

Anxiety and Loneliness in the Post COVID-19 Era: A Study on Elderly Retirees in Kelantan

Ahmad Shahril Ab. Halim^{1,2*}, Raishan Shafini Bakar³, and Sharifah Shakirah As-Sahab Wan Muhamad Nasir⁴

¹*Department of Psychiatry, School of Medical Sciences, Universiti Sains Malaysia, Health Campus, Jalan Raja Perempuan Zainab II, 16150 Kubang Kerian, Kelantan, Malaysia*

²*Hospital Universiti Sains Malaysia, Jalan Raja Perempuan Zainab II, 16150 Kubang Kerian, Kelantan, Malaysia*

³*Department of Community Medicine, School of Medical Sciences, Universiti Sains Malaysia, Health Campus, Jalan Raja Perempuan Zainab II, 16150 Kubang Kerian, Kelantan, Malaysia*

⁴*Hospital Sri Aman, Jalan Hospital, 95000 Sri Aman, Sarawak, Malaysia*

ABSTRACT

The COVID-19 pandemic has significantly impacted the mental health of older adults, exacerbating feelings of loneliness and anxiety. Post-pandemic, these issues have persisted and, in some cases, worsened due to ongoing social isolation and health concerns. This study intends to examine the prevalence of anxiety and loneliness among elderly retirees in Kelantan in the post-COVID-19 pandemic era and measure the factors associated with anxiety. A cross-sectional study was conducted from March 2022 until March 2023, involving 378 members of the Malaysian Government Pensioners Association (Kelantan branch) using online Google form questionnaires. The instruments consisted of a sociodemographic proforma, Malay Version of the De Jong Gierveld Loneliness Scale, and Malay Version of Generalized Anxiety Disorder-7 (GAD-7). Logistic regression analysis was conducted to examine factors associated with anxiety. From the findings, the mean (standard deviation) age of the 378 participants was 65.7 (3.60) years, with 61% being males. The prevalence of anxiety and loneliness was 10.8% and 16.1%, respectively. Analysis showed an increasing 1 year in age (95% CI 0.62 to 0.84, $P<0.001$), and those with perceived social support (95% CI 0.14

to 0.62, $P=0.001$) have 28% and 71% lower odds of developing anxiety, respectively. Male participants have 67% less odds of developing anxiety compared to females (95% CI 0.16 to 0.71, $P=0.004$), whereas those having chronic illnesses have more odds of 10.41 of developing anxiety (95% CI 2.93 to 36.99, $P<0.001$). The prevalence of anxiety among elderly retirees in Kelantan was relatively low post-COVID-19,

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E-mail addresses:

shahrilabhalim@usm.my (Ahmad Shahril Ab Halim)

raishanshafini@usm.my (Raishan Shafini Bakar)

shakirahnasir@gmail.com (Sharifah Shakirah As-Sahab Wan Muhamad Nasir)

* Corresponding author

while loneliness was comparable to other studies. Protective factors against anxiety include increasing age, being male, and perceived social support, whereas chronic illnesses increase anxiety risk. Effective chronic illness management and social support are essential for mental well-being, and integrating mental health services with chronic illness management is crucial for early assessments and interventions.

Keywords: Anxiety, COVID-19, elderly, loneliness, retirees

INTRODUCTION

The COVID-19 pandemic has posed unprecedented challenges to mental health globally, with older adults being particularly vulnerable due to increased health risks and imposed social restrictions (Palgi et al., 2020). Loneliness and anxiety have been identified as major concerns among this demographic. Loneliness is linked to numerous adverse health outcomes, including depression and anxiety, and the pandemic has exacerbated these feelings in older adults due to prolonged isolation (Armitage & Nellums, 2020). Anxiety, meanwhile, is precipitated by social isolation, fear of infection, and uncertainties about the future. Most global studies on the psychological impact of the COVID-19 pandemic have predominantly focused on the general population. Research about the psychological well-being of elderly retirees amidst the pandemic worldwide is scarce, as more research was conducted on retirement planning and financial preparedness among retirees (Lawton et al., 2024). This study focuses on retirees in Kelantan, a state with a unique cultural and social dynamic, where support systems may differ from those in urban areas. We aim to determine the prevalence of anxiety and loneliness among retirees and identify factors that influence anxiety levels in the post-COVID-19 era.

MATERIALS AND METHODS

A cross-sectional study was carried out between March 2022 and March 2023 involving 378 members of the Malaysian Government Pensioners Association (Kelantan branch). The chairman of the association was contacted and briefed about the study and helped to distribute the Google Forms questionnaire link in their organization's online platforms. Participants were then recruited through this online platform, where they completed the Google Forms questionnaires. The study's primary instruments included a sociodemographic proforma; capturing variables such as age, gender, education level, income, living arrangements, and chronic illness status, Malay version of the De Jong Gierveld Loneliness scale, which was a validated tool for assessing emotional and social loneliness, and Malay version of Generalized Anxiety Disorder-7 (GAD-7) which used to assess anxiety symptomatology. A logistic regression analysis was conducted to identify independent factors significantly associated with anxiety.

RESULTS

Table 1 shows that the mean age of the participants was 65.7 (SD 3.60) years. Most of the respondents were male (60.6%), Malays (97.1%), Muslim (97.1%), married (65.1%), and lived with others (81.2%).

The prevalence of anxiety was 10.8%, and loneliness was 16.1%, as shown in Table 2.

Table 1
Sociodemographic characteristics of the study participants (n=378)

Sociodemographic Characteristics	n (%)
Age in years	65.71 (3.60) †
Sex	
Male	229 (60.6)
Female	149 (39.4)
Monthly income (RM)	
B40 (< RM 3030)	310 (82.0)
M40 (RM 3030 – RM 6619)	58 (15.3)
T20 (> RM 6619)	10 (2.6)
Race	
Malay	367 (97.1)
Chinese	8 (2.1)
Indian	3 (0.8)
Religion	
Islam	367 (97.1)
Buddhist	7 (1.9)
Hindu	4 (1.1)
Marital status	
Single	14 (3.7)
Married	246 (65.1)
Widowed	72 (19.0)
Divorced	46 (12.2)
Education level	
Secondary school	229 (60.6)
Tertiary	149 (39.4)
Living at home with whom	
Living alone	71 (18.8)
Living with others	307 (81.2)
Received social support	
Yes	283 (74.9)
No	95 (25.1)
Having any chronic illness	
Yes	254 (67.2)
No	124 (32.8)

† Mean (SD)

Table 2
Prevalence of depression and loneliness among study participants (n=378)

Variables	Measurement Scoring	n (%)
Anxiety	Score ≥ 8	41 (10.8)
Loneliness	Score ≥ 3	61 (16.1)

Table 3 shows a logistic regression analysis, which identified four key factors influencing anxiety. With each additional year of age, the odds of anxiety decreased by 28% (95% CI 0.62 to 0.84, $p<0.001$). Participants reporting higher perceived social support were 71% less likely to develop anxiety (95% CI 0.14 to 0.62, $p=0.001$). Males were 67% less likely to experience anxiety compared to females (95% CI 0.16 to 0.71, $p=0.004$). Individuals with chronic illnesses had a significantly higher risk of anxiety, with a tenfold increase in odds (95% CI 2.93 to 36.99, $p<0.001$). Loneliness was a confounder of anxiety in this study.

Table 3
Association between sociodemographic profile and anxiety among study participants (n=378).

Variables	Simple Logistic Regression		Multiple Logistic Regression ^a	
	Crude OR [†] (95% CI [‡])	<i>p</i> -value	Adj OR (95% CI)	<i>p</i> -value
Age in years	0.78 (0.69, 0.89)	<0.001	0.72 (0.62, 0.84)	<0.001
Sex	1		1	
Female				
Male	0.29 (0.15, 0.58)	<0.001	0.33 (0.16, 0.71)	0.004
Living at home with whom	1			
Alone				
With other people	0.29 (0.15, 0.58)	<0.001		
Receiving social support	1		1	
No				
Yes	0.19 (0.10, 0.37)	<0.001	0.29 (0.14, 0.62)	0.001
Having chronic illness	1		1	
No				
Yes	7.10 (2.15, 23.47)	0.001	10.41 (2.93, 36.99)	<0.001
Loneliness	1			
Lonely				
Normal	0.31 (0.15, 0.64)	0.001		

DISCUSSION

The results indicate that the prevalence of anxiety among elderly retirees in Kelantan was lower compared to global estimates for older adults during the pandemic, which ranged from 12% to 26% (Korkmaz et al., 2021; Robb et al., 2020). However, loneliness remained a notable concern, comparable to findings from other studies (Groarke et al., 2020). Protective factors such as increasing age and male gender align with previous research, suggesting factors such as work, neurohormonal, and psychological aspects may mediate this gender disparity (Ciuffreda et al., 2021). Perceived social support is crucial in mitigating anxiety, particularly emotional support which has a more significant effect on promoting psychological health (Bai et al., 2020; Wang et al., 2020).

Conversely, chronic illness significantly increases anxiety risk, emphasizing the interconnected relationship between physical and mental health (Wang et al., 2020). Chronic disease management should include mental health assessments to identify anxiety at an early stage. In comparison, loneliness is a confounder of anxiety in this study.

CONCLUSION

The prevalence of anxiety among elderly retirees in Kelantan was relatively low post-COVID-19, while loneliness was comparable to other studies. Protective factors against anxiety include increasing age, being male, and perceived social support, whereas chronic illnesses increase anxiety risk. Loneliness was a confounder of anxiety. Effective chronic illness management and social support are essential for mental well-being, and integrating mental health services with chronic illness management is crucial for early assessments and interventions.

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