

## SOCIAL LONELINESS AND SOCIAL SUPPORT IN THE ELDERLY

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**Abstract:** The aim of the paper is to present an empirical verification of the connections between experiencing social loneliness and the degree of social support in the elderly. Social loneliness is a phenomenon that is typical for senium as a developmental period. From the perspective of social work, the possibility of activating social support in the elderly appears to be an appropriate tool for eliminating social loneliness. This assumption was also confirmed in the conducted research, where authors confirmed the positive correlation between social loneliness and social support in the elderly living in an institutional environment.

**Keywords:** Social loneliness, social support, the elderly, institutional care.

### 1 Social loneliness and social support in the elderly

Coping with loneliness is very difficult for many people. Loneliness in elderly people can be caused by the feeling that no one is counting on them anymore. This leads then to emotional suffering and pain. Oftentimes an elderly person resolves it by using alcohol or using various drugs such as antidepressants and so on. Older people placed in an institutional facility can abuse workers to their own benefit and at the same time they can become emotionally entangled to them. It is important to realize that it is the mental suffering of elderly people not a whim (Pichaud 1998). The problem of loneliness in the elderly is very current, working with older people requires an individual approach. It is important to understand the needs of clients that can significantly contribute to improving of their lives.

Significant researchers who deal with or have dealt with the problem of loneliness from various perspectives and research scope from the world scale - include, for example: Witzleben (1953); Fromm-Reichmann (1959); Yalom (1980); then writing duos Peplau and Perlman (1982); Rubenstein and Shaver (1982); Cacioppo and Patrick (2008) and others. In Slovakia, similar research focused on loneliness from different perspectives was conducted by, e.g. Žiaková (2008); Ráčzová (2005); Balogová (2005); Žitniaková Gurová (2013) and many others.

### 2 Senium

A person begins to age with its birth. An important role is played by the genetics and the external environment of man. Ageing is an irreversible biological process and concerns the whole of nature. Life expectancy is specific to each individual species, and old age is the final stage of the Ageing process. (Poledníková 2006). Ageing as process and old age as the last period of human life, which always ends with death. Ageing can have several properties. It is considered to be progressive, i.e. unstoppable, irreversible - bringing irreversible changes of Ageing, inner - Ageing affects e.g. smoking or various diseases, unequal - different Ageing of organs.

### 3 Loneliness in senium

By retirement, a person loses, essentially involuntary, work contacts, so he/she can feel lonely. The effort of man is to share his/her experiences, joys, sorrows with someone else, regardless of age. (Tošnerová 2009)

One of the results of some empirical studies is the fact that the factor that can create loneliness, especially in the elderly, is the lack of social skills. An elderly person needs another person not only because of dependence on the help of others, but also because of the need for a human relationship that mediates the

contact with the environment, feeling of satisfaction and his/her social value. Another cause of loneliness in the elderly is the reduction of social contacts, as a result of reduced mobility, personality changes in terms of egocentrism, egoism and suspicion. All this can lead to social isolation, abandonment and awareness of the loneliness. (Balogová 2009)

Social loneliness, together with emotional loneliness, is described in the professional literature under a single common name, namely - interpersonal loneliness. This name reflects that these types of loneliness take into account the absence of man's relationship to another person or to group of people. (Palenčár, Duško 2015) The aforementioned division of interpersonal loneliness was eventually supplemented by two other types, namely:

- *intrapersonal loneliness*, became a subject of research not only for the Austrian psychologist Freud and its origins date back to the psychoanalytically oriented psychology, or to humanists, such as Rogers and others. Recognized American psychiatrist Yalom describes it as a process: "through which one separates parts of oneself" and "it occurs always when ... he/she suppress his/her own feelings and desires, accepts what is and what is required for his/her own wishes, does not trust his/her own judgment or suppress own abilities". Subsequently, "fragmentation of one's own self, loss of one's identity, integrity and self-identity" occurs. So much, so that it can lead to the emergence of mental personality disorder. (Yalom 1980, in: Palenčár, Duško 2015, p. 23)
- *existential loneliness*, known with different names, each author gives it another name. It is known as primary loneliness (Witzleben 1958) or metaphysical loneliness (Mijuskovic 1979, in: Palenčár, Duško 2015). Authors Yalom (2006) and Žitniaková Gurová (2013) define the existential loneliness as the gap between man and any other person, as the gap between man and the world surrounding him/her. It is a kind of loneliness that is present, on one hand, despite satisfactory and ideal relationship with other people, and on the other hand, despite good self-knowledge. This type of loneliness finds its place in situations where a person is confronted, for example, with death, in new, previously unrecognized and unknown situations in which the adopted scenarios do not apply and are insufficient.

Generational loneliness is described by Androvičová, Ráčz and Krchnák (2015, in: Šlosiar, Palenčár, Duško 2015) as one of the forms of loneliness. An essential role here is played by an old man who is beginning to feel lonely, because most of his peers die and he/she will not be able to share a common world of the past, opinions, views or ideas for the future with someone. Despite a functional and loving family whose members are often two to three generations younger, elderly person does not have to find the right understanding and finds himself/herself in a vicious circle called loneliness.

### 4 Social support

Social support is understood as an aid in stressful situations, in order to facilitate coping with the difficult situation (Křivohlavý 2002). Social support is similarly described by Caplan and Caplan (1993), who defined the social support as an interpersonal connection and positive relationships between people in the group who provide the assistance in stressful situations to each other. Cohen, Underwood and Gottlieb al. (2000) are coming from the theory that social support affects our health and well-being, while social support is understood as social relationships.

The effect of social support is the psychological well-being of an individual, regardless of the actual stress level of an individual (Paulík 2010). Therefore, a satisfactory social support can be attributed to the protective nature in the course of a life that has a positive impact on the mental health of the individual

(Křivohlavý 2012). Social support can also have the so-called buffering effect, which can result into the acceptance of a more favorable alternative of cognitive assessment of the situation or the reduction of maladaptive defense mechanisms. In this case, social support is evaluated as an important intervention variable between the stressor and the result of its effect on the individual. (Paulík 2010)

Křivohlavý (2001) talks about four types of social support. Instrumental social support represents a specific type of assistance. This assistance is initiated by one's own will in order to help another person in need, for example by borrowing money, assisting with shopping, or helping with administrative formalities. Providing information to a person who is in an unfavorable situation and needs help in a form of e.g. advice, is called informational support. This social support is also defined as an active listening to an individual who is in need and later on also the saturation of needs of an individual. Listening can be included here.

Emotional support is characterized by empathy, love, caress, affection, shown by a person to another person who feels inadequate social support, so-called emotional closeness. Expressing respect, esteem, encouragement, self-assessment is characterized by the form of evaluation support. It is an activity towards a recipient of social support.

Social support can be a means of reducing the level of experiencing social loneliness among the elderly, which is a phenomenon that can be handled by social work practice. With an appropriate social work with the elderly, it is possible not only to activate but even to create their social support system.

## 5 Research

The main objective of the research was to verify gender differences in experiencing social loneliness and in perceiving of social support in the elderly men and women in the institutional environment.

### 5.1 Method

The research was conducted through a small questionnaire battery, which consisted of two questionnaires and basic socio-demographic questions. The 1997 SELSA-S social and emotional loneliness questionnaire is a shortened version of SELSA (Social-Emotional Loneliness Scale for Adults) constructed in 1993. Its authors are DiTommaso and Spinner. The original version of the questionnaire includes 37 items. The shortened version of the SELSA questionnaire contains 15 questions, and these can be divided into 3 subscales, namely family subscale (questions 1, 4, 8, 11, 12), romantic subscale (questions 3, 6, 10, 14, 15) and friendly subscale (questions 2, 5, 7, 9, 13). The evaluation of family and romantic subscale is related to emotional loneliness, the evaluation of friendly subscale is related to social loneliness. Individual items in the questionnaire are evaluated on a 7 degree Likert scale, from of full agreement to an absolute disagreement (1 - strongly agree, 7 - strongly disagree). The second questionnaire was dedicated to investigation of perception of social support, using the Multidimensional Scale of Perceived Social Support by Zimet, Dahlen, Zimet and Farley (1988). This is a 12 item methodology in which respondents evaluated statements about perceived social support on the 7-point scale from "strongly disagree" to "strongly agree". The scale is evaluated using a single factor average score.

The results of the questionnaires were processed by SPSS software version 16.0. Statistical operations were selected based on the results of the normality of response distribution.

The research sample was represented by 100 the elderly living in the institutional care environment, 51% women, 49% men, aged 60-94 years.

## 5.2 Results

### Loneliness

Gender differences in experiencing loneliness in the elderly were tested by Student's t test. The average value of responses among men in this questionnaire on the scale from 1 to 7 was 4,492, and among women 3,742. Significance was below 0.05. The result showed that men feel higher social loneliness than women.

Tab 1: Gender differences in loneliness

gender	n	Student t-test		Sig. (2-tailed)
		x	t	
Men	49	4,496	3,758	0,000***
Women	51	3,739		

The highest loneliness was confirmed by statistical calculations in the partner dimension, where men achieved an average score of 5,133 and women achieved an average of 4,131.

### Social support

The average value of responses, in the range of 1-7, was in men 4,081 and in women 3,337. The value of significance was again lower than 0.05, which means that women statistically perceive more social support than men in the institutional environment.

Tab 2: Gender differences in social support

gender	n	Student t-test		Sig. (2-tailed)
		x	t	
Men	49	4,092	2,736	0,008**
Women	51	3,407		

Women have a higher degree of social support, which has been confirmed in particular in the dimensions of "family" and "other person".

## 6 Discussion and conclusion

Results supported previous findings on the existence of gender differences in the age group of the elderly in both researched phenomena. It was found out that women feel a lower level of loneliness, and at the same time, perceive a higher degree of social support, especially from the family and "other person".

Molčanová, Baumgartner, Kaňuková (2007) conducted a study to find out whether there is a difference in experiencing loneliness between men and women. The research sample consisted of 275 students. Loneliness was researched using SELSA and UCLA questionnaires. All three established hypotheses were confirmed in the research, and thus it was found out that men experienced loneliness more intense than women. Results are reasoned by the opinion that women form more friendships than men, are more open in them and share their personal information in them.

Drennan (2008), in his research that was participated by 683 respondents aged 65 and over, came to the finding that the elderly felt the highest degree of loneliness in the romantic (partner) area, and also that the elderly who lost their partners felt significantly higher loneliness in the family and partner area. Within the family loneliness, it has been shown that widowhood is the strongest among other factors, which is involved in high romantic loneliness. However, widowhood is not a strong predictor of social loneliness; social loneliness (friendly loneliness) is caused and mitigated by the higher quality of persons' social network, by maintaining contact with friends rather than by the actual number of children and by contacts with neighbors.

Several studies confirm the occurrence of gender differences in experiencing loneliness in the elderly. In terms of working with the client, we consider it necessary to verify the existence of gender differences and to apply the results in practice.

Changing the environment from home to institutional, can affect the older person in negative way, can cause deterioration in health, and mental problems, mood swings, depression, anxiety, fear, etc. may occur. The elderly as a target group of social work are at the risk of a certain social deprivation. Therefore, it is important for social workers to choose appropriately selected methods, approaches, theories, therapies while working with this target group based on the history of clients. Just working with the social support system in the elderly, with its use or activation, can be a suitable tool for eliminating the loneliness in the elderly.

#### Literature:

1. Balogová, B.: *Seniори*. Prešov: AKCENT print, 2005, 158 p. ISBN 80-969274-9-3.
2. Balogová, B.: *Seniори v spektre súčasného sveta*. Prešov: AKCENT print, 2008. 103 p. ISBN 978-80-89295-19-7.
3. Balogová, B.: *Sociálne témy a dilemy seniorov*. Prešov: Prešovská univerzita v Prešove, 2016. 136 p. ISBN 978-80-555-1687-5.
4. Cacioppo J.T., Patrick B.: *Loneliness: Human Nature and the Need for Social Connection*. New York: W. W. Norton & Company, 2008.
5. Caplan, G., Caplan, R. B.: *Mental Health Consultation and Collaboration*. USA: Waveland Press, 1993. 393 p. ISBN 1-57766-073-0.
6. Cohen, S., Underwood, L., G., Gottlieb, B. H.: *Social Support Measurement and Intervention: A Guide for Health and Social Scientists*. USA: Oxford University Press, 2000. 368 p. ISBN 0-19-512670-X.
7. Drennan, J. et al.: *The Experience of Social and Emotional Loneliness among Older People in Ireland*. In: *Ageing & Society*, 2008. 28(8), pp. 1113-1132. ISSN 0144-686X.
8. Fromm-Reichmann, F.: *Loneliness*. *Psychiatry: Journal for the Study of Interpersonal Processes*, 1959, 22, pp. 1-15.
9. Jilhä, M., Saarenheimo, M.: *Loneliness and Ageing: Comparative Perspectives*. In: D. Dannefer and Ch. Phillipson, eds. *The SAGE Handbook of Social Gerontology*. India: Replika Press Pvt Ltd, 2010. p. 317-328. ISBN 978-1-4129-3464-0.
10. Křivohlavý, J.: *Psychologie nemoci*. Praha: Grada, 2002. 200 p. ISBN 978-80-2470-179-0.
11. Křivohlavý, J.: *Psychologie zdraví*. Praha: Portál, 2003. 278 p. ISBN 978-80-7367-568-4.
12. Křivohlavý, J.: *Horieť, ale nevyhorieť*. Kostelní Vydří: Karmelitánské nakladatelství, 2012. 214 p. ISBN 978-80-8135-003-0.
13. Malíková, E.: *Péče o seniory v pobytových sociálních zařízeních*. Praha: GRADA, 2011. 328 p. ISBN 978-80-247-3148-3.
14. Molčanová, Z., Baumgartner, F., Kaňuková, A.: *Sociálna inteligencia vo vzťahu k osamelosti*. In: *Sociálne apolitické analýzy*. Košice: FVS Katedra sociálnych vied, 2007, 1-2, pp. 63-76. ISSN 1337-5555.
15. Palenčár, M.: *Pojem a druhy ľudskej osamelosti*. In: J. Šlosiar a M. Palenčár, eds. *Osamelosť ako filozofický problém*. Košice: EQUILIBRIA, s.r.o., 2014. 7-28 p. ISBN 978-80-557-0702-0.
16. Paulík, K.: *Psychologie lidské odolnosti*. Praha: Grada, 2010. 240 p. ISBN 978-80-247-2959-6.
17. Peplau, L. A., Perlman, D.: *Perspective on loneliness*. In L. A. Peplau & D. Perlman (Eds.), *Loneliness: A sourcebook of current theory, research and therapy*. New York: John Wiley and Sons, 1982. 1-18 pp.
18. Poledníková, E.: *Geriatrické a gerontologické ošetrovatel'stvo*. Martin: Vydavateľ'stvo Osveta, spol. s. r. o., 2006. 216 p. ISBN 80-8063-208-1.
19. Ráczová, B.: *Prežívanie osamelosti a miera subjektívnej pohody u vysokoškôľakov/čok*. In Heller, D.; Mertin, V.; Sobotková, I. (ed.). *Psychologické dny 2006: Prožívání sebe a měnícího se světa : sborník příspěvků z konference 24. Psychologické dny, Olomouc 2006*. Praha: Univerzita Karlova v Praze, Filozofická fakulta, katedra psychologie ve spolupráci s Českomoravskou psychologickou společností, 2007. 1-9 pp. ISBN 978-80-7308-185-0.
20. Rubenstein, C., Shaver, P. R.: *In search of intimacy*. New York: Delacorte, 1982.
21. Sak, P., Kolesárová, K.: *Sociologie stáří a senioru*. Praha: GRADA, 2012. 232 p. ISBN 978-80-247-3850-5.
22. Slaměnik, I.: *Afiliace, atraktivita, láska*. In: J. Výrost a I. Slaměnik, eds. *Sociální psychologie*. Praha: GRADA, 2008. 249-266 p. ISBN 978-80-247-1428-8.
23. Tavel, P.: *Psychologické problémy v starobe I*. Dunajská Streda: Valeur, spol.s.r.o. – Polygrafia, 2009. 279 p. ISBN 978-80-969823-7-0.
24. Tošnerová, T.: *Jak si vychutnat seniorská léta*. Brno: Computer Press, a.s., 2009. 239 p. ISBN 978-80-251-2104-7.
25. Von Witzleben, H. D.: *On loneliness*. *Psychiatry*, 1958. 21, pp 37-43.
26. Yalom, I. D.: *Existential psychotherapy*. New York, NY: Basic Books, 1980. 544p.
27. Yalom, I. D.: *Existenciální psychoterapie*. Praha: Portál, 2006. 520 p. ISBN 80-7367-147-6.
28. Žiaková, E.: *Osamelosť ako sociálny a psychologický jav*. Prešov: FF PU, 2008. 173 p. ISBN 978-80-8068-731-1.
29. Žitniaková Gurgová, B.: *Osamelosť a samota ako psychologické fenomény*. In: *Literárne variácie samoty a osamelosti [online]*. Krakov: Spolok Slovákov v Poľsku, 2013. 246-262 p.

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