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Akansha Yadav

Research Scholar,
Department of Human Development,
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

Sfoorti Jain

Masters of Science (Home Science),
Department of Human Development,
Faculty of Home Science, Bansathali
University, Tonk, Rajasthan, India

Dr. Anshu

Dean & Professor,
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

Dr. Anjali Mathur

Assistant Professor (Sr. Grade),
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

Komal Kriti

Research Scholar, Department
of Extension Education and
Communication Management,
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

Supriya Yadav

Research Scholar, Department of
Human Development,
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

Corresponding Author:

Akansha Yadav
Research Scholar, Department of
Human Development,
Ethelind College of Community
Science, Sam Higginbottom
University of Agricultural,
Technology and Sciences,
Prayagraj, Uttar Pradesh, India

A comprehensive review of loneliness among young adults causes, consequences and interventions

Akansha Yadav, Sfoorti Jain, Dr. Anshu, Dr. Anjali Mathur, Komal Kriti and Supriya Yadav

Abstract

Recent studies have examined how young adult loneliness affects mental health. Comparing loneliness to social isolation, the review examines its psychological, physiological, and cognitive aspects. Social, technical, educational, and cultural changes cause youth loneliness. Psychological, attachment, and social media effects on loneliness. It affects depression, anxiety, stress, health, cognition, and life satisfaction. Substance abuse, risky sexual conduct, and poor academic and occupational performance are connected to loneliness. Concern prompts evaluation of young adult loneliness prevention strategies. Therapy like mindfulness, CBT, and social skills training is customized. Peer support, community activities, and educational institutions' social links are examined. This review synthesizes knowledge on loneliness's causes, impacts, and interventions to establish the framework for future research and effective ways to overcome loneliness and promote good social relationships in young adults.

Keywords: Psychological, loneliness, illness, mental health, depression, anxiety, substance abuse, social interaction

Introduction

Loneliness among young adults has emerged as a major social issue that is receiving attention. This is due to the potential consequences that loneliness can have on a person's mental health, well-being, and overall quality of life. Because of all of the transformations that are taking place during this time period, this age group is more susceptible to feeling lonely because of all of the changes that are taking place in their lives. This age group is distinguished by transitions, identity construction, and shifting social ties. This introduction illustrates the need for a comprehensive grasp of this issue by offering an overview of the reasons for loneliness among young adults, as well as the implications of that loneliness and the therapies that have been developed to battle it. This introduction also highlights the importance of developing a complete understanding of this issue.

Loneliness and It's Impacts

Young adults' mental, emotional, physical, social, and intellectual well-being can be greatly affected by loneliness. The main effects of loneliness on young adults are:

- 1. Mental Health Issues:** Depression, anxiety, and low self-esteem are significantly linked to loneliness. Lack of social support and meaningful connections can cause depression and despair.
- 2. Loneliness increases melancholy, emptiness, and emotional instability in young adults.** Without social engagement, emotional support and release can be lacking.
- 3. Chronic loneliness increases stress and disrupts the stress response system.** This may raise cortisol, affecting immunological function and health.
- 4. Loneliness lowers life satisfaction.** Isolated youth may struggle to find joy and fulfillment in life.
- 5. Cognitive Deficits:** Loneliness can impair concentration, decision-making, and problem-solving. Cognitive disorders can affect academic and occupational success.
- 6. Physical Health Effects:** Loneliness increases the risk of cardiovascular disease, obesity, and immunological dysfunction. Lack of social support can cause unhealthy lifestyles.
- 7. Loneliness can affect sleep patterns, making it hard to fall or remain asleep.** Sleep difficulties can worsen loneliness and emotional suffering.
- 8. Risky Behaviors:** Some young adults use drugs and alcohol to cope with loneliness or

find social connections.

9. Loneliness can cause self-doubt and low self-perception. Young individuals may doubt their social abilities, attractiveness, and ability to build meaningful relationships.
10. **Social Isolation:** Loneliness can perpetuate isolation. Lonely young adults may isolate themselves, perpetuating their loneliness.

Addressing loneliness among young adults is important for their immediate and long-term health and success. Loneliness prevention and treatment can improve other areas of their lives. Numerous factors, both internal and external, can play a role in an individual's experience of loneliness, particularly when they are young adults. A multitude of societal upheavals, such as altered family patterns, increased mobility, and the rise of digital communication, have resulted in changes to traditional social networks. These adjustments have caused traditional social networks to evolve. These adjustments could result in a sense of disconnection in addition to a decreased amount of social support. In addition, significant life transitions such as moving to a new area for work or education, experiencing changes in personal relationships, or being uncertain of one's career future can all produce disruptions in one's established social networks, which may lead to feelings of isolation in the affected individual.

Consequence of Loneliness

The term "consequences of loneliness" refers to the repercussions that can occur as a result of being lonely, which go well beyond the emotional anguish that being lonely can cause in those who are young adults. It has been shown that loneliness is associated with a range of undesirable impacts, one of which is an increased possibility of acquiring mental health disorders such as stress, anxiety, and depression. This is only one of the many unfavorable outcomes associated with loneliness. In addition, being lonely can have a bad impact on a person's physical health by interfering with their sleeping patterns, immune function, and cardiovascular health, all of which can be negatively affected. One of the cognitive consequences may be a reduction in a person's capacity to pay attention or make judgments. Loneliness can also manifest itself in the form of behaviors such as abusing substances, engaging in sexual practices that put one's health in jeopardy, or performing poorly academically or professionally. These are all examples of ways that loneliness can manifest itself.

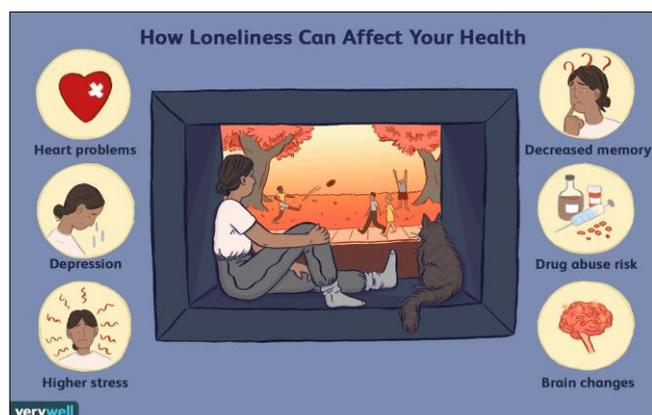


Fig 1: Loneliness and It's Effects

Methods

A systematic review of the scientific literature examined whether loneliness and low perceived social support are linked to poorer mental health across all ages. PROSPERO (CRD42015014784), an international database of prospective systematic reviews with health outcomes, recorded the review methodology.

Inclusion criteria

Study types: longitudinal quantitative research examined baseline loneliness, inadequate perceived social support, and follow-up results.

Participants: Adults with schizophrenia, schizoaffective disease, psychosis, depression, bipolar disorder, and anxiety were studied. Clinical diagnosis, DSM or ICD ratings, or reliable and valid instruments like the Mini-International Neuropsychiatric Interview, diagnose clinical populations. Children under 16, people with intellectual disabilities or organic mental disorders like dementia, and cohorts with primary physical illnesses were excluded from studies.

Studies used quantitative loneliness measures or subjective social connection assessments like perceived social support or confiding relationships. Social isolation and network size were removed as objective functions and size measures. Social capital-different from loneliness and related to society, communities, and connection appraisals-was also deleted. The exposed components assessed subjective total social connection, not relationship quality; we excluded partner support and large relationship quality studies.

Outcomes: The review included clinical and functional data. Follow-up studies on these outcomes were eligible: 1) DSM/ICD, CES-D, or proxy measures like hospitalization or crisis services define relapse as persistent mental illness after baseline recovery. 2) Recovery measures include function, social functioning, self-rated rehab, quality of life, and disability. 3) Symptom severity: improvement or deterioration 4) Global outcome: Health of the Nation Outcome Scales mental health and functioning assessment

The search strategy

Systematic searches were performed on Medline, psycINFO, Embase, the Web of Science, CINAHL, and the Cochrane Library (1891–April 2016). No language or publishing time limits we sought solitude and mental illness. MeSH and text keywords searched the title and abstract. File 1 also describes altering search phrases for different databases. The Medline search terms are: 1) Loneliness: [MeSH] OR lonely OR social support (subjective, personal, perceived, quality) OR confidant* 2) Mental disorders include psychiatric, psychotic, depressive, manic, bipolar, and anxiety. 3) Results: prognosis, outcome, recurrence, relapse, hospitalization, crisis, detention, recovery, social functioning, self-rated recovery, quality of life, symptom intensity, handicap.

This and a companion systematic review on loneliness as a risk factor for general population psychiatric diseases were searched for "onset" and related phrases and outcome terms. Research review papers and electronic reference lists were manually searched for relevant studies. Zetoc and OpenGrey found relevant dissertations, conference reports, and other sources besides journals through free text and keyword searches. All study titles were screened. The full studies were

read after reading the abstracts. Both reviewers confirmed that all studies met the selection criteria. Study selection reliability was verified by the other reviewer for 800 discarded studies. Reviewers agreed by over 99%. The third reviewer, S.J., resolved inclusion and exclusion issues.

Data collection, quality evaluation, and synthesis

A systematic template extracted relevant data from qualified studies. J.W. and F.M. independently extracted and assessed the data methodology. 20% of papers had a second reviewer evaluate the extracted data and quality. A third reviewer discussed the two assessors' disagreements. The MMAT Version 2011 assessed each review study's methodology. The MMAT evaluates qualitative, quantitative, and mixed-methods research. Quantitative study criteria for randomized, controlled, non-randomized, and descriptive studies are covered. Quantitative, non-randomized domain criteria (cohort study). After two screening questions, this domain had four criteria, so the overall quality score ranged from * (one criterion met) to ****. Selection bias, measurement quality, confounder correction, percentage of complete outcome data, response rate, and follow-up rate were four criteria (see Additional File 2). The included studies' samples, predictor measures, and outcomes were too variable for a meta-analysis, so we used narrative synthesis. The key findings for each mental health issue were presented in tables and text.

Interventions of Loneliness

Since 1984, six qualitative reviews of the literature on loneliness intervention have examined four key interventions: improving social skills, support, engagement, and maladaptive social cognition. These reviews found loneliness therapies, especially social interaction therapy, effective in all but one. According to Findlay, only six of the 17 intervention trials used a randomized group comparison design, leaving the other 11 vulnerable to pre-post and nonrandomized group comparison concerns.

After a meta-analysis of loneliness intervention studies published between 1970 and September 2009 to determine their effects and whether they varied by type, the meta-

analysis includes 50 studies: 12 pre-post, 18 non-randomized, and 20 randomized. Every research design group had significant effects, but randomized group comparison studies had the lowest overall effect (pre-post = -0.37, 95% CI -.55, -.18; non-randomized control = -0.46, 95% CI -0.72, -0.20; randomized control = -0.20, 95% CI -0.3). Our loneliness model states that implicit hyper vigilance for social dangers greatly influences perceptions, cognitions, and behaviors, and that eliminating natural perceptual and cognitive biases that promote over-attention to negative social information in the environment may reduce loneliness. Cognitive behavioral therapy that teaches people to recognize automatic negative thoughts, look for evidence to contradict them, reduce biased thoughts, and/or reframe loneliness and personal control is more effective than interventions that focus on social support, skills, or access.

Moderate analyses of randomized group comparison studies supported our hypothesis: social cognition interventions had a significantly larger effect size (0.60, 95% CI 0.96, 0.23) than social support (0.16, 0.27, 0.06, N = 12), social skills (0.02, 0.24, 0.28, N = 2), and social access (0.06, 0.35, 0.22). Social cognitive therapy is beneficial but less popular than other loneliness treatments. Social cognitive therapies had a 0.20 effect compared to the meta-analytic mean effect of over 300 social and behavioral interventions (0.50). A recent book suggests a social-cognitive approach to loneliness reduction that may encourage therapists to address lonely people's affective, cognitive, and behavioral tendencies.

Strategies to Address the Problem of Loneliness

The pressing need to reduce loneliness, especially among young adults, has led to a range of treatments. Individual-level therapies like cognitive-behavioral therapy (CBT), which changes negative thought patterns and improves social skills, help people cope with their problems. Mindfulness interventions include ways to cope with difficult feelings and be present. Community-based methods for building enduring relationships include building inclusive settings, fostering social connections, and promoting shared interests.



Fig 2: Strategies to Address the Problem of Loneliness

Combating loneliness requires a holistic approach that tackles individual, interpersonal, and community issues. Several brief ways to combat loneliness are:

1. **Enhancing social skills:** The capacity of individuals to form and maintain meaningful relationships can be improved by providing them with the means to start and continue meaningful conversations and connections.
2. **Promoting a healthy and thoughtful use of technology:** Encouraging a healthy and thoughtful use of technology, especially social media, can assist young adults in maintaining a balance between their interactions online and offline.
3. **Cultivating compassion for oneself:** The practice of teaching skills for cultivating compassion for oneself can assist individuals in developing a healthy relationship with themselves, minimizing feelings of isolation and self-criticism.
4. **Group Activities:** Similar interests or hobbies help young adults meet and build friendships through group activities. A complete loneliness treatment plan may include classes or groups recommended by doctors. Mentorship and peer support can help solitary people feel connected and on track.
5. **Participation in the Community:** By encouraging people to engage in community activities like volunteering or joining neighborhood clubs, one can foster a sense of belonging and connection to the larger community.
6. **Meditation and Mindfulness:** Introducing meditation and mindfulness techniques into one's life can assist one in coping with feelings of loneliness by increasing one's self-awareness and decreasing rumination.
7. **Interventions in Education:** Young adults can be equipped with the skills necessary to build and maintain healthy relationships through the incorporation of social and emotional learning into the school curriculum.
8. **Supportive work environments:** One way to combat the negative effects of loneliness in the workplace is to cultivate a culture at work that places a high emphasis on social relationships and offers opportunities for team-building.
9. **Counseling and therapy:** Providing individuals with targeted support can be accomplished through the provision of counseling or therapy services that target feelings of isolation and improve social skills.
10. **Family and Community Involvement:** A dependable support system can be established by cultivating stronger familial bonds and encouraging the participation of young adults in various community activities.
11. **Campaigns to Raise Public Knowledge:** Raising public knowledge about the prevalence of loneliness and its impact can help decrease the stigma associated with the condition and encourage individuals to seek help.
12. **Literacy in the Media:** Providing education to young adults about how relationships are portrayed in the media and the possibility of making false comparisons might help promote healthier perceptions of social interactions.

Implementing a combination of these tactics, with each one being adapted to the preferences and requirements of the individual, can help contribute to an approach that is more complete and effective in combating the issue of loneliness among young adults.

Conclusion

In conclusion, the thorough analysis of loneliness in young adults shows how its complex origins, effects, and remedies influence this important social issue. Since loneliness is complicated and multi-dimensional, holistic approaches are needed to address its far-reaching consequences for young people's well-being. The review showed that social dynamics, technology, life changes, and societal standards all contribute to loneliness in young adults. These variables combine to produce a difficult environment for isolation. Beyond emotional pain, loneliness affects mental and physical health, cognitive functioning, academic and occupational pursuits, and life pleasure. The review showed that loneliness affects many aspects of young adults' lives. Due to the necessity of loneliness, various therapies were studied. Individual-level techniques, including cognitive-behavioral therapy and mindfulness-based interventions, community-based initiatives, peer support programs, and educational interventions, provide a toolkit for addressing loneliness across contexts. The comprehensive study adds to loneliness studies and emphasizes the need for awareness, investigation, and targeted solutions. Understanding and managing loneliness helps young people manage modern life, mental health, and social connectedness. It informs policies, programs, and activities to reduce loneliness and help young adults. Loneliness can be reduced and build a more connected and resilient generation of young people by acknowledging the complex causes, different effects, and potential treatments.

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