

The Health Perils of Aging: Lonely and Sick

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By Matt Perry

The grim effects of smoking, drinking, and poor eating are commonly cited by doctors as appalling and expensive health scourges. Yet for aging Californians, an often hidden health plague can be just as deadly: loneliness.

Social isolation and its common offspring – loneliness – became a political hot potato when California recently cut back on its adult day health care program, disqualifying 20% of the state's older and disabled citizens from its attendance rolls. Families who depended on the centers for medical supervision and social interaction suddenly had to scramble to find new programs to care for these relatives.

For seniors with or without families, this often meant more time home alone.

"They're just going to go home, watch TV and decline," predicted Katya Hope, acting director of the Golden State Adult Day Health Care Center in San Francisco's Tenderloin district, of the approximately 7,000 clients cut from the state program.

Research linking social isolation to poor health is abundant.

"It's as large a risk factor for mortality as cigarette smoking," says Laura Carstensen, director of the Stanford Center on Longevity.

Loneliness can increase depression, neuroses, pessimism, alcoholism, and suicidal thoughts. It can also disrupt sleep and reduce self-esteem.

Its physical effects are equally disastrous. It can increase blood pressure, limit the body's ability to fight off illness, and has been linked to higher death rates. Social isolation can increase obesity and speed the progression of Alzheimer's disease.

From a public health perspective, the most damning effects of social isolation are that it prevents older adults from living independently and exercising.

Long-term, all of these factors can cost the state money in chronic disease management and skilled nursing dollars.

Because funding for programs – like adult day health care – can end abruptly, creative local initiatives to address social isolation dot the state.

Some of these programs use the phone to reach seniors who are shut-ins or lack mobility.

The Senior Center Without Walls, based in Oakland, holds nearly 70 free classes a week for isolated seniors who call a central number to join a telephone classroom.

Classes include health information, poetry readings, brain games, cooking, gardening, and a popular travel club.

Director Terry Englehart, who started the program in 2004 with six women to tell jokes, said last fiscal year the center had 667 participants.

Many have lost their spouses or confidantes.

"They have found a community they belong to," she says. "They have something to look forward to. They have friends."

Every day of the year, the center hosts a 9 a.m. "Gratitude" call.

On one day, there are 15 older adults on the long-distance teleconference. Some are chronically ill. Although they have never met in person, the sense of community, friendship – even love – is palpable.

They give thanks for phone calls from children, medicine reminders, electricity, reality TV, museums, casinos, dogs, cats, fog, sleep, and blooming spring flowers.

"I'm just very grateful that I went for a walk this morning and they weren't narrow hallways," said one man recently discharged from the hospital.

In Northern California, volunteers at the Eskaton senior living community's Telephone Reassurance call 550 older adults in a three-county area in and around Sacramento.

Callers socialize with clients, check on their health, or remind them to take medicines – even to eat and drink. They can also set up home visits or suggest social services, including financial advice.

"A lot of the folks we call live totally on their own," says Terri Becker, director of the telephone reassurance program, which is one of many around the state. Becker says many are women who have outlived their husbands. Others live in poor neighborhoods, are financially destitute, or suffer from dementia. All crave personal contact.

Becker says the phone calls provide a sense of security in a confused world.

"Their anxiety goes way down," she says. "Medicines can only help so much."

Indeed, some experts decry the modern medical model that depends so heavily on pharmaceutical drugs.

Walking outside with a neighbor does "more good than all the friggin' pills in the pharmacy," says Dr. Walter Bortz, a "robust aging" expert and author of the book "We Live Too Short and Die Too Long." Bortz currently teaches the Stanford course "Exploring the Human Potential."

Former Harvard University president Derek Bok in his book "The Politics of Happiness" writes that good health and happiness are clearly intertwined. Yet Bok says that a clean bill of health from a physician is only "roughly correlated" with happiness.

The leading factor in being healthy and happy according to Bok: social connections.

A 2010 study by AARP of 3,000 people 45 and over found a whopping 35% "chronically lonely" – up significantly from 20% a decade earlier. Surprisingly, the loneliest age groups were in their 40s and 50s.

Peter Szutu, CEO of the Oakland's Center for Elders' Independence, says that older adults bounce back from sickness and stress with four factors: a community they belong to, meaningful activity, hope, and a confidante.

Yet in aging California, social isolation is expected to grow right with its population.

By 2030, an estimated one in five Californians will be 60 and over, says Mariko Yamada, chair of the state Assembly's Aging and Long Term Care committee.

Yamada says a revolution in aging services is needed to survive a future often termed "the silver tsunami."

By contrast, she says fellow legislators have oversimplified a complex issue.

"There's a fundamental flaw in the way we look at services in general," says Yamada, who has worked in social services for 38 years. "We try to define them as either social or medical... It's really both."

One program that blends good health and social interaction is offered in San Diego county, where the Sharp Rees-Stealy Medical Group conducts six-week chronic disease management classes for patients.

