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Research Article

Old Age Homes During the COVID 19 Pandemic- A Study in Some Old Age Homes of Manipur, India

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ABSTRACT

The COVID 19 Pandemic has spread all across the globe. While people from all age groups are at risk for getting infected by the virus, the older people are at a higher risk. The study intended to understand the effect of COVID19 on some old age homes of Manipur, India. It also aims to know the actions taken by authorities of the old age homes and challenges faced during the lockdown. A total of five old age homes from three plain districts of Manipur were contacted for data collection during the month of May-June 2021. A telephonic interview was conducted using a semi structured interview schedule. The responses related to the pandemic were captured by asking the open-ended questions mostly related to challenges faced by administrators and caregivers, available resources/ facilities and actions taken to avoid occurrence and transmission of infection among elderly residents. No case of COVID 19 infection is found in all the five old age homes. Significant steps were seen to be taken by these old age homes authorities to prevent the infection. They have been strictly following the protocols laid down by the government for the prevention of COVID 19 infection. Entry of outsiders has been strictly exempted. There are changes in the diet and everyday routine of the inmates. The physical and spiritual health of the inmates were well looked after in the old age homes. However, since COVID-19 pandemic is still prevailing in the society, lots of efforts are needed to look after the elderly inmates from many angles.

Keywords: Elderly, COVID-19, Old age homes, Pandemic, Institutional care and management

INTRODUCTION

COVID-19 is the name given by the World Health Organization (WHO) on 11th February 2020 for the acute respiratory illness that is caused by the novel coronavirus SARS-CoV2. COVID-19 is essentially an acronym that stands for coronavirus disease of 2019. Its outbreak was in December 2019 in the city of Wuhan, China. This novel coronavirus has quickly spread from its point of origin to countries across the globe, causing the World Health Organization (WHO) to declare the COVID-19 to be pandemic on March 11th 2020. As of 1st July 2021, 9996,461 cases have been reported worldwide, with total deaths of 3,963,159. While all age groups are at risk of getting infected by this virus, the older people face a significant risk of developing serious illness in case of infection of the virus. This puts at risk 104 million Indians who are senior citizens as per 2011 census. As per the Policy Brief on Impact of COVID-19 on Older Persons published by the United Nations, about 95% of fatalities due to COVID-19 in Europe have been people of 60 years and above. In the United States too, 80% of the total deaths were among people of 65 years and above. In China as well, nearly 80% of deaths occurred among people aged 60 years and above. This very data poses serious challenges for the elderly section of the population. In this pandemic, elderly section face challenges in accessing general health care facilities as well. Not only this, lockdown followed by concentration of health resources with a main focus to fight the pandemic marginalize the elderly section in many cases.

There comes a need to give a specific focus to those elderly who are staying in old age homes/senior citizen's homes as they stay in bulk or are concentrated in a single premise. So, the following advisory has been issued by the National Human Rights Commission for implementation by the central and state governments so that the rights of elderly persons are protected from the adverse impact of COVID-19 and lockdown for those elderly in old age homes:

1. Old age homes and day care homes should be sanitized on a regular basis.
2. Certain adequate readjustments at old age homes may be made in order to promote physical distancing and prevent the spread of the virus.
3. Elderly persons who are homeless should be identified and to be given necessary support such as shifting in shelter homes after getting COVID testing and a minimum of 14 days quarantine.
4. Personal protection equipment, masks, sanitizers and other essential goods should be readily available to the caregivers and elderly inmates in old age homes.

Manipur is one of the eighth states of North East India. The state is also equally affected by the pandemic. As of 30th June 2021, the total number of cases in Manipur was

69,790, including 6,012 active cases, 62,628 recoveries and 1150 deaths. The total number of deaths in the months of May and June only is 719 of which 450 (almost 63% of the total deaths) were the older people aged 60 years and above. This data clearly indicates the seriousness of the pandemic to the elderly section of the population. Aging, in general, comes with a multitude of psychological, social, and environmental vulnerabilities. Frailty, which is one of the major features of old age, brings in the risk of various infections and decreases immune response as well. In addition to this, elderly have multiple co-morbidities and this also increases the chance of getting infected. Elderly people have high chances of having cognitive and other sensory deficits and this makes it difficult for them to understand and follow precautions as well. Many of them are institutionalized thus exposing them to the risk of over- crowding, poor hygiene, and lack of adequate supervision etc. Isolation and neglect of the elderly already exist in our society. Isolation and neglect of elderly in old age homes also get them deprived of their regular health checkups. Apart from physical health, older people are directly or indirectly affected by various psychological evils like health anxiety, fear of life, loneliness anxiety, and so on. Further, they are affected by stress as they are repeatedly thinking about the news of Covid-19 and its spread. All these aids in increasing the already existing depression and obsessive fear about their life. They are also more vulnerable to misinformation as they are not well equipped or are expert with the technology and other social media and believe in whatever they heard. Since the beginning of the ongoing pandemic, numerous outbreaks of SARS-CoV-2 have been reported in old age homes worldwide, affecting both the residents and the care workers in many countries, especially western countries. While India is keeping upbeat on the daily COVID-19 cases and deaths, the country has no data on the numbers of residents of long-term care facilities such as nursing homes, old age homes and mental hospitals, jails etc. who might have been infected or died from confirmed or suspected corona virus. The World Health Organization in its latest policy for preventing and managing COVID-19 across long-term care services has pointed out that because residents of long-term care facilities have been less likely to be tested or admitted to hospital than people living in private households, it is likely that countries that do not include deaths outside hospitals are underestimating the death toll of COVID-19. Without data on the impact of the infection on long-term care facilities there is a risk that the resources needed to prevent and mitigate the impact of COVID-19 such as funds, workforce, tests, PPE and other equipment may not be provided adequately and in a timely manner. Hence, the present study intended to understand the effect of COVID 19 on Indian elderly care homes. The study also aimed to know the actions taken by administration of homes and challenges faced during the lockdown period. It would be noteworthy to understand the managerial actions taken by Indian old age homes during such difficult time of pandemic.

SURVEY OF LITERATURE

Ageing was not only an Asian trend up until 2000, but it is going to continue to dominate Asia in the next century as well (UNFPA, 1999). The National Policy of senior citizens outlines person above 60 years of age as elderly. This particular policy addresses issues concerning senior citizens living in our country. The number of elderly in India increased from 75.93 million (38.22 million males and 37.71 million females) in 2001 to 104 million (53 million females and 51 million males) in 2011 (Census 2011). Old age, in the general sense of the term, has its special and unique problems, but these have been heightened due to the unprecedented speed and nature of socio-economic transformation leading to a rise in the number of changes in different aspects of living conditions. The needs and problems of the elderly vary or differ considerably according to their age, socio-economic status, health, living status and other background characteristics (Siva Raju, 2002a). India has 112 million elderly people with multiple physical, social, psychological and economic problems with various unmet needs in all domains (Adikari, 2017). Change in family structure as well as contemporary changes in the psycho-social matrix and values often compel the elderly to live alone or to shift from their own homes to some institutions or old age homes (Dotty, 1992; Hegde et. al., 2012; Kumar et. al., 2012; Devi et. al., 2013; Mishra, 2008 and Mudey et. al., 2011). As many of the elderlies in the old age homes might be suffering from debilitating diseases and can be on bed rest, the old age homes needs to train the special staff in order to take care of them and provide the best services (Zhang et. al., 2020). According to a study, old people who live in family settings have higher efficiency levels and social interactions as compared to those living in institutions like that of old age homes (Dubey et. al., 2011).

COVID-19 has taken a great toll all over the world. According to the World Health Organization, elderly who are aged more than 50 years are highly susceptible or prone to developing severe complications of COVID-19. As elderly section is in the age group where if the proper care is not taken, even due to the aging factors body's immunity goes down and this reason makes them one of the most susceptible or vulnerable group for encountering diseases frequently (Asadullah et. al., 2012). Some studies from the Western countries like USA, Canada and UK highlighted the difficulties faced by elderly care homes during the pandemic and the difficulties includes shortage of personal protecting kits and care giver staff, less preparedness of management to face the surge of cases and higher mortality rate among elderly (Gordon et. al., 2020; McMichael et. al., 2020; Ladhani et. al., 2020; Comas-Herrera et. al., 2020). In a number of countries spanning several continents, there are an increasing number of reports referencing the spread the novel coronavirus disease-2019 (COVID-19) among nursing homes.

These areas are now recognized as potent hotspots regarding the pandemic, which one considers with special regard. In India, as per some news reports published, the southern part of India reported COVID-19 cases inside the old age home (Care Homes on High Alert- The New Indian Express, n.d.) from Kerala, Tamil Nadu and Karnataka, and few inmates diagnosed with COVID-19 in Mumbai during the month of October November, 2020 (Philip, 2020; Kumar, 2020; Theresa, 2020). Elderly in old age should need telephonic counseling to avoid psychological problems (Banerjee, 2020). Overall, only few news reports documented the status of old age care homes in other states of India.

OBJECTIVES

The study intends to understand the effect of COVID19 on some old age homes of Manipur. The study also aims to know the actions taken by administration of homes and to know the challenges/difficulties faced during the lockdown period.

STUDY AREA AND METHODOLOGY

The study area for this research is Manipur. Selected old age homes from 3 districts- Imphal East, Imphal West and Thoubal, have become a part of this research.

The selection is solely based on the extent of accessibility of the old age home authorities and the researcher. The data collection process was done in the months of May and June 2021. Observation and interaction with the inmates were not possible at all because of the scenario at that time. So, there were a total of 10 respondents (management authorities) who were interviewed over the phone by the researcher in order to meet the objectives of the research. The permission for conducting the study was taken after explaining all the major aspects involved in the research. Before taking interviews from the management persons of old age homes, the purpose of the study was explained to them over the phone. They gave consent to provide information such as current status of COVID cases/deaths (if any), demographic profile of occupants, facilities, specific precautions taken due to the ongoing pandemic, challenges/ difficulties, and policy changes in wake of such difficult times. Data collection was done mainly by using semi-structured interviews, with each interview lasting for about 30-45 minutes. Information related to specific individual occupants of care home were not taken since it was not required as per the scope of this particular research. The responses related to the pandemic were captured by asking the open-ended questions mostly related to challenges faced by administrators, available resources/ facilities and steps taken to avoid occurrence and transmission of infection among elderly residents. These questions were followed by questions related to their resourcefulness such as

availability of staff and medical treatment accessibility and availability; frequency of doctors/nurses' visits, isolation or quarantine facility, and basic equipment/medical kit such as thermometer, blood-pressure measuring equipment, oximeter, oxygen cylinder etc.

FINDINGS AND DISCUSSION

Leading a normal life in this pandemic in our own house with our own family members is itself very difficult. So, we can imagine the scenario in the old age homes. Old age home residents have a high chance to be older, more disabled, more cognitively impaired than those people of comparable ages living in the community settings and also have many other comorbidities contributing to their dependency on others for their care. It appears that in the Western countries, old age homes (mostly referred to as care homes), which are well funded, have better infrastructure and which are professionally managed could not protect the residents from this ongoing pandemic leading to a high number of mortalities, whereas Indian old age homes have been able to protect the elderly against this pandemic despite lacking proper resources and professional management. After the in-depth conversation with the management persons of old age homes, the researcher gets to know that it was really a challenging task to manage the old age homes during the COVID-19 pandemic. When COVID-19 pandemic started making an impact in the state, the entire process of looking after inmates and properly managing and tackling each and every work of old age homes was a big challenge. Moreover, in the urban location of two old age homes (OAH in Imphal West and Imphal East), community transmission rates were quite high. Older persons living in long-term care facilities have a higher risk for infection and adverse outcomes from the disease because they live in close proximity to others (World Health Organization, 2020). Physical exercises which are very much essential like daily walks, yoga, access to doctor etc. all came to a halt. The old age home administrators first stopped all contact with the outside world to the best extent possible. Here, care giving also started getting affected since care givers couldn't travel from far off places to their respective old age homes in three of the old age homes. Only in two of the old age homes, majority of the staffs are residential creating less problems as compared to the other three. But in these hard days of pandemic, the administrators ensures that care givers in the old age homes were given temporary accommodation in the old age homes to create less havoc. But this had made the situation worse for the caregivers and staffs because they stayed on in the old age homes and couldn't go back to see their family in this time of crisis. Because of the lockdown, all the activities of daily living started getting restricted. Doctors who used to come for regular health check-ups couldn't come to the old age homes often. The yoga instructors who used to visit every day have stopped

visiting. It was not easy to find on call doctors from the nearby hospitals in case of any emergency. The inmates who were visited regularly by their dear ones have stopped visiting them. All these factors created restlessness and tensions in the mind of the old age home residents especially the old inmates.

The term 'social distancing' which is one of the most commonly used word since the starting of the pandemic is quite misleading. Social interaction is very much essential for our mental and spiritual wellbeing and core idea of social distancing is just the opposite of what we want people to do during the pandemic. In fact, more than ever before in our history, we need social interaction. People need to find ways to remain social, while maintaining physical distance. We, the people in general are privileged enough to have the means to stay virtually connected through social networks, video and phone calls etc. It is quite important to ensure continued connection with people who are typically marginalized and isolated including the elderly, undocumented immigrants, homeless persons and those with mental illness (Galea et. al., 2020). But the elderly in general and most of the inmates of the old age homes in particular, which has been worst affected by the pandemic and the lockdown measures, has seen least benefits from the digital solutions as there is longstanding gap or inequality in the access to, and skills to make use of new technology such as phone or video calls, social medias etc. All they have is themselves and their few caregivers of which they still have to maintain physical distancing. The word physical distancing should replace the former. Because of the very term 'social distancing', people had started becoming afraid of each other and got scared in even communicating with each other. The pandemic in general affects each and every one of us both physically and mentally. But the pandemic had brought about a painful situation for the elderly section because family, friends and relatives got so disturbed during the COVID-19 pandemic that they had almost forgotten the elderly living in the old age homes. There were fewer phone calls compared to before and since nobody came to meet them, the elderly felt very isolated, lonely, irritated and are in states of anxiety. So, here the tasks of the caregivers to console the inmates and explain the situation in a proper way so that the older inmates stay cautious and less worried at the same time. The actions of caregivers are very crucial in determining the mentality of the inmates as they were they are in immediate contact with the old inmates. As suggested by doctors and counsellors, the caregivers had started behaving in a normal way and didn't panic in front of the elderly since it was creating a lot of unrest.

The media has a substantial role in the propagation of stereotypes and negative attitude towards the elderly people during the pandemic. There was a lot of misinformation and negative news coming through social media platforms which greatly affects the mental state of the elderly. Over this entire course of the pandemic, we have seen

considerable media coverage about the risk of COVID 19 to older people. In fact, the ageist attitudes being circulated during COVID 19 makes some people think that the pandemic is an older person problem and this has led to elderly abuse by family members and even leaving or abandoning of elderly members and this led to the increase number of inmates seeking admission in the old age homes. Rumors regarding the negative effects of vaccination like death of elderly just after vaccination, spread like a wildfire in the state and this makes the elderly panic and become reluctant to even get vaccinated. It was extremely difficult on the part of the caregivers to make the elderly understand the correct situation and get the old inmates vaccinated. It was very difficult to make them understand about the difficulties in processing the information that is completely new to them. It took a lot of patience and repeated efforts to explain the importance of the situation at hand but slowly, most elderly came to understand the seriousness of the pandemic. Many of them also kept themselves up-to-date with all news through radio and television and also engaged in listening to discussions and debates happening all across the world.

Precaution is a must for this pandemic. Specific attention was paid to the healthcare system. So, in terms of precaution, doctors were consulted through telephones and elderly inmates were given multivitamins to boost their immunity. General precautionary measures like wearing masks, using hand sanitizers frequently, and maintaining physical distance as much as possible were maintained in all the five old age homes. In order to properly maintain physical distance in the most possible way in the dormitory type of rooms, the elderly inmates were made to occupy the spare beds in the farthest distance possible and were made to have their meals by dividing into shifts in the dining hall. In the morning and evening, the caretakers took body temperature and oxygen levels of the inmates and kept running observation charts. For those elderly inmates with long term conditions, caretakers monitored blood pressure, blood sugar levels and ensured that they took all regular medicines. An isolation room or a quarantine room is also maintained by all the old age homes as a precautionary measure. Indoor and outdoor environments were kept clean in every possible way. In addition to restricting entry of outsiders in the premises, all gatherings and cultural programs had been cancelled.

As per the recommendation of National Expert Group on Vaccine Administration for COVID-19, besides Health Care Workers and Front-Line Workers, the prioritized group of beneficiaries for COVID-19 vaccination has been expanded to the population aged 60 years and above since 1st March 2021. The entire process of registration for vaccination was done by the old age home authorities. As cited by the old age home authorities, all the inmates in all the 5 old age homes have taken their first dose of vaccination (Covidsheild). They further stated that vaccination is especially very much

essential for this vulnerable group of elderly. There were cases of reluctance by some inmates to take the vaccine at some point of time, but were supervised by the caregivers by stating the benefits of it after which they readily agreed. The first dose of vaccination was done in the month of April/May. Not only the elderly inmates, but those staffs who were in charge of taking care of the elderly inmates were also vaccinated with their first dose of Covidsheild.

"Sadly, we will not be accepting donations of prepared meals until further notice due to the potential risks involved" said one of the caretakers. Donations from the public in the form of cash and essential items have drastically reduced as well. Hand sanitizers are placed at the entrances of the old age homes and other areas at risk as a precautionary measure. It was revealed that the elderly kept themselves busy during the pandemic by cooking, gardening, listening to music like bhajans and old songs, listening to the radio etc. Some of them were even involved in doing yoga in the absence of instructor as well as doing minimal physical exercises to maintain their physical and spiritual health. All of them were very given instructions to eat food properly and immunity booster food became part of the daily menu since the older residents of the old age homes were extremely susceptible to the virus due to their age and health conditions. Warm water and green or herbal tea have been included in the diet chart as many believed that they can prevent the COVID virus to some extent. Maintaining physical distance was also another issue with the inmates. Since only dormitory types of rooms are available in the old age homes, it was difficult for them to maintain physical distance. But they were confident that as long as there are no outsiders, there is no chance of getting infected by the virus.

One noticeable point cited by most of the administrators and caretakers is that there are a greater number of elderlies seeking admission in the old age homes. Many people think that old people could get infected easily, so if they get rid of them, the other members of the family will remain safe. Because of this factor, a greater number of residents was admitted in the old age homes. According to the management, many elderlies had a difficult life facing abuse and torture from their own family members and trying to cope with the trauma of being highly vulnerable to COVID-19 has proved to be another turning point in their lives. As a precautionary member those elderly seeking admission should get COVID tested and should stay in the quarantine room for a minimum of 14 days. This is the only way to ensure safety of the residents of the old age homes.

It was found that all the 5 old age homes equipped with thermometer, blood pressure measuring equipment, oximeter but only two old age homes with oxygen cylinder. None of the old age homes have the facility of resident doctors and only one of the

old age homes has resident nurse and resident staffs even before the onset of the pandemic. Only two of the five old age homes have own ambulance/vehicle. Even after managing every difficult situation, the caregivers had to have a lot of patience. They worked day and night without having the presence of visiting caretakers but there was not a single case of abuse found. The staff was stopped by police, some local residents and it was difficult for them to bring the essential items since the work of old age homes was not categorized in any of the services. It was reported by old age homes that special permission was taken from the police and special cards were made to bring medicines, diapers, other non-COVID medical health care items and daily essential items. Even if they go out to cater all these essential needs, they maintain a strict policy of getting sanitized before entering into the premise of the old age homes. They ensured proper sanitization of all the outside items such as vegetables etc. before entering in the premise. The entire situation became very complicated and tense but somehow old age homes slowly started coping with it and successfully managed to overcome all these challenges during the COVID-19 crisis All the old age homes were adequately funded and had no issues with resource allocation to meet needs of residents.

LIMITATIONS OF THE STUDY

Since the study was done through telephonic interview, there was absence of non-verbal cues like observing their expressions, gestures and the facilities. It is also doubtful some respondents may not have given genuine information during the interview due to the fear of loss of image of their organization or lack of trust and hence, the authenticity of the responses cannot be confirmed. These gaps in the study can only be addressed with on-site observations. Findings could have been very different if study could have been conducted taking all the elderly inmates as respondents.

CONCLUSION AND SUGGESTIONS

Elderly are the most vulnerable section of the people affected by COVID 19 pandemic. The available evidence indicates that elderly people are at higher risk of serious illness and death from COVID-19, due to factors such as decreased immunity, co-morbidities, and lack of proper treatment. They face social isolation, which affects both their physical and mental health. Elderly staying in old age homes are at greater risk since they are living in close proximity to each other. The management of old age homes was a very cumbersome job during the COVID-19 crisis. There is partial lockdown in the state and as a result all activities of visiting by outsiders has been strictly restricted. So, there are no doctors visiting them, no friends and family visiting them, no movement outside the premises of the old age homes. The gates of the old age home remain closed with big sign boards pasted in front stating “No visitors allowed”.

The caretakers were made to live temporarily in the old age homes, thus preventing contact with outside world. They ensured proper sanitization of all the outside items such as vegetables, other essential items etc. before entering the premises. They also took utmost care of proper sanitization of the old age home premise on a frequent basis. Testing of inmates was done before taking new admission in few institutions and for rest, they remain closed for new entries to avoid the outbreak. Luckily till now, there is not even a single case of COVID 19 infection in all the five old age homes. This is because of the precautionary measures taken up by the authorities of the old age homes. Since COVID-19 pandemic is still prevailing in the society, lots of efforts are needed to look after the elderly inmates. Governments need to give greater importance to the needs of the elderly when planning for such disasters. Training needs to be imparted to the various levels of gerontological workers and caregivers so that they can take care of the elderly in a more efficient way. Government support in the form of funds to these organizations, proper monitoring of the old age homes and NGOs involved need to be supported more by the government. National portals addressing specific needs of the elderly must be opened in order to provide 24x7 hours help. Proper monitoring as well as quality checks of old age homes can help to increase and improve the type of facilities provided in the old age homes. Special 'geriatric units' should be opened in hospitals in order to cater to the special needs of the older people and all the old age homes and day care centers should employ full time doctors, nurses, social workers etc. Lastly caregiving courses for the elderly must be introduced in different institutions in our country.

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