

An elderly woman with short, white hair and a gold hoop earring is shown in profile, looking down at a framed black and white portrait of a man in a sailor suit. She is wearing a colorful, patterned vest over a white collared shirt. The background is a window with white blinds, through which bright light is streaming, creating a soft, hazy atmosphere.

Engaging loneliness in older adults

Health and wellness professionals can make a difference in the lives of lonely clients by encouraging them to reach out, try new things and seek new friends

by Donald R. Koepke, MDiv, BCC

Loneliness. We all experience it; we all witness it. It's an emotional state that results from isolation—a belief that no one understands or cares. Loneliness differs from aloneness, however. To be alone just means no one else is around at the moment. To be alone with one's thoughts, feelings and beliefs can cleanse and strengthen individuals. But to be lonely is to want people and social contact, and feel unable, in one's estimation, to get this contact.

Existentialist philosophers suggest that loneliness is a part of the human condition—that no one can truly “walk a mile” in the shoes of another or completely understand what another feels or experiences. To existentialists, all human beings are alone, searching for that pure intimacy experienced in our mothers' wombs before we were pushed into the world. Loneliness researcher Sean Seepersad, PhD, an assistant professor in the Child and Family Services Department at California State University–Fresno, put it this way on his Web of Loneliness website:

“Whether we would like to agree with it or not, loneliness is a universal phenomenon, it visits every human soul at some time in every culture, every race, every class, every age, and at all times in human history. It is inescapable, and has been expressed throughout the ages in music, literature and art. To feel lonely is to join the rest of humanity in acknowledging that we are somehow fundamentally separated from each other, doomed to speak and yet never fully understood.”

This perspective is intensified by a culture that celebrates the individual,

while minimizing the corporate nature of the human being. In the past, people could at least feel connected to others by following group tradition. No more. In today's culture, the individual is king (or queen).

Ill health, disability or loss can also strengthen the natural experience of loneliness. Any time a person's life foundation is shaken, cracked or broken, these feelings, like a deep fog, can engulf the individual.

Causes and effects

Health and wellness professionals encounter loneliness every day. Sometimes loneliness sounds like depression, in phrases such as, “I can't do this anymore” or “I am so tired today.” It is seen in an individual's pervasive sadness, unwillingness or even inability to join the group, or holding back. Now, it's even possible to measure the effects of loneliness.

In a paper published earlier this year, University of Chicago (UC) researchers found that the blood pressure readings of lonely individuals can be as much as 30 points higher than those who are not lonely, even when such factors as depressive symptoms and perceived stress are taken into account. Coauthor John Cacioppo, Tiffany & Margaret Blake Distinguished Service Professor in Psychology at UC, stated:

“Lonely people differ from non-lonely people in their tendency to perceive stressful circumstances as threatening rather than challenging, and to passively cope with stress by failing to solicit instrumental and emotional support and by withdrawing from stress rather than actively coping and attempting to problem solve.”

Resource

Web of Loneliness

www.webofaloneliness.com

This website was developed by Sean Seepersad as a part of his research into the effects of loneliness upon students at the University of Illinois–Urbana. It remains a treasure house of poetry, art and writings on the subject of loneliness—even Web links for the lonely.

Loneliness tends to be a more common experience for older adults, than for younger people. One potential reason for this difference came to mind when I was a chaplain in an assisted living community in California. I was surprised to hear resident after resident complain about feeling lonely, even though they were continually surrounded by people. But they were not the *right* people.

I realized that clients came from established social networks that, for many reasons, had been lost or shattered, and they hadn't had to make new friends in years. Thus, the size of their social groups was less important than how they felt about the relationships in them.

Four ways to address loneliness

So what can health and wellness professionals do about the loneliness they encounter in older clients? First, they can get in touch with their own loneliness. Being unaware of the loneliness within may cause professionals to keep an emotional distance from clients. Since loneliness is

Continued on page 56

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Continued from page 55

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a human condition, those who get in touch with their own experience of these feelings can have significant insights into the loneliness of others.

Second, individuals can befriend clients by listening to, respecting and connecting with them, while maintaining professional boundaries. Within a wellness program, many opportunities exist for close, personal interaction—be it sharing a time of laughter, listening to a cry of physical or emotional pain, or *just being there* when nothing special is happening.

Third, health and wellness professionals can encourage clients to seek new friends, to try new things, and to reach out rather than withdraw. Individuals may envision the wellness program as a laboratory where clients take risks, even if it is only walking further today than last week. Using what they know about each person, professionals can foster the development of relationships, even friendships. And by encouraging clients to support each other, celebrating successes as a group and cheering each other on, they can make the fitness or wellness center a place of community-building, not just a place of physical fitness.

Fourth, professionals can also *walk* with clients as they engage their loneliness. It takes courage for older adults to reveal themselves to another person when they are unsure they will be accepted. It takes courage for them to seek a new friend if feelings of betrayal and abandonment linger years after a devastating loss. And it takes courage for them to allow themselves to risk loving and being loved by another, because of the reality of death and loss. That courage can come through a relationship with a caring health or wellness professional.

It is logical that some older people experience loneliness because their family members visit too little. But these relationships may be less important to mental health than friendships, suggests a recently published study. Led by Katherine Fiori of the University of Michigan, researchers noted that even though blood relationships are important to well-being in this population, such relationships are obligatory. A person who chooses to become a friend can help an individual not only feel more independent, but also discover an even deeper emotional intimacy and companionship.

Making a difference

Mother Teresa, who worked among the poor in India, once called loneliness “the most terrible poverty.” Yet this experience can also provide “the rarest of opportunities to be in communion with consciousness,” according to Pankaj Bhandula, the driving force behind the Indian website Divine Feelings.

To be alone can be good; to experience loneliness can bring pain. Through their relationships with clients, health and wellness professionals can make a difference, encouraging these older adults to reach out to others—and to life. ☺

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