

AGING TODAY

Vol. XXVII, No. 4

PAGES 8 & 10

July–August 2006

ISSN: 1043-1284

www.agingtoday.org

LESSONS FOR ALL DISASTERS FROM FLORIDA'S HURRICANES

By **MAX B. ROTHMAN**
and **LAURA R. SEFF**

The experiences of Sept. 11 in 2001, Hurricane Katrina and other dramatic events of recent years have generated numerous calls for a “culture of preparedness” among professionals in aging. Area agencies on aging and state units on aging are struggling, without additional resources, to better prepare for everything from hurricanes to avian flu to terrorist attacks.

Because these organizations must establish constructive new working relationships with emergency-preparedness officials and agencies outside the traditional elder-services networks, they must invest substantial time and human capital in negotiation and strategic planning. This process must be ongoing, with plans continually revised and updated based on each community’s experiences and difficult lessons learned, as well as from the best practices gleaned from others.

RESEARCH

To distill crucial lessons learned in the wake of the four hurricanes that lashed Florida in 2004, our research team at the Center on Aging, Florida International University, Miami, conducted a study for the Quantum Foundation. Based on interviews with professionals throughout Florida who had been involved with responding to the needs of elders during those storms, plus a review of the professional literature, we prepared the report *Disaster Planning for Older Adults* and proposed a series of recommendations designed to assist aging-services networks in being better prepared for future emergencies.

Although the report emphasizes that plans should be as detailed as possible and should extend over a substantial period (at least seven to 10 days following the brunt of a disaster), we also recognize that professionals, like jazz musicians, will need to improvise and respond creatively to new situations and constantly evolving circumstances.

In each community, the network of services in aging needs to be at the emergency-planning table, increasing the recognition among emergency planners of the much higher level of vulnerability among even the most robust elders. Past experience shows that older adults are almost always disproportionately affected by disasters. The demographics of death from Katrina underscored this reality. Too often, though, older adults are lumped together with other groups rather than being targeted through efforts carefully designed to meet their particular needs. It is the special responsibility of the aging-services network to raise the level of awareness about these well-documented needs of elders among emergency planners, as well as with healthcare and service agencies or organizations charged with effective disaster planning, response and recovery.

It is of primary importance that all organizations involved have well-defined roles and responsibilities in addressing the issues of elders in a disaster. Experience demonstrates that individual agencies in aging have an admirable record of providing services to their own clients in the aftermath of most disasters. What is not as clear, however, is who is responsible for the well-being of all elders in a community, particularly in the aftermath of a disaster when older adults are most vulnerable. Relationships with local

government, the healthcare system, United Way, faith-based and other voluntary organizations, state and federal governments, and other key actors must be negotiated well in advance to be effective in the throes of a large-scale and complex disaster.

VULNERABILITY MAPPING

One finding of our study was the need for widespread use of community-vulnerability mapping, the identification of areas of large numbers of older, low-income or minority elders, who will have an unequal exposure to risk and who lack the physical and economic resources to respond effectively. These elders are more likely to suffer health-related consequences of the emergency and will be slower to recover. Such maps provide vital assistance to those involved with evacuations, shelters and post-event searches, and help in defining areas of greatest need for services. These types of preparations—coupled with community-disaster emergency drills modeled after those used in bioterrorism-planning projects funded by the Centers for Disease Control and Prevention—will save lives while reducing disease and injuries.

Furthermore, evacuation is a complex, stressful concern for organizations and individuals. The aging network has an important role in educating elders and their families on evacuation planning and otherwise adequately preparing residences for potential disasters. Agencies in aging must identify and help register older people apt to require special-needs shelters, and should ensure that adequate transportation is ready and available for them. The aging network should also help to see that shelters for older adults have proper equipment, supplies and staffing. Adequate preparation is especially important for those with dementia or mental illness. Additionally, experience has demonstrated time and again that emergency plans must include pet shelters to effectively serve elders, many of whom become distracted from concerns with their own well-being when worried over the safety of beloved animals.

In the aftermath of a hurricane or other disaster, because elders cannot easily gain access to community disaster centers, there is an urgent need to use community-vulnerability maps and other tools to locate elders and provide water, food, ice and medical necessities. Disaster-recovery case management is also essential for assisting with elders' immediate needs. The aging-services network should not only ensure that each of its agencies is fully prepared to serve its own clients, but also take responsibility for a proportionate share of community elders in need. Organizations need to have backup plans for their offices, staff and volunteers; alternative means of communication and transportation (including priority access to gas); and linkages to agencies that can provide mental health services to those in need.

HOUSING, RACE ISSUES

The complex issues of providing temporary, long-term and permanent housing have consistently proven to be the most vexing and troublesome problem for all disaster victims, especially elders. Just as each disaster has a distinct personality, community-housing options vary and reflect local conditions and economies. Most housing needs, though, cannot be met by the aging network or even local communities alone. Housing policy and funding is a national and state concern, and the aging network should help document the nature and levels of need to prompt a more effective public response.

Hurricane Katrina dramatically raised the issue of race as tens of thousands of African Americans were unable to evacuate from some of the most vulnerable areas of New Orleans. Likewise, large numbers of older people were incapable of evacuating in the face of a pending disaster. Our research, corroborated by the experiences of hurricanes in 2005, not only underscores the importance of better emergency preparedness for older people, but also stresses the need to deliver pertinent public information before and after emergencies to those identified on the community-vulnerability map.

The challenges of future storms, pandemics and other levels of infectious diseases, bioterrorism or horrors still unimagined are likely to engage American society in striving to improve its responsiveness for some time to come. If the health and human-services community is to meet this immense challenge, the United States will have to find new resources to ensure that their knowledge and expertise can reach out to elders at their greatest time of need. ❖

Max B. Rothman is the executive director of the Center on Aging, Stempel School of Public Health, Florida International University, Miami, where Laura R. Seff is a research associate. Also contributing to this article from the center were former research director Burton D. Dunlop and current research director Vukosava Pekovic. Their report, Disaster Planning for Older Adults, can be downloaded from www.fiu.edu/~coa under the heading "Long-Term Care."