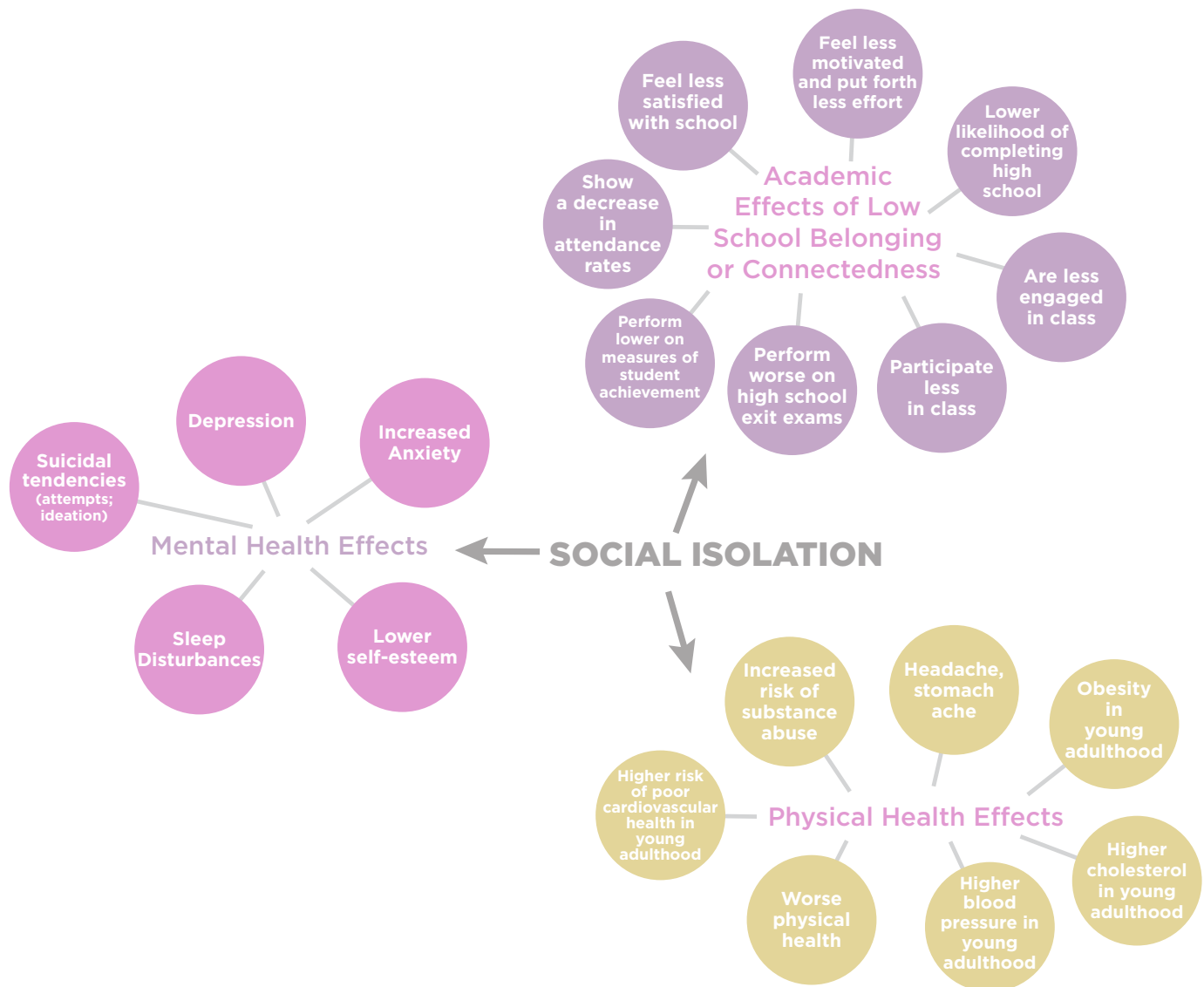


The Health Consequences of Social Isolation

“It Hurts More Than You Think”

Literature Review for Beyond Differences: Negative Correlates of Social Isolation

An Executive Summary issued by
Beyond Differences



Laura Talmus and Ace Smith Co-founders

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The Health Consequences of Social Isolation “It Hurts More Than You Think”

Literature Review for Beyond Differences: Negative Correlates of Social Isolation

Compiled by Drs. Dabney Ingram and Rebecca London, July 2015

Social isolation: “The absence or perceived absence of satisfying social relationships;”¹
“[perceiving] a discrepancy between the desired and achieved patterns of social interaction.”²

Humans are a social species. We have an inherent need to feel connected to others and to feel like we belong with others.

A Note to Teachers, Administrators and School Staff: “It Hurts More Than You Think” is not just a catchy name for a scientific paper. It is a truth. Social isolation is a silent and often-times dark reality experienced by many of the children in your daily care with real health consequences attached. It doesn’t always look like what you’d expect: teasing and bullying are easier to spot. Social isolation is a category by itself. And it’s worth taking notice and bringing that awareness to your school and students through Beyond Differences’ programs.

This document is for you, our school partners.

Thank you for taking the time to read it and we look forward to working with you to end social isolation among middle school students.

A growing body of evidence shows that if this social need is not met, and we regularly feel lonely or socially isolated, ***then our body reacts in a number of ways that are damaging to our health and well-being.***⁵ A March 2015 article in Time Magazine calls loneliness the “next big public health issue,” citing research that “loneliness kills.”⁸ This public health concern merits our immediate attention from multiple angles.

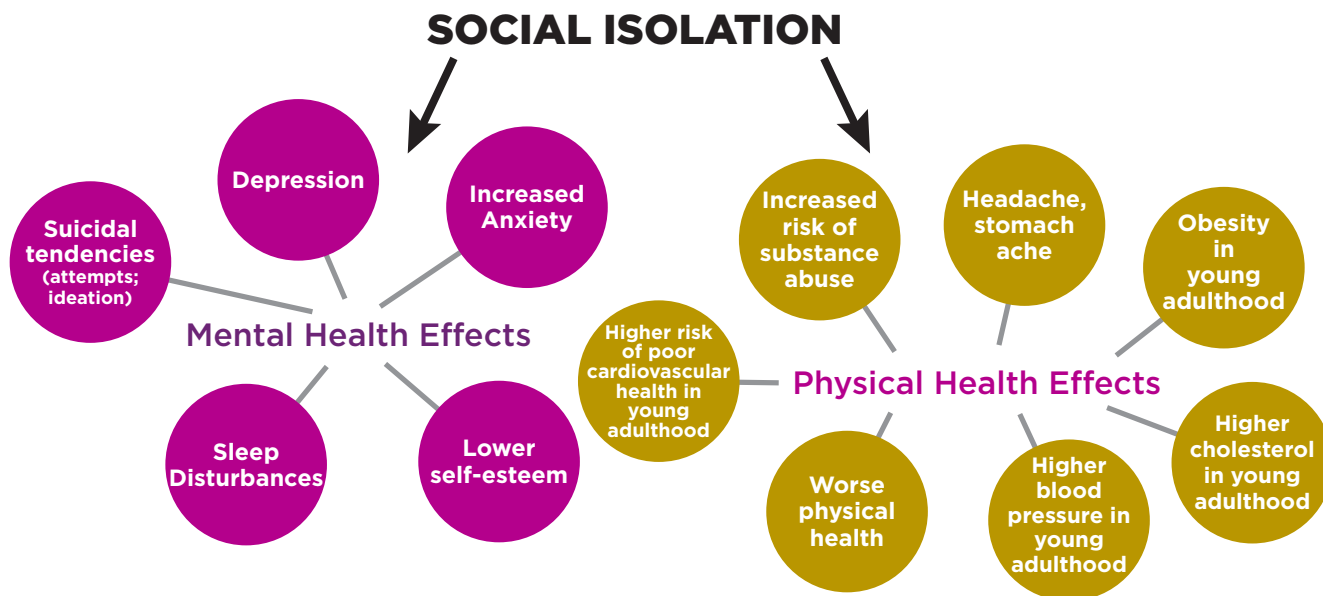
Social Isolation and Loneliness in Adults is Strongly Linked to Poor Health and Mortality.

A substantial body of scientific research shows that social isolation is a risk factor for death that is comparable to or even exceeds other well-established and well-publicized risk factors for mortality, including smoking, obesity, lack of exercise, high cholesterol, and air pollution.⁹⁻¹¹

Other related research on social isolation or loneliness finds that social isolation is also significantly associated with cognitive decline,¹⁶⁻¹⁸ depression,¹⁹ increased blood pressure,²⁰ and increased risk for heart disease,²¹⁻²³ even after holding constant other possible predictors. For example, Cacioppo et al. (2006) find that higher levels of loneliness were associated with more depressive symptoms, even after accounting for any effects related to age, gender, ethnicity, education, income, marital status, social support, and perceived stress.¹⁹

Social Isolation in Children and Adolescents is Linked to Worse Physical and Mental Health Outcomes

A growing but less abundant set of studies has focused on social isolation during childhood and adolescence. The following table outlines the reported effects of experiencing social isolation during adolescence:



Existing research demonstrates that social isolation during childhood and adolescence has both concurrent and longer-term health effects. Findings also suggest a cumulative effect of chronic isolation.

Depression and anxiety. Hall-Lande and colleagues (2007) survey over 4,700 adolescents and find that social isolation is significantly associated with higher depressive symptoms;²⁴ and Lohre (2012) reports that more frequently perceiving loneliness is significantly associated with sadness and anxiety among 419 Norwegian children between the ages of 7-16.²⁵

Lower self-esteem. Hall-Lande et al. (2007) find in their sample of over 4,700 adolescents that social isolation is significantly associated with lower self-esteem.²⁴

Sleep disturbances. Two studies find that loneliness is correlated with more sleep disturbances and taking longer to fall asleep (the first with a sample of over 200 British children aged 8-11,²⁷ and the second with a sample of 11-17 year olds³³).

Suicidal tendencies. One longitudinal study finds that loneliness in middle childhood is associated with suicidal behaviors at age 15,³⁴ and a contemporaneous study similarly finds via survey research with over 4,700 adolescents that social isolation is associated with an increased risk of attempted suicide.²⁴ These findings are especially poignant given suicide is the third-leading cause of death among children aged 15 to 19.³⁵

Substance use. Stickley et al. (2014) find from their one-time survey of about 4,000 US and Russian students between the ages of 13-15 that adolescent loneliness is associated with an increased risk of substance use.³⁶

Somatic symptoms. Lohre (2012) surveys over 400 Norwegian children between the ages of 7-16 and finds that more frequent perceived loneliness was significantly associated with somatic symptoms like stomach aches and headaches.²⁵

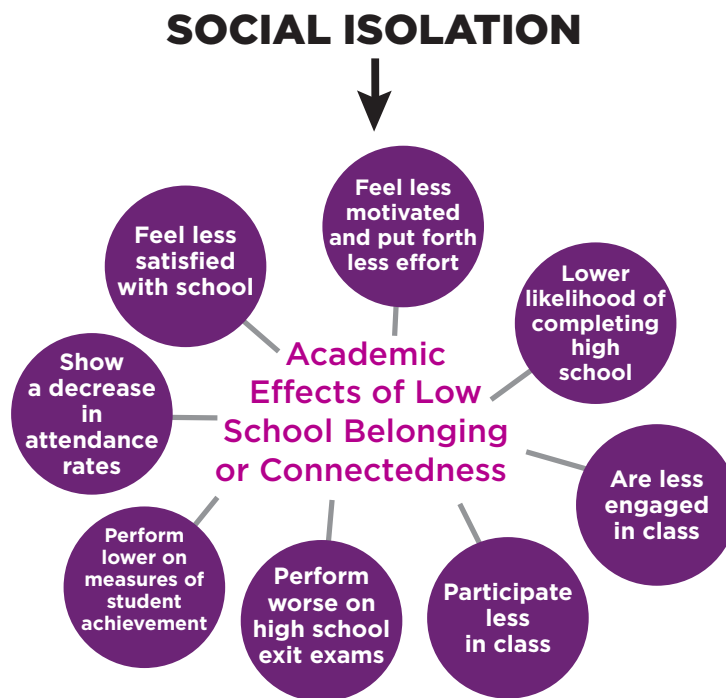
Worse perceived physical health. Higher levels of loneliness among 11-15 year olds in nine European countries were contemporaneously associated with worse physical health and well-being.³⁷ Two longitudinal studies find similar results: Qualter et al. (2013) find that persistently high levels of loneliness between ages 5 -17 were associated with more doctor visits and lower self-rated health at age 17;³¹ and,

Goosby et al. (2013), using three waves of nationally representative AddHealth data collected from 132 middle and high schools, find that loneliness during adolescence significantly increased the risk for fair or poor self-rated health in young adults.³⁸

Increased risk of poor health. One longitudinal study using a nationally representative dataset finds that loneliness during adolescence predicted a greater risk for high cholesterol, high blood pressure, and obesity in young adulthood.³⁸ Starting social isolation interventions at younger ages makes sense given the research showing that social isolation may be experienced during childhood and adolescence, and that its negative effects on health are concurrent, cumulative, and long-lasting.

Connectedness and Belonging in School is Critical for Academic Success

Research findings from the secondary schools literature – which tends to measure students’ sense of “belonging” and “connectedness,” viewed broadly as inverse indicators of social isolation – further supports the need for bolstering student connectedness: school belonging is important for motivational, behavioral, and performance outcomes.⁴⁰⁻⁴⁵ For example, students who report lower belonging or connectedness at school tend to feel less motivated and less satisfied at school, tend to be less engaged in and participate less in their classes, have worse attendance records, perform worse on high school exit exams, have a lower likelihood of completing school, and tend to perform lower on measures of student achievement for which schools are held accountable.⁴⁰⁻⁵² These findings are summarized below.



The Promising Possibilities of Establishing Social Isolation Prevention in Schools

Belonging and feeling socially included are powerful needs which, left unmet, have deleterious physical, mental, and academic effects. The need to belong is such a fundamental human need that – in the context of schools – young students who do not have a sense of belonging at school will exhaust themselves while seeking to satisfy this need and will not be capable of the higher-level functioning needed to excel in school.

Yet in an era of high stakes accountability, schools are notoriously more focused on efforts to improve test scores than those aimed at “softer” skills or problems, such as social isolation. The research summarized in this brief reminds us that efforts often perceived as soft can have a significant effect on many key correlates of academic success.

As adolescence is a period of especially high risk for loneliness, and young people spend a large amount of their awake time in schools, embedding prevention or intervention efforts in schools seems promising. Schools are an ideal context for practicing and promoting healthy relationships and social skills—both at the individual level (e.g., teaching students about the importance of including others and helping those who feel isolated learn techniques to improve their connectedness) and at the school level (e.g., nurturing a positive school climate that minimizes opportunities for social isolation).

A school-wide intervention approach is supported by research. Qualter (2003) argues that a whole-school intervention for childhood loneliness is a preferable route because (a) it does not single out, label, or stigmatize individuals as being lonely, and (b) changing the practices and ethos of social periods – such as lunch and recess – will go a long way towards helping lonely children without singling them out.⁵⁸ Spratt (2006) adds that the structures and cultures of a school may unintentionally perpetuate issues like social isolation; therefore, environmental factors are important, and need to be deeply examined and potentially modified to best support the mental well-being of students.⁵⁹

How You Can Spread the Word to Make a Difference in Your School

Beyond Differences is inspiring youth to end social isolation

Through student leadership, Beyond Differences is changing the culture of middle school every day by ensuring that every child feels accepted, included and valued by their peers no matter what their differences. Beyond Differences works directly with students in middle schools and high schools as leaders and mentors to their classmates – with the support of their teachers and administrators – to promote inclusion and kindness.

Founded in 2010 in memory of Lili Rachel Smith, Beyond Differences has innovated and created original initiatives and programs to combat social isolation and build inclusive communities in school and on the digital playground. These include assembly presentations, national social media campaigns, positive community activism, and school-based teacher curriculum.

On February 13, 2015, National No One Eats Alone™ Day was held in over 700 schools in 38 states and impacted nearly 400,000 middle school students and received widespread regional and national news coverage. Launched in 2014, Be Kind Online asks teens to pledge to be kind online and not post anonymously. Together with this research evidence that social isolation among adolescents is an important issue deserving of our attention and that students are the true leaders of this change, programs like Beyond Differences’ No One Eats Alone™, Be Kind Online, and school-based curriculum will help end social isolation..

Please visit our website www.beyonddifferences.org and find out how we can support you and your school today!

Thank you.

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Mission Statement

Beyond Differences empowers students to end social isolation
in middle school through online and campus programs

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