. She is serving as at-large board member with the Cape Cod Association for the Education of Young Children (CCAIEYC).

Carol began her career as a Kindergarten teacher. She has taught at the undergraduate and graduate level, supervised pre-service teachers, held administrative positions, coordinated several research projects and designed professional development and continuing education courses for early childhood teachers and their supervisors.

Kristen DeRemer is an independent consultant working on applied research and project development in the area of human security and issues pertaining to gender and age in humanitarian settings. Focused on the impact of these issues in both post conflict and protracted conflict environments, she has managed surveys, provided trainings and conducted various forms of research with IDP and vulnerable populations in Central Asia, East and Southern Africa. Kristen has contributed to research and evaluations in a variety of areas, including skipped-generation households, gender legislation, transitional justice, children in conflict, and women in fighting forces. Her current research interests center on intergenerational relationships in humanitarian and development contexts. Kristen holds a Masters degree from the Fletcher School of Law and Diplomacy, at Tufts University, where her areas of study were gender and conflict, international law and conflict resolution.

Jarrett Devine is the Logistics Section Chief of the Region I Incident Management Team. He has served FEMA in the logistics section during numerous deployments over the past 10 years, including multiple hurricanes, flood events, ice storms, and severe winter storms. He has a bachelor's degree in Emergency Management from Thomas Edison State College, and is currently pursuing his master's degree in Emergency

Management at Massachusetts Maritime Academy. He has substantial experience in post-disaster feeding operations, and was tasked with building a medical shelter in the wake of Hurricane Francis.

Harriet Epstein, MEd, PhD, MPH, began her career in Massachusetts as a teacher in an institution for female juvenile delinquents.

Dr. Epstein later worked in public schools as a school psychologist and was active in the implementation of the Chapter 766, the ground breaking Massachusetts law that entitled children with disabilities to a public education (a precursor of the Federal Individuals with Disabilities Education Act.) She then joined the staff of the Massachusetts Mental Health Center (MMHC) as the Child Psychologist for Child/Community Services. There, she also served as the Department of Mental Health's Area Child Coordinator and on the Clinical Faculty of the Harvard Medical School. Beyond her clinical and supervisory responsibilities she also had the administrative responsibilities for developing and overseeing services for the most seriously emotionally disturbed children and adolescents in the catchment area. In 1981, Dr. Epstein also developed and secured new funding for the School Consultation and Treatment Program. It was designed to provide mental health and social services in the Boston Public Schools. With its diverse staff it focused on the most underserved communities in that catchment area with an emphasis on prevention and early intervention. That program also provided consultation and training for teachers and staff. It also served to train many new professionals in Community Psychiatry.

In 1996 she began a new career in the international sector. For two years she taught in the Health Sciences Department at the University of Cape Coast in Ghana. She then taught in an experimental bachelor's degree program in human services for Directors of African YMCAs. Subsequently she worked in Kosovo following the NATO bombing. There she provided psychosocial services, de-institutionalized the children from the Shtimlje State Institution and developed the proposal for a university affiliated resource center for people with disabilities and their families. That center opened in the summer of 2003. Since that time she has worked in the Caucasus, in southern Africa, Albania and Haiti.

Michael R. Fawcett joined the Government Operations Unit of the American Red Cross (ARC) National Headquarters as a Special Representative imbedded at FEMA Region I Boston in March 2009. Mike focuses on mass care planning, and the continued development of interagency operability between the ARC, FEMA, and their many partners. Prior to his current position, Mike served for two years as Director of Emergency Services at the ARC Greater Manchester Chapter in New Hampshire where he led all aspects of the chapter's disaster program. Mike's disaster experience in New England has firmly grounded his belief that flexibility and adaptability are the true keys to successfully serving the community in a time of need.

Rory Fisher, MB, is a Professor Emeritus, Dept. of Medicine, University of Toronto, and a geriatrician at Sunnybrook Health Science Centre, Toronto, Ontario. He has been

President of the Canadian Geriatric Society and the Canadian Association on Gerontology.

Kelly Fitzgerald, PhD, received her MS and PhD in Gerontology from the University of Massachusetts Boston and her Master of Public Administration from Georgia State University. Currently she is a Guest Scientist at the Center for Gerontology, University of Zurich (Switzerland) where she is developing her research on disasters and older adults. Kelly has had experience in disaster response (large response events include Hurricane Katrina and the 2004 hurricanes in Florida) and was a former disaster team trainer for the American Red Cross prior to her position in Swansea, Wales (UK) where she was a research network coordinator responsible for increasing the capacity of aging research in Wales. Kelly has served on several committees for US and UK national and local gerontological organizations and currently is the Chair of the Emerging Scholar and Professional Organization, part of the Gerontological Society of America.

Paul F. Ford is the Acting Regional Administrator, FEMA Region I. Since 2007, Mr. Ford served as the Deputy Regional Administrator for FEMA Region I, including the six New England states. Prior to that, he was the Regional Emergency Analyst, working directly for the Regional Administrator.

Mr. Ford joined FEMA in 1992. He began as a Natural Hazards Program Specialist in the Mitigation Division. He later coordinated the Project Impact Program and its successor the Pre-Disaster Mitigation Program. He also served as the National Flood Insurance Program Regional Insurance Liaison and the Floodplain Management Coordinator for the Commonwealth of Massachusetts and the State of Connecticut. As the Insurance Liaison, he has met with State Insurance Commissioners, Banking Commissioners, and the Federal Lending Instrumentalities to discuss the National Flood Insurance Program Reform Act of 1994.

Mr. Ford also recently served as the Acting Deputy Regional Administrator in FEMA Region II in New York concurrently with his position in Region I. He has also served on many disaster assignments in his tenure at FEMA, including Hurricane Andrew, the 1993 Midwest Floods, and numerous events in New England.

Ford holds a Bachelor of Science Degree in Psychology from Worcester State College, and a Master's Degree in Business Administration from Anna Maria College. He is also a Certified Floodplain Manager (CFM).

Jane O'Brien Friederichs is Dean of Social Sciences and Professional Studies at MassBay Community College in Wellesley Massachusetts. She also currently serves as Regional Representative for the Northeastern region of OMEP. Her doctorate, in Comparative and International Education from the University of London, and was a study of the impact on Hong Kong school children of the socio-political changes involved in decolonization without independence.

Her career as an educator has been in four institutions of higher education in four different societies. Each of these experiences contributed, from different cultural perspectives, to an appreciation for the essential relationship between the nature of the community and the quality of life of its members.

Originally from Boston MA, her teaching career began at the Chinese University of Hong Kong where she served as faculty in the Department of Education. Six years in Hong Kong was an immersion in a complex and effective community – a community sustained by shared values and a willingness to cooperate to overcome obstacles. Following four years in Germany as faculty in Educational Psychology with the University of Maryland, she served as faculty and later administrator at Richmond International University in London. Richmond is an institution which is truly multicultural and international. Students from over 100 countries, with no national group in the majority, led to reflections on methods of building community and of sustaining the valuable elements of the community. Dr. O'Brien-Friederichs has presented at numerous international conferences and published on the intercultural and multicultural classroom, technology and culture, and well as the impact of socio-political change on schools.

Elizabeth Furman is a Program Specialist in the Individual Assistance (IA) Branch in the Recovery Division. She joined FEMA in December 2008 after working with the American Red Cross of Massachusetts Bay for over a year. Miss Furman has worked many Regional Response and Coordination Center (RRCC) activations as the Mass Care Emergency Assistance and Individual Assistance Branch Chief, and has been deployed in the field to work recovery operations in the Individual Assistance Branch. Elizabeth's primary role in the Individual Assistance Branch involves writing procedures for Mass Care Emergency Assistance response in Region I while working with states to plan, prepare for, and respond to disasters in the area of Mass Care and Emergency Assistance. Last year Elizabeth was asked to take on the responsibility of the Individual Assistance Functional Needs Point of Contact for the Region. Since then she has worked with Kate McCarthy-Barnett (Rhode Island) to bring together a Regional Functional Needs Working group, and is on the FEMA Headquarters' Functional Needs Support System guidance (FNSS) working group.

Hagit Gal-Ed is an Israeli born pioneer in the field of Peace Psychology and Education For Peace. She has extensive teaching, teacher education, and program director experience. Her research interests include metacognition and the epigenetic effects of Dialogic Intelligence© in processes of change, trauma, and peace building.

Her PhD is the outcome of a long-term dialogue-based international program of peace education through arts and communication media with Israeli, Palestinian, and American students. She developed the concepts of Dialogic Intelligence© (DIN) and the role of ARTiculation© in peace epistemology (NYU, 2001.)

She is internationally exhibiting artist interested in the dialogic realism of art as a meaning system in cultural evolution. Her art has been exhibited in the U.S.A., Israel, Europe, and South Africa, and her artworks are in many private collections.

Her Dialogic Intelligence© theory and ARTiculation© modality in character development, leadership building, and trauma therapy have been the subject of numerous workshops and international presentations.

In 1999 Dr. Gal-Ed was a recipient of “Gift of Service to the World Award” by The Council for the Parliament of the World’s Religions, for her interfaith initiative promoting peace culture at the United Nations. In her capacity as member of the international committee on education for peace she presented her Garden Of Peace© project designed for the slopes of the Golan Heights as an international center for peace leadership training in collaboration between Israel and Syria, with participants from the international community.

In 2001 she created *PEACE TV™*, a TV program through MNN, a public access station in NYC, promoting Dialogic Intelligence and innovative initiatives of education for peace. Collaborating Institutions include Columbia University Teachers College, and The Museum of Natural History.

In 2006 her *Artist & Leader* program, combining Contemporary Art and Education for Peace, was selected by PBS, Art:21 for their Outreach Initiative. In 2008 the program was awarded a grant by the CT Commission on Culture & Tourism for outstanding educational program.

Her book-chapter, “Art and Meaning: ARTiculation© as a Modality in Processing Forgiveness and Peace Consciousness” was published in: *Forgiveness and Reconciliation: Psychological Pathways to Conflict Transformation and Peace building*. Springer-Verlag. New York. 2009.

Jeanne Gallagher is the Recovery Division Director at FEMA Region I. Ms. Gallagher leads a permanent staff of 18 members along with a Disaster Assistance cadre of over 200 individuals. Since beginning at FEMA in 1987 Ms. Gallagher has have held a variety of management positions within the Federal Emergency Management Agency. These positions included Acting Federal Coordinating Officer, Deputy Federal Coordinating Officer, Chief of Staff, and Regional Operations Center Director. Jeanne has provided leadership and direction in the implementation of federal programs to assist state and local governments in responding to disasters and emergencies. She is responsible for ensuring FEMA programs are delivered in an equitable manner to individuals, families, and applicants for our public assistance programs.

Ms. Gallagher holds a B.A from Boston State College.

Mark Gallagher is the Acting Deputy Regional Director, and the Response Division Director at FEMA Region I. His chief responsibilities are operational and logistical support in the event of an emergency or disaster. He oversees the management of the Operations, Logistics, and Planning cadres in Region I, comprising the six New England states. In preparing the Region to respond to any type of disaster or emergency, he

oversees the development, revision, and implementation of emergency operations plans and procedures.

Maggie Gibson, PhD, CPsych, obtained her doctorate in psychology from the University of Western Ontario. She is a Registered Psychologist in Ontario, an Associate Investigator with the Aging, Rehabilitation and Geriatric Care Research Program of the Lawson Health Research Institute and an Adjunct Professor in the Department of Psychology and Division of Geriatric Psychiatry, University of Western Ontario. She has worked in the Veterans Care Program, Parkwood Hospital, St. Joseph's Health Care, London, Ontario, since 1993. Dr. Gibson has integrated scientific, educational and service activities throughout her professional career, addressing topics at the interface of psychology, geriatrics and aging. She provides geropsychology expertise on national and international task forces, including initiatives sponsored by the Canadian Coalition for Seniors Mental Health, the Alzheimer Society of Canada, the International Psychogeriatric Association and the Public Health Agency of Canada (PHAC), for whom she co-chairs an international working group that is focused on building capacity to address the needs of older adults in emergency and disaster situations

Patti Gorr, BAsC, as Senior Policy Analyst at the Division of Aging and Seniors(DAS), Public Health Agency of Canada, has been leading work on Seniors and Emergency Preparedness with national and international stakeholders from the emergency management, gerontology, and non-government sectors. This has included the delivery of two International Workshops and the creation of a secretariat at DAS to support initiatives by three working groups that aim to integrate seniors' needs and contributions into emergency management.

Scott A. Graham is a member of the American Red Cross National Headquarters team, serving as the Disaster Services Director for the Northeast Area (Maine to Pennsylvania, and Puerto Rico and the U.S. Virgin Islands). He is responsible for the development and implementation of capacity-building strategies that will enable chapters, regional groupings, state and multi-state consortia within the jurisdiction to effectively respond to all types of disaster risks. Prior to joining the Red Cross' national team, Scott served for five years as the Chief Response Officer for the American Red Cross in Greater New York, the largest and busiest Chapter of the American Red Cross. There he led a corps of 5,000 volunteers and a staff charged with responding to emergencies and disasters of all scales, ranging from single family fires to hurricanes.

Graham joined the American Red Cross after 23 years with the United States Marine Corps (USMC). He retired as a Lieutenant Colonel, last serving as the Executive Officer of the USMC Chemical Biological Incident Response Force (CBIRF). His military career furnished him with diverse leadership and operational experiences within the national security arena, including vulnerability assessments and consequence management operations relating to chemical, biological, radiological, nuclear, and high yield explosives (CBRNE). Scott is a graduate of University of Kansas, and lives in Tuckahoe, NY with his wife and daughter.

Gloria Gutman, PhD, was founding Director and currently is a Research Associate at Simon Fraser University's Gerontology Research Centre and Professor Emerita in the Gerontology Department. She is a co-leader of the British Columbia Network for Aging Research, a Director of the International Institute on Ageing (United Nations Malta), a member of the World Health Organization's Expert Advisory Panel on Ageing and Health and a member of the World Economic Forum's Council on the Ageing Society. She is a past-president of the Canadian Association on Gerontology and the International Association of Gerontology and Geriatrics. Her research and publications address seniors' housing, long term care, health promotion, prevention of elder abuse and neglect, and emergency preparedness and seniors. In 2007 she was awarded the Order of British Columbia in recognition of her pioneering work in the field of Gerontology, and in June 2010 she was awarded the degree of Doctor of Laws, *honoris causa*, by the University of Western Ontario in London, Ontario and addressed Convocation on the future of the aging population.

Vida Heshmati graduated with a B.A degree in Educational Technology in 1995 from Allameh Tabatabaie University in Iran. She received her M.A degree in Curriculum Planning in 2005 from Islamic Azad University in Tehran, Iran. She has been working in the International Institute of Earthquake Engineering and Seismology (IIEES) since 1999. She works as an expert in IIEES Public Education Department. Her field of interest includes disaster education in particular. Vida has published ten papers and co-authored three books entitled: *Guidelines on Earthquake and Safety for Kindergarten Teachers* by F. Parsizadeh, Y.O. Izadkhah, and V. Heshmati. (English-2007); *Earthquake and Safety* by F. Parsizadeh, A.E. Seif, and V. Heshmati (Persian-2004); and, *Earthquake and Safety Guidelines for Kindergarten Instructors* .by F. Parsizadeh and V. Heshmati (Persian-2004).

Sandi Hirst, BSc, RN, PhD, GNC(C), is currently the Director of the Brenda Strafford Centre for Excellence in Gerontological Nursing and an Associate Professor in the Faculty of Nursing, University of Calgary, Alberta. She has held board and executive positions in a number of associations, specific to the needs of older adults, including the Canadian Association on Gerontology. Her research interests lie in the topic of institutional abuse and gerontological nursing education.

Oluwatoyin Olatundun Ilesanmi studied clinical psychology at the University of Ibadan, Nigeria (2005). She joined the service of Redeemer's University, Redemption Camp, Ogun State, Nigeria in August, 2006. She teaches courses in Forensic psychology, Abnormal Psychology, Physiological Psychology, Clinical Psychology, Health Psychology, and Rehabilitative Psychology.

Dr. Ilesanmi obtained professional training in Dispute and Conflict Analysis (2007), Gender Perspectives in United Nations Peacekeeping Operations (2009), Civil-Military Coordination (CIMIC) (2009), and Global Terrorism (2009) under Peace Operations Training Institute. She is a trained genetic counselor (2009) under Sickle foundation, Nigeria and a member of the Nigerian professional negotiator and mediator.

Dr. Ilesanmi is concerned with taking care of people with Sickle Cell Disorder through Information, psycho-education and genetic counseling.

Yasamin Izadkhah is currently an Assistant Professor in the Risk Management Research Centre, International Institute of Earthquake Engineering and Seismology (IIEES) where she has been working since 1990. She is also a Research Affiliate in the Center for Rebuilding Sustainable Communities after Disasters (CRSCAD), University of Massachusetts, Boston. In relation to her research activities, she has traveled widely to more than 25 countries and has got certificates in various academic courses related to Disaster Risk Reduction issues. Her main field of interest is children and disasters, risk education and training, earthquake education, and general disaster awareness and preparedness. Yasamin is the author/co-author of more than of 72 research papers presented and published in national and international conferences and academic journals. She has contributed in various joint international projects with UNDP, UNESCO, UNICEF and World Bank. She is the author of booklet “Earth, Science and Safety”, a joint project of IIEES, UNDP, and UNESCO in 1998. She is also the co-author of book “Guidelines on Earthquakes and Safety for Kindergarten Teachers” and book "Earthquake, Awareness and Safety". Yasamin has been the Executive Secretary of three International Conferences (SEE1-3) and member of the Organising and Scientific Committee of many international conferences. She has been the Executive Director of JSEE Journal for the past two years and JSEE Production Manager since 1998. Yasamin has experience in major earthquake situations such as Izmit, Gujarat, Bam and South Asian Tsunami. Yasamin also lectures in Disaster Education, Public Awareness and Disaster Case Studies in UK and Iran.

Eleanor Jewett is the Regional Strategic Planner and Analyst, and the Regional Disability Coordinator for FEMA Region I. In August 2009, the National Council on Disability (NCD) recommended that FEMA regions appoint disability coordinators within each region. The Acting Regional Administrator pro-actively appointed Ms. Jewett as the first Regional Disability Coordinator, a position she has held, in addition to her other duties, since October 2009.

Before joining FEMA full time in May 2007, Ms Jewett produced and directed programs for National Public Broadcasting at WGBH-TV, and then formed her own production/communications company, consulting on traditional and new media projects in the nonprofit, private, and educational sectors. While running her consulting practice, she also contributed as a disaster reservist in FEMA for 18 years, working successively in four different cadres.

Eleanor holds a Bachelor of Arts in English from the Massachusetts State College at Fitchburg, and a Master in Public Administration from the John F. Kennedy School of Government at Harvard University.

Marie-Annette “Nan” Johnson is a Community Planner in the FEMA Region I Mitigation Division. In New England, Ms. Johnson works with the states and Tribal Nations in the development of multi-hazard mitigation plans by providing technical

assistance with planning processes, risk assessments, and strategies. Over the course of five years with FEMA, she served as a Community Planner for the Long Term Community Recovery (LTCR) in Louisiana for Hurricanes Katrina and Rita. She also served as the Coordination Supervisor for the Texas Hurricane Ike LTCR.

Before joining Region I, Ms. Johnson worked in Region VIII in Denver, Colorado in a similar position, and for the State of Colorado as the Counties/Communities Coordinator for a Partnership formed to take on the many challenges of wildfire issues along the urban corridors of the Front Range-Denver metropolitan area. Prior to this, she worked over 15 years in local government as a land use planner-GIS specialist in the planning departments of Boulder County and the cities of Boulder, Colorado, Flagstaff, Arizona, and Las Cruces, New Mexico. Nan gets her “West Texas” accent and her passion for people and natural hazards from her 20+ years living and teaching in El Paso, Texas, where she received her Masters of Applied Geography from nearby New Mexico State University. She is also a long-time member of the American Planning Association.

Ani Kalayjian, Awarded Honorary Doctor of Science degree from Long Island University (2001) recognizing 20 years as a pioneering clinical researcher, professor, humanitarian outreach administrator, community organizer & psycho-spiritual facilitator around the globe and at UN. In 2007 she was awarded Columbia University, Teacher College's Distinguished Alumni of the Year; the citation stated: “You have devoted your life to studying the impact of trauma and to helping others to heal. That calling grows out of your family’s history and your own: As an Armenian child in Syria, where your family had sought refuge from the Ottoman Turkish Genocide of Armenians, you lived with the constant sadness & fear. In a sense, your life since then has been- to borrow a phrase from your own writings- about channeling the sense of helplessness that one feels in such moments into the work of helping others. You have treated, studied, and helped transform survivors of both natural and human-made disasters from around the world. As your protégé wrote ‘What is extraordinary about my teacher and mentor is her unrelenting commitment to bettering society by unifying minds, hearts and spirits; emphasizing likeness in human beings and celebration of differences. She is steadfast in her optimism that prevention of human-made trauma and resilience post natural disasters can be realized and nurtured through forgiveness, tolerance, ancestral healing and respect for all humanity and mother earth.’ ” She has published widely in international journals, books, and is an author of *Disaster & Mass Trauma*, as well as Chief Editor of *Forgiveness & Reconciliation: Psychological Pathways to Conflict Transformation and Peace Building* (Springer 2009, paperback 2010), and Chief Editor of II Volumes on *Mass Trauma & Emotional Healing around the World: Rituals and Practices for Resilience and Meaning-Making* (Praeger, ABC-CLIO 2009)

She is a recipient of 2010 Human Rights Award from American Nurses Association; and Mentoring Award from APA International Division. Author of *Disaster and Mass Trauma* (1995), Chief editor of the international book *Forgiveness & Reconciliation* (2009 Springer), Chief Editor of *Emotional Healing Around the World: Rituals & Practices for Healing and Meaning-making*; over 40 articles on clinical healing methods, human rights, transforming trauma, mind-body-eco-spirit health, practicing forgiveness

and gender issues; and with a unique 7-step healing and empowering tool used in over 25 humanitarian outreaches around the world with evidence-based research & training: The Bio-Psychosocial and Eco-Spiritual Model.

Stefan Kienberger is a researcher at the Center for Geoinformatics at the University of Salzburg and obtained his MSc in Environmental System Sciences/Geography from the University of Graz and Macquarie University Sydney, Australia. Currently he has submitted his PhD research focussing on the spatial assessment of vulnerability integrating community-based approaches and GIS/Remote Sensing methodologies at the community and district level in Central Mozambique. His research activities include the modelling of spatial-integrated indicators, spatial analysis and the integration of Remote Sensing data in monitoring processes and the link to the local level. He has been involved in several international research and capacity building projects (European Commission funded, Austrian research programs, etc.) and gained specific expertise on vulnerability assessment in Austria, Africa and Asia.

Cheryl L. Killam has life-long experience in accessibility standards and as an advocate for the rights of people with disabilities.

A former teacher of mathematics and computer science and Human Rights Violation Investigator, she has over 20 years of experience serving on the Committee on Architectural Barrier-Free Design for the State of New Hampshire Governor's Commission on Disability.

Cheryl worked as the Accessibility Specialist for the Commission, providing technical assistance on state and federal barrier-free design requirements to architects, code enforcement officials, contractors, and the general public, and reviewing architectural plans and surveying facilities for level of compliance with accessibility standards. As the trainer for the Commission, she provided multi-media training on the Americans with Disabilities Act, disability awareness, and accessibility standards.

While serving as the liaison to the State Courts Accreditation Commission, the Public Water Access Advisory Board, the Functional Needs Emergency Planning Task Force, and the New Hampshire Voting Accessibility Task Force, Cheryl has surveyed over 220 polling places and most of the courthouses in the state, as well as most state agencies and state parks. As a member of the U.S. Access Board Courthouse Access Advisory Committee, Cheryl co-edited the report, "Justice for All: Designing Accessible Courthouses". Cheryl is also a member of the New Hampshire Council on Developmental Disabilities.

Public projects that have benefited from Cheryl's expertise include accessibility audits for the Town of Newington and the Salem, Berlin and Exeter Housing Authorities. Recently Ms. Killam performed accessibility assessments for the newly constructed Headquarters of the U.S. Department of Transportation in Washington, D.C.

She has served on New Hampshire Governor's Commission on Disability (November 2002- March 2008), provided training workshops on Rights and the ADA, as *Consultant to the Community Developmental Services*, Portsmouth, New Hampshire (2000–2005); developed, monitored, and presented disability awareness workshops to thousands of individuals of all ages in both school and business settings in her capacity as a *Disability Awareness Project Coordinator and Trainer*, and as an ADA Coordinator, Public Education, Safety and the Strategic Planning Committees.

Gary J. Kleinman is the Supervisory Regional Emergency Coordinator, Region I, for the US Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response

With primary responsibility for the New England region, Gary Kleinman is responsible for the integration of federal health and medical resources with local, state, Tribal, private sector, and federal emergency plans, and the direction of federal health and medical response operations during incidents and special events.

Gary has more than thirty years of experience in operations, policy development, and management of emergency medical and public health services. As a federal emergency coordinator since 1999, Gary has provided leadership for a significant number and variety of emergencies, disasters, and special events throughout the US, including the 9/11 World Trade Center attacks (2001); the Winter Olympic Games (2002); the Democratic National Convention (2004); Hurricanes Katrina, Rita and Wilma (2005); New England ice storms (2008); and the 56th Presidential Inauguration (2009). In addition, Gary served as Deputy Commander for the US government's public health and emergency medical response in the weeks immediately following the earthquake in Haiti.

Nabil Kronfol, MD, DrPH, is a Professor of Health Policy and Management, the President of the Lebanese HealthCare Management Association, and a co-founder of the recently established "Center for Studies on Aging" in Lebanon. Dr Kronfol joined the American University of Beirut in 1974 and moved through the academic ladder to become full Professor, Chairman of the Department of Health Services Administration, and Assistant Dean for Allied Health and finally Deputy Vice President for External Programs in Health. Dr Kronfol has an extensive list of publications and book chapters and continues to be a frequent consultant to the WHO, the World Bank, UNICEF, UNDP, UNFPA, and ESCWA – in health systems design and the health of the older populations. He is an active member of several international societies and groups including the International Federation on Aging, the 'Seniors in Emergencies' in Canada, the Fall Prevention task force, the 'Aging in Foreign Land Project', among others. Dr Kronfol was a member of the small group who designed the protocol for the Age Friendly cities and the INTRA study, both projects developed by the World Health Organization. He was recently commissioned by the ESCWA to prepare a regional report on the 'Situation of population in the Arab countries: The way forward towards implementation of MIPAA' and has made several contributions to a number of publications on older people. Dr Kronfol is a member and past president of the Alpha Omega Alpha Honor medical society and the Sigma Phi science society. In 2007, he received the Shusha Award from

the World Health Organization. Dr Kronfol serves currently as the Vice President of the International Network for the prevention of Elder Abuse (INPEA).

Kenneth Lachlan (PhD) is an affiliate of the Center for Rebuilding Sustainable Communities after Disaster and an Associate Professor and Director of the Communication Studies program at the University of Massachusetts Boston. He also serves as an investigator for the National Center for Food Protection and Defense. His research focuses on psychological responses to mediated information, with a particular emphasis on crisis and risk communication campaigns. Past and ongoing projects include evaluating audience perceptions of emergency messages, evaluation of audience informational needs, media dependencies during crises and emergencies, and the use of media as a coping mechanism in the aftermath of a major event. Other projects have examined the use and function of varying media amongst different subpopulations, with a particular focus on deviations between mainstream and historically underserved groups in terms of how well their needs are met by crisis communication campaigns. At present, he is also field testing a persuasion model for use under conditions of extreme psychological duress that may be able to help emergency communication efforts manage public response.

A native of Connecticut, Lachlan took over as Director of Communication Studies after six years as an Assistant and then Associate Professor of Communication at Boston College. He is also the co-author of *Straight Talk about Communication Research Methods* (2010, Kendall-Hunt) and serves as a consultant for businesses and non-profit organizations in the Boston area.

Michelle Langill is a Post-Doctoral Fellow in Clinical Neuropsychology in the Department of Psychiatry and Division of Neurology at the University of British Columbia. Her placements are with the Pacific Parkinson's Research Centre and the Institute of Mental Health. She recently completed her Pre-Doctoral Internship at the London Clinical Psychology Internship Consortium and her Doctoral degree in Clinical Psychology from Washington State University. Her research addresses the neuropsychology of degenerative diseases; the neuropsychology of depression; and emergency preparedness and seniors.

Pamela L'Heureux, CEM, CEMME, is married to husband, Paul, has 2 grown children and 2 grandchildren.

Presently, Mrs. L'Heureux is the National President for IAEM-USA (International Association of Emergency Managers). She represents emergency managers throughout the country in Washington, DC. She has earned the highest professional certification for emergency managers – the CEM® (Certified Emergency Manager). She also serves on the IAEM global board.

Mrs. L'Heureux was just appointed in March 2010 to the National Preparedness Task Force. She is the Maine Association of Local Emergency Managers (MALEM) first President. She serves as a member of the United Nation's advisory board (ISDR)

International Strategy for Disaster Reduction. She is a member of the advisory board for the National Domestic Preparedness Consortium. She is considered an expert in the emergency management field and promotes self preparedness when ever given the opportunity.

Mrs. L'Heureux has been active in emergency management since assuming the position of the Town of Waterboro's Director of Emergency Management in 1991 and continues to hold the position. She is a volunteer for York County Emergency Management Agency (Maine) and has been since 1994. Upon her retirement from Verizon in 2002, she assumed the role of assistant emergency management director at York County Emergency Management Agency. Her duties include but are nor limited to: emergency management planning including the pandemic influenza coordinator for the county, H1N1 leadership Team, community outreach coordinator, EOC manager, PIO, exercise coordinator, hospital disaster planning group chair, instructor for FEMA courses including ICS, CERT, NIMS, Hazmat and all hazards planning.

She is a reservist for FEMA and deploys when requested as a long-term recovery specialist or branch director. She has actively participated in more than 20 disasters. She is in her 21st year as a volunteer fire fighter and is in her fifth term as a Board member of the York County Fire Fighter Association.

Mrs. L'Heureux is an EMAP (emergency management accreditation program) assessor and has participated in 11 assessments throughout the country.

Robin Lush is a graduate student at the University of Massachusetts and is enrolled in the Masters in Public Affairs, International Relations Program.

She first visited Haiti twenty years ago on a community development and awareness mission during her undergraduate studies at Springfield College in Western Massachusetts. This memorable experience paved the way for similarly themed excursions to Mexico, Gambia and eventually Banda Aceh, Indonesia.

Ms. Lush's interest in post-disaster research was first piqued when she visited Banda Aceh in February 2005. During this trip, she and local volunteers prepared and delivered logistics to thousands of displaced people in make shift camps in the aftermath of the East Asian Tsunami. The devastation was incomprehensible and Ms. Lush knew that the draw she felt to understand the impacts of disasters would require a more significant commitment than she was currently making on a volunteer basis. As the world economy began to turn, the time seemed right to pursue her dreams and she determined that graduate work would be the most logical path to achieving her goals.

While Ms. Lush has also done significant work with dozens of domestic non profits (Salvation Army, The Wish Project) and NGO's (YMCA, Amnesty International) and has developed and managed an outreach program for homeless teens in British Columbia, run a group home for adolescent boys in Somerville, MA, supervised and coordinated volunteers, and raised community awareness on homeless issues, her true passion lies in

international development work. She looks forward to continuing her research on Haitian women by conducting fieldwork for her thesis in Haiti in the summer of 2010.

Joanna Maio lives in Mississauga, just west of Toronto in the Province of Ontario, Canada. She is an active real estate agent, with a vast professional background as a former business owner, an executive assistant/coordinator for Members of Parliament at the federal and provincial levels, a Worker's Compensation Board adjudicator, and more. Outside of work she enjoys helping others within my Community and extends a hand to the less fortunate elsewhere in the World.

Joanna's volunteer work and social involvement includes the following:

- Present Board member of the The Pink Box Foundation, a non profit organization that has the scope of building a sustainable community in Simiatug, Ecuador.
<http://pinkboxfoundation.com>
- President/Founder of "Parents Against Violence Everywhere" (*P.A.V.E.*), a non-profit organization;
- long-standing member of the Police Committee Liaison for 12th Division, Mississauga;
- past-member of St. Bernadette Family Resource Centre Board of Directors;
- past member of Mississauga Italian Canadian Association, of which I have been the President for 7 years;
- founder of the York Business Association, City of York;
- member of the City Center Toastmasters, Mississauga;

In 1992 she was a recipient Commemorative Medal for the 125TH Anniversary of the Canadian Confederation. The next year she received the Volunteer Service Award from the Ministry of Citizenship. Joanna is also a recipient of the 5-year Volunteer Award for the Festival of Stars.

Laurie Mazurik, MD, FRCPC, is an Emergency Medicine Physician at Sunnybrook Health Science, in Toronto. Along with her many other professional responsibilities, she is the Strategic Lead for Disaster and Emergency Preparedness for the Toronto Central LHIN and Integrated Health Preparations for the G20 Summit.

Kate McCarthy-Barnett works for the Rhode Island Department of Health Center for Emergency Preparedness & Response. In this position, she is responsible for the coordination of emergency preparedness initiatives for Rhode Islanders with disabilities, access and functional needs. In addition, she manages training activities related to emergency preparedness and response. Dr. McCarthy-Barnett serves on the FEMA Region I Regional Advisory Council, and is Co-Chair for the Rhode Island Lt. Governor's Emergency Management Advisory Council Special Needs Workgroup. Also, she serves as Chair of the Rhode Island Office of Rehabilitation Services State Rehabilitation Council, Vice Chair and Commissioner for the Rhode Island Governor's Commission on Disabilities (GCOD), Chair of the GCOD Accessibility Committee, and is a member of numerous community Boards of Directors and committees. Dr. McCarthy-Barnett has authored numerous articles on disability issues, and is active in public policy and emergency preparedness initiatives at the state and national level.

Kevin Merli became the Mitigation Division Director at FEMA Region I in July 1999, after serving in the role of Deputy Division Director for 15 years. Early in his career Mr. Merli oversaw the development and updates of over 1,000 community flood insurance studies and maps for New England communities and provided assistance to communities concerning the proper floodplain building techniques in accordance with National Flood Insurance Program requirements. Today he directs a staff of 26 people in administering floodplain management and flood insurance programs, natural hazard risk assessments, mitigation planning, hazard mitigation assistance grants and earthquake and hurricane mitigation programs affecting the New England states.

Mr. Merli has served as the Federal Coordinating Officer on four separate New England disasters, and currently serves as the FEMA Senior State Advisor to the State of Maine. He received a Bachelor of Science degree in Civil Engineering from the University of Connecticut, and is a Professional Engineer and Certified Floodplain Manager.

Diana María Contreras Mojica is a PhD student at Salzburg University working on the topic of “*Spatial vulnerability indicators applied to recovery and risk reduction after earthquakes: the case of L’Aquila – Italy*”; and at the same time also working as a researcher for the MOVE project at the Centre for Geoinformatics Z_GIS, in Austria since 2009. She holds a MSc degree in geo-information science in the domain of urban planning from the Netherlands; she received a Second Place in the 2009 URISA Student Paper Competition with a paper which summarizes her MSc thesis: “*Designing a spatial planning support system for rapid building damage survey after an earthquake: The case of Bogota D.C., Colombia*”. Previously, she did her postgraduate degree studies in the field of risk evaluation and disaster prevention at the Andes University, in Colombia. Her bachelor’s degree is in architecture from the National University of Colombia, where she received a meritorious mention for her thesis. She has 8 years’ experience in the field of risk management; during this time she worked at the District Office of Emergency Prevention and Management (DPAE), in Bogotá D.C and with private consultants in projects related with the risk management.

Nanci Monaco received her Ph.D. in Counseling and Educational Psychology from SUNY Buffalo in 1984. She currently teaches courses in child, adolescent, life span development, and educational psychology. Her dissertation research and subsequent publications have focused on Seligman’s Learned Helplessness and Learned Optimism in classroom settings. She is a licensed psychologist and was Director of Seminole County Child Abuse Prevention in Florida. She is a tenured Associate Professor at Buffalo State College, where she is currently serving as Chair of the Educational Foundations Department. In 1990 she was awarded the New York State Chancellor’s Award for Excellence in Teaching and in 2008 was awarded the President’s Award for Excellence in Teaching. As a past president of the Psychological Association of Western New York, she was appointed by the President of the National Mental Health Association to be a delegate to the People’s Republic of China to assist to the improvement of mental health services in the schools in 2004. Her current research focuses on children’s responses to trauma and disasters. She has assisted children in their recovery following 9/11 and

Hurricane Katrina and is conducting several longitudinal studies of their adjustment patterns. She is currently involved in projects to assist Haitian refugee children adjusting to their new environment.

D. Napoleon, currently the Minister of State for Social Justice and Empowerment in the Government of India, hails from the South Indian state of Tamil Nadu. He is a committed social functionary and has worked tirelessly for the welfare of the underprivileged people in the country, especially Tamil Nadu. He has been active in both relief and rehabilitation work for the affected people, especially the elderly and the disabled during the Tsunami, which struck the east coast of India and the Andaman and Nicobar Islands in 2004.

Interestingly, Mr. Napoleon was also an actor in South Indian films before joining Government of India in 2009 as Minister. He has acted in 90 odd films in all four South Indian languages viz., Tamil, Malayalam, Telugu and Kannada. He has won various awards for his outstanding performances in those movies. He served as Vice President of South Indian Film Artists Association for the period from 2000 to 2006.

As a keen sportsman, Mr. Napoleon did actively participate in Basketball tournaments at University levels. He was also a Divisional level player of Athletics in Decathlon. He headed the Tamil Nadu Basketball Association for quite sometime. He was instrumental in launching Jeevan Group of companies in the field of software technology with branch offices in the USA and New Zealand.

He served as Member of Legislative Assembly in the state of Tamil Nadu from 2001 till 2006 after getting elected from Villivakkam constituency. He is at present Member of Parliament from Perambalur constituency. Known for his penchant for the elderly and the disabled, Mr. Napoleon is associated with developing of a Muscular Dystrophy rehabilitation centre in Tirunelveli in Tamil Nadu. This centre is expected to be one of the pioneering global institutes with international standards.

James O'Connell helped found the Boston Health Care for the Homeless Program (BHCHP). He assists BHCHP's Board of Directors in setting the strategic direction for the program. He also advocates for public policies and programs to address the needs of homeless people. Dr. O'Connell juggles his active role as president with the demands of a busy clinical practice, spending much of his time caring for Boston's homeless population on the street and in one of the program's hospital-based clinics.

Nationally recognized as one of the preeminent experts on homelessness and healthcare, Dr. O'Connell lectures extensively and publishes widely. He is the editor of the *Manual of Communicable Diseases in Shelters* - one of the most widely used texts on homeless healthcare. Dr. O'Connell earned his medical degree at Harvard Medical School and a master's degree in philosophy and theology from Cambridge University in England. He graduated Maxima Cum Laude from the University of Notre Dame.

Raquel Ortiz is an Emergency Management Specialist in the Response Division at FEMA Region I. Ms. Ortiz began her tenure with FEMA, Region I in June 2008 working

for the Regional Administrator. In May 2009, she transitioned to the Response Division as an Emergency Management Specialist, and is Coordinator for the Region's quarterly Regional Interagency Steering Committee (RISC) conferences, and other response related duties.

Prior to joining FEMA, Ms. Ortiz was an Executive Producer at WGBH-TV, Boston's educational public broadcasting service where she oversaw the production of many television series. She also used her presentation skills at the station as on-air talent for a live TV series, *La Plaza*. After forming Raquel Ortiz Productions, an independent production company, she focused on producing documentaries, educational videos, and multi-media products. Ms. Ortiz' managerial, program development, and production experience spans over 35 years. She is also a professional narrator, has written and published a memoir, and resides in Cambridge, Massachusetts.

Giovanna Pereira Ottoni is an under graduate student in Sciences of Physical Activity between 2008 and 2009 in the School of Arts, Sciences and Humanities of University of Sao Paulo. Actually I am Psychology under graduated student in Faculty of Philosophy, Sciences and Letters of University of Sao Paulo in Ribeirao Preto. Since 2008 I am working in a research project with high performance athletes that suffered some kind of lesion and were submitted to a treatment, aiming to understand the psychological aspects of pain experience (subjective aspect) during their removal of sportive practice. The focus of my studies is particularly how the pain modifies the existential perspective of the athlete. To reach this goal, I am investing in my studies about Classical Phenomenology of Husserl (1859 – 1938) using its inspiration and method since the first work. The project is funded by Conselho Nacional de Desenvolvimento Científico e Tecnológico (CNPq). I am interested for the academic area, acting mainly in the follow themes: pain, phenomenology and psychology.

Michael Philbin is the Planning Department Coordinator for the Massachusetts Emergency Management Agency (MEMA). MEMA coordinates emergency planning in the Commonwealth working with communities, state agencies, not for profit organizations, and federal agencies. Mr. Philbin served on the Massachusetts Task Force on Emergency Preparedness, and Persons Requiring Additional Assistance.

Janet Popp earned a Bachelor of Science in Physical Therapy from Quinnipiac University. She is currently a graduate student enrolled in the Master of Science in Gerontology program at the University of Massachusetts Boston. She has worked as a physical therapist in acute care and outpatient settings as well as providing guidance to physical therapy students as a clinical instructor. During that time, Janet developed an interest in gait analysis and potential fall risk. In addition to her physical therapy background, she has helped people at both ends of the age spectrum as an education advocate for an autistic nephew, a kindergarten literacy assistant, and a rest home nurse's aide. She is a certified Long Term Care Ombudsman and a member of the Massachusetts Falls Prevention Coalition, directly contributing to the development of the state's strategic plan for falls prevention. Her areas of interest include advocacy for older adults as well as programs that support aging in place. She aspires to work in the area of fall

prevention, developing policies and implementing interventions. It is her hope that the public's implicit ageism associated with older adult falls will undergo a positive culture change.

Rosa Perla Resnick, a native of Argentina, holds a PhD from the National University of Buenos Aires; M.S.S.W. from Columbia University, New York City and a PhD/D.S.W. from Yeshiva University, New York City.

She is a university professor in the U.S.A., Latin America and Israel; a Fulbright Senior Scholar, researcher, lecturer and author; she has participated in many national and international conferences and congresses in the five continents of the world and has published extensively both in English and Spanish.

Currently, she is a representative to the U.N Economic and Social Council (ECOSOC) and to the Department of Public Information (DPI) of the International Association of Schools of Social Work (Hong Kong) and the International Association of Gerontology and Geriatrics (Paris).

At the U.N., Dr. Resnick is a member of the NGO Committees on Ageing (COA) and Human Rights; a Co-Chairperson, Sub-Committee on Intergenerational Relationships (COA) and a Chairperson of the NGO Committee on Migration, all committees of the Conference of NGOS (CONGO), in consultative status with ECOSOC, a consultant to the CONGO Latin American/Caribbean Project, and a liaison to UNICEF activities. In addition, she also serves on Boards of Directors of several universities and is a consultant to various national and international community organizations.

Marcie Roth is the Director of the Office of Disability Integration and Coordination at FEMA. Ms. Roth was appointed by President Obama in June 2009 to be the Senior Advisor on Disability Issues for FEMA. Once at FEMA, she developed the new Office of Disability Integration and Coordination, where she now serves as Director. In this role, she leads the Agency's commitment to meet the access and functional needs of children and adults with disabilities in emergency and disaster preparedness, response, recovery and mitigation.

Before coming to FEMA, Ms. Roth was President and CEO of Global Disability Solutions Group, a leading national organization promoting diverse workforce initiatives with a focus on disability issues. She served as a senior member of the Obama for America Disability Policy Committee and served on President Obama's Justice and Civil Rights Transition Team.

Over the past 20 years, Ms. Roth has held leadership positions with the National Coalition for Disability Rights, National Spinal Cord Injury Association, National Council on Independent Living and TASH, the national disability rights organization. She is known for her work in developing and managing effective coalitions to advance public policy initiatives, and is frequently consulted as an expert on strategic approaches that fully integrate preparedness, response, and recovery solutions. Ms. Roth led private

sector response to the additional needs of survivors with disabilities during and after Hurricanes Katrina and Rita and she was commended by the White House for her efforts on behalf of New Yorkers with disabilities in the aftermath of the 2001 terrorist attacks. In addition to her own personal experience with disability, Ms. Roth is the parent of two children with disabilities, both on their way to achieving independence.

Bob Roush, EdD, MPH, is a native of Baytown, Texas. He holds baccalaureate and master's degrees in kinesiology and health from Sam Houston State University in Huntsville, Texas; his doctorate in educational administration and research is from the University of Houston. Following a post-doctoral fellowship in medical education at the University of Southern California School of Medicine in Los Angeles, he took an M.P.H. degree in health services administration from the University of Texas School of Public Health. Since 1971, he has been a member of the faculty of Baylor College of Medicine in Houston, Texas, where he directs the Texas Consortium Geriatric Education Center. In 2002, he led a group of geriatrics educators to form the U.S. Collaborative on Geriatric Emergency Preparedness and Response. Since the White House Conference on Aging in 2005, he has worked with his North American Colleagues associated with the Public Health Agency of Canada's Division of Aging and Seniors on educational programs regarding preparedness issues of elders in disasters.

Karim Sahar is a Senator & Minister Plenipotentiary, International Parliament for Safety and Peace, IGO, Palermo -Italy. Vice-President & Registrar, and Dean, Faculty of Middle East Studies, University Consortium International, Vancouver, Canada. He is also the following: Director, Health Sciences for Middle East, London College for Higher Education, London – UK; Consultant, Mental Health & Parapsychology; Founder, President & CEO, The Canadian Health Sciences Institute, Toronto – Canada; Marchese di Qara Su, Salerno – Italy; Honorary Knight of Justice, The Chivalric Order of the Knights of Justice, IGO, London- UK; Honorary Knight of St. John of Jerusalem, The Sovereign Order of the Orthodox Knights Hospitaller of St. John of Jerusalem; IGO, New York, USA; Apostolic Blessing, Holiness Benedict XVI, Vaticanis; Honorary Ambassadorship; US COLONEL COMMISSION 2008; Active Lifestyle US President Award, USA; Commissioner, Collaborative Inter-Governmental Scientific Research Institute, IGO, Rome, Italy; Dictionary of International Biography, 25th Edition, Cambridge University, England; physician of the New Millennium, CAMRI, Vancouver, B.C., Canada; Gold Medal in Alternative Medicines, Indian Board of Alternative Medicines, West Bengal, India; President & CEO, The Canadian Arabian Groups, Dubai, UAE; Visiting Professor in Kuwait, Dubai-UAE, USA, Hong Kong, UK and Canada. He has two Post-Doctorates –Doctor of Sciences in Social Medicine and Community Health, Health Sciences, and Doctorates in Clinical Psychology, Clinical Hypnotherapy and Parapsychology, Natural Health and Yoga, Acupuncture and Acupressure with several years of working experience in Behavioral Modification, Psychotherapy and Counseling, Training and Teaching, Research and Data Analysis in Psychosomatic Medicines and Psycho-Social and Behavioral Studies, possessing effective interpersonal communicative skills, flexibility and team work with special emphasis on interactive organizational behavior, Mental Health, Psychotherapy, and International workshops and seminars and training.

Professor Sahar has published 265 research articles in India, Kuwait, U.A.E., Canada, and the USA. He has been interviewed 190 times on T.V., Radio, Newspapers and Magazines. Furthermore, he has conducted, instructed and attended more than 370 workshops, seminars and conferences. He is a member of the following: American Psychological Association, Canadian Psychological Association, Canada Academy and Association of Chinese Acupuncture & Medicine, Ontario Association of Consultants, counselors Psychometrists and Psychotherapists, International Professional Research Association for Integral Medicine, Fellow of the Rural Health Society, (F.R.H.S.), India, Canadian Registry of Professional Counselors and Psychotherapists, Canadian Mental Health Association, Canadian Natural Health Association, National Guild of Hypnotists; USA, and the American Board of Hypnotherapy. His hobbies include teaching and learning. He has a good sense of humor, he is fun-loving and a cultivator of friendships.

Shinobu Sakurai is a professor who graduated from St Luke's Nursing University at Tokyo and studied at the University of California San Francisco. She worked as a Public health nurse in a school-based and occupational health setting for many years in Japan, and continued her research on risk management and disaster prevention for a senior citizen community in Mie. Also, she has conducted field study after the big earthquake that occurred in Nigata and Thai to determine the health problems of vulnerable populations. Currently, she organizes and directs many community health care projects and advocates for the preparedness of health care facilities after disaster in rural areas which are without any professional medical assistance. Also, she is the main instructor in the Disaster Mitigation Office, Mie University, which provides the training courses on disaster nursing for community citizens.

Charles P. Scholes, a Department of Chemistry Professor at the State University of New York at Albany, earned an A.B. degree from Cornell University and a Ph.D. in Molecular Biophysics from Yale University. He is the Co President of PAZAPA USA.

PAZAPA (step-by-step in Haitian Creole) is a school for children with handicaps in Jacmel, Haiti (www.pazapa.org). The job of the co-President is to provide leadership, work with the staff on the ground in Haiti, and focus on the sustainability and fundraising of the organization. The motivation for the involvement of Charles and Nancy Scholes with PAZAPA was the life-changing Peace Corps experience of our late son, Jonathan E. Scholes, at PAZAPA in 1996-98. (Jonathan died Oct. 2007.)

PAZAPA provides : 1) Daily special education to 100 learning disabled children; 2) Daily instruction to 25 hearing impaired; 3) Medical treatment to the handicapped (e.g., club-foot repair); 4) Outreach to hundreds in rural southeast Haiti.

The Co-President's duties are: 1) Fundraising, publicity, and development through grant writing and personal and written contact. 2) Working with the Haitian leadership at PAZAPA to determine focus and budgetary needs – with travel to Haiti. 3) Resurrecting PAZAPA post earthquake.

Since the earthquake: 1) The staff of the school have been financially supported. 2) New land has been purchased by PAZAPA USA. 3) The school functions in temporary quarters provided by PLAN International. 4) Visiting physicians make orthopedic assessments in these quarters. 5) Negotiations with international aid agencies are underway for funds to rebuild.

Professor Scholes ninety four publications in refereed physics, chemistry, and biochemistry journals in the period 1967-2010

Richard Serino began serving as FEMA Deputy Administrator in October 2009. In this role, he works directly with Administrator Craig Fugate to build, sustain, and improve the Department's capacity to prepare for, protect against, respond to, recover from, and mitigate all hazards.

Mr. Serino brings 35 years of state and local emergency management and emergency medical services (EMS) experience to his position at FEMA. Prior to his appointment as Deputy Administrator, he served as Chief of Boston EMS and Assistant Director of the Boston Public Health Commission. In that role, he bolstered the city's response plans for major emergencies, including chemical, biological, and radiological attacks. He also led citywide planning for H1N1 influenza.

Mr. Serino has served as an Incident Commander for over 35 mass casualty incidents and for all of Boston's major planned events, including the Boston Marathon, Boston's Fourth of July celebration, First Night, and the 2004 Democratic National Convention, a National Special Security Event.

Mr. Serino began working for Boston EMS in 1973; over the years he rose through the ranks and in 1999 became Chief of Department. During his tenure as Chief, he has seen the agency expand and improve to become nationally recognized for the first rate services provided by the agency's EMTs and Paramedics.

Since 1998, Mr. Serino has been a National Faculty member for the Domestic Preparedness Program. He was an original contributing member for the Defense Department's Domestic Preparedness Training Program and Metropolitan Medical Response System. Mr. Serino has been involved, since its inception, with the Lessons Learned Information Sharing (www.llis.gov) network for emergency responders. As a consultant to the Pentagon and the Defense Department, Mr. Serino served on the 9/11 after-action team to assess medical consequence management policies and procedures.

Mr. Serino attended Harvard University's Kennedy School of Government Senior Executives in State and Local Government program in 2000, completed the Kennedy School's National Preparedness Leadership Initiative in 2005, and recently graduated from the Executive Leadership Program, Center for Homeland Defense and Security at the Naval Postgraduate School.

Alessandra Marques Sohn is an under graduate student in Sciences of Physical Activity in the School of Arts, Sciences and Humanities of University of Sao Paulo. During the under graduation study period, I am interested in adapted physical activity for disable people. In 2008, a group of students, including myself, developed a project with adapted capoeira (typical regional dance) for intellectual deficient children and teenagers. After that, my goal have been concentrating my studies on research about the social context of disable people aiming to characterize the moment that the person become disable and we produced the essay that was submitted to the International Competition at the UMASS Boston. Actually I am working in a research project about the role of physical activity like a mechanism of inclusion for disable people. I am interested in themes about adapted physical activity.

Patric R. Spence (PhD, Wayne State University, 2006) is assistant professor in the School of Communication at Western Michigan University. His research focuses on crisis and risk communication, examining audience perceptions of risk and emergency messages produced by emergency management organizations, government and news agencies; specifically, looking at how these messages motivate various publics to take action in light of perceived threats during the lifecycle of a crisis. Other research examines how the physical and psychological needs of underserved populations are handled in the context of public health events and disasters, industry response and the role of new media in disaster preparation, response and recovery.

He has written widely on the issues of race and class surrounding Hurricane Katrina and issues of gender and information seeking in disasters. He is a Next Generation of Hazard Researchers Fellow and a research affiliate with the Center for Rebuilding Sustainable Communities after Disasters at the University of Massachusetts, Boston. His research was cited in the National Consensus Statement on Integrating Racially and Ethnically Diverse Communities into Public Health Emergency Preparedness, released by the Office of Minority Health, in the U.S. Department of Health and Human Services. He also works closely with the Centers for Disease Control and Prevention.

Ann St. Pierre is currently the Executive Director of the Melrose Housing Authority in Massachusetts. She manages the Melrose Affordable Housing Corporation, and is a member of the Melrose Affordable Housing Task Force. Ann has been a housing professional for the past 17 years. She first became a housing advocate in 1993, when she began her career at Salem Housing Authority in the Section 8 department. In 1996 she became the Executive Director for the Georgetown Housing Authority, where she began to identify the capitol needs of our public housing portfolio and became familiar with the funding and regulation restraints in the Commonwealth. After competing successfully for Capitol funds from the 1998 Bond Bill, she was recruited by DHCD, the governing agency, as an Asset Manager to assist with identifying the needs of small housing authorities. In this capacity, she oversaw statewide projects in Massachusetts for veterans

Jane Swan, BA, is the NGO Liaison Officer at the Division of Aging and Seniors (DAS), Public Health Agency of Canada. She provides secretariat support to the Working Group on the Integration of Seniors in Emergency Planning and Mitigation and the Health Professionals and

Continuity of Health Services Working Group. Her entire 22 years in the federal public service has focused on seniors and aging.

Mo Telford is a board-level dynamic development professional with a special interest in post-16 education and skills policy and strategy, and sustainable development. She has a track record of transforming moribund strategic and operational systems to deliver business objectives that are fit for purpose and responsive to user requirements in complex and challenging environments. She also has a track record of significant contribution to policy development and delivery and practice-based initiatives that improve business performance through successful sustainable development, change management, partnership working, and marketing. With experience of leading and managing programmes that shift attitudes and influence policy, Dr Telford has successfully designed and delivered complex, outcome focused, multi-stakeholder projects and has senior-level experience in delivering innovative corporate policies, some with an international focus. Dr Telford spent twelve successful years as a full-time university lecturer and researcher and has maintained her close association with academia and continues to teach on a part-time basis at two UK universities: University of London and the Open University. Dr Telford teaches undergraduate subjects relating to Design and Sustainable Development and teaches Development Management at post-graduate level. Her current research interests include: climate change adaptation and mitigation; sustainable development; design, innovation and technology; sustainable communities; and, the management and application of innovation and technology.

Kevin “Kip” Thomas is an Assistant Professor in the Department of Anatomy and Neurobiology at Boston University School of Medicine, where he is the director of the Master of Science in Healthcare Emergency Management Program. He earned his Master’s in Business Administration and Doctorate in Public Policy from George Mason University, School of Public Policy, Fairfax Virginia.

Dr. Thomas’s experience includes over 20 years of military service, both in the field as a submariner, and at the Pentagon as an aide to the Secretary of the Navy. Since 2002, he has taught diverse groups of students at both the undergraduate and graduate levels.

Dr. Thomas was the founding Research Programs Director for the Critical Infrastructure Protection Program at George Mason University— a \$20+ million research program for developing and analyzing methods of critical infrastructure protection and cyber security. In addition to providing project oversight for over 50 research activities conducted across more than 14 universities, Dr. Thomas personally led or participated as a researcher in a number of these projects.

Dr. Thomas currently teaches four classes for the Healthcare Emergency Management Program and is active in advising students.

Carole Totzkay is the Bioterrorism Preparedness Planner for the State of New Hampshire Department of Health and Human Services. Ms. Totzkay coordinates state-level public health all-hazards emergency plan exercises, co-directs the State Individual Assistance program, facilitates the State Functional Needs Committee, and the State

Supportive Care Shelter work group. She was the co-developer of New Hampshire's first version of the Points of Dispensing (POD) Guidance, Functional Needs Guidance, and the Supportive Care Shelter Guidance.

Prior to joining NH Department of Health and Human Services, she worked in the Department of Safety, Homeland Security, and Emergency Management. Ms. Totzkay has served in a variety of research, medical care, quality improvement, and health education management positions in Detroit, Michigan and Worcester, Massachusetts, and as an adjunct Community Health undergraduate instructor at Worcester State College.

Natália Utikava is an undergraduate Nutrition student of the School of Public Health, University of São Paulo, Brazil. She is currently conducting research on issues related to Food and Nutrition Security - the concept and its applications and the importance of the theme in the dietitians' training to develop humanistic skills. She has published papers related to Food and Nutrition Security as an issue of importance in undergraduate Nutrition courses and in the work of dietitians in Primary Care.

W. Russell "Russ" Webster is the Federal Preparedness Coordinator in the National Preparedness Division at FEMA Region I. Captain Russ Webster, US Coast Guard (Retired), served 26 years in the military, and was his service's incident commander for the 1999 JFK Jr. and Egypt Air Flight 990 air crashes. He later became the Chief of Operations for the Coast Guard's Northeast District (Maine to New Jersey), and coordinated his service's operational response to the 9-1-1 New York terrorist attacks. Upon retirement in 2003, he continued his public service with the newly-formed Transportation Security Administration, where he helped create more than 60 new operational and administrative doctrine, including his agency's inaugural behavioral detection program, SPOT. In February, 2008, he became FEMA Region I's first Federal Preparedness Coordinator, responsible for enhancing preparedness of individuals, communities, states, Tribal Nations, the private sector, and the federal community. Webster lives in Cape Elizabeth, Maine with his wife, Elizabeth, son Andrew, age 22, and daughter Noelle, age 16.

Sue Wolf-Fordham is the University of Massachusetts Medical School E.K. Shriver Center's Senior Project Manager responsible for emergency preparedness projects related to individuals with disabilities and special health care needs. The Shriver Center is dedicated to improving the lives of individuals with intellectual and other disabilities and their families, promoting the understanding of neurological, cognitive and behavioral development associated with developmental and other disabilities, with an emphasis on mental retardation. Since 2005 the Shriver Center has worked to address the emergency preparedness needs of people with disabilities, fostering the development of individual, family and organizational preparedness knowledge, skills and resilience. The Shriver Center develops and disseminates emergency preparedness education and outreach programs to individuals with intellectual disabilities (in collaboration with a consultant with an intellectual disability), parents/guardians of children with disabilities and special health care needs, graduate Leadership Education in Neurodevelopmental Disabilities

(LEND) fellows, and service providers and other professionals, in addition to research, consultation and cross-disability efforts relating to emergencies and disasters.

Previously, Sue was the founding director of a family-centered, family-governed support program for families whose young or adult children have disabilities. She has been a consultant and presenter on pre-school inclusion, “low tech” assistive technology, disability information resource development, family support, and the development of communication software for non-verbal children. She is the co-founder and co-chair of the Dnepropetrovsk Kehillah Project Special Needs Initiative, an international humanitarian aid, family support and special education program (a collaborative partnership of Boston’s Jewish Family & Children’s Service, Tufts University Eliot Pearson Department of Child Study, Gordon Teacher’s College in Haifa, Israel, and Bet-Hana Teacher Training College in Dnepropetrovsk, Ukraine).

Sue earned her B.A. in American Studies from Smith College, her J.D. from Boston University, and successfully completed Harvard University’s Ukrainian Summer Institute fellowship and the University of Massachusetts Medical School’s Leadership Education in Neurodevelopmental Disabilities (LEND) graduate fellowship.

Richard Zingarelli is a Program Manager in the Flood Hazard Management Program in the Massachusetts Department of Conservation and Recreation (DCR). Mr. Zingarelli has over 30 years of experience in water resources planning, and engineering with the Massachusetts Department of Conservation and Recreation, Army Corps of Engineers, and Narragansett Bay Program. He has been the Program Manager for the DCR Flood Hazard Management Program for 18 years, serving as the Acting State Hazard Mitigation Officer, and the State Coordinator for the National Flood Insurance Program. As the State Hazard Mitigation Officer, he administers the state’s hazard mitigation planning and project grant programs in close coordination with the Massachusetts Emergency Management Agency. As the State National Flood Insurance Program (NFIP) Coordinator, he is the primary liaison for Massachusetts communities, state agencies, businesses, and other individuals to obtain information on the NFIP, FEMA map products, and floodplain management, in general.