



(Buysse, 2014). Changes in sleep behavior, impacted by increased stress and anxiety due to the pandemic, could lead to negative coping behaviors.

Lingering issues related to stress can cause short- or long-term problems. Stress has negative effects on one's mental and physical health. Short-term stress symptoms can lead to digestive issues, skin rashes, headaches, and hair loss (Senior Advisor, 2015). Long-term stress may lead to elevations of stress hormones, such as cortisol, leading to issues with anxiety, sleep, and memory and concentration problems. There can also be changes with weight, headache occurrences, digestive issues, depression, heart disease, high blood pressure, and possibly a stroke (American Heart Association, 2017).

Fear and distress can be caused by prolonged anxiety that may cause issues with physical and mental functioning. In the Nurses' Health Study, women with high levels of phobic anxiety were 59% more likely to suffer from a heart attack and 31% more likely to die from it than women with lower levels of anxiety (Harvard, 2020). By recognizing stress and anxiety early on, patients can be treated by physicians, helping reduce these conditions' mental and physical effects, and improve older adults' quality of life.

Resilience, being the ability to adapt to stress and adopt positive coping habits, is key to how older adults respond to

abrupt experiences. Maintaining stability helps keep a positive mindset for the future. This mindset is what provides hope, helps through hard times, and keeps people going. Having a resilient attitude contributes to achieving goals and desires that many wish to accomplish despite difficult situations (Ackerman, 2020).

### *Statement of Purpose*

The purpose of this study is to examine the experiences of older adults during the time of COVID-19 related to activity, stress, anxiety, sleep, health, and resilience.

The aims were to:

- 1) Examine the relationships between isolation, life space, stress, anxiety, quality of life, mood, activity, and sleep in older adults during the COVID-19 pandemic via survey.
- 2) Describe the daily life experiences of older adults during the COVID-19 pandemic through qualitative interviews and photos of their environment.

### **Methods**

This study is a descriptive mixed-methods study. Multiple regressions will be used to explore the effects of resilience, considering other variables. Pearson correlations will be used to examine the relationships between all variables. Data will be stored on encrypted computers and will be downloaded into SPSS for analysis. Pseudonyms are assigned to participants to transcribe audio recordings from the interview. Qualitative data will be analyzed



the room where you sleep” (Stalvey et al., 1999).

### *Sleep*

The Pittsburgh Sleep Quality Index (PSQI) was used to measure sleep. The PSQI is a self-report questionnaire that assesses sleep quality over a 1-month time frame. It consists of 19 individual items that form seven component scores that range from 0 “no difficulty” to 3 “severe difficulty”. Sample items include: “During the past month, how often have you had trouble sleeping because you have to get up to use the bathroom” (Bussye, 1989).

### *Health Outcomes*

Several brief scales were drawn by The National Institute of Health’s (NIH) Patient-Reported Outcomes Measurement Information System (PROMIS) tools that are standardized brief measures of patient health outcomes including global health, anxiety, and loneliness (Cella et al., 2007). The total number of questions from all surveys is 60. Links to websites such as the Centers for Disease Control (CDC) and the National Council on Aging with older adults’ resources during the COVID-19 pandemic were posted at the end of the survey. The survey’s final question will ask if participants would like to be contacted for an interview about their experience.

### *Interviews*

Interviews were conducted via Zoom or phone. The interviews took about 1 hour to complete and were audio-recorded

health and limit health-promoting behaviors.

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