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### Using Telehealth Groups to Combat Loneliness in Older Adults Through COVID-19

*To the Editor:* Loneliness has been a growing public health concern for older adults in recent years. It was suggested that almost one-half of the older adult population will experience chronic periods of loneliness at some point in later life, with about 5% feeling constantly lonely.<sup>1,2</sup> People in later life who isolate from others and feel lonely are at risk for impaired physical health,<sup>3</sup> worsening depression,<sup>4</sup> and increased cognitive decline.<sup>5</sup> Lonely older adults can even put additional burden and strain on family caregivers who dedicate a significant amount of time taking care of their needs.

Few group interventions have been developed and validated to help alleviate loneliness in older adults. One psychosocial intervention that has proven effective and sustainable for this population is called Circle of Friends, an evidence-based intervention to socialize older adults through interactive activities.<sup>6,7</sup> The group protocol meets 12 times over a 3-month period, covering themes that connect lonely people including narrative writing, creative arts, and exercise training. Although this has been an effective group intervention for community-dwelling areas and other communal settings, many older adults may not have the finances, transportation, or family support to get them to sessions in a community group.

Several challenges have been noted for older adult interventions to adapt their approach online. Some have barriers to having the appropriate technology or resources to set up telehealth-type services in their residence. Others may have difficulties with hearing or vision that limits their participation in groups. Incorporating technology innovations into the lives of later life adults is key to help prevent

risk of further loneliness. We believed Circle of Friends would be an appropriate choice to move to telehealth, largely due to the mission of improving socialization in one's community, the ease of conversation in the group, and the flexibility of incorporating activities.

With the advent of the coronavirus disease 2019 (COVID-19) pandemic, we accelerated our development of telehealth to provide social support for older persons at home.<sup>8</sup> Through COVID-19, we recognized the importance of caregiver involvement to help their loved ones get set up for participation in Circle of Friends groups. Facilitators conduct initial calls with both the participant and caregiver over the phone before the start of the group. The telehealth group allows for separate calls and scheduled Zoom meetings to help check in or follow up on topics discussed at

**Table 1. Adapting Circle of Friends Groups from In Person to Telehealth**

Theme	In-person activities	Telehealth activities
Creative arts and inspiring activities	-Visits from or to artists, musicians, or poets -Attend cultural events or art exhibitions -Group activities such as singing, baking, dancing, or games -Create an art piece of collage	-Bring in guest speakers via video; use chat box for group feedback. Record speakers for playback later. -Show pictures of trips or unique places where one has traveled -Create a simple at-home project (with caregiver assistance if needed)
Group exercise and health-themed discussion	-Nature walks -Strength/Balance training -Dancing -Swimming/Pool gymnastics -Yoga/Tai Chi -Light exercise/stretching	-Develop an in-home routine of exercises (floor or chair), where facilitator can demonstrate these live -Share physical therapy/occupational therapy recommendations for exercise and strength building through video
Therapeutic writing and sharing/reflecting	-Writing, sharing, and reflecting on the past, dreams, or other feelings of loneliness -Bring in a diary or writings from the previous week -Discussions of loneliness, friendship, and other topics	-Create diaries between sessions either written or on computer -Facilitator shows inspirational quotes or passages via video -Participants encouraged to blog any experiences in their lives, make interactive use of writing with others.

sessions. The benefit of a telehealth intervention of Circle of Friends is that participants can now experience independence in participating in some of these activities in their comfort of their residence (Table 1). Narrative writing, creative arts, and strength training/exercises can be done from the comfort of home, and they can play back recordings of sessions to remember group tips and feedback.

Our hope is that more telehealth and online group interventions can be developed to help connect lonely and isolated older adults during the COVID-19 situation and beyond. With a heightened risk for the virus returning soon, older adults are skeptical about leaving their homes and engaging with others in public.<sup>9</sup> It is vital that healthcare clinicians and researchers continue to find creative ways to reach out to later life adults whose isolation and lonely states may worsen as this pandemic continues. Otherwise, this population is at risk for not only further separation from loved ones but increased physical and mental health conditions over time.

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## COVID-19 Confirms It: Paid Caregivers Are Essential Members of the Healthcare Team

*To the Editor:* As a geriatrician providing home-based primary care in New York City during the coronavirus disease 2019 (COVID-19) pandemic, I have received two types of emergency calls from my patients or their families. The first came when one of my patients developed a new fever or cough and the possibility of serious COVID-19 loomed. The second type caused equal anxiety: a patient unexpectedly lost access to paid home care. Although my medical training and experience prepared me for the first, the second type of emergency felt insurmountable.

Paid caregivers (i.e. home health aides, personal care attendants, or other direct care workers) provide essential at-home assistance with daily tasks such as cooking, bathing, and medication management for individuals with functional and cognitive disability. In the United States, nearly 30% of those who reported rarely or never leaving the home received paid care<sup>1</sup> and about one-half of those with advanced dementia living at home received paid care.<sup>2</sup> In my New York City practice, the numbers are even higher: most (80%) of patients receive paid care. Without this care, they could not remain in the community.

The arrival of COVID-19 in New York City resulted in widespread disruption of these essential care arrangements. When my patient with advanced dementia developed a new cough and her home care agency pulled its live-in paid caregiver from her home, her granddaughter contemplated sending her to the hospital so she could get her needed daily care. One daughter struggled to provide daily care for her mother's pressure ulcer after, out of fear of introducing COVID-19 into the home, she had asked her mother's