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## Disaster preparedness and response in older adults: a review and discussion.

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# Disaster preparedness and response in older adults: a review and discussion.

## **Cover Page Footnote**

Further resources linked to this paper will be available soon.



# Disaster preparedness and response in older adults: a review and discussion

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## Background

Older adults are disproportionately affected by disasters when they occur, from health, psychosocial and social perspectives. The needs of older adults are different, complex, and are often overlooked during disaster planning and response. The aim of this study was to review the current literature surrounding the needs of older adults from disaster preparedness and response perspectives.

## Methods

A systematic search of five electronic databases: Medline, EMBASE, PsycINFO, CINAHL and Google Scholar was conducted, from 2001-2017 included for review. Articles discussing disaster preparedness, or disaster response, pertaining to older adults (>65 years old) were included in this review. Thematic analysis was performed as described by Nowell et al. (2017).

## Results

A total of 1209 articles were identified in the initial search, with a total of 59 articles included that met the inclusion criteria. Several themes emerged during thematic analysis. These included disaster supplies and preparation, knowledge of preparedness, concerns regarding evacuation, shelter and accommodation, and mental health issues. Impact on chronic medical conditions and increased emergency department attendance also emerged, as did the loss of facilities and prolonged impact of disaster events.

## Discussion

Older adults are in general poorly prepared for disaster events due to many reasons, including access to resources, social isolation, physical mobility issues and chronic health conditions (e.g. Al-Rousan et al., 2015; Aldrich and Benson, 2008; Duggan et al., 2010; Kang, 2014). Disasters can impact physical health, mental health and subsequent post-disaster recovery. The provision of emergency shelter to older adults is not without risk, and may worsen the quality of life of those with chronic health needs. Evacuation planning is in general poorly executed for vulnerable older persons (Castle, 2008).

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## **Conclusion**

A review of the literature revealed that the largest group facing an increased risk from disasters is older adults. Standard disaster preparedness advice appears to do older adults a disservice, and relevant authorities should consider changes specifically for older adults. Disaster planning organizations should seek to include the voice of older persons at all stages of planning.

## **Conference reflection**

The topic generated animated discussion among the group. Several attendees in the room were over the age of 65 themselves, and agreed that they were generally unprepared for disasters. Another attendee clarified that the latest Canadian Red Cross preparedness guidance has taken steps towards better advice for older adults (for example, stocking a 7-day supply of medications). Another attendee described her community's preparedness plan, which incorporates several older adults as members of the planning committee, and has assigned individuals to check in on vulnerable persons in the event of emergencies. These lessons could be useful to other communities and organizations.

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