Older persons and WASH response during COVID-19

Older Persons are worldwide the most vulnerable group to COVID-19 disease. At Cox's Bazar level, multiple researches below mentioned, report that often the older persons encounter difficulties during referral to health centres because of physical and administrative barriers, or fear of social stigma, among others. Older persons, especially women, do not fully understand the information regarding COVID-19 due to reduced exposure to mass media and awareness raising initiatives and, as such, apply less the preventive hygiene/social measures. When it comes to WASH, especially if not supported by other family members or if caregivers get sick, elderly encounter more difficulties in accessing basic services, like getting enough water to cover all their needs, accessing distribution sites and so on. Older persons with disabilities are at even higher risk of experiencing difficulties in accessing humanitarian assistance.

1. N. of elderly population (>59 years) in host: 16,200 (8,424 F; 7,776 M)
2. N. of elderly population (>59 years) in camps: 31,534 (14,009 F; 17,525 M)
TOTAL: 47,734


The WASH response should contribute mitigating the risk of exposure to the virus within the elderly population, making sure the basic concepts of COVID-19 transmission and prevention are well understood by everyone. Moreover, supportive community-based measures have to be put in place to protect elderly in accessing WASH services and helping them to reduce their movement. Lastly, hygiene promotion should prevent and advocate against stigmatization of elderly women and men and any other vulnerable individual.

Recommendations for age-inclusion in WASH programming

- Identify households with elderly1 and make sure to take the time to discuss with them about hygiene measures for COVID-19 prevention, but also listen to their impressions, doubts and perceptions. Do not give negative messages and do not spread feelings of fear. Use language and communication means that are fully understood.
- Consult elderly via bilateral discussions to avoid inviting them to meetings and gatherings putting them at risk. During consultations, ensure a minimum distance of 1 meter/3 feet and have outdoors consultations, in the proximity of the older person shelter.
- Every HH in camps, including the ones with elderly members, will receive hygiene items safely delivered at the household doorstep, according to WASH sector guidelines for safe distribution2. Regarding other distributions3, elderly should not be selected to be the ones attending distribution sites. Discuss with the family members about this.
- Hand washing station in front of the shelter (for example a tippy-tap) should be installed and household members are requested to ensure its operation and maintenance, including soap provision. Handwashing should be easily accessible, also to the persons with reduced mobility.
- Check if the older person and her/his household has availability of soap and, if not, provide additional quantity of body soap for hand washing (recommended 2 pieces) for immediate use. On the same day: ask with WASH Camp focal when the last distribution took place and refer to AFA and WASH Sector if repeated delays of distribution happen and if soap is missing also in other nearby households.

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1 See UNHCR data, with age breakdown per camps: https://reliefweb.int/report/bangladesh/joint-government-bangladesh-unhcr-population-breakdown-30-april-2020
• One caretaker should be selected to take care of the older family member. This caretaker should limit movements as much as possible and avoid gatherings, going to collect water, going to the market and similar activities. Another family member, ideally young and healthy, should be selected for those tasks.

• Discuss with the family about the importance of the elderly not to go out of the shelter to collect water: elderly should not go to the water point as this is a potential high risk setting for infection transmission due to the high volume of community members who gather in this location.

• Use COVID-19 approved pictorial IEC materials and place them where are easily accessible and visible (i.e. latrines): IEC can be placed at specific height (recommended 750-900 mm from ground), visible also by persons using wheelchair. IEC materials should always represent older people and other vulnerable groups, for fair representation.

• Discuss with household members about the need to enhance shelter cleanliness via surface and utensils washing with soap and water. Kitchen utensils have to be washed after every use, with soap and water. Water containers to be washed at least 1 time a week, with soap and water. Please see the Shelter/NFI Sector guidelines: Keep your shelter clean.

Elderly head of household/elderly with no caretaker

• Discuss with the neighbours or WASH committee about supporting the person, for example by: maintaining the elderly hand washing station (provision of water), collecting water for drinking and other purposes, support carrying items during distributions, support for reaching latrines or bathing places or other tasks according to needs. Ideally, only 1 person should be elected as caretaker, to avoid the elderly being in contact with different people. If this is not possible, a rotation system can be organised, in both cases respecting social distance and hygienic norms. Protection actors can support accompanying the elderly to the health centers*

• Check if the person has soap available and, if not, provide 2 pieces of soap, for immediate use. On the same day: ask with WASH Camp focal when the last distribution took place and refer to AFA and WASH Sector if repeated delays of distribution happen and if soap is missing also in other nearby households.

• Check if the elderly has at least 2 water containers in good condition and, if not, provide some additional ones.

• Discuss with him/her about the need to enhance shelter cleanliness via surface and utensils washing with soap and water. Kitchen utensils have to be washed after every use, with soap and water. Water containers to be washed at least 1 time a week, with soap and water. Please see the Shelter/NFI Sector guidance Keep your shelter clean and NFI care and maintenance.

• If there’s no social network to support the elderly person or no other viable solution, provide a chair/stool to support him/her during queuing times at water points or distribution sites. Alternatively, WASH committee or other community committees should be encouraged to prioritise access for elderly to water points, latrines or bathing places. One volunteer could be assigned to a water point, for this purpose.

• Safely report the case to the protection focal points and or GBV Focal Point, if you think that the person needs additional consideration. In particular if the person has an issue related to GBV or a protection need, for example, or is being abused or neglected or is otherwise particularly vulnerable.

All kind of humanitarian aid is free. No sexual or other favour can be requested in exchange of humanitarian assistance. Any case or suspicion of sexual exploitation and abuse by UN or humanitarian workers can be reported to the complaints desk.

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* Community Outreach Members (COMs) can accompany the elderly to the health clinics. In camps where there are no COMs refer to the Protection Focal Point who will liaise with PERU (Protection Emergency Response Units) teams for possible support by PERU Team volunteers.
Sources of this document

International guidelines

- Nicholas Davies, Petra Klepac, Yang Liu, Kiesha Prem, Mark Jit, CMMID nCov working group & Rosalind Eggo (under peer review), Age-dependent effects in the transmission and control of COVID-19 epidemics, https://cmmid.github.io/topics/covid19/age_hypotheses.html

Cox's Bazar guidelines

- Various sectors, Community engagement recommendations with the elderly and most vulnerable as part of COVID-19 preparedness and response plan, https://reliefweb.int/sites/reliefweb.int/files/resources/community_engage_recomm_for_the_elderly_and_the_most_vulnerable.pdf