

- This presentation was given at the Living with Pride Benefit at Vancouver's Westin Bayshore Hotel on March 1, 2024. www.livingwithpride.ca
- The first half of the presentation is about loneliness in general.
- The second half is about loneliness among older sexual and gender minority adults.
- Some slides have been added or updated since the March presentation.
- This document is for personal use only and is not yet final.

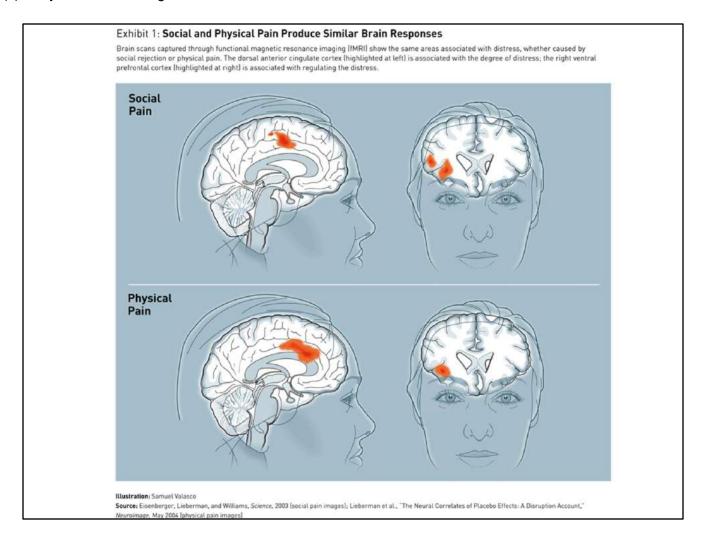
What is Loneliness?



- Mismatch between desired and actual relationships
 - quantity
 - quality (most important)
- Subjective
 - can feel lonely by yourself, in a group, or in a relationship
- Emotional pain that evolved to a serve purpose
 - like hunger, thirst, physical pain
- Loneliness tells us when our basic human needs are not being met and motivates us to take corrective action.



- People describe a variety of distressing thoughts and feelings when they are lonely.
- Recommended report: *The Psychology of Loneliness* from Campaign to End Loneliness, 2020.



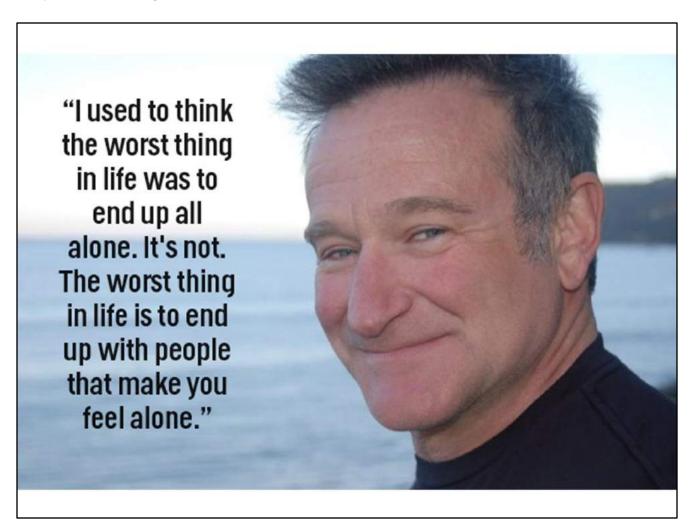
- We see here evidence for the deep evolutionary roots of loneliness and other forms of social pain like rejection or grief. There is an overlap in brain regions that process social and physical pain. Given the importance of social connection for our species' survival, our brains evolved to treat social threats or deficits with the same urgency as physical threats.
- There is also some evidence that taking acetaminophen can relieve social pain (Dewall et al., 2020, Psychological Science).

Vulnerable: Isolated and Lonely Lonely But Not Isolated

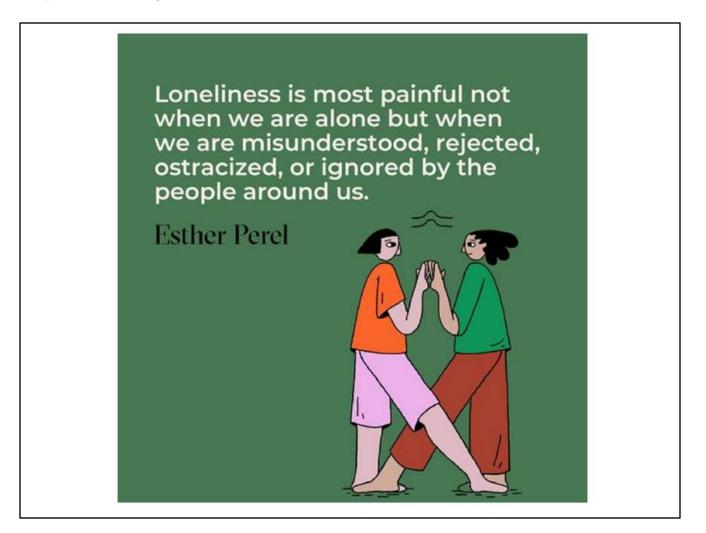
Isolated But Not Lonely

Majority: Neither Isolated Nor Lonely

- As I mentioned earlier, loneliness can be related to isolation but is not synonymous with it.
- Vulnerable group may be easiest to help: if you can reduce their isolation, you can reduce their loneliness (provided that they have not fallen into the negative feedback loop that I will describe shortly).
- Lonely but not isolated group: loneliness may be caused/compounded by mental health problems, stigma, etc. Psychological approaches (e.g., interpersonal therapy, CBT) may be more helpful for this group.
- Isolated but not lonely group may be fairing well now, but may find themselves feeling isolated when they lose their independence and require support from others.
- See Newall & Menec (2017, JSPR); Menec et al. (2020, PLoS One).



The late Robin Williams aptly described how loneliness is more than just being alone.

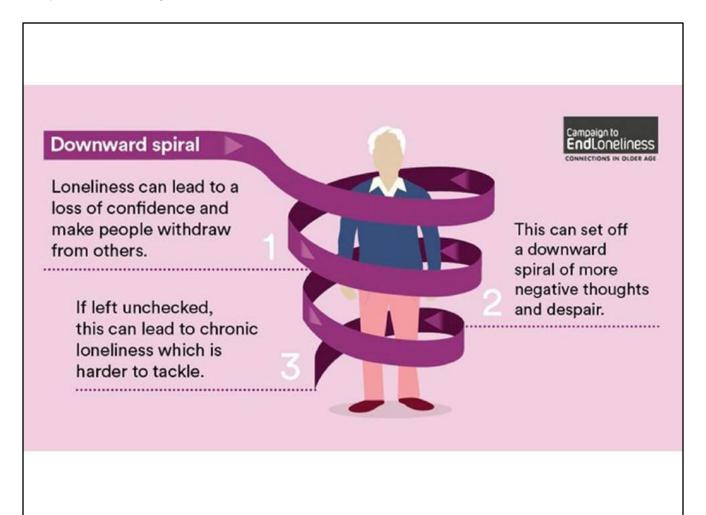


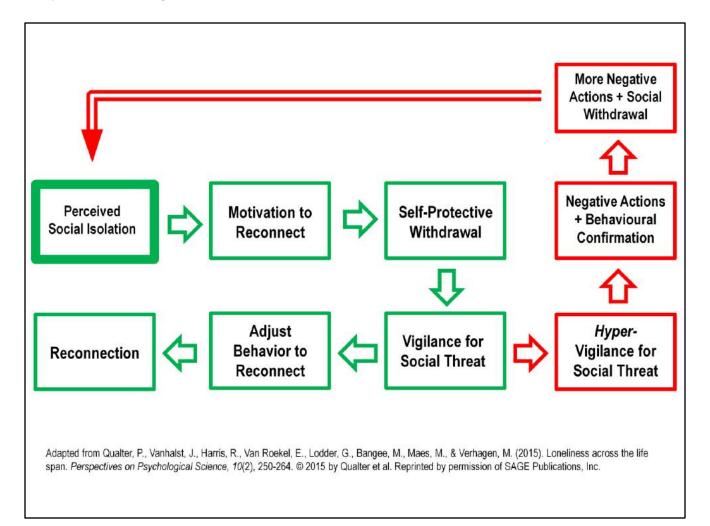
Types of Loneliness



Collective

- Existential
- Important to distinguish type of loneliness because they have different risk factors and may require different strategies.
- Intimate loneliness: perceived absence of a close intimate tie, like a partner or best friend.
- Social loneliness: perceived absence of a broader social network of friends, family, etc.
- Collective loneliness: perceived absence of belonging to a larger group or cause, like a religious community or team of some sort.
- Existential loneliness: a sense of isolation that results from the realization that no one can fully comprehend one's deepest thoughts, feelings, and experiences. It is a fundamental sense of aloneness even in the presence of intimate ties. It can be especially acute at end of life.





- Usually, loneliness is time-limited as it serves its purpose of motivating social reconnection.
- But for some, it can become persistent, in part due to a negative feedback loop.
- When feeling isolated from others, we are motivated to reconnect, but cautiously. We withdraw a little bit in order to re-assess the situation. We also become a little more sensitive to further social threats (e.g., rejection).
- But some people become <u>hyper-vigilant</u> for social threats and <u>withdraw excessively</u>. They focus too much on the negative aspects of social interactions and start to misinterpret neutral or ambiguous social cues as threatening. <u>This is common for people who are chronically isolated or who have experienced a lot of stigma and rejection in the past.</u>
- These perceptions may cause them to unwittingly push others away.
- This, in turn, leads to negative reactions from others, reinforcing the lonely person's negative beliefs about people. This leads to further withdrawal and loneliness.
- Notably, this cycle causes chronic stress and, eventually, various health problems.
- See Qualter et al. (2015, Perspectives on Psychological Science).

Emotional Impact of Loneliness



- Loss of self-esteem
- Anxiety, including social anxiety
- Atrophy of social skills
- Depression
- Anger and aggression
- Hopelessness
- Suicidal ideation, self-harm
- All compounded by
 - feeling like a burden
 - shame of loneliness itself
- Anger and aggression: especially in men; may even be the only sign that they are lonely.
- Relationships likely bidirectional. For example, loneliness can cause depression, but depression can also cause loneliness (due to its negative impact on social cognition).
- There is also an intense shame surrounding loneliness because people perceive it as a personal failure—like the problem is exclusively caused by the individual, rather than being an understandable reaction to social stress, including real and perceived isolation due to social stigma and discrimination.

Behavioural Impact of Loneliness

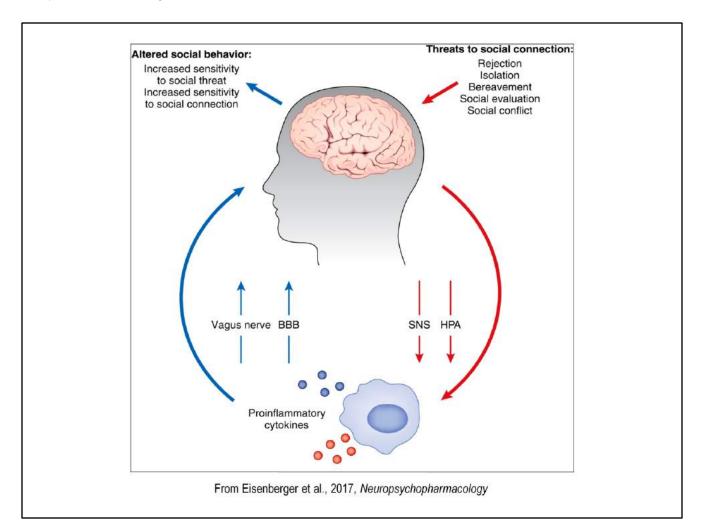


- Emotional dysregulation
- Impulsivity
- Poor health habits
 - overeating, especially carbohyrdrates
 - physical inactivity
 - riskier sexual behaviour
 - self-neglect
- Poor medication adherence
- Substance misuse
- As loneliness is stressful, it puts an extra load on our brain's executive functions, leading to lack of control over our emotions.
- This can impact self-care.

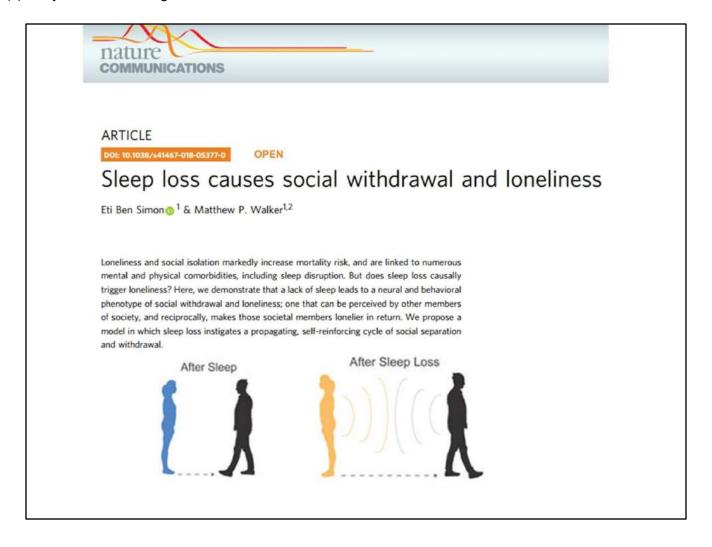
Physical Impact of Loneliness

Alzheimer's Diseases & Medical **Heart Disease Ailments Caused High Blood Pressure** or Worsened by Obesity Chronic Loneliness Neurodegenerative Diseases Even Cancer (studies show cancerous tumors can metastasize faster in lonely people) Chronic state of fight-or-flight Insufficient and fragmented sleep Immune dysfunction Chronic inflammation Accelerated aging Earlier mortality

- The chronic stress of loneliness, plus its impact on health behaviour, likely explains why it is a risk factor for many physical ailments.
- Insufficient sleep: sleeping with one eye open, unconsciously monitoring for social threats.
- Poor sleep also causes many of these health issues, including immune dysfunction and inflammation, which is a known risk factor for many health problems.
- Notably, poor sleep can also cause/exacerbate loneliness due to its impact on mood, social cognition, and social behaviour (see Simon & Walker, 2018, Nature Communications).
- Due to all of these health outcomes, loneliness is a known risk for accelerated aging and earlier mortality.



- This diagram is based on research suggesting that threats to social connection (e.g., loneliness, isolation, rejection, bereavement, social evaluation, and social conflict) can produce pro-inflammatory cytokines that increase our sensitivity to further social threats.
- See also Matthews et al. (2024, Brain, Behavior, and Immunity).



- Viewers rated sleep-deprived people as more lonely.
- They also felt more lonely themselves! Feeling and looking lonely induces it in others.
- Further evidence for the contagion effect of loneliness.

Social Impact of Loneliness



- Decreased productivity
- Increased healthcare use and expenditures
- Admission to long-term care
- Negative perception of neighbourhoods
- Reduced feelings of safety, trust, and social cohesion
- Loneliness "contagion"

 Loneliness can spread within social networks by affecting how we perceive and treat one another. Those on the periphery of social networks are the most affected (Cacioppo, Fowler, & Christakis, 2009, Journal of Personality & Social Psychology).

Loneliness is now a 'global public health concern,' says WHO

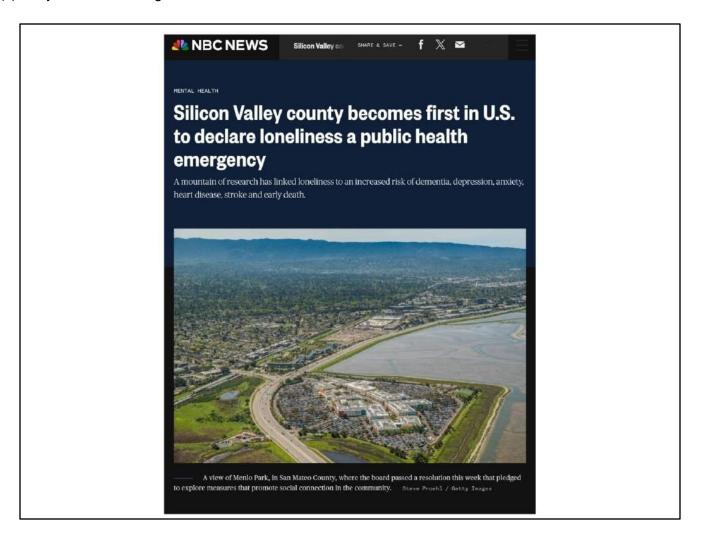


By Sarah Do Couto • Global News
Posted November 16, 2023 11:40 am • Updated November 16, 2023 11:41 am • 2 min read

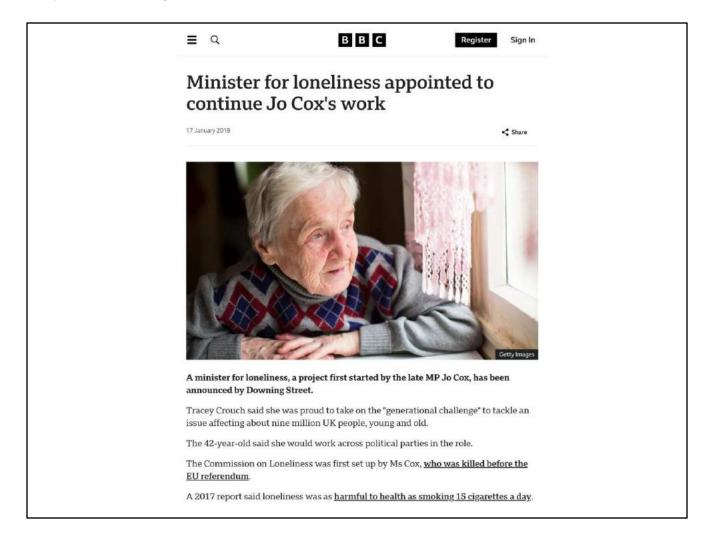


The World Health Organization (WHO) Wednesday announced the Leaders Commission on Social Connection. – Nov 15, 2023

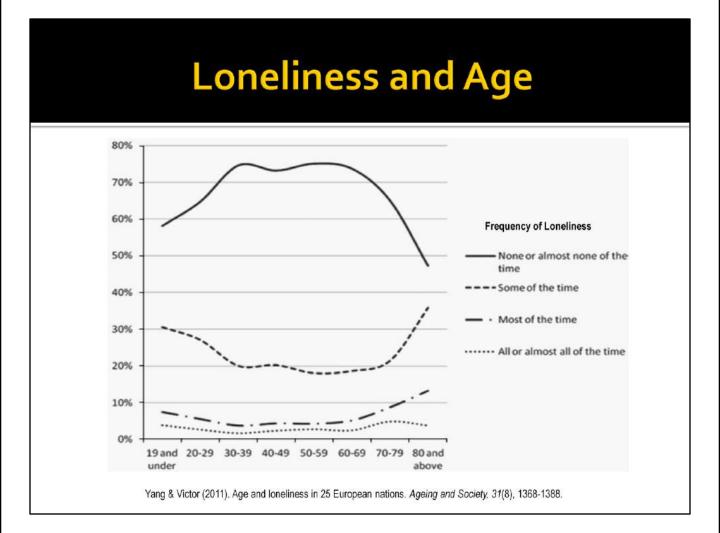
 Loneliness is such a strong risk for health and social problems that the WHO has declared it a global public health concern.



Some cities have declared loneliness a public health emergency.



- The UK government was one of the first to take this problem seriously and even appointed a "Minister of Loneliness" in 2018.
- See "The Loneliness Bureau" (New Statesman, January 2024).



- Despite the previous image showing an elderly person, we should remember that loneliness can happen to anyone, with the highest rates among younger people and the oldest-old.
- In fact, younger people today are lonelier than previous generations of younger people.
- Recent studies have found a more nuanced relationship between age and loneliness, but there still appears to be a u-shaped curve.

Sexual and Gender Minorities



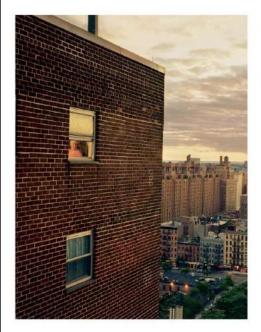
- Many are resilient and have healthy, satisfying relationships
- But more likely than heterosexual seniors to be
 - isolated and lonely
 - afraid of having no caregivers
 - afraid of dying alone
- Bisexual and transgender seniors at greatest risk
- Three broad risk factors
 - sociodemographics
 - marginalization/invisibility
 - minority stress

Demographic Factors



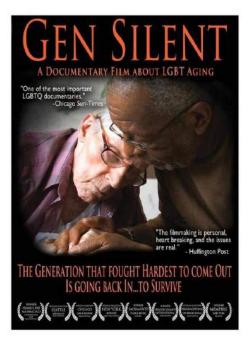
- Smaller pool of potential partners
- More likely to be single and unmarried (men especially)
- Less likely to have children
- More likely to be estranged from families of origin
- Lower socioeconomic status
- Greater disability
- Evidence for the relationship between loneliness and SES comes mostly from other countries.
 Canada does not yet have much data on this, at least for older sexual and gender minorities.
- Some sexual orientation groups tend to have lower SES (e.g., lesbians; bisexuals).

Living Arrangements



- More likely to live alone, even when partnered (especially men)
- More likely to live with someone other than a partner
- Implications for
 - attachment and feelings of belonging
 - social resources
 - quality of support
 - coping with stigma
- Greater housing insecurity
 - lower income
 - housing discrimination
- Some may live alone to reduce exposure to stigma.
- Living with a partner may provide a more intimate, secure, and stable relationship.
- Those living with a partner also have more opportunities to do things together and not experience the stress of hiding their sexual orientation or relationship.
- Quality of support received from living with others, like friends or family, may not be as strong as that received from a live-in partner.
- Easier to cope with stigma when you have the support of a live-in partner.
- For more info on loneliness and living arrangement, see Kim & Fredriksen-Goldsen (2016, *The Gerontologist*).
- Housing discrimination: co-ops and stratas may not be very welcoming. Many residents have chosen non-kin family members they would like to live with, but they are not legally recognized. So the residents may be accused of overcrowding.
- Due to lower SES, some may be forced to leave neighbourhoods where they have developed lifelong relationships.

Invisibility in Care Settings



- Ignored or dismissed
 - "We don't have people like that here."
 - "It's not our business."
 - "Residents will be offended if you ask."
- Tolerating but not affirming
 - No visible signs or gestures of inclusion
 - Disinterest in SGM experiences
 - No attempt to help integrate with others
- Chosen families not recognized
- Benign neglect
- Self-silencing, returning to closet
- Invisibility in care is another big issue, which featured prominently in the documentary *Gen Silent* (highly recommend watching).
- I have worked with organizations that have been resistant to my suggestion to ask about sexual orientation in surveys about residents' well-being. Their reasoning is that the question would offend residents or make them suspicious. My response was that LGBTQ residents might be offended that nobody cared to know about their experiences, or even cared to know about their presence in the facility.
- In some facilities, staff might make no attempt to monitor cliques, which seem to be everywhere and at all ages!
- Benign neglect: thinking that you are doing the right thing and being respectful by minding your own business not paying attention to the unique experiences and challenges of sexual and gender minority residents.
- This can be profoundly isolating and invalidating and make a person feel like they are unimportant and do not exist.
- In some cases, LGBTQ residents might also be afraid of being harassed or abused by staff or other residents.

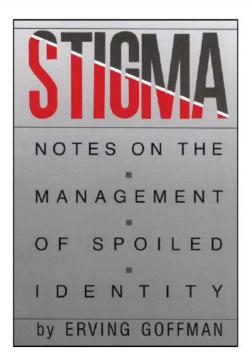


- I think there is a prevailing attitude that older people, including those in the LGBTQ community, lack sexual desire or should not express it because it is 'inappropriate'.
- This invalidates their experiences and deprives them of a fundamental source of social connection and happiness.



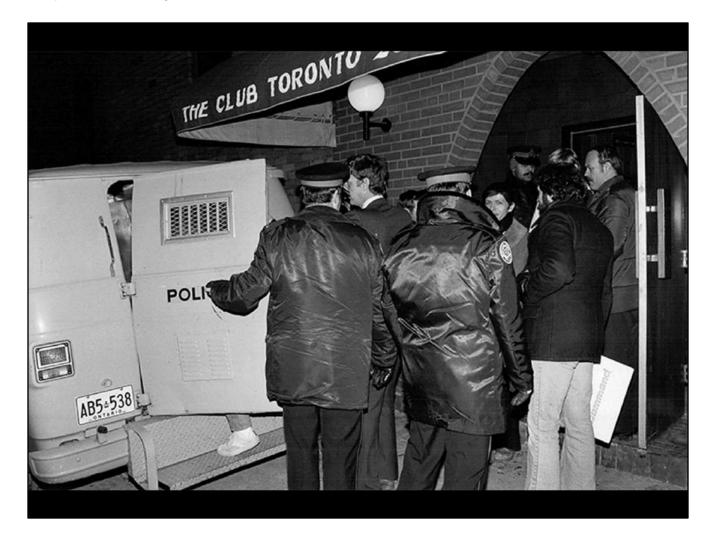
We should reduce barriers to partnered living arrangements.

Minority Stress



- Cumulative stress of living with a stigmatized identity
- Distal stress
 - current and past discrimination, harassment, or violence
 - intra-minority stress (e.g., ageism within LGBTQ community)
- Proximal stress
 - concealment
 - internalized stigma
 - rejection sensitivity

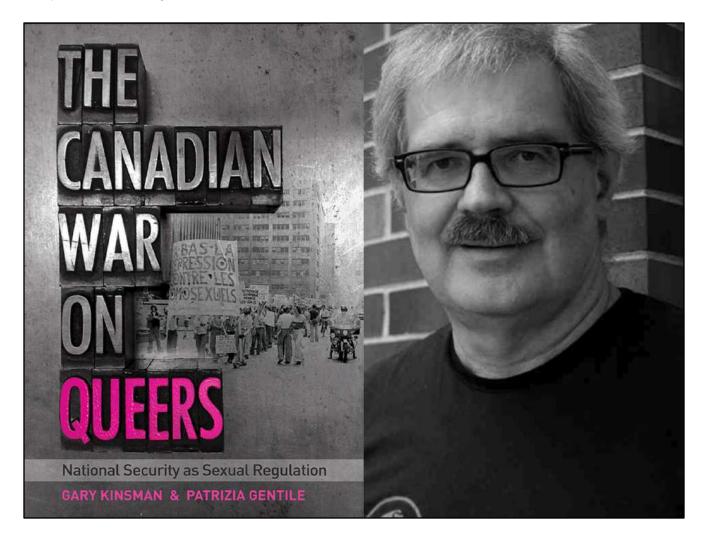
- Minority stress is another risk factor for loneliness in older sexual and gender minority adults.
- Rejection sensitivity: tendency to anxiously expect, readily perceive, and intensely react to social rejection, even if it is not present.



- Despite being a more progressive country, Canada has a long history of LGBTQ discrimination.
- Many SGM older adults came of age when same-sex behaviour was highly stigmatized and criminalized, as we saw with the raids of gay establishments from the late 6os until as recently as 2004.



- Up until 1969, LGBT Canadians could be imprisoned for the crime of 'gross indecency', which
 was vaguely defined.
- Most prominent example: George Everett Klippert. In 1966, he was declared a dangerous sexual offender after admitting to consensual sex with several men. He was given an indeterminate sentence on the grounds he was likely to have sex with men if released. The conviction was upheld by the Supreme Court.
- He was released in 1971 after the government decriminalized homosexual acts between consenting adults.



- There were also the Gay Purges from the 1950s to 90s, when people suspected of homosexuality were expelled from the Canadian Armed Forces, RCMP, and civil service under the pretext of national security concerns.
- They government saw homosexuality as a 'character defect' and believed that LGBT people could be targets for blackmail by the Soviets.
- Investigations were intensive and involved extreme questioning tactics. People were often forced to confess, spy on their co-workers, and identify others who might be 'security threats' based on their sexual orientation.

ton said he wants assurances that the Kemano project can proceed unimpeded or the company will sue to recoup the \$500-million it has spent already.

ground if we had not had an agreement which turns out not to be an agreement."

He said Alcan's shareholders want to know what will happen to the "\$500-million invested in

Nechako River in south-central B.C. last May after the Federal Court of Canada ordered a full environmental review. Alcan is awaiting the outcome of an appeal heard by the Federal Court of Appeal in February,

Mounties staged massive hunt for gay males in civil service

Police kept files on 8,200 during Diefenbaker-Pearson era

The Canadian Press

The RCMP launched a massive hunt for male homosexuals in 1959 that identified 8,200 indiriduals by the late token and to

relied on unidentified sources, but now the federal government for the first time has released documentation. The material, obtained by The Canadian Press

The RCMP Security Service knew of at least one clerk at the Canadian embassy in Moscow who was photographed by the KGB in a homosexume acximi



 The government even commissioned the so-called 'Fruit Machine' to try to identify and expel LGBT people.

The Fruit Machine: Why every Canadian should learn about this country's 'gay purge'

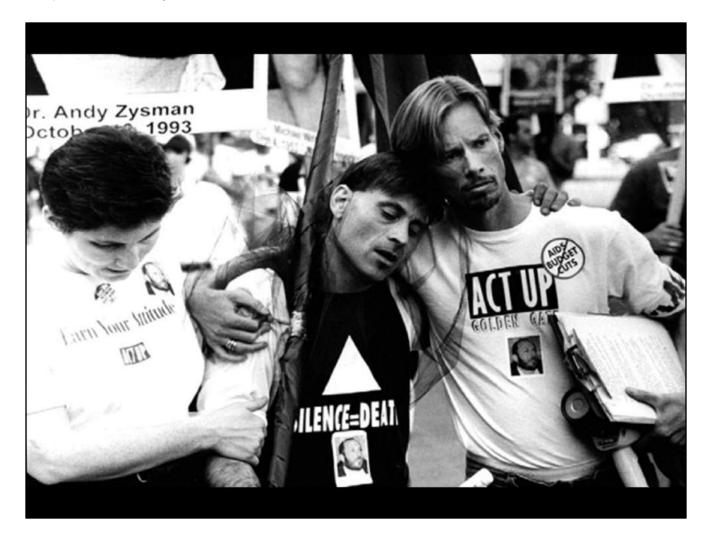
New documentary examines the legacy of Canada's notorious homosexuality detection device



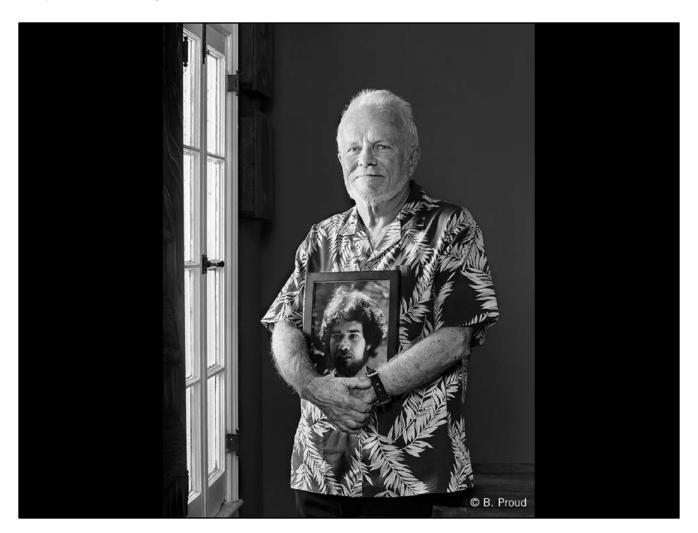
Peter Knegt · CBC Arts · Posted: May 30, 2018 9:40 AM PDT | Last Updated: June 6, 2022



- Many suffered great stigma and shame from friends and family after being publicly outed and dismissed. Some were assaulted, even sexually, by former colleagues. Many became depressed, developed PTSD, turned to drugs and alcohol, and even died by suicide.
- Those who survived carry this stigma with them today, which has various implications for their relationships.
- Excellent documentary about this: *The Fruit Machine* by TVOntario.

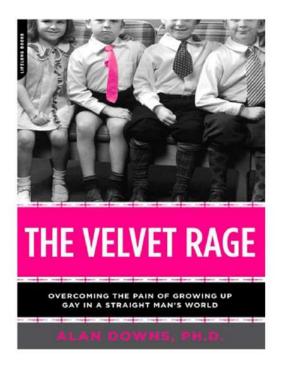


- In the 1980s and 90s, we also witnessed the devastating AIDS epidemic, which killed countless people and also increased stigma, especially against gay men.
- Some also felt let down by the government, which they felt did not act fast enough to contain the epidemic (arguably, this was more of an issue in the US than Canada).



 Some people have yet to fully recover from the profound grief of losing numerous partners and friends at a young age, contributing to a deep sense of loneliness in their later years.

Minority Stress: Social Impact



- Concealment
 - guardedness, inauthenticity, relationship conflict
- Internalized stigma
 - mistrust, unrealistic standards and expectations, relationship dissatisfaction, depression
- Rejection sensitivity
 - stigma preoccupation, misinterpretation of social cues, social anxiety, social inhibition, aversive social behaviour
- The stigma and discrimination I have described can lead to reactions that negatively impact the formation and maintenance of satisfying relationships.
- Some people come out later in life and feel uncomfortable interacting with other older SGM.
 This can feel very isolating.
- Relationship conflict can occur when one person in a couple does not want to do things in public for fear of being identified or stigmatized.
- Unrealistic standards and expectations for self and others can be an over-compensation for perceived inferiority.
- IH can lead to cynicism about same-sex relationships, impacting commitment (e.g., giving up too easily when there is relationship conflict).
- Due to internalized ageism, some may retreat from social activities, fearing they will be perceived as 'old and pitiable'.

Archives of Sexual Behavior (2022) 51:2269–2298 https://doi.org/10.1007/s10508-021-02132-3

ORIGINAL PAPER



Minority Stress and Loneliness in a Global Sample of Sexual Minority Adults: The Roles of Social Anxiety, Social Inhibition, and Community Involvement

Eddy M. Elmer 1 . Theo van Tilburg 1 . Tineke Fokkema 2,3 .

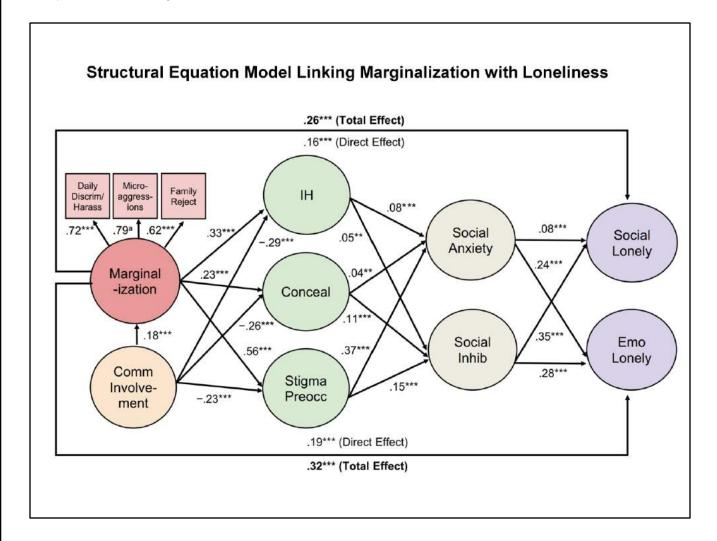
Received: 22 November 2020 / Revised: 29 June 2021 / Accepted: 12 August 2021 / Published online: 27 January 2022 © The Author(s) 2022

Abstract

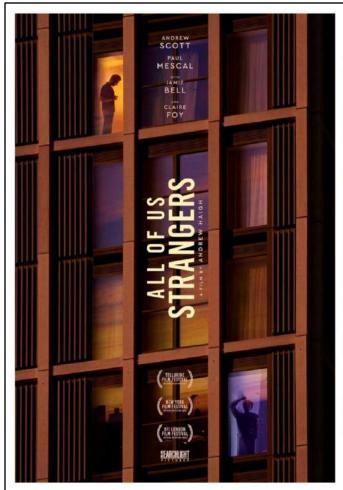
Research suggests that loneliness among sexual minority adults is associated with marginalization, but it is unclear which processes may underlie this relationship. This cross-sectional study examined five possibilities: stigma preoccupation, internalized homonegativity, sexual orientation concealment, social anxiety, and social inhibition. The study also examined the possible protective role of LGBTQ community involvement. Respondents were 7856 sexual minority adults aged 18–88 years from 85 countries who completed an online survey. Results of structural equation modeling indicated that marginalization was positively associated with both social and emotional loneliness, and that part of this relationship was indirect via proximal minority stress factors (especially stigma preoccupation) and, in turn, social anxiety and social inhibition. Moreover, while LGBTQ community involvement was associated with greater marginalization, it was also associated with lower levels of proximal stress and both forms of loneliness. Among those who were more involved in the LGBTQ community, the associations between marginalization and proximal stress were somewhat weaker, as were those between stigma preoccupation and social anxiety, and between social inhibition and social loneliness. In contrast, the associations between concealment and social anxiety were somewhat stronger. Model fit and patterns of association were similar after controlling for the possible confounding effect of dispositional negative affectivity, but several coefficients were lower. Findings underscore the continuing need to counter marginalization of sexual minorities, both outside and within the LGBTQ community, and suggest possible avenues for alleviating loneliness at the individual level, such as cognitive-behavioral interventions targeting stigma preoccupation and social anxiety.

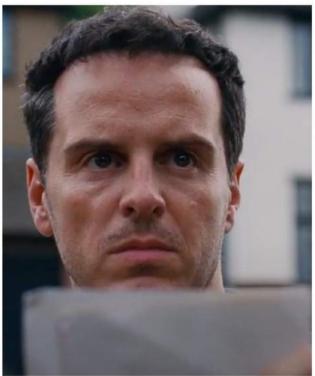
Keywords Sexual orientation · Lesbian/gay/bisexual · Stigma · Harassment · Discrimination

 In a recent study with nearly 8,000 from 85 countries, I found that minority stress is associated with loneliness, and part of this association is through the impact of social anxiety and social inhibition.



- In another study (under review), I found that this model is valid across 4 age groups, from emerging to older adults.
- Of course, the relationships likely work the other way, too, considering how loneliness can alter social
 cognition. So loneliness likely contributes to anxiety, inhibition, internalized negativity, concealment,
 stigma preoccupation, and perhaps even greater perceptions of stigma and discrimination.
- Minority stress can also cause depression, which in turn causes loneliness through social withdrawal and negative perceptions of others.
- Notably, I also found that LGBTQ community involvement is associated with greater marginalization, and that this relationship is stronger for younger people (perhaps due to their participation in more public activities).
- Despite this risk, community involvement appears to be protective against IH, concealment, and stigma preoccupation. Moreover, for those more involved in the community, several of the relations in the model are weaker.
- There is also a negative relationship between community involvement and loneliness, but not too strong. This makes sense because the important thing is not whether you are involved in the LGBTQ community per se, but whether you feel supported and accepted by the community.





- For a deeper and more meaningful insight into loneliness and aging, I strongly suggest watching *All of Us Strangers*, which is in theatres now. This film delves into the nuances of loneliness, including its connections to aging, parental acceptance, bullying, unresolved grief, and its impact on our current relationships.
- Warning: don't watch if in a sad mood!



• The Guardian had a great interview with the film's director. I think this quote speaks to the kind of loneliness that many middle-aged and older queer people feel today.

Admit and accept loneliness Understand and reduce impact of minority stress Address maladaptive social cognition Create opportunities for new relationships Enhance coping skills

- Addressing maladaptive social cognition: cognitive-behavioural interventions are most effective here.
- Rekindling old relationships may be easier than starting from scratch. When people do an
 inventory, they are often surprised by the number of relationships they have allowed to go
 dormant.
- Creating opportunities for new connections: following Cacioppo's E.A.S.E. approach may be helpful here (i.e., gradually easing back into social life, starting with non-threatening social encounters). Others can help by providing motivation and support in the initials stages (e.g., accompanying someone to a seniors centre so they do not feel self-conscious).
- Unfortunately, not all loneliness can be alleviated, so enhancing personal coping skills can be helpful (e.g., distraction, mindfulness, 'flow' activities, parasocial relationships). See *Emotional* Fisrt Aid by Dr. Guy Winch.

Canada's LGBTQ2S+ safe spaces are disappearing at the worst possible time



By Heather Yourex-West • Global News
Posted March 2, 2023 4:28 pm · Updated March 5, 2023 6:55 pm · 4 min read



WATCH: There are growing concerns for historic "safe spaces" that are meant for members of Canada's LGBTQ+ community. Places like gay bars and villages are slowly vanishing, especially in the face of gentrification. As Heather Yourex-West reports, the closures couldn't come at a worse time – as the community is increasingly coming under attack – Mar 5, 2023

- It is vital to safeguard our safe spaces, which are disappearing due to gentrification and overreliance on technology to meet people.
- Many older adults miss the sense of solidarity and camaraderie they felt as they banded together during the LGBTQ rights movements in the past.
- Having safe spaces is critical now more than ever, as there has been a resurgence of negative sentiment against the community.



 Preserving existing social spaces and building new ones is vital because our need for community does not fade as we age.

