



Loneliness: Human Nature and the Need for Social Connection, by John T. Cacioppo and William Patrick. New York, W.W. Norton, 2008, 288 pp., \$25.95.

Novelists, poets, and playwrights often detect the early form of a historically contingent change in a society's mood decades before social scientists recognize its expansion and try to measure its properties. In the 1953 play by Tennessee Williams, *Camino Real*, the beautiful Marguerite tells Jacques Casanova, one of her lovers, that all humans are lonely because betrayal is inevitable. One-half century later, John Cacioppo, a distinguished psychologist at the University of Chicago who has contributed in a major way to our understanding of the relations between biology and emotion, and William Patrick, former Science Editor at Harvard University Press and the founding Editor of *The Journal of Life Sciences*, placed this idea at the center of a wide-ranging and well-written, minimally technical discussion that can be easily assimilated by a general audience.

The presentation of the text, which does not represent a rigorously argued theory, rests on three premises scattered over a number of short chapters peppered with interesting case histories and transparent descriptions of scientific research from bacteriology, physiology, genetics, neuroscience, psychiatry, and all the social sciences. The first premise is that the feeling of loneliness is a subjective construction, which can have little or no relation to the objective conditions of a person's life. The second, more controversial, premise is that this judgment, rather than the biological state on which it rests, has a heritability of close to 0.5 when the evidence is based on questionnaires, such as the 20-item UCLA Loneliness Scale, which asks informants to report on their social isolation and absence of close ties to others. The third assumption alerts readers to the dangers of social isolation by suggesting that lonely individuals are at risk for obesity, high blood pressure, and a host of other undesirable physiological changes that scientists have attributed to child abuse, grinding poverty, and academic or vocational failure, often combined with an inherited bias for anhedonia.

The prose connecting these three ideas covers a broad swath of empirical research on animals and humans, including the Prisoner's Dilemma game, Harlow's research on infant monkeys raised by wire surrogate mothers, Frans de Waal's observations of chimpanzees, Bowlby's concept of attachment, and brain states influenced by neurotransmitters, such as oxytocin, that are measured by changes in patterns of

blood flow. The prose that unites this extraordinary diversity of evidence resembles Wittgenstein's definition of a game in which pairs of phenomena that share at least one feature are treated as members of the same semantic category. For example, the advantages enjoyed by the aggregation of bacteria and multicellular organisms are cited as reasons for the benevolent consequences of cooperation among humans. Many readers will be tempted to infer that most natural phenomena exemplify the toxicity of a solitary existence. However, some scholars would argue with the authors' claim that cooperation is the most adaptive option for humans, by citing evidence from college students playing laboratory games, which indicates that the motive to join with others to gain enhanced power over an "out group" often trumps the desire to cooperate in the service of benevolent ends.

A critical problem penetrating each chapter is the implicit assumption that loneliness is a unitary psychological state, i.e., an essence. The authors fail to acknowledge that those who report this feeling do so for very different reasons—some psychological, some biological, and some sociological. Therefore, individuals with the same high score on a loneliness scale can have different life histories and follow distinct life itineraries. Since the authors are probably aware of this fact, it is puzzling that they did not decide to parse this decontextualized concept into its many different states.

Drs. Cacioppo and Patrick appreciate that historical events have propelled loneliness into its current position of prominence, since they devote many paragraphs to the influences of industrialization, large cities with many temporary residents from varied ethnic groups, and the increasing confusion over the ethical standards that must be honored. These new conditions have made it easier for those suffering from fatigue, apathy, uncertainty, or sadness to decide that the cause of their distress is the absence of emotional connections. However, loneliness is a personal interpretation of a psychological state, and individuals from different cultures and historical eras will have alternative explanations for the same feeling. Some might decide they were ill; others might blame their mood on chronic poverty; many 15th-century continental Europeans would have decided that they had been bewitched. Loneliness has become a more frequent interpretation over the past 75 years because more adults in the United States and Europe live far away from childhood friends and relatives among neighbors they do not know, and the media's spin on the relevant psychological research im-

plies that an emotional bond to others is a *sine qua non* for mental health.

The book ends with four simple suggestions that should protect against the dangers of isolation: 1) try in measured steps to establish social contacts; 2) suppress a passive and adopt an active stance; 3) be selective in making connections; and 4) anticipate a benevolent outcome. The bold conclusion—reserved for the final pages—that the secret to happiness is to connect with others would be challenged by many earlier scholars who advised that a happy life required seeking the good, actualizing one's talents, honoring dead relatives, working harder, releasing repressed wishes, or committing to a religious faith. The final paragraph cites E.O. Wilson's hypothesis that humans are hardwired to invent a story to explain their current condition. Historical events during the last century have made a judgment of social isolation rather than sinfulness, membership in a demeaned social category, grinding poverty, a degenerate heredity, or a repressed sexuality the more persuasive narrative to explain bouts of apathy, depression, or discouragement.

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The author reports no competing interests.

Book review accepted for publication September 2008 (doi: 10.1176/appi.ajp.2008.08091320).

Remembering Home: Rediscovering the Self in Dementia, by Habib Chaudhury. Baltimore, Johns Hopkins University Press, 2008, 144 pp., \$40.00.

Caring for individuals with dementia is a formidable task. Preserving their health and basic functions is enormously demanding physically and emotionally for both families and residential care staff. To meet these demands, most long-term care facilities use the medical model of care and promote the social roles of "old" and "sick." Consequently, this deprives the residents of their familiar and meaningful context and offers few links with their personal or cultural past.

Remembering Home: Rediscovering the Self in Dementia makes a cogent argument for refocusing the care of the individual with dementia on the individual's "self." Central to this position is that the experience of the self is created through a dynamic, yet selective, learning process. Experienced events are not stored in memory directly from perceptions, and their storage in memory is not homogeneous. Instead, they are conceived through an interpretive process and are stored in memory through selective mechanisms so that certain memories can be retrieved more easily than others. For the most part, this is an unconscious process in which people are constantly forming their self-identities. Conscious reflection on past experience can be a creative act to construct the pieces of the past and give them additional content, context, and insights.

During dementia, self-identity is threatened by losses of physical and cognitive abilities and often relocation from a place to which one was attached. Beyond the internal changes, the process is affected by the social perception of what is acceptable or not. The ways in which individuals in the social circle of a demented person accept, admonish, or disparage a socially unacceptable behavior influence the per-

son's process of self-re-creation. Demented persons try to hold on to the identity they have known for years. However, this task becomes increasingly more difficult, and help needs to come from the environment. The question is, "What is the best way for people around the demented patient to help?"

Remembering Home: Rediscovering the Self in Dementia argues that reconstructing emotionally charged experiences can be an effective way of helping a person with dementia to recapture meaningful aspects of the person's self. Emotional experiences result in the most vivid autobiographical memories, likely to be recalled more often and with greater clarity and detail than neutral events (1). The resilience of emotional processes may be linked to evolution. Panksepp (2) suggested that the neural systems serving consciousness are layered. Affective consciousness is the most basic form of consciousness mediated by the periaqueductal gray matter-hypothalamic-limbic regions and shared by both humans and lower mammals. Unlike cognitive variants of consciousness, which rely on thalamo-neocortical processing, affective consciousness is instantiated almost exclusively in convergence zones of paramedian brain areas interconnected with the periaqueductal gray. Thus, affective states do not require neocortical readout and constitute the basic core sense of the self in both humans and lower mammals. This emotional core sense of self is the most primitive form of consciousness and provides an affective background on which cognitive variants of consciousness (i.e., thoughts and thoughts about thoughts) are built. The evolutionary layering of consciousness makes neural sense of the distinction between reason and passions, although the processes are thoroughly blended in the intact brain. Archaic neural structures are resilient and are less affected than neocortical structures in the early and middle phases of Alzheimer's disease and other cortical dementias.

In this book, Chaudhury suggests that individual or small group sessions using reminiscence of early emotional experiences can help the person with dementia to access aspects of the self and enable families and facility staff to understand the origins of the person's abnormal behavior.

Understanding of the self that underlies the difficult behaviors of persons with dementia can provide the platform on which to build and maintain relationships with these individuals. Most emotional experiences occur in early life. For persons with dementia, reality reverts to the distant past. They experience themselves as being in early childhood or early adulthood and talk about family or friends from those times in their lives. Socialization of self is influenced not only by interactions with other people but also by relationships with physical settings that define and structure everyday life. Since home is so central to our lives, memories of home are the powerful means for sustaining the sense of self.

After qualitative analysis of interviews with 13 individuals in four care facilities in Wisconsin, Chaudhury offers concrete recommendations on how to develop home stories and use them to engage persons with dementia. The book is exceptionally well written and provides both an informed and compelling argument for selfhood affirming care and a practical guide on enriching the practices of residential care facilities.

References

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