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## Reflections

# An integrated and intergenerational community response to promote holistic wellbeing during the COVID-19 pandemic



Ojas Bhagra<sup>a</sup>, Shruti R. Patel<sup>b</sup>, Tony Y. Chon<sup>c,\*</sup>

<sup>a</sup> Mayo Clinic Young Volunteer, Mayo Clinic, Rochester, MN, USA

<sup>b</sup> Resident in Internal Medicine, Mayo Clinic School of Graduate Medical Education, Rochester, MN, USA

<sup>c</sup> Division of General Internal Medicine, Mayo Clinic, Rochester, MN, USA

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Over the past 150 years, groundbreaking improvements in hygiene, pharmacotherapy, advances in medical research, and medical practices have more than doubled the average life expectancy. These advancements not only manifested themselves in preventing death from mild to moderate diseases, but also enabled the ability to combat diseases on global proportions.<sup>1</sup> One clear example we have seen in the past 50 years is the eradication of smallpox, a debilitating disease that infected 300 million people in the 20th century alone.<sup>2</sup> While medicine has made great strides over the centuries, the introduction of unknown diseases causing a pandemic is a threat that has the potential to be even more devastating due to the hyper-connected and globalized nature of our world.<sup>3</sup> The effect of a pandemic is most easily observed on the front-lines; pandemics visibly overwhelm health care systems across the planet by depleting resources and pushing healthcare workers (HCWs) to the limit. Community and social support for HCWs have been shown to improve how HCWs perceive their own ability to complete a certain behavior or task, along with decreasing anxiety and stress.<sup>4</sup> In addition to HCWs needing community support to relieve the strain of massive patient influxes, pandemics take immense tolls on the mental, emotional, and holistic wellbeing of communities through the lack of connectivity due to isolation, social distancing, and cancellations of major social and life events.<sup>5</sup> Therefore, an over-reliance on health care systems and providers alone to tackle pandemic related adverse health conditions is unjustified; a large community involvement component in a pandemic response is not just needed, but critical. Every person in a community needs to be involved in a proactive response to promote wellbeing beyond just a physical level as the pandemic negatively impacts all facets of wellbeing. When analyzing the response to a pandemic, beyond the obvious threat of potentially being

infected, there are three distinct tolls that an effective integrated and intergenerational community response can help mitigate. These are the tolls on resources, HCWs, and the emotional and mental health of a community. We aim to provide a framework for an integrated, intergenerational community response to promote emotional, mental, and holistic wellbeing of HCWs and communities.

## Resources

One of the most direct ways a pandemic's impact is felt is through the depletion of necessary resources used to combat or protect against infection. In the case of the COVID-19 pandemic, masks have been in severe shortage, leaving many HCWs increasingly susceptible to infection. However, beyond standard mask-manufacturers, the people of communities have an enormous potential to help rectify resource shortages via homemade products that follow Centers for Disease Control and Prevention (CDC) health guidelines.<sup>6</sup>

Furthermore, participating in a meaningful part of the pandemic response gives a sense of unity for community members in a time where isolation and lack of control increase the chances to feel helpless or insignificant. Currently, the potential for community members to create homemade masks has been utilized extremely effectively in cities around the globe as local organizations and hospitals have opened up their donation lists to masks that meet CDC standards.

## Emotional and mental wellbeing of HCWs

Mobilizing the community to aid mask shortages directly helps another major impact: a massive toll on HCWs' emotional and mental health. Exhausting recounts of overburdened nurses and doctors being pushed to the brink in order to adequately treat large swathes of patients are diffused through the news, social media, word-of-mouth, etc. A study conducted on medical staff in one of the largest

\* Corresponding author.

E-mail address: [chon.tony@mayo.edu](mailto:chon.tony@mayo.edu) (T.Y. Chon).

hospitals in the Hunan province, the Second Xiangya Hospital, in China, looked at the effect that COVID-19 had on the staff's mental health. The study unsurprisingly discovered that the medical staff in the hospital exhibited telltale signs of psychological distress and began to withdraw from their family and social life for fear of bringing the distress or the virus to their loved ones. The hospital attempted to enact several psychological resources and counseling, and although this is an admirable and necessary component of a hospital's response to a pandemic, the results were underwhelming as much of the medical staff refused the formal psychological interventions.<sup>7</sup>

The primary role that has been assigned to community members in terms of aiding the burden on healthcare staff is social distancing and flattening the curve. This role, while necessary, focuses merely on one dimension of the pandemic, case numbers. It is important to recognize the impact a community can have on improving the mental health of HCWs by addressing their emotional and spiritual needs during a time of crisis. A recent study discovered that there are significant associations between increased social support through the expression of empathy and backing from the community, and decreases in HCWs' anxiety, stress, and increases in self-efficacy and sleep quality.<sup>4</sup> In addition, the World Health Organization (WHO) recommends for communities to honor HCWs and acknowledge the role they play in saving lives.<sup>8</sup> Displaying empathy and gratitude is not only helpful for HCWs but also to the person giving gratitude. Sending cards, making videos, writing positive messages on the sidewalks, whatever it may be, all people of a community should express gratitude and support for HCWs as part of a well-rounded pandemic response.

### Emotional and mental wellbeing of communities

Promoting community-wide and far-reaching measures to increase wellbeing that leads to an emotionally and mentally healthy, compliant, and resilient community is a necessary approach to overcome a pandemic. Communities that have their emotional health addressed are more likely to be compliant and willing to partake in health recommendations like physical confinement and social distancing.

As neighborhoods have become the epicenter of interaction in the setting of social isolation, it has become important to focus efforts in these locations. Over the past few months, communities have come together in various ways to improve connectivity and wellbeing. Across the country, children and adults are finding ways to rejuvenate their neighborhoods with positive messaging, posters in support of HCWs, and other virtual community gatherings. Community organizations have been offering financial support in the form of small grants to provide direct support to social gatherings (virtual or in-person depending on the state's COVID-19 isolation policy) in hopes to relieve the burden of isolation. Many of these events following necessary physical isolation guidelines have been focused around integrative and mindfulness practices such as yoga, meditation, mindful movements such as Tai Chi/ Qi Gong, as they are credible methods to boost wellbeing and manage stress.<sup>9</sup>

It is important to consider that these efforts must be tailored to the architecture of the neighborhood. Studies conducted in communities containing people with disabilities have demonstrated more significant levels of isolation when located in urban areas in comparison to rural areas. Furthermore, rural respondents felt employment status was more related to social involvement when compared to their urban counterparts, indicating that the effect of normal social interaction occurring at a workplace had a greater effect on rural respondents in terms of perception of social involvement.<sup>10</sup> When aiming to create a neighborhood response in urban and rural communities, these differences are important to consider.

An often-overlooked group that has proven pivotal in well-rounded efforts to support wellbeing is the youth members of a

community. With the potential to create innovative and powerfully unifying community movements, the youth are unique in their ability to serve many roles from simply helping out a neighbor to coordinating large community movements. Around the country, there are remarkable examples of youth in action as they have offered their services to babysit for HCWs, shop for seniors, facilitate access to telehealth for seniors, provide tutoring for struggling peers during distance learning, mask-making, and much more to foster emotional, mental, and holistic wellbeing into communities.

Although pandemics ultimately end up affecting everyone's lives in some shape or form, they disproportionately affect some groups more than others due to the characteristics of the pathogen. In the case of COVID-19, the largest vulnerable group is the elderly population in addition to people who are immunocompromised or have underlying health conditions. In a world that was already quite generationally divided, this facet of COVID-19 has demonstrated itself to be a catalyst for intergenerational collaboration and support. Youth have quickly mobilized to shop for seniors and people of all ages are taking extra precautions primarily to protect elderly people. A keystone of a well-rounded community response should place emphasis on mobilizing all age groups to support vulnerable groups through age-appropriate tasks like helping with everyday life and simply providing connection and interaction.

The term social distancing is a misnomer—during this time, removing ourselves from social interactions and connectivity is one of the biggest contributors to the decline of many people's emotional and mental health as it is a basic human need. Efforts to retain forms of social interaction are a grassroots, informal, but vital way to instill a sense of normalcy and connectivity to others.

An integrated, intergenerational community response is essential to promote emotional, mental, and holistic wellbeing during a pandemic. The toll on resources, HCWs, and the emotional and mental health of a community must be supported through grassroots efforts, in conjunction with efforts from a federal and state level. In the end, a community response looks like an ever-changing mosaic addressing the active needs of its members. Although a crystallized and coherent final form may never be reached, as each new tile of support and involvement is placed, the picture becomes clearer, stronger, and more complete. The result from an integrated and intergenerational community response may not be quantifiable, but it will touch and rectify problems beyond the capabilities of a healthcare dependent response.

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The authors declare that there is no conflict of interest.

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