

# Loneliness: a new phenomenon in our modern-day society?



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At some point in our lives, most of us will experience periods of loneliness, evidenced by a withdrawal from family, friends and the wider society. Active involvement and participation in different social settings are known to have health and wellbeing benefits yet, globally, there are growing concerns about the rate and consequences of loneliness, especially among the older generation. In recent years, demographic shifts suggest that the number of people experiencing loneliness are likely to increase in line with an ageing population and those who live alone, as both are at higher risk of social isolation.

It's been stated that loneliness is a difficult concept. If it's simply an emotion we experience, it's often hidden. If it's an 'epidemic', as claimed in an award-winning essay in the *Lancet*, then it is a societal problem which successive governments have failed to grapple with (Kar-Purkayastha, 2010).

## LONELINESS DURING THE CURRENT CORONAVIRUS CRISIS

In spring 2020, at the emergence of COVID-19 crisis, the UK government stated that people over the age of 70 and clinically vulnerable individuals, are considered a high-risk group and should, therefore, self-isolate for circa 12 weeks. This was confirmed by a letter and/or phone call from the NHS.

However, many people, who live alone and are reliant on their families and friends for social contact in their everyday lives, reacted to this with mixed emotions. Some developed anxieties and started to experience a deep sense of loneliness when asked to instantaneously withdrawn from their social groups or other establishments. I live alone, and my personal circumstances suddenly changed from being fully independent, travelling and working, to having to adapt to being wholly reliant and dependent on others for even my most basic daily living needs. Still, I am fortunate to have a good circle of friends and since early March I have tried to remain active and positive via email and telephone calls with loved ones, friends and colleagues.

During those telephone or virtual conversations, it has been fascinating to listen to my colleagues and friends' descriptions of today's lockdown society as

we now come to know it. It's been interesting to gain insights into how my friends and colleagues adapted to the changes, both professionally and socially, and the effect these had on their lifestyle. Especially, their accounts about how their elderly parents and older friends experienced their loss of connection to others and the disappearance of everyday routines. Like so many in this situation, I too miss the interaction with other humans, such as meeting people through everyday life, travelling, spending time with loved ones, and enjoying meals and a glass of wine with my friends and colleagues.

## IT IS DIFFICULT TO ADMIT TO

Feeling lonely is something not many of us do admit to, fearing it could be interpreted as a sign of weakness, but since the enforced social isolation, more people have started to talk more openly about it. I have been made aware of the impact of loneliness by many seniors who described to me the emotional effects of being isolated and being suddenly removed from their social groups, friends and loved ones, which can cause deep negative emotions that can lead to depression. This feeling has been exacerbated by uncertainty over the future, fear, apprehension, re-organisation of family communication, finding meaningful alternatives for the collection of shopping, prescriptions and having to become dependent on friends and one's local community.

Being lonely influences our lives—I personally experienced the different stages of bereavement and associated solitude of not sharing everyday situations with a loved one. It has made me realise the importance of reflection when coming to terms with emotional loneliness. With experience and over a period of time, I have been able to cogitate on my emotions and general status of self-worth and wellbeing these past two years and comprehend that loneliness is a very personal journey, which one can experience even when surrounded by others in social gatherings. This is not synonymous with chosen isolation or solitude but caused by the loss of my partner as a social companion whilst in other people's company. Now contentment depends on my levels of social friendships, professional networking,

## CONFERENCE UPDATE

In line with Government guidance, the 2020 annual Leg Club conference has been cancelled and will instead take place on September 29 and 30 2021. For more information, visit our website: <https://www.legclub.org/>

physical comfort zone and satisfaction with my own social environment. Yet experiencing extreme social solitude made me aware of how quickly one can withdraw from social groups and society, experiencing a loss of confidence in being with others. Over time, reflection has enabled me to soothe painful emotions and to accept coming home alone as a healthy part of the grieving process. This acceptance of being alone and remote has enabled me to reconnect with my social and professional network in a positive, enjoyable manner, cherishing the wonderful tapestry of companionship.

### GOVERNMENTAL STRATEGIES

In 2015, Jo Cox, the politician who was fatally stabbed in 2016, set up a commission to investigate ways to reduce loneliness. A final report, which included several recommendations, was published in 2017, after MPs worked together with several charities. These recommendations were followed by the then Prime Minister, Theresa May, who launched the first cross-Government strategy to tackle loneliness.

In an effort to address the health risks of loneliness and reduce the effects of social isolation, 2018 saw the launch of a UK loneliness strategy and the first Minister for Loneliness appointed. It is important to acknowledge and recognise that loneliness is experienced by all age groups, especially today's young adults, and that gaps remain in our understanding of loneliness and its effect on an individual's health and wellbeing.

Although well past the 'flush of youth' and having experienced a deep sense of loneliness on occasions during the pandemic, I still have hopes of a productive future despite social distancing having become the norm. As individuals, we all have a natural, psychological need to socially belong, enabling us to have a positive sense of self-worth and help us cope with challenges in our personal lives. For me, being tactile, along with non-verbal communication and facial expressions, are important and greatly missed whilst social distancing. Most of us appreciate and value social interaction, which for many is achieved through touch, creativity, intellectual stimuli, debates, laughter, support, genuine friendships and love.

### EASING OF THE RESTRICTIONS

As the government introduces the easing of some restrictions, enabling some semblance of 'normal' life, it is vital is to remain positive and optimistic. However, many elders and those within the 'at-risk' group may find their self-confidence and motivation to re-integrate back into the public domain challenged. Fear of the unknown of what our post-lockdown life might look like will find many struggling after the enforced isolation over the next few weeks.

Whilst acknowledging that technology has helped us connect during this pandemic and that the virtual world may become the future of communication for many, it can never replace the human element of social interaction or provide the solution to combatting loneliness. A proffered arm, touch and hand-holding is for many still the way to overcome loneliness, offering emotional closeness and companionship.

### AND IN OTHER LEG CLUB NEWS

Due to the Government regulations, many Leg Clubs have been suspended. However, the ones who have elected to remain operational had to change their open-door policy to adhere to NHS directives during the COVID-19 crisis. Leg Club teams had to radically adapt to be operational and to minimise risks to both members and staff, i.e. by wearing personal protective equipment, taking temperatures at the door and making sure risk assessments are in place. In order to maintain social distancing, they no longer operate a drop-in service, instead, members are now given an appointment time.

The majority of teams have promoted the ethos of supportive information, which has been adopted with success by circa 50% of their members with support from their family. The volunteers and clinical teams have organised regular phone calls and some teams produced supportive information leaflets for new wounds, with the aim to prevent new wounds from developing into ulcers by prompt treatment.

All practice nurse/integrated teams and volunteers have been made aware of the issue of loneliness and social isolation due to members missing their weekly social contact and camaraderie and are working on ways to combat this.



### REFERENCES

Kar-Purkayastha I (2010) An Epidemic of Loneliness. *Lancet* 376(9758):2114–5, [https://doi.org/10.1016/S0140-6736\(10\)62190-3](https://doi.org/10.1016/S0140-6736(10)62190-3)

### SUPPORT US

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