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Assessment 1 Comparative Report

The impact of loneliness and social isolation on the elderly population of UK and Italy.

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Introduction

The demographic revolution of ageing represents a truly global phenomenon.

The number of older adults in the modern world makes up a significant population. The number of citizens needing help and assistance is increasing. Ageing is an irreversible process in every person that comes down to physical and psychological changes.

In old age, people experience more negative than positive aspects of their situation. Psychological changes are manifested in increased vulnerability, resentment and irritability. However, older people can live well and qualitatively, even if their organic indicators are imperfect.

Given the need to be helped by families and community services, the elderly are also the most subject to social isolation. One thought that should always be remembered is that social distancing does not have to be the first step in disconnecting from society.

Understanding the circumstances associated with social isolation and feeling persistent loneliness, we can work on supporting older people to tackle it.

The government increasingly focuses on community and family care for older adults in addressing issues such as loneliness and social isolation. Even in developed countries such as the UK and Italy, there are differences in the care needs of older people and the ability of countries to meet these needs.

This study focuses on the UK and Italy. This comparative report is examined the following:

- To evaluate the age at which young adults from these two countries might consider themselves old.
- To understand the phenomenon of loneliness and isolation from society in older adults and the consequences for their health.
- To determine the similarities between the two countries regarding the effectiveness of existing legislation and policies in alleviating isolation from society and a sense of loneliness among older people.
- To discuss the evaluation of various technologies and their benefits in alleviating loneliness and social isolation.

Such a perspective can provide valuable insights into the importance of various policy-level differences between the two nations.

The age at which young adults from UK and Italy might consider themselves old.

Different contexts will have different effects on ageing. Thus, many questions arise about understanding old age globally.

"The specificity of the situation with "old age" is that all people from a certain age belong to the socially vulnerable group.

"Old", on the one hand, is the definition of a certain period of life, on the other hand, belonging to the oldest age segment of society. Life expectancy in a country affects whether a person can be called old. Moreover, on the other hand, this is when a person ceases to make an active contribution to the life of society.

Ageing is a process that can be divided into chronological and biological phases.

Likewise, we have different ways of defining 'old people' and consequently vary considerably in what will define 'old age'. It is common for "older people" to be defined in statistics as people over a certain age. For example, the NHS defines an older person as over 65 (NHS, 2023). According to the ONS (Office for National Statistics) (2015), the over 85s are referred to as "older people". WHO (World Health Organisation) has defined an "older person" as a person "whose age is above the average life expectancy at birth" (WHO, 2015); this expectation in the UK is 81, 2 years for both men and women. While age classification can be practical and useful, these rules may not always apply as biological ageing can vary from person to person. It can happen, for example, that a 60-year-old person has worse health than a 75-year-old person.

A fact that can influence the need to resort to treatment or aid is "fragility".

Another aspect with little relevance to the chronological age is the gradual reduction of functional capacity (or "functional decline). This aspect leads to considering an older person. The British Geriatric Society has defined frailty associated with functional decline as "a special health condition associated with the ageing process in which different systems of the body gradually lose their accumulated reserves" (BMA, 2016).

Officially today, a person who has reached the age of 65 is defined as an older person. Considering that life expectancy from birth has lengthened (in Italy, this figure is 82 years for women and 85 years for men), the seniority categories have been redefined, creating a new category; the over 65s will be defined as the third age (good health, good social life, resources) and then there will be the fourth age which includes those who have a physical decline and depend on others (SIGG, 2018).

The new dynamic definition of seniority (the age group between 65 and 75) is more suited to the current physical and mental conditions of women and men living in Italy today.

Statistics on the ageing population (UK and Italy)

In the UK, the population has begun to age steadily since the second half of the 20th century, an increase that is expected to continue. Data show that 18% of the total UK population (11.8 million people) in 2016 were 65 or over compared to 15.8% just 25 years earlier (9.1 million people).

Projected 20 years into 2043, 1960s baby boomers (now over 50) will reach old age; this indicates that another 8.6 million UK residents will be aged 65 or over, adding to older people will form a group of 20.4 million, 26% of total UK residents

In the UK, the most significant increase is expected to be in the 85+ age group; let us consider that in mid-2016, this age group represented 2% of the total population (1.6 million people), and by mid-2041 the forecast is for this percentage to double to 4% (3.2 million people) reaching 7% (5.1 million people) by 2066. While the age group between 16 and 64 is expected to increase by only 2% in the next 25 years and by 5% by 2066 (ONS, 2018).

Analysing the statistics in Italy, we can observe that the shares of older people are always higher. In 2001, 16% of the Italian population over 65 was 16%, increasing by 5% until 2020, reaching 21%. A significant figure can be seen in the age group ranging from 80 years of age and over; this group represented 3.4% in 2001, almost doubling by 2020, reaching 6%. Observing these data, we can state that the population of Italy is ageing; people aged 65 and over represent 23% of the population, and the most significant increase occurred in the 80-year-old and over range. (Istat, 2023).

Phenomenon of loneliness and isolation from society among the elderly

To date, people over 65 are 10% of the total population; this percentage is set to rise to 24% by 2030 (AGE UK, 2015).

This increase in the percentage of people over 65 will cause an increase in the demand for health services with the consequent increase in costs (Langa et al., 2004, Lehnert et al).

According to research by Age UK (2015), there are more than 2 million people over the age of 75 who live alone. More than 1 million of these people confirm that sometimes they go up to a month without talking with a family member, friend or neighbour.

Comparing the Italian data with the UK data, it is noted that the similarities are high, as reported by Claudio Falasca in its 2020 report; here, it is highlighted how over 2.5 million people over 74 live alone, silently creating "A new social emergency."

This report highlights how "loneliness" can vary according to the age of the people in question (Claudio Falasca, 2020).

For example, in the age group between 55 and 74 years, people who live alone are 16%; beyond this group, the percentage increases to more than double, reaching 38.3%. The report shows us again that 40% of people over 75 have no relatives or friends to turn to, and only 11.7% have the possibility of turning to a neighbour (Diego De Leo, 2020).

Research conducted by Dr Cacioppo found that despite a strong correlation, loneliness and being alone are two distinct conditions, although there is a strong correlation between them. Those who live alone suffer physical separation from other people, social isolation, and paradoxically may not feel alone; also, loneliness is the sensation of feeling alone even among people, a situation that can create emotional anguish (Olijoke, A., et al, 2020).

There are various reasons why people can isolate themselves socially. We can cite, for example, not being helpful to the family, reaching retirement, losing a spouse or friends, no longer being independent in mobility or due to health problems such as illness or disability.

This makes us realize how straightforward it is to feel alone and vulnerable (NHS, 2022).

Loneliness and social isolation, according to the National Institute on Age (2023), can increase the risk of worsening mental and physical states such as heart disease, anxiety, high blood pressure, weakened immune system, depression, obesity, cognitive decline and Alzheimer's disease and in some cases even death (NIH, 2018).

The public health measures taken worldwide following the COVID-19 (SARS-CoV-2) pandemic have effectively limited social contact between people, with consequent concerns regarding people's mental and physical health and a negative impact on 'the economy' (Cheung G., et al, 2020).

According to recent studies, during COVID-19, the percentage of people suffering from severe loneliness was 21%, while before the pandemic, this percentage was 6%; 20% were habitually isolated, with a 13% increase during COVID-19 (O'Sullivan, R., et al, 2021).

Another aspect of loneliness is the difficulty of relating to others. The negative behaviour of lonely older people is the tendency to refuse to ask for help, even out of pride.

It has also been seen that people engaged in social or productive activities in contact with other people have a longer life expectancy and having a purpose benefits mood by increasing well-being and cognitive function (Cacioppo, S., et al., 2015).

Legislation and policies in alleviating isolation from society and a sense of loneliness among older people

A crucial issue is the demographic evolution with the consequent aging of the global population, a situation that needs to be addressed by public health at a global level (Poscia, A., et al., 2018).

According to World Report on Ageing and Health, maintaining relationships is frequently regarded as necessary for well-being, and social relations are essential to healthy ageing (WHO, 2016).

Many millions of citizens in the UK feel alone all the time or most of the time.

Loneliness is a problem to which every social category must contribute; people, communities, educators, the world of work, health workers and even the government can play an important role. It is necessary to help people intensify social relationships and improve physical and mental health.

The UK government has proposed some strategies to solve the problems faced by the older generation. The authority is committed to working on the following points:

- **The Every Mind Matters Loneliness Campaign** aims to help people understand loneliness, talk about it, and deal with it by reducing stigma. The latest campaign, "Lift Someone Out of Loneliness", started in January 2022, involves young people between 18 and 24, inviting them to be kind to those who feel alone.
- **The Tackling Loneliness Network**, the government has engaged some charities, celebrities, and companies to connect them with groups at risk of loneliness. It was asked to develop new ideas committed to combat loneliness; the plans are published in the Tackling Loneliness Action Plan. A digital application facilitates collaboration between organisations: the Tackling Loneliness Hub is useful for sharing research and information (Gov.UK, 2022).

In addition to these points, the government is committed to involving other organizations and government departments so that everyone can contribute to combating loneliness.

For example, AGE UK report shows that COVID-19 was the cause of loneliness for 1,4 million people. On this occasion, AGE UK offers recommendations to the government on how best to solve this problem: invest in providing digital skills, improve transport services for older adults,

and intensify efforts to support the voluntary sector, which can help those who feel lonely (AGE UK, 2021).

There is also a demographic crisis in Italy. Covid-19 has created a health emergency, which has affected the country's growth and economy. The declining birth rate is mirrored in the soaring population ageing. Italy is the first nation in Europe for the number of elderly people and the second in the world after Japan.

The fact that people are living longer is positive. However, the rapid ageing of the population requires concerted public policies have been proposed to tackle the challenges older generations face. One of the most encouraging strategies is the Policy of active ageing. It aimed at:

- promote greater mental, social, and material well-being of old people,
- promote greater participation of older people in society in active ageing.
- fight poverty and inequality.
- adapt the labour market to the economic and social consequences of population ageing.
- the mainstreaming of ageing in all public policies, full integration, and participation of older people in society (Gov.It, 2022).

National provision of services for the older person

The UK has found nine million citizens who feel alone most of the time. More than one in three over 75s reported their loneliness as 'out of control'; half of disabled people of all ages suffer daily. In the population aged 65 and over, 3.6 million individuals consider television the main companion of their day (AGE UK, 2015).

To answer the problem of loneliness, the government has allocated twenty million to charities to combat the phenomenon with a strategy to "eliminate loneliness in the course of life" (Gov.UK, 2022). The government has pledged to retaliate against the tech giants (Facebook, Google, and Amazon) for aggravating loneliness.

Social isolation is influenced by the broader socio-economic context as well. Research shows that people who have lower incomes take less part in social activities compared to their more affluent peers. Consequently, the general welfare regime directly impacts older people's social isolation since social protection and pension policies directly affect the income level of older people and, thus, their ability to participate actively in society.

Technologies and their benefits in alleviating loneliness and social isolation.

Numerous studies indicate that social isolation and loneliness negatively affect older people's health, well-being, and exclusion from public life. New technologies have had a positive impact in the last decade in reducing the impact of social isolation. A great help to improve the social relationships of older adults is offered by digital communication technologies (ICTs). Services offered by new technologies such as email, social networking websites (SNS), instant messaging, and video games have been shown to reduce the problem of loneliness, and when combined with telemedicine robotics, 3D virtual environment, personal reminder information, video conferencing app and social management system(MIM) can improve patient self-assessment, chronic disease care and depressive symptoms (Balki, E., et al., 2022). Another exciting element is access to health information via the Internet and related social support for psychosocial problems.

An essential role in reducing the risk of loneliness in older people living alone has a network of trusted people. It can include not only family members but also friends and just acquaintances. It is possible that the widespread use of mobile phones and digital communications has made face-to-face contact less of a necessity while simplifying daily contact.

Experts are committed to promoting internet-based technologies to reduce loneliness affecting older adults, their families, and caregivers. Governments and policymakers should also consider financially supporting computer literacy, especially among older people.

Conclusion

In recent years, the severe threat to the well-being of older people caused by loneliness and social isolation has become increasingly evident; this threat has sharply accelerated due to the pandemic, highlighting past challenges, and showing how much effort is required to solve them.

Despite the constant increase of studies and consequent interventions dedicated to solving problems related to loneliness and social isolation of older people, no concrete conclusions have been reached based on our review. Many interventions promise excellent results even if generalising them is impossible.

Our report has shown, by observing the comparison between the United Kingdom and Italy, that an ageing of the resident population is expected in both countries over the next few decades. This has also been confirmed at a global level; even though an essential commitment by both governments, with dedicated laws, acts and the involvement of most social partners, loneliness and social isolation are still rooted among older people.

Our report highlights that the path taken can lead to great results. However, to achieve this, every person, institution, healthcare, school, world of work and above all, governments must commit incredible generosity to understand the risk of loneliness and social isolation to help older people feel part of society.

Let us not forget that one day we, too, will enter that age range.

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