



Student name: Benah Nasande

Student ID: 1917243

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Lecturer name: Bianca Sanfilipo

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1. Introduction

1.1 What it means to be an elderly person in the UK and South Africa

In UK, anyone above the age of 65 is considered an elderly person. However, applying a rigorous definition is difficult since people age physiologically at various rates, therefore someone at 75 may be healthier than someone aged 60. (NHS, n.d). According to the Older Persons Act 13 of 2006 of South Africa , an older person is someone who is 60 years old or older. (South African Human rights commission, n.d).

1.2 Statistics on the ageing population and how these have changed in recent years (UK and South Africa)

By 2030, one out of every six people on the planet will be 60 or older. At this point, the population aged 60 and up will grow from 1 billion in 2020 to 1.4 billion. The world's population of people aged 60 and up will more than double by 2050. (2.1 billion). Between 2020 and 2050, the number of people aged 80 and up is expected to triple to 426 million. (WHO, 2021)

In 2019, almost one-fifth of the UK population (19%), or around 12.3 million individuals, were aged 65 or older. Between 2009 and 2019, the number of persons in this age category rose by 23%, whereas the overall UK population expanded by just 7%.

The older population in the UK is expected to expand, with individuals aged 65 and more accounting for 24% of the population by 2043. (17.4 million people). The proportion of the population aged 75 and above is expected to climb from 8% in 2018 to 13% in 2043, while the proportion of those aged 85 and up is expected to rise from 2% to 4%. (UK parliament , 2021)

The aged population accounts for 8.1% of the South African population, a 0.1 percentage point rise from 2011. According to Statistics South Africa's Social profile of the older individuals report, the proportion of older people in the population rose by 0.8% between 2001 and 2016, up from 7.3% in 2001. (Department statistics South Africa , 2017)

As of 2021, South Africa's population has grown to about 60.14 million people, with approximately 5.5 million persons over the age of 60 and 595,000 people aged 80 and older. (Statista, 2021).

1.3 Exploration of relevant theories of loneliness and isolation and concepts associated with loneliness, alluded to in literature.

There are two major concerns in the welfare of older people which include social isolation and loneliness. Social isolation is defined as the absence of regular contact with family and

friends and a lack of involvement in social organizations. Loneliness is the subjective experience or perception of being isolated, as well as having health implications. Individuals who are socially isolated frequently experience feelings of loneliness, however, social isolation and loneliness are frequently only weakly related. (Caithilin E Coyle, Elizabeth Dugan , 2012) .

Loneliness and social isolation have been linked to lower health status and hence lower quality of life. These findings show that these notions may have separate effects on health and should thus be viewed as individual traits. (Olujoke A. Fakayo, et al, 2020)

Loneliness is an unpleasant emotion that arises when a person's social ties are seen as being insufficient in quantity and, especially, in quality. Loneliness is very subjective; an individual might be alone without feeling lonely and can feel lonely even when surrounded by several people. Individuals' feelings of loneliness normally remain relatively steady throughout adulthood until they reach 75 to 80 years of age, when they begin to rise somewhat. Loneliness is attributed to depression, a lack of social support, neuroticism, and introversion. Loneliness increases the risk of physical illness and may lead to a shorter life span. (Hawkley Louise, N.d)

1.4 Theories of loneliness

Attachment theory

The theory of attachment was created by sociologist Robert S. Weiss, who identified six social demands that, if unsatisfied, contribute to feelings of loneliness. Attachment, social integration, nurturing, affirmation of value, and a sense of dependable partnership are among these needs. Attachment theory emphasises the need of a strong emotional connection between the infant and caregiver. Loneliness, according to this viewpoint, develops when children with insecure attachment patterns act in ways that result in rejection by peers. These rejections impede their social skill development and heighten their suspicion of other individuals, causing continuing loneliness. (Hawkley Louise, N.d)

According to the behavioural approach, loneliness is defined by personality qualities that are related with, and may contribute to, negative patterns of interpersonal interaction.

Loneliness, for example, is associated with social anxiety, social inhibition (shyness), sorrow, animosity, distrust, and low self-esteem, all of which impair one's capacity to engage in competent and rewarding ways. Indeed, studies have shown that lonely people have trouble creating and keeping meaningful connections. They are also less inclined to communicate personal information with their peers, which may explain why they perceive a lack of closeness with close friends. (Hawkley Louise, N.d)

The cognitive approach to loneliness is founded on the observation that loneliness is distinguished by unique distinctions in perceptions and attributions. Lonely people have a negative general attitude, and they blame themselves for their inability to form satisfying social interactions. Furthermore, the cognitive approach largely accounts for the attachment and behavioural perspectives by explaining how (1) failed attempt to meet the need for attachment, social integration, nurturance, and other social needs results in perceived relationship inconsistencies that are felt as loneliness, and (2) loneliness is perpetuated by a self-fulfilling prophecy in which poor social skills lead to dissatisfying personal relationships, which lead to loneliness. (Hawkley Louise, N.d)

1.5 Isolation theory

The Temperament Isolation Theory seeks to explain why societies favour one temperament over another and how they perceive and interact with persons with opposing temperaments. It implies that some personalities are preferred over others and that opposing personalities are suppressed or silenced, either intentionally or accidentally. The theory is not commonly recognised among social scientists at the moment. (Jorge Rodrigue III, 2014)

2. Comparison between two countries

2.1 The impact of loneliness and isolation on an older person living within a care setting. (UK and South Africa)

Loneliness in care homes in UK has been identified as a particularly acute problem, the incidence of severe loneliness observed by nursing home residents (22-42%) is more than double that of inhabitants in the general population (10%). (Aging health, 2012)

The loneliness is linked to higher restrictions in activities of daily living, poor self-reported health, disability, mobility issues, impaired cognitive function, depression, poor psychological well-being, and ultimately a significantly increased mortality risk among nursing home residents. (A. H. Jansson, S. M. Muurinen, et al, 2017)

A detachment from the familiar is also of a key factors contributing to feelings of loneliness. Changing from living in your own house to a completely new one with none of your previous furniture or furnishings might cause feelings of listlessness and identity loss. This experience can be exacerbated by not seeing the individuals you're used to seeing, experiencing a full shift in your daily routines, and missing the familiar sights and scents of your usual neighbourhood. Care home residents may also feel lonely if their nurses or caregivers are overworked and do not have time to simply provide them with companionship.

Other residents, on the other hand, who are more introverted, may choose not to socialise with anyone and in such instances it's difficult to assess how much social interaction one is getting. (Helping Hands, n.d)

In comparison with findings from UK above, a study conducted in South Africa on profile of social isolation and the influence of demographics in older persons living in residential care reported that although residential care does not prevent social isolation, the residents in the setting may provide a buffering in the provision of some social support. (Mary Ann Jarvis, et al, 2021)

Social isolation and loneliness have serious consequences for longevity, health and well-being. In older age, social isolation and loneliness increase the risks of cardiovascular disease, stroke, diabetes, cognitive decline, dementia, depression, anxiety and suicide. They also shorten lives and reduce the quality of life. (WHO, ITU, UN, 2021). Its effect on mortality is comparable to that of other well-established risk factors such as smoking, obesity, and physical inactivity. (WHO, N.d)

2.2 Current legislation and policies that deal with or aim to raise awareness or reduce loneliness and isolation in the elderly population (UK and country of choice)

The UK government acknowledged that no single sector had all of the answers, but that by collaborating, they can have a bigger impact and reach more people. They then urged members to share their experience, learn from one another, and identify activities that the government of the UK and network members might collaborate on over the following year. In May 2021, the Tackling Loneliness Network released *Emerging Together: The Tackling Loneliness Network Action Plan*, which outlines steps that Network members and government may do to combat loneliness as part of a coordinated recovery from COVID-19. (GOV.UK, 2021)

The Ministry of Housing, Community and Local Government, the Department of Business, Energy and Industrial Strategy, and the Department of Transport have all added loneliness to their ministerial portfolios. In addition to the Departments of Health and Social Care, Culture, Media, and Sport. Loneliness has been incorporated into ongoing policy decisions with a view to loneliness 'policy test' being included in departments' plans. (Department for Digital, Culture, media and support, 2022)

As part of the long-term strategy for the NHS in the United Kingdom, funds were allocated to connect patients to a range of activities, such as culinary courses, walking clubs, and art groups, lowering strain on the NHS and enhancing patients' quality of life.

Instead of using medicine, GPs can refer patients to community workers who provide targeted assistance to help individuals improve their health and well-being. This is known as social prescribing. (GOV.UK, 2018)

Several high-profile businesses, including Sainsbury's, Transport for London, Co-op, British Red Cross, National Grid, and the Civil Service, have pledged to take further efforts to enhance their employees' health and social well-being.

It was proposed that loneliness be incorporated in relationships education classes beginning in September 2020, so that children in primary and secondary schools can learn about loneliness and the importance of social ties. (GOV.UK, 2018)

The initiatives mentioned above, as well as funding raised by many organisations and charities in collaboration with the UK government, are all aimed at raising awareness of loneliness and assisting individuals in making connections in order to live happier and healthier lives. Several projects are also being conducted and publications written for the same purpose. (Department for Digital, Culture, media and support, 2022)

In relation to what is being done in UK, South Africa at the moment has no written policies and legislations to raise awareness and reduce loneliness and social isolation. (Vera Roos, et al, 2019)

2.3 Local, national and global provision of services for the older person in line with current initiatives and policy (UK and South Africa)

A wide variety of face-to-face or digital interventions have been developed to reduce social isolation and loneliness among older people. These include social skills training, community and support groups, befriending, and cognitive behavioural therapy. Creating more age-friendly communities, by improving access to transportation, information and communication technologies and the built environment, can also help reduce social isolation and loneliness. Laws and policies that address marginalisation and discrimination can also foster greater social connection. (WHO, N.d)

In some countries loneliness and social isolation have started to be considered as a pressing public policy and public health issues. This was culminated by the Covid 19 period where physical distancing measures increased the salience of these topics. In 2018, the government of UK appointed a loneliness minister and also published A connected society a strategy for tackling loneliness. (WHO, ITU, UN, 2021)

The UK government launched a major effort to tackle loneliness during the coronavirus outbreak and period of social distancing. The plan aimed to ensure that, for people of all

ages and backgrounds, staying at home did not need to lead to loneliness. It involved several approaches such as:

1. Let's Talk Loneliness public campaign to get people talking openly about loneliness and guidance on supporting themselves and others safely
2. Funds and support were offered as a boost to national organisations and charities working to tackle loneliness and build social connections to help them to continue and adapt their critical work .
3. NHS volunteer responders in communities.
4. Network of high-profile charities, businesses and public figures joined Tackling Loneliness Network formed by government to help connect groups at risk of isolation. The Employers and Loneliness guide was published in 2021, to act as the starting point to a wider conversation about what organisations can do to address loneliness.
5. A connected society published on 15 October 2018. It's the world's first government strategy for tackling loneliness. It builds on years of work by many individuals and organisations, and acts as government's first major contribution to the national conversation on loneliness and the importance of social connections. This strategy is an important first step, but government is also committed to long-lasting action to tackle the problem of loneliness.
6. Several campaigns such as Every Mind Matters Loneliness Campaign, which raises awareness of loneliness so people understand the problem and stigma is reduced, encouraging people to talk and act on loneliness.
7. The government is committed to publishing data on tackling loneliness periodically and highlight the current evidence gaps. It launched the loneliness hub a digital platform which allows organizations and charities to work seamlessly together, sharing data and research.
8. The UK and Japanese Ministers for Loneliness met to discuss tackling loneliness. They agreed to strengthen bilateral cooperation with regular meetings between the UK and Japan sharing knowledge on measures and policy; and working to increase global awareness of loneliness. (Department for Digital, Culture , media and support, 2022)

In South Africa there is no documented evidence on campaigns or initiatives in place to tackle loneliness though a report on loneliness of older black South African women subjected to forcible relocation showed that to mitigate loneliness, the individuals engage in

socio-cultural and spiritual rituals, interacting with anyone available remaining occupied through chores and gardening. (Vera Roos, et al, 2019)

2.4 The prospective future of the care of the older person; what changes could be made to the programmes aimed at addressing the problem of loneliness among the elderly and Use of technology for the provision of care provision to lonely older persons. (UK and South Africa)

Over the years, the Age UK network has run a variety of digital inclusion projects, including one-on-one support and drop-in sessions, as well as larger community awareness sessions and intergenerational projects. In recent years, a common thread in the delivery of these projects has emerged, as demonstrated by the Digital Angels and One Digital projects.

Digital Angels assists people in getting online as well as networking in their communities, such as by hosting digital tea parties in community centres and libraries. People known as digital champions have been trained and supported as part of the One Digital Project to inspire others to go online, and currently 8,241 older people have been reached.

While it may not be of interest to all older people, increasing digital participation may be one method to help individuals who are or may be lonely. Digital inclusion may assist people in maintaining or establishing new social ties, which can help them keep their independence and enhance their well-being. (Age Uk, 2020) .

Meeting tech companies to discuss loneliness - Tracey Crouch and Margot James, the Minister for Digital and the Creative Industries will explore the impact technology has on loneliness and how they can help prevent it. (GOV.UK, 2018)

In South Africa, there is no available information showing the use of technology for provision of care to lonely older persons, however technology advancement was recognized in the report on Guidelines to facilitate self-care among older persons in South Africa as an aspect to take advantage of in improving self-care of the older persons. (Tinda Rabie, 2015)

3. Recommendations

In UK live-in care which entails staying at home and having a skilled caregiver come to live with an individual , giving round-the-clock help and company should be advocated for the elder persons as it has shown that people who engage in frequent productive activities with others likely to have longer, happier lives filled with purpose and increased cognitive functions. This may be the ultimate solution to reducing social isolation and loneliness common among the elderly.

The government of South Africa needs to prioritize tackling loneliness and social isolation through offering support to researchers in the field of social isolation and loneliness to identify and focus on marginalised vulnerable older people for their particular context among the elderly and design specific interventions based on the findings given that it has the most ageing population in Africa.

4. Conclusion

Loneliness has demonstrated the significance of social contacts created in a certain situation. Social relationships are critical to identity and survival in the face of long-standing societal marginalisation and isolation from community. Individuality in the experience of loneliness and isolation may make standardised therapies difficult to offer. Because there is no one-size-fits-all method to managing loneliness or social isolation, treatments must be tailored to the requirements of people, specific groups, or the degree of loneliness experienced. As a result, future research should focus on determining which interventions work for whom, in what specific setting, and how.

Despite South Africa having the most aging population in Africa, there are no policies regarding tackling loneliness and social isolation. This hasn't been given priority as of today probably due to other social and economic problems there at the moment. However several scholars report that loneliness causes serious morbidity as some other conditions and should therefore be prioritized regardless of the economic state of the nation.

United Kingdom is a highly developed nation and emerged as the first ever nation to develop a policy to tackle loneliness should therefore take the initiative to guide other nations regarding the tackling loneliness as a way of improving health among the elderly.

References

Bibliography

A. H. Jansson, S. M. Muurinen, et al. (2017). *LONELINESS IN NURSING HOMES AND ASSISTED LIVING FACILITIES: PREVALENCE, ASSOCIATED FACTORS AND PROGNOSIS*. The journal of nursing home research.

Age Uk. (2020). *Loneliness and digital inclusion*. London: Age UK.

Aging health. (2012, December 14). *Loneliness in care homes: a neglected area of research?* Retrieved 8 27, 2022, from Aging health: <https://www.futuremedicine.com/doi/full/10.2217/ahe.12.65>

Cherry, K. (2022, 5 24). *Loneliness: Causes and Health Consequences*. Retrieved 8 15, 2022, from Very well mind: <https://www.verywellmind.com/loneliness-causes-effects-and-treatments-2795749>

- Committee for Development Policy. (2018). *Report on the twentieth session(12-16 March 2018)*. United Nations.
- Department for Digital, Culture , media and support. (2022). *Loneiness*. GOV.UK.
- Department statistics South Africa . (2017). *Social profile of older persons 2011-2015 report*. Census 2022.
- GOV.UK. (2018). *PM launches Government's first loneliness strategy*. GOV.UK.
- GOV.UK. (2021). *Emerging Together: The Tackling Loneliness Network Action Plan* . Department for Digital,Culture, Media and Sport.
- Hawkey Louise. (N.d). Loneliness. *Britannica*.
- Helping Hands. (n.d). *Tackling Loneliness in Care Homes*. Retrieved 8 29, 2022, from Helping Hands: <https://www.helpinghandshomecare.co.uk/care-advice/tackling-loneliness-in-care-homes/>
- Jorge Rodrigue III. (2014). *Temperament Isolation Theory:The Study of Personality Bias in Culture*. Arizona.
- Mary Ann Jarvis, et al. (2021). A profile of social isolation and the influence of demographics in older persons living in residential care, Durban, South Africa. *internal journal of Africa Nursing Sciences*.
- Mind. (2022). *Loneliness*. Retrieved 8 15, 2022, from Mind. org. UK: <https://www.mind.org.uk/information-support/tips-for-everyday-living/loneliness/about-loneliness/>
- Olujoke A. Fakayo, et al. (2020). Loneliness and social isolation interventions for older adults: a scoping review of reviews. *BMC Public Health*.
- South African Human rights commission. (n.d). *Human rights and older persons*. Johannesburg: South Africa Human Rights Commission.
- Statista. (2021). *Total population of South Africa* . Statista.
- Tinda Rabie. (2015). *Guidelines to facilitate self-care among older persons in South Africa*. Science Direct.
- UK parliament . (2021). *Housing an ageing population*. House of Commons Library .
- Vera Roos, et al. (2019). *Loneliness of older black South African women subjected to forcible relocation*. PubMed Central.
- WHO. (2021, 10 4). *Ageing and health*. Retrieved 7 20, 2022, from WHO : <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>
- WHO. (N.d). *Social isolation and loniliness*. WHO.
- WHO, ITU,UN. (2021). *Social isolation and loniliness among older people*. Decade of Healthy ageing.