

Insight

COVID-19 and elderly in Nepal: current situation

Lochana Shrestha

Abstract

In Nepal, though there are substantially high numbers of COVID-19 cases among the young working group, the aging population was not spare from infections. There were less than 50 infected elderly people during the lockdown period. After relaxed lock-down, infections increased among elderly (adding 20-25 cases in every 3 days interval) reaching 300 cases as of 21st July 2020. The escalation in number of infected elderly cases in Nepali provinces bordering India, has established that community transmission is rife in these parts of the country. This review showed that there are multiple diverse issues and challenges regarding the COVID-19 crisis among the elderly in Nepal. Based on this the need of the hour can be highlighted, which are: improved age friendly social support, access to efficient information and communication, and better health facilities. Governing bodies should implement positive plan of a robust support system for the elderly respecting their rights and dignity during this pandemic.

Key words

Coronavirus, Elderly, Nepal

Introduction

The aging population has become one of the most significant social transformations of the 21st century. Like in other parts of the world, ageing in Nepal is recognized as one of the most prominent features of population growth. Going by available data, 2011 recorded 2.1 million people above the age of 60 years, which constituted 8.1% of the total population of this country.

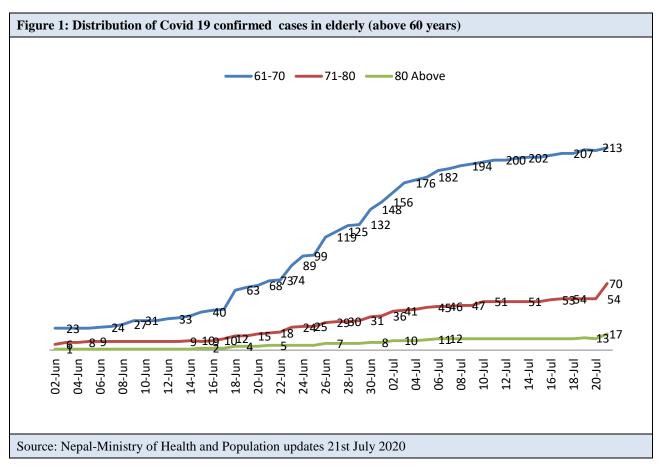
The number of older populace in Nepal is growing steadily at the rate of 3.77 percent annually, which is three times higher than the annual population growth rate (1.35%) during 2001-2011. The recent COVID-19 pandemic has caused indescribable fear and suffering for older people across the globe and put forth many unprecedented challenges and consequences upon them.

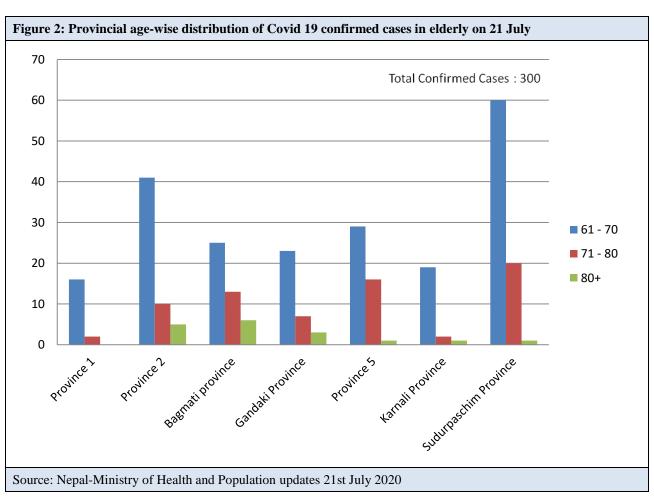
Situation of COVID-19 among elderly in Nepal

The data prepared by the Nepal government's Health and Population Bureau has reported a substantially high number of COVID-19 cases among the young workingage group.³ Nepali authorities and experts pointed that the high infection rate among the youth is due to the mass repatriation of infected Nepali migrant workers from India. There were less than 50 infected elderly people during the lock-down period (before 15th June 2020). After relaxing the lock-down, infections increased among elderly (adding 20-25 cases in every 3 days interval) reaching 300 cases as of 21st July 2020 (Figure 1).³ Fewer infections among the elderly compared to other age groups of people during this time may be due to their decreased mobility and limited healthcare-seeking nature of these groups. Figure 2 showed that number of elderly infected cases were greater in province 7 followed by province 2 and 5.3 These provinces are close to India having porous border points and recurring incidents of hordes of infected young groups entering Nepal, resulting in a fairly large increment. Hence, every day in these provinces, the number of COVID-19 infected cases is on the rise among the elderly group which indicates that community transmission of coronavirus is probably occurring in these parts of the country. In relation to deaths due to COVID-19, there were 33 deaths among people below 60 years and 8 above that age.³ In European countries, almost 95 percent of deaths occurred in people above 60 years of age, with more than 50 percent of fatalities involving aged 80 or older: 4,5,6, and in India, where the elderly constitute around 10% of India's population, older adults accounted for over 50% of the country's COVID-19 deaths. Based on these experiences from other countries, the number of deaths of elderly in Nepal might dramatically increase in the future in the event of slackness in observing social distancing, especially among elderly people, in the background of an overwhelmed healthcare facilities.

Issues and challenges of elderly in the pandemic

The COVID-19 crisis has, therefore, invited grave problems and critical challenges regarding the elderly in urban areas, as well as rural areas, particularly those living alone or confined to old-age or elderly-care homes, totally dependent on family members including their young children for their daily activities. As a result of mass migration of the younger generation to other countries for better income and education, this trend has further augmented the current problem among elderly.





In addition to this, there are other factors that play a pivotal role in this regard. They are family conflicts, acute impoverishment and disengaged inter-generational reciprocity. This may result in severe obstruction to the day-to-day interactions, thus, leading to social, interpersonal and mental isolation. With the onset of the coronavirus pandemic, these issues have been further compounded increasing the impacts on the aged people. Other causes that increase the misery of the elderly include the prevalent unawareness about the essential information about COVID-19 and cognitive problems which are common in the elderly.

In addition, issues related to the inability to use the internet and smartphone technologies make the situation worse, as these technologies are the information sources that help people keep abreast with the latest developments and findings and connect each other through social networks. Lack of old-age-friendly public information and communication has further led the elderly people to isolation, leaving them with a situation of uncertainty and fear of contracting the deadly infection. Often the public information in TV/Radio related to COVID-19 are not provided in an understandable format to the elderly. Illiteracy among the elderly could be one of the reasons. Factors like income disparity, geographical isolation and inequality has further exacerbated the situation in Nepal.

Another issue related to the elderly care is limited accessibility and availability of health care facilities to successfully deal with the COVID-19. When problems arise, they cannot avail adequate resources that can alleviate problems, such as lack of a vehicle, absence of supportive people and scarcity of enough funds to meet the cost. Healthcare personnel are receiving calls from elderly on how to manage in the event of health problems, avail medicines or seek medical attention, during the pandemic.

Because of social and family restrictions brought down by "social distancing", it seems to have led to a negative environment for older people at home and resulted in a strained relationship in the house. The young ones, too, seem to shun the elderly members in the family. Physical distancing at critical times like this is crucial but the concept of "social distancing" is grossly misunderstood for a rigorous "physical distancing" within the four-walls of family home. For social distancing, younger family members are keeping elderly people separately in room; and this further creates an unsupportive situation for the elderly, who depended on close family and emotional ties to maintain a sound atmosphere for their well-being. Lack of support from family and community is making elderly people more vulnerable in these changing situations. It is clear that there is a need to improve social support and smarter efforts to reach older people. It appears this may be achieved via digital technologies. Supporting self-isolating older people to use these technologies to interact with family and friends is important to promote overall wellbeing.

Another important issue is the current economic status of elderly people. In Nepal most elderly are dependent on

their family, and some rely mostly on pension or houserent. Recently, because of the lockdown during the pandemic, people are moving out to their hometown and villages, leaving their jobs and rented houses, overall economy has suffered, which affect elderly people. Because of dependency and restricted mobility, even visiting the bank to cash the pension amount and old age allowance becomes a problem in the absence of supporting family members around.

When survival itself becomes the biggest challenge, it seems to override intake of proper balanced diets, supplements, and even one's healthcare. While several non-government organizations (NGOs) and trusts are working on supportive options for the elderly, the government can extend its engagement with the local NGOs and create local support groups to improve access to information and day-to-day necessities for the elderly in view of the coronavirus threat. But it looks like information of NGOs at local level is lacking for network development. In addition, all the family members should recognize and appreciate the needs and rights of the elderly in this situation. They should also be informed about available support systems and facility-networks, accessible to them.

Evidence shows that COVID-19 poses a greater risk to older people, as the majority of them have an underlying chronic health condition, which needs to be monitored regularly and controlled timely with suggestive measures. This also calls forth continuous age-friendly support from family and community. Health personnel are receiving frequent calls from the elderly who stay home by themselves enquiring about the ways to cope with stress and fear during this period.

The elderly people who reside in government supported old-age homes feel rejected and abandoned as they are denied keeping in touch with relatives and are restricted to go outdoors, even to temples. Sometimes it seems like a herculean task to make them understand about the necessity of prevention measures for COVID-19. The elderly in private care-homes are well-informed about the pandemic and the preventive measures, and as such, are more knowledgeable and understanding. This difference can be attributed to educational and socioeconomic background of people, and the different level of support they receive in these two types of care-homes.

Measures to protect elderly in this pandemic

In Nepal Corona Crisis Management Centre (CCMC) and Ministry of Health and Population (MOHP) are working together for policy-planning and implementation of COVID-19 crisis action. It seems there is no such specific measures that focus on an efficient and robust protection strategy for the elderly considering their vulnerability. The NGOs working on mental health provide mental healthcare and information along with other supportive work usually for other age groups of people. These need to be streamlined to include all age groups and may require government support.

Conclusion

In Nepal, a resource-constrained country where a specific supportive system for elderly is not in place, the issues and challenges faced by the older adults are far different from other nations. If the issues are not addressed on time, the outcome is likely to be more disastrous. Despite all sorts of physical, mental and social stresses, it seems older adults are fighting a losing battle to survive this deadly pandemic. After having survived the 2015 earthquake in Nepal, families now must deal with an even bigger upheaval regarding the care of elderly people in a pandemic. In the meantime, it is urgent that the government should plan and implement a robust support system to build a more inclusive, sustainable and age-friendly society, fit for the future, respecting the rights and dignity of the elderly people.

Author information Lochana Shrestha, MBBS, MD, MIPH, Fellow Geriatrics, Professor and Head of Department of Community Medicine, Nepalese Army Institute of Health Sciences, Bhandarkhal, Kathmandu, Nepal; Chairman, Health Home Care Nepal (Elderly Care Home); Email: communitymedicine@naihs.edu.np

Correspondence: Prof Lochana Shrestha, Professor and Head of Community Medicine, Nepalese Army Institute of Health Sciences, Bhandarkhal, Kathmandu, Nepal; Email: lochanashrestha@gmail.com

Competing interests: None.

Received: 3 July 2020; Revised: 22 July 2020; Accepted: 27 July 2020

Copyright © 2020 The Author(s). This is an open-access article distributed under the terms [CC BY-NC] which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Citation: Shrestha S. COVID-19 and elderly in Nepal: current situation. Journal of Geriatric Care and Research 2020, 7(2): 96-99.

References

- Central Bureau of Statistics. Population census 2011, National Report. Kathmandu: His Majesty's Government National Planning Commission Secretariat, 2012.
- Chalise HN. Demographic situation of population ageing in Nepal. Kathmandu Univ Med J. 2006; 4: 354-62
- Nepal-Ministry of Health and Population (MOHP). [Internet] COVID-19. [cited 2020 June 30 and 2020 July 21] Available from: https://covid19.mohp.gov.np/#/
- 4. Rout N. Risks to the elderly during the corona virus (COVID-19) pandemic 2019-2020. J Geriatr Care Res. 2020 Mar 21;7(1):27–8.
- Centers for Disease Control and Prevention. [Internet] Coronavirus Disease 2019 (COVID-19). 2020 [cited 2020 May 13]. Available at: https://www.cdc.gov/corona virus/2019-ncov/need-extra-precautions/olderadults.html
- Lamichhane PS, Devkota M. [Internet] Helping Aged People Survive the Pandemic. The Rising Nepal. [cited 2020 July 26] Available at: https://risingnepaldaily.com/opinion/helping-aged-people-survive-the-pandemic1 Jun 2020
- The Times of India. [Internet] 10% of India's population above 60 account for 50% of Covid deaths. [cited 2020 July 26] Available at: http://timesofindia.indiatimes.com/ articleshow/76165118.cms?utm_source=contentofinterest &utm_medium=text&utm_campaign=cppst