Natural Hazards Workshop Networking Roundtable on Community, Disasters, and Older Adults

July 16, 2024

Broomfield, CO

## **Objective 1: Foster Connections and Relationship Building**

## **Attendees**

**Tamar Wyte-Lake-** U.S. Department of Veterans Affairs, Veterans Emergency Management Evaluation Center (VEMEC)- Researcher studying older adults and disasters, specifically focused on creating tools and resources for the field, to support preparedness and response. Co-convener of the Disasters and Older Adults Special Interest Group within the Gerontological Society of America, which does not require GSA membership to join.

**June Gin-** Department of Veterans Affairs, Veterans Emergency Management Evaluation Center-Researcher studying homelessness and disasters. Older adults are becoming an increasing proportion of the US unhoused population due to Baby Boom demographics coinciding with economic downturn and offshoring manufacturing jobs of the 1970s. Interested in solutions to addressing the needs that this population will have as they age.

**Shih-Kai (Sky) Huang-** Jacksonville State University professor examining hurricane evacuation behavior of older adults living in hurricane impacted areas, and how their evacuation decisions are shaped by their information-seeking behavior and their previous years of hurricane experience.

**Cynthia R. Harris-** National Congress of American Indians (NCAI)- Studying tribal climate adaptation plans together with local climate adaptation plans to see what these plans say about particularly vulnerable demographics. Has found that older adults are seen in these plans as liabilities whereas in Native cultures, older adults are respected as elders and knowledge holders. Intergenerational knowledge transfer from older to younger generations is particularly important.

**Matthew Van-** Graduate student in disaster science and management at University of Delaware, research interest is social isolation and loneliness in older adults and will be studying senior centers and their role in disaster preparedness.

**Thomas Brindle-** University of North Texas at Frisco- Studying economic community and disaster resilience.

Gardiner Brown- PhD student at University of California, Berkeley- Studying disability rights and natural hazards.

**Bruce Pollock-** State University of New York at Albany- Interested in studying terminology regarding older adults as well as how to make terms more accepting and inclusive, since "elderly" is not the right term. Has a background in meteorology.

**Nancy McPherson**- Hawaii Department of Hawaiian Home Lands- Planner interested in community resilience, planning, and preparedness in homesteaders in Hawaii. Homesteaders tend to be older, and communities are worried about what they should do in a disaster.

**Tihara Sommers**- Tulane University- Professor interested in older adults living in nursing homes and how emergency preparedness requirements were followed during COVID, using Centers for Medicare and Medicaid Services (CMS) data to evaluate compliance.

Li Chen- West Texas A&M University- Professor studying health and disaster communications, refugee populations, and preparedness among older adults within refugee populations.

**MJ Johns-** UC Santa Cruz- Working to design and analyze mini-games about wildfire preparedness, which are designed to be inclusive of all ages.

**Marie Medeck-** Has firsthand experience and guidance on how to assist hospice patients during disasters and is interested in how to personally prepare for disasters.

**Christopher Dyer-** University of New Mexico-Gallup – Anthropologist studying older adults and COVID isolation. Has previously published a book: Social Disability and Disaster, which is a comparative study focused on Scotland and Michigan as sites. Also studying loss of many older tradition holders due to COVID.

## **Objective 2: Key Concerns, Resources, and Best Practices**

Hurricane data from 20 years ago and 2 years ago was analyzed. Findings from this analysis suggested that older adults are more likely to get information regarding disasters via selective exposure. Older adults appear to have more specific preferences in how they look for data (i.e., they view certain sources as being more reliable sources) but are less likely to contact their peers, thereby making them more isolated. They may therefore be obtaining insufficient information but tend to make better decisions with the limited information that they have obtained. The suggestion is to create customized communication targeting older adults regarding disasters.

16 focus groups across the country about heat were conducted with participants over the age of 65 years. A lot of people in that demographic did not identify with the language used in the media at the time. CDC uses 65 years old because bodies are less able to deal with heat past the age of 65. Why does it matter now to talk about heat to older adults, if it was always hot during the summer?

The definition of an older adult as being somebody at the age of 65 years or older is used for ease and simplicity, but it would be better to use distinct categories for this demographic group based on the depreciation of function. Also, regarding these broader topics, how can researchers engage other people who are members of multigenerational families who would be interested in these issues?

New York City has created several programs regarding potential heatwaves. The wider "Cool Neighborhoods NYC" adaptation program contains a number of programs including the "Get Cool NYC" program and the "Be A Buddy" program helping neighborhood residents to help look out for older adults during potential heat wave conditions. In the case of the "Be A Buddy" program, it involves multiple community organizations in areas lacking trust in the government. There is also the EXTREMA app available at https://extrema.space/ which can be usable by family members of older adults so that if the heat reaches a certain level, the app can quickly contact relatives and other contracts to check in.

Interviews of older adult refugees show that their attitudes towards disasters drastically diverge from the rest of the population. The first surprising finding was that older adult refugees' perceptions of disaster preparedness are dramatically different. When interviewed, older adult refugees say that they are highly prepared for major disasters. But when asked in what ways they are prepared (i.e., having supply kits, emergency contacts, evacuation routes, etc.), it turns out that they typically have not discussed evacuation or taken any other basic steps. Their perception of disaster preparedness is that even if a fire or flood destroys their home, they are still able to survive. The hypothesis is that this understanding of preparedness is rooted in their traumatic background as a refugee. Therefore, researchers and public servants should not ask them if they are prepared, but instead should provide them with more detailed information about the specific damages that disasters can provide and also give them actionable and specific steps to take.

The second surprising finding is that older adult refugees do not trust people who look too professional (for instance, who are dressed very well), perhaps because they have previously had a lot of bad experiences with government professionals. They do not trust the government and so you should not dress too professionally when dealing with these populations. The suggestion is to try and build better relationships with community members to build trust in advance.

The CART program, or Community Action Response Teams (which are similar to CERT), are comprised of talking circles of people with disaster experience with the goal of seeing who knows a particular community. Everybody should have a wellness buddy within their extended networks. Right now, there is a significant amount of tv advertising for care facilities in which people can place their parents or other relatives, but this practice is in sharp contrast with landbound and spatially bound tribal practices, as well as cultural traditions in other societies which favor multigenerational homes. Wellness buddies encourage people to talk with each other beyond shallow answers such as "I'm fine," which would be helpful in really ascertaining disaster preparedness.

Clients receiving hospice care saw their social networks became smaller and smaller, and these networks would eventually be reduced down to "the trusted ones" as a result. A second observation is that patients wanted to be seen and heard. A likely inference is that both of these issues existed prior to hospice care. These older adults interacted with fewer and fewer people over the years even before they entered hospice. One suggestion is to figure out who are the "trusted ones" for many older adults prior to reaching the stage of hospice care. These "trusted ones" frequently include but are not limited to caregivers and social workers, many of whom belong to institutions. Therefore, messages from institutions can trickle down to the other "trusted ones" who are not part of institutions.

## **Objective 3: Challenge and Reshape Misconceptions**

We cannot always talk about older adults over 65 as losing capabilities since people age at different rates and many can remain continually active for an exceptionally long time. There needs to be more research regarding how older adults can be engaged.

Could the Department of Veterans Affairs create a cohort of veterans who operate as wellness buddies? How do we engage older adults to help our other older adults?

There is significant importance for older adults to have an emergency plan. One example was a research subject with an older adult relative who would have difficulty independently evacuating. If there were a communications failure, several different relatives would all independently try to travel to evacuate this person, which would lead to further risks and uncertainty as to who is responsible and therefore highlights the importance of having a plan.

One older adult recently passed away at an advanced age but had remained highly active throughout their life, even after retiring from a decades-long career. This person had experienced no shrinkage of their social network, which included folks from their career network as well as from literary spheres. This person had also served as a spousal caretaker several years earlier.

A lesson learned from the Navajo is that social relationships are critical, as well as the relationship with the nearby environment itself. Elders and ancestors should be a huge resource for the population in saving the planet.

There is also the issue of disaster compression, i.e., more frequent disasters arising, which also has implication for preparedness for populations of older adults in communities.

There should be a two-pronged approach regarding disaster communications and older adults. The first was previously discussed regarding consistent messages reaching "trusted ones." The second approach is to try to make messages personal to everybody to the highest extent possible. Many in the general population will ask themselves "why should I do something today when I can put it off until later?"

People may zone out messages directed specifically to "older adults" in general because they think "that's not me," particularly since older adults can range dramatically in how much range of function and autonomy they have in their own lives. A suggestion would be to try targeted messaging with the theme of "what have you done to prepare yourself and your family (including some specific older adults)?"