


A LOOK AT THE FUNCTIONAL LOSSES IN THE ELDERLY POPULATION WITH INTELLECTUAL DISABILITY

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ABSTRACT

Seniors with intellectual disabilities face unique challenges and need specialized support to ensure their physical, emotional, and social well-being. Institutions that support elderly people with intellectual disabilities deal with the weakening of family relationships when faced with aging and wear and tear on parents and/or guardians. In order to know the reality of adults and elderly people with intellectual disabilities, during the period of the COVID-19 pandemic, in the institutions of the municipality of São Paulo that are active to the Forum for the Aging of Elderly People with Intellectual Disabilities (FEPIDI) in the period 2020-2022, an exploratory research of a qualitative and descriptive nature was developed, covering 198 elderly people with intellectual disabilities. The Forum on the Aging of the Elderly with Intellectual Disabilities was formed in 2009, with representatives of several institutions in the city of São Paulo, which serve people with intellectual disabilities in adulthood and in the process of aging, its objective is to collect data, elaborate and disseminate information about the aging of people with intellectual disabilities, provoke reflections for public policies and care protocols that can favor the guarantee of rights, autonomy and quality of life of elderly people with intellectual disabilities and their families. The study presented by FEDIPI highlights the cognitive vulnerability of an elderly population with intellectual disabilities, especially aggravated by the conditions of panic, stress and isolation during the COVID-19 pandemic. The analysis addressed different areas, such as language, memory, reasoning, perception, among others, highlighting the challenges faced by this population.

Keywords: Aging. Elderly person with intellectual disability. Intellectual disability. Functional losses. Support institutions.

INTRODUCTION

The moment of crisis generated by the coronavirus pandemic has been the subject of study in various areas of science on a global scale, with the effort to reduce the spread, promote non-drug treatments to combat COVID-19, and the commitment to the creation of effective vaccines against the virus (DOODY; KEENAN, 2021).

However, few examples were found in the literature regarding specific care in institutions and homes to provide support to older people with intellectual disabilities (PICDI) and facilitate innovative approaches in the care of these individuals, in a period of instability that makes them more susceptible (LANDES et al., 2021; CASTRO, 2022).

The largest study developed in the US on the impact of COVID-19 on people with intellectual disabilities gathered 467,773 patients who received positive diagnoses of COVID-19 between April and August 2020. The study showed that people with intellectual disabilities were three times more likely to die after a diagnosis of COVID-19 (LANDES et al., 2021).

The institutions participating in the Forum on the Aging of People with Intellectual Disabilities, founded more than 10 years ago in the city of São Paulo, organized themselves to discuss and evaluate the functional losses in the elderly population with intellectual disabilities encountered by organizations during the pandemic period, providing a legacy of knowledge to be disseminated with other organizations and government areas in the implementation of innovative measures in the care of elderly people with disabilities. intellectual disability.

INTELLECTUAL DISABILITY AND AGING

Girardi et al. (2012) report that the lack of information is the cause of continuous social problems, favoring exclusion, inequality, pedagogical isolation and social relations of Elderly People with Intellectual Disabilities (PICDI). The researchers add that survival becomes a single struggle, deprived of citizenship, adding to the fact of longevity in a society that still discriminates against the elderly with intellectual disabilities.

The circumstances and expectations of people with intellectual disabilities have evolved in recent decades, largely as a result of changing social and political practices, with approaches centered on people with intellectual disabilities for support, with an emphasis on inclusion and community life (AAIDD, 2010).

The Organization of American States (OAS, 2019) recognizes that persons with disabilities are among the groups most disproportionately affected by the COVID-19 pandemic in terms of health, economic situation, education, and social protection, among

other areas, aggravating preexisting barriers to accessibility and adaptability of essential public services, employment, and education (MAUCH; LORDELLO, 2025). In addition, public health programs need greater funding, social participation and efficient management, with real reinforcement of constitutional and ethical principles, to ensure access to health and social inclusion for Society (DA SILVA, CANEVARI, 2024)

Bonateli et al. (2022) report that, when understanding the aging process of people with intellectual disabilities, a deficit of understanding or lack of it is observed, as well as the stereotypes linked to aging, prejudices, and stigmas related to the elderly with intellectual disabilities.

METHODOLOGY

In order to discuss and evaluate the functional losses in the elderly population with intellectual disabilities found by organizations in the pandemic period, in institutions in the city of São Paulo, which are active in the Forum on the Aging of Elderly People with Intellectual Disabilities (FEPIDI) in the period of 2022 (figure 1), an exploratory research of a descriptive nature was developed.

Figure 1 - Active Institutions of FEPIDI

| |
|--|
| ADERE - Associação Para O Desenvolvimento, Educação E Recuperação Do Excepcional |
| ADID - Associação Para O Desenvolvimento Integral Do Down |
| APABEX - Associação De Pais Banespianos de Excepcionais |
| APOIE – Associação Para Profissionalização, Orientação e Integração do Excepcional |
| Chaverin - Grupo Chaverin |
| Fundação Dona Paulina de Souza Queiroz |
| Instituição Beneficente Nosso Lar |
| Juliana Righini |
| Daniela Karmeli |

Source: FEPIDI

After a period of online meetings, the FEPIDI coordination sent to the support institutions previously described in the item theoretical review, an email with a form for the quantification of the items that make up the research, accompanied by an authorization term for signature by the institutions, according to their compliance.

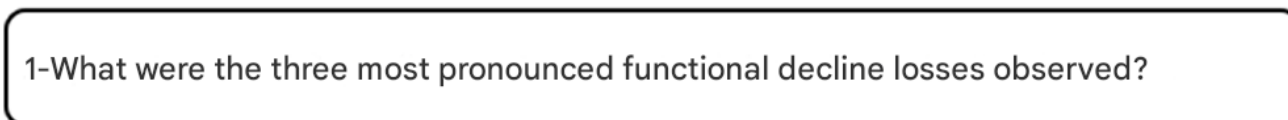
The form consisted of 05 closed and structured questions (figure 2) and 01 open question (figure 3) to be answered based on the 2020-2022 period.

Figure 2 - Schematization of data collection



Source: FEPIDI

Figure 3 - Schematization of the Open Question



Source: FEPIDI

RESULTS

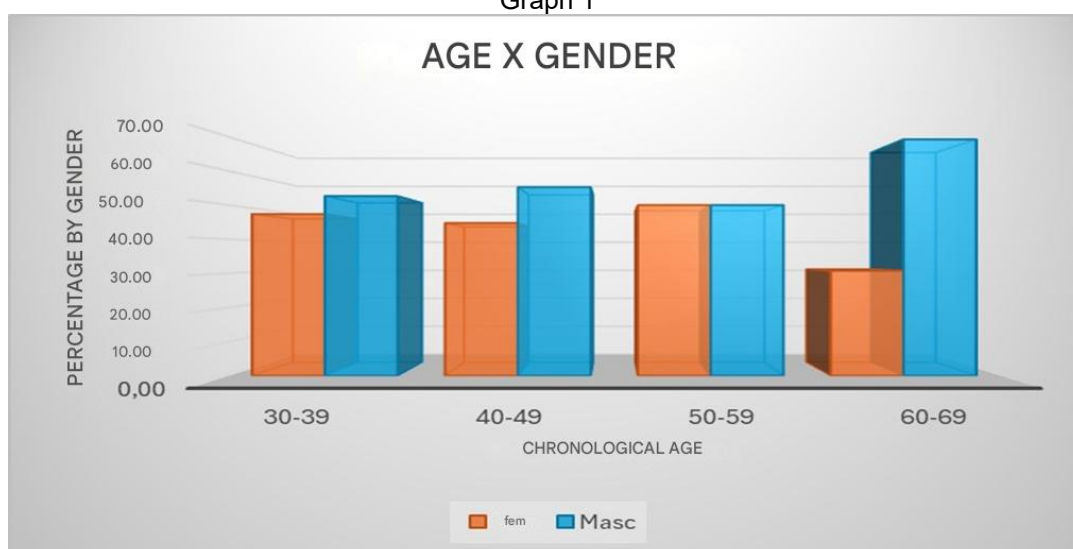
Regarding the total number of adults and elderly people with intellectual disabilities assisted by FEPIDI during the COVID-19 pandemic period, 198 PICDI were found, of which 161 people had Intellectual Disabilities (ID) and 37 people had Dow Syndrome (DS) (Table 1).

Table 1 – PICDI Assisted by Age Group, Type of Disability and Biological Sex

| Age group | Nº PICDI attended | Biological Sex | |
|-----------|-------------------|----------------|-----|
| | | FEM | BUT |
| 30 - 39 | 57 | 27 | 30 |
| 40 - 49 | 76 | 34 | 42 |
| 50 - 59 | 48 | 24 | 24 |
| 60 - 69 | 13 | 4 | 9 |
| 70+ | 4 | 1 | 3 |
| Total | 198 | 90 | 108 |

Source: Survey Data

Graph 1



The 40–49 age group concentrates the highest number of PICDI, as well as the largest number of males (42), corroborating the findings of Castro [2022]

The age group of 40 – 49 concentrated similarity between the percentages of people with Intellectual Disabilities and Down Syndrome (Graph 1), data not compatible with the American Association on Intellectual and Developmental Disabilities. advocating that Down Syndrome has a higher prevalence among Intellectual Disabilities.

DISCUSSION

Functional Losses in the Population Benefiting from the EPID

| | |
|---|---|
| LANGUAGE | repeting, slow reaction in active or receptive communication, anomie |
| MEMORY | greater difficulty in retaining recent information, making learning difficult, requiring greater repetition |
| REASONING | slowness, difficulty reaching conclusions or arguing |
| ABILITY TO UNDERSTAND | slowing down, needs to repeat several times |
| PERCEPTION | Downgraded, lack of attention |
| PLANNING AND EXECUTION OF WORK OR ACTIVITIES | difficulty, apathy, drowsiness, introspection, readaptation to face-to-face activities, need to resume and intensify training |
| PROBLEM SOLVING | difficulty in finding resolution to everyday situations |
| SOCIAL COGNITION | difficulty in social interaction. more solitary. introversion |
| ADLs | Self-care |
| BEHAVIOR AND MOOD | associated with psychiatric disorder behavior and mood, depression, aggressiveness, stereotypes |
| MOTOR SKILLS (SLOWING) | slower movements and mobility, joint problems, very overweight and imbalance |

Based on the literature discussed in the theoretical review, it is inferred that the findings reinforce the cognitive impairment of an already vulnerable population.

Language:

The challenges in the area of language, which can be associated with different neurological conditions, have led institutions to increase guidance to families

Memory: Difficulty retaining recent information indicates memory problems, which can be a symptom of several conditions, including cognitive disorders, aggravated by panic, stress, and isolation.

Reasoning: Slowness and difficulty reaching conclusions or arguing can be indicative of cognitive impairment in areas related to reasoning.

Comprehension Capacity: Awareness and the need for repetitions suggest challenges in comprehension, which may be associated with cognitive or neuropsychiatric problems.

Perception: Lowered perception and lack of attention can indicate cognitive and concentration difficulties.

Planning and Execution of Work or Activities: Difficulty, apathy, drowsiness, and readaptation can be related to several health problems, including neuropsychiatric conditions.

Problem Solving: Difficulty finding resolution to everyday situations can be a symptom of cognitive impairment.

Social Cognition: Difficulties in social interaction and greater isolation, aggravated by isolation and social distancing

ADL (Activities of Daily Living - Self-Care): The need to resume and intensify training may indicate challenges in daily activities.

Behavior and Mood: Association with psychiatric disorders, depression, aggression, and stereotypies can point to emotional or psychological issues.

Motor Skills: Greater slowness in movement and mobility, joint problems, overweight, and imbalance can be associated with neurological or health conditions in general.

CONCLUSION

The study presented by FEPIDI highlights the cognitive vulnerability of an elderly population with intellectual disabilities, especially aggravated by the conditions of panic, stress and isolation during the COVID-19 pandemic. The analysis addressed different areas, such as language, memory, reasoning, perception, among others, highlighting the challenges faced by this population.

The findings of the review suggest that the pandemic intensified pre-existing cognitive barriers, leading institutions to reinforce their care strategies. The increase in guidance to families indicates a recognition of the importance of involving caregivers in the search for solutions and ongoing support.

Punctual face-to-face service, when necessary, emphasizes the importance of direct contact, recognizing that certain situations require a more personalized approach. Referral to the network in the face of needs indicates an integrated vision, connecting those served to specialized services when necessary, expanding the support and available resources.

Problem-solving, improved perception, behavior, and mood suggest an effective response to treatment, demonstrating that appropriate interventions can promote significant changes.

The research prepared by FEPIDI's training institutions provides a comprehensive view of the complexities faced by the elderly population with intellectual disabilities, contributes to the dissemination of knowledge to cope with the observed losses, pointing to



the continuous need for personalized and adaptive approaches to ensure the best possible support.

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