ELDER MENTAL HEALTH DURING COVID-19

ADDRESS THE RISK

The outbreak of coronavirus disease 2019 (COVID-19) may be stressful for elders. Older adults are particularly vulnerable to COVID-19 given their weaker immune systems, the higher COVID-19 mortality rate found in the older population, and their limited information sources. Providers should be aware of especially high-risk groups such as low-income elders, those living alone, and those suffering from other health conditions such as cognitive decline, dementia, or other mental health conditions.

MANAGE STRESS

- Share simple facts about the COVID-19 outbreak, including symptoms, treatment, and effective strategies to reduce risk of infection in words older people can understand. Consider whether they have cognitive impairments when speaking about risk.
- Communicate instructions in a clear, concise, and respectful way. Information may be displayed in writing or pictures.
- Engage families with information and help them practice prevention measures such as handwashing.
- Contact elders via landline phones.
- Encourage family or friends to call their elders regularly and teach elders how to use video (chat).

DEFINITIONS

Communities, families, and elders must take steps to protect elders:

What is Social Distancing?

Social distancing means remaining out of settings with large groups of people and maintaining distance (approximately 6 feet) from others when possible. People can practice social distancing while remaining connected to others through the phone and other forms of technology.

What is Isolation?

Isolation means the separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious, from those who are not infected, to prevent spread of the disease. Someone infected with COVID-19 may show the following symptoms: cough, fever, shortness of breath, headache, muscle pain, chills, runny nose, diarrhea, nausea/vomiting, or sore throat. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order.

What is Quarantine?

Quarantine means the separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic. The person or group of people must be separated from others who have not been so exposed to prevent the possible spread of the disease.

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Ways to Support Elders with Medical Needs

Elders with mild cognitive impairment or early stages of dementia need to be informed of what is happening within their capacity and provided support to ease their anxiety and stress. For people at moderate and late stages of dementia, their medical and daily living needs need to be met during the quarantine time.

- Medical needs of older adults with/without COVID-19 need to be met during the outbreak. This includes uninterrupted access to essential medicines (for diabetes, cancer, kidney disease, HIV). Telemedicine and online medical services can be used to provide medical services.
- Isolated or infected older people should be presented with truthful information on risk factors and chances of recovery.
- During quarantine, adjust respite or home care services to use technology (WeChat, WhatsApp) to provide trainings/counseling for family caregivers at home, and include psychological first aid training for family caregivers.

Ask for help if you feel overwhelmed or concerned that COVID-19 is affecting your ability to care for your patients as you did before the outbreak.

SAMHSA's Disaster Distress Helpline Toll-Free: 1-800-985-5990 (English and Español)

Ways to Support Elders in Residential Care

Nursing home populations are at the highest risk of being affected by COVID-19. If infected, residents are at increased risk of serious illness.

Facilities should take these steps before there are confirmed cases in the community:

1. Educate residents, healthcare personnel, and visitors on COVID-19.
2. Provide hygiene and cleaning supplies for recommended infection prevention and control practices.
3. Evaluate and manage providers with symptoms of COVID-19. Symptoms may include: cough, fever, shortness of breath, headache, muscle pain, chills, runny nose, diarrhea, nausea/vomiting, or sore throat.
4. Consider new policies and procedures for visitors.
5. Evaluate and manage residents with symptoms of COVID-19.
6. Connect with contact tracers to help stop the spread of COVID-19.
7. Minimize group activities inside the facility or field trips outside of the facility.
8. Develop criteria for halting group activities and communal dining, closing units or the entire facility to new admissions, and restricting visitation.
9. Create a plan for grouping residents with symptoms of COVID-19, including dedicating providers to work only on affected units.

Facilities should take these steps when there are confirmed cases in community:

1. Implement policies and procedures for limiting visitors.
2. Implement healthcare personnel monitoring and restrictions.
3. Monitor residents for symptoms and apply appropriate restrictions of communal activities.

Activities That Support Elder Well-being During Isolation or Quarantine

- Physical exercise like yoga, tai chi, and stretching.
- Cognitive exercises such as word search, Sudoku, and crossword puzzles.
- Relaxation exercises including breathing, meditation, and mindfulness.
- Reading books and magazines.
- Reducing the time spent looking at fearful images on TV.
- Reducing time listening to rumors.
- Searching information from reliable sources such as CDC.gov.
- Reducing time looking for information—1-2 times per day, rather than every hour.

Visit CDC.gov/coronavirus for additional information.

Photos by Ed Cunicelli