

# A Qualitative Study on Psychological Experience of COVID 19 Illness among Elderly during 2021 Nursing

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**Abstract:** *Background:* Coronavillness 2019 has not only placed an unprecedented strain on health care worldwide, but has also irreparable physical and psychological damage to those infected. It is essential to understand the illness process and psychological experience of elders with COVID 19. *Objective:* To explore the psychological experience of COVID 19 illness among elderly admitted in hospitals during 2021. *Materials and methods:* Phenomenological research design was adopted. 12 participants were selected by purposive sampling technique. Grandeur and focus interview had done for 20 minutes and data was audio taped. *Results:* From the data collected, the psychological experience of the elderly was thematically analysed as self - quarantine, supportive sources, inner feelings, attitude towards illness, and social media of COVID 19 illness among elderly admitted before hospitalization, reaction to mind, self - reflection, health care facilities and coping strategy during hospitalization, quarantine, supportive system, attitude towards covid recovery and reaction of peers after hospitalization. *Conclusion:* The research findings identified the psychological experience of COVID 19 illness among elderly during 2021 which enters the psychological condition during COVID 19 illness faced by the elderly. An interventional study has to be conduct in future.

**Keywords:** Psychological experience, COVID - 19 illness, Elderly People

## 1. Introduction

COVID 19 illness is an anxiety provoking situation to the elderly due to its infectivity, uncertainty of manifestations and prognosis. The anxiety is compounded by rumours, over flow of information in the media, changes in daily life and routine, discrimination, stigma, feeling of separation and blame. Anxiety is generally characterized by worries, fear of getting infected from others characterized by palpitation, chest discomfort and breathing problems. In extreme condition, elders may suffer from depression characterized by mood changes, tiredness, pessimism, poor sleep and appetite, feeling helpless, guilty and hopeless, with a gradual reduction in work output. Elderly is more vulnerable to COVID 19 illness and special care shall be taken for them. (Santanu. G.2021)

Elder has higher mortality risk, especially with pre - existing comorbidities that leads to an increased risk of death rate. Many of the elderly have faced psychological problems such as loneliness, fear, anxiety, social stigma and suicidal ideation symptoms during the pandemic. (Duaa. A. and Bafail.2020)

Psychological symptoms of covid 19 illness, such as the level of confusion, fatigue and insomnia. However, the potential psychological and mental health effects of covid 19 survivors should also be taken seriously. Covid 19 is a novel disease characterized by a sudden, global scale outbreak, where infected people experience fear and worry due to uncertainty and the physical symptoms of the disease. (Hui. zhang. F. et al., 2020)

The latest data in India on the covid 19 global outbreak as of January 18, 2023 reported that 66, 74, 30, 325 confirmed cases and 67, 26, 367 confirmed deaths and currently India has the largest number of confirmed cases in Asia and as of January 18, 2023. India became to have more than 4, 46, 81, 233 confirmed cases and 5, 30, 726 confirmed deaths. The first case of the covid 19 pandemic in the Indian state of Tamil Nadu was reported on 7, March 2020. The largest single day spike (6, 993) was reported on 27<sup>th</sup> July, 2020 and Tamil Nādu now has the third highest number of confirmed cases in India after Maharashtra and Kerala. All 37 districts of the state are affected by the pandemic, with capital district Chennai being the worst affected. (WHO, 2023)

The emergence of COVID 19 pandemic has resulted an unprecedented disruption in both physical and mental health among the global citizens. Although many people have been impacted by the debilitating effects of COVID 19, certain groups, such as the elderly are more vulnerable than others and are at increased risk of severe morbidity and mortality due to the presence of comorbidities. The recent evidence suggests that, the mortality rate from COVID 19 was 15% among elderly aged 80 years or above compared to only 0.2% among younger people aged less than 20 years and 74% of the total covid19 deaths occurred among those who were aged 65 years and above. Serious emotional disturbances, insecurity, anxiety and depression are more common among elderly in association with social isolation, fear of uncertainty, and economic difficulties. (Sabuj. et al., 2021)

## 2. Materials and Methods

A qualitative research approach used for the study. Phenomenological design was adopted for the study to describe about the psychological experiences of COVID 19 illness among elderly.

**Setting:** Rojavanam old age home, Kanyakumari district, Tamil Nadu.

**Sample and Sampling technique:** Elderly those who had COVID- 19 illness and admitted in hospitals during 2021. Elderly those who were willing to grant interview. Male and female between 60 - 70 years of age and the sample size was 12 purposive sampling technique was used.

### Inclusion criteria

- Elderly those who had COVID - 19 illness and admitted in hospitals during 2021.
- Elderly those who were willing to grant interview.
- Males and females between 60 - 70 years of age.

### Exclusion criteria

- Those who were restless, loss of hearing and physical disabilities.

### Instruments:

Information such as age, gender, educational status, marital status, dietary pattern and supportive system. Interview session had grandeur and focused questions prepared by the researcher on the basis of the study. Five experts validate the tools and give their suggestions. Questions were translated into Tamil and back to English. The pretesting was done on two populations at St. Joseph old age home, Pilankalai at Kanyakumari district. Interview was conducted for 20 minutes and recorded for each population.

### Ethical Consideration

The study was conducted after obtaining ethical approval from Institutional ethics committee of St. Xavier's Catholic College of Nursing. (Reference Number 4478/NC/2011). Anonymity was assured using codes in the analysis and opening stages. Data were stored in password protected files on the servers.

### Data Collection

The investigator conducted in - depth interview by using interview guide along with hand notes were taken. The investigator asked open ended and focused questions so the respondent was able to move about freely in their description of psychological experience. The participants revealed their information through story telling method and also the audio call recorder was used to record the information. The investigator had approached the participants through direct in - depth interview method on their convenience of time of all the participants had given appointments for the investigator for their next meeting. Each meeting would last for 1 - 1 ½ hours. The interview continued until the psychological experience was fully described and that was confirmed till the last piece of information, they could share with the investigator and thus the data saturation was obtained. The investigator achieved

saturation of data with maximum of six to eight times to talk with the participants.

### Data analysis

Following data collection, the researcher read listened to the data carefully twice and transcribed the data in English. This was confirmed by peer review method. The researcher avoided premature analysis by immediately analyzing the early interview. The researcher contacted all the participants for clarification of the information. The researcher has maintained files, codes and retrieved data in a system for analysis of the data. The researcher has adopted Colaizzi's method for data analysis.

## 3. Psychological Experience of COVID 19 illness before hospitalization

### Psychological experience in old age home

#### Theme: Self - quarantine

##### Sub Theme: Perception

I heard news updates from through television and newspaper. I came to know that so many people were died by this disease. (P8)

##### Sub Theme: Attitude of old age home

My children are working in abroad. I was alone in my home. I felt loneliness in my home and so I was admitted in old age home. (P3)

##### Sub Theme: Reaction of family members

I have children but there are not taking care of me properly. That's why I am here now. My Children not even come here to meet me. (P11)

My children, grandchildren, relatives nobody was with me and so I was very much worried. I need to die like an orphan. (P1)

#### Theme: Supportive Sources

##### Sub Theme: Response

Then I was admitted in the hospital. I was isolated in the hospital. Doctors and nurses never came near us because this is an infection disease. When they come for treatment, they stay as far and this hurts me. (P9)

#### Theme: Inner Feelings

##### Sub Theme: Phobia

Unexpectedly we were affected by cold and caught was not cured. Covid test was taken and the result was positive. I was really Shocked and panic when I heard my result. (P7, P4)

##### Sub Theme: Loneliness

I was also worried. that I don't have anybody to take care of me. I was isolated in a separate room and this increased my worriers. (P2, P7)

**Sub Theme: Anxiety**

When I heard that I was affected by covid - 19. I was really shocked because I know that the disease mainly affects old people and it will be very difficult to them. (P10)

**Sub Theme: Guilt**

I came to know that this is a communicable disease and it spreads through from person to person. So, I was scared to meet other people as I couldn't find that whether they are affected with Corona virus. (P5, P9)

**Sub Theme: Comorbidity**

I have diabetics and hypertension for 12 years. I am treatment and regular checkup. (P1, P4). I have a psoriasis type of disease on my head and they are giving treatment for that also. (P6)

**Theme: Attitude towards illness****Sub Theme: Denial**

Covid test was taken and the result was positive. I was really Shocked and panic when I heard my result. (P5)

**Sub Theme: Confusion**

I heard that many of the old age people affected with covid 19 due to their low immunity health status. That made to get confusion again. (P3)

**Theme: social media****Sub Theme: Media influence**

I heard news updates through television and newspaper. I came to know that so many people were died by this disease among them many are elder people. (P2)

I was very much worried and scared about covid - 19, because I used to hear corona updates in the television. (P11)

**Psychological experience of covid 19 illness during hospitalization****Psychological experience****Theme: Reaction to mind****Sub Theme: Pensive Rumination**

My relatives never visited me in the hospital and I have no worries about that because I know that nobody will come. They don't even like to care me and that's why I am in the old age home. (P12)

Other patients will talk to me and we interact with each other. Suddenly some of them had breathing difficulty and died. This was a great shock and sad to me. They were wrapped in a plastic sheet and taken away. I thought that I am also going to face the same situation. (P 9)

**Theme: Self Reflection****Sub Theme: Anger**

I got angry with my family members because they put me in the old age home. I have to live the rest of my life. That's

why I am staying here. (P 3) I was so much worried to think that I will be isolated in a separate room and I couldn't see and talk to anybody. I was arguing to God "why did you give me this disease? (P7)

**Sub Theme: Phobia**

Because of this tension my blood pressure and blood sugar level were increased". They informed me that 2 people from my village died. Nobody was allowed to attend their funeral. It was not allowed to perform any religious rituals. I was so sad to hear this. I thought that I too may die like this. (P 4, P11)

**Sub Theme: Anxiety**

My health condition become worst day by day as I had severe cough and cold. I suffered with breathing problem and so I was shifted to the intensive care unit. I was there in the intensive care unit for five days. (P 2)

Sometimes both husband and wife were affected by corona and if one of them died, the other one was not informed and that. Really it was a painful situation. (P3)

A daughter was admitted in the hospital with her mother. Her mother died due to covid illness. She was discharged from the hospital because of this she went home for her mother's funeral. (P 5)

**Theme: Guilt**

I had severe stomach pain and I cried often because of that. I couldn't sit on my bed or lie in my bed. I had pain while passing urine. But I will not be discharged until I will be completely recovered. (P2)

**Sub Theme: Comorbidity**

I came to know that so many people were died by this disease. Because of this tension my blood pressure and blood sugar level were increased. I have a psoriasis type of disease on my head and they are giving treatment for that also. I am taking regular medicines for all these issues. I have to take 2 vein injections every day. (P11)

**Sub Theme: Anorexia**

I won't eat food as there was no taste in my tongue, we cannot ask food in our own wish. Hygienic and healthy foods were given but I couldn't eat them because of bitterness in my tongue. (P12)

**Theme: Health care facilities****Sub Theme: Satisfaction from health care**

Doctors and nurses often visited me and checked me. They gave me tablets and other medicines. They enquired me whether I am having my medicines regularly. Doctors and nurses will come every day. But they won't come every day. But they won't come near us. But they enquire about our health. Doctor used to ask me that why didn't I had good sleep. They asked me to sleep and take rest. (P1)

**Sub Theme: Communication with family members, friends and relatives**

My relatives never visited me in the hospital and I have no worries about that because I know that nobody will come. I

have to pay a lot of money in the hospital for my corona treatment. My son paid the amount. Because he has the responsibility to look after me. (P8)

My daughter in law got angry with him because of this and she fights with him. Nobody was allowed to visit me in the hospital. Nobody can stay with me too. My daughter enquired about my health through mobile phone. (P10)

### Theme: Coping strategy

#### Sub Theme: Relaxation techniques

I don't know what to do and where to go. I can't express my sufferings in words. Anyway, by God's grace I feel better now. (P 6) We used to interact among ourselves sharing our worries and difficulties and consoling each other. (P12)

#### Sub Theme: Active personal response

I never thought that I will be relieved from this disease. I have to meet my medical expenses too. (P4)

After 22 days of my hospitalization, I was able to eat a little food. I regained my health day by day. (P2, P8)

#### Sub Theme: Support from family and friends

The hospital expenses were very high and my children met my expenses. I felt I was a burden to my children. As I am wearing mask it was very difficult to breathe. I was confused that whether the disease will be cured or not. I wished to see my children. But nobody was allowed in the hospital. (P 3, P7)

#### Sub Theme: Reassurance from medical staff

Doctors and nurses often visited me and checked me. They gave me tablets and other medicines. They enquired me whether I am having my medicines regularly. Nurses came to visit me with their full body covered with protecting sheets. They say my name and keep my tablets. We need to take the tablets. (P 3, P7)

#### Sub Theme: Spiritual beliefs provide comfort

I had great faith in God. I use to pray every day and read Bible every day. I pray to God that I need to stay in this old age home throughout my life. I had no confidence that I will be alive after all this. But still I believed in God and prayed to God every day. (P 12, P10)

### Psychological experience of covid 19 illness after hospitalization

#### Psychological experience

#### Theme: Quarantine

#### Sub Theme: Enhance mental well being

I was in the quarantine for some more days in the old age home after discharge from the hospital. They looked after me very well. I was given proper food and medicine. We, the people in the old age home were like one family. So, all my friends in the home rushed to see me. I was so much happy to see this. I wish them and greet them. I had tears of happiness. (P11, P7, P9)

#### Theme: Supportive system

#### Sub Theme: Family members

My son is giving money to the old age home for my food, medicine and other personal expenses. So, I am given proper care and food. I am happy here. (P 2, P6) I couldn't identify the flavour of the food. One of my brother's contacted me through mobile and enquired about my health. I informed him that I couldn't eat properly. He prepared some curry and handed over it to the nurse. (P 4, P9)

#### Theme; Attitude towards covid recovery

#### Sub Theme: Self perceived positive therapy.

I felt I was a burden to my children. But my children never think like that. They are ready to spend money to the old age home when I was sick. (P7, P3)

#### Theme: Reaction of peers

#### Sub Theme: Diminishing perceived loneliness.

I had great depression, when I was admitted in the hospital. Because my children's, grandchildren and relatives were not with me. I felt loneliness in the hospital. Nobody was there to help me at least to use toilet. (P11, P7, P8)

But still corona deaths were also there. I escaped from death. Since I had no parents and siblings no relatives were there for me. Loneliness was the only problem I faced during corona. (P2, P5)

I have some physical difficulties like cough, suffocation, tiredness etc. Anyway, I am happy to be with my home mates. (P 8, P4)

## 4. Discussion

As the coronavirus illness 2019 began to spread in early 2020, older adults experienced disproportionately greater effects from the pandemic including more severe complications, higher mortality, concerns about disruptions to their daily routines and access to care, difficulty in adapting to technologies like telemedicine, and concerns that isolation would exacerbate existing mental health conditions.

Elderly tends to have lower stress reactivity, and in general, better emotional regulations and wellbeing than younger adults, but given the scale and magnitude of the pandemic, there was concern about a mental health crisis among elderly. The concerns pertained to elderly both at home and in residential care facilities, where contact with friends, family, and care givers become limited. The early data suggest a much more nuanced picture. This viewpoint summarizes evidence suggesting that, counter to expectation, elderly, as a group may be more resilient to the anxiety, depression and stress related mental health disorder characteristic of younger populations during the initial phase of the covid19 pandemic. Much of the initial concern related to how elderly would respond to covid 19 was based on how loneliness and isolation would be exacerbated as lockdown measures were implemented. The negative influence of loneliness among elderly has been well documented

In another study, Grolli. R. E, Mingoti. M. E, and Ignacio. Z. M. (2021). conducted a qualitative study on the psychological experience of elderly with COVID 19 admitted in hospitals. A qualitative content analysis approach was used to explain the patient's psychological experiences. Data was collected for 16 participants with COVID 19 with a history of hospitalization by using in - depth structured face to face interviews and field notes. The interviews were conducted from January 2021. Ethical consideration was obtained from the patients. An inductive content analysis was used because of the limited theories and limited psychological experience of participants with covid 19. The result of the study suggests that patients recovering from covid 19 had a combination of negative and positive psychological experiences. The result of this study showed that negative psychological experiences of COVID 19 survivors are terrible fear of death, loneliness, social isolation, anxiety, lack of supportive system, fear, guilty, anger and being away from the family members. The fact that shows positive psychological experiences such as attitude of elderly in home, satisfaction from health care, reassurance from medical staff, spiritual awakening, appreciation of nurses for maintaining and promoting the patient's attitude and perception of illness and life.

## 5. Conclusion and Recommendations

The impact of COVID 19 psychological experience of infection in the individual's social environment on psychological burden controlling for a broad range of factors using data on an elderly population above 60 years. Based on the empirical evidence of pre - existing studies, it is hypothesized that psychological burden will increase concurrent to the severity of covid19 experience independent of the other stressors resulting from the pandemic, such as a subjective sense of uncertainty burden. The result point to the importance of multiple factors which have significantly affected the psychological condition of the individual during 2021.

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### Conflict of interest statement

The author/ researcher declares no conflicts of interest.

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