Loneliness is a serious risk in COVID-19 lockdown

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Dear Editor,

In their EGM article and guidance on COVID-19 for long-term care facilities (LTCF) Blain et al. [1] highlighted, in addition to the risks of COVID-19 infection, the negative effects of quarantine on residents. They also emphasized the impact of social isolation on residents' feelings of loneliness. Loneliness can have both short- and long-term negative effects on older people's cognition, health, functioning, quality of life, and even mortality [2]. Even before COVID-19, older people's loneliness in LTCF was surprisingly common [3]. During COVID-19, new technology has been identified as a tool for enhancing contacts between older people and their closest ones. Prior to COVID-19, group interventions have shown promising results in alleviating loneliness in LTCF [3].

The well-described group model "Circle of friends" (CoF) was created in Finland to alleviate loneliness and has been tested in a randomized controlled trial [4]. It is claimed to be the only effective form of intervention for the physiological mechanisms and health outcomes of loneliness [2]. It has been disseminated via a training model to facilitators, who have implemented it among older people suffering from loneliness. It has been widely disseminated in Finland over the last 15 years by the Finnish Association for the Welfare of Older People (FAWOP). More than 10,000 lonely older people have participated in these groups and about 1000 professionals have been trained as facilitators. The feasibility of CoF in LTCFs has been explored, and the model has also been exported to some other countries.

At the beginning of the COVID-19 pandemic, FAWOP started to modify the original CoF model into online groups. In the pilot phase, the online CoF groups met on an electronic platform which was easy and safe to use. The online version of CoF retained the elements of the original group model. We emphasize that these group sessions are targeted toward older people who admit they are suffering from loneliness and are motivated to participate. The main idea is to value older people's active agency and to empower them to take mastery over their own lives and to gradually take responsibility for their own CoF group. A properly facilitated group process and group dynamics are used as means to guide the older people to confront their loneliness, meet their peers in the group, and continue group meetings of their own without the facilitators.

After the first four online groups, we interviewed the participants ($n = 15$, two men, aged 70–86) to find out about their experiences and the feasibility of this modified model. Content analysis of the transcribed interviews revealed that the group participants felt their loneliness had been alleviated during the COVID-19 lockdown. They were pleased to see how easy it was for the group to meet online. One person summarized the experience:

"This is like having a coffee break at the same table, even if we are separated from each other".

Another person described it as follows:

"We were all so confused by the news flood...about what this (COVID-19) means for us and the nation and the planet as a whole – these were big questions. It was good that the group was launched quickly when everyone had big questions in their heads. The group started at exactly the right time. My loneliness has been alleviated. I look forward to our next meetings".

After the facilitated group process, the participants can continue their group meetings independently. Of the first online groups, all the participants have kept in touch with each other independently. The online meeting room was free of charge to the participants. They could use WhatsApp or

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call each other. Before and after COVID-19, participants were encouraged to meet and greet each other face-to-face. Of the face-to-face groups, 67% continued meetings on their own after the facilitated three-month period [3]. The independently continuing face-to-face groups have developed creative solutions to keep in touch with each other during the COVID-19 quarantine, for example, visiting virtual museums. Online CoF groups have been further disseminated via online training of facilitators.

However, recruiting people for the online groups is challenging. Many older people cannot get started on their own and have difficulties or feel uncertain about joining online meetings, even if they have used the internet for other purposes. It is important to note that technology usage is a two-way phenomenon in older people's lives, having both pull and push factors, simultaneously promoting and discouraging commitment to technology [5]. In LTCF during the COVID-19 lockdown, staff could help residents communicate with each other in an online group format. For example, large screens and easy-to-use online platforms could be important tools for facilitating peer communication and alleviating loneliness.

Compliance with ethical standards

Conflict of interest On behalf of all authors, the corresponding author states that there is no conflict of interest.

Ethical approval The study was approved by the local ethics committee and has therefore been performed in accordance with the ethical

standards laid down in the 1964 Declaration of Helsinki and its later amendments.

Informed consent Informed consent was obtained from all the participants.

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