

Logotherapy for social isolation and loneliness of informal carers

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Informal carers are people who offer care and support to family members and friends who have a disability, mental illness, chronic condition, terminal illness, an alcohol or other drug issue or who are frail aged (Australian Institute of Health Welfare, 2023). As a result of the global ageing population, the demand for care from informal carers is expected to grow continuously. Carers are an integral part of the health system around the world, but they are more likely to experience detrimental mental health impacts. A recent systematic review and meta-analysis reported that the prevalence of informal carers of individuals with dementia reported loneliness was as high as 50.8% and 37.1% for social isolation (Liao, et al., 2024).

Although the two concepts are related, social isolation is an objective condition of being left out of society, whereas loneliness refers to the feeling of having a discrepancy between one's desired and achieved levels of social relations (Javis, et al., 2020). Being an informal carer, the status of social relations is likely to be disrupted. The responsibility of caring for another one may limit one's time for social activities beyond their caregiving duties, contributing to social isolation [3]. In addition, sometimes the challenges faced by the carer were ignored and not empathized with by friends or family members, causing a lack of satisfaction in interactions apart from feeling deprived of social relations (Velloze, et al., 2022). This may further contribute to a sense of separateness from others and the world, showing a lack of meaning in life. While many studies have focused on interventions to reduce carer burden, few have investigated the impact of social isolation and loneliness on carers.

Loneliness is receiving greater attention and has been identified as a key public health concern. The

situation is further worsened during the COVID-19 pandemic (Ho & Chiang, 2024). Social isolation and loneliness are related to higher mortality and poorer physical and mental health. The World Health Organization suggests identifying effective interventions and strategies to address these issues at three levels: (1) individual- & relationship-level interventions; (2) community-level strategies; and (3) societal-level strategies (World Health Organization, 2021). Among the various interventions, logotherapy may have a high potential to address the issues as well as upscaling it to reach a wider target group by integrating with technology.

Logotherapy is a psychotherapy based on the meaning-focused existential philosophy of Viktor Frankl (Frankl, 2006). 'Logo' based on the Greek word "logos" as "meaning" (Schulenberg & Hutzell, 2008). The fundamental tenets of logotherapy advocate that (i) human life have meanings; (ii) human are motivated to search meanings in life; and (iii) there are meanings in life even in the most suffering situation (Frankl, 2006). The theoretical foundation of logotherapy has been well-validated. It has been successfully applied to various groups of patients (e.g., mental disorders, substance abuse, end-of-life) with positive and significant effects on their quality of life, life satisfaction, depression, anxiety, and life purpose (Thir & Batthyány, 2016).

Recently, there are increasing evidence of effectiveness of logotherapy on loneliness (Heidary, et al., 2022; Naghdi, et al., 2023). Logotherapy, particularly in group, was suggested to facilitate sharing of experiences with significant others, resulting in a genuine interpersonal connectedness (Heidary, et al., 2022). Logotherapy may be particularly helpful for

informal carers to tackle their loneliness by promoting a sense of purpose in their caring journey, through building genuine interpersonal connectedness with other informal carers and significant others.

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