

# Psychosocial Impact of COVID-19 on Elderly/Senior Population

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Original Article

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## Abstract:

Senior population is one of major social work and healthcare issues in highly developed countries. The aim of this study was assessing the late psychosocial consequences in seniors in

Vienna and Bratislava after the first and second waves of the COVID-19 pandemics.

The results suggest that elderly patients in contrast to children and adolescents suffer significantly more late psychosocial consequences after having coronavirus acute or chronic disease.

This paper is dedicated to Prof. Dr.h.c mult Peter G. Fedor Freyberg, ScD.

## Introduction

The combination of homelessness senior age/elderly with multiple comorbidities together with seasonal epidemic diseases such as influenza, COVID 19 etc. is a triple deadly synergy.(1-2) Elderly people who live alone or are homeless have poor nutritional and social status (1-12); access to preventive or therapeutic medications and vaccines for prevention; therapy not only against SARS and influenza but also for other comorbidities such as chronic obstructive PD, hypertension. Another population at risk are small children and pregnant women among migrants (3-12). After being ill on COVID or other epidemic viral disease, post-COVID syndrome with psychosocial consequences frequently appear. The aim of this research is to assess if homeless seniors have more frequently psychosocial consequences than younger or middle-aged homeless population.

## Methods

In an open label comparative multi-centric prospective study performed in Košice and Bratislava, two cities connected by train and bus service in 2 hour intervals, we analyzed psychosocial consequences on 102 social work clients in 2 shelters or mobile intervention teams. (Oasis vs. Jarna & Mea Culpa). A questionnaire in brief but guided dialogue plus Q&A setting were used. 34 were seniors (age 63 and more) and 67 middle age or younger adults (29 to 62 years). Inclusion criterium was homelessness in the history at least for 3 months in last 2 years (incl). Inclusion criterium was a verbal history or undergoing COVID-19 in 2000/21 season (until June 30, 2021 from Apr 1, 2020).

## Results and discussion

Psychosocial consequences such as: poor nutritional status; depression; fatigue disability for seasonal work; loss of appetite; weakness were compared. Depression, fatigue and weakness - were more significantly ( $P < 0.01$  and  $0.001$ ) present in elderly versus non-elderly group.

Surprisingly, ability of seasonal work was not different among both groups, probably due to the low proportion of homeless individuals in the study, willing to accept seasonal work (13).

Access to medications both for COVID and non-COVID medicines (14-16) was low but non-significant among both groups. Another unexpected finding was willingness to receive vaccine both for influenza and COVID was high in both groups in contrast to previous study in children (17-19). The explanation of this phenomenon may result from similar findings from COVID studies in elderly patients and in migrants and homeless (19-24) where those groups accept vaccines more openly in contrast to primary healthy, younger and socially secure population (1-29).

## Conclusion

In conclusion, the results were stimulating in terms of willingness to accept vaccination both for COVID or pandemic influenza, due to the poor social status and threat for vulnerable groups, with no difference between seniors and non-senior adults.

Late consequences, such as depression fatigue of weakness were significantly more observed among seniors, other possible consequences of past coronavirus infection such as poor nutritional status after infection or ability/willingness

to work were similarly frequently represented in both groups.

Those findings can be used for the work of interventional social workers or vaccination/testing teams in pending homeless especially in elderly age, to easier combat the third pandemics wave and mitigate the upcoming seasonal influenza season.

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