Social disruptions, mental health, and self-management in older women with hypertension during the COVID-19 pandemic: Findings from the Women’s Health Initiative

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ABSTRACT

Introduction
Hypertension is highly prevalent in older women and is associated with poorer mental health, which may negatively impact hypertension self-management behaviors (HSM). The COVID-19 pandemic disrupted social resources; however, the impact of disruptions on HSM and differences by race and ethnicity or resilience is unknown.

Methods
Women’s Health Initiative participants with hypertension (n=34,887; mean age=84, range=71-104) self-reported COVID-19-related disruptions, HSM, mental health, and psychological resilience. The level of social disruption was compared by race/ethnicity. The relationship between category of disruption (basic needs, social network, health care and medication access) and HSM and mental health was examined, overall, and by race/ethnicity and resilience among women with high disruption, using ANOVA and chi-square tests.

Results
The vast majority of older women with hypertension experienced social disruptions related to the COVID-19 pandemic (95%). Social network disruptions were most common (85%), followed by health care and medication access disruptions (69%), and basic needs disruptions (28%). All categories were associated with poorer HSM in most behavior outcomes and poorer mental health status. Women of color reported more social disruptions; among women with high disruptions, women of color had worse HSM across most behaviors measured, and poorer mental health compared to non-Hispanic white women. Among women with high disruption, those with high psychological resilience reported better HSM across most behaviors measured, and better mental health.

Conclusions
The COVID-19 pandemic may have hindered HSM in older women through disrupted social resources and diminished mental health. Women of color may be “doubly vulnerable” to the effects of the pandemic – not only do they experience a higher degree of social disruption, they
may also experience greater impacts of the disruption on HSM and mental health. Building resilience may buffer the impact of social disruption on HSM.

**Key Words**

Hypertension, older women, social determinants of health, self-management, mental health

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