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The Effect of COVID-19 Pandemic on the Wellbeing of Ageing Adults

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Abstract

These days COVID-19 is spreading in all over world. It is a highly contagious virus and its proper medication and vaccine is not yet invented by the scientists. To combat corona virus lockdown and social distancing are the only measures which are effective to keep us safe. In India lockdown is applied in all the states of this country. Social distancing is safe to stop spreading this disease but it affect especially the quality of life of our ageing adults very much. In this period they have to stay at home and if there is something very essential work then only go outside because immunity is weak in ageing adults. So, they are most vulnerable group for the infection of COVID-19 disease. Mortality rate of the ageing adults due to corona virus is very high in comparison of other age groups. That's why social distancing has to strictly follow by the ageing adults. So, their social relationships are not maintained and they are feeling socially isolated and lonely. They experience stress, anxiety and depression. Ageing adults who are not living with their children or not technology friendly, they are not using skype and facetime like apps. They are feeling more loneliness and isolated as compare to who are living with their family and friends and are technology friendly. Lockdown also impacted also their financial conditions as they stop earning, their pensions are not in time, don't getting house rent from the rented people in their houses. The financial condition of ageing women is more vulnerable than men because most of them are depending on their family.

Keywords: - COVID-19, ageing adults, quality of life, anxiety, depression.

According to World Health Organization (WHO) data from April 2020, more than 95% of COVID-19 deaths were among people over 60 years of age, and more than half of all deaths occurred in people of 80 years-plus.

The causative agent of COVID-19, novel corona virus SARS-CoV-2 is definitely less fatal than its earlier congeners (Severe Acute Respiratory Syndrome or SARS and Middle East Respiratory Syndrome or MERS), but much more contagious with increased human to human transmission risk. Some studies suggest that the viability of the virus in aerosol and various surfaces is also one of the reasons for this. A majority of infections are mild, but few have pneumonia and Acute Respiratory Distress Syndrome (ARDS), which can eventually lead to mortality. Also, the severity and fatality of the infection is higher in the ageing adults, immune suppressed and people with pre-existing respiratory illnesses, chronic medical problems as well as underdetection of symptoms (Xing Bing Xue Za Zhi, 2020).

The impact of COVID-19 pandemic on Physical Wellbeing of ageing adults

Loneliness and social isolation have been connected to negative mental and physical health outcomes, such as high anxiety and depression symptoms and elevated risk of cognitive decline, hypertension, obesity, cardiovascular disease and death. Before this period of social distancing, social isolation was affecting ageing adults because of transportation limitations, living arrangements and reduced social networks. In this period of COVID-19 pandemic, ageing adults have to follow social distancing, as they are very much prone to COVID-19 due to week immunity. Ageing adults who have spent a long isolation period may experience health effects which may be outlast after the period of quarantine. It can be said that this period of isolation impacted the future quality of life of ageing adults. (National Academies of Sciences, Engineering, and Medicine, 2020).

Good sleep supports the immune system, which decreases the risk of infection and can improve our immune system. However, sleep disturbances weakens the body's defense system and makes people more to get infected (Medalie, 2020).

It is important to engage in some form of physical work, as exercise can also important for healthy sleep and is critical for physical and mental well-being. Walking or running outside with maintain distance from others, is an effective way to get Vitamin D exposure (it boast our immune system) and to reduce anxiety and stress. If outside activities are not possible then do yoga and meditation at home from online yoga training apps to keep yourself physically active and fit (**Troxel**, **2020**).

Physical activity is important for ageing adults, especially to maintain independence for daily activities psychological health and well-being. Low physical activity among ageing adults is one of highest risk factor for morbidity and mortality worldwide and a significant contributor to disability. Individuals who are not engaged in daily physical activity are at the high risk of functional decline. Low physical activity during the social distancing period can effect on the mental and emotional health of ageing adults (**Brooks and Webster et. al, 2020**).

In a study, decline in ageing adults' participation in group physical activities before the quarantine, they expressed the need to perform physical activity at home. Although quarantine is a measure to protect ageing adults from COVID-19, staying at home can increase negative consequences like sedentary behavior and reduced physical activity. It can also lead to risk of injury due to a lack of knowledge about physical workout to perform. Social relations are essential to encourage ageing adults to perform physical workouts. Decreased social activities for ageing adults during quarantine could lead to a significant reduction in physical activity. Loneliness could also exuberate cognitive and physical decline in ageing adults (Zhong and Chen et. al, 2020).

The COVID-19 disease, in itself, has hit ageing adults harder than other age groups. Ageing adults are more likely to already have underlying health conditions such as respiratory illness cardiovascular disease, diabetes — morbities that increases the COVID-19 mortality. Moreover, if individual's immune system is weak then it is difficult to fight against COVID-19. According to World Health Organization (WHO) data from April 2020, more than 95% of COVID-19 deaths were among people over 60 years of age, and more than half of all deaths occurred in people of 80 years-plus (Sandoiu, 2020).

COVID-19 is contagious in nature and spreading among all the age groups. Ageing adults are at a very high risk of severe disease and mortality. People above 80 years are having 5 times more death risk than others due to COVID-19. (https://cmmid.github.io/topics/covid19/Global_risk_factors.html)

It is understood that among ageing adults social distancing can cause serious health issues and increases the risk of neurocognitive, cardiovascular, autoimmune and mental health problems. Social distancing causes a high risk of anxiety and depression among ageing adults. Social distancing greatly affect those ageing adults who's social relationships are depending upon places of worship, day care centers and community centers. People who do not have family and close friends and rely on social care and voluntary services are having high risk than the people who are living already isolated and lonely (Newman and Zainal, 2020).

Social isolation is connected with high morbidity and mortality. Health behaviors like taking tobacco, smoking and drinking alcohol and reduced physical activity may increase its effect by 30 percent. Data from adults aged 50-81 indicated that social isolation have an relation with less physical activity, sedentary time and it may increase the risk of diseases. The COVID-19 epidemic is independently associated with reduced physical activity and increased sedentary time, suggesting that this may play a role in the increased risk of disease. During the COVID-19 pandemic, it is essential to reduce the negative effect of isolation and improving their physical activity to protect their health (Beaney and Salman, et. al, 2020).

The impact of COVID-19 epidemic on the psychological wellbeing of ageing adults

Sleep problems are associated with suicidal behavior, depression and anxiety. Sleep abnormalities are a standalone risk factor for suicidal ideation, suicide attempts, and suicide death. Suitable treatment of sleep disturbances is always important and reduces symptoms of psychiatric disorders and suicidality. Whereas, recognizing and treating insomnia are necessary during stressful times such as the COVID-19 epidemic because it may reduce suicides. It is important to identify and treat sleep disorders not only among psychiatric patient but also among individuals who are not in psychiatric treatment. People with sleeping issues need are

needed to evaluate for suicidal ideation and suicide intent. Clinicians need to be educated on how to evaluate individuals with sleep issues for suicidality (Sher, 2020).

Suicide is a noticeable public health issue. This problem is aggravate now, during the pandemic of a highly infectious corona virus 2019 disease (COVID-19) that was first time identified in China at the end of December 2019. COVID-19 has spread to other Asian countries, North and South America, Europe and Australia. The COVID-19 pandemic is associated with distress, anxiety, sleep disturbances, depression and suicidality (Ornell and Schuch et. al, 2020).

Researchers in China examined psychological responses during this stage of the COVID-19 pandemic in the chinese population. In the results it was found that 53.8% of participants experienced psychological effect of this outbreak as moderate or severe, 16.5% was having depressive symptoms and 28.8% were having anxiety symptoms moderate to severe. In a survey, 50,000 chinese population in this COVID-19 pandemic indicated that about 35% of the participants having psychological distress. In an another Chinese research group sampled and evaluate the online posts of about 18,000 Chinese social media users before and after the declaration of COVID-19 in China on January 20, 2020. It was found that negative emotions such as anger, anxiety and depression has elevated. However, the positive emotions and life satisfaction has decreased (Wang and Xue et. al, 2020).

In a research study it was conferred that between social capital as measured by the Personal Social Capital Scale 16 (PSCI-16) and sleep quality in individuals who were self-isolated during the COVID-19 pandemic. The result showed that the stress and reduced sleep quality was associated with anxiety, and the combination of stress and anxiety decreases the good effects of social capital on sleep quality. It was noted that "anxiety and stress of isolated individuals were at high levels, while the sleep quality was low." Researchers in China also investigated a state of mental health of 1250 health care workers who treated corona virus patients. 50.4% of study respondents having 34.0% insomnia and depression, 71.5% distress and 44.6% anxiety (Lai and Wang et. al, 2020).

In mental health terms, the main psychological impact of COVID-19 is elevated rates of anxiety. Especially quarantine and its effects on many people's usual activities, routines or livelihoods – depression, self-harm,

levels of loneliness, harmful alcohol and drug use, and or suicidal behavior are also expected to hike (WHO, 2020).

In this epidemic outbreak, the ageing adults are feel helpless and confused, a reduction in their capabilities was observed, they are very anxious about this situation. They are feeling themselves isolated and alone. It is important to support them and get them out of negative feelings. So, these feelings will not affect physically and mentally (JIPMER, 2020).

The effect of COVID-19 on the social and emotional wellbeing of ageing adults

Self isolation will disproportionately affect ageing adults those only social relationship out at home like community centers, daycare venues and places of worship. Those who do not have close family or friends and rely on the support of social services and care can be at high risk from those who are already secluded or isolated (**Armitage and Nellums**, **2020**).

The COVID-19 virus is affecting the life of ageing adults at the great extent. It disturbs their social network, jobs, healthcare services and pensions. People who are in community or at home like- women over 80 years is likely to live alone because of social distancing measures. Long period of isolation can have a serious effect on the mental health of ageing adults, people who are very less using digital gazettes. The income and unemployment also impacted ageing adults in this period of pandemic (ILO Spotlight on work statistics, May 2020, https://www.ilo.org/stat/Publications/WCMS 629567/lang--en/index.htm).

In this period of COVID-19, it has been reported that the rate of violence against women has exacerbate during lockdown and particularly life partner violence. Policy responses need to incorporate the needs and rights of ageing adults, especially ageing women, who are depending on family members for their care and daily survival are especially vulnerable to abuse (**UN Women 2020**).

In many countries ageing adults are living alone, this lockdown due to COVID-19 affecting their social networks and create a condition in which their psychological and mental needs are not fulfill. Ageing adults

who lives in care facilities, their group activities and social relations is affected by social distancing measure. Hence, this impacted negatively on their physical and mental wellbeing of ageing adults particularly those who are highly dependent on others for their daily activities or suffering from dementia or cognitive impairment (UN DESA, 2020).

In this period of lockdown, ageing adults are not able to go outside and visitors are also not come. So, ageing adults who are not technology friendly and not using skype and facetime are only depend on telephone calls are feeling alone. In addition, ageing adults who are from lower income group and having per minute phone call plans cannot afford to talk for long time, they have limited minutes to talk on phone (**Lafave**, **2020**).

The new epidemic causes a wrought fear on the population because they don't have a prior experience of this, especially for ageing adults who are at high risk of this COVID-19 disease. They are got housebound and go out only when extremely important. It is not easy to cope with social distancing, isolation and loneliness. It impact on their cognition and sleeping pattern and they develop depressive and anxiety symptoms (Avasthi and Grover, 2018).

Social connectedness and the strong social relationships are important for successful ageing; but it is challenged by social distancing policies. In a survey in china showed that 37 percent of ageing adults were feel anxiety and depression due to social isolation. This social isolation cause disruption in their daily activities and negatively impacts them. They experience poorer mental health, cognitive impairment and low quality of life (World Health Organization, 2020).

Ageing adults who are sick or quarantined were experienced stigma, guilt and shame. Studies inferred that high level of psychological distress for a long duration of quarantine was associated with a high prevalence of depression and posttraumatic stress disorder. Also in other countries under isolation in hospitals or in quarantine centers are at high risk of psychological issues with less social support and uncertainty in life. They need emotional and psychological support to recover (**Cyrus and Cornelia et. al, 2020**).

Social isolation has a huge impact on psychological health in the ageing adults. Due to social isolation they are facing with many psychological symptoms including anxiety depression and worsen the quality of life. Quarantine during COVID-19 pandemic is connected with depression, anxiety and post traumatic stress. Some research studies revealed that these symptoms could persist for a long term.

The impact of Corona Virus on the financial wellbeing of ageing adults

Less educated ageing workers are not able to from home and their income depend on them being in service jobs with high risk of the COVID-19. Low-income ageing adults are not computers friendly and online technologies that have eased the burden of isolation and low income for so many people (Goldbaum, 2020).

With the increasing age poverty also increases. The percentage of poverty in developing countries is as high as 80 percent. Ageing adults may depend on different income sources such as pensions, savings, paid work, financial support from families all of them are diminished by COVID-19. Hence, the epidemic has significantly lowered the living standards and income to a great extent of ageing adults. This economic decline has huge impact on ageing women and their source of income like- employment, assets like land property or pension than men. (ILO, 2020)

Conclusion

COVID-19 is an infectious disease and it leads to death many people. About 4 lakh people were died due to covid-19 in all around the world. Above studies suggests that there is no specific medicine and vaccine is invented by scientists till now. So, the only safe and easy way to protect one is stay at home. Hence, lockdown and social distancing is only solution to stay safe. But this measure is affecting ageing adults to a great extent because if they are not living with their children they feel lonely at home. Due to lockdown they can't go to meet their friends and relatives, can't go for walking, day care centers for the different activities for ageing adults, even no one can visit them. So, they feel alone and it is confirmed from the research studies that are experiencing depression and anxiety and other psychological issues. Their work, pension, source of income is affected from lockdown. The lockdown has impacted their physical, psychological, social, emotional and financial wellbeing and worsen their quality of life. Therefore, it is suggested that ageing adults need to do

physical activities like yoga, meditation or walk on terrace to stay fit physically and psychologically and improve their immunity..

Bibliography

Scholar]

- Armitage and Nellums (2020). COVID-19 and the consequences of isolating the elderly.published
 March 19, 2020. https://www.thelancet.com/pdfs/journals/lanpub/PIIS2468-2667(20)30061-X.pdf
- 2. Beaney T, Salman D, Vishnubala, McGregor AH, Majeed A. The effects of isolation on the physical and mental health of older adults. BMJ, published online April 9, 2020
- Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, Rubin GJ. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. Lancet. 2020 Mar 14;395(10227):912–920. doi: 10.1016/S0140-6736(20)30460 http://europepmc.org/abstract/MED/32112714. [PMC free article] [PubMed] [CrossRef] [Google
- 4. Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, Rubin GJ. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. The Lancet. Volume 395, ISSUE 10227, P912-920, published March 14, 2020.
- 5. Cyrus Sh Ho, Cornelia Yi Chee, Roger Cm Ho, 2020, Mental Health Strategies to Combat the

 Psychological Impact of COVID-19 Beyond Paranoia and Panic. Ann Acad Med Singapore. 2020

 Jan; 49(1): 1–3.
- 6. Goldbaum, C. (2020, March 30). *They can't afford to quarantine. So they brave the subway*. The New York Times. Retrieved from: https://www.nytimes.com/2020/03/30/nyregion/coronavirus-mta-subway-riders.html [Google Scholar]
- 7. ILO, Social protection for older persons: Policy trends and statistics 2017-19

 https://www.ilo.org/secsoc/information-resources/publications-and-tools/policy-papers/WCMS_645692/lang--en/index.htm

- 8. JIPMER (2020). https://www.jipmer.edu.in/sites/default/files/Information%20booklet%20-%20Elderly%20%281%29.pdf. Caring for the mental health of the elderly during the COVID-19 outbreak.
- 9. Lafave (2020). The impact of COVID-19 on older adults https://hub.jhu.edu/2020/05/05/impact-ofcovid-19-on-the-elderly/.
- 10. Lai J., Ma S., Wang Y., Cai Z., Hu J., Wei N., Wu J., Du H., Chen T., Li R., Tan H., Kang L., Yao L., Huang M., Wang H., Wang G., Liu Z., Hu S. Factors associated with mental health outcomes among health care workers exposed to Coronavirus Disease 2019. JAMA Netw Open. 2020 Mar 2;3(3) doi: 10.1001/jamanetworkopen.2020.3976. [CrossRef] [Google Scholar]
- 11. Li S., Wang Y., Xue J., Zhao N., Zhu T. The impact of COVID-19 epidemic declaration on psychological consequences: A study on active Weibo users. Int J Environ Res Public Health. 2020;17(6):E2032. doi: 10.3390/ijerph17062032. [PMC free article] [PubMed] [CrossRef] [Google Scholar]
- 12. Medalie (2020). Why it's important to get a good night's sleep during the coronavirus outbreak. https://www.uchicagomedicine.org/forefront/coronavirus-disease-covid-19/advice-for-sleeping-wellduring-the-covid-19-outbreak
- 13. Meng, H., Xu, Y., Dai, J., Zhang, Y., Liu, B. and Yang, H. (2020). The psychological effect of COVID-19 on the elderly in China. Psychiatry Research, 112983. [PMC free article] [PubMed] [Google Scholar]
- 14. National Academies of Sciences, Engineering, and Medicine. (2020). Social isolation and loneliness in older adults: Opportunities for the health care system. The National Academies Press. [Google Scholar]
- 15. Newman M, Zainal N. The value of maintaining social connections for mental health in older people. Lancet Public Health. 2020;5:e12–e13. [PMC free article] [PubMed] [Google Scholar]
- 16. Novel Coronavirus Pneumonia Emergency Response Epidemiology Team. The epidemiological characteristics of an outbreak of 2019 novel coronavirus diseases (COVID-19) in China. Zhonghua Liu Xing Bing Xue Za Zhi. 41, 145-151 (2020) doi: <u>10.3760/cma.j.issn.0254-6450.2</u>020.02.003

- 17. Ornell F., Schuch J.B., Sordi A.O., Kessler F.H.P. Pandemic fear" and COVID-19: mental health burden and strategies. Braz J Psychiatry. 2020 Apr 3 doi: 10.1590/1516-4446-2020-0008. pii: S1516-44462020005008201, [Epub ahead of print] [CrossRef] [Google Scholar]
 PMID: 32408252
- 18. Sandoiu (2020). The impact of the COVID-19 pandemic on older adults.

 https://www.medicalnewstoday.com/articles/the-impact-of-the-covid-19-pandemic-on-older-adults
- 19. Sher (2020). COVID-19, anxiety, sleep disturbances and suicide. doi: 10.1016/j.sleep.2020.04.019 [Epub ahead of print]. PMCID: PMC7195057
- 20. UN DESA Population Division Living Arrangements of Older Persons: A Report on an Expanded International Dataset (2020).
- 21. UN Women 2020. Brief: COVID-19 and Ending Violence Against Women and Girls.

 https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls
- 22. WHO (2020). http://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/technical-guidance/mental-health-and-covid-19
- 23. World Health Organization. (2020). Mental health and psychosocial considerations during the COVID-19 outbreak. Available at: https://www.who.int/publications-detail/WHO-2019-nCoV-MentalHealth-2020.1; last accessed 16 April 2020.
- 24. Zhong B, Chen S, Tu X, Conwell Y. Loneliness and Cognitive Function in Older Adults: Findings From the Chinese Longitudinal Healthy Longevity Survey. J Gerontol B Psychol Sci Soc Sci. 2017 Jan;72(1):120–128. doi: