

# Mentally Healthy Living after Social Distancing in Later Life: A National Snapshot

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## Objectives

Older Canadians’ heightened risk for the physical harms of COVID-19<sup>1,2</sup> could make their return to a world without social distancing especially anxiety provoking. When public health restrictions were lifting in the Summer of 2022, we asked Canadians 60+ years of age: (1) How would you rate your anxiety? (2) Which mentally healthy living strategies are you using to manage it? Thus the aim was to identify anxiety-related strategies of significance.

## Methods

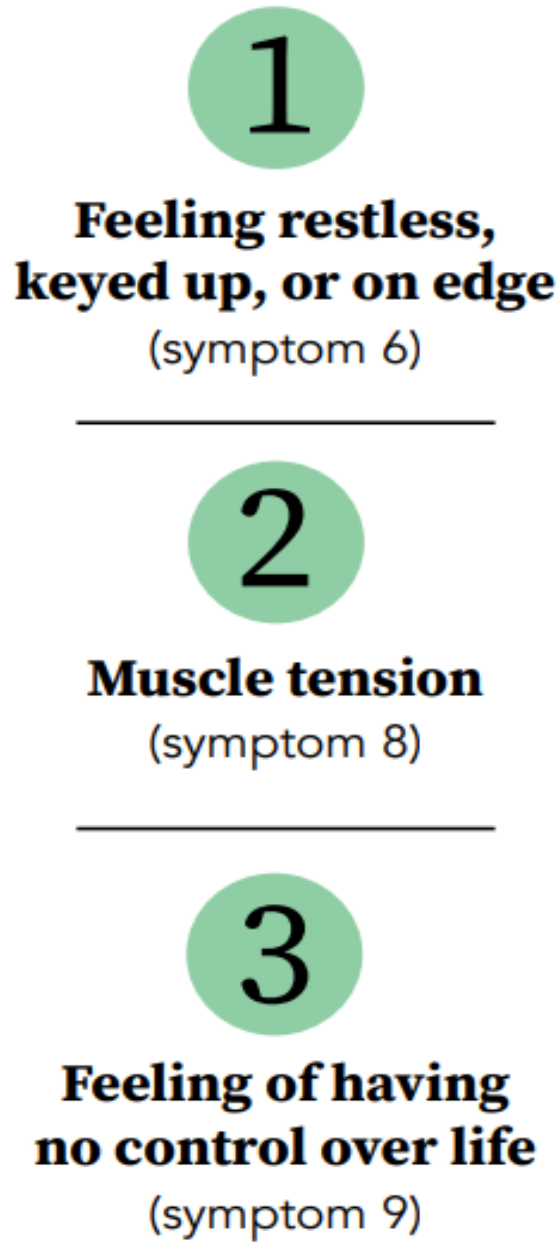
Data were collected in a national e-survey (June-August 2022). Our sample of community-dwelling older persons (N = 1,327) was stratified by age, sex, and education to approximate the Canadian population.<sup>3</sup> The short lay-friendly GAS-10<sup>4</sup> ( $\alpha = .747$ ) and a mentally healthy coping strategies checklist<sup>5</sup> were adopted to minimize responder burden and maximize participation.

## Results

Older Canadians’ anxiety was between minimal and mild (mean GAS-10 score = 6.47/30). Similar proportions had no anxiety (20.6%,  $n = 273$ ) and severe anxiety (21.1%,  $n = 280$ ).

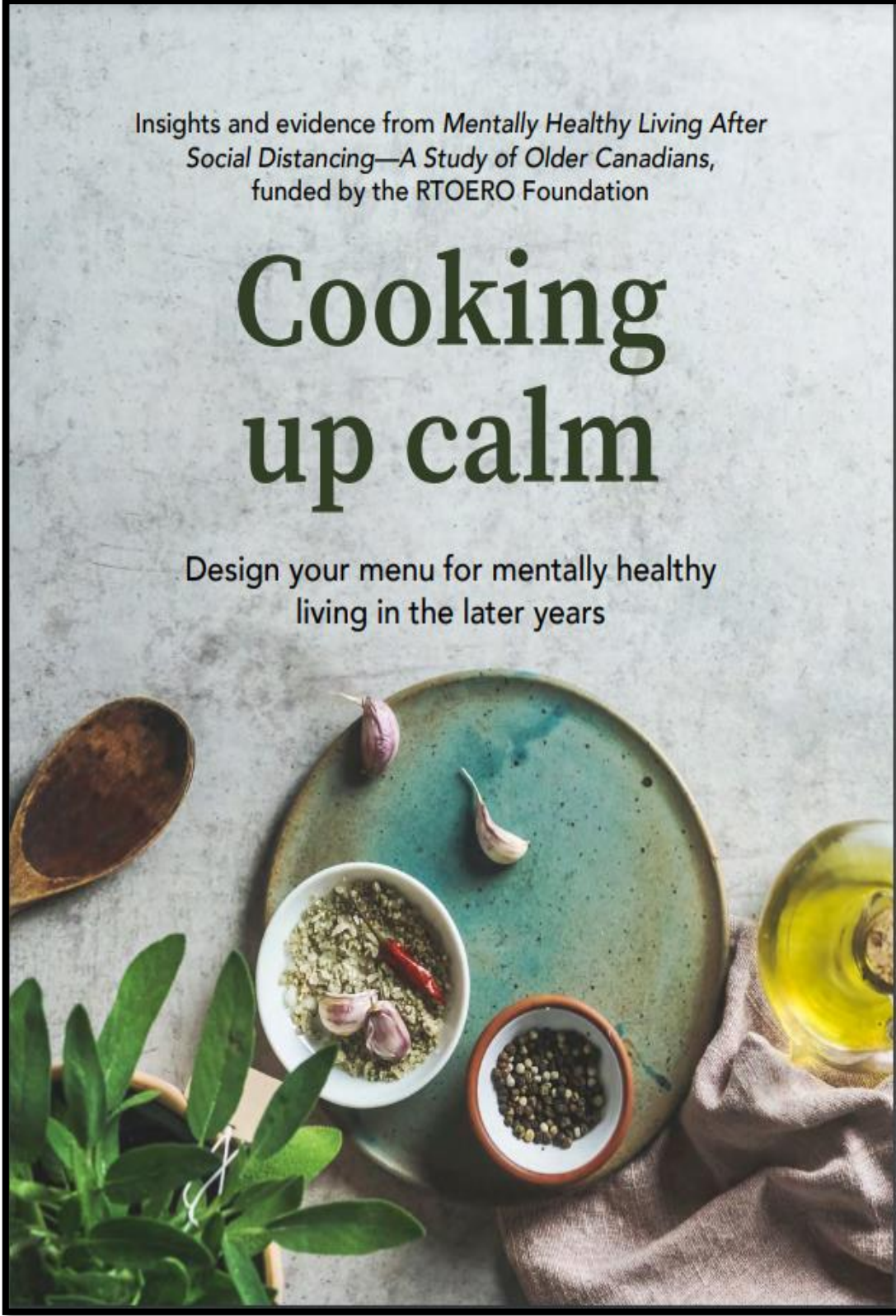
All 16 coping strategies in the checklist were put use across our studied sample. At least three-quarters of them accepted that some anxiety and fear was normal, were kind to themselves, dealt with problems in a structured way, took breathers from COVID-19 news, got proper rest/sleep, and remembered that they were resilient. Less than half of responders sought credible information about COVID-19 or sought support from loved ones. The least popular strategies were practicing relaxation and meditation ( $n = 503$ ; 38.7%) and unplugging from electronic devices ( $n = 281$ ; 21.6%).

A multivariate regression analysis ( $F=18.84$ ,  $df=24$ ,  $p<.001$ ) explained 26.8% of the variance in responders’ anxiety symptoms.



## Conclusion

Older Canadians managed age-related anxiety as social distancing lifted using a wide variety of coping strategies. There is much stigma surrounding mental health, shared learning and support from and for older people is thus essential for a mentally healthy recovery.<sup>6,7</sup> This past August, older Canadians’ wisdom was shared in a novel cookbook format.<sup>8</sup> ‘Cooking up Calm’ could help them and their contemporaries feel part of a larger community of recovery.<sup>9</sup>



Significant Findings (reference group)	B, b, 95% CI
65-69 years of age (60-64 years of age)	-.959 <sup>a</sup> , -.063, -1.929-.140
70-74 years of age	-1.521, -.091, -2.528 to -.501
75-79 year of age	-2.425,-.106, -3.502 to -1.139
80-84 years of age	-2.793, -.128, -3,907 to -1.493
85+ years of age	-3.399, -.100, -4.772 to -2.031
Sex-at-birth is male	-1.129, -.084, -1.884 to -.428
Good Health (poor to fair health)	-2.945, -.218, -3.808 to -2.032
Very Good to Excellent Health	-3.664, -.229, -4.588 to -2.652
I accepted that some anxiety/fear is normal (responded ‘no’)	1.975, .089, .780 to 3.213
I dealt with problems in a structured way	-2.109, -.128, -3.107 to -1.124
I remembered that I am resilient and was careful with the “what ifs”	-1.167, -.074, -2.184 to -.154
I challenged anxious worries and thoughts	2.391, .169, 1.569 to 3.265
I decreased other sources of stress in my life	-1.194, -.087, -1.978 to -.470
I practiced meditation and relaxation	1.862, .135, 1.115 to 2.60
I ate healthy	-1.522, -.099, -2.445 to -.563
I got proper rest and sleep	-1.446, -.089, -2.351 to -.492
I stayed active	-2.307, -.156, -3.325 to -1.391

Note:  $\alpha$ =Internal consistency reliability; B=Unstandardized regression coefficient; b=Standardized regression coefficient ; CI=Confidence interval.

## Six strategies had greater anxiety-lessening effects

The use of the 16 strategies was analyzed alongside the anxiety scores to identify the most effective anxiety-lessening strategies. While there was no single best anxiety-lessening strategy, six of the 16 were used more frequently by the study participants with lower anxiety scores.



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## Ethics Approval Number: Pro00118512

Our 1-2-3 Network Analysis (of GAS-10 symptom 6, 8, and 9) manuscript is currently being developed.

