

## Disaster Response and the Aging

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In the United States there are approximately 35 million people 65 or older (1 in 10): Expected to double by 2030.

Also having a master list of all of the residents was critical. First responders are not prepared to work with people with dementia.

The following are generalities, and you can't assume it tells you about the person in front of you. Some elders, for example, may actually have greater resiliency following a disaster – they've lived through other disasters. The physical strain, however, can be greater, and they may be more at risk for illness, injury, or death. The loss of a life's work/possessions may be especially hard. There is no longer a sense of time to rebuild.

## **Special issues with elderly:**

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- Sensory impairment: hearing, sight, touch, smell.
- Impaired mobility and the need for assistive devices.
- Less able to withstand extremes of heat or cold.
- More vulnerable to dehydration.
- Slowed reaction and processing time.
- Weaker, less muscle tone.
- Decreased stamina.
- Increased frequency of urination and decreased ability to delay.
- More complex medication administration (be sure to have a current list of medications, dosages, administration time as well as a supply of medications handy.).
- More dependent on caregivers who may be dealing with other issues (their own children, for example.).
- More sensitive to the stress of relocation.

## Dementia

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Half of people over 85 will be affected by dementia.

7 of 10 with dementia live at home with family or professional caregiver. Most people underestimate the impact of cognitive impairment/memory loss on the ability to function. Most first responders are not trained to work with people who have dementia and may attempt to intervene in ways that are ineffective or frightening/confusing to the person and frustrating to the first responder whose job is so urgent.

There are lots of illnesses we can imagine, but it's almost impossible for us to imagine what it is like to have dementia.

Something is wrong (a loud noise), but you do not have any way to make much sense of it or figure out how to respond. You ask someone nearby what is wrong. They tell you, but you can't remember what they said or even that you asked. You are confused and the fire alarm just keeps ringing. You ask what's wrong. They are annoyed. You don't know how to respond. You are frightened and others around you seem frightened, too, or agitated. People are running and busy. They won't stop to talk to you. Things are happening too fast. You want to go to your room, but they won't let you. You are hungry. You are agitated and need to walk but they tell you to sit down. You do, but then you need to walk and you get up. They tell you to sit down. They seem angry with you. They give you a snack wrapped in a cellophane wrapper and you don't know how to get it off or you know how, but you can't do it. You try to bite it. And the fire alarm keeps ringing. Somebody is crying. Somebody is yelling. Somebody is singing. And the noise doesn't stop.

Lights, sirens men in big suits and hats carrying things that look scary (hatchets) are everywhere. There's yelling. And the sound doesn't stop. You don't feel safe. The man comes up behind you. You do not know him. You hit him.

## **Responder/ Caregiver tips under ordinary circumstances:**

- Maintain structure and routine.
- Avoid overstimulation.
- Limit Choices: don't ask open-ended questions. For example, instead of saying "What do you want to eat?" you can ask "Would you like soup or a salad?"
- Limit background noise: ensure that there is as little background noise and activity as possible.
- Have patience:
  - Try not to ask questions that require memory such as: "What did you have for dinner?" or "Have you had dinner?"
  - Give the person some time, and if he/she is struggling to find a word, be prepared to provide the word that.
  - Maintain eye contact, use gestures and visual cues to help you get your message across.
  - Keep sentences short and simple.
  - Maintain calm and reassuring tone of voice.
  - Avoid arguing.

A crisis situation challenges or complicates most or all of those recommendations.

## Response Tips:

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Communication:

7% verbal;

55% facial expression, tone, pitch, inflection, speed, volume

38% body language

The burden of communication is on the speaker not the person with dementia.

- Approach from the front.
- Use a calm voice.
- Give one instruction at a time.
- Repeat instructions as many times as is necessary without becoming exasperated.
- Do not seem demanding.
- Reinforce and reward.
- Make things as familiar as possible.
- Minimize distractions, noise, and stimulation.
- Do not be disturbed by repetitive behaviors and questions.
- Make eye contact and smile.
- Speak slowly if necessary.
- Demonstrate what you want the person to do.
- Attending to tone (increase volume, while maintaining normal tone), demeanor, gestures, try to get the gist of what the person is saying even if you do not understand the words.
- Do not use logic, reason. (You can't do that because.....)

- Use distraction.
  - Food
  - Songs
  - Simple activities, when possible
- If they make a statement or request that either doesn't make much sense in the context or isn't possible, don't contradict. Acknowledge what has been said, but take the conversation in a different more calming direction.

e.g., "When am I going home? My husband is waiting for me to make dinner?" You shouldn't say, "You can't go home, or your husband doesn't live there now or this is your home now." Rather you could say, "I bet you are a great cook what is your favorite food?" Engage in conversation, as they are able, but distract from disturbing or upsetting thoughts and redirect, "For now, let's sit and enjoy a snack."

For people who are non-verbal,

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- Music: Some people with dementia can understand directions when they are sung rather than stated.
- Light touch. Ask permission before embracing, however.
- Pet therapy (but respectful of animal phobias)

## **Bizarre/Bad/Confusing Behaviors**

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Most behavior has meaning and communicates something, a feeling a need. Try to see behavior problems as the solution to some problem that the person is experiencing. Try to understand the behavior or if it's not harmful, ignore it unless it the person is trying to express a need.

- Fear
- Frustration
- Pain
- Isolation
- Confusion

### **Responses:**

- Ignore harmless behaviors, even if they are strange, but maintain a safe environment for all.
- Redirect
- Reinforce alternative behaviors