

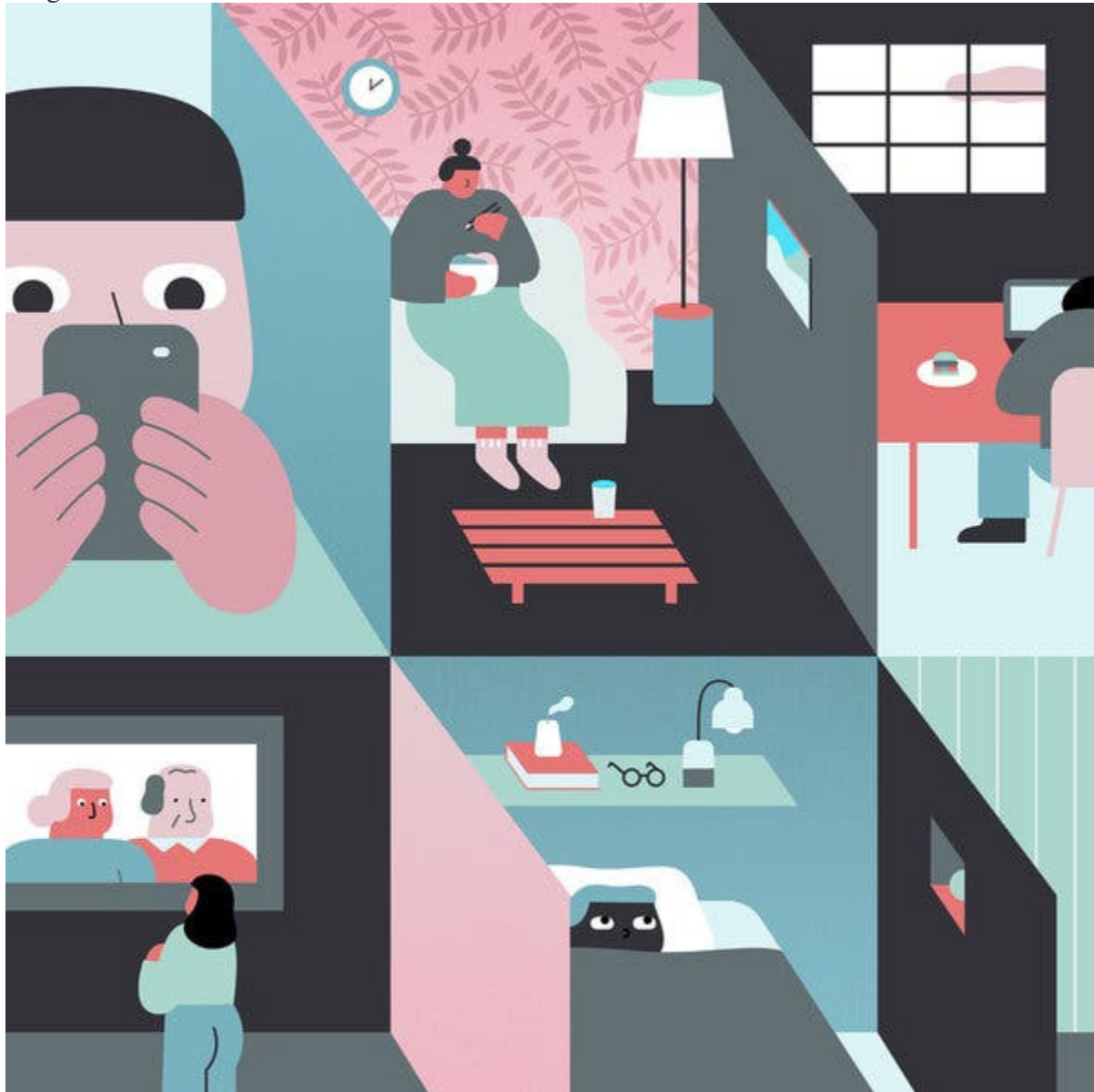
# Is Loneliness a Health Epidemic?

By Eric Klinenberg

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Credit Jing Wei

Image



Last month, Britain appointed its first “[minister for loneliness](#),” who is charged with tackling what Prime Minister Theresa May called the “sad reality of modern life.”

Public-health leaders immediately praised the idea — and for good reason. In recent decades, researchers have discovered that loneliness left untreated is not just psychically painful; it also can have serious medical consequences. Rigorous epidemiological studies have linked loneliness and social isolation to heart disease, cancer, depression, diabetes and suicide. Vivek Murthy, the former United States surgeon general, has written that loneliness and social isolation are “associated with a reduction in life span similar to that caused by smoking 15 cigarettes a day and even greater than that associated with obesity.”

But is loneliness, as many political officials and pundits are warning, a growing “health epidemic”?

I don’t believe so, nor do I believe it helps anyone to describe it that way. Social disconnection is a serious matter, yet if we whip up a panic over its prevalence and impact, we’re less likely to deal with it properly.

Anxiety about loneliness is a common feature of modern societies. Today, two major causes of loneliness seem possible. One is that societies throughout the world have embraced a culture of individualism. More people are living alone, and aging alone, than ever. Neoliberal social policies have turned workers into precarious free agents, and when jobs disappear, things fall apart fast. Labor unions, civic associations, neighborhood organizations, religious groups and other traditional sources of social solidarity are in steady decline. Increasingly, we all feel that we’re on our own.

The other possible cause is the rise of communications technology, including smartphones, social media and the internet. A decade ago, companies like Facebook, Apple and Google pledged that their products would help create meaningful relationships and communities. Instead, we’ve used the media system to deepen existing divisions, at both the individual and group levels. We may have thousands of “friends” and “followers” on Facebook and Instagram, but when it comes to human relationships, it turns out there’s no substitute for building them the old-fashioned way, in person.

In light of these two trends, it’s easy to believe we’re experiencing an “epidemic” of loneliness and isolation. Surprisingly, though, the best data do not actually show drastic spikes in either loneliness or social isolation.

The main evidence for rising isolation comes from a widely reported sociology journal article claiming that in 2004, one in four Americans [had no one](#) in their life they felt they could confide in, compared with one in 10 during the 1980s. But that study turned out to be [based on faulty data](#), and other research shows that the portion of Americans without a confidant is about the same as it has long been. Although one of the authors has [distanced himself from the paper](#) (saying, “I no longer think it’s reliable”), scholars, journalists and policymakers continue to cite it.

The other data on loneliness are complicated and often contradictory, in part because there are so many different ways of measuring the phenomenon. But it's clear that the loneliness statistics cited by those who say we have an epidemic are outliers. For example, one set of statistics comes from a study that counted as lonely people who said they felt "left out" or "isolated," or "lacked companionship" — even just "some of the time." That's an exceedingly low bar, and surely not one we'd want doctors or policymakers to use in their work.

One reason we need to be careful about how we measure and respond to loneliness is that, as the University of Chicago psychologist John Cacioppo argues, an occasional and transitory feeling of loneliness can be healthy and productive. It's a biological signal to ourselves that we need to build stronger social bonds.

Professor Cacioppo has spent much of his career documenting the dangers of loneliness. But it's notable that he relies on more measured statistics in his own scientific papers than the statistics described above. One of his articles, from last year, reports that around 19 percent of older Americans said they had felt lonely for much of the week before they were surveyed, and that in Britain about 6 percent of adults said they felt lonely all or most of the time. Those are worrisome numbers, but they are quite similar to the numbers reported in Britain in 1948, when about 8 percent of older adults said they often or always felt lonely, and to those in previous American studies as well.

Professor Cacioppo is one of the leading voices advocating for better treatment of loneliness. But, as [he has written](#), "to call it an epidemic of loneliness risks having it relegated to the advice columns."

In particular, overstating the problem can make it harder to make sure we are focusing on the people who need help the most. When Britain announced its new ministry, officials insisted that everyone, young or old, was at risk of loneliness. Yet the research tells us something more specific. In places like the United States and Britain, it's the poor, unemployed, displaced and migrant populations that stand to suffer most from loneliness and isolation. Their lives are unstable, and so are their relationships. When they get lonely, they are the least able to get adequate social or medical support.

I don't believe we have a loneliness epidemic. But millions of people are suffering from social disconnection. Whether or not they have a minister for loneliness, they deserve more attention and help than we're offering today.