

How can people cope with loneliness?

Background

Loneliness is a distressing feeling that arises when one's social needs are unmet, either by the size or quality of one's current social network (Hawkley & Cacioppo, [2010](#); Peplau & Perlman, [1979](#)). According to a recent survey, 40% of Canadians report feelings of loneliness (Statistics Canada, [2021](#)). In addition to the distress caused by loneliness, chronic experiences can also put individuals at risk for numerous physical and mental health conditions, including depression, impaired cognition, and premature mortality (Holt-Lunstad et al., [2015](#); Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2015](#); Cacioppo et al., [2006](#)). Given these harmful effects, it is important to understand how social systems and structures can prevent and mitigate the harmful effects of loneliness (Fried et al., [2020](#)) and what individuals can do to cope with their personal experiences of loneliness.

Purpose

The purpose of this evidence brief is to review individual-level interventions to mitigate loneliness. In focusing on individual-level interventions, we recognize that broader interventions are also important, including the provision of therapeutic support (Käll et al., [2021](#)), community-based friendship programs (Martina & Stevens, [2007](#)) and more systematic approaches, such as social prescribing (Reinhardt et al., [2021](#)). Given that loneliness is a phenomenon influenced by sociocultural contexts (such as social networks and environments, community resources, and social norms), multilevel efforts are necessary to tackle this multi-layered issue. These efforts are covered in a separate review within this series. As such, the current review will focus on personal interventions that an individual can initiate and employ independently without necessarily involving the aid of others. In doing so, the ultimate goal is to provide a comprehensive compilation of evidence-based personal interventions that can inform effective personal coping strategies that individuals can integrate into their daily lives. Furthermore, this evidence brief will outline coping strategies associated with loneliness experiences based on our Canadian Social Connection Survey analyses. While the interventions and coping strategies outlined in this evidence brief alone might not be sufficient to address the complex challenges of loneliness, they are nevertheless a key component to helping individuals who experience chronic loneliness.

Evidence from Existing Studies

Understanding The Complexity of Loneliness

In order to understand how individuals can cope with loneliness, it is first important to consider the nature of loneliness and its role as a natural emotional response. Indeed, according to evolutionary theories, loneliness is an adaptive signal to motivate social connection with others (Cacioppo, Hawkley, et al., [2006](#)). However, when an individual experiences loneliness for an extended period of time (i.e., chronic loneliness), individuals transition from an active coping

approach to a passive one, which is characterized by self-preservation against social threats (e.g., rejection, exclusion) (Cacioppo, Hawkley, et al., [2006](#), Cacioppo, Hawkley, et al., [2009](#)). Several empirical studies demonstrate this effect, showing that individuals experiencing chronic loneliness tend to perceive and interpret their social world as a more threatening place (Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2015](#)). For example, they expect more negative social outcomes, such as getting rejected or excluded (Cacioppo, Hawkley, et al., [2009](#); Qualter et al., [2013](#); Jones et al., [1981](#)), tend to focus more on negative social cues in social interactions (e.g., interruptions and lack of smiling, and contradictory body posture; (Qualter et al., [2013](#)) and remember negative social interactions more frequently than positive interactions they had (Cacioppo, Hawkley, et al., [2009](#)). These thought patterns often become automatic in social situations, leading lonely individuals to experience the social world as more threatening (Qualter et al., [2015](#)).

The Role of Maladaptive Coping in Reinforcing Loneliness

The patterns of social cognition reviewed above reinforce passive coping strategies which fail to address loneliness and may even worsen an individual's social situation. For example, chronically lonely individuals often withdraw from social situations (Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2013](#)) and focus on inward internal experiences (Jones et al., [1982](#); Cacioppo et al., [2017](#); Moore & Schultz, [1983](#)). These behaviours may emerge due to negative expectations and social vigilance – which undercut more adaptive and active coping approaches (Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2013](#); Qualter et al., [2015](#)). More maladaptive coping approaches to the chronic experience of loneliness are often seen as more passive, often exacerbating the individual's negative lonely state (Cacioppo, Hawkley et al., [2009](#)). These passive approaches include ruminating on negative emotions and experiences, social withdrawal, substance use and behavioural disengagement (e.g., giving up in an attempt to lessen the negative effects of a situation; Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2013](#); Copeland et al., [2018](#)).

Another line of evidence suggests that the self-preservation motive accompanying the chronic lonely experience can heighten an individual's self-focus and self-centeredness (Jones et al., [1982](#); Cacioppo et al., [2017](#); Moore & Schultz, [1983](#)). For instance, observational studies suggest that individuals experiencing loneliness tend to show more self-focused behaviours when engaging with others, such as not asking questions to conversation partners and discussing oneself more (Jones et al., [1981](#)). These self-focused patterns often lead to further negative social interaction experiences and aggravate loneliness (Cacioppo et al., [2017](#)).

Once individuals find themselves in this vicious cycle of loneliness (See **Figure 1**), breaking away becomes increasingly challenging as these thought patterns and behaviours become set habits (Cacioppo, Hawkley et al., [2009](#); Qualter et al., [2015](#)). Therefore, effective interventions should aim to break this vicious cycle underlying chronic loneliness.

Evidence-based approaches for addressing the complexity of loneliness.

Given the complexity of loneliness outlined above, interventions must be tailored to address the core features of loneliness, including both the cognitive and behavioural processes that reinforce the cycle of loneliness. Fortunately, some emerging interventions can help shift individuals from passive to active coping. The most effective of these are reviewed below:



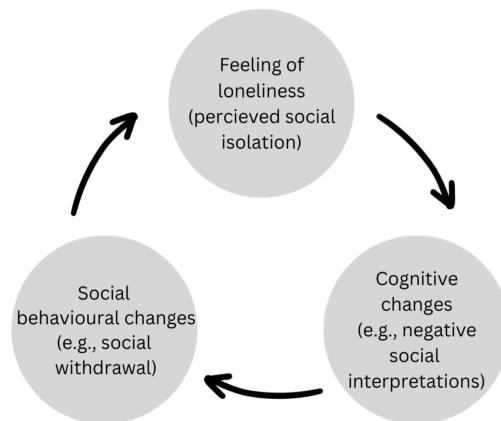


Figure 1. The cycle of loneliness.

Adapted from “Perceived social isolation and cognition” by J. T. Cacioppo & L. C. Hawkley (2009)

Interventions targeting cognitive processes. We will first review interventions targeting cognitive thought patterns and negative biases in the vicious cycle of chronic loneliness. These cognitive interventions attempt to interrupt the effects of these negative social cognitions through comprehensive training (Cohen-Mansfield, Hazan et al., [2018](#); Lindsay et al., [2019](#)).

Cognitive behavioural therapy (CBT) is a common intervention targeting the maladaptive thought processes associated with loneliness (Cohen-Mansfield, Hazan et al., [2018](#); Käll et al., [2020](#); Cacioppo, Hawkley et al., [2009](#)). CBT provides tools to help recognize patterns of negative, inaccurate thoughts to view situations more realistically (Miller, [2019](#)). Some examples of negative thought patterns include overgeneralization (e.g., “All future social events will go terribly because this one didn’t work out”), jumping to conclusions (e.g., “They didn’t shake my hand, they *must* not like me”) and emotional reasoning (“I *feel* like that the conversation I just had went poorly, so it *must* have”) (Miller, [2019](#)). Once these thought patterns are identified, CBT encourages the user to challenge these thoughts by questioning whether these thoughts accurately reflect the situation. CBT focuses on getting the user to see the world around them through a more accurate lens (Miller, [2019](#)). For instance, while conversing with someone, a lonely individual might notice that their partner did not smile at something they said. This may lead the individual to jump to the conclusion that their partner does not like them. CBT would urge this individual to recognize that they have jumped to this conclusion by assuming what their partner *must* be thinking and questioning whether their thoughts are true (Miller, [2019](#)). Data suggest that CBT can help lonely individuals disengage from such negative social cues (e.g., lack of smiling, interruptions) by helping them identify negative thoughts and question whether they are true (Cacioppo et al., [2015](#); Masi et al., [2011](#)).

Mindfulness training is another evidence-based strategy that helps people regulate uncomfortable thoughts and feelings and maintain a state of mental calmness (Lindsay et al., [2019](#); Shapira et al., [2022](#)). These programs emphasize the importance of monitoring and accepting the unpleasant feelings of loneliness with a non-judgemental attitude (Lindsay et al., [2019](#)). This allows intense emotions associated with loneliness to fade and become less prominent (Lindsay et al., [2019](#)). Emotional regulation and mental calmness can help individuals view social engagements as less threatening, therefore encouraging them to seek



more interactions with others to decrease feelings of loneliness (Lindsay et al., [2019](#)). Previous studies showed that online mindfulness programs effectively reduced loneliness and increased daily social engagement (Shapira et al., [2022](#); Lindsay et al., [2019](#)).

Interventions targeting behavioural changes. Other interventions focus on behavioural changes by promoting behaviours that help lonely individuals better connect with others (Käll et al., [2020](#)).

Behavioural activation (BA) is an approach that focuses on helping people increase positive social engagement that can promote their sense of connection (Choi, Pepin et al., [2020](#)). This involves setting goals for increased social engagement, consistently monitoring progress and adapting daily routines accordingly (Choi, Pepin et al., [2020](#); Käll et al., [2020](#)). Individuals using BA identify personal barriers related to engaging in social connection, such as time constraints or not knowing where to meet others, and make personalized strategies to help minimize these barriers (Choi, Pepin et al., [2020](#); Käll et al., [2020](#); Cohen-Mansfield, Hazan et al., [2018](#)). Overall, for lonely individuals, BA aims to encourage participation in more social interactions as well as improve the quality of pre-existing relationships by increasing relationship-promoting behaviours, such as expressing vulnerability and help-seeking (Käll et al., [2020](#)).

Behavioural training is an approach to reducing unhelpful social behaviours and improving lonely individuals' social relationships (Jones et al., [1982](#)). Lonely individuals are often stereotyped as lacking social skills; however, there is no consistent evidence that this is true (Vitkus & Horowitz, [1987](#); Zach et al., [2016](#); Segrin, [1993](#); Segrin & Kinney, [1995](#)). Instead, findings suggest that lonely individuals have more heightened attention to social cues and tend to interpret them negatively, which could explain some unhelpful social behaviours they exhibit (Gardener et al., [2015](#); Jones, [1981](#)). For instance, one study suggests that people experiencing loneliness tend to self-focus (e.g., making fewer partner references in conversation and asking fewer questions to their partner) (Jones et al., [1982](#)). One strategy suggested to reduce these self-focus behaviours is to teach these individuals how to pay more attention to their conversational partners and provide a safe environment to practice these new skills (Jones et al., [1982](#); Cohen-Mansfield, Hazan et al., [2018](#)). However, there is limited evidence suggesting a lack of social skills among individuals experiencing loneliness in general. Therefore, social skill-based training may not be applicable to all lonely individuals.

Prosocial behaviour is also observed to reduce loneliness (Lanser & Eisenberger, [2023](#); Fritz et al., [2021](#); Archer Lee et al., [2023](#)). Prosocial behaviour describes any actions taken for the welfare of others rather than the self. These behaviours can include planned acts, such as volunteering or donation, and spontaneous acts of kindness, such as writing an encouraging message to a friend needing support, giving a compliment to a colleague, or giving a seat to someone looking tired on the bus. Prosocial behaviour is thought to increase positive interaction experiences with others and reduce excessive focus on the self (Trew & Alden, [2015](#); Archer Lee et al., [2023](#)), which can reduce feelings of loneliness (Fritz et al., [2021](#); Lanser & Eisenberger, [2023](#)) and lead to more social interactions.

Other interventions that merit further investigation and research include physical activity and practicing gratitude (Shvedko et al., [2018](#); Barlett & Arpin, [2019](#)). These interventions look promising, as they can be done as low-cost and personal initiatives. Though physical activity alone does not seem to decrease levels of loneliness, there appears to be some effect on social functioning by increasing one's self-esteem and feelings of self-worth (Shvedko et al., [2018](#)).



This can help create opportunities for meaningful social connection when the physical activity is done in a group format (Mays et al., [2021](#); Gyasi et al., [2021](#)). Daily gratitude entries and completing gratitude scales are other low-cost initiatives that can be done independently. Daily gratitude is based on the theory that having an individual reflect and identify acts of care that others did for them throughout the day might reduce one's feelings of loneliness and increase the perceived quality of the relationships around them (Barlett & Arpin, [2019](#)).

Analyses from The Canadian Social Connection Survey

To improve our understanding of how individuals can effectively respond to loneliness, we conducted a mixed methods analysis of data from the Canadian Social Connection Survey participants.

Qualitative Analyses Identifying Ways Individuals Cope with Loneliness

For our qualitative analyses, we conducted a thematic analysis of open-text survey responses from 317 participants in the 2023 Canadian Social Connection Survey. The analyzed questions asked participants how they cope with or resolve feelings of loneliness when they feel lonely. Their responses to this question revealed diverse coping strategies for loneliness. Coping strategies were classified into seven themes:

- 1. Emotional Responses.** The first theme focused on participant's emotional responses. Participants in the study identified a wide array of emotional responses to loneliness, highlighting the diversity and complexity of human emotional resilience. Among these, emotional release was a prominent theme, where activities such as crying and experiencing meltdowns were reported as cathartic outlets for intense emotions. Conversely, some participants noted engaging in negative emotional coping strategies, including ruminating on their loneliness, feeling frustrated, entertaining fatalistic thoughts, and, in some extreme instances, contemplating suicide. These responses suggest a tendency to dwell on the negative aspects of loneliness, potentially intensifying emotional distress.

Contrasting these negative responses, several participants reported employing positive emotional coping strategies. Reframing loneliness as a period of beneficial solitude was one such approach. Reflection, another significant theme, involved a deliberate introspection into the root causes of their loneliness. This often entailed practices like journal writing or keeping diaries, serving as tools for self-exploration and understanding. Additionally, participants described rationalizing their loneliness, using self-affirmation, and reassuring themselves of the temporary nature of their isolation. Another feature of these emotional responses was acceptance, where individuals acknowledged and made peace with their loneliness, recognizing it as a transient and manageable aspect of their lives. These participant reports thus reveal a spectrum of emotional coping strategies, ranging from negative to positive, each playing a role in the individual experience of loneliness.

- 2. Comfort Seeking and Escapism.** In addition to the emotional responses, participants also reported engaging in a wide array of behaviours that helped them



escape feelings of loneliness. These included shopping, doing chores, pursuing artistic activities, cooking, seeking out online and other forms of entertainment (TV, social media, movies), engagement in physical activities and exercise, engaging with nature, using substance use, eating comfort foods (e.g., sugary, fatty foods), daydreaming, and excessive sleeping.

3. **Social Withdrawal.** Participants also reported dealing with the negative effects of loneliness by withdrawing and isolating themselves from others. This behaviour reflects a paradoxical aspect of loneliness: while longing for connection, individuals may simultaneously engage in actions that further isolate them, thereby intensifying their sense of loneliness.
4. **Socializing.** However, not all participants withdrew. Many participants reported active coping with loneliness, which included reaching out to friends and family by calling, texting, messaging, emailing, and seeking out face-to-face connections. Additionally, people reported socializing with their pets. These interactions included hugging, cuddling, walking, spending time with, and even talking to their pets as therapeutic and emotionally fulfilling activities. Pets, thus, emerge as vital companions offering unconditional support and presence. Finally, participants reported that they also sought contact with strangers through online forums and spent time in public spaces such as libraries, stores, shops, recreation centers, parks, and plazas as a subtle form of socializing. Participants also reported feeling motivated to engage in prosocial activities, such as volunteering and charity work. Such interactions provided a sense of purpose and belonging and helped them find social interactions.
5. **Support Seeking.** Related to the socializing theme, individuals also reported seeking out support – which is a specific type of social engagement (and therefore, we class it as a separate theme). Central to this theme is the sharing of feelings with friends and family, an act that not only helps express emotions but also strengthens social bonds and provides emotional support. Therapy (group and individual formats) was also identified as a source of guidance and support. Finally, individuals also reported turning to crisis lines to get immediate help with loneliness.
6. **Planning and Organizing Activity.** The next theme centred around planning and organizing social encounters. This theme underscores the significance of forward-looking and active involvement in one's social life. Participants detailed how planning future activities served as a critical strategy in their efforts to overcome feelings of isolation. This involved organizing a variety of social engagements, ranging from intimate dates to casual hangouts with friends or acquaintances.
7. **Spirituality.** Finally, in addition to turning to others, participants also reported turning to inner and spiritual sources of support, including spiritual and mindful practices, engaging in prayer or seeking divine guidance, reflecting a reliance on faith and a higher power for comfort and direction, talking to a pastor or religious leader, engaging in meditation, attending religious gatherings, using breathing techniques and yoga, practicing gratitude, and seeking solitude.



Quantitative Analyses Identifying Effectiveness of Diverse Coping Strategies on Loneliness

Building off of the qualitative analyses above. We also conducted quantitative analyses (N = 319) examining the association between COPE inventory subscales (which characterize coping strategies employed by individuals) and overall scores on the de Jong Emotional and Social Loneliness Scales.

As shown in the table below, the factors most strongly associated with lower loneliness were active coping strategies and seeking emotional support. Meanwhile, substance use, behavioural disengagement, and emotional venting were associated with higher loneliness.

Table 1. Associations between Coping Strategies and Loneliness Scores

Coping Strategy	Estimate	
Active Coping (doing something about the situation)	-0.190	**
Use of Emotional Support (share feelings)	-0.182	**
Denial (refuse to acknowledge)	-0.069	
Humor (making light of situation)	-0.061	.
Acceptance (accepting the situation)	-0.024	
Restraint (take pause, don't act)	-0.005	
Positive Reinterpretation (seeing things in new light)	0.013	
Religious Coping (prayer)	0.020	
Instrumental Support (get advice, information)	0.045	
Mental Disengagement (get mind off things)	0.045	
Planning (plan to address)	0.066	
Suppression of Activities (won't do other things)	0.078	
Substance Use (use alcohol and other drugs)	0.094	*
Behavioural Disengagement (give up)	0.153	**
Venting Emotions (cry, complain)	0.207	***

Discussion

Based on the information reviewed above, it is clear that loneliness poses a complex challenge for intervention. Supporting individuals to actively cope and respond to their experiences of loneliness appears to be critical to treating loneliness. However, maladaptive cognitive schema are a clear barrier to success – often necessitating the provision of support, guidance, coaching, and resources. Fortunately, several evidence-based strategies that meet this need are emerging. The evidence-based strategies outlined in **Figure 2** below highlight effective intervention strategies supported by high-quality evidence. For instance, interventions such as cognitive behavioural therapy (CBT), mindfulness training, or behavioural activation (BA) have consistently demonstrated their effectiveness in mitigating loneliness in studies using rigorous research designs, including randomized controlled trials (RCTs) and sufficient sample sizes (Cohen-Mansfield, Hazan et al., [2018](#); Käll et al., [2020](#)).



While combination preventions are likely necessary (Shapira et al., [2022](#); Käll et al., [2020](#)), continued research is needed to identify the specific intervention components that result in lasting change. Future research should also explore the long-term effects of loneliness interventions and evaluate their applicability to diverse populations before scaling the interventions to a broader community.

Additionally, loneliness is also associated with a variety of potentially harmful coping strategies. Therefore, efforts are needed to mitigate these harms and promote health among those who are chronically lonely and isolated. Continued research is likewise needed to identify the best intervention components and combinations of interventions.

Figure 2. Evidence-based strategies

Drawing from well-established research on effective, easily accessible, and low-cost personal coping strategies for individuals experiencing loneliness, our suggestions include:

- Working on identifying **negative thought patterns** and questioning whether or not these thoughts are an accurate view of social situations.
- **Setting goals to increase social interaction.** This can be done by planning daily social engagement and identifying personal barriers (e.g., busy weekly schedule, lack of knowledge on where to find social connection) around engaging socially and making plans to overcome these barriers.
- **Going out and re-engaging in social encounters** by increasing behaviours that benefit or focus on others (e.g., performing acts of kindness). These behaviours can be done with friends, family, acquaintances or strangers.
- **Practicing mindfulness** by acknowledging the potentially uncomfortable emotions that surface during social encounters and accepting these emotions with a non-judgmental attitude.

Conclusion

Based on the available evidence and our analyses of the Canadian Social Connection Survey, we recommend that interventions designed to treat loneliness address the maladaptive cognitive schema that emerge in chronically isolated individuals. Such approaches should shift individuals towards active coping strategies by providing the necessary support, services, and resources that meet each individual's needs. In particular, we argue that cognitive behavioural therapy, mindfulness, and other behaviour change approaches are critical. Continued research is needed into the elements that make these or similar interventions most effective.

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