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**pro hac vice application forthcoming*

UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

PORTLAND DIVISION

**JONATHAN SIMEONE, PHILLIP J.
WOLFE, AUDRA PEARSON,
DISABILITY RIGHTS OREGON, and
BRIDGES OREGON,**

Plaintiffs,

v.

MULTNOMAH COUNTY, a political
subdivision of the State of Oregon, **CITY OF
PORTLAND**, a political subdivision of the
State of Oregon, **KEITH WILSON**, in his
official capacity as Mayor of Portland, and
JESSICA VEGA PETERSON, in her
official capacity as Chair of Multnomah
County,

Defendants.

Civil Action No. _____

**COMPLAINT FOR DECLARATORY
AND INJUNCTIVE RELIEF AND
DAMAGES**

Civil Rights Action (42 U.S.C. § 12132; 29
U.S.C. § 794; Or. Rev. Stat. § 659A.142(4))

INTRODUCTION

1. The residents of the City of Portland and Multnomah County have faced, and will face, life-threatening disasters. Severe heat, wildfire smoke, winter storms, flooding, and earthquakes pose recurring risks that power will be lost, homes swept away, access to food and water compromised, and mass evacuation ordered. When disasters occur, immediate action is necessary and people rely on often life-saving evacuation plans and transportation supports, water and food resource centers, alternative shelter, and effective two-way

communication systems. Because of the lack of planning and inclusion, people with disabilities in Portland and Multnomah County encounter barriers to every one of these critical components of emergency response. Without an accessible emergency system, those barriers become life-threatening.

2. Multnomah County's 2021 heat wave underscored those risks, as the County's failures disproportionately harmed disabled Portlanders. Many could not reach cooling spaces, obtain accessible transportation to safety, or access timely, usable information. 69 people died in Multnomah County from heat-related causes during the heat wave.¹ People with disabilities were overrepresented among those who died. Most were older. A large number died in multi-level, multi-family housing, often on upper floors. Many died in trailers and RVs and several were homeless.²

3. Public oversight bodies and private audits have identified those failures and concluded that they were neither isolated nor accidental. Rather, they reflect long-standing structural gaps in the City's emergency management system.

4. In December 2021, the Portland City Auditor concluded that the City was "not prepared to meet the needs of people with disabilities during the COVID-19 pandemic much

¹ Multnomah County, *Heat Impacts from Excessive Heat Events in Multnomah County 2021*, 2 (June 2022), https://multco.us/file/final_report%3A_health_impacts_from_excessive_heat_events_in_multnomah_county_oregon_%2C_2021/download#:~:text=There%20were%2072%20heat%20deaths,typical%20year%20there%20are%20zero.&text=Deaths%20from%20all%20causes%20were,the%20week%20of%20June%2027.

² *Id.* at 2, 8, 10, 22.

less a more physically destructive emergency like an earthquake or wildfire.”³ The Auditor’s report continued,

“The Portland Bureau of Emergency Management does not have the information, expertise, or capacity needed to anticipate and plan for the emergency needs of people with disabilities. The City’s emergency plans are outdated, have gaps related to disability issues, and do not include reliable practices for complying with the Americans with Disabilities Act. [The Portland Bureau of] Emergency Management provides limited emergency preparedness outreach to people with disabilities. The City’s inability to successfully manage its emergency planning responsibilities across bureaus contributes to the lack of preparedness.”⁴

The report highlighted emergency communications, evacuation, and emergency shelters as core functions of an emergency system on which public entities must anticipate and address disability access needs.⁵ The Auditor found that the City’s existing plans fell short in all of these identified areas and made several recommendations “[t]o ensure that the City’s emergency management programs and services comply with the Americans with Disabilities Act,” including developing a plan with performance measures and milestones for achieving compliance.⁶

³ Portland City Auditor, *Emergency Management: Pandemic Highlights City’s Long-Standing Neglect of People with Disabilities*, 1 (Dec. 2021), <https://www.portland.gov/sites/default/files/2021/emergency-management-audit-report.pdf>.

⁴ *Id.*

⁵ *Id.* at 4–9.

⁶ *Id.* at 4, 10–13.

5. Defendants City of Portland (the “City”) and Multnomah County (the “County”) are collectively responsible for emergency response in Portland. In spite of the criticism and admonitions of the City Auditor, and others, they continue to operate an emergency system that denies disabled Oregonians an equal opportunity to survive in an emergency. Defendants deny disabled Oregonians the right to participate in and benefit from the core components of that system including emergency alerts and warnings, evacuation, shelters, mass care, public education, and planning. In each of these areas, Defendants treat accessibility as contingent or ad hoc rather than obligatory.

6. Defendants’ failures span every phase of an emergency response. From the onset of an emergency, Defendants fail to ensure that emergency alerts and warnings are reliably disseminated in accessible formats. Defendants provide no clear and effective method for individuals with disabilities to request evacuation assistance. Defendants fail to identify shelters or Disaster Resource Centers⁷ that are accessible, do not provide a mechanism for individuals with disabilities to access life-sustaining supplies if their disability requires them to shelter in place, and lack an evacuation strategy that provides transportation supports that will allow them to safely get out.

7. Title II of the Americans with Disabilities Act (“ADA”) and Section 504 of the Rehabilitation Act of 1973 (“Section 504”) require public entities to ensure that disabled people have meaningful access to government programs and services; to provide effective communication; and to make reasonable modifications necessary to avoid discrimination.

⁷ A Disaster Resource Center is a physical, community-based facility established during or after an emergency to provide immediate relief and long-term recovery support.

Oregon law also prohibits disability discrimination in any service to the public that is provided by a public body. Collectively, these statutes require Defendants to provide disabled people meaningful access to their emergency system. But Defendants have failed to do so.

8. Despite the many warnings regarding their failure to protect disabled Oregonians, the City and County repeatedly refuse to remedy the discrimination and mitigate the potential deadly consequences.

9. Plaintiffs bring this action to enforce these fundamental protections and to secure injunctive relief requiring Defendants to design and implement an emergency system that provides meaningful access so that individuals with disabilities have an equal opportunity to survive the region's next disaster and are not left to die.

JURISDICTION AND VENUE

10. This Court has jurisdiction under 28 U.S.C. § 1331 because this case arises under Title II of the Americans with Disabilities Act ("ADA"), 42 U.S.C. §§ 12101–12213, and Section 504 of the Rehabilitation Act ("Section 504"), 29 U.S.C. § 794. This Court also has jurisdiction over Plaintiffs' state-law claims pursuant to 28 U.S.C. § 1367.

11. Venue is proper in this Court under 28 U.S.C. § 1391(b)(1) and (b)(2) because a substantial part of the events or omissions giving rise to this Complaint occurred in this District. Defendants reside in this District.

12. This Court is authorized to issue declaratory and injunctive relief under 28 U.S.C. §§ 2201–02, Rules 57 and 65 of the Federal Rules of Civil Procedure, and by the inherent general equitable powers of this Court.

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PARTIES

Plaintiff Jonathan Simeone

13. Plaintiff Jonathan Simeone owns a home in Portland and is blind. He is a qualified individual with a disability under the ADA and Section 504. As a disabled resident of Oregon, Mr. Simeone is a constituent of Plaintiff Disability Rights Oregon.

14. Mr. Simeone relies on accessible communication and emergency information to make time-sensitive decisions during disasters and to request assistance. Defendants' failure to address the outlined issues in the emergency system place him at ongoing risk of being unable to receive, understand, and act on emergency alerts and public information on equal terms with nondisabled people.

Plaintiff Philip J. Wolfe

15. Plaintiff Philip J. Wolfe⁸ is a resident of Portland and is Deaf. Philip's primary language is American Sign Language ("ASL") and Philip is a qualified individual with a disability under the ADA and Section 504. As a disabled resident of Oregon, Philip is a constituent of Plaintiffs Bridges Oregon and Disability Rights Oregon.

16. Philip relies on accessible communication and emergency notifications to make time-sensitive decisions during disasters and to request assistance. Defendants' failure to address the outlined issues in the emergency system places Philip at ongoing risk of being unable to receive, understand, and act on critical safety information on equal terms with nondisabled people.

⁸ Philip J. Wolfe's gender identity is non-binary and Philip does not use pronouns. Philip will be referred to as Philip.

Plaintiff Audra Pearson

17. Plaintiff Audra Pearson resides in Portland and has cerebral palsy, a developmental disability that impairs her ability to walk and process information. She is a qualified individual with a disability under the ADA and Section 504. As a disabled resident of Oregon, Ms. Pearson is a constituent of Plaintiff Disability Rights Oregon.

18. Ms. Pearson relies on accessible transportation, support with daily activities of living, and accessible communication. Defendants' failure to address the outlined issues in the emergency system places her at ongoing risk of being unable to evacuate and access shelters during emergencies and to receive, understand, and act on critical safety information on equal terms with nondisabled people.

Plaintiff Disability Rights Oregon

19. Plaintiff Disability Rights Oregon ("DRO") is a private, non-profit organization dedicated to protecting the rights of Oregonians with disabilities.

20. DRO envisions a world in which Oregonians with disabilities are free from discrimination and carry the same dignity and value as people without disabilities. DRO seeks to have a government that makes accessibility a forethought and not an afterthought by designing its services in collaboration with and around the needs of the disability community. This partnership would breed continuous collaboration and improvements to public services that allow people with disabilities to participate in all aspects of their communities.

21. DRO is designated as Oregon's authorized protection and advocacy organization ("P&A"). Federal law requires DRO to fulfill the functions Congress identified in establishing the nationwide P&A system. These functions are laid out in statutes including the Developmental Disabilities Assistance and Bill of Rights Act, ("DD Act"), 42 U.S.C. §§

15001–15115, the Protection and Advocacy for Individuals with Mental Illness Act (“PAIMI Act”), 42 U.S.C. §§ 10801–10851, and the Protection and Advocacy for Individual Rights (“PAIR”) Program, 29 U.S.C. § 794e. Among other duties, DRO has an affirmative duty to protect and advocate for all individuals with disabilities, including to investigate and prevent incidents of abuse and neglect of Oregonians with developmental and mental health disabilities. 29 U.S.C. § 794e(f)(3); 42 U.S.C. §§ 15043(a)(2)(B), 10805(a)(1)(A).

22. All Oregonians with disabilities constitute DRO constituents for purposes of the DD Act, PAIMI Act, and PAIR Program. 42 U.S.C. §§ 15043(a)(2)(A), 10805(a)(1)(B); 29 U.S.C. § 794e. DRO’s constituents live throughout Oregon, including within the City of Portland and Multnomah County. DRO brings this action to protect and advocate for the rights and interests of itself and its constituents with disabilities, and to prevent the abuse and neglect of people with mental health and developmental disabilities during disasters.

23. Every member of DRO’s elected governing board is either an Oregonian with disabilities or a family member of a person with disabilities. The 10-member governing board is intimately familiar with the needs of people with developmental disabilities and mental health disabilities. As required by federal law, at least half of the board members are persons with a developmental disability or their immediate family members (siblings or parents). 42 U.S.C. § 15044(a)(1). Additionally, two board members are persons with mental health disabilities or their family members. The governing board also includes people with mobility disabilities, people with traumatic brain injuries and their family members, and family members of people with other disabilities. Five board members reside in Multnomah County, four of whom reside in Portland. This organizational structure ensures that DRO’s activities directly reflect the interests of its constituents. The governing board reviews and

approves DRO's annual issue priorities each year after evaluating feedback from stakeholders, constituents, and community members, including people with developmental and mental health disabilities. DRO also maintains an advisory council made up of individuals with mental health disabilities, family members, and service providers to provide feedback regarding DRO's services. 42 C.F.R. § 51.23(b)(1), (2).

24. DRO distributes an annual survey to solicit input regarding its services and priorities from Oregonians with disabilities and their family members and service providers. DRO partners with psychiatric hospitals to distribute these surveys directly to patients, ensuring that people with mental health disabilities can provide input. In 2025, over 30% of survey respondents lived in Multnomah County.

25. Pursuant to its federal mandates, DRO provides direct services and advocacy to its constituents, who encompass the more than 600,000 Oregonians with disabilities. DRO's advocacy includes expanding opportunities for independent living, securing access to healthcare, and improving education and access to services for people with disabilities. A core part of DRO's federal mandates requires the organization to investigate and prevent the abuse and neglect of people with mental health and developmental disabilities through legal, administrative, and other remedies as required by federal law. 42 U.S.C. §§ 15043(a)(2)(B), 10805(a)(1)(A). To fulfill this duty, DRO works to prevent unnecessary deaths of people with disabilities during emergencies, including by educating the community about available resources and how to get connected to them. But, when public entities fail to provide the resources disabled people need in emergencies, they undermine DRO's ability to fulfil this core objective by preventing it from connecting people with disabilities to the resources they need in emergencies, thus elevating the risk of injury and death.

Plaintiff Bridges Oregon

26. Plaintiff Bridges Oregon (“Bridges”) is a private, non-profit organization created by Deaf⁹ individuals and dedicated to serving Oregonians who are Deaf, DeafBlind, or Hard of Hearing.

27. Bridges Oregon envisions a future where Deaf Oregonians are fully included in all aspects of community life, with equitable access to communication, advocacy, education, employment, housing, safety, and opportunity.

28. All Deaf Oregonians are Bridges’ constituents. Bridges’ governance structure and community engagement ensure that the organization is accountable to its constituents. Bridges’ policy requires that the majority of its board members identify as Deaf. Currently, eight of the ten board members are Deaf and one person is a child of a Deaf person. Four board members reside in Portland. The governing board approves Bridges’ strategic planning, priorities, and mission statement. Recently, Bridges initiated its first strategic planning process. The organization shared its draft strategic planning and priorities documents well in advance of a community listening session at which a cross-section of Deaf Oregonians provided input and feedback that the governing board incorporated. Bridges also holds multiple community-facing events every year at which governing board members and staff solicit and receive feedback and input into Bridges’ services.

⁹ “Deaf” or “deaf” are used inclusively in this Complaint, recognizing and honoring those who identify as deaf, DeafBlind, deafdisabled, hard of hearing, late-deafened, or with other hearing differences.

29. Bridges provides services to over 160,000 Oregonians who are Deaf, DeafBlind, Hard of Hearing, or Late-Deafened. Bridges developed its services based on a state-funded community-based assessment that evaluated the structural barriers faced by these individuals. It has modified and expanded these services based on feedback and input from its constituents.

30. Today, Bridges' work centers on removing systemic barriers, promoting language access, addressing information deprivation, and ensuring culturally responsive services for Deaf Oregonians. This includes efforts to expand opportunities for employment and independent living, expanding access to healthcare, and improving education for people with disabilities. As part of its independent living services, Bridges helps individuals strengthen essential life skills such as transportation, planning, communication, and navigating community resources. Bridges also provides Victims of Crime Act ("VOCA") advocacy services, including survivor-centered, culturally and linguistically accessible crisis advocacy for deaf individuals who have experienced crimes such as domestic violence, sexual assault, stalking, and other forms of harms. Bridges also provides professional interpreting and captioning services to ensure Deaf, Deafblind, Hard of Hearing, and hearing individuals can fully participate in meetings, trainings, events, healthcare appointments, employment settings, and public services.

31. Bridges has previously tried to address the failure of public entities—including Multnomah County—to make emergency preparedness accessible. In 2025, it submitted a grant proposal to the Oregon Health Authority that would have funded the launch of a culturally and linguistically responsive Emergency Preparedness and Response initiative specifically focused on ensuring that the Deaf community had equitable access to emergency

preparedness and response systems. The proposed project aimed to eliminate communication barriers, improve emergency-related information literacy, and establish sustainable infrastructure to protect the Deaf community before, during, and after emergencies. The Oregon Health Authority rejected this grant proposal, leaving Bridges unable to perform this critical work. As a result, these barriers remain entirely unaddressed within Multnomah County, continuing to leave the Deaf community exposed during emergencies.

Defendant City of Portland

32. Defendant City of Portland (the “City”) is a subdivision of Oregon and is in Multnomah County. The City is a public entity subject to Title II of the ADA and is a recipient of federal financial assistance which therefore must comply with Section 504.¹⁰ The City is jointly responsible with Defendant Multnomah County for operating an emergency system that includes emergency alerts and warnings, evacuation, shelters, mass care, emergency preparedness outreach and education, and planning, including through Portland Bureau of Emergency Management and other City bureaus and partners.

Defendant Multnomah County

33. Defendant Multnomah County (the “County”) is a subdivision of Oregon. The County is a public entity subject to Title II of the ADA and is a recipient of federal financial assistance which therefore must comply with Section 504.¹¹ The County is jointly

¹⁰ City of Portland, *FY 2025–26 Adopted Budget*, Portland.gov, <https://www.portland.gov/budget/2025-2026-budget/development/adopted#toc-overview-of-city-revenues> (last visited Jun. 11, 2026).

¹¹ Department of County Management & Eric Arellano, *Annual Comprehensive Financial Report*, 170–71 (Jun. 30, 2025), https://multco.us/file/acfr_2025.pdf/download.

responsible with the City for operating an emergency system that includes emergency alerts and warnings, evacuation, shelters, mass care, emergency preparedness outreach and education, and planning. The County coordinates emergency operations, transportation and human services support functions, mass care and sheltering roles, and emergency notification systems within the County.

Defendant Portland Mayor Keith Wilson

34. Defendant Keith Wilson is the Mayor of the City of Portland. Plaintiffs sue Defendant Wilson in his official capacity. As the Mayor, Defendant Wilson is responsible for directing City emergency operations and ensuring that City programs and services, including emergency management, comply with federal and state disability rights laws.

Defendant Multnomah County Chair Jessica Vega Pederson

35. Defendant Jessica Vega Pederson is the Chair of the Multnomah County Board of Commissioners. Plaintiffs sue Defendant Pederson in her official capacity. As County Chair, Defendant Vega Pederson oversees County emergency management functions and the County's compliance with federal and state disability rights laws.

PRE-LITIGATION ATTEMPTS AT RESOLUTION

36. DRO has the authority to advocate on behalf of people with disabilities under the PAIMI Act. The PAIMI statute requires DRO to exhaust all appropriate administrative remedies and attempt to resolve conflicts using non-adversarial methods when possible. 42 U.S.C. § 10807(a). There are no administrative remedies available that would resolve the issues addressed in this complaint.

37. DRO began investigating Defendants' emergency system in 2019. The investigation involved multiple public records requests alongside numerous meetings with people with lived experience and other community stakeholders.

38. Based on these investigative findings, DRO and its partners concluded that Defendants' emergency system violated the rights of people with disabilities by operating contrary to federal and state disability laws.

39. DRO attempted to resolve this matter in a non-adversarial manner. On February 9, 2026, DRO's counsel mailed a letter to both the City and County summarizing the findings of DRO's investigation and suggesting ways to resolve the matter without litigation.

40. Counsel for the parties met virtually on March 30, 2026, to discuss the issues alleged in this Complaint. After this meeting, counsel for the parties exchanged email correspondence and telephone calls to resolve the parties' disagreements. Based on the responses from the City and the County, counsel for Plaintiffs concluded that a non-adversarial approach would not result in an appropriate resolution, making litigation necessary to achieve compliance with federal law. On June 6, 2026, Plaintiffs informed Defendants that they would file a lawsuit. Defendants did not respond.

41. DRO fulfilled its responsibilities to attempt a non-adversarial resolution. DRO targeted its letters and meetings towards resolution but determined that successful resolution could not occur outside litigation. Further, DRO concluded that its constituents faced

imminent, serious harm without timely litigation, as the Governor of Oregon has already declared a state of emergency for the current fire season.¹²

LEGAL FRAMEWORK

42. Title II of the ADA prohibits public entities from excluding individuals with disabilities from participation in or denying them the benefits of their services, programs, or activities or otherwise subjecting disabled people to discrimination. 42 U.S.C. § 12132. Public entities' emergency systems—including emergency alerts and warnings, evacuation services, sheltering, mass care services, emergency planning, and emergency preparedness outreach and education—are services, programs, or activities within the meaning of Title II. Section 504 applies the same protection to federal funding recipients. 29 U.S.C § 794.

43. The protections of Title II and Section 504 extend beyond intentional discrimination to prohibit any facially neutral policy, practice, or method of administration that denies people with disabilities “meaningful access” to the covered entity’s services, programs, or activities or otherwise discriminates against disabled people. Covered entities have an affirmative duty to make reasonable modifications to their policies, practices, and procedures, as well as to provide auxiliary aids and services, to meet their meaningful access duty.

44. Title II also requires public entities to take appropriate steps to ensure that communications with people with disabilities are as effective as communications with others,

¹² Governor’s Office, *Governor Kotek Declares State of Emergency Due to Imminent Threat of Wildfire*, Governor’s Office (June 16, 2026), <https://apps.oregon.gov/oregon-newsroom/OR/GOV/Posts/Post/governor-kotek-declares-state-of-emergency-due-to-imminent-threat-of-wildfire-2>.

including through the provision of appropriate auxiliary aids and services. 28 C.F.R. § 35.160. In the context of emergency systems, effective communication obligations apply to emergency alerts and warnings, evacuation instructions, shelter and resource information, and recovery services.

45. Oregon law similarly prohibits disability discrimination in the services of places of public accommodations, which includes “[a]ny service to the public that is provided by a public body.” Or. Rev. Stat. § 659A.142(4); 659A.400(1)(b) (2025). These state protections are intended to be construed consistently with Title II of the ADA. Or. Rev. Stat. § 659A.139(1) (2025).

STATEMENT OF FACTS

I. People with Disabilities Face Predictable Barriers in Emergencies that Can Be Ameliorated with Advance Planning

46. Natural and human-made disasters such as wildfires, earthquakes, floods, and extreme heat present escalating threats that require swift government intervention to prevent injury and death. Providing all of the services necessary to keep people safe during these emergencies—including emergency alerts and warnings, evacuation services, shelters, and mass care—requires careful planning, coordination, and training. Ill-conceived and ad hoc responses invoke panic, cause delay, and lead to unnecessary fatalities. In other words, planning saves lives.

47. These same principles apply with greater force for disabled people. In emergencies, disabled residents face additional, predictable barriers to accessing life-saving services. These barriers have solutions, including accessible, redundant communication modalities; evacuation assistance; accessible transportation; accessible shelter facilities;

electricity for medical devices; refrigeration for medication; the ability to bring mobility devices, service animals, and medical equipment to shelters; and assistance navigating service systems under stress.

48. Emergency systems that assume independent mobility, fluent use of inaccessible digital tools, and the ability to stand in lines, read maps, hear loudspeaker announcements, or physically access congregate sites will exclude people with disabilities. Disability access cannot be an afterthought. During emergencies, delays in accessible communications, evacuation assistance, shelter access, or access to medication and equipment can prove fatal.

49. In 2023, the National Council on Disability (“NCD”), an independent federal agency that makes recommendations to the President and Congress to enhance the quality of life for disabled Americans and their families, issued a report identifying fatal accessibility deficiencies in several state and local jurisdictions’ emergency systems.¹³ These deficiencies excluded disabled people from jurisdictions’ emergency alerts and warning systems, evacuation services, shelters, mass care services, and emergency planning processes.¹⁴ For example, the report flagged as problematic reliance on traditional alert systems—such as interrupting television or radio programming or using sirens, loudspeakers, and public address systems—because these systems tend to be inaccessible to Deaf, blind, low vision individuals, and people with sensory and cognitive disabilities.¹⁵ The report also highlighted

¹³ National Council on Disability, *The Impacts of Extreme Weather Events on People with Disabilities* (May 4, 2023), <https://www.ncd.gov/assets/uploads/reports/2023/ncd-extreme-weather-2023.pdf>.

¹⁴ *Id.* at 97–103.

¹⁵ *Id.* at 104.

the dangers of not having a plan to provide evacuation assistance, not training drivers and navigators to meet the evacuation needs of disabled residents, and not securing in advance accessible vehicles and other resources to evacuate all disabled people during time-critical emergencies.¹⁶ Although some jurisdictions created emergency registries through which disabled residents could inform jurisdictions of their need for evacuation assistance, these registries provided a false sense of hope because jurisdictions had no plan on how to utilize the registry list to assist disabled people in the midst of an emergency.¹⁷ Even when disabled residents managed to evacuate, medical and special needs shelters were often not fully accessible and failed to meet the needs of people with disabilities because they were designed only for individuals who are power dependent. Most, if not all, of these deficiencies stemmed from jurisdictions' failure to include disabled people in their emergency planning process.¹⁸

50. To assist state and local jurisdictions in correcting these deficiencies, the NCD and the Federal Emergency Management Agency ("FEMA") have provided extensive guidance to help state and local jurisdictions develop accessible emergency plans. These guidance documents incorporate evidence-based practices for emergency alerts and warning systems, evacuation services, shelters, mass care services, and emergency planning processes.

¹⁶ *Id.* at 106–09.

¹⁷ *Id.* at 63, 69.

¹⁸ *See id.* at 11.

51. First, the NCD and FEMA recommend that jurisdictions identify mechanisms to disseminate timely and accessible emergency public information using multiple methods to reach individuals with sensory, intellectual, and cognitive disabilities.¹⁹

52. Second, to identify the evacuation needs of disabled residents during time-critical emergencies, the NCD and FEMA discourage reliance on needs registries because of their underutilization and difficulty to update.²⁰ Instead, they recommend that jurisdictions identify disabled residents by using demographic data and information on the number of individuals with disabilities in the community, partnering with community-based organizations to understand geographic distribution patterns of disabled residents, and collaborating with utility providers to access records of customers who rely on electricity for life-sustaining medical equipment.²¹

53. Third, to meet the evacuation needs of all disabled residents, the NCD and FEMA recommend jurisdictions secure or partner with third parties to secure in advance accessible transportation resources, including paratransit service vehicles, school buses, municipal surface transit vehicles, and drivers or trained attendants that can provide needed services during an evacuation.²²

¹⁹ *Id.* at 37; Federal Emergency Management Agency, *Developing and Maintaining Emergency Operations Plans*, 124 (May 2025), https://www.fema.gov/sites/default/files/documents/fema_npd_developing-and-maintaining-emergency_052125.pdf.

²⁰ NCD, *supra* note 13 at 69–70; FEMA, *supra* note 19 at 49, 125.

²¹ NCD, *supra* note 13 at 69–70; FEMA, *supra* note 19 at 49, 125.

²² NCD, *supra* note 13 at 37; FEMA, *supra* note 19 at 49, 126.

54. Fourth, to support individuals with disabilities after evacuation, the NCD and FEMA recommend that jurisdictions designate accessible shelter locations. This includes allocating shelter space for individuals with disabilities who may need additional space for assistive devices, allowing service and emotional support animals into shelters, planning for sufficient staff, medicines, durable medical equipment, and supplies disabled people may need, and identifying agencies and methods to provide care for institutionalized populations.²³ For shelter-in-place responses, such as during a power outage, the NCD and FEMA recommend in-home assistance or sheltering options for those whose survival depends on electrically powered medical equipment.²⁴

55. And fifth, the NCD and FEMA recommend that jurisdictions develop emergency policies and protocols through planned and executed outreach, engagement, consideration, and substantive planning with the disability community.²⁵ For example, FEMA recommends that jurisdictions adopt a “Whole Community Approach” that tasks local emergency managers with “[c]oordinating integration of individuals with disabilities . . . into emergency planning and response” in pursuit of this goal.²⁶

56. Defendants have long been on notice of these recommendations and the deficiencies in their own emergency system, but have failed to make the needed corrections.

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²³ NCD, *supra* note 13 at 71; FEMA, *supra* note 19 at 88-89.

²⁴ NCD, *supra* note 13 at 37; FEMA, *supra* note 19 at 49, 125.

²⁵ NCD, *supra* note 13 at 101; FEMA, *supra* note 19 at 4-5.

²⁶ FEMA, *supra* note 19 at 4-5.

II. Multnomah County is Prone to Disasters

57. Multnomah County faces elevated risks of natural and human-made disasters that require prompt and planned government response to prevent unnecessary injury and death. FEMA warns that the County carries a “very high” risk of earthquakes, floods, winter storms, and extreme heat, estimating the resulting annual loss from these hazards to exceed \$400 million. This figure reflects estimated casualties, displacement, structural damage, and loss of function.²⁷

58. The National Interagency Fire Center similarly warns that the Pacific Northwest, which includes Multnomah County, has an above-normal “significant wildland fire potential” during July and August 2026.²⁸ This forecast is consistent with the escalating severity of Portland’s wildfire seasons over the past five years, which have brought dangerous air quality levels, destroyed homes, and displaced thousands of residents.

59. Compounding these historical trends, Oregon Governor Tina Kotek declared a statewide emergency due to the imminent threat of wildland fires remarkably early in the 2026 season, confirming that the current trajectory threatens life, safety, and property across Oregon.²⁹

²⁷ Federal Emergency Management Agency, *Step 4: Estimate Losses*, https://www.fema.gov/pdf/plan/prevent/hazus/fema433_step4.pdf (last visited July 27, 2026).

²⁸ National Interagency Fire Center, *National Significant Wildland Fire Potential Outlook: Outlook Period—June Through September 2026* (June 1, 2026), https://www.nifc.gov/nicc-files/predictive/outlooks/monthly_seasonal_outlook.pdf.

²⁹ Office of the Governor, *Executive Order 26-10* (June 16, 2026), <https://drive.google.com/file/d/16sfzhRECp25mUOQMuWlZjXG68GEXhevO/view>.

III. Defendants Have Failed to Make Their Emergency System Accessible to People with Disabilities

60. People with disabilities make up over 14 percent of Multnomah County residents³⁰ and over 10 percent of Portland residents.³¹ These individuals have mobility impairments, blindness or low vision, deafness or hearing loss, developmental disabilities, mental health disabilities, chronic illness, and other conditions that affect how they receive information, travel, communicate, and access services.

61. Despite being on notice that natural and human-made emergencies uniquely threaten these disabled populations, the City and County have abdicated their duty to make their emergency system accessible to disabled residents. Defendants' response to the June 2021 heatwaves underscored these deficiencies. During that heatwave, temperatures exceeded 108 degrees for three consecutive days and peaked at an all-time high temperature of 116 degrees. Although Defendants opened cooling centers to prevent hyperthermia, they failed to account for the needs of disabled residents, who carry greater risks of hyperthermia and related medical complications. Many disabled residents—particularly those with mobility and sensory disabilities, including wheelchair users, blind and visually impaired residents, and deaf and hard of hearing residents—could not reach cooling spaces, obtain accessible transportation to safety, or access timely, usable information. As a result, people

³⁰ Center for Research on Disability, *Custom Table: Civilians Living in the Community in Oregon, by Disability Status: 2020-2024*, <https://www.researchondisability.org/annual-disability-statistics-collection/build-your-own-statistics/build-your-own-statistics-county-level-statistics> (last visited June 10, 2026).

³¹ U.S. Census Bureau, *QuickFacts: Portland City, Oregon*, <https://www.census.gov/quickfacts/fact/table/portlandcityoregon/PST045224> (last visited June 10, 2026).

with disabilities disproportionately remained trapped in their homes. The few disabled residents who managed to reach Defendants’ cooling centers did not receive access to refrigeration for their medication. Because the heatwave caused massive power outages, disabled residents who depend on electricity to power their lifesaving medical equipment and store their medication faced greater risks of medical complications and death.

62. The June 2021 heat wave killed 69 people in Multnomah County, with disabled and older residents disproportionately represented among the fatalities.³² The victims primarily died on the upper floors of multi-level, multi-family housing, in trailers and RVs, or while experiencing homelessness.³³

63. In December 2021, Portland’s City Auditor published a report (the “Audit”) concluding that the City was not prepared to meet disabled residents’ needs in emergencies.³⁴ The report identified numerous deficiencies in the City’s emergency system that excluded, and continue to exclude, disabled residents from emergency services during emergencies. These deficiencies permeated the City’s evacuation services, shelters, emergency communications, public education, staff qualification and capacity, and decision-making and accountability structures.³⁵ The report made several recommendations “[t]o ensure that the

³² Multnomah County, *Heat Impacts from Excessive Heat Events in Multnomah County 2021*, 2 (June 2022), https://multco.us/file/final_report%3A_health_impacts_from_excessive_heat_events_in_multnomah_county_oregon_%2C_2021/download#:~:text=There%20were%2072%20heat%20deaths,typical%20year%20there%20are%20zero.&text=Deaths%20from%20all%20causes%20were,the%20week%20of%20June%2027.

³³ *Id.* at 2, 8, 10, 22.

³⁴ Portland City Auditor, *supra* note 3.

³⁵ *Id.* at 4–8.

City's emergency management programs and services comply with the Americans with Disabilities Act," including developing a plan with performance measures and milestones for achieving compliance with the ADA, coordinating across departments, and hiring or designating staff with expertise in the cross section of disability and emergency planning.³⁶

64. Although the Audit warned that failure to comply with the ADA would lead to lawsuits exactly like this one, Defendants have failed to make required reasonable modifications to their emergency system.

A. Defendants Provide Emergency Alerts, Warnings, and Public Information in Inaccessible Formats

65. The City and County jointly operate an alert system to notify Multnomah County residents of emergencies and direct them to take protective action.

66. Emergency alerts and warnings enable residents to take immediate, protective action while initiating other emergency protocols. Evacuation, sheltering, and mass care programs all rely on emergency alerts to connect residents to transportation, notify residents of shelter locations, and distribute information, benefits, assistance, and other essential resources. Delays and deficiencies in emergency alerts and warnings can sever residents from life-saving emergency services and therefore prove fatal.

67. Providing timely alerts to disabled residents requires platforms and content accessible to Deaf, blind, and low vision individuals, and people with developmental disabilities. Accessible formats include ASL translations, captions and transcripts, audio announcements, descriptive text for images, screen-reader compatibility on mobile applications and websites,

³⁶ *Id.* at 10–12.

vibration and flashing signals, plain language, compatibility with assistive devices, location-specific instructions, and redundant delivery methods. While social media helps ensure that public information, alerts, and warnings reach the widest possible audience, it should supplement rather than replace communication accessible for disabled people.

68. Defendants rely on emergency alert systems inaccessible to blind, low vision, and Deaf individuals. Defendants use a Community Emergency Notification System called Everbridge to “alert and provide emergency notification to community members in any area of Multnomah County using landline telephones, cell phones, email, and text messaging.”³⁷ However, the Everbridge application links to webpages without descriptive text and conveys critical information about the existence and subject location of emergency advisories through maps without descriptive text; this excludes low-vision and blind individuals who rely on screen-reader technology as they cannot view and interpret the advisories. Moreover, Everbridge’s email and text alerts do not provide information in ASL, which excludes Deaf individuals who rely on ASL to receive information. These alerts also lack plain language translations, which render them inaccessible to many people with developmental disabilities. Outside of the Everbridge application, Defendants frequently share emergency information and alerts through social media videos without captioning and ASL translation. As a result, low-vision, blind, and Deaf residents cannot receive critical information about the location of emergencies, evacuation protocols, and shelter locations.

³⁷ Portland Bureau of Emergency Communications Policy & Procedure, 9.021(A)-(B), Community Emergency Notification System.

69. When Defendants share communications primarily through inaccessible channels, they deny disabled residents an equal opportunity to receive, understand, and act on life-saving emergency information.

B. Portland's Evacuation Services Are Not Accessible to Disabled Residents

70. The City and County share responsibility for providing evacuation assistance. The City acknowledges that it is likely to form a unified evacuation incident command with the County due to their “special relationship” and the fact that the City “does not provide some of the essential services of government.”³⁸ The County “coordinates governmental and nongovernmental organizations managing transportation systems, modes and infrastructure in response to threats or incidents,” including the provision of “logical transportation of evacuees.”³⁹

71. Ensuring disabled people can access evacuation services centers on providing operational evacuation assistance. Specifically, residents whose physical, sensory, or developmental disabilities impair or prevent them from driving, walking, ambulating, navigating, or otherwise leaving their home and traveling to evacuation sites require different or additional assistance to prevent injury and death during time-critical emergencies. This assistance includes transportation, accessible vehicles, support with packing and transporting medical equipment, verbal directions and orientation, sighted-guide assistance, evacuation

³⁸ Portland Bureau of Emergency Management, City of Portland Basic Emergency Operations Plan 2022, 23 (2021).

³⁹ Multnomah County Office of Emergency Management, Multnomah County EOP ESF 1-1

chairs for stairways,⁴⁰ accessible evacuation routes and exits, and support, space, and supplies for emotional support and service animals.

72. But Defendants' evacuation plans rely on generalized statements about coordination and assistance without building plans for accessibility into every facet of the emergency system that ensures disabled people can actually evacuate. Specifically, these evacuation plans contain four main deficiencies:

73. First, Defendants lack an adequate system for identifying disabled residents who require evacuation assistance. As Oregon's largest city, Portland covers 145 square miles⁴¹ and, as of 2020, had an estimated population of 652,503, with a population density of about 4,889 people per square mile.⁴² Multnomah County covers 466 square miles,⁴³ with a population density of 1,890 people per square mile.⁴⁴ Disabled residents live throughout Portland and Multnomah County in a variety of settings, including private residences, hospitals, mental health and assisted living facilities, prisons and jails, and unhoused encampments. To efficiently evacuate all of these individuals during time-critical

⁴⁰ An evacuation chair is a specialized, lightweight device designed to safely transport individuals with mobility impairments down flights of stairs during emergencies.

⁴¹ EBSCO, *Portland, Oregon*, EBSCO.com, <https://www.ebsco.com/research-starters/social-sciences-and-humanities/portland-oregon> (last visited June 16, 2026).

⁴² U.S. Census Bureau, *QuickFacts: Portland City, Oregon*, United States Census Bureau, <https://www.census.gov/quickfacts/fact/table/portlandcityoregon/PST045225> (last visited June 16, 2026).

⁴³ Multnomah County, *About Multnomah County*, Multnomah County, <https://multco.us/info/about-multnomah-county> (last visited June 16, 2026).

⁴⁴ U.S. Census Bureau, *QuickFacts: Multnomah County*, United States Census Bureau, <https://www.census.gov/quickfacts/fact/table/multnomahcountyoregon/PST045224> (last visited June 16, 2026).

emergencies, Defendants must know their location, disability-related assistance needs, and how to contact them.

74. Although Defendants operate a voluntary registry for people who may need assistance in emergencies, the 2021 Audit warned that the registry “creates an illusion of preparation” because “few people have signed up” and “emergency planners have not used it for planning purposes.”⁴⁵ Nevertheless, Defendants continue to rely exclusively on their needs registry without any plan for increasing participation in the registry or protocols for tracking, recording, monitoring, and operationalizing requests for evacuation assistance. Nor have Defendants developed plans for identifying disabled residents through reliable methods such as through gathering demographic data and information on the number of individuals with disabilities in the community, partnering directly with community-based organizations to understand geographic distribution patterns of disabled residents, and collaborating with utility providers to access records of customers who rely on electricity for life-sustaining medical equipment. Defendants have also failed to publish information about who a disabled person should contact for immediate evacuation assistance, who provides evacuation assistance, how requests are prioritized, how requests are routed when 911 is overloaded, or how accessible transportation is dispatched.

75. Second, Defendants have not secured the resources necessary to meet the evacuation needs of disabled residents. Indeed, the City’s current evacuation plan admits Defendants lack enough accessible vehicles, trained drivers, and other resources to transport

⁴⁵ Portland City Auditor, *supra* note 3 at 3.

residents with mobility disabilities.⁴⁶ For example, the plan claims that the Portland Bureau of Emergency Management will “send drivers to [disabled people requiring assistance] during an evacuation; however, the number of adapted vehicles and trained drivers is limited.”⁴⁷ Although the plan notes that TriMet—the primary public transportation agency serving Portland—can provide paratransit services, it states that “during an evacuation, TriMet will not be able to support all community members who need this type of assistance.”⁴⁸ Despite admitting these resource gaps exist, Defendants have not contracted with third parties for accessible transportation to bridge them.

76. Nor do the Defendants’ plans anticipate the supports that disabled individuals may need to evacuate and the resources required to meet those needs, such as transporting medical equipment, verbal directions and orientation, sighted-guide assistance, evacuation chairs for stairways, accessible evacuation routes and exits, and support, space, and supplies for service animals.

77. Third, Defendants have not developed protocols to evacuate disabled residents, let alone trained staff on how to execute such protocols. Neither the City nor the County have mapped evacuation and transportation routes or developed protocols and trainings that equip drivers and navigators to reach and evacuate disabled residents under significant constraints, including time, road blockages and traffic congestion, and power failures. The City’s current evacuation plan admits that the County “does not have

⁴⁶ Portland Bureau of Emergency Management, City of Portland Evacuation Plan 2024, 33 (2024).

⁴⁷ *Id.*

⁴⁸ *Id.*

established roles for evacuation and transportation” and that “[d]rivers and navigators have not been trained for emergency evacuations.”⁴⁹ The City’s plans similarly omit the need for evacuation and transportation routes, protocols, and trainings.

78. And fourth, Defendants’ emergency plans exclude entire categories of disabled individuals from their evacuation procedures. For example, while the City’s current evacuation plan acknowledges that people with physical, intellectual, or developmental disabilities require evacuation assistance,⁵⁰ it ignores the evacuation needs of individuals with mobility disabilities living in high-rise buildings during emergencies when elevators fail; individuals with sensory disabilities, such as blind, low-vision, and Deaf individuals; and people with mental health disabilities living in adult foster homes, group homes, and other community-based facilities. The plan also states that it “does not address” the evacuation of settings that disproportionately house disabled people, including hospitals, mental health and assisted living facilities, jails, and prisons.⁵¹ The exclusion of mental health facilities raises alarm because Multnomah County contains multiple locked psychiatric facilities operated as public-private partnerships with the City and County.⁵²

⁴⁹ *Id.*

⁵⁰ *Id.* at 7.

⁵¹ *Id.* at 6.

⁵² Multnomah County, *County Investments Add More than 250 Recovery and Stabilization Beds*, Multnomah County (Oct. 28, 2024), <https://multco.us/news/county-investments-add-more-250-recovery-and-stabilization-beds>; Multnomah County, *Commissioners Praise County’s \$3 Million Investment in Unity Center for Behavioral Health*, Multnomah County (Apr. 25, 2018), <http://multco.us/news/commissioners-praise-countys-3-million-investment-unity-center-behavioral-health>.

79. Absent accessible evacuation protocols and resources, disabled residents will remain trapped in their homes or be forced to attempt unsafe evacuations during the next disaster.

C. Portland’s Emergency Shelters and Disaster Resource Centers Are Not Accessible to Individuals with Disabilities.

80. Emergency sheltering is a core responsibility of both the City and the County. The City and County partner to provide shelter and related services during emergencies. The County’s emergency policies specifically note that the County relies on the City to “[p]rovide a list of severe winter weather shelters” and “[c]ommunicate anticipated resource needs.”⁵³

81. Emergency shelters and mass care provide more than a place to sleep—they provide life-saving services, including food, water, medical support, information, and connection to other services. Disabled residents’ experience with the historic 2021 heat waves illustrate the consequences of inaccessible shelters, as cooling centers in Greater Portland were largely inaccessible. The City’s 2021 Audit acknowledged that Portland’s emergency plans lacked “strategies to ensure that emergency shelters are accessible, have the equipment and supplies needed to support people with disabilities, and provide effective, accessible communication.”⁵⁴

82. Defendants have failed to remedy these defects, ensuring that even the few disabled people who successfully evacuate will remain locked out of shelters during the next disaster. Defendants have not identified and publicly disclosed an accessible shelter network

⁵³ Multnomah County Office of Emergency Management, Multnomah County Severe Winter Weather Standard Operating Procedure 18 (2024).

⁵⁴ Portland City Auditor, *supra* note 3 at 5.

that disabled residents can rely upon during disasters. Instead, their emergency plans designate Portland Parks & Recreation (“PPR”) facilities as emergency shelters. But PPR facilities are riddled with well-documented accessibility barriers for blind and low vision people and those with mobility disabilities. Defendants’ emergency plans make vague assertions that authorities will somehow make the facilities accessible *during* a disaster. Such lofty assurances that Defendants will make ad hoc modifications without specific plans for doing so will ensure that disabled residents lack access to shelters and the life-sustaining commodities often co-located there.

83. Relatedly, Defendants’ plans omit any concrete, advance planning to fix accessibility barriers at Disaster Resource Centers (“DRCs”) and analogous post-disaster service hubs used to distribute information, benefits, assistance, and essential resources. DRCs provide the primary gateway to critical recovery supports, including replacement of medications and medical equipment, housing assistance, food and water distribution, and connection to human services. But Defendants have not identified accessible DRC locations; planned for accessible routes, entrances, restrooms, and queuing; ensured accessible communications at DRCs such as screen-reader accessible web information, ASL interpretation, and other auxiliary aids and services; or planned for providing people with disabilities continuous access to life-saving medication, including psychotropic medication for people with mental health disabilities. Nor have Defendants planned and publicized accessible alternatives such as mobile services or home-based delivery for individuals who are homebound or cannot safely travel to or access these sites because of their disabilities. Without a concrete and feasible plan for fixing these accessibility barriers, disabled residents will remain cut off from the services on which they disproportionately rely.

D. Defendants' Emergency Preparedness Outreach and Education Programs Are Not Accessible

84. Defendants hold joint responsibility for developing and implementing programs to educate the public about emergency preparedness.⁵⁵ These programs are essential for all residents because, by the time a disaster occurs, there may not be time for residents to learn what they should do, and because such educational programs often include steps that must be taken in advance to prepare for a disaster. Public education undergirds the accessibility of the other components of an emergency system by informing disabled residents about available emergency services, how to access those services, and how to plan and prepare for emergencies to reduce risk.

85. In 2024, the City conducted a listening session with disabled residents and published a report documenting deficiencies that residents raised in Defendants' public education program ("Aim-4-Access Report").⁵⁶ Residents reported that they did not receive preparedness training and education accessible to disabled people, including clear information about accessible evacuation assistance, shelter options, and emergency support services.⁵⁷ As a result, disabled residents do not know their own responsibilities, what assistance they can expect during emergencies, the respective roles of the City and County, the location of accessible evacuation destinations and shelters, or the specific supplies they

⁵⁵ PCC 3.124.050 ("[T]he Director of the Portland Bureau of Emergency Management's duties and powers include, but are not limited to the following: . . . I. Develop and implement programs to educate the public about emergency preparedness . . . [.]").

⁵⁶ Aim-4-Access, Accessible Emergency Management: Listening Sessions with Portland's Disability Community (2024).

⁵⁷ *Id.* at 10–12.

should prepare.⁵⁸ Defendants' emergency plans, preparedness materials, and trainings have not addressed these deficiencies. Residents also raised the need for simulation drills for different types of evacuations to help them prepare for various scenarios, including power loss. But Defendants do not conduct community drills, arrange walkthroughs, or otherwise distribute resources that help disabled people to understand how hypothetical emergency scenarios would proceed.

86. Defendants' failure to provide accessible preparedness information prevents disabled residents from engaging in effective personal planning and preparedness on equal terms with non-disabled residents, leaving them uniquely exposed to disaster-related injury and death.

E. Defendants Have Failed to Include Disabled People in the Development of their Emergency Plans.

87. To ensure disabled people have meaningful access to services during and after an emergency, public entities must incorporate into their emergency plans the likely impact of the event on disabled people and their resulting needs. This makes inclusive planning key.

88. Defendants continue to exclude the local disability community and disability advocacy groups from their emergency planning process. Audits and reports have repeatedly identified this issue, noting the need for disability inclusion in the planning process as far back as December 2016. The 2021 Audit emphasized that Defendants' failure to include the disability community in their emergency planning process caused the deficiencies identified in their evacuation and transportation procedures, emergency shelters, emergency

⁵⁸ *Id.*

communications, public education, staff qualification and capacity, and decision-making and accountability structures.⁵⁹ The 2024 Aim-4-Access Report again highlighted both that Defendants exclude disabled people from their emergency planning process and that the disability community wants to be part of the planning process.⁶⁰

89. Defendants have failed to conduct outreach to disabled people or include disabled people in their emergency planning processes. Plaintiffs and other disability rights advocates in the County report that Defendants have failed to include them or conduct outreach to them despite critical audits, reports, and affirmative advocacy on this very issue. Even after DRO's outreach to the Oregon Department of Justice and Portland City Auditor following the heatwave deaths of 2021, Defendants made minimal efforts to engage DRO or its constituents and have failed to incorporate the feedback they have received to make their emergency system accessible. Without planned and executed outreach, engagement, consideration, and substantive planning with the disability community, Defendants cannot make their emergency system fully accessible to their disabled residents.

IV. Impact of Defendants' Inaccessible Emergency System on Organizational Plaintiffs' Constituents

75. Defendants' failure to remedy the well-documented deficiencies in their emergency system threatens the health and safety of DRO and Bridges' constituents. These individuals have physical, sensory, developmental, and/or mental health disabilities that affect how they receive information, travel, communicate, and access services. Absent reasonable modifications, the deficiencies in Defendants' emergency system will impair or

⁵⁹ Portland City Auditor, *supra* note 3 at 4–9.

⁶⁰ Aim-4-Access, *supra* note 56 at 10–11.

altogether prevent DRO and Bridges' constituents from accessing emergency alerts and warnings, evacuation services, shelters, and mass care services during the region's next disaster.

Jonathan Simeone

76. The deficiencies in Defendants' emergency system exclude Plaintiff Jonathan Simeone. As a blind person, in the event of an emergency requiring evacuation, Mr. Simeone requires alerts, information, instructions, forms, and directions regarding the emergency and evacuation procedures in an accessible format. He also requires transportation to evacuation zones and shelters and, once there, help navigating shelters by someone trained to guide blind people in new, chaotic environments.

77. But the deficiencies in Defendants' emergency response system prevent Mr. Simeone from receiving these accommodations. In 2018, he registered his and his mother's evacuation needs in Defendants' needs registry but has never received any confirmation of his registration or follow-up from Defendants to clarify or discuss his needs. During the 2021 heatwave, Mr. Simeone received no communication from Defendants about transportation to the cooling centers. He fears that Defendants will again deny him evacuation assistance during the region's next disaster.

78. Mr. Simeone also fears that the Everbridge system will exclude him from lifesaving information. He struggles to navigate the Everbridge app because its map features are incompatible with screen-reader technology. Additionally, the application links to inaccessible webpages, including social media pages that contain images without alternative text. As a result, Mr. Simeone faces ongoing risk of being unable to receive, understand, and act on emergency alerts and public information on equal terms with nondisabled people.

Philip J. Wolfe

79. Plaintiff Philip J. Wolfe similarly lacks equal access to Defendants' emergency system. Because ASL is Philip's first language, written English communications during crises can present significant barriers to understanding. To access emergency communications as a Deaf person, Philip needs ASL translations of written content and qualified ASL interpreters for spoken content during emergency meetings, public briefings, and any other spoken content. During an emergency requiring evacuation, Philip needs accessible instructions to navigate from home to evacuation zones and access to a shelter that has the ability to provide ASL interpretation during meetings and announcements.

80. Philip's experience during a recent heatwave illustrates the communication barriers Philip faces to accessing Defendants' emergency system. Due to a severe flare-up of a prior neck injury, Philip lay immobilized in terrible pain and texted 911 for an ambulance. When the EMTs arrived at the locked apartment, they were unable to communicate with Philip, who was physically unable to open the door. To coordinate rescue, Philip had to navigate a complex and difficult process to contact the building manager through a Video Relay Service ("VRS") call on Philip's phone to get the door unlocked.

81. Philip fears that the deficiencies in Defendants' emergency system will similarly deny effective communication during the region's next disaster.

82. Philip also has another disability that at times required reliance on refrigerated medication. Because of this, Philip could also require access to a shelter that can refrigerate the required medication.

83. Philip has also sought to learn information about emergency planning through other sources, such as a recent 2026 meeting that was held in Philip's neighborhood to

discuss emergency planning. Unfortunately, despite Philip's multiple requests beforehand that an ASL interpreter be provided, no ASL interpreter was present at the meeting. Philip remains unaware of what emergency planning the City and County have completed, particularly for Deaf people.

84. Although Philip has resided in Portland since 2010, Defendants' failure to conduct accessible outreach to the Deaf community left Philip entirely unaware of the Everbridge system until July 2026. After learning of the system, Philip registered for Everbridge. Because the system fails to provide ASL translations, Philip fears that the lack of accessible warnings will exclude Philip from critical, lifesaving information during a future emergency, leaving Philip constantly in fear of imminent and severe harm.

85. Because Defendants have failed to remedy the deficiencies in their emergency system and provide equal and accessible alerts for Deaf residents, Philip remains at constant, ongoing risk of injury or death in the event of a natural disaster.

Audra Pearson

86. Plaintiff Audra Pearson lacks also access to Defendants' emergency system. Ms. Pearson relies on several accommodations throughout her daily life. She uses a powered wheelchair and relies on TriMet's paratransit vehicles to travel. She has around-the-clock caregivers who assist with daily activities of living, such as eating, opening doors, and navigating service systems using plain language. Her staff also help her move between her wheelchair and bed using a Hoyer lift—a mechanical device used by caregivers to safely transfer individuals with limited mobility disabilities using a fabric sling and a hydraulic or electric hoist.

87. Ms. Pearson requires all these accommodations during an emergency. Because her caregivers do not have a car that can fit her powerchair, she needs Defendants to provide an accessible vehicle to help her evacuate. She also requires a shelter that is wheelchair accessible; staff to help her eat, open doors, move between her wheelchair and bed, and navigate systems using plain language; and medication refills.

88. But Ms. Pearson fears that the deficiencies in Defendants' emergency system will prevent her from receiving these accommodations during the next disaster.

89. Defendants' emergency preparedness education program has also prevented Ms. Pearson from accessing lifesaving information. Although she lives in a building well known for housing many people with mobility disabilities, the City and County have failed to contact her to learn about her disability needs during emergencies or to educate her about preparing for emergencies. And the notifications and information she has received from Defendants use language too complex for her to understand. Defendants' failure to provide accessible education materials has also left Ms. Pearson unaware of the needs registry and the Everbridge system.

90. These deficiencies in Defendants' emergency system collectively place Ms. Pearson at grave risk of injury and death during the region's next disaster.

Misty Nichols

91. Misty Nichols is a Portland resident with spastic diplegic cerebral palsy and chronic migraines. She uses a wheelchair or walker and relies on refrigerated medication. She is a qualified individual with a disability under the ADA and Section 504. As a disabled resident of Oregon, Ms. Nichols is a constituent of Plaintiff Disability Rights Oregon.

92. Misty Nichols faces grave risks of remaining trapped in her home and losing access to lifesaving medication during the next disaster. Ms. Nichols uses a wheelchair and walker and relies on heavy medical equipment and refrigerated medication. During an emergency requiring evacuation, Ms. Nichols needs assistance descending stairs in her home, accessible transportation to evacuation zones, help transporting medical equipment, and access to a shelter that is wheelchair accessible and can refrigerate her medication. During a shelter-in-place order, she requires food, water, and other lifesaving supplies delivered to her home.

93. But Defendants' emergency system has prevented Ms. Nichols from receiving these accommodations and forced her to spend her own time and money to secure them. Indeed, during the 2020 snowstorm, the 2020 fire season, and the 2021 heat waves, she remained trapped in her home with no transportation to Defendants' evacuation zones or shelters. Defendants did not contact or offer Ms. Nichols evacuation assistance, transportation, food, water, or other lifesaving supplies. So, she fears that the deficiencies in Defendants' emergency system will again prevent her from receiving these accommodations during the next disaster. As a result, Ms. Nichols stocks up on food, water, and medical supplies. She has also sought assistance from friends who can transport her and her medical equipment during emergency situations or who can deliver food to her home. When her friends are unavailable, she relies on food delivery and cab or ride-share services. But these services do not always operate during emergencies, leaving Ms. Nichols vulnerable to starvation and death.

94. To overcome these barriers, Ms. Nichols has consulted Defendants' emergency education and planning materials for guidance but has found those materials

inadequate. Specifically, those materials do not address her disability needs in any way, such as how to obtain assistance descending the stairs during emergencies and how to secure transportation to evacuation zones and shelters. Nor did these materials explain that disabled residents could register their evacuation needs in Defendants' need registry. And Defendants' failure to conduct outreach to people with disabilities has left her unaware of Defendants' needs registry until July 2026. Still, she fears that Defendants' failure to secure enough accessible vehicles and train drivers and navigators to evacuate disabled people will trap her in her home during the next disaster. Ms. Nichols thus continues to rely on intermittent and unreliable support from friends and professional services during emergencies.

V. Impact of Defendants' Emergency System on DRO's Core Business Activities

95. Defendants' failure to remedy the deficiencies in their emergency system has also harmed Plaintiff DRO's core business activities.

96. Working to protect the legal rights, choices, and opportunities of Oregonians is a core part of DRO's mission, and addressing the needs of disabled residents during emergencies is a critical part of that work. Since the start of the COVID-19 pandemic, DRO's core business activities have been harmed in at least two ways, and they will continue to be harmed so long as the deficiencies in Defendants' emergency system exist.

97. First, the deficiencies in Defendants' emergency system prevent DRO from fulfilling its duty to prevent abuse and neglect of people with mental health and developmental disabilities. This duty stems from the DD Act and PAIMI Act, which require DRO to monitor conditions in mental health facilities to identify potential abuse or neglect, and pursue legal, administrative, or other appropriate remedies to protect and advocate on behalf of individuals with mental health and developmental disabilities to address and

prevent abuse and neglect. 42 U.S.C. §§ 15043(a)(2)(B), 10805(a)(1)(A). Abuse and neglect include any practice which is likely to cause immediate physical or psychological harm, result in long-term harm, or has caused or may have caused injury or death. 42 C.F.R. § 51.2. A public entity's failure to plan for and meet the needs of people with mental health and developmental disabilities during emergencies creates a substantial risk of abuse and neglect that DRO has a duty to investigate and prevent.

98. But Defendants have no operational plan for meeting the needs of people with mental health and developmental disabilities in emergencies, thereby frustrating DRO's core business activities. In fact, the City's current evacuation plan explicitly states that it does not address the evacuation of mental health facilities, and none of Defendants' other emergency protocols include such a plan. Nor do Defendants have plans for evacuating people from other settings that disproportionately house people with mental health disabilities, including adult foster homes, group homes, and other community-based facilities. Moreover, Defendants have no plan for providing people with mental health disabilities continuous access to life-saving psychotropic medication in emergency shelters. The deficiencies in Defendants' emergency system also exclude constituents with developmental disabilities, such as Plaintiff Audra Pearson, from emergency alerts and warnings, evacuation services, shelters, emergency preparedness and educational materials, and emergency planning. These deficiencies create a substantial risk of injury and death to people with mental health and developmental disabilities during emergencies, thereby undermining DRO's ability to prevent abuse and neglect.

99. Second, the deficiencies in Defendants' emergency system impair DRO's ability to connect people with disabilities in Portland and Multnomah County to emergency

resources. Since the advent of the COVID-19 pandemic in 2019, DRO has worked to educate people with disabilities about their right to an accessible emergency system, available emergency resources, and how to access these resources. For example, DRO has distributed resources and conducted trainings encouraging and teaching people with disabilities how to disclose their evacuation-related needs through Defendants' needs registry and registering for Defendants' emergency alerts and notification system.

100. The experiences of people with disabilities during the 2021 heat wave illustrate how the deficiencies in Defendants' emergency system have thwarted and will continue to thwart DRO's efforts to connect its constituents to emergency resources. For example, despite disclosing their evacuation needs through Defendants' needs registry, numerous DRO constituents did not receive evacuation assistance and remained trapped in their homes. Compounding this harm, Defendants failed to provide information about their cooling centers until the day that they opened, leaving DRO's constituents little to no time to make alternative plans to evacuate. Moreover, constituents who managed to reach Defendants' cooling centers did not receive access to refrigeration for their medication, forcing them to skip doses. Absent corrections, the deficiencies in Defendants' emergency system will continue to undermine DRO's efforts to protect the lives of disabled people during emergencies.

101. To overcome the obstacles posed by Defendants' inaccessible emergency system, DRO has expended additional resources to prevent unnecessary injury and deaths of people with disabilities, including people with mental health and developmental disabilities, during emergencies. For example, DRO has hosted and has plans to continue hosting multiple community sessions to understand the needs of people with disabilities in Portland and

Multnomah County during emergencies and educate those individuals about navigating the deficiencies in Defendants’ emergency system to prepare for emergencies. DRO has also expended resources to alert people with disabilities in Portland and Multnomah County about upcoming disasters and promoted emergency resources during heat waves, wildfires, and ice/freezing events, This has required DRO to devote additional staff time and resources to conduct outreach to people with disabilities in Portland and Multnomah County, prepare and revise training materials based on constituents’ experiences, and research available emergency resources provided by entities and agencies other than Defendants that can meet the needs of disabled residents during emergencies. As a result, DRO has been forced to reduce the time and resources it allocates to other core business activities, including monitoring abuse and neglect at Oregon state psychiatric hospitals, preventing segregation of disabled people in prisons, and improving access to educational services for students with disabilities.

CAUSES OF ACTION

FIRST CLAIM FOR RELIEF

VIOLATION OF TITLE II OF THE ADA, 42 U.S.C. § 12132

(Against all Defendants)

102. Plaintiffs reallege and incorporate by reference all preceding paragraphs as though fully set forth herein.

103. Title II of the ADA provides that “no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any such entity.” 42 U.S.C. § 12132.

104. A “public entity” under the ADA includes state and local governments, their agencies, and their instrumentalities. 42 U.S.C. § 12131(1). Defendants are public entities subject to Title II of the ADA.

105. Defendants operate an emergency system that constitutes and includes covered “services, programs, or activities” under Title II of the ADA. *See* 42 U.S.C. § 12132.

106. Plaintiffs Simeone, Wolfe, and Pearson (hereafter, “Individual Plaintiffs”) and constituents of Plaintiffs DRO and Bridges (hereafter, “Organizational Plaintiffs”) are individuals with disabilities within the meaning of the statute because they have impairments that substantially limit one or more major life activities. They are also qualified because they are eligible to benefit from Defendants’ emergency planning, preparedness, response, and recovery programs and services.

107. Through the acts and omissions described above, Defendants are violating the ADA, 42 U.S.C. § 12132, and its implementing regulations, 28 C.F.R. § 35, including by:

- a. Denying individuals with disabilities an opportunity to participate in or benefit from the aids, benefits, or services of Defendants’ emergency system. 28 C.F.R. § 35.130(b)(1)(i).
- b. Denying individuals with disabilities an equal opportunity to participate in or benefit from the aids, benefits, or services of Defendants’ emergency system. 28 C.F.R. § 35.130(b)(1)(ii).
- c. Denying individuals with disabilities an equal opportunity to obtain the same result or to gain the same benefit of Defendants’ emergency system. 28 C.F.R. § 35.130(b)(1)(iii).

- d. Limiting individuals with disabilities in the enjoyment of the rights, privileges, advantages, or opportunities enjoyed by others receiving aids, benefits, or services of Defendants' emergency system. 28 C.F.R. § 35.130(b)(1)(vii).
- e. Employing eligibility criteria that screen out or tend to screen out individuals with disabilities from fully and equally enjoying Defendants' emergency system. 28 C.F.R. § 35.130(b)(8).
- f. Utilizing criteria and methods of administration that:
 - i. have the effect of subjecting Plaintiffs to discrimination on the basis of disability; 28 C.F.R. § 35.130(b)(3)(i); and
 - ii. have the purpose or effect of defeating or substantially impairing accomplishment of the objectives of Defendants' emergency system with respect to individuals with disabilities.
- g. Failing to make reasonable modifications in policies, practices, or procedures of Defendants' emergency system as necessary to avoid discriminating against individuals with disabilities. 28 C.F.R. § 35.130(b)(7)(i).
- h. Failing to take appropriate steps to ensure that communications with Plaintiffs related to emergency planning, preparedness, response, and recovery are as effective as communications with people without disabilities. 28 C.F.R. § 35.160(a)(1).
- i. Failing to develop a plan to furnish appropriate auxiliary aids and services where necessary to afford Plaintiffs an equal opportunity to participate in, and

enjoy the benefits of, Defendants' emergency system. 28 C.F.R.

§ 35.160(b)(1).

108. By these actions and inactions, the Individual Plaintiffs and constituents of the Organizational Plaintiffs have been denied meaningful access to Defendants' emergency planning, preparedness, response, and recovery programs. Defendants' discrimination is ongoing and creates a continuing risk of irreparable harm to Plaintiffs and other individuals with disabilities each time an emergency occurs or threatens to occur.

109. Plaintiffs are entitled to declaratory and injunctive relief.

SECOND CLAIM FOR RELIEF

VIOLATION OF SECTION 504 OF THE REHABILITATION ACT OF 1973,

29 U.S.C. § 794

(Against all Defendants)

110. Plaintiffs reallege and incorporate by reference all preceding paragraphs as though fully set forth herein.

111. Section 504 provides that "[n]o otherwise qualified individual with a disability . . . shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." 29 U.S.C. § 794(a).

112. The Individual Plaintiffs and constituents of the Organizational Plaintiffs are individuals with disabilities within the meaning of the statute because they have impairments that substantially limit one or more major life activities. They are also qualified because they are eligible to benefit from Defendants' emergency planning, preparedness, response, and recovery programs and services.

113. Defendants receive Federal financial assistance.

114. Defendants violate Section 504 for the same reasons they violate Title II of the ADA. “[T]here is no significant difference in the analysis of rights and obligations created by the two Acts.” *Vinson v. Thomas*, 288 F.3d 1145, 1152 n. 7 (9th Cir. 2002).

115. Plaintiffs are entitled to declaratory and injunctive relief.

THIRD CLAIM FOR RELIEF

VIOLATION OF OREGON LAW, Or. Rev. Stat. § 659A.142(4)

(Against All Defendants)

116. Plaintiffs reallege and incorporate by reference all preceding paragraphs as though fully set forth herein.

117. Plaintiffs reassert all claims contained in the First and Second Claims for Relief under Or. Rev. Stat. § 659A.142(4).

118. Under Oregon law, “[i]t is an unlawful practice for any place of public accommodation, resort or amusement as defined in ORS 659A.400, or any person acting on behalf of such place, to make any distinction, discrimination or restriction because a customer or patron is an individual with a disability.” Or. Rev. Stat. § 659A.142(4). Places of public accommodation include “[a]ny service to the public that is provided by a public body,” places open to the public and owned or maintained by a public body, and places serving accommodations, advantages, facilities, or privileges to the public. Or. Rev. Stat. § 659A.142(4); 659A.400(1)(a)–(b). Defendants’ emergency alerts and warnings, evacuation, shelters, mass care, emergency preparedness outreach and education, and planning are public accommodations or services under the meaning of the statute. *See id.*; Or. Rev. Stat. § 659A.139(1) (providing that “ORS 659A.103 to 659A.144 shall be construed to the extent

possible in a manner that is consistent with any similar provisions of the federal Americans with Disabilities Act of 1990, as amended by the federal ADA Amendments Act of 2008 and as otherwise amended”).

119. Oregon law authorizes injunctive relief, any other equitable relief that may be appropriate, and the greater of compensatory damages or \$200 for violations of Or. Rev. Stat. § 659A.142. Or. Rev. Stat. § 659A.885(1), (3).

120. Plaintiffs are entitled to declaratory and injunctive relief and monetary damages.

REQUEST FOR RELIEF

Plaintiffs respectfully request that this Court:

- a. Declare that Defendants’ emergency planning, preparedness, response, and recovery programs, services, and activities violate Title II of the ADA, Section 504, and Or. Rev. Stat. § 659A.142(4);
- b. Enter preliminary and permanent injunctive relief requiring Defendants to design, implement, and maintain their emergency planning, preparedness, response, and recovery programs in compliance with Title II of the ADA, Section 504, and Or. Rev. Stat. § 659A.142(4);
- c. Award Plaintiffs monetary damages under Or. Rev. Stat. § 659A.885(1) & (3);
- d. Award Plaintiffs their reasonable attorneys’ fees and costs under 42 U.S.C. § 12205, 29 U.S.C. § 794a, and other applicable law; and
- e. Grant such other relief as the Court deems just and proper.

Dated: July 28, 2026

Respectfully submitted,

/s/ Emily Cooper .
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**pro hac vice application forthcoming*