

## **MENTAL HEALTH AND SOCIAL WELLBEING OF OLDER ADULTS: PERSPECTIVES FROM COVID-19 PANDEMIC**

**Aksa Jan<sup>1</sup>, Saima Farhad<sup>2</sup> & Sanjoy Roy<sup>3</sup>**

<sup>1</sup>PhD Scholar at Department of Social Work, University of Delhi, <sup>2</sup>Associate Professor at Department of Social Work, Kashmir University, Srinagar, <sup>3</sup>Professor and Head, Department of Social Work, University of Delhi, Delhi

**Correspondence:** Aksa Jan, E-mail: aksajan1996@gmail.com

### **ABSTRACT**

The socio demographic factors as well as personal experiences have been shown to influence the social well-being and mental health of older adults. Irrespective of one's socioeconomic standing, elderly people frequently suffer from non-communicable diseases that are primarily linked to old age and necessitate extensive medical and social care. It has been found that these illnesses frequently cause disabilities, which have an impact on older people's everyday activities, social well-being, and general mental health. Further, unmet care needs for older adults with illnesses include those pertaining to their social lives, physical and mental health, as well as the environments in which they live and interact. Studies have shown that it is common for older individuals to feel lonely and unsatisfied, which has an impact on their mental and social well-being. While the physical well-being of elderly people is heavily emphasized, their mental health and social well-being have not received the same attention or priority by the research community. It is in this context that this paper aims to explore how data on various aspects of COVID-19 disease and depression among older adults in India are presented. Thus, the findings from this article aim to highlight the issues related to the mental health of older people.

**Keywords:** Social Well-Being, Mental Health, Older Adults, COVID 19

### **INTRODUCTION**

As the world population grows, a major part of it grows old as well. The growing elderly population brings forth the issue of geriatric mental health, which has become a major public health concern around the world. A report by the World Health Organization (WHO) in 2004 stated that the prevalence of depression in persons aged 60 years was 0.5 million in developed countries alone. Further, it also reported 4.8 million such cases in the developing countries. Interestingly, increased life expectancy in India has resulted in an

increase in the older adult population between 2001 and 2011, which is anticipated to reach 324 million by 2050 (United Nations Department of Economic and Social Affairs, Population Division, 2020).

Biological aging is brought on by the buildup of numerous types of molecular and cellular damage, which over time results in a decline in physical and mental function and increases the risk of illness and death. The significance of psychosocial factors cannot be ignored either as this situation is not just related to

age, but can differ from person to person and be influenced by various factors, including retirement, living in suitable housing, losing one's spouse or other loved ones, and living in a suitable environment (WHO, 2015). The global population is aging at an unprecedented rate, and it is already recognized as a global concern. It presents various mental health related difficulties (depression, a common mental health disorder, has affected over 264 million people worldwide), which is characterized by, but is not limited to, persistent feelings of "sadness and worthlessness, as well as a loss of interest or pleasure in previously rewarding or pleasurable pursuits" (Institute of Health Metrics and Evaluation, 2021).

Depression is currently "the third leading cause of global disease burden and, according to projections, will be the leading cause of global disease burden by 2030", further, it is especially problematic in the elderly because it is associated with increased "disability, cognitive decline, morbidity, and decreased quality of life" (WHO, 2017: Sinha et al., 2013). According to a meta-analysis, "the global prevalence of depressive disorders among the elderly population ranges between 4.7% and 16%" (Padayachey et al., 2017). Furthermore, studies reveal that India "has a higher prevalence of geriatric depression than other countries" and depression is a major public health concern among the elderly (Srivastava et al., 2021).

Elderly people have unique characteristics such as physical limitations, weaker muscles, and additional health conditions. They also often have limited support from both financial and social perspectives. These factors make them more susceptible to mistreatment and abuse from their own families and relatives. Studies in geriatric mental health have shown that elder abuse increases the risk of depression and anxiety among older adults (Fisher & Regan, 2006). Research has found

that the physical and social surroundings people live in greatly affect their mental health. In India, factors like gender, employment status, living situation, self-reported health, multiple health conditions, physical limitations, elder abuse, being a victim of crime, and feeling safe in the neighborhood are all connected to depression among older adults. Despite the fact that mental health and social well-being have a substantial impact on the overall quality of life among older adults, the research community has given these topics a relatively inadequate amount of attention and importance. Historically, the emphasis on the well-being of older people has been primarily focussed upon their physical health and medical needs, while their mental health and social well-being have been disregarded (Pachana & Laidlaw, 2014). Because of this lack of attention to detail, there is only a superficial understanding and awareness of the intricacies and specific challenges that older adults confront in sustaining good mental health and social connections. It is critical to overcome this research gap and prioritize the mental health and social well-being of older adults by ensuring comprehensive and effective social support systems.

## OBJECTIVE

This study's objective is to examine the manner in which information about the COVID-19 disease and depression among older adults is presented in India. The COVID-19 pandemic has had a significant impact on the mental health and social well-being of older adults, which emphasizes the need for a thorough understanding of the difficulties they face. This paper seeks to shed light on the issues surrounding older adults' mental health, by analyzing the data available and providing insights for policy development and intervention strategies.

## FACTORS INFLUENCING MENTAL HEALTH AMONG OLDER ADULTS

**A. Socio-demographic factors:** Age-related depression in older adults is significantly influenced by socio-demographic factors. For the purpose of identifying vulnerable populations and creating focused interventions, it is essential to understand these socio-demographic factors. According to research, the following socio-demographic factors have been found to have significant impact:

**1. Economic status:** Financial difficulties, access to healthcare, and increased stressors are found to be very common among older adults from lower socioeconomic backgrounds, these factors are contributing to the emergence of depression among older people as shown by different researches (Anand, 2015). Poverty and financial instability are linked to higher rates of depressive symptoms in older people.

**2. Education level:** Among older adults, outcomes in terms of mental health have been linked to educational attainment. Better mental health and lower rates of depression are related to higher levels of education (Gupta et al., 2020). Education provides people with knowledge, abilities, and opportunities that can improve their coping mechanisms and resilience.

**3. Living arrangements:** The living arrangements of older adults, such as whether they live alone or with family members, has a greater impact on their risk of depression. Loneliness and social isolation, which are the known risk factors for depression, may be enhanced among older adults who live alone (Oh et al., 2015). Living in a caring and loving atmosphere with family or friends, on the other hand, can act as a buffer against depression.

**4. Social support:** The critical protective factor in preventing depression among older

adults is the social support from friends, family, and communities, including emotional, instrumental

practical, and informational support (Patel et al., 2020). Positive mental health outcomes can be promoted by strong social support networks, which can offer companionship, support, assistance and a sense of belonging.

**B. Personal experiences:** Personal experiences are also known to play an important role in the development of depression among older adults. These events and personal experiences touch on many elements of their lives and can increase their susceptibility to depression. The personal experiences listed below have been identified to have a greater influence on the mental health and social well-being of older adults. Some of these experiences include the death of a spouse or close friend, the loss of a job, and physical health issues. These events in an individual's life can cause feelings of loneliness, isolation, and low self-esteem, all of which can contribute to the development of depression among the older adults.

**1. Loss of loved ones:** Losing loved ones, such as a spouse, family members, or close friends, is a significant life event that can lead to depression in older adults ((Kivi et al., 2021). Bereavement can cause intense grief, feelings of emptiness, and isolation, all of which can contribute to the development of depressive symptoms. As they navigate life without their loved ones, older adults may experience a loss of identity and purpose. Seeking help from family, friends, or a therapist can help older adults cope with their loss and avoid depression. Healthcare providers must be aware of the increased risk of depression in older adults who have lost a loved one and provide appropriate support and resources. Volunteering or joining a social group, for example, can also help older adults cope with their loss and improve their mental

health. It is important to note that not all older adults experience depression following a loss, and the severity and duration of symptoms can vary as there are differences across cultures and individuals in how they cope.

**2. Social isolation and loneliness:** Social isolation and loneliness are common in older adults and are strongly linked to depression (Cohen-Mansfield & Perach, 2015). A lack of social connections and meaningful relationships can lead to feelings of emptiness and sadness, as well as an increased risk of depression. Besides, social isolation and loneliness can have a negative impact on physical health, including an increased risk of cardiovascular disease and cognitive decline (Cacioppo & Cacioppo, 2014). As a result, it is critical to address social isolation and loneliness in older adults, as well as maintain social connections, in order to promote both mental and physical well-being. Studies have shown that social support can also improve immune function and reduce inflammation in the body, leading to better overall health outcomes. Additionally, participating in social activities and having a sense of purpose through social engagement can improve cognitive function and delay the onset of dementia in older adults (Patel et al., 2020).

**3. Life transitions and role changes:** Life transitions such as retirement, relocation, or changes in family dynamics can have a significant impact on the mental health of older adults. Adjusting to new roles and routines, as well as the loss of identity that comes with retirement or changes in social roles, can all contribute to depressive symptoms (Kahana et al., 2012). These transitions frequently necessitate adaptation and can result in feelings of uncertainty and loss of purpose.

It is critical to understand that depression is not a normal part of aging and that seeking help is essential. Access to mental health services and depression education can help

reduce stigma and raise awareness about the importance of seeking treatment. With the right support, older adults can maintain their mental health and live fulfilling lives. Depression among older adults is frequently misdiagnosed and mistreated, emphasizing the importance of increased awareness and screening in healthcare settings. We can improve the quality of life for older adults and reduce the burden of depression on individuals, families, and society as a whole by addressing these issues. Understanding the impact of these socioeconomic factors and personal experiences on depression among older adults is critical for developing targeted interventions and support systems. It is possible to reduce the risk of depression and promote better mental health and well-being in older adults by addressing these factors.

### **Impact of COVID-19 Pandemic on Mental Health of Older Adults**

The COVID-19 pandemic has had a significant impact on people's mental health all over the world, with older people being particularly vulnerable. Understanding how the pandemic has affected depression in older adults is critical for developing targeted interventions and support systems. Research has shown that the increased rates of depression among older adults during the pandemic were caused by social isolation, financial stress, fear of contracting the virus, and disruptions in daily routines. Furthermore, limited access to mental health services and difficulty adapting to virtual forms of communication have exacerbated these difficulties. The following themes highlight the impact of the COVID-19 pandemic on depression among older adults:

#### **A. Increased risk and vulnerability:**

Because of age-related physiological changes and a higher prevalence of underlying health conditions, older adults are at a higher risk of severe illness and mortality from COVID-

19 (Gupta et al., 2020). Fear of contracting the virus and its potentially severe consequences can increase anxiety and distress in older people, contributing to the development or exacerbation of depressive symptoms. Physical distancing measures can cause social isolation and loneliness, which can exacerbate the negative mental health effects.

**B. Social distancing measures and their effects on social interactions and support systems:** The implementation of social distancing measures, such as lockdowns, quarantine, and social gathering restrictions, has significantly disrupted social interactions and support systems for older adults (Lee & Terada, 2021). Reduced opportunities for face-to-face socialization and engagement can exacerbate feelings of loneliness, isolation, and loss of social support, all of which are known risk factors for depression. Lack of social interaction can also have a negative impact on physical health by leading to a sedentary lifestyle and poor eating habits. During these difficult times, it is critical for communities to find new ways to support and connect with older adults.

**C. Disruption of routine healthcare services and access to mental health support:** The pandemic has hampered routine healthcare services such as regular check-ups, non-urgent medical appointments, and access to mental health care (Gupta et al., 2020). Access to necessary healthcare services, including mental health resources, may be difficult for older adults, resulting in unmet needs and a lack of appropriate support for managing their mental health, including depression.

**D. Fear, anxiety, and uncertainty related to the pandemic:** The COVID-19 pandemic has caused widespread fear, anxiety, and

uncertainty, including among the elderly. The constant news coverage, updates on case numbers, and changing nature of the pandemic can all contribute to increased stress and anxiety among older adults (Aravena et al., 2020). These emotional responses can increase the likelihood of developing or exacerbating depressive symptoms among older adults.

**E. Economic implications and financial stress:** The pandemic has had significant economic consequences, including loss of job, reduced income, and financial stress, all of which can affect the mental health of older adults and increase their risk of depression (Lee & Terada, 2021). Meeting basic needs, such as housing, healthcare, and daily expenses, can be difficult for older adults, leading to increased anxiety, distress, and depressive symptoms. The pandemic has also caused market volatility and decreased retirement savings, leaving older adults with less financial security for the future, exacerbating their stress and anxiety levels, making it critical for policymakers to address these economic implications and provide support for older adults during this difficult time.

**F. Influence of media and information overload on mental health:** Constant media coverage and information overload related to the pandemic can have a negative impact on mental health, including depression, in older adults. Misinformation, sensationalism, and the deluge of pandemic-related news can all contribute to increased anxiety, fear, and distress (Aravena et al., 2020). Older adults may be especially vulnerable to the negative effects of excessive media consumption, which can aggravate the symptoms of depression among them. The COVID-19 pandemic has presented unique challenges that have had a significant impact on older

adults' mental health. Understanding these specific effects is critical for developing targeted interventions, support systems, and mental health services to address the increased risk of depression and promote older adults' well-being during and after the pandemic.

## CONCLUSION

This study sheds light on the significant impact of the COVID-19 pandemic on the mental health and social well-being of older adults. Socio-demographic factors and personal experiences have been identified as influential factors affecting the mental health of older adults. Non-communicable diseases and disabilities further exacerbate the challenges they face, including limitations in everyday activities and social well-being. Moreover, the lack of attention given to the mental health and social well-being of older adults by the research community has been highlighted. The paper has also explored the data on COVID-19 disease and depression among older adults in India, emphasizing the need to address these people's mental health needs and find workable and effective coping mechanisms for these trying times. It is crucial to recognize that mental health and social well-being are essential components of overall health and should be prioritized in healthcare policies and interventions. Providing adequate support and resources for older adults can improve their quality of life and help them cope with the challenges they face. It is important to highlight that the pandemic has highlighted existing disparities in healthcare and social support for older adults, particularly those with pre-existing conditions and addressing these issues will require a comprehensive approach that considers both physical and mental health needs.

## RECOMMENDATIONS

Several recommendations emerge to address the mental health needs of older adults during the COVID-19 pandemic. Through policy initiatives, governments should prioritize the mental health of older adults, allocate resources for mental health services, and raise awareness to reduce stigma. Healthcare systems should make mental health services more accessible and age-friendly, incorporate mental health screening into routine care, and improve collaboration between primary care and mental health services. Community-based interventions and support networks, in conjunction with tele-health services, can help to foster social connections, reduce isolation, and provide remote mental health care. It is critical to empower older adults through education and awareness about mental health and coping strategies. Furthermore, addressing stigma and discrimination surrounding mental health in older adults is crucial to encourage seeking help and reducing barriers to care. Involving family members and caregivers in the care process can also improve mental health outcomes among older adults.

## IMPLICATIONS FOR FUTURE RESEARCH AND POLICY DEVELOPMENT

This emphasizes the importance of additional research and policy development to address the mental health and social well-being of the older population. Future research should concentrate on determining the efficacy of various interventions in supporting the mental health of older adults during pandemics and other stressful situations. Longitudinal research can aid in the identification of factors that promote resilience and well-being among older adults. Policymakers should prioritize mental health in the aging population and create comprehensive strategies that include preventive measures, early intervention, and



readily available mental health services. The research should also explore the effects of social isolation and loneliness on the mental health of older people during pandemics. Furthermore, older adults from various backgrounds, including those with disabilities and those living in long-term care facilities, have different needs and challenges. In order to develop effective interventions and policies that promote mental well-being among older adults, it is critical to consider their unique needs and challenges. Collaborations between healthcare providers, community organizations, and carers can also help ensure that older adults receive the necessary mental health support.

### **IMPORTANCE OF PRIORITIZING MENTAL HEALTH AND SOCIAL WELL-BEING OF OLDER ADULTS IN SOCIETY**

The COVID-19 pandemic has highlighted the importance of prioritizing the mental health and social well-being of older adults in society. As the population ages, it is critical to recognize the unique needs of older people and ensure that their mental health receives the same attention as their physical health. We can improve the quality of life for older adults and contribute to a more inclusive and compassionate society by creating supportive environments, promoting social connections, and providing accessible mental health services. Addressing mental health needs of older adults can also have a positive impact on their physical health and overall well-being. It is critical to recognize that mental health is an essential component of aging and that it should be prioritized alongside physical health in health care systems and policies. To summarize, addressing the mental health needs of older adults during and after the COVID-19 pandemic necessitates a multifaceted and comprehensive approach. Understanding the factors that influence depression, the impact of the pandemic, and

implementing effective support strategies can help older adults improve their mental health and social connectedness. To ensure older adults' continued resilience, dignity, and quality of life, society, research communities, and policymakers must prioritize their mental health and social well-being. This can be accomplished by increasing funding for mental health services, encouraging community involvement and social activities, and addressing systemic issues that contribute to social isolation and loneliness in older adults. Furthermore, healthcare providers should be trained to recognize and address mental health issues in older adults, and family members and carers should be educated on how to provide emotional support to their loved ones. Finally, increasing access to mental health services and resources can assist older adults in coping with the challenges posed by the pandemic and improving their overall mental health outcomes.

### **REFERENCES**

- Anand, A. (2015). *Understanding Depression among Older Adults in Six Low-Middle Income Countries using WHO-SAGE Survey*. 1(2).
- Aravena, J. M., Aceituno, C., Nyhan, K., Shi, K., Vermund, S., & Levy, B. R. (2020). 'Drawing on Wisdom to Cope with Adversity: A Systematic Review Protocol of Older Adults' Mental and Psychosocial Health During Acute Respiratory Disease Propagated-Type Epidemics and Pandemics (COVID-19, SARS-CoV, MERS, and Influenza). *MedRxiv*, 2020-06.
- Cacioppo, J. T., & Cacioppo, S. (2014). Social relationships and health: The toxic effects of perceived social isolation. *Social and personality psychology compass*, 8(2), 58-72.
- Chatterji, S., Byles, J., Cutler, D., Seeman, T.,

- & Verdes, E. (2015). Health, functioning, and
- Cohen-Mansfield, J., & Perach, R. (2015). Interventions for alleviating loneliness among older persons: a critical review. *American Journal of Health Promotion, 29*(3), e109-e125.
- Ferguson, S. J., & Goodwin, A. D. (2010). Optimism and well-being in older adults: The mediating role of social support and perceived control. *The International Journal of Aging and Human Development, 71*(1), 43-68.
- Fisher, B. S., & Regan, S. L. (2006). The extent and frequency of abuse in the lives of older women and their relationship with health outcomes. *The Gerontologist, 46*(2), 200-209.
- Gonzalez-Sanguino, C., Ausin, B., Castellanos, M. A., Saiz, J., Lopez-Gomez, A., Ugidos, C., & Munoz, M. (2020). Mental health consequences during the initial stage of the 2020
- Gupta, A., Sinha, A., & Sutradhar, B. (2020). Depression and its associated factors among geriatric population in rural areas of south Bihar. *International journal of community medicine and public health (Gujarat), 7*(4), 1415-1418.
- Kahana, E., Kelley-Moore, J., & Kahana, B. (2012). Proactive aging: A longitudinal study of stress, resources, agency, and well-being in late life. *Aging & mental health, 16*(4), 438-451.
- Kivi, M., Hansson, I., & Bjälkebring, P. (2021). Up and about: Older adults' well-being during the COVID-19 pandemic in a Swedish longitudinal study. *The Journals of Gerontology: Series B, 76*(2), e4-e9.
- Lee, Y., & Terada, T. (2021). Protective and Risk Factors of Depression Among Older Adults During the COVID-19 Pandemic. *Innovation in Aging, 5*(Suppl 1), 722.
- Oh, D. H., Park, J. H., Lee, H. Y., Kim, S. A., Choi, B. Y., & Nam, J. H. (2015). Association between living arrangements and depressive symptoms among older women and men in South Korea. *Social psychiatry and psychiatric epidemiology, 50*, 133-141.
- Pachana, N. A., & Laidlaw, K. (Eds.). (2014). *The Oxford handbook of clinical geropsychology*. OUP Oxford.
- Padayachey, U., Ramlall, S., & Chipps, J. (2017). Depression in older adults: prevalence and risk factors in a primary health care sample. *South African family practice, 59*(2), 61-66.
- Patel, M., Bhardwaj, P., Nebhinani, N., Goel, A. D., & Patel, K. (2020). Prevalence of psychiatric disorders among older adults in Jodhpur and stakeholders perspective on responsive health system. *Journal of family medicine and primary care, 9*(2), 714.
- Prince, M. J., Wu, F., Guo, Y., Robledo, L. M. G., O'Donnell, M., Sullivan, R., & Yusuf, S. (2015). The burden of disease in older people and implications for health policy and practice. *The lancet, 385*(9967), 549-562.
- Santini, Z. I., Koyanagi, A., Tyrovolas, S., Mason, C., & Haro, J. M. (2015). The association between social relationships and depression: A systematic review. *Journal of affective disorders, 175*, 53-65.
- Sinha, S. P., Shrivastava, S. R., & Ramasamy, J. (2013). Depression in an older adult rural population in India. *MEDICC review, 15*, 41-44.
- Smith, J., Fisher, G., Ryan, L., Clarke, P., House, J., & Weir, D. (2013). Psychosocial and lifestyle questionnaire. *Survey Research*



- Center, Institute for Social Research.
- Srivastava, S., Debnath, P., Shri, N., & Muhammad, T. (2021). The association of widowhood and living alone with depression among older adults in India. *Scientific reports*, 11(1), 21641.
- Steptoe, A., Deaton, A., & Stone, A. A. (2015). Subjective well being, health, and aging. *The Lancet*, 385(9968), 640-648.
- Steverink, N., Westerhof, G. J., Bode, C., & Dittmann-Kohli, F. (2001). The personal experience of aging, individual resources, and subjective well-being. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 56(6), P364-P373.
- Tomioka, K., Kurumatani, N., & Hosoi, H. (2017). Positive and negative influences of social participation on physical and mental health among community-dwelling elderly aged 65–70 years: a cross-sectional study in Japan. *BMC geriatrics*, 17(1), 1-13.
- United Nations Department of Economic and Social Affairs, Population Division. (2020). *World population aging 2020 highlights: Living arrangements of older persons* (ST/ESA/SER.A/451).
- Victor, C. R., Scambler, S. J., Bowling, A. N., & Bond, J. (2005). The prevalence of, and risk factors for, loneliness in later life: a survey of older people in Great Britain. *Ageing & Society*, 25(6), 357-375.
- WHO. (2015). *World report on aging and health*. World Health Organization.
- WHO. (2017). *Depression and other common mental disorders: global health estimates* (No. WHO/MSD/MER/2017.2). World Health Organization.

**Conflict of interest:** None

**Role of funding source:** None