

Beyond the pandemic: understanding the perceived changes in mental health of the elderly population

Herdian^{1,2}, Dyah Siti Septiningsih¹, Suci Ratna Estria³, Zalik Nuryana⁴, Rudy Yuniawati^{2,5},
Nissa Tarnoto^{2,5}

¹Faculty of Psychology, Universitas Muhammadiyah Purwokerto, Purwokerto, Indonesia

²School of Psychology, Nanjing Normal University, Nanjing, China

³Faculty of Health Sciences, Universitas Muhammadiyah Purwokerto, Purwokerto, Indonesia

⁴Faculty of Islamic Studies, Universitas Ahmad Dahlan, Yogyakarta, Indonesia

⁵Faculty of Psychology, Universitas Ahmad Dahlan, Yogyakarta, Indonesia

Article Info

Article history:

Received May 2, 2023

Revised Jul 17, 2023

Accepted Jul 27, 2023

Keywords:

Coping mechanisms

COVID-19

Elderly population

Mental health

Religious coping

ABSTRACT

This study aimed to describe the mental health of the elderly before and after the COVID-19 outbreak using a qualitative approach. Ten elderly people volunteered to participate in offline semi-structured interviews. The data was analyzed using the interpretative phenomenological analysis (IPA) technique. The results of our study mentioned the differences in the mental health of the elderly during the COVID-19 outbreak and after the COVID-19 outbreak. The elderly felt the difference in emotional terms, such as being more relieved and happier because activities returned to normal. The elderly feel calmer when using religion as religious coping to overcome psychological problems that arise during the COVID-19 outbreak. During the COVID-19 outbreak, elderly people still working also feel the impact on the family's economy, which compounds the problem. Excessive coverage on social media also helped make the elderly more afraid of COVID-19. The study's results can help improve older people's mental health after COVID-19 by understanding their experiences and finding good ways to cope. It suggests that future research should look at specific ways to support older people's mental health, taking into account their special challenges and the role of social media in causing fear and worry about COVID-19.

This is an open access article under the [CC BY-SA](#) license.



Corresponding Author:

Herdian

Faculty of Psychology, Universitas Muhammadiyah Purwokerto

St. KH. Ahmad Dahlan, Dusun III, Dukuhwaluh, Kembaran, Banyumas, Central Java 53182, Indonesia

Email: herdian@ump.ac.id

1. INTRODUCTION

Since the beginning of 2020, COVID-19 has begun to spread to all countries in the world, including Indonesia [1]. Based on a government decree, COVID-19 was finally declared a pandemic starting in March 2020 and is still ongoing until November 2022. The government's efforts in tackling the spread of COVID-19 have used various systems, including implementing large-scale social restrictions (PSBB), transitional PSBB, and emergency enforcement of restrictions on community activities (PPKM) to four-level PPKM. However, currently, the implementation of the four-level PPKM is not as strict as before, community activities can be carried out freely but still use looser health protocols. The COVID-19 pandemic has had global impacts such as economic, psychological, and environmental [2]–[4]. In particular, research has proven the impact of COVID-19 on the mental health of all populations in the world. More specifically, the impact of the COVID-19 pandemic on mental health is felt more severely in the elderly population. Studies suggest that the elderly population may be more severely affected by COVID-19 infection as the virus may exacerbate

symptoms of pre-existing conditions/diseases [5]. Even according to information obtained from the COVID-19 handling task force the elderly have risk factors up to 60 times more severe than children [6].

Before the COVID-19 pandemic, mental health in the elderly was of particular concern to researchers. As a research report says that 68.4% of 54 elderly people in the mental health category are disturbed [7]. The elderly also face psychological problems, namely the emergence of anxiety in the face of death [8]–[10]. A cross-sectional study states that there are 25% of 40 elderly people experience poor mental health, 30% have poor relationships, and elderly women tend to have good mental health compared to elderly men [11]. The mental health problems of the elderly that occurred before the COVID-19 pandemic provide a basic understanding to be compared after COVID-19. Because the COVID-19 pandemic can affect or exacerbate psychiatric disorders. Throughout the COVID-19 pandemic, mental health problems in the elderly commonly occur, such as anxiety and social isolation [12], which has an impact on loneliness. In particular, another study on 86 elderly aged 60 to 90 showed that 55.8% had high-stress symptoms, 18.6% anxiety symptoms, 16.3% depressive symptoms, and 5.82% moderate to severe loneliness [13]. Anxiety, changes in sleep patterns [14], [15], eating patterns [16], [17], pressure due to covid [18], difficulty concentrating [19], [20], boredom [21], [22], stress [23], [24], and psychosomatic disorders [25].

The factors that influence the mental health of the elderly during the COVID-19 pandemic are quite diverse. In particular, the study of Lábadi *et al.* [26] on 589 women aged 60-83 years in Hungary found that maladaptive emotion regulation strategies, intolerance of uncertainty, fear of contamination, and loneliness affect mental health. Reinforced by another study on 318 elderly subjects, social support, and loneliness impact mental health [27]. A literature review study found that a lack of social and emotional support affects the mental health of the elderly [28]–[30]. Besides that, the elderly feel stressed and anxious, have difficulty sleeping, and feel lonely because they are far from their children, family, and loved ones [31]. Based on the above background, this study focuses on the health of the elderly before and after the COVID-19 outbreak in Indonesia. Although the pandemic is still in effect in Indonesia, physical activity restrictions have been relaxed. As instructed by the Indonesian president in May 2022, people are allowed to wear masks in open areas. However, the elderly are still advised to keep wearing masks. So, this study aims to describe the mental health conditions of the elderly before and after the COVID-19 outbreak.

2. RESEARCH METHOD

2.1. Research design and participants

This research uses a qualitative approach to obtain a comprehensive picture of mental health. qualitative research will collect interview data to obtain the psychological dynamics of mental health before and after the COVID-19 outbreak. this study adopts a phenomenological method. the ethical clearance for this research has been granted, with the approval number kepk/ump/01/xi/2023.

Phenomenology is a strategy of inquiry in which researchers identify the essence of the human experience of phenomena as described by participants [32]. It focuses on subjective experiences and tries to understand events or phenomena experienced by individuals. The participants in this study amounted to 10 elderly people consisting of two male and eight female. The age of participants was dominated by 70-75 years old. The last education of the participants was quite diverse but quite representative of all levels of education. More details about participant information are shown in Table 1.

Table 1. Participants

Demographics		N (%)	(N=10)
Age	60-65	1	10
	66-69	3	30
	70-75	5	50
	76>	1	10
Sex	Male	2	20
	Female	8	80
Education level	Elementary school	4	40
	Junior high school	2	20
	Senior high school	3	30
	Diploma	1	10

2.2. Measurement

The data collection tool for qualitative research uses an interview guide. It contains questions that aim to explore the mental health status of the elderly. The interview guide was compiled based on the theory of veit & ware [33], which says that mental health is measured based on two positive dimensions represented by Psychological well-being and a negative dimension, namely psychological distress. Question points in the interview guide are in Table 2.

Table 2. Interview guide

No.	Question
1	How did you feel during and after the COVID-19 outbreak?
2	What makes you feel peaceful and calm during and after the COVID-19 outbreak
3	What made you happy during and after the COVID-19 outbreak
4	What made you feel particularly sad or unsettled during and after the COVID-19 outbreak

2.3. Analysis

In this study, qualitative data analysis was carried out using the interpretative phenomenological analysis (IPA) technique. The IPA technique is considered appropriate because it describes how an individual makes meaning of important experiences in his life in a natural setting [19]. The stages of the IPA technique include i) reading the transcripts repeatedly; ii) initial noting; checking the meaning of the words contained and the language used in the exploratory comments stage (descriptive comments, linguistic comments, and conceptual comments); iii) developing emergent themes; iv) looking for similar relationships between themes; v) moving on to the next case; vi) looking for similar patterns between cases; vii) describing the main theme. The entire analysis process used the help of the ATLAS application program.

3. RESULTS AND DISCUSSION

This study aims to describe the mental health conditions of the elderly during and after the COVID-19 outbreak. The results of the analysis describe how psychological dynamics during the COVID-19 outbreak and after the COVID-19 outbreak. The analysis results regarding mental health during the COVID-19 outbreak are documented in Figure 1. At the same time, the analysis results regarding mental health after the COVID-19 outbreak are documented in Figure 2.

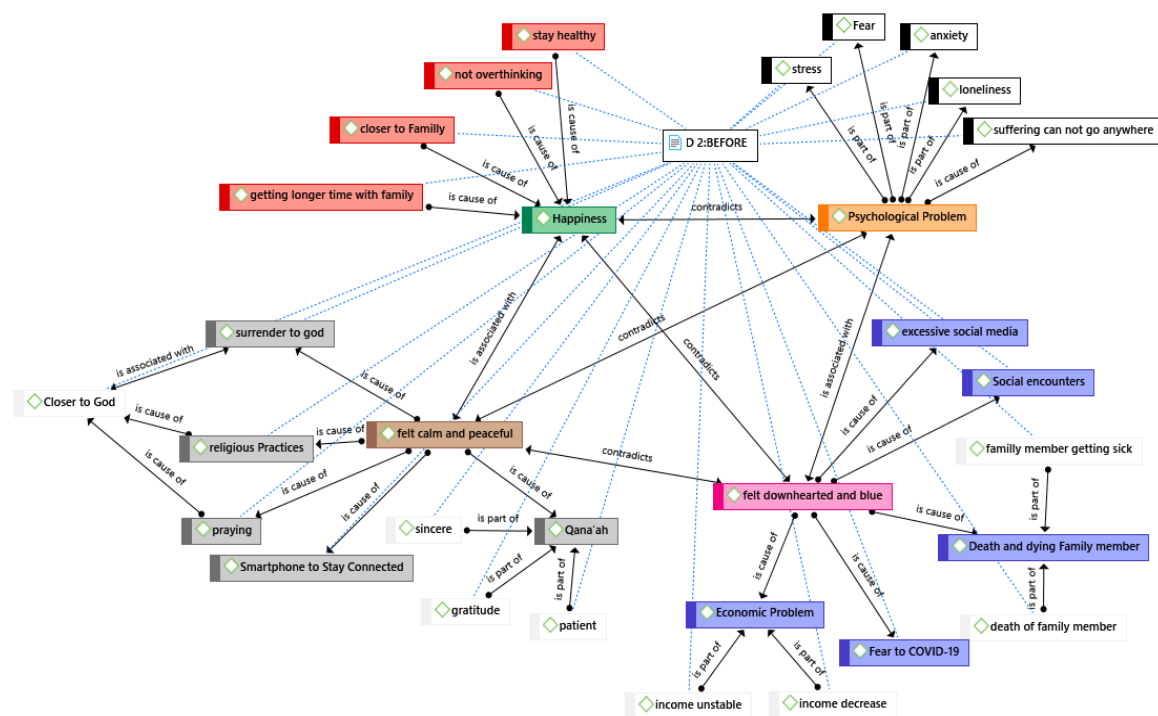


Figure 1. Psychological dynamics of the elderly during the COVID-19

This research is explained based on the main questions during and after the COVID-19: Happiness, feeling calm and peaceful, feeling downhearted and blue, and psychological problems. Research has shown that the COVID-19 outbreak has led to a decline in happiness levels among individuals due to factors such as social isolation, fear of infection, and economic uncertainties [34]. The analysis of happiness levels can provide insights into the overall emotional state of individuals during the outbreak and guide interventions to

promote well-being. Feelings of calm and peace are also essential to consider in the analysis of psychological dynamics during and after the COVID-19 outbreak. The pandemic has caused significant stress and anxiety among individuals, with feelings of uncertainty and fear dominating daily life. Understanding the factors that contribute to feelings of calm and peace, such as effective coping strategies and social support, can help identify interventions that promote psychological well-being [35]. Additionally, analyzing the impact of relaxation techniques, mindfulness practices, and stress reduction strategies can provide valuable insights into fostering calmness and peace during such challenging times.

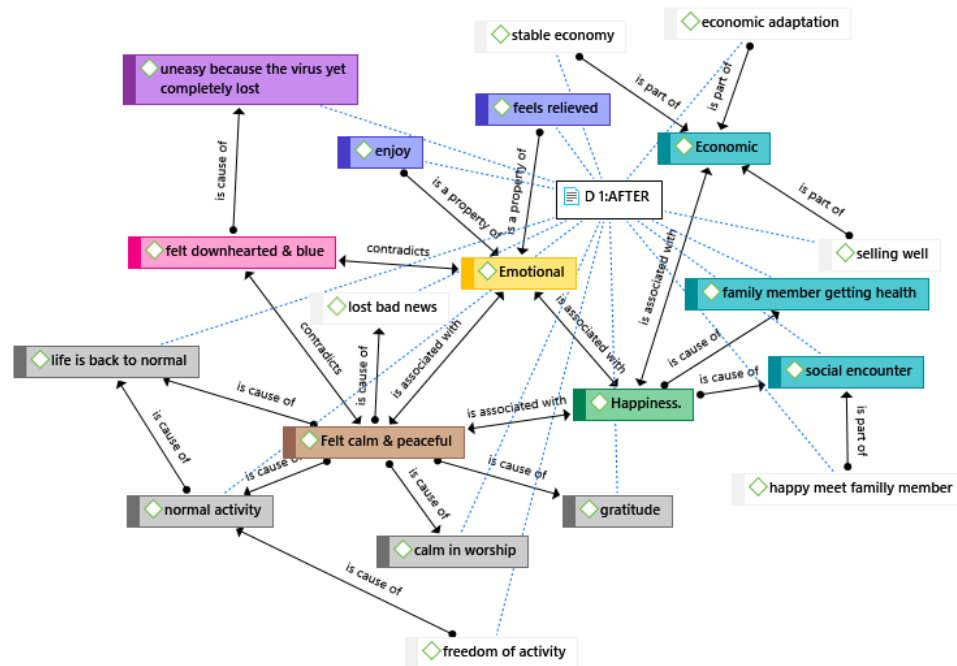


Figure 2. Psychological dynamics of the elderly after the COVID-19 outbreak

On the other hand, it is necessary to address the feelings of sadness and depression that individuals experience during and after the COVID-19 outbreak. The pandemic has disrupted daily routines, caused grief and loss, and increased the prevalence of mental health disorders. Research has indicated a rise in depressive symptoms and rates of clinical depression during the pandemic [36]. Analyzing the factors associated with sadness and depression, such as social isolation, financial difficulties, and the impact of lockdown measures, can inform mental health interventions and guide resources towards those most in need of support. Furthermore, the pandemic has resulted in significant psychological distress among older adults, including feelings of loneliness, anxiety, and uncertainty about their health and well-being [37]. Analyzing the specific psychological challenges faced by the elderly population can inform targeted interventions, support systems, and healthcare services tailored to meet their unique needs.

3.1. Happiness during COVID-19

Happiness is a term that describes individual happiness. During the COVID-19 outbreak, elderly happiness is related to getting longer time with family, meaning that when physical distancing is enforced, it makes more time with family. Thus, making the elderly happy. In addition, happiness is caused by being closer to family, not overthinking, and staying healthy. The following interview excerpt represents the theme of happiness.

"More time with family." (Participant 9)

"So close and harmonious with the family, including being together with children and grandchildren." (Participant 7)

"Do not think about it too much. Just live..." (Participant 10)

3.2. Happiness after COVID-19

After the COVID-19 outbreak, happiness was influenced by social encounters with family. The elderly feel happy when given the freedom to meet directly with their children and grandchildren. The following quote represents a social encounter.

"I am happy because I can reunite with my children and grandchildren. I can visit my children and grandchildren." (Participant 10)

Increasing happiness in the elderly is important during the COVID-19 outbreak. Our research suggests that the COVID-19 outbreak has the benefit of keeping older people together with their families much longer, especially for older people with extended families. In addition, playing with grandchildren and not thinking too much about the problems that arise during the COVID-19 outbreak makes the elderly detached from the problem of unhappiness. Therefore, family support is important for the elderly [38]. In line with other research, the COVID-19 pandemic positively impacts the interaction between parents and children, which is quite long.

3.3. Felt calm and peaceful during COVID-19

The theme of feeling calm and peaceful is caused by surrender to God, religious practices, smartphone use to stay connected, and qana'ah. The way the elderly feel calm and peaceful is related to their beliefs, namely the use of religion as coping, by surrendering to God, carrying out worship activities and praying. In addition, the use of smartphones is a way to stay connected with their families. The following is an excerpt from the interview:

"I put my trust in Allah because the covid 19 virus is also a creature of Allah..." (Participant 1)

"Worship and continue to pray to Allah..." (Participant 3)

"Yes, you can call, or video call your children and grandchildren, the important thing is to be healthy..." (Participant 6)

3.4. Felt calm and peaceful after COVID-19

After the COVID-19 outbreak, the elderly feel calm and peaceful because life is back to normal and normal activity. This is felt by the elderly after the COVID-19 outbreak, which created "abnormal" activities or physical restrictions. In addition, the return to normal activities makes the elderly calmer in carrying out their worship. The elderly also feel grateful after the COVID-19 outbreak because their business has become smooth again, and the economy is normal. The following is a representative quote from felt calm and peaceful:

"Normal life again and calmer." (Participant 8)

"Free to move normally." (Participant 9)

"Worship makes you calm. Keep praying..." (Participant 10)

"Business is running smoothly, and income returns to the initial turnover." (Participant 4)

During the COVID-19 outbreak, the efforts made by the elderly to continue to feel calm and peaceful were worship activities. We call this religious coping a form of coping mechanism that utilizes religion. Religious people will generally use religious coping in dealing with difficult times. Many previous studies have linked religion to dealing with problems during the COVID-19 outbreak [39], [40]. Even the elderly are motivated to worship during a pandemic. Dismaying that after the COVID-19 outbreak, feelings are calmer because they return to normal life, especially in activities such as worship and the economy. Returning to normal activities will restore the peace of the elderly.

3.5. Felt downhearted, and blue during COVID-19

The theme of felt downhearted and blue arises due to many things, such as excessive social media or excessive coverage by social media about COVID-19, Social encounters or social encounters related to children and grandchildren and people around who are not allowed during the pandemic, death and dying

family members, fear of COVID-19, and economic problems. Here is a quote representing the theme of felt down heart and blue.

"It is sad when you cannot meet your children and grandchildren. You can only meet them through video calls." (Participant 1)

"Many of the victims who died included some relatives." (Participant 2)

"I was afraid of contracting the virus because the cases were high at that time." (Participant 7)

"Decreased turnover, confused about income." (Participant 4)

3.6. Felt downhearted, and blue after COVID-19

Besides the elderly feeling that life is back to normal, the elderly still do not feel full of peace and tranquility. This is felt because the COVID-19 virus has not completely disappeared. Here is the quote:

"I am not calm if someone has a virus. I am happy when the virus is gone." (Participant 6)

During the COVID-19 outbreak, the peace and tranquility of the elderly are troubled due to the death of relatives, social distancing, and economic problems. This is common in all populations, but it may be felt by the elderly differently from other populations. This is a limitation of our research. After the COVID-19 outbreak, the elderly are not completely calm because the virus has not completely disappeared.

3.7. Psychological problem/ emotional during COVID-19

Psychological problems during the Covid pandemic are related to psychological problems. The psychological problem is that stress, fear, anxiety, loneliness, and suffering cannot go anywhere. The following quotes represent psychological problems during the COVID-19 outbreak:

"I feel very miserable because I cannot go anywhere... and I am very afraid if I want to do something because I think I am afraid of what is wrong." (Participant 1)

"Stress, fear, anxiety, due to exaggerated news on social media" (Participant 2)

"Alone, lonely, anxious..." (Participant 4)

3.8. Psychological problem/ emotional after COVID-19

Differences arise after the COVID-19 outbreak, such as enjoyment or happiness, because the virus is considered gone, although not completely. In addition, it feels relieved because it can return to normal. The following are representative quotes of emotions after the COVID-19 outbreak.

"Right now, I feel relieved because there is no virus, I feel relieved again." (Participant 1)

"Alhamdulillah, I can go out and socialize with my surroundings." (Participant 2)

"I am happy because there are no more calamities and grateful to Allah, for His will, I am still given a long life even though I have been hit by COVID-19." (Participant 3)

The phenomenon of psychological or emotional problems in the elderly has been widely proven by previous studies [41]–[43], especially in elderly populations that are vulnerable to psychological problems. In general, loneliness in the elderly is a developmental period problem, but a literature review found increased levels of loneliness during the pandemic compared to after the pandemic [44]. The strength of our study is that it captures the meaning of a common phenomenon that occurs in the elderly during the COVID-19 outbreak and after the COVID-19 outbreak. Qualitatively, we found the differences felt by the elderly. After COVID-19, the elderly are more relieved and happier with the return to normal activities. So, the results of this study have implications for policies to improve mental health in the elderly after the COVID-19 outbreak. On the other hand, our research is inseparable from limitations in data collection and capturing the phenomena that arise in the elderly. One of the limitations of this study is the difficulty of obtaining more comprehensive and in-depth information because participants have difficulty describing broadly what they mean, so this study does not explain the phenomenon of mental health during the covid outbreak and after the covid outbreak. We suggest that future research use various methods or approaches as well as special skills to interview the elderly so that the limitations in this study can be considered for future research.

4. CONCLUSION

The COVID-19 outbreak affects all populations, especially the elderly. Previous studies have described how the mental health of older adults has been affected by the COVID-19 outbreak. Our study offers an overview of the mental health of older adults during the COVID-19 pandemic and after the COVID-19 pandemic. The results of our study mention the differences in the mental health of the elderly during the COVID-19 outbreak and after the COVID-19 outbreak. Elderly people feel the difference in emotional terms, such as being more relieved and happier because activities return to normal. The elderly feel calmer when using religion as religious coping to overcome psychological problems that arise during the COVID-19 outbreak. During the COVID-19 outbreak, elderly people still working also feel the impact on the family's economy, which compounds the problem. Excessive coverage on social media also helped make the elderly more afraid of COVID-19. The results of this study can be considered to promote the mental health of the elderly after the COVID-19 outbreak. In addition, we recommend further research in the future to further explore the mental health problems of the elderly after the COVID-19 outbreak.

ACKNOWLEDGEMENTS

The authors would like to thank Faculty of Psychology, Universitas Muhammadiyah Purwokerto, Indonesia, School of Psychology, Nanjing Normal University, China, Faculty of Health Sciences, Universitas Muhammadiyah Purwokerto, Faculty of Islamic Studies and Faculty of Psychology, Universitas Ahmad Dahlan, Indonesia for the granted supports. This article was funded by Universitas Muhammadiyah Purwokerto, Indonesia, number [A.11-III/852-S.Pj./LPPM/XII/2022], December 27, 2022.





REFERENCES

- [1] K. Syuhada, A. Wibisono, A. Hakim, and F. Addini, "COVID-19 risk data during lockdown-like policy in Indonesia," *Data in Brief*, 2021, doi: 10.1016/j.dib.2021.106801.
- [2] J. Hiscott *et al.*, "The global impact of the coronavirus pandemic," *Cytokine & Growth Factor Reviews*, vol. 53, pp. 1–9, Jun. 2020, doi: 10.1016/j.cytogfr.2020.05.010.
- [3] Z. Nuryana, W. Xu, L. Kurniawan, N. Sutanti, S. A. Makruf, and I. Nurcahyati, "Student stress and mental health during online learning: Potential for post-COVID-19 school curriculum development," *Comprehensive Psychoneuroendocrinology*, vol. 14, p. 100184, May 2023, doi: 10.1016/j.cpnec.2023.100184.
- [4] H. Herdian, C. Qingrong, and Z. Nuryana, "Unlocking the power of growth mindset: strategies for enhancing mental health and well-being among college students during COVID-19," *Current Psychology*, pp. 1–11, Nov. 2023, doi: 10.1007/s12144-023-05342-1.
- [5] E. E. Brown, S. Kumar, T. K. Rajji, B. G. Pollock, and B. H. Mulsant, "Anticipating and Mitigating the Impact of the COVID-19 Pandemic on Alzheimer's Disease and Related Dementias," *American Journal of Geriatric Psychiatry*, vol. 28, no. 7, pp. 712–721, 2020, doi: 10.1016/j.jagp.2020.04.010.
- [6] Covid.go.id, "Key to reducing COVID-19 mortality rate in the elderly in Indonesian: Kunci Tekan Angka Kematian COVID-19 pada Lansia," Nov. 2021. <https://covid19.go.id/p/berita/kunci-tekan-angka-kematian-covid-19-pada-lansia> (accessed Jan. 04, 2022).
- [7] A. Alini, "The relationship of self-compassion to mental health status in the elderly in the village of air tiris, kampar sub-district," (in Indonesian), *Jurnal Ners*, vol. 4, no. 1, pp. 1–6, Apr. 2020, doi: 10.31004/jn.v4i1.668.
- [8] S. Abu-Kaf, O. Nakash, T. Hayat, and M. Cohen, "Social support and psychological distress among the Bedouin Arab elderly in Israel: The moderating role of gender," *International Journal of Environmental Research and Public Health*, 2022, doi: 10.3390/ijerph19074358.
- [9] M. Poudel *et al.*, "Morbidity, health problems, health care seeking and utilization behaviour among elderly residing on urban areas of eastern Nepal: A cross-sectional study," *PLoS ONE*, 2022, doi: 10.1371/journal.pone.0273101.
- [10] T. V. Reshetova, E. S. Lapteva, V. V. Lukashkova, and A. V. Reshetov, "The problems of older people and directions of medical, social and psychological support during the COVID-19 pandemic," *Advances in gerontology = Uspekhi gerontologii*, 2021, doi: 10.34922/ae.2021.34.5.003.
- [11] E. Sutikno, "Factors associated with mental health disorders in the elderly," (in Indonesian), *Jurnal Wiyata*, vol. 2, no. 1, pp. 1–8, 2015, doi: 10.56710/wiyata.v2i1.26.
- [12] M. Lumbantoruan, A. Sirait, and J. Aritonang, "Assessment of elderly anxiety during the COVID-19 pandemic," (in Indonesian), *Ahmar Metastasis Health Journal*, vol. 1, no. 2, pp. 43–48, Sep. 2021, doi: 10.53770/amhj.v1i2.48.
- [13] D. M. Schütz, L. Borges, H. G. Ferreira, and T. Q. Irigaray, "Relationship between loneliness and mental health indicators in the elderly during the COVID-19 pandemic," *Psico-USF*, vol. 26, no. Special Issue, pp. 125–138, 2021, doi: 10.1590/1413-8271202126nesp12.
- [14] M. E. Petrov *et al.*, "Impact of the COVID-19 pandemic on change in sleep patterns in an exploratory, cross-sectional online sample of 79 countries," *Sleep Health*, 2021, doi: 10.1016/j.sleh.2021.05.007.
- [15] R. Gupta *et al.*, "Changes in sleep pattern and sleep quality during COVID-19 lockdown," *Indian Journal of Psychiatry*, 2020, doi: 10.4103/psychiatry.IndianJPsychiatry_523_20.
- [16] H. S. Agurto, A. L. Alcantara-Diaz, E. Espinet-Coll, and C. J. Toro-Huamanchumo, "Eating habits, lifestyle behaviors and stress during the COVID-19 pandemic quarantine among Peruvian adults," *PeerJ*, 2021, doi: 10.7717/peerj.11431.
- [17] B. Mahar, J. Warsi, and T. Shah, "Eating disorders and eating pattern during COVID-19 pandemic: A short bulletin," *Journal of the Liaquat University of Medical and Health Sciences*, 2021, doi: 10.22442/jlumhs.2021.00776.
- [18] S. Bambi *et al.*, "Pressure injuries due to personal protective equipment in COVID-19 critical care units," *American Journal of Critical Care*, 2021, doi: 10.4037/ajcc.2021178.
- [19] C. Son, S. Hegde, A. Smith, X. Wang, and F. Sasangohar, "Effects of COVID-19 on college students' mental health in the United States: Interview survey study," *Journal of Medical Internet Research*, 2020, doi: 10.2196/21279.
- [20] E. Delvecchio *et al.*, "COVID-19: Psychological symptoms and coping strategies in preschoolers, schoolchildren, and adolescents," *Journal of Applied Developmental Psychology*, 2022, doi: 10.1016/j.appdev.2022.101390.




- [21] E. H. Weybright, E. L. Doering, and S. Perone, "Difficulties with emotion regulation during COVID-19 and associations with boredom in college students," *Behavioral Sciences*, 2022, doi: 10.3390/bs12080296.
- [22] J. Boylan, P. Seli, A. A. Scholer, and J. Danckert, "Boredom in the COVID-19 pandemic: Trait boredom proneness, the desire to act, and rule-breaking," *Personality and Individual Differences*, 2021, doi: 10.1016/j.paid.2020.110387.
- [23] S. Gundogan, "The relationship of COVID-19 student stress with school burnout, depression and subjective well-being: adaptation of the COVID-19 student stress scale into Turkish," *Asia-Pacific Education Researcher*, 2023, doi: 10.1007/s40299-021-00641-2.
- [24] J. S. Ashby, K. G. Rice, I. A. Kira, and J. Davari, "The relationship of COVID-19 traumatic stress, cumulative trauma, and race to posttraumatic stress disorder symptoms," *Journal of Community Psychology*, 2022, doi: 10.1002/jcop.22762.
- [25] S. M. Ilpaj and N. Nurwati, "Analisis pengaruh tingkat kematian akibat COVID-19 terhadap kesehatan mental masyarakat di Indonesia," *Focus : Jurnal Pekerjaan Sosial*, vol. 3, no. 1, p. 16, Aug. 2020, doi: 10.24198/focus.v3i1.28123.
- [26] B. Lábadí et al., "Psychological well-being and coping strategies of elderly people during the COVID-19 pandemic in Hungary," *Aging and Mental Health*, vol. 26, no. 3, pp. 570–577, 2022, doi: 10.1080/13607863.2021.1902469.
- [27] J. Health Sci Surveillance, R. Sys ; Zakizadeh, M. Bahreini, A. Farhadi, and R. Bagherzadeh, "The predictors of mental health in the Iranian elderly: the role of social support and loneliness," *School of Nursing and Midwifery, Bushehr University of Medical Sciences, Bushehr, Iran*, 2022, doi: 10.30476/jhss.2021.92146.1312.
- [28] K. B. J. and M. K., "Predictors of psychological distress among old aged," *Innovare Journal of Education*, 2022, doi: 10.22159/ijoe.2022v10i3.44730.
- [29] M. F. Li and Y. Shih, "Effect of social support on the spiritual health of older adults: evaluation of the mediation effect," *Bulletin of Educational Psychology*, 2022, doi: 10.6251/BEP.202209_54(1).0005.
- [30] M. Terraneo, "The effect of material and social deprivation on well-being of elderly in Europe," *International Journal of Health Services*, 2021, doi: 10.1177/0020731420981856.
- [31] A. G. M. Kiroh, B. H. R. Kairupan, and H. Munayang, "Mental health in older adults during the COVID-19 pandemic," (in Indonesia), *Jurnal Biomedik:JBM*, vol. 13, no. 3, p. 338, 2021, doi: 10.35790/jbm.v13i3.35408.
- [32] J. W. Creswell, *Research design: Qualitative, quantitative, and mixed methods approaches*. California: SAGE Publications, 2009.
- [33] C. T. Veit and J. E. Ware, "The structure of psychological distress and well-being in general populations," *Journal of Consulting and Clinical Psychology*, vol. 51, no. 5, pp. 730–742, 1983, doi: 10.1037/0022-006X.51.5.730.
- [34] A. Moghanibashi-Mansourieh, "Assessing the anxiety level of Iranian general population during COVID-19 outbreak," *Asian Journal of Psychiatry*, vol. 51, p. 102076, 2020.
- [35] G. J. G. Asmundson and S. Taylor, "How health anxiety influences responses to viral outbreaks like COVID-19: What all decision-makers, health authorities, and health care professionals need to know," *Journal of Anxiety Disorders*. 2020, doi: 10.1016/j.janxdis.2020.102211.
- [36] M. Pierce et al., "Mental health before and during the COVID-19 pandemic: a longitudinal probability sample survey of the UK population," *The Lancet Psychiatry*, vol. 7, no. 10, pp. 883–892, Oct. 2020, doi: 10.1016/S2215-0366(20)30308-4.
- [37] R. Armitage and L. B. Nellums, "COVID-19 and the consequences of isolating the elderly," *The Lancet Public Health*, vol. 5, no. 5, p. e256, 2020, doi: 10.1016/S2468-2667(20)30061-X.
- [38] D. Krisnatuti and E. W. Latifah, "The influence of socioeconomic factors, stressors, and elderly coping strategies on elderly stress during the COVID-19 pandemic," (in Indonesia), *Jurnal Ilmu Keluarga dan Konsumen*, vol. 14, no. 3, pp. 241–254, 2021, doi: 10.24156/jikk.2021.14.3.241.
- [39] F. A. Mahamid and D. Bdier, "The association between positive religious coping, perceived stress, and depressive symptoms during the spread of coronavirus (COVID-19) among a sample of adults in Palestine: across sectional study," *Journal of Religion and Health*, vol. 60, no. 1, pp. 34–49, 2021, doi: 10.1007/s10943-020-01121-5.
- [40] M. Rababa, A. A. Hayajneh, and W. Bani-Issa, "Correction to: association of death anxiety with spiritual well-being and religious coping in older adults during the COVID-19 Pandemic," *Journal of Religion and Health*, vol. 60, no. 1, p. 64, 2021, doi: 10.1007/s10943-021-01181-1.
- [41] H. Herdian, S. Suwanti, and S. R. Estria, "Psychological wellbeing and psychological distress in the elderly during the COVID-19 pandemic," *Consortium Psychiatricum*, vol. 3, no. 2, pp. 88–96, 2022, doi: 10.17816/cp176.
- [42] J. A. Elharake, F. Akbar, A. A. Malik, W. Gilliam, and S. B. Omer, "Mental health impact of COVID-19 among children and college students: a systematic review," *Child Psychiatry and Human Development*, pp. 1–13, 2022, doi: 10.1007/s10578-021-01297-1.
- [43] L. García-Fernández et al., "Mental health impact of COVID-19 pandemic on Spanish healthcare workers," *Psychological Medicine*, vol. 52, no. 1, pp. 195–197, 2022, doi: 10.1017/S0033291720002019.
- [44] S. Bhutani and B. Greenwald, "Loneliness in the elderly during the COVID-19 pandemic: a literature review in preparation for a future study," *The American Journal of Geriatric Psychiatry*, vol. 29, no. 4, Supplement, pp. S87–S88, 2021, doi: 10.1016/j.jagp.2021.01.081.

BIOGRAPHIES OF AUTHORS






Herdian     is an assistant professor at Psychology Faculty, Universitas Muhammadiyah Purwokerto, Central Java, Indonesia. His current research interests include mental health, psychological wellbeing, loneliness, grit, growth mindset. He can be contacted at email: herdian@ump.ac.id.






Dyah Siti Septiningsih    is an Assoc. professor at Psychology Faculty, Universitas Muhammadiyah Purwokerto, Central Java, Indonesia. His current research interests include parenting, loneliness, successful aging, sex education, and happiness. He can be contacted at dyahsitiseptiningsih@ump.ac.id.






Suci Ratna Estria    is an assistant professor at Faculty of Health Sciences, Universitas Muhammadiyah Purwokerto, Central Java, Indonesia. Her research interests are art mental health intervention, communication, basic nursing, psychoeducation, Psychiatric nursing. She can be contacted at email: sucicaca1@gmail.com.






Zalik Nuryana    is an assistant professor at Universitas Ahmad Dahlan Indonesia, Islamic Education department. He is currently a Ph.D. student in School of Education Science, Nanjing Normal University China. His areas of interest include curriculum development, teaching method, and online learning. He can be contacted at zalik.nuryana@pai.uad.ac.id; zalik@ascee.org; zalik@ieee.org.



Rudy Yuniawati    is lecturer in Universitas Ahmad Dahlan, Yogyakarta as well as a psychologist. She is pursuing her doctoral degree in School of Psychology, Nanjing Normal University, China. Her interest is mainly about educational psychology, positive psychology, and school well-being. She can be contacted at email: rudy.yuniawati@psy.uad.ac.id.



Nissa Tarnoto    Nissa Tarnoto is a psychologist working as a lecturer in Universitas Ahmad Dahlan. Currently, she is pursuing her doctoral degree in School of Psychology, Nanjing Normal University, China. Her interest is mainly educational psychology, social psychology and communication technology towards behavior. She can be contacted at email: nissa.tarnoto@psy.uad.ac.id.