

SOCIAL ISOLATION: MYTHS VS. REALITIES AMONG ADULTS AGE 40 AND OLDER

July 2018



Objectives and Methodology

Objectives

- To understand and explore mid-life and older Americans' knowledge of the risk factors of social isolation.

Methodology:

- **Mode:** Online survey of 1,300 adults age 40 and older by Toluna USA, Inc.
- **Fielding Dates:** June 14-24, 2018
- **Sample:** The sample was drawn from AARP's online panel of Americans. Respondents were screened for age. Quotas were set on age by decade, region and Hispanic/Latino ethnicity. An oversample of 300 Hispanic/Latino respondents was included.
- **Weighting:** The data are weighted by gender, race, age, Hispanic ethnicity, marital status, census division, age, and income to benchmarks from the March 2018 Current Population Survey (CPS) for persons age 40 and older. A secondary weight for the Hispanic/Latino oversample was created using March 2018 Current Population Survey (CPS). The oversample data were weighted by gender, age, marital status, census division, age, and income to be representative of the Hispanic/Latino population. Raked weights are estimated using Random Iterative Method (RIM) weighting.



Key Findings

Many adults age 40+ are **aware of the health dangers of social isolation, but don't feel personally at risk.**

A social isolation quiz reveals that **many myths still persist.**

- For example, just **28% of respondents know that the health risks of prolonged social isolation are equivalent to smoking 15 cigarettes a day.**
- **Two-thirds mistakenly believe (or are not sure) that social isolation is usually brought on by a single event.**

Health issues are seen by mid-life and older adults as a major contributor to social isolation, yet few adults age 40 and older say that **a medical practitioner has ever asked them about social isolation** during an exam.

Living alone and lack of community features such as health services and community recreation areas are also seen as contributing to social isolation.



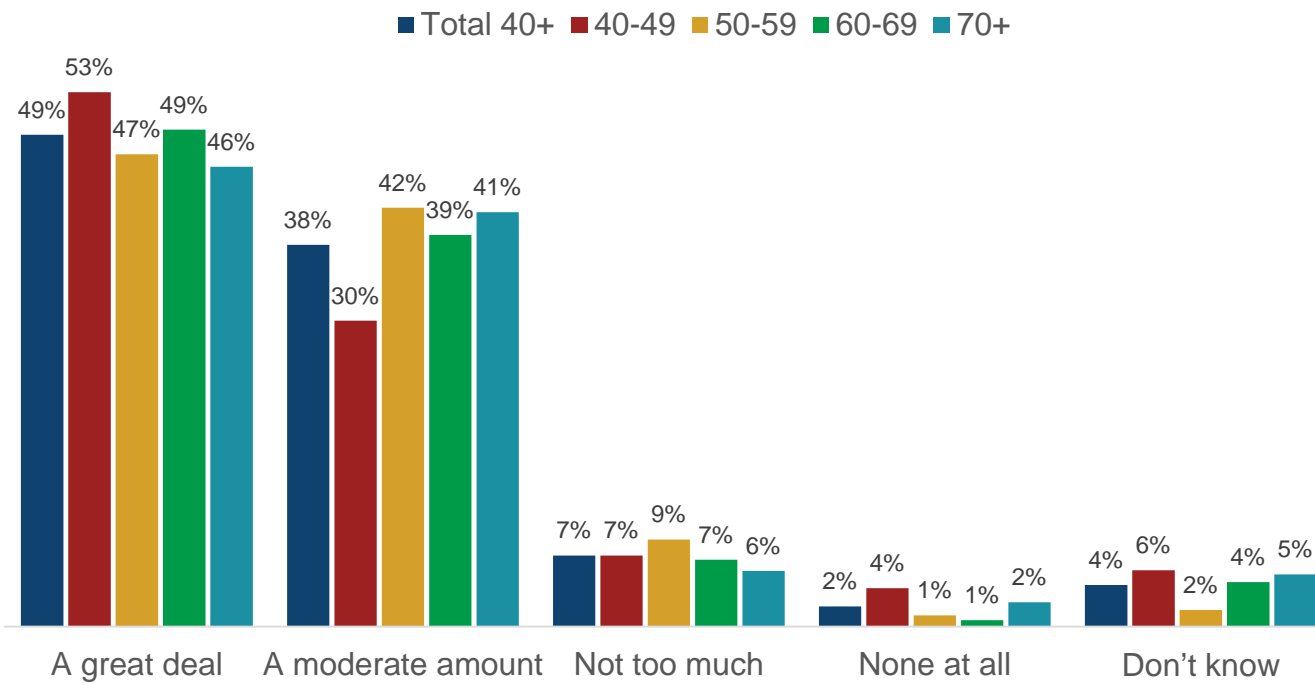


DETAILED FINDINGS

Most Adults Age 40 and Older Are Aware That Social Isolation Has Serious Health Consequences

Most adults age 40 and older are aware of the effects of social isolation on physical health, with 87% believing it to have a great or moderate effect.

Effect of Social Isolation on a Person's Physical Health by Age

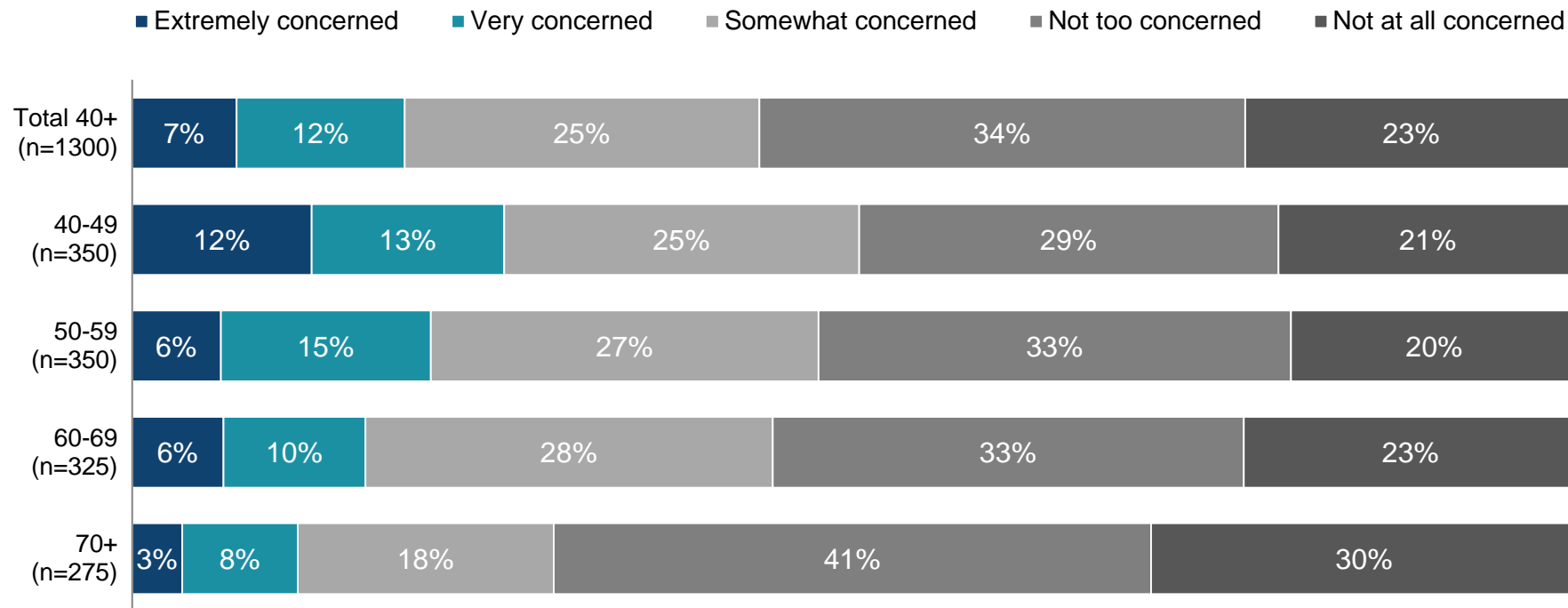


CQ2 - How much of an effect do you think social isolation can have on a person's physical health? Base: All

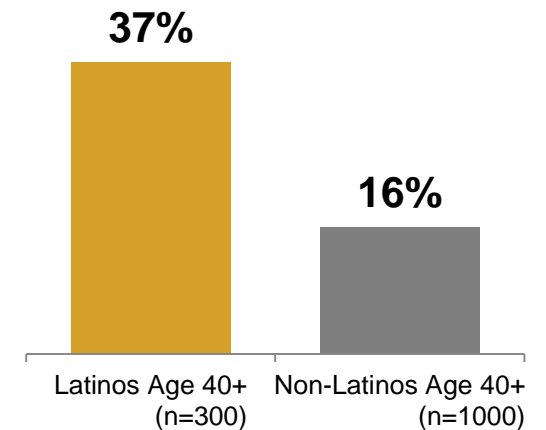
But Few Believe They Will Be Personally Affected by Social Isolation

Concern about social isolation is highest among adults age 40-49 (26% extremely/very concerned) and declines with age (just 11% for adults 70 or older). Latinos are significantly more likely to be concerned about social isolation than non-Latinos (37% vs. 16%).

Concern About Becoming Socially Isolated with Age



Extremely/Very Concerned

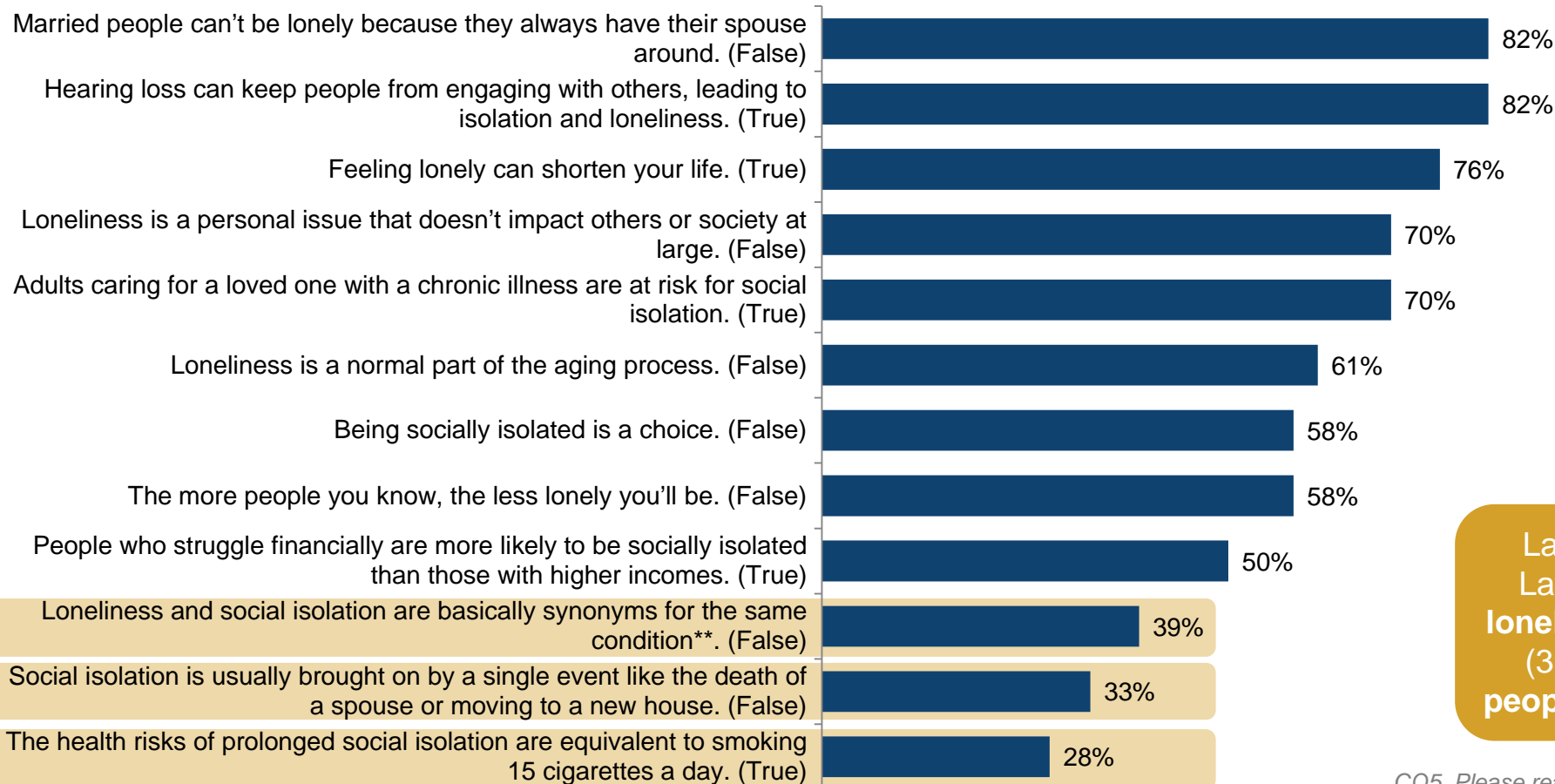


CQ1 - How concerned are you about becoming socially isolated as you age? Base: All

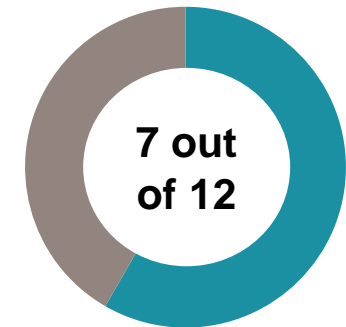
Social Isolation Quiz Reveals Many Myths Still Persist

Percentage Who Answered True/False Question Correctly

(Correct Answer in Parentheses)



Average Number of Questions Correct



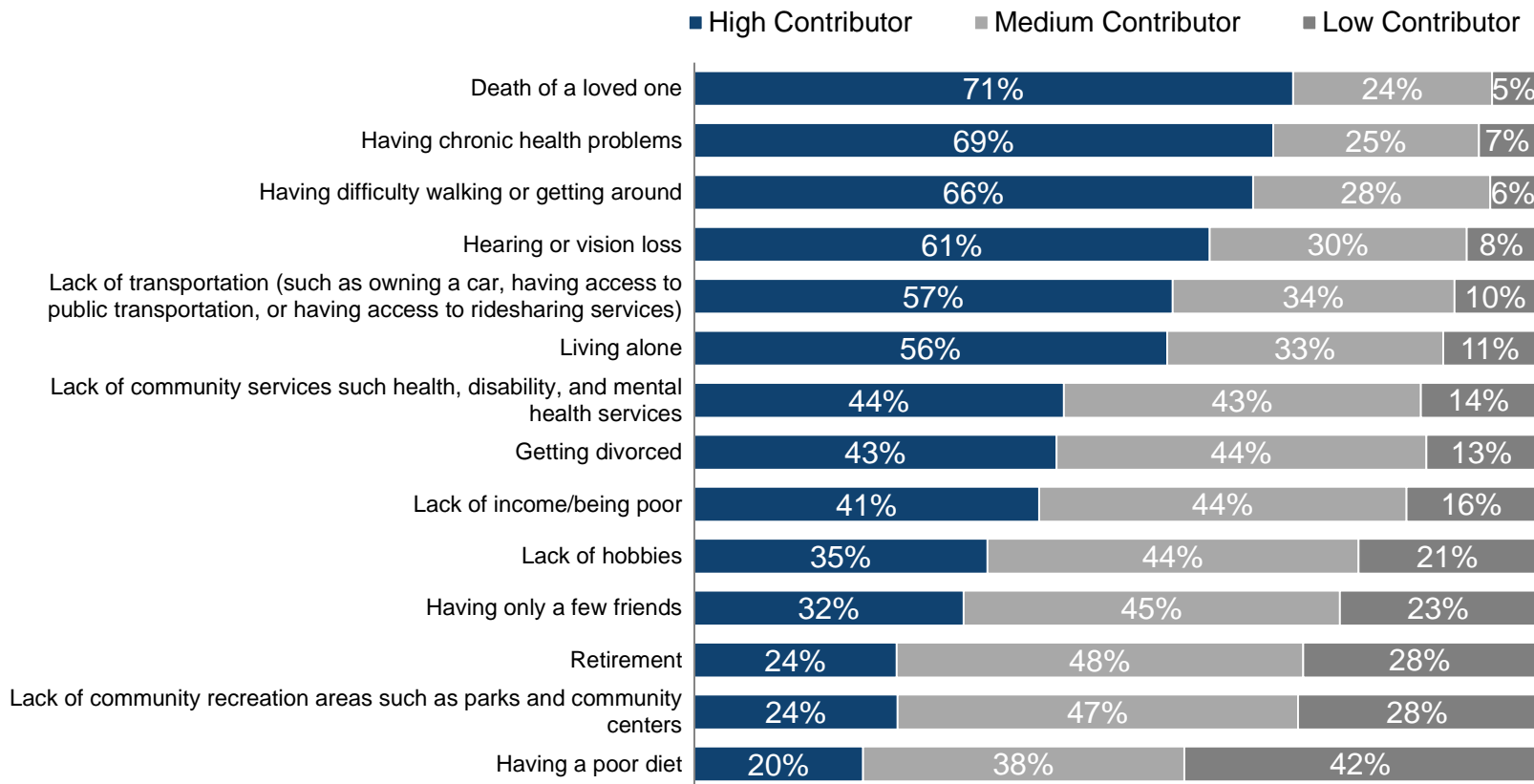
Latinos are more likely than non-Latinos to mistakenly believe that **loneliness is a normal part of aging** (31% vs. 21%) and that **married people can't be lonely** (23% vs. 9%).

CQ5. Please read through the following statements and indicate whether you think they are true or false. If you are not sure, simply check 'don't know/not sure'. Base: All

**Loneliness (also known as subjective isolation) denotes how people perceive their experience and whether or not they *feel* isolated. Social isolation involves quantifiable measurements, such as the size of one's social network (and the frequency of engagement with it), availability of transportation, and ability to access resources and information.

Health Issues Are Considered a Major Contributor to Social Isolation, but Less Agreement on Other Known High Risk Factors

Percentage Who Believe Issue is a High, Medium, or Low Contributor to Social Isolation



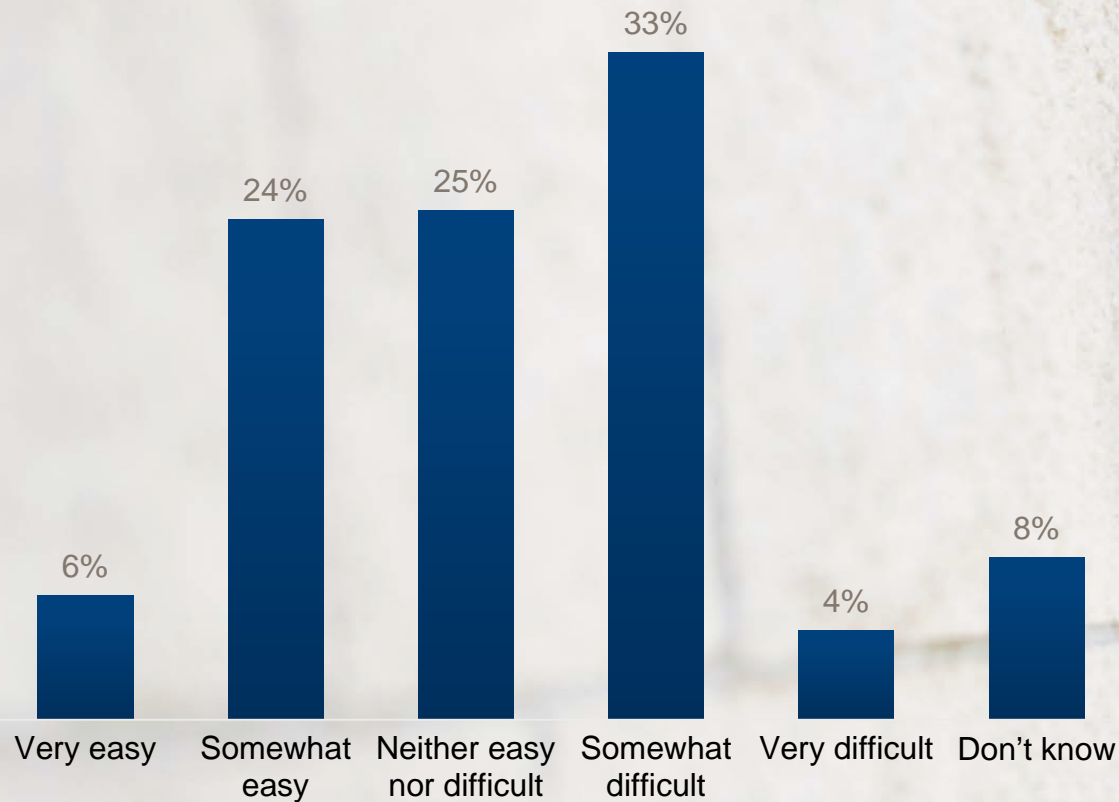
Health and mobility issues make up four of the top five items that people thought were high contributors to social isolation.

Respondents were in less agreement about several other known high risk factors for social isolation such as living alone and having lower income.

CQ6. How would you rate the level of contribution each circumstance plays in contributing to social isolation? Please indicate whether you think each is a high contributor to social isolation, a medium contributor to social isolation, or a low contributor to social isolation. Base: All

Adults Age 40 and Older Are Mixed on How Easy It Is to Spot Social Isolation in Others

Ease of Determining Whether a Friend or Family Member is Dealing with Social Isolation

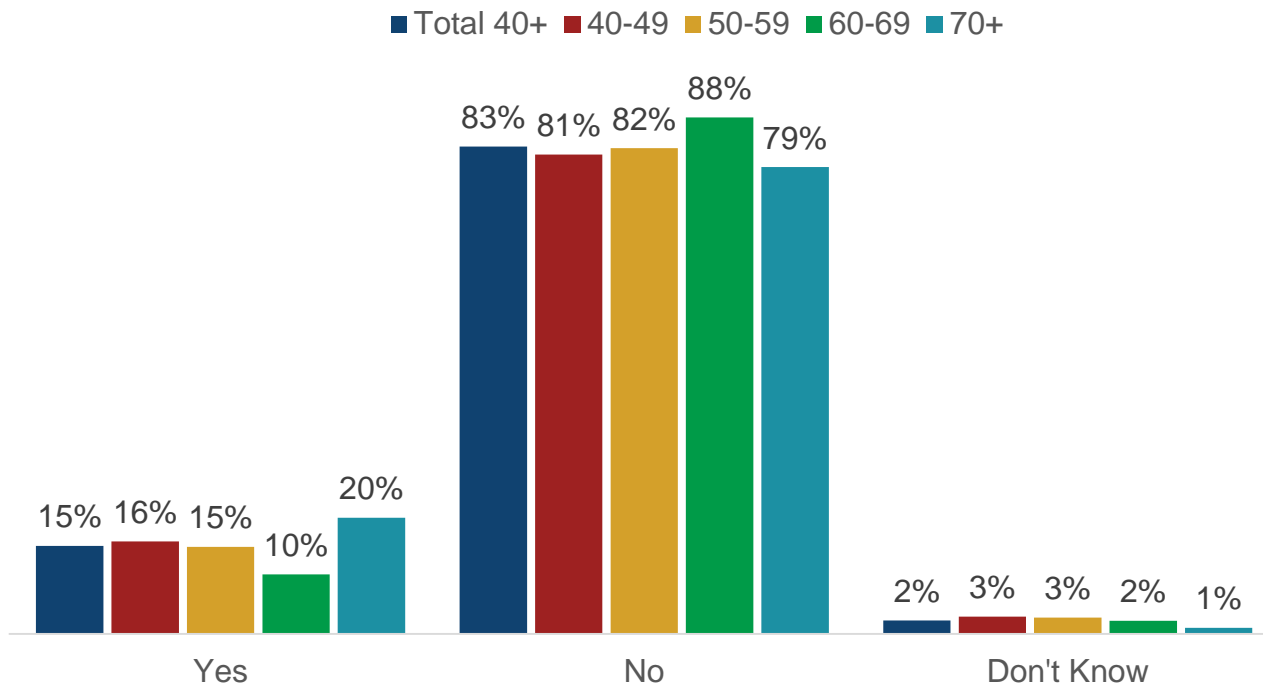


CQ3 - How easy do think it is to determine whether a friend or family member is dealing with social isolation?

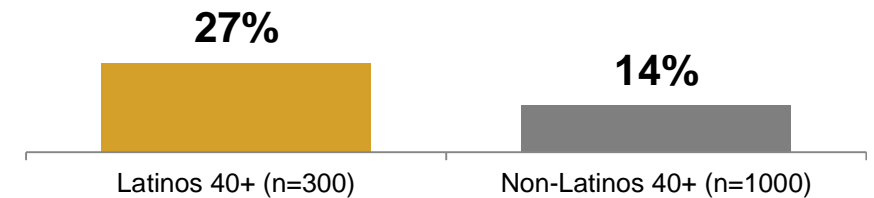
Few Mid-Life and Older Adults Say A Health Professional Has Asked Them About Social Isolation

Just 15% of adults 40 or older have been asked about social isolation or loneliness during a medical exam. Adults 70 or older (20%) and Hispanic/Latino adults (27%) are the most likely to report being asked.

Asked About Social Isolation or Loneliness During an Exam



Percentage Asked During an Exam



CQ4 - Has your doctor or medical practitioner ever asked you about loneliness or social isolation during an exam? Base: All



IMPLICATIONS

Implications

More than 8 million adults age 50 and older are affected by social isolation. **Although many older adults are aware of the issue, they still hold several common myths and misperceptions that impact their ability to recognize isolation** and address it in their communities. Chief among them is the lack of awareness that social isolation's effect on health parallels smoking 15 cigarettes a day. **Educating the public on this issue and providing tools for better detection and action are key.**

Despite the fact that older adults are one of the highest risk groups for social isolation, **few adults 40 and older think it will happen to them.** This lack of personal risk may mean that **people do not notice the signs of isolation in themselves and their family** and therefore miss the possibility of making changes when it is easiest.

Moreover, medical professionals are missing an opportunity to assess isolation and loneliness and take action—just 15% of respondents say a medical practitioner has ever asked them about it.





APPENDIX

Social Isolation Quiz Items by Age

Percentage Who Got Answer Correct	Total	40-49	50-59	60-69	70+
	<i>n=1300</i>	<i>n=350</i>	<i>n=350</i>	<i>n=325</i>	<i>n=275</i>
Married people can't be lonely because they always have their spouse around. (F)	82%	78%	80%	85%	88%
Hearing loss can keep people from engaging with others, leading to isolation and loneliness. (T)	82%	73%	82%	84%	88%
Feeling lonely can shorten your life. (T)	76%	70%	79%	81%	75%
Loneliness is a personal issue that doesn't impact others or society at large. (F)	70%	66%	69%	72%	74%
Adults caring for a loved one with a chronic illness are at risk for social isolation. (T)	70%	64%	73%	71%	73%
Loneliness is a normal part of the aging process. (F)	61%	58%	60%	61%	66%
Being socially isolated is a choice. (F)	58%	59%	55%	63%	55%
The more people you know, the less lonely you'll be. (F)	58%	63%	57%	59%	51%
People who struggle financially are more likely to be socially isolated than those with higher incomes. (T)	50%	46%	54%	45%	53%
Loneliness and social isolation are basically synonyms for the same condition. (F)	39%	41%	42%	40%	33%
Social isolation is usually brought on by a single event like the death of a spouse or moving to a new house. (F)	33%	34%	36%	35%	27%
The health risks of prolonged social isolation are equivalent to smoking 15 cigarettes a day. (T)	28%	31%	30%	27%	25%

High Social Isolation Contributors by Age

Percentage Who Believe Item is a “High” Contributor to Social Isolation	Total	40-49	50-59	60-69	70+
	<i>n=1300</i>	<i>n=350</i>	<i>n=350</i>	<i>n=325</i>	<i>n=275</i>
Death of a loved one	71%	71%	73%	68%	72%
Having chronic health problems	69%	63%	70%	71%	71%
Having difficulty walking or getting around	66%	64%	68%	67%	66%
Hearing or vision loss	61%	57%	63%	62%	63%
Lack of transportation (such as owning a car, having access to public transportation, or having access to ridesharing services)	57%	56%	51%	59%	62%
Living alone	56%	60%	59%	53%	51%
Lack of community services such health, disability, and mental health services	44%	49%	45%	41%	39%
Getting divorced	43%	45%	46%	40%	41%
Lack of income/being poor	41%	41%	45%	35%	42%
Lack of hobbies	35%	38%	37%	30%	33%
Having only a few friends	32%	35%	35%	31%	25%
Retirement	24%	31%	27%	22%	15%

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About AARP

AARP is the nation's largest nonprofit, nonpartisan organization dedicated to empowering Americans 50 and older to choose how they live as they age. With nearly 38 million members and offices in every state, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands, AARP works to strengthen communities and advocate for what matters most to families with a focus on health security, financial stability and personal fulfillment. AARP also works for individuals in the marketplace by sparking new solutions and allowing carefully chosen, high-quality products and services to carry the AARP name. As a trusted source for news and information, AARP produces the nation's largest circulation publications, AARP The Magazine and AARP Bulletin. To learn more, visit www.aarp.org or follow @AARP and @AARPadvocates on social media.



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This research was designed and executed by AARP Research