

EXECUTIVE SUMMARY

Preparing to Thrive: Disaster Preparedness and Resilience Program

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In partnership with Los Angeles County Access for All UsCC

Program Length	10 training sessions plus in-person culmination
Delivery Format	Virtual instruction via Zoom with accessibility supports
Participants	30 total participants
Service Area	All 8 Los Angeles County Service Planning Areas (SPAs)
Primary Outcome	Preparedness increased from 17% prepared to 100% prepared

Program Overview

Preparing to Thrive was developed as an inclusive disaster preparedness and resilience initiative intended to address a clear gap in emergency readiness among individuals with disabilities and people with access and functional needs. The program recognized that many residents experience additional barriers during disasters, including communication challenges, mobility limitations, lack of accessible resources, difficulty securing medications or durable medical equipment, and increased emotional stress during emergencies. In response, the project was designed to provide participants with practical knowledge, concrete tools, and confidence-building support that could be applied immediately in real-life emergency situations.

The overall purpose of the program was not simply to provide information, but to strengthen participant readiness in a meaningful and measurable way. The training series emphasized preparedness as a whole-person and community issue by combining emergency planning, disability inclusion, emotional wellness, self-advocacy, and resource navigation. Through this approach, the program sought to improve individual safety, reduce fear and uncertainty, and support a more resilient network of participants who could better protect themselves, their households, and their communities during disasters.

Program Goals and Intended Outcomes

The project was guided by several interconnected goals. First, it aimed to increase accessibility in disaster preparedness education by ensuring that participants could receive information in a format that accommodated a range of physical, sensory, and functional needs. Second, it aimed to build resilience by helping participants understand hazards, anticipate challenges, and prepare personalized plans that reflected their unique circumstances. Third, it sought to strengthen community awareness and collaboration by introducing participants to local resources, agencies, peer support strategies, and inclusive approaches to emergency response.

The intended outcomes included stronger emergency planning skills, improved confidence in responding to emergencies, greater understanding of disability rights and accommodations during disasters, increased awareness of local support systems, and direct access to tangible preparedness supplies through emergency go-bags. The long-term vision of the project was to help participants move from uncertainty and vulnerability toward readiness, self-advocacy, and practical resilience.

Methodology

Preparing to Thrive used a structured, participant-centered methodology that combined education, discussion, demonstration, and practical application. Trainings were delivered virtually through Zoom in order to maximize accessibility and to make it possible for participants from across Los Angeles County to attend consistently without transportation barriers. The virtual structure also supported continuity, allowed participants to engage from familiar environments, and expanded the project's reach across all eight Service Planning Areas.

The training schedule was organized as a 10-session series, with sessions generally held three times per week on Tuesday, Wednesday, and Thursday from 5:30 p.m. to 7:30 p.m. This recurring schedule

created consistency and encouraged retention by allowing participants to build knowledge progressively over time. Each session included live presentation, facilitated discussion, question-and-answer opportunities, examples, and guided reflection. Accessibility features referenced in the training materials included ASL interpretation, real-time captioning, and screen-reader compatibility, reinforcing the project's commitment to inclusive participation.

The methodology also incorporated evaluation at multiple points. Participants completed pre-assessments to establish a baseline of preparedness prior to the series and post-assessments to measure change after program completion. Participant surveys were used to gather feedback on perceived learning, readiness, confidence, and usefulness of the training content. In addition, the project emphasized practical completion of personal emergency planning tasks, making the methodology both instructional and action-oriented.

Program Description

The program consisted of ten structured training sessions focused on disaster preparedness and resilience, followed by an in-person culmination activity. The sessions were intentionally sequenced so that participants first developed awareness of disasters and their rights, then built understanding of personal preparedness needs, and ultimately practiced applying what they learned to their own emergency plans and go-bag preparation. The design supported incremental learning rather than one-time exposure to information.

Beyond content delivery, the program created a supportive learning environment that encouraged interaction, questions, and peer exchange. This was especially important because disaster preparedness can feel overwhelming for participants who have prior trauma, health concerns, or functional limitations. By creating space for discussion and reflection, the project helped participants better understand the material and reduced some of the fear commonly associated with emergency planning.

The program concluded with an in-person culmination event that served as both recognition and practical reinforcement. Participants were able to celebrate completion of the series, share aspects of their emergency preparedness work, and receive their emergency go-bags. This ending component strengthened program impact by ensuring that learning translated into visible, concrete preparedness action.

Training Content Overview

The training curriculum covered a broad range of disaster preparedness topics drawn from the program presentation and final report materials. Participants were introduced to the different types of disasters that can affect communities, including natural disasters such as earthquakes, floods, hurricanes, and wildfires, as well as man-made emergencies such as chemical spills, industrial incidents, and other human-caused disruptions. This foundational content helped participants understand that preparedness is relevant across multiple forms of crisis and that planning must account for different types of hazards.

A major area of instruction focused on basic and intermediate emergency planning. Participants learned about risk reduction strategies, local hazard awareness, emergency alert systems, communication

planning, evacuation procedures, shelter considerations, and the importance of maintaining access to important documents and emergency contacts. The curriculum consistently emphasized that emergency planning must be personalized. Participants were encouraged to assess their own needs, identify what supports or accommodations they may require, and create emergency plans tailored to their medical, mobility, communication, household, and caregiving realities.

The curriculum also placed strong emphasis on disability inclusion and self-advocacy during emergencies. Participants received instruction on disability rights in emergencies, including the importance of clear communication, legal protections under the ADA, and the right to request reasonable accommodations during emergency response and recovery. This was a critical part of the training because preparedness for people with disabilities is not only about supplies; it is also about ensuring equitable treatment, accessible information, and safe response practices.

Another substantial component addressed preparedness for mobility and medical needs. Sessions discussed the role of wheelchairs, walkers, canes, communication devices, medications, assistive technology, backup batteries, power planning, and support networks. Participants were encouraged to think through what would happen if electricity were lost, medications became difficult to access, or transportation were interrupted. Related content also covered emergency shelter options, emergency transportation considerations, and ways to prepare for pets and service-related needs.

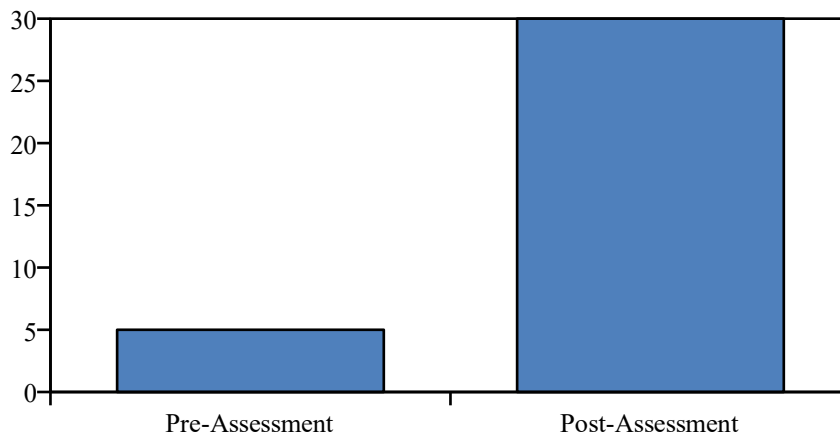
Emotional preparedness was intentionally woven into the program. Participants examined the emotional toll of disasters, including fear, anxiety, shock, and trauma responses. Guest speaker content addressed trauma recognition, coping with anxiety, and strategies to support emotional resilience. This focus acknowledged that preparedness is not only physical and logistical; it also requires psychological readiness and community support. The curriculum therefore balanced practical emergency planning with coping strategies, peer support, and self-advocacy skills that can improve resilience during and after a crisis.

Evaluation and Measurable Outcomes

Program evaluation demonstrated substantial improvement in participant preparedness.

Pre-assessment data showed that only 5 of the 30 participants, or 17%, considered themselves prepared before the training series began, while 25 participants, or 83%, reported that they were not prepared. By the end of the program, post-assessment results showed that all 30 participants, or 100%, reported being prepared. This represents an 83 percentage-point increase in preparedness among participants and provides strong evidence that the program achieved its core objective.

Survey feedback complemented the quantitative data by showing that participants experienced gains not only in factual knowledge but also in confidence, readiness, and willingness to take action. Participants reported a stronger understanding of emergency go-bag essentials, greater awareness of local resources, improved confidence in emergency planning, and increased willingness to share preparedness information with family members and community networks. Together, the assessment data and survey findings indicate both measurable and perceived improvement.



Evaluation Measure	Result
Pre-Assessment	5 prepared (17%); 25 not prepared (83%)
Post-Assessment	30 prepared (100%)
Overall Impact	83 percentage-point increase in preparedness

Participants Served

A total of 30 participants successfully completed the program. This level of participation and retention is significant because the training required multi-session commitment over time rather than a one-time workshop format. Consistent engagement across ten sessions suggests that the content was relevant, accessible, and meaningful to participants.

The participant group included individuals who often face heightened vulnerability during emergencies due to disability, health, caregiving responsibilities, or limited access to services. As reflected in the final report materials, the population served included individuals with physical disabilities, developmental disabilities, chronic health conditions, mental health needs, older adults, caregivers, and low-income or underserved residents. This mix of participants reinforced the need for flexible, individualized preparedness planning and highlighted the project's equity-centered approach.

Geographic Reach and Countywide Participation

The project achieved countywide representation by serving participants from all eight Los Angeles County Service Planning Areas: SPA 1 Antelope Valley, SPA 2 San Fernando Valley, SPA 3 San Gabriel Valley, SPA 4 Metro Los Angeles, SPA 5 West Los Angeles, SPA 6 South Los Angeles, SPA 7 East Los Angeles, and SPA 8 South Bay/Harbor. This broad reach is important because it demonstrates that the program was not limited to one localized neighborhood or provider network; instead, it was accessible across multiple regions of the county.

The virtual format was an essential factor in this geographic reach. By offering training via Zoom, the program reduced transportation barriers, expanded access for participants with mobility or travel limitations, and made it possible for individuals from geographically distant areas to participate in the same learning community. This is a notable strength of the model and a useful consideration for future program replication or expansion.

Program Strengths

One of the greatest strengths of the program was its accessibility-centered design. The use of virtual instruction, coupled with referenced supports such as ASL interpretation, real-time captions, and screen-reader compatibility, demonstrated intentional effort to make the training usable by participants with different needs. This approach is particularly important in emergency preparedness education, where exclusion from planning can lead directly to increased risk during disasters.

Another major strength was the breadth and relevance of the curriculum. The training moved beyond general preparedness messaging and addressed concrete issues that participants may actually face, such as evacuation with mobility aids, safeguarding medications, advocating for accommodations, planning for pets, and coping with disaster-related anxiety. The inclusion of guest speakers and interactive opportunities further enriched the experience and provided participants with multiple ways to engage with the material.

The distribution of emergency go-bags added a practical dimension that strengthened the overall effectiveness of the program. Rather than leaving preparedness at the level of theory, the project gave participants tangible emergency resources to support implementation. This combination of knowledge, planning, and supplies likely contributed to the strong post-assessment results.

Program Barriers and Lessons Learned

The most clearly identified barrier in the final report materials was participant interest in additional training time. Participants requested more training days beyond the original ten sessions, suggesting that the curriculum generated strong engagement and that participants saw value in continued learning. While this request indicates that the program length may have felt limited relative to participant interest, it should also be understood as evidence of success: participants wanted more because the training was useful and relevant.

A broader lesson learned is that preparedness training for people with disabilities and access and functional needs benefits from continued reinforcement, practice, and follow-up. Emergency planning is complex, and many participants are managing layered needs involving health, transportation, caregiving, communication, and housing. Future program models may therefore benefit from booster sessions, follow-up workshops, or additional specialized modules to help participants sustain and deepen preparedness over time.

Participant Feedback and Perceived Impact

Participant feedback reflected a strong positive response to the program. According to the final report, participants described feeling more prepared, indicated that the go-bag helped them understand what

they need during emergencies, reported that the training made emergencies feel less frightening, and expressed appreciation for the supportive environment. These comments suggest that the program had both practical and emotional impact.

The perceived impact is important because fear and uncertainty often prevent people from engaging fully with preparedness planning. By reducing anxiety, increasing understanding, and creating a supportive space for learning, the program appears to have improved participant self-efficacy. This means that participants not only gained information, but also felt more capable of taking protective action, which is one of the most meaningful indicators of program effectiveness.

Culmination Event and Emergency Go-Bag Distribution

The culmination component played an important role in tying together the educational, practical, and motivational aspects of the project. The program concluded with an in-person culmination event that recognized participant effort and completion. This event provided an opportunity for participants to reflect on what they had learned, present or discuss components of their emergency plans, and participate in a final shared experience centered on preparedness and resilience.

A key feature of the culmination was the distribution of emergency go-bags. Each participant received a go-bag with essential supplies intended to support emergency readiness. This was especially important because the program's message was that preparedness must translate into action. Receiving a go-bag made the training more concrete, helped participants leave with immediate tools they could use, and reinforced lessons about essential emergency supplies, documentation, medical needs, comfort items, and personalized planning.

The culmination also served as a recognition milestone. Celebrating participant completion can reinforce retention of material, validate effort, and create a stronger sense of accomplishment. In community-based programs, this kind of closeout activity often helps transform a training series into a more lasting experience of empowerment and connection.

Recommendations for Future Programming

Future programming should consider expanding the number of sessions or creating follow-up modules so that participants can continue building on what they learned. The existing data and participant feedback suggest that there is strong demand for more in-depth preparedness support. Additional sessions could allow for more scenario-based exercises, deeper focus on disability-specific emergency planning, and increased time for participant practice and review.

The final report also identified CPR and First Aid integration as a future recommendation. Including these topics could strengthen participant confidence in emergency response and extend the program from preparedness planning into immediate response skills. Other future opportunities include family preparedness workshops, peer-led follow-up support, and continued collaboration with community agencies and emergency management partners.

Because the virtual model proved effective for countywide participation, future expansions should preserve accessible remote options while also considering strategically placed in-person activities. A hybrid design could offer the best of both approaches: broad access through virtual training and deeper

engagement through occasional in-person practice or resource distribution events.

Conclusion

Preparing to Thrive successfully advanced emergency preparedness, confidence, and resilience among participants with disabilities and access and functional needs. The project combined accessible virtual instruction, participant-centered methodology, practical planning, emotional support content, and tangible supply distribution into one cohesive preparedness model. The measurable increase from 17% prepared at baseline to 100% prepared after program completion demonstrates strong program impact.

Equally important, the program showed that inclusive disaster preparedness must address more than standard emergency checklists. It must consider disability rights, communication access, assistive technology, medical continuity, emotional wellness, and localized resource awareness. By bringing these elements together, Preparing to Thrive provided participants with meaningful tools to prepare for emergencies and demonstrated a promising approach for future county, community, or grant-funded preparedness initiatives.