

Social Isolation and Loneliness among Older Adults: Mitigating Health Outcomes



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Objectives

- Define *social isolation* and *loneliness*
- Examine prevalence of and risk factors for *social isolation & loneliness*
- Summarize findings pertaining to health outcomes
- Explore interventions to mitigate health outcomes



An Important Distinction

Social Isolation

“A *state* in which the individual lacks...engagement with others, has a minimal number of social contacts, and is deficient in fulfilling and quality relationships.”
(Nicholson, 2009, p. 1346)

Loneliness

“A *subjective experience* that is unpleasant and distressing and results from deficiencies in a person’s social relationships.”
(Ciolfi, 2019, p. 25)

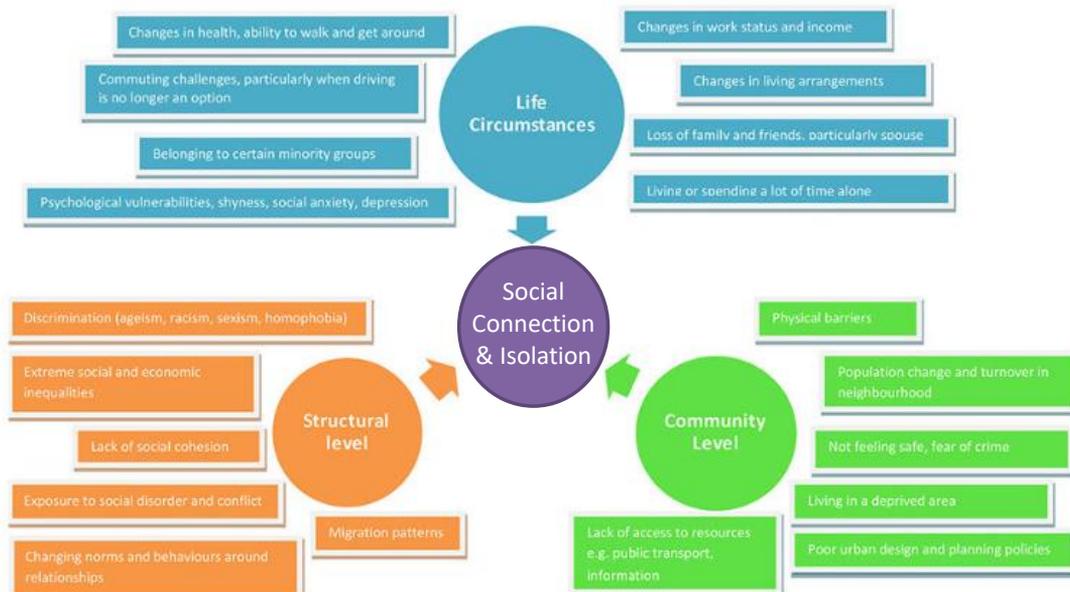
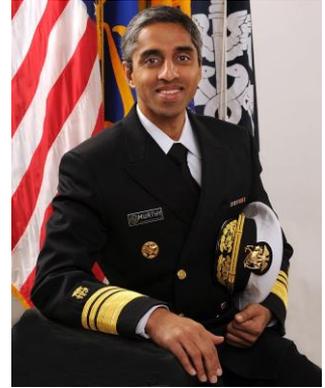


Figure 1 - Changes impacting on social connectedness

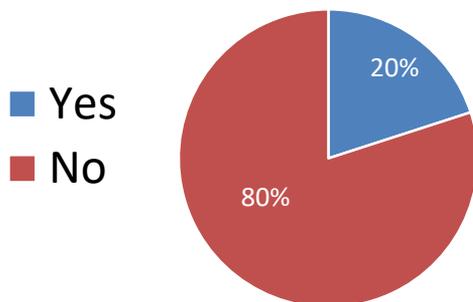
<http://www.healthyageingindudley.org.uk/social-connectedness.html>

“The most common pathology I saw was not heart disease or diabetes; it was *loneliness*.”

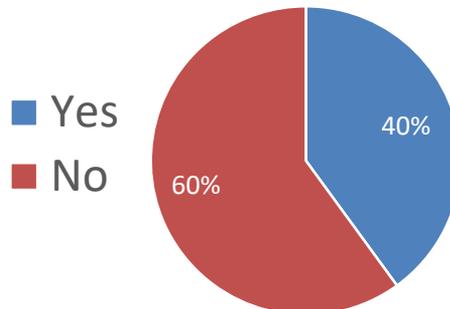
-Surgeon General Vivek Murthy (2014-17)



% of Americans who are lonely - 1980s



% of Americans who are lonely - Today



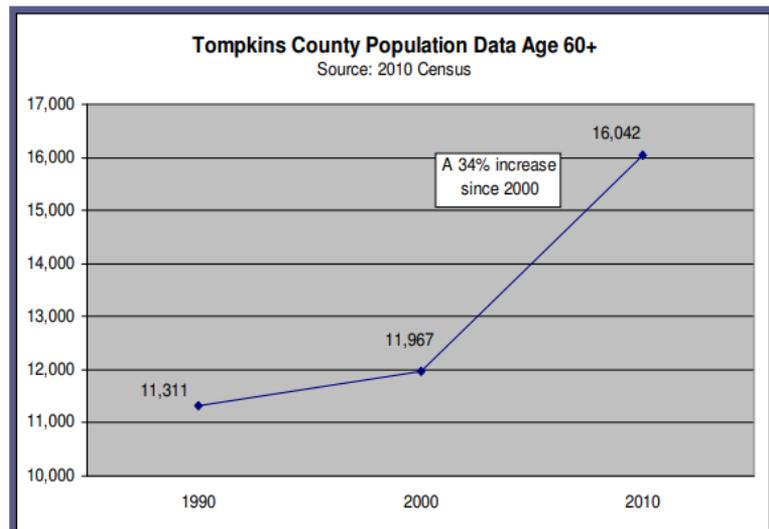
(Brooks, 2018; Nicholson et al., 2010; Perissinotto, Cenzer, & Covinsky, 2012)





Risk Factors

- Geographically isolated
- LGBTQ+
- Physical, functional, sensory, cognitive impairment
- 80+
- Living alone
- Limited income
- Poor mental health
- Life transitions
- Men

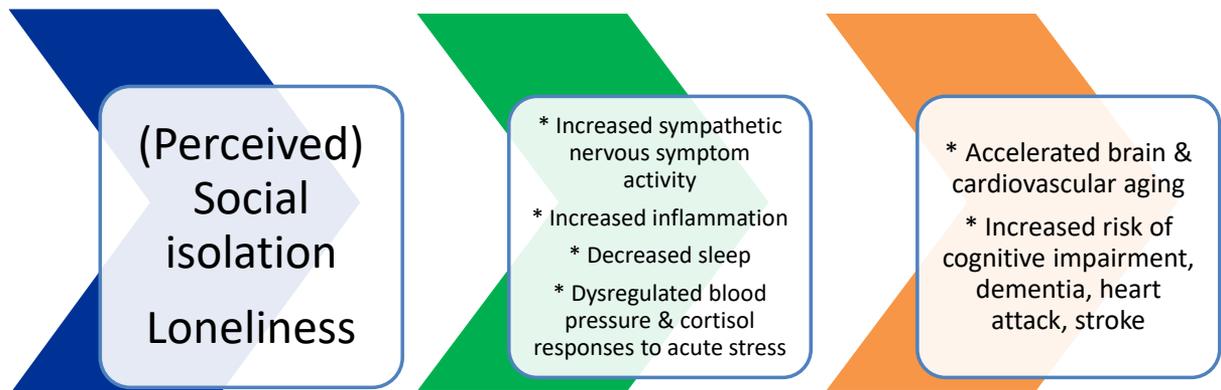


Source: Age Friendly Ithaca and Tompkins County Action Plan, December 2016

Pathways of Health Promotion

- Increases sense of belonging, identity, & purpose
- Improves self-confidence & sense of self-worth
- Provides material support or increasing knowledge about how to access material needs and services
- Encourages us to change or avoid unhealthy lifestyle habits
- Provides social support that enables us to cope with trauma and stress

(Holt-Lunstad, Smith, & Layton, 2010; Reiner, 2019)



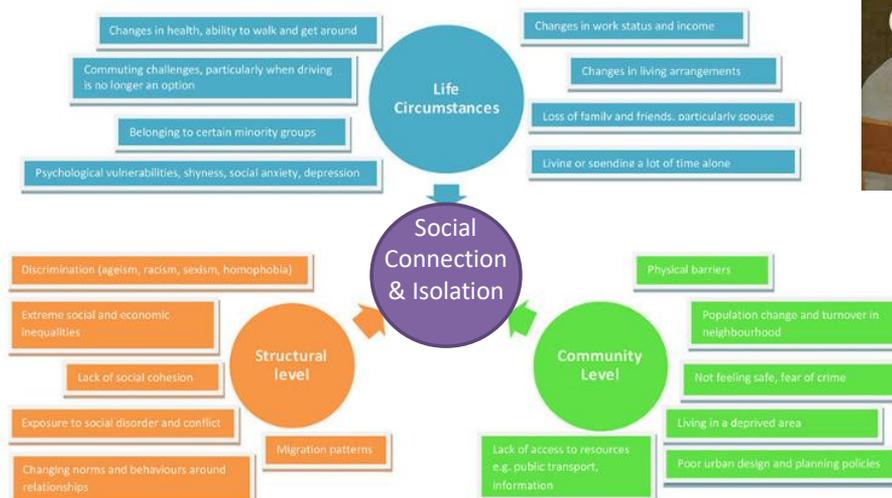
(Cacioppa et al., 2011; Grant, Hamer, & Steptoe, 2009; Pillemer & Holtzer, 2015)





Flegal et al, 2013; Holt-Lunstad et al., 2015; Holt-Lunstad, Smith, & Layton, 2010; Yang et al., 2016

Mitigating Health Outcomes: A Prescription for Well-Being



(Nicholson, 2012;
<http://www.healthyageingindudley.org.uk/social-connectedness.html>)

Figure 1 - Changes impacting on social connectedness



A Prescription for Well-Being

- Physical activity & wellness programs
 - Social contact with others
 - Reframe
 - Never too late!
 - Prevention

(Gugliucci et al., 2019)



A Prescription for Well-Being

- Animal companionship
 - Reduces loneliness (Johnson & Bibbo, 2015; Stanley et al., 2014)
 - Decreases stress and anxiety (Friedmann et al., 2015)
 - Physical activity & health behaviors (Curl et al., 2017)
 - Present orientation (Raina et al., 1999)
 - Support exchange/purpose (Fine & Friedmann, 2019)
 - Social capital (Wood, 2011; Arkow, 2015)

Cats for Comfort



Cornell Feline
Health Center





A Prescription for Well-Being

- Technology
 - Email, social media, internet
 - Mixed findings
 - Technology training
- Spirituality/Religion
 - Coping, mutual support, meaning
 - Social events



A Prescription for Well-Being

- Volunteerism & Civic Participation
 - 2 billion hours/year; \$45 billion economic value/year (CNCS, 2016).
 - Practitioner strategies for encouraging volunteerism:
 - Make “the Ask”
 - Connect with formal programs & leverage informal networks
 - Focus on strengths
 - Remove institutional barriers



A Prescription for Well-Being

- Age-Friendly Communities
 - “...promotes active, healthy, socially connected aging through inclusive policies, infrastructure, & services” (Oh, 2019)



A Prescription for Well-Being



- Neighborhood café/senior center hybrid
 - Breakfast, lunch, snacks
 - Daily activities (e.g., yoga, art, exercise)
 - Cultural programming and trips
 - Telephone topics
 - Lifestyle tips via FB, Twitter, email



A Prescription for Well-Being

- The Village Model (Graham, Scharlach, & Stark, 2017)

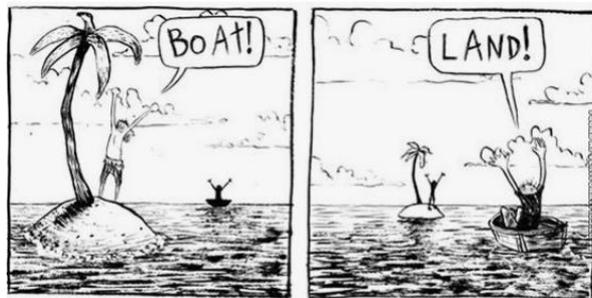


- Intentional Intergenerational Communities (Power et al., 2008)



A Prescription for Well-Being

- If it is (at least in part) about perceptions and subjective experience...





A Prescription for Well-Being

- Take a broad view of assessment
 - Risk factors
 - Characteristics of social network
 - Quality of social interactions
 - Types of social support



Conclusions

- Social isolation and loneliness don't always mean the same thing.
- Prevention and early intervention are important
- Intervention must occur at individual, community, and structural levels.
- Remember the importance of our “social portfolio” (Cohen, 2000)
- New professional roles, knowledge, skills, as well as cross-sector collaboration required to meet the social needs of the older population and to promote their optimal well-being.



Thank You!

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