

**Opening Statement**  
**Senator Susan M. Collins**  
**“Aging Without Community: Consequences of Isolation and Loneliness”**  
**April 27, 2017**

Good Afternoon. Today, we are shining a light on a growing phenomenon: the consequences of isolation and loneliness on older Americans who are aging without a strong sense of community. This is the first of a two-part series. In our next hearing, we will explore solutions that re-connect older people to communities.

One survey to assess isolation among seniors asks this question: If you had good news or an interesting story to tell, do you know someone with whom you could share it? Increasingly, older Americans are answering this question not with the name of a relative or a friend, but with the name of their cat or their dog. While studies have shown that pets can help alleviate loneliness, they shouldn't be an individual's only social contact. In fact, the science is clear that isolation and loneliness are dangerous to the health of our seniors. Having friends is as important for good health and well-being as food and water.

Isolation and loneliness can result in negative mental, behavioral, and physical health outcomes. Seniors who are lonely have a 45 percent greater risk of dying. They have a 59 percent greater risk of functional decline, causing deterioration in their mobility and ability to perform daily tasks. Isolation and loneliness are associated with higher rates of heart disease; a weakened immune system; more depression and anxiety; dementia, including Alzheimer's disease; and nursing home admissions. Prolonged isolation is comparable to smoking 15 cigarettes a day. I must say that was a statistic that really hit home to me.

Older Americans who are isolated or lonely are also more susceptible to financial scams and elder abuse. Last Congress, we uncovered the tragic story of a 77-year-old man from Maine who turned to the Internet for companionship. Lured by scam artists, he ended up in a European prison as a convicted drug smuggler. Without the persistent work of this committee and diplomatic negotiations, he would still be there today. The plight of this man and thousands of seniors in his shoes could have been avoided had he and others not been so susceptible due to their desire for simple companionship.

A number of risk factors for isolation and loneliness are age related -- including widowhood, chronic health conditions, and mobility impairments. The size of one's social network also decreases with age. I have heard seniors in my state compare this phenomenon to “watching the world die before you.”, as they lose more and more of their friends.

Maine is the oldest state in median age, is aging the fastest, and is among the most rural. An epidemic of loneliness and isolation is growing, and we face major challenges. Those who live Maine year round can be left isolated -- winter can keep them indoors for long stretches; homes are far apart; and transportation is often a barrier.

Established programs such as Meals on Wheels are reaching seniors in important ways. For many, Meals on Wheels is not just about food – it's about social sustenance, also. Seniors look forward to greeting the driver and having a bit of conversation. That's why I am concerned that the Administration's proposed budget cuts would affect programs like this one and many others that help keep our seniors connected. And if you look at it those cuts are really pennywise and pound foolish, because in the end they're going to cause more hospitalizations, more nursing home admissions, and poorer health outcomes.

The fact is the consequences of isolation and loneliness are severe: negative health outcomes, higher health care costs, and even death. The root problem is one that we can solve – by helping seniors keep connected with communities. Just as we did when we made a national commitment to cut smoking rates in this country, we should explore approaches to reducing isolation and loneliness, each has a real impact on the health and well-being of our seniors.