

The Value of Being Heard: **Loneliness and Social Isolation in Long-Term Care**

Loneliness and isolation are a public health crisis with profound consequences. Twenty-five percent of Americans over age 65 are considered socially isolated (the objective state of being alone).¹ Additionally, 43% of Americans over age 65 report feeling lonely (the subjective state of feeling isolated).² The problem is even worse in long term care settings. One study found that more than half of all residents in nursing homes suffer from loneliness.³ Scientists are emphasizing the need to prioritize social connections as a way to promote both individual health and community wellness outcomes.⁴

Isolation

Social isolation can be a choice that people make. There are people who choose to be socially isolated and remain content and happy. But when it's not a choice, it can lead to loneliness and have negative psychosocial and physical effects. It can also lead to neglect and abuse, including for individuals living in long-term care settings.

Loneliness

There are three dimensions to loneliness:

- **“Personal loneliness”** – when a person loses a significant other like a spouse, partner, or close friend.
- **“Absence of a sympathy group”** – when a person loses a part of the small group that they're used to connecting with regularly, such as a book club.
- **“Lack of an active network group”** – when a person loses a large community that offers support through inclusion, like a religious group.

Long-term care residents may experience one or all forms of loneliness.

Consequences of Loneliness and Isolation

Chronic loneliness is associated with multiple adverse medical and mental health conditions. It can increase the risk of developing dementia by nearly 50% in older adults, and is a risk factor for deaths from all causes.

During the Covid-19 pandemic, perhaps no community was more adversely impacted by loneliness and isolation than people living in long-term care. Confined to their rooms and unable to visit in-person with family, friends, and loved ones, residents experienced significant physical, emotional, and psychosocial health consequences.



1 Loneliness and Social Isolation Linked to Serious Health Conditions (<https://www.cdc.gov/aging/publications/features/lonely-older-adults.html>)

2 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7205644>

3 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7205644>

4 Our Epidemic of Loneliness and Isolation (<https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf>)

Some residents lost their ability to speak because no one was communicating with them. Others who had previously been mobile lost their ability to even sit up in their beds. Too many lost the will to live because they felt abandoned and didn't know when, if ever, they would see their loved ones again. Family members reported that their loved ones were depressed, despairing, and experienced cognitive decline during facility closures.

Resident Voices on Isolation and Loneliness During and Since the Pandemic

“[H]aving lost all the friends I’ve lost during COVID – friends who died and friends who left the facility, the loneliness is now also grief.”

– TERRY FROM PENNSYLVANIA

“Isolation can happen even if you have a roommate because at times all the doors are shut... This still happens when there are COVID-19 outbreaks.”

– MAURICE FROM MARYLAND

We All Strengthen Social Connections and Community Integration

When asked what could help address loneliness, multiple residents and consumers responded, **“Spend time with us. Listen to us.”**

Families, Friends, and Staff

- Ask residents what would support their efforts to find meaning, or help address loneliness
- Visit your loved ones and spend time with them
- Call or leave messages for loved ones
- Send video or audio recorded messages from friends and family
- Use technology like “Alexa” or “Google Home” to drop in and have an audio or video visit.
- Become involved in the facility’s family council
- Encourage the resident to become involved in the resident council
- Facilitate participation in online activities, such as online church services or book clubs, so they stay engaged

Facilities

- Ask residents if they would like to engage in planning activities, helping to acclimate new staff, or delivering items like mail to other residents
- Invite residents to engage in events and projects outside of the facility and help to facilitate those connections
- Ask residents about their larger networks and ensure access by providing or arranging for transportation or access to technology
- Ask if residents would like to attend religious services in the facility or watch religious services remotely
- Encourage community groups and volunteers to visit with residents and/or hold meetings on site with residents, such as church or school groups and civic organizations
- Work with local schools to offer community service credits to students who volunteer

There are ways the entire community can help combat loneliness and isolation in the long-term care community. Examples include building habits to facilitate human connection (e.g., opportunities for active listening), even a few minutes at a time; promoting individual and institutional action to help people connect; and by advocating for adequate staffing levels so that residents have the care and support they need.

Resources

[NCEA – Publications related to Long Term Care / Nursing Home Abuse](#)

[Pursuing Quality Long-Term Care Podcast](#)

[Stay Connected to Combat Loneliness and Social Isolation | National Institute on Aging \(nih.gov\)](#)

