

Canadian Counsellor
 Conseiller Canadien
 1984, Vol. 18, No. 3, 123-129

RESPONDING TO LONELINESS: COUNSELLING THE ELDERLY*

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Abstract

The purpose of this article is to provide a step-by-step description of the development and implementation of a group on Responding to Loneliness for the elderly. "Responding to Loneliness" focuses on five main areas: building positive self-esteem; learning social and personal skills; managing stress and anxiety; developing problem-solving strategies; and building a social network. The underlying assumption of this group approach is that everyone is alone and is responsible for what is done about it.

Résumé

Le but de cet article est de fournir une description détaillée et précise de la création d'un groupe visant à aider les personnes âgées à faire face à l'isolement. Les cinq principes de base de "Responding to loneliness" seraient d'aider ces personnes à: développer l'estime de soi; apprendre des habiletés de nature personnelle et sociale; s'adapter au stress et à l'angoisse; adopter des stratégies de solution de problèmes; établir un réseau de rapports sociaux. Cette approche collective repose sur le postulat que chacun est seul et porte la responsabilité de sa solitude.

Loneliness is a feeling that most people experience sometime during their life. The prevalence of loneliness has been documented by Sermat (1980) who found of the people studied that only 1 to 2% reported never having experienced loneliness and 10 to 30% indicated that loneliness is a continual pervasive element of their lives. In an investigation of the medical consequence of loneliness Lynch

(1977) postulates that "... social isolation, the lack of human companionship, death or absence of parents in early childhood, sudden loss of love, and chronic human loneliness are significant contributions to premature death" (p. 3). Weiss (1973) suggests that there are different types of loneliness. For example, loneliness of grief is different from that of the divorced. Sadler (1974) defines loneliness phenomenologically as a discomfoting experience that conveys a self-perception, in which there is a sense of something missing. In other words, the feeling of separateness from others or not having anything significant to give or receive from others. Paradoxically, the feeling of loneliness can intensify when there are many people around and yet

*The program described in this paper was funded by the Canadian Mental Health Association on a grant to Drs. Donald Knowles and M. Honoré France (Responding to Loneliness, Program reference 42).

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there is a feeling of not being a part of what is going on around them.

Growing old and loneliness seems to many people to go hand-in-hand. Loneliness becomes a problem for the elderly because there seems to be a loss of roles, i.e., work, parent and spouse. According to Burnside (1971) loneliness occurs as a result of geographical, language, cultural factors, life-style, illness, loss and impending death. Williams (1978) speculates that the losses the elderly experience coupled with the increased efforts in adjustment and a decrease in abilities may cause diminished ego. This in turn is affected by anti-social personal habits and diminishing social networks which further isolate the elderly.

Some Theories of Loneliness

The literature on loneliness agrees that loneliness is the result of both internal and situational factors, although not necessarily both (Etter, 1981). Although the major theories have some commonalities, the three discussed take different approaches in explaining the source of loneliness.

The Existential View

According to Moustakas (1972) the existential concept on the cause of loneliness seems to be an underlying dimension of all the theories. The existential belief postulates that loneliness is an intrinsic element of human existence. The existential core of loneliness exists within everyone. Every person is ultimately alone and will always be so. In a sense, Moustakas (1961) views loneliness as a challenge. Loneliness can lead to anxiety and despair or can lead to strength and hope. Moustakas (1961) speculates that the creativity of Antoine de Saint-Exupéry and Emily Dickinson emerged from the rockbottom core of loneliness that they experienced. This experience then helps reaffirm identity, helps create lasting love, friendship and allows fuller participation in life. However, the other side of this rebirth is loneliness of a broken life (Moustakas, 1972).

The essence of the existential view of loneliness is that it is a constant part of life. Moustakas (1961) says that ". . . to love is to be lonely" (p. 101). Love is constantly subject to change and termination as people grow, decline, and die. All love will lead to suffering and there is nothing that anyone can do about it.

Interactionist Model

Sadler (1974) has differentiated five dimensions of loneliness. The dimensions of loneliness differentiate not only the types, but the source of the loneliness. The dimensions conceptualized by Sadler are the cosmic, interpersonal, psychological, social, and cultural.

1. The cosmic dimension of loneliness is when there is a feeling of separateness from some universal order or the source of the meaning of life. The cosmic may relate to a spiritual relationship or the relationship between nature.

2. The interpersonal dimension is when there is a feeling of being separate from a significant person. It could mean the yearning to be with someone, take care of someone, or to be taken care of by someone.

3. The psychological dimension is when there is a feeling of being "out of touch" with the self. Sadler notes that this dimension never exists on its own, but in conjunction with other dimensions.

4. The social dimension is when there is a feeling of separateness from a meaningful group or community. There is an absence of social relationships or the inability to establish a role identity in a group.

5. The cultural dimension is when there is a feeling of being isolated from cultural roots, values, and traditions. In other words, a sense of alienation from the dominant culture.

None of Sadler's dimensions exist separately, but suggest possibilities along five different directions of loneliness. They are not weighted and all can produce pain that can interfere with learning and the ability to maintain a satisfying social network.

Relationship Deficits

According to Weiss (1973) if there is a deficit of a sense of attachment to someone or a lack of a sense of community or being involved socially, then loneliness will occur. For example, a wife might feel lonely while her husband may not. The wife may have an intimate relationship, but not a significant social relationship, which the husband may have through his work.

Loneliness

Sermat (1980) found that most reports of loneliness were interpersonal in nature. In addition, he found that men reported higher levels of loneliness that were associated with not living up to self or another's expectations.

Loss of a loved one or a change in relationship is a strong source of loneliness in widows (Lopata, 1969). An important factor of that change is the loss of status that went along with being married. For adolescents, the feeling that no one understood and the lack of being involved in a group were two important types of loneliness (Bahr & Harvey, 1979).

The Group Concept of Loneliness

There seems to be a positive correlation between how the elderly feel about themselves and the manner of loneliness experienced (Burnside, 1971; Clark & Anderson, 1967; Kivett, 1979; Williams, 1978). In other words, the state of well-being depends upon the degree of fulfillment experienced as part of fundamental human needs. Thus the elderly have the choice to "grow old or be older and growing" (Rogers, 1980).

In developing a format to address the dimensions and intensities of loneliness that were important to the elderly, it became apparent that the developed theories of loneliness did not suffice individually. Although components of these theories fit, something more dimensional and comprehensive was needed. The concept of loneliness that finally addressed all the aspects of loneliness included the multi-dimensions of Sadler (1974), and the existential core of loneliness, proposed by Moustakas (1961, 1972). Figure 1 illustrates the existential core of loneliness on a field of dimensions of loneliness. The positive (+) and negative (-) aspects indicate how a person copes with loneliness. In other words, loneliness can be painful, yet lead to growth (change and creativity), or lead to despair (fear and anxiety). The layers of loneliness recognize that there are intensities of loneliness which are expressed for example as feelings of emptiness, hopelessness, isolation and alienation. A person might feel other levels or intensities not expressed in the figure. The layers are dynamic, which change continually, sometimes lasting moments or a lifetime. The result can either be change and/or creativity () or fear and/or anxiety (-).

Developing New Relationships

Many of the participants were not familiar with group process techniques, thus the process

was explained in depth. All participants were encouraged to respond and discuss any activity or presentation in each session. The facilitator worked at having the participants respond personally, using "I" and "me" statements, in response to the group activities. Each of the eight modules were two hours. Over a period of 6 months 21 people (aged 57-81) participated in the groups.

Introduction – Loneliness and Life: Module 1

Many of the people who came to this first module were really checking to see if they wanted to commit themselves to the entire program. The participants were presented with an outline and procedures of the program. To focus in on loneliness, how it affects the aged, and what can be done, the film "Sand Castles/Châteaux de sable" (National Film Board, 1977) was shown and discussed. This animated film is thirteen minutes long with no dialogue, presents an odd assortment of beings who together build a sand castle. The wind then returns and blows the castle down. There were a variety of themes introduced by the film, which the facilitator helps bring out in the discussion. The following themes were discussed: working together, transience of things, everyone has his/her place in the community, change, growth, death, friendship, acceptance. Using the "Layers of Emotional Responses Associated With Loneliness" illustrated in Figure 1, the concept of loneliness was discussed in relationship with the causes of loneliness. The causes include: (a) geographical loneliness; (b) language barriers; (c) cultural loneliness; (d) life-style loneliness; (e) loneliness of illness and pain; (f) loss loneliness; and (g) loneliness caused by impending death (Burnside, 1971). For homework, participants were asked to bring, for the next module, a poem, lyrics or a written statement that describes any feelings of loneliness.

Anatomy of Loneliness: Module 2

Participants were asked to first share their personal descriptions of loneliness with a poem, lyric, statement, or anecdote; secondly, they were asked to share a remembrance of a time that they felt lonely. That was followed by brainstorming, listing on a blackboard, and discussion of different situations when loneliness occurs. One of the rationales for doing this was that loneliness exists for everyone, but is more bearable when it is realized that it is common to all. The different forms of loneliness and strategies were presented and then discussed (see Figure 1). The key to facing

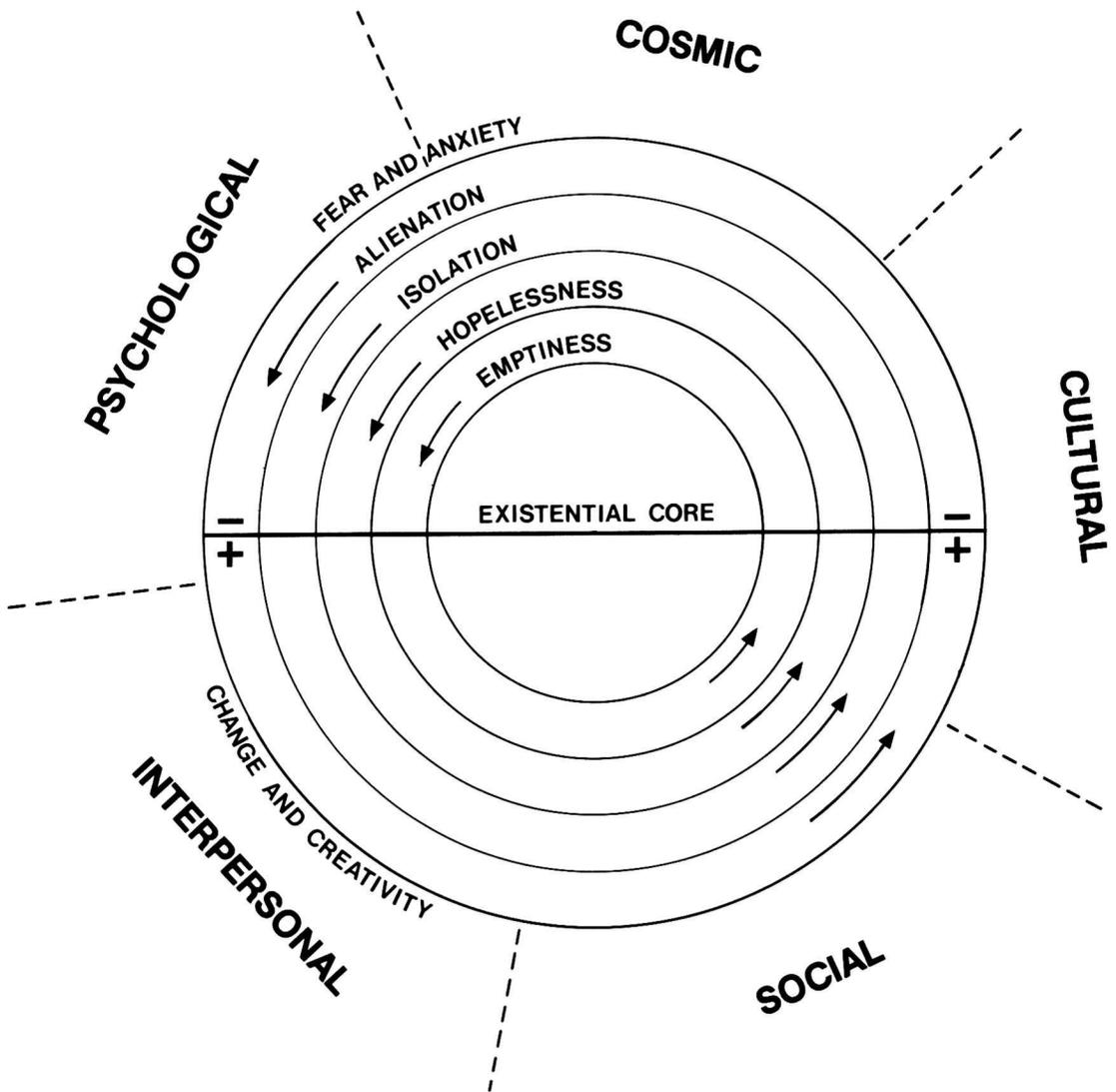


Figure 1

Layers of Emotional Responses Associated With Loneliness

Figure 1: Layers of Emotional Responses Associated With Loneliness. Adapted from "Understanding and Coping With Loneliness" by M. H. France, C. McDowell, and D. Knowles. To be published in the 1984 issue of the *School Counselor*. Copyright 1984 by the American Association for Counseling and Development. Reprinted by permission.

Loneliness

existential loneliness is what Herd and Kubistant (Note 1) call the "3 A's": *admitting* that I am lonely and alone; *accepting* this as a human condition; and *allowing* it to run its full course. The session explored those creative aspects as well as the harmful aspects of loneliness.

Building Self-Esteem: Module 3

A brief lecturette was presented on how self-image is formed and how most people evolve a negative life theme: "I'm not ok, you're ok" (Harris, 1967). The following activities were used to help participants be more positive about themselves: negative self-talk; undoing downers; opposing forces; and 15 steps to gaining more confidence.

Developing Social Skills: Module 4

The focus of this module was to assist participants to: become more effective in initiating social contacts; develop comfortable conversational listening skills; and be more assertive in their interpersonal relationships. The assumption behind this session was based on how lonely and withdrawn people often avoid responsibility for starting social encounters and continuing social contacts. Each participant was encouraged to develop his/her own particular style and manner of interaction in each situation. After an initial presentation of effective social skills, the following activities were used: starting and maintaining a conversation; social fears and irrational beliefs; family or friends constellation; "You know what I like about you?"; and active listening. For homework participants were asked to start a conversation with a stranger and give a compliment to someone.

Initiating a Social Network: Module 5

To assist the participant in developing comfortable social skills strategies were presented for: making better use of existing social networks; building new social networks; and achieving a desired level of social relations. After a presentation of the characteristics of a positive and negative social network, the participants brainstormed some strategies they could use. The following activities were used in exploring social participation: relationship analysis; three things I'd like to change; and allocating time.

Managing Stress and Anxiety: Module 6

This module focused on the part that stress plays in contributing to a lonely life,

negative self-image, and a reduced social network. Therefore, after a presentation on stress and anxiety, participants were taught the Jacobson's muscle tension relaxation technique and Benson's relaxation response (Walker, 1975). The facilitator modelled a relaxation technique and then guided the participants. For homework participants were asked to pick a time each day and perform the exercise. Audio tapes of the technique were made available upon request. For those participants who desired more work with anxiety management techniques a daily chart and weekly checks were made by the facilitator.

Effective Problem-Solving: Module 7

The aim of this session was to teach the participants a seven step technique for self-understanding and problem-solving (France & McDowell, 1983). The problem-solving paradigm consists of the following steps: confrontation and inventory of responses; pattern clarification; function; price or consequence; alternatives; evaluation of experiments; and choice. After the presentation of the problem-solving paradigm the facilitator modelled the process. Participants were given practice in using the problem-solving paradigm.

Wrap-Up, Feedback and Building Support Groups: Module 8

The major focus in this module was to discuss any thoughts, feelings, or experiences the participants had during the program. All unfinished business was worked on, as well as feedback of the sessions. To understand what the participants thought of the process, a *Developing New Relationship Questionnaire* focused on the areas covered in the workshop. The session was concluded by a presentation of guidelines for establishing a support network.

Post-Program Feedback

The reaction of the treatment group to the program was positive for all sessions. However, two aspects of the group program that were helpful in doing future group work with the elderly were the overall impact of the experience in terms of helpfulness and the rating of the program assignments. Participants were asked to rate the program on a four point scale: very helpful, helpful, not helpful and not very helpful. On a percentage basis the participants rated the program as follows: 33.3% thought it was very helpful; 57.1% thought it helpful; 4.7% thought it not

helpful; and 4.7% thought it not very helpful. Feedback on the homework assignments was: 85.7% thought that it was helpful; 4.7% thought it meaningless; 4.7% thought there was too little; and 9.5% thought there was too much. Anecdotal comments from the participants consisted mostly of statements reflecting a better understanding of themselves and a greater sense of control of what happens to them (e.g., "I am responsible for how I feel and am the only one who can do something about it.")

Conclusion

The group procedures for helping the elderly examine loneliness for self growth in the Responding to Loneliness program were basically sound. The format and topic areas met with positive approval of the elderly. The group was geared towards the concept that all people, including the elderly, experience loneliness. Thus, the goal of the group was to increase self-growth by facilitating greater awareness towards each individual's loneliness. The feedback from the participants supported the notion that the Developing New Relationships program was useful for the elderly in exploring and accepting loneliness as an integral part of personal development. It seems also that the elderly found the self-searching, group process, and didactic lectures comfortable as a medium of growth. Generally, the main value for the elderly in this group approach was that it was a starting point for continual personal growth. That growth will occur only if the elderly take active control, stop holding on to the past, and participate actively in their environment.

The current literature on loneliness confirmed what many of the group participants revealed in discussing their own strategies for coping with loneliness. Basically, loneliness was seen as a problem that has to be confronted continually throughout life. In this regard loneliness can be a product of post-industrial society, in which social and economic mobility has increased loneliness. Society has many forces that contribute to alienation, that for the elderly can lead to isolation and unhappiness if allowed to go unchecked. The group approach to loneliness offered support and ideas that assisted the elderly participants in a more effective coping strategy. The central theme of acceptance of loneliness as a natural life phenomenon seemed to be the most crucial element of the program. Once participants accepted a sense of responsibility and power

of choice, they were able to cope with the fear of loneliness. Assessing strengths and weaknesses and developing coping strategies became the focal point of the group. The advantage in the group approach was that the support was offered by the other participants. All participants seem to reach out to others in the group and the group became a support network that did not exist before. Participants who knew each other became bonded as a result of their participation in the group. Certainly more can be done in combatting loneliness for the elderly; however, the group format offered in this paper demonstrates one effective method.

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