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Remarks by Lisa Marsh Ryerson, President, AARP Foundation

High-Level Panel Discussion on Emerging Issues: “The empowerment of people affected by natural and man-made disasters to reduce inequality: Addressing the differential impact on persons with disabilities, older persons and youth”

United Nations, New York, N.Y.

February 13, 2019

My focus today will be on the United States and the Caribbean — areas where AARP Foundation, the charitable affiliate of AARP, has considerable experience with disaster response.

Our vision at AARP Foundation is a country free of poverty where no older person feels vulnerable. And when a disaster strikes, few are more vulnerable than older persons. In the United States and the Caribbean, older adults consistently experience the highest proportion of disaster-related casualties.

After Hurricane Katrina hit the United States in 2005, ravaging New Orleans and other parts of Louisiana, almost three-quarters of related deaths were among people age 60 and over, despite the fact that they comprised only 15 percent of the area’s population. Almost half the deaths from 2012’s Hurricane Sandy, which affected the Caribbean and the entire eastern seaboard of the United States, were of people over age 65.

In a disaster situation, speed, mobility, quick reactions and easy access to transportation are crucial for survival. However, older adults who have serious health issues, disabilities or cognitive impairments — or who lack transportation — may not be able to evacuate when a severe weather event is imminent, making it difficult or impossible for them to reach evacuation sites or get the assistance they need.

Sometimes, seniors are reluctant to evacuate and leave familiar surroundings. After Hurricane Maria hit Puerto Rico in 2017, the median age of adults who either stayed behind or died was 50. Among the approximately 3,000 deaths that resulted from Maria, mortality rates were highest for poorer, older residents, especially men over 65. Those who remained in their homes had limited access to fresh food and water, health care, medications, and electrical service, because infrastructure and hospitals were destroyed. When I visited Puerto Rico eight months after Hurricanes Maria hit, access to these essentials still hadn’t been restored.

For seniors who have chronic conditions, disasters exacerbate them by interrupting care and medication regimens and making adequate medical care difficult to find or get to. Power outages mean that people with diabetes have no way to refrigerate their insulin, and patients who need weekly dialysis cannot get it. These are life-threatening hardships.

On the other hand, when seniors do evacuate — when they're thrust into unfamiliar surroundings — studies indicate that they're more likely to develop a health condition within 30 days. The strain and anxiety of a disaster can lead to added health conditions, as well as to mental health concerns. Following Hurricane Katrina, a study of nursing home residents found that there were nearly 600 additional deaths and more than 500 additional hospitalizations in the 90 days after the event.

Experts predict that global climate change will increase the frequency and severity of natural disasters. Moreover, the world's population is aging fast: Recent figures show that the number of adults age 60 or older globally is expected to reach more than 2 billion by the year 2050. In the United States, people age 65 or older will outnumber children by 2035.

Knowing all this, we must make it a priority to empower older adults in disaster-prone areas so they're able to establish safety and continuity of care. Each of us must look through the lens of vulnerable older adults and take action to help improve their quality of life. When we do that, we are helping people across all generations and we are building stronger communities.

Federal, state and local governments should explicitly plan for the needs of older adults and people with disabilities in their disaster-recovery efforts and include these individuals in planning exercises. Nursing home residents are particularly vulnerable and have special needs that must be reflected in evacuation or shelter-in-place procedures.

Another idea is for policymakers to pass legislation that allows patients to safely obtain an adequate supply of necessary prescription drugs during disasters. Collaboration between pharmacies and relief agencies could also help ensure that prescription medications are readily available at relief shelters.

One example of a solution that I would like to see implemented in communities is allowing vulnerable older residents to sign up for registries administered by community-based organizations. Registries can provide information about specific types of help — such as medical equipment, transportation or evacuation assistance — that at-risk seniors will need during an emergency, as well as make it easier for first responders and aid agencies to find them and care for them in the aftermath of a disaster.

We also have to reconsider policies that limit how government recovery assistance is used. We need to advocate for rebuilding codes that are age-friendly and adhere to accessibility standards, so that communities can take advantage of the opportunity to not just rebuild but rebuild better.

While governments play an essential role in both pre-disaster mitigation and post-disaster recovery efforts, philanthropy's role is just as important. We can advocate for the needs of older adults by funding coordination and communication methods that take into account how older adults access information, as well as their unique needs during times of evacuation or shelter.

But although it's important to be mindful of immediate needs, it's vitaly important that we consider how to help seniors establish long-term resiliency and enable them to prepare for — and recover from — disasters. For example, we should support workshops and seminars that help older adults learn how to access benefits and other aid in the aftermath of a disaster, and fund transportation mechanisms to ensure they can get to the workshops.

Since 2010, AARP Foundation has distributed more than \$16 million to national and local relief organizations to support vulnerable older adults as they look to recover and rebuild. In that time, we've learned some valuable lessons.

One is that direct financial assistance and legal aid are empowering and we have found they are less funded than other assistance programs. Funding and working with Legal Aid organizations on the ground has a profound impact for older adults in disaster-stricken communities.

Transportation is another key issue for older adults. For example, during last year's wildfires in California state, many seniors could not leave because they did not have a way to get out. The Camp Fire was notably disastrous for older adults. It completely leveled the town of Paradise, California, where a quarter of the population is age 65 and older. Many of these residents were housed in senior living facilities and mobile home parks, a large number of which were destroyed in the fire.

Although AARP Foundation's disaster work has focused primarily on grantmaking for post-disaster relief, we are also working with federal and local government agencies, nonprofits, and community-based organizations to assist with preparation and inform policy changes.

Preparation was foremost in a joint effort of AARP Foundation and AARP that mobilized volunteers to assemble and distribute thousands of bags filled with emergency preparedness supplies to families in two hurricane-prone areas of the United States: Miami, Florida, and Baton Rouge, Louisiana. The events called attention to the fact that about half of adults in the United States do not have emergency supplies and plans in place for a possible disaster.

On the policy front, my participation in Habitat III, the United Nations Conference on Housing and Sustainable Urban Development, reinforced my view that among the numerous difficulties low-income older adults face, housing may be the most significant. I was pleased when the General Assembly of Partners added a group on older persons. New directions in housing policy are needed, and it will take collaboration between governments, nonprofits and private entities to ensure that older adults live with dignity and independence in safe, affordable, accessible housing.

And above all, we must recognize the role that poverty plays in making older adults and the communities they live in more vulnerable to disasters. For low-income older adults, an extreme weather event or other type of disaster intensifies the struggles they already experience.

The poorest communities are often the hardest hit, especially areas where the poverty rate is high and where there is a risk of chronic flooding. As property values drop from the flooding and the local tax base erodes, those areas inevitably struggle to find the funds to build infrastructure to adapt.

What's more, low-income older adults cannot afford housing that was built to withstand a natural disaster, and they often can't afford the repairs needed after one strikes. The uptick in natural disasters wrought by climate change will only magnify their challenges. As a result, those who can least afford to move are most likely to be stuck in neighborhoods that do not have the level of resources needed to mitigate the damage through infrastructure upgrades and other means.

This is more than a logistical issue; it is fundamentally a moral one. The 2030 Agenda for Sustainable Development speaks to the truth of this, with its seventeen Sustainable Development Goals aiming to end inequality in all its forms.

And so, as we think about how to protect populations during a disaster, we must ask ourselves why we keep allowing the most vulnerable people to be put in the most vulnerable locations. And then, we must take concrete steps to shift that balance from one of powerlessness to one of empowerment.