

TITLE: Why we need to invest in remotely-delivered psychological interventions for older adults

AUTHORS:

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KEY HIGHLIGHTS:

- COVID-19 had a significant and disproportionate impact on the mental health and wellbeing of older adults, by increasing social isolation and loneliness, two key risk factors for poor mental health in this population.
- Technology-assisted treatments and service delivery via telehealth are emerging approaches to health care that have the capacity to support the mental health and wellbeing of older adults.
- Future research should consider development of remotely-administered psychological and social intervention programs, and empiric evaluation of the efficacy, feasibility, and acceptability of such programs to support increased implementation.

MAIN TEXT:

The COVID-19 pandemic has had significant and disproportionate impacts on the mental health and wellbeing of older adults in Australia. In particular, physical distancing requirements limited opportunities for social engagement for older adults living in the community (Gorenko et al., 2020). Local social and council-run group programs were ceased, and usual supports such as General Practitioners (GPs) were more difficult to access. Additionally, for those living in Residential Aged Care Facilities (RACFs), visitors were either not allowed or restricted, leisure activities and outings were ceased, and in the event of an outbreak, residents were unable to leave their rooms (Brydon et al., 2022). The amplified experience of social isolation due to the COVID-19 pandemic resulted in increased loneliness and affective symptoms for older adults during this time (Santini, Jose & Cornwell, 2020). Indeed, it is well known that social isolation is a risk factor associated with increased anxiety, depression, and decline in cognitive and physical health for older adults (Courtin & Knapp, 2017).

Additionally, it was identified that many older adults lack the necessary resources to effectively manage the stress and implications of COVID-19; this includes lack of access to technological devices required for social networking, few family members or friends (possibly due to loss during the COVID-19 pandemic), and challenges engaging in routine activities (Chong et al., 2020). For example, for those living in aged care, many require staff support to speak with family or loved ones via telephone or FaceTime calls, which was limited due to staff shortages (Cousins, 2020).

The COVID-19 pandemic also impacted the delivery of mental health care, with community mental health moving to online and remote delivery during lockdowns in Australia (Zhou et al., 2020; Bhar et al., 2022). Technology became an important and well-received component of accessing mental health services during the COVID-19 pandemic (Vahia et al., 2020). For example, a recent evaluation of patients' experiences with telehealth versus in-person care in Victorian tertiary hospitals reported that patients had mostly positive experiences with telehealth and felt that it was a convenient and acceptable form of health-service delivery (Rasmussen et al., 2022). Additionally, services provided via telehealth were found to have a positive impact on older adults during the COVID-19 pandemic; this resulted in reduced hospital visits and increased social contact to support both mood and cognitive functioning (Harerimana, Forchuk and O'Regan, 2019).

Considering the disproportionate impact of the COVID-19 pandemic on our older adults, and the significant advancements made in the use of technology for service provision during the COVID-19 pandemic, there is greater interest in exploring how the use of remote, internet-based technologies can support older adults on an ongoing basis. Specifically, those at risk of social isolation, loneliness, and subsequently poor mental and physical health, may benefit from provisioning remotely-administered psychological and social-support interventions (Chong & Chiu 2022). The potential benefits of remotely-administered interventions include reducing costs, increasing efficacy and accessibility, and reducing participant burden (Rasmussen et al., 2022). Some research does exist, which explores the efficacy of remotely-delivered psychological interventions for older adults. Typically, these intervention programs have focused on frameworks for treating anxiety and depressive symptoms using cognitive behavioral therapy (CBT) (Gorenko et al., 2020; Bhar et al., 2022).

At the Healthy Ageing Service, a part of St. Vincent's Hospital in Melbourne, Australia, remotely-administered assessments, interventions, and education sessions were tested by caregivers, consumers, health professionals, and RACF staff with the goal of improving access to mental-health services during the COVID-19 pandemic. Our service created and implemented psychoeducational group programs which provided participants with, not only an opportunity to learn about various topics related to wellbeing, but also make connections socially with peers and facilitators. These groups allowed older adults to access support and make connections that they would otherwise not be able to at the time due to psychosocial factors and pandemic-related restrictions. This experience highlights the importance of implementing innovative strategies to improve access to mental health services for older adults. However, as a burgeoning area of interest in both research and clinical settings there is much more to learn about the efficacy, feasibility, and acceptability of such programs and services. As the necessity for telehealth continues to grow within the healthcare setting, we encourage more clinicians and researchers to consider evaluating and implementing this mode of intervention delivery. Older adults are already limited in their capacity to access mental health supports, and investing in remotely-administered interventions will improve mental health care access for one of our most vulnerable populations.

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To read more about the Healthy Ageing Service (HAS): <https://www.svhm.org.au/health-professionals/community-and-aged-care/aged-psychiatry-assessment-and-treatment-team-apatt>

AUTHOR INTRODUCTIONS



Stephanie Perin is a clinical psychologist who currently works with the Healthy Ageing Service at the St Vincent's Hospital Aged Mental Health Service. Her areas of interest include: older adults' mental health, how we can utilize and apply technology in the administration of psychological assessments and interventions, and dementia and neurodegenerative diseases.



Grace Billing is an occupational therapist who currently works with the Healthy Ageing Service which is part of the St Vincent's Hospital Aged Mental Health Service. Her areas of interest include: sensory modulation to support emotional distress, and the relationship between functioning and mental health, in particular, how we support individuals with mental health concerns to continue to manage their daily tasks and overall wellbeing.