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Challenges and Changes in Senior Social Care Services during the Pandemic Period

Abstract

The subject of the research are 107 recipients of social services who have been provided residential services since the beginning of the pandemic, i.e. since March 2020. The pandemic situation has significantly affected the financing as well as the functioning of social services, their employees and individuals of residential services. This study is focused on identifying key aspects and factors that most influenced the quality of services provided and life satisfaction of seniors in context of analysing the change in lifestyle habits of seniors before and during the pandemic Covid-19.

Keywords

senior social care, mental health, pandemic Covid-19

1. Introduction

The pandemic and related measures to control the spread of the virus led to significant changes in the living conditions of seniors, especially those who are recipients of social services with a residential form. This study provides a comprehensive view of the experiences of older individuals, with an emphasis on identifying areas that need additional support measures. This research is important not only from the point of view of understanding the individual experiences of seniors, but also with regard to the formation of policies and measures that will support their well-being and quality of life in similar extraordinary situations.

Aging is a natural and gradual process that affects the human organism and is accompanied by inevitable and involutional changes. These changes are partly responsible for the increased risk of developing health problems in the elderly population. The authors confirm that the phenomenon of an aging population requires pressure on social services, which have undergone a historical development from the concept of a passive recipient of social services to the support of a holistic approach, the activation of recipients of social services to the humanization of care in old age.¹ Phenomena from the biological, psychological and social fields intertwine, influence each other and together create an overall picture of the natural aging of a person. This process is an integral part of the life cycle and can be influenced by genetic, environmental and lifestyle factors. Likewise, genetic factors play a key role in predisposing to certain signs of aging, and genetic inheritance can influence how quickly and to what extent these signs appear. Environmental factors such as lifestyle, diet, exercise and exposure to external conditions can further influence the course of aging.²

Based on prognostic analyzes by Eurostat until 2050, the following important indicators were identified, which assume that the aging of the population will progress and will be associated with longevity. While it has been shown that the increase in the number of residents over the age of 60 will increase from 1.93 million to 3.67 million residents by 2050. Care for the

¹ L.L. Cintulová, S. Buzalová, *Sociálne služby v súčasnosti*, Bratislava 2022, Vysoká škola ZaSP sv. Alžbety.

² R. Čevela, Z. Kalvach, L. Čeledová, *Sociální gerontologie*, Praha 2012, Grada.

elderly is also influenced by other factors in the development of society, which include:³

- a high number of seniors who are involved in the labor market even over the age of 64;
- the reversal of value orientation in society and the absence of intergenerational relations between the younger and older generations;
- reluctance of young people to take care of elderly dependents and provide long-term care at home;
- increasing the longevity of seniors to 90 years with the trend of emerging diseases;
- increased incidence of cancer and other oncological and cancerous diseases in the elderly, which increases the pressure on health care;
- increased rate of poverty and risk of social exclusion of older persons over 65;
- higher dependence of adults on social services and long-term care, a shift in the age of entry into social services facilities, which correlates with the chronic condition and low quality of life of seniors.

2. Effects of the pandemic on seniors

Authors⁴ reflected the effects of the pandemic in various areas of social functioning. Especially during the first wave of the pandemic, perceived personal stress increased and psychological problems among people related to the pandemic increased. Seniors have been identified as a vulnerable group not only in terms of mortality, but also at risk of financial anxiety and financial hardship due to the COVID-19 pandemic. Adults showed an increased level of experienced stress and depressive feelings during the second and third wave of the COVID-19 pandemic in Slovakia. The results showed that they experience the most stress and depressive feelings due to uncertainty, instability, mistrust of the state and low living standards. The increase in mistrust was linked to the emergence

³ K. Bundzelová, L.L. Cintulová, S. Buzalová, *Sociálna práca s osobami vyššieho veku*, Bratislava 2023, Vysoká škola zdravotníctva a sociálnej práce sv. Alžbety v Bratislave.

⁴ L.L. Cintulová, L. Radková, Z. Budayová, *Mental health of Roma women in post-covid era*, "Acta Missiologica" (2022) 16 Nr 2, pp. 116–129.

102

of conspiracy beliefs related to the disease COVID-19, to which older generations were particularly susceptible.⁵

The coronavirus pandemic has often evoked a financial threat that is characterized by a combination of fear, anxiety and concern about one's personal financial situation. In the context of the COVID-19 pandemic, there is evidence that there is a link between financial threat and impaired mental and physical health.⁶ The research conclusions of de Sun et al.⁷ emphasize that during the pandemic it is important to pay attention not only to the physical but also to the financial well-being of individuals and to provide support in the area of managing financial worries and stress.

It was found that older adults tended to report lower increases in unhealthy eating habits, television screen use, tobacco use, alcohol use, and pain medication use compared to younger adults.⁸ This also includes a lower increase in unhealthy lifestyle changes or drinking. One study suggested that most older adults maintained a balanced diet, limited alcohol intake, and got adequate sleep.⁹ However, another study found no changes in alcohol use patterns.¹⁰ Absent correlational analyses, trust in fake news and conspiracy theories was strongly associated with negative attitudes toward vaccination and lower levels of political liberalism. The study claimed that the COVID-19 pandemic does not only have a short-term effect on society, but its consequences will be present in the long

⁹ E. Younger, A. Smrke (eds,), *Health-related quality of life and experiences of sarcoma patients during the COVID-19 pandemic*, "Cancers Basel" (2020) 12 Nr 8, p. 2288.

⁵ L.L. Cintulová, P. Beňo, T. Pavlovičová, *Aspects of social services and well being in post covid era*, "Int J Health New Tech Soc Work" (2023) 18 Nr 3, pp. 106–114.

⁶ L.L. Cintulová, Z. Budayová, I. Juhásová., *Health of Roma People living in marginalized Communities in Slovakia*, "Clinical Social Work and Health Intervention" (2023) 14 Nr 1, pp. 7–15.

⁷ Z. Sun, B. Yang, R. Zhang, X. Cheng, *Influencing factors of understanding COVID-19 risks and coping behaviors among the elderly population*, "Int J Environ Res Public Health" (2020) 13 Nr 17, pp. 5889–5891.

⁸ A. Constant, D.F. Conserve (eds,), *Socio-Cognitive Factors Associated With Lifestyle Changes in Response to the COVID-19 Epidemic in the General Population:* Results From a Cross-Sectional Study in France, "Front Psychol" (2020) 11, pp. 57960–57962.

¹⁰ R. Stanton, et al., *Depression, anxiety and stress during COVID-19: Associations with changes in physical activity, sleep, tobacco and alcohol use in australian adults*, "Int J Environ Res Public Health" (2020) Nr 5, pp. 33–42.

term for all citizens, younger and older generations, with different intensity and different impacts."

These findings contrasted with other research showing that some older adults increased binge drinking, drinking frequency, alcohol consumption and cigarette smoking during the first wave of the pandemic. Changes in eating habits were also noted, with some individuals eating more and more frequently.¹² There is also a study that reported higher consumption of unhealthy foods among older adults compared to participants of other age groups.¹³

It is important to note that food insecurity has increased among older adults during the pandemic, although to a lesser extent compared to younger adults. The recorded reduction in care could also have resulted in problems with hunger and the tendency to substance and non-substance addictions, which negatively determined the spread of Covid-19 and its measures.¹⁴ In addition, physical activity was associated with higher resilience, positive affect, and lower depressive symptoms. Older adults were also reported to have less change in unhealthy exercise behaviors.¹⁵

We analysed how the pandemic changed the living habits of seniors in the following text. It is important to emphasize that challenges and changes in the lifestyle habits of seniors can be individual and influenced by many factors, including place of residence, social relationships, physical and mental health, and availability of resources. Senior habits changed more passive living, Changes in sleep patterns and increased fatigue, higher aggressiveness, nervousness, restlessness, higher consumption of unhealthy foods, routine diet, unbalanced diet and Low interest, limited possibilities of activities, change of system of activity in social service facility.

During the pandemic, various programs were also deployed with the aim of reducing social isolation through contact with family in the form of whats

¹¹ V. Čavojová, P. Hamala, *Prežívanie a dôsledky pandémie COVID-19 na Slovensku: Pohľad sociálnych vied*, Bratislava 2022, Centrum spoločenských a psychologických vied SAV.

¹² A. Heid, F. Cartwright (eds.), *Challenges Experienced by Older People During the Initial Months of the COVID-19 Pandemic*, "Gerontologist" (2021) 21 Nr 61, pp. 48–58.

¹³ B. Whitehead, COVID-19 as a Stressor: pandemic expectations, perceived stress, and negative affect in older adults, "J Gerontol B Psychol Sci Soc Sci" (2021) 18 Nr 76, pp. 59–64.

¹⁴ Z. Budayová, L.L. Cintulová, *Stigmatization and harm reduction of drug users in postcovid era*, "Acta Missiologica" (2023) 17 Nr 1, pp. 122–130.

¹⁵ F. Vukadin, P. Tománek, *The importance of meaning in educational work with adult migrants*, "Clinical Social Work and Health Intervention" (2023) 14 Nr 2, pp. 59–65.

up calls, the transformation of an online program for the elderly population proved to be effective. Innovative programs should therefore be created to support vulnerable older adults and minimize long-term consequences and feelings of loneliness.¹⁶

Fear related to COVID-19 and uncertainty about the future have become pervasive psychological aspects affecting the elderly population during the pandemic. Seniors were forced to face a significant risk associated with the disease, and many of them experienced increased stress and anxiety about possible infection. This fear may have led to self-defense measures such as isolation from the outside world, which also negatively affected their psychological well-being.¹⁷

Depression, anxiety and other psychological consequences have become common responses to pandemic restrictions. Older individuals suffered from loneliness due to separation from family and friends, which may have triggered or exacerbated psychological problems. In addition, uncertainty about the future and health concerns may have contributed to a deterioration in mood and well-being. Immediate responses to such fear may include strict measures of self-isolation and avoidance of outdoor activities, which can have a negative impact on mental health.¹⁸

The financial consequences associated with a lower quality of life in the lower senior strata were also evident. Some older individuals have lost access to income or faced a worsening economic situation, causing financial concerns and a low ability to secure necessary care and nursing services or compensatory aids. These financial pressures led to additional psychological problems and challenges in old age.¹⁹

The long-term effects on older adults can be varied and affect different aspects of their lives. These long-term consequences include chronic stress, impaired sleep quality, increased risk of psychological disorders, and social isolation.

¹⁶ R. Cauda, Z. Ondrušová, P. Tománek, M. Hardy, *We shall start health intervention against collateral Effect of Pandemic to metabolic, cardiovascular and mental health in migrants, children and caregivers*, "Clinical Social Work and Health Intervention" (2021) 12 Nr 3, pp. 6–8.

¹⁷ L.L. Cintulová, P. Beňo, T. Pavlovičová, *Aspects of social services and wellbeing in postcovid era*, "Int J Health New Tech Soc Work" (2023) 18 Nr 3, pp. 106–114.

¹⁸ L.L. Cintulová, L. Radková, Z. Budayová, *Mental health of Roma women in post-covid era*, "Acta Missiologica" (2022) 16 Nr 2, pp. 116–129.

¹⁹ L.L. Cintulová, Z. Budayová, I. Juhásová, *Health of Roma People living in marginalized Communities in Slovakia*, "Clinical Social Work and Health Intervention" (2023) 14 Nr 1, pp. 7–15.

105

These factors can negatively affect older adults' overall quality of life and contribute to long-term health problems.²⁰

3. Research

The main goal of the research was to examine and analyze changes in behavior, thinking, common routine activities and functioning in social service facilities in the period before and after the Covid-19 pandemic. The author's research efforts were aimed at comparing and identifying differences in these areas between the two time periods in order to better understand the impact of pandemic events on the lives of seniors and staff in these facilities.

The study was focused on identifying changes in behavioral patterns, mental settings, as well as adaptation to new conditions and challenges brought about by the pandemic. Our intention was to collect and evaluate data that would give us a deeper insight into significant differences and specific areas that have changed the most, whether in the form of living habits, seniors' satisfaction or the functioning of the facilities themselves. The results of the data collection will provide a detailed view of the development and dynamics in the environment of social services before and after the Covid-19 pandemic, which could serve as a valuable source of information for adapting and improving the services provided in the future.

Hypothesis 1:

There will be differences in the impact of the pandemic on the living habits of seniors in social service facilities based on demographic characteristics.

Hypothesis 2:

There will be differences between recipients in social service facility who will undergo significant changes in daily routines and overall lifestyle in the facility.

²⁰ K. Bundzelová, L.L. Cintulová, S. Buzalová, *Sociálna práca s osobami vyššieho veku*, Bratislava 2023, Vysoká škola zdravotníctva a sociálnej práce sv. Alžbety v Bratislave.

4. Sample

We determined the research sample based on the research criteria, a total of 107 questionnaires were returned to us. 57% of women and 43% of men were involved in the analysis of the impact of the coronavirus pandemic on their lives in a social service facility. They determined the age composition of the respondents, which ranged from 60 years, which represented 24.3%. 23.4% of respondents were over 85 years old, with a similar composition of respondents aged 69–77 years.

24.30% of the respondents stated that they were placed in a social facility due to the deterioration of their health condition from a medical facility. 41.1% of seniors requested the provision of social services at the initiative of the family and 34.6% of seniors decided to go to the facility based on their own will.

5. Results

According to the statements of the recipients, the pandemic has most changed the internal functioning of the facility, the personnel composition, the way of organizing activities, the implementation of therapies, communication and the introduction of measures, which was confirmed by 24.3%. 18.0% of women and 30.4% of men said that the thinking and behavior of people who lived in greater fear, isolation, and closure had changed. 23.0% of women and 17.4% of men confirmed that their life habits have changed, they are more passive and show less interest in new things. 15.0% of seniors indicated a change in the area of communication, and 16.8% of them indicated changes in the way they spend their free time in the facility.

17.8% expressed that they were most afraid of losing the financial security and social support they had until then. 26.2% expressed fear that there will be no one to take care of them, they are not provided with sufficient care. 23.4% were afraid of the consequences in connection with the unavailability or poor availability of health care, deterioration of the health condition and even death. 14.0% of seniors felt more lonely, they were afraid of losing contact with their family, because they restricted themselves more, were less frequent. 18.7% of recipients stated that the pandemic had an impact on leisure activities, new activities, therapies and events were not being carried out in the facility, which had an impact on their increased level of isolation and routine, especially in the first wave of Covid-19.

Changes during the pandemic in the facility				
		Gender		Total
		Women	Mem	TOLAI
Thinking and behavior	Count	11	14	25
	%	18,0%	30,4%	23,4%
Interal rules, activities, functions	Count	14	12	26
	%	23,0%	26,1%	24,3%
Life habbits and attitudes	Count	14	8	22
	%	23,0%	17,4%	20,6%
Communication, relationships	Count	10	6	16
	%	16,4%	13,0%	15,0%
Free time activities and hobbies	Count	12	6	18
	%	19,7%	13,0%	16,8%
Total	Count	61	46	107
	100,0%	100,0%	100,0%	100,0%

Table 1. The changes in the social care facility during pandemic

In the research, we also investigated the extent of the impact of the pandemic measures on the internal functioning of the facility. 25.0% of seniors indicated a medium and 23.3% indicated a high degree of impact of Covid-19 on how employees and social service providers had to deal with the situation. 40.0% of seniors said that the pandemic had a low impact on people's thinking and behavior. 23.3% of recipients confirmed a change in lifestyle habits due to the onset of the pandemic at a high level. 18.8% of respondents stated that the pandemic had the least effect on mutual relations in the facility and methods of communication, if they do not count the wearing of masks. 30.0% of recipients indicated that free time was largely affected by various measures that were introduced in that period.

20.6% of respondents said that the pandemic affected not only the implementation of activities, but also the complex operation and management of the facility, which obeyed the semaphore in social services and crisis management. 32.3% of recipients considered the biggest negative impact to be social isolation, loss of stimuli and reduced opportunities for communication and contact with the surrounding world outside the facility. 16.8% of recipients confirmed that the pandemic had a negative impact not only on the social services themselves, but also on their personality, there was a deterioration in the health status and psychological well-being of seniors. 23.1% feel a deterioration of mental and physical resistance and it definitely had an impact on their overall health. Health and social impacts were demonstrated in 20.5% of recipients, who were negatively affected by the pandemic on several levels.

6. Discussion

The research found that more than half of nursing home residents without cognitive impairment reported feeling lonely. A study in nursing homes using a loneliness scale reported that almost all seniors felt lonely: 25% of seniors had moderate feelings and 75% of seniors showed high levels of loneliness and frustration. The study presented the factors determining the disruption of social relationships and a low level of life satisfaction²¹:

- The unfulfilled need for a meaningful relationship and the loss of selfdetermination due to institutionalization play a key role in feelings of loneliness.
- Meaningful activities and actively spent free time in the facility can reduce loneliness.
- Interventions that have been found to successfully reduce loneliness are play therapy, doll therapy, horticultural therapy, and reminiscence therapy.
- The pandemic situation increased the level of feelings of loneliness, anxiety and negative feelings in the personal experience of seniors.

Feeling lonely has many harmful consequences. They include an increased risk of depression, alcoholism, suicidal thoughts, aggressive behavior, anxiety and impulsivity. Some studiea²² have found that loneliness is also a risk factor for cognitive decline and progression of Alzheimer's disease, recurrent stroke, obesity, increased blood pressure, and mortality. Lonely older people may be burdened with more symptoms before death and may experience more intensive care at the end of life compared to people who are not lonely.

²¹ J. Simard, L. Volicer, *Loneliness and isolation in long-term care and the COVID-19 pandemic*, "J Am Med Dir Assoc" (2020) 21 Nr 7, pp. 966–967.

²² E.J. Williamson (ed.), *Factors associated with COVID-19-related death using OpenSAFELY*, "Nature" (2020) 584 Nr 7821, pp. 430–436.

Hypothesis 1: There will be differences in the impact of the pandemic on the living habits of seniors in social service facilities based on demographic characteristics. We accept hypothesis one, as the level of significance p=0.026 (df9) confirmed the *differences in life habits between men and women in the facility.*

The research results tracked changes in 6 areas, one of which was the way of eating. Men and women showed different food preferences, access to food, food consumption and lifestyle. The seniors expressed that they would welcome greater variability in meals at the facility, more light meals and fruit. At the same time, it was confirmed that the pandemic contributed to higher creativity in the field of food, therapies oriented towards the development of culinary therapy were introduced. Within the group of seniors, there was a request for greater variability in diet, change of meals and more fruit. These requirements indicate an effort to diversify and enrich the food regime in the facility, with an emphasis on changing the menu and a preference for typical Slovak and sweet dishes (steamed buns, ducat buns, strudels).

An interesting finding is that the pandemic has led to greater creativity in the field of food. In response to the new challenges brought by the pandemic, therapies aimed at developing sensory, taste and manual skills in food preparation were introduced. These therapies are known as culinotherapy and focus not only on taste perception, but also on the manual skills associated with food preparation. Such an approach can contribute to the overall improvement of diet quality and support seniors in the development of various skills, thereby contributing to their overall mental and physical health.

The lifestyle habits of seniors represent an important aspect of their overall health and quality of life. These habits include a wide range of activities that affect the physical, mental and social dimensions of their lives. These life habits include not only dietary preferences and physical activity, but also the way of interacting in social relationships, mental stimulation and, of course, healthy interpersonal relationships.

Men showed a higher score in physical activities compared to women, who prefer physical physical activities to a lesser extent (p=0.015; df4). This finding suggests that men may have a greater interest in physical activity compared to women who appear to have a lower preference for these activities. It may also be related to other factors, such as state of health, age of the pensioner, orientation to sports activities in the past, willingness to cooperate and motivation for activities in the facility.

110

Life habits can also include social relationships. Differences in the way men and women interact can affect their overall lifestyle, which was also confirmed by the research results at a significance level of p=0.041 (df6). Maintaining an active social life can help prevent feelings of isolation and loneliness. Engaging in social activities, meeting friends and family, and building new social ties can have a positive impact on overall psychological well-being.

Hypothesis 2: There will be differences between recipients in changes in daily routines and overall lifestyle in senior care facility. Based on the result of the significance level p=0.034 (df8) confirmed differences between men and women in lifestyle in the facility have been demonstrated specifically in the following areas:

- 55% of women and 45% of men confirmed that their way of spending their free time has changed compared to the period before the pandemic. 66% agreed with the statement that operations and activities at the facility have never been on the same track as they were before the outbreak of the coronavirus.
- 43% of women and 57% of men answered that they have a different lifestyle in the facility, which is related to the change in the regime of the facility and the limited visits and outdoor activities that the facility has implemented.
- 71% of the respondents from the total sample said that a strongly routine life prevails in the facility, despite the staff's efforts to organize various activities.
- The routine way of life appears in men and women mainly in ordinary activities that are subject to the operating mode of the device (days for swimming, days for relaxation, cognitive training, exact time of serving food, reserved time for visits, similar activities in a month, planned trips to the same locations—Christmas markets, swimming pool, theater).
- 46% agreed with the statement that the pandemic has changed the way the facility operates, recipients felt the biggest impacts in the first wave and the least in the third wave of measures against Covid-19-seminar in social services.
- 38% of women and 29% of men said that they perceived the greatest restrictions in the area of contact with family, had fewer opportunities for social activities (11%) and interactions between other generations and people were limited to wearing veils (13%). They could not participate in regular group events where seniors could communicate and gain positive experiences (6%).

• 52% of women and 48% of men said they had limited social contacts and felt isolated. 49% agreed that they were able to use online tools to communicate with family members, which helped them get through a bad time. 61% said that the staff of the facility helped them communicate with their family via Whats up. On the other hand, 33% of seniors admitted that they do not have a large network of social contacts and are happy if someone remembers them. Since seniors could not receive visitors or family members were afraid of contact with seniors in order not to spread the disease between clients, despite online communication, they prefer personal contact, which can strengthen and please them more, which was confirmed by 67% of respondents.

7. Conclusion

The pandemic has led to significant changes in the adaptation of service recipients in these facilities, with the new conditions causing many challenges. There was increased pressure and demand on staff and clients, which was reflected in areas such as changes in daily routines, social interactions, physical activity and mental health. In the final analysis, social services must remain flexible, innovative and adaptable in order to respond effectively to changing needs and circumstances.

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