

COVID-19: The Danger of Protection

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During the COVID-19 pandemic, residents of the Phillips-Strickland House (an assisted-living facility) try to cope with a confusing and challenging situation. They are taking turns in the large activity room watching movies together. They must remain at least 6-feet apart from their neighbors and friends, even in their own shared home. The staff members are becoming increasingly worried about the residents and try to add meaning to their lives. The facility's activity director has been trying to develop ideas to entertain the residents while following the Centers for Disease Control and Prevention (C.D.C.) guidelines. Despite this effort, many residents choose to stay in their rooms alone all day. It's hard to tell what is more dangerous to these residents, COVID-19, or the isolation it takes to protect them. Although the intent to protect the fragile population most at risk from COVID-19 by isolating them from the pandemic has created a sense of uncertainty, increased loneliness, and aided in physical health deterioration.



The first signs of trouble began immediately when the C.D.C. required several new guidelines for assisted-living facilities. All of these sudden and restricting rules and changes had residents in a state of confusion and panic. Many turned to staff members with several questions in an attempt to end the uncertainty they were experiencing. They would ask when they could eat in the dining room again or when their families could come in to see them. Unfortunately, no one knew the answers to these questions. After months into the pandemic and with no end in sight, residents no longer ask these *when* questions. This new lifestyle has become the new “norm”. Now residents face a new level of uncertainty, leading to further questions. Will they die without saying goodbye to loved ones? Will a hospital trip lead to them coming home to an isolating 14-day quarantine in their rooms? A couple of residents even faced the dilemma of leaving their home and friends behind because the family wants to take over their care. Some families thought it best to take their loved ones to both protect and be with them.

Many residents are struggling to understand this new way of life. Those who are suffering from dementia attempt to live the routine they always had. Every day, the resident, Norman, would get all dressed up for church; like a proper gentleman, he wears a suit, dress pants, and shiny black shoes. He would wait for his wife of many years to pick him up. With new C.D.C. guidelines in place, residents are no longer allowed to leave the facility without proper reason. It’s so heartbreaking to watch Norman repeat this routine every single morning. As Norman walks to the front door to wait, a staff member must inform him that he won’t be attending the church service that day.

Another giant struggle for residents is the inability to see their loved ones. Older adults, ages 60 and over, have a high risk of being socially isolated. For those living in long-term care facilities, the risk of loneliness is twice as high as those living within the community; the ratio is

22% vs. 42% (Simard & Volicer, 2020). With the COVID 19 pandemic, these percentages will likely increase. Assisted-living facilities must follow the C.D.C. guidelines to protect those at higher risk. A large portion of activities have canceled, and residents can't eat in the dining room. Without meaningful relationships, there is a higher risk of depression, aggressive behaviors, suicidal thoughts, and can even increase the risk of Alzheimer's disease (Simard & Volicer, 2020).

An example of a resident who lacks a meaningful relationship is Connie. This resident, had to be moved to a new wing recently. The staff has seen a significant shift in Connie's behavior. The once fun, hilarious, and out-going Connie had withdrawn within less than a month. Connie was stuck spending her time not only away from her loving son, but to the same living room as those residents who bullied her. These residents talked about Connie in front of her as if she could not understand what was said. Connie, who was always cracking jokes that made the staff laugh, had disappeared. The staff begged upper-management to move Connie to a new room, attempting to bring her back to her former self. Connie was moved to a carefully picked neighborhood, purposely seated near another lonely resident, one who shares in Connie's most endearing traits. It's still too early to tell, but Connie seems to be enjoying the more positive company and has started talking a little bit more.

One final after-effect of this pandemic is this new daily routine requires very little physical activity for residents. Some residents wonder if they would even have the strength to walk to the dining room; this walk before and after meals was once the primary physical activity source. Some cope with this well and will walk laps around the dining room and living areas, while others rarely leave their beds. To prevent osteoporotic fractures, regularly exercising is essential (Kannus, 1999). Even for older adults, exercise can improve balance, muscle strength,

reaction time, and coordination (Kannus, 1999). During the pandemic, there has been a considerable increase in broken bones within residents. These injuries have been occurring in those who refuse to be active. When a resident breaks a hip bone, it has been a regular pattern that these residents never return to the facility. The resident's obituary is usually hanging on the dining room's bulletin board within a few months.

This decline in physical exercise has led to further problems. The residents appear to have become less active than ever before. The residential nursing staff has noticed this the most. With the Certified Residential Medication Aide (C.R.M.A.)'s buzzers sounding off non-stop, many residents are abusing this critical tool that could mean the difference between life and death. With the overuse of their pendants, residents attempt to send nursing staff on non-essential errands. Some of these requests include closing windows, rotating fans, and fetching close-by items. The nursing staff are becoming increasingly frustrated and will ignore frequent-callers. However, this "needy" behavior seems like either a cry for attention or perhaps a sign of giving up.

In such a short time, COVID-19 has had a lasting impact on residents in assisted-living facilities. The decrease in the well-being of these older adults is hard not to notice. For these vulnerable populations' protection, many sacrifices, including distance from family and friends, and fewer activities are in effect. With an increase of uncertainty, loneliness, and a decline in overall health, safety comes at a significant price. It's tough to say what is more dangerous, COVID-19, or what it takes to prevent it.

References

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Nickerson, L. (September, 2020) Photo taken at the Phillips-Strickland House, Bangor ME

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