



# Report on Ageing, Older Person and Covid-19 pandemic Twitter chat

May 12th, 2020



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# Background

COVID-19 was declared as global pandemic by World Health Organization on March 11, 2020. The global trends show that the older persons aged 65 years and above and persons with pre-existing health conditions such as cardiovascular diseases and diabetes among others are more susceptible to the disease. The data also shows that men are more likely to contract the virus than women.

The confirmation of the first case of COVID-19 infection in Kenya was announced by the Ministry of Health on 13 th March 2020. By 14 th April 2020; 8,717 persons have been tested out of whom 216 persons have tested positive for coronavirus disease. Among them, 15 are aged 60 years and above, 138 are aged 30-59 years, 58 are aged 15-29 years and 5 are aged 0-5 years. To this date 41 of those who have tested positive have recovered and discharged from hospital and nine (9) persons have succumbed to the disease. 2331 contacts have been monitored out of whom 1,729 have been discharged and 602 are currently being monitored.

Consequently, the Government of Kenya declared the disease as a national emergency. Based on the high transmission rate of the Coronavirus, the government has put in place various measure to curb the spread of the disease.

The measures included, keeping social distance, watching of hands, wearing masks in public places, reduction by half the number of persons that can be carried by private and public transport vehicles, curfew from 7pm to 5am, and restriction of movement in and out of Mombasa, Kwale and Kilifi Counties and Nairobi metropolitan.

The government has also identified several health facilities that will be utilized as isolation and treatment centers and other facilities as quarantine centers.

## Vulnerability of Older persons

The Coronavirus disease and the measures that have been put by the government, while is meant to reduce the spread of COVID-19, poses a great risk to ageing and older persons. For instance, the measure to reduce social distancing and restriction on movements pose added burdens for older persons, as older persons are less likely to rely on online social interaction and getting needed information. Older persons may also rely heavily on long-term care providers at home, or in facilities to meet their basic needs, placing unique demands on their families, health workers and caregivers trying to reduce exposure, and keep older persons safe from the risk of infection will further deteriorate their health or make them susceptible to other conditions. Many of the older persons depend on routine clinics to health facilities that cannot be reached due to the restriction to movements and the curfew.

Ageing and older persons have over the years confronted multiple barriers in accessing quality health care, including affordability, accessibility and age-related stigma. In countries like Kenya where there is a limited medical facility specialized for older persons, older people may be at

Increased risk of exclusion of medical treatments if they are less prioritized than persons with a higher likelihood of survival. Older persons especially those living alone and are subjected to quarantine may face barriers to obtaining accurate information, food, medication, and other essential supplies during quarantine period. These persons may also experience an increased risk of being subjected to GBV.

To fill in the information gap and address issues that the older persons are facing or may face during this pandemic, UNFPA in collaboration with the Government of Kenya and HelpAge, held a twitter conversation and engaged with the public on the implications of the COVID-19 on older persons

## Objectives

- Raise awareness among the communities on the needs of older persons during humanitarian crisis.
- Promote mainstreaming of older persons needs in COVID-19 response.
- Promote collective intergenerational solidarity, to avoid stigmatization and discrimination against older persons.

## Panelists



**AGEING, OLDER PERSONS  
AND  
COVID19 PANDEMIC**  
TUESDAY, MAY 12TH, 2020  
11:30AM - 12:30 PM



JOIN THE TWITTER CHAT

#OLDERPEOPLE

@UNFPAKen



**Dr. Mohamed A. Sheikh**

Director General,  
NCPD

@DrAbeySheikh

Panelist



**Ms. Carole Agengo**

Regional Director  
HelpAge International  
Africa Regional Office

@caroleAgengo1

Panelist



**Amb. Kinuthia Mwangi**

Ambassador,  
Older Persons

@KwaMwangi

Panelist



**Faith Oplyo**

Chair  
UNFPA Youth Advisory Panel

@beingFao

Panelist



**Dr. Olajide Ademola**

Representative  
UNFPA

@OlajideDemola

Moderator



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## Format

The conversation was hosted and moderated by UNFPA. The panelists participated from their location through internet. The public joined the conversation as audience by contributing to the conversation. The conversation will be moderated by UNFPA.

# Key Issues Raised

## Effect of COVID-19 pandemic on older persons

Evidence indicates older persons are more vulnerable to serious complications if infected by Covid-19. Highlighted below are some of the effect the pandemic has on older people:

- Majority of older persons are in rural areas, and depends on their families in bigger cities for provision, this has been cut or reduced due to restriction of movement and curfew.
- COVID19 pandemic is a completely complicated and confusing era for Older people, the fact that it is said that older people and other people with underlying medical conditions are prone to more severe symptoms of corona virus. This has severe psychological effect on older people more since no one is telling them what they need to do.
- Measures being implemented to curb spread of corona virus promotes isolation of older persons from family & community and can expose them to abuse, violence, neglect & psychosocial stigma.
- The pandemic has led to older person being unable to access support from the care givers including close family members due to the measures being implemented by the government such as social distance and restriction of movement
- We have young people, grandchildren and even orphans who are under the care of older people. They rely on them for providence. COVID19 has hindered older peoples' ability to support such children due to the severe effects of COVID19 to the economy.
- Urban old folk have no cash or farm produce to meet their needs. Rural folk may have lost cash support from their providers but they have farm produce. This creates inequality in the severity of suffering among older people.
- Older people with chronic diseases such as diabetes and hypertension may be hampered to access their drugs for fear of COVID19 infection in hospitals.

## Integration special needs of older people in COVID-19 response.

- Involve older persons in developing guidelines to control spread of this pandemic to older persons since they have their own way of understand the disease.
- Use multisectral approach in educating the public on safety of older persons while providing them with the necessary support is very important.
- Use of local and community radio and TV channel that speak language understood by older people.
- Share messages that will inform the older persons what they need to do to protect themselves from corona virus.

## Strategies that can be adapted/adopted to bridge the challenge

- County government through county response teams, local leaders and community structure must be engaged to ensure all older persons are provided with masks and other essentials

- Most of the older persons are on business as usual mode. They should be provided with the masks for free, PPE, and informed on their important and the they need to take necessary precaution during this time.
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- Keeping them safe and healthy by constantly ensuring they get their medicines (for those who are sick) and encouraging family members to check on them helps them deal with mental pressures therefore being healthy.

### **Targeting correct information to older persons**

- Examine their understanding of corona in their different settings because they live in different parts. Enquire their sources of information and their interpretations. Analyze what works and what does not work, what else works for them.
- Involve the old people in crafting the correct information on corona.
- Put information in local language and use county and sub-county government structures, social workers and CSOs working with the older persons at grass root to pass information will be more effective. An example: in Uganda, Kenya, and Cameroon have shown that older people get empowered when protection messages are translated into vernacular languages. Otherwise the risk of infection with COVID-19 remains. "As an older person myself, I think that targeted, age- appropriate messages on covid-19 sent via radio in English and vernacular languages would work well for older persons given its broad reach in Kenya" Twitter participant.
- Disseminate critical information to the older people person through the community structures and innovations like audio- visual means.

### **Use of community structures to provide nutrition and financial support to older persons in an effective and efficient manner**

- The old people forms part of the most vulnerable population. They're at risk of contracting Covid-19 due to compromised immunity and also risk of hunger. Covid-19 response team should prioritize food and medical supply to the old with weekly monetary support.
- "Nyumba Kumi initiative" can be leveraged to provide nutritional, financial and mental health support to older persons.
- That is where a strong community health approach would have been of help. CHVs would have narrowed gaps by paying regular visits to check on the older persons.
- Leverage on traditional support mechanisms that have been relevant to needs, issues and concerns of older People at all time.
- The county governments should utilize the existing pool of trained community health volunteers to reach the households of the older persons with information and distribution of food stuff and essential services\
- The elderly living in urban settings more vulnerable, especially the urban poor and should be prioritized by the response team.

- County governments, voluntary organizations, National government agencies should map out data on older needy people who are provided support in a targeted way so that the required help is delivered to them directly. A model example is the Laikipia County government.

### **How to ensure that older persons continue to positively contribute to our society; Covid-19 notwithstanding**

- Most elderly people in rural areas aren't recognized and thus it's becoming worse for them during this pandemic period therefore we should dwell more in rural areas to identify those old people who are not recognized by their leaders and look for the way forward to help them.
- Providing the older people with necessary PPEs such as masks, to protect them from contracting COVID19 as they continue to undertake critical functions such as farming.

### **Mechanisms to use older persons as part of the solution to Covid-19.**

- Assess their understanding of COVID19 and if such a disease has occurred in our country and how it was handled, comparing to how we are handling it and see the best practices to pick as a country.
- Older persons need to be assured restrictions are put for their safety. Structured regular authorized home visits to share information and tips on working at home.
- Older people have survived some of the World's deadliest pandemics, How they managed and waded through this can only be sought when we recognize that they too have an input.
- Get their insight through whatever platform available and learn from their experience.
- Older people are a reservoir of culture, and can provide guidance on how to integrate culture and the set guidelines so that people adhere to them without resistance.
- Involve older people who are serving as medical practitioners, and other field to provide needed expertise in the fight of COVID19.
- Older people involving them and consulting them when making decisions and policies that affect them so that they can contribute positively
- Older persons have a wealth of stories of their lives with wise teachings/lessons. Community health workers can record these stories which can be documented and disseminated.
- Ensure older people contribute as equal partners in decision making that affects them. Often times, they are treated as passive recipients. Active involvement in ways that are appropriate to them is critical in tapping into their expertise
- Including them in the conversations. In the media interviews, older people should be presenting and giving their views on the pandemic.
- Engage them in family matters as part of us and share stories with them so that they don't feel lonely back at their homes.
- Older people are often forgotten by both County and National government when they are looking for solutions to problems and making of policies. They should be recognized as a significant stakeholder and therefore invited in public participation for matters affecting them.

- Older people, older people are very resourceful people and play crucial role in the society and can be used during this COVID19 pandemic as community resource person, volunteers, CHV and Health worker (retired nurses).
- Including older people in training and capacity building activities that are ongoing in various sectors such health, local authority and humanitarian among others.
- Their voices need to be amplified more, because the chances of a change coming can stem from them.
- Use the decision makers in governments who fall within the older persons bracket and are already engaged in response to address older persons' issues.
- Include the old people in COVID19 County Steering Committees or committees at the lower levels so that information is top bottom approach. #old people.

### **Making Covid-19 response more culturally sensitive/appropriate while remaining effective**

- The players should ensure that analysis of the needs of older persons are done taking into consideration the inequalities brought by the environment and community they live.
- All messaging and programmes implemented in response to COVID-19 must be tested at local level and contextualized to local cultures then use cultural structures to implement them.
- There is need to balance the protection, privacy of the elderly people and their need for quarantine, isolation and the curfew as well as other health service.
- Social Distancing is already anti-culture for many of Africa's older people. Emphasis should be more on solidarity in response.
- Ensure responses to COVID are not generalized. There are cultural differences amongst the people, in some regions for instance, its unacceptable for a grown up man to appear sick. We need to customize information bearing this in mind.
- Well informed elders can be used to create messages in metaphor, proverbs and story-telling and convey the same to their fellow elders in vernacular and other languages that are well understood through media and personal conversations.
- The public health guidelines and policies, measures should be cultural competent, respond to the culture of the people. Culture would be critical to address the policies in this places.
- Leveraging innovation to strengthen data collection systems with regards to the needs (and potential) older persons.
- Data collection must of necessity cover the full range of issues affecting older people including gender, disability and social status.
- There is need to prioritize data collection of older people and disseminate broadly to inform policies that affecting elderly.
- The GoK has the list they use for cash transfers to older persons for the entire country. This is the fastest route to have an idea of numbers and geographical locations

- Data on PWDS in Kenya has been a huge hindrance to planning and addressing the needs of those abled differently.

### Impact of Covid-19 pandemic on inter-generational relationships

- The fear of losing the older people to COVID19 amidst the need to continue taking care including visiting them complicates the situation. It is also not easy to explain to the old people why this disease affects them more than the younger generations.
- Creating self-pity among youth and sense of suspicion to older people due to recurring negative media imaging.
- Including older people in our activities will tap on their immense wisdom to benefit generations
- COVID-19 has occasioned a wonderful opportunity for "reverse-mentoring" whereby older people have now learnt from the younger generations how to use technology to communicate & interact, due to physical distancing.
- Inter-generational relationships are fundamental in our society today. Most younger persons are tasked with the responsibility of taking care of their parents/older siblings, ensuring that they get needed essentials like food. This has been made difficult due to the measures being implemented by the government.
- When your parents have always been the heroes, and the situation on the ground says "the heroes are more affected than the young" the panic begins to rise on the younger ones.
- Roles have shifted with COVID 19, the young are now taking care of the old since they are grouped as vulnerable and can no longer fend for themselves.
- With the cessation of movement especially out of Nairobi, young people are unable to go to their homes where the old people and take care of them.
- It is a long tedious process to get approvals for the old one to come to Nairobi or other counties hospitals for medication purpose due to the movement restrictions.

## Recommendations

- Messages to inform and educate older persons should be cultural sensitive and should be disseminated through local and community structures.
- There is need to prioritize data collection of older people and disseminate broadly to inform policies that affecting elderly during this pandemic.
- Guidelines in implementing measures to curb spread of covid19 should specifically address the special needs of the older persons.
- Response teams at National and county level should integrate older persons to ensure this issue are mainstreamed in the response.