Building forward better for older persons post COVID-19

Topic: Learning from COVID-19 to strengthen health care for older people

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Background

According to WHO, COVID-19 pandemic is impacting the global population in a drastic way and in most countries older people are at a high risk of contracting it and develop severe illness due to the fact that most of them have other NCDs.

In Rwanda according to national census of 2012, older people represented 4.9% of the population of 12 million people, which might have increased now (female 5.6% and male 4.1%) and this calls for strong health care systems in place.

According to the WHO’s recommendations, Rwanda is implementing a national response preparedness plan against COVID-19 beginning in March 2020. The main goals for the preparedness plan were prevention, early detection, and a quick response.
How COVID19 - is affecting different ages in Rwanda (source: RBC)
Deaths from COVID-19 in Rwanda from March 2020- Feb 2021

Deaths Age Distribution

Deaths by Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 20</td>
<td>2</td>
</tr>
<tr>
<td>20 - 29</td>
<td>9</td>
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<tr>
<td>30 - 39</td>
<td>15</td>
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<tr>
<td>40 - 49</td>
<td>37</td>
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<tr>
<td>50 - 59</td>
<td>46</td>
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<tr>
<td>60 - 69</td>
<td>62</td>
</tr>
<tr>
<td>70 - 79</td>
<td>45</td>
</tr>
<tr>
<td>80+</td>
<td>45</td>
</tr>
</tbody>
</table>
CSO’s intervention

To help evaluate the needs of older people during this unprecedented time and prepare for an increase in cases and deaths from COVID-19, Nsindagiza Organization with support from HelpAge undertook a multi-sector Rapid Needs Assessment. The findings of this assessment will be used to assist Nsindagiza with adapting its programming as well as provide advocacy messages to humanitarian partners and the government. The interviews with older people were conducted in June 2020 within Nyarugenge district which is based in the capital Kigali and Ruhango district which is a rural province in the south of Rwanda.
Key finding on access to health for older people

• 27% of older people reported their access to health care services has changed since the start of COVID-19, this is highest for older women (32%) compared with older men (14%). Lack of income is one of the reasons why health services can be difficult. However, 54% of older people have not experienced any changes in access to health services while 14% reported they do not need to visit these facilities.

• 60% of older people surveyed did not know where their nearest health facility is that is testing and/or treating for COVID-19. This increases with age (91% of those above 80) and is more common in older men (70%) than older women (55%).

• Only 44% of respondents were able to access medication for their health conditions since the outbreak of COVID-19. This is particularly troubling given that 73% have at least one health condition.
Lessons learnt from a Patient who contracted COVID-19

• Male patient, aged 65, retired
• NSINDAGIZA BOD member
• City of Kigali, Rwanda
• Has diabetes and high blood pressure
• Was aware of COVID-19, and observed all measures.
• Beginning of February 2021, he felt weak, coughing, headache...and started steaming using traditional herbs
• He went to a nearest clinic to rule out COVID-19 and tested positive
• Got some cough medication, on 3rd days developed, nausea, vomiting and high temperature
• He had to go to the District Hospital for further management, where he got more medicines for 7 days and advised for home isolation
• During that time, he went into depression because of isolation in his house save for his wife who was attending to him.
• He felt death was coming to him as he was told that older people are more prone to COVID-19. death
• His family would talk to him on phone daily not leave him alone, the neighbours were calling him and even the health care professionals in charge of COVID-19 (RBC) made closer follow up by checking on him every day.
• His advice is, to give yourself peace of mind, to avoid depression, family, health professionals and neighbour should use all means to be connected with the patient “isolation kills”
Conclusion

In conclusion, if there is coordinated systems of intervention between Health care systems, family and community support to prevent the person from feeling isolated, would prevents the person from going into depression, sleeplessness and anxiety, which would improve their immunity to fight COVID-19.

Though older people are least on the list of C19 cases, the death cases are too high according to the above data, there is need to take special measures to protect them through awareness-raising and any other support for prevention and response.