



## Letter to Editor

**Strengthening community health nursing practice to mitigate the possibility of future health services disruptions**

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The COVID-19 pandemic brought disruptions to the way health services are typically delivered at the community level. In a research done by Daniel Reegan et al. (1), they have found out that during the COVID-19 lockdowns, Aedes immature density increased due to discontinued Aedes monitoring and implementation of larval control measures. Santana do Rosário & de Siqueira (2) adds that impoverished areas with limited access to sanitation facilities tend to store water to meet their basic hygiene needs. However, the practice of storing water can potentially increase the proliferation of vectors like Aedes aegypti mosquitoes (2).

In relation to tuberculosis, Jain et al. (3) asserted that the physiologic damage caused by TB infection could increase a patient's likelihood of getting infected with COVID-19. The lockdown measure implemented in Nigeria resulted in the limited diagnosis of TB. In addition, it disrupted immunization services where the Bacille Calmette-Guérin vaccine (BCG) could have otherwise been given to protect against TB (3). In determining the potential impacts of health services disruptions brought by the COVID-19 pandemic in low-income and middle-income countries on diseases like HIV, tuberculosis, and malaria, Hogan et al. (4) said that deaths due to HIV and tuberculosis and malaria might increase in the next five

years. Factors that could make this scenario possible include interruptions to antiretroviral therapy, the difficulty of establishing timely diagnosis and treatment of TB patients, and interrupted net campaigns due to the pandemic (4).

On the level of chronic diseases, the severity of COVID-19 can be influenced by factors such as having diabetes, hypertension, and high cholesterol levels (5). In a systematic review and meta-analysis done by Parveen et al. (6), it was found out that having diabetes and hypertension can negatively affect the health status with COVID-19 under the assumption that having high blood glucose can alter the optimal functioning of the immune system.

All of these health services disruptions and challenges have been attributed to the fatal spread of the SARS-CoV-2 virus. These disruptions, however, can yet again happen in the future, most likely in the context of natural disasters and other infectious diseases that may restrict the efficiency of health services delivery. However, community health nurses and other public health practitioners stand at the frontline because of their awareness of existing community beliefs and practices. The active engagement of community health nurses with people in the community can very well make a difference. Educating communities on the importance of environmental sanitation to eradicate possible vector breeding sites, continued pharmacologic therapy for conditions like

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tuberculosis and HIV, and lifestyle modifications to prevent hypertension, diabetes, and high cholesterol levels can help boost a community's preparedness in the face of future crises.

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