

# SUPPORTING PEOPLE TO OVERCOME *loneliness*

Dr Jonathan Andrews

*How do we help people who are very lonely?* Jonathan Andrews, a clinical psychologist and author of *The Reconnected Heart: How Relationships Help us Heal*, explains that it is the quality of relationships that positively impacts loneliness, not quantity. People need deep connection, not a large number of friends. Loneliness can lead to depression, insecure attachment and social phobia. Conversely all those three can lead to loneliness. Supporting people on the road to reducing loneliness therefore involves helping them to overcome insecure attachment, depression and social phobia. There are initiatives they can personally undertake; but we can help by taking an interest in them and making them feel valued. Churches can play a particular role in this by helping people understand how much they are valued by God.

Many people think that loneliness is a lack of connection with other people. They are half right, but they are also half wrong.

## LONELINESS IS NOT IN THE NUMBERS

The remedy for loneliness is certainly contact with others, and contact with a variety of people is helpful. However, loneliness is not simply a lack in the *number* of our friends and relationships. It is an impoverishment in the *quality* of those relationships. We don't really need contact with more people. Rather, we need deeper connection with the people who are already in our lives.

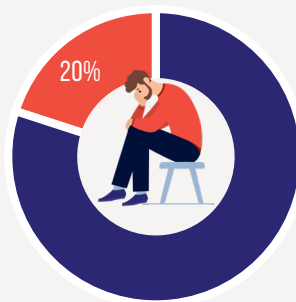
The scourge of loneliness is widespread. Over 20% of Australians report that they rarely or never feel like there are people they can talk to or turn to for help.<sup>1</sup> 25% said that they rarely or never feel that there are people who really understand them.

That doesn't mean of course, that a large proportion of the Australian population lives in complete isolation. Lonely people do have contact with others, but they feel unknown. It is this invisibility, this sense of being not understood by others that drives the feeling of loneliness.

We don't need many friends. Indeed, a large American study, reporting in 2023,



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UNDERSTAND THEM.**



**OVER 20% OF  
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THEY CAN TALK TO**

<sup>1</sup> Australian Loneliness Report (2018): A survey exploring the loneliness levels of Australians and the impact on their health and wellbeing. Swinburne University, p9.

found that the majority of people don't have a lot of close friends. 53% said that they had between one and four close friends, and there was not much difference in this respect between women and men. Yet, 72% of people who had at least one close friend said that they were either completely or very satisfied with the quality of their friendships.<sup>2</sup> It is true that our satisfaction in friendships increases when we have more friends, but the point remains, you can feel well-connected when you have only one true friend.

Conversely, people can be lonely at parties, lonely at work, and even lonely within their families. We can become lonely in spite of having contact with lots of people. So, if we think that it is simply a lack of contact at the heart of the loneliness problem, then our remedies may miss the mark.

## RISK FACTORS FOR LONELINESS

There many are documented risk factors for loneliness: Age, sex, race, education, employment, physical and socio-economic factors, and personality factors such as neuroticism.



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Taking each of these factors at face value, there is a logical reason for each of them. For example, older people might be more physically restricted and men in particular might have weaker bonds with friends. Thus age, physical functioning and sex might be factors that put people at risk of loneliness.

A closer inspection of all these risk factors exposes a more complex reality. For example, some studies suggest that there is a linear decrease in connection levels from a high point in our younger years to a low point in our older years. Whereas other studies indicate there is a "u shape" relationship between age and connection, with high levels at the beginning and end of life and a low point in our middle years.<sup>3</sup> Similarly, an older man who has lost his wife might be at risk, but he may be in regular contact with his adult children and grandchildren and because of this, might not be at risk at all.

The central theme across all risk factors is that in spite of the risk factor, the loneliness level is determined by the quality of relationship people have around them. In one large scale review of 109 studies on loneliness European researchers conclude that "...what it all boils down to in the end is partner or marital status, living arrangements, and social network characteristics. These factors are all consistently found to be among the strongest predictors of loneliness".<sup>4</sup>



Some of these factors are amenable to change. Others are not. Someone who is lonely cannot easily get married to remedy

<sup>2</sup> Goddard, I. (2023). What does friendship look like in America? Pew Research Center. <https://www.pewresearch.org/short-reads/2023/10/12/what-does-friendship-look-like-in-america/> <sup>3</sup> Barjakova, M., Garner, A., & d'Hombres, B. (2023). Risk factors for loneliness: A literature review. *Social Science and Medicine*, 334, p3-12 <sup>4</sup> Ibid.

# LONELY PEOPLE OFTEN CARRY EMOTIONAL, BEHAVIOURAL AND COGNITIVE BURDENS WITH THEM

their sense of being alone. Living alone is a factor that could be subject to change, but this amendment is not easily achieved. 'Network characteristics', however, can be changed and this represents an opportunity no matter what risk factors are operating.

## NETWORK CHARACTERISTICS

Network characteristics are defined as the number, variety and quality of connections we have with others. Higher frequency with a variety of different people appears to reduce loneliness, yet as we have discussed, it is the quality that is mostly needed. Quantity just increases the potential for connection to ameliorate loneliness, but doesn't guarantee the quality. Illuminating a stepwise approach towards increasing the quality of relationships is at the heart of this essay, but before I do so, it will be worthwhile discussing the internal barriers people face. These are the emotional, behavioural and cognitive burdens that lonely people often carry with them.

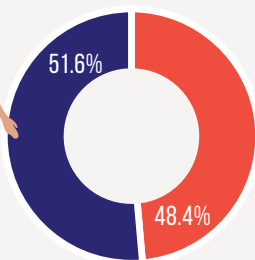
These conditions include insecure attachments, depression and social phobia. Left unaddressed these conditions pose a threat to the lonely person becoming more integrated. They may complicate and even thwart the recovery process altogether. Lonely people may have one, two or three

of these conditions, or they may have none of them. I will now discuss each of these in turn.

## INSECURE ATTACHMENT

Early in life, we learn to trust or not. We learn to approach caregivers or not. We become conditioned to feel at peace or experience anxiety around others. These are attachments and they are measured along two dimensions: Behavioural (approach/withdrawal), and mood (anxious/non anxious). Attachment patterns are not permanent, but they're often enduring patterns.

A secure attachment is defined as being one where we feel minimal anxiety and we learn to approach caregivers. Just over half the population (51.6%)<sup>5</sup> has this sort of attachment style. People who are securely attached have internalised a sense of interpersonal safety from their caregivers. From infancy they ventured out into the world to meet people, undertook risks and attempted challenging tasks. If they were ever unsettled, they would return to their caregiver for soothing, find some peace, and set out once more to discover what was around them. People with secure attachments find that their relationships are often stable and satisfying.



**51.6% OF AUSTRALIANS FEEL MINIMAL ANXIETY AND HAVE A SECURE ATTACHMENT STYLE. 48.4% HOWEVER, DO NOT.**

It is concerning that just under half of the population don't have this attachment (48.4% according to the data). People without secure attachments fall into three different categories. They can be avoidant, disorganised or preoccupied. Nearly 15%

<sup>5</sup> Madigan, S., Fearon, R. M. P., van IJzendoorn, M. H., et al., (2023). The first 20,000 strange situation procedures: A meta-analytic review. *Psychological Bulletin*, 149(1-2), 99-132

of the population have an avoidant attachment. Avoidant attachment is defined as low levels of anxiety accompanied by withdrawal from others. People with this sort of attachment style are likely to come across as aloof and distant, almost self-sufficient. A larger proportion of the population are those with disorganised attachment. This is defined by being avoidant as well, but fearful also. 23.5% of the population has this sort of attachment style. They're likely to come across as concerned, cautious, and tentative about involving themselves in groups. Lastly, there are those who are anxious but will approach others. Over 10% of the population have this preoccupied attachment.<sup>6</sup> They might ruminate on interactions they have with others and wonder if they're truly accepted by those around them.

When an attachment style is secure, there is protection from loneliness. People who are secure are better able to distinguish and make use of time by themselves. They're more likely to see it as solitude, and a time of quiet<sup>7</sup>. If an attachment style is insecure in some form, then there is an increased likelihood of a struggle with loneliness or even depression because they do not have the protection that a secure attachment affords them.

All attachments styles including insecure attachments (avoidant, disorganised and preoccupied) are by nature enduring, as mentioned; but they can change. The lonely person who has an insecure attachment pattern should seek out expert support. Regular contact with a psychologist or counsellor will be vital to help heal from this attachment pattern.

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Therapy typically involves engaging the person in a discussion about the history of their relationships, while also changing the way they think and act, and increasing exposure to people. It can be a slow process sometimes, but by incorporating professional people into the lives of people with attachment difficulties it gives them the best chance of healing from both the insecure attachment and the loneliness that is often associated with it.

## DEPRESSION

When lonely people find themselves having less interaction and finding enjoyment is difficult for them to achieve, their mood begins to flatten. At this point there is nothing to be alarmed about, but it is important to recognise that lonely people are at risk of poor mental health.

The relationship between depression and low levels of connection with others and has been well documented. Researchers from the University of Queensland gathered over 21,000 cases from the New Zealand Attitudes and Values Survey (NZAVS)<sup>8</sup>. They studied measures of social connectedness in one wave of data and measured this against how people responded to mental health questions in the next wave of data



<sup>6</sup> Ibid. <sup>7</sup> Mikulincer, M., & Shaver, P.R.(2014). An attachment Perspective on Loneliness. In *The Handbook of Solitude: Psychological Perspectives on Social Isolation, Social Withdrawal, and Being Alone*, First Edition. Robert J. Coplan and Julie C. Bowker (Eds). John Wiley & Sons. <sup>8</sup> AK Saeri, T Cruwys, K Barlow, S Stronge & CG Sibley, 'Social connectedness improves public mental health: investigating bidirectional relationships in the New Zealand Attitudes and Values Survey', *Australian and New Zealand Journal of Psychiatry*, vol. 52, no. 4, 2018, pp. 365–374.

the following year. Their conclusion was that:

*Social connectedness was found to be a stronger and more consistent predictor of mental health year-on-year than mental health was of social connectedness.<sup>9</sup>*

Not only is loneliness a potential prelude to depression. If depression becomes established, it may result in further loneliness.

Depression is a widespread condition. It occurs in 12% of men in their lifetime and is twice as common in the life of women (25%)<sup>10</sup>. If left untreated, it often spontaneously resolves itself. In a minority of cases (10%) some people never recover without treatment. It can co-occur with psychiatric conditions such as psychosis and mania. It is often linked to drug and alcohol problems, as well as a range of anxiety conditions, such as Generalised Anxiety in particular. Having one depressive episode puts a person at risk of having another one later in life.



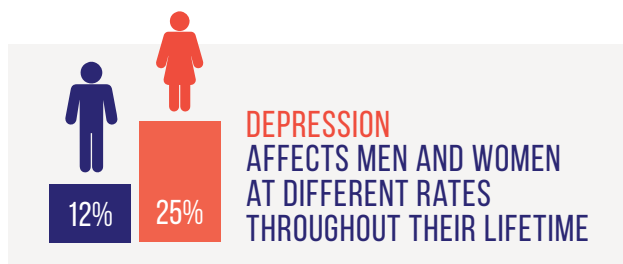
work, to initiate conversation, to attend events or go to church. However, when a lonely person becomes depressed, the energy departs. Symptoms such as fatigue and behavioural withdrawal emerge, effortful agreeableness morphs into low levels of hostility. The cardinal feature of depression, feeling sad, then supplements the lonely feelings experienced prior to being depressed. The concern here is that the lonely person will feel defeated in their

## THE FEATURE OF DEPRESSION, FEELING SAD, THEN SUPPLEMENTS THE LONELY FEELINGS EXPERIENCED PRIOR TO BEING DEPRESSED

Loneliness is a prompt to act, and if proactively acted upon, can prevent depression. Everyone has periods of loneliness and it is not an inevitability that loneliness will lead to depression. When a person is lonely but not depressed, they have 'petrol in their tank' enough to go to

attempts to connect, and other feelings will be added to sadness, including a feeling of hopelessness and worthlessness. Depression is the resignation that lonely people come to when they think there is no point to the connection process. They think "why try?" or "I'm not good enough". Depression appears to secure a sense of isolation, with depressed people being ten times more likely than the general population to report feeling lonely<sup>11</sup>.

So entwined is self-esteem to connection that some researchers have called self-esteem an "interpersonal monitor". Self-



<sup>9</sup> Ibid. <sup>10</sup> Treatment Protocol Project (2000). Management of Mental Disorders 3rd Ed. Sydney: WHO Organization Collaborating Centre for Mental Health and Substance Abuse. <sup>11</sup> Meltzer H, Bebbington P, Dennis M, Jenkins R, McManus S, Brugha T. Feelings of loneliness among adults with mental disorder. Soc Psychiatry Epidemiol. 2013;48(1):5-13.

esteem has been shown to rise and fall according to whether or not an individual feels included in a social situation.<sup>12</sup> When the interpersonal monitor detects the absence of connection, the lonely person's self-esteem goes down and they can feel depressed. At this point they find themselves in a mood-connection loop. The absence of connection consolidates the depressed mood, then the mind generates negative appraisals about themselves, their world and their future. Feelings of being hopeless and worthless may lead to suicidal thoughts at times. There is a danger in being stuck in this reciprocal relationship with depressed mood and loneliness: feeling depressed and withdrawing, then feeling even more lonely and withdrawing further.

As with people who have insecure attachments, a lonely person who becomes depressed needs the support of medical professionals. The message here is hopeful. If the lonely person can connect and get support, they can prevent future mental health problems, and even when there are signs of depression there are positive steps that can be taken.

## SOCIAL PHOBIA

The impact of loneliness on depression has been well researched. Less attention has been placed on the relationship between loneliness and social phobia.

Social phobia is defined as an intense fear of social scrutiny. People

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who have been diagnosed with this condition feel very self-conscious when interacting with others. This self-consciousness leads to changes in their beliefs, for example: "people find me boring". The fear and the beliefs then conspire to change behaviours. For example, people fearful of being judged might decrease self-disclosure and abstain from eye contact. They either avoid people completely or they change their behaviour when they are around others in the hope that they can avoid judgements and evaluations, all the while enduring pronounced physical symptoms such as racing heart rate, butterflies in their stomach and sweaty skin.

Social phobia is less widespread than depression. Roughly 11% of the Australian population experience social phobia in their lifetime. Left untreated it is a chronic problem that fluctuates over time.

Cognitive Behaviour Therapy (CBT) can be very helpful for people with this condition. It involves exposure to feared situations, increasing tolerance to distress, changing the coping strategies they use and challenging the thoughts they get. If it is left untreated, social phobia can compromise not only the ability to form and keep friendships but the ability to work effectively as the ability to relate to others is an essential skill in the workplace.

Researchers have noted that loneliness predicts future states of social phobia, paranoia and depression. In 2016



<sup>12</sup> Leary, M. R., Tambor, E. S., Terdal, S. K., & Downs, D. L. (1995). Self-esteem as an interpersonal monitor: The sociometer hypothesis. *Journal of Personality and Social Psychology*, 68(3), 518–530.

# ROUGHLY 11% OF THE AUSTRALIAN POPULATION EXPERIENCE SOCIAL PHOBIA IN THEIR LIFETIME AND FEAR SCRUTINY FROM OTHERS

researchers administered an online measure across a six month period. They confirmed that loneliness lends itself to further social phobia as well as paranoia and depression, but their examination also revealed that “earlier social anxiety (phobia) was the only predictor of future loneliness”.<sup>13</sup>

Once again, a bi-conditional relationship is evident: Loneliness predicts social phobia and social phobia predicts loneliness.

## THE IMPORTANCE OF PROFESSIONAL SUPPORT

Insecure attachment, depression and social phobia are common experiences for the lonely person or they become a problem for people when they have been lonely for prolonged periods.

When we meet with people who are lonely, these issues may become apparent. Whether it be insecure attachment, depression, or social phobia, it will be wise to incorporate professional people into a team of people who can support the lonely person. These conditions are diagnostic ones and can be treated. They are conditions that other people can help remedy.

People in the community and within the Church can help to organise resources around the lonely person, and also take action to directly improve the quality of the relationship with the lonely person. This is equally important to a referral to General Practitioners and psychologists, but in the scheme of recovery, perhaps even more important. Improving the quality of the

connection we have with the lonely person is our goal. If we are to achieve this end, we will need to gain a good understanding of how the person experiences loneliness.

## THE SUBJECTIVE EXPERIENCE OF THE LONELY PERSON

You cannot stereotype who will be a lonely person; however there are some experiences that appear to be common to lonely people. These experiences fall into environmental, physical, cognitive (including interpretations they make) behavioural and affective domains. They are listed below.

### Environmental

- Live in an impoverished social environment

### Physical

- Genetically sensitive people<sup>14</sup>
- Experience physical issues, eg increased weight
- May exercise less
- Sleep issues
- Fatigue



<sup>13</sup> Lim, M.H., Rodebaugh, T.L., Zyphur, M.J., Gleason, J.F.M. (2016). Loneliness over time: The crucial role of social anxiety. *Journal of Abnormal Psychology*, 125(5), 620-630. P620 <sup>14</sup> While this is spoken about by researchers such as John Cacioppo, I think the genetic contribution is overstated. The reason for this is that loneliness can, and has been, induced experimentally by hypnosis. These studies were done in 'normal' students at Stanford University. We are all susceptible under the right conditions.



## FEELING UNINTERESTING

Milan Kundera wrote a book called *Ignorance* about two Czech citizens, a man and a woman, who emigrate to avoid communist occupation in the 1960s. Josef moves to Denmark and Irena goes to France. When the communists leave their homeland, they both return to Prague and are reunited. They talk of what it is like to be back with friends and family after a 20-year absence. This excerpt from Kundera's novel captures the current cultural predicament.

Irena says to Josef: 'The worst thing is, they [her friends and family] kept talking to me about things and people I knew nothing about. They refused to see that after all this time, their world has evaporated from my head. They thought with all my memory blanks I was trying to make myself interesting. To stand out. It was a very strange conversation: I'd forgotten who they had been; they weren't interested in who I'd become. Can you believe that not one person here has ever asked me a single question about my life abroad? Not one single question! Never!'

'And what about in France?' Joseph says. 'Do your friends there ask you any questions?'

She is about to say yes, but then she thinks again; she wants to be precise, and she speaks slowly: 'No, of course not! But when people spend a lot of time together, they assume they know each other. They don't ask themselves any questions and they don't worry about it. They're not interested in each other, but it's completely innocent. They don't realize it.'

'That is true. It's only when you come back to the country after a long absence that you notice the obvious: people aren't interested in one another, it's normal.'

'Yes, it's normal.'<sup>15</sup>

### Cognitive (including interpretations or appraisals)

- Sense that others are not interested in them
- Executive functions such as impulse control and planning may be compromised
- Ability to sustain attention may become difficult

### Behavioural

- May speak less in social interactions
- Might be agreeable initially to improve relationships
- Might become more punitive or less generous after realising that being agreeable doesn't work
- Perseverance may decrease. They might self soothe with food, alcohol or drugs

### Affective

- Relationships are enjoyed less and less.

The factors listed above provide an indication of the environmental and psychological experience of a lonely person. But what of their relational experiences? What is the lived experience of the lonely person?

As stated above, loneliness is about low quality relationships, not low quantity. It is about superficiality, not being understood, or being found interesting.

**LONELY PEOPLE  
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FOOD, ALCOHOL  
OR DRUGS**



<sup>15</sup> M Kundera, *Ignorance*, Harper Collins, USA, 2003. p 167.

This story illustrates a familiar experience. Lonely people are accustomed to being around other people who don't take an interest in them. It is, tragically, normal. They have contact with others, but they soon discover that others simply aren't interested in seeking out or hearing about their lived experience.

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unwillingness to be involved, their lack of enjoyment in social contact, their infrequent attendance at meetings, their keenness to leave early. Their accrued sense that others are not interested, leads them to conclude that they aren't interesting and they think and act accordingly.

We all have times when people aren't interested, but lonely people have accrued too many of these experiences. They have developed the subjective sense that their thoughts, emotions and experiences aren't interesting to others. To them, this means not only that their thoughts, emotions and experiences are not interesting, it means that *they* aren't interesting.

This internalised sense of self ("I'm not interesting") sets in motion a pattern that secures further difficulties. When they believe themselves to be uninteresting, they seek to avert the awkwardness by disconnecting from others. Then left with an embodied distress, they cut themselves off from their own internal world. Unfortunately, the fate of the lonely is sealed at this point, for how can they be understood if they cut themselves off from others and then themselves? With no way out, different forms of dissociation offer the isolated person relief from the distress. Food. Alcohol. The internet. TV. Netflix. They find their own lives a little boring, and they end up doing boring things.

By now, I hope you have the sense that loneliness is impacted by a lack of interest, a lack of depth in connection between people. But I also want you to sense that the lonely person's fate is understandable, their

## SO, WHAT CAN WE AS A CHURCH DO?

The first step is to have the right expectations. For some the road to recovery may be linear. They might make a few friends, come to a growth group regularly and find out a year down the track that they belong. For others, the journey can be longer and could well be characterised by gains, setbacks and plateaus. Lonely people who have this sort of recovery pattern are likely to be the lonely people who are depressed, have insecure attachments and/or social phobia. At these times the lonely person will need a team of people around them, and the rate at which they recover will be slower. Despite the variations, the prognosis remains positive if we can commit to the idea that people need love – but not just love; also

understanding. Relationships hurt, but relationships heal and if we can get our relationships right then there is good reason for us to have hope.

For people to heal from loneliness, interactions must surpass superficial. We need to cultivate the required blend of behaviours, attitudes and capacities that make closeness between us and lonely people possible. I have compiled a list of personal qualities below. This is not an exhaustive list, but is instead



a list of what most people would agree are essential ingredients required for genuine connection.

If we are going to connect with lonely people we will need to be FRIENDS.<sup>16</sup> For positive connection we will need to:

**1 Have Fun and Face:** Rapport is vital and having fun signals good intentions. We can't get to a deep understanding if they can't first sense that we like them. Fun and warmth precedes sharing. Rapport informs them of safety and only when there is safety can they 'face' us. Remember, this is where the remedy for loneliness lies. It is in the truth telling. So don't fake, don't fight, have fun, then face.

**2 Be Respectful:** This is essential. Without a positive attitude to others, and a sense that other people are worthy of serious consideration, the connection will wither.

**3 Individual and Interested:** We need to see other people as people with their own thoughts and feelings. We need to be active and constructive with people encouraging them to elaborate on their own experience.

**4 Empathy:** This is an essential capacity to bring to relationships. We need to experience what people do, feel what they do, and experience life the way others do.



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**5 Not Neglect:** We don't need to be connected with lonely people all the time, nor do we need our connections with them to be perfect. We just need to make ourselves available to them when they need us. We need to refrain from giving them the cold shoulder.

**6 Determined (by themselves):** Freedom is essential for connection, and being controlled by others destroys it. Lonely people need a sense that they can make their own decisions about how to act and a sense that they aren't being told what to think.

**7 Safe:** Lonely people need a sense that they are not going to come to harm. Physically, sexually, emotionally they need to feel protected.

These seven ingredients, if implemented, provide direction for lonely people. If they have been dwelling in impoverished environments and interacting with disinterested others, this approach might provide the disparate experience that they so deeply desire.

When church communities implement these behaviours and attitudes, when they exhibit a gentle curiosity with each other across time, the quality of our relationships can improve and the lonely person might feel that they are of interest to someone else. And that, is the beginning of the end of the lonely experience.

We are well positioned to be a remedy for lonely people. The Christian community is framed by a story of the divine reaching out

<sup>16</sup> Andrews, J.G. (2021). *The reconnected heart: How relationships can help us heal*. Heart in Mind Books: Brisbane Australia.

to us. God initiates contact when we were indifferent to him. The Creator's gesture to reach out to us by sending us His Son is a tap on the shoulder, and a request to turn towards Him and relate to Him. He is interested in us. We are the goal; we are not a means to an end.

**WHEN CHURCH IMPROVES THE QUALITY OF RELATIONSHIPS – THAT IS THE BEGINNING OF THE END OF THE LONELY EXPERIENCE.**

This message changes the way we see ourselves but also the way others are seen. A person who has received the gospel can approach lonely people who think they are not worthy of the time and interest of another. The person of faith knows that they can make a bid for connection, because that is what their Creator did for them. Each person is of intrinsic value. Christian people carry with them the same initiative that God has, that whilst we had our back turned, God made a bid for connection, now we can do the same for others.



*Publica*  
Strengthening family and community in a post-Christian society

