

Volume 102 Year 2023 DOI:10.5281/zenodo.7814385

**ORIGINAL ARTICLE** 

# Health care in times of COVID-19 for older adults from the San Francisco de Tulcán Health Center, Ecuador

Cuidados de la salud en tiempos de COVID-19 para adultos mayores del Centro de Salud San Francisco de Tulcán, Ecuador

Atenção à saúde em tempos de COVID-19 para idosos do Centro de Saúde San Francisco de Tulcán, Equador

Néstor Oswaldo Chicaiza-Guaña<sup>1</sup>\*<sup>1</sup>, Sara Ximena Guerrón-Enríquez<sup>1</sup>, Melba Esperanza Narváez-Jaramillo<sup>1</sup>, Ruby Esther Maynard-Bermúdez<sup>1</sup>

<sup>1</sup>Universidad Regional Autónoma de los Andes. Ecuador. <sup>II</sup> Universidad de Ciencias Médicas de Guantánamo. Guantánamo, Cuba.

\*Corresponding author: <a href="mailto:docentetp66@uniamdes.edu.ec">docentetp66@uniamdes.edu.ec</a>

Received: 07-02-2023 Accepted: 13-03-2023 Published: 10-04-2023

### ABSTRACT

Introduction: the COVID-19 pandemic has an impact on public health, economic growth and social development. In people, these effects are reflected in the health and economic situation, particularly in the elderly. Objective: to characterize health care during the COVD-19 pandemic in the elderly at the San Francisco health center in the city of Tulcán, Ecuador. Method: an observational, descriptive, crosssectional study was carried out with qualitativequantitative techniques. The population made up of 28 older adults from the San Francisco Health Center, city of Tulcán, Ecuador. The variables used were about the care provided by health personnel to the elderly. The data obtained together with the experience of the authors allowed triangulating the results and writing the final report of the research. Results: 75% of the respondents received guidance on measures for prevention and the importance of care; 67.8% indicated that they did not receive timely attention to the demand, 92.8% evaluated the communication as adequate; 45% received monthly care; 50% did not receive psychological care. **Conclusions:** COVID-19 constitutes an inconvenience for adequate health care in older adults. Multidisciplinary, comprehensive, integrated and centered care for older people in primary health care is needed. They need more support due to their vulnerability and comorbidities. Adequate home care is effective in preventing the disease and therefore its complications.

**Keywords:** COVID-19; older adults; health care; Ecuador; elderly



### RESUMEN

Introducción: la pandemia de la COVID-19 tiene impacto en la salud pública, en el crecimiento económico y en el desarrollo social. En las personas, estos efectos se reflejan en la salud y situación económica, en particular en las personas adultas mayores. Objetivo: caracterizar los cuidados de la salud durante la pandemia de COVD-19 en los adultos mayores del centro de salud San Francisco de la ciudad de Tulcán-Ecuador. Método: se realizó un estudio observacional, descriptivo de corte transversal con técnicas cualicuantitativa. El universo constituido por 28 adultos mayores del Centro de Salud San Francisco, ciudad de Tulcán, Ecuador. Las variables utilizadas fueron sobre la atención brindada por el personal de salud a los adultos mayores. Los datos obtenidos unido a la experiencia de los autores permitieron triangular los resultados y redactar el informe final de la investigación. Resultados: el 75 % de los encuestados recibieron orientación sobre medidas para la prevención y la importancia de los cuidados; el 67,8 % señala no recibió atención oportuna ante la demanda, el 92,8 % evaluaron como adecuada la comunicación; el 45 % recibió atención mensual, el 50 % no recibió atención psicológica. Conclusiones: la COVID-19 constituye un inconveniente para el adecuado cuidado de la salud en los adultos mayores. Se necesita atención multidisciplinaria, integral, integrada y centrada en las personas mayores en la atención primaria de salud. Necesitan mayor apoyo por su vulnerabilidad y comorbilidades. La atención domiciliaria adecuada es efectiva para la prevención de la enfermedad y por tanto de las complicaciones.

**Palabras clave:** COVID-19, adultos mayores, cuidados a la salud; Ecuador

### RESUMO

Introdução: a pandemia de COVID-19 tem impacto na saúde pública, no crescimento econômico e no desenvolvimento social. Nas pessoas, esses efeitos se refletem na situação econômica e de saúde, principalmente nos idosos. Objetivo: caracterizar a atenção à saúde durante a pandemia de COVD-19 em idosos no centro de saúde San Francisco na cidade de Tulcán-Equador. Método: estudo observacional. descritivo, transversal, com técnicas qualiquantitativas. O universo foi constituído por 28 idosos do Centro de Saúde San Francisco, cidade de Tulcán, Equador. As variáveis utilizadas foram sobre os cuidados prestados pelos profissionais de saúde aos idosos. Os dados obtidos juntamente com a experiência dos autores permitiram triangular os resultados e redigir o relatório final da investigação. Resultados: 75% dos entrevistados receberam orientações sobre as medidas de prevenção e a importância dos cuidados; 67,8% indicaram que não receberam atendimento oportuno à demanda, 92,8% avaliaram a comunicação como adequada; 45% recebiam atendimento mensal, 50% não recebiam atendimento psicológico. Conclusões: A COVID-19 constitui um inconveniente para os cuidados de saúde adequados aos idosos. É necessária uma atenção multidisciplinar, integral, integrada e centrada ao idoso na atenção primária à saúde. Eles precisam de mais apoio devido à sua vulnerabilidade e comorbidades. O cuidado domiciliar adequado é eficaz na prevenção da doença e, consequentemente, de suas complicações.

**Palavras-chave:** COVID-19, idosos, cuidados de saúde; Equador

#### How to cite this article:

Chicaiza Guaña NO, Guerrón-Enríquez SX, Narváez Jaramillo ME, Maynard-Bermúdez RE. Health care in times of COVID-19 for older adults from the San Francisco de Tulcán Health Center, Ecuador. Rev Inf Cient. 2023; 102:4193. DOI: https://doi.org/10.5281/zenodo.7814385



## INTRODUCTION

The COVID-19 pandemic has had a significant impact on public health, economic growth and social development in the countries. These effects are reflected in people's health and economic situation, particularly in the elderly who are considered a risk group, which affects their needs and vulnerabilities with respect to their right to health. This is evidenced by the higher mortality rates in elderly people with comorbidities and functional impairment and the fragility of health systems to support older adults and consider their unique needs.<sup>(1,2)</sup>

Everyone knows that Latin America is aging rapidly, so the demographic and epidemiological transition is taking place in an unfavorable economic scenario that puts the region at a disadvantage to assume the health transition.

It is very important to know that when analyzing health care in times of pandemic it is necessary to have valid information on the quality of patient care. Since this information helps to prevent and improve care for the elderly;<sup>(3,4)</sup> in this health situation, efficiency in the use of resources that have been allocated to the sector is sought. The activities for nursing professionals in the medical units of the Ministry of Public Health (MPH) seek to be effective in meeting the objectives. One of them is the quality of health care for vulnerable groups such as the elderly. However, the pandemic has prevented these groups from accessing the different strategies that the health authority has planned to guarantee their care.

Older adults do not receive the assistance planned through the strategies that the MPH has developed for their care. This is due to the predominant type of population, with a predominance of young people over older adults. Since the majority of the population is young, the efforts of the health authorities are focused on meeting the service needs of this segment of the population. Thus, care for older adults is contingent on the premise of increasing the budget for personnel or supplies in order to access quality services for adults.<sup>(5,6)</sup>

Older adults need continuous care that guarantees their education and support. In addition, there is a need for greater responsibility of direct family members with their care. Families often assume health care without prior preparation, which brings stress and depression in caregivers and in the elderly, and situations of abuse that are often unintentional.<sup>(7)</sup> Therefore, the caregiver needs to be trained to achieve a better management of the elderly person, as well as contribute to improving their quality of life.<sup>(7)</sup>

Being aware of the situation of older adults in the face of the new coronavirus, compiling the main general and specific preventive measures for their protection, integrating information and clinical data on health care in times of pandemic, as well as identifying factors associated with better care could serve to propose strategies and a possible solution to the problem.



In Ecuador, publications on contagion and impact of the coronavirus (COVID-19) are scarce. In the San Francisco Health Center in the city of Tulcán, clubs were in operation before the appearance of the COVID-19 pandemic. There, activities were carried out that helped, to some extent, to make older adults aware of the need for adequate health care, based mainly on the attention to their illnesses and the corresponding medications. Thus, since the appearance of the virus, difficulties with care were observed in older adults, specifically with respect to COVID-19.

In order to deepen in the causes and consequences of the difficulties, the study is carried out with the objective of characterizing the health care during the pandemic of COVID-19 in older adults of the San Francisco Health Center of the city of Tulcán, Ecuador.

## METHOD

An observational, descriptive, cross-sectional study was carried out, using a qualitative-quantitative methodology. The population consisted of 28 older adults belonging to the San Francisco Health Center club in the city of Tulcán, Ecuador, who gave informed consent for their inclusion in the study.

The variables used on the care provided by the health personnel to the older adults were: orientation about their health care to prevent COVID-19; timely assistance when service was required; explanation of the importance of prevention measures and rules for home care; care provided in the home visit according to biosecurity requirements and care; education on topics related to COVID-19 care, for home care with respect for culture, customs and beliefs; periodicity of medical check-ups; psychological care received during the year.

The methods used for the collection of information were anecdotal records of outpatient consultations with the elderly and analysis of data collected from a questionnaire applied to patients of the senior citizens' club of the San Francisco Health Center.

The information obtained from the analysis of the anecdotal records was translated into conceptual appreciations that provided elements of useful judgments to improve care in this type of patient. The data obtained from the questionnaire were grouped and tabulated using the Microsoft Excel program.

The data obtained from the anecdotal records, the instruments applied, together with the authors' experience, made it possible to triangulate the results and write the final research report.

## RESULTS

When showing the results of Table 1, referring to the care provided by health personnel to the older adults of the San Francisco Health Center club in the city of Tulcán, it was found that with respect to the criterion orientation provided about their health care to prevent COVID-19, 75% of the



respondents indicated that they always received orientation at the health facility, while 25% stated that they never received it.

With respect to timely assistance in the face of the demanded service need, 67.8% of the respondents mentioned that the staff did not arrive in a timely manner. Only 32.2% of the respondents indicated that they did come to their call in a timely manner.

**Table 1.** Attention provided by health personnel to older adults at the San Francisco Health Center club in the city of Tulcán.

Criteria -	Always		Almost Always		Almost Never		Never	
	No.	%	No.	%	No.	%	No.	%
Counseling on health care to prevent COVID- 19	21	75.0	-	-	-	-	6	25.0
Timely assistance in response to the demanded service need	9	32.2	-	-	-	-	19	67.8
Explanation of the importance of prevention measures and rules for home care	21	75.0	-	-	-	-	6	25.0
Attention provided in the home visit according to biosafety requirements and care	15	53.6	13	46.4	-	-	-	-
Education provided on topics related to COVID-19 care for home care with respect for culture, customs and beliefs	26	92.8	-	-	-	-	2	7.2

Source: Questionnaire.

Regarding the criterion of receiving an explanation of the importance of prevention measures and rules for home care, 75% of the older adults indicated that the importance of COVID-19 prevention measures and other rules for home care were always explained to them, and 25% stated that the explanation by health personnel did not exist.

The results also show that 53.6% of the respondents stated that they always received care based on their requirements and the respective biosafety care at the home visit. Forty-six percent, nearly half of them indicated that care according to biosafety requirements and obligations was almost always provided.

Regarding the education provided on topics related to care in COVID-19 for home care with respect for culture, customs and beliefs, the results showed that 92.8% of the older adults expressed adequate communication, respecting their culture, customs and practices for home care.

The results shown in Graph 1, referring to the periodicity of medical check-ups received by the older adults of the San Francisco Health Center club in the city of Tulcán, show that 45% of those surveyed preferred to receive monthly care, 38% received bimonthly care, and only 17% received quarterly care.





**Graphic 1.** Periodicity of medical check-ups received by the older adults of the San Francisco Health Center club in the city of Tulcán.

Fifty percent of the respondents stated that they had not received psychological care during the year, 39% were unaware of it and only 11% reported having received it. All of which is shown in Graph 2, referring to the psychological care received during the year by older adults of the San Francisco Health Center club in the city of Tulcán.



**Graphic 2.** Psychological care received during the year by the older adults of the San Francisco Health Center club in the city of Tulcán.



## DISCUSSION

The results obtained in the characterization of health care provided to older adults during the pandemic of COVD-19 in the San Francisco Health Center in the city of Tulcán, Ecuador, revealed that most of the respondents received preventive health care during the pandemic, consisting of guidance on how to avoid the disease and the importance of compliance measures and health care. These findings did not correspond with the results obtained by Calle Andrade and Naula Chucay, in their study on the fulfillment of the role of health personnel, where they identified that nursing actions during the pandemic were predominantly curative with few operations and interventions in the field of prevention and promotion activities.<sup>(8)</sup>

It is significant that a group of older adults, even though they were a minority, stated that they never received guidance on special care regarding COVID-19. The vulnerability of this age group to infection and unfavorable evolution of this disease is well known. This could be associated to the increase in work, overload and work wear and tear as an effect suffered by health personnel during the period.

It was considered that due to the high lethality rates of the disease, the health personnel of the San Francisco Health Center prioritized preventive measures in this age group, considered as highly vulnerable. They were based on the preventive practices adopted by the health center before the pandemic, related to the analysis of needs and preventive measures designed for the prevention and control of diseases.<sup>(9,10,11,12)</sup>

Experts from the Pan-American Health Organization (PAHO) state that while everyone is at risk of contracting COVID-19, older people are more likely to become seriously ill if infected, with those over 80 dying at a rate of five times greater than the mean. Residences or long-term care facilities have been the most affected, and research results show that they contributed between 40% and 80% of deaths from COVID-19 worldwide.<sup>(13)</sup>

In the Americas, where the care of older adults is predominantly provided at home, physical distance constitutes a particular challenge.<sup>(12)</sup> With this premise, for the authors it was significant that timely assistance in response to the need for service demanded by the elderly did not occur in most cases. When care did occur, the requirements were met, taking care of biosecurity measures, as well as respect for culture, customs and beliefs, which allowed for adequate communication with the older adults.

The authors considered that home visits were effective during the period in the cases in which they were made. This made it possible to diagnose COVID-19-related complications early, and gave the health center staff more opportunity to carry out actions to this end.

The study also found that a high percentage of older adults received care at home once a month. This preference was based mainly on the fear of contagion due to exposure at the health center. This measure proved to be valid to avoid the high risk of contagion in health institutions. These results are consistent with research supporting the importance of home care to prevent exposure in health centers.<sup>(14)</sup> However, more than half of the cases received care on a bimonthly and quarterly basis. This



did not comply with the schedule of monthly visits established in the operational guidelines for comprehensive care of the elderly <sup>(15)</sup> and, therefore, with the necessary preventive actions, including the detection of lonely older adults with psychological problems.

A high number of older adults did not receive psychological care from the health care team, even though it is known that comprehensive care is necessary for this group because they are often exposed to abandonment by their families, and therefore, at high risk of depression. The research presented Effects of isolation in older adults during the COVID-19 pandemic: a review of the literature<sup>(15)</sup> and the study on COVID-19 in the elderly: clinical characteristics and impact on mental health<sup>(16)</sup>, show similar results to these.

In the same way, several important elements contained in Huera Pozo's research were evidenced, in which it was rightly contextualized that the elderly have become part of a vulnerable group of the highest consideration from the collective criterion and from the authorities. It became evident the need for the people who maintain direct contact with them to have specific knowledge about the care they need.<sup>(11,16)</sup> Lack of knowledge leads to serious complications, which can cause consequences in the life of the elderly, such as disability, chronic diseases and even death.

# CONCLUSIONS

The COVID-19 pandemic constitutes a drawback for adequate health care in older adults. It has reaffirmed the need for multidisciplinary, comprehensive, integrated, and elder-centered care in primary health care. They need greater support due to their vulnerability and comorbidities. Adequate home care is effective for the prevention of the disease and therefore of complications.

# REFERENCES

- 1. OPS/OMS. La COVID-19 y Adultos Mayores. www.paho.org. Available in: <u>https://www.paho.org/es/envejecimiento-</u> <u>saludable/covid-19-adultos-mayores</u>
- Orozco-Rocha K, González-González C. Vulnerabilidad de salud y económica de los adultos mayores en México antes de la COVID-19. Rev Nov Pob [Internet]. 2021 [cited 7 Mar 2023]; 17(33):61-84. Available in:

http://scielo.sld.cu/scielo.php?script=sci\_art text&pid=S1817-40782021000100061&lng=es&nrm=iso

3. Castro R. Coronavirus, una historia en desarrollo. Rev Méd Chile [Internet]. 2020

 Feb
 [cited
 27
 Oct
 2022];
 148(2):143-4.

 Available
 in:

 https://www.scielo.cl/scielo.php?script=sci

 arttext&pid=S0034-9887202000200143

- Ministerio de Salud Pública. Coronavirus COVID-19. www.salud.gob.ec. [cited 15 Feb 2022]. Available in: <u>https://www.salud.gob.ec/coronaviruscovid19-ecuador/</u>
- 5. OISS. El reto del COVID-19. oiss.org. [cited 21 Oct 2022]. Available in: <u>https://oiss.org/pt/el-reto-del-covid-19/</u>
- Maynard Bermúdez R, Barthley Debrok L, Hodelín Carballo H, Santiago Paz D, Michel Brooks G. Capacitación para cuidadores



primarios de personas adultas mayores dependientes desde la educación popular. Rev Inf Cient [Internet]. 2016 [cited 15 Feb 2022]; 95(2):213-223. Available in: https://revinfcientifica.sld.cu/index.php/ric/ article/view/101

- 7. Calle Andrade EC, Naula Chucay LE. Factores que influyen en el cumplimiento del rol del personal de salud en la promoción y prevención de la salud de los adultos mayores que acuden al Centro de Salud el Tambo y San Gerardo en la Troncal, período 2016 [Tesis Licenciado en Enfermería]. Cuenca-Ecuador: Universidad de Cuenca; 2017 [cited 21 Oct 2022]. Available in: http://dspace.ucuenca.edu.ec/handle/12345 6789/26236
- Rodríguez-Marín DS. Protección respiratoria para profesionales de cuidados de la salud. Una perspectiva ante el COVID-19. Cir Gen [Internet]. 2020 Sep [cited 23 Oct 2022]; 42(2):126-31. Available in: https://www.medigraphic.com/cgibin/new/resumen.cgi?IDARTICULO=95372
- Shahid Z, Kalayanamitra R, McClafferty B, Kepko D, Ramgobin D, Patel R, et al. COVID-19 and Older Adults: What We Know. J Am Geriatr Soc [Internet]. 2020 May [cited 28 Oct 2022]; 68(5):926-9. DOI: https://doi.org/10.1111/jgs.16472
- 10.Huera Pozo NE. Percepción de la calidad y cuidado de enfermería del adulto mayor, Centro Geriátrico de Atención Integral "Sara Espíndola", Tulcán 2017. [Tesis Licenciatura en Enfermería]. Ibarra-Ecuador: Universidad Técnica del Norte, Facultad Ciencias de la Salud; 2017 [cited 27 Oct 2022]. Available in: <u>https://bit.ly/4112pOf</u>
- 11.Ávila Fematt FM. Definición y objetivos de la geriatría. 2010 [cited 28 Oct 2022]; 5:6. Available in: https://www.medigraphic.com/pdfs/residen

te/rr-2010/rr102b.pdf

Universidad de Ciencias Médicas de Guantánamo

12.Abades Porcel M. Los cuidados enfermeros en los centros geriátricos según el modelo de Watson. Gerokomos [Internet]. 2007 Dic [cited 27 Oct 2022]; 18(4):18-22. Available in:

https://scielo.isciii.es/scielo.php?script=sci abstract&pid=S1134-928X2007000400003&Ing=es&nrm=iso&tIng =es

- 13.Vega Rivero JA, Ruvalcaba Ledezma JC, Hernández Pacheco I, Acuña Gurrola M del R, López Pontigo L, Vega Rivero JA, *et al.* La salud de las personas adultas mayores durante la pandemia de COVID-19. JONNPR[Internet]. 2020 [cited 28 Oct 2022]; 5(7):726-39. Available in: <u>https://dx.doi.org/10.19230/jonnpr.3772</u>
- 14.MSP. Lineamientos operativos para la atención integral del adulto mayor. hospitalgeneralchone.gob.ec, 2018 [cited 10 Oct 2022]. Available in: <u>https://hospitalgeneralchone.gob.ec/wpcontent/uploads/2018/07/Lineamientos-Adulto-Mayor.pdf</u>
- 15.Granda-Oblitas A, Quiroz-Gil GX, Runzer-Colmenares FM. Efectos del aislamiento en adultos mayores durante la pandemia de COVID-19: una revisión de la literatura. Acta Méd Peru [Internet]. 2021 Oct [cited 27 Oct 2022]; 38(4):305-12. DOI: <a href="http://dx.doi.org/10.35663/amp.2021.384.2">http://dx.doi.org/10.35663/amp.2021.384.2</a>
- 16.Álvarez CA, Ávila CR, García NY, Quintanilla WE, Sierra MA. COVID-19 en el adulto mayor: características clínicas e impacto sobre la Salud Mental. Rev Méd Hond [Internet]. 2021 Dic [cited 28 Oct 2022]; 89(2):142-7. Available in: <u>https://revistamedicahondurena.hn/assets/ Uploads/Vol89-2-2021-29.pdf</u>



#### **Conflict of interest:**

The authors declare that there are no conflicts of interest.

#### Author contributions:

Conceptualization: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo.

Data curation: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.

- Formal analysis: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.
- Investigation: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.
- Methodology: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.

Project administration: Néstor Oswaldo Chicaiza-Guaña.

- Supervision: Néstor Oswaldo Chicaiza-Guaña.
- Validation: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.
- Visualization: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.

Writing-original draft: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo. Writing-revision and editing: Néstor Oswaldo Chicaiza-Guaña, Sara Ximena Guerrón-Enríquez, Melba Esperanza Narváez Jaramillo, Ruby Esther Maynard-Bermúdez.

#### Funding:

The authors did not receive funding for the development of the present research.

