

## Loneliness of the old age and ways to overcome it

Czynniki samotności starszych dorosłych i sposoby jej przezwyciężania

**Słowa kluczowe:** samotność, izolacja, odosobnienie, starsi dorośli, czynniki samotności, konsekwencje samotności.

**Streszczenie:** Artykuł jest poświęcony analizie specyfiki samotności osób starszych. Różnica między samotnością a izolacją i odosobnieniem jest określona. Opisano rodzaje samotności osób starszych, jej bezpośrednie i pośrednie czynniki. Przeanalizowano wyniki różnych badań poziomów samotności osób starszych i ich zależności od różnych cech społecznych człowieka. Ujawnia się zależność poziomu samotności osób starszych od płci, cech sytuacji społecznej człowieka i organizacji jego stylu życia (warunków i miejsca zamieszkania, wykształcenia, pracy zawodowej). Opisano społeczne i psychologiczne konsekwencje samotności osoby starszej. Zidentyfikowano sposoby przezwyciężania samotności w starszym wieku. Sformułowano zadania polityki społecznej na poziomach krajowym i regionalnym w celu przezwyciężania samotności osób starszych.

**Key words:** loneliness, isolation, solitude, elderly people, factors of loneliness, consequences of loneliness.

**Abstract:** The article is devoted to the analysis of elderly loneliness and its features. The difference between loneliness and isolation and solitude is determined. Types of loneliness and its direct and indirect factors are described. The results of various studies of the levels of loneliness of elderly people and its dependence on different social characteristics are analyzed. The dependence of the level of loneliness on a person's sex, features of his/her social situation and life conditions like place of residence, education, or professional employment is revealed. The social and psychological consequences of the elderly loneliness are described. Means to overcome loneliness in the old age has been identified. The tasks of social policy at the national and regional levels to overcome the problem is formulated.

### Introduction

Loneliness is a complex and controversial phenomenon, which is associated with destructive processes in a personality's development, because it is accompanied by feelings of dissatisfaction with themselves, their place in the world, their relationships. It is often experienced by people who are in crisis and conflict situations, periods of changes. Old age is one of the periods. Loneliness indicates a violation of the real connections and relationships of an old personality's inner world, reflects

the experience of one's individuality, subjective inability or unwillingness to feel adequate response, acceptance and recognition of others.

**The aim of the article** is to analyze the features, factors and ways to overcome the loneliness of older adults, to offer recommendations in the field of social policy to overcome such loneliness.

### **Understanding the essence of older adults' loneliness**

It is widely believed in society that the problem of loneliness is most relevant in old age. Existing social stereotypes indicate this. In particular, one such stereotype has been identified by M. Kermis (1983), sounds like "all old people are lonely". Representatives of different age groups tend to perceive people of this age as lonely (Kovalenko, 2015).

Loneliness is a complex mental phenomenon used to describe an emotional state, a subjective experience associated with a breakdown or lack of close positive emotional connections with other people. A lonely person experiences his\her isolation, inability or unwillingness to receive an adequate response (reaction), acceptance and admission of himself\herself by other people. The danger of loneliness for older people is that they perceive this condition as a threat. It is accompanied by emptiness, anxiety, boredom, helplessness, despair. Loneliness causes stress, which increases the risk of heart disease, migraines, sleep disturbance, diabetes, depression and premature death (Березіна, 2020; Luanaigh, & Lawlor, 2008; Peplau, 1985; Świtoń, & Wnuk, 2015). In older women, loneliness can provoke the development of diabetes (Świtoń, Wnuk, 2015).

Loneliness can be manifested as a result of objective conditions and as a subjective feeling. In the first case, loneliness is related to a situation that has arisen as a result of a long stay of an old person without interpersonal contacts. It is caused by the inability to establish physical contact due to lack of social connections with others. Improper performance of social roles or inadequate expectations of human behavior may be other causes of such loneliness. Such loneliness is also called social. Loneliness as a subjective state (emotional loneliness) is associated with a state of isolation caused by lack of emotional and mental connections with other people, lack of affection from loved ones (Peplau, 1985).

Loneliness should not be confused with isolation and solitude. Isolation is the objective absence of social contacts; it is as separated from other persons human existence. Loneliness as a subjective mental state depends little on the presence of contacts. A person can be really isolated, but not feel lonely. Although, if a person feels lonely, the range of his contacts is usually limited. The difference between loneliness and isolation is that a lonely person has a disharmonious relationship with himself\herself, others, the world at large. His\her life is full of crises and suffering.

Solitude is seen as a positive type of loneliness (de Jong-Gierveld, van Tilburg, & Dykstra, 2006). Person's need for solitude is manifested as a desire to be alone, isolated, separated, without communication with real people. A person is focused on his own thoughts, ideas, reflections, communication with God. The emergence of the desire to be alone depends on a person's individual characteristics and on the influence of the social environment. The desire to be separated from others is a decision made by an old person individually. He or she controls this condition and can change it at any time. Voluntary solitude allows old persons to understand their own experiences, helps them to review their lives and to adjust, to search for its meaning. In the current conditions of Russia's war with Ukraine old people's need for been alone cannot always be met. For example, a person wants to be alone, but at this time must hide in a bomb shelter due to the announced alarm or he or she is in a refugee camp, where hundreds of people are next to each other in a large enclosed space.

Loneliness in old age can be considered in the context of such a phenomenon as incorporation. It means focusing the interests of an old person to the problems of narrow social space. It is a protective mechanism that promotes older adults' social adaptation. Old people prefer close social ties, but with a high level of independence (rational combination of family care and personal autonomy). People of this age appreciate solitude and independence and therefore prefer the forms of living that they consider most useful for maintaining a favorable family relationship, defined as "closeness at a distance", "closeness with mutual independence".

### **Types of older adults' loneliness and its aspects**

An old person may feel lonely for different periods of time. Accordingly, determine the short-term and long-term loneliness. It is also divided into chronic, situational and transient (everyday) loneliness. Loneliness as a transitional state is common. The state concerns short-term manifestations of this feeling. It completely disappears, leaving no consequences. Situational loneliness is present when significant stressful events occur in an older adult's life: death of relatives and close friends or their relocation to other places, their change of residence (for example, as a result of hostilities or geriatric boarding houses). Usually, people overcome such loneliness after a period of distress, but in late adulthood such situations can often lead to chronic loneliness. Then an old person for a long period of time (two years or longer) cannot establish social ties that would satisfy him or her. The danger of chronic loneliness is that people who experience it have a higher risk of developing depression (Martín-María, Caballero, Lara et.al., 2020).

There are objective and subjective (spatial and psychological) aspects of loneliness. The first one is reflected in objective relations and facts, which under certain conditions become distorted. Living alone, an aging person can

organize his or her own life in such a way that he or she do not feel lonely, for example, reading a lot, participating in public life, using a dog or cat as an interlocutor, and so on. The second one is characterized by a personality's feelings that are due to the deformation of his or her relationships. A person can feel lonely and be close to others. So, in particular, an old person who lives with relatives may be indifferent to them, has almost no contact with them and feels lonely.

### **Factors of loneliness of older adults**

In late adulthood, loneliness as a fact of life occurs as a result of a number of factors:

1. Loss of loved ones, widowhood, divorce, family problems. This may be due to the natural death of these people or their relocation. In a situation of war, the loss of loved ones can occur due to their death in combat operations. Divorce and family problems, including in families of adult children more often cause loneliness in older women than men.
2. Traumatic experiences of early life, in particular, the loss of parents or one of them due to death or divorce (Peplau, 1985).
3. The end of employment, resulting in an older adult's feeling of own uselessness and, at the same time, in the inability to use free time. Previously, in the pre-retirement period, a person's daily schedule was determined by his/her professional employment and care for young children and household. When a person is no longer working, the children have grown up and do not need care, he/she has to organize daily life on his/her own. Based on the results of our researches (Kovalenko, 2015), people of late adulthood in Ukraine during the day are engaged in housekeeping and hobbies (84.62%), communication and care for others (41.83%), cognitive, intellectual activities (6.73 %), health and sports (2.88%).
4. Poor socio-economic status, in particular low income (Peplau, 1985). In old age, the level of income often decreases.
5. The presence of very old friends and relatives who cannot come to talk and help. Warfare further interferes with such communication.
6. Social exclusion, isolation that are associated with cultural, social, economic features, ageism (age discrimination), territorial features (for example, living on the upper floors of high-rise buildings), perception of the elderly as "disabled people". The consequence of this is their exclusion from social life.
7. Change of place of residence. When an old person changes his/her place of residence, he/she must adapt to other customs, agenda, cuisine. Old people are reluctant to agree to this. Even in a situation of war, people of this age leave their apartment (house) only in conditions of special danger, when this apartment is in a zone of active warfare or completely destroyed. Some old people even leave their country on this occasion. In another country, they especially experience moral loneliness, which is manifested in alienation

related to values and traditions that are not supported by social environment (Dąbrowska, 2011).

8. Intensification of physical and mental illnesses that lead to certain limitations in everyday life. For example, an old person has difficulty moving and cannot go outside his or her home to make contact with others. Old people who are in hospitals and geriatric nursing homes also feel lonely and isolated. The most difficult is the process of adaptation to such institutions.
9. Appearance, especially visible defects of an old person. He may be ashamed of them and, as a result, avoid communicating with others. Such defects can be surprising or frightening, and others can also avoid contact with older people (Fopka-Kowalczyk, 2018).
10. "Mutual alienation" of generations, which arises from the desire of children and grandchildren to separate from their old parents. Instead, the parents want to take care of them. Earlier, different generations in a family lived together. The eldest ones took care of grandchildren and shared their experience with them, and the younger ones could learn about various signs of old age. Now the younger generation does not need the support of older adults, and they completely leave their families, not playing the role of grandparents. Dąbrowska (2011) notes that in this aspect people living in rural areas are more prone to loneliness (because young people go to earn money in cities or other countries).
11. Leaving parental homes by adult children. As a result, older people have a feeling of total loneliness and desolation, known as "devastated nest syndrome". Old people are accustomed to a certain way of life, to constant communication with young people, to caring for them, and here they need to learn a new way of life. They have a lot of free time, there are no landmarks on others, even close people. They need a psychological restructuring of attitudes towards themselves, changes in life stereotypes and the old scenario.

Scientists, considering such factors as direct (loneliness is caused by the very circumstances of life), analyze the indirect factors of loneliness. Then the behavior of an individual leads to negative consequences that cause loneliness (Грубляк і Грубляк, 2011; Fopka-Kowalczyk, 2018; Fees, Martin, Poon, 1999; Peplau, 1985):

1. Denying old age and, consequently, aggravation of psychological problems or diseases due to persistent reluctance to turn to specialized specialists – psychotherapist, psychologist and/ or doctor. For example, an old person has inflammation of the joints, feels pain, suffers from it, does not consult a doctor, gradually limits the scope of his/her communication.
2. Denying and ignoring events that occur in society and require an immediate human response; inadequate response to such events. In particular, because of the war there is a great threat to old people's apartments and lives, and they do not want to leave them, they are there even if utilities are turned off.

As a result, the old person suffers from problems and inability to talk to other people. The most difficult situation is when there are no other people next to such a person.

3. Inability to establish contacts with other people or establishing destructive contacts.
4. Avoiding communication due to fear of misunderstanding and neglect of people from the immediate environment or specialists. In particular, an old person may think that his or her grandchildren no longer need care and attention, but they are too young to understand what is happening to them, and therefore older adults are less likely to communicate with their grandchildren.
5. Hiding from a doctor some signs of disease. This is due in particular to the fear of a psychiatric diagnosis and subsequent hospitalization in a psychiatric hospital or to the high cost of treatment and the lack of the person's funds for this.
6. Fear of publicity and shame, due to the fact that the diagnosis of senile dementia (senile dementia, etc.) will be known to the immediate environment. The older adults are locked in their world ashamed of various signs of the disease.
7. Distrust of doctors and unwillingness to turn to them. Doctors sometimes explain the futility of prescribing full treatment to older adults by the fact that the cause of their diseases lies solely in their old age and therefore cannot be eliminated. Also, an elderly person may not agree with a diagnosis made by doctors.
8. Unwillingness to disturb loved ones, relatives with their own psychological or physical problems and / or unwillingness to devote others to their problems.
9. Exacerbation of some, in particular, emotional personality traits and their anxiety, which is typical of older adults and greatly complicates communication.
10. is characteristic of the elderly and significantly complicates communication. An old person becomes emotionally unstable, tense, sensitive to threats, suspicious, irritable. In society, such persons tend to be avoided.
11. Features of temperament, in particular the weakening of the processes of excitation and inhibition, introversion of personality, his/her closedness.
12. The emergence of feelings of guilt and "self-punishment" (when a person accuses himself of something and deliberately deprives himself of communication with others).
13. Inability to find adequate meaning in life, prospects for the future and, at the same time, accept own past life.
14. Fatalism, an old person's belief in the inevitability of events, most of which are unpleasant and sad.

Such causes cause a stressful situation, which is the basis for the development of psychological disorders up to depression and mental illness. Objectively, this is manifested in a person's maladaptation and disorientation, his or her fears, sleep disorders, memory disorders, communication skills disorders, conflicts.

Experiences of loneliness are associated with a variety of psychological personality traits, including an expressed need for belonging, anxiety, etc. Feeling lonely, a person may experience various emotions, including fear, anxiety, insecurity, bad mood, self-pity and compassion, boredom, longing for a particular person. Also, old persons who feels lonely is less friendly and tolerant of the individual characteristics of others, have a worse control in communication and activities. Compared to those who feel less lonely, they are more likely to argue, conflict, and are less likely to compromise and negotiate.

### Older adults' levels of loneliness

The results of our research in Ukraine (Kovalenko, 2015) found that half of respondents (51.54%) of late adulthood had an average level of subjective feelings of loneliness. That is, it may indicate that they are more introverted, feel optimally lonely and treat this phenomenon positively; their general well-being is good. 28.65% of people of this age did not feel lonely or did not recognize its presence (had a low level). 19.81% of old people had a high level of loneliness, who were dissatisfied with their social connections, felt bad, and were often in negative emotional states (Fig. 1). Now in Ukraine, the situation with the number of lonely old people is deteriorating, firstly, due to the COVID-19 pandemic, when older people had limited opportunities to interact directly with relatives, friends, acquaintances who live apart from them; secondly, because of the war that Russia is waging against Ukraine, when an old person either remains on the territory of hostilities and almost no one may visit him/her or when an old person is forced to leave the place to which he is accustomed.

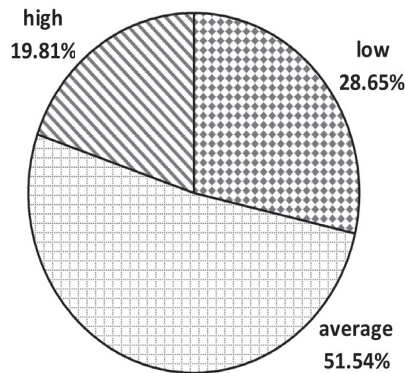


Fig. 1. Levels of subjective feelings of loneliness in late adulthood

The results of our research on the features of loneliness in people of late adulthood differ from the results of the study by O. Fushtei (2021), who researched such features in women and men in a COVID-19 pandemic. She found that 26% of women had a low level of loneliness, 58% had an average level of loneliness, and 16% had a high



level of loneliness. In men, a low level was found in 37% of people, an average – 38% of people, a high – in 25% of people. The volume and characteristics of this sample should be taken into account: it consisted of 30 old people who lived in the Vinnytsia Geriatric Boarding House. The sample size in our research was much larger – 520 people of late adulthood from different regions of Ukraine, who lived in their homes alone or with family. We also researched the features of loneliness in other studies, in other samples, the results of which are also presented below. But the results of the research confirm the idea of increasing the feeling of loneliness in old people due to the COVID-19 pandemic, especially in old men.

### **Loneliness of older adults who have different social characteristics**

Regarding the difference in levels of loneliness of older women and men, we got different results at different stages of the research and, accordingly, on different samples. In one case, a statistically significant difference was confirmed (women feel lonelier), in the second – such a difference was not confirmed (Kovalenko, 2015). Peplau (1985) studies have not confirmed a relationship between persons' gender and their predisposition to loneliness. Instead, empirical research and generalizations from scientific sources Fees, Martin, Poon (1999) confirmed that lonely men and women are more negative about their health, they feel more tired, more likely to complain of pain in various parts of the body, nausea, than old women and men who were not lonely.

Researchers have confirmed the impact of sex on the level of loneliness of older people living with partners: women have a higher risk of such a subjective feeling in interpersonal relationships (Fierloos, Tan, Williams, et al., 2021).

We have confirmed that the feeling of loneliness is more common for inhabitants of villages than cities; for non-working people than working people; for those who live alone than those who live with family; for those who are dissatisfied with their health than satisfied with it. Old people with general secondary education have a higher level of subjective feelings of loneliness than those who have secondary special and higher education. However, such differences between the older adults are not significant, as the average scores on this indicator mostly reflect the average level, although in some cases the levels are closer to high or low. Older adults who are older feel lonelier in old age than older adults who are younger. The younger ones still have contacts with colleagues and good acquaintances. With age, such contacts become more and more broken (Kovalenko, 2015).

The results of Kubickiego and OlconKubickiej research (2010) conducted in Poland are consistent with our research results on older adults in Ukraine and confirm that women, people with primary and lower education, non-working people, residents of rural and eastern Poland, poor people and those who live alone are more prone to loneliness in old age. Instead, men, people with higher or professional (secondary special) education, those who work, live with their families and in large



cities (population more than 500 thousand people) are less prone to loneliness in old age.

Older adults with a lower level of education, older age and living without a partner (never having married or being divorced or separated) are at risk of increased loneliness, according to recent research made in European countries (Fierloos, Tan, Williams, et al., 2021; Ong, Uchino, Wethington, 2015).

The results of our research suggest that older adults' subjective feelings of loneliness is significantly related to the level of their need for communication (Kovalenko, 2015). Thus, the level of subjective feelings of loneliness of older adults who have a lower need for communication is lower than of those who have a higher need for communication. In the first persons it is low, but close to average, in the second ones it is average, although close to high. It was found that many women (47.91%), people who do not work (51.77%) and those who live alone (39.31%) have a high level of loneliness in late adulthood. Most men have an average level of loneliness (84.81%). Among the older adults who are satisfied with their own health, there are very few people with a low level of loneliness (2.83%).

We found that older people with a lower level of loneliness are more active in social life, better able to see goals in the future, that give their lives meaningfulness, direction, and time perspective. They also have a more positive attitude towards themselves, a higher level of self-esteem and self-confidence, they are less dependent on the opinions and various influences of others, they value their strengths but are able to understand their own weaknesses. Older people who feel lonely are less satisfied with their life and more prone to change it compared to those who do not feel lonely. Instead, not lonely people do not have a greater desire to change themselves, their personality compared to lonely people. That is, they do not want to notice problems in themselves that can cause feelings of loneliness (Kovalenko, 2015).

Older people who previously lived alone feel less lonely than those who previously lived with their families and later became live alone, in isolation. This is because a socially lonely person has long learned to live alone and does not count on help or emotional contact with family. He/she knows how to avoid loneliness and live in the social environment he/she has created for himself/herself. An old person living in a family is usually forced to rebuild their family relationships with new family members (son-in-law, daughter-in-law, grandchildren, sometimes with their own children). In Ukraine, there are many situations when different family generations live in the same apartment. This is a situation where an old person must find his/her place in a family and take on a certain role. The psychological problem arises in the lives of those old people who have to take on the role of always guilty person. These persons find themselves in a situation of loneliness in the family. It is often possible to observe how these old people communicate well and eagerly with strangers, talking about their troubles in the family, at the same time they are not able to solve their problematic experiences during discussions with relatives.

## Opportunities of older people to communicate with friends and acquaintances and their loneliness

A decrease in the number of friends and acquaintances of older adults compared to previous age stages indicates an increase in feelings of loneliness in old age. According to our research, the average value of the assessment of older people's opportunities to communicate with friends and acquaintances in the past is 0.85 and is a sign that old people had quite a lot of friends and acquaintances. 26.92% of respondents used to lack friends and acquaintances. Among them, 5.29% felt the lack of communication the most, and 21.63% of people used to have fewer problems with the number of friends and acquaintances. At the same time, the majority of older people (73.08%) mostly had no problems with having friends and acquaintances, they had enough opportunities to develop interpersonal relationships. The best situation in this aspect had 44.23% of old participants of our research, and slightly worse had 28.85% (Fig. 2).

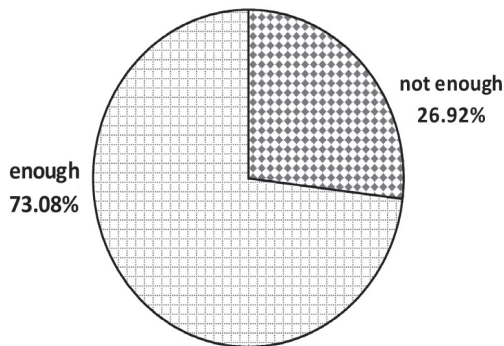


Fig. 2. Assessment by older adults the presence of friends and acquaintances in their past

The average value of the assessment of older adults' current opportunities to communicate with friends and acquaintances is 0.12 and indicates that people of late adulthood have approximately the average opportunity for such communication. This indicator is lower than the previous one, and indicates that the presence of friends and acquaintances and the ability to communicate with them in old age has decreased. Currently, 50.48% of older people do not have enough opportunities to communicate with friends and acquaintances, they lack the opportunity to share their thoughts and experiences with them. Among them, 15.86% of people lack such communication the most, and 34.62% lack communication a little less. Almost half of older people (49.52%) now mostly do not have problems with the opportunity to communicate with friends and acquaintances, that is they have access to such communication, satisfy the need for it. In particular, many friends and acquaintances now have 22.37% of older adults, and most likely many – 21.25% (Fig. 3).

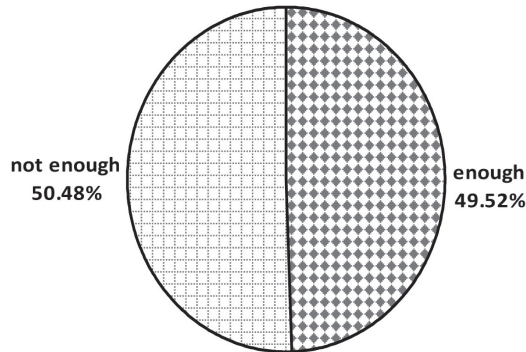


Fig. 3. Assessment by older adults the presence of friends and acquaintances at present

### Social and psychological consequences of older adults' loneliness

An older adult's experience feelings of loneliness have a number of social and psychological consequences, problems in the life of person himself/herself, which are reflected in the functioning of society. In particular, it is a constant dissatisfaction with the lives of the lonely older adults. They cannot satisfy others, including vital needs (social, economic, physiological, etc.). Lonely old people are not inclined to talk about what they need or, on the other hand, they make demands on others in an inadequate way (because they are nervous, irritated). Lonely elderly people are in despair and despondence, which is reflected in their well-being, including deteriorating health. They are also often depressed (Luanaigh, Lawlor, 2008; Świtoń, Wnuk, 2015).

The problem of loneliness of older adults is connected with their unclaimed by society, when a person cannot realize the potential that is stored in him/her (Leshchuk, 2021). This is accompanied by the activation of negative emotional states of different intensity.

### Overcoming loneliness in old age

To overcome loneliness, people use different strategies (coping practices), in particular, social, individual, active and passive. Older people prefer active individual practices of overcoming loneliness as a subjective experience, they try to overcome it on their own, engaging in some activity. Older adults with a higher level of education, who better assess their health and more satisfied with life tend to involve others (use social means) to overcome loneliness, communicate with them. It is social ways to overcome loneliness are considered more effective (Marsillas, Schoenmakers, 2022).

Improving the quality of life in various aspects, including biological (health), social (inclusion in various social events, life satisfaction), subjective (happiness, feeling the meaning of life and discovering it anew) helps the elderly to overcome loneliness (Świtoń, Wnuk, 2015).

Creating a safe and comfortable environment for older people, where they can meet the necessary needs of different levels, helps them reduce feelings of loneliness (Berezina, 2020).

An older person who receives social support feels less lonely (Peplau, 1985). In particular, it was found that such feelings in late adulthood reduce friendly relations (Krasnova, Lidars, 2002; de Jong-Gierveld, van Tilburg, Dykstra, 2006). They contribute to the emergence of older people's sense of self-need and self-esteem, constant favor. It is best when such relationships are realized during face-to-face meetings, but in case of limited opportunities for such meetings, various means of remote communication (telephone, Internet) can help. Leshchuk (2021) notes that older people get attached quickly, and for many of them, favor becomes a salvation from social maladaptation, which often develops at this age. Mutual favor can also arise in older people's relationships with neighbors. Pikuła (2015) notes such relationships are very often positive. Neighbors of an older adult even replace him/her a family, especially for older men.

Unlike relationships with friends, acquaintances, neighbors, family relationships are often conflicted and can be a source of dissatisfaction and even depression. The basic parameters of friendship in an adult change at the age of about 36-50 years. They differ from youthful friendly relations by reducing the volume and increasing the psychological closeness of people.

Older people who have found an interesting activity and perceive it as socially significant feel less lonely. It can be professional work, social activity, volunteering, mentoring, various hobbies. Through such activities, they communicate with loved ones, different social communities and even with all humanity. Older people have a positive attitude towards the performing various public duties, as such work is of prestigious importance, compensating in some way for the lack of professional activity. Instead, doing professional work, even on a small scale on a volunteer basis, helps older people to meet vital needs and prevent feelings of loneliness (Pikuła, 2015). But any social activity of older adults is important.

A minority of older adults are socially active, according to our researches (Kovalenko, 2015). Such activities are mostly related to community service (participation in rallies, holiday meetings, meetings of the comradesly court, vocational guidance for pupils, organization of charity events, care for sick persons, membership in a street committee, activity in the commission for family and school assistance, education in pedagogical teams etc.).

Religion and faith in God can help reduce the loneliness of older people (Rokach, Orzeck, Neto, 2004). Religion and faith not only provide a connection to other believers, but also help to find consolation in the feeling of connection with a higher power.

Contact with animals also allows older people to fight loneliness (Leschuk, 2021). Taking care of them, they often become attached to them, begin to see them as

members of their family, immersed in the care and interaction with them. Older adults who left their homes during the Russian-Ukrainian war took their pets with them.

Education helps to reduce feelings of loneliness and prevent it in late adulthood. It can take place both formally and informally, both in the institutional dimension and in everyday life situations. Personal development and maintaining a person's active position is the purpose of education of older adults. Education of older adults allows to bring them out of social isolation, to optimize their vital activity, to stimulate intellectual and creative activity through a variety of resources. In terms of combating loneliness and its prevention, education involves the formation of the ability to be alone with yourself; knowledge of ways to overcome loneliness; learning to positively use the situation of loneliness as an opportunity for development and feeling the meaning and joy of life; developing the ability to build relationships with other people; development of interests and preferences; learning the ability to solve problems and overcome life's difficulties. Such activities should begin at an earlier stage of human life (Róžański, 2020).

Universities of the third age are an important means of educating the elderly. Their goal is to involve older people in the system of lifelong learning; their intellectual, mental, social and physical activation; support of physical, psychological and social abilities; creating opportunities for developing their interests, spending free time actively, or meeting new people (Dąbrowska, 2011; Miszczuk, Kobiałka, 2021). Anyone of late adulthood, regardless of their level of education, has access to such universities. Training in them in Ukraine is free: it is funded by the local budget, various organizations, grants.

Various group classes, interest clubs (seniors' clubs) can also be organized for older adults. In Ukraine, in particular, they may exist on the basis of territorial centers of social services. Such classes have a purposeful stabilizing effect on the emotional states and experiences of older adults in order to create psychological comfort for themselves through special means (art, nature, fairy tales, games, communication, laughter, religion, sports, work, computer). Organization of free time of older adults, organization and carrying out of various forms of cultural, physical and social activity are the tasks of these classes and clubs. Visiting them allows an old person to feel less lonely.

### **The task of social policy to overcome loneliness in old age**

Taking into account certain features and factors of loneliness of older people, it is advisable to formulate the tasks of social policy at the national and regional levels to overcome such loneliness:

1. Prohibition of discrimination against older adults in various spheres of life. Informing the society about the features of older adults, their reserves and possibilities, prospects of development at this age. Creating an image of "positive late adulthood".

2. Assisting older people in increasing their social activity both at the family level and at the wider level of society. Creating opportunities for older people to master new social roles and assist them in fulfilling these roles.
3. Creating different platforms for the interaction of older people with the younger generations.
4. Informing older people about their rights and opportunities, helping them in difficult life circumstances.
5. Intensification of educational programs for people of late adulthood, development of the system of universities of the third age, networks of other institutions where old people will be able to learn and communicate, engage in various activities.
6. Promoting the professional employment of older people according to their interests and capabilities. Guaranteeing the right to a fair wage, regardless of age.
7. Teaching older people to plan their lives, including pre-retirement planning, preparation for the new status of a pensioner, which allows him/her to gradually adapt to this status.
8. Psychological help for old people in difficult life extreme situations (loss of relatives, loved ones, situations of violence, etc.).
9. Informing older people about the different possibilities of their interaction with pets, assisting them in caring for animals.
10. Teaching older adults to use mobile phones, computers, the Internet, various programs for distance communication (Skype, WhatsApp, Viber, etc.).
11. Using psychological preventive potential of religion and faith in God in working with older adults.

## Conclusions

An old person's loneliness is his/her emotional state, a subjective experience associated with a lack of close positive emotional connections with other people. It has negative consequences and is dangerous both for the person and for society as a whole. This is especially true of chronic loneliness. Its occurrence is due to various factors, determined by both the circumstances of human life and individual characteristics, behavior. An old person's experience of loneliness can lead to psychological disorders, which greatly complicates the life of the person and his/her social environment. Lonely old people are more depressed, often dissatisfied with their life, unable to meet other vital needs, unable to realize their potential.

Older adults in Ukraine in the pre-COVID times mostly had an average level of loneliness; this indicates that they did not suffer from it, from the lack or excess of contact with others, they felt good. The difference in the levels of loneliness of older adults is due to sex, features of the social situation of the old people and the organization of their lifestyle (conditions and place of residence, education, employment). Feelings of loneliness are stronger in those older adults who have fewer opportunities to establish contact with others or who are not used to doing

so, but seek them at least in certain areas of life (for example, discussing health problems). Having a great need for communication, that is, not satisfying it, older people feel themselves lonelier. Friendly relationships, interesting and socially significant activities, interaction with animals and care for them, religion and faith in God, education, joint activities with other people help to reduce feelings of loneliness in late adulthood. Therefore, society should pay attention to the attitude to older adults and old age in general, create various opportunities for their involvement in social life, promote the development of interpersonal contacts of older adults.

## References

1. Berezina O.O. (2020), *Usamitnennia chy samotnist: osoblyvosti adaptatsii osib piznoi doroslости do zhyttia v umovakh vymushenoї samoizoliatsii* [Solitude or loneliness: features of adaptation of older adults to life in conditions of forced self-isolation]. In *Usamitnennia ta samotnist v zhytti osobystosti: zbirnyk tezy za materialamy kruhloho stoluii* (on-line, April 24, 2020) (pp. 4–7). Kyiv: DP "Informatsiino-analitychne ahentstvo".
2. Dąbrowska K. (2011), *Samotność osób starszych i sposoby jej przeciwdziałania*. „Kwartalnik Naukowy” 2(6), pp. 84–90, <https://stowarzyszeniefidesetratio.pl/Presentations0/2011-2Dobrowska.pdf>
3. de Jong-Gierveld J., van Tilburg T.G., Dykstra P.A. (2006), *Loneliness and social isolation*. In: D. Perlman, A. Vangelisti (Eds.), *The Cambridge handbook of personal relationships* (pp. 485–500). Cambridge University Press.
4. Fees B.S., Martin P., Poon L.W. (1999), *A Model of Loneliness in Older Adults*. „The Journals of Gerontology”, Series B, 54B(4), pp. 231–239.
5. Fierloos I.N., Tan S.S., Williams G., Alhambra-Borrás T., Koppelaar E., Bilajac L., Verma A., Markaki A., Mattace-Raso F., Vasiljev V., Franse C.B., Raat H. (2021), *Socio-demographic characteristics associated with emotional and social loneliness among older adults*. „BMC geriatrics”, 21(1), 114, <https://doi.org/10.1186/s12877-021-02058-4>
6. Fopka-Kowalczyk M. (2018), *Samotność osób starszych i czynniki ją warunkujące*. „Kultura i Edukacja”, 1 (119), pp. 70–80.
7. Fushteї O. (2021), *Соціально-психологічна робота з людьми похилого віку в умовах пандемії COVID-19*. „Ввічливість. Humanitas”, 4, pp. 44–50.
8. Hrubliak V.T., Hrubliak V.V. (2011), *Psychologichni osoblyvosti samotnosti v pokhyloму vitsi* [Psychological features of loneliness in old age]. In: S.D. Maksymenko, L.A. Onufrieva (Eds.), *Problemy suchasnoi psykholohii: zbirnyk naukovykh prats Kamianets-Podilskoho natsionalnoho universytetu imeni Ivana Ohienka, Instytutu psykholohii imeni H. S. Kostiuka NAPN Ukrainy* [Problems of modern psychology: a collection of scientific works of Ivan Ogienko Kamyanskyi National University, Kostyuk Institute of Psychology NAPS of Ukraine], 14 (pp. 144–154). Kamianets-Podilskyi: Aksioma.
9. Kermis M. (1983), *The Psychology of Human Ageing: Theory, Research and Practice*. Boston, MA. Allyn and Bacon.
10. Kovalenko O.H. (2015), *Mizhosobystisne spilkuvannia osib pokhyloho viku: psykholohichni aspekty* [Interpersonal communication of the elderly: psychological aspects]. Kyiv, Ukraine: Instytut obdarovanoi dytyny.



11. Krasnova O.V., Liders A.G. (2002), *Sotsyalnaia psikhologia starosti: uchebnoje posobie dla studentov vysshyyh uchebnyh zavedenij* [Social psychology of old age: a textbook for students of universities]. Moskva: Izdatelskij tsentr «Akademia».
12. Kubicki P., Olcon Kubicka M. (2010), *Osamotnienie osób starszych w Polsce – skala, przejawy oraz sposoby przeciwdziałania zjawisku*. 8. *Studia Humanistyczne AGH*.
13. Leschuk H. (2021), *Samotnist liudei litnoho viku yak sotsialna problema* [Loneliness of the elderly as a social problem]. In *Psykhologichna pidtrymka litnikh osib v period karantynu, Materialy Vseukrainskoi naukovo-praktychnoi konferentsii z mizhnarodnoiu uchastiu* [Psychological support for the elderly during quarantine, Proceedings of the All-Ukrainian scientific-practical conference with international participation] (November 29, 2021), (pp. 155–161). Kyiv: Instytut pedahohichnoi osvity i osvity doroslykh imeni Ivana Ziaziuna NAPN Ukrainy.
14. Luanaigh C.Ó., Lawlor B.A. (2008), *Loneliness and the health of older people*. "International Journal of Geriatric Psychiatry", 23(12), pp. 1213–1221, <https://doi.org/10.1002/gps.2054>
15. Marsillas S., Schoenmakers E. (2022), *Older adults' mentioned practices for coping with loneliness*. „European Journal of Ageing”, pp. 1–10, <https://doi.org/10.1007/s10433-021-00658-y>
16. Martín-María N., Caballero F.F., Lara E., Domènech-Abella J., Haro J.M., Olaya B., Ayuso-Mateos J.L., Miret M (2020), *Effects of transient and chronic loneliness on major depression in older adults: a longitudinal study*. „International Journal of Geriatric Psychiatry”. 36(1), pp. 76–85, <https://doi.org/10.1002/gps.5397>
17. Miszczuk R., Kobiąłka A. (2021), *Aktywność edukacyjna seniorów na przykładzie uniwersytetów trzeciego wieku w województwie świętokrzyskim*. „Edukacja Ustawiczna Dorosłych”, 4, pp. 102–113.
18. Ong A.D., Uchino B.N., Wethington E. (2016), *Loneliness and Health in Older Adults: A Mini-Review and Synthesis*. *Gerontology*, 62, pp. 443–449, <https://doi.org/10.1159/000441651>
19. Peplau L.A. (1985), *Loneliness Research: Basic Concepts and Findings*. In: I.G. Sarason, B.R. Sarason (eds) *Social Support: Theory, Research and Applications*. NATO ASI Series, vol 24. Springer, Dordrecht, [https://doi.org/10.1007/978-94-009-5115-0\\_15](https://doi.org/10.1007/978-94-009-5115-0_15)
20. Piķuła N.G. (2015), *Znaczenie relacji społecznych w pokonywaniu samotności osób starszych*. „Edukacja Ustawiczna Dorosłych”, 90(3), pp. 39–46.
21. Rokach A., Orzeck T., Neto F. (2004), *Coping with loneliness in old age: a cross-cultural comparison*. "Current Psychology", 23(2), pp. 124–137, <https://doi.org/10.1007/BF02903073>
22. Rózański T. (2020), *Samotność i osamotnienie osób starszych jako problem społeczny i edukacyjny*. „Roczniki Pedagogiczne”, 4, pp. 75–90, <https://doi.org/10.18290/rped20124-6>
23. Świtoń A., Wnuk A. (2015), *Samotność w obliczu niesprawności osób starszych*. „Geriatrics”, 9, pp. 243–249, [https://www.akademiamedycyny.pl/wp-content/uploads/2016/05/201504\\_Geriatrics\\_005.pdf](https://www.akademiamedycyny.pl/wp-content/uploads/2016/05/201504_Geriatrics_005.pdf)

**prof. dr. hab. Olena Kovalenko**

Pedagogical University of Krakow, Poland

Doctor of Psychological Sciences in age and pedagogical psychology (2016, Ukraine)

Professor of Psychology (2019, Ukraine)