IN THIS TOGETHER: HOW SENIORS LIVING WITH CHRONIC CONDITIONS CAN MAINTAIN CONNECTIONS IN TIMES OF ISOLATION

By Lauren Liecau, MA, and Jana Pressley, Psy.D.
The Foundation Trust
This resource guide was developed to enrich basic caregiving for seniors living with chronic conditions and to help them cope with stressors engendered by public health crises and other major events that impact routine access to resources, support, and community engagement. Initially compiled in response to the COVID-19 pandemic, this guide offers coping strategies that are applicable in many situations. Combining mental health and wellness insights with input leveraged from the Foundation Trust’s community partners in eldercare, this psychoeducational resource highlights examples of how seniors and their caregivers can adapt their activities during times of sequestering and physical isolation to promote well-being and stay connected.

Note: The recommendations in this guide may not be relevant or feasible for everyone, as having core basic needs fulfilled is essential before being able to address some of the other elements of wellness that are outlined here.
CHRONIC CONDITIONS FACING VULNERABLE SENIORS

The Foundation Trust is committed to restoring dignity and quality of care for adults living with chronic conditions. Our regional service partners’ work includes many activities to help seniors avoid social isolation, with a variety of options from exercise classes to home visits. During periods of required physical distancing such as that occasioned by the coronavirus pandemic, many of these services are heavily restricted or discontinued altogether. This creates a void for a population that is not only at risk of serious physical complications from COVID-19, but also highly vulnerable to emotional challenges associated with isolation. This presents a significant conundrum for staff in senior care facilities, adult children caring for their aging parents, and other eldercare providers who are all striving day-to-day to meet the diverse needs of those in their care.

Like individuals at any stage of life, senior adults are often living with the ongoing impact of mental health challenges. Approximately 1 in 4 older adults are living with a psychological or neurological disorder, with dementia, depression, and anxiety as the most common diagnoses. Many older adults are coping with a wide variety of associated mental health struggles including substance use and self-harming behaviors.
Although there are multiple risk factors for mental health difficulties at any stage of life, senior adults or adults with chronic medical and neurodegenerative conditions experience stressors that can compound psychological distress, including decline in overall functional abilities, chronic pain, and progressive loss of gross motor functioning, mobility, hearing or vision. For example, depression rates are similar throughout adulthood. However, risk for depression is significantly heightened for senior adults whose medical status requires them to seek home health care or long-term residential care. The synergistic relationship between medical disease and psychiatric diagnoses in seniors is also noteworthy, as older adults with health conditions such as heart disease often have higher rates of depression than their healthier counterparts. In addition, senior adults may also be experiencing bereavement of lost loved ones. Any one of these stressors can contribute to an increased sense of isolation or loneliness. Combined, they can readily evoke helplessness and despair.

Some elders must also contend with the lasting effects of past trauma. Over 70% of adults age 65 and older have experienced at least one traumatic event in their lifetime. Studies of older adults with histories of past traumatic experiences – including military trauma, sexual assault, and childhood abuse – have shown that many still experience chronic symptoms and difficulties related to events that occurred often decades prior. This research has revealed high rates of Posttraumatic Stress Disorder (PTSD) and other forms of serious emotional distress in elders and older adults. In general, research on trauma suggests that chronic exposure, especially if beginning in childhood, can have a lifelong, cumulative impact on the physical, emotional, and social well-being of adults. In senior adults, changes in functional role and identity due to retirement, interpersonal loss, relocation of home, and physical or cognitive decline may lead to increased difficulty coping with the psychological effects of trauma.

For seniors with dementia and other cognitive disorders, reduction or inconsistency in the physical presence and availability of caretakers can increase medical vulnerability and heighten safety concerns. Individuals in care facilities may require repeated reminders or direct assistance to wash their hands, maintain physical distancing, and take other necessary precautions when interacting with goods or people entering their living space.

Cognitively impaired seniors living on their own or semi-independently are likely at greatest risk for everything from contracting a transmissible virus while embarking on their own to procure food and medicine in the community, to refusing to call for emergency medical assistance after experiencing a heart attack or stroke due to fear of entering a hospital during a pandemic, to misinterpreting or becoming confused by misinformation gleaned through the media and ingesting bleach or other toxic substances in a misguided effort to prevent infection.
Even in the absence of such serious outcomes, many seniors with cognitive decline are likely to experience a general sense of increased anxiety, confusion, or distress with the disruption of the patterns and routines that have previously been regulating and organizing in their daily life.

Supporting the psychological care of older adults can be complex, as there can be increased stigma in acknowledging psychological vulnerability in older generations. Simultaneously, senior adults embody incredible resilience and emotional maturity, with an abundance of life experience, skill, and wisdom. Given this coexistence of risk and protective factors, including the prevalence of emotional and social support needs, it is particularly important to hold these realities in mind while considering the current state of isolation of seniors during this public health crisis.

SENIORS LIVING WITH CHRONIC CONDITIONS DURING A TIME OF GLOBAL CRISIS

With so much uncertainty about when and how daily life will return to normal, many people may be feeling that they lack control. For seniors who found themselves feeling stuck before the pandemic due to isolation and/or illness and dependence on caregivers, feelings of powerlessness and vulnerability may now be even more acute. Many seniors may also struggle with feelings of guilt about needing others assist them with activities of daily living, especially if that may put their loved ones at greater risk of contracting COVID-19. Older adults who have struggled with persistent depression, anxiety, or the impact of trauma have often already experienced powerlessness, guilt, and a lack of agency in their lives. The current pandemic conditions can magnify these feelings for some seniors. This is part of the new reality that family and caregivers will need to be sensitive to as they communicate with and respond to seniors.

Another concern of seniors and their families that has been exacerbated by this crisis is an uptick in scams preying on fears of the COVID-19 pandemic, which may disproportionately target seniors. For those fraught with chronic anxiety, tactics that prey on survival-based fears could lead to financial peril.

Obtaining basic needs such as food and medicine can be daunting for seniors when the official recommendation is to avoid going out in public. Obtaining care for existing conditions without risking exposure to COVID-19 is also anxiety inducing.

Many seniors are feeling particularly disconnected from their family and friends and are even more socially isolated than in the past. For those who lack computers or smartphones or
who are not technologically savvy, staying connected can be especially difficult. “Zoom meetings are great, but this population often doesn’t have computers,” explains Doreen Arnfield, Director of the Amesbury Council on Aging in Amesbury, Massachusetts.

Community resources and service organizations such as **councils on aging and senior centers** are navigating this uncharted territory as well, figuring out how to connect with people when their work has traditionally been face-to-face. As senior centers and day health facilities have had to close their doors, there has also been a marked decrease in physical fitness, wellness, and social activities available to seniors. These facilities provide critical support services, both to seniors as well as their caregivers, who are currently unable to leverage the support offered by day health centers to give them a break or offer hands-on learning opportunities.

Many of the concerns above also apply to **seniors in residential settings** such as nursing homes or assisted living facilities. When visitors are not allowed, residents face increased isolation and challenges staying connected with their loved ones. Onsite wellness and social activities are being discontinued to encourage social distancing, and to allow staff to focus on immediate health needs. As Joyce Shannon, CEO of Nevins Family of Services in Methuen, Massachusetts remarked: “all of us at Nevins are completely focused on the complicated day to day task of keeping our residents and employees safe.” In the midst of a global health crisis, facilities become preoccupied with doing everything they can, often with limited resources, to limit and prevent contagion.
STRATEGIES TO HELP SENIORS MAINTAIN A SENSE OF CONTROL AND REMAIN ENGAGED

At a time when activities outside the home are limited, seniors, their caregivers, and community organizations are looking for alternatives to help meet their needs and alleviate the physical and mental toll that the COVID-19 pandemic is having. First and foremost, it is important to note that caregivers will be faced with difficult decisions day-to-day about how to best protect the physical and emotional health of their loved ones, when at times those needs will feel at odds with one another.

Supporting daily functions and resources:

- **Sustain a sense of identity amid crises.** For many seniors, it has been found that passions, talents, and interests throughout life continue to sustain wellness, life satisfaction, and memory in older adulthood. Even for those coping with cognitive decline, exposure to familiar music or art, favorite films, or photo albums of loved ones can elevate mood and stimulate engagement and energy. Finding ways to keep seniors engaged with access to sources of personal identity might serve as a buffer to some of the temporary loss of outside activity.

- **Maintain daily routine.** Support the routines of senior adults, even if it means developing a new, temporary daily rhythm during this time of sequestering. This is particularly essential for individuals living with dementia, who may need extra verbal or written reminders to remember important hygienic practices, medications, and exercise from one day to the next.

- **Maintain connection with your community.** If you are feeling isolated from friends and loved ones, schedule daily or weekly video, phone, or text chats with people who bring you joy and comfort. Find out if local senior centers are hosting remote activities or checking in on residents and ask to be added to their list.
• **Preserve emotional closeness while physically distancing.** The increased sense of isolation during this time can feel devastating for some who are already suffering from loneliness and long for moments of connection with adult children, grandchildren, extended family members, or residential facility staff with whom they feel connection. For those living at home who cannot have visitors, regular phone calls or video calls might function as an emotional lifeline during this period of physical distancing. For seniors in residential facilities, it is likely that staff must work in a manner that is less physically connected than usual. Staff who may have previously offered hugs or physical comfort have had to adapt daily care to minimize touch and reduce the risk of infection; however, this does not have to mean emotional distancing. Staff may consider spending time sitting at a safe distance in the elder’s space and sharing time and conversation.

• **Get outside.** Be sure to follow recommendations from local officials, but movement and fresh air, even just sitting on the porch for a change of scenery, can be beneficial.

• **Look online.** Gyms, arts and theater organizations are offering online programming for different ages and interests, many for free, including symphony orchestra performances and Broadway plays and musicals. Some offer suggestions for activities or projects, while others offer participatory groups where participants can meet and discuss over video. Libraries are posting resources for patrons to keep busy, including genealogy research materials, historical document databases for online users to research their homes, and online book clubs. Many religious services have moved online as well.

**Finding the help you need:**

• **Asking for and accepting help is important.** Identify the people in your life who would be accepting and supportive if you reached out in need or for solace, encouragement, or non-judgmental listening. Contact a trusted friend, family member, mentor, physician, therapist, or spiritual leader in your community. Involve available family members or neighbors, if necessary, to help with errands.
• **You may find you need assistance accessing basic supplies.** Many stores offer special hours for seniors or immunocompromised individuals to reduce their risk of exposure to COVID-19. If you are unable to shop for yourself, Meals on Wheels, food banks or store deliveries may need to be arranged to provide sufficient nutrition. For those facing food insecurity, some cities or local churches are offering meal programs, including to homebound residents.

• **Take care of your health.** It is recommended to make sure a loved one knows what prescriptions you are taking and what medical supplies you need, and let them help make sure you have a sufficient amount, either by visiting the pharmacy for you or helping arrange a pharmacy delivery. Additionally, many medical practices are increasing the availability of telemedicine, enabling them to connect with patients remotely by phone or video for some conditions.
• **Check what your local government is doing to support its senior residents.** Many municipalities are compiling lists of volunteers that can help with grocery delivery, medication pick-up, or phone calls to check in and have someone to talk to. There may also be measures in place to help with property tax bills and utilities.

• **Additional recommendations for self-care and coping strategies,** particularly if you struggle with a history of painful past experiences, can be found in our companion resource: [Coping Strategies for Complex Trauma Survivors Contending with the Coronavirus (COVID-19) Pandemic](#) (available in English, Spanish and French).
MAINTAINING CONNECTIONS AND MANAGING INFORMATION
An Example from the Amesbury Council on Aging in Massachusetts

Although many programs have suspended their in-person operations, cities and local organizations have been finding creative solutions to continue to serve their clients. One such example is the Amesbury Council on Aging in northeast Massachusetts, a partner organization of the Foundation Trust.

The Amesbury Council on Aging received a gift from the Foundation Trust in 2019 which allowed them to purchase a number of iPads for use in their day program. Although their doors are currently closed due to COVID-19, they continue to use the iPads to be progressive in their outreach and future planning. Explains Doreen Arnfield, Director of the Amesbury Council on Aging, “I believe our last day of programming was March 19th. However, since my entire staff is working from home, the tablets have been very helpful to a couple of my staff which enabled them to continue their work and stay connected with our seniors. In addition, the tablets are used to research additional activity programming ideas for when we resume normalcy.”

For Arnfield, the crux of the issue is “how do we stay connected in this new world?” She notes that before the COVID-19 crisis, the Council on Aging reached people through home visits and in-person programming, both of which are currently not advisable. Instead, they have shifted to phone calls and telehealth, hoping that they can continue to positively impact the lives of the over 4,000 seniors they serve. Above all, they want people to know that “we’re still here, just in a different way.”

Staff from the Amesbury Council on Aging are all working from home, working on creative ways to engage with seniors in their community. “We are trying to think of ways to maintain a connection and offer reassurance,” comments Arnfield. Arnfield noted that switching to a technology-based approach has not been easy for everyone, and that there is a learning curve, both for staff as well as the seniors they serve. However, they have had success conducting weekly calls to families in their Greenleaf Supportive Day program, as well as to other seniors and their families in Amesbury, to help combat social isolation. “Even just having someone willing to listen is so important,” says Arnfield. They also are sending newsletters with ideas for things to do at home, and plan to send “thinking of you” cards, starting with their most vulnerable populations, then expanding to their full list of seniors in the area.

The Amesbury Council on Aging wants to continue to be a trusted source of information to connect older adults to resources that can help them during the COVID-19 crisis. Arnfield shared that “we are getting flooded with resources, which is great. We’re doing information management, getting the resources into the hand of the people that want and need them. The only difference is we’re just not doing it in person right now.”
When physical distancing requirements are lifted and life regains a sense of normalcy, Arnfield hopes people will have a better understanding of the role and value of councils on aging and senior centers. “People often think of senior centers as a place to go play BINGO, but we’re so, so much more. There is a lot of good mental health support and more social work taking place than people realize,” says Arnfield.

The unflagging efforts being made by local direct-service organizations demonstrate their ongoing importance to seniors’ health and well-being, even from afar. It is a reminder that even if we cannot physically be together, there are still numerous ways to support and nurture vulnerable members of our communities.

ABOUT THE FOUNDATION TRUST

The Foundation Trust is committed to restoring dignity and quality of care for adults living with chronic conditions. To date, the Foundation Trust has supported programs that empower adults struggling with chronic mental illness, cognitive decline and degenerative conditions, that increase community access and engagement, decrease social isolation, and foster wellness. Services of particular interest include suicide prevention; in-home support and assistance; and community integration, fitness, arts or other strength-based programming for adults living in residential or congregate care settings. Learn more about our work in this track and others at [www.foundationtrust.org](http://www.foundationtrust.org).
REFERENCES AND ADDITIONAL RESOURCES

Below is a selection of articles and online resources that helped inform this guide. While some of the resources are specific to Massachusetts, similar support can be found, particularly from Councils on Aging, across states and municipalities.


- Amesbury Council on Aging: https://www.amesburyma.gov/council-on-aging

- Centers for Disease Control and Prevention (CDC): Alzheimer’s Disease and Health Aging: https://www.cdc.gov/aging/mentalhealth/depression.htm


- Elder Services of the Merrimack Valley and North Shore: https://www.esmv.org/


- Massachusetts Councils on Aging (MCOA): Coronavirus FAQs: https://mcoaonline.com/coronavirus/faqs/

- Massachusetts Councils on Aging (MCOA): Great Info for your Low Vision and Hearing Impaired Seniors: https://mcoaonline.com/2020/04/07/support-for-low-vision-and-hearing-impaired/
• Mental Health America (MHA): Mental Health And COVID-19 – Information And Resources for Older Adults: https://mhanational.org/covid19##ForOlderAdults

• National Center for PTSD: posttraumatic stress symptoms among older adults: https://www.ptsd.va.gov/professional/treat/specific/symptoms_older_adults.asp
#two

• National Council on Aging (NCOA): Behavioral Health Resources: https://www.ncoa.org/center-for-healthy-aging/behavioral-health/


• National Council on Aging (NCOA): Covid-19 Resources for Older Adults: https://www.ncoa.org/covid-19-resources-for-older-adults/

• National Council on Aging (NCOA): Senior Centers Connect: https://www.ncoa.org/resources/senior-centers-connect/

• Social Distancing: Apps for Seniors (Tech-savvy or not): A guide to Home Care, Communication, Food delivery and health monitoring tools: https://www.seniorliving.org/research/apps-for-seniors/

• Substance Abuse and Mental Health Services Administration: https://store.samhsa.gov/product/helping-older-adults-after-disasters-a-guide-to-providing-support/PEP19-01-01-001

• World Health Organization (WHO): Fact Sheet on Mental Health in Older Adults: https://www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults