

More That Matters: Emergency Preparedness & Generator Safety

With Dr. Rosanne Prats

Clay (00:00):

Ready to go off of the beaten path? Bet you are. Welcome back to another episode of Vax Matters.

Diane (00:14):

We all deal with natural disasters and emergencies at times, and if you live in Louisiana, you know it's usually hurricanes for us. What matters is how prepared we are to face these emergencies. Our episode today focuses on not only emergency preparedness, but generator safety before, during, and after a storm. And here to give us the game plan is Dr. Rosanne Prats, Executive Director of Emergency Response at the Louisiana Department of Health and Hospitals. Welcome, Dr. Prats. Thank you so much for joining us today.

Dr. Prats (00:49):

Thank you for having me, Diane.

Diane (00:51):

It is our pleasure. So, you know, Dr. Prats, in the, um, in- introduction, I did mention that hurricanes... (laughs) pretty big deal down here in Louisiana. What are the other possible hazardous situations that our residents in this state need to prepare for and definitely to have a plan for?

Dr. Prats (01:09):

So, hurricanes are definitely at the top of our list for hazards, followed by flash flood-flooding, tornadoes, and then more recently, uh, freezes. So, for flash flooding, you know, we tell our, uh, population, "Don't drive through areas with high water," and then tornadoes, we try to tell folks, "Pay attention to our local weather impacts," 'cause tornadoes can be what we call no-notice events. You don't really know where or when these things will strike. And then freezes, which we haven't seen, um, like up- up north, in the northern parts of our, of our country. But deep freezes can cause, uh, roads to be frozen or slick, increasing opportunities for wrecks. Um, and then, freezes can also cause impacts to our drinking water systems, so we ask our residents to pay attention to notices from a water systems recor- regarding boil water advisories.

Diane (02:06):

It really is interesting that we're talking about freezes here in Louisiana, but anymore, you know, we have to cover all the bases and that absolutely, is something and you know, sometimes I think our residents aren't really thinking about that, they're not really prepared, like the other, well, quote unquote, occurrences that we're more familiar with, because we haven't had that many freezes. So that was an excellent point to bring up. Thank you, Dr. Prats.

Clay (02:31):

So what about building a plan for families? And people hear that all the time during hurricane season, either before the season or before an imminent storm, to have a plan, have a game plan, get a game plan. But here we are now as, as we record this episode early in the year, what would be your advice for putting a plan together from your perspective all the way ahead of hurricane season or any other severe weather event?

Dr. Prats (02:54):

You know, you wanna consider in advance what it, what it is that you may need for organizing a trip. Uh, what you're gonna would need along, along the way on your, your transport needs. Your, uh, like, what would you need on the evacuation? Um, and then if you're staying in an unfamiliar setting, what would you need there? So things that you might need, let's say you're driving somewhere. You wanna bring those diapers, that formula, their nutritional needs that they may have.

Dr. Prats (03:22):

Um, when you start looking at where you might want to stay, consider staying with a family member or a location with familiar surroundings, um, as opposed to a shelter. Sometimes our shelters are you, you know, they're by nature, mass, um, areas where quite a few people are and sometimes that can be disruptive to the family u- unit, especially when some of, some of our young children today have autism.

Dr. Prats (03:53):

Um, another thing to consider is making sure you have an insurance card, if you need medical care on route or at that alternate location. Um, so when you leave for an event, you're going to, from an area that's familiar to you, you know what the patterns are, you know where you're getting your medication, you probably know the pharmacist, um, and, and you're docking your providers, but then when you go to another location, all of that is, is disrupted.

Dr. Prats (04:23):

So trying to think in advance. Um, getting those documents together so that you can, um, at least control the things that you can control. Because there's so many things that you really can't control when you are in another location. Um, another thing to consider is whether the family members have chronic conditions. And so this is where your prescriptions, having additional prescription and/or medical supplies would be necessary.

Diane (04:53):

And you know, doctor, there is a lot to think about. There are... What you just, what you just said probably for the past two minutes, there is a lot that needs to be taken into consideration and needs to be thought through, you know, planned for, carried out. So that's why when you touched on, you said, "Advance planning." When you're thinking straight, when you're not in the, kind of, the emergency situation, "I gotta do this. I gotta do that? Oh my gosh. What am I forgetting?" That's why we always say, when there is not an emergency, you need to do that and you know, we, we do that a lot. We always say, "Get a game plan Louisiana. Get a game plan." We, uh... But sometimes that becomes white noise. It should not become white noise. It needs to be something that we all listen to and pay attention to. So thank you for talking about advanced planning.

Dr. Prats (05:46):

Yes and, Diane, sometimes what we call that is being mentally prepared.

Diane (05:49):

Yes.

Dr. Prats (05:50):

Just taking that quiet time to go through your checklists. And I think all of us have that, um, behavior pattern of, "Let me, let me do my checklist." So once you sit down and just go through a checklist of what you would need if you had to go on a week, um, and some of our disasters, we've seen recently for Ida and Laura had been more extensive. Um, six weeks, eight weeks. Think about that, getting mentally prepared and coming up with that plan.

Clay (06:20):

You know, I think it also has a positive impact on avoiding anxiety when you've got a plan, when you know about-

Diane (06:28):

Exactly.

Clay (06:28):

... things that you need in your house. If, if there is a weather event that makes roads impassable, or if there's a hurricane, if you got your stuff together already, it, it relieves stress in your house and then you don't have to run out and scramble to find water or anything at a, at a grocery store. That too is a big positive, right?

Dr. Prats (06:47):

Absolutely, Clay. Absolutely.

Clay (06:50):

And wha- what's a common thing people forget (laughs) when they're putting their emergency plan together-

Dr. Prats (06:55):

(laughs)

Clay (06:55):

... or thinking about what they're going to take? Uh, something common that you, tha- that people just leave out.

Dr. Prats (07:01):

Um, so prescription, your medical information, your insurance card, identifying papers. So I guess what we're seeing over time, and I've been here since, you know, Katrina, and then our next big storm was Gustav and Ike-

Diane (07:17):

Mm-hmm. Yes. (laughs)

Dr. Prats (07:18):

... and the, uh, Laura, Ida. We're seeing an increase in chronic conditions in our population.

Clay (07:23):

Mm-hmm.

Dr. Prats (07:24):

And so disasters can cause an extended disruption of a person or family's life and lifestyle. So making sure that those chronic conditions are managed, and not further disrupted by changing their treatment plan, due to unavailable information on the type and dosage level of that person's medication is gonna be, um, important. Sometimes people will put their pills in a little container. Then they'll go, you know, to those, you know, either shelter environment or to the pharmacist in this area that they've now relocated to, and say well, "I take the blue pill, and I take this white pill."

Dr. Prats (07:59):

And sometimes if the pharmacist has been around for a while, they can probably cobble together what that was. But it makes a big difference in, you know, making sure that these chronic conditions are managed, making sure your treatment plan doesn't change. Um, just for heart medications alone, there might be 20 different types of medications out there. Um, and your doc probably prescribed a certain one for you. Um, so if you just tell the pharmacist, "Well, I need another prescription of, you know, heart medication." They may change it up not knowing what your treatment plan is. So again, having those prescriptions, bringing your medical information, your insurance card and your identifying papers will ensure that those, um, chronic conditions can be managed wherever you are.

Clay (08:50):

See, that's interesting. Wh- what do you think about having that stuff written somewhere, either on your person or, or with your stuff? If you have a number of prescriptions or medicines-

Dr. Prats (09:03):

Yeah.

Clay (09:03):

... that you're taking just, in, in-

Dr. Prats (09:03):

Mm-hmm.

Clay (09:04):

... the in the event that you're incapacitated, someone knows what you, what you have to have and how often you have to have it.

Dr. Prats (09:11):

So, uh, a practice that I do is, uh, if I have a medication on the, you know, they'll, they usually give you your little bottle and then they have all those papers attached to it.

Clay (09:22):

Mm-hmm.

Dr. Prats (09:22):

And then some on those papers are what your medication is and I'll simply rip off a little excess sticky.

Clay (09:30):

Mm-hmm.

Diane (09:30):

Yes.

Dr. Prats (09:30):

And then I'll put it on a piece of paper. And then you've got all of your list of medications, the provider that prescribed it to you, the dosage, the name etc. And all you have to do is, you know, peel it off and put it on a, on, on another piece of paper and bring it with you.

Clay (09:45):

That's good.

Diane (09:47):

And that, that, that is a great, that is a great thought to keep in mind too, because so many of us we might not keep all of the... Everything together, you know, that was a prescription. Then you have all, you know, the, the papers that list everything that's in it and what it does. So that, that is, that's an excellent plan.

Clay (10:05):

Mm-hmm.

Diane (10:05):

And you know, you know what? And Clay made the point, that you have... I tell you what, the weather world and just world in general, when we have an emergency, you do have a tendency to get anxious.

Clay (10:17):

Yeah.

Diane (10:18):

And that anxiety and as you said Doctor, we can't control that.

Clay (10:21):

Yeah.

Diane (10:22):

But we know what we can control. Is kind of like doing a dress rehearsal.

Clay (10:26):

Mm-hmm.

Diane (10:26):

I know that sometimes whenever I'm getting ready to go out of town for a few days or whatever, I kind of put things, you know, two or three days ahead of time that I use every day.

Clay (10:35):

Right.

Diane (10:36):

And just to kind of put them in a corner of my bathroom just that I remembered because you do it by rote.

Clay (10:40):

Yeah.

Diane (10:40):

You don't really think about what you use until you're gonna use it or you need it. So that would be the same basic premise of what you do. That's, that's your daily routine.

Clay (10:50):

Right.

Diane (10:51):

Make a plan with your daily routine so you're not caught off guard and you're not caught without taking something like your medication-

Clay (10:57):

Mm-hmm.

Diane (10:57):

... that's vital to your well-being. And as you said Doctor, sometimes it stretches out for a few days or a few weeks or unfortunately several weeks.

Clay (11:06):

So you know, the, the other part of this is because we've been through, as you just enumerated, doc some of the hurricanes and storms that we've dealt with since Katrina. Mental health, obviously because of what you do is a huge, a huge part of this. Specific to anxiety, what would be your advice outside of planning when you're talking about emergency preparedness and preparation to make certain that people could, could be focused on what they need to do-

Diane (11:33):

Mm-hmm. Right.

Clay (11:34):

... without having any, you know, any issues because of the anxiety that's created by wha- what's in the media and in social media whenever there's some bad weather event or pandemic or something else coming?

Dr. Prats (11:47):

Uh, so to me that would be, you know, being mentally prepared. And I think, Clay and Diane, we have talked about this, um, a little bit that might be worth exploring, um, a little bit more. Um, so being mentally prepared, just going into it eyes open, you know, knowing that disruptions can cause stress. Um, going through your checklists, when you are not in that anxiety, um, provoked atmosphere. Um, having that plan ahead of time, in emergency preparedness, we call, we call it resourcing your plan. Um, you know, for, for some household, household, resourcing a plan could be challenging 'cause it could, you know, could be costly to put aside three days, six days or maybe a week of all the supplies that they may live on, get a game plan.

Dr. Prats (12:42):

But knowing what those costs could be, again, going into it with some working knowledge of what those costs, um, would be in the future, at least, you can go into it knowing what you may be facing. Um, talking about the plan with your family members so that-

Diane (13:02):

Yes.

Dr. Prats (13:03):

... they are engaged in the planning as well and then you go into it as a family. 'Cause sometimes having your family with you and engage with you throughout all those phases of planning and preparedness, um, lessens some of that stress. You're, you're going through it together. And there's a bonding that occurs with that.

Diane (13:22):

And that was my next, uh, point to the next question. To make sure the whole family is on the same page. To make sure that parents, you know, relate to the children and again, in a calm, in a calm manner because you don't want the children to be afraid and you just need to do-

Clay (13:38):

Right.

Diane (13:39):

... you know, what you can as the parent to make sure that everyone knows. And if you need to do a little rehearsal for, you know, for tornadoes or what have you, that they're not afraid, that they know what to do.

Clay (13:50):

Mm-hmm.

Diane (13:51):

And that's what you were saying, you know, Doctor, that you need to do all that ahead of time. And you know, something else we were thinking about that generators, you know, when you-

Clay (14:00):

Oh my goodness.

Diane (14:01):

Yeah, yeah, yeah. Yeah, generators, you know, pretty big part of life around here-

Dr. Prats (14:05):

(laughs)

Clay (14:05):

(laughs)

Diane (14:05):

... because, because, because, you know, um, during... Especially during hurricane season or what have you, there also and we hear this so much I know the weather reports always talking about-

Clay (14:15):

Yeah.

Diane (14:15):

... "This is your safe, this is your checklist or the safety for, you know, generators." They're very hazardous, all of these ways we know, uh, if they're not handled properly. And I... One of the big ones, people always wanna leave their generators on at night.

Clay (14:29):

Or move them inside, for some reason.

Diane (14:31):

Yeah, inside. Yeah. There's... Yes. So can you go through some of the basic generator safety reminders for our listeners? I mean, this is very critical. And again, it's good to do this now ahead of time, ahead of any, hopefully, disasters that we have to face during the upcoming months.

Dr. Prats (14:49):

So yeah, the biggest takeaway is that when the power goes out, we tend to use generators, but we need to keep those generators outside.

Diane (14:56):

Mm-hmm.

Dr. Prats (14:56):

And we find that some people wanna bring their generators inside because it might get stolen.

Diane (15:03):

Yeah.

Dr. Prats (15:03):

Um, which is, you know, a sad state of affairs.

Clay (15:03):

Right.

Dr. Prats (15:05):

But it's not worth your life. Um, so there's two hazardous issues to consider here. The first is an environmental exposure issue. When a generator is running, it emits the carbon monoxide, which is a tasteless, odorless and colorless gas. And breathing high levels of it can cause a carbon monoxide poisoning which can cause severe illness and even death.

Clay (15:28):

Mm-hmm.

Dr. Prats (15:29):

Um, so to mitigate this exposure, you know, never use a generator inside your home or garage. Even if the doors and the windows are open. Um, you wanna use it outside and more than 20 feet away from your home doors and windows. So again, the first thing you want to limit is the environmental exposure to carbon monoxide.

Dr. Prats (15:49):

And then the second is a safety issue. Um, make sure to follow the directions supplied with the generator. Um, to avoid electrocution, keep the generator dry and don't use it in the rain or wet conditions. And then, you know, parts of the generator can spark and ignite the gasoline fumes or spills which then, which then can cause the generator to cause... Uh, to catch fire or even explode.

Dr. Prats (16:17):

Um, so again, it is... The takeaway here is keep your generator outside when you're using it and limit the environmental exposure from the carbon monoxide. And, uh, from a safety perspective, you know, make sure you have to, to use it appropriately so that it doesn't cause fire or explode, um, on you.

Clay (16:39):

(laughs) This whole conversation triggers some bad memories-

Diane (16:43):

Oh, gosh. No, kidding. Oh.

Clay (16:43):

... back from, (laughs) from Gustav in 2008.

Diane (16:44):

Mm-hmm.

Clay (16:46):

And, the the gas lines for the generators and, and you're so right doc about people not... My neighbor had one and before I can get to him to help him, that thing went up like Roman candle.

Diane (16:56):

Did it really?

Clay (16:57):

And oh, my... It was not good.

Diane (16:57):

Oh, gosh.

Clay (16:58):

But the thing is, like you said, people who've never handled them-

Diane (17:01):

The don't...

Clay (17:01):

... you go out, you buy 'em-

Diane (17:03):

Mm-hmm.

Clay (17:03):

... and you don't realize that they're very, very dangerous.

Diane (17:06):

There's that safety, "I'm gonna be okay. I'm, I'm okay. I've got my generator."

Clay (17:09):

Right.

Diane (17:10):

But they don't know how to follow through. Oh, my gosh.

Clay (17:12):

Yeah. And, and I think that is something we cannot talk about enough, especially with hurricane season being not that far away and people are getting... Now, even with people who have them sitting forever, and you haven't used them and then you just did.

Diane (17:24):

Mm-hmm.

Clay (17:25):

There's just so much about that. It would... When you think about that, going back to the generator aspect, is there more that could be done in terms of warning the public about those, particularly for people who have never owned or operated one?

Dr. Prats (17:43):

Boy, that's a tough one. Um, again, it goes into, you know, being prepared for a disaster. There's so many, um, TV, um, press... Or press releases, and we make sure the governor goes out there and starts talking about the generators, safety precautions. Um, and the local channels talk about it. And when people buy generators at the, um, store, information is placed on those.

Clay (18:13):

Mm-hmm.

Dr. Prats (18:13):

So I think we try to use as many avenues as can to provide some education, um, on that. Um, you know, when you take a look at hurricane, um, Ida, which was one of our last storm-

Clay (18:27):

Yeah.

Dr. Prats (18:27):

... recent storms.

Diane (18:28):
Oh, gosh. Yeah.

Dr. Prats (18:28):
There were, like, 30 deaths and 20% of those were related to a generator.

Clay (18:33):
Wow.

Diane (18:33):
Hmm.

Dr. Prats (18:34):
Um, so yeah, if there's more things that we can do, we certainly, uh, appreciate those thoughts.

Clay (18:39):
Yeah.

Dr. Prats (18:40):
Um, but we, we really wanna make sure that people know to or how to appropriately, um, operate, um, a generator.

Diane (18:50):
And you know, maybe the first-time people even think about this, Doctor, as you said, Clay, they have it.

Clay (18:54):
Mm-hmm.

Diane (18:55):
They have that quote unquote insurance policy because they-

Clay (18:58):
Right.

Diane (18:58):
... they're gonna have electricity, they got it.

Clay (19:00):
Right.

Diane (19:00):

But they're, they're not ready.

Clay (19:02):

Nope.

Diane (19:02):

They don't... And then again, that's what we're talking about the stress of the situation-

Clay (19:06):

Right.

Diane (19:07):

... trying to get all, you know, all together trying to know what to do. You know, Doctor you did say that it needs to be outside. You said, not even in a garage with a door open.

Clay (19:15):

Yeah.

Diane (19:15):

What about... Is it carport... Can you... Is it... Can you have it under a carport or should it not be... I don't know, I don't have one. I don't know.

Clay (19:23):

You said about 20 feet away from doors windows, correct?

Dr. Prats (19:27):

Yes, yes. Just so long as that carbon monoxide emissions

Diane (19:31):

Oh, okay.

Dr. Prats (19:32):

... don't get into the house. And 20 feet outside. Um, 20 feet outside. You wanna make sure that the carbon monoxide is not going in through your windows-

Diane (19:39):

Oh, okay.

Dr. Prats (19:40):

... and then your front doors.

Clay (19:43):

Yes.

Diane (19:43):

Mm-hmm.

Dr. Prats (19:44):

Um, yes.

Clay (19:44):

Well, you know, you w-

Dr. Prats (19:45):

And then there is generator safety tips out there that you can find on, um, m- most of our government-

Clay (19:48):

Mm-hmm.

Dr. Prats (19:49):

... you know, (laughs) websites, from FEMA, to even LDH's website on safety precautions on that.

Clay (19:58):

And I recommend FEMA and the state over most other sites to get information-

Diane (20:04):

Mm-hmm.

Clay (20:04):

... on how to operate that stuff. You referenced carbon monoxide, uh, poisoning. What are some signs that people should be aware of? 'Cause you talked about being, it being an odorless, colorless thing that, uh, could impact you. What are some signs that you might have a problem with that?

Dr. Prats (20:19):

Yeah, um, so I guess I'll start with, you know, again, carbon monoxide, odorless, so it's difficult to tell that you're being exposed. So it's only during those late stages, stages of exposure that you would see the signs and symptoms. So we don't want to depend on the symptoms because of that it could be too late.

Clay (20:39):

Mm-hmm.

Dr. Prats (20:40):

But the most common symptoms are headaches, dizziness, weakness, upset stomach, vomiting, chest pain and confusion. And who's to say that you're not feeling those just because you're anxious?

Clay (20:52):

Mm-hmm.

Diane (20:54):

Exactly. Yeah.

Dr. Prats (20:54):

And you just... You, you'll only... So again, um, for this reason, it's important to have a battery-operated carbon monoxide detector, um, in your home.

Diane (21:02):

Yes.

Dr. Prats (21:03):

Um, again, just impressing upon our folks here that this carbon monoxide poisoning, um, you'll see the signs and symptoms at late stages of exposure and you wanna make sure that people are not exposed. So don't wait for those things to occur. Have something like that battery operated carbon monoxide detector. So that alarm goes off and you know to do something about your, your generator.

Diane (21:31):

Well, you just on another point, just to say that that detector, besides having a generator, that again, that can save a life, just in, just in general to have that outside your bedroom. I know that my family lives up north and my nieces gave a detector, I believe it was maybe as a gift Christmas gift or whatever, to my parents, to their grandparents. For the peace of mind that they have that, that's the whole thing too. These are important, no matter, what in emergencies, without emergencies to have that peace of mind.

Clay (22:04):

Mm-hmm.

Diane (22:04):

And so that's something that we should have anyhow, in the event of, of something unknown happening, to keep us safe, and then to have that extra added protection. If in the event that there is a, a natural disaster with, uh, with that. Then we do have, uh, the generator. So yeah, thank you Doctor, for reminding us about that as well.

Diane (22:24):

Now, we talked about the emergency, you know, preparing for an emergency, but what, what can you say or what tips or thoughts do you have for our, our listeners today about after a storm, after a

freeze, after a flood? There, there, I'm sure, are important safety tips or being careful and staying safe after a natural disaster that you'd like to share with us today.

Dr. Prats (22:50):

Absolutely. So after a storm, you know, there's gonna be hazards, um, um, backwater flooding, uh, flood water contamination. Sometimes floodwaters have the overflow of sewage. Um, so walking through, um, you know, floodwaters can cause aggravation of cuts and stuff.

Clay (23:12):

Mm-hmm.

Dr. Prats (23:12):

So you wanna make sure that cuts are not getting more random and sore and infected. Um, so stay aware of the flood water contamination. Um, it may not always be avoidable, but you really want to, you know, clean up well after that and monitor this cuts. Public drinking water supplies may not be safe in the aftermath of a flood, so pay attention to boil water advisories and other public health alerts through the local radio, TV broadcasts.

Dr. Prats (23:41):

Uh, we do have a list of boil water advisories that can be found on our website. LDH's website, for safe drinking water. Um, again, if you have questions about your water, you can also contact your water system. Um, there's also increased debris after storm. So debris, you might have snakes and other rodents hiding in that debris-

Diane (24:05):

Oh, that, yeah.

Dr. Prats (24:05):

... so you wanna be aware and careful of that. Um, the collection of debris can cause injuries as people try to, you know, use their chainsaws maybe for the first time (laughs) or-

Clay (24:17):

(laughs)

Dr. Prats (24:18):

... step on risky objects.

Diane (24:19):

Hmm.

Dr. Prats (24:20):

Um, so during this timeframe, there's also an increased demand on the medical infrastructure. So if there's increases all the way around, you know, there might be delays in seeking access to care. So you wanna go about this cautiously. So that, uh, one; you can prevent, you know, a situation from

occurring for your own personal safety, but at the same time knowing that there's, there's an overall increase in these issues and lots more people seeking care during this timeframe. You wanna be aware of that, um, as well. Um, other things, um, heat exhaustion or dehydration. Um, exposed electrical wires. Um, you know, you wanna be careful of those, um, items. And then, you know, be sure that you're up there on your vaccinations, and maybe that's part of your pre-plan...

Diane (25:16):

Yes, yeah.

Dr. Prats (25:17):

... especially like tetanus. And [inaudible 00:25:19].

Diane (25:19):

How often do you need a tetanus doctor? I, I don't remember, is that every 10 years for tetanus?

Dr. Prats (25:24):

10 years.

Diane (25:24):

Okay.

Dr. Prats (25:25):

Every, every 10 years.

Diane (25:26):

Okay.

Dr. Prats (25:27):

And if you don't know, probably check with your provider.

Diane (25:30):

Mm-hmm.

Dr. Prats (25:30):

I know as of long ago, they would give out those little cards that said, had your tetanus shot.

Diane (25:34):

Right.

Dr. Prats (25:34):

(laughs).

Diane (25:35):

Right.

Dr. Prats (25:35):

But that was a long time ago. (laughs)

Clay (25:38):

Have you found the, the... That we, as a, as a state have become more efficient about dealing with this? I mean, you referenced Katrina. I mean, we've had-

Diane (25:46):

Mm-hmm.

Clay (25:46):

... almost a half dozen major hurricanes. Since then, we've had the great flood in the capital city region a, a few years ago. Are we more efficient now at dealing with these things? Or do we still have a long way to go?

Dr. Prats (26:02):

Um, so that's a tough question, Clay. I feel from the emergency preparedness side, we are sharp and crisp-

Clay (26:09):

Mm-hmm.

Dr. Prats (26:09):

... in our response when it comes to, you know, how to open shelters. Um, we know how to coordinate things with each other. We can push out talking points. And you can anticipate what these issues will be before, during and after a storm. Um, but there's also challenges that Louisiana faces as, you know, as a state that's relatively poor.

Clay (26:37):

Yeah.

Dr. Prats (26:37):

Um...

Diane (26:37):

Mm-hmm.

Dr. Prats (26:38):

So sometimes those challenge- along with those challenges, comes the population that really depends on government services to provide, um, interim and long-term sheltering and evacuation support. Um, so that is where the balance point occurs with trying to provide all these services, um,

to as many people as we can, but at the same time we truly rely on people, making sure that they have their own bootstraps, so to speak. Um, and there's not enough, uh... There probably will not be enough services if we had reservations for all those that may need assistance.

Clay (27:20):

Yeah, I agree. I think the way information is delivered from the state level during a hurricane i- is amazing there. It's an advanced.

Diane (27:30):

Yep.

Clay (27:30):

It's plentiful during and then the after-action reports are always very thorough as well and people know where they can go to get the information and obviously, uh, to Dr. Prats point, Louisiana is a poverty state. We have a high poverty population here. I think we're about 5%, the national poverty rate. But we do a good job, I believe, of dealing with these issues.

Diane (27:52):

Yes.

Clay (27:54):

Just with Ida, most recently here, the way the state got information out because of the power losses and everything you deal with. How does technology... How has technology aided... Well, first, your response to that point. And then I'll ask, uh, secondarily to that. How has technology aided you in getting information to the public in the last, say decade or so?

Dr. Prats (28:16):

Um, so I would say that Louisiana has no shortage of plans.

Clay (28:21):

Mm-hmm.

Dr. Prats (28:21):

We've been through probably every disaster now, national wide.

Clay (28:25):

Right.

Dr. Prats (28:25):

And I can't believe we've all gone through a pandemic as well.

Clay (28:28):

Right, right.

Diane (28:28):
Oh, my gosh, yeah.

Dr. Prats (28:30):
We've gone through hurricanes, we've gone through, uh... It's, it's almost like we're the disaster lab of the state, of all the states. (laughs)

Clay (28:36):
I think we're the toughest state in the country.

Diane (28:38):
(laughs) We are.

Clay (28:39):
I go... When I travel, I tell people Louisiana, my state is the toughest state-

Diane (28:44):
Yeah.

Clay (28:44):
... in America.

Diane (28:44):
We're survivors. We're survivors.

Dr. Prats (28:46):
(laughs) Yes, indeed.

Clay (28:47):
Yeah.

Diane (28:47):
Yeah.

Dr. Prats (28:48):
Yes, indeed. We're a resilient, we're resilient community.

Diane (28:50):
Mm-hmm. Yep.

Clay (28:50):
Yep.

Dr. Prats (28:51):

Um, no one's ever died 'cause it was a lack of food. But somehow, people-

Clay (28:56):

No. (laughs)

Diane (28:56):

(laughs)

Dr. Prats (28:56):

... we have the food, there's a lot of food for you to share. Right?

Diane (28:59):

Come on over. We got something going on over here. Yeah.

Clay (29:01):

Like, how do you create a gumbo, in August, with no power but I've seen it done. (laughs)

Diane (29:06):

They, they're done, yeah.

Dr. Prats (29:07):

We will figure that one out.

Diane (29:08):

Yep. Mm-hmm.

Clay (29:08):

(laughs)

Dr. Prats (29:10):

We'll figure it out. Um, but on the question of technology, um, gosh, there's so many little, um, um, opportunities and challenges that we've overcome with technology. So one has been drones.

Clay (29:25):

Mm-hmm.

Dr. Prats (29:26):

Um, some of the things-

Diane (29:27):

Didn't think of that. I didn't think of that, uh.

Dr. Prats (29:29):

... that we do during a, during a disaster is to return, the reinter the cemetery, the intermittent. So, uh, we not only have to bring families back to their homes, ultimately, that's, that's the goal. But those that were disrupted, through the storm, you know, um, from their graves, etc. We have to put back and in the past, we would have to have low flying aircraft, trying to identify where those graves and stuff have been upturned. But now we can do that with drone technology. And, um, you know, identify what the topology looks like. Um, do some planning with that. Um, so the drone technology has assisted us.

Dr. Prats (30:15):

Um, there's some other communications technology that, that we've explored and used during Ida, um, so that we can connect various platforms together and radios together and bring up communications as quickly as we can. Um, that's another example. Um, so yeah, technology has greatly assisted us in emergency preparedness, planning, and response.

Diane (30:42):

It is all kind of part of the puzzle, I think, Dr. Prats, that you have the puzzle pieces and you've got this and this and this, and you have these folks over here, trying to help, you know, disseminate, disseminate the information. You've got, you know, the, the doctors. You have that unit, then you have the citizens who need to do their share, like you said-

Clay (30:59):

Mm-hmm.

Diane (30:59):

... you, know, "Pull yourself up your bootstraps, you can do it." And the puzzle pieces come together, and they fit together and they fit together well, and we can make this work as Clay said.

Clay (31:08):

Yep.

Diane (31:09):

We are... We're strong.

Clay (31:11):

Yes, we are.

Diane (31:11):

We are strong people, and we will, we will survive. And we'll get through this. And I think we're an example to other parts of the country. Like, gosh.

Clay (31:19):

Listen, we... When you think about all of the things that we have dealt with-

Diane (31:22):

Yep.

Clay (31:22):

... and how... You know, Katrina was so much of an outlier in so many ways-

Diane (31:26):

Hmm.

Clay (31:26):

... because of the... And, and that was really a, a failure of some infrastructure too, but it was an outlier, but that city was rebuilt. And then the way we've handled so many things from the floods to the pandemic. And, and I don't often... I don't think Louisiana often enough, pat's itself on the back for being as resilient as we have been, and we have been.

Diane (31:47):

Yes, we have.

Clay (31:48):

And, and, and I think it needs to be said.

Dr. Prats (31:50):

Yes. So thank you, Clay. Yes, uh, Katrina was definitely our game changer-

Clay (31:55):

Yeah, it was.

Diane (31:55):

Uh-huh.

Dr. Prats (31:57):

... when it came to inter, um, agency coordination on activities and you know, yes, I agree with you that Louisiana has very scrappy people.

Diane (32:05):

Mm-hmm.

Clay (32:05):

Yeah.

Dr. Prats (32:06):

We, we will figure it out.

Clay (32:07):
(laughs) We'll figure it out.

Diane (32:08):
Yes, yeah.

Dr. Prats (32:08):
We'll figure it out. We've become very resilient.

Clay (32:10):
Even the... It's something as simple as contraflow-

Diane (32:12):
Oh, gosh. Yes. Yeah.

Clay (32:13):
... how other states have, have copied that then and the way that I think during-

Diane (32:17):
No, it works.

Clay (32:17):
... Governor Blanco's time in the office, how they were able to get people out of the southern part of the state so quickly by modifying the way we used the interstate. Is there something as it relates to emergency preparedness that we had not, have not addressed on this episode that you'd like to get in before we wrap?

Dr. Prats (32:35):
I think y'all did an excellent job of covering the scope and scale of, um, of our, of our disaster stuff. What we covered during pre, um, during and post and the threats. Um, so I, I think we covered it all.

Clay (32:52):
But you know, I'd like to ask, what's on the horizon? I know that there has... A lot has evolved in a positive way in the last few years as it relates to emergency preparedness. Can you give us a sneak peek of where you believe this, this apparatus is going? Wha- what- what's, what's coming?

Dr. Prats (33:09):
Oh, wow. Um, so the crystal ball question was like-

Diane (33:10):
(laughs) Sorry.

Clay (33:10):

(laugh) That's right.

Dr. Prats (33:17):

... [inaudible 00:33:15] challenging one. So, um, you know, every disaster, you uncover different things about your population. Um, people for the most part go to day to day in their siloed environment. I mean, we got our normal ways that we communicate with each other and our... Whether it be school systems, phone systems, etc. But when there's a disaster, you know, with the disruption, you, you get a glimpse as to what that population, um, is like.

Clay (33:43):

Mm-hmm.

Dr. Prats (33:44):

And, um, you know, some things are, are good, some things are not so good. And some of the things that concern me is the increasing chronic diseases that our, that our population has. And so, you know, what... With COVID and the pandemic, um, perhaps the silver lining that I see is that we have all become internally focused as to what we want. Um, maybe, y- you know, not out of life but you know, meaningful.

Clay (34:17):

Right.

Dr. Prats (34:18):

The meaning of life and where we're going, going forward. So perhaps, that pause will cause us to review our own practices, our own health. Um, and, you know, that we are... Knowing that we all own emergency preparedness to a certain extent.

Clay (34:41):

Yep.

Diane (34:41):

Indeed, yeah.

Dr. Prats (34:42):

Um, you know, so, um, it might be a little bit more theoretical, but I'm, I'm hoping that, um, this is an opportunity for us to pause, review, especially in light of all these, um, MeToo movements and the, uh, Black Lives Matter movement. You know, what does, what does that mean for our vulnerable populations in general, who are seeking assistance from government? What does that look like? Um, so I'm hoping it's, uh, it's a more hopeful outlook, but it's also reflective of where we're going in the future.

Diane (35:19):

I like that, that hopeful and reflective. That is a fabulous way to end this particular episode. And, and you know, Dr. Prats wha- what you said, and just the, the bottom line, don't be lackadaisical.

Clay (35:34):

Mm-hmm.

Diane (35:34):

Don't think, "Oh, we're not gonna have... It's gonna be an easy hurricane season." I don't even wanna put that word out there, you know.

Clay (35:40):

Right.

Diane (35:40):

But th- things are gonna... "It's not, it's not gonna impact me. It's not gonna affect me. I'm just gonna go ahead and, and continue with my life." But we all need to do what we need to do for our family, for our neighborhood, for our community, for our state, as Clay said. We so appreciate you today. You have been a fabulous interview. And thank you for lending your expertise to us Dr. Prats.

Dr. Prats (36:04):

Thank you, Diane, and thank you, Clay.

Clay (36:06):

Not so bad off the beaten path on this special edition of Vax Matters. We'll catch you next time.