



## Letter to the Editor

### Older Adults Living Alone: A Neglected Population in Times of Disaster

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In a world increasingly shaped by the frequency and severity of natural disasters and public health emergencies, one vulnerable group continues to be systematically overlooked: older adults who live alone (1). From devastating earthquakes to global pandemics, disasters expose the structural gaps in our preparedness systems, gaps through which far too many older individuals fall (2). As societies strive to build more inclusive and resilient emergency responses, now is the time to bring attention to this neglected population (3).

Older adults living alone are at heightened risk during disasters for several reasons (4). Physically, many face reduced mobility, making evacuation or access to aid challenging. Cognitively, they may struggle to process fast-moving updates or retain critical instructions (1). Socially, isolation deprives them of nearby support networks, increasing their vulnerability (5). When the power fails or emergency alerts sound, many older adults face danger not due to frailty but due to solitude (6).

The COVID-19 pandemic starkly illustrated the consequences of this neglect (7). Studies from various countries revealed that older adults living alone were more likely to experience psychological distress, food insecurity, and delayed medical care during lockdowns (1). Their risk extended beyond the virus itself to the cascading effects of isolation, miscommunication, and systemic oversight. These lessons, however, risk being forgotten as global attention shifts to new emergencies (2, 3, 5).

Ultimately, redefining the concept of community resilience is essential. Resilience must encompass not only infrastructure and logistics but also the social fabric that binds individuals together (1, 4, 5, 7). A truly resilient community is one that safeguards its most isolated members not just during crises, but in the everyday systems that precede and follow them (5, 6).

Policymakers, humanitarian organizations, and concerned citizens must shift the focus of disaster preparedness and response to include isolated and

vulnerable older adults. This population deserves targeted interventions, inclusive communication strategies, and proactive support mechanisms. Their safety is not a peripheral concern it is a measure of our collective humanity.

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