

Experiences of NGO staff and volunteers when providing care for older adults during the COVID-19 pandemic: Key takeaways from Uganda and Ethiopia



Prepared by

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Background

During the COVID-19 pandemic, older adults residing in low and middle-income countries were significantly impacted due to the COVID-19 virus and the implemented public health measures (Giebel et al., 2020; Kadowaki & Wister, 2023; Singhal et al., 2021; Starke et al., 2021; Wu, 2020).

Within sub-Saharan Africa, which has the fastest-growing aging population in the world, older adults were in a double bind as they did not have access to adequate financial and geriatric support, and the COVID-19 pandemic impacted all facets of their lives (Adamek et al., 2022; Guven & Leite, 2016; Giebel et al., 2022; Gyasi, 2020; Rishworth & Elliott, 2022a; Rishworth & Elliott, 2022b; Saka et al., 2019). Hence, older adults relied heavily on community organizations for assistance (Eribo, 2021; Moyo et al., 2023).

However, during this time, community organizations experienced increased demand and a decrease in funding and donations (Eribo, 2021). Further, the organizations themselves did not receive sufficient support from the government during the pandemic (Eribo, 2021).

Hence our research focused on three main objectives:

- To assess community-based knowledge about the pandemic and the impact it has on older adults
- To document the strategies employed by ROTOM to contain the spread of COVID-19 amongst the older adult population
- To explore strategies employed by ROTOM for building resilient and inclusive recovery from the pandemic

ROTOM

Reach One Touch One Ministries (ROTOM) is an NGO providing spiritual, social, physical and physiological support to older adults and children under their care in Uganda and Ethiopia.

ROTOM has several programs that support older adults and children under their care, including ROTOM Senior Friendship Program which facilitates regular group support meetings for older adults, home visitations, health care, nutrition education and provision of supplementary food, water and sanitation activities etc; ROTOM Health Centers and Village Outreach Centers which provide a tranquil older person-friendly environment with staff trained and oriented to care for older adults; The ROTOM School and ROTOM Champions programs which provide education and health care to children under the care of older adults.

ROTOM also has several international partners, including ROTOM USA, ROTOM Canada, ROTOM UK and Missionswerk Frohe Botschaft (MFB Germany).

To learn more about ROTOM, visit their website: reachone-touchone.org





Methods

- Interviewed participants from ROTOM who had worked on the ground during the COVID-19 pandemic
- A total of 28 participants were interviewed (26 from ROTOM Uganda and 2 from ROTOM Ethiopia)
- For more information about the methods utilized, please email the primary author (Satveer Dhillon - sdhill84@uwo.ca).

Table 1: Summary of Roles of ROTOM Staff and Volunteers Interviewed

Roles	#
Leadership (Board Member, Senior Staff, Executive Directors)	9
Village Volunteer	6
Healthcare (Doctors, Nurses)	4
Special Projects (such as The ROTOM School)	4
Field Officer	3
Evangelist	2



Results

COVID-19 Knowledge & Perceptions Among ROTOM Staff and Volunteers

Most participants had a high level of understanding of how the COVID-19 virus impacted individuals.

At the time of the interview, 82% (n=23) of participants stated that they believed Uganda/Ethiopia was not COVID-19-free.

Common sources of information included:

- Radio
- Television
- Social Media
- Newspaper

Impact of COVID-19 Among Older Adults

Psychosocial Effects

- *"Some still think every time they [the older adults] get sick, they feel like, is it COVID or is it something that is going to take away my life? [...] This was not the case before. At least before they would know that health centers will treat them, they will get fine, but nowadays they are always so worried"* (Village Volunteer).
- Older adults lost their loved ones, who were often their financial and social support

Vaccine Hesitancy

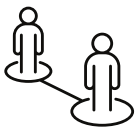
- *"Those uncomfortable with the vaccine, hearing from others how they're going to become either deaf or they will lose their sight or get strokes. So, some of them were really worried and anxious. Whenever they felt like they were not feeling well, they would attribute it to the vaccine"* (Special Projects).

Challenges & Potential Consequences of Public Health Measures

NGO staff and volunteers highlighted several examples of how the public health measures implemented negatively impacted the lives of older adults living in Uganda and Ethiopia.



Individuals who were visually impaired struggled to recognize those who were wearing masks. This further created a gap between non-profit staff and older adults.



“Africans and Ugandans, in particular, are very social people. Most of these people [referring to older adults] do not have something like a TV or they cannot read. They don't have phones. So they were really pushed into a lonely corner when the isolation came” (Leadership).



Due to the lockdowns, older adults and their children lost their jobs, impacting their ability to purchase essential supplies. Further, reverse migration occurred, increasing the number of dependents residing in the homes of older adults.



“And then there is a food problem because the household numbers had doubled. And so there are many more mouths to feed, and the seniors that we support, or generally seniors in Uganda, are weak and cannot grow food on their own. And so even the little food they had grown to take them through the time was not enough. So, there was a very huge need for food. I think those two were the main issues that came out” (Leadership).



“With regard to healthcare, it was also challenging a bit. Since most transport means were closed, they could not access medical facilities anymore, and there were mobility challenges. It was really hard for all the people who were depending on refills, regular checkups, and regular visiting to the health centers” (Field Officer).

Due to the COVID-19 pandemic, poverty increased among older adults, which was further exacerbated by the lack of governmental support:

“[...] There is no pension for all people. I mean, when you want to get a pension, you must have worked formally in the government sector. [...] Most of our elders, they used to be daily labourers or maid servants. Now they do not have any pension, and most of them, when they were working as a daily labourer, they only use that money for daily needs and they do not make enough to save that income. So at this age, they do not have any savings or no pension or any income. They lean on either their children, relative, well-wishers, non-governmental, or non-governmental organization support. So now we see that the well-wishers, and most of the Ethiopian people, are struggling with the living costs” (Leadership).

“I think in Uganda, we still have a long way to prioritize older persons and their needs, because I believe that they're not really prioritized” (Leadership).

Silver Lining of the COVID-19 pandemic

Due to the learnings of the COVID-19 pandemic, there are better hygiene practices, resulting in improved health outcomes.



“One, there was an increase in awareness of health. And, with that, I will start with the basics, like hand washing. [...] We had to teach older persons how to do proper hand washing, which also helped to reduce other infections, especially diarrhea. So that was a good thing to do” (Healthcare).

As a result of the NGO staff and volunteers encouraging older adults to follow the public health measures, they were protected against the COVID-19 virus.

Strategies to Support Older Adults

Worldwide, one of the most important initiatives to protect people from the COVID-19 virus was vaccination.



Among ROTOM-supported older adults, there were high levels of vaccine uptake. Reasons for the high uptake included:

1) The trust the older adults had in ROTOM

"So it was not very easy to convince people to come for the [COVID-19] vaccine. However, the relationship we had with them was for a long time. ROTOM has been serving these people for over 19 years. They had trust in us. Most of them say that if it was not for ROTOM, I wouldn't have gotten vaccinated" (Field Officer).

2) ROTOM Health Centers were vaccination centers.

Older adults were taught how to wash their hands and how important it was to socially distance.





ROTOM also provided soap and face masks to older adults. Further, they had access to safe water through water tanks and containers.

Village Health Teams were also implemented during this time. These teams were made up of volunteers living near the older adults, and they were responsible for providing COVID-19 information, delivering medications and conducting health tests (such as checking blood pressure). Information the volunteers collected was shared with the ROTOM team to ensure there was no gap in service delivery.



“Everyone has a radio. They might not afford a TV, but every senior has a radio. And the radio would always talk about the pandemic. If you didn’t get a chance to learn from community volunteers, you can learn from the radio” (Healthcare).

Strategies to Support Staff and Volunteers

Working from home

"We could send emails, we could make calls, we could zoom, we could transform money from one phone to another. [...] So basically what I learned most during the COVID-19 pandemic is how to use technology to perform my duties" (Field Officer).

Support (or lack thereof) from other entities

The government provided vaccines to the health centers. However, they did not receive any other support (such as medication, food supplies etc) from the government.

NGO staff and volunteers stated that the government should connect with local organizations.

However, ROTOM's partner international organizations did play a key role in providing support at this time.

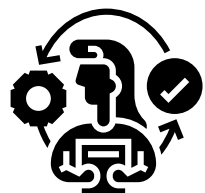
Building Back Stronger

NGO staff and volunteers underscored a number of ways organizations and individuals can build back stronger:

Strategies for Individuals:

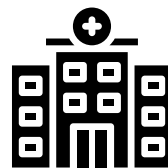


Encouraging older adults to have small gardens in their homes



The importance of remaining vigilant, continuing to wash hands and saving money, in case another public health crisis occurs.

Strategies for Organizations:



Strengthening health facilities



Building a reserve/emergency fund



Having different sources of funding



Key Recommendations

- There is a general consensus that older adults need to be a higher priority for the government, especially considering how the population in sub-Saharan Africa is aging rapidly. Governments need to work with local organizations to better understand the needs and priorities of older adults.
- The research has also highlighted how important involving community leaders in initiatives is to ensure the uptake of public health recommendations and interventions.
- It is crucial to implement initiatives that are targeted for each particular community/population. One example of an initiative that other community organizations can utilize is ROTOM's Village Health Team Approach. By bringing services closer to individuals who may have difficulties accessing them, the gap in service delivery decreases.
- The NGO staff and volunteers highlighted several strategies that can be used by community organizations to recover from public health crises, including having a reserve fund and multiple sources of funding.



Contact Us

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