

Covid-19: Investigating the Mental Health Effects on Older Adults

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Abstract

The purpose of this qualitative study was to investigate the mental health effects of the coronavirus disease 2019 (COVID-19) on older adults aged 60 and above living in East York, Toronto, Canada. The inclusion criteria of this research included: individuals aged 60 and above, living in East York, and speaking the English language. Participants were asked questions about their demographics, ethnic background, COVID-19 diagnosis, social support, and coping strategies during the lockdown. Interviews were conducted from November 2021 to February 2022 and recorded with the participant's consent. Transcripts were obtained using the Zoom platform and later edited manually to ensure verbatim transcription. Transcripts were sent to the research supervisor to discuss and identify the themes of the study. The findings revealed that factors such as social distancing and modified daily activities due to the pandemic like gym closures and job loss resulted in increased anxiety, stress, and depression levels of older adults. The results also showcase that social support and coping strategies such as exercising were helpful for the older adults. This study is critical for implementing prevention and intervention strategies geared towards the older population so that there can be more equity-based health policies in place for future global health crises.

Introduction

In 2020, the World Health Organization (WHO) called COVID-19 an international health emergency [1]. Researchers soon identified that the risk of mortality from COVID-19 is excessively higher for older adults [1]. Some scholarly papers highlighted that mental health remained roughly stable for older adults and that they were resilient to depressive disorders and stress-related conditions during COVID-19 [2, 3]. Contrarily, other literature revealed that these studies were either conducted during the initial phase of the pandemic or in countries where the lockdown was not yet implemented [4, 5]. The objective of this research was to understand how and to what extent older adults were psychologically impacted by COVID-19 in East York, after more than 16 months into the pandemic. This study

also aims to give insight into protective factors against the poor mental health of older adults which can be utilized by decision-makers to implement policies that better mitigate the repercussions of transnational health crises.

Methods

In this study, perspectives of the older population were elicited through qualitative interviews, which were carried out from November 2021 until February 2022. To participate in this study, participants needed to be aged 60 years or older, comfortable speaking English, and living in East York. To recruit older adults, posters that included information about the study and its eligibility criteria were posted on various popular social media platforms. Posters were also hung up in coffee shops and grocery stores in East York. The letter of informed consent was read out to

all participants prior to the interview. All participants provided verbal consent for one remote interview by telephone. The interviews consisted of a total of 15 structured questions. Recruitment ended after eight successful interviews were conducted, with no new themes identified. While interviews occurred over the telephone, the student investigator audio-recorded all interviews via the Zoom platform with the consent of the participants. After transcripts were obtained from Zoom, they were all manually checked and edited to ensure that they were transcribed verbatim. A phenomenological methodology was deployed to explore the data and centralize on individual experiences of the participants.

Results

Table 1: Participants' Age, Gender, & Ethnicity.

Participant Number	Age	Gender	Ethnicity
1	76	Female	European
2	89	Female	---
3	88	Female	Canadian
4	72	Male	South Asian
5	64	Female	South Asian
6	73	Male	South Asian
7	94	Female	German
8	64	Male	Middle Eastern

Table 2: Participant's Self-Reported Socioeconomic Status (SES), Socialization, and Social Support Post- Pandemic.

Participant Number	SES	Socialization	Social Support
1	High income	Low	Same
2	Middle income	Low	High
3	---	Low	High
4	Low income	Low	Low

5	No income	Low	Low
6	Low income	Same	Same
7	Low income	Low	Low
8	Low income	---	High

Table 3: The Two Major Themes of the Research Study

Major Themes
Modifications in Daily Activities and its Effect on Mental Health
Protective Factors Against Mental Health Problems

Modifications in Daily Activities and its Effect on Mental Health

The data of this study gives evidence of an association between consistent feelings of sadness or hopelessness with modifications in daily activities. For instance, one participant noted:

"Fully disturbed [daily activities] ...for example, my gym was discontinued, where I was a member of...[redacted]was discontinued, and I work for the real estate as a self-employed independent contractor, so I was meant to see my clients in person, or do, you know those things that require physical appearance" (Male, 64).

Another participant explained:

"You feel sad and hopeless, and you get confused. You don't know what's going on, I'm 72, we were planning to travel to many different countries... when this [COVID-19] erupted..., all our plans went down the drain" (Male, 72).

These quotes are indicative of how modified activities such as gym closures and travel restrictions lead to feelings of hopelessness and sadness among older adults in this study.

Further, when participants were asked about whether there was a change in stressful situations post-pandemic in comparison to before, more than half the respondents expressed an increase in stress. Interviewees explained that psychological distress arose because of COVID-19 restrictions such as social distancing, wearing masks, and not being able to go to mosques. For example, one participant disclosed:

"It [socialization] is very awful, it's very sad, it's very sad and deteriorating...it's eating you up... You don't see any hope, you want to visit your family and you can't" (Male, 72).

Another participant mentioned:

"I hate to say that the last couple of years of my life, ah, I'm confined to my apartment because of COVID... I feel well enough to go out and do things, but I can't because of COVID and time is running out for me. I'm at the end of my trip, not the beginning or the middle" (Female, 89).

These quotes illustrate that modified daily activities such as social distancing and not being able to visit family members was a stressor for the respondents of this research.

Protective Factors Against Mental Health Problems

The data exhibited that individuals who stated a high level of social support during COVID-19 mostly did not observe an increase or decrease in appetite, fatigue, or sleep problems because of the lockdown or social distancing requirements. One participant noted:

"Increased [social support] ... I mean there's a lot of telephone calls. There's a lot of...people are wanting to make sure I am okay, and I will phone others to make sure they're okay" (Female, 88).

Participants further reported that in terms of coping mechanisms, they started to use coloring books, jigsaw puzzles, watched more television, worked out at home, spent a greater amount of time with their pets, and engaged in activities that they love doing such as cooking. One participant explained:

"Well, the coloring books and the jigsaw puzzles and the knitting [helped]" (Female, 89).

Another respondent stated:

"Certainly, exercising and speaking on the phone with a friend and family more frequently [helped]...we get in the family Zoom once a week... It's been much more active virtually, and there's been a tremendous help" (Female, 88).

Discussion

Recent studies lacked evidence on the specific psychological consequences that were linked with changes in the daily activities of older adults due to COVID-19 [6, 7, 8]. This study reports that modifications in daily activities such as job loss, travel restrictions, gym closures, decreased social activities, and temporarily closed mosques were associated with poor mental health symptoms such as stress and constant sadness or hopelessness. Comparatively, a study by Webb & Chen [9] supports the findings of this research as they disclose that older adults who practiced social isolation and distancing during the pandemic had negative mental health outcomes such as anxiety and depression.

Moreover, participants in this study reported that some helpful coping strategies are

exercising, speaking on the phone and/or over virtual platforms such as Zoom with family members and friends, knitting, spending time with pets, and exercising. Comparatively, the results of a study by Li et al. [1] & Inman et al. [10] support these results as they revealed that that social support and physical activity serves as a buffer against the detrimental effects of reduced resilience on the mental health of older adults.

Limitations

Despite the valuable results, this research has some limitations. This study only interviewed older adults from East York, Toronto. Thus, the study findings are not generalizable for older adults in other geographical areas. Secondly, due to COVID-19 restrictions, the study design was limited to phone interviews. The lack of face-to-face communication may have hindered the respondents' trust in the principal student investigator, resulting in bias. Finally, the sample size of this research was small and therefore is not representative of all older adults in the East York Community. Future studies should assess the impact of the COVID-19 pandemic on older adults with a larger sample size and a greater diversity in ethnic and income levels.

Conclusions

The findings of this study help identify that factors such as social distancing and modified daily activities due to the pandemic like gym closures and job loss resulted in increased anxiety, stress, and depression levels in older adults. Understanding the nuances associated with mental health issues among older adults is critical as this can help develop context-specific innovative psychological well-being programs to aid at-risk populations. A vital implication of this research is that it highlights the immediate need for having inclusive and equitable access to mental healthcare services and community resources and programs for older adults of different socioeconomic and racial backgrounds to ensure resilience in the face of future pandemics.

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