

Original Research Article

Levels of Loneliness among Elderly Indwelling-Community

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Abstract: The lives of the elderly are constantly changing due to factors including retirement, loss of spouse, chronic illnesses that prevent them from being active, living alone, and a lack of social connection. As a result, loneliness can be a problem for the elderly. The study aimed to analyse the levels of loneliness among community-dwelling elderly people. The study employed a cross-sectional design. A total sampling technique was used to collect the sample. The inclusion criteria of the study included being at least 60 years old, willing to participate, free of dementia or schizophrenia, and without any physical restrictions. To assess respondents' levels of loneliness, the University of California, Los Angeles (UCLA) Loneliness Scale was employed. There are 151 older people who participated in this study. According to the findings, just 72% of the elderly community's residents reported feeling lonely. The fact that the average age of the respondents was 68 years old and that the majority were female, employed, living with family, and actively participating in social activities is likely what contributed to the low level of loneliness. Living circumstances and family support have an impact on how lonely elderly people are. The family plays a significant role in providing care for the elderly in accordance with their developmental stages. Community nurses could activate elderly people in social activities and provide elderly schooling programs to prevent loneliness among older residents of the community.

Keywords: Elderly, Indwelling-Community, Loneliness.

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INTRODUCTION

Ageing populations are rising worldwide. Over 60-year-olds make up over 703 million of the population, an increase of 3% since 1990 [1]. By 2050, it is anticipated that this number would have grown to 1.5 billion (16%) (UN, 2019). East and Southeast Asia saw the most increase, from 261 million in 2019 to 573 million in 2050 (UN, 2019). There are about 29.3 million elderly people living in Indonesia at 2021 [2]. With an old population of approximately 14.17%, Central Java province ranks third among Indonesia's provinces with the greatest elderly population [2].

The elderly mark the culmination of a person's developmental stages [3]. Their capacity will deteriorate physically and mentally from a physiological perspective [4]. The psychological issues that older people experience is brought on by changes in their lives, such as retirement, unemployment, moving residences, becoming widows or widowers, suffering from chronic illnesses that make it difficult to carry out activities, changing self-concept and self-image, and losing relationships with family, friends,

and relatives. The elderly will also go through other life events, such as living alone without their families and lacking in social engagement. These encounters may make older people feel lonely [5].

Loneliness is an uncomfortable state that is represented by loneliness as a result of an imbalance between expectations and the reality of life [6]. Loneliness is a sensation that can be caused by oneself, other people, or the environment. It has a negative impact on one's mental health, especially in older people [7]. While 19.3% of Indonesian seniors, who are aged 70 to 80 or older, report feeling lonely on a regular basis [8]. Elderly people who experience loneliness will also feel useless, less self-assured, dependant, disturbed, and feel lost [9]. The study aimed to examine the prevalence of loneliness among elderly who indwelling community.

MATERIAL AND METHODS

The study applied descriptive analytical method with a cross-sectional approach. The study investigated the demographic characteristics of the respondents and the levels of loneliness among the elderly in Bugangan

Village Central Java Indonesia. Total sampling technique was used to gather the respondents. The inclusion criteria included a participant who was at least 60 years old, could converse, was willing to participate in the study, and was listed as a resident of Bugangan Village. Elderly people with dementia, disabling mental illness, or physical dependency were excluded. The University of California, Los Angeles (UCLA) Loneliness Scale Indonesian version was used to measure levels of loneliness. There are 20 questions on the UCLA Loneliness Scale. The UCLA Loneliness Scale's Indonesian version has a reliability score of 0.72. Percentage, mean, and standard deviation were the results of the data analysis. The ethical clearance of the study was granted from the ethical committee of University of Muhammadiyah Pekajangan Pekalongan (No. 219/PT/LPPM/III/2022).

RESULTS

151 elderly people participated in this study. The respondent's age was 69 years old on average (SD = 5.54). Female respondents make up 57.6% of the total sample. 78 respondents identified as widows or widowers. A large percentage of respondents (65.6%) lack any formal education. There were 83 responders who were employed. The majority of respondents are farmers, traders, construction workers, business owners, and entrepreneurs. Almost all the respondents (90.1%) live with their extended families. 126 respondents in total are still involved in community activities. The respondents' characteristics are shown in **table 1**. The average UCLA score is 36.3 (SD = 8.7). According to the classification, 109 respondents (72%) reported having low levels of loneliness.

Tabel-1 Characteristics of the Respondent

Characteristic	n	%
Gender:		
Male	64	42,2%
Female	87	57,6%
Marital Status:		
Married	73	48,3%
Widow/widower	78	51,7%
Education Background:		
None	99	65,6%
Elementary School	51	33,8%
Junior High School	1	0,7%
Working Status:		
Worker	83	55%
Jobless	68	45%
Living Status:		
Live Alone	4	2,6%
With Spouse	11	7,3%
Extended family	136	90,1%
Social Activities:		
Active	126	83,4%
Passive	25	16,6%

DISCUSSION

According to the findings, one-third of the elderly people of Bugangan Village fell into the low loneliness category. The fact that the respondents were all under 80 years old may have contributed to the low levels of loneliness. Rocha [7] believes that loneliness will soon become a significant problem for older persons above the age of 80. Health status is influenced by a number of variables that are connected to care and treatment. Every person, from teenagers to seniors, will feel loneliness at some point in their lives. Each stage of life brings with it a different sensation of loneliness. The aging population will have psychological issues as a result of changes in their lives, such as retirement, unemployment, relocation, changes in marital status, chronic illness, changes in self-concept and self-image, and lost touch with friends, family, and relatives. The

elderly will also go through other life events, such as living alone without their families and lacking in social engagement. The elderly will easily experience loneliness under these circumstances [7]. The elderly do, however, have a decent level of well-being when they can accept their circumstances with gratitude because this leads to an increase in happiness for social and life satisfaction [3].

The levels of loneliness may vary by gender [10]. According to the findings, older female respondents were more likely than older male respondents to report feeling lonely on all scales. Male and female ways of expressing their emotions differ culturally in Indonesia. The elderly persons were better able to manage how they expressed their loneliness. As a result, people are unable to tell if they are lonely. Females, on the other

hand, display their feelings of loneliness more visibly [11]. In actuality, females experience emotional loneliness more than males do social loneliness [10].

According to Pyle & Evans [12], economic considerations, such as employment position, can also have an impact on low feelings of loneliness. The majority of the study's respondents are employed. They are an informal employee who works in several industries. Elderly people who are physically active, socially active, productive, and financially independent do not have time to be lonely [12,7]. They engage with others, make their own money, feel independent, and enjoy life by keeping themselves occupied with more beneficial activities. They are more likely to feel lonely than elderly people without jobs. In the meantime, practically all of the respondents reside with their families or extended families due to societal circumstances. Their moderate levels of loneliness are also impacted by this condition [2].

According to BPS [2], social assistance is the major factor that can combat loneliness, therefore older people who receive social support have a low level of loneliness. Social support can take the form of giving elderly people the chance to interact with others, providing them with enough social resources, and placing them close to others so they feel a sense of belonging [2]. According to Hidayatulloh [13], the likelihood that an elderly person may experience loneliness decreases the more familial assistance they receive. According to O'Silleabháin [14], there is no proof that loneliness has an effect on the cause of death among older people who do not live alone. The elderly who reside with their relatives permit the family to care for them by showing them love and attention, giving them the impression that there are still many people out there who are concerned about them.

Up to 89 respondents participate regularly in social activities such POSYANDU, exercise, recitation (pengajian), and community service (kerja bhakti). Social interactions can have an impact on low levels of loneliness [15]. It implies that elderly who engage in healthy social contacts are more likely to feel not loneliness. Good social interactions with other individuals could help the elderly feel a part of the group and enable them to share experiences and creative endeavors [15].

In this study, there was little evidence of loneliness among the elderly. According to Erik Erikson's psychosocial theory, overcoming challenges that arise in every stage of life successfully or unsuccessfully determines how a person's personality develops [16]. A person will be more appreciative of all they have, like in Javanese culture, which will lessen disappointment with everything that occurs. The elderly who have a strong sense of appreciation have higher levels of well-being due to higher levels of happiness, life satisfaction,

and social desires [3]. The elderly experience good health and an improvement in their quality of life when their levels of loneliness are low [4].

According to BPS [2], social support is the major component that helps combat loneliness, therefore older people who receive social assistance have low levels of loneliness. Social support could come in the form of chances for elderly to interact with others, sufficient social resources, and proximity to others so that seniors have a sense of belonging in their society [2]. According to Hidayatulloh [13], the likelihood that an elderly person may experience loneliness decreases the more familial assistance they receive. The study suggests that loneliness has little effect on the cause of mortality among older people who do not live alone [14]. The elderly who reside with their relatives permit the family to care for them by showing them love and attention, giving them the impression that there are still many people out there who are concerned about them.

CONCLUSION

The study shows that loneliness is not a problem among senior citizens who live in communities. Family social support, employment, and participation in social activities could influence loneliness levels. These findings may be taken into account by community nurses when developing nursing interventions for the treatment of elderly loneliness. Empowering the elderly is a crucial strategy to improve their quality of life and general wellbeing.

REFERENCES

1. United Nations. Department of Economic and Social Affairs. (2019). *World Population Aging 2019*.
2. Badan Pusat Statistik [BPS]. (2020). *Statistika Penduduk Lanjut Usia* (Y. R. dan B. S. Susilo, Dwi, Raden Sinang (ed.)). Jakarta: Badan Pusat Statistika.
3. Novitasari, R. dan D. A. (2019). Kebersyukuran Dan Kesepian Pada Lansia Yang Menjadi Janda/ Duda. *Jurnal Ilmiah Psikologi Ilmiah*, 7(2), 146–157. <https://scholar.archive.org/work/non6z4be6fgkjcjhfwkwed5ypa/access/wayback/http://ejournal.umm.ac.id/index.php/jipt/article/download/8951/pdf>
4. Ningsih, R. W. (2020). Hubungan Tingkat Kesepian dengan Kualitas Hidup pada Lansia di Posyandu Lansia Dusun Karet Yogyakarta. *Jurnal Keperawatan*, 12(2), 80–87.
5. Padila. (2017). *Buku Ajar Keperawatan Gerontik*. Yogyakarta: Nuha Medika.
6. Setyowati, S. (2021). Spiritualitas berhubungan dengan kesepian pada lanjut usia. *Jurnal Ilmu Keperawatan Jiwa*, 4(1), 67–78.
7. Rocha-Vieira, C., Oliveira, G., Couto, L., & Santos, P. (2019). Impact of loneliness in the elderly in health care: a cross-sectional study

- in an urban region of Portugal. *Family Medicine & Primary Care Review*, 21(2), 138–143. <https://doi.org/10.5114/fmPCR.2019.84550>
8. Peltzer, K. and S. P. (2019). Loneliness correlates and associations with health variables in the general population in Indonesia. *International Journal of Mental Health Systems*, 13(1), 1–11. <https://doi.org/10.1186/s13033-019-0281-z>
 9. Suardiman, S. P. (2016). *Psikologi Usia Lanjut*. Yogyakarta: Gajah Mada University Press.
 10. Rizki, F. (2020). *Perbedaan Kesepian Pada Lansia Berdasarkan Jenis Kelamin di Kota Banda Aceh*. Universitas Islam Negeri Ar-Raniry Banda Aceh.
 11. Fitriani, E. dkk. (2021). Faktor- faktor Yang Berhubungan Dengan Tingkat Kesepian Pada lansia. *Nusantara Hasana Journal*, 1(5), 97–104.
 12. Pyle, E., & Evans, D. (2018). *Loneliness - What characteristics and circumstances are associated with feeling lonely?* 1–19.
 13. Hidayatulloh, A. (2018). *Hubungan Dukungan Keluarga Dengan Tingkat Kesepian Pada Lansia di Dusun Bulu Jogotirto Berbah Sleman*. Fakultas Ilmu Kesehatan Universitas 'Aisyiah Yogyakarta.
 14. O'Suilleabháin, P. S., Gallagher, S., & Steptoe, A. (2019). Loneliness, Living Alone, and All-Cause Mortality: The Role of Emotional and Social Loneliness in the Elderly During 19 Years of Follow-Up. *Psychosomatic Medicine*, 81(6), 521–526. <https://doi.org/10.1097/PSY.0000000000000710>
 15. Nuraini, Farida dan Halis Dyah Kusuma H., W. R. (2018). Hubungan Interaksi Sosial Dengan Kesepian Pada Lansia di Kelurahan Tlogomas Kota Malang. *Nursing News*, 3(1), 611.
 16. Wijayaningsih, K. S. (2014). *Psikologi Keperawatan*. Jakarta Timur: Trans Info Media.