COVID-19: Factors Predicting Depressive Symptoms in People Aging with Long-Term Physical Disabilities

While the COVID-19 pandemic has caused major health concerns and disruptions to daily life overall, its impact on people with physical disabilities may be even greater, including on their mental health. People with physical disabilities are at higher risk of mental health conditions in general, and recent studies have found that pandemic-related quarantine and social distancing policies have created an even greater risk of mental health conditions like depression.

Several factors have been linked to depression in the general population and people with disabilities before the pandemic. These factors include:

- Anxiety
- Instrumental support—i.e., tangible help with daily activities that people with disabilities may receive from others
- Loneliness
- Sleep quality
- Financial stress

As occupational therapists (OTs) become more familiar with factors associated with depression in people with physical disabilities, they can better provide the support and care needed during a pandemic. To gather more information on this subject, we held a study on relationships between these factors and depression in middle-aged adults with physical disabilities during the early stages of the COVID-19 pandemic. We also provided recommendations for OTs looking to address symptoms of depression in their clients.

About the Study

Beginning in April 2020, we sent a supplemental survey with questions about COVID-19, depression, and factors associated with depression to participants of a larger, ongoing study of people aging with long-term physical disabilities (ages 45–64). Participants could choose to take the survey online or over the phone.

One hundred eighty-six participants took the supplemental survey. We analyzed the data and found that financial stress, loneliness, and anxiety all predicted depressive symptoms. Anxiety was the strongest predictor. We also found associations for race and previous depression diagnosis: Black participants and participants with no history of depression had lower levels of depressive symptoms.

Implications for Occupational Therapists

Many studies have found connections between anxiety and depression, so our finding that anxiety was the strongest predictor of depressive symptoms was not surprising. OTs can consider using evidence-based anxiety relief programs such as exercise programs for anxiety disorders or acceptance and commitment therapy, a program that uses acceptance and mindfulness techniques paired with behavior change strategies.

We also found that loneliness and financial stress were associated with depression. OTs should consider developing ongoing plans to reduce loneliness as the pandemic continues. Programs like animal-assisted therapy or Circle of Friends have been shown to help with loneliness. Reducing financial stress may also help relieve symptoms of depression. OTs can teach financial management strategies to clients to build their confidence, improve their financial skills, and reduce the risk of financial exploitation.

While race and history of depression are factors that are not modifiable, this information may still be useful for health-care professionals. OTs can closely monitor current symptoms of depression for participants with a previous diagnosis of depression. Our findings on race and depression in people aging with disabilities can raise awareness of OTs in depression prevention about the impact of race among people with disabilities.

Conclusion

We looked at several factors associated with depression in people with physical disabilities during an unprecedented time—the onset of the COVID-19 pandemic. Higher levels of anxiety, loneliness, and financial stress all predicted higher levels of depressive symptoms, with anxiety being the most important predictor. OTs looking to improve depressive symptoms in clients with disabilities can use evidence-based programs to address these factors.