

What-to-do manual: Nuclear Attack

the Americas · Updated on 2026-09-09 · comoactuaen crisis.com

This is the scenario that scares people the most, and the one that spreads the most lies. The documented truth is uncomfortable in both directions: it isn't certain death — in Hiroshima, being inside a house cut the dose received in half or more — and there's no pill that shields you either. What decides who survives the fallout comes down to one thing, and the agencies sum it up in three words: get inside, stay inside, stay tuned.

Before the crisis

The full official rule, in three steps

FEMA states it plainly: **"Get Inside, Stay Inside, Stay Tuned."** Everything else in this guide is built around those three instructions. If you remember only one thing from this page, make it this.

Identify your best shelter today. FEMA is specific about this: **the safest place is a basement or the innermost room of a structurally sound building**, without windows if possible, because **more walls between you and the outside mean more protection**. The CDC ranks the options: a multi-story brick or concrete building, or a basement, are best; but **being inside any building is safer than being outside**.

- Locate the basement or the innermost room at your home, your workplace, and your kids' school. The shelter that helps is the one where you already are.
- Keep a **reserve of water and food for at least three days** inside that space, because you won't be able to go out and buy more.
- Keep a **battery-powered or hand-crank radio**: it's the only way to get instructions if there's no power or cell service.
- Agree with your family in advance that **everyone shelters wherever they are** and that no one goes out looking for anyone else. Have that conversation beforehand, not during.
- Keep soap, shampoo, and resealable plastic bags on hand: they're your decontamination kit.
- If you take daily medication, keep a supply for several days inside the shelter.

Iodine is NOT a shield against radiation

This is the most dangerous piece of misinformation on this whole topic. The CDC does not soften it: potassium iodide **protects only against radioactive iodine and does not protect against other types of radioactive material**, and it **protects only your thyroid**. It adds that, in a detonation, fallout contains **relatively little radioactive iodine** compared with other materials. And it warns about the real risk: **do not take KI unless directed to do so by public health or emergency management officials, or by a health care provider — KI can cause harmful effects**, including gastrointestinal upset, rashes, allergic reactions, and serious illness or death from overdose. The worst effect, according to the CDC, is psychological: **you may believe you're protected from radiation exposure when you are not**.

Source: FEMA — Federal Emergency Management Agency (U.S.) — Nuclear Detonation Preparedness: Communicating in the Immediate Aftermath. https://www.fema.gov/sites/default/files/documents/fema_oet_nuclear-detonation-preparedness-communicating-aftermath_052024.pdf

Source: CDC — Centers for Disease Control and Prevention (U.S.) — What to Do: Get Inside. <https://www.cdc.gov/radiation-emergencies/response/get-inside.html>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — Potassium Iodide (KI). <https://www.cdc.gov/radiation-emergencies/treatment/potassium-iodide.html>

During the crisis

1. If you see a flash, don't look at it: drop and cover

Civil-protection guidance is explicit: **don't look at the flash or the fireball — it can blind you**. The California Department of Public Health advises **looking away, closing and covering your eyes**, dropping face-down on the ground with your hands under your body, and staying that way **until the heat and both shock waves have passed**. FEMA adds that you should drop at the sight of the flash, to protect yourself from the blast and from flying debris.

2. Expect the shock wave to take time to arrive

If the explosion is far away, **the shock wave can take 30 seconds or more** to reach you. That interval is real time to take cover behind anything that offers protection. Don't waste it watching.

3. Go into the most solid building near you

Head toward the center of the building or the basement, away from windows, exterior walls, and the roof. The CDC explains it with simple physics: **radioactive material settles on the outside of the building**, so the more construction you have between that material and your body, the lower the dose you receive.

4. Decontaminate before you settle in

If you were outside, take off your outer layer of clothing before entering the clean area of the shelter. The CDC quantifies the benefit: **removing your outer layer of clothing can remove up to 90% of radioactive material**. Put it in a sealed plastic bag and keep it away from people and pets.

5. Wash yourself, but in a very specific way

Shower with warm water and plenty of soap. **Use shampoo, never conditioner**: the CDC explains that conditioner **makes radioactive material bind to your hair**. Wash gently — **don't scald yourself, scrub, or scratch your skin** — because damaged skin lets contamination in. Blow your nose carefully and clean your eyelids, eyelashes, and ears with a damp cloth.

The three mistakes that kill people in the first hours

1. Going out to look. The flash can blind you, and fallout arrives afterward, not during. **2. Trying to flee by car.** FEMA is blunt about it: **a car will not protect you from radiation exposure, and the direction fallout travels is hard to predict and hard to outrun**; the CDC agrees that cars don't offer good protection. **3. Going out to look for family.** FEMA states this explicitly: **don't try to reunite with your loved ones right now — going outside could expose you to harmful levels of radiation**. It's the hardest instruction in this whole guide, and the one that saves the most lives.

Source: FEMA — Federal Emergency Management Agency (U.S.) — Nuclear Detonation Preparedness: Communicating in the Immediate Aftermath. https://www.fema.gov/sites/default/files/documents/fema_oet_nuclear-detonation-preparedness-communicating-aftermath_052024.pdf

Source: CDC — Centers for Disease Control and Prevention (U.S.) — What to Do: Get Inside. <https://www.cdc.gov/radiation-emergencies/response/get-inside.html>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — How to decontaminate after a radiation emergency (official infographic). https://www.cdc.gov/radiation-emergencies/media/pdfs/infographics/Infographic_Decontamination.pdf

Source: Prince William County Office of Emergency Management, Virginia (U.S.) — Nuclear Blast (county civil-protection guide). <https://www.pwcva.gov/departments/office-emergency-management/nuclear-blast>

Source: California Department of Public Health (U.S.) — Radiation Emergencies: Nuclear Blast. https://www.cdph.ca.gov/Programs/EPO/Pages/BI_Radiation-Emergencies_Nuclear-Blast.aspx

After the crisis

How long you need to stay inside. The CDC advises staying sheltered for **at least 24 hours**; FEMA's guidance gives a range of **12 to 24 hours**, unless a more immediate threat — a fire or a building collapse — forces you out sooner. In both cases the rule is the same: **you don't leave until authorities say it's safe**, except for a life-threatening condition.

Why waiting works: the 7:10 rule

It's not patience, it's physics. The DHS Center for Domestic Preparedness teaches the **7:10 rule of thumb: for every 7-fold increase in time elapsed since the detonation, there is a 10-fold decrease in the exposure rate**. Its official example: 400 R/h at 2 hours becomes 40 R/h at 14 hours. Following the same curve, by four days it's down to roughly a hundredth. That's why the first hours inside the shelter are the ones that matter most: the most intense radioactivity is also the radioactivity that fades the fastest.

- Keep the radio on: authorities will announce when and by which route to leave, and that route may not be the shortest one.
- If you have to go out for a life-threatening emergency, cover up as much as you can and decontaminate again when you get back.
- Don't consume water or food that was left uncovered outdoors. What's sealed and stored inside is what's safe.
- Once you're cleared to leave, follow the instructions about which areas to avoid: contamination isn't spread evenly or visibly.
- Seek medical attention if you had nausea and vomiting in the hours following exposure: it's a sign health care staff need to know about.

Source: CDC — Centers for Disease Control and Prevention (U.S.) — Frequently asked questions about radiation emergencies.
<https://cdc.gov/radiation-emergencies/faq/index.html>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — What to Do: Get Inside.
<https://www.cdc.gov/radiation-emergencies/response/get-inside.html>

Source: FEMA — Federal Emergency Management Agency (U.S.) — Nuclear Detonation Preparedness: Communicating in the Immediate Aftermath.
https://www.fema.gov/sites/default/files/documents/fema_oet_nuclear-detonation-preparedness-communicating-aftermath_052024.pdf

Source: DHS — Center for Domestic Preparedness (U.S.) — The 7:10 Rule of Thumb (AWR-923-W course).
<https://cdp.dhs.gov/shared/se/courses/default/AWR-923-W%2005122021%201.2-20210512144644/groups/394.html>

Family plan

The family plan for this scenario has one huge difference from every other one on this site: here, **the plan is not to go looking for each other**. It's counterintuitive and hard to accept, but it's exactly what the agencies ask for, because going outside during the first hours is what turns a safe person into an exposed one.

If you have kids at school

Schools have shelter-in-place protocols, and the building itself protects them. Agree with your family today that **no one runs to the school** during the first hours, and confirm the school's own procedure. Explain it to the kids too: knowing the plan is "everyone stays where they are, we'll see each other after" reduces panic when the plan kicks in.

With older adults or people with disabilities at home

Identify now the interior room they can reach quickly and without stairs if needed, and keep their medications there. If they depend on electricity for medical equipment, that's a conversation to have with their doctor beforehand, not during.

An out-of-area contact

Agree on a contact in another city that everyone texts when they can. Local lines get jammed, and long-distance ones sometimes don't; a text message gets through where a call won't. That contact gathers the information and shares it around, so no one needs to go out to find out.

With pets

They come into the shelter with you. If they were outside during the radioactive fallout, clean them with water and soap before they share the indoor space, and treat their fur with the same care as your own hair: no scrubbing.

Source: FEMA — Federal Emergency Management Agency (U.S.) — Nuclear Detonation Preparedness: Communicating in the Immediate Aftermath.
https://www.fema.gov/sites/default/files/documents/fema_oet_nuclear-detonation-preparedness-communicating-aftermath_052024.pdf

Source: CDC — Centers for Disease Control and Prevention (U.S.) — What to Do: Get Inside.
<https://www.cdc.gov/radiation-emergencies/response/get-inside.html>

Food and water

The water number you need to memorize

The CDC sets it without ambiguity: **at least 1 gallon (3.8 liters) per person per day, for 3 days**. Ready.gov adds the nuances that save whoever heeds them: **"children, nursing mothers, and sick people may need more"**, and **"with very high temperatures, water needs can double"**. If someone in your home is pregnant, sick, or you live in a hot climate, that number is a floor, not a target.

How to store it so it works when you need it

The CDC calls for **approved food-grade containers** with a tight-fitting lid, made of a sturdy, unbreakable material —**never glass**— and with a narrow mouth for pouring. An explicit warning: **never use a container that has held toxic chemicals** such as bleach or pesticides. And what almost everyone forgets: **stored water should be replaced every 6 months**. To disinfect the container before filling it, use a teaspoon of unscented household bleach per liter of water, wait 30 seconds, and pour it out.

What food to keep on hand

Ready.gov recommends **several days of non-perishable food** and gives a concrete list: ready-to-eat canned meats, fruits, and vegetables —**and a can opener**—, protein or fruit bars, dry cereal or granola, peanut butter, dried fruit, canned juices, and pasteurized long-life milk. The rule when putting it together is simple: food your family will actually eat, that needs no cooking, and that you can rotate before it expires.

No power, the food clock is running: 4 hours and 48 hours

The official figures come from FoodSafety.gov, part of the USDA: **a refrigerator keeps food safe for up to 4 hours** if you do not open it, and **a full freezer holds for about 48 hours (24 if half full)**. The discard threshold: any perishable food —meat, poultry, fish, eggs, leftovers— that has been **at 4 °C (40 °F) or above for 2 hours or more must be thrown out**. A full freezer holds twice as long as a half-full one, so filling the empty space with bottles of water before a forecast storm is money saved. And the line every agency closes with: **"when in doubt, throw it out"**. Do not taste it to find out.

- Keep the refrigerator and freezer **closed**: every time you open one, you waste hours of stored cold.
- **Throw out any food that has touched floodwater**, even if the container looks intact. This is an explicit Ready.gov instruction.
- Keep a manual can opener. It is the item people forget most, and without it your pantry is useless.
- If you buy bottled water, keep it **sealed in its original container**, in a cool, dark place.

Source: CDC — Centers for Disease Control and Prevention (U.S.) — How to Create and Store an Emergency Water Supply.
<https://www.cdc.gov/water-emergency/about/how-to-create-and-store-an-emergency-water-supply.html>

Source: Ready.gov · FEMA (U.S.) — Water. <https://www.ready.gov/water>

Source: FoodSafety.gov · USDA and HHS (U.S.) — Food Safety During a Power Outage.
<https://www.foodsafety.gov/food-safety-charts/food-safety-during-power-outage>

Source: Ready.gov · FEMA (U.S.) — Food. <https://www.ready.gov/food>

Power and communications

The generator rule: 6 meters, no negotiating

The CPSC does not soften it: **"using a generator indoors CAN KILL YOU IN MINUTES"**, because **"generator exhaust contains carbon monoxide, a poison you cannot see or smell"**. The official distance, repeated by the CDC and CPSC: **only outdoors, more than 20 feet (6.1 meters) from any window, door, or vent**. The same goes for pressure washers, charcoal grills, and camp stoves. A battery-powered carbon monoxide detector is cheap and the only thing that warns you in time.

When the cell network is overloaded: text, do not call

The joint FCC and FEMA guide explains why: **"text messages may get through when your call does not"**, even if delivery is delayed when the network is congested. And it asks for something almost no one does: **"limit non-emergency calls"**, because every call takes up space that emergency communications need. Also save a contact under the name **"ICE"** (In Case of Emergency), the convention rescue personnel look for on someone else's phone.

How to stretch your battery

The same guide recommends **lowering screen brightness and turning off apps** to conserve charge. In an emergency your phone stops being entertainment and becomes your only line to the outside world: treat it like your water supply.

The battery-powered radio is still irreplaceable

The FCC and FEMA recommend **a battery-powered radio or a portable television** to follow emergency bulletins during power outages. It is the only channel that depends on neither your electricity nor the cell network.

The alerts you already have and did not know about

In the United States, **Wireless Emergency Alerts** are free messages that go straight to your phone for severe weather, AMBER alerts, and threats to safety in your area. Two things worth knowing: **you do not need to sign up —phones have supported them since 2012— and they are not affected by network congestion**, so they get through when calls no longer do. Find out what the equivalent system is in your country, and do not mute it.

- Have at least one light source that does not depend on the grid: a battery-powered or hand-crank flashlight, or a rechargeable lamp.
- Charge phones and backup batteries **before** the forecast event arrives, not after the power is already out.
- Keep a list of important phone numbers **on paper**: if your phone dies, your contacts die with it.
- Agree with your family that after an emergency **everyone texts the same contact** instead of calling each other.

Source: CPSC — Consumer Product Safety Commission (U.S.) — What to Know About Portable Generators and Carbon Monoxide.

https://www.cpsc.gov/s3fs-public/468-WhattoKnowGenerators_2022.pdf

Source: FCC and FEMA (U.S.) — Tips for Communicating During an Emergency.

https://www.fcc.gov/sites/default/files/fcc-fema_tips_for_communicating_during_an_emergency.pdf

Source: FEMA (U.S.) — Wireless Emergency Alerts (fact sheet). <https://www.ready.gov/sites/default/files/2020-08/wea-fact-sheet.pdf>

Health and special needs

This is the section that decides who has a hard time and who has a dangerously hard time. An emergency does not suspend diabetes, high blood pressure, pregnancy, or dependence on an oxygen concentrator: **what gets cut off is access to the pharmacy, the clinic, and electricity**. Everything that follows needs to be prepared beforehand, because once the emergency hits, there is no more room.

1. Keep a reserve of your medications, and know which ones hold up

Ready.gov calls for **a several-day supply of prescription medications**. For those that need refrigeration, the CDC is blunt: **once the power has been out for a day or more, discard any medication that requires refrigeration**, unless its label says otherwise.

2. The insulin exception, worth knowing word for word

The FDA documents that insulin in the manufacturer's original vials or cartridges —opened or unopened— **can stay unrefrigerated between 15 and 30 °C (59 and 86 °F) for up to 28 days and still work**. It loses effectiveness at extreme temperatures, and the longer the exposure, the less effective it becomes. In an emergency **"you may still need to use insulin that was stored above 30 °C"** —that is better than not using it at all— but as soon as proper storage is available again, those vials **should be discarded and replaced**.

3. If someone depends on electric medical equipment, there is one step almost no one takes

Ready.gov says it explicitly: you can **ask your power company to put you on a priority list for service restoration**. That step is free, can be done on any ordinary day, and changes the order in which you get reconnected. Add a backup battery for an electric wheelchair and for any assistive device, and talk with your doctor about how to keep the equipment running during a power outage.

4. Keep a copy of medical information, not just the pills

A list of medications with dosages, allergies, diagnoses, doctors' contact information, and —for infants— the vaccination record. A prescription bottle cannot always be refilled at a pharmacy in another city; a written list can solve that.

Pregnancy and newborns

The CDC calls for **prenatal vitamins and other medications** in the kit, plus supplies in case delivery happens without being able to reach a hospital: clean towels, clean sharp scissors, a bulb syringe, gloves, two clean white shoelaces to tie the cord, clean sheets, sanitary pads, soap or alcohol, and garbage bags. For infants: diapers, wipes, ointment, bottles, and formula. One detail that matters: **ready-to-feed formula is the safest option in an emergency**, because it does not need to be mixed with water and comes in sterile, single-use containers.

Disability, reduced mobility, and older adults

Ready.gov stresses **planning accessible transportation in advance** for evacuating or getting around, and including a service or support animal with its food, water, and supplies. That plan should be worked out with specific, named neighbors, not left vague.

The blow that comes later: mental health

The CDC names the normal reactions after a disaster —**fear, anger, sadness, worry, numbness, frustration, trouble sleeping, or nightmares**— and recommends taking care of your body, staying in touch with other people, and taking breaks from the news. In the United States and its territories, the **Disaster Distress Helpline is available 24 hours a day: 1-800-985-5990**, with service in Spanish. Asking for help here is not weakness: it is part of recovery, just like repairing the roof.

Source: Ready.gov · FEMA (U.S.) — People with Disabilities. <https://www.ready.gov/es/discapacidad>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — What to Do to Protect Yourself During a Power Outage.

<https://www.cdc.gov/natural-disasters/response/what-to-do-protect-yourself-during-a-power-outage.html>

Source: FDA — U.S. Food and Drug Administration — Information Regarding Insulin Storage and Switching Between Products in an Emergency.

<https://www.fda.gov/drugs/emergency-preparedness-drugs/information-regarding-insulin-storage-and-switching-between-products-emergency>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — Emergency Kit Checklist: Pregnant Women, Infants, and Children.

<https://www.cdc.gov/children-and-school-preparedness/resources/emergency-kit-checklist-pregnant-women-infants-and-children.html>

Source: CDC — Centers for Disease Control and Prevention (U.S.) — Coping With Disaster or Traumatic Event.

https://www.cdc.gov/natural-disasters/media/pdfs/2024/08/coping_with_disaster_2_english.pdf

Home and belongings

Photograph before you throw anything away. It is the rule that recovers the most money

The official insurance instruction is literal: **"photograph and video the interior and exterior of your property, taken before you throw anything away"**. After that, you need to **report the loss to your insurer right away**, and **keep receipts, statements, and contractor invoices**, which is what ensures your claim payment arrives on time. Cleaning up before documenting is, in practice, giving up your claim.

1. Before you go back in: look, smell, and listen from outside

The CDC lays it out this way: **if you smell gas or suspect a leak, shut off the main valve, open all the windows, and get out immediately**. If there is standing water inside and you can cut the power from a dry spot, do it. And one simple warning that prevents explosions and fires: **use battery-powered flashlights, not candles, gas lanterns, or torches**.

2. Ventilate before you settle in

The CDC recommends going in briefly to open doors and windows, and **letting the house air out for at least 30 minutes** before staying inside.

3. Shutting off utilities: when to do it, and the mistake you cannot make

Gas has a rule with no exceptions: if you shut it off for any reason, **only a qualified professional can turn it back on. Never turn it back on yourself**. **Electricity** is shut off by switching off the individual circuits first and the main breaker last—the order matters, because an electrical spark can ignite gas if there is a leak—. **Water** should be shut off if pipes may have cracked, because that contaminates the house supply, and should not be turned back on until authorities confirm it is safe to drink.

4. Go back only when authorities say it is safe

It sounds obvious, and it is the instruction people break most often: **go back home only when authorities say it is safe**. Structural damage is not always visible from the street.

- Make a photo inventory of what is in each room today: it takes twenty minutes and is worth its weight in gold for a claim.
- Keep that inventory and your policies **outside the house**—in the cloud or with a family member—because a file that gets soaked along with the house is useless.
- If you have to leave, take your documents with you, not your furniture.
- Do not sign anything with a contractor while you are in shock: check the money section for the warning signs of fraud.

Source: FEMA · NFIP (U.S.) — Starting Your Recovery (National Flood Insurance Program fact sheet).

https://agents.floodsmart.gov/sites/default/files/media/document/2025-07/fema-nfip-starting-your-recovery_fact-sheet-10-2021.pdf

Source: CDC — Centers for Disease Control and Prevention (U.S.) — Safety Guide for Reentering a Flooded Home.

<https://cdc.gov/floods/safety/reentering-your-flooded-home-safety.html>

Source: Hawaii Department of Human Services (U.S.) — Utility Shutoff and Safety (official emergency preparedness guide).

<https://humanservices.hawaii.gov/communications/are-you-ready/utility/>

Money and income

Cash in small bills: the detail people discover too late

Ready.gov recommends it for a concrete reason: **"it is important to keep small bills on hand because ATMs and credit cards may not work during a disaster"**, right when you need to buy supplies, fuel, or food. No power means no card reader, and without a card reader a large bill is useless if no one has change.

The documents you need to protect today

The official recommendation is to keep insurance policies, deeds, property records, and other important papers **in a safe place outside the house**. FEMA publishes the **Emergency Financial First Aid Kit** for this, organized into four sections: household identification, financial and legal documentation, medical information, and contacts. Its rule for paper: **a fireproof and waterproof box or safe**, a bank safe-deposit box, or in the hands of someone you trust. For digital files: **password-protected files** on an external drive or in secure storage outside the home. And if you pay everything online, print your account records periodically.

An emergency fund, even a small one

The CFPB avoids magic formulas: **"the amount you need depends on your situation"**, but **"even a small amount can provide some financial security"**. Its underlying argument is the one that matters: without that cushion, a single unexpected expense **can grow far larger than the original bill through interest and fees**, because it forces you to rely on credit.

After the disaster come the people who rob you with paperwork

The CFPB describes the exact pattern: **"be wary of contractors who go door to door and of people who offer unsolicited 'opportunities' or use high-pressure tactics to force you to decide on the spot"**. Its concrete rules: **never pay by wire transfer, gift card, cryptocurrency, or cash**, because that makes it harder to get your money back; **do not make the final payment until the work is finished to your satisfaction**; and always ask **"can you show me your ID and your contractor's license?"** and **"can you give me three recent references from this area?"**. One fact that cuts off many scams at the root: **no FEMA worker or federal or state official ever asks for or accepts money**. Scammers pose as government employees, insurance adjusters, police officers, or bank employees.

Source: Ready.gov · FEMA (U.S.) — Financial Preparedness. <https://www.ready.gov/financial-preparedness>

Source: FEMA · Operation Hope (U.S.) — Emergency Financial First Aid Kit (EFFAK).

https://www.fema.gov/sites/default/files/documents/fema_effak-toolkit.pdf

Source: CFPB — Consumer Financial Protection Bureau (U.S.) — How to Avoid Scams and Fraud After a Disaster.

<https://www.consumerfinance.gov/ask-cfpb/how-do-i-avoid-scams-and-fraud-after-a-disaster-en-1529/>

What you can sell

This section calls for a warning before a list, because this is the scenario where the most money gets made off fear. **Anything sold with a promise of personal shielding against radiation is fraud**, and in this case the fraud can kill: someone who believes they're protected leaves shelter too soon.

What must never be sold

Iodine pills marketed as "radiation protection" — the CDC warns that potassium iodide protects **only the thyroid**, only against radioactive iodine, and should not be taken without official direction because it can cause harm. Also off the table: bracelets, paints, magnets, "anti-radiation" filters for homes, or supplements that claim to "cleanse" the body. Selling those is profiting from panic and handing out the false sense of security that authorities point to as the worst effect of all.

What does have legitimate demand is what makes a shelter livable and what sustains a family confined for several days. It's essentially the same preparedness that serves for a blackout or a hurricane, which is precisely the honest sales argument:

- **Battery-powered or hand-crank radios**, the single most important item: without them, no instructions on when it's safe to leave ever arrive.
- **Reserves of water and non-perishable food** for several days inside the shelter.
- **Soap, shampoo, wipes, and resealable plastic bags**, which are the real decontamination gear.
- **Self-powered lighting**: rechargeable, hand-crank, and battery lamps.

- **Sealing doors and windows** of the interior room: tape, plastic sheeting, and weatherstripping.
- **First-aid kit and a supply of chronic medications** for several days.
- **Shelter-in-place kits for schools, offices, and buildings**, which are usually required to have a plan and almost never have the supplies.

Raising prices because people are desperate can be illegal

When a state of emergency is declared, many countries limit by law how much the price of basic goods can rise. In **California**, the limit is **10% above the pre-emergency price** for 30 days —and **180 days for repair and cleanup services**—, with penalties of up to one year in jail and a \$10,000 fine. **Texas** does not set a fixed percentage but penalizes "exorbitant" pricing with fines of up to \$20,000 per violation. In **Mexico**, the Ley Federal de Protección al Consumidor (Federal Consumer Protection Law) requires sellers to honor the price offered and any maximum prices set by authorities, and PROFECO can impose fines. In **Brazil**, the Código de Defesa do Consumidor (Consumer Defense Code) prohibits "raising a price without just cause." Charging a fair price for hard work is legitimate; taking advantage of desperation is not.

Source: ILO — International Labour Organization — Labour Overview of Latin America and the Caribbean 2025 (executive summary).

https://www.ilo.org/sites/default/files/2025-12/Executive%20Summary_Labour%20Overview%202025_LAC_ILO.pdf

Source: PROFECO — Federal Consumer Protection Agency (Mexico) — Ley Federal de Protección al Consumidor (Federal Consumer Protection Law), articles 7, 8, and 128. https://www.profeco.gob.mx/juridico/pdf/Ley_fed_protec_consum.pdf

Source: California Attorney General (USA) — Price gouging during declared emergencies. <https://oag.ca.gov/consumers/pricegougingduringdisasters>

Source: Presidency of the Republic (Brazil) — Código de Defesa do Consumidor (Consumer Defense Code), art. 39, X (raising prices without just cause). https://www.planalto.gov.br/ccivil_03/leis/l8078compilado.htm

Businesses and self-employment

It helps to start with one figure to size up what we're talking about: according to the ILO, informality **affects nearly half of the employed population of Latin America and the Caribbean, around 47%**, with huge differences between countries — under 30% in Uruguay and Chile, over 70% in Bolivia and Peru. For millions of families in the region, "looking for a job" and "starting something on your own" are the same sentence. What follows is not a promise of income: it is a map of what people actually do when a crisis hits, with the requirements and the risks laid out plainly.

Honesty requires saying this first: **this is not a scenario worth building a business around "for when it happens."**

What does exist, and is legitimate and useful, is preparedness work — which also serves the far more likely emergencies — and the recovery work done **afterward**, with proper equipment and training, not improvised.

Preparing shelter-in-place spaces

Identify the interior room of a home, a business, or a school, seal it, stock it with water, a radio, light, and a first-aid kit, and leave the procedure written and posted on the door. This is a low-investment service you sell for what it actually is: **preparedness for any emergency that requires staying inside** — a chemical leak, a hurricane, a blackout — not for one single scenario. Schools, daycare centers, condo buildings, and small businesses are the natural market.

Radios and communication without the network

Sales, setup, and — what almost no one does — **teaching people how to use them**: tuning in to the area's official stations, testing the equipment periodically, keeping spare batteries on hand. In this scenario, the radio isn't an accessory: it's the only channel through which the order to leave shelter arrives.

Family preparedness training

Short workshops for families, condo associations, or businesses on what to do in emergencies that require sheltering in place. The material on this site and its downloadable guides serve as a base. You charge per session and it requires no inventory; what you're selling is clarity, which on this topic is far scarcer than any product.

If the work is cleanup or recovery after a radiological event

This is not a trade you learn on the job or improvise with household equipment. It requires specific training, measuring instruments, and protocols from the competent authorities. Serious work at that stage is offered **under official coordination**; anything else puts the worker and their clients at risk.

United States — SBA disaster loans

For areas with a declared disaster. The **Economic Injury Disaster Loan (EIDL)** provides working capital for affected small businesses and nonprofit organizations; the **physical damage loan** covers losses not covered by insurance. Combined cap of **\$2 million**, interest **not exceeding 4%** if you cannot obtain credit elsewhere, terms of up to 30 years, and the first payment deferred 12 months. There is also a line for homeowners (up to \$500,000) and for renters for personal property (up to \$100,000).

Mexico — what actually exists today

FONDEN stopped taking on new commitments on January 1, 2021. What operates today in emergencies is **PAEAN**, run by Civil Protection, and it is worth knowing exactly what it is and is not: it delivers **relief supplies** — food kits, water, blankets, roofing sheets, cleaning materials — when a state's own capacity is overwhelmed. **It is not a reconstruction fund or a loan for your business.** For capital, look at state, municipal, or development-bank programs, always verifying on the official website: fraud schemes that use its name circulate around these programs.

Brazil — Pronampe for micro and small businesses

A credit line for **microenterprises** (annual revenue up to 360,000 reais) and **small businesses** (from 360,000 to 4.8 million). The amount can reach up to **60% of the previous year's gross revenue** for businesses with more than one year in operation, and up to 50% for new ones. The maximum rate is the SELIC rate plus up to 6% per year.

Source: SBA — Small Business Administration (USA) — Economic Injury Disaster Loans.

<https://www.sba.gov/funding-programs/disaster-assistance/economic-injury-disaster-loans>

Source: SSPC — National Civil Protection Coordination (Mexico) — Guidelines for the Program for Emergency Response to Natural Hazards (PAEAN).

<https://sidof.segob.gob.mx/notas/docFuente/5626632>

Source: Federal Government (Brazil) — Novo Pronampe — credit for micro and small businesses.

<https://www.gov.br/memp/pt-br/programa-acredita/novo-desenrola-brasil/novo-pronampe>

Related articles

What the documented cases show. This section exists to replace rumor with measured evidence, in both directions: neither an inevitable catastrophe nor a minor event.

Hiroshima and Nagasaki — the proof that shelter works

RERF, the joint Japan–U.S. foundation, has followed a cohort of about **120,000 people** since 1950, of whom about 94,000 are survivors. Two findings matter here. The first: the dose **was cut in half for every additional 200 meters of distance** from the hypocenter, and **being inside a typical house reduced the dose by 50% or more**. That's the historical evidence behind the instruction to get inside. The second, against fatalism: in that cohort, **close to half of leukemia deaths and about 10% of solid tumors** are attributed to radiation — about 1,900 cases through the year 2000 — while the rest of the cancers observed would have occurred anyway.

Chernobyl, 1986 — why potassium iodide exists

According to WHO, of the 600 workers present that night, **134 suffered acute radiation syndrome and 28 died within the first three months**. The effect on the surrounding population was different and very specific: **more than 6,000 cases of thyroid cancer were diagnosed through 2005** among people who were children or adolescents at the time, because iodine-131 got into the air and, above all, into **milk and leafy vegetables**, and children drink a lot of milk. The IAEA estimates the total already attributable or projected over the lifetime of emergency workers and residents of the most contaminated areas at around **4,000 deaths**, and notes that survival for those thyroid cancers has been close to 99%. The most-cited conclusion from the Chernobyl Forum is a different one: that **the mental health impact is the largest public health problem unleashed by the accident to date**.

Fukushima, 2011 — when evacuation does more harm than radiation

UNSCEAR concluded that **no discernible increase in cancer rates** attributable to radiation is expected, and that the rise in thyroid cancers detected in children is **not a result of exposure** but of ultra-sensitive screening that revealed abnormalities that previously went undetected. WHO is just as clear: **there were no acute radiation injuries or deaths among workers or the public** from the accident's exposure. And it adds the point that matters most for civil protection: that **the evacuation process itself, especially under the conditions of a severe natural disaster, can pose serious health risks**, with increased mortality among older adults relocated to temporary housing. Evacuating isn't free: that's why agencies ask you to shelter first and move only when told to.

Related guides on this site:

- Power outage — living without electricity, which is likely to happen alongside this.
- Supply crisis — the water and food reserve this scenario requires.
- Health crisis — when the health care system gets overwhelmed.
- Combined crisis — several emergencies at once, which is how they usually show up.

Source: RERF — Radiation Effects Research Foundation (Japan / U.S.) — Frequently asked questions from the Life Span Study of Hiroshima and Nagasaki survivors. <https://www.rerf.or.jp/en/faq/>

Source: WHO — World Health Organization — Radiation: The Chernobyl accident. <https://www.who.int/news-room/questions-and-answers/item/radiation-the-chernobyl-accident>

Source: IAEA — International Atomic Energy Agency — Chernobyl: The True Scale of the Accident (IAEA-WHO-UNDP Chernobyl Forum). <https://www.iaea.org/newscenter/pressreleases/chernobyl-true-scale-accident>

Source: UNSCEAR — United Nations Scientific Committee on the Effects of Atomic Radiation — A decade after the Fukushima accident: radiation-linked increases in cancer rates not expected. https://www.unscear.org/unscear/en/news/content/a-decade-after-the-fukushima-accident_-radiation-linked-increase-s-in-cancer-rates-not-expected-to-be-seen.html

Source: WHO — World Health Organization — Health consequences of the Fukushima nuclear accident. <https://www.who.int/news-room/questions-and-answers/item/health-consequences-of-fukushima-nuclear-accident>

Frequently asked questions

Should I buy iodine pills in case of a nuclear attack?

The CDC warns that potassium iodide shouldn't be taken unless directed by public health authorities or a health care provider, because it can cause harmful effects. It also protects only the thyroid, and only against radioactive iodine — it does not protect against the other radioactive materials in fallout, which make up most of it after a detonation. The CDC notes that the greater risk is believing you're protected when you're not.

What's the best place in my house to take shelter?

According to FEMA, it's the basement or the innermost room of a structurally sound building, without windows if possible, because more walls mean more protection. The CDC adds that a multi-story brick or concrete building, or a basement, are best, but that being inside any building is safer than being outside.

Is it better to leave by car or stay home after a nuclear explosion?

Stay inside. FEMA warns that a car doesn't protect you from radiation exposure and that the direction fallout travels is hard to predict and hard to outrun. The CDC agrees: cars don't offer good protection against radioactive material. The official recommendation is to go into the most solid building available and stay there.

Why shouldn't I use conditioner after a radiation emergency?

Because conditioner makes radioactive material bind to your hair instead of rinsing out. It's an explicit CDC warning: wash with soap and shampoo, gently, without scalding-hot water, without scrubbing, and without scratching your skin.

How long do you need to stay sheltered after a nuclear detonation?

The CDC advises staying inside for at least 24 hours, and FEMA's guidance gives a range of 12 to 24 hours, unless there's a more immediate threat such as a fire or a building collapse. The reason is that radioactivity decays quickly: the U.S. Department of Homeland Security teaches the 7:10 rule, under which every 7-fold increase in elapsed time cuts the exposure rate by a factor of 10. You never leave before authorities say to.

How much water should you store per person for an emergency?

The CDC recommends at least 1 gallon (3.8 liters) per person per day for 3 days. Ready.gov warns that children, nursing mothers, and sick people may need more, and that with very high temperatures water needs can double. Stored water should be replaced every 6 months.

How long does food last in the refrigerator during a power outage?

According to FoodSafety.gov, part of the USDA, a refrigerator keeps food safe for up to 4 hours if it stays closed, and a full freezer for about 48 hours (24 hours if half full). Any perishable food that has been at 4 °C or above for 2 hours or more should be discarded. The official rule is: when in doubt, throw it out.

How far from the house should a portable generator be placed?

Only outdoors, more than 20 feet (6.1 meters) from any window, door, or vent, according to the CDC and CPSC. The CPSC warns that using a generator indoors can kill in minutes, because its exhaust contains carbon monoxide, a poison you cannot see or smell. The same rule applies to pressure washers, charcoal grills, and camp stoves.

Is it better to call or text during an emergency?

Text. The joint FCC and FEMA guide explains that text messages may get through when a call does not, even if there is a delay when the network is congested, and it asks people to limit non-emergency calls so they do not tie up the network that emergency services need.

Does insulin go bad if the power goes out?

Not right away. The FDA documents that insulin in the manufacturer's original vials or cartridges, opened or unopened, can stay unrefrigerated between 15 and 30 °C for up to 28 days and still work, though it loses effectiveness at extreme temperatures. In an emergency it is better to use it than to go without, but as soon as proper storage is available again, those vials should be discarded and replaced.

What should you do if someone at home depends on medical equipment that needs electricity?

Ready.gov recommends asking the power company to put your address on a priority list for service restoration, keeping a backup battery for electric wheelchairs and assistive devices, and talking with your doctor about how to keep the equipment running during a power outage. This is something to arrange beforehand, not during the emergency.

Can you start cleaning your house after a disaster?

Before you throw anything away or clean anything, you need to photograph and video the interior and exterior of the property and report the loss to your insurer right away, according to the official guide from FEMA's National Flood Insurance Program. You should also keep receipts, statements, and contractor invoices. Cleaning before documenting usually means losing the claim.

Can you turn the gas back on yourself?

No. The official emergency preparedness guide is explicit: if you shut off the gas for any reason, only a qualified professional can turn it back on. Also, when shutting off electricity, switch off the individual circuits first and the main breaker last, because an electrical spark can ignite gas if there is a leak.

Why should you keep cash on hand for an emergency?

Because ATMs and card readers depend on electricity and network access, and they tend to stop working right when you need to buy water, fuel, or food. Ready.gov recommends keeping a small amount of cash at home, in a safe place and in small bills, since change may not be available during an emergency.

How can you tell if a contractor offering to repair your house is a scam?

The CFPB flags as red flags going door to door, offering unsolicited opportunities, or pressuring you to decide on the spot. It recommends never paying by wire transfer, gift card, cryptocurrency, or cash, not making the final payment until the work is finished to your satisfaction, and asking for ID, a contractor's license, and three recent references from the area. Also, no FEMA worker or federal or state official ever asks for or accepts money.

How many people died from radiation at Chernobyl?

According to WHO, 134 workers suffered acute radiation syndrome and 28 died within the first three months. The IAEA, in its Chernobyl Forum report, estimates the total number of deaths already attributable or projected over the lifetime of emergency workers and residents of the most contaminated areas at around 4,000. Thousands of thyroid cancers were also diagnosed in people who were children at the time, with survival close to 99%.

Is it possible to survive a nuclear detonation?

Yes, and the evidence is historical: the RERF study of about 94,000 Hiroshima and Nagasaki survivors documents that the dose received was cut in half for every additional 200 meters of distance from the hypocenter, and that being inside a typical house reduced the dose by 50% or more. That's the reason the official FEMA and CDC instruction is to go into a building, stay inside for at least 24 hours, and wait for instructions.