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Commentary

Ways of Protecting Religious Older Adults from the Consequences of COVID-19

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This is an anxious time, especially for older adults who are those most vulnerable during this coronavirus disease 2019 (COVID-19) pandemic. Interestingly, this anxiety and the accompanying emotional distress are known to increase susceptibility to infection,¹ effects that may be especially strong as immune function decreases with aging.² Religious beliefs and practices are known to help individuals cope with times of stress, and in many studies are associated with less anxiety and greater hope, especially in older adult populations.³ During the week following 9/11 terrorist attacks, 90% of Americans turned to religion to cope.⁴

Because religious faith is an important resource for health and well-being for many older adults,^{5–7} this may be one way that clinicians can support and encourage their patients. After taking of a spiritual history to identify religious resources,⁸ here are seven simple ways that geriatric psychiatrists can help religious elders make use of their faith to relieve anxiety

and help protect themselves and others during this COVID-19 pandemic.

STAY CONNECTED WITH RELIGIOUS FAITH

1. *Spend time developing a deeper religious faith.* This is an opportunity for older adults to deepen their religious faith or personal relationship with God through prayer, meditation, reading scriptures, reciting scriptures, listening to inspirational programs, or reading uplifting literature that nourishes the spirit. Most religious communities now offer live streaming of services that promote solidarity with one another and sermons that provide guidance and hope. Now that many are “sheltering in place” or quarantining at home, there is plenty of time for activities that can strengthen

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spiritual health. Most older adults are not aware that such activities may also serve to enhance mental health, ability to weather the anxiety of these times, and improve physical health and resistance to infection, as much research has shown.^{7,9}

2. *Stay physically healthy.* Religious elders are instructed within the Christian tradition (and other faith traditions as well) to care for the “temple of the Holy Spirit” as a way of honoring and worshipping God. To accomplish this, religious elders may be encouraged to:

- (a) Engage in moderate intensity exercise for 30–45 minutes/day each day (after approval by their physician). This is known to improve immune function and potentially reduce risk and severity of respiratory viral infection.¹⁰
- (b) Obtain 7–8 hours of sleep per night, since obtaining adequate sleep is associated with better immune function and protection against viral infections.¹¹
- (c) Eat healthy and keep weight down by following the Mediterranean Diet, now rated #1 by experts throughout the world.¹² Even among vaccinated older adults, risk of viral infection is increased among those who are overweight or obese.¹³
- (d) Take vitamin D to ensure adequate levels, given that many confined elders are low on this vitamin, which can adversely affect their immunity.¹⁴
- (e) Drink plenty of fluids, since older adults are at risk for becoming dehydrated due to decreased thirst, and when this occurs, risk of infection increases.¹⁵
- (f) Take medications as prescribed, keep an adequate supply of medications on hand, and maintain regular contact with a physician (by telemedicine if necessary).

COPING WITH STRESS AND NEGATIVE CONSEQUENCES OF SOCIAL DISTANCING

3. *Care for your neighbor.* Elders should be encouraged to love and care for neighbors at this time. This is what Jesus, Moses, the Prophet Mohammad, the

Buddha, Hindu sages, and other greater religious figures emphasized (and often commanded). The neighbor is anyone in need. There is an opportunity for those of all religious faiths (and those with no religious faith) to spread a message of love and hope to family members, neighbors, friends, and anyone else in need.

4. *Care for neighbor by meeting emotional needs.* Many older adults live alone and are now being forced to stay in their homes. There are also thousands of nursing home patients and those in assisted-living facilities who are being confined to their rooms and not allowed to interact with other residents. This situation is increasing risk for social isolation, which itself has been shown to adversely affect immune function in both animal and human studies,^{16,17} thereby increasing risk of infection and adversely affecting the body’s response to it. There is no better way to relieve anxiety and reduce social isolation than by reaching out to others in need.

Here is one practical suggestion that clinicians can suggest to older patients. First, have the person make a list of family members or individuals in their faith community who may be at risk for social isolation or have physical or emotional problems. Contact these individuals and ask if they would like to have a spiritual partner during these unsettling times. Partnering means ensuring that the person has the technology and know-how to connect to others. Next, have the elder contact that person three times/day: in the morning, afternoon, and evening at prearranged times. During this time, both partners should pray with the other, encourage the other, and remind the other of God’s love for him/her. This will help to relieve the loneliness of both partners and eliminate boredom that is common when confined and alone.

5. *Care for neighbor by meeting physical needs.* Many people have physical needs during this time of restriction to home, including a need for food, medicine, or medical supplies. If an older person is able, one way to put faith into action is by picking up needed supplies at a grocery store or pharmacy, driving to the person’s home and leaving the supplies on their doorstep (calling at the time of delivery to ensure immediate pick up). Not everyone can do this, but for those who are

physically able, have a car, and some disposable income, this can be one way to lift spirits almost immediately.

6. *Follow by social distancing guidelines.* The recommendations above do not mean that elders should be reckless by exposing others (or themselves) to the coronavirus by not following Centers for Disease Control guidelines.¹⁸ Those with symptoms of a cold, especially fever and cough, should avoid close physical contact with others. However, this is easily addressed by reaching out remotely through technology now available (see below). Reckless also means not following the simple steps that can help to prevent the spread of the coronavirus: washing hands regularly with soap for 20 seconds every couple hours, especially after having contact with others or with objects such as Amazon boxes or mail; keeping physical distance from others, and not physically congregating with more than a couple of people at a time.
7. *Take advantage of technology.* Social distancing means physically separating from one another, not socially separating. A person can be socially close and not physically close, just as one can be physically close and not socially close.¹⁹ Although older adults cannot give physical hugs or handshakes during these times, there are many other ways of providing social and spiritual hugs and handshakes. This can be done remotely by using

the technology now available: Skype, FaceTime, Zoom, WebEx, or simply the telephone.

Chaplain services, especially in inpatient settings, are a critical resource for clinicians. Consulting a chaplain when religious questions arise is one way to help elders work through spiritual issues that may be adversely affecting their health and well-being. Likewise, geriatric psychiatrists can also collaborate with churches and other faith-based institutions to provide education, information about safety, and tips on how elders can deal with the stress of these times (and who to contact if they feel overwhelmed). In summary, advising religious elders to stay in touch with God, focus on spiritual health, maintain good physical health, and help family, friends, and neighbors (remotely through the available technology), will help to boost immunity, develop physical and emotional resistance, and make a difference in the lives of those around them.

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SUPPLEMENTARY MATERIALS

Supplementary material associated with this article can be found, in the online version, at <https://doi.org/10.1016/j.jagp.2020.04.004>.

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