



#### The Problem

The stated purpose of senior citizens' programs like senior centers and nutrition projects is to provide for a richer social life for the elderly. In both rural and urban senior citizens' programs, one can find a variety of social and recreational programs. But the social development programs and medical programs are sometimes missing.

The logic behind the establishment of senior services was to provide services to socially isolated seniors. The concept of social isolation was based on the premise that some elderly lack contact and support from their families during the process of aging. There had been high rates of job mobility as children were educated throughout the 1960's and 1970's. To sustain good jobs and high rates of social mobility, many children moved away. Parents were left to rely on brothers, sisters and friends for both maintenance or emotional support. With increasing life spans, however, many elderly not only outlive their financial resources; they also can outlive siblings and friends. So a major function of the senior community facilities would be to provide social and emotional support for the elderly who are socially isolated from their family ties.

## The Socially Isolated Elderly

Past research has indicated that the elderly gradually disengage from roles they developed during their lives. This process of **social disengagement** continues until the elder has only family and some friendship roles remaining. The rate and sequence of role disengagement is not completely clear, but it is believed that rapid disengagement from previous social relationships could be a sign of mental deterioration.

The death of a spouse or a sudden departure of children or siblings can trigger rapid social role disengagement. The elderly person feels isolated from regular family relationships. Feelings of self-depreciation and low esteem are coupled with a withdrawal from social and self-maintenance behaviors. Other family members and friends can stop this cycle of social disengagement and self-depreciation. Senior centers and nutrition programs also provide an excellent opportunity for reintegration in social relationships and a renewed sense of self-worth through social interaction with peers.

Research in Arkansas and Missouri indicated some interesting findings. After the death of a spouse, the surviving husband or wife slowly became socially active again, but the "role negotiation" was accelerated by attendance at senior centers and nutrition programs. The reintegration process into new and interesting social relationships was quickened. A renewed sense of self-worth through social interaction with friends was noted.

Finally, those who were "reintegrated" reported less reliance on children and brothers/sisters for emotional support.

### Method and Data

In spring and summer 1981, 116 senior citizens were interviewed in seven rural and urban senior centers and nutrition projects in southeast North Dakota. These senior citizens were randomly selected so we could make generalizations about all the seniors who used these specific social services.

Elderly with no children, brothers, sisters or parents within 15 miles of the community were placed in a category called "No Kin". Other elderly with one or more of the above family ties were placed in the category "Family Present". One might expect a large proportion of elderly without family present because of large-scale out-migration from North Dakota in the 1960's and 1970's. During the 1960's, the out-migration rate for the state was 15 percent. But during the 1970's, that out-migration rate dropped to only 2.3 percent.

# Some Facts About the Social Isolates

Thirty-seven of the 116 (32 percent) seniors were interviewed fell into the category of social isolates. They reported **no** children, brothers, sisters, or parents in the immediate community, within 15 miles. Two-thirds (68 percent) were women. Just over 40 percent of the urban respondents were social isolates. Only a quarter (26 percent) of the rural respondents were socially isolated from their families. Almost half (46 percent) were widowed and just over a fifth (22 percent) had never married. Under a third (32 percent) were married, although several noted their spouses lived elsewhere, possibly in nursing homes.

The socially isolated seniors were slightly older than the normal senior services user who was interviewed (75.1 years vs. 72.8 years). Forty-six percent of these social isolates were 80 or older. This may indicate they have outlived their spouses, families and friends. Just under half these seniors had lived their entire lives in the towns of their present residence. Contrary to what one might think, their life satisfaction scale scores were not unlike the scores for those with family present in the community. Their sense of social responsibility (measured in a set of items about social responsibility) was lower than respondents with family nearby, but the age factor of the social isolate may account for this difference. One's sense of social responsibility also decreases with age.

### **How Social Isolates Participate**

We were concerned with the amount of reported social activity and participation of this group of seniors. Since major social interactions with children and siblings were not available, the source of their friendship, the clubs and organizations and their use of senior facilities would be important. These people might be isolated from families, but they could have adapted and sought multiple sources of friendship elsewhere. Comparisons for social isolates and elderly with family nearby and the three aspects of socialization are in Table 1.

Table 1. Differences in Types of Social Participation for Socially Isolated Seniors and Seniors with Family Nearby.

		Isolates	Family Present
1.	Sources of Friendship		
	-Friends mostly outside site/center	39%	33%
	—Friends mostly inside site/center	32	44
	<ul> <li>Friends about equal for both</li> </ul>	29	24
		100%	100%
2.	Membership in Number of Clubs and Organizations		
	None	14%	6%
	One or two	48	65
	Thre plus	38	29
		100%	100%
3.	Frequency of Visits to Senior Centers/Nutrition Sites		
	Daily	46%	47%
	Thrice a week	32	31
	Weekly or less	22	22
		100%	100%

To our surprise, these social isolates reported more friends outside the senior services. Also, more social isolates reported more organizational memberships than respondents with family nearby. Finally, the social isolates and respondents with family present reported almost identical rates for visits to senior social services. Evidently, these social isolates had adapted to the conditions of missing family relationships.

### Will They Volunteer?

Given the higher rates of social participation, we wondered if these social isolates would be willing to volunteer for helping out in senior social services. A central premise in aging programs has always been that the elderly had retired from formal jobs. Many, however, still had the time and talent to work in volunteer roles. Research on intentions to volunteer for unpaid, community jobs had noted an increase in

the intentions for the over-60 age group. Also, prior research indicated more altruistic volunteer behavior from small town and rural residents. In Table 2 are the comparisons of social isolates and respondents with families preseent by the types of senior social services for which they agreed to volunteer.

Table 2. Percent Willing to Volunteer for Select Senior Social Services by Social Category.

Senior Social Service	Percent Willing to Volunteer Social Family Isolates Present	
1. Volunteer Placement	33.3%	47.5%
2. Retirement Planning	25.0	35.7
3. Recreation Planning	39.4	56.9
4. Bereavement Counseling	31.3	40.0
5. Outreach	34.5	58.1
6. Escort Services	24.2	41.1
7. Home Health/Homemaker Service		
Aides	33.3	45.2
8. Friendly Visiting	41.1	67.7
9. Meals on Wheels	35.1	51.6
10. Chore Service	25.0	36.1
11. Transportation	30.3	50.7
12. Telephone Reassurance	36.3	69.2
13. Congregate Meals	45.7	68.8
14. Legal Services	21.9	40.0

These results show another surprise. The social isolates show comparatively little interest in volunteering for service within service centers. The only two services they show even mild interest in volunteering for are Friendly Visiting (41 percent) and Congregate Meals (45 percent). Social isolates would be expected to seek out the senior social services for friendship and support, but the social isolates showed less interest in volunteering to help in these social programs.

### **Implications**

We have focused here only on the elderly who are technically social isolates because they have lost primary social relationships with their family by death or migration. The elderly we interviewed use senior centers and nutrition programs. Little research has been done on home-bound elderly who are social isolates and who do not use the available social service programs.

These elderly sampled in nutrition sites and senior centers do not fit the disengagement theory. Although they lack primary family relationships, they have adapted to their social situations by becoming more active in clubs and organizations and by a wide variety of friendships. They are slightly older than respondents who have family present. Over half have lived in the present community all their lives; they have probably been long-term members of community clubs and organizations.

These social isolates indicate comparatively little willingness to volunteer for senior community services compared to seniors with family in the community. They are older and already participating in social activities. Their interest in **other** community groups and organizations is important. These individuals may be able to recruit volunteers and acquire resources from within other community groups.

One cannot assume that the socially isolated fall into general need categories. Senior citizens who

are active before retirement generally stay active. The respondents we identified as social isolates within the senior centers and nutrition programs lacked family ties. But they had adapted to their social situations by friendship patterns within and outside the senior services and organizational memberships, other senior isolates are not as fortunate. They may be isolated from families, and they may also be willing recurits for senior community services that can provide the friendship and satisfaction they may need to sustain their lives.