

# L O N E L I N E S S

## A SOURCEBOOK OF CURRENT THEORY, RESEARCH AND THERAPY

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## Chapter 20

### *Being Old and Living Alone*

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In the seventeenth century the English philosopher Thomas Hobbes (1661) characterized human life as "solitary, poor, nasty, brutish and *short*" (italics added). Cultural images depict old age in the twentieth century as equally gloomy, modifying the Hobbesian thesis only to acknowledge that for old people today, life is not only solitary, poor, and unpleasant, but also *long*. Americans are living considerably longer than their grandparents did, and are likely, with advancing age, to live alone (Glick, 1977). For many, growing old entails a substantial period of solitary living, a situation often viewed as severely negative. Stereotypes of people who live alone (Parmelee & Werner, 1978) characterize them as unfriendly, aloof, unattractive, and lonely. Researchers (Lynch, 1977) have sometimes used marital status as a proxy for measures of loneliness, assuming that the widowed, divorced, and never-married suffer from deficits in social relations not experienced by the currently married. Thus, being old and alone would seem to be a profoundly undesirable condition whose psychosocial consequences might temper the benefits of the extended life span of contemporary older Americans.

In this chapter we explore the soundness of the assumptions behind these negative images of those who are old and alone. We begin by examining the syllogism implicit in the line of reasoning just presented—that being old entails being alone, and that being alone entails being lonely, so that being old surely leads to being lonely. We next review evidence about factors that do contribute to loneliness among older adults. A third section discusses the effects of gender and marital status on loneliness, and presents evidence that marriage may be more beneficial to the well-being of older men than women. A final section considers some of the positive aspects of solitary living for old people, most notably the belief that living alone is a sign of personal independence.

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### A FAULTY SYLLOGISM: OLD = ALONE = LONELY

Evidence indicates that people are more likely to live alone as they grow old. However, there is little empirical support for the claim that this status is necessarily accompanied by increased loneliness.

#### Does Being Old Entail Being Alone?

The average life span of Americans has increased steadily. There are currently about 23.5 million individuals over age 65 in the United States, representing more than 11% of the population (1977 census update: Glick, 1977). Moreover, the number of individuals in the older age group is expected to increase by a third before the year 2000, with the proportion of old people increasing even more dramatically. These changes in the age composition of the American population reflect stable long-term trends toward lower birth rates and increased longevity (Shanas & Hauser, 1974).

Related trends converge to produce an older age group increasingly comprised of widowed women (Bikson & Goodchilds, 1978a). Since the turn of the century in the United States, the death rate for women has been substantially lower than the rate for men, and this differential itself is increasing (Berkman & Syme, 1979; Cutler & Harootyan, 1975; Retherford, 1975; Spiegelman & Erhardt, 1974). Because of this sex difference, the population of older women is growing faster than the population of older men. Among young-old adults (those in their late 60s and early 70s), the ratio of women to men is about 125 to 100; for old-old adults (those in their late 70s or older), the ratio is about 200 to 100.

Among adults over age 65, women are much more likely than men to be widowed. In 1975, only 14% of older men were widowed, compared to 52% of older women (Marquis, 1979). This difference reflects both the higher mortality rate of men and the fact that husbands are typically several years older than their wives. Another factor contributing to the disproportionate number of single older women is the differential remarriage rates of widows and widowers. Widowed women are much less likely to remarry than are widowed men, in part because of differences in the availability of age-appropriate partners.

Many older adults, particularly those who are widowed, live alone. Despite prevailing myths, a surprisingly small proportion of older adults live in group settings; in 1975 only 5% of those over age 65 were living in an institution (Marquis, 1979). Most older adults live in either one-person or two-person households. Census data (Marquis, 1979) show that both age and gender have a strong impact on living situations. Among men 80% of the young-old and 63% of the old-old live with a spouse. In contrast, among women only 46% of the young-old and 20% of the old-old live with a spouse. Those who are not currently married typically live alone. In 1975, 12% of young-old

men and 18% of the old-old men lived alone. Among women 33% of the young-old and 41% of the old-old lived alone. Greater economic independence and improved health are enabling current cohorts of older adults to maintain individual households in greater numbers than ever before, and this trend is likely to continue.

Taken together, these data indicate that the first part of the syllogism is accurate: being old is frequently associated with being alone, both in the sense of being without a spouse and of living in a one-person household. The old and alone status is being occupied by larger and larger numbers of adults, especially older women.

#### Does Being Alone Entail Being Lonely?

Having corroborated the first premise, investigating the second takes on more importance. That is, in view of marked increases in the number of individuals who are old and alone, the psychosocial concomitants of this status deserve careful attention.

It is commonly assumed that older people who live alone have been rejected by their families, lead impoverished social lives, and lack close relationships. Although these beliefs are widely held, evidence is accumulating that they are "mythic" in the sense in which Baltes and Schaie (1976) use that term. That is to say, while these views undoubtedly have some basis in reality and may be true of some segments of the older adult population, they do not represent the modal or typical case.

First, it should be underscored that older adults who live alone are typically not cut off from or rejected by their families. While across age groups unmarried persons report having relatively less contact with relatives than their married counterparts, research indicates that most older adults do have regular family contact. Among the people 65 and over studied by Fischer and Phillips (Chapter 2), only 8% of men and 15% of women were severely isolated from their kin. In a study of inner city aged (Cantor, 1975), a group usually regarded as extremely vulnerable to social isolation, two-thirds of respondents reported at least monthly contact with relatives. The recent extensive work of Shanas (1979) indicates that older people living alone typically reside in the same city as their adult children, often not more than 10 minutes away from them. These older adults engage in regular telephone and face-to-face interactions with their children. Shanas concluded that old people perceive these forms of contact as preferable to living with adult children and as more conducive to maintaining good family relationships (cf. Kutner, Fanshel, Togo, & Langner, 1956). Older adults, like young adults, tend to value privacy and independence, and view living alone as an achievement rather than a sign of rejection by others.

Second, older adults who live alone do not ordinarily lead solitary or socially isolated lives. Cantor's (1975) study of inner city adults found that

over 80% regularly socialized on steps or benches, in parks and other open spaces; many ate together regularly. An investigation of 11 midtown Manhattan single-room-occupancy dwellings (Cohen & Sokolovsky, 1977), thought to house an especially marginal population, also found viable and complex social networks among residents. Older residents reported networks of 0 to 26 people, with a mean of 7.5; over 70% of residents named at least five people with whom they interacted. Finally, Fischer and Phillip's (Chapter 2) study of a representative sample of adults clearly indicated that people who lived alone were not more isolated from friends and associates than those living with another person; in fact, severe isolation from friends was actually *less* common among men and women who lived alone. They conclude, "Despite the suspicion raised recently that adults living alone are prone to isolation, our data show otherwise."

Third, it should be emphasized that marital status and household composition *per se* are not good indicators of the quality of social interaction. More generally, measures of objective features of social relations are poor indicators of the subjective quality of these relations. As Lowenthal and Robinson (1976) remind us, aloneness is not the same as loneliness. Research indicates that quantitative aspects of relationships such as frequency of contact and number of friends are only modestly associated with subjective well-being (see reviews by Conner, Powers, & Bultena, 1979; Larson, 1978; Lowenthal & Robinson, 1976; Rook, 1980). For example, in 17 studies reviewed by Larson (1978), correlations between objective features of social contact and measures of morale or life satisfaction ranged from .01 to .46. In studies that controlled for socioeconomic status and health, the effects of frequent social contact were often reduced and in some cases disappeared (Lemon, Bengtson & Peterson, 1972; Smith & Lipman, 1972).

The finding that quantitative aspects of social relationships are only modestly predictive of well-being or loneliness among older adults is similar to findings for younger adults (see Cutrona, Chapter 18)—the assumption that "more is better" is too simplistic. Thus Conner et al. (1979) have urged gerontological researchers to shift "from questions of 'how many' and 'how often' to the meaning of social relationships and the interactional process" (p. 120). Likewise, researchers who study social support lament how little we know about factors that lead people to experience their social relations as emotionally supportive (House & Wells, 1977).

In this context, it becomes clear why living arrangements should not be taken as a proxy for loneliness or social satisfaction in later life. Although loneliness among old people has been linked to low social contact with friends and children (Perlman, Gerson, & Spinner, 1978), most old people living alone interact fairly regularly with other people. Further, living with another or others is no guarantee that social relations will be satisfying. Perlman et al. (1978) actually found greater loneliness among single old people who lived with relatives than among either those who lived alone or those who lived with friends. In that study, loneliness was much more closely linked to con-

tact with friends ( $r = -.51$ ) than with children ( $r = -.18$ ) and was unrelated to contact with other relatives.

Results from a growing number of studies suggest that social contact with friends and neighbors has greater impact on well-being than does contact with grown children or other relatives (Arling, 1976; Edwards & Klemmack, 1973; Kutner et al., 1956; Lee & Ihinger-Tallman, 1980; Martin, 1973; Pihlblad & McNamara, 1965; Wood & Robertson, 1978). In an illustrative study, Arling (1976) asked 409 elderly widows about their frequency of contact with children or other relatives, and with friends or neighbors. He found that contact with family members, particularly children, was unrelated to measures of morale; but friendship-neighboring was related to decreased loneliness and a greater sense of usefulness and respect within the community. This outcome is consistent with the observation (Kutner et al., 1956) that one of the most frequent complaints of old people living with their grown children is a feeling of isolation within the family group.

Similarly, a study of "Golden Wedding" couples by Parron and Troll (1978) found that, while many older couples had happy marriages, a few experienced conflict and hostility. "Some people feel that their husbands or wives are the cause of all their troubles, and they often wish they could somehow terminate their marriages" (p. 459). Frequent but unpleasant social contact is unlikely to reduce loneliness or to contribute to psychological well-being. Tunstall (1967) found that 27% of the severely lonely old people he studied were currently married; their loneliness stemmed from being separated from the spouse, feeling neglected by a very "busy" spouse, being housebound, or missing someone other than the spouse.

Conversely, it should not be surprising that in Tunstall's sample most old people who lived alone were *not* lonely. Among the men and women living alone, only 15% reported that they were often lonely. Although this percentage is higher than that reported by those who lived with others (4%), it nonetheless indicates that the typical old person living alone seldom feels lonely. In sum, the second part of the syllogism—that living alone necessarily entails being lonely—is not supported by empirical research.

## ARE OLD PEOPLE ESPECIALLY VULNERABLE TO LONELINESS?

We have indicated that for old people, being alone does not invariably produce loneliness. It is still useful to ask, however, whether there are age trends in loneliness. Although popular culture depicts youth as a time of sociability and old age as a time of loneliness, several large-scale surveys have found the opposite to be true (Parlee, 1979; Fidler, 1976; Rubenstein & Shaver, Chapter 13; Woodward & Visser, 1977). As shown in Table 20.1, self-reports of loneliness are highest among adolescents, and then decline among older groups. For example, in one survey (Parlee, 1979), 79% of respondents under age 18 said they were sometimes or often lonely, com-

Table 20.1. Age Trends in Loneliness

|  |          |       |       |       |       |       |       |
|--|----------|-------|-------|-------|-------|-------|-------|
| Survey by Rubenstein and Shaver <sup>a</sup>                         |          |       |       |       |       |       |       |
| Age in Years   | 18-25    | 26-30 | 31-39 | 40-49 | 50-59 | 60-69 | 70 +  |
| Mean loneliness score<br>(max. = +20)                                | +12.8    | + 9.5 | + 8.9 | + 2.9 | - 3.8 | - 9.4 | -22.5 |
| Survey by Parlee <sup>b</sup>  |          |       |       |       |       |       |       |
| Age in Years   | Under 18 | 18-24 | 25-34 | 35-44 | 45-54 | 55 +  |       |
| Percent saying they<br>feel lonely<br>sometimes or<br>often          | 79%      | 71%   | 69%   | 60%   | 53%   | 37%   |       |
| Study by Dean <sup>c</sup>   |          |       |       |       |       |       |       |
| Age in Years   | 50-59    | 60-69 | 70-79 | 80+   | Total |       |       |
| Percent saying they<br>feel lonely<br>"sometimes" or<br>"more often" | 26%      | 35%   | 29%   | 53%   | 32%   |       |       |

<sup>a</sup> Adapted from Rubenstein, Shaver, and Peplau (1979)<sup>b</sup> Adapted from Parlee (1979)<sup>c</sup> Adapted from Dean (1962)

pared to only 53% of 45 through 54 year olds, and 37% of those 55 and older. A nationwide British survey (Fidler, 1976) found that 20% of old people said they were occasionally lonely, and only 7% said they felt lonely most of the time; the remaining three-quarters of the older sample said they never felt lonely.

Survey data lead to two conclusions. First, self-reported loneliness is less common among older persons. Second, only a small minority of old people reports suffering from severe and prolonged loneliness.

One possible exception to this pattern should be noted. Two studies suggest that at very advanced ages, loneliness may be more common. Within Tunstall's (1967) sample of old people, loneliness was most often reported by the oldest respondents; this appeared to reflect increases in both widowhood and physical incapacity for that group. As shown in Table 20.1, Dean (1962) found fairly similar levels of loneliness among adults ages 50 to 79, but a sharp increase in loneliness among those 80 and older. Dean speculated that the meaning of the term loneliness may be somewhat different among the oldest (80+ years) adults in her sample. She argued that for the old-old, loneliness was closely linked to reduced activity due to physical incapacity and to lack of money or transportation, rather than to an absence of social contact.

The reasons for the general pattern of decreased self-reports of loneliness by respondents from successive stages in the life cycle are not well understood

(cf. Campbell, Converse, & Rodgers, 1976). One possibility is that old people are genuinely more satisfied with their social relations than are young adults. Although young people typically have many more social opportunities, they may also have high and perhaps unrealistic expectations about social relations. With age, individuals may establish more reasonable expectations and standards for social relations. A second possibility is that these trends reflect a difference in willingness to acknowledge feelings of loneliness, rather than in the experience itself. Young adults may be more influenced by the contemporary ethic of "openness" and emotional expressiveness (Rubin et al., 1980) than are older adults. Finally, we do not know whether observed patterns represent developmental trends linked to aging or life stage, or rather reflect cohort effects due to historical differences in the experiences of various age groups.

## SOURCES OF LONELINESS AND SOCIAL SATISFACTION IN OLD AGE

Although the majority of old people perceive their social relations as satisfying and do not feel lonely, some old people do experience painful feelings of loneliness. At any age, loneliness is a response to a deficit in the quantity or quality of one's social life. Proximal causes of loneliness, then, are to be found in the nature of a person's social relationships. For example, Perlman et al. (1978) found that loneliness was associated with a desire to receive more personal information from other people. Research is needed to identify specific social and psychological factors that contribute to social satisfaction in older adults. We review here three proximal factors that, on the basis of somewhat limited information, appear to be important determinants of loneliness and social satisfaction.

### Availability of a Confidant

One of the earliest longitudinal studies of psychological health in later adulthood (Clark & Anderson, 1967) found the availability of a confidant to be the strongest single predictor of well-being. For older people, as for younger adults, the presence of an intimate relationship in which personal concerns can be shared is an important source of emotional well-being. For married old people, a spouse often provides this sort of relationship (Parron & Troll, 1978). Although little is known about the quality of interaction among older spouses, available evidence suggests that many older couples have positive views of their marriages, and some report increasing marital satisfaction with age (Lowenthal & Robinson, 1976). Perlman et al. (1978) found that among married old people, loneliness was significantly correlated with low marital satisfaction.

For those who are widowed or who remain in unhappy marriages, the availability of other confidants may be important (Blau, 1961). Lowenthal and Haven (1968) suggested that the presence of an intimate relationship serves as a buffer against both age-related losses in social interaction and role involvement, and against the more traumatic losses accompanying widowhood and retirement. In a 2-year study of 280 elderly San Franciscans, they found that individuals who had suffered reductions in social interaction or role losses reported considerably higher morale if they had a confidant than if they did not have a confidant. In perhaps a more dramatic comparison, Lowenthal and Haven found that widowed individuals who had a confidant reported higher morale than individuals who were married but lacked a confidant. Lowenthal and Robinson (1976) emphasized that intimacy and the capacity for mutuality are vital factors in the well-being of older adults.

These studies suggest an explanation for the common finding (cited above) that contact with kin does not reduce loneliness and enhance psychological well-being among older adults, while contact with peers often does. A study by Arling (cited in Blehar, 1979) suggests that older adults engage in rather different activities with friends than with grown children, and that relations with friends may involve more reciprocal exchanges of assistance than those with kin. Arling also found that the more people with whom an old person engaged in *reciprocal* exchanges, the lower the person scored on a measure of "lonely dissatisfaction." Further research is needed to clarify the reasons for the differential effects of relationships with friends versus kin. In such efforts it would be well to take into account the potential role of mutuality or sharing of information, problems, and assistance. On the basis of studies reviewed here, we would expect social relationships with kin (whether with a grown child, sibling, or spouse) to be perceived as satisfying to the extent that they are characterized by the positive qualities found in relationships with friends and confidants.

### Personal Control

Evidence is accumulating that documents the importance of perceiving one's environment as predictable and controllable. Feelings of personal control may reduce stress (Averill, 1973). In contrast, loss of control may lead to feelings of helplessness and hopelessness (Schulz, 1976a; Seligman, 1975).

Perceptions of control over the social environment may have special significance for older people. It has been argued that age-related events, such as mandatory retirement, death of friends and relatives, and declining health can reduce the old person's sense of personal control (Lowenthal & Robinson, 1976; Schulz, 1976b). In a study of older adults in nursing homes, Langer and Rodin (1976) found that increased choice and personal responsibility, even in small matters such as the selection of a plant to care for, improved social participation and general well-being. Lowenthal and Robinson (1976) emphasized the importance of control over one's social life: "One of the serious

and little studied problems of aging is the extent to which the individual . . . loses control of this chosen pattern and is forced to be alone when he would like company" (p. 432). In an empirical demonstration of the importance of control over social contact, Schulz (1976b) had college students visit residents of a retirement home for a 2-month period. Residents who could choose or predict the frequency and duration of these visits were significantly more active, and rated themselves higher in hope and happiness and lower in loneliness than did residents whose visitor just dropped in, even though actual interaction time was the same.

Perceptions of personal control may be useful in helping to understand why contact with kin does little to elevate the morale of old people while contact with friends does. Friendships develop voluntarily and are based on common interests and lifestyles. Family involvement, in contrast, arises more often from formal obligations. Older adults thus may experience greater control in relations with peers than in relations with family. Because grown children often have more constrained work schedules and other family obligations as well, they may determine the timing of visits with aging parents. Further, since older parents may lack mobility due to poor health or transportation difficulties, grown children may also control how a visit takes place. Finally, interaction with adult children may also result in a reversal of roles that produces unpleasant feelings of dependence in the older parent (Arling, 1976). In contrast, visits with neighbors and friends tend to be scheduled at mutual convenience and to afford greater parity of roles.

More generally, perceptions of control may be important in sustaining hope about improving relationship deficits. The pain of loneliness is compounded if people can foresee no possibility of change. The optimism of youth may decline with age. For example, while college students (Cutrona, Chapter 18) believe that new friendships can be established relatively easily, old people do not. One study of widows over age 50 (Lopata, 1969) found that 71% of these women felt that old friends could not be replaced, no matter how much one tried to make new friends. With age, the events that typically precipitate loneliness tend to become more aversive and less voluntary. Among young adults, the termination of a love relationship typically involves the breakup of a dating relationship; for older people, termination more often results from divorce or death. Similarly, for younger people, separation from family and friends is often motivated by a personal desire to pursue educational or career goals; for old people, separation more often results from others moving away, or because the old person is housebound or hospitalized. Finally, whereas young people often attribute their loneliness to changeable factors such as moving to a new city or being shy (Peplau et al., 1979), old people may more often attribute their problems to irreversible factors. In his study of old people, Tunstall (1967) found that "the lonely attribute being lonely . . . to increasing age. Nine in ten of those who answered think they are more lonely now than when they were young" (p. 93). Although evidence clearly shows that loneliness is not an inevitable part of aging, the

*belief* that loneliness is inescapable may become a self-fulfilling prophecy preventing some lonely old people from taking steps to alleviate their predicament.

### Social Comparison Processes

Social psychologists (see review by Pettigrew, 1967) have long recognized that individuals evaluate their current lives in large part by comparisons to their own past experiences and to those of other people. Gerontologists have invoked the concept of social comparison to help understand the psychological well-being of older adults.

Widowhood researchers (Gubrium, 1974; Townsend, 1968) who have distinguished between desolation and isolation emphasize the importance of comparisons with one's own past experiences. Gubrium argued that

It is not a certain absolute degree of isolation that makes for feelings of loneliness in old age, but rather *becoming* socially isolated relative to a prior degree of social engagement. This change or discontinuity in social engagement is referred to as desolation. (1974, p. 107)

Support for this interpretation of the effects of widowhood comes from several studies. Shanas et al. (1968) found that older persons who had been single all their lives complained of loneliness less than persons who were separated, divorced, or widowed. Similarly, Gubrium (1974) found that divorced and widowed old people rated their present lives as worse than they had been at age 45 and evaluated their lives more negatively than did never-married or currently married old people. Unfavorable comparisons between past and present experiences may be a major source of social dissatisfaction in later life (Lowenthal & Robinson, 1976).

The importance of comparisons with other people is also suggested, at least implicitly, in Blau's (1961) analysis of the effects of widowhood on social relations. Blau proposed that widowhood has adverse effects on social participation only when it places the individual in a position that differs from most of his or her age and sex peers. In a survey of 468 old people, Blau found that among those under age 70, widowed individuals were less socially active than married individuals. But among those over age 70, no differences were found between the friendship participation of the widowed and married. Blau explained this finding in terms of the proportion of widowed women and men in the two age groups.

People tend to form friendships with others in their own age group, and to the extent that this occurs, the widowed person under 70 is likely to be an odd person at social gatherings since most of [his or her] associates are probably still married and participating with their spouse in social activities. (p. 431)

We might add that these differences may also lead younger and older widows to use different standards against which to evaluate their own social lives.

Research that more explicitly examines the types of comparison standards used by older adults and their impact on loneliness is needed (cf., Cutrona, Chapter 18).

### Distal Causes of Loneliness

Loneliness is most directly a result of deficits in a person's social relations. But social relations are in turn influenced by a broad range of distal factors that may assume considerable importance in later life. Very important among these influences for older adults is health (see review by Larson, 1978). Old people who are sick or physically disabled are less likely to be satisfied with their lives. For instance, among the old men and women studied by Tunstall (1967), 19% of those with severe physical incapacity said they were "often lonely," compared to only 5% of those with no or slight incapacity. Similarly, Perlman et al. (1978) found that old people who rated their health as poor reported greater loneliness.

Well-being is also affected by housing, transportation, and income. Psychological well-being is related to satisfaction with one's housing, but not with the frequency of residential moves nor with living in urban versus rural areas (Larson, 1978). Research specifically directed toward loneliness by Woodward et al. (1974) found no differences between old people living in urban versus rural Nebraska; nor was loneliness related to type of housing. Loneliness was, however, affected by the person's happiness with his or her current housing situation; those who liked their residence were less lonely. Perlman et al. (1978) found that loneliness was higher among old people who had moved to their present residence because of circumstances rather than personal choice. Access to transportation also enhances well-being in old people (Larson, 1978). In contrast, being "housebound" was a frequent source of loneliness among Tunstall's (1967) sample of older Britains. Obviously, financial resources are another important factor that can affect health care, housing, and transportation. Perlman et al. (1978) found that loneliness was higher among old people with lower incomes.

This review has highlighted a number of personal and social factors that contribute to loneliness among older adults. The next section considers in greater detail the impact of marriage on loneliness in older adults and finds that the implications of marital status differ for women and men.

### MEN, WOMEN, AND MARRIAGE

Considerable evidence suggests that being married typically contributes to physical and mental health. Lynch (1977) reviewed extensive data indicating that married individuals enjoy greater health and longevity than do the single, divorced, or widowed. Studies consistently find that the married have

lower rates of mental illness than the nonmarried (Bernard, 1972; Gove, 1972; Knupfer, Clark, & Room, 1966; Pearlin & Johnson, 1977). Married individuals report greater happiness (Bradburn, 1969; Glenn, 1975; Gurin, Veroff, & Feld, 1960) and greater psychological well-being (Larson, 1978). Most pertinent to our discussion is evidence that among older adults, the married are less likely to report loneliness than the nonmarried (Parlee, 1979; de Jong-Gierveld & Raadschelders, Chapter 7; Rubenstein & Shaver, Chapter 13; Tunstall, 1967). However, the benefits of marriage may be greater for men than for women in old age.

While public attention tends to focus on the plight of the lonely aging widow, there is reason to believe that the effects of being single, divorced, or widowed are more negative for old men than for old women. An early research review concluded:

In several recent studies of mental health, a higher proportion of single men than of single women have shown indication of maladjustment. In accordance with the popular view of marriage as a triumph for women and a defeat for men . . . we would expect to find those men who have escaped marriage to be better adjusted than those women who have failed to marry. That their data suggest the opposite has been greeted by the authors of the studies concerned with varying degrees of surprise and disbelief. (Knupfer, Clark, & Room, 1966, p. 841)

Put simply, evidence suggests that marriage is more of an advantage for men than for women, and that being without a spouse is more of a liability for men than for women (Bernard, 1972; Eisenson, 1980).

Two recent studies investigating loneliness in older adults illustrate this pattern. Perlman et al. (1978) found that widowed men were significantly lonelier than married men; among women, no significant difference was found between those who were married and widowed. Bikson and Goodchilds (1978a) found that members of older couples reported less loneliness than did single older adults. But again, this effect was strongest among men. Single men were the loneliest group, while married men reported the least loneliness; married and single women scored in the middle. Bikson and Goodchilds suggested that this outcome might reflect in part differences in the leisure activities of older men and women. Results indicated that during their free time over two-thirds of the single men pursued solitary activities, whereas over two-thirds of the single women pursued social activities. The reasons for the differential effect of marriage for women and men are not well understood, although several possible explanations have been offered.

### Are the Results Artifactual?

It is sometimes suggested that women are more willing than men to admit to various problems including loneliness. As Gove (1979) points out, however, this response bias explanation cannot account for the occurrence of highest

reports of distress and unhappiness among unmarried men; if sex differences in responding were at work, they should appear regardless of marital status (see also Weissman & Klerman, 1979). A second artifact might be the differential selection of women and men into marriage—an explanation offered by Bernard (1972) in her discussion of younger adults. Bernard proposed that the most competent women and the least competent men are the ones likely to remain unmarried. This explanation is inadequate, however, to explain the effects of marital status in older samples, since for this cohort the great majority of currently "single" individuals were formerly married and became widowed later in life. Thus the observed interaction of gender and marital status is, we believe, "real."

### Sex Differences in Social Activities

It has frequently been conjectured that women are better able to initiate and maintain relations with friends and relatives than are men. For example, based on qualitative observations, Knupfer, Clark, and Room (1966) speculated that "Man's lesser ability to form and maintain personal relationships creates a need for a wife, as the expressive expert, to perform this function for him" (p. 848). As a consequence, unmarried men experience an "expressive hardship." Troll and Turner (1979) echoed this theme, noting that "most older men have relied on their wives for intimacy . . . and for linkages with family, friends, and social life in general" (p. 128). Others (Brown & Fox, 1979; Lowenthal & Robinson, 1976) have emphasized that sex-role socialization discourages men from learning intimacy skills and from developing close same-sex friendships that might ease the loneliness of being widowed or unmarried.

Although direct evidence concerning the social skills of older men and women does not exist, available research does show sex differences in the patterning of social relations among older men and women. For example, in a recent survey, Fischer and Phillips (Chapter 2, see also Fischer, 1978) found that among people over age 65, women had 38% more friends than did men. Fischer speculated that women are generally more sociable than men, but that at younger ages this difference is not evident in patterns of friendship. Younger women are constrained in friendship formation by homemaking and childbearing responsibilities; younger men are aided by participation in contexts such as work that provide friends with little effort. In later life, both the constraints and supports for friendship diminish (e.g., as children leave home and workers retire). As a consequence, the friendships that old people have and maintain are more directly a result of their own initiative. Support for women's relative advantage in old age is shown by evidence that older women continue to make new friends, whereas older men are less likely to do so. Whether older men are less able or merely less interested in replacing friends who are lost through geographic mobility or death is not clear.



### Sex Differences in Domestic Activities

A second explanation for the differential impact of marriage on men and women focuses on sex differences in instrumental behavior. Sex-role socialization encourages men and women to develop different skills. Women learn homemaking skills, whereas men acquire occupational skills. During much of adult life, these sex differences form the basis for traditional role differentiation in marriage. Time-budget studies (Robinson 1977; Walker, 1970) document that the behavior of most Americans shows a high degree of traditional role differentiation by gender. Some tasks are clearly considered to be "women's work" and others to be "men's work." Even in families in which the wife is employed full time for pay, she continues to perform most homemaking and childcare activities for the household.

Research concerning age-related trends in household task performance is sparse. Blood and Wolfe (1960), using a cross-sectional design, found that task specialization by sex increased over the life span and was greatest during retirement. Ballweg (1967) found that retired husbands did no more housework than employed husbands of the same age. Lipman (1961), however, reported that retired husbands tended to engage in such tasks as dishwashing and grocery shopping that required little in specialized skill and that could be done jointly with their wives. In any case, there is no evidence that retired husbands typically take over a major share of housework. An exception may occur among very old couples in which the wife's ability to perform household tasks is seriously impaired (Troll, 1971).

During much of adult life, role differentiation in marriage may be an efficient and comfortable pattern. In later life, however, rigid role differentiation by gender may create unexpected problems. Older adults who lose a spouse through death or divorce may find it difficult to assume tasks and responsibilities formerly performed by the partner. This may be especially problematic for men who have never acquired basic personal maintenance skills and who may reject such activities as "feminine." In contrast, older women are typically skilled at homemaking, having had years of practice. Thus older women alone may be at less of a disadvantage than older men alone.

Evidence supporting this view comes from a study of older adults conducted by Bikson and Goodchilds (1978a). They found that marital status had a striking impact on the health and eating practices of older men and women. Women living with a husband and women living alone were about equally likely to see a doctor regularly; in contrast, men living alone were much less likely to see a doctor than those living with a wife. Similarly, married women virtually always prepared their own meals, as did most women living alone. Married men generally ate meals prepared by their wife, while men alone were likely to eat out. There is little doubt that older women typically have greater experience than older men in basic maintenance tasks. This factor may contribute to the differential effects of living alone for women and for men. What is not clear is the extent to which men actually lack domestic

skills such as the ability to cook, or rather avoid performing or learning to perform "women's work."

A sex-role analysis may also help explain why on some measures of psychological well-being, married women fare less well than married men (Gove, 1979). After a man retires, the work demands placed on him decline, but those on his wife may actually increase. While men can retire from their role as breadwinner, women never retire from the homemaker role. Following the husband's retirement, women may have reduced financial resources for homemaking, and may find that their own health and energy are declining (Kerckhoff, 1966). Yet as time budget studies indicate, older women typically receive minimal assistance for maintenance activities from their husbands.

The burdens that fall on older wives may be further exacerbated by the traditional age differential between spouses. In addition to caring for herself, many older wives may also need to take care of a husband of even more advanced age. Troll and Turner (1979) speculate that

If a wife is in good health, and her husband is showing dangerous symptoms which he is ignoring, she can easily be drawn back into a repetition of the mother-nurse role. . . . It becomes her responsibility to see that he goes to the doctor, watches his diet, takes his medication, and alters his activities as indicated. (p. 126)

Although good data on this point do not currently exist, it seems reasonable to hypothesize that many older married women suffer from work and worry overload. Bikson and Goodchilds' data (1978b), for example, indicate that married older women experience greater decision-making problems than their unmarried counterparts. This finding may be analogous to data indicating that younger working wives often feel "rushed" and have very little leisure time (Robinson, 1977). Such a view suggests that although older women living alone may miss some of the benefits of a spouse, they also avoid high demands on their time and energy.

Further research is needed to untangle the complex ways in which gender and marital status affect loneliness among older adults. The finding that marriage is more advantageous for older men than women may be one reason why aging widowers are more eager to remarry than are their female peers. An intriguing implication of the preceding discussion concerns the possible impact of trends towards decreased sex-typing in socialization. We can speculate that as younger men and women become more androgynous—developing competence in both social and instrumental activities, and viewing daily living tasks as more equally the responsibility of both sexes—they may be better equipped as individuals for old age, whether time and chance leave them coupled or alone.

### THE PURSUIT OF INDEPENDENCE

For those who survive to old age, a certain degree of aloneness is inevitable (Goodchilds & Bikson, 1980). Aging adults watch as their cohort dwindles;

old friends, relatives, former classmates, business associates die. Other relationships are lost through geographical moves, retirement, or physical incapacity. But it is also important to emphasize that for some old people, reductions in social involvement may be voluntary and rewarding. Retirement and the privileges of age may offer the possibility of being selective about one's associates, and of ignoring people who are boring or unpleasant. "Many roles and responsibilities are shed with relief and the supposed normlessness of late life enhances the role of personal preference concerning the kinds of social relations to maintain" (Stueve & Fischer, 1978, p. 22).

Widowhood is often a part of old age, and it too can be a powerful experience of loss and aloneness (see Lopata et al., Chapter 19). But as we have seen in this chapter, widowhood does not mark the end of social involvement. Most widowed individuals reconstruct their social lives, although men and women may find different solutions to creating a satisfying social world:

The modal older man is bereft when his wife dies because she is his chief and probably only confidant, but . . . he should have little difficulty replacing her. . . . The modal older woman, when she is singled, has little chance of remarrying, but . . . she has personality and housekeeping skills to survive on her own, to make friends easily, and to take care of herself. (Troll & Turner, 1979, p. 152)

Although the social relations of older Americans may depart from cultural ideals of "coupled bliss," they are often personally satisfying. Perhaps especially for women, widowhood may bring new opportunities for independence. Many widows comment that following bereavement they experience positive feelings of self-sufficiency, and enjoy greater freedom than they have had in their adult lives (Lopata, 1979).

For those old people who are not currently married, living alone is a common pattern. But whereas stereotypes depict this as an unhappy necessity, old people are more likely to view living alone as a preferred lifestyle (Goodchilds & Bikson, 1980). For the unmarried, alternatives to living alone—living with children or relatives, moving to a communal residence, sharing a home with someone—are often unattractive. For example, although old people want to be in geographical proximity to their children, they do not want to share the same household (Brown, 1960; Shanas et al, 1968). Many an exasperated adult son or daughter worn out from continued pleading with an aging parent to "move in with us" or "let us arrange for someone to move in with you" can testify that keeping one's own place and keeping it to oneself is a matter of pride, fiercely defended. Old people often view living alone as a valued achievement, a sign of independence (Rabushka & Jacobs, 1980).

It is obvious that most people benefit from companionship, involvement in the world of people, and care from others. For those who are ill or disabled, living with others may be requisite for survival (Clark & Anderson, 1980). But for healthy single older adults, the available alternatives to living alone may be much less appealing. This should be no surprise. Throughout history, it has been the able, rich, and powerful who could attain privacy and personal space. For contemporary Americans, the desire for a "room of one's own"

can be felt at any age. The pain of social isolation must be viewed against the pain of lost privacy or feelings of psychological "crowding" associated with forced togetherness.

Why then do we worry about the "plight" of those who are old and alone? Most of us feel ambivalence about aloneness: it can be a symbol of independence and autonomy, or a sign of social failure and loneliness. Both possibilities are real. The consequences of togetherness can also be mixed: living with others can be associated with feelings of love and acceptance, or with feelings of dependency and "being a burden." Certainly in our society it is considered desirable to live with a person with whom one is compatible; few would deny or doubt that. For older people especially, living with a companion can be a boon—someone to share the financial burdens, someone to help with the daily tasks of living, someone to talk to, lean on, care about. But the essential ingredient is compatibility and companionship; just anyone won't do. And old people know this.

Given adequate physical and financial means, going it alone is often preferable in light of presently available alternatives. The "plight" of the old and alone may be less social-psychological than economic and sociological. Those who are old and alone may be most appreciative of social policies that permit them to stay in their homes by providing assistance with the costs of housing, or by providing home help in health care and housekeeping (Rabushka & Jacobs, 1980). Contrary to myth, most old people are satisfied with their social relations; their worries are more often about safety, transportation, or finances. For many, the experience of being old and living alone is less lonely and more rewarding than we imagine.

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