

[COVID Information Commons \(CIC\) Research Lightning Talk](#)

Transcript of a Presentation by Sarah T. Stahl (University of Pittsburgh), August 18, 2021



Title: *Efficacy of a Healthy Lifestyle Intervention to Prevent Depression in Older Spousally-bereaved Adults-Supplement*

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Transcript Editor: Macy Moujabber

Transcript

Sarah Stahl:

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Hello everyone. Like Lauren said, my name is Sarah Stahl. I'm from the University of Pittsburgh and I'm an Assistant Professor of Psychiatry and I do research on bereavement and grief, depression, and aging. And so today I'm going to talk about bereavement and the COVID-19 pandemic in older adults.

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And my research is funded by the National Institutes of Mental Health, which is one of the 27 institutes of NIH, and the stuff that I'm going to talk about today was funded by a COVID supplement to my R01 to really try to identify and enroll bereaved elders who experienced the loss of someone to COVID-19.

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So millions of Americans lost a close family member to COVID-19, and researchers have found that for every COVID-19 death, this corresponds to about 10 individuals who have lost a grandparent, a parent, a sibling, a spouse, or a child. And a lot of people are suffering from these sudden and unexpected deaths of their loved ones. And so we think that this suffering may be associated with long-term health outcomes. So what are the differences between bereavement and grief? Because I'm going to be talking about those two terms a lot throughout this talk. So bereavement refers to the time or the window when a person experiences sadness after losing a loved one, and grief is how a person reacts to the loss of a loved one, so this includes the entire emotional process of coping with the loss and it can last a really long time. And what we know from several decades of bereavement research is that even though

this experience is very painful, most people adapt to the loss of a loved one and learn to live their life without their loved one. However, we think that with all of these special circumstances surrounding COVID-19 death and the inability to mourn and be with family members and likely be socially isolated, that individuals or even grief trajectories are going to last a little bit longer and possibly be a little bit more difficult.

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So loss during COVID-19 can be particularly challenging. So I focus on older bereaved spouses. So, you know, with this study we're trying to recruit older spouses who lost their spouse or life partner to COVID-19. So spousal loss to COVID-19 can be particularly challenging because a lot of older spouses were likely socially isolated while trying to provide care to their physically declining spouse which then in turn created a very exhausting caregiving situation. And then after the death, we know that there are a lot of restrictions placed on mourning rituals which inhibits individuals to grieve. So people who are bereaved by COVID-19, compared to those individuals who have died from other causes whether it be cancer, dementia, or cardiovascular disease, we think that older spouses bereaved by COVID-19 are more susceptible to negative health outcomes including depression, anxiety, loneliness, and something in particular that I'll describe in detail, which we call complicated or Prolonged Grief Disorder.

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So Prolonged Grief Disorder is a syndrome that's characterized by persistent and pervasive yearning, longing, and preoccupying thoughts and memories of the deceased, and this yearning causes significant distress or impairment and functioning. It lasts at least six months and exceeds the time frame that's typically expected by any social, cultural, or religious norms, and prolonged grief disorder was recently added to- as a new diagnosis to the ICD and it's likely going to be included in the DSM5.

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So there are a lot of risk factors that individuals are experiencing during COVID-19 that may increase the prevalence for Prolonged Grief Disorder. So a lot of the circumstances, contexts, and consequences of death will likely elevate this Prolonged Grief Disorder in the coming months. So circumstances like sudden and unexpected deaths, people were dying alone, there were restrictions on visiting policies. And so families were unable to see their dying family member, they were unable to say goodbye, and then there were even instances where family members were not sure where or when they were able to pick up the body or what kind of mourning rituals they were able to engage in. So a lot of the physical distancing policies affected funerals, burials, rituals, and any other kind of support services for the grievers, and even support services, you know, from local hospice organizations had to change from in-person to virtual services, and so people are having a difficulty grieving the loss of loved ones.

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So as bereavement researchers, we feel that there's an urgent need to educate others on grief and the way that the pandemic has affected our ability to grieve. And we think that family members should try to monitor their bereaved loved ones and look out for things that may signal post- Prolonged Grief Disorder, so certain thoughts like excessive avoidance, of reminders of a loss, of social isolation and any disruptions in routine health behaviors like their sleeping, eating, or exercising behaviors, may signal Prolonged Grief Disorder.

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So our work with bereaved adults- we have an efficacy trial that's funded by the NIH where we are comparing two groups. So one group uses digital monitoring to self-monitor three health behaviors. So we focus on sleep, meals, and physical activity. And during COVID-19, we transitioned everything to a digital protocol so everything is online and we give people feedback about their health behaviors because we're really trying to focus on healthy behavioral routines. And we will compare that group to our control group, and over time, we think that by focusing on the routine of healthy lifestyle choices that we will be able to reduce depression symptoms. But we're also tracking other important bereavement adjustment outcomes like complicated grief, anxiety, post-traumatic stress.

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So like I said, our intervention is a digital health for spousally-bereaved older adults and we're really focusing on the timing and regularity of health behaviors to promote a healthy circadian rhythm. And because everything's virtual, our participants, you know, use a web-based platform to self-monitor their health behaviors and they also receive personalized feedback via this lifestyle log that we've developed. And all of this is, you know, with the goal of trying to help older spouses engage in a regular routine of sleep, meals, and activity.

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So enrolling participants has been challenging due to COVID-19, but we've been more successful over the last several months and noticed that about half of our participants were bereaved by COVID-19. And what's interesting to us is that our COVID-bereaved group, when we compare them to our non-COVID-bereaved group, they're very similar in socio-demographics. They're primarily older women in their 70s. They're recently bereaved, they're only bereaved for about four months when they contact us. They're both similar in terms of their depression and anxiety symptoms, but what's different are their scores on the inventory of complicated grief. So this is a scale that measures complicated or prolonged grief symptoms, and those that are bereaved by COVID-19, we can see in yellow at the bottom, their score is much higher, so it's around 25, which is right at the threshold of signaling to clinicians that they may need clinical care, particularly at six or twelve months following loss. And those that are bereaved by other causes of death, their ICG score is a lot lower, around the 17. So we are seeing that our

COVID-bereaved spouses are likely suffering differently and more intensely than those bereaved by other causes of death.

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So what did we learn from talking to our bereaved participants? So loss due to COVID is really distressing and it's potentially predisposing surviving spouses to adverse health consequences. And we really want to try to work with our local community health partners to educate each other on recognition and treatment of prolonged grief disorder and we think that there should be a lot of public health efforts to identify and aid to COVID bereaved adults using telehealth approaches.

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So if you or someone you know has experienced the death of a spouse or life partner or want to learn more information about bereavement during COVID-19, you can contact us or email me. And thank you for listening.

Lauren Close:

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Thank you so much Sarah. That's a difficult topic but a very interesting one and certainly important to study and we really appreciate you sharing your insights.