

# The Experience of Loneliness among Ageing Adults Residing in Jaipur City

**\*Pragya Sharma and Dr. Shubha Dube\*\***

\* Research Scholar, Department of Home Science, University of Rajasthan, Jaipur.

\*\*Associate Professor, Department of Home Science, University of Rajasthan, Jaipur.

## ABSTRACT

Loneliness has been described as “the subjective, unwelcome feeling of lack or loss of companionship”. Loneliness can be considered as a biggest enemy of ageing population. Objectives: The aim of the study was to investigate the feeling of loneliness in ageing adults. Material and method: The study was carried out on 80 ageing adults (40 men and 40 women) in the age range of 60 to 75 years belonging to Jaipur district. The Measure was used (a) Basic profile (b) Self-made loneliness scale. Results: The result reflected that higher level of loneliness was found among ageing women as compared to the ageing men.

**Key words:** Ageing Adults, Loneliness, and Companionship.

## INTRODUCTION

Loneliness has been described as “the subjective, unwelcome feeling of lack or loss of companionship” (Cattan, et al., 2003). Loneliness has been defined as a personal subjective feeling of a lack of satisfying human relationships, and for this reason, loneliness is a negative feeling that impairs the quality of life of ageing adults sometimes causing depression.

Loneliness is often confused with social engagement, with the belief that getting older people more involved in their communities or building up social networks will alleviate the problem. However, people who are fully engaged with their communities and have a wide social network can also feel lonely, while people who live on their own in isolation from society may never feel lonely. The quality of social

relationships plays an important role in whether or not people suffer from loneliness, as does their own life experience (Hole, 2011).

Factors that can contribute to loneliness include living alone; advancing age; widowhood; low levels of education or income; poor health; and infrequent contact with family (Drennan, et al., 2008). Interventions targeting depression, perceived stress, living arrangements and neuroticism can increase the effect; social support has on emotional loneliness. Building up social support itself can help to combat social loneliness (Schnittger, et al., 2011).

## OBJECTIVE

The aim of the study was to investigate the feeling of loneliness in ageing adults.

## PARTICIPANTS

The study was carried out on 80 ageing adults (40 men and 40 women), in the age range of 60-75 years belonging to Jaipur district.

## MEASURES

The measure used were

- (a) Basic Profile Inventory – This brief inventory was prepared by the investigator to get information about basic profile of the ageing adults.
- (b) Loneliness scale (self made) – This measure was developed by the investigator.

## STATISTICAL ANALYSIS

The data was collected and tabulated on a data- sheet on excel. The initial calculations of the data were done then it was statistically analyzed.

**Table 1: Loneliness among Ageing Men and Women**

Loneliness	Men		Women	
	Frequency	Percentage	Frequency	Percentage
Low	19	47.5%	6	15%
Moderate	14	35%	13	32.5%
High	7	17.5%	21	52.5%

Table 1 depicts that low (47.5%) and moderate (35%) loneliness were found in ageing men as compared to the ageing women (15%), (32.5%) and high loneliness was found in ageing women (52.5%) as compared to the men (17.5%).

So it can be concluded that ageing women living with lower health status, poor quality of life and lack of companionship were more likely to experience high loneliness as compared to ageing men.

A study of people aged 60 conducted in Lucknow in 2013 found that loneliness is a particularly relevant issue in relation to elderly widows, whose rates of mortality illness and depression exceed those of their married counterparts. Elderly women report more loneliness than male. Gender, social and cultural factors influence the experience of loneliness in elderly women (**Bhawana Singh, & Kiran, 2013**).

A 2005 Finnish study of over 75s found that loneliness was associated with living alone or in a residential home, advancing age, widowhood, a low level of education and a low level of income. In addition, poor health status, poor functional status, poor vision and loss of hearing increased the prevalence of loneliness. The most common subjective causes for loneliness were found to be illnesses, death of a spouse and lack of friends (**Savikko et al., 2005**)

## CONCLUSION

Loneliness is a hidden killer for the ageing adult's life. Loneliness is a negative feeling that impairs the quality of life of ageing adults sometimes causing depression. The data of the present study suggests that gender wise differences occur on loneliness of an individual. The results reflected that higher level of loneliness was found among ageing women as compared to the ageing men.

## REFERENCES

1. Bhawana Singh., & Kiran U.V. (2013). *International Journal of Humanities and Social Science Invention ISSN (Online): 2319 –7722, ISSN (Print)2319–7714 PP. 10-14.*
2. Cattan, M., Newell, C., Bond, J., & White, M. (2003). Alleviating social isolation and loneliness among older people. *International Journal of Mental Health Promotion* , Vol. 5, No. 3, pp. 20–30.
3. Drennan, J., Treacy, M., Butler, M., Byrne, A., Fealy, G., Frazer, K. (2008). The experience of social and emotional loneliness among older people in Ireland. *Ageing and Society*, 28 , 1113-1132.
4. Hole, K. (2011). *Loneliness compendium: Examples from research and practice*. York: Joseph Rowntree Foundation.
5. Savikko, N., Routasalo, P., Tilvis, R., Strandberg, T., & Pitkala, K. (2005). Predictors and subjective causes of loneliness in an aged population. *Gerontology and Geriatrics*. 41, 3, 223–233.
6. Schnittger, R., Wherton, J., Prendergast, D., & Lawlor, B. (2011). Risk factors and mediating pathways of loneliness. *Ageing & Mental Health*.

