MY SUPPORT NETWORK

Write it down today. After the earthquake there is no time to find one.

MY SUPPORT TEAM

NAME	TELEPHONE
_____	_____
_____	_____
_____	_____

MY NETWORK SHOULD KNOW

- ☐ My specific needs
- ☐ Where my medications and essential devices are
- ☐ Which routes are accessible for me
- ☐ The procedures we agreed on
- ☐ How to get into the home if needed

MY ACCESSIBLE EXIT ROUTE

_____

MY MEETING POINT

_____

ESSENTIAL MEDICATIONS AND EQUIPMENT

_____

_____

www.centrodelreinodepazyjusticia.com/en

This summary does not replace the complete guide.
Download the earthquake modules by scanning the QR code.

IN ADDITION TO THE GENERAL BACKPACK

THE SPECIALIZED BACKPACK

The same items as always, plus whatever the person needs in order to remain independent.

MEDICATIONS
The essential ones, with the information needed on how to use them.

WATER-PROTECTED CARD
Name · support needs · allergies · medications · emergency contacts.

ASSISTIVE DEVICES
Spare batteries, chargers, hearing aid supplies, mobility device parts, and alternative means of communication.

FOR REGULATING STIMULATION
When it forms part of the person's usual needs: headphones, sensory objects, comfort objects.

None of this should be heavy enough to slow down a safe evacuation.

KINGDOM OF PEACE AND JUSTICE CENTER

Civil Training Program: Risk Management and Emergency Preparedness

EARTHQUAKES

People with disabilities

«Preparation should promote autonomy, adapt the environment to each person's particular needs, and establish support networks in advance».

DROP · COVER HOLD ON
in general

LOCK · COVER HOLD ON
in general

Educational document for the general population of Latin America and the United States

PHASE 1: BEFORE

Preparation begins before the earthquake, and it is the only part you can decide calmly.

AT HOME

·Routes kept completely clear for a wheelchair, walker, or cane.

·Keep the bed away from windows, mirrors, tall furniture, and heavy pictures.

·Keep mobility devices within reach from where you sleep.

ACCORDING TO EACH NEED

Wheelchairs and people with limited mobility. Practice LOCK — COVER — HOLD ON. Accesibility to canes, crutches and walkers.

Visual impairment. Orderly, predictable layout; report any change of location; practice the routes with your support network.

Hearing impairment. Visual, flashing, or vibrating alerts where available, and alternative means of communication close at hand.

Intellectual and cognitive disabilities, and neurodivergence. Pictograms, visual instructions, and gradual drills, never in a way that causes fear or overload.

PRACTICE MAKES PERFECT

PHASE 2: DURING

There is no single action that applies to everyone. Protect yourself during the shaking; evacuate afterward.

IF YOU USE A WHEELCHAIR

LOCK Engage the chair's breaks.

COVER Protect the head and neck with your arms.

HOLD ON Keep a stable position until it is over.

Lean forward when you can do so safely.

IF YOU ARE IN BED OR AN ARMCHAIR AND CANNOT MOVE

·Do not attempt any movement that increases the risk of falling.

·Protect your head and neck with pillows or something padded.

IF YOU ARE IN BED OR AN ARMCHAIR AND CANNOT MOVE

Visual — Say what is happening, in short instructions; give warning before moving them, and do not pull them.

Hearing — Eye contact, familiar gestures, simple instructions. Never shine a flashlight in their eyes.

Cognitive and neurodivergence — Use the phrases: "GET DOWN," "COVER UP," "STAY HERE." Only the support that is needed.

- Do not leave the chair to get down on the floor
- Do not move anyone any distance while it is shaking
- Do not use elevators
- Do not restrain or hold anyone down by force

THE CAREGIVER MUST AVOID BECOMING A SECOND CASUALTY

PHASE 3: AFTER

The environment has changed: debris, broken glass, no lighting, elevators out of service, routes that no longer work.

DO NOT ASSUME WHAT HELP THEY NEED. ASK WHENEVER POSSIBLE.

BEFORE MOVING

· **Check** for injuries. Some are not visible right away.
· **Ask** how they are and what assistance they need.
· **Check** their mobility and communication devices.
· **Look** at the route before starting.

ACCESSIBLE EVACUATION

· Do not separate them from their wheelchair, cane, hearing aids, or other devices.
· Do not improvise carrying techniques: ask for trained personnel.
· Do not use damaged or unauthorized elevators.
· If the route is no longer accessible, report it immediately.

ACCORDING TO EACH NEED

Wheelchair — Check the wheels and brakes; do not take hold of it by removable parts, and do not lift it unnecessarily.

Visual — Identify yourself, describe the situation, warn about steps and broken glass. The guide dog stays with them.

Hearing — Write messages down; evacuation notices, in writing.

Cognitive and neurodivergence — Short, already familiar instructions; at the shelter, find a quiet space.

NEVER LEAVE ANYONE IN A DANGER ZONE JUST BECAUSE THE USUAL METHOD IS NOT AVAILABLE

Activate your support network. Do not enter a dangerous building to check.