

---

## HEALTHY AGING: CONSEQUENCES OF LONELINESS AND ROLE OF BELONGINGNESS

---

Dr. Shagufta Afroz\*

---

Assistant Professor, Department of Psychology, Sant Vinoba P.G. College Deoria U.P.

---

Article Received: 10 March 2026

Article Revised: 30 March 2026

Published on: 20 April 2026

\*Corresponding Author: Dr. Shagufta Afroz

Assistant Professor, Department of Psychology, Sant Vinoba P.G. College Deoria U.P.

DOI: <https://doi-doi.org/101555/ijarp.8401>

---

### ABSTRACT

*Healthy aging is not only an increasingly multidimensional process that goes beyond physical sustainability to address emotional, social and psychological well-being but also contributes greatly to the well-being of the nation as a whole. This paper explores the consequences of loneliness and the essential role of belonging in promoting healthy ageing. Drawing insight from Cacioppo et al., Donovan et al, the discussion highlights that social isolation and loneliness in older adults is strongly related to cognitive decline, cardiovascular risk, depression, and increased mortality. On the other hand, belongingness – defined as the innate human purpose of feeling accepted, valued and connected – emerges as a key facilitator of resilience, emotional regulation and cognitive motivation in the older generation. Drawing support from Bowlby's attachment theory, the paper also highlights how social relationships provide protective effects on mental and physical health by nurturing a sense of purpose in living and play an important role in reducing psychological stress. In due course, development of social connectedness, enhancing a sense of community involvement and supportive networks play unavoidable role in reducing the silent epidemic of loneliness and ensuring meaningful, healthy aging.*

**KEYWORDS:** Healthy aging, Loneliness, Social insulation, Belongingness

It is undoubtedly true that healthy and independent older people play a very important role in the well-being of families and communities. There is a very common myth of presenting them as unquestioning recipients of social and health services. According to WHO, at the biological level, aging results from the accumulation of various types of molecular and cellular damage that compound over time and that this effect is inevitable. This leads to a

steady decline in physical and mental capability, with growing risk of complications and ultimately death. These changes are neither direct nor consistent, and are only related to a person's age over time. The diversity of changes observed in older people is not subjective. Beyond natural changes, aging is often associated with other life changes such as withdrawal, transfer to more enforced cover, and the death of gunmen and companions. As life expectancies increase, the challenge is not just about living longer but also about leading a healthier and more meaningful life in old age. Healthy aging, as defined by the World Health Organization (WHO), is "the process of developing and maintaining functional capacity that enables well-being in older age." WHO is also working on the United Nations Decade of Healthy Aging (2021 to 2030). The Decade of Healthy Aging is an opportunity to bring together governments, civil society, international agencies, professionals, academics, media and the private sector for tenfold joint, catalytic and cooperative conduct to improve the lives of older people, their families and the communities in which they live. There are many factors that influence healthy aging. In this piece, I will examine the role of belonging i.e. relationships with family, gunsmiths and community as it relates to older people. It should also be noted that while physical health, nutrition and access to health care remain central pillars to a healthy journey, an often overlooked dimension of healthy aging is belonging – the deep mortal need to feel connected, valued and part of a community. Belonging can be understood as a feeling of being happy or comfortable as part of a particular group and having good relationships with other group members because they know and accept you. A sense of belonging is one of humanity's most primal needs. This is a book about humanity, loyalty and belonging, and about the ties that bind us to places and to each other. Many studies have shown that disorganization in social relationships has a negative impact on everyone's sense of belonging. Mental health, or inner well-being, is essential to your overall health and quality of life. It affects how we think, feel, act, make choices, and relate to others. Managing social isolation, loneliness, stress, depression and mood through therapy and tone-care is important for healthy aging.

Aging is traditionally associated with wisdom and spiritual growth. While in the past few decades, when joint families mostly existed, elder family members were valued and appreciated, modernization and urbanization are creating psychological stress, when traditional places of authority (for example, family elders, counselors) are being eroded or neglected. Loneliness, a silent epidemic, affects internal health and is linked to increased risk of depression, cognitive decline, and indeed early death. Loss of identity is common when

retired or widowed elders feel that they no longer "matter" to their family or community. All these factors arise from the primal need for belonging. As people age, changes such as vision loss, memory loss, disability, trouble getting around, and loss of family and companions can make social relationships fragile to maintain. This makes older people more likely to feel socially isolated or lonely. Although they sound similar, social isolation and loneliness are different. Loneliness is the distressing feeling of being alone or abandoned, while social isolation is the lack of social connections and interacting with many people on a regular basis. Several recent studies (Cacioppo JT and Cacioppo S. 2014 and 2021) have shown that older people who report social isolation or loneliness show poorer cognitive function later in life. Evidence Based Nursing 2014; Studies show that older adults who are socially isolated or feel lonely have an increased risk of heart problems, depression and cognitive decline. Jessie Hu et.al (2021) demonstrated in their cross-sectional study that social isolation, loneliness, and lack of social support may increase the risk of cardiovascular disease among older adults. More than 11,000 adults over the age of 70 found that loneliness was associated with a lower risk of heart problems. Another recent study by Lindsay C. and Andrew S. (2018) established that socially isolated older adults suffered from more chronic lung conditions and depressive symptoms than older adults with social support. Social isolation was associated with several health-related functioning, and loneliness was associated with smoking cessation at 10 times follow-up in older English adults. Feeling lonely can also affect memory. A study by Nancy J. Donovan et. al (2017) showed that over 8,000 adults over the age of 65 found that loneliness was associated with acute cognitive decline. Many other psychosocial challenges threaten seniors such as social isolation, especially in metropolitan areas and among "empty nesters." Ageism Internal criticism about getting older can affect **tone -worth** – Feelings of not being part, retirement, loss of a partner, or physical decline can deprive elders of meaningful space, which affects **voice-identity** – Concerns about mental health Many older adults do not seek help due to lack of awareness or fear of judgment. These issues directly compromise the brain's adaptability, making seniors more vulnerable to depression, anxiety, and cognitive dysfunction.

**Belongingness as a facilitator** – Research also shows that being socially active can benefit older people. A study of more than 3,000 older adults found that forming new social relationships was linked to better physical and psychological health. Being social can also help you reach your exercise goals. A study by Stephanie S. et all (2019) showed that older people who had regular contact with friends and family were more physically active than

those who did not. Belonging can provide people with considerable social support, which directly promotes happiness and health. In fact, hundreds of studies have proven that social support has beneficial effects on the cardiovascular system, endocrine system, cardiovascular system, and indeed gene expression (Cacioppo and Patrick, 2014; Uchino et al., 2025). Staying connected with others can improve your mood and improve your overall well-being. Stay in touch with family and gunsmiths in person or by phone. Setting aside time each day to connect with others can help you stay connected. Meeting new people by taking a class to learn new things or brush up on a skill you already have. Against this background, John Bowlby's (1969) attachment proposal provides a helpful framework to account for the importance of familiarity and social relationships. Bowlby defined attachment as "an enduring mental association between mortal beings" (p. 194). Bowlby observed social relationships and argued that attachment functions arise from an inherent need for safety and security of all mortal beings, and which is essential for physical, brain, social, and emotional well-being (O'Kane, 2010). To date, the literature on attachment dispositions has focused primarily on the early relationship between parent and child, but Bowlby conceptualized attachment dispositions as applying across the life span (Bradley & Cafferty, 2001). Indeed, given the increasing likelihood of isolation, loss, and vulnerability with aging, the attachment proposal is particularly applicable to older adults (Bradley & Cafferty, 2001).

To conclude, it is very clear that belongingness provides emotional regulation social support that helps in controlling emotions and stress. The feeling of belonging and feeling part of a community brings meaning and clarity to life events for everyone regardless of their age. Undoubtedly people who have stronger social bonds can cope better with illness, grief, and loss. Cognitive stimulation not only controls stress and pain but also enhances social memory, language and administrative abilities. Wilkinson and Marmot (2003) argue that as social beings, we not only need good material conditions, but we also need to feel valued and appreciated. We need fewer guns, more sociable societies, and we need to feel useful. Without these social determinants, older people – like all mortal beings – become prone to despair, which adversely affects physical health.

## REFERENCES

1. Benjamin C. and Edward O. L. (2015)The health benefits of network growth: new evidence from a national survey of older adults, 125:94-106. 2015 Jan: doi: 10.1016/j.socscimed.2013.09.011. Epub 2013 Oct 2.
2. *Bowlby J. (1969). Attachment. Attachment and loss: Vol. 1. Loss. Basic Books.*

3. Bradley J. M., Cafferty T. P. (2001). *Attachment among older adults: Current issues and directions for future research. Attachment & Human Development, 3(2), 200–221. DIO 10.1080/14616730126485*
4. Cacioppo T. & Cacioppo S.(2014) Social Relationships and Health: The Toxic Effects of Perceived Social Isolation, *Social Personal Psychological Compass*, 2014 Feb 4;8(2):58–72. doi: 10.1111/spc3.12087
5. Cacioppo JT and Cacioppo S. (2021) A study of Social isolation, social support, loneliness and cardiovascular disease risk factors: A cross-sectional study among older adults, *Int J Geriatr Psychiatry*. 2021 Nov; 36(11):1795-1809. doi: 10.1002/gps.5601. Epub 2021 Jul 21.
6. Lindsay C and Andrew S. (2018) Social Isolation, Loneliness, and Health Behaviors at Older Ages: Longitudinal Cohort Study *Ann Behav Med* 2018 May 31;52(7):582-593 DOI: 10.1093/abm/kax033
7. Nancy J Donovan et all (2017) Loneliness, depression and cognitive function in older U.S. adults, *Int J Geriatr Psychiatry*. 2017 May;32(5):564-573.b doi: 10.1002/gps.4495.
8. O’Kane B. M. (2010). *Loss and mourning: A life cycle perspective. In Brandell J. R. (Ed.), Theory and practice in clinical social work (2nd ed., pp. 665–692). SAGE.*
9. Stephanie S., Marta J. et all (2019), Associations between social isolation, loneliness, and objective physical activity in older men and women, 2019 Jan 16;19(1):74. doi: 10.1186/s12889-019-6424-y.
10. Uchino, B., Ong, A., & Sbarra, D. (2025) Relationships, social support, and health. In N. Schneiderman, T. W. Smith, N. B. Anderson, M. H. Antoni, F. J. Penedo, T. A. Revenson, & A. F. Abraído-Lanza (Eds.), *APA handbook of health psychology, Vol. 1. Foundations and context of health psychology* (pp. 589–609). American Psychological Association. <https://doi.org/10.1037/0000394-027>
11. Wilkinson R. G., Marmot M. G. (2003). *Social determinants of health: The solid facts. World Health Organization*