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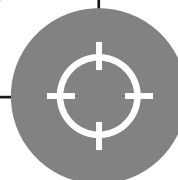
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Special Edition



Mission

To work for the cause and care of disadvantaged aged persons and to improve their quality of life



Special Edition

Impact of COVID-19 pandemic on Older Persons in India

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United Nations Secretary General's Message – 2023

This year's International Day of Older Persons coincides with the 75th anniversary of the Universal Declaration of Human Rights.

To realize the promise of the Declaration, we must do more to protect the dignity and rights of older persons everywhere.

Challenges abound. Ageism is rampant in societies. From the COVID-19 pandemic to poverty and climate emergencies, older persons are often among the first victims of crises.

Addressing these and other issues is a human rights imperative that will benefit everyone.

Older persons are invaluable sources of knowledge and experience and have much to contribute towards peace, sustainable development, and protecting our planet.

We must ensure their active engagement, full participation, and essential contributions – including through social and workplace policies built around their specific needs.

We must promote lifelong learning, quality healthcare, and digital inclusion.

And we must foster inter generational dialogue and unity.

Together, let us build more inclusive and age-friendly societies and a more resilient world for all.

-António Guterres

Editorial

Mental Wellbeing in Old Age-During the COVID-19 Pandemic: Some Issues*

Old age, as many of us know, being its own challenges. However, unlike other stages in life, here many of them are normalized and we normally try to live with them rather than actively find responses. A stark example of this attitude to old age is mental wellbeing. What constitutes mental wellbeing and what needs to be done to ensure it, to most, if not, all older persons is rarely the focus of discussions on health system. Not many are encouraged to seek professional help in case they suffer from depression, anxiety, dementia and other mental health issues like Post Traumatic Stress Disorder.

There are multiple reasons for mental distress in old age, but the most common are social isolation and lack of role. As people age, they are either by law or by convention relieved of the role that they are accustomed to playing. The degree of dislocation may vary, but it is experienced by almost all. The worst hit are those older persons who are highly educated, skilled and from organized sector. The dislocation is sudden and sharp. One day, they no longer command the respect and authority that was defining part of their being, for most of their adult life. Their daily routine is disrupted without any equal replacement or occupation. Women, who are employed find it hard also because they lose the role of mother and house- manager that was so engaging earlier with increasing

longevity, these people without roles that they were habitual to playing, have to live for almost 20 years on an average. How many of us can even imagine the trauma?

Traditionally, there are older persons who may find solace in running small errands for the young adults in the family and taking care of children. However, small family size, migration and digitization have taken the opportunity away from them. Added to this is the lack of human company and primary contact. What older persons are accustomed to and enjoy the most: talking to a bank clerk is not same as interacting with IVRS. They are used to primary contact apart from the fact that going to the bank is not akin to speaking to a machine on phone. The semantics of the acts are diametrically opposed. Seeing the grand-daughter on computer screen for some time is not the same as dropping her to school and walking her to a park.

The virtual act excludes the human and physical part of the experience and is in some ways restrictive. S/he doesn't dress up and go out and meet many more people on the road or see and interact with other children at the park or bus stop. S/he no longer is able to feel the warmth of the hands of the grandchild and see her navigate the world. Many older people find it annoying to speak to the machine on IVRS which is programmed to respond in a customised way. Maybe robotics will solve that problem in future!

There are multiple reasons for mental distress in old age, but the most common are social isolation and lack of role. As people age, they are either by law or by convention relieved of the role that they are accustomed to playing.

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Efforts were made at various levels to deal with this shadow pandemic by running helplines, training care givers and para medical staff to recognize signs to mental stress and diseases in older persons.

The COVID19 pandemic made it impossible to continue the old ways of traversing the world. It almost completely isolated the older persons behind the four walls besides adding anxiety about health, life of self and family and friends. Fear of death looming large, sudden loss of friends, siblings, inability to interact and even at times take part in last rites of relatives devastated many older persons during the pandemic. Insecurity, uncertainty and helplessness pervaded the atmosphere till vaccination drives made it a bit easier.

During the pandemic, the older persons also lost the opportunity to speak to their regular doctors for treatment of their NCDs and other general problems. The health system was overwhelmed by the pandemic and regular systems were either discontinued or working on skeleton staff. The doctors who could have been the first line for authentic information on the pandemic and recognizing signs of mental stress in older persons were some technology-based efforts were made, but, were too unfamiliar for the older persons to trust. It was an unprecedented situation where stress was being created constantly but with no way to relieve it. Everybody was under stress and nobody knew how to deal with it.

Efforts were made at various levels to deal with this shadow pandemic by running helplines, training care givers and para medical staff to recognize signs to mental stress and diseases in older

persons, training for digital literacy and safety to stay connected in the virtual world for practical and emotional needs.

The current edition of the Journal is highlighting these challenges and reporting some responses to it. The articles range from thorough search and documentation of secondary data on the subject to using 'art' as a solution for mental wellbeing to how family support and care can help elderly wade through the tough times. The article by Dr Meenakshi Yathindra Reddy analyses the secondary data to understand the impact of pandemic on elderly and outline remedial measures. It presents results of a thorough search of several data bases on how anxiety, depression, loneliness, increased chances of abuse and poor quality of life of the elderly due to the pandemic. The article by Dr Sabiha Vasi and Dr Sohini Chakraborty goes beyond the analysis of the mental wellbeing challenges for older persons in pre, during and post pandemic world. It documents the experiences of participants and practitioners of a TISS and SANVED programme on creative art therapy to establish relevance of such programmes for the older persons. The article by Urmila Sahu is based on the role of family in mental and emotional wellbeing of the older persons during the pandemic. With the help of 4 case studies, she (unintended) positive and negative impacts of the crisis on lives of urban older persons in Bhubaneswar.

Psychosocial Issues Related to the Aftermath of the Covid-19 Pandemic in the Elderly: Causes and Remedies

Dr. Meenakshi Yathindra Reddy*

Introduction:

On January 30th 2020, COVID-19 was declared as a Public Health Emergency of International Concern (PHEIC) and on March 11th 2020, pandemic status was declared by the WHO. What began as a small viral outbreak of a highly infectious disease spun into an unanticipated pandemic. A period of lockdowns and social distancing halted all non-essential services across the country (WHO, 2020). Older people being one of the more vulnerable groups of the population, were at a higher risk of illness and death from the disease. While health concerns were looked into, the psychosocial impact of the pandemic remained highly underestimated. The combination of social isolation, loneliness, change in routine due to the lockdown was superimposed on the overload of information and mis-information doled out by mass media. This proved deleterious for those with pre-existing cardiovascular, respiratory, neuro-cognitive, auto-immune diseases and other comorbidities (Tandon, 2020).

During the early months of the pandemic, there was a rise in reports of elderly suicides due to the social consequences and fear of the pandemic.

To ease the negative impact on mental health and psychological well-being caused by the pandemic and lockdown, the Government of India along with NGOs and civil society implemented multiple measures. It included formation of dedicated helplines and expansion of tele-psychiatry services (HelpAge International, 2020). But the targeted service of these to older people was limited. Moreover, a dedicated task-force for geriatric mental health during the pandemic was lacking (Rangaswamy et.al, 2022).

During the unlock phase of the pandemic, certain reach of the elderly who were previously healthy were at the risk of slipping into depression due to the major changes in their lifestyle. Apart from the issues related to financial insecurity and psychological ramifications, a sharp rise was also noted in the violence and abuse against the elderly. Digital literacy was another factor that created a huge divide for the geriatric population because only 7% of elderly in India had smart phones and Internet services (HelpAge International, 2020). Against this background of issues critical to elderly, a study was undertaken to understand the problem and identify remedial measures.

Apart from the issues related to financial insecurity and psychological ramifications, a sharp rise was also noted in the violence and abuse against the elderly.

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In order to fulfill the objectives, a search was conducted of available published material dealing with psychosocial impact of the pandemic especially the elderly.

Objectives

Across the globe, countries were struggling to deal with issues of 'reopening' the economy and manage post pandemic social changes. But, before they could realign their social, economic and health systems, the pandemic threatened to reappear. There was concern about new variants of the virus and real worry as to how nations was prepared to defeat them. In such a scenario, it is worthwhile examining the psycho social impact of the pandemic on elderly. Remedial measures that emerge from the previous experience may help deal with the reoccurrence of the pandemic more effectively. This study hopes to add to existing knowledge in this area.

Based on analyses of secondary data this article aims to:

1. Understand the impact of the pandemic on Elderly in India,
2. Specially focus on Psycho social situation of the elderly due to the pandemic,
3. Outline remedial measures to counteract the vulnerabilities of the elderly.

Methodology

This is a descriptive study based on analysis of secondary data. In order to fulfill the objectives, a search was conducted of available published material dealing with psychosocial impact of the pandemic especially the elderly.

Search Strategy

The PRISMA 2022 guidelines were followed for the search protocol. A thorough and comprehensive literature search of the following databases were

used: PubMed and Google Scholar, with the last search done on 17.12.2022. The keywords used were "COVID-19", "covid", "coronavirus", "elderly", "geriatric", "old age", "psychosocial", "psychological", "social", "depression", "loneliness", "isolation", "India" in different combinations with cross-referencing. Initially a title and abstract screening was done for relevance to study after which full text review carried out.

Identification and Selection of Studies

The initial screening was conducted on article abstracts. An article was included if the abstract indicated as a peer-reviewed original research article, case reports, journal chapters, randomized control trials, meta-analysis, systematic reviews, written in English, and used online survey and/or cross-sectional and/or longitudinal research study on the impact of COVID-19/SARS-CoV-2 pandemic on mental health or psychosocial wellbeing of the elderly population in India. Letters to Editors, Commentaries were excluded. The following Inclusion criteria was used: 1) Population over 60 years of age in India, 2) prevalence/surveys of psychological or psychosocial problems among the elderly in the various states of India, 3) publications after 2020. Exclusion criteria were: 1) Population <60 years of age, 2) studies conducted exclusively outside India.

Results

Based on the search results, the findings were grouped into two parts: articles dealing with psychosocial and mental health issues in the elderly and those describing remedial measures. The sources selected are cited in the

reference section. Findings are discussed under two broad headings: 1. Psychosocial Issues- While many psychosocial issues were raised in literature, the present discussion focuses on the following a) Anxiety, b) boredom, c) changes in daily activities, d) depression, e) social isolation, f) increased chances of abuse and g) reduced quality of life due to the pandemic. 2. Remedial measures. This section deals with remedial measures under following subheadings: a) Elder-centric interventions, b) the role of NGOs, c) financial support, d) Geriatric health care, e) digital literacy, f) strengthening families, g) coordination among stakeholders, and h) long term planning.

Discussion

Psychosocial Issues

The pandemic has had a psychological and social impact on the geriatric population who were the most vulnerable, giving rise to major mental health problems, some of the more pressing problems will be discussed under the respective headings. Mental health problems have always taken a backseat. Often they are not immediately addressed and people are not even counselled about the signs. Many live in ignorance until these issues cause physical symptoms. Mental health disorders have become one of the major causes of disability worldwide in recent years with rising incidence of social anxiety, depression, abuse and isolation. These have only been accelerated with the onset of Covid lockdowns and other environmental, social and financial restrictions in the last two years.

Anxiety was an important driving factor that influenced behaviour such as panic buying. There were unnecessary surges in admissions in hospitals as minor ailments were misinterpreted as signs Covid-19. Patients often felt stressed and it increased precautionary behaviour such as adherence to social distancing, quarantine, and border controls (Rangaswamy et.al, 2022). Anxiety can lead to significant impairments in role functioning, diminished quality of life, and high healthcare costs. Fear of infection, fear for safety of family members and hospital admissions increased stress in elderly. Elderly who have experienced stress in various forms are at risk for PTSD. They may show signs of emotional numbing, diminishing interest in everyday activities and detachment from others (Balan et.al, 2020).

Boredom often led to an increase in 'rule breaking behaviour'. Distress increased due to loneliness, monotony and preoccupation with the pandemic. This was more profound in the elderly who were bored before the pandemic even with a regular daily schedule. It was noticed that people's food choices were not motivated by health or novelty seeking or even to regulate their mood, but, was driven by convenience and the need to fill or kill time (Danckert, 2022).

Daily activities changed as the elderly adjusted to life in a virtual environment. Elderly with Parkinson's disease had more problems due to reduced access to advanced health care (deep brain stimulation) and also the cancellation of follow ups in the initial phase of Covid. This to the toll on their non-motor symptoms like depression, anxiety and apathy. Decreased physical activities,

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the world.

inability to access Parkinson's medicine complicated the problems. Moreover, the emotional stress, media coverage and uncertainty of the future worsened the outcome. Covid 19 mortality was also more in hospitalized Parkinson patients (Fereshtehnejad et. al, 2022). Elderly who experience changes in sleep patterns, bowel habits, social isolation, fear, increased television have a higher risk for developing mental health problems (Malhotra, 2022 & HelpAge India, 2020).

Depression rates spiked in the elderly. Some of the risk factors for suicide were: presence of physical disabilities, loss of social life, autonomy and independence; chronic disease and inability to carry out daily activities. Aging comes with a myriad psychological, social, and environmental vulnerabilities which pandemics may aggravate (Krishnamoorthy, 2020). A case report found that chloroquine and hydroxychloroquine which was used as first line medication to treat Covid 19 was found to increase suicidal risk and depression with melancholic features even though there was no past history of similar complaints. But, the complaints ceased after stopping the drug. Hydroxychloroquine is cardiotoxic and worsening the underlying comorbidities can also be one of the indications for suicides (Costanza, 2021). There is a positive correlation between depression and alcohol addiction. A study done in PGIMER found the incidence of COVID-19 infection in patients with schizophrenia to be 5.6%, which appeared to be higher than that seen in the general population. Also patients on Clozapine medication and psychosis symptoms had higher incidence of Covid-19 (Rangaswamy et.al, 2022).

Social isolation was a major cause of stress. The abrupt loss of social contacts took a toll on the elderly. Strict quarantine caused emotional turmoil as people could not meet their family members. This was associated with a deterioration in the cardiovascular health, immunity, and sleep quality apart from others (Pant et.al, 2020). In a study conducted in West Bengal, it was found that many elderly who were infected were likely to have been socially isolated for longer than intended. This was perhaps due to the stigma that was attached to the virus (Mondal et.al, 2022). A telephonic-survey conducted in India in late April 2020 revealed that the majority of the participants missed the "healing touch" of their doctors. Discrimination and stigmatization not only from society, but, within their own families upon being infected had a significant negative impact on mental health of the elderly (Aryan, 2022).

Abuse

Loneliness and social isolation act as catalysts for elder abuse. In June 2020, an online survey of 5099 elderly adults showed that more than half (56.1%) reported facing abuse. Many also believed that poor interpersonal relationships at home were the main cause for this rise in elder abuse.

A study conducted in the second wave of the pandemic showed that, the various forms of abuse in the elderly included neglect, economic based abuse, irresponsibility based abuse, verbal and physical abuse apart from others (Patel, 2021). According to a report by HelpAge International, COVID-19 has increased the risk of abuse and neglect of older people around the world. "Bearing the Brunt", the report released to mark UN World Elder

Abuse Awareness Day, revered that despite older people being, one of the groups, most at risk of severe illness and death from COVID-19, they remain chronically invisible and woefully neglected in response and recovery efforts. In India, HelpAge India's Elder Helpline received almost 20,000 calls in total in the second wave, a 36% increase from the first wave (HelpAge International, 2021).

Poor quality of life is another outcome of the pandemic, mostly due to the failed social security system. COVID-19 exposed the inadequacy and failures of systems at local, national and international level to meet the needs and rights of older people and support their resilience. The pandemic worsened poverty, hunger, and health issues that resulted in psychological challenges. The mental health of the financially struggling people, especially those without the health insurance coverage worsened. Poverty adds to the stress of people and is linked with psychological distress, anxiety, poor wellbeing, alcohol consumption, and suicidal thoughts. The experience of the COVID-19 pandemic showed gaps in terms of social security in old age that led to many older persons being dependent on charity or welfare schemes. Older persons could not survive the lockdown without support and many had to be given cooked food in urban areas. The need for free food continued and became acute as time lapsed. The government continued to distribute free rations and so did the voluntary organizations such as HelpAge (HelpAge India, 2022).

At the beginning of the pandemic the lifestyle restrictions and lockdowns created havoc emotionally, initially

starting with denial then anger, and as people continued to get daily negative information and experience deaths of loved ones, no cure in sight or vaccines to protect them and misinformation overflowing in social medias, it gave rise to anxiety, depression, panic attacks, adjustment disorders and other mental health issues, the number of cases with clinical diagnosis are far less than the actual numbers, even seeking help for mental health was met with resistance by the people some of the reasons being the hospitals prioritizing Covid patients, lack of digital literacy and fear of being infected or exposed to Covid patients. In 2023, when things started normalizing with people receiving vaccinations and the government slowly removing social restrictions people had a hard time adjusting to their previous daily routines, the mental health issues stagnated and are caused anxiety and other symptoms. People need to be counseled regarding mental health issues as unlike physical illness, which could be seen or produce symptoms, untreated mental health issues caused emotional scars that affect our daily life unless properly addressed.

In summary, it is seen that social isolation and anxiety about the pandemic coupled with changes in routine lifestyle of elderly caused distress and resulted in decrease in quality of life and an increase in mental health problems.

Remedial Measures

The pandemic while exposing chinks in the social security system for elderly, also showed the valiant struggles of many stakeholders to fight the problem along with the Government. A HelpAge document salutes the human spirit, grit,

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Many voluntary organizations like HelpAge started relief operations in the early stages of the pandemic itself.

The Corporate sector diverted its CSR funding to health care and the Government provided the necessary administrative support.

and determination facilitated by structural factors like networks, helplines and mobile health units that assisted the elderly during the critical period. Many voluntary organizations like HelpAge started relief operations in the early stages of the pandemic itself. The Corporate sector diverted its CSR funding to health care and the Government provided the necessary administrative support. International bodies like the UN,WHO came up with documentation and periodic advisories to control the impact of the pandemic. It pointed to the need to revamp several systems to prevent further degradation of the quality of life of elderly (HelpAge India,2022).

Elder-centric interventions are essential to meet the pandemic challenge. Government had announced many initiatives such as setting up of helplines, public campaigns to raise awareness, and including ASHA (Accredited Social Health Activists) workers in screening and monitoring symptoms of the disease. However, apart from the mass vaccination drive, none of these activities were directed solely towards the elderly. Research carried out by HelpAge India revealed that no special measures were adopted to address their social security needs, employment opportunities, expansion of health care, nutrition, care, recreation and social and digital inclusion. The concerns of older persons were addressed in a limited way by the voluntary organisations supported by the community, corporate and institutional donors. However, the impact of the pandemic is much deeper and could not be dealt with just by vaccinations and free rations. This

report acts as a warning bell and should be taken seriously (HelpAge India ,2022 & NITIAayog,2020).

In mid-2020 a campaign called 'Surakshit Dada-Dadi and Nana-NaniAbhiyan' directed at the senior citizens during the COVID-19 Pandemic was launched by the NITI Aayog and Piramal Foundation. Apart from the primary focus in managing prevention, early detection of symptoms related to COVID-19, this campaign was also an outreach program that contacted the elderly about their well-being and addressed any grievances. (Singh et., al 2022). Recently the TataTrusts have launched "Goodfellows" scheme to alleviate loneliness among elderly. Community involvement using self-help groups and NGOs could boost the morale of people. The lay community workers/social workers trained to use simple psychological assessment and intervention may be positioned as frontline healthcare workers to screen for mental illness. Group counseling techniques along with family are beneficial with those having social risk factors. Brief relaxation exercises and supportive therapy can be done for those having severe psychological distress. Telemedicine can be used for consultations requiring more detailed psychiatric evaluation and prescription of medication especially for those with preexisting mental illnesses. Home visit by a nurse/social worker augmented with tele-consultation with a psychiatrist through video conference may be adapted among the elderly with severe mental illness along with physical disability (Balan et.al,2020).

The role of NGOs and Voluntary Organizations cannot be underrated in

this mammoth task of ensuring well-being of elderly. Organizations such as HelpAge were able to quickly intervene as they had a good community base and mobile health care units. Government needs to strengthen such organizations to work at grass root level. The role of these NGOs and voluntary health organizations goes beyond providing health care to assist with their finances and provide much needed emotional support. NGOs can help create awareness about rights and privileges of elderly in the community. The awareness regarding Older people's right to health must be emphatically built upon at a community level. Service care providers should be capable of detecting violence, abuse and neglect against the elderly and must be adequately trained in responding to the same without compromising on the safety of the people. Creating awareness in the community and involving the local neighbourhood in prevention of abuse is a good practice. (NITI Aayog, 2020 & Roy et., al, 2021)

HelpAge India is a good illustration of how seniors in distress could be helped. During the pandemic, HelpAge India provided Survival kits containing basic ration and essentials to poor elderly, and basic screening tools to check their health periodically. The Corona Protection Hygiene kit helped maintain basic hygiene to ward off the infection. HelpAge also supported self-help groups and senior citizen associations in vaccination drive. Their online digital literacy training workshops, mobile medicare unit, and National help-line were major sources of support to older people in isolation. Since residents of old age homes are vulnerable, extra medical aid and periodic check-up were provided for

them.

Financial support is the most essential requirement as a large proportion of elderly are economically dependent on families. In the 'unlock' period many families were still struggling to find suitable employment or restart the business. The HelpAge report (ibid) revealed that poverty outcomes of disasters include substantial reductions in income and consumption as well as both short and long-term negative impacts in human development, welfare and equality. Short term impact of the pandemic is in terms of direct economic loss. More silent and slow impact in terms of weakening health, worsening chronic poverty and reducing productivity. The Negative impact of loss of job or economic activity is disproportionately larger in the poor (HelpAge India, 2022 & NITI Aayog, 2020).

Some of the top schemes provided by the government of India that benefited the vulnerable are AVYAY-Atal VayoAbhyudaya Yojana. This plan aims to provide the 4 basic needs of elderly which are financial security, food, healthcare and dignity of life/well-being/safety. Under IPSrC (Scheme of Integrated Program for senior citizens) the government focuses on providing homes to improve the quality of life for destitute elderly and even women. They even set up National helplines for elderly citizens. Under SACRED scheme (Senior Able Citizens for Re-Employment in Dignity) provides employment opportunities to retired elderly. There are also pension schemes that provide a fixed stable income for elderly- IGNOAPS (Indira Gandhi old age pension scheme), IGNDPS for disabled elderly and Atal Pension Yojana.

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Elderly should be encouraged to maintain daily routine and engage in physical exercise, Yoga, meditation and home-based activities to prevent depressive symptoms.

The Pradhan Mantri GaribKalyanYojana is an insurance relief package providing financial aid to the poor to cover expenses incurred due to COVID and also provided food grains especially pulses (rich in protein), 1kg per family. The National Programme for health care of the elderly and the ministry of social justice and empowerment have been actively striving to better the living standards of the elderly in India.(Vaishnav et.,al,2022)

Financial support or assistance through social security schemes can alleviate the financial and psychological distress due to the COVID-19. Better community health care coverage, and a publicly funded health care system can reduce the financial burden due to the pandemic. Policy interventions and proper financial planning can avert the financial crisis as well as psychological stress due to economic problems. Strong policies and social security schemes need to be human-centric rather than focused on economic recovery because the pandemic is more of a 'human' problem and not just a health or economic challenge (Roy et., al,2021).

Geriatric health care needs to be strengthened. Older people are likely to have multiple diagnosed disorders. Financial constraints and health care shortage during the pandemic affected patients with problems such as urinary incontinence and respiratory disorders. Shortages of ventilators and other basic amenities increased risk of death. Hospitals struggled with limited resources and increased patient demand. This has to be anticipated and addressed before the next wave of pandemic hits the society. Many clinical trials that were funded by Corporate

social responsibility (CSR) were stopped or postponed as funds were diverted for Covid care. This might have impacted development of new treatment modalities. Geriatric services in India are not as well developed as in many of the Western countries. Hospitals need to store up covid related essentials like masks, oximeters, disinfectants, thermal guns along with medicines for the usual non-communicable diseases that elderly are prone to. The MOHFW- GOI has issued a toll free helpline number for 'Behavioural Health', The Psycho-Social toll-free helpline-08046110007 can be used by anyone needing mental health assistance during the COVID-19 pandemic. AarogyaSetu mobile application which is used to connect essential health services with the people.

The treatment gap for mental health disorders in India is already very high (70%–92%) and the added burden of mental disorders related to COVID-19 among rural elderly can present a very daunting challenge. It is important integrate mental health care in general/primary care services. The District Mental Health Program launched in India is a good example for this, but the coverage needs to be expanded substantially (Mona,2021). Inclusion of 17 packages for mental illness in Ayushman Bharath, a flagship scheme of Government of India, is a step toward universal health. However, presently the facilities are applicable only to public sector hospitals. Elderly should be encouraged to maintain daily routine and engage in physical exercise, Yoga, meditation and home-based activities to prevent depressive symptoms.

Digital literacy has already become a necessity for the elderly. It is clear that the pandemic will not go away in a hurry and more and more virtual care facilities will emerge in the future. Elderly in India belong to a relatively digitally marginalised section of the society. During the first and second wave of the pandemic, it was difficult for many elderly to gain access to the various digital tools and utilize them effectively. A study conducted in 2021, that comprised of elderly subjects above the age of 60 in various parts of eastern regions of India showed that many refrain from the usage of Information and Communication Technology due to previous negative experiences, complexity of instructions etc. (Vihang et.al,2020).

Strengthening the families is a practical and useful intervention. In spite of modernisation and urbanisation, families still provide most of the care for elderly. Families were vulnerable during the pandemic and elders would get neglected in the struggle for survival. Family oriented support to avert crisis will go a long way in improving the general well-being of the family. Educating the families about nature and consequences of elder abuse is vital as many families treat older people as a burden. Unemployment and loss of livelihood lead to many behavioral problems in the young which may directly or indirectly affect the old in the family. The state needs to work out an economic support plan well in advance keeping in mind the possibility of another wave of the pandemic (MoHFW,GoI,2020).

Coordination among stakeholders has proved to be a proactive and positive approach. The community of volunteers

played a significant role during the pandemic. Identifying the needs of elderly, delivering food and medicines to home bound elderly were made possible by Voluntary organizations. Corporate Social Responsibility (CSR) funds can save the cash strapped health sector to provide better care. Organizations working for seniors, resident clubs and local clubs could play a role in awareness building and morale boosting tasks. Social connectedness of elderly can be maintained by volunteers who may phone-in elderly living alone or pitch in to help overburdened family members. A coordinated action plan that involves older people themselves, community, CSR support, Government administration and voluntary organizations is an ideal plan to face disasters or crises of any sort. The focus has to be on age-friendly environments that provide integrated care for older people. This requires capacity building and connecting various stakeholders, including older people in all aspects of planning and executing programs (Sundarakumar et.al,2023).

Long term planning for a long term impact, a separate taskforce for the elderly could be strengthened for the senior citizens at a grass-root level. Should a pandemic arise in the future, these systems should become part of the pandemic response plans with sufficient funds. Health workers should be sensitized to early signs of depression among elderly and evaluate suicide risk. Early detection of physical illness, effective social interaction, mitigation of social isolation, loneliness and psychological distress go a long way in overcoming depression and other psychological problems. Reinforcing preventive behavior and improving

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National and International organizations such as the W.H.O have cooperated to share information and also provide guidelines for care and prevention.

access to health care are vital to prevent further breakdown. Mental health issues can be addressed with the help of mobile health units that have far greater reach than clinics. It would be worthwhile to evaluate IEC materials that were used during Covid-19. The insight might help improve these services (Bakshi et.al, 2021). The discovery of more transmissible variants like Delta and Omicron necessitates protecting our exposed older population. Prioritizing senior citizens in policy and practice can help nations prevent avoidable deaths.

Conclusion

The impact of Covid-19 has been global and it has drastically changed all aspects of human life. The Analysis of secondary data available in this area showed that elderly form a vulnerable group due to several health, economic and social factors. The restrictions imposed due to the pandemic resulted in loneliness, depression and exacerbation of existing physical illness. The World is also facing a threat of reappearance of the pandemic. The Government of India has come up with various schemes to provide pensions, set up free geriatric OPDs/ medical camps, National helplines, ArogyaSetu mobile app and even set up homes to improve the quality of their life. CSR funds provide the much needed help for elderly and take care of their basic necessities and emotional wellbeing, the government of India should support more such projects to

build a silver economy. NGOs and private institutions are increasingly providing more door to door guidance and help. This scenario requires concerted efforts of all stakeholders – elderly, community, corporates, voluntary organizations and the government to overcome the threat. Social security gaps that have become apparent during the pandemic need to be taken care of. Families that are the major care providers need to be strengthened. Geriatric health care has to be given priority. Service providers need to create awareness among elderly and make them digitally literate to cope with future trends.

On an optimistic note, it is worth recording the relentless efforts of several stakeholders to support people survive the pandemic. While the Government came up with several schemes, NGOs such as HelpAge provided on the ground aid in terms of medical help, survival kits and helplines. Several corporates have funded Covid-19 relief activities of the State. National and International organizations such as the W.H.O have cooperated to share information and also provide guidelines for care and prevention. Schemes to reduce loneliness and isolation through digital literacy and use of technology have provided much relief mostly in urban areas. In a way, the pandemic has forced different stakeholders to give more attention to mental health issues in elderly.

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Relevance of the Therapeutic Use of the Creative (Expressive) Arts among the Elderly During the Covid19 Pandemic

Dr. Sabiha Vasi* | Dr. Sohini Chakraborty**

Introduction

In contemporary times, the idea that 'art-based interventions' have the power to generate change for overall wellbeing and experiencing an optimal quality of life is gaining momentum among various people-oriented professions such as, medicine and mental health practice, social work and education. Through the centuries, the healing nature of art-oriented work has been primarily reported in anecdotes that describe a way of restoring wholeness to a person struggling with either mind or body illness. "Thus, over the time, art has demonstrated the potential to change lives in profound ways. When words are not enough, we turn to images and symbols to tell our stories. And in telling our stories through art, we can find a path to health and wellness, emotional reparation, recovery, and ultimately, transformation"-International Art Therapy Organization-IATO, 2010 (as cited in Harpaz, 2014:2).

Creative Art Therapies, as the name suggests, refers to a cluster of techniques that are creative and expressive in nature. The aim of these therapies is to find a form of expression beyond words or traditional

psychotherapy or talk therapy. Therefore, the scope of creative therapy is as limitless as the imagination in finding appropriate modes of expression. Further, the expressive arts are non-directive methods through which healing can occur by drawing on feelings and the unconscious to produce an tangible product: a sculpture, a story, a painting, or a dance. In fact, participating in art-based work has the scope to enable individuals to tap into unexplored areas of their lives and express concerns and conflicts therein, without having to 'talk' about them, in a non-threatening and an 'artistic' manner (White and Davis, 2011). The importance of these therapies is well recognized in dealing with the mental health challenges. "Non-pharmacological therapies are those that do not involve medication. Non-pharmacological therapies are often used with the goal of maintaining or improving cognitive function, the ability to perform activities of daily living or overall quality of life. They also may be used with the goal of reducing behavioural symptoms such as depression, apathy, wandering, sleep disturbances, agitation and aggression" (Alzheimer's Association, 2018:13). The expressive or creative

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The world-wide COVID 19 crisis, presented a big risk to the mental health and emotional wellbeing of humanity by compounding pre-existing stress or with new and unprecedented modalities of living.

arts fall into this category of non-directive interventions and as discussed earlier, have been found to be effective in promoting a better quality of life for people as they age. The expressive art modalities are varied and the primary forms in current mental health practice encompass visual art, music, dance/movement, drama, expressive writing/journaling, photography, multimedia installations and play.

International bodies and instruments also recognize that all the arts, at the core, are expressions of individual creativity. In this sense, creativity leads to personal happiness and fulfilment. "When based on fundamental human rights and principles of freedom of expression, creativity can also enlarge people's capacities to lead the lives they have reason to value" (UNESCO Florence Declaration, 2014). Human development, as stated by the Human Development Report (2015), "is a process of enlarging people's choices as they acquire more capabilities and enjoy more opportunities to use these capabilities". This idea of development is very clear in the Sustainable Development Goals for 2030 as elicited by the United Nations (2015), which recognizes good health & wellbeing (SDG Goal 3) as a fundamental component of development. In the context of the recent global COVID-19 pandemic, this goal becomes even more challenging to achieve.

The world-wide COVID 19 crisis, presented a big risk to the mental health and emotional wellbeing of humanity by compounding pre-existing stress or with new and unprecedented modalities of living. Also, an increase in domestic violence and abuse was

observed during the crisis. Isolation, loneliness, fear and uncertainty got in the way of accessing opportunities for wellbeing. Life struggle was heightened particularly for groups of people who were already vulnerable in society, such as older persons. Older persons were one such vulnerable group.

The following section explains the ageing perspective in the Indian context and the state of the wellbeing of the elderly in India, especially in the context of the Covid-19 pandemic.

Health and Wellbeing of Older Persons Pre and Post Pandemic

Health is now defined broadly and positively. The best examples are the definitions adopted by WHO and Public Health agency of Canada. The World Health Organization defines health as, "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." This definition encompasses economic, social, psychological and physiological aspects. Interestingly, the Public Health Agency of Canada (2012) describes Health as "a capacity or resource that allows one to be able to pursue goals, learn new things, and grow" (Fraser, 2015). In this context, let us look at some of the reports that talk about health status of the vulnerable groups like elderly in India. These reports mention mental wellbeing along with the physical parameters of health. India Ageing Report (UNFPA, 2017) indicate that poor health and morbidity diminish the quality of life and well-being of the elderly while increasing psychological distress and perception of vulnerability. Also, the UNFPA's BKPAI (2011) survey and the pilot phase of the Longitudinal Ageing Survey in India (LASI, 2020)

highlight many health risks faced by older Indian s including those related to mental health and chronic diseases such as diabetes, hypertension and dementia (<http://www.isec.ac.in/prc-Aging in India-Data-Release.html>).

Further, Mental Health as, "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" and has reported that, mental health disorders account for 13 percent of the global burden of diseases and is particularly common among older adults (WHO, 2011). According to the Census of India (2011) around 4 percent of the elderly men and women suffer from disabilities with respect to mental health.

The India Ageing Report (2017) presented data obtained from the UNFPA's BKPAL (2011) survey which collected information on general wellbeing of older persons through a 12-item General Health Questionnaire and a 9-item Subjective Wellbeing Inventory (SUBI), designed to measure feelings of well-being or ill-being as experienced by an individual or a group of individuals in various day- to-day life concerns. The findings indicated that half of the older persons in the survey had some form of psychological distress. Particularly, the oldest old, women, economically weak and less educated were more susceptible to mental health issues.

In the context of the psychosocial wellbeing of older persons during the pandemic, a United Nation Report (2020) indicated that the COVID-19 pandemic led to indescribable fear and

suffering for older people across the world. Across society, COVID-19 presented a range of particular risks for older persons. Although, all age groups were at risk of contracting COVID-19, older persons were at a significantly higher risk of mortality and severe disease following infection, with those over 80 years old dying at five times the average rate. This report also stated the inadequate and under funded care and support services infrastructure for older persons exposed due to the pandemic. The report recommended investment in care and support services to ensure that services were adapted to older persons' requirements, promoted their well-being and maintained their autonomy and independence.

In addition, Banerjee (2020) found that, "pandemics have significant psychosocial impact. Health anxiety, panic, adjustment disorders, depression, chronic stress, and insomnia are the major offshoots. Misinformation and uncertainty give rise to mass hysteria. So far only one paper by Michelle G Newman & Nur Hani Zainal (2020) looks at elderly mental health during these times. It mentions social isolation of the elderly as a 'serious public health concern' due to their bio-psychosocial vulnerabilities". The older population is already a vulnerable section of society and this vulnerability is increased during any form of crisis COVID 19 pandemic is the most recent example.

Relevance of Creative Art Therapies for Older Persons

It has been found that during emergencies, art- based interventions have a specially high potential to help people navigate the dynamics of the crisis in a meaningful, powerful, and

The report recommended investment in care and support services to ensure that services were adapted to older persons' requirements, promoted their well-being and maintained their autonomy and independence.

The benefits of art-based interventions for improving people's Quality of Life has increasingly been the focus of scientific investigation in contemporary times.

healing way. Moreover, art forms such as dance, music, visual arts, and even some theatre, do not require verbal communication, thus transcending many linguistic and cultural barriers that might otherwise inhibit broadly reaching expressive, collaborative, or empathetic experience.

Further, from the rights-based perspective, experiencing optimal health is a basic condition for all human beings. All older persons (whether able-bodied and functionally independent or afflicted with chronic and disabling health conditions and high dependency), have the right to access opportunities for realization of their full potential and wellbeing at all times. Involvement in creative arts can be both therapeutic and instrumental in enabling older persons in ascertaining their rights for an optimal quality of life and becoming resilient in coping effectively during times of crisis.

The following section of this paper discusses the relevance of art-based interventions for older persons in this context of sustaining their wellbeing during a crisis like the Global Covid 19 pandemic.

Evidence of Enhancing Elders' Wellbeing through the Expressive / Creative Arts

According to the UNFPA Report (2017), in India, the Ministry of Social Justice & Empowerment, which is responsible for welfare of senior citizens, has had the intention of planning to organize and incorporate activities to help the older adult population in India to enhance and sustain an optimal state of health and wellbeing. One of the possibilities of doing this is through elder engagement

in creative art forms. The benefits of art-based interventions for improving people's Quality of Life has increasingly been the focus of scientific investigation in contemporary times. The healing and restorative abilities of dance and music, for instance, have been seen to make a person feel whole.

The empirical research began in the 1950s, with findings confirming the health benefits of engagement in the creative arts, something that was organically experienced and known for centuries before (Alpert 2011). More recently, a World Health Organization (2019) report found evidence of the contribution of the arts to the promotion of good health and the prevention of a range of mental and physical health conditions, as well as the treatment or management of acute and chronic conditions arising across the life-course. This report recommended availability and accessibility of culturally-diverse forms of art to arrange of different groups across the life-course.

Wellbeing is defined as the evaluation of the self. It involves the presence of positive emotions and the absence of negative emotions, satisfaction with life, fulfillment, and positive functioning in the individual's entire condition – psychological, social, and spiritual aspects (Deci & Ryan, 2008; Gaspert, 2009; Mohan, 2004 as cited Roswiyani, Kwakkenbos, Spijker and Witteman, 2017:2-3). Also, in their scoping review, Roswiyani, Kwakkenbos, Spijker and Witteman (2017:2-3) found that, "good physical health is associated with higher levels of life satisfaction and lower levels of depressive symptoms (Mroczek & Spiro, 2005; Strawbridge et al., 2002). Thus, effective interventions for older adults to enable them to adapt

successfully to age-related mental and physical decline are welcome (Bowling, 2008; Buman et al., 2010)". In this context, the creative or expressive arts are meaningful ways for improving the quality of life of older adults through provision of opportunities to remain engaged in activities of everyday life and use leisure time in a constructive manner.

Empirical studies have indicated that the creative arts like visual art and dance movement therapy contribute significantly to enhancing the process of active ageing and countering the negative effects of ill health experienced as age advances. Bagan (2019:2) has also reported many benefits of creativity among older adults, especially in generating both, psychological and physiological healing and that "therapeutic art experiences can supply meaning and purpose to the lives of older adults in supportive, non-threatening ways". Also, there exists scientific evidence pointing to the fact that, "while brain inevitably ages, creative abilities do not necessarily deteriorate. Actually, the ageing brain responds well to any form of art by allowing the brain's two hemispheres to work more in tandem. This ability to use one's creativity through out lifetime and the impact of crystallized intelligence gained from the years of accumulated knowledge and life experiences, help to cultivate the aging, creative brain" (Miller, 1998 as cited in Bagan, 2019:2).

Further, neurological research shows that, "the making art can improve cognitive functions by producing both new neural pathways and thicker, stronger dendrites. Thus, art enhances cognitive reserve, helping the brain

actively compensate for pathology by using more efficient brain networks or alternative brain strategies. Making art or even viewing art causes the brain to continue to reshape, adapt, and restructure, thus expanding the potential to increase brain reserve capacity"(Bagan, 2019:2).

Another research initiative by Lindauer (2003) on the connection between 'Aging, Creativity and Art and the development of a Positive Perspective on Late-Life Development', suggests that, creativity is a lifelong phenomenon. By engaging in complex cognitive functions inherent to creative endeavors like imagination and problem-solving, older adults can enhance their physical, sensory, mental, and interpersonal competencies. Fisher and Specht (1999) found that creative activity was directly co-related to successful ageing by way generating a sense of competence, purpose, and growth along with problem-solving skills that enable effective management of everyday lives.

Fraser, O'Rourke, Wiens, Lai, Howell, and Brett-MacLean (2015) undertook scoping review to describe and map the nature and extent of research conducted on the arts, ageing, and either Quality of Life or health for the older adults. The researchers concluded that though the review included research that spanned 40 years, there was evidence of enhanced quality of life and improved health among older persons who engaged in art-based activities. Also, a narrative review by Cooley (2003), suggested that the arts may promote both individual and community health and could mitigate demands on future health care systems.

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With regard to
older persons
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engagement,
raising energy
levels and gave
opportunities for
interaction.

Experiences of the Therapeutic Use of Creative Arts: TISS and SANVED Programme

Overall, there is a growing need to make mental health services accessible for older adults, more so after the pandemic. At this juncture, it is noteworthy to share efforts that have been made to institutionalize the use of art-based interventions in academia and practice, at the Tata Institute of Social Sciences (a university located in Mumbai, India) in collaboration with Kolkata Sanved (an NGO based in Kolkata, India) since 2013. Currently, formal academic programmes, Diploma and Post-Graduate Diploma in Dance Movement therapy are being offered. These Programmes help to test the relevance and efficacy of such art forms working with older persons, generate appropriately trained manpower to practice art-based interventions as well as contribute to teaching and research in this field, in the Indian context.

In fact, experiences of students of the Diploma in Dance Movement Therapy from their field practicum (under professional guidance and supervision) has shed light on the need and value of such interventions for the wellbeing of older persons. The field practicum placements included day care centres, leisure cum recreational centres (senior citizens' community centres), and residential facilities for both able-bodied older persons and those requiring assistance in daily living. It was observed that apart from overall enhancement of self-awareness, ability to reflect on personal issues, better movement and expressions and positive change in behaviour and interpersonal relationships; the benefits cut across

multiple realms, specifically the following:

Physical improvement in body movement and cardio-vascular functioning-posture, flexibility, joint mobility, vocabulary, expressions, comfort in making and receiving physical contact-touching, open to exploring voice modulations, re-establishment of hand-eye coordination, social orientation, kinesthetic awareness and control.

Emotional/psychological release of anger and tension, express feelings, ability to show vulnerable, alleviation of fear loneliness, increased spontaneity, self-esteem, confidence and sense of achievement, youthfulness, playfulness and vitality, created a carefree state, felt valued)

Cognitive willingness to learn new things, generated curiosity, enabled concentration and creativity, increased analytical ability

Social openness to working with persons who one was not comfortable with, being supportive/empathetic, greater participation in group activities (sense of belongingness).

With regard to older persons with dementia, art-based interventions aided in physical engagement, raising energy levels and gave opportunities for interaction. It is necessary to take cognizance of the fact that if, art-based interventions with older persons have borne outcomes like the one's mentioned above in 'noncrisis' conditions, they could contribute immensely in supporting older persons in coping effectively in stressful conditions of all kinds.

In fact, the COVID-19 pandemic with its social restrictions catalyzed this need and under scored the importance of supporting the older population in their homes. During the pandemic, across almost all contexts, distress had taken the forms of fear, stress and anxiety associated with contracting the virus, isolation in quarantine facilities, loss of loved ones and death (United Nations Policy Brief, 2020).

Lack of information about the novel coronavirus led to a distressing sense of uncertainty: inability to follow one's established routine and lack of clarity about when the crisis will end was overwhelming (WHO-South-East Asia, 2020). The Covid 19 pandemic was not only the medical condition for people; but, it affected the entire society and life of people across lifespan. As stated above during this time, elderly people experienced high level of anxiety, distress and social isolation and traumatic events.

The experiences of alumni of the Kolkata Sanved-TISS Programme (Diploma in Dance MovementTherapy-DDMT) in offering art-based interventions in the Tele CAT mode to older persons was in sightful. The practitioners reported that shifting from a nin-person to a virtual mode was challenging. Firstly, it required orienting and making the elder population comfortable with digital platforms. Thereafter, gradually the participants became receptive to new techniques and the sessions were fulfilling and meaningful.

The sessions used a variety of creative art forms-dance, movement, storytelling, drama, visual art (Laughter music, visualization, use of Hand

gestures-Mudras, movement with light classical instrumental music, Tibetan Bowl sound for relaxation, flute and Ho'oponopono affirmations). In addition, memory enhancing activities and activities to encourage intergenerational solidarity were devised. These enabled family members to participate, from time to time, with their elderly relatives in the sessions being conducted. Subsequently it was noticed that this helped to reduce boredom and stress within the household.

By and large, it was seen that the Tele CAT sessions had a range of benefits for the ageing participants and their families. A positive impact observed on their physical, emotional and cognitive wellbeing. These sessions, during the lockdown, brought in a pleasant and recreational dimension to their life within the confinement of their household. They felt lighter and relaxed after the sessions. They were also able to release their pain and gain mental strength. Further, it was apparent that the elders participating in these sessions had begun taking small steps towards self-dependence (and feeling proud about it). The group also developed a movement routine for their own self-care and wellbeing, keeping in mind their health issues. Through their engagement in creative activities, they started re-connecting with activities that they had engaged in during their younger days and began to value their physical self.

The experiences shared by the Diploma in Gerontology students at TISS in conducting Tele CAT sessions paralleled those reported by the DDMT alumni.

The Covid 19 pandemic was not only the medical condition for people; but, it affected the entire society and life of people across lifespan. As stated above during this time, elderly people experienced high level of anxiety, distress and social isolation and traumatic events.

The need to continue such sessions, was strongly expressed by the participants, which also indicated the positive impact these opportunities had on the general sense of wellbeing of the participants.

The student facilitators said that these were 'an eye opener to the seniors that art-based interventions could be easily explored at any time, sitting in their homes for promoting their well-being, especially in coping with distress, life transitions or traumatic situations (such as the pandemic leading to a lockdown)'. It was also reported that the elder participants expressed that, engagement in the tele CAT sessions helped them to stay alert, feel energetic, contemplate, build self-confidence, stay calm, showcase creativity and stay physically fit (active). As some of the participants were care givers, it was found that, the experience in the art-based sessions encouraged caregivers to explore the possibilities such interventions to enhance their caregiving.

Social connectivity and supportiveness were enabled, in the advent of personal distress and loneliness. It was shared that, 'whilst one participant shared her not so pleasant childhood other participants encouraged her to look forward and look at her past as a learning. She very gracefully overcame her anxiety and moved ahead with positivity'. In fact, the student facilitators informed that engagement in varied art forms, generated curiosity, more engagement with others and a better ability to express emotion-especially grief and loss (pleasant and unpleasant) among the participants. In this connection it was reported that, 'as participants discussed, their excitement levels could be seen to be going up, their moods improved and they started losing inhibition'.

It was further reported that, the sessions helped the older participants

to express their inner feelings by realizing that sometimes their (older participants') attitude towards themselves and others was too rigid and it was not detrimental to listen to other participants' points of view. This enabled empathy and led to greater acceptance in the group. This was further testimony for how the creative arts enabled in fulfilling the need for interaction with others by aiding the older participants in becoming comfortable to communicate with each other.

The healthy connections among participants were evident in the eagerness that was demonstrated for participating in the sessions- this was particularly observed in the participants logging in early and having online chats before start of session- 'it looked like there was a deep longing within for such sessions and interaction'. The need to continue such sessions, was strongly expressed by the participants, which also indicated the positive impact these opportunities had on the general sense of wellbeing of the participants. A similar sentiment was observed in the sessions conducted by the DDMT alumni, where practitioners indicated that, 'the older group members would wait for the sessions just to share their reflections in the group and interested in listening to the point of view of others. They had started to create new movements and appreciated the ones brought in to the circle. The emerging two-way process in the sessions began becoming evident both the group members and facilitators had something to learn from each other and co-create a space for hope'.

Reminiscing through art-based inputs, enhanced self- worth and affirmation.

As, also reported by the DDMT alumni, rekindling of their hobbies and interests of yore enhanced a sense of optimism and brought a realization that art based activities were not age-bound. Their deep immersion in these activities and opportunity to share their experiences with others proved to be therapeutic, to some extent. Their ability to re-connect with their inner child added and by telling stories the elderly participants were able to acknowledge and appreciate life, thereby developing a positive outlook (they referred to their lives as, 'beautiful'). This was particularly evident in the participants' constantly talking about their experiences in the sessions for the next few days. One of the participants said that, "in old age, remembering the past is all that we do, but that sharing the experiences with all, is affirming that we have had a life that has been normal, healthy, with caring parents like the others and that life for all, has been similar, reinforcing our shared heritage of parenting styles, relationships, emotions, games, food and music, for people of a particular generation in the country".

Other Online Services for Mental Wellbeing

During this time, a range of online mental health services had begun and tele-psychotherapy increased. Tele-psychotherapy is a form of therapy that is conducted through a digital device, such as a smartphone, tablet or computer, by means of a video conferencing application (such as Zoom, Skype, Meet) or via the telephone. Simultaneously Creative Art Therapy services got to be termed as, tele-CAT. A Study (Bhattacharya et al, 2022) on "Art at Safe Homes" showed

positive results with COVID 19 patients using music, theatre and poetry. The group art created by the participants depicted hope and care for next generation. Almost every patient expressed their relief from stress by crying, signifying their release from a high alert tension.

During the pandemic, tele-CAT for the ageing population, were offered for making art-based interventions more accessible, and at the same time maintaining the creative nature of the therapeutic process in the online setting. However, it is important to note that there is a huge digital divide because of which only very a small proportion of individuals had the opportunity to experience these advantages (United Nations Policy Brief, 2020 & South-East Asia, 2020). Studies show that visual images provide a non-verbal means of expression in the therapeutic process with older adults. The ability to express oneself through these media is also important in cases of decreased cognitive functioning (Keisari, Piolet al., 2022)

Scope of Integrating Expressive Arts into Health Care Services for Older Adults in India

There is a need to shift focus on making sure that older adults stay well and healthy. It may be said that art-based interventions could enable healthy and successful ageing and add 'quality to life' in an era of increased longevity. Creative Art based intervention is a great method that can be done on the local individual or group level to improve well-being of elderly people regardless of the level of health prior to such sessions. Subsequently, the avenues for

Their ability to re-connect with their inner child added and by telling stories the elderly participants were able to acknowledge and appreciate life, thereby developing a positive outlook (they referred to their lives as, 'beautiful').

Implement a system of continuous evaluation to assess the impact of art-based interventions on the well-being of the elderly population and adapt programs based on ongoing feedback and evolving needs.

opportunities to remain active in the ageing process could be created, opening up channels for an age-integrated society to blossom and sustain.

With the aim of providing a comprehensive framework for action, the following recommendations are proposed to facilitate the integration and advancement of art-based interventions within the realm of elderly care in India.

Recommendations

Promote Integration of Art Based Interventions: Encourage the integration of art-based interventions into both public and private healthcare systems as a standard component of elderly care services.

Holistic Healing: Emphasize the use of non-directive and non-pharmacological art-based interventions both independently and in conjunction with medical treatment, with the goal of fostering long-term holistic healing and transformation among elderly individuals.

Community Programmes: Establish and promote community-based art programs designed for older adults, irrespective of their prior health conditions. These programs should foster social engagement and personal growth among elderly participants. Encourage age-integrated societies by creating environments where older adults actively engage in art-based activities, fostering intergenerational connections and collaboration.

Professional Training for Caregivers: Develop comprehensive training programs tailored for caregivers and

mental health professionals, aimed at enhancing their competence and expertise in utilizing diverse art-based modalities such as Visual Art, Dance Movement Therapy, Storytelling, Dramatics, and Music in their practice.

Scientific Research on art based intervention: Invest in rigorous scientific research endeavours to generate evidence specific to the therapeutic relevance, efficacy, and benefits of art-based interventions in the promotion of successful aging within the Indian context. This includes building a database of empirical evidence. Undertake formal scoping research studies to investigate the impact and significance of art-based interventions on diverse groups of elderly individuals, particularly during crisis situations. These studies should contribute to a nuanced understanding of the benefits of Art based intervention within the Indian context

Policy advocacy: Advocate for policy reforms that support and incentivize the integration of art-based interventions into elderly care. The scientific knowledge generated from research should be leveraged for policy development

Systematic Evaluation: Implement a system of continuous evaluation to assess the impact of art-based interventions on the well-being of the elderly population and adapt programs based on ongoing feedback and evolving needs.

Conclusion

Art-based interventions offer a multifaceted strategy to promote well-being, resilience, and successful ageing. However, their integration into healthcare and the broader community requires concerted efforts, including

professional training, research, and policy advocacy. By embracing these recommendations, India can harness the therapeutic potential of art-based interventions, ultimately contributing to a more fulfilling and healthier aging experience for its elderly citizens.

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Issues Faced by the Elderly During COVID-19: A Sociological Analysis

Urmila Sahoo*

Introduction

The emergence of the COVID-19 pandemic, initially identified in Wuhan, China, marked a profound global health crisis. Its rapid and extensive spread within a matter of weeks led to widespread and enduring ramifications. This pandemic gave rise to a multitude of new challenges while aggravating pre-existing ones. Sectors such as the economy, public health, food security, employment, tourism, and education were significantly and adversely impacted. The global community was caught off guard by the unexpected worldwide outbreak of the coronavirus, prompting the World Health Organization (WHO) to swiftly classify it as a pandemic due to its unprecedented transmission rate. The impact of COVID-19 was felt across the globe, with India, like many other nations, experiencing severe and enduring repercussions, resulting in the loss of lives, livelihoods, and socioeconomic stability.

In addition to inflicting widespread damage on individuals, their livelihoods, job prospects, and residences, the COVID-19 pandemic also significantly eroded the economic foundation of regions. It disrupted established ways of life, education, and economic systems. While the pandemic had multifaceted impacts across various domains, this

article focuses specifically on its effects on the elderly population who were affected by the pandemic in multiple ways.

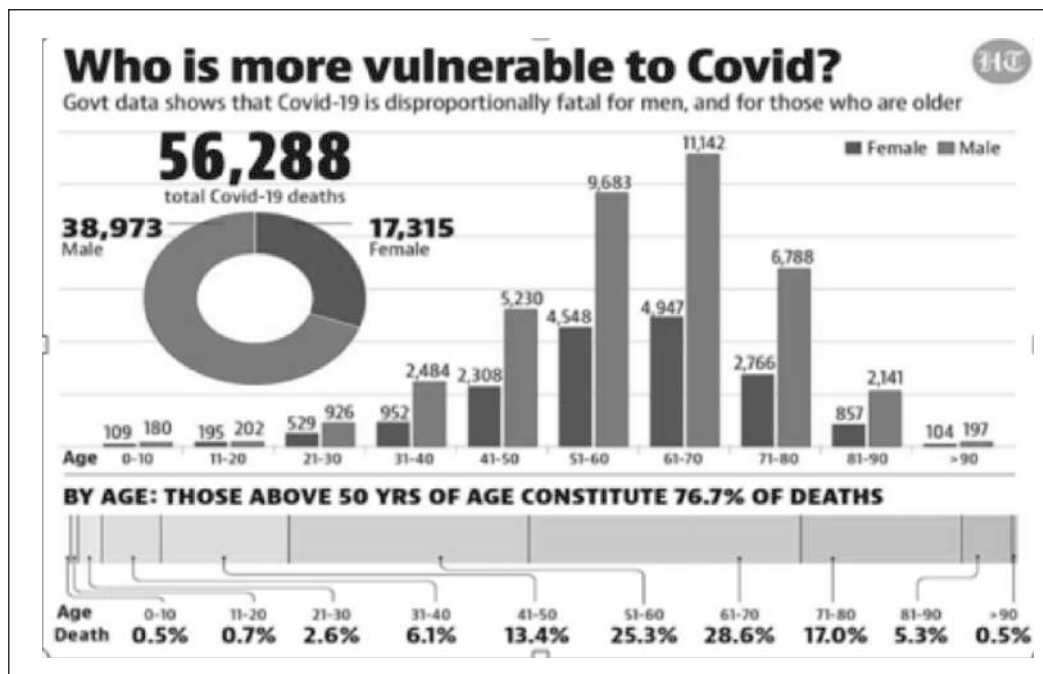
The older persons bore a disproportionate burden of the impact of the pandemic. The proportion of older persons in the country before the pandemic was at 9.2% of the total population (Technical Group on Population Projections, 2020). They were facing numerous health challenges, especially non-communicable diseases; 34.6% of elderly self-reported having cardiovascular diseases; 71.5% had chronic lung diseases; 55.5% had bone/joint diseases; and 23.3% had multi-morbidities (LASI, 2020). The pandemic added to the challenge. This public health crisis had profound mental, social, political, and economic consequences, with older individuals particularly susceptible to its adverse effects. The statistics reveal that a significant proportion of COVID-19-related fatalities were among the elderly population. It is imperative to direct attention towards this demographic segment. The pandemic gave rise to concerns about the mental well-being of older adults, exacerbated by stringent social restrictions, social isolation, and quarantine measures. The most vulnerable segments of society, reliant on daily wages from low-paying,

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unskilled labour in urban areas, include the elderly and those dependent on family support. Many older persons who did not get impacted economically faced serious care and emotional stress challenges due to a lack of family support.

numerous studies and data confirm their heightened susceptibility due to their age, making them more vulnerable to the severe effects of the virus compared to younger generations.



(Source: Sharma, S.(2020, Sept 02). "90% of those killed by Covid in India are older than 40, 69% are men", *The Hindustan Times*)

This diagram illustrates the increased vulnerability of older individuals compared to other age groups. It is observed that COVID-19 is more fatal among older men than older women. Data indicates that individuals in the age group of 61 to 70 have the highest fatality rate, with 11,142 males and 4,947 female elderly affected, accounting for 28.6% of the total. In the age group of 71 to 80 years, there were 6,788 male and 2,766 female elderly deaths. Thus, the challenge of safeguarding older individuals from the pandemic is a significant concern, as

Review of Literature

The COVID-19 pandemic's impact on mental health conditions such as stress, anxiety, depression, denial, insomnia, dread and wrath in India is highlighted by Roy A. Singh et al. (2021). Mental disease affects most at-risk groups, including children, the elderly, frontline workers, etc. Nagarkar (2020) concentrated on older persons at risk of severe sickness owing to COVID-19 who had prior medical disorders such as diabetes, hypertension, and COPD to address the issue. Older people have

During the COVID-19 epidemic, a paradigm change in the existing trends and procedures dealing with the difficulties of ageing in the person, family, community, and all others concerned have been examined.

difficulties as a result of social isolation. Vahia and Shah (2020) stressed that elderly persons encounter problems with daily tasks, access to medical care, and morbidity conditions. It exacerbated powerlessness and worry due to potentially fatal complications.

Most urban mental health practitioners are vulnerable, and the COVID-19 pandemic lowers quality of life because of the lockdown. Mukherjee (2020) discussed the prevalence of loneliness, stress, anxiety, and depression. Vulnerable groups of the population, such as daily wage workers, migrant labourers, religious minorities, women, children, and older adults, have also been subjected to various forms of economic, socio-political, and familial stigma, racism, and violence. All societal gaps in India have mainly increased due to the COVID-19 pandemic.

The COVID-19 pandemic may significantly influence everyone's mental health, with older persons being particularly at risk, according to Mukku and Sivakumar (2020). Older people suffer difficulties due to the rising incidence of non-communicable diseases, unfavourable socioeconomic conditions, and sociocultural changes. The priorities and services are less crucial for elderly persons' mental health problems. COVID-19 (Das and Bhattacharya (2021)) highlighted the social isolation of urban older people. The epidemic upset people's socioeconomic, psychological, and livelihood issues, upsetting the balance of society. One effective tool for limiting the spread of this virus among older people in Indian peri-urban areas was social exclusion. The issues faced by older adults during the COVID-19 era

are examined by Koswsalya and Raj (2021). During the COVID-19 epidemic, a paradigm change in the existing trends and procedures dealing with the difficulties of ageing in the person, family, community, and all others concerned have been examined. S. Das et al. (2021) discuss the pandemic-related anxiety and sadness among older people.

The current study aimed to understand the psychological morbidity that existed among the elderly population during the COVID-19 epidemic. P. Mohapatra et al. (2021) discussed the perspectives of elderly couples living alone in urban settings. Older people are more likely to encounter adverse COVID-19 outcomes and considerable stress. This study demonstrates that urban dwellers, particularly seniors living alone, reported more pandemic-associated healthcare issues than their rural and residing-with-family peers. During COVID-19, Bakshi & Bhattacharyya (2021) highlight ICT usage among Indian Seniors. The effects of social isolation and the function of technology on older people's daily lives during the pandemic are still poorly understood. Elderly-friendly technologies must be developed to build a society where older people may participate fully in technology.

Without focusing on the family aspect, some studies explored the difficulties that older adults faced during the pandemic. Studying particular elements that can affect family members' readiness to care for elderly patients is necessary. For this reason, the investigation concentrated mainly on the benefits of the COVID-19 epidemic in the lives of older adults and their happy experiences with their family members.

Problems of the Elderly during the Pandemic

The COVID-19 pandemic is held responsible for the decline in both the mental and physical well-being of the elderly, contributing to a rise in conditions such as hypertension, anxiety, and depression. The swiftness with which the virus affected the older population raised significant societal concerns regarding their protection. During the initial wave of COVID-19, a heightened risk of mortality was observed among older individuals globally, with particular prominence in India. Furthermore, the experiences and stress levels differed between urban and rural older populations (Weitz, Mukhopadhyay, & Das, 2022).

In rural areas, a sense of homogeneity prevails, often accompanied by family or ancestral homes that offer a strong connection to their native roots, along with robust community support. In contrast, urban areas tend to be characterised by a more individualistic lifestyle, with less reliance on both family and community support. When the context is the COVID-19 pandemic, individuals in both rural and urban settings face a shared sense of isolation driven by fear. In rural regions, family support acts as a buffer, a luxury often absent in the urban, as many of the younger generation, roughly 85%, reside far from their hometowns due to employment opportunities (Weitz, Mukhopadhyay, & Das, 2022).

People residing in rural areas generally encounter fewer challenges when accessing essential goods and services, as many necessities are readily available within the village. Their social interactions continue relatively

undisturbed despite the pandemic's disruptions, resulting in lower levels of mental distress. Conversely, urban dwellers, even those with the means to access services, may struggle, particularly if they live alone or with just a spouse, to obtain necessary assistance (Weitz, Mukhopadhyay, & Das, 2022).

During the initial wave of the pandemic, stringent lockdown measures and restrictions posed a unique challenge in urban areas. The elderly found themselves confined at home, unable to engage with their peers or visit local markets. Data reveals a disturbing trend where some individuals, out of fear, avoided participating in the last rites of their deceased parents, leading to bodies being disposed of in hospitals, often with no family members present. Life during the pandemic became especially harsh for the elderly, as the fatality rate was notably higher among this demographic. Many older individuals yearned for the company of their families but were left with a profound sense of helplessness, resulting in significant psychological distress and emotional hardship.

While government entities, various organisations, and NGOs diligently work to support the elderly, one aspect remains beyond their control – the profound emotions these individuals hold for their families. Loneliness, a pervasive presence in their lives, serves as a potent force that can weaken them. Studies reveal that age-related psychological changes encompass a gradual decline in cognitive processing memory, diminishing enthusiasm, increased caution, and altered sleep patterns.

People residing in rural areas generally encounter fewer challenges when accessing essential goods and services, as many necessities are readily available within the village.

Families act as a protective barrier, defending their members. The support provided by family connections can assist individuals in managing stress, adopting healthier lifestyles, and enhancing self-esteem, ultimately promoting their well-being.

Research has identified that elderly individuals primarily grapple with psychological challenges such as social isolation, loneliness, emotional withdrawal, and a dearth of opportunities to share their feelings. The dynamics of modern family structures have shifted, resulting in elderly people receiving less care, support, and attention from their family members. These transformations have led to a growing sense of estrangement from both family and society at large. With increasing lifespans and the escalating costs of healthcare and treatment in India, addressing the needs of older individuals has become a formidable challenge for society.

Role of Family

A family comprises individuals engaged in various social roles, including spouses, parents, children, siblings, and, significantly, grandparents. A family is defined as a unit of people cohabiting within a single household. Families offer their members a secure environment with provisions like sustenance, clothing, healthcare, and shelter. Furthermore, families impart the importance of adhering to societal norms to their children. Parents act as authoritative figures within the household, guiding their children in understanding boundaries and appropriate behaviour while facilitating their socialisation. For everyone, family holds paramount significance, and this sentiment remains consistent among the elderly, who continually yearn for more love, care, and attention.

Family assumes a crucial role in the lives of the elderly, with the care and support of family members often contributing significantly to their quality of life later.

The family environment is most conducive to meeting the needs of seniors, with the bonds of marriage, blood relations, or adoption uniting household members. However, the elderly frequently yearn for extra affection, care, and attention, fostering strong emotional bonds among all family members.

Families serve as the primary socialisation structure for children and remain a source of support for the elderly in their twilight years. Families act as a protective barrier, defending their members. The support provided by family connections can assist individuals in managing stress, adopting healthier lifestyles, and enhancing self-esteem, ultimately promoting their well-being. Nevertheless, when family dynamics become a source of tension, it becomes challenging to adapt. Changes in family structures, with a shift towards nuclear families over joint families, have impacted elderly individuals who no longer receive informal assistance from their families, thus affecting their overall quality of life.

Partners become increasingly vital for individuals seeking to enjoy their later years. While past generations often adhered to the tradition of following elderly relatives in all matters and holding them in high esteem, changing attitudes influenced by urbanization, globalization, and industrialization have led to behaviours contrary to their parents' wishes. Today's population is often absorbed in their own pursuits, leaving little time for their parents, ultimately leading to an increased risk of psychological instability among the elderly, which may necessitate their relocation to nursing homes.

Despite the forces of urbanization and modernization, Indian society still holds the family unit in high regard. In the context of the COVID-19 pandemic, the family remains a vital support system for some elderly individuals, offering them a new lease on life, while others continue to long for their family's support.

Objectives

There are two objectives for this study:

- Study the impact of COVID-19 on the elderly population,
- Explore the relationship between family members with their elderly parents during the pandemic.

Methodology

The current study employs descriptive and exploratory research methods for data analysis. It is grounded in empirical research involving data collection from 20 households in the Bhubaneswar region, specifically those with elderly family members aged 60 years and older, encompassing both male and female individuals according to their convenience. Data gathering was accomplished through researcher-conducted interviews, investigated the pandemic's impact on family dynamics and its role in bridging the generational gap between the elderly and their families.

This study adopted a primary approach involving fieldwork and open discussions with respondents. Utilizing a multi-stage stratified convenient sampling technique, the researcher initially categorizes Bhubaneswar into three zones, subdividing each zone into different wards. Selection of two wards

from each zone is based on a higher elderly population count, and respondents are chosen based on their availability and accessibility. The research primarily focuses on the interview schedule and incorporates a case study approach. It is a qualitative study emphasizing in-depth analysis of the respondents' experiences. An empirical approach is employed to collect data with the help of an interview schedule directly from the field. The researcher records and translates the respondents' pandemic experiences, reflecting their perspectives and documenting their accounts.

Results & Discussions

The study revealed that the pandemic had diverse effects on older individuals, resulting in a spectrum of experiences, including both positive and negative outcomes. A multitude of influencing factors shapes these experiences. The researcher has chosen 20 households due to the constraints of time and availability of the respondents. The researcher mainly focused on the elderly couples living alone. The researcher has selected Bhubaneswar city as convenient sample for urban studies. Five households from four localities (VSS Nagar, Nayapali, Saheednagar, and Patia) were included in the sample. Details of four case studies are highlighted in this article to showcase negative and positive impacts of the pandemic.

The respondents shared their experiences with the family and technology in the pre and post pandemic phase. These case studies serve as illustrative examples starting a

The study revealed that the pandemic had diverse effects on older individuals, resulting in a spectrum of experiences, including both positive and negative outcomes.

If the pandemic had not happened, the son wouldn't have lost his job, and his parents would have suffered from this situation. It shows that family bonding is broken due to this situation and how the older parents suffered a lot due to this.

discussion on the dynamics of family ties and the delicate equilibrium between positive and negative encounters among the elderly. The case studies are discussed below.

Negative Experience Case Studies

In this section, the study examines the negative impacts of the pandemic. The researcher has selected a couple of case studies from the interviews to illustrate the challenges faced by individuals. As the world has seen, the pandemic affected everyone. Still, the elderly people lost everything, such as health, partners, economic loss and most importantly, family disintegration, which breaks their trust and makes them weaker & lonely. There is a double burden on one side; they are older, and on the other side, they are found to have a breakdown of family bonding. COVID-19 posed difficulties for many, and the aim was to shed light on these challenges through two specific cases shared by respondents.

Case Study-I

Theme: - Abandonment During the Pandemic

This case concerns an elderly couple residing in the city: an 80-year-old retired government officer from the health service department and his wife, aged 75. Hailing from middle-class nuclear families, they have a son who received a quality education and is well-established. Their profound affection for their son was evident, considering him a cherished gift.

Their son and daughter-in-law initially lived apart after their marriage, but family gatherings were still a norm. The situation took a turn during the pandemic. The son and daughter-in-law

utilized their parents' savings to construct a new house, ensuring they would continue living together. However, after completing the house, they abandoned the elderly couple. The abandonment happened during the pandemic because, before that, the son was settled in a job, which was lost due to the pandemic. When they have no options for another job, they come home and find that their parents have some savings, so they play their emotional card and intelligently take the money from them. If the pandemic had not happened, the son wouldn't have lost his job, and his parents would have suffered from this situation. It shows that family bonding is broken due to this situation and how the older parents suffered a lot due to this.

The son, daughter-in-law, and their grandson occupied the new home, leaving the elderly parents in their old residence. The researcher observed the elderly man shouldering the responsibility of caring for his wife and preparing their meals. Their sole source of income, a pension worth Rs. 18,000 per month, barely sustains them. They hired a domestic help for cleaning and dishwashing, paying her Rs. 2,000, with additional charges for extra work. The elderly gentleman, determined to save money for his wife's medical expenses, took on the role of the family cook. Remarkably, despite their challenging circumstances, the elderly couple refrained from commenting negatively about their son. Instead, they expressed contentment in caring for one another.

The elderly man had no material demands from his son. His sole desire was to live with his son, marking the culmination of his lifelong wish. In a bitter revelation, he expressed that

despite giving birth to a son who had enjoyed a privileged life, including education abroad, their son's actions left them feeling deceived. They even went as far as to say that they might have been happier had they had a daughter, believing that daughters often possess a greater understanding of their parent's emotions compared to sons.

This case exemplifies the significant emotional and practical challenges elderly parents face during the pandemic, particularly in the context of changing family dynamics and generational relationships.

Case Study-2

Theme: - The Death of the Life Partner Widens the Gap between Families during the Pandemic

The second case study centres on a retired government officer from Bhubaneswar, Odisha, belonging to a higher middle-class joint family. He, with three well-settled and married sons, experienced a lack of care and attention from his children after the death of his wife during the pandemic. Despite his extraordinary skills and expertise, he is still employed by the government at 71.

Before the pandemic, he felt emotionally connected to his family, mainly through his wife's efforts in maintaining family bonds. However, after her passing, his sons and daughter-in-law distanced themselves, but the older man offered their children financial consultation when required. Despite his financial stability, earning between Rs. 50,000 and Rs. 60,000 monthly, he struggled to find contentment. Although he resides on the fourth floor of his building, with his sons occupying the lower three floors, he experiences a

profound sense of loneliness. His TV became a solace after work, as no one had time for conversation. In conclusion, he emphasized the significance of family presence, affection, and love over financial well-being in an elderly person's life.

Discussion

This highlights the enduring impact of loneliness on older adults, both before and after the advent of COVID-19. Moments of contentment were found in the interludes, often during family gatherings. The study comprehensively delves into the pros and cons of COVID-19, the perspectives of the elderly, and the contemporary significance of family in our society. It also sheds light on the challenges faced by elderly individuals in spending time with their grandchildren and children.

It is found that a significant proportion of seniors living alone experience loneliness, with the frequency of family visits and the support received playing a pivotal role in mitigating these feelings of isolation. Older individuals expressed a strong preference for frequent family visits, which they perceived as vital to their overall happiness and well-being. Many seniors, enduring extended periods at home, encounter challenges in accessing essential resources, rendering them susceptible to ageism, abuse, and social exclusion. Despite the considerable efforts of government, healthcare professionals, and media to educate the public, the elderly emphasize the paramount importance of the presence and support of their families during critical junctures in their lives.

Many studies have consistently

Despite the considerable efforts of government, healthcare professionals, and media to educate the public, the elderly emphasize the paramount importance of the presence and support of their families during critical junctures in their lives.

The pandemic brought about a change, enabling them to spend quality time together, especially with their granddaughter, with whom they hadn't shared much time previously.

reported higher mortality rates among hospitalized COVID patients compared to those receiving care at home, with a notable portion of the deceased being individuals living alone. Quarantine measures have had physical repercussions on the elderly population, increasing their susceptibility to malnutrition, frailty, and related conditions. Widespread individual isolation resulting from lockdowns and preventive measures has also contributed to a rise in mental health issues among the general population. Still, the elderly has been disproportionately affected by the combined impact of the virus and lockdown measures. The emergence of the digital divide during this time, influenced by access to new technology and age-based inequalities, played a significant role. While some individuals bridge the digital gap, the majority, particularly elderly women, are disadvantaged.

Positive Impact Studies of COVID-19

Case Study- I

Theme: - Memorable Experience with Family during an Adversity

While numerous studies primarily emphasise the negative impacts of the COVID-19 pandemic on the elderly, it is essential to underscore the positive aspects of their experiences. The pandemic, despite its challenges, has presented some elderly individuals with unique opportunities to strengthen their bonds with family, particularly their children and grandchildren. These individuals cherished these moments and, interestingly, exhibited reduced fear of COVID-19. It is worth noting that

amidst the pandemic's difficulties, some elderly individuals have found moments of joy and connection with their loved ones, offering a brighter perspective on their experiences.

One of the cases exemplifies how this pandemic impacted various people, especially the elderly. During the lockdown, and after, they were able to spend more time with their children and grandchildren through virtual means which was never possible before the pandemic.

For an elderly couple, Mr. and Mrs. M, aged 75 and 69, residing in Bhubaneswar, Odisha, COVID-19 lockdown measures provided an unexpected silver lining. Mr. M, a retired government officer and pension holder, is a parent to one son and three daughters, all of whom are married and well-settled, with the son residing in Bangalore with his wife and daughter.

The pandemic brought about a change, enabling them to spend quality time together, especially with their granddaughter, with whom they hadn't shared much time previously. Living alone in their spacious home, Mr. and Mrs. M experienced loneliness, but their account of the pandemic was notably positive, emphasizing the realization of a cherished dream. Their profound contentment stemmed from being with family, with the potentially fatal or mild nature of the disease taking a backseat. The longing for their granddaughter waned as they relished the joy of playful interactions with her, transcending their ages into childlike energy.

They considered this period the best part of the pandemic, largely untouched by its adverse effects. Immersed in their

family, they paid little heed to the surrounding crisis. Nowadays, when they miss their 5-year-old granddaughter, they resort to video calls through their cell phones, indulging in hours of cheerful conversation. According to their perspective, being with family makes the need for medication unnecessary, with their grandchild serving as their therapeutic companion throughout the lockdown.

Case Study-2

Theme: The Pandemic Reunited the Family, and Social Media Reduced Isolation

This case study is about an elderly couple who retired as professors. Dr. M, aged 77 and her husband Dr. Y, aged 84. They have a son and a daughter, both married and residing outside the state with their families. This study was about family gathering after a long time due to COVID-19 restrictions and use of social media and online shopping platforms which helped them during the pandemic.

They didn't have any complaints about virtual meeting with their children or grandchildren because, pre-COVID-19, physical meetings involved long travel, booking formalities, etc. Everyone was busy at work, and the elderly couple didn't want to interfere with their kids' work schedule. So they returned to their hometown quickly.

Virtual meetings were like a dream come true for them. It helped them connect quickly with their son, daughter-in-law, and granddaughter even the lockdown. The families of son and daughter were also content as they were working from home. The elderly

couple was overjoyed to see their children and grandchildren. The older couple stated that all grandparents share a special emotional connect with their grandchildren that they do not share with their own children.

The other problem that they confronted was fear of getting infected and discomfort due to joint pains and other frailties while going out to purchase daily necessities.

When their house-help became infected, they learned the use of smartphone with the assistance of a neighbour. They gradually learned to use phones for making payments through various payment apps, and also started using the social media apps to maintain connects with their former co-workers and acquaintances. Over the period, they became accustomed to the use of technology and adapted to the new situation.

Conclusion

In conclusion, the COVID-19 pandemic has disrupted the fabric of our societal norms, with the elderly population being one of the most severely affected groups. However, its impact reverberates across all segments of society. It is crucial to recognise that the older generation, often overlooked in terms of their labour and contributions, fulfils multifaceted roles, extending beyond caregivers to include counsellors, mentors, decision-makers, and peace-builders. The elderly should not be perceived as burdens to either society or their families. Their health, social well-being, and emotional security should take precedence, as they represent one of our nation's most valuable resources. Kindness, respect,

The pandemic, despite its challenges, has presented some elderly individuals with unique opportunities to strengthen their bonds with family, particularly their children and grandchildren.

and dignity are the just rewards for their invaluable contributions.

COVID-19 has highlighted the vulnerability of older individuals, emphasizing the central role that family plays in their lives. Older people do not seek affluence or wealth; their true wealth lies in the support and companionship of their families. Studies further underline the pivotal role of

family in the mental well-being of individuals, indicating that those without familial bonds often face the most significant challenges in society regarding their mental health. This underscores the undeniable importance of family in the lives of the elderly, serving as a foundation for their emotional and psychological well-being.

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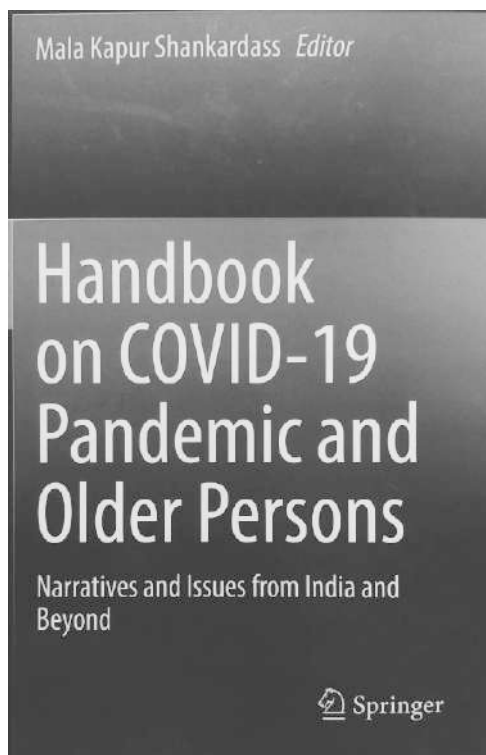
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Summary Note*

Handbook on COVID-19 Pandemic and Older Persons: Narratives and Issues from India and Beyond

Publisher: **Springer Nature, 2023**

Price: INR 18,754 (Hardcopy)



infection and in terms of numbers of deaths which occurred all over the world. This volume consists of 40 chapters authored by established academicians and researchers and endorsed by well-known international gerontologists, Prof Giovanni Lamura from Italy, Prof Marvin Formosa from Malta, and Ms Margaret Gills from Canada. It has an encouraging Foreword by a reputed policy and development analyst Prof Peter Lloyd-Sherlock based in the United Kingdom.

The book brings out, through well documented and vigorously researched articles, the multifaceted dimensions of the ways in which COVID 19 pandemic impacted older people in different countries and the specific protective measures taken by governments (and other stakeholders) or lack of it to safeguard the older persons. As has been documented in scientific literature, during the pandemic years, the increase in death rate of older persons was an extremely sad reality. Given the general decrease in death rate, especially in Low- and Middle-income countries

Health, social and economic crisis is a major facet impacted by any disaster must be managed by all nations from a public health and development perspective; while making adequate and appropriate preparedness.

In this decade the COVID -19 pandemic played havoc with peoples' life across ages and around the globe. However, among the segments of the population, older people are the most disproportionately affected by the

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All societies
irrespective of
their
demographic
reality require
remedial
necessary steps
to face current
threat of the
longitudinal
impact of the
pandemic and to
avoid such
occurrences in
the future.

many would not have faced death; had precautionary steps been taken in full force with special focus on older persons. In many countries of Europe, Latin America, Africa, Asia including India, prioritization in preventive and curative services for older people and especially for those from socially and economically vulnerable did not happen.

The pandemic period challenged the professionals from various fields, activists, policy makers and for people themselves, to think of different methods to deal with major catastrophes which may occur without any warning. Health, social and economic crisis is a major facet impacted by any disaster must be managed by all nations from a public health and development perspective; while making adequate and appropriate preparedness. Disaster and emergency management should be given priority in times to come in national planning and programmatic schemes. Containing harmful effects of disasters as COVID 19 pandemic requires holistic approach to deal with not only its immediate consequences; but, also enormous long-term repercussions in all spheres of life affecting inter personal relationships, work equations, social interactions, educational opportunities, economic and financial transactions and numerous societal factors. Various chapters of the book systematically and painstakingly highlight, the varied consequences of COVID 19 pandemic go much beyond just the mortality factors.

The chapters in the book point out (including the introductory one by the editor of the volume) throughout the COVID 19 pandemic period, in many ways the rights of older people were

compromised. The disadvantaged and the vulnerable among the aged persons were at higher risk as they were more likely to be denied suitable care and treatment along with mechanisms to improve their quality of life.

Individual chapters highlight cross section of important issues: reflecting on limited availability of long -term care facilities, provisions for residential care, clinical management of different side effects of the covid infection, use of newer trends in the management of the pandemic besides the value of traditional methods for emergencies, dealing with issues of bereavement, focusing on aspects of loneliness, abuse, neglect, isolation, psychological issues, mental health concerns, such as dementia care, depression, anxiety, improving transportation services and enabling environments, overcoming ageism besides adopting different active ageing practices, improving inter generational and interpersonal relationships.

Various authors call for urgent attention to all these aspects besides many more as pertinent concerns requiring attention for proactive action to improve lives of ageing populations. All societies irrespective of their demographic reality require remedial necessary steps to face current threat of the longitudinal impact of the pandemic and to avoid such occurrences in the future. All stakeholders need to address physical and mental health issues of older people affected by COVID 19 pandemic as much as it is pertinent to secure them economically, financially, technologically and by improving their social status which received severe setback in the

years gone past in this decade due to the pandemic.

In almost all nations these multiple impacts are seen in diverse ways as illustrated by specific examples of significant special concerns mentioned by individual authors in their chapters for respective countries ranging from India, to its neighbouring countries - Nepal, Sri Lanka, Pakistan, Bangladesh, moving further to Indonesia, Iran, Turkey, Australia, towards Sub Saharan Africa, Liberia, Nigeria as well to European nations - Italy, France, Poland, Israel, and beyond to Russia, United States, Canada, Argentina.

This edited volume focuses on cross national analysis along with single country case studies to depict a comprehensive account of a major infectious pandemic changing the world scenario towards emergency response,

setting in new precautionary trends, building cooperation between many partners and focusing on newer issues in health and social care challenges.

This book provides valuable insights to lives of older people affected by COVID 19 in the context of several frameworks, perspectives, discourses and key directions for the future. While it examines the devastating impact of the pandemic, it brings hope based on understanding the resilience of older people and their survival instinct by absorbing new learning and coping strategies. It provides much needed analysis and sensitive understanding of the reality of COVID 19 as the focus in public policy and action gets reoriented towards older people.

Calendar 2023

December 02-03

International Conference on Healthy and Active Aging (ICHAA)

Amsterdam, Netherlands

https://waset.org/conferences-in-december-2023-in-amsterdam/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

December 09-10

International Conference on Exercise and Physical Activity in Aging (ICEPAA)

New York, United States

https://waset.org/conferences-in-december-2023-in-new-york/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

December 09-10

International Conference on Healthy and Active Aging (ICHAA)

London, United Kingdom

https://waset.org/conferences-in-december-2023-in-london/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

December 09-10

International Conference on Aging Diseases and Elderly Care (ICADEC)

New York, United States

https://waset.org/conferences-in-december-2023-in-new-york/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

December 13-14

International Conference on Exercise in Aging (ICEA)

Cairo, Egypt

https://waset.org/conferences-in-december-2023-in-cairo/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

December 13-14

International Conference on Aging and Cognition (ICACO)

Rome, Italy

https://waset.org/conferences-in-december-2023-in-rome/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

2024

January 25-26**International Conference on Cognition and Aging (ICCAG)**

Paris, France

https://waset.org/conferences-in-january-2024-in-paris/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

February 08-09**International Conference on Exercise and Physical Activity in Aging (ICEPAA)**

Lisbon, Portugal

https://waset.org/conferences-in-february-2024-in-lisbon/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

February 29-March 01**Unlock Healthy Longevity: Supplements**

Singapore, Singapore

https://chl-summit.com/conference/agenda?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

May 17-18,**International Conference on Advances in Aging Research (ICAAR)**

Florence, Italy

https://waset.org/conferences-in-may-2024-in-florence/program?utm_source=conferenceindex&utm_medium=referral&utm_campaign=listing

July 08-10**“6th World Aging and Rejuvenation Conference (ARC-2024)”**

Paris, France

<https://aging-geriatrics.com/>



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Through the years, HelpAge India's work has been recognised by several organisations and institutions. We are thankful for their faith and belief in our services by giving us such an honour. It encourages us and instils a sense of belief that we are on the right path whilst reminding us of the great responsibility we carry toward the elderly of our society.

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<https://www.helpageindia.org/aboutus/awards-recognition/>

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Awarded by CRISIL, 2022



UN Population Award
Awarded by UNFPA, 2020



Platinum Award for Transparency & Public Accountability Awarded by Guide Star India, 2017



Times Social Impact Award
Awarded by Times Group, 2015



NGO Leadership & Excellence Award
Awarded by ABP News, 2015



Vayoshreshtha Samman (National Award for Senior Citizens) Awarded by Ministry of Social Justice & Empowerment, Govt. of India, 2014

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Information for the Contributors

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Manuscripts

The paper should be only on issues concerning ageing and aged in India. The manuscript should be typed in double space with a wide margin and should not exceed 4000 words. The title page should carry the title of the paper, name and affiliation of the author/s. The official designation and official address should be typed at the bottom of the first page of the script. The paper should be divided into Abstract, Introduction, Material and method, Results and discussion, conclusion, acknowledgements (if any) and references. Tables should be given in Arabic, serial number and each table on a separate page. References should be listed at the end of the paper in alphabetical order and they should include only works referred to in the text. The format for the reference is:

1. Periodicals: Surname and initials of the author(s). Year of Publication. Title. Edition. Name of the Journal. Volume. Number: Page No(s)
2. Books: Surname and initials of the author(s). Year of Publication. Title. Edition. Place of Publication. Name of Publisher.

Note: Please follow above mentioned system to help maintain a particular pattern in the Journal. Submit your contribution both on printed format (hard copy) and soft copy in CD. It should be sent on the following address and soft copy could also be sent by email.

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Helpful Tips:

You can contribute to this column by sending a small article (1000 words) on any subject that concerns the older persons. You can also send us such useful news items published in other magazines or journals. Please give proper reference for the same. Please follow instructions given in column (1) & (2).

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