



POLICY REFLECTIONS OF THE COVID-19 PANDEMIC ON OLDER ADULTS

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ABSTRACT

The COVID-19 pandemic emerged in China in December 2019 and spread all over the world in a short time. The destructive effects of such a global outbreak have affected every domain of life, such as health, economy, education, tourism, and agriculture. Each segment of society has been exposed to the adverse effects of the pandemic; however, the most vulnerable and fragile group has undoubtedly been older adults due to the epidemiology and mortality rates of the virus. Therefore, many countries have built their anti-disease strategy primarily on protecting the health of their older adult citizens. Ultimately, this study aims to investigate the impact of the pandemic on older adults in light of the relevant literature and current data, scrutinize older adult-oriented policies in our country in this process, and offer sustainable, rights-based social policy recommendations upon the evaluation of current policies.

Introduction

The German philosopher Kant likens aging to mountain climbing, where one has increased fatigue and shortness of breath as s/he gets older, but his/her vision becomes wider. Old age is the last destination of the life journey before death, in which wisdom increases with the enhanced experiences, but the needs and dependence on the environment increase due to the decrease in physical ability. Despite acquiring an expanding perspective, thanks to lifelong experiences, many health, social, economic, and cultural needs await older adults at this destination. Today, the declining birth rates and increasing life expectancy have led the population to get older, which has become a fundamental

economic and social challenge for countries. Due to the effects of population aging on social security and labor markets in the demographically changing world, there has been a need to make regulations for older adults in the labor market and reorganize the care services and economic and social policies for these citizens.

The COVID-19 pandemic emerged in the city of Wuhan, China, in December 2019 and soon affected the whole world. Considering the epidemiology of the virus and the high mortality rates in older adults, they are in the highest risk group in the pandemic. As a matter of fact, following the spread of the virus, many countries have prioritized measures to protect older adult citizens in their policies. Although such steps are

of vital importance in protecting the health of older adults, the restrictions and curfews increased their dependence on their families, social environment, and different institutions/organizations. During the pandemic, where our regular daily routines have been replaced by the "new normal," older adults have almost had to be "imprisoned" at home and even needed another person or institution to meet their basic needs. In this respect, each country has generated new policies within its economic and socio-cultural dynamics.

While current social policies oriented to elevate the well-being and meet the increasing needs of older adults are important, it has become more critical than ever to generate effective and innovative policies for them during the pandemic. Ultimately, the purpose of this paper is to evaluate older adult-oriented social policies during the pandemic from the perspective of social work, which is a branch of the social policy tree. In addition, we aim to determine the needs of older adults during restrictions, evaluate the social policies implemented to meet these needs, and offer sustainable social policy recommendations that will contribute to the well-being of older adults.

1. Theoretical Framework

Aging is a multidisciplinary subject of many branches of science such as economics, social policy, medicine, sociology, psychology, social work, and gerontology. In this section, we define and discuss social policy and social work disciplines in the context of older adults in the pandemic. The relevant literature adopts both narrow and broad frameworks to address the definition of social policy. In a narrower sense, social policy refers to narrow-scope, limited-purpose policies that address the proletariat and their fundamental problems in the unjust conflict between labor and capital brought about by the capitalist order (Koray, 2008). In a broader sense, it refers to policies that aim to ensure the co-existence of all social classes in a social structure and allow conflicts disrupting the social integrity to be resolved through

peaceful and conciliatory means (Tokol & Alper, 2019). Social work is among the implementation means of social policy. According to the definition of the National Association of Social Workers (NASW), social work is related to professional interventions that include assistance to individuals, families, groups, and communities to increase social functionality, develop capacity, and strengthen society (Barker, 1999). In other words, social work is a profession carried out by practitioners who aim to help solve the problems between people and their environments by creating individual, group, and society-level changes, who act against the problems in social well-being and social security, and who comply with professional, ethical conducts (Kongar, 1972). Social work discipline carries out its interventions for many disadvantaged groups such as older adults. Old age can be defined as a period of life in which physical mobility slows down; sensory organs are not as functional as before; skin becomes thinner with wrinkles; hair gets gray or shed; and the individual has not enough spiritual and psychological motivation as in the past (Say Şahin, 2020). In the simplest terms, population aging refers to the changes to the current population structure where the number of children and youth decreases while the older adult population relatively increases (Uyanık, 2017).

2. Older Adults in the Pandemic

Decreasing birth rates and increasing life expectancy lead the world population to get older. While 9.3% of the world population comprises older adults, this rate is 9.1% in our country. According to the 2019 data of the Turkish Statistical Institute, the number of individuals aged 65 and over was 7,550,727. Considering the population projections, it is estimated that the ratio of the older adult population to the total population will be 10.2% in 2023, 12.9% in 2030, and 16.3% in 2040 (TÜİK, 2020). In this process called global aging, the available data are concrete indications that our country's population tends to age. The needs of the older adults in the pandemic, the policies implemented to satisfy these needs, and the

extent to which the current policies can meet these needs are the debates that need to be clarified in today's world where the pandemic prevails.

Since March 11, 2020, when the first case was reported in our country and the outbreak was declared a pandemic by the World Health Organization, the Ministry of Health has been sharing daily case numbers and publishing status reports about the course of the pandemic. Considering the distribution of the cases by age in the specified date range in the first weekly status report (08.17.2020-08.23.2020), 8.6% of all cases were in the 65-to-79 age range, and 2.5% were aged 80 years old and over. Meanwhile, the highest mortality rate was in individuals aged 80 years and over (25.84%) (Ministry of Health, 2020). The report published by the Chinese Center for Disease Control and Prevention showed that the overall mortality rate was 2.3%, while 8% of deaths occurred in the 70-to-79 age range and 14.8% in the individuals aged 80 years and over (Wu & McGoogan, 2020). Similarly, in Italy, 12.8% of the reported mortality cases were between 70-79 years, and 20.2% were aged 80 years and over (Onder et al., 2020). In parallel with the data in our country, data from China and Italy, which have been the major centers of the pandemic, also reveal the fact that older adults are in the high-risk group against COVID-19.

Undoubtedly, the pandemic has affected older adult health more than other risk factors. They have also faced the risk of contracting the virus and are included in the high-risk group in terms of the lethal effect of the virus. Due to the significant increase in the need for healthcare services during the pandemic, healthcare institutions have not accepted patients without an appointment, except for the emergency departments, which has hindered older adults from accessing such services. The virus not only threatens physical health but also adversely affects the mental health of older adults, primarily owing to the restrictions and curfews. Increasing deaths and the decrease in the older adult population are considered the demographic impact of the pandemic. When it

comes to the economy, countries face a massive reduction in production and increased healthcare expenditures and unemployment. Given the deterioration of the balance in production, unemployment, and healthcare expenditures, it becomes imperative to re-allocate the resources and suggest appropriate policies. In terms of social life, on the other hand, the pandemic has brought an atmosphere of panic, the feeling of helplessness and loneliness, the increasing fear of death among older adults, and the decrease in social activities.

3. Social State: Social Policies for Older Adults

Old age has been among the focal points of social policy from past to present, but this focus has shifted to older adults due to the aging of the world population, especially in Europe. Many reasons have led to the need for social policies for older adults, such as population aging, economic reasons, the transformation of family, humanitarian reasons, and social state understanding (Yanardağ & Zubaroğlu Yanardağ, 2019). In this section, we scrutinize social policies during the pandemic within social state understanding.

Social work and welfare practices and social policy priorities for older adults are inevitably influenced by the characteristics of certain periods. Considering the worldwide impacts of pandemics throughout history, it will not be wrong to assert that the COVID-19 pandemic has also created adverse health, economic, social, political, and demographic effects on the world and will continue to affect many domains of life in the long term (Buzgan, 2020). At this point, social policy is among the critical tools in dealing with these effects. Social policy means public management of social risks. While some risks are constant, some risks appear in the flow of history (Buğra & Keyder, 2006: 39). The pandemic is a challenging test for humanity in the 21st century and has brought many risks such as the increase in the number of sick people, healthcare expenditures, and mortalities, decrease in production and unemployment, and disruption of education. So far, various policies have been suggested to minimize

these risks and reduce their impacts on society and the economy. The International Labor Organization (ILO) has published the Social Protection Measures Report, which includes the measures taken by countries in response to the COVID-19 pandemic. Accordingly, these measures cover increasing social welfare (23.2%), expanding the scope of benefits (22.1%), introducing new programs or benefit (11.6%), delaying, reducing, or removing social security premiums (7.4%), expanding eligibility criteria (5.3%), enacting new benefits or increasing existing benefits (4.2%), improving services (3.2%), increasing subsidies on premiums (3.2%), increasing loan/budget collections (2.1%), and other measures (9.3%) (ILO, 2020).

One of the policies implemented in our country to minimize the effects of the pandemic on the economy and social life is a TRY 100 billion package called the Economic Stability Shield. This package proposes the following measures to be implemented directly or indirectly to older adults: (1) providing a short-time working allowance to reduce the cost of employers and ensure the sustainability of employment, (2) providing flexibility for delays in loan payments, (3) increasing the minimum pension to TRY 1500, (4) allocating an additional TRY 2 billion benefit package for the needy per the proposal of the Ministry of Family, Labor, and Social Services, (5) allocating TRY 1000 unrequited benefit to each needy citizen, (6) providing low-interest loan opportunities, (7) paying the religious holiday bonus for retirees ahead of time in April, and (8) initiating a periodic follow-up program, including home health care and social services, for older adults aged 80 and over and living alone (T.C. Cumhurbaşkanlığı, 2020).

On the other hand, curfew restrictions have been introduced for individuals aged 65 and over to protect their health. In this process, Vefa Social Support Groups (VSSGs) have been established under the coordination of governorates and district governorates to meet the needs and demands of older adults. VSSGs have continued their services on a 24/7 basis.

Individuals aged 65 and over have reached VSSGs via 112, 156, 155, and other lines determined by local administrations, and these groups have met the needs of such citizens such as food, medicine, pension delivery, and hygiene materials (T.C. İçişleri Bakanlığı). VSSGs have included public employees from many different professions such as police officers, gendarmeries, neighborhood wardens, religious officials, teachers, healthcare workers, and AFAD staff.

4. Older Adults and Social Work in the Pandemic

Curfew restrictions have taken the lead to protect the health of older adults and reduce the transmission of the virus during the pandemic. Although such measures have been introduced to protect the physiological health of older adults, long-lasting restrictions have brought destructive effects on their mental health. In this regard, interventions to protect and enhance older adults' mental health have become as essential and critical as protecting their physical health. Social isolation has exposed older adults to more anxiety and depression (Armitage & Nellums, 2020). In this period, the increasing fear of death, the concern of getting infected, being away from social support mechanisms have made the coping mechanisms and problem-solving methods of older adults inadequate. Therefore, it has become necessary to come up with new coping strategies that would solve the problems and meet the needs. At this point, the social work discipline, which carries out professional studies on ensuring older adult well-being, strengthening older adult mental health, and maintaining healthy relations of older adults with their environments, has undertaken the responsibility of practicing empowering interventions for older adults (Say Şahin, 2020b: 395). The Ministry of Health has started psychosocial support hotlines in 81 cities to relieve the burden of such a challenging and unanticipated process and heal the devastating blows of the pandemic on older adult mental health (T.C. Sağlık Bakanlığı). Through these hotlines, mental health professionals attempt to minimize pandemic-related stress, anxiety, and depression levels of

individuals and provide personalized counseling. In this process, social workers focus on "own resources," as well as their professional knowledge, skills, and interventions, to protect and strengthen the mental health of older adults. These "own resources" are self-esteem (refers to how much one loves and accepts himself/herself), self-efficacy (the belief that s/he can overcome the difficulties), positive thinking (includes a positive approach to events and situations), and optimism (having positive expectations for the future) (Karancı et al., 2014). A social worker implements an appropriate intervention method to maintain the well-being of older adults with the help of their "own resources" and his/her professional knowledge and skills. Finally, in this section, we discuss social work interventions for older adults during the pandemic with their micro, mezzo, and macro dimensions.

Micro-level interventions to be carried out in the pandemic should be planned by considering the living spaces of older adults. A social worker also needs to consider the needs of older adults who are under institutional care, live alone at home, or are cared for by their family members and the differences in interventions to meet these needs. Moreover, it seems reasonable to reschedule the interviews to be held in this period, when face-to-face meetings are interrupted, under the framework of 'tele' interviews by regarding the difficulties of older adults in using technology (Tekindal et al., 2020). During the pandemic, group work functions as a source of support and mutual assistance among older adults experiencing similar feelings. Conducting online group works eliminates the risk of spreading the virus among those involved in these works while ensuring the functional management of the group process and providing the group members with the opportunity to share their experiences. At the macro level, older adults should be encouraged to actively participate in the decision-making process and mechanisms (Yanardağ & Zubaroglu Yanardağ, 2019: 185). Carrying out community education about the virus and pandemic through mass and social media, conducting community-based studies to identify and analyze the

needs of older adults, and producing effective projects that will contribute to problem-solution are some of the macro-level interventions for older adults during the pandemic.

Conclusion

The increasing older adult population emphasizes the importance of social policies to solve the social problems of older adults and to increase their well-being. While the policies to respond to the increasingly transforming needs of the aging world are remarkable, the pandemic has promoted such policies for older adults. The pandemic has almost become a threat to the whole world due to infection rates, easy and fast transmission of the virus, and an increase in patient and mortality rates. Considering the rate of spread of the virus, the pandemic has introduced medical challenges, as well as multifaceted adverse impacts on the economy, education, tourism, agriculture, public health, and politics. The relevant bodies should develop supportive policies so that older adults can get through this process with the least harm. Although the curfew for older adults, which has been brought to reduce the transmission rate of the disease, puts a physical distance between them and social life, these measures need to be prevented from turning into an emotional distance. Older adults may stay away from social life, feel alone, or have difficulty coping with the anxiety and stress during the pandemic. Hence, mental health specialists also need to perform structured interviews with and provide psychological support for older adults to minimize such adverse influences of the pandemic. The staff, who actively serve in the field, should participate in online in-service training to boost their competence and improve the service quality standard. In this period, when face-to-face meetings cannot be maintained, distance lifelong learning programs should be developed and effectively implemented to provide older adults with accessing to technology and improving their technology literacy capacity. Researchers may engage in multidisciplinary research

to reveal the feelings of older adults in this process and to identify their needs. The results of these studies may be a guiding compass for the future and the policies to be deployed.

Social policy has a vital task in today's world, where the COVID-19 pandemic prevails. It will be a great achievement for our country to develop rights-based policies that will minimize the risk of older adult poverty and enable older adults to age healthily and to benefit from appropriate health, care, and social services in parallel with their needs during the pandemic.

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