



SEEKING SOLITUDE

Motivations for
“Alone Time” among
Senior Living Residents

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The benefits of social engagement are well established, but less is known about the benefits of solitude. Solitude, or time spent alone, can be a meaningful and enjoyable experience. For some residents, alone time is an opportunity to think and reminisce, to pursue their personal interests, and to relax and recharge. Here's how several residents described the benefits of solitude:

“I value my alone time . . . it lets me do whatever I wish . . . none to please but myself.”

“I feel more organized, have time to think more about issues associated with responsibilities and how to solve them, can work on solo projects, hobbies, or activities. I can also reenergize after spending time with others.”

“Being alone is often an opportunity for me to recharge mentally, emotionally, and physically.”

“I stay in touch with my core values and with my feelings. I make my own agenda.”

These insights were collected as part of a survey on motivations for solitude and well-being among senior living residents, conducted by researchers from Mather Institute, Middlebury College, and UC Santa Cruz. It may seem counterintuitive to examine solitude within senior living, because residents in this type of housing are surrounded by social life and community activities. However, **residents differ regarding how much time they prefer to spend by themselves and with others, and it's important for communities to recognize what is important to both the Social Seekers and Solitude Seekers.**

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MOTIVATIONS FOR SOLITUDE

People choose to spend time alone for different reasons. For this study, senior living residents completed a survey that measured positive and negative motivations for solitude.



POSITIVE MOTIVATIONS FOR SOLITUDE

Characterized by an intrinsic desire to spend time alone for reflection, restoration, or personal interests.



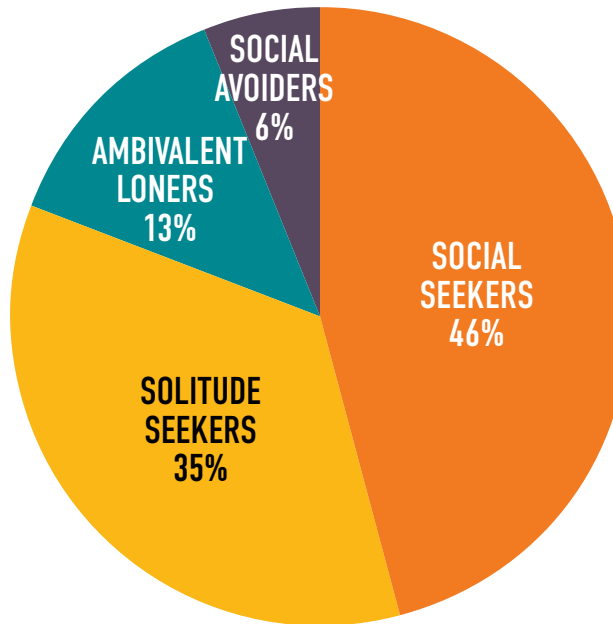
NEGATIVE MOTIVATIONS FOR SOLITUDE

Characterized by choosing to be alone for more protective reasons, such as avoiding social discomfort and feelings of exclusion.

Overall, the Solitude Seekers and Social Seekers tended to display greater well-being than the Social Avoiders and Ambivalent Loners.

Analyses revealed four motivational profiles for solitude among residents as indicated in the graphic.

SIZE OF THE SOLITUDE PROFILES



- **Social Seekers:** Lowest on both positive and negative motivations for solitude, which indicates a preference for spending time with others rather than alone.
- **Solitude Seekers:** Highest positive motivations for solitude and below average negative motivations, which suggests they are primarily motivated to spend time alone because they enjoy it.
- **Ambivalent Loners:** Higher than average positive and negative motivations for solitude, which indicates that they choose to spend time alone both for enjoyment and to avoid social discomfort.
- **Social Avoiders:** Highest negative motivations for solitude and average levels of positive motivations, which suggests that social anxiety or discomfort may motivate them to spend time alone.



MOTIVATIONS FOR SOLITUDE & WELL-BEING

These four solitude groups reported different levels of well-being. **Overall, the Solitude Seekers and Social Seekers tended to display greater well-being than the Social Avoiders and Ambivalent Loners.** Both Social Avoiders and Ambivalent Loners are motivated to spend time alone to reduce social discomfort.

Here's a summary of significant differences across the four groups on specific aspects of well-being:

SOLITUDE SEEKERS

- was one of the groups that had higher **Life Satisfaction** than the Social Avoiders and Ambivalent Loners.
- reported greater **Personal Growth** and **Psychological Richness** than the other three groups. (Psychological Richness is the belief that one has lived a life full of unique and enriching experiences.)
- reported greater **Autonomy** than Social Avoiders and Ambivalent Loners.
- reported lower **Loneliness** compared to the Social Avoiders and Ambivalent Loners.
- reported greater **Companionship** than the Social Avoiders and Ambivalent Loners.

SOCIAL SEEKERS

- was one of the groups that had higher **Life Satisfaction** than the Social Avoiders.
- also reported more **Psychological Richness** than Social Avoiders.
- also had higher **Autonomy** compared to Social Avoiders.
- reported lower **Loneliness** compared to the Social Avoiders and Ambivalent Loners.
- only had greater **Companionship** compared to Social Avoiders.

AMBIVALENT LONERS

- was one of the groups that had lower **Life Satisfaction** than the Solitude Seekers but higher than Social Avoiders.

SOCIAL AVOIDERS

- reported lower **Purpose in Life** compared to the other three groups.
- were less **Involved in Activities** within their senior living community than the other groups.



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WELLNESS AMONG SOLITUDE SEEKERS

The table below highlights the differences in well-being between Solitude Seekers and members of the three other motivational profiles. Up arrows indicate that Solitude Seekers had significantly higher levels of well-being relative to the comparison group. For loneliness, the down arrows mean that Solitude Seekers had significantly lower levels of loneliness relative to the comparison groups, which is a positive outcome.

WELLNESS AMONG SOLITUDE SEEKERS COMPARED TO THE OTHER THREE GROUPS

TYPE OF WELL-BEING	Compared to Social Seekers	Compared to Ambivalent Loners	Compared to Social Avoiders
Life Satisfaction		↑	↑
Personal Growth	↑	↑	↑
Psychological Richness	↑	↑	↑
Autonomy		↑	↑
Purpose in Life			↑
Loneliness		↓	↓
Companionship		↑	↑
Involved in Activities			↑

These findings indicate that the motivation underlying the desire to seek solitude is a key determinant of whether solitude is beneficial. **Positive motivations for solitude are unlikely to pose risks for older adults and are associated with levels of well-being comparable to people who prefer greater levels of social interaction.** Positive motivations appear to be particularly advantageous for one’s personal growth and psychological richness. However, negative motivations for solitude were associated with lower well-being, which suggests that some people may benefit from additional support to reduce social anxiety and other barriers that may impact their quality of life.

RECOMMENDATIONS

Based on the study findings, here are recommendations on ways to support well-being among residents who prefer to spend more time alone:

- **Inquire about preferences related to social engagements.**

When residents join the community, ask them about their preferred levels and types of social involvement and adapt recommendations for community involvement accordingly.

- **Create an inclusive and welcoming atmosphere.**

Some residents may choose to spend more time alone when they feel like they don't fit in, or if they worry about being excluded by cliques. Facilitate introductions between residents with similar interests and social preferences.

- **Offer comfortable options for solo dining.**

While some residents enjoy meals as a social event, others prefer a simpler experience, at least some of the time. Arranging dinner companions and making small talk can be draining when alone time is preferred.

- **Support lifelong involvement in interest areas.**

Residents may experience mental or physical changes, such as arthritis or vision impairments, that make it

challenging to continue to enjoy meaningful solitary activities. Help residents brainstorm ways to adapt their interests and identify potential ways to make accommodations.

- **Strive to make spaces and activities accessible.**

Difficulties communicating and interacting with others due to hearing loss and other challenges can lead residents to withdraw from social interactions.

- **Provide residents with resources to address social discomfort.** Some could benefit from conversations with a counselor or social worker if they are experiencing social anxiety or similar concerns.

- **Establish space to pursue individual interests.**

Group classes, such as fitness sessions and art lessons, are not equally appealing to everyone. Although it's not practical to have a designated space for every activity, open hours in art studios, workshops, and makerspaces can provide residents with an opportunity to pursue personal interests that may not be feasible within their residence (e.g., pottery).

RESPONDENT CHARACTERISTICS

GENDER

Female	71%
Male	29%

EDUCATION

High school/GED or less	3%
Some college	13%
Undergraduate degree	29%
Graduate or professional degree	55%

MARITAL STATUS

Married/Partnered	47%
Widowed	43%
Divorced/Separated	6%
Never married	3%
Cohabitation	
Yes	45%
No	55%

RACE/ETHNICITY

White, non-Latinx	98%
Other	2%

PERCEIVED HEALTH

Excellent	19%
Very good	35%
Good	29.5%
Fair	16%
Poor	0.5%

HOW THE STUDY WAS CONDUCTED

A survey was administered in late July/early August 2021 to residents at seven senior living communities. A total of 424 residents participated in the study, although 27 participants were excluded from the analyses because they did not complete the solitude measures.

Among the remaining 397 participants, ages ranged from 62 to 99 (average = 83). Participants were predominantly White (98%), female (71%), and in good to excellent self-reported health (84%). The sample was highly educated, with 84% attaining an undergraduate degree or more education. Most participants were either married/partnered (47%) or widowed (43%), and over half were residing alone within the senior living community (55%).



The survey included the following measures:

- **Motivations for Solitude:** Motivation for Solitude Scale Short-Form (Thomas & Azmitia, 2019)
- **Life Satisfaction:** Single-item Life Satisfaction measure (Cheung & Lucas, 2014)
- **Autonomy, Personal Growth, and Purpose in Life:** Subscales from Ryff's 18-item Psychological Well-being Scale (Ryff et al., 2010)
- **Psychologically Rich Life:** Psychologically Rich Life (Oishi et al., 2019)
- **Loneliness:** 3-item UCLA Loneliness Scale (Hughes et al., 2004)
- **Companionship:** Patient-Reported Outcomes Measurement Information System (PROMIS) Short Form v2.0 – Companionship 4a scale (available at www.healthmeasures.net)
- **Involvement in Activities:** Participants reported the extent they were involved in activities within their senior living community using a 5-point scale (1 = *Not at all involved*, 5 = *Extremely involved*).

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