



Level of Psychological Stress Experienced among Elderly Population during Covid-19 Pandemic in Barangay Bawang, Buug, Zamboanga Sibugay

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ABSTRACT

The covid-19 pandemic has caused untold fear and suffering for older adults across the world. According to (Lee et al.,2020) emotions such as fear and anger increase the rate of symptom manifestations and maintain high levels of anxiety and stress in vulnerable social groups, such as elderly and those with existing mental disorders during difficult times. This study is a descriptive–quantitative research aimed to measure the level of psychological stress among the elders aging 65 and above in barangay Bawang, Buug, Zamboanga Sibugay involving a total of 47 elderly respondents with 100% completion rate. This study utilized the Perceived Stress Scale, an adopted questionnaire authored by Sheldon and Cohen (1994) and descriptive statistics. The study yielded the following findings: Fifty- three percent (55.3%) of the 47 respondents experienced a moderate level of stress; 12 respondents (or 25.5%) with low stress level; and 9 respondents (or 19.1%) with high stress level. The common stress symptoms reported by the respondents during covid-19 pandemic were fatigue, boredom, depression, tense muscles, sore neck, and back, anxiety, worry, and phobias, and difficulty falling asleep. Based on the results of this study, it is vital to identify individuals like the elderly population who are prone to psychological distress so that with appropriate psychological strategies, techniques and interventions, the mental health of the affected population is preserved and improved most especially in this current crisis.

Keywords : elderly, psychological stress, symptoms of stress, comorbidities, level of psychological stress

INTRODUCTION

THE pandemic of COVID-19 has had a significant impact on the lives of people in drastic ways. Many people were confronted with difficulties that can be stressful, upsetting, and elicited powerful emotions in both adults and children. Public health measures such as social separation were required to control and stop COVID-19 from spreading. However, such measures can impact on the mental health of people in different communities (Center for Chronic Diseases & Prevention, 2021).

Older Filipinos are disproportionately affected by COVID-19. While they constitute less than 8% of the total population, they comprise one-third of all cases and more than half of all deaths related to COVID-19. This underscores what is widely known that older individuals are at a higher fear risk for COVID-19, with greater morbidity and mortality for this disease due to physiological changes associated with aging and potential underlying health issues (WHO, 2020). However, the majority of confirmed cases of death have occurred among the elderly over the age of 60, who were classified as high-

risk groups, and were particularly vulnerable, necessitating more attention. Constitutionally, the elderly were vulnerable to serious infections and death due to reduced immune function and existing health conditions caused by aging (Lee, Jeong, and Yim, 2020).

According to the Center for Disease Control and Prevention (2016), it was estimated that 20% of people aging 55 years or older experienced some type of mental health concerns. The most common conditions include stress, anxiety, severe cognitive impairment, and mood disorders (such as depression and bipolar disorder). Growth in the elderly population means a direct increase in age-related disease such as dementia, and poor mental health outcomes such as depression, stress, anxiety and serious constraints on the quality of life among elderly individuals (Parker, 2015).

A recent study conducted in China highlighted the negative effects of this pandemic. 37.1% of the elderly had experienced depression and anxiety and the psychological response of the elderly aged above 60 years was more apparent as compared to other ages. During the



Covid-19 pandemic, emotions such as anger increase the rate of symptom manifestations and maintain high levels of anxiety and stress in vulnerable social groups, such as elderly and those with existing mental disorders (Lee, Jeong, and Yim, 2020).

The prolonged pandemic situation has caused not only physical damage to individuals but also a collective form of intense stress. Witnessing or experiencing a disaster causes a mental shock, such as anxiety and depression, among individuals and spreads tension and fear like an infection and collectively affects the society. Active treatment and intervention for national mental health has become an urgent need to the extent that psychological and mental quarantine, along with Covid-19 prevention, is a significant and increasingly more serious global concern. Furthermore, there is a need for a psychological support system for mental health and against future disasters caused by epidemics (Lee, Jeong, and Yim, 2020). In this unprecedented crisis that developing countries such as the Philippines are not sufficiently equipped to manage, collaborative efforts of the public and private sectors in conjunction with external aids from developed countries and the World Health Organization may help manage the care of our sick older patients adequately. Measures to strengthen the national healthcare infrastructure across the country are imperative in order to more effectively cope with future epidemics (Buenaventura, et al.).

With the above-mentioned possible effects of pandemic on mental health among elderly and acknowledging how vulnerable this population is, the researchers has come to its form to measure the level of psychological stress among elders in barangay Bawang, Buug, Zamboanga Sibugay who have been experienced stress symptoms during Covid-19 outbreak. As a result, the findings of this study would help promote awareness and understanding of the common stress symptoms experienced by the elderly population, which might be a way to preserve and develop psychological interventions that can improve the mental health of vulnerable groups during the Covid-19 pandemic. With no study in the local scenario, this investigation is believed to fill in the research gap.

METHODOLOGY

Research Design

The study utilized a descriptive-quantitative approach that permits specification of dependent and independent variables. The data were collected based on the records of the barangay in which there are 47 elderly currently living in Barangay Bawang Buug Zamboanga Sibugay thus, these 47 were covered (during the Covid-19 pandemic) as respondents of the study with 100% completion rate. The descriptive-quantitative method was used to measure the level of psychological stress resulting from Covid-19 pandemic among elderly population in Barangay Bawang Buug Zamboanga Sibugay. This study made use of descriptive statistics to perform all the data computa-

tions.

Locale of the Study

This research was carried out in the Buug municipality, specifically in Barangay Bawang, Buug, Zamboanga Sibugay. According to the 2020 Census, it had a population of 1,137 people. This accounted for 2.96 percent of Buug's whole population. Senior persons, those aged 65 and up, make up (4.07) 47 percent of the old dependent population.

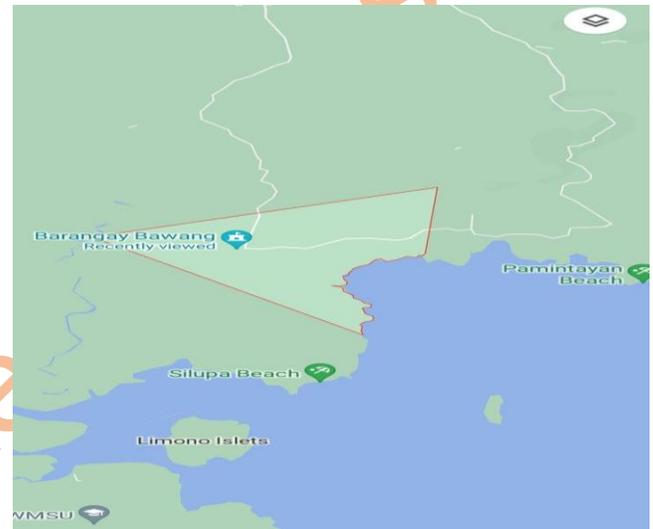


Fig. 1. Map of Barangay Bawang Buug Zamboanga Sibugay

Research Instrument

The instrument used to conduct this study was a guided interview and adopted questionnaire developed by Sheldon and Cohen (1994) which is the Perceived Stress Scale that was made available in public domain.

The questionnaire underwent back translation before it was administered to the respondents. Back translation was used in this study as a quality assurance method. An expert translated the original source language into Visayan language (which is the dominant dialect used by the residents in Bawang), then another language expert translated the local dialect back into the source language literally to convey the meaning of the translation. Moreover, the questionnaires were validated by two experts who had specialization on mental health and health research.

Due to covid-19 pandemic, priority on the safety and welfare of both respondents and researchers was well considered. Thus, all preventative protocols were strictly followed and considered.



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Data Gathering Procedures

The researchers had to follow some procedures in data gathering. First, the researchers wrote a formal letter and hand carried it to the Barangay Captain to explain about the research to be conducted as well as the research objectives. Second, with the approval of the Barangay Captain, the researchers did some home visits to the respondents and explained to them the study's purpose and obtained their consent for participation in the study. Then, data were obtained using the guided interview approach with the presence of their significant others. The gathering was completed with a 100% response or completion rate on November 29 and 30, 2021.

RESULTS AND DISCUSSION

The following tables show the determinants of level of psychological stress experienced among elderly during Covid-19 pandemic in Barangay Bawang Buug Zamboanga Sibugay

TABLE 1
FREQUENCY OF OCCURRENCE OF SYMPTOMS AS REPORTED BY THE RESPONDENTS

	Frequency	Percent
How often do you experience the symptoms?	Everyday	4 8.5
	2-3 times a week	10 21.3
	Once a week	21 44.7
	Once a month	12 25.5
	Total	47 100.0

Table 1 shows the frequency of occurrence of the symptoms wherein four (4) or 8.5% among the 47 participants have experienced symptoms everyday which falls on the severe level. 66% of the respondents which constituted 31 elderly reported that they are experiencing the symptoms every 2-3 times a week and once a week or at moderate level.

Lastly, there are 12 respondents equivalent to 25.5% who have experienced low levels of symptoms as it only occurs once a month.

TABLE 2
ONSET OF SYMPTOMS OF THE RESPONDENTS

	Frequency	Percent
When was the first time you start having the symptoms?	Before Covid	37 78.7
	During Covid	10 21.3
	Total	47 100.0

Table 2 shows the onset of symptoms. Based on the data 37 respondents has already experienced stress before covid which constitutes 78.7%. Only 10 among them or 21.3% have experienced the symptoms during covid. This only implies that even before covid the elders were already manifesting symptoms of stress.

As stated by Team Seniority (2017), crossing the age of 50 and older is a huge achievement and is also a big milestone in your life. However, you need to understand the psychological aspect of the person changes as the age increases. Older adult increases likelihood of experiencing bereavement, an initial experience of numbness (sense of isolation, withdrawal, and denial), and anxiety (sense of insecurity, often irrational fears), anger, pain and guilt.

TABLE 3.1
COMMON PSYCHOLOGICAL STRESS SYMPTOMS REPORTED AMONG ELDERLY DURING THE COVID19 PANDEMIC

Symptoms of Stress	Responses	
	N	Percent
Headache	21	7.4%
Tense muscles, sore neck, and back	32	11.3%
Fatigue	36	12.7%
Anxiety, worry and phobias	25	8.8%
Difficulty falling asleep	25	8.8%
Irritability	15	5.3%
Insomnia	24	8.5%
Bouts of anger/hostility	7	2.5%
Boredom, depression	33	11.7%
Eating too much or too little	13	4.6%
Sadness	25	8.8%
Restlessness, jealousy, and disgust	27	9.5%
Total	283	100.0%
Mean Score	6.02	Moderate Stress

Table 3.1 reveals the data on stress symptoms experienced by the respondents during covid-19 pandemic. With multiple responses, the top five highest response symptoms experienced by the respondents are fatigue (12.7%), boredom (11.7%), tense muscles, sore neck, and back (11.3%), restlessness, jealousy, and disgust (9.5%), and with the same percentage for anxiety, worry, and phobias, difficulty falling asleep, and sadness with (8.8%).

The mean score of 6.02 is indicative of the fact that the stress level



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among the respondents is only moderate stress. Moderate level of stress is equivalent to a reported of five to eight (5-8) stress symptoms from the respondents according to Sheldon and Cohen (1994).

TABLE 3.2
SUMMARY OF STRESS LEVEL EXPERIENCED BY THE ELDERLY
DURING THE COVID-19 PANDEMIC

Perceived Stress Scale: Low Stress- 1-4; Moderate Stress-5-8; High Stress- 9-12

Stress Scale	N	Percent
Low	12	25.5
Moderate	26	55.3
High	9	19.1
Total	47	100.0

Table 3.2 displays the summary of data on the perceived stress scale of the respondents during Covid-19. According to the data, majority of the 47 respondents experienced a moderate stress level with 35 respondents (or 55.3%); 12 respondents (or 25.5%) with low stress level; and 9 respondents (or 19.1%) with high stress level.

Based on the above data it can be said that the respondents in general have experienced a moderate stress level as bared in the previous table (Table 3.1) in which the mean score of **6.02** justifies the respondents moderate stress level.

CONCLUSION

On the basis of the above findings, the respondents were mostly females, who belonged to the age group 65-88 years, married and reported no comorbidities. Most common symptoms of stress they experienced were fatigue, boredom, tense muscles, sore neck, and back, restlessness, jealousy, and disgust, and with the same percentage for anxiety, worry, and phobias, difficulty falling asleep, and sadness. Majority of the elderly respondents reported that symptoms were usually experienced once in a month. Overall, respondents reported moderate level of stress during this pandemic outbreak. The mental health among elderly is an increasing important issue during this time of pandemic that needs to be structurely addressed. In the inadequacy of programs and support in promoting and protecting the mental health of the elderly population may result to increasing number of disabled persons winding up on the streets and higher country's healthcare expenditures on the side of the government.

RECOMMENDATIONS

Based on the conclusions of this study, in the current crisis, it is vital to identify individuals like the elderly population who are prone to psychological distress so that with appropriate assessment tools and

holistic interventions which also focuses on mental health promotion and prevention, the unique needs of the affected population will be holistically addressed. Policy makers and health care workers must be creative and effective in creating guidelines and programs specific for strengthening the psychological health among elderly to the extent possible within the limited resources available in the Philippines at the same time reinforce the existing programs that will help the elder population cope up with the crisis. Importantly, awareness is the first step to inclusivity. Elder population must be educated and utilized the services made available for them like the crisis hotline and Barangay Health Emergency Response Team (BHERT) every time they will feel anxiety and disturbing fear.

Making such services accessible to the vulnerable population will most likely prevent aggravation of the problems thus complications can be preventive leaving no horrible consequences when this pandemic end.

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