

MANIFESTO

FOR ADDRESSING AND REDUCING OLDER ADULTS LONELINESS IN EUROPE

Raising awareness and taking appropriate and timely actions to minimise the negative effects of loneliness on older adults



As Europe's population ages, and societal changes lead to greater isolation for older citizens, loneliness is responsible for a decrease in quality of life for a large part of European society.

Loneliness has been recognised as a major social and public health problem.

Becoming more aware of those who are experiencing loneliness, or at risk of loneliness we can provide older citizens and the vulnerable with tools to tackle their loneliness, increase self-esteem, and help them understand that living alone does not mean living in loneliness.

Recognising the impact loneliness has on the health and mental or psychological well-being of older citizens and the vulnerable, in particular where it can be created through social isolation during emergencies and pandemics, we can transform our services and intervention programmes to be more proactive and responsive.

Encouraged by the contribution all citizens can make to society irrespective of their age we can embrace the richness of their knowledge and experience.

We agree and endorse the following principles in reducing loneliness amongst older adults and the vulnerable in our society:

Promote Understanding

- ▶ Listen and learn from older adults to achieve a better understanding of the causes and impacts from loneliness.
- ▶ Increase awareness of loneliness and the impact it has for older citizens amongst all stakeholders and in particular policy makers and service providers.
- ▶ Remove the stigma of ageism as one of the contributors to loneliness and other mental health issues.
- ▶ Share knowledge and learning with other countries and regions so that collectively everyone works to reduce the negative effects of loneliness on older adults.

Foster Participation and Co-creation

- ▶ Adopt a person-centred approach in designing tailor-made interventions that will meet the specific needs of individuals and groups.
- ▶ Include older adults in the design and development of policies and services.

Take Action

- ▶ Work for the detection and prevention of loneliness from a coordinated and holistic perspective.
- ▶ Implement multi-disciplinary interventions, to create an enabling environment to minimise the negative effects of loneliness in the older adults.
- ▶ Empower older adults and their communities to become more resilient.
- ▶ Reinforce the positive points of living alone.
- ▶ Develop policies on active and healthy ageing that start in the transition points of a person's life span:
 - ▶ Motivate permanent behaviour change towards active and healthy ageing.
 - ▶ Improve the quality of life and self-esteem of older adults.
- ▶ Promote Smart Ageing as a new paradigm of active and healthy ageing:
 - ▶ Empowering older adults' digital identities.
 - ▶ Investing in eHealth and eCare.
 - ▶ Creating intergenerational entrepreneurship programs.

Evaluate

- ▶ Evaluate interventions to measure the impact on older adults' health and well-being.
- ▶ Include older adults in the evaluation of services and interventions.

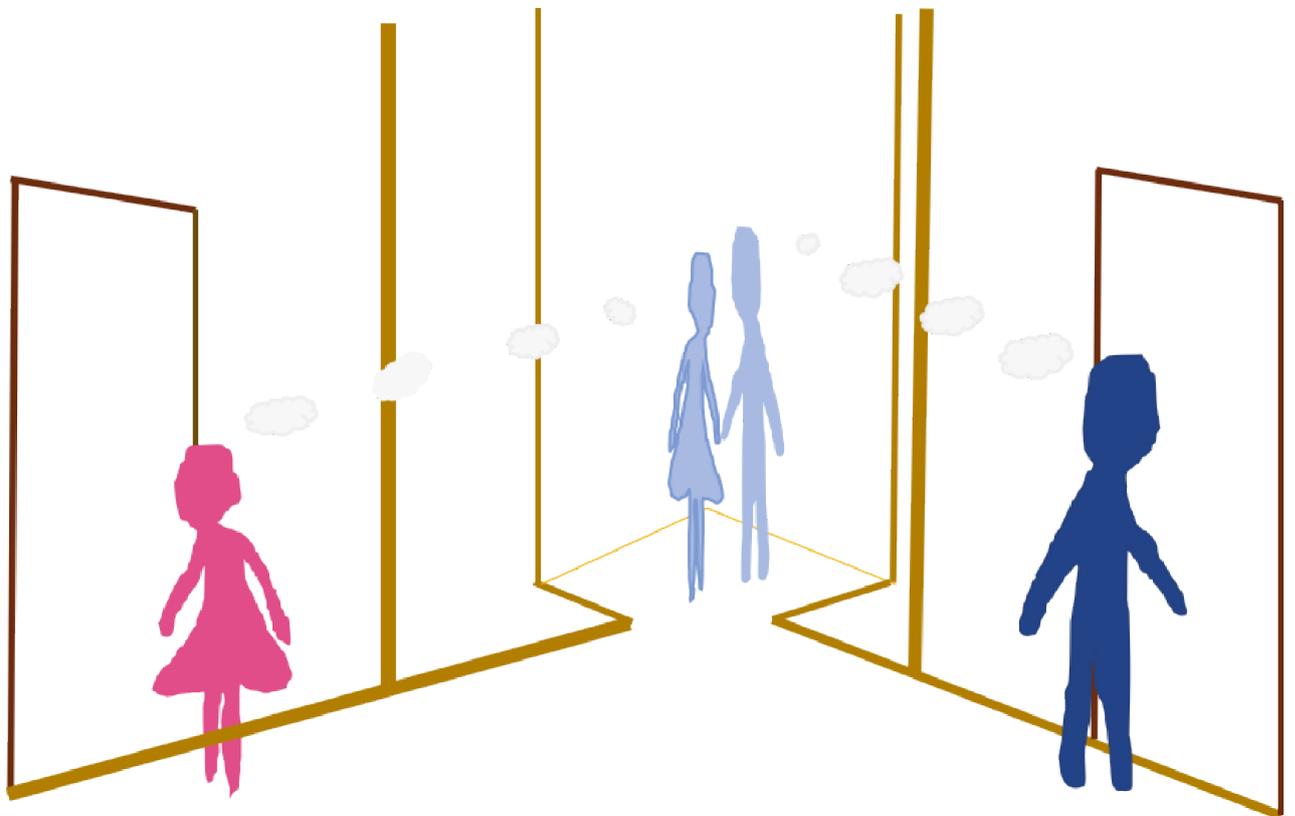
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Humans are Social Beings

Older Adults and Loneliness

Populations are ageing around the world. The greatly augmented expectancy of survival into old age is one of humanity's major achievements (1,2). This is a relatively new demographic phenomenon because for most of human history populations were young and lives were short. Longer life expectancies and declining fertility rates mean that older people make up an ever-increasing proportion of the populations of OECD countries. In more than two-thirds of OECD countries, at least one-quarter of the population will be over 65 years of age by 2050. Population ageing is one of the most important challenge for our societies.

A longer life brings with it new opportunities, the chance to pursue new activities or a long-neglected passion. Moreover, older people contribute in many ways to their families, to their communities, to society more broadly. However, older adults everywhere feel lonely.



“ Loneliness is a feeling

A negative and distressing emotional state that arises from a discrepancy between one's desired and achieved levels of social connectedness.

Although loneliness is an emotion common to human beings, it is and remains a very complex and unique experience to each individual.

As a result, it is important to distinguish loneliness from being alone or in solitude, which is an objective state, and can be a free choice.

Being alone or in solitude is not a prerequisite for experiencing loneliness because not everyone feels lonely when they are alone. Loneliness can also be experienced in the presence of other people.



Qualitative or subjective appraisals of social relations are more important predictors of loneliness than the quantitative aspects of social relations

1 Report of the Second World Assembly on Ageing, Madrid, April 8–12, 2002. A/CONF.197/9. 2002. New York, United Nations. http://c-fam.org/docLib/20080625_Madrid_Ageing_Conference.pdf

2 Standard & Poor's. Global Aging 2010: An Irreversible Truth. 2010. Standard & Poor's Financial Services LLC (S&P), a subsidiary of The McGraw-Hill Companies, Inc. All rights reserved. [Global Credit Portal. Rating Direct. http://csis.org/files/attachments/110923_gai_presentation.pdf](http://csis.org/files/attachments/110923_gai_presentation.pdf)

https://www.un.org/en/development/desa/population/publications/pdf/ageing/WPA2017_Highlights.pdf

Theories of Loneliness

Major theoretical approaches to loneliness include :

The social needs perspective

posits a direct relationship between objective social deficits and the subjective experience of loneliness *

The cognitive discrepancy model

focuses on people's subjective evaluation of their relationships rather than the needs fulfilled by these relationships **

Both the social needs perspective and cognitive discrepancy model emphasize **the role of the social environment** in the experience of loneliness



* Weiss R (1973) Loneliness: the experience of emotional and social isolation. MIT Press, Cambridge.

** Peplau LA, Perlman D (1982) Loneliness: a sourcebook of current theory, research and therapy. Wiley-Interscience, New York.

Cacioppo S, Grippo AJ, London S, Goossens L, Cacioppo JT (2015) Loneliness: clinical import and interventions. *Perspect Psychol Sci* 10(2):238–24.

“ Loneliness is spreading globally, affecting people of all cultures and ages, with prevalence rates predicted to increase to “epidemic” levels in the future.

More than **75 million** European adults meet with family or friends at most once a month and around **30 million** European adults frequently feel lonely.

The United Kingdom appointed a **Minister for Loneliness** to address the finding that **nine million** British people often or always feel lonely.

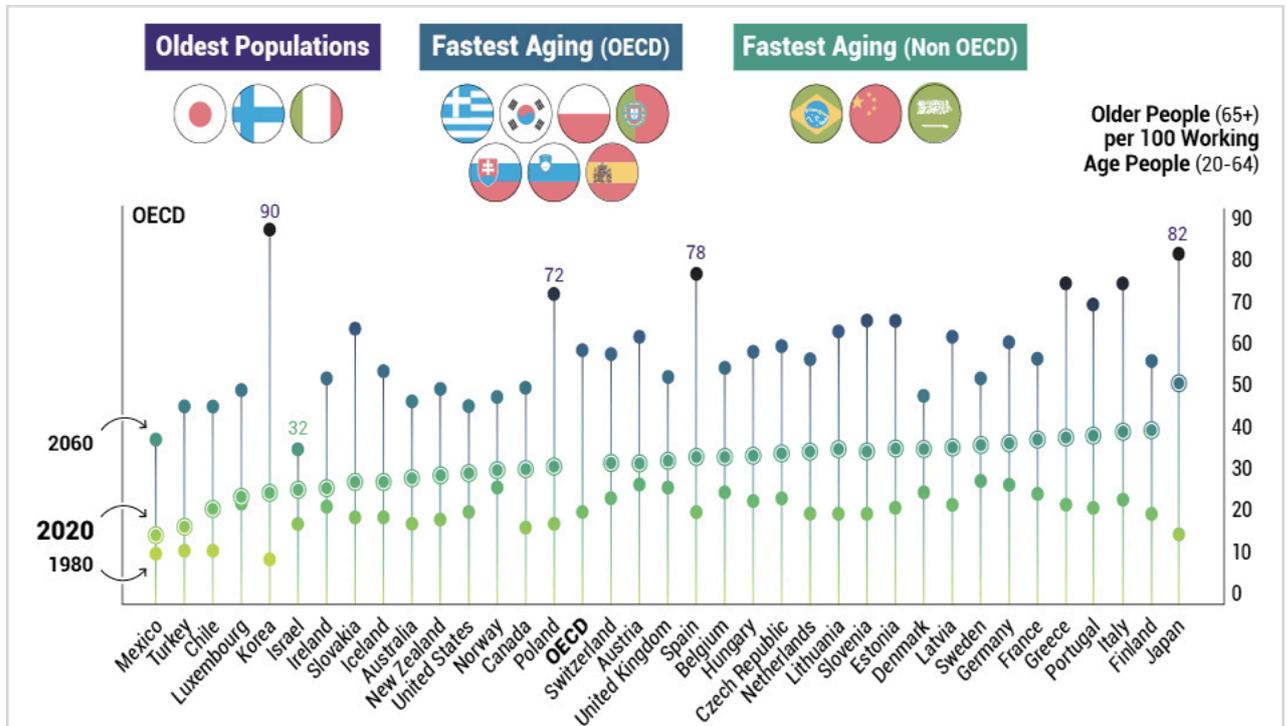
One-third of Americans over the age of 45 report feeling lonely, with prevalence especially high among those under 25 and over 65 years old.

U.S. Surgeon General Vivek H. Murthy: “We live in the most technologically connected age in the history of civilization, yet rates of loneliness have doubled since the 1980s.”

Eastern and Southern Europeans are lonelier and more socially isolated than Western and Northern Europeans.

Across the EU, **6% of the adult population** did not have someone to discuss personal matters with in 2015, the percentage of **men (6.7 %)** was slightly higher compared to **women (5.4 %)**.

Why loneliness is of political interest?



Loneliness affects health and well-being

- ▶ increases risk for mortality, CVD, neurodegenerative diseases, depression
- ▶ increases the burden on health and care systems

Requires a coordinated government response

- ▶ raise awareness of loneliness
- ▶ address the causes of loneliness
- ▶ develop policies and interventions to reduce loneliness



Causes of Loneliness

Loneliness:

- ▶ Is a **personal and unique experience** to each individual.
- ▶ Is **Multicausal** because of the role of the social environment.
- ▶ Can be **triggered by the interaction among several variables** or factors, both endogenous and exogenous such as:

Loss of a spouse or family member

Retirement

Feeling degraded

Level of resilience

Lack of self-esteem

Education

Poverty

Personality traits

No hobbies or pastimes

Cultural factors

Feelings of exclusion from Digital World

Poor Digital Literacy

No community or social settings in urban or rural areas

Causes of Loneliness

The causes of Loneliness could be classified and analysed based on the following risk factors:

Physical and Mental Health

- ▶ Advanced age
- ▶ Age-related diseases
- ▶ Anxiety
- ▶ Chronic diseases
- ▶ Deficits in communication or comprehension
- ▶ Depression
- ▶ Intellectual disability
- ▶ Neurodegenerative disorders
- ▶ Physical and Mental impairments
- ▶ Stress

Socio cultural

- ▶ Ageism
- ▶ Computer illiteracy
- ▶ Gender issues
- ▶ Individualisation of society
- ▶ Lack of family support
- ▶ Level of education
- ▶ Lifestyles
- ▶ Loss of independence
- ▶ Loss of social network
- ▶ Poverty
- ▶ Racial or ethnic minorities
- ▶ Retirement

Psychological and cognitive

- ▶ Level of personal resilience
- ▶ Life events
- ▶ Personality characteristics

Social Environment

- ▶ Caring responsibilities
- ▶ Ease of access to healthcare services and community facilities.
- ▶ Housing status
- ▶ Living alone
- ▶ Low level of participation in society
- ▶ Transportation

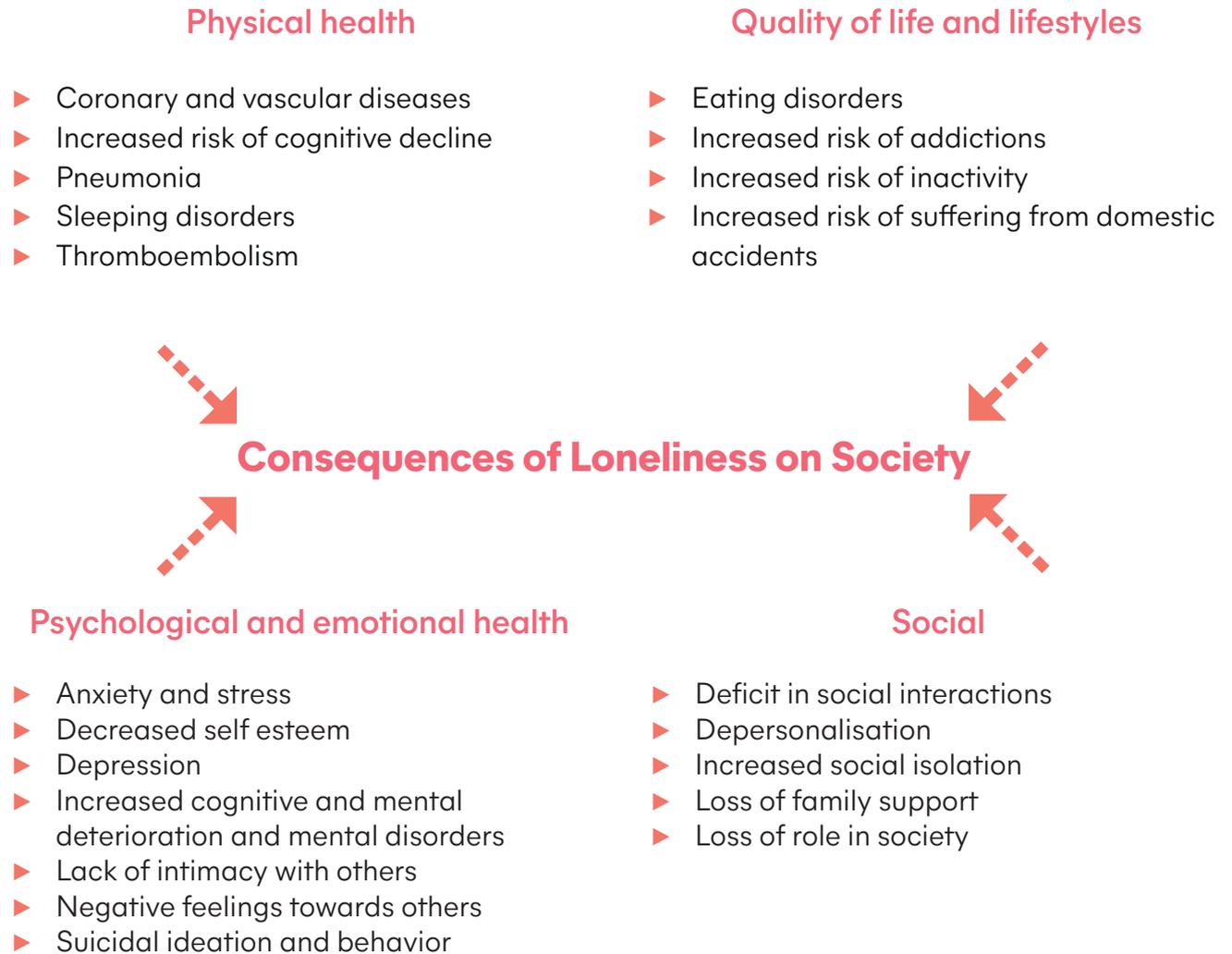
Impact of Loneliness on the Individual

Physical health

- ▶ Coronary and vascular diseases
- ▶ Increased risk of cognitive decline
- ▶ Pneumonia
- ▶ Sleeping disorders
- ▶ Thromboembolism

Quality of life and lifestyles

- ▶ Eating disorders
- ▶ Increased risk of addictions
- ▶ Increased risk of inactivity
- ▶ Increased risk of suffering from domestic accidents



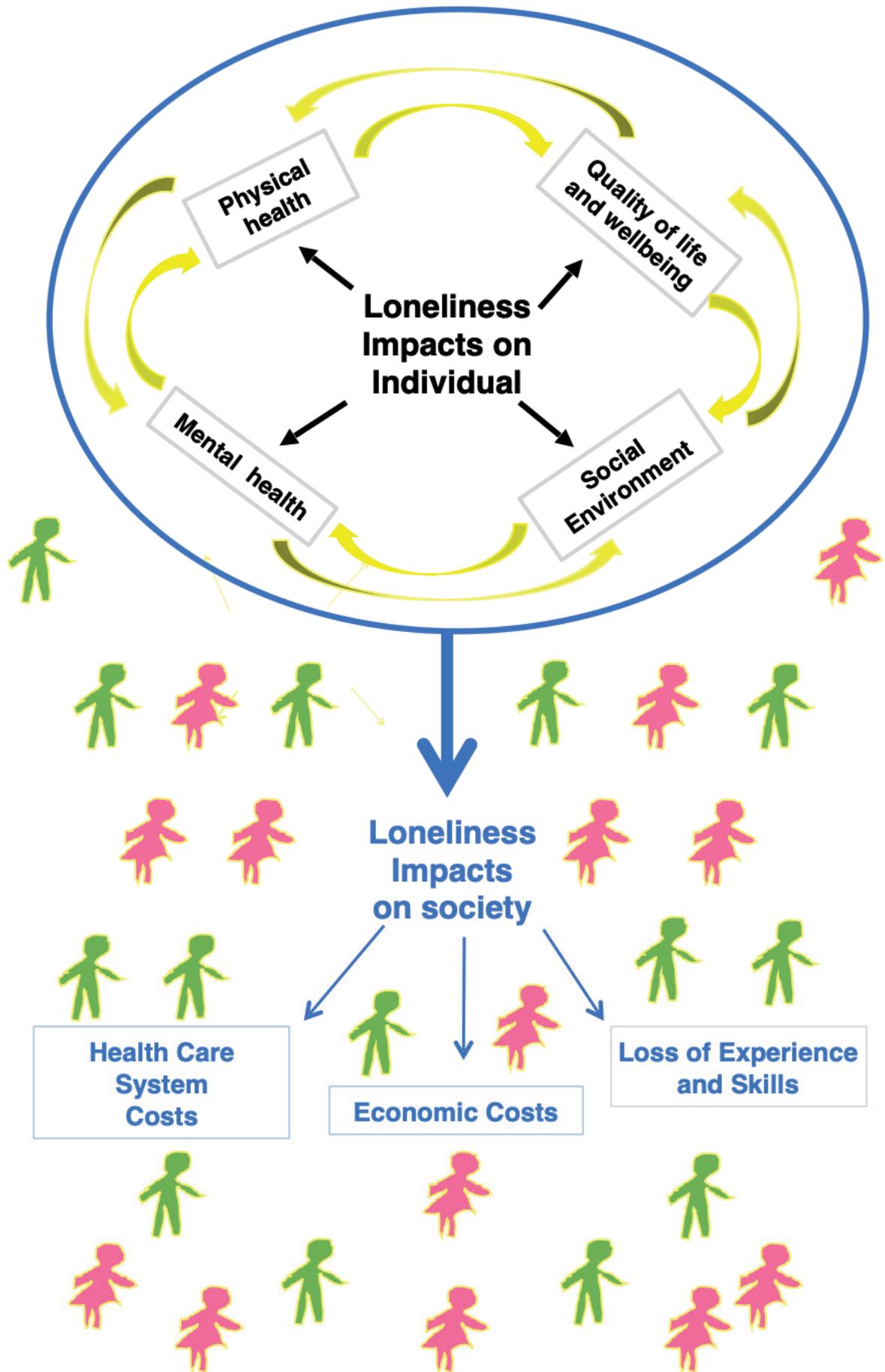
Consequences of Loneliness on Society

Psychological and emotional health

- ▶ Anxiety and stress
- ▶ Decreased self esteem
- ▶ Depression
- ▶ Increased cognitive and mental deterioration and mental disorders
- ▶ Lack of intimacy with others
- ▶ Negative feelings towards others
- ▶ Suicidal ideation and behavior

Social

- ▶ Deficit in social interactions
- ▶ Depersonalisation
- ▶ Increased social isolation
- ▶ Loss of family support
- ▶ Loss of role in society



“ Regional Governments have been proactive in developing policies and initiatives, including expanding the opportunities for digital technologies to reduce older adult loneliness.

Examples of Regional Policies and Initiatives to Reduce Loneliness:

- ▶ Community engagement and support initiatives
- ▶ Community Volunteering
- ▶ Digital technologies to support older adults staying connected with family, friends and communities
- ▶ eConsultations with health and care professionals
- ▶ eHealth and eCare solutions for promoting social engagement
- ▶ Empowering older adults creating associations
- ▶ Health and digital empowerment training programs
- ▶ Intergenerational programme to share and exchange knowledge
- ▶ Group interventions - improve communication skills and establish new social relations
- ▶ Home Care and Support Services
- ▶ Promotion of intergenerational relationships and combat ageism
- ▶ Remote Monitoring
- ▶ Senior entrepreneurship
- ▶ Telecare services
- ▶ Telephone listening and support services (health, social, finance)
- ▶ Training and support activities - targeted to specific groups, based on existing community resources within the neighbourhood, including facilitators figures

Examples of Digital Technologies to Reduce Loneliness:

- ▶ Augmented Reality Programs (visits, cultural activities, social connection)
- ▶ Community Engagement platforms
- ▶ eHealth and eCare solutions for improving older adults autonomy and independence life in community and in-home.
- ▶ Identify older adults at risk of loneliness
- ▶ Online Support Services – health and care information, financial information, community information
- ▶ Remote Monitoring/Rehabilitation to support programmes of healthcare
- ▶ Smart Cities / Smart Villages Programs (Community as a Living Lab)
- ▶ Video Consultations and Video Teleconferencing with health and care professionals
- ▶ Virtual Visits by family and friends

Objectives and Actions to Minimise the Impact of Loneliness on older adults



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