

Emergency Preparedness Concerns for Older Adults

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – Safer, healthier people.

The CDC urges professionals to work with older adults and their caregivers to ensure they are adequately prepared for an emergency, such as a hurricane or flood. Disasters of all kinds affect older adults disproportionately, especially those with chronic diseases, disabilities, or conditions that require extra assistance to leave an unsafe area and recover from an event. Emergency planners need to recognize that the frail elderly are a special-needs population. Frail elders are older adults who have serious, chronic health problems - such as heart disease, cancer, and diabetes - that could make them more vulnerable during disasters.

Of course, many older adults are an asset during a disaster, offering their prior experience, wisdom, and mental resilience to help others and provide reassurance to those who are frightened or depressed by the events. However, certain aspects of the aging process can make many older adults particularly vulnerable during a disaster, especially if they have one or more chronic illnesses, functional limitations, dementia, or social and economic limitations that prevent adequate preparation and hinder adaptability during disasters.

More than half of older adults have some kind of functional limitation. A 2005 Harris poll found that 13 million people aged 50 and older said that they would need help to evacuate during a disaster. Half of these people said that they would need help from someone outside their household.

Older persons who are hard of hearing or cognitively impaired might have trouble understanding information or following directions. They might feel more easily overwhelmed by a disaster, especially if they also have difficulty moving around, standing in line, or sleeping on a low cot in a noisy shelter. Those who use wheelchairs, canes, or walkers cannot use stairs if elevators stop working due to a power outage. Elders who no longer drive or do not own a car face difficulties evacuating. Older adults also are more prone than younger people to ill effects from extreme temperatures.

Exposure to conditions associated with many disasters, such as lack of safe food and water, extreme heat or cold, stress, or exposure to infection, can aggravate chronic conditions that are common to older adults. Furthermore, adverse health events are more likely to occur following a disaster if certain essential medications for chronic disease, such as insulin or blood thinners, are not available during an emergency. Populations of particular concern following a disaster include those with a history of heart attack, stroke, or breathing disorders; people with diabetes; and those taking blood thinners, certain cancer therapies, or other essential medications.

So how can older adults prepare for an emergency? They should stock supplies now so they have enough ready-to-eat food, water, and batteries for flashlights and radios during an emergency. They should also have an evacuation plan and know in advance what to do with pets. Older adults need a personalized emergency plan listing where they can go in an emergency and what they should bring with them, such as medications, eyeglasses, hearing aids and extra batteries,

oxygen, or assistive technologies. And they need to know how they will get there and who they should call for help. Those who use a communication, assistive, or mobility device should include provisions to transport this device with them if they need to evacuate. The plan should also include any food or supplies needed by a service animal. Older adults should keep a list of their medications, doctors, and pharmacies in a waterproof bag. Experts recommend including a photocopy of doctors' prescriptions to make it easier to get refills in another location.

During a disaster, older adults must listen to instructions from the media and government officials and follow the advice. Some older adults are naturally reluctant to leave possessions accumulated over a lifetime and go to a strange place. Most people who cannot leave an area prior to a disaster go to a designated community shelter, usually operated by the American Red Cross or a community organization. In addition to basic shelter, these facilities offer meals, water, personal hygiene items, first aid, and information. People who go to a shelter must bring their own bedding, medications, and other special-need items. Pets are not allowed in shelters. In addition, most states set up Special Needs Shelters for medically dependent residents in advance of an anticipated disaster, such as a hurricane. These shelters are designed for very ill people who need medical assistance and have nowhere else to go. Evacuees at a Special Needs Shelter might have had a stroke, use a wheelchair, or require special medical equipment, such as intravenous devices, gastric tubes, or indwelling catheters.

Following a disaster, older adults can turn to familiar aging services providers for assistance. The aging services network, which includes state and area agencies on aging, local services organizations, and Indian tribes and Native Alaskan organizations, help restore meal, transportation, and other services as quickly as possible. These agencies can also help connect older adults to other services they may need, such as FEMA funds, housing, or food stamps.

Recovering from a disaster can be as difficult for an older adult as surviving the disaster itself. This is especially true if the person has lost a home or possessions. In addition, the older person might be disturbed by lingering memories of the disaster. For a short period of time, most disaster victims will share the same emotions: disbelief, anxiety, depression, withdrawal, fear of darkness, and trouble sleeping. Older adults may be more sensitive to loud noises or have a reoccurrence of past traumatic memories. When these symptoms persist, problems can develop and they may need professional assistance. But preparing for an emergency in advance can go a long way toward preventing negative outcomes during a disaster.

For more information about emergency preparedness, please visit www.bt.cdc.gov. Thank you for listening.

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