

Loneliness among Older People Exacerbated by the COVID-19 Pandemic

U.L. Aalto^{1,2}, S. Bonin-Guillaume^{3,4}

1. Department of Geriatrics, Helsinki University Hospital, Helsinki, Finland; 2. Department of General Practice and Primary Health Care, University of Helsinki, Helsinki, Finland; 3. Department of Internal Medicine and Geriatrics, University Hospital of Marseille, Marseille, France; 4. Medical School Timone, Aix Marseille University, Marseille, France

Corresponding Author: Ulla L. Aalto, Department of Geriatrics, Helsinki University Hospital, Helsinki, Finland, ulla.aalto@fimnet.fi

The COVID-19 pandemic brought loneliness of older people to general awareness in a dramatic way. Older people appeared to be especially vulnerable to the virus, which justified the many times very strict lockdown measures. However, at the same time, older people and their physical and mental well-being was compromised by these social distancing and lockdown measures. As a result, high and even increasing prevalence numbers of loneliness have been detected over the world among older people (1).

Even far prior to the pandemic, loneliness has been recognized as an important public health issue (2, 3). Described also as an “epidemic of loneliness” it has been estimated to affect 20-30 % of older people (4). More than being solely a social issue, there is a growing amount of evidence that loneliness seriously threatens people’s health in many ways (2). Loneliness is associated with several adverse health events, such as cardiovascular disease and stroke (5), cognitive impairment and dementia (6, 7), depression (8), frailty (9), and increased mortality (10). Among older people the reasons behind loneliness are diverse including e.g., declining physical functioning or cognition and disabilities, loss of spouse or friends, and financial insecurity. All these aspects mentioned can lead to reduction of social networks, or withdrawal from social activities.

Loneliness has a negative impact also on caregivers of the older person. Indeed, 10% of caregivers suffer from loneliness which increases by 2.5-fold the risk of a high caregiver burden, which further contributes to negative mental and physical health outcomes (11). During the pandemic, old caregivers, particularly the spouses, were left on their own to care and manage their old care-recipient including those with severe and/or end-stage illnesses.

In this issue of the journal, Knuutila and colleagues (12) provide results of a study investigating prevalence of loneliness in a Finnish home-dwelling older population prior to and during the pandemic. The results indicate an increase in both feelings of loneliness and depression in 2021 compared with the situation in 2019 (12). These feelings have been enhanced by the sanitary and social ageism that the older people have experienced during the pandemic, and the uselessness which is an important factor of depression (13). Even though the reported increase from 26% to 30% in feelings of loneliness can be considered somehow modest, it is alarming, when considering all the negative impact loneliness has on health.

During the quarantine periods, online technological solutions, such as video calls and social media applications

appeared all at once to become very valuable resources in maintaining social and emotional interaction with family and friends (14). Older people capable of using and having access to digital devices were probably in a better situation to defend themselves against loneliness by keeping their social contacts alive (12, 15). On the contrary, people with cognitive impairment or other disabilities hindering the use of digital solutions, were likely more prone to suffer from restrictive measures and loneliness. Even in western countries, old people are more likely excluded from digital world due to inability to access, refusal to use internet or lack of literacy skills; 57.4% in the SHARE study (16). Digital exclusion is part of the social exclusion. Moreover, being digitally excluded is significantly associated to functional decline on basic activities of daily living and instrumental activity of daily living (16). And this is exacerbated in the oldest old population. This divide between old people with and without access to digital technology was highlighted during the COVID-19 epidemic and emerged as a public health issue for the aging population.

On the other hand, pandemic has with no doubt accelerated the digitalization of services for older people also, since some of the services have at least partly gone virtual. Promising effects have been observed from interventions in alleviating loneliness by online group sessions instead of the traditional face-to-face groups (17, 18).

Given the modifiable nature of loneliness, actions should be taken to find effective interventions to reduce loneliness. During life-long course it is important to take care of the risk factors, promote social health and recognize the importance of factors of psychological well-being (3). Social group interventions have proven to be effective in alleviating loneliness by enabling meaningful social contacts (19). While digital skills are becoming more prevalent among older people, development of digital solutions in interventions reducing loneliness will probably have potential even after the pandemic. However, it is important to keep in mind the existing digital divide among older people, which may limit certain groups from profiting from these solutions.

Yet, the cornerstone to address loneliness is to recognize and identify those suffering from it, and then perform effective interventions accordingly. Indeed, loneliness is a social issue that needs to be handled before becoming a medical issue with a high impact on the health care systems.

Conflict of interest: None.

References

1. Su Y, Rao W, Li M, Caron G, D'Arcy C, Meng X. Prevalence of loneliness and social isolation among older adults during the COVID-19 pandemic: A systematic review and meta-analysis. *Int Psychogeriatr.* 2023;35:229-241. doi: 10.1017/S1041610222000199.
2. Hawkey LC, Cacioppo JT. Loneliness matters: a theoretical and empirical review of consequences and mechanisms. *Ann Behav Med.* 2010;40:218-27. doi: 10.1007/s12160-010-9210-8.
3. Perissinotto C, Holt-Lunstad J, Periyakoil VS, Covinsky K. A Practical Approach to Assessing and Mitigating Loneliness and Isolation in Older Adults. *J Am Geriatr Soc.* 2019;67:657-662. doi: 10.1111/jgs.15746.
4. Ong AD, Uchino BN, Wethington E. Loneliness and Health in Older Adults: A Mini-Review and Synthesis. *Gerontology.* 2016;62:443-9. doi: 10.1159/000441651.
5. Cené CW, Beckie TM, Sims M, Suglia SF, Aggarwal B, Moise N, Jiménez MC, Gaye B, McCullough LD; American Heart Association Social Determinants of Health Committee of the Council on Epidemiology and Prevention and Council on Quality of Care and Outcomes Research; Prevention Science Committee of the Council on Epidemiology and Prevention and Council on Cardiovascular and Stroke Nursing; Council on Arteriosclerosis, Thrombosis and Vascular Biology; and Stroke Council. Effects of Objective and Perceived Social Isolation on Cardiovascular and Brain Health: A Scientific Statement From the American Heart Association. *J Am Heart Assoc.* 2022 Aug 16;11(16):e026493. doi: 10.1161/JAHA.122.026493.
6. Boss L, Kang DH, Branson S. Loneliness and cognitive function in the older adult: a systematic review. *Int Psychogeriatr.* 2015;27:541-53. doi: 10.1017/S1041610214002749.
7. Akhter-Khan SC, Tao Q, Ang TFA, Itchapurapu IS, Alosco ML, Mez J, Piers RJ, Steffens DC, Au R, Qiu WQ. Associations of loneliness with risk of Alzheimer's disease dementia in the Framingham Heart Study. *Alzheimers Dement.* 2021;17:1619-1627. doi: 10.1002/alz.12327.
8. Jaremka LM, Andridge RR, Fagundes CP, Alfano CM, Povoski SP, Lipari AM, Agnese DM, Arnold MW, Farrar WB, Yee LD, Carson WE 3rd, Bekaii-Saab T, Martin EW Jr, Schmidt CR, Kiecolt-Glaser JK. Pain, depression, and fatigue: loneliness as a longitudinal risk factor. *Health Psychol.* 2014;33:948-57. doi: 10.1037/a0034012
9. Herrera-Badilla A, Navarrete-Reyes AP, Amieva H, Avila-Junes JA Loneliness is associated with frailty in community-dwelling elderly adults *J Am Geriatr Soc.* 2015;63:607-9. doi: 10.1111/jgs.13308.
10. Holt-Lunstad J, Smith TB, Baker M, Harris T, Stephenson D. Loneliness and social isolation as risk factors for mortality: a meta-analytic review. *Perspect Psychol Sci.* 2015;10:227-37. doi: 10.1177/1745691614568352.
11. Bonin-Guillaume S, Arlotto S, Blin A, Gentile S. Family Caregiver's Loneliness and Related Health Factors: What Can Be Changed? *Int J Environ Res Public Health.* 2022 9;19(12):7050. doi: 10.3390/ijerph19127050
12. Knuutila M, Rautiainen L, Lehti TE, Karppinen H, Kautiainen H, Strandberg TE, Öhman H, Savikko NM, Jansson AH, Pitkälä KH. Impact of COVID-19 pandemic on older people's loneliness: findings from a longitudinal study between 2019 and 2021 among older home-dwellers in Finland. *J Nutr Health Aging.* 2023;27(8):619-625. doi: 10.1007/s12603-023-1949-2
13. Barth N, Guyot J, Fraser SA, Lagece M, Adam S, Gouttefarde, al COVID-19 and Quarantine, a Catalyst for Ageism *Front Public Health.* 2021 Apr 12;9:589244. doi: 10.3389/fpubh.2021.589244.
14. Hajek A, König HH. Social Isolation and Loneliness of Older Adults in Times of the COVID-19 Pandemic: Can Use of Online Social Media Sites and Video Chats Assist in Mitigating Social Isolation and Loneliness? *Gerontology.* 2021;67:121-124. doi: 10.1159/000512793.
15. Zhang K, Burr JA, Mutchler JE, Lu J. Online engagement, resilience, and loneliness among older people during the COVID-19 pandemic. *Soc Sci Med.* 2023;329:116026. doi: 10.1016/j.socscimed.2023.116026.
16. Lu X, Yao Y, Jin Y. Digital exclusion and functional dependence in older people: Findings from five longitudinal cohort studies. *eClinicalMedicine* 2022;54: 101708. DOI: <https://doi.org/10.1016/j.eclinm.2022.101708>
17. Jansson A, Pitkälä KH. Editorial: Circle of Friends, an Encouraging Intervention for Alleviating Loneliness. *J Nutr Health Aging.* 2021;25(6):714-715. doi: 10.1007/s12603-021-1615-5.
18. Li M, Rao W, Su Y, Sul Y, Caron G, D'Arcy C, Fleury MJ, Meng X. Psychological interventions for loneliness and social isolation among older adults during medical pandemics: a systematic review and meta-analysis. *Age Ageing.* 2023;52:afad076. doi: 10.1093/ageing/afad076.
19. Routasalo PE, Tilvis RS, Kautiainen H, Pitkälä KH. Effects of psychosocial group rehabilitation on social functioning, loneliness and well-being of lonely, older people: randomized controlled trial. *J Adv Nurs* 2009;65:297-305. doi: 10.1111/j.1365-2648.2008.04837.x

© Sardi and Springer-Verlag International SAS, part of Springer Nature 2023

How to cite this article: U.L. Aalto, S. Bonin-Guillaume. Editorial: Loneliness among Older People Exacerbated by the COVID-19 Pandemic. *J Nutr Health Aging.* 2023;27(8):617-618; <https://doi.org/10.1007/s12603-023-1968-z>