Although there is much anticipation for vaccination as the US prepares for this next phase in battling the COVID-19 pandemic, we as a country must continue safety measures, including social distancing, for the immediate future. With increases in COVID-19 cases and colder weather settling into much of the country, older Americans continue to adapt in how they engage in their social circles, in their communities, and with healthcare. In this issue, we highlight the latest aging research on mental health outcomes in the era of COVID-19, with special attention to new findings in combatting social isolation and loneliness.

A Silver Lining

A December commentary published in JAMA by Vahia and colleagues digests the most recent aging research in mental health effects of COVID-19, with encouraging findings. Older adults have faced unique challenges during the pandemic, including more severe complications of the disease, increased risk of mortality, limited access to healthcare, social isolation, and gaps in technological access and literacy. However, research of the last year shows that older adults have been relatively resilient to many mental health consequences, compared to younger people. While the pandemic has been emotionally and mentally taxing for everyone, older adults seem to have been less affected by pandemic-related increases in anxiety, depression, and stress-related mental health disorders.

Other Noteworthy findings

• Older adults had lower rates of new or increased substance use and suicidal ideation.

• Although the pandemic caused depressive symptoms to spike across the country, data comparing two nationally representative, population-based studies found that older adults were more resilient compared to younger adults. However, people with fewer social and economic resources and greater stressors should be targeted for screening, regardless of age.

• Similar findings were observed internationally, based on studies done in Spain and the Netherlands.

Takeaways from this new research

• What exactly makes some older adults more resilient? Wisdom may play a protective role. Wisdom has been defined in the literature as a greater sense of compassion, empathy, emotion regulation, self-reflection, and decisiveness, while accepting uncertainty and diversity of perspectives, social advising, and spirituality. These facets of wisdom may be important targets for intervention. Engaging support from the mental health community, chaplaincy, and clergy may help older adults access these qualities and skills.

• Emphasizing the quality of a few important relationships rather than quantity of general interactions is also important to maintaining social connectedness and combatting loneliness.

• Although these early findings are reassuring, we need more research examining these relationships in populations who are at increased risk: underrepresented minorities, those with low income, and unpaid caregivers, among others.

• We also don’t yet know what the longer-term implications of the pandemic are on mental health, substance use and abuse, and suicide. We must prioritize addressing barriers to helping older adults maintain wellbeing, particularly access and use of technology as we move out of the acute pandemic phase.
Improving social engagement and feelings of connectedness was challenging enough before the pandemic. Here is how the scientific community is currently addressing this important topic.

**National Academy of Science, Engineering, and Medicine Committee Report on Social Isolation and Loneliness in Older Adults**

- Donovan and Blazer's review shines a light on the role of healthcare and how the latest research can inform care during the pandemic. They emphasize that “The health protective benefits of social distancing must be balanced by the essential need for sustaining social relationships.” This report proposes five goals for the healthcare sector in addressing social isolation/loneliness including enhancing research, evidence-based practices, translation into healthcare practices, awareness, and training. They also highlight the role of technology and the importance of strengthening ties between the healthcare system and community-based networks and resources.

**Spotlight Studies on Social Isolation and Loneliness**

- A 2020 study of Chinese older adults examined how types of social support operate in the relationship between frailty and depression. They conclude that depression interventions should focus on improving perceptions of support and utilization of social support among frail older adults rather than only offering objective supports. This means that interventions should target the quality of support that caregivers provide, bolster positive perceptions of support that frail individuals receive, and promote utilization of existing support.

- A study of community-dwelling older Koreans found that digital technology is related to fewer depressive symptoms, especially for those who have fewer social interactions. These findings suggest that education in digital literacy and remote interactions for older adults may improve psychological wellbeing.

- A recent feasibility study by Theurer and colleagues examines the utility of a volunteer-based peer mentoring program to help combat loneliness in long term care facilities. This study recruited community and resident volunteers to be mentors with socially disengaged residents (mentees). These early findings suggest that the program resulted in reduced depression and loneliness and was met with high acceptability and positive program perception.

**Written for the E4 Center by Susan Buehler, PhD**

**Upcoming Events**

You can register for these events or learn more by going to our website at [e4center.org/calendar](http://e4center.org/calendar)

**FEB**

**Revised SAMHSA CSAT TIP on Treating Addiction in Older Adults**

February 25 @ 1:00 pm - 3:00 pm CST

**MAR**

**E4 Learning Community**

March 11 @ 12:00 pm - 1:00 pm CST

**E4 Regional Policy Academy**

March 18 @ 11:00 am - 1:00 pm CDT

**Implementation of Older Adult Mental Health and Substance Abuse Practices (Part 1)**

March 24 @ 1:00 pm - 2:30 pm CDT