CIICA Conversation: Are You Prepared for An Emergency?

26 June 2026

Facilitators: Led by Aylin Özgü, parent, CID Türkiye, Filiz Aslan, Audiologist, Türkiye, Nic Russell, advocate, Pindrop, New Zealand and Sari V Hirvonen-Skarbo, CI user, Finland.

Welcome & Session Framing

- **Sue Archbold (Coordinator, CIICA):** Opened the session by noting a great deal of interest in this CIICA Conversation and welcomed our facilitators. She established the house rules (live English and Turkish captioning available, microphones off, use of Hand Raise reactions) and noted that the session would not be recorded, but an anonymized summary would be distributed.
- **The Inspiration for the Meeting:** Sue shared a story about her 87-year-old CI user neighbour, who was rushed to the hospital in an emergency. Hospital staff did not know how to handle her cochlear implant (CI) processor, forgot to charge it, and did not put it on her in the mornings. This resulted in total communication failure and severe frustration, sparking the realization that individuals need to be prepared before crisis strikes. Having met with Aylin and Filiz and their planning after the Turkish earthquake, with Sari who had been having challenges with government communications in a crisis, and Nic who had been supporting emergency preparation in New Zealand after the impact of floods, we all realised that there was a shared interest in preparing for disasters and that those with hearing loss could be in danger with lack of communication in such situations.

2. National Disaster Case Studies & Systemic Frameworks

Turkey: The Reality of Natural Disasters: see slides below and on website

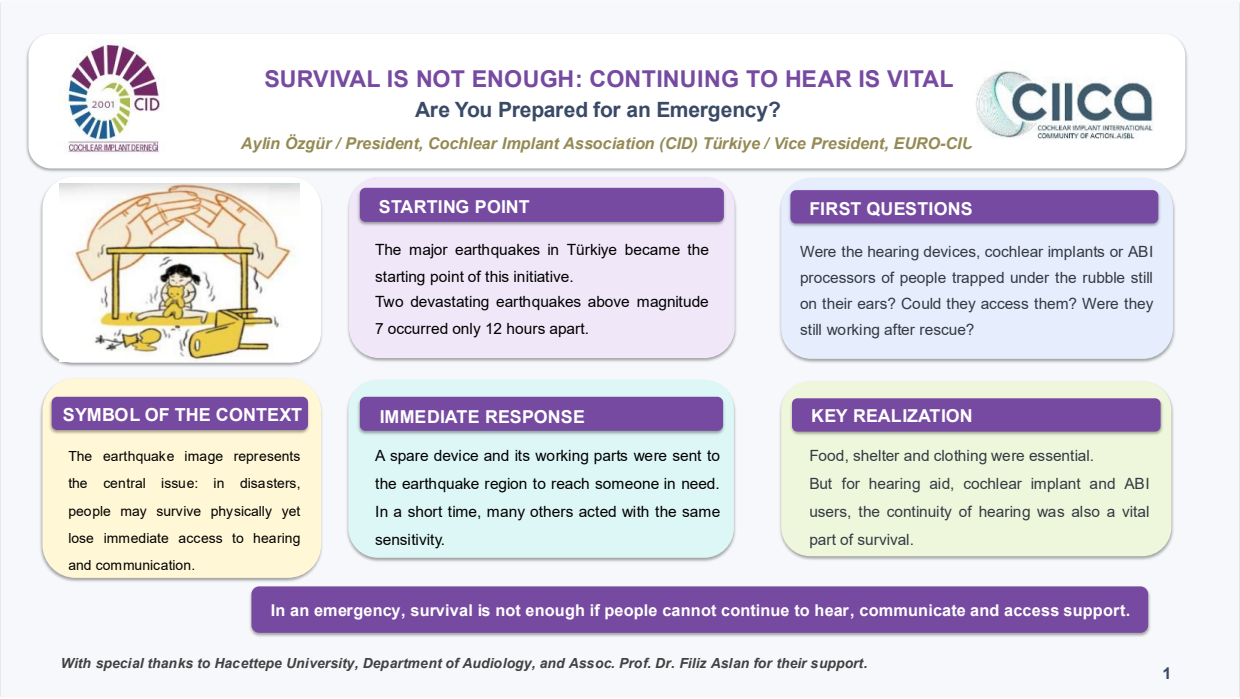
- **Aylin Ozgur & Filiz Aslan:** Shared their lived experiences following the massive 2023 Turkish earthquake. They emphasized that in a crisis, **"survival is not enough; we need to communicate."** See Aylin's slides as summary below.
- *In Türkiye, on the same day, only 12 hours apart, two devastating earthquakes of magnitude 7 and above occurred. During that period, we all focused on basic needs such as food, shelter, clothing, medicine and safety. Of course, all of these were vital. However, as the mother of a child using an ABI, I also thought about another question at that moment: Did the people rescued from under the rubble still have their hearing aids, cochlear implants or ABI processors with them? Were they able to reach their devices? After being rescued, could they still hear?*

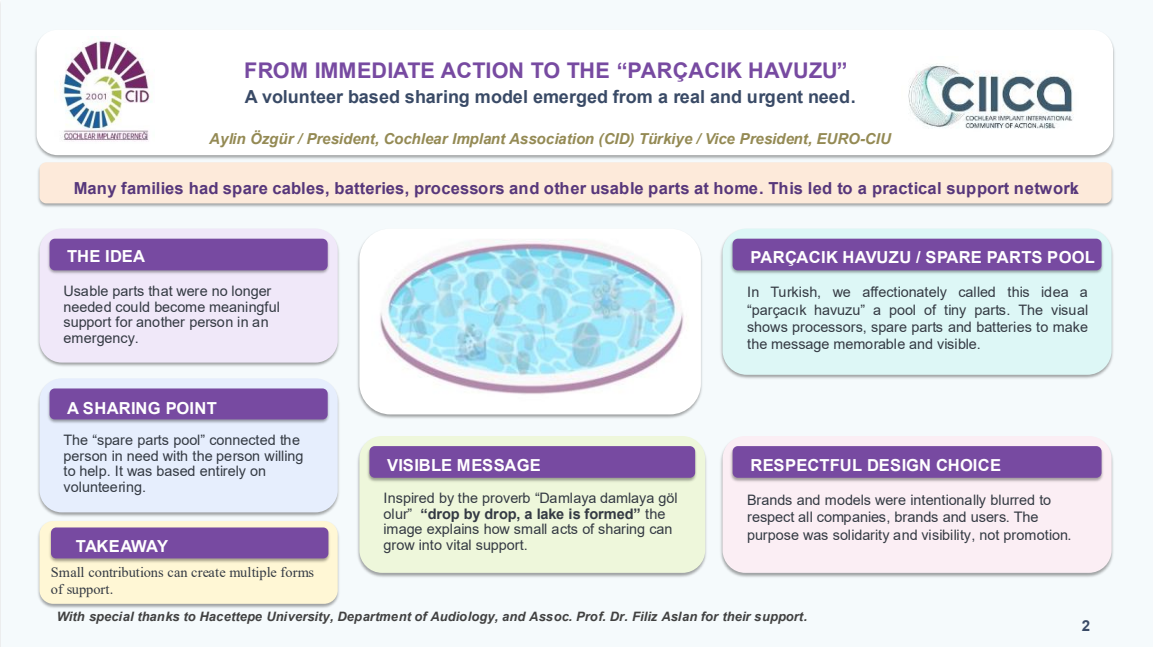
- ***Because during a disaster, simply surviving physically is not enough. People also need to hear, to communicate, to access information, to stay connected with their families and to receive support.***
- **The Initiative:** Aylin and FIliz detailed how their parent group (*CID Turkiye*) and volunteer networks stepped in to rapidly distribute spare parts and bypass traditional institutional bureaucracy to keep users "on the air."
- *Following the earthquake, many users lost their speech processors under debris or ran out of power, causing severe isolation. With this in mind, immediately after the earthquake I sent our own spare device, together with working spare parts, to the earthquake region. Our aim was to ensure that it reached someone in need.*
- *From this, the idea of the "spare parts pool" was born. In homes, there were spare cables, batteries, processors or small parts that were no longer being used but were still in working condition. We thought that when these small parts reached the right person, they could turn into life-saving support*.
- **Melis (**Türkiye**):** Clarified how their volunteer spare-parts pool works. When users upgrade their devices, they donate their old, functional processors and parts to the organization. In an emergency, a user can bypass hospital and banking red tape by calling the organization directly to receive a matching temporary spare part.
- **Aylin** *Over time, this initiative led us to a broader question: What should we do for people with hearing loss and implant users in emergency situations? Earthquakes, floods, fires, tsunamis or the threat of war can arise in different forms all over the world. Therefore, we need to rethink the contents of emergency bags. For us, emergency preparedness is not limited to water, food, medicine and basic needs.* ***The continuity of hearing must also be a fundamental part of this preparedness.*** *Spare devices, spare parts, charging solutions, personal emergency information and accessible communication methods should be included in emergency plans.*
- *In this process, digital visibility also emerged as an important issue. It is very important that emergency teams can understand that a person uses a hearing implant without relying on that person to explain themselves at that moment. Of course, protecting personal data is a fundamental priority; however, safe and awareness-raising solutions should be developed.*
- *Another important issue is the protection of audiological records. Evaluations, test results and device programming records are often stored on computers at universities. In the earthquake, we lost some of our academics, and the computers containing these records remained under the rubble. This situation delayed the reprogramming of some users' devices.*
- **Melis :** Also highlighted a highly effective feature within Turkey's electronic medical system (*e-Nabız*). It contains an **"Emergency Note"** section visible to paramedics and medical staff where users can log critical instructions, such as: *"I am deaf and use a cochlear implant. I cannot undergo standard MRIs. "*

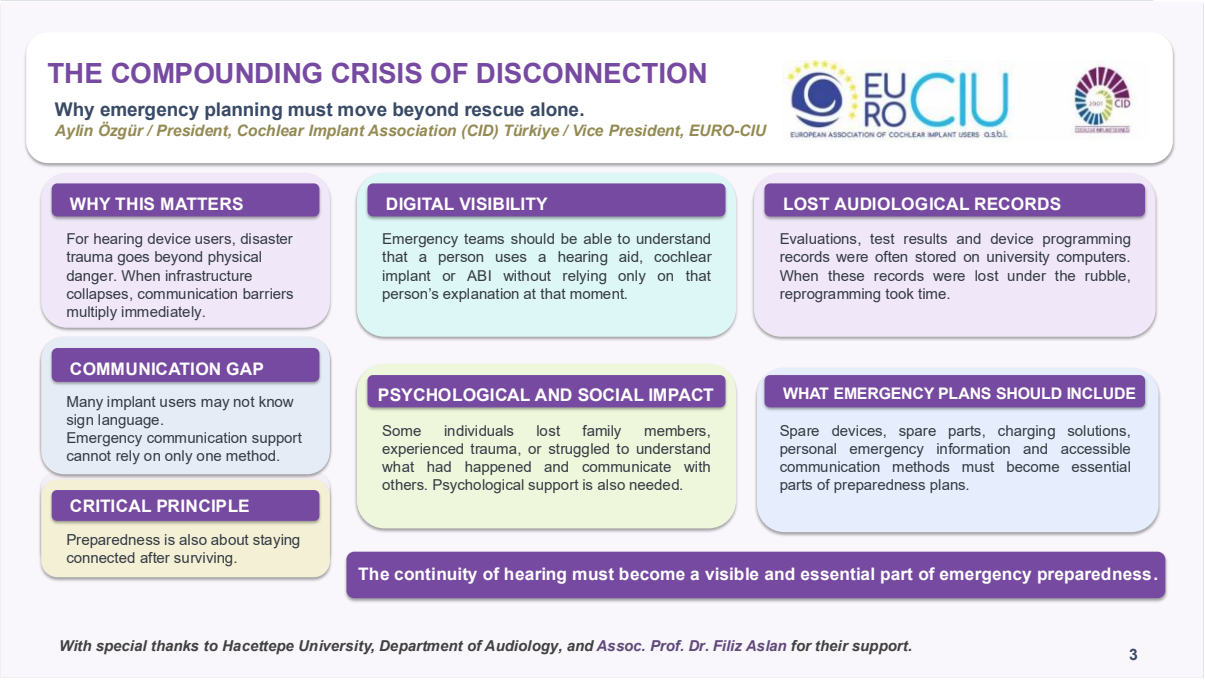
Filiz noted: *This initiative showed us the following: being prepared for emergencies is necessary not only for surviving, but also for staying connected after survival.*

The needs of implant users must be visible in emergency plans. The continuity of hearing should become a fundamental part of emergency preparedness.

See the slides from CID below:







New Zealand: The 72-Hour Preparedness Blueprint

- **Nic Russell (Pindrop Foundation, NZ):** Explained that New Zealand's unique geography makes communities highly susceptible to being cut off by floods and earthquakes. Civil Defence explicitly advises all citizens to be self-sufficient for **at least 72 hours** (and sometimes up to a week in remote areas).
- *With your grab bag here you need your food, your water, your emergency supply to last 72 hours, we put together what you need in your grab bag as a cochlear implant user, what you would need if you were isolated for 72 hours the most important thing for cochlear implant and hearing aid users is having your batteries so you can charge your implant* **.**
- **The CI Grab Bag Blueprint:** Nic outlined what a CI user should keep in a waterproof "grab bag" placed accessibly by the bed. This had been developed by CI users in discussion:

- Spare batteries (both rechargeable and disposable if possible) and a dedicated power bank.
- Hard copies of individual **map/program details** so any local CI clinic can restore settings if a processor is lost or wiped.
- A notepad and pen to communicate if devices fail entirely.
- A spare backup coil and cable, plus any older, upgraded processors to use as emergency backups.

- **The Buddy System:** Giving a trusted neighbour a spare house key and alerting them that when your processors are off, you cannot hear alarms or emergency announcements.

- **Tech Insight:** Nic noted that newer smartphone models featuring **satellite texting** are vital lifelines for the deaf community during natural disasters because regional cell towers frequently collapse or become overloaded with text traffic.

Finland & The European Union: Geopolitical Alerts & Policy

- **Sari Hirvonen (Healthcare Worker & EDF Board Member, Finland):** Shared an incident from along Finland's 1,000-kilometer border with Russia. Due to regional military drone activity, Finnish authorities issued an emergency directive in the middle of the night telling everyone to stay indoors.
- **The Failure:** Because of a technical glitch in the automated 112 emergency app system, Sari and many others never received the alert, only finding out hours later via social media. This underscored the extreme danger of relying on a single communication pipeline during a national security event.
- *I was on social media, there had been information: Stay inside, be careful, take care - you must stay inside. But this emergency information was over 3 or 4 hours in the middle of the night and early in the morning and we were really surprised, because I did not get information on 112, information coming from the Government. There was technical mistake, and now it has been functioning very well. It's a question about how you get the information that you have to stay for example inside, or you go outside, or whatever is happening.*

  So also they talk about you must have some preparation, for 72 hours to maybe must stay home at that time, to have enough water and food and everything.
- **The Policy Push:** Sari presented an advance look at an upcoming comprehensive policy package from the **European Disability Forum (EDF)** titled *"Including Persons with Disabilities in Emergencies Preparedness and Response."* This package is designed to push the European Parliament to audit and enforce inclusive disaster plans across all EU member states.

3. The Great "Grab Bag" Debate: Practical Barriers

- **Robert (CI User, Finland):** Raised a crucial, practical objection regarding the "Grab Bag" blueprint, specifically targeting **power and battery logistics**:
  - In countries like Finland, national healthcare provides exactly two rechargeable batteries and one charger, which must remain in constant, alternating everyday use.
  - Because disposable batteries are prohibitively expensive and not funded, users cannot afford to buy packs just to let them sit statically in an emergency bag.
  - **The Travel Suitcase Analogy:** Robert pointed out that packing for travel is a stressful chore because the CI charger and batteries are always the absolute *last* things to enter a suitcase, as they must be 100% charged at the exact moment of departure.
  - **The Proposed Solution:** Instead of a separate, static emergency bag, Robert advocated for a universal **"CI First Aid Kit"** box. This box would hold a user's spare coil, cables, and active battery rotation components in a single place. If a component is used up in daily life, you replace it immediately. In an emergency, you grab the entire box knowing exactly what is inside.

- **Nic Russell & Filiz Aslan:** Agreed with Robert, validating that **grab bags must be highly personalized** to match the individual user's lifestyle and the specific funding structure of their country's healthcare system.

4. Addressing Institutional Gaps in Hospital Care

- **Robert (Finland):** Highlighted the profound danger a CI user faces if they enter a hospital in a coma or an altered state. To hospital staff, a patient without their processor looks "a little bit deaf," when in reality, they are completely deaf and isolated from their surroundings. Robert noted that EURO-CIU previously created 2-sided A4 informational flyers for staff detailing different CI brands, models, and left/right ear orientations, but admitted getting busy nursing staff to read them is highly complex. Info sheets from EURO-CIU https://eurociu.eu/sdm_downloads/euro-ciu-emergency-information-for-cochlear-n7-users/
- **Nic Russell (New Zealand):** Corroborated Robert's point, stating that extreme staff turnover in busy hospitals means a card or flyer often gets lost or ignored. In their experience, the responsibility of ensuring a patient's processor is placed correctly and kept charged almost always falls onto family and friends rather than hospital employees.
- **Sue Archbold:** Concluded that while complex, using a simple bedside card or a standard medical alert bracelet (MedicAlert) to notify paramedics and nursing staff is a massive improvement over the current status quo, where no system exists at all.

5. Closing Reflections

- **Filiz Aslan (Turkey):** Issued a call to action, noting that most people only think about emergency preparedness *after* they survive a crisis. She argued that the next major step must move past individual grab bags and focus squarely on **governmental and institutional accountability**, exploring what the EU and national emergency ministries must do to mandate accessible communication infrastructures. For example:
- *In Turkey after the earthquake; **do you hear my voice?** It's a slogan for rescuing people under the rubble but it's not working for people with hearing loss. So we want to raise awareness for the Government level or societal level, you can't use this phrase for everybody. You need to change it.*
  We started to do our meetings and in short notice we will talk with higher authorities but now they are aware they said oh we don't think about it. We did not know it. You are right we need to use the alarm with lights or maybe using text that was talked about earlier with written messages maybe standard.
- *This initiative showed us the following: being prepared for emergencies is necessary not only for surviving, but also for staying connected after survival.*
- *The needs of implant users must be visible in emergency plans. The continuity of hearing should become a fundamental part of emergency preparedness.*

This document emphasizes the importance of maintaining hearing support for individuals with hearing loss during emergencies to ensure safety, communication, and psychological well-being.

Summary

Sue Archbold: Summarized the three tiers of action (Individual, Institutional, and Societal) and closed the session, promising to circulate an anonymized, practical resource guide to all attendees.

- Earthquakes in Türkiye highlighted the need for hearing device continuity in crises.
- A “spare parts pool” was created to share usable device components, supporting those in need.
- Preparedness should include spare devices, parts, charging solutions, and emergency communication methods.
- Digital systems can help emergency teams identify hearing device users without compromising personal data.
- Loss of audiological records complicates device reprogramming after disasters.
- Continuity of hearing is vital for accessing safety, information, healthcare, and emotional support.
- Misconceptions exist, such as assuming all hearing loss individuals know sign language; communication methods must be diverse.
- Emergency plans must incorporate hearing support to ensure ongoing connection and safety.

The information shared in the Conversation can be found at CIICA CONVERSATION: ARE YOU PREPARED FOR AN EMERGENCY? – CIICA

Sue Archbold, June 2026