

Knowledge Synthesis: COVID-19 in Mental Health and Substance Use

Instructions:

The [Operating Grant: Knowledge Synthesis: COVID-19 in Mental Health and Substance Use](#) was designed to enable the development of rapid and timely knowledge syntheses and related knowledge mobilization plans to address evidence gaps and build the evidence base as part of the mental health and substance use response to COVID-19.

As outlined in the decision letters sent to successful applicants, this template is being provided in order to facilitate the rapid sharing of results with relevant [knowledge users](#). Information recorded in this report may be made available to policy makers, healthcare and service providers, partners, and the general public, and will be used to populate a website and inform a variety of CIHR knowledge mobilization products. Responses should be written in plain language, respecting word limits where indicated.

Email completed report to COVID19MH-COVID19SM@cihr-irsc.gc.ca by **November 23, 2020**.

Synthesis Title: The Relationship Between Social Connectedness and Mental Health for Residents of Long-term Care Homes: Knowledge Synthesis and Mobilization

Nominated Principal Applicant (name and affiliation): Jennifer Bethell, The KITE Research Institute, Toronto Rehabilitation Institute, University Health Network

Authors (names and affiliations):

- Bethell, Jennifer (The KITE Research Institute, Toronto Rehabilitation Institute, University Health Network)
- Aelick, Katelynn (Behavioural Supports Ontario Provincial Coordinating Office)
- Babineau, Jessica (Toronto Rehabilitation Institute, University Health Network)
- Bretzlaff, Monica (Behavioural Supports Ontario Provincial Coordinating Office)
- Edwards, Cathleen (Family Councils Ontario)
- Gibson, Josie-Lee (Ontario Association of Residents' Councils)
- Iaboni, Andrea (The KITE Research Institute, Toronto Rehabilitation Institute, University Health Network)
- Hewitt Colborne, Debbie (Behavioural Supports Ontario Provincial Coordinating Office)
- Lender, Dee (Ontario Association of Residents' Councils)
- McGilton, Katherine (The KITE Research Institute, Toronto Rehabilitation Institute, University Health Network)
- Schon, Denise (Lakeside LTC Family Council)

For more information, please contact: Jennifer Bethell, The KITE Research Institute, Toronto Rehabilitation Institute, University Health Network Jennifer.bethell@uhn.ca

Target/priority population(s) in synthesis:

- Long-term care home residents, families, staff, decision-makers and health and social care providers

What is the issue?

Coronavirus (COVID-19) has taken a disproportionate toll on people living in long-term care (LTC) homes. But infection control measures put in place to protect residents – such as prohibiting visitors and limiting contact with others in the home – have also negatively impacted their health and quality of life through the effect on social connection. While there is limited research evidence on effective interventions to build and maintain social connection for LTC residents, and the applicability in the context of disease outbreaks is unclear, strategies are needed to address social connection in LTC both during and beyond COVID-19.

Key messages (max 100 words):

- Infection control measures put in place to protect LTC residents from COVID-19 have had a major impact on their social connection.
- Research evidence shows that, among LTC residents, good social connection is associated with better mental health - including better mood, affect and emotions and less depression, cognitive decline, responsive behaviours, anxiety and other negative outcomes.
- Research evidence suggests 12 potential strategies that LTC residents, families and staff might use and adapt to build and maintain social connection in LTC residents in the context of COVID-19.

How was the synthesis conducted?

Our team of researchers and knowledge users conducted a scoping review to summarize published research on (1) the mental health outcomes associated with social connection for long-term care (LTC) home residents, and, (2) highlight strategies that might be used and adapted by LTC residents, families and staff to build and maintain social connection during COVID-19.

We searched MEDLINE(R) ALL (Ovid), CINAHL (EBSCO), PsycINFO (Ovid), Scopus, Sociological Abstracts (Proquest), Embase and Embase Classic (Ovid), Emcare Nursing (Ovid) and AgeLine (EBSCO) for research that quantified an aspect of social connection among LTC residents; we limited searches to English-language articles published from database inception to search date (July 2019). For the current analysis, we included studies that reported: (1) the association between social connection and a mental health outcome; (2) the association between a modifiable risk factor and social connection; or (3) intervention studies with social connection as an outcome. From studies in (2) and (3), we identified strategies that could be implemented and adapted by LTC residents, families and staff during COVID-19 and included the papers that informed these strategies.

What did the synthesis find? Provide a lay summary of the outcomes (max 300 words):

Our systematic search of published research on social connection in LTC residents identified 133 studies.

We found 61 studies that assessed the association between social connection and mental health outcomes in LTC residents. We categorized these studies according to the reported mental health outcomes:

- Depression;
- Responsive behaviors;
- Mood, affect and emotions;
- Anxiety;
- Medication use;
- Cognitive decline;
- Death anxiety;
- Boredom;
- Suicidal thoughts;

- Psychiatric morbidity; and
- Daily crying.

Overall, these studies suggest social connection is associated with better mental health in LTC residents.

We used 72 observational and intervention studies, combined with knowledge user experience and advice, to highlight 12 strategies that might be used and adapted by LTC residents, families and staff to help build and maintain social connection in LTC residents during COVID-19:

- Manage pain;
- Address vision and hearing loss;
- Sleep at night, not during the day;
- Find opportunities for creative expression;
- Exercise;
- Maintain religious and cultural practices;
- Garden, either indoors or outside;
- Visit with pets;
- Use technology to communicate;
- Laugh together;
- Reminisce about events, people and places; and,
- Address communication impairments and communicate non-verbally.

However, we also note two important caveats to these strategies. First, some represent fundamental aspects of resident care whereas others will not be relevant to every LTC resident or home. For example, some strategies rely partly or entirely on technology, which presents its own challenges to residents, families and homes. Second, enacted in the catastrophically common scenario of infection control measures that exclude families and isolate residents from others in the home, all strategies rely on a healthy, sustained LTC workforce.

Although further research is needed, there is an immediate need to act given the sudden and severe impact of COVID-19 on social connection in LTC residents.

What are the implications of this synthesis?

- We have summarized 61 research articles linking social connection to mental health outcomes in LTC residents. The results suggest infection control measures put in place to protect LTC residents from COVID-19 have had negative impacts on their mental health.
- We have summarized 72 observational and intervention studies to highlight 12 potential strategies that LTC residents, families and staff might use to help build and maintain social connection for LTC residents, including during COVID-19; some represent fundamental aspects of resident care whereas others will not be relevant to some residents' needs, values, family situation and circumstances or applicable and feasible within the design, culture and context of every LTC home. However, all strategies rely on a healthy, sustained LTC workforce.
- More research is needed to better understand the health impacts of social connection for LTC residents as well as strategies to address it – both during and outside disease outbreaks like COVID-19.

List up to 10 keywords specific to this synthesis to facilitate website search filters and sorting:

(e.g. depression, virtual care, autism, opioids, racism, chronic pain, sleep, etc.)

- Long-term care homes; nursing homes; mental health; social relationships; social support; social networks; social engagement; loneliness