

The Need for a Model of Accompanying Family Members for Elderly with Covid-19 During Isolation at Sembiring Delitua Public Hospital North Sumatera, Indonesia to Avoid Anxiety

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ABSTRACT: *Background:* Older adults are a population more prone to anxiety when placed in isolation in hospitals because of COVID-19 exposure. This worry may jeopardize the mental well-being of senior Covid-19 patients. *Aim:* To preserve mental health in older individuals with Covid-19, anxiety treatment is essential. Providing support to family members during hospital isolation can help older patients overcome their fear. *Methods:* The investigators employed various methodologies to conduct the investigation. We developed a retrospective model because we couldn't conduct testing. The study examined isolated elderly patients who received assistance versus those who did not. Each group in the quantitative study included 11 elderly individuals, with the case group comprising 10 nurses and 11 companions. *Results:* The study revealed that older individuals who received support from their children during isolation experienced less anxiety compared to those who did not receive such assistance, the difference is significant. *Conclusion:* Older adults with Covid-19 who get support from their kids while undergoing inpatient confinement can conquer fear. To ensure effective recovery for their elderly loved ones, family members must visit, communicate with, and aid them during hospital isolation.

Keywords: Covid-19, family member, elderly, elderly people, accompanied during isolation.

I. INTRODUCTION

Elderly people are at risk of having health problems [1]. This is because in the aging process several physiological changes occur in the body, resulting in the body being more easily exposed to disease [2]. The elderly are also a vulnerable population group stated that there are three main factors that make the elderly vulnerable, namely no longer being economically productive, health problems, and needing a companion as a caregiver (caregiver) [3].

The elderly are the age group most vulnerable to the impacts caused by Covid-19, because this vulnerability has an impact on death [4].

Data from WHO shows that elderly people experience more corona virus infections which result in serious infections and death compared to toddlers. In China, the number of deaths in the population aged 60-69 years is 3.6%, in those aged 70-79 years it is 8% and in those aged over 80 years it is 14.8%. In Indonesia, the mortality

rate increases with increasing age, namely in the population aged 55-64 years 14% and 65 years and over 22% [5].

Deaths caused by Covid-19 will continue to increase with increasing age, where the elderly are more at risk. Elderly people are the group most vulnerable to being affected by the Covid-19 disease. With increased vulnerability, there is also increased fear, panic and anxiety among the elderly and their families [6].

WHO has also warned that the risks posed by Covid-19 can cause suffering, anxiety, anger, stress, agitation and withdrawal in the elderly during an outbreak, or while in isolation. Furthermore, according to the other research Covid-19 acts as a stressor [7], creating mass panic due to uncertainty and lack of knowledge. Additionally, the rapid rate of transmission, contagious nature, and serious threat to life may contribute to increased anxiety levels [8]. This emergency in response to Covid-19 will cause an anxiety-prone population, namely the elderly [9]. Apart from that, the condition of implementing restrictions on community activities imposed by the government which also creates symptoms of depression in the community is expected to affect the mental health of the elderly because it is older people who are at risk of isolation who are at risk of experiencing serious problems such as anxiety or depression when socially isolated [10]. Likewise, the loneliness that accompanies isolation is one of the underlying causes of anxious and depressive mental health states, with living alone in old age considered a major risk [11].

The research showed that of 144 respondents, 34.72% of Covid-19 patients had symptoms of anxiety. It is very important to prevent and overcome the anxiety of Covid 19 patients undergoing treatment in isolation rooms because it can slow down the healing process, reduce patient compliance in undergoing treatment, reduce the immune system, reduce the patient's appetite and cause other psychological symptoms due to untreated anxiety [12]. Excessive anxiety can have a negative effect on the therapy they are undergoing and make them reluctant to undergo treatment and even make the symptoms of Covid 19 worse [13].

Quarantine can cause loneliness, sadness, anxiety, and stress. Research so far has shown an increased incidence of depressive disorders, complex post-traumatic stress and adjustment reactions in the elderly due to isolation [14]

Research results show that anxiety in elderly people with Covid-19 is an important mental health factor to treat. The results of the study suggest that this can be associated with social isolation and low quality of life, both important factors that must be addressed [15].

Social support is a major factor in fighting loneliness [16]. Seniors with greater social support are more likely to have lower levels of loneliness. Social support can take the form of opportunities for older people to feel socially connected, have adequate social resources, closeness to other people, or also a sense of togetherness in a group [17].

In 2020-2021, elderly people with Covid-19 who were isolated in hospital because they had symptoms and had comorbidities while in isolation did not receive support from their families in the form of assistance, which caused anxiety in the elderly. Hospitals need assistance for elderly people with Covid-19 to reduce the length of stay (LOS) or length of care for hospitalized patients (Medical Records of Sembiring Delitua Public Hospital).

There are no guidelines that can be used as a reference in providing accompanying to elderly people who are isolated. The aim of this research is to provide assistance to elderly people with Covid-19 to overcome anxiety during isolation in hospital. This idea is based on the results of previous that state the pandemic had an effect on psychological disorders which resulted in death.

II. DATA COLLECTION

1. Indepth interview
2. Geriatry Anxiety Inventory Questionairre
3. Focus Group Discussion

III. DATA ANALYSIS

1. RESULT QUANTITATIVE DATA ANALYSIS

1.1 Respondent Characteristics

The research respondents were divided into two, elderly who were accompanied by family members, namely the elderly's biological children who accompanied them during isolation and elderly who were not accompanied by family members during isolation in the Kenanga room at Sembiring Delitua Public Hospital. Apart from using a questionnaire, data on checking vital signs, blood pressure and blood sugar levels of patients were taken from the medical records of Sembiring Delitua Public Hospital. The results of the univariate analysis provide an overview of the frequency distribution of elderly people studied based on religion, gender, age and education in elderly people who are accompanied by family members and elderly people who are not accompanied by family members, which can be seen in the Table 1.

Table 1. Elderly People with Covid-19 Based on Religion, Gender, Age, Education and Severity of Disease in the Case Group and Control Group (n=22)

Characteristics	Accompanied Elderly		Unaccompanied Elderly	
	Frekuensi (f)	Persentase (%)	Frekuensi (f)	Persentase (%)
Religion				
Moslem	2	18,2	4	36,4
Christian	9	81,8	7	63,6
Gender				
Male	5	45,5	7	63,6
Female	6	54,5	4	36,4
Age				
60-69 Years	8	72,7	8	72,7
> 69 Years	3	27,3	3	27,3
Education				
Elementary	3	27,3	4	36,4
Junior High School	6	54,5	5	45,5
Senior High School	2	18,2	2	18,1
Severity of Disease				
Mild	11	100	1	9,1
Severe	0	0	10	90,9

¹ Generally elderly during isolation are female, female, Christian, aged 60-69 years, education Junior High School and severity of disease severe

1.2 Respondents' Anxiety Level During Isolation in Hospital

Bivariate analysis was carried out to determine the difference in anxiety between elderly people who received assistance from their children during isolation and elderly people who did not receive assistance from their children during isolation at Sembiring Delitua Public Hospital. The results of the research were that a greater percentage of unaccompanied elderly people had severe levels of anxiety than elderly people with mild/moderate anxiety. In unaccompanied elderly, there is a greater percentage of elderly with mild/moderate anxiety. There is a higher percentage of elderly people with Covid-19 who are not accompanied by their

children during isolation in the Kenanga room at Sembiring Delitua Public Hospital whose anxiety is at a severe level.

Elderly who are not accompanied based on the nurse's observations while the elderly are undergoing isolation in the category of severe anxiety levels are looking gloomy, saying they feel lonely because they are alone, and recurrence of comorbidities (Diabetes and Hypertension). Table 2

Table 2. Anxiety of elderly people with Covid-19 who are not accompanied and who are accompanied (n=22)

Accompanied	Anxiety				Total	
	Mild/Medium		Severe			
	N	%	N	%	N	%
Accompanied	11	100	0	0	11	100
Unaccompanied	1	9,1	10	90,9	11	100

¹Generally, elderly people who are accompanied by anxiety have mild to medium anxiety

Different from elderly people with Covid-19 who are not accompanied, there is a higher percentage of elderly people who are accompanied by their children during isolation in the Kenanga room at Sembiring Delitua Public Hospital whose anxiety is at a mild level.

From the results of the t test, the difference in anxiety between elderly people who were accompanied and those who were not accompanied by family members obtained a significant P-value of 0.00 (Table 3). This means that there is a significant difference in the level of anxiety between elderly people who receive assistance from their children and elderly people who do not receive assistance from their children during isolation in the Kenanga room at Sembiring Delitua Public Hospital

Table 3. Differences in anxiety levels between elderly people who are accompanied and those who are not accompanied at the Sembiring Delitua Public Hospital

Variable	Group	Mean	SD	p-value
Level of Anxiety	Accompanied	5,36	0,942	0,00

¹the difference in anxiety between elderly people who were accompanied and those who were not accompanied by family members obtained a significant P-value of 0.00

2. RESULT QUALITATIVE DATA ANALYSIS

2.1 Nursing Care for Elderly Patients with Covid-19 During Isolation in Hospital

To find out the nursing care for elderly people with Covid-19 who are undergoing isolation in hospital, researchers used qualitative research methods. Qualitative research is carried out by in-depth interviews, making interview transcripts, reducing participant statements and determining themes.

In-depth interviews with 10 nurses were conducted in the Kenanga room at Sembiring Delitua Public Hospital. The ten nurses were all nurses who served as Covid-19 nurses in the Kenanga isolation room. They were used as research participants.

Data on nurses who provide nursing care to elderly people with Covid-19 at Sembiring Delitua Public Hospital who were used as participants in this research based on age, religion and latest education. The ten nurses who were participants in this research served alternately: morning duty, afternoon duty and night duty. With the following details: 4 nurses are on morning duty, 3 are on afternoon duty and 3 are on night duty. Of the 10 participants, 4 were women, 6 were men.

The themes found based on the results of the analysis of nurses' statements regarding the nursing care provided by nurses to elderly people with Covid-19 are as follows:

- Administer medication, give oxygen to patients who are experiencing shortness of breath, make the bed, bathe the patient, encourage sunbathing every morning, encourage rest, remind the patient to pray.
- The two nurses encourage the elderly to consume vitamins, fruit, milk, help the patient bathe, remind the patient to eat, ask about the patient's complaints
- The nurse measures the elderly's vital signs, recommends adequate rest/sleep

Based on data reduction from the results of in-depth interviews conducted on information obtained from nurses who provided nursing care to elderly people with Covid-19 during isolation at Sembiring Delitua Public Hospital, the nursing care for Covid-19 patients carried out in the Kenanga isolation room was as follows:

Morning

- Measure the patient's vital signs (blood pressure, breathing, pulse, body temperature).
- Helping to meet the personal hygiene needs of patients who are on bedrest, recommending bathing for patients who are able to walk to the bathroom.
- Encourage the patient to eat breakfast, after that give the patient medicine.
- Provide therapy according to the patient's needs.
- Sunbathe in front of the terrace of each patient's room.
- Encourage patients to listen to songs or sermons according to the religion of the patient being treated.
- Encourage patients to consume fruit and vitamins to increase the patient's immunity.
- Tell the patient to be calm, think positively and pray a lot.
- Ask about the patient's condition and complaints when going around the operation with the night duty nurse.

Afternoon

- Measure the patient's vital signs (blood pressure, breathing, pulse, body temperature).
- Provide therapy according to the patient's needs.
- Encourage the patient to rest/take a nap.
- Encourage the patient to pray.
- Encourage patients to watch television or YouTube so they don't get bored while undergoing isolation in the hospital.
- Provide motivation to patients so they are enthusiastic about recovering.
- Ask about the patient's condition and complaints when going around the operation with the morning duty nurse.

Evening

- Measure the patient's vital signs (blood pressure, breathing, pulse, body temperature).
- Provide therapy according to the patient's needs.
- Encourage the patient to pray.
- Encourage patients to contact family at home by telephone or video call.
- Ask about the patient's condition and complaints when going around the operation with the afternoon duty nurse.
- Encourage the patient to rest/sleep at night.

2.2 Activities of the elderly accompanied by family members while undergoing isolation

From the results of in-depth interviews conducted with isolation room nurses, the themes found based on the analysis of nurses' statements showed that the activities of the elderly during isolation were as follows:

- Sunbathing in the morning, telling stories with your room neighbors but still paying attention to distance, watching movies, worshipping.

- Communicate with family members at home via telephone and video call.

Elderly people who are not accompanied by family members are also encouraged to sunbathe, but due to their health condition, they generally experience severe shortness of breath and are on oxygen, they are not willing to be taken out of their room. The activity that the elderly do is watch television in their room.

Barriers for nurses when caring for elderly people with Covid-19 who are accompanied and not accompanied by family members based on the results of in-depth interviews conducted with isolation room nurses are as follows:

- Because the patients being treated complained of severe shortness of breath, high dependency on nurses and the number of nurses was also not large, resulting in a lack of manpower to help with the needs of these elderly patients.
- If the patient has hearing loss, it is quite difficult to communicate, another obstacle that we often feel is the heat of wearing personal protective equipment and feeling less free to carry out activities while on duty.

2.3 *Basic Hospital Policy Permits Isolation Accompanied by Family Members*

At the beginning of the isolation period for Covid-19 patients at Sembiring Delitua Public Hospital, family members were not allowed to accompany patients undergoing isolation. Due to the large number of requests from family members who wanted to accompany isolated patients and also because of the high anxiety of Covid-19 patients themselves, the house illness in January 2021 allows family members to accompany Covid-19 patients undergoing isolation, by complying with applicable health protocols. Based on interviews with the head of the isolation room and validated with the head of maintenance as part of the management of Sembiring Delitua Public Hospital

Hospitals require companions before accompanying patients in isolation at the hospital, to first carry out a PCR test and the PCR results are negative and they are permitted to accompany patients undergoing isolation. Apart from that, companions must sign a letter of agreement stating that the companion will accept all risks that occur as a result of accompanying the patient. Covid-19.

2.4 *The Basics of Children Accompanying the Elderly in Hospital*

The condition of the elderly who experience fear, loneliness and anxiety makes children want to accompany their parents in isolation in hospital. Children are afraid that their parents' condition will get worse if they have no one to accompany them, so elderly children are making every effort to be able to accompany their parents during isolation. The following is a companion statement regarding the desire to accompany the elderly

IV. DISCUSSION

The most debatable issue related to business plans in the oil-refining complex is what investment costs are expected. The mining refinery's expenses plan is divided into two phases:

The comes about of the ponder appeared that there was a critical distinction within the uneasiness of elderly individuals who gotten help from their children (case bunch) during isolation compared to elderly people who did not receive assistance from their children during isolation in the Kenanga room at Sembiring Delitua Public Hospital. The comes about of the ponder appeared are in accordance with research [23] that care and support from the family is very necessary to maintain mental health conditions such as anxiety and stress in the elderly that can be overcome immediately [24]. Family bolster may be a handle of relationship between family and environment [25]. Family back is characterized as verbal or nonverbal data, counsel, genuine offer assistance or behavior given by individuals who are commonplace with the subject in their environment or within the shape of nearness and things that can give passionate benefits and impact the behavior of the beneficiary [26]. In this case, individuals who feel they have gotten passionate bolster feel diminished since they are cared for, get exhortation or a charming impression on themselves [27]. People regularly endure candidly, are pitiful, on

edge, and lose self-esteem. Passionate bolster gives people a feeling of consolation, feeling adored when encountering sadness, offer assistance within the shape of support, sympathy, believe, consideration so that the person who gets it feels important. In this enthusiastic bolster, the family gives a put to rest and gives support [28]. Perspectives of emotional support incorporate support that's showed within the shape of love, believe, consideration, tuning in and being listened[29]. Passionate bolster gives individuals a feeling of consolation, feeling cherished when encountering discouragement, offer assistance within the frame of support, sympathy, believe, consideration so valuable [30]

The factor that causes the elderly to experience anxiety is the lack of family support. Family support is the main support system for the elderly to maintain their health. The role of the family is important in caring for the elderly, maintaining mental status, as well as providing motivation and facilitating spiritual needs [31].

The results of this study are also in line with other research [32] which found that anxiety levels were related to the incidence of Covid-19. In general, the Covid-19 pandemic is associated with higher levels of anxiety and affects older people more [33]. The research results also published the same results as what the researchers found, namely that anxiety problems were caused by loneliness and the disease they were suffering from [34].

The comes about of this investigate are moreover in line with investigate by appeared that of 144 respondents, 34.72% and 28.47% of Covid-19 patients had indications of uneasiness, where the bivariate relationship comes about appeared that there was a relationship between social bolster and uneasiness in treated Covid-19 patients [35]

The nursing care provided by nurses to elderly people with Covid-19 is, maintaining the patient's personal hygiene, encouraging and helping the patient to sunbathe every morning, recommending that the patient consume food served by the hospital/additional food (vitamins, fruit, milk), giving oxygen to patients who are short of breath, recommending listening to music, religious sermons, asking about patient complaints, telling patients to calm down and not thinking too much, giving medicine according to predetermined hours, recommending that they get enough rest. The results of this research are in line with those presented by SIKI (2017), who said that one of the nursing problems in patients with Covid-19 that is important to overcome is patient anxiety caused by a situational crisis, , threat to death.

Families and caregivers got to be included comprehensively within the care of the elderly during separation, expanding affectability to their mental wellbeing. Partners and approach creators got to take joint duty to decrease crevices in information, states of mind and activities related to mental wellbeing care for the elderly amid the Covid-19 widespread. Providing adequate emotional support is very important for elderly people in isolation. Ensuring the physical and psychological needs of seniors are met will help them live stress-free and fight loneliness, especially in situations of isolation. The hopelessness and loneliness of the elderly need to be addressed periodically to relieve their anxiety [36].

Based on the research results, it was found that family support through mentoring elderly people with Covid-19 had a big impact on the anxiety felt by the elderly. When someone becomes an elderly person, the elderly person will become sensitive and feel like they want to be considered by their environment, especially by their own family. Elderly is a phase where humans start to feel depressed, stressed and have a lot of thoughts. Therefore, the elderly need the presence of family members to provide encouragement for what they are experiencing. Support is a positive form that someone gives to someone else. So, real support is something positive that is given by someone in a form that can be seen and felt by the person it is intended for. In this case, the real support provided by the family for elderly people who live with family members.

Humans are social creatures who need the presence of other people in their lives, and so do other people. The elderly need the presence of other people in living their lives as they enter an age full of problems and crises, including social support from the family. The elderly hope that the social support provided by the family will make things better. Thus, family social support is very meaningful for individuals in facing life outside and relieves the stress and anxiety faced by individuals.

The results of this research are in line with what was conveyed by the Director General of Disease Prevention and Control of the Indonesian Ministry of Health, 2020, who said that the patient's social support is that his family is not kept away from social interactions, does not refuse and convinces each other about the need to be careful, but not carry out aggressive reactive actions towards patients and their families, and continue to support them through social media groups.

Positive social relationships can be done by: giving praise, giving hope to each other, reminding each other of positive ways, increasing emotional ties within families and groups, avoiding negative discussions, and sharing news with colleagues, friends or members of the profession. continue to worship regularly online, and always believe that the pandemic will soon be resolved.

The results of this study are in line with research conducted by [36] in Italy which found that the involvement of family members in caring for the elderly during isolation in hospital because facial contact with family members reduced loneliness, anxiety and depression felt by the elderly.

Family members who are involved in providing care for the elderly while in hospital can also make decisions related to medical programs that have been made by doctors, nursing care that have been made by nurses and health plans that have been made by other professions in dealing with the health problems of Covid patients. -19.

The comes about of this inquire about are moreover in line with what was expressed by the Directorate Common of Social Restoration, Directorate of Social Administrations for the Elderly, Service of Social Issues in 2014, which said that family members should contribute to providing as much mental support and other assistance as possible to the elderly, in order to enable the person being helped to regain balance. psychological. One of the assistance techniques that can be used is the diversion technique where the companion tries to divert the attention of the elderly from the crisis situation, they are facing by carrying out certain activities, especially those that the elderly enjoy.

While the assistant provided assistance to elderly people with Covid-19 at Sembiring Delitua Public Hospital, several problems were encountered in providing assistance:

- From the aspect of accompanying: bored, because I am being isolated like an elderly person with Covid-19.
- From the aspect of communicating and motivating, there were no problems experienced by companions of elderly people with Covid-19 Meanwhile, the problems found by nurses while accompanying them were providing assistance to elderly people with Covid-19 were as follows:
 - i. *From the accompanying aspect:* the nurse found a companion who sat on the terrace chair in the elderly's room for a long time.
 - ii. *From the communication aspect:* the nurse found a companion who often slept while providing assistance to the elderly.
 - iii. *From the motivating aspect:* the nurse found that there was a conflict, namely an argument that occurred between the companion and the elderly person being accompanied.

Based on the research results, it was found that there were no guidelines for families in providing assistance to elderly people with Covid-19 while undergoing isolation in the cananga room at Sembiring Delitua Public Hospital. Accompaniment provided by families is carried out if they are willing to provide assistance by complying with applicable health protocols and are prohibited from leaving the isolation room while accompanying parents who are undergoing isolation. There has been no information provided by the hospital regarding what the companion will do while accompanying parents in isolation.

Thus, a module for assisting elderly people with Covid-19 is needed which contains information on how to provide safe assistance for companions so that they do not contract Covid-19 while accompanying parents in isolation rooms. This module can be used by hospitals to educate families in providing assistance to parents undergoing isolation in hospital.

The module for assisting elderly patients with Covid-19 while undergoing isolation in hospital was created so that it can be used by hospitals that care for elderly patients with Covid-19 while in isolation in hospital. With the aim that the elderly do not experience anxiety during isolation and have high enthusiasm to recover from the illness they suffer from.

This research can be used as a scientific basis in determining the sustainability of policies to assist elderly people with Covid-19 by using the same health protocols as currently available health workers. Provide input to policy makers regarding assistance to elderly people with Covid-19 to overcome anxiety during isolation in hospital.

V. CONCLUSION

The conclusions obtained based on research that has been carried out are: The anxiety of elderly people with Covid-19 who are not accompanied by family members is higher than elderly people who are accompanied by family members. Nursing care for Covid-19 patients carried out during isolation at the Sembiring Delitua public hospital. The involvement of family members in caring for elderly patients with Covid-19 during isolation at the Sembiring Delitua public hospital reduces the anxiety of the elderly. Resulting in a model of assisting elderly patients with Covid-19 in overcoming anxiety during isolation in the hospital, which can be used as a reference in providing assistance to the elderly, which will be given to the hospital. The hospital will motivate and educate family members in providing assistance to elderly people with Covid-19.

The problems found by nurses while accompanying them in assisting elderly people with Covid-19 are as follows:

- From the accompanying aspect: the nurse found a companion who sat on the terrace chair in the elderly's room for a long time
- From the communication aspect: the nurse found a companion who often slept while providing assistance to the elderly
- From the motivating aspect: the nurse found that there was a conflict, namely an argument that occurred between the companion and the elderly person being accompanied

Hospitals can make decisions regarding the use of a model for assisting elderly people with Covid-19 in overcoming anxiety during isolation in hospital as a reference in providing assistance to elderly people.

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Author contribution

All authors made an equal contribution to the development and planning of the study.

Conflict of Interest

The authors have no potential conflicts of interest, or such divergences linked with this research study.

Data Availability Statement

Data are available from the authors upon request.

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