Project Implementation Committee meeting -Results of the Needs Identification Survey-

June 1st, 2023

1

Purpose of the survey

- Understand the situation, living condition and issues of the elders living in the 4 pilot GNs (Colombo and Kandaketiya)
- Identify areas to be improved/worked in each pilot GN based on the results and current resources they have.

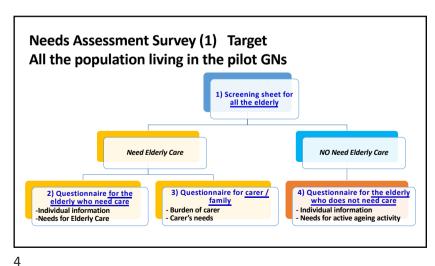
(The issues which they can solve by themselves)

 Make plan of the each GN (Working Committee), Regional/DS level (Technical Working Group) and Provincial/National level (Project Implementation Committee) based on their issues and concerns

Today's discussion

- · Results of the needs assessment survey
- Discussion results from the pilot sites (TWG and WC)
- Good practice after the training session in Japan last year
- Discussion among the members
- · Way forward

2



Outreach activities

- In order to reduce burden of the field workers, we recommended to conduct outreach activities for the interview session
- Interview session was conducted with medical check as outreach activities by significant collaboration with CSTH.
- CSTH has developed instruction of the outreach activities for pilot sites



5

Questions for screening physical function

- ඔබේ දෛනික ජීවිතයේ ශාරීරික වලනයන් සඳහා ඔබට කාගෙන් හෝ යම සහයක් අවශාද?
- Do you need any assistance for physical movements from anyone in you daily life?

No.	පුශ්තය	Question
අංක 1	ඔයාගේ වයස කීය ද?	How old are you?
2	දැන් වේලාව කීයද? (ළහම පැය දක්වා)	What time is it now? (to nearest hour)
3	මේ කුමන වසරූ?	What year is this year?
4	මෙම ස්ථානයේ නම කුමක්ද? (සම්මුඛ පරීක්ෂණ සැසිය	What is the name of this place? (where to conduct
	පවත්වන ස්ථානය: පහසුකමේ නම හෝ ස්ථානයේ නම)	interview session: name of facility or name of place)
5	සම්මුඛ පරීක්ෂකවරයා හඳුනා ගැනීම (දොතියා, සම්මුඛ	Identification of interviewer (relative, surveyor, etc.
	පරීක්ෂකවරයා, ආදිය , තත්ත්වය හෝ රැකියාව)?	status or occupation)?
6	ඔයාගේ උපන් දිනය කවදා ද?	When is your birthday?
7	ශී ලංකාවේ නිදහස් වර්ෂය කවදාද?	When is the independence year of Sri Lanka?
8	වත්මන් ජනාධිපතිවරයාගේ නම?	Name of the current President?
9	කරුණාකර අංක 20 සිට 1 දක්වා පසුපසට ගණන් කරන්න	Please count the numbers backwards from 20 to 1?
10	ලිපිනය නැවත මතකෙන් පවසන්න (හැකිනම් නිවසේ	Address for recall at end of test?
	අංකය, වීදි නම ඇතුළුව, අවම වශයෙන් ගමේ නම)	(At least name of the village, also including the house

Contents of the survey

	Target
Survey 2	Elders who need support
Survey 3	Persons accompany with the elders joining the survey 2
Survey 4	Healthy elders who do not need supports

7

Contents of the survey (by April 17th, 2023)

		•			
	GN-A (Colombo)	GN-P (Colombo)	GN-KU (Kandaketiya)	GN-K (Kandaketiya)	Total
Survey 2	42	29	39	41	151
Survey 4	331	179	77	120	707
Total	373	208	116	161	858
Target	570	225	126	218	1139
Percentage	65.4%	92.4%	92.1%	73.9%	75.3%
Survey 3	26	11	12	9	58
			* GN-KU has ach	ieved 100% (by end	l of May)

Issues on data identified

- Difficult to check relation of the information of Survey 1 and Survey 2+4
- →Will ask WC to check the correlation of the data
- It is missing information of the hard-to-reach elders
- → Will ask WC to continuously follow the elders who are not surveyed yet.
- Some surveyors did not follow the screening rule
- → Will see data as reference Will improve the questionnaire

10

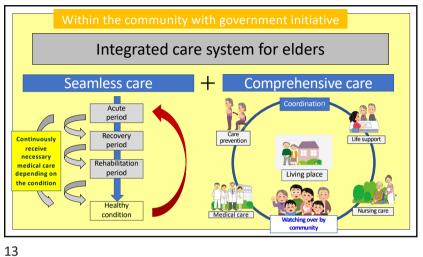
Outline of the interviewees

9

		Sampl	e size		Age	2	
Name of GN	division	Number	%	Average±STD	Median	Minimum value	Maximum value
GN-Athurugiriya	ഗുരുക്ട്/Female	271	67.4%	70.2+6.8	69	60	91
(GN-A)	පිරිම්/Male	131	32.6%	71.6±6.6	72	60	90
	Total	402		70.6±6.7	70	60	91
GN-Poureghedara	ഗുരുക്ട്/Female	122	63.9%	70.2±6.7	70	58	90
(GN-P)	පිරිම්/Male	69	36.1%	69.1±5.8	70	60	83
	Total	191		69.8±6.4	70	58	90
GN-Kandakepu Ulpota	ഗുരുക്ട്/Female	67	54.0%	67.7±5.8	67	60	85
(GN-KU)	පිරිම්/Male	57	46.0%	69.0±6.6	70	60	85
	Total	124		68.3±6.2	67	60	85
GN-Kiuleghedara	ഗുരുക്ട്/Female	90	55.9%	68.9±7.0	67.5	60	90
(GN-K)	පිරිම්/Male	71	44.1%	68.1±6.1	68	60	85
	Total	161		68.5±6.6	68	60	90
Overall	ഗുരുക്ട്/Female	550	62.6%	69.7±6.7	69	58	91
	පිරිම්/Male	328	37.4%	69.9±6.5	70	60	90
	Total	878		69.8±6.6	69	58	91

Key factors of the integrated care system in Japan -- Plants for elderly care --Provision of a lot of different care services Mechanism to ensure financial, social and health supports different types of medical Ensure diversified life support services such as watching over, foods, shopping and so on condition as long as possibl To keep healthy life elderly people can illingness and attitude of elders and their family after retirement Cited from Ministry of Health and labors in Japan

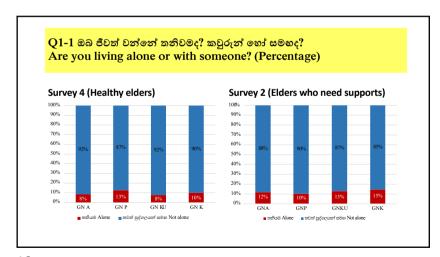
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Survey Results

14

Situation of the household and living place



මබ දැන් ජීවත් වන්නේ කුමන ආකාරයේ නිවාසවලද?
(What type of housing do you live in now?) (Percentage)

Survey 4 (Healthy elders)

Survey 2 (Elders who need supports)

Survey 2 (Elders who need supports)

Survey 3 (Flores who need supports)

Survey 3 (Flores who need supports)

Survey 3 (Flores who need supports)

Survey 4 (Healthy elders)

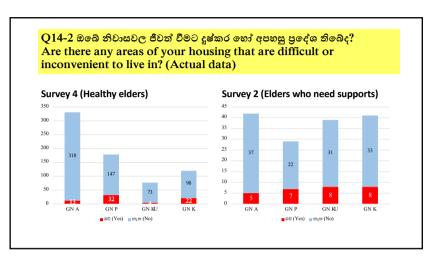
Survey 5 (Elders who need supports)

Survey 6 (Flores who need supports)

Survey 8 (Flores who need supports)

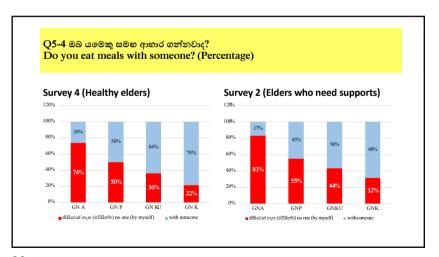
Survey 9 (Flores who need supports)

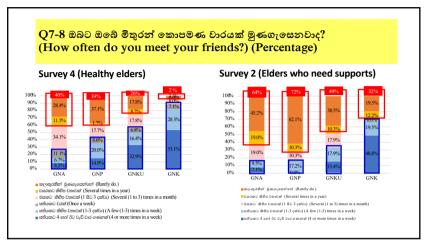
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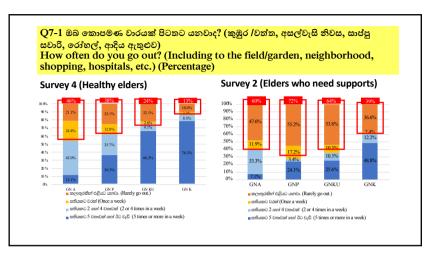


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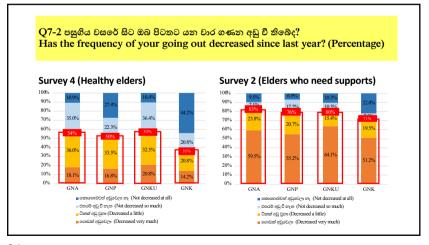
සමාජ සහභාගීත්වය / කුියාකාරකම් / හුදකලා වීමේ පුශ්තය Social participation/activities/Issue of isolation

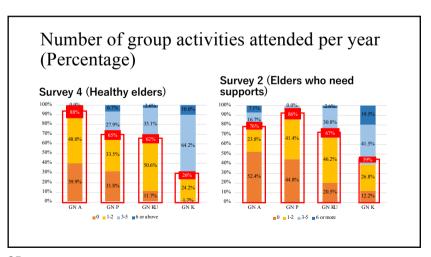


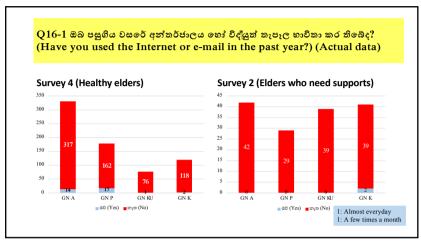


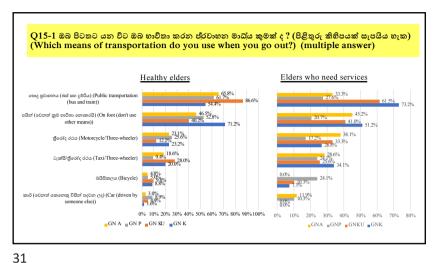


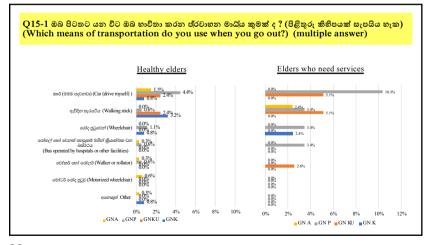
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Care prevention

භෞතික ක්රියාකාරිත්වය සහ සැලකිල්ල Physical function and concern

34

ශාරීරික ගැටලු පිළිබඳව තක්සේරුව Evaluation of Physical problem

වැඩිමහල්ලන් පුශ්න 5ක් අතරින් සැක සහිත පිළිතුරු 3කටවත් පිළිතුරු දෙන්නේ නම්, ඔවුන් ඇද වැටීමේ අවදානමක් ආක.

If elders answer at least 3 suspected answers among 5 questions, they might have risk of fall down.

ඔබ පසුගිය වසර තුළ පඩිපෙළකින් ගලකින් වැනි දෙයක් මනින් වැටී තිබේ ද ?

(Have you fell down over something such as stairs, stones, etc. in the past 1 year?) →Yes

බිම වැටීම ගැන ඔබට විශාල සැලකිල්ලක් තිබේද?

(Do you have big concern about falling down?) →Yes

අත් වැට හෝ බිත්තිය අල්ලා නොගෙන ඔබට උඩුමහලට යා හැකිද?

(Can you go upstairs without holding onto handrail or wall?) \rightarrow No

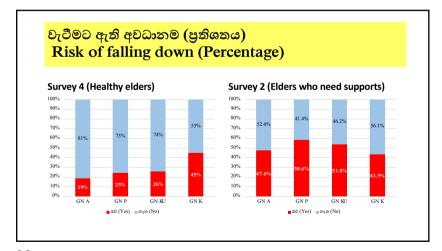
ඔබට කිසිවක් අල්ලා නොගෙන පුටු වලින් නැගී සිටිය හැකිද?

(Can you stand up from chairs without holding anything?) → No

විනාඩි 15ක් විතර නවත්තන්නෙ නැතුව ඇවිදින්න පුලුවන්ද?

35

(Can you walk without stopping for about 15 minutes?) →No



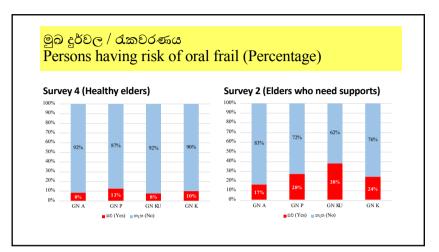
මුඛ දුර්වල / රැකවරණය Oral frail / care

මුඛයේ දුර්වලතා තක්සේරු කිරීම Evaluation of oral frail

මෙම පුශ්න දෙකට වැඩිහිටියන්ගේ පිළිතුර "ඔව්" නම්, මුබයේ දුර්වලතාවයක් අති බවට සැක සහිතය

If elders answer "Yes" about two of these questions, it is suspected to have oral frail.

- වසර භාගයකට පෙර හා සසඳන විට ආභාර හපන්න අපහසු බව ඔබට හැඟෙනවාද ? Do you feel that it becomes more difficult to chew food compared with half a year ago?
- ඔබ සමහර විට තේ හෝ සුප් බොනවිට හිර වෙනවාද? Do you sometimes get choked on tea or soup?
- පිපාසය දැනීම පිළිබඳ ඔබ කරදර වෙනවාද? Are you bothered by a feeling of thirst?



38

සංජානන කාර්යය ගැන සැලකිලිමත් වීම Concern about cognitive function

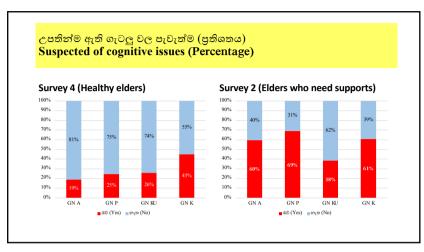
උපතින්ම ඇති ගැටලු හදුනා ගැනීම Evaluation of the cognitive issues

• If the elders answer "yes" in both questions, they are categorized in the suspected to have cognitive issues.

මේ දවස්වල ගොඩක් දේවල් අමතක වෙනවා කියලා හිතනවද? (Do you think you forget many things these days?)

ඔබ නිකරම එකම දේ අසන බව හෝ ඔබට බොහෝ දේ අමකක වන බව ඔබ අවට සිටින අය පවසනවාද?

(Do people around you say that you always ask the same things or you often forget many things?)



ලෛතික ජීවිතයේ උපකරණමය කියාකාරකම් IADL (Instrumental Activities of Daily Living)

42 43

දෛතික ජීවිතයේ උපකරණමය කියාකාරකම් යනු මොනවාද?

What is IADL (Instrumental Activities of Daily Living)?

දෛනික ජීවිතයේ උපකරණ කියාකාරකම් යනු එදිනෙදා ස්වාධීන ජීවන රටාවකට අවශා කුසලතා සහ හකියාවන් වේ. මෙම කියාකාරකම් අතුයාවශා මුලික කියාකාරකම් සඳහා අවශා යැයි නොසැලකේ, නමුත් එදිනෙදා ජීවන තත්ත්වය සහ සාපේක්ෂ ස්වාධීනත්වය තහවුරු කිරීම සඳහා වැදගත් ලෙස සැළකේ. බාහිර ආධාර නොමැතිව පුද්ගලයෙකුට තම නිවසේ ආරක්ෂිතව වාසය කළ හැකිද යන්න තක්සේරු කිරීම සඳහා දෛනික ජීවිතයේ උපකරණ කියාකාරකම් කළමනාකරණය කිරීමට පුද්ගලයෙකුට ඇති හැකියාව පිළිබඳ ඇගයීම බොහෝ විට

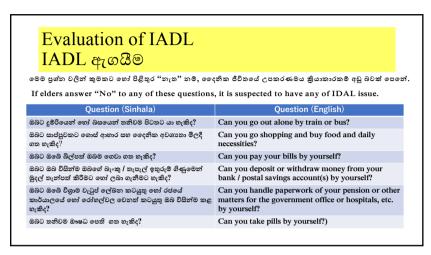
දෛනික ජීවිතයේ උපකරණ කියාකාරකම් සඳහා අවධානය යොමු කළ යුතු ක්ශේතු 8 ක් ඇත.

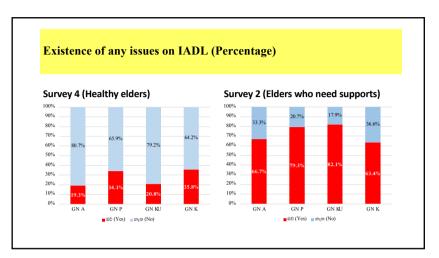
Instrumental activities of daily living are the skills and abilities needed to perform certain day-to-day tasks associated with an independent lifestyle. These activities are not considered to be essential for basic functioning, but are regarded as important for assessing day-to-day quality of life and relative independence. An evaluation of a person's ability to manage instrumental activities of daily living is often used as one of several factors to assess whether an individual can safely continue to reside in their own home without outside assistance

There are typically 8 areas of focus for instrumental activities of daily living, including:

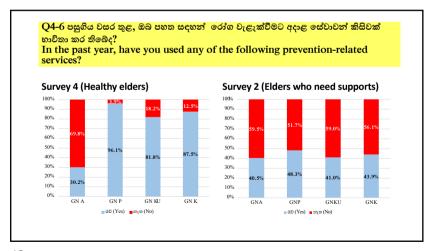
- දූරකථනයක් භාවිතා කිරීමේ හැකියාව / Ability to • ආහාර පිළියෙළ කිරීම Meal preparation use telephone
- රෙදී සේදීම සහ ඇදුම් ඇදීම / Laundry and dressing
- සාප්පු (කඩේ) යාම සහ දිවීමේ කටයුතු / Shopping and running errands
- පුවාහනය Transportation

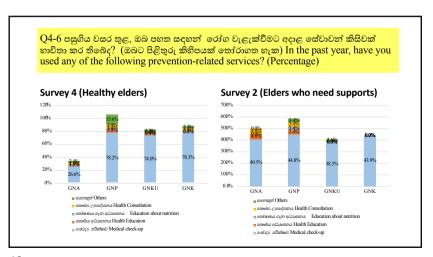
- ඖෂධ කළමනාකරණය Medication management
- ගෘහ පාලන කටයුතු Housekeeping activities
- මූලා කළමනාකරණ හැකියාව Ability to manage





46 47





වැඩිහිටි සත්කාර සේවා Elderly care services

Q2. ඔබගේ වත්මන් සේවා භාවිතය හෝ අනාගතයේ දී භාවිතා කිරීමට කැමති සේවා පිලිබද ඔබෙන් විමසීමට අපි කැමැත්තෙමු.

We would like to ask you about your current service utilization or future service utilization preferences

Q2-1 (Healthy elders: survey 4) ඔබට (වැඩිහිටි පුද්ගලයාට) දැනට කිසියම් පොදු වැඩිහිටි සත්කාර සේවාවක් ලැබේද? (එකක් තෝරගන්න) Do you (the elder person) currently use any public elderly care services? (Select one) Actual number Percentage

51 50

Q2-2 ඔබ මහජන සත්කාර සේවා භාවිතා නොකිරීමට හේතු මොනවාද? (ඔබට පිළිතුරු කිහිපයක් තෝරාගත හැක)

What are the reasons why you do not use public care services?

	GN A	GN P	GN KU	GN K	Total
මම හොඳ නත්ත්වයේ සිටින අතර සේවා අවශා නැත (I'm in good condition and don't need services)	237	110	43	50	443
පවුලේ සාමාජිකයන් රැකවරණය සපයන නිසා මට සේවාවන් අවශා නොවේ (I do not need services because family members provide care)	109	24	4	3	147
මහජන වැඩිහිටි සක්කාර සේවාව ගැන මම නොදනිම් (I do not know about public elderly care service)	50	20	15	20	106
මට භාවිතා කිරීමට අවශා සේවාවන් මෙහි නොමැත (Services that I want to use are not available or not around here)	6	21	10	6	45
මට සේවාවන් භාවිතා කිරීමට අවශා නමුත් ඒවා සඳහා අයදුම් කරන්නේ කෙසේඇයි මම නොදනීම් (I want to use services but do not know how to apply for them)	13	9	3	5	31
මම පස්වාවන් භාවිතා කිරීමට කැමති නැත (I do not wish to use services)	6	4	1	3	15
අනෙකුත් (කරුණාකර සඳහන් කරන්න) (Other (Please specify))	3	4	0	1	9
මා කලින් භාවිතා කළ සේවාවන් ගැන මම සෑහිමකට පත් නොවෙම් (I was not satisfied with the services that I used before)	0	1	0	0	1
	319	172	74	84	649

Q2 දෛනික ශාරීරික කිුියාකාරකම්වල වත්මන් හැකියාව, සේවා භාවිතය සහ අවශානාවය හඳුනාගැනීම Identification of current capability of daily physical activities, utilization and necessity of services (Elders who need supports)

		මට තනිවම කළ හැකිය I can do by myself	පසනය ලැබේ Receiving support Family and relatives	රාජ්ය හෝ පෞද්ගලික සේවා Public or private services
1	කඩේ ගොසින් බඩු රැගෙන ඒම (shopping)	44	102	0
2	පිටතට යාම සඳහා උපකාර කිරීම (accompanying on outings)	50	101	0
3	වෛදා යකවරණය Medical care (tube feeding, stoma care, etc.)	53	78	5
4	මුලා කළමනාකරණය (Financial management)	53	91	0
5	අමුතු හැසිරීම, අමතක වීම වැනි සංජනනීය රෝග ලක්ෂණ සමහ කටයුතු කිරීම (Dealing with cognitive symptoms, such as strange behaviour, forgetfulness etc.)	54	95	0
6	ආහාර පිළියෙල කිරීම (Meal preparation)	67	82	1
7	කසළ බැහැර කිරීම (rubbish disposal)	70	85	0
8	ඖෂධ ලබාගැනීමට (Take medicines)	74	79	0

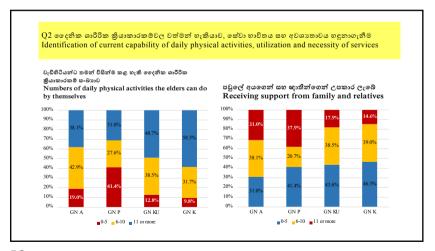
52 53

Q2 දෙනික ශාරීරික කුියාකාරකම්වල වත්මන් හැකියාව, සේවා භාවිතය සහ අවශාතාවය හදුනාගැනීම Identification of current capability of daily physical activities, utilization and

Identification of current capability of daily physical activities, utilization and necessity of services

		මට කනිවම කළ හැකිය I can do by myself	Family and relatives	රාජ්ය හෝ පෞද්ගලික සේවා Public or private services
9	පිරිසිදු කිරීම සහ රෙදි සේදීම (cleaning and laundry)	75	80	0
10	සෝදිසියෙන් සිටීම / බලා ගැනීම සහ කතා කිරීම / කතාබස් කිරීම (if you have someone watching over / looking after and talking/chatting)	79	73	0
11	ශරීරයේ ඉරියව්ව වෙනස් කිරීමට. (body posture change)	116	36	0
12	නැමට (Bathing)	117	38	0
13	ඔබේ නිවස තුළ ගමන් කිරීමට (moving in your house)	117	37	0
14	ඇඳුම් ඇඳීම සහ ඇඳුම් ගැලවීම (Dressing and undressing)	123	29	0
15	වැසිකිළි භාවිතයට (toilet care)	124	26	0
16	ශාරීරික පෙනුම පිළිබඳ (Tidy up personal appearance)	133	20	0
17	ආහාර ගන්නා විට (Eating meals)	134	19	0

54 55



Ranking of the activities which can not do by elders GN-A GN-P GN-KU GN-K කඩේ ගොසින් බඩු රැගෙන ඒම (shopping) පිටතට යාම සඳහා උපකාර කිරීම (accompanying on outings) 4 මුලා කළමනාකරණය (Financial management) 6 අමුතු හැසිරීම, අමතක වීම වැනි සංජනනීය රෝග ලක්ෂණ සමහ කටයුතු කිරීම (Dealing 4 with cognitive symptoms, such as strange behaviour, forgetfulness etc.) මෙවදා රැකවරණය Medical care (tube feeding, stoma care, etc.) ආහාර පිළියෙල කිරීම (Meal preparation) 10 ඖෂධ ලබාගැනීමට (Take medicines) 10 ක්ෂකය ලැබෙන් කිරීම (rubbish disposal) සෝදිසියෙන් සිටීම / බලා ගැනීම සහ කතා කිරීම / කතාබස් කිරීම (if you have someone 3 8 9 10 watching over / looking after and talking/chatting) පිරිසිදු කිරීම සහ රෙදි සේදීම (cleaning and laundry) නෑමට් (Bathing) 12 11 ඔබේ නිවස තුළ ගමන් කිරීමට (moving in your house) 11 13 15 12 ශරීරයේ ඉරියව්ව වෙනස් කිරීමට. (body posture change) 13 14 11 16 ඇඳුම් ඇඳීම සහ ඇඳුම් ගැලවීම (Dressing and undressing) 14 12 14 14 වැසිකිළි භාවිතයට (toilet care) 16 13 16 13 ශාරීරික පෙනුම පිළිබඳ (Tidy up personal appearance) 15 16 15 ආහාර ගන්නා විට (Eating meals) 15 17 17 17

(Medical care (tube feeding, stoma care, etc.)) 2 පිරිසිදු කිරීම සහ රෙදි සේදීම (cleaning and laundry) 18 9 3 6 3 මුලා කළමනාකරණය (Financial management) 7 8 4 කඩේ ගොසින් බඩු රැගෙන ඒම (ගෙදරට බෙදා හැරීමේ සේවාව නොවේ) 8 4 3 (shopping (not home delivery)) 5 ආහාර පිළියෙල කිරීම (උදා: පිසීම හෝ ගෙන්වා ගැනීම) (Meal preparation 2 16 8 4 (e.g. cooking or delivery) 6 පිටතට යාම සඳහා උපකාර කිරීම (රෝහලට යන්න, කඩේ ගොසින් බඩු 8 6 යාගත ඵමට, ආදිය) (accompanying on outings (hospital visits, අමුතු හැසිරීම්, අමතක වීම වැනි සංජනනීය රෝග ලක්ෂණ සමහ කටයුතු 2 2

Total GN A GN P GN KU GN K

(3) ඔබ දෛනික කටයුතු සඳහා අන් අයගේ සහාය ලබා ගැනීමට කැමතිද?

Would you like to have supports from others? (43 persons answered)

වෛදා රැකවරණය (නල පෝෂණය, ස්ටෝමා රැකවරණය, ආදිය)

කිරීම (Dealing with cognitive symptoms, such as strange behaviour,

forgetfulness etc.)

56 57

(3) ඔබ දෛනික කටයුතු සඳහා අන් අයගේ සභාය ලබා ගැනීමට කැමතිද? Would you like to have supports from others? (43 persons answered)

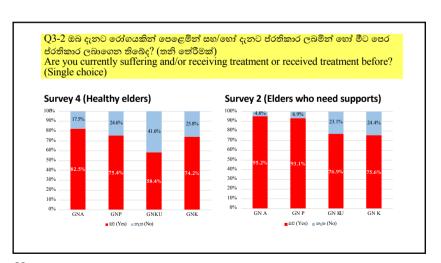
		Total			GN	
		Totai	GN A	GN P	KU	GN K
8	කසළ බැහැර කිරීම (rubbish disposal)	14	1	8	3	2
9	ශරීරයේ ඉරියච්ච වෙනස් කිරීමට. (body posture change)	14	1	6	5	2
10	සෞදිසියෙන් සිටීම / බලා ගැනීම සහ කතා කිරීම / කතාබස් කිරීම (if you	14	2	7	2	3
	have someone watching over / looking after and talking/chatting)					
11	නැමට (Bathing)	11	0	7	3	1
12	ඔබේ නිවස තුළ ගමන් කිරීමට (moving in your house)	10	1	5	0	4
13	ඖෂධ ලබාගැනීමට (Take medicines)	8	1	4	2	1
14	අැඳුම ඇඳීම සහ ඇඳුම ගැලවීම (Dressing and undressing)	7	1	4	2	0
15	වැසිකිළි භාවිතයට (toilet care)	6	2	3	0	1
16	ශාරීරික පෙනුම පිළිබඳ Tidy up personal appearance	6	1	3	2	0
17	ආහාර ගන්නා විට (Eating meals)	5	0	4	1	0

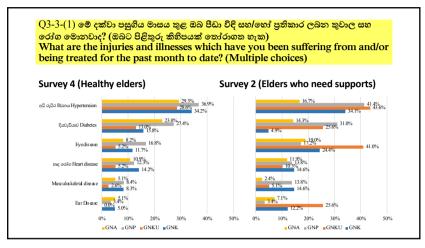
සෞඛාහ/වෛදා සේවාවන් Health/Medical services

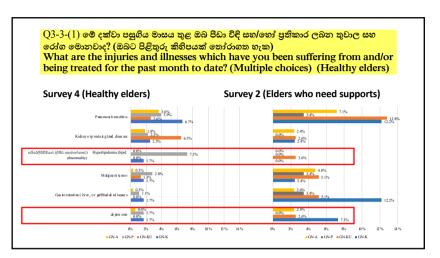
58 59

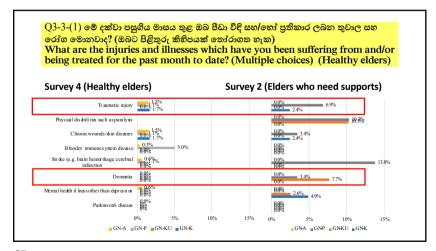
ශාරීරික තත්ත්වය Physical condition

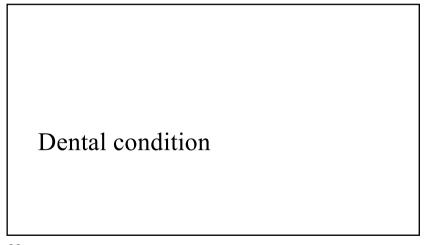
Q3. අපි ඔබේ භෞතික තත්ත්වය විමසීමට කැමැත්තෙමු We would like to ask your physical status.

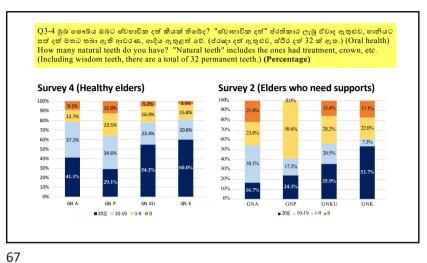












	තත්ත්වය al condition									
			GN	۱A	G	N P	GN	KU	G	ΝK
	එකතුව/ Total				208		116		161	
දක්	දක් 20 ට වඩා අඩු/ Less than 20 teeth				149	71.6%	60	51.7%	67	41.6%
දක්	දක් 10 ට වඩා අඩු/ Less than 10 teeth				82	39.4%	34	29.3%	39	24.2%
	එකතුව/ Total			41.7%	43	28.9%	0	0.0%	4	6.0%
		ඔව්, අපහසුවකින් තොරව Yes, without difficulty			39	90.7%	0		4	100%
කෘතීම දත් භාවිතා කිරීම/		මාරුවෙන් th difficulty	3	3.1%	3	7.0%	0		0	0.0%
Using Denture	දිනපතා කෘතීම දත් පිරිසිදු කිරීම /	ඔව් (Yes)	90	93.8%	41	95.3%	0		2	50.0%
	Clean denture	නැත (No)	3	3.1%	1	2.3%	0		2	50.0%
	every day	පිළිතුරක් නැත/ No answer	3	3.1%	1	2.3%	0		0	

ඇස් / පෙනීම Eye/seeing

Eye s	ල තත්ත්වය ituation										
-		Т	otal	G	NA	G	N P	GN	l KU	Gl	٧K
ē	එකතුව/ Total	858		373		208		116		161	
ඔබේ එදිනෙදා ජීවිතයේදී ඔබට දෘෂ්ටී අපහසුතා තිබේ ද? Do you have any difficulty of seeing in your daily life?		632	73.7%	262	70.2%	159	76.4%	93	80.2%	118	73.3%
ඛ සාමානා:යෙන් කණ්නාඩ් භාවිතා	අපහසුවකින් තොරව (without difficulty)	384	60.8%	238	90.8%	91	57.2%	26	28.0%	29	24.6%
කරනවාද? Do you	අමාරුවෙන් (with difficulty)	67	10.6%	12	4.6%	34	21.4%	10	10.8%	11	9.3%
කරනවාද? Do you usually use glasses?	අවශායි නමුත් මට නැහැ. (I need but I do not have.)	178	28.2%	34	13.0%	35	22.0%	43	46.2%	66	55.9%
පෙනීමේ අපහසුව නිසා	ඔබ කවදා හෝ සෞඛාා										
මධාඃස්ථානයකට ගොස් health facility due to d	ි තිබේද? Have you ever been to difficulty of seeing?	487	77.1%	211	80.5%	117	73.6%	65	69.9%	94	79.7%
ඔබට ඇසේ සුද ඇති බව හඳුනාගෙන තිබෙද? Were you diagnosed with cataract?		208	42.7%	101	47.9%	42	35.9%	26	40.0%	39	41.5%
	nagnosed with cataract? ඔබ ඇසේ සුද ඉවත් කිරීමේ සැත්කමක් කළාද? Did you receive cataract surgery?		65.4%	74	73.3%	28	66.7%	15	57.7%	19	48.7%

Q3-14 ඇසේ සුද ඉවත් කිරීමේ සැත්කමක් නොකළේ ඇයි? Why did not receive cataract surgery?

	1	Γotal	(in A		GN P	G	N KU	(3N K
එය මීල අධිකයි (Expensive)	16	23.9%	7	33.3%	5	35.7%	2	16.7%	2	10.0%
මගේ ස්ථානය අවට ශලාෘකර්ම සිදු කළ හැකි පහසුකම නොමැත (No available facility that can conduct the surgery around my location)	14	20.9%	1	4.8%	0	0.0%	3	25.0%	10	50.0%
සැත්කමක් කරන්න බයයි (Scared to receive surgery)	6	9.0%	4	19.1%	1	7.1%	0	0.0%	1	5.0%
ඉස්පිරිතාලෙට කැටුව යෑමට කෙනෙක් නැහැ (No one to accompany to go to hospital)	5	7.5%	3	14.3%	1	7.1%	0	0.0%	1	5.0%
අනෙකුත් (කරුණාකර ලියන්න) Others	31	46.3%	11	52.4%	7	50.0%	7	58.3%	6	30.0%
Total	67		21		14		12		20	

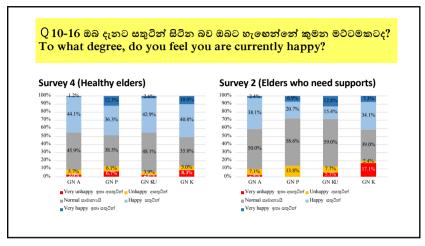
ඇසීම Hearing

72 73

ඇසීම Hearing

		То	otal	GN A		GN P		GN	KU	GN K	
]	Total	858		373		208		116		161	
ඔබේ එදිනෙදා ජීවීතයේදී ඔබට ඇසීමේ අපහසුතාවයක් තිබේද? Do you have any difficulty of hearing in your daily life?		245	28.6%	101	27.1%	56	26.9%	35	30.2%	53	32.9%
වණාධාධ නිසා ඔබ කවදා හෝ සෞඛා මධාස්ථානයකට ගොස් තිබේද? Have you ever been to a health facility due to difficulty of hearing?		52	21.2%	31	30.7%	9	16.1%	7	20.0%	5	9.4%
ඔබ සාමානාඃයෙන් ශවණාධාර	අපහසුවකින් තොරව (without difficulty)	52	21.2%	36	35.6%	5	8.9%	2	5.7%	9	17.0%
උපකරණයක් භාවිතා කරනවාද?	අමාරුවෙන් (with difficulty)	5	2.0%	5	5.0%	0	0.0%	0	0.0%	0	0.0%
Do you usually use hearing aid device?	අවශාශී නමුත් මට නැහැ. (I need but I do not have.)	89	36.3%	38	37.6%	18	32.1%	17	48.6%	16	30.2%

මානසික පීඩනය / තෘප්තිය Depression/Satisfaction



වශය්වෘද්ධ අවපාත පරිමාණය 15 Geriatric depression scale 15 (GDS15)

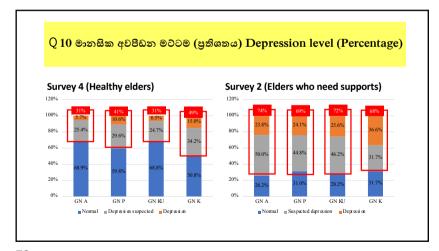
• මානසික අවපීඩන මට්ටම මැනීමට අදාළ පුශ්න 15 ක් ඇත. (වයෝවෘද්ධ අවපාත පරිමාණය 15;GDS15) There are 15 questions related to measure depression level. (Geriatric depression scale 15; GDS15)

• පහත දැක්වෙන පරිදි විශ්ලේෂණය කරන්න; Analyze as shown below;

- සෘණාත්මක පිළිතුරු 9 කට වඩා: මානසික අවපීඩනය ලෙස සැලකේ 10 or more negative answers: considered as presence of depression
- 5-9 සංණාත්මක පිළිතුරු: මානසික අවපීඩනයේ ඇතවීමක් ලෙස සැලකේ 5-9 negative answers: considered as indicative of depression

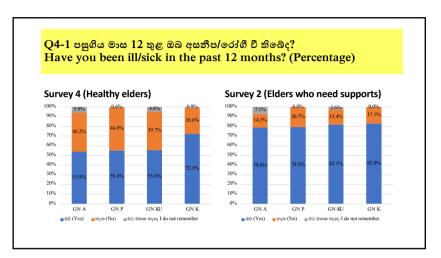
76 77

	පුශ්නය	Questions
Ql	ඔබගේ වර්තමාන දෛනික ජීවීතය ගැන ඔබ තෘප්තිමත්ද?	Are you satisfied with your current daily life?
Q2	තවත් ජීවත් වීමෙන් පලක් නැතැයි ඔබට වීටෙක දැනෙනවාද?	Do you sometimes feel there is no point in living anymore?
Q3	එදිනෙදා ජීවිතය සඳහා ඔබේ ශක්තිය හෝ ලෝකය කෙරෙහි ඔබේ උනන්දුව අඩු වී ඇතැයි ඔබ සිතනවාද?	Do you think your energy for daily life or your interest to the world has been decreasing?
Q4	ඔබේ දෛනික ජීවිතය හිස් බව ඔබට දැනෙනවාද?	Do you feel your daily life is empty?
Q5	ඔබට බොහෝ විට කම්මැලිකමක් දැනෙනවාද?	Do you often feel bored?
Q6	ඔබ බොහෝ වෙලාවට සිටින්නේ සතුටින්ද?	Are you usually in a good mood?
Q7	නරක දෙයක් සිදුවනු ඇතැයි ඔබට හැඟෙනවාද?	Do you feel something bad is going to happen?
Q8	ඔබ වාසනාවන්ත යැයි ඔබ සිතනවාද?	Do you think you are fortunate?
Q9	ඕබට බොහෝ විට අසරණහාවයක් හෝ බලාපොරොත්තු සුන්වීමක් දැනෙනවාද?	Do you often feel helpless or hopeless?
Q10	ඔබ පිටතට යාමට වඩා නිවසේ රැඳී සිටීමට කැමතිද?	Do you prefer staying at home rather than going out?
Q11	ඔබට අන් අයට වඩා අමතක වන බව ඔබ සිතනවාද?	Do you think you are more forgetful than others?
Q12	ජීවිතේ හරි අපුරුශි කියලා ඔබට හිතෙනවද?	Do you think life is wonderful?
Q13	ඔබ ශක්තියෙන් පිරී සිටිනවාද?	Do you feel full of energy?
Q14	ඔබේ එදිනෙදා ජීවිතයේදී බලාපොරොත්තුවක් නැතැයි ඔබ සිතනවාද?	Do you think there is no hope in your daily life?
Q15	ඔබට වඩා අන් අය හොඳ/ධනවත් යැයි ඔබ සිතනවාද?	Do you think others are better/wealthier than you are?

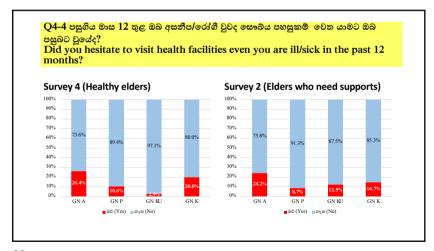


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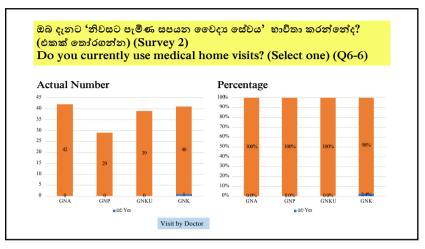
වෛදා සේවා භාවිතය Usage of health and medical services

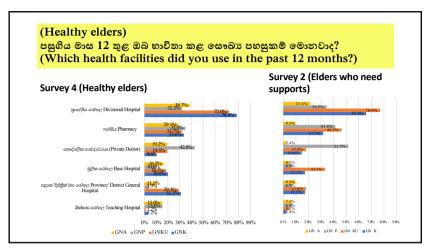


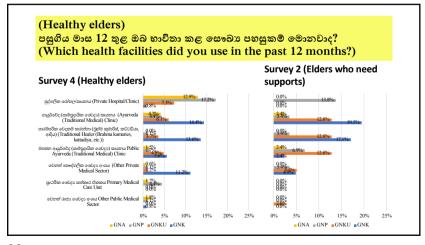
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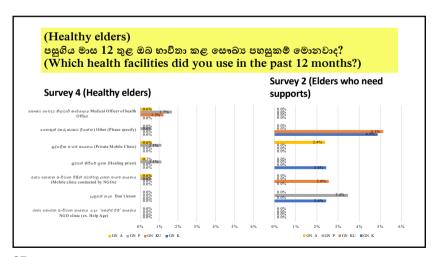


Q4-5 කරුණාකර ඔබ සෞඛ්ය මධ්යස්ථානයකට පැමිණීමට පසුබට වීමට හේතුව (හේතු) සඳහන් කරන්න. අදාළ සියල්ල රවුම් කරන්න. Please specify the reason(s) why you hesitated to visit a health facility. (Multiple choices) GN P වෛදාවරයකු හෝ හෙදියක් හමුවීම මිල අධික විය 34 37.0% 12 38.7% 6 30.0% 42.9% 38.2% (It was too expensive for me to consult a doctor or nurse) සිට පුවාහන ගාස්තුව මට ගෙවීමට නොහැකි තරම් ඉහළ විය (The transportation cost to/from the health facility was too high for me 26 28.3% 10 32.3% 3 15.0% 2 28.6% 11 32.4% මට වෛදා: පුතිකාර අවශා: යැයි මට මට සිතුණේ නැත (I didn't think I 11 12.0% 2 6.5% 2 10.0% 14.3% 17.6% 1 need medical care) සෞඛ්ය පහසුකම් තිබුණේ මගේ ගෙදරට ගොඩක් දුරින් (Health facilities 6.5% 6.5% 15.0% were too far from my home) මට රෝහලේ නැවති සිටීමට අවශා නොවීය (I didn't want to go/stay at 4 4.3% 2 6.5% 2 0 10.0% 0.0% 0.0% hospital) 0.0% මට සෞඛාා රක්ෂණයක් තිබුණේ නැත (I didn't have health insurance) මට අවශා වෛදා: පුතිකාර සඳහා කුමන දෙපාර්තමේන්තුවට යා යුතුද යන්න 2 2.2% 0 2.9% මම දැන සිටියේ නැත 0.0% 5.0% 0.0% (I didn't know which department to visit for the medical care I need මට වෛදාවරයකු හමුවීමට වෙලාවක් තිබුණේ නැත (I didn't have time to 1 1.1% 0 0.0% 1 5.0% 0 0.0% 0 0.0% see a doctor) 5 5.4% 1 3.2% 1 5.0% අනෙකුත් Other 31 20





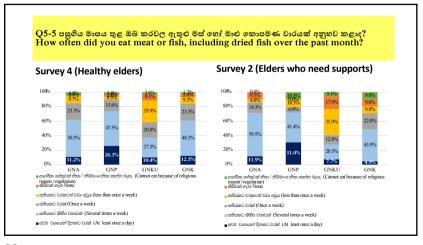




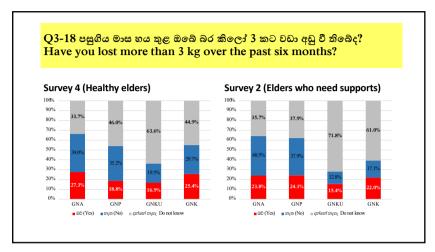
මසෟඛා සම්පන්න පුරුදු Healthy habits

ලෙප්ෂණ තත්ත්වය Nutritional status

88



Q5-6 පසුගිය මාසය තුළ ඔබ කොපමණ වාරයක් පලතුරු සහ එළවළු අනුභව කළාද? How often did you eat fruits and vegetables over the past month? Survey 4 (Healthy elders) Survey 2 (Elders who need supports) 100% 80% 80% 70% 60% 40% 30% 30% 20% ■ කිසිවක් නැත None - කිසිවක් නැත None සතියකට වරකටත් වඩා අඩුය (less than once a week) 💶 සතියකට වරකටත් වඩා අඩුය (less than once a week) ⊞ සතියකට වරක් (Once a week) 🗉 සතියකට වරක් (Once a week) ■ සතියකට කිහිප වතාවක් (Several times a week) ු සතියකට කිහිප වතාවක් (Several times a week) ■ අවම වශයෙන් දිනකට වරක් (At least once a day



බීම සහ දුම්පානය තත්ත්වය Drinking and smoking status

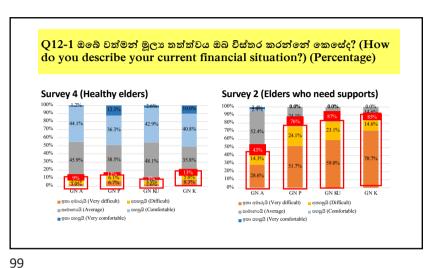
Q 6. අපි ඔබේ මත්පැන් සහ දුම්පානය පිළිබඳ විමසීමට කැමැත්තෙමු. We would like to ask your drinking and smoking status.

92 93

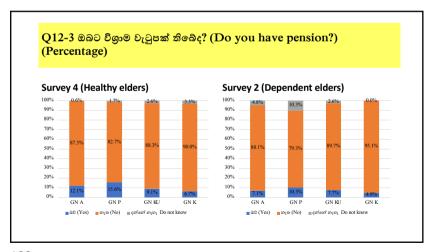
Q6-3 ඔබ දිනකට සිගරට් කීයක් බොනවද? How many cigarettes do you smoke per day? (Healthy elders) @7 GN-A GN-P GN-KU GN-K Total 1 2 0 0 3 0 6 0 0 4 5 0 0 2 15 0 0 14 1 25 Q6-4 ඔබ බුලත් කනවද? Do you chew betel? (Percentage) Survey 4 (Healthy elders) Survey 2 (Elders who need supports) 90% 80% 90% 80% 70% 70% 60% 50% 60% 50% 40% 40% 20% GNA GNP GNP ■මම හැමදාම වගේ මුලත් හපනවා. (I chew almost every day.) ■සිසි සමහර වේ.ෆාවට බැංක් හපනවා. (I sometimes chew.) ■88 ක8කර වෙලාවට බලක් කතාවා. (I sometimes chew.) ඹ මම අයුරුදු 5ක් ඇතුළු මුලත් සහක එක නැවැත්තුවා දැන් සහන්නේ නැහැ. (I've quitted chewing within 5 years and don't chew now.) සම අයුරු දැන් සහන්නේ නැහැ. (I've quitted chewing more than 5 years and don't chew now.) සම අයුරු දැන් සහන්නේ නැහැ (I've quitted chewing more than 5 years and don't chew now.)

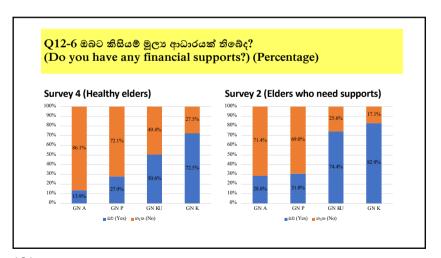
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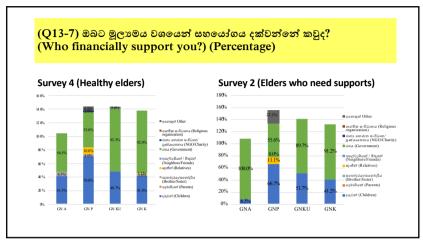
Q12. ආර්ථික තත්ත්වය Economic situation (Social supports)



98





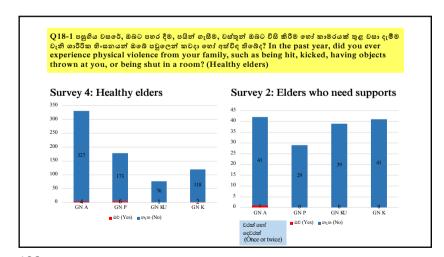


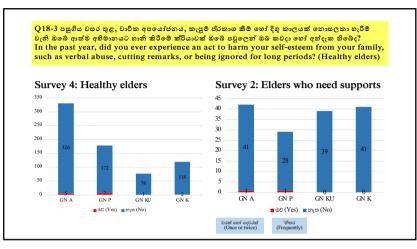
Q12-8 ඔබට මසකට ආසන්න වශයෙන් කොපමණ මූලා ආධාර ලැබේද? (Approximately how much do you receive financial support per month?)

		30,000 ට වැඩි (more than 30,000)	10,000 සිට 30,000 දක්වා (10,000 to 30,000)	2,000 සිට 10,000 දක්වා (bet 2,000 and 10,000)	2,000 ତ ଫ୍ରୁଲ (less than 2,000)	Total
GN A	Healthy elders	3	3	13	27	46
	Elders need care	0	0	4	8	12
	Total	3	3	17	35	58
GN-P	Healthy elders	1	2	24	23	50
	Elders need care	0	0	5	4	9
	Total	1	2	29	27	59
GN-	Healthy elders	0	0	22	17	39
KU	Elders need care	0	0	10	19	29
	Total	0	0	32	36	68
GN-K	Healthy elders	0	0	45	42	87
	Elders need care	0	0	15	19	34
	Total	0	0	60	61	121
	Overall total	4 (1.3%)	5 (1.6%)	138 (45.1%)	159 (52%)	306

102

Q18. අපයෝජනය (Abuse)





සංඛාා විශ්ලේෂණය - මානසික අවපීඩනය ඇත සම්බන්ධය /Statistical analysis (chi-square test)- relation to depression ජීවන තත්ත්වය සහ රැකවරණය වැළැක්වීම /Living condition and care prevention Classification No Total P value Category N % N % Living condition/ජීවන තත්ත්වය 46 52.3% 42 47.7% 88 0.307 Alone with family 448 58.2% 322 41.8% Oral frail/මුබ දුර්වල No 431 63.0% 253 37.0% 684 < 0.000 Yes 63 36.2% 111 63.8% Cognitive risk/සංජානන අවදානම No 408 68.9% 184 31.1% 592 < 0.000 86 32.3% 180 67.7% 266 Yes Risk of falling down/ನಿම වැටීමේ No 444 68.5% 204 31.5% 648 < 0.000 අවදානම 23.8% 160 76.2% 210 Yes 174 30.8% IADL No 391 69.2% 565 < 0.000 Yes 103 35.2% 190 293 494 364 858

108

				epressior			
Category	Classification	No		Yes		Total	P value
		N	%	N	%		
Participation of group activities	Less than once a month	185	52.6%	167	47.4%	352	0.014
	At least one month	309	61.2%	196	38.8%	505	
Eating alone or with someone/	Alone	208	53.6%	180	46.4%	388	0.031
ත්වීවම හෝ යමෙකු සමහ ආහාර ගැනීම	Someone	286	61.0%	183	39.0%	469	
Number of friends met past month	less than 2	175	54.5%	146	45.5%	321	0.175
Number of menus met past month	3 or more	319	59.4%	218	40.6%	537	
requency of going out per month	1 or less	166	48.5%	176	51.5%	342	0.01
එලියට් පීටවීමේ වාර ගණන	2 or more	328	63.6%	188	36.4%	516	
Has the frequency of your going out decreased since last year?/පසුගිය වසරට වඩා	Yes	219	46.7%	250	53.3%	469	0.000
ඔබ පිටතට යන වාර ගණන අඩු වී තිබේද?	no	275	70.7%	114	29.3%	389	
Total		494		364		858	

සංඛාා විශ්ලේෂණය - මානසික අවපීඩනය ඇත සම්බන්ධය /Statistical analysis – relation to depression සමාජ සහභාගීන්වය /Social participation

				epressio	P value		
Category	Classification	No		Yes		Total	
σ,		N	%	N	%		
Do you have any hobby?/ඔබට	No	200	48.7%	211	51.3%	411	0.000
ව්නෝදාංශයක් තිබේද?	Yes	294	65.8%	153	34.2%	447	1
Do you usually read newspapers?/ඔබ	No	148	46.5%	170	53.5%	318	0.000
සාමානා:යෙන් පුවත්පත් කියවනවාද?	Yes	346	64.1%	194	35.9%	540	1
Do you usually listen to radio?/ඔබ	No	71	45.8%	84	54.2%	155	0.001
සාමානායෙන් ගුවන් විදුලියට සවන් දෙනවාද?	Yes	423	60.2%	280	39.8%	703	
Do you usually watch TV?/ඔබ	No	43	38.4%	69	61.6%	112	0.000
සාමාතායෙන් රූපවාහිනිය තරඹනවාද?	Yes	451	60.5%	295	39.5%	746	
Total		494		364		858	

112

සංඛාන විශ්ලේෂණය - මානසික අවපීඩනය ඇත සම්බන්ධය /Statistical analysis – relation to depression Physical condition

		Depression						
Category	Classification	No		Yes		Total	P value	
		N	%	N	%			
How many diseases the elders have	0	232	66.9%	115	33.1%	347	0.000	
	1-2	218	55.6%	174	44.4%	392		
	3-4	39	39.8%	59	60.2%	98		
	More than 5	5	25%	15	75%	20		
Total		494		364		858		

සංඛාා විශ්ලේෂණය - මානසික අවපීඩනය ඇත සම්බන්ධය /Statistical analysis – relation to depression Financial situation (Social protection)

			D	epressio	n		
Category	Classification	N	0	Ye	S	Total	P value
		N	%	Ν	%		
How do you describe your current	Difficult/අපහසුයි	215	46.8%	244	53.2%	459	0.000
financial situation?/ඔබේ වත්මත් මූලාඃ	Normal or	279	69.9%	120	30.1%	399	
තත්ත්වය විස්තර කරන්නේ කෙසේද?	comfortable/						
	සාමානය හෝ						
	පහසුයි						
Do you have any financial		135	44.1%	171	55.9%	306	0.000
supports?/ඔබට කිසියම් මූලාඃ	Yes						
ආධාරයක් තිබේද?		359	65.0%	193	35.0%	552	
	No						
		494	494	364	364	858	

Discussion results in the pilot site

Discussion in Kaduwela TWG/Athurugiriya GN

- 1. The following points could be considered, 1. Prevention, 2. Protein, 3. Oral care, 4. Usage of social service activities?, 5. Depression rate, 6. Day care center services.
- 2. Housing and living style
 - · When the elderly people have issues with children/carers, they do not come out to say that.
 - · Living alone is not significant issue right now but the issue is growing up.
- 3. Healthy behaviours/care prevention
 - · Health and nutrition could be the key issue.
- 4. Social participation

2

- Elder societies in villages are there but only limited number of people participate in those
 activities. Those who do not come out are difficult to reach out.
- 5. Social protection/income generation
 - · Financial problems remain there.

Discussion in Kaduwela TWG/Athurugiriya GN

Summary of discussion

1

- As a result, 1. care prevention, 2. promotion of nutrition, 3. promotion of social participation, 4.
 promotion of importance of mental health including its diagnosis as well will be prioritized.
- If both health and social service sectors can collaborate, information can be disseminated to the elders well.

Discussion in Kaduwela TWG/Athurugiriya GN

Summary of discussion

- · Referral and back referral can be strengthened in the regional level.
- PSSP project has been implemented by World Bank. In the project, a hospital where there is only one doctor is connected to bigger hospital like Athurugiriya hospital. The same framework can be applied between Athurugiriya hospital and CSTH. The project is ending this year, but it could be extended. It is the largest project in health sector. Dr. Deepa gets some money from the project and give it to hospitals so that they can improve for elderly friendly setting.
- In terms of rehabilitation, PHN can do that as they go to houses, check the elders, do rehab, change catheter, etc. Number of such cases is not high enough, but the concept is there.

Discussion in Kaduwela TWG/Athurugiriya GN

Further activities

- For those who were not surveyed this time, we can work out for the plan later.
- Compared with MCH services, no geriatric services currently reach to communities. We need doctors and nurses to be allocated in geriatric public health and have them go directly to communities.
- (When the Japanese experts suggested to develop guidance book for elders and service providers,) Guidance book should be simple and short. Otherwise, no one will read it.

Discussion in Padukka TWG/Poregedara GN

Area	Identified Issues
Situation of the	There is no way to provide subsidies for living and for providing
household and life support	adults caregiving services for the 10% of adults who live alone.
Elderly Care	No proper mechanism has not still established for a common adult
Services	caregiving service.
	No awareness about available caregiving services.
Health/ Medical Services	Not paying a proper attention and a consideration on the health.
Nutritional Status	It has been observed that there is a reciprocity between the survey data and the reports on the consumption of fruits and vegetables.
	Fulfilling the demand for Proteins has become a not economically viable one.

5

Discussion in Padukka TWG/Poregedara GN

Area	Identified Issues
Healthy Habits	Practicing bad habits like chewing Battles.
	Daily exercising practices are low.
Physical function	25% of the healthy adults and 58% of adults who needs assistance
and concern	have a high dangerous to falling down. This has become a severe
	problem. Disabilities can be occurred due to these falling downs in
	the adulthood and problems are created because of that.
IADL	No enough knowledge about usage of technical instruments.
(Instrumental	
Activities of Daily	
Living)	

Discussion in Padukka TWG/Poregedara GN

Area	Identified Issues
Social	Low availability of contemporary companionships and leisure
participation/	activities has become a problem.
activities/ issue of	
isolation	
Concern about	High probability in forgetting things.
cognitive function	
Depression/	The depression occurred due to social and economic problems is
Satisfaction	high.
Phone/	Usage of Information Technology is low. Usage of modern
smartphone and	telecommunication is also low.
SNS usage	

7

Discussion in Padukka TWG/Poregedara GN

Area	Identified Issues						
Economic	51% of adults who need assistance and 12% of healthy adults						
Situation	need economic assistance.						
	No proper social security system or pension scheme.						
Housing	There are issues in the ownership of households for living alone.						
Transportation	Not availability of a transportation service with entrance						
	facilities and safety.						
Abuse	No impotent to against to abuse and no knowledge about it.						

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Issues in Kivulegedara GN

· Healthy behaviors

9

- බුලුක් විට භාවිතා කිරීම Bite Bulathwita (Traditional bad habit)
- කරවල, මස්, මාලු ආහාරයට ගනීම අඩුයි. Eat less fish, meats
- · Care Prevention
- වැටීමට ඇති අවධානම. Risk of falling
- Elderly supports
- තතිව ජීවත්වන වැඩිහිටියන් සඳහා අවධානය ලබා දීම. Providing attention elderly living alone
- වැඩිහිටි සමිනියේ සාමාජිකත්වය වැඩිහිටි සත්කාරක සේවාවක් ලෙස සැළකීම.(සමීක්ෂණයේ) Membership of Elderly society is treated as elderly care services

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Issues in Kivulegedara GN

1. Health issues

- කෘතීම දක් රදවන භාවිතා කිරීම අඩුයි (සමාජ ඇසුර වැඩි පුද්ගලයි හට භාවිතා කිරීම අපහසුයි) Less use of dentures (difficult to use for more social people)
- ඇස්වල තත්ත්වය. Eye condition
- අඩු ආදායම් ලාභීන් සඳහා සමාජ සේවා මගින් කණ්නාඩ් ලබා දේ. Social services provided eye glasses for low-income earners
- දියවැඩියාව, අධිරුධිර පීඩනය, කොලොස්ටරෝල්, ඇසීමේ ගැටලු පරීක්ෂා කර නැත. Diabetes, high blood pressure, cholesterol, hearing problems are not checked
- කොලොස්ටරෝල් පරීක්ෂා කිරීමට බදුල්ල හෝ මතියංගනයට යාමට සිදුවේ. Have to go to Badulla or Mahiyagana to get cholesterol checked.
- මානසික අවපීඩනය තිබිය හැක. May have depression
- සෞඛ්ය අධ්යාපන සාකච්චා (රෝහල් සායන) Health Education Discussion

10

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Issues in Kivulegedara GN

- · Healthy behaviors
- බුලත් විට භාවිතා කිරීම Bite Bulathwita (Traditional bad habit)
- කරවල, මස්, මාලු ආහාරයට ගනීම අඩුයි. Eat less fish, meats
- Care Prevention
- වැටීමට ඇති අවධානම. Risk of falling
- Elderly supports
- තනිව ජීවත්වන වැඩිහිටියන් සඳහා අවධානය ලබා දීම. Providing attention elderly living alone
- වැඩිහිටි සමිනියේ සාමාජිකන්වය වැඩිහිටි සන්කාරක සේවාවක් ලෙස සැළකීම.(සමීක්ෂණයේ) Membership of Elderly society is treated as elderly care services

11 12

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Issues identified in Kandakepu Ulpotha GN

- Financial issues
- ආර්ථික හා මූලා ගැටලු. Economic and financial problem
- රැකියා අවස්ථා නිර්මාණය. Creating job opportunities
- Transportation/movement, accessibility
- ගමනාගමන පහසුකම්. Transport facilities

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Issues identified in Kandakepu Ulpotha GN

- · Elderly services
- තනි තනිව ජීවත්වන වැඩිහිටියන් රැකබලා ගැනීම. Take care of elderly living alone
- · Health services
- සෞඛ්‍ය අධානපනය. Health education
- Healthy behaviors
- පෝෂණ අවශා්තා. Nutritional needs

13 14

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

- Usage of dentures:
 - Usage of dentures are very low. It might be reasons that 1) they have no access to make denture, 2) they do not know they need denture, 3) they do not want to use denture.
- Eye issues
 - Availability of glasses are low in both GNs. Mr. Chanaka (SSO) said that elders can get
 spectaculars from social services. But they have to check their eyes and have to get a
 report first. Dr. Gawarammana said that elders shoul be prioritized.
 - The public health facilities can provide cataract surgeries, but the major issue is transportation to reach the health facilities. The Divisional Secretary Office has a bus, so based on the collaboration and coordination between the health sector and social service sector, the cataract surgery can be arranged for the elders who need it.

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

- Low prevalence of hyperlipidemia
 - Many elders were not checked cholesterol. The reason for that is lack of facilities. They have to go to Mahiyangana or Badulla for it. Also, Dr Migara said that the elders come to health facilities when they have symptom. The health workers suggest to continue the treatments, but they do not continue once the symptom is gone
- Depression and dementia
- According to the survey, although many elders answer they are happy, they may
 have depressive condition. It is suspected that depression as a hidden problem in
 the elderly population. One of the considerable reasons is lack of counselling by
 social health services or from the society. PHMs do not prove services for elders.
 In Kandaketiya, there is no PHNO, which means no health service providers for
 pulliating core and home based core certified.

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Depression and dementia

According to the survey, although many elders answer they are happy, they may have depressive
condition. It is suspected that depression as a hidden problem in the elderly population. One of the
considerable reasons is lack of counselling by social health services or from the society. PHMs do
not prove services for elders. In Kandaketiya, there is no PHNO, which means no health service
providers for palliative care and home-based care services.

Health education

Only small percentage of elders answered they have received health or nutritional education
although some of the educational sessions were conducted. This is probably elders did not
recognize health education session. On the other hands, some components are not included in the
health education session, so it is better to cooperate with the medical and public health service
providers to provide health education session.

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

Nutrition issues

It is identified that elders tend not to eat protein such as fish and meat and fruits and vegetables from the survey results. There is an opinion that it is not reasonable since many of them are farmers and making vegetables. Meanwhile, considerable reasons are raised such as 1) the elders might prioritize more to sell vegetables than to eat (Dr. Migara), 2) the elders might prioritize to give vegetables to their children, 3) the elders misunderstood the questions since the question said "How often do you eat fruits and vegetables", meaning they are asked to eat both fruits and vegetables every day. It was agreed that the questionnaire should be changed next time to avoid misunderstanding.

17 18

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara

• Issue of the survey form

• Mr. Chanaka (SSO) mentioned some healthy elders should be categorized as elderly in need of care because of the low literacy. Kanako explained that these questions are measuring cognitive functions, which can not be detected by appearance, we had discussions that all the questions can be answered all the Sri Lankan citizens. Besides, we set cut-off as 7, thus even the elders can not answer the questions which they need academic background, we assumed they can answer all. If you think the questions are inappropriate, we need to improve the contents. or we can improve the cut off points.

Discussion in Kandaketiya TWG/ GN Kandakepu Ulpotha · Kivulegedara



Discussion in Kandaketiya TWG/GN Kandakepu Ulpotha · Kivulegedara

Conclusion/way forward

- Providing medical examination and continuous treatment by collaboration with health services and social services
- Providing health educational session and care prevention session by collaboration with health (public health and medical) services and social services
- Organizing cataract surgery for elders considering their conditions by collaboration with health services and social services
- Consider providing home visit health care services who can not move by collaboration with health and social service sectors.
- Consider providing transportation for elders to reach health facilities