

MANIFESTATION OF LONELINESS IN ELDERLY PEOPLE MANIFESTAREA SINGURĂTĂȚII LA PERSOANELE DE VÂRSTA A TREA

CZU: 316.6-053.9=111 DOI: 10.46728/pspj.2023.v43.i2.p15-31

Cristina VLAICU

prd, "Ion Creangă" State Pedagogical University psychologist, Residential Center for Care and Assistance for Dependent Persons – Berceni, General Directorate of Social Assistance of Bucharest Municipality https://orcid.org/0009-0009-9999-4546

Summary

Loneliness is a complex issue that is increasingly concerning people worldwide due to its potential risks to health and societal impacts. It is also an important social phenomenon that requires regular reflection. Understanding loneliness and its effects on modern society is essential to predicting its impact on future generations. Research indicates that perceived loneliness is a significant risk factor for both physical and mental health issues. This article explores the current state of research on loneliness and health in older adults, outlining key concepts and definitions of loneliness, discussing its prevalence, and assessing its impact on the elderly. However, to addressing elderly loneliness suggests the presence of intricate nuances within this phenomenon.

Keywords: loneliness, isolation, elderly people, health. social connection.

Rezumat

Singurătatea este un concept psihofiziologic complex, un factor de risc pentru sănătate și o tendință îngrijorătoare pe tot globul, devenind astfel o problemă a societății moderne. Ea este și un important fenomen social care necesită o reflecție regulată. În prezent, cercetarea problemei singurătății are o relevanță deosebită, pentru că astfel putem înțelege cu exactitate fenomenul, transformarea acestuia în lumea modernă și să prezicem impactul asupra lumii viitorului. Creșterea dovezilor sugerează că singurătatea percepută este un factor de risc major pentru boli fizice și psihice. Acest articol evaluează stadiul cercetărilor privind singurătatea și sănătatea la adulții în vârstă. Sunt identificate concepte cheie și definiții ale singurătății și sunt revizuite prevalența, corelațiile și efectele singurătății la persoanele în vârstă. Deficitul unui tablou clar al abordărilor singurătății la vârstnici denotă faptul că acest fenomen poate avea diferite nuanțe.

<u>Cuvinte-cheie</u>: singurătate, izolare, persoane în vârstă, sănătate. conexiune socială.

Introduction In today's fast-paced, technologically advanced world, loneliness is a multifaceted phenomenon that can be linked to a wide range of causes, including both social and psychological

elements, such as a variety of situations. The concept of solitude refers to how a person establishes connections both with the community in which they live and with the larger universe. Given this, it is feasible to see it as a basic social phenomenon that requires in-depth analysis from a socio-philosophical point of view. Given this, it is also possible to view it as a fundamental social phenomenon.

Regrettably, in today's contemporary times, individuals are increasingly experiencing a growing sense of isolation and alienation inside a global political system that seems strange to them. This is because globalization has occurred. Unfortunately, there is a growing trend in which the significance given to the state, organization, or collective entity is increasing while the relevance of the person and the subjective experiences they have are decreasing. According to research from all over the world, loneliness is becoming more common today, leading to the term ,,age of isolation." This is because the internet has made it easier than ever to communicate with people all over the world. According to these polls, around one-third of individuals suffer from loneliness, and it has serious effects on one out of every twelve people [10]

At the current time, the problem of loneliness has evolved into a phenomenon that is singularly specific to each person, moving beyond the scope of its conventional portrayal. There has been a change in how the impact of society on individuals is understood, with greater emphasis being given to how people create their social position based on their own experiences and points of view. This shift in how the effect of society on individuals is understood came about because of this change. There is a correlation between an increase in the level of self-awareness that a person has and alterations in the social norms that are taking place, which has been connected to the fact that the psychological part of loneliness is becoming more important. It has become more apparent that loneliness is a widespread concern today. As a result, people are now faced with a broad variety of challenging problems, and it has become important to carry out a comprehensive analysis of the social environment in which we now find ourselves.

Because of advancements in communication and networking in the 21st century, there are more people connected to the world than ever before. However, this has led to a pervasive feeling of isolation that is unprecedented in the annals of human history. Since 1980, there has been a worrying rise in the rates of loneliness across the world. This trend is especially concerning for those who live alone. As a direct consequence of this, members of the medical community have started referring to this situation as the "loneliness epidemic"[23]. This is still true even though modern society exhibits higher levels of interconnectedness and technological advancements. This troublesome issue may be linked back to several other concerns that have developed as a direct consequence of the significant social upheaval that postmodern civilization has experienced. Regrettably, this widespread public health issue has emerged as a covert agent of death, imposing detrimental repercussions on the whole state of mental and physical health in the process.

We are all individuals with distinct tendencies, and one of those tendencies is the need to make and keep social relationships and interactions. Keeping up with one's social ties today is of the utmost significance. Not only does it have a significant impact on an individual's



mental health, but it also fosters a feeling of belonging within a group and provides essential assistance. Even though people have a natural tendency to seek out and develop connections with other individuals, the sensation of being alone is always there.

The purpose of this study is to provide an exhaustive analysis of the specialized literature in the manifestation of loneliness and its negative effects.

Upon completing an extensive examination of the relevant scholarly literature, it becomes evident that the notion of loneliness encompasses a complete framework that exhibits intricate connections with several constituent elements. The techniques used in this research demonstrate the inherent characteristic of dynamism that is prevalent in scientific discourse. The research approach, sometimes referred to as bibliographic research, or more precisely, the literature review, entails a comprehensive investigation and evaluation of previously published works about the topic of loneliness. The phenomenon of elderly individuals experiencing feelings of solitude may be analyzed using two distinct approaches within the realm of scientific explanation: deductive reasoning and inductive reasoning.

The variables that are being considered include both objective elements, such as physical health and sociodemographic data, and subjective aspects, such as subjective evaluations of mental health, perceptions, and quality of life [28]. *Objective factors* include things *like physical health* and *sociodemographic data*. *Subjective components* include things like perceptions and quality of life. Therefore, it is crucial to assess each of these traits to ascertain the degree to which they are associated with senior citizens' experiences of isolation. In this research, a descriptive cross-sectional design is used, and an analytical method is utilized for data collection

Loneliness is a personal and subjective sensation that may occur at any moment during a human's life, despite being common in people as they age and having ramifications for those individuals. Professionals in the fields of psychology, sociology, and medicine have conducted studies on the various facets of loneliness with the intention of better understanding the phenomenon. Nevertheless, despite all these efforts, loneliness continues to be one of the phenomena for which the least amount of knowledge is currently accessible. The problem at hand is a concept that has a distinctive feature that is exclusive to everyone, which makes it challenging to precisely articulate what it is and why it is important. Because isolation is so common among people of retirement age, this is a serious issue that has far-reaching implications for the physical, emotional, and mental well-being of this demographic group. It is a problem that has far-reaching repercussions for the elderly population. It is of the utmost relevance to understand this issue and to make efforts toward locating a solution to it, particularly because an aging population is becoming more prevalent in several regions around the globe.

The combination of increased life expectancy and decreased birth rates has led to an alarming trend of population graying on a scale that encompasses the whole world. This trend is characterized by an increase in the proportion of elderly people in the population. According to Giannakouris (2008), the proportion of Romania's population that was 65 years old or older in 2018 was 22.80% [16]. It is expected that by the year 2060, this share will have increased to 35% from its current level. According to the findings of the demographic study, Romania is one of the countries that, in the coming years, along with a great number of others, will be forced to cope with an aging population. It is projected that this occurrence will result in higher disparities, which may include socioeconomic and medical challenges. This prediction comes because more inequities are likely to develop.

Multiple comparative studies that have been conducted on a national and international basis have shown that an important fraction of the senior population suffers from feelings of loneliness. These investigations have been carried out on a national and worldwide scale. Even though individuals of all ages may be susceptible to the negative consequences of loneliness, the elderly have a disproportionately high number of cases of this condition. Comparison of the rates of loneliness in different age groups Old age, which is the last phase of human growth within the framework of the life cycle, is most notably characterized by a multitude of significant changes that take place in the life of a person and require them to adapt. This is because old age is the final phase of human development. It seems that old age is the culminating stage of human development. In addition, the requirements of the elderly population are distinct from those of other age groups.

According to Bruggencate, Luijkx, and Sturm (2017), the stage of old age marks the culmination of the human developmental process as it relates to the cycle of existence [7]. This stage is defined by a succession of substantial life changes that a person needs to adjust to navigate through successfully. As a direct consequence of this, the requirements of senior citizens are distinct from those of other age groups. When aiding, protecting, and supporting elderly individuals through community or social services, it is essential to consider a variety of factors, such as the natural process of aging and the specific requirements of elderly individuals, as well as their current state of health, any pathologies they may have, and the functional limitations they may have [6].

According to research by Hawkley and Cacioppo, feeling lonely may hurt a person's general well-being, physical health, and even their chances of survival. The effects of this phenomenon may be seen in several different areas of human life, including intrapersonal dynamics, interpersonal relationships, vocational spheres, economic realms, and most significantly, mental, and physical well-being. The psychological and social effects of loneliness are on par with how it manifests itself physically. According to Hawkley, L., C., and Cacioppo, J., T. (2010), loneliness has become an unavoidable component of human experience. Loneliness may be defined as the subjective sensation of being disconnected from other people or the absence of needed or expected high-quality interpersonal connections [21].

In her thorough study, G. Korchagina looked at loneliness from a psychological point of view [3]. Feelings, processes, inclinations, and needs are some of the categories that the author uses to describe its core. Some people feel alone because they



think they are different from others, which can make it hard for them to interact with others. This can create a psychological block that keeps them from doing so. This problem is often accompanied by the feeling of not being understood and not being accepted by the people around you. This means that people who are trying to make real relationships with other people might feel like they have no chance. When someone is lonely, they may slowly lose the ability to understand and follow the rules, beliefs, and values that society sets. This is one way that the event could be understood. As a direct result of this, someone will lose respect in society. One reason someone might feel lonely is that they can't see anything around them as having any inherent meaning or value. This doesn't directly lead to the process of bringing people into society. The fact that someone is aware of and avoids making deep connections with the people and things around them may be linked to how lonely they feel. Consequently, people feel separated not only from their close friends and family but also from the bigger social structure, which includes the system's views, goals, and rules.

During her research, S. G. Korchagina analyzes the connections between many manifestations of loneliness, including concern, boredom, a sense of vacuity, and despondence. These manifestations of loneliness range from common to severe. The existence of manifestations of loneliness that are on the cusp of a clinical diagnosis considerably enhances the desire for interpersonal connection, which in turn leads to a blurring of the boundary between reality and the deceptive nature of various events and circumstances. According to her argument, the feeling of isolation that people go through not only hurts their mental health but also makes it more difficult for them to connect with the rest of the world. At the same time, there is a gap between the types of social contact that are wanted and those that are accomplished (Korchagina, S., G., 2008) [3].

In their analysis, Cristea examines loneliness as a psychological issue. The term "loneliness" as used by the author refers to a psychological condition in which an individual's network of interpersonal connections is seen to be less fulfilling than desired [1]. Understanding the issue of loneliness in today's contemporary culture may be challenging due to the complex nature of the problem itself, which manifests itself in many ways. Because the elderly is more likely to suffer from the negative effects of loneliness, which may have a substantial influence on both their physical and mental well-being, it is especially vital to address this problem among this demographic. Research in psychology aims not only to find effective psychological and psychotherapeutic therapies that might improve an individual's view of life but also to gain a complete understanding of the myriad of ways in which loneliness can present itself in people's lives.

The lack of a widely defined technique for defining this emotional state might make it challenging to comprehend the feeling of loneliness. The term "loneliness" dates to the 19th century and often refers to negative emotional states that are thought to be the outcome of a perceived lack of social attachments [5]. (Alberti, F., 2018) In the past, the concept of "oneness" was used to refer to a condition of isolation that did not have any unpleasant connotations attached to it. Frieda Fromm-Reichmann was the first person to recognize loneliness as a mental disorder in 1959 [15]. However, an agreement about the specific definition of loneliness has not yet been established, which has led to the investigation of several facets of this phenomenon in academic works.

To get a more in-depth understanding of this complex phenomenon, it is necessary to use a variety of methodologies due to the varied character of loneliness. The topic of loneliness has been the subject of investigation and conceptualization by several different academics. For instance, Perlman and Peplau (1982) have presented a detailed description of loneliness. They characterize it as a painful emotional condition that occurs when an individual's social connections are lacking in terms of both quantity and quality [27].

De Jong Gierveld (2006) suggested a different interpretation of loneliness. According to this interpretation, loneliness is defined as an unfavorable condition that arises from the lack of certain characteristics within interpersonal interactions [17]. According to a study conducted by Goodman, Adams, and Swift, loneliness is a detrimental phenomenon defined by the painful emotions of isolation and exclusion from social engagements. This phenomenon arises when there is a discrepancy between the desired amount and quality of social connections and the actual quantity and quality of social contacts that individuals possess. Put simply, there exists a disparity between the aspired level of social connections in terms of both number and quality and the current level of social interactions in terms of both quantity and quality. Based on the information provided, the experience of loneliness may be understood as an individual's subjective perception of their psychological condition [18].

According to Heinrich and Gullone, loneliness is a multi-faceted phenomenon that is closely tied to our interpersonal interactions as well as our intrinsic urge to be included in social activities. The underlying factors that lead to feelings of loneliness have been the subject of investigation from a variety of academic perspectives. These viewpoints consider a wide variety of aspects, including early-life experiences, cognitive processes, personal characteristics, cultural influences, and situational conditions Individuals have the potential to enhance their awareness of this widespread component of the human experience 6) by being aware of the many qualities that are related to feelings of isolation [22].

Multiple academic investigations have led to the discovery of three basic theoretical frameworks, each of which offers a unique perspective on how the phenomenon of loneliness may be understood and how it might be combated. The social needs hypothesis is one of the predominant theories, which postulates that a lack of social relationships may be one of the contributing factors that lead to feelings of loneliness. It has been shown by Weiss D that there are two distinct types of loneliness: social loneliness and emotional loneliness. Loneliness may be broken down into two categories: social and emotional. Social loneliness is defined by a lack of social contact, while emotional loneliness is related to a lack of compatible relationships [13].



In 1982, Peplau and Perlman presented a different take on the issue of isolation. This perspective highlighted the individuality of loneliness and how it is contingent on one's perception of social relationships. The results of this study were published in 2000 by Cacioppo [9]. If these connections do not live up to personal standards or are deemed inadequate in terms of the quality or number of the relationships themselves, then loneliness may result. The third theoretical framework takes a biological perspective and views loneliness as a signal that encourages people to make and maintain social relationships [8]. The biological lens is in favor of this viewpoint. According to this theoretical paradigm, the feeling of loneliness serves an essential purpose in ensuring the continued interconnection of our species within social groupings, which in turn contributes to our continued existence as a species. The hypothesis that is presented in this study also presents the concept of the "regulatory loop of loneliness," which postulates that social isolation may give rise to aggressive and maladaptive behaviors towards others, as well as a heightened state of vigilance that can result in unpleasant interpersonal interactions (Heinrich, L., M., Gullone, E., 2006) [22].

The experience of being alone has been the subject of a substantial amount of research, which has led to the elucidation of several distinct elements of this complex phenomenon. One of the facets of loneliness is ephemeral loneliness, which refers to brief periods during which a person may experience emotions of solitude, and which are often experienced during an individual's day-to-day life. Also consider the phenomenon of situational loneliness, which occurs when a person goes through a specific crisis or shift in their life that hurts the interpersonal relationships they have. This is an additional factor to take into consideration.

Chronic loneliness is a condition that lasts for a long time and is defined by persistent feelings of isolation and discontentment with interpersonal interactions. A third difference that has been drawn by academics is between loneliness as a transitory state, which is defined as the current and fleeting sensation of feeling lonely, and loneliness as an enduring quality, which refers to a continuous and persistent sense of being lonely. In addition, the concept of loneliness may be seen as something that is either unidimensional or multidimensional, depending on how it is analyzed.

Some academics see loneliness as a medical ailment that requires treatment, while others regard it as a transient and intrinsic human experience (Hall, E., T., 1963). These two schools of thought have resulted in a variety of interpretations of the phenomenon of loneliness. There are a few different lenses through which one might view the phenomenon of loneliness. An approach that may be used is to investigate the different aspects of the event, which might range from the social to the individual to the communal. As Hall explains, these parameters correspond to the concept of "attentional space" in theory [19].

Cacioppo et al. (2015) propose that the concept of attentional space may be delineated into three distinct categories, namely personal space, social space, and public space [11]. The concept of "intimate space" pertains to the proximate region in physical proximity to an individual, while "social space" encompasses the domain whereby people may engage in comfortable interactions with their friends, relatives, and other acquaintances.

In their research, Perjan, Sanduleac, and Plamadeala posit that loneliness is a distressing emotional state that arises from disruptions in an individual's social network, a disparity between the desired and actual quantity of social connections, and a discrepancy between the desired level of relationship quality and the actual level experienced. These factors are further linked to a diminished sense of selffulfillment [4].

In conclusion, the term "public space" refers to the arena in which interactions may take place on a more extensive scale. Experiencing intimate loneliness occurs when a person perceives the absence of a person on whom they depend for emotional support through hard situations, reciprocal aid, and affirmation of their inherent worth. Intimate loneliness may also occur when a person perceives the absence of a person who affirms their intrinsic value. According to research conducted by Levey et al. in 1974, the absence of a person might be due to the passage of time or a weakening of the interpersonal relationship [24].

The feeling of loneliness may manifest itself in several different ways. One of the forms of loneliness is social or relational loneliness, which develops from a sense of disconnection from one's "affinity group." In most cases, this collective is made up of immediate family members and intimate acquaintances who serve as essential social companions and are expected to assist during times of adversity. The lack of meaningful connections with a larger social network, including those who possess similar qualities such as ethnicity or political alignment, may lead to a kind of loneliness known as collective loneliness. This form of loneliness is different from the more common form of loneliness and occurs as a result.

While the strength of these links may not be quite as great, they nonetheless have the potential to provide substantial insights and aid. The contrast between emotional and social isolation provides yet another angle from which to view the phenomenon of loneliness. Emotional loneliness occurs when a person does not have a meaningful and intimate connection with another person, while social loneliness results from a lack of participation in a social circle made up of people who participate in activities and interests that are like one's own (Hall, T., E., 1966). [20]

Loneliness is a complex emotional condition that may manifest as a sense of dissatisfaction with one's interpersonal ties or with one's involvement in society. Loneliness can also take the form of a desire to withdraw from society. There is widespread agreement among experts, even though several researchers have offered a variety of definitions, that quality is more important than quantity. It is vital to take into consideration a variety of variables, one of which is the material conditions, to develop a delineation that is accurate and based on agreement.

Multiple studies have found evidence to support the hypothesis that senior citizens have a much higher risk of experiencing feelings of isolation than younger generations. In addition, recent research has shown that the incidence of this



phenomenon may vary widely across a wide variety of conditions. Regrettably, the feeling of social isolation, which is common among older people, has been shown to have the potential to have significant negative impacts on the mental and physical health of those affected. The natural process of getting older has the potential to make some chronic diseases far more severe from a physiological viewpoint. On the other hand, changes in one's mental state can be brought on by a confluence of internal and external factors. Internal factors that can play a role in this process include hereditary characteristics and alterations in hormone levels, while examples of external factors include retirement, diminished biological capacity, related medical conditions, and the experience of losing loved ones and friends.

The elderly population must achieve a condition of balance in the physical, psychological, and social realms to operate at their highest possible level.

Because the aging process relates to continual change and loss, the older population is more likely to be sensitive to experiencing feelings of loneliness. Multiple systematic studies have demonstrated that there is a correlation between the experience of loneliness and characteristics such as increasing age, being female, having a less-than-ideal quality of social relationships, having impaired cognitive capacities, being in a less advantageous financial situation, and having chronic ailments. There is a significant correlation between several factors and people who experience solitude or who view themselves as lonely.

These factors include gender (specifically being female), marital status (specifically being single), age (specifically being older), money (specifically having a low income), educational attainment (specifically having a low educational level), living arrangements (specifically living alone), social interactions (specifically having bad social relationships), health (specifically having bad social relationships), and health (specifically having bad social relationships). People of all ages and genders, as well as all walks of life, might experience the negative emotional condition of loneliness at some point in their lives. Although the motivations may be different, the fact remains that these interactions considerably reduce the possibility of creative undertakings that contribute to the growth of society and one's sense of satisfaction.

People experience feelings of isolation for a variety of reasons, the majority of which are uncontrollable by the person experiencing the feelings. The experience of losing a spouse, whether because of death, divorce, or separation, is one of the most common forms of social conditions that induce feelings of isolation. This may be because of the feeling that one is no longer part of a community. Under these conditions, the manifestation is caused by the rapid emotional and psychological distancing of a person from the typical members of their social network.

This distancing might be entire or partial, but it can also be just sudden. This phenomenon may be fully manifested under some circumstances, while in other situations, it may only be partially manifested. The process of becoming older comprises a wide range of factors, all of which work together to make old age a time of increased likelihood of experiencing feelings of social isolation. There has been a

noticeable shift toward a greater emotional and physical distance between adult children and their parents. This tendency has been documented. Even if these long-term partners are eventually replaced by new acquaintances, the knowledge that one has always existed cannot properly compensate for their loss. This is true even if one is aware that they will always exist. A significant percentage of the population over the age of 65 goes through life having the experience of being alone. To successfully adapt to one's surroundings, a person must develop a strong feeling of devotion towards a certain person, in addition to cultivating a sizable network of friendships, all of which are necessary components. Inadequacies in a variety of different kinds of relationships may give birth to feelings of loneliness by causing one to become emotionally or socially isolated.

A variety of unfavorable psychological characteristics, such as decreased mental well-being, diminished self-assurance, unpleasant life events, and cognitive problems, are all associated with loneliness. The investigation of these connections has been focused on using cross-sectional research as the primary method of investigation. The writers recognized that people of all ages can experience the most prevalent trends in various aspects that contribute to a variety of issues, including those concerning the environment, disadvantaged populations, immigration procedures, the viability of housing, and the accessibility of resources for social contact. It can be inferred that psychological components and disorders play a preeminent role in the development of feelings of isolation if one examines the influence that environmental resources, health factors, and psychological variables have on the experience of isolation and depression in detail [26]. This conclusion can be reached because of a careful examination of the influence that environmental resources, health factors, and psychological variables have on the experience of isolation and depression.

People of all ages can experience the negative effects of loneliness, although young adults and the elderly seem to be more susceptible to the condition. The evidence that supports this claim includes not only the frequent occurrence of these calamities but also the possibility of unfavorable outcomes that may be brought about as a direct result of their occurrence. When people in any group need institutionalization after having previously experienced strong family relationships that were defined by real and powerful intergenerational solidarity, the severity of the issue increases. This is true across all demographic groupings. To put it another way, the individual in issue had to go through the process of institutionalization after having already developed substantial family relationships. It is not always the case that elderly people who live in nursing homes or other forms of residential care, such as assisted living facilities, inevitably suffer feelings of solitude in their daily lives.

Nevertheless, this does seem to be the most prevalent trend. When people are put in situations in their lives that result in loss or when their capacity to adapt is diminished, the likelihood of certain occurrences occurring in their lives is increased. Because of circumstances such as limited physical mobility and financial means, bereavement, and damaged health, elderly people have a greater tendency to



experience feelings of isolation and social detachment than younger people do. This is mostly attributed to the fact that their families are more likely to be geographically dispersed. Fakoya, McCorry, and Donnelly (2020), posit that a prevailing belief exists about the role of cultural changes in the exacerbation of loneliness among elderly individuals. [14]. These societal transformations include intergenerational declines in living standards, increased geographic mobility, and less social cohesion.

Based on the results of several research, a correlation has been seen between the emergence of feelings of isolation and the occurrence of social rejection, along with the development of negative connections. interpersonal Numerous empirical research has repeatedly shown a substantial correlation between the phenomenon of loneliness and a diverse range of attributes. The aforementioned factors include age (specifically demonstrating a U-shaped association), gender (specifically being female), insufficient social affiliations, less proficiency, lower socio-economic standing, and the existence of persistent medical ailments.

Wethington and Pillemer (2014), assert that a significant dearth of distinction exists among some researchers in their elucidation of the constituent elements underlying the experience of loneliness and social isolation [31]. As a result of this phenomenon, several writers have mistakenly attributed these characteristics to the breakdown of a marital union, a romantic partner, or an intimate connection.

Numerous additional factors have been shown to have a role in the development of feelings of loneliness and social isolation. There are a variety of factors that can contribute to social isolation in older people. These factors include a decrease in family involvement, the breakdown of neighborhood networks as a result of various circumstances, retirement, the loss of driving abilities as a result of physical or cognitive deterioration, restricted mobility as a result of severe weather conditions, sensory deprivation, and heightened vulnerability as a result of frailty (Wang, G., Hu M., Xiao SY, and Zhou L., 2017) [30].

Based on the presently accessible statistics, there exists a heightened prevalence of loneliness among elderly individuals experiencing the often-referredto "empty nest" condition. The study conducted by the researchers examined the impact of many variables, including health, psychological disposition, and environmental resources, on individuals' experiences of loneliness and despair. The start of feelings of isolation is significantly influenced by psychological and social elements, as well as obstacles, as shown by the findings of Cohen-Mansfield and Parpura-Gill's (2007) study [12]. C)

The problem of pervasive loneliness is a serious societal concern because it has the potential to have a big impact on those who believe they do not have enough supporting social ties. Nevertheless, this highlights the need to increase the amount of human interaction and networking. The quantity of evidence that is now available suggests that loneliness is a widespread issue today, with a special focus on the fact that its prevalence is particularly high among older adults. As a result, giving the efforts that are being made to address this issue a higher priority to enhance their overall well-being is very necessary. According to the findings of this study, a sizeable section of the senior population often experiences feelings that are linked to being alone and disconnected from their social circles. A wide variety of physiological and psychological characteristics were shown to have significant connections with the experience of loneliness.

Furthermore, it is often seen that these relationships have a bi-directionality or causality that is not proved despite their obvious existence. Therefore, to lessen the intensity of feelings of loneliness or the frequency with which they occur, it is important to employ a diverse strategy to combat the problem of isolation. It is vital for proper techniques to take into consideration this complex problem to maximize the likelihood of success or advancement. Somes (2021) says that the complicated nature of this issue may help to explain, at least in part, why different therapies for reducing loneliness have had limited success and why different research studies in this area have found different results [29].

It is possible to draw the following conclusion from the findings of the research: loneliness is of critical significance for the elderly population since it emerges as the key predictor of both the quality of life and the level of life satisfaction during the later stages of life. Older people who live alone are far more likely to have negative effects on both their physical and mental health. Because of this, politicians and professionals must place a higher priority on the requirements of older people who are vulnerable or socially disadvantaged. Research has shown that older people in Romania report greater degrees of loneliness compared to their counterparts in

Western Europe. This makes the importance of this point clearer when taken into consideration.

Romania is now ranked in second place among European countries in terms of statistics about the accelerated rate at which the population is aging. This is because the elderly make up 17% of the entire population in Romania. This population has several severe challenges, the most notable of which are limited access to information as well as feelings of isolation, in addition to problems relating to finances and healthcare. The Princess Margareta Foundation's study in Romania found that an estimated 1.5 million elderly people experience loneliness [2]. The percentage of affected ladies is notably higher than that of affected men, and the elderly people who live in urban settings are the ones who suffer the most from the adverse consequences of loneliness.

This fact is connected to the issue of considerable population migration in Romania, which affects the dynamics of families, resulting in an increased feeling of isolation among the elderly population. It has been observed that modern elderly people not only understand what it is like to be lonely but also go through the intense experience of it in many different forms. The fact that there is a considerable association between the degree of loneliness and the existence of depression and anxious symptoms, which implies that loneliness impacts older people's mental health, makes the problem even worse. This data suggests that loneliness affects older people's mental health.

The association between the intensity of loneliness and the prevalence of medical diseases highlights the relevance



of satisfying and gratifying social interactions, which have consequences not only for psychological well-being but also for physical health. Loneliness is associated with an increased risk of developing medical conditions. Because of this, maintaining these kinds of social connections as one move through the latter phases of life is of the utmost significance.

The relationship that exists between one's level of loneliness and both the quality of one's life and the amount of pleasure one derives from that life emphasizes the importance of social connections in fostering the mental well-being of older adults. Specialized research efforts are required to prioritize the study and understanding of the preservation of social bonds among the older population, which has been given a high priority. In addition, the development and improvement of socio-medical community services are very important to aid in the process of assisting in the maintenance of these ties.

The offered data contains value and usefulness for exploring new research paths in the quality of life of older persons within community and residential settings. These new research avenues pertain to the quality of life of senior adults. Additionally, it provides insights into improving intergenerational relationships and encourages the creation of creative treatments targeted at enabling effective aging. All these benefits come as a direct result of the research conducted. Taking into consideration the worldwide phenomenon of accelerated aging and the continual problems it causes; the purpose of these treatments is to make it feasible for people to continue being active and independent for as long as possible.

Mann et al. (2017), conducted a study examining several treatments aimed at mitigating the experience of social isolation among older adults [25]. The interventions include a diverse range of therapeutic techniques, including individual sessions, group therapy, and communityoriented therapies. Numerous scholars have classified these therapeutic interventions into a diverse array of types. However, most of these interventions primarily concentrate on enhancing social abilities, augmenting social assistance, expanding avenues for social engagement, and rectifying maladaptive social cognition (Yanguas, J., et al., 2018) [32]. Based on an extensive assessment undertaken by the authors, it was shown that the strategy of addressing flawed social cognition emerged as the most effective approach to reducing experiences of loneliness. Furthermore, there exists a hypothesis suggesting that individualized therapies are more advantageous compared to interventions conducted in a group setting.

The notion of the third age represents a significant societal change in the perception of the aging process. Numerous changes in one's style and way of life, a shrinking social network, an increase in leisure time, a decline in financial well-being, and the renunciation of previous social status and roles are all indicative of this shift. The capacity of elderly adults to adapt to novel living circumstances is of utmost importance, notwithstanding the inherent difficulties linked to accommodating enforced alterations, especially given declining physical capacities and deteriorating health.

The transition to this stage of life entails notable difficulties, leading to feelings of seclusion, reduced overall satis-

faction, loss of a solid sense of identity, and a deterioration in physical health. This article primarily focuses on the existing knowledge about the health consequences associated with loneliness throughout the later stages of life. Our focus was primarily on the theoretical predictions, underlying processes, and methodological deficiencies that have been identified in the existing body of work. The observed association between solitude and depressive symptoms captured our interest. Throughout an extensive period, scholars, authors, and thinkers have shown a persistent preoccupation with the subject of loneliness, which has endured throughout the domains of science, literature, and philosophy. In recent times, there has been an increase in scholarly endeavors that examine the phenomenon of loneliness, including its etiology, manifestations, and potential effects on diverse demographic cohorts throughout different life stages. In recent years, there has been a surge in the volume of scholarly publications dedicated to investigating the essence of loneliness.

Currently, there is a lack of consensus about the role of loneliness in pain or pleasure, its classification as a positive state, or as an ailment necessitating intervention. Within the realms of philosophy and psychology, several schools of thought believe that human solitude serves as the only rational basis for the sustained perpetuation of our species. The prevailing perspective characterizes it as an atypical state of existence, a pathological state, and indicative of an individual's inability to effectively adjust to new circumstances.

Moreover, they see it as a sociocultural dilemma stemming from the proliferation

of power dynamics in modern society. It is believed that contemporary culture is to blame for this phenomenon. On the other hand, a widely accepted theory in the fields of psychology and philosophy holds that loneliness is characterized by a person's increased awareness of their alienation from and exclusion by other people. Social alienation in individuals may arise from a genuine absence of significant interpersonal connections, coupled with a perception that their engagements with others are dissatisfying. Both variables might contribute to the development of social alienation. There exists a prevailing societal perception that elderly adults are inherently more susceptible to experiencing feelings of loneliness because of their senior age.

Conclusion.

1. In conclusion, interventions aimed at addressing loneliness and social isolation can alleviate subjective or emotional loneliness, hence bolstering an individual's social connections, community integration, and engagement in social activities. Nevertheless, the effectiveness of these strategies in improving overall health outcomes remains uncertain. Often, there is a constraint on the number of samples available, and in some cases, the presence of a control group may be absent.

2. This study emphasizes the need for more investigation into the precise etiology of loneliness, the contexts in which elderly individuals may experience feelings of loneliness, and the prevalence and severity of their loneliness, particularly among socially disadvantaged populations. A further need is enhancing the conceptualization, quantification, and surveillance of loneliness across diverse cohorts. One potential approach



to achieving this objective is facilitating a broader understanding of the prevalence of loneliness in public settings, its underlying causes, and its consequential impacts.

REFERENCES:

1. CRISTEA, D. *Tratat de psihologie socială*. București: Pro Transilvania. 2000, p. 470;

2. Fundatia Vodafone Romania. Peste 5.000 de persoane din intreaga tara au facut 25.000 de apeluri la Telefonul Varstnicului. Available: <u>https://fundatiavodafone.ro/noutati/comunicate-de-presa/</u> peste-5-000-de-persoane-din-intreagatara-au-facut-25-000-de-apeluri-la-telefonul-varstnicului/;

3. KORCHAGINA, S., G. *Psihologia singurătății*. 2008, MPSI, p. 21.

4. PERJAN, C.; SANDULEAC, S.; PLĂMĂDEALĂ, V. Interpretarea singurătății ca fenomen psihosocial. Studia Universitatis Moldavia (Seria Științe ale Educației), 2017, vol. 109, nr. 9, p. 214-220. Available: https://ibn.idsi.md/ro/ vizualizare articol/60653.

5. ALBERTI, F. One is the loneliest number: the history of a Western problem. New York, 2018. available: <u>https://aeon.</u> co/ideas/one-is-the-loneliest-number-thehistory-of-a-western-problem;

6. American Geriatrics Society Expert Panel on Person-Centered Care. Person-Centered Care: A *Definition and Essential Elements. Journal of the American Geriatrics Society*. 2015, vol. 64, nr. 1, p. 15-18. Available: <u>https://www.researchgate.</u> <u>net/publication/290394377_Person-Cen-</u> <u>tered_Care_A_Definition_and_Essential</u> <u>Elements.</u>

Available: <u>https://www.ncbi.nlm.nih.</u> gov/pmc/articles/PMC4391342/ Based on: *Loneliness. The Experience of Emo-* tional and Social Isolation. By Weiss Robert S. Cambridge, Mass. The MIT Press, 1973;

7. BRUGGENCATE, T., T.; LUIJIKX, F., G.; STURM, J. Social needs of older people: a systematic literature review. Aging and Society. 2017, vol. 38, nr. 9, p. 1-26. Available: <u>https://www.researchgate.net/publication/315943328_Social_ needs_of_older_people_a_systematic_literature_review;</u>

8. CACIOPPO, J., T. Loneliness as a specific risk factor for depressive symptoms: cross-sectional and longitudinal analyses. Psychol Aging, 2006, vol. 21, nr. 1, p. 140-151. Available: <u>https://pub-med.ncbi.nlm.nih.gov/16594799/;</u>

9. CACIOPPO, J., T. et al. Lonely traits and concomitant physiological processes: the MacArthur social neuroscience studies. Int J Psychophysiol, 2000, vol. 35, nr. 2-3, p. 143-154. Available: <u>https://pubmed.ncbi.nlm.nih.gov/10677643/;</u>

10. CACIOPPO, J., T.; CACIOPPO, S. *The growing problem of loneliness*. In: *The Lancet*. 2018, vol. 391, nr. 10119, p. 426. Available: <u>https://doi.org/10.1016/</u> <u>S0140-6736(18)30142-9;</u>

11. CACIOPPO, S. et. al. *Loneliness: clinical import and interventions. Perspect Psychol Sci.* 2015, vol. 10, nr. 2, p. 238-249. Available: https://www.ncbi. nlm.nih.gov/pmc/articles/PMC4391342/.

12. COHEN-MANSFIELD, J., PAR-PURA-GILL, A. Loneliness in older persons: a theoretical model and empirical findings. Int Psychogeriatr. 2007, vol. 19, nr. 2, p. 279-294. Available: <u>https://pub-</u> med.ncbi.nlm.nih.gov/17005067/;

13. DITOMMASO, E.; SPINNER, B. *Social and emotional loneliness*: A reexamination of Weiss's typology of loneliness. *Personality and Individual Differences*. 1997, vol. 22, nr. 3, p. 417-427. Available: <u>https://doi.org/10.1016/S0191-</u> <u>8869(96)00204-8;</u>

14. FAKOYA, O., A.; MCCORRY, N., K.; DONNELLY, M. Loneliness and social isolation interventions for older adults: a scoping review of reviews. BMC Public Health. 2020, vol.20, nr. 129. Available: https://doi.org/10.1186/s12889-020-8251-6;

15. FROMM-REICHMANN, F. Loneliness. Contemporary Psychoanalysis. 1990, vol. 26, nr. 2, p. 305–330. Available: <u>https://psptraining.com/wp-content/</u> <u>uploads/Fromm-ReichmannF.-CPS_Loneliness.pdf;</u>

16. GIANNAKOURIS, K. Population and social conditions. Aging characterizes the demographic perspectives of European societies. In: Eurostat, Statistics in focus. 2008, vol. 72, ISSN 1977-0316. Available: <u>https://ec.europa.eu/eurostat/ documents/3433488/5583040/KS-SF-08-072-EN.PDF.pdf/1c8f668a-d1d9-42cb-80b1-eaf3dfc1b7df?t=1414693648000;</u>

17. GIERVELD, J., D., J.; TIL-BURG, T., V. A 6-Item Scale for Overall, Emotional, and Social Loneliness: Confirmatory Tests on Survey Data. Research on Aging. 2006, vol. 28, nr. 5, p. 582–598. Available: <u>https://doi. org/10.1177/0164027506289723;</u>

18. GOODMAN, A.; ADAMS, A.; SWIFT, H., J. *Hidden citizens: How can we identify the most lonely older adults?* 2015, The Campaign to End Loneliness: London, University of Kent. Available: https://www.campaigntoendloneliness. org/wp-content/uploads/CEL-Hidden-People-report-final.pdf;

19. HALL, E., T. A System for the Notation of Proxemic Behavior. American Anthropologist. 1963, vol. 65, nr. 5, p. 1003-1026. Available: <u>https://doi.org/10.1525/aa.1963.65.5.02a00020;</u>

20. HALL, T., E. *The hidden dimension. Anchor Books*, 1966, p. 114-125. Available: <u>https://www.academia.</u> <u>edu/43785083/The_Hidden_Dimension_</u> <u>Edward_Hall;</u>

21. HAWKLEY, L., C.; CACIOPPO, J., T. Loneliness matters a theoretical and empirical review of consequences and mechanisms. Ann Behav Med. 2010, vol. 40, nr. 2, p. 218-27. Available: <u>https://www.ncbi.nlm.nih.gov/pmc/articles/</u> <u>PMC3874845/;</u>

22. HEINRICH, L., M.; GULLONE, E. *The clinical significance of loneliness: a literature review. Clin Psychol Rev* .2006, vol. 26, nr. 6, p. 695–718. Available: <u>https://pubmed.ncbi.nlm.nih.</u> <u>gov/16952717/;</u>

23. KILLEN, C. Loneliness: an epidemic in modern society. In: Journal of Advanced Nursing. 1998, vol. 28, p. 762-770. Available: <u>https://doi.org/10.1046/</u> j.1365-2648.1998.00703.x;

24. LEVEY, M., L. Book Review: Loneliness. The Experience of Emotional and Social Isolation. Social Casework. 1974, vol. 55, nr. 8, p. 510–511. Available: <u>https://</u> doi.org/10.1177/104438947405500809;

25. MANN, F.; BONE, J., K.; LLOYD-EVANS, B. et al. *A life less lonely: the state of the art in interventions to reduce loneliness in people with mental health problems. Soc Psychiatry Psychiatr Epidemiol* . 2017, vol. 52, p. 627–



638. Available: <u>https://doi.org/10.1007/</u> <u>s00127-017-1392-y;</u>

26. MASI, C., M.; CHEN, H., Y.; HAWKLEY, L., C.; CACIOPPO, J., T. *A* meta-analysis of interventions to reduce loneliness. Pers Soc Psychol Rev. 2011, vol. 15, nr. 3, p. 219-66. Available: <u>https://www.ncbi.nlm.nih.gov/pmc/articles/</u> <u>PMC3865701/;</u>

27. PEPLAU, L., A.; PERLMAN, D. Loneliness: A sourcebook of current theory, research, and therapy. 1982, p. 123-134. Available <u>https://www.</u> researchgate.net/profile/Daniel-Perlman/publication/284634633_Theoretical_approaches_to_loneliness/ links/5748c43308ae5c51e29e6b45/Theoretical-approaches-to-loneliness.pdf;

28. SOLMI, M. et. all. Factors Associated With Loneliness: An Umbrella Review Of Observational Studies. *Journal of Affective Disorders*. 2020, vol. 271, p. 131-138. Available: <u>https://www.sciencedirect.com/science/article/abs/pii/S0165032719335803;</u>

29. SOMES, J. The Loneliness of Ag-

ing. J Emerg Nurs. 2021, vol. 47, nr. 3, p. 469-475. Available: <u>https://www.ncbi.</u>nlm.nih.gov/pmc/articles/PMC7946565/;

30. WANG, G., Hu M, XIAO SY, ZHOU, L. Loneliness and depression among rural empty-nest elderly adults in Liuyang, China: a cross-sectional study. BMJ Open. 2017, vol. 7, nr. 10. Available: <u>https://</u> bmjopen.bmj.com/content/7/10/e016091;

31. WETHINGTON, E.; PILLEMER, K. Social isolation among older adults. In Coplan, R., J., Bowker J (eds): Handbook of Solitude: Psychological Perspectives on Social Isolation, Social Withdrawal, and Being Alone. Malden, Wiley-Blackwell, 2014, p. 242-259; Available https://www. researchgate.net/publication/283356475_ The_Handbook_of_Solitude_Psychological_Perspectives_on_Social_Isolation_ Social Withdrawal and Being Alone;

32. YANGUAS, J.; PINAZO-HENANDIS, S.; TARAZONA-SANTA-BALBINA, F., J. *The complexity* of loneliness. *Acta Biomed*. 2018, vol. 89, nr. 2, p. 302-314. Available: <u>https://www.ncbi.</u> <u>nlm.nih.gov/pmc/articles/PMC6179015/</u>

> Primit la redacție: 20.08.2023 Acceptat: 04.10.2023 Publicat 20.11,23