

THE EFFECTS OF PHYSICAL ISOLATION ON THE ELDERLY IN ROMANIA, DURING THE COVID-19 PANDEMIC

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ABSTRACT: *During the coronavirus pandemic (COVID-19), several societies paid special attention to the elderly, in terms of physical distance from society, as a means of primary prevention, due to the vulnerability of this age group, in relation to the consequences negative effects of Covid-19 on their health. The COVID-19 pandemic negatively affected the mental health and social well-being of the elderly and favored the appearance of symptoms of anxiety and depression, the experience of increased psychological stress, in response to new, unpredictable, and uncontrollable stimuli. The measures of physical and social isolation deepen the feeling of loneliness and produce significant changes within the social networks of the elderly (distance from family members and the group of friends). Loneliness is strongly associated with higher levels of depression for the elderly who were separated from support groups during the pandemic.*

Keywords: *elderly; COVID-19; depression; anxiety; loneliness; physical isolation;*

Introduction

The SARS-CoV-2 virus first appeared in China, originally from Wuhan, in December 2019 and triggered the 2019 coronavirus disease (COVID-19). It is currently known that COVID-19 is a severe acute respiratory syndrome with common symptoms of fever, cough and shortness of breath. To date, no vaccine or antiviral treatment is known.

The COVID-19 pandemic has caused changes in many directions around the world, especially in the way older people are treated. All aspects of life have changed dramatically. No one can estimate how long the pandemic will last and what impact it will have on the health of the world's population and economy.

One of the defining characteristics of COVID-19 is the predilection for the infection of elderly adults and people with chronic health conditions, which can lead to an increase in the mortality rate for this age group.

In studies conducted worldwide, it has been established that COVID-19 fatally affects the elderly [Guan et al., 2020], especially those with pre-existing health

conditions. Therefore, it was encouraged that this vulnerable age group limit their travel and physical interactions, imposing the first restrictive measures related to physical isolation, as a preventive measure against the transmission of the virus to the elderly.

The effects of physical distance on the elderly in the Coronavirus pandemic

Since the beginning of the pandemic, various measures have been taken to reduce the spread of the virus, which have changed both the lifestyle of people and the interpersonal relationships between them. The first measures imposed were physical distancing, isolation at home, quarantine, traffic restrictions, etc.

The measure of maintaining a physical distance of at least 2 meters from those around, along with wearing protective equipment, masks, surgical gloves was the central objective of Romanian state institutions to reduce the spread of coronavirus.

At the beginning of the state of emergency on the Romanian territory, in

March 2020, restrictive measures were imposed, by issuing military Ordinances, regarding the right to movement in the public space of the citizens. People over the age of 65 were allowed access to the public space between 11:00 and 13:00, for justified reasons, for the purchase of essential goods, food, medicine, emergency medical care.

Starting with April 27, 2020, based on Military Ordinance no. 10, new directives are introduced regarding the movement of persons who have reached the age of 65, outside the home, being allowed their access to the public space between the hours of 7:00-11:00 and 19:00-22:00, maintaining are the justifying reasons for the military ordinances previously issued.

During the state of emergency (March 16-May 15, 2020), the activities that involved congestion in public spaces (parks, theaters, meetings, etc.) were closed / prohibited. Schools were closed and homework was encouraged. Most health services, performed in the outpatient clinic (polyclinics) have been stopped, due to the risk of infection in the medical institution, and access to patients with chronic diseases to medical services is limited. In this context, the medical services provided within the Emergency Reception Units within the hospitals have become overcrowded, being the only providers of medical care provided to patients during the state of emergency.

The COVID-19 pandemic calls for increased attention to issues of social isolation and loneliness for all ages, especially the elderly, who are the most vulnerable segment of the population at risk.

There are skeptical opinions among Romanian citizens regarding physical distancing as a key factor in controlling the COVID-19 outbreak. However, a continuous effort is needed to understand the social implications of this phenomenon on the elderly, which can lead to a high level of anxiety, but also anxiety and mental suffering.

In studies by Bengtson and Putney

(2006), it is mentioned that physical distancing should not produce an emotional distance. When intergenerational contact becomes individualized (eg in families, personal contacts with elderly neighbors), the negative effects of stigma, prejudice and stereotypes are greatly reduced and replaced by rules of solidarity and connection. Encouraging this form of personal contact between young and old is an important means of overcoming intergenerational tensions and the resulting ageism.

The elderly experienced a prolonged period of isolation, and family and intergenerational connections became stronger, through a more frequent communication relationship.

People who live alone, find it more difficult to isolate at home, unable to maintain contact with loved ones: relatives, friends, neighbors, etc.

The phenomenon of loneliness and prolonged isolation represents for the elderly an increased psychological stress, which can degenerate into depression.

Social isolation is defined as the lack of a social network, it refers to loneliness and the lack of meaningful, supportive relationships with family and friends [Hernández-Ascanio et. Colab., 2020].

The Covid-19 pandemic has triggered a physical barrier between people and their families, making them more vulnerable than ever. During this period, older people share a basic need to feel connected to other people. Moreover, physical distancing has led to the experience of social isolation among some people, especially those living alone and lacking web-based electronic devices that could help them stay in touch with friends and loved ones. The pandemic has a strong psychological impact on people, due to the change in lifestyle, by forcibly interrupting daily routines and restricting daily activities due to the pandemic, which include visits to friends, children and grandchildren.

Through the close communication of the

elderly with people from their social and family support network, their emotional well-being increases and the relationship between loneliness and depression can be alleviated (English & Carstensen, 2014).

Given these changes, Flett and Zangeneh (2020) emphasized the importance of socialization as an essential resource for dealing with the pandemic. It has been argued that everyone needs a sense of belonging, of being important to others, and this is especially true in crisis situations, which can cause anxiety or separation from others.

Older people need to be treated in ways that appreciate their importance, roles, rather than being resource-consuming and useless to society. Based on numerous researches, it has been established that social contacts between different members are possible, respecting the rules of physical distance, by using online devices to interact remotely, such as Zoom, Skype, FaceTime, etc., allowing users to interact virtually.

Although the use of technology has proven to be a useful solution, unfortunately, many older people either do not have access to modern remote communication systems and do not have the necessary devices or do not have the necessary skills to use such devices [Klein, 2020].

In the opinion of Holt et. al. (2015), loneliness is a serious problem that many elderly people face and can contribute to the aggravation of existing health problems or even a causal factor in early mortality.

In the case of institutionalized elderly people with mental disabilities, compliance with the measure of physical and social distance is a difficult task, due to the diminished ability of older people to cope with stress or in situations where they have adjustment disorders.

Adopting the measure on the physical isolation of the elderly cannot be a long-term strategy, due to the negative effects arising from the absence of social interactions with family and friends. Among the elderly, social

isolation and loneliness are associated with increased reactivity to stressors, anxiety, depression, cognitive decline.

Efforts to reduce the negative effects of the COVID-19 pandemic need to include specific interventions to reduce isolation and loneliness and to encourage increased social engagement (eg psychological interventions to reduce psychological distress).

In studies by Hughes et al. (2013), it is considered that social involvement is associated with decreased risk of cognitive decline, interventions aimed at increasing social commitment resulting in decreased depression and loneliness. Through the benefits obtained during the interventions carried out to reduce social isolation and loneliness, we can highlight the role that these interventions play, by identifying means of connecting the elderly with other people, such as: by phone or video conversation, platforms online socialization.

Older people also consider traditional communication (e.g. telephone) to be important compared to the use of social networks, being far too advanced and unable to replace traditional modes of communication.

During the COVID-19 pandemic, institutionalized elderly people experienced psychological stress, not only because of isolation and loneliness, but also due to a high degree of concern, caused by their exclusion from personal contact with other people.

These behavioral changes will undoubtedly affect the social ties of older people and their quality of life. Taken as a whole, physical distancing measures limit social engagement among people living in both residential and community centers. Visitors' access to residential institutions was limited, including family, volunteers, friends. Thus, in the absence of the elderly's relationship with the people in their support group, they require continuous care and assistance in carrying out daily activities, due to chronic diseases or cognitive decline.

The role of social workers in assisting the elderly in the Coronavirus Pandemic

Social workers are the specialists who have the necessary skills to help people in the current crisis, in maintaining permanent contact with the elderly, who are part of the most vulnerable in Covid-19, facilitating their access to resources, implementing long-term strategies, socio-medical services at home in safe conditions (wearing protective equipment's).

The elderly has become a group protected by government institutions, in view of the imminent risk of becoming infected with a more severe form of COVID-19.

In the research of behavioral scientists of aging it is necessary to give a significant role to address the pandemic situation, in ways that can benefit the health and well-being of individuals.

The crisis situation caused by the Coronavirus Pandemic has led social specialists to reflect on the main difficulties encountered in assisting the elderly and to reorganize their future professional practices taking into account key issues related to: needs assessment and risk factors in among the elderly due to loneliness and social isolation, the development and adaptation of evidence-based interventions to address loneliness and social isolation, learning new skills - technology, importance, training and how to interact with people in non-traditional ways can become part of social assistance practices, as well as the implementation and development of strategies to effectively address loneliness and social isolation among older adults.

Social workers together with specialists in the field of gerontology expressed concern about loneliness, as a perception of lack of meaningful relationships) and isolation (social commitments and contacts) among the elderly [Lubben et. Al., 2015].

As we look to the future and analyze the effects of the COVID-19 pandemic, we are

aware of an increase in poverty among the population, in the situation where at least 50% of Romanian citizens faced poverty before the current crisis. This situation is triggered as a result of the devastating impact of the economy, from various fields of activity (tourism and services, hotel industry and culture), job losses for citizens working in the unskilled sector and can no longer provide financial support to families. . Social needs are diversifying and the demands for social support of people facing losses among family members, mental stress due to isolation and quarantine measures, as well as insufficient or lack of resources to overcome these traumatic situations on their own are increasing.

Under the current conditions, the voices of social workers propose a series of measures to develop and finance sustainable community social services that are essential to support vulnerable people in the crisis we are going through. At the same time, it is necessary to invest in the purchase of protective equipment for social workers and staff working in social services (public and private centers, alike).

Conclusions

The COVID-19 pandemic has overwhelmed global health systems. We all know that situations have already arisen in which the resources were not sufficient for all individuals in need, and it is necessary to take immediate decisions related to the prioritization of cases in the provision of health care. Sorting cases has become a difficult task for health professionals, who are under a high degree of pressure in assisting and treating large numbers of patients.

As the global COVID-19 pandemic continues to advance at a rapid pace, the need for older people to feel valued and to wonder how much it really matters is a very important issue now, when anxiety is heightened due to concerns. on personal

safety and uncertainty about how and when the pandemic will be resolved. Loneliness is already a public health problem, especially among the elderly, and physical isolation is exponentially added to social isolation, which is characterized by loneliness.

The COVID-19 pandemic has substantially changed our daily lives, and our sense of security. First, the mental health of the elderly has been adversely affected by the COVID-19 pandemic. They experienced acute feelings of loneliness and depression only before the pandemic. Second, interpersonal relationships in the support network (perceived closeness to network members), but not social engagement, moderated the relationship between loneliness and depression.

However, some psychological stress events have a high level of interpersonal dependence and controllability.

For example, the SARS-Cov2 virus is extremely infectious. In the case of people infected with the virus if immediate isolation measures are not taken, they pose a threat to the health of others. In this context, individual health and safety depend on the health of others, which strengthens dependencies between people.

At the same time, the COVID-19 epidemic is controllable [Wang et al., 2020] because people can take precautions to avoid infection, for example, effective hand washing, keeping a social distance, wearing masks.

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