

Older Adults & Disasters: Findings from Hurricane Sandy

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During, and in the weeks the followed, Hurricane Sandy in October 2012, thousands of older adults remained isolated in dark, unheated apartments without sufficient food, running water, or medical assistance. Twenty-five of the 44 reported deaths in New York City were people over age 60. In early 2013, The New York Academy of Medicine (NYAM) launched an initiative to engage diverse stakeholders to work collaboratively toward creating better formal and informal support systems for New York's community-dwelling older adults before, during, and after disasters and other mass emergency events, such as power outages and heat waves. Through community engagement, strategic public/private partnerships, and policy recommendations, NYAM aims to devise creative solutions to improve the outcomes of future catastrophic events.

NYAM formed a multi-sector Older Adults & Disasters Policy Advisory Committee and engaged in a range of data-gathering activities to establish a comprehensive understanding of the needs and assets of older adults in disasters, as evidenced by Hurricane Sandy. A total of 14 focus groups were facilitated with older adults and frontline responders in the most seriously affected communities. Key informant interviews were conducted with 55 experts across diverse fields on topics such as sheltering, pharmacy, special needs registries, pets, technology, and volunteer coordination. A review of peer-reviewed and grey literature generated 125 relevant sources. Finally, an analysis of population-based and Sandy-specific data collected by partner organizations provided additional context.

The presentation will highlight the findings and recommendations that have materialized from this initiative. Topics for discussion will include older adults' risk perception and hurricane behavior, the basic and health-related needs that emerged, the critical role played by community, faith-based, and voluntary organizations, the leadership of older adults in the response and recovery efforts, and the impact of social capital and cohesion at every phase of disaster for older adults. Overall, the findings point to the need for a paradigm shift from a siloed disaster management system that promotes an often unattainable ideal of individual preparedness focused on personal stockpiling and checklists to a community resilience approach that underscores the role of social networks and integrates preparedness into activities of daily life.ⁱ

ⁱ 1. Acosta J, Stern S, Uscher-Pines L, et al. *Building community resilience to disasters a way forward to enhance national health security*. Santa Monica CA: Rand Corporation; 2011.