

Letter to the Editor

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Older people and epidemics: a call for empathy

SIR,

The 2019 novel Coronavirus disease (COVID-2019) has gripped the world with fear, anxiety and confusion, and this is spreading as fast as the virus. With limited age-disaggregated data becoming available, early indications are that the virus, as most other viruses in the past, has been particularly severe on older people [1]. Public health managers tend to monitor and evaluate epidemic responses by looking at the overall mortality rates and where available, specific mortality rates among children and ‘healthy’ adults. Older people in general though have been identified to have higher susceptibility to the effects of epidemics. This is likely owing to their dwindling immunity, contributed partly by the physiology of the ageing process and more specifically due to any existing co-morbid conditions [2].

In a widely circulated video across several media sites, a woman of older age appears stubborn in refusing to wear a mask on a public bus, leading to outrage from both fellow citizens on the bus and netizens [3]. This situation is an illustration of how some older people might behave in outbreaks of infectious diseases. We all know that the ageing process can hamper cognitive skills with respect to the speed of processing, cognitive flexibility, capacity to draw inferences from a variety of information and the ability to focus.

It is important for stakeholders to acknowledge that older people are a special group and that their lives are as precious as other physiologic age groups. It is critical to be able to design health campaigns and messages that are tailored to their needs during epidemics. There is little evidence on how older people receive information during epidemics and whether behaviour change campaigns have been successful or not. Theories generated from behavioural and psychosocial epidemiology of old age would recommend that the messaging be limited, focused and unambiguous with the intention of not overwhelming or confusing them [4].

Using stories and illustrations which draw on previous experiences are more likely to attract the attention of older people than complex data, statistics and scientific explanations. In simpler words, what happened to a neighbour and what happened during previous epidemics is likely to attract

more attention from older people. The medium used for communication also matters. Time-tested communication channels such as radios, television and inter-personal communication through trusted community members/health workers are more likely to get the attention of older people rather than communication through drones and the police [5]. We think all stakeholders should give due consideration to the unique needs of older people during this challenging time. In the words of the Director-General of the World Health Organization, ‘this is time for solidarity and not stigma’. We believe that this applies to older people too.

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