

LONELINESS

Loneliness: How finding balance could be the solution
with Dr. Stuart Lustig



Loneliness has garnered increased attention over the last few years, and is predicted to be perpetuated further by the global COVID-19 pandemic.¹ Its causes are intricate and personal, but what has emerged from Cigna's research is that finding balance in certain aspects of our lives could help us feel less lonely.²

The feeling of loneliness is common to all of us; everyone feels lonely at some point during their life. It is subjective to an individual, and can arise when our expectations don't match reality. As Dr. Stuart Lustig, National Medical Executive for Behavioral Health, explained at a recent Wellbeing Insights Forum: "Loneliness, just like stress, has a cognitive component. You have to believe that your life should be different in some way, that you should have more connections with people, or that you should have a deeper type of relationship with people than you currently have."

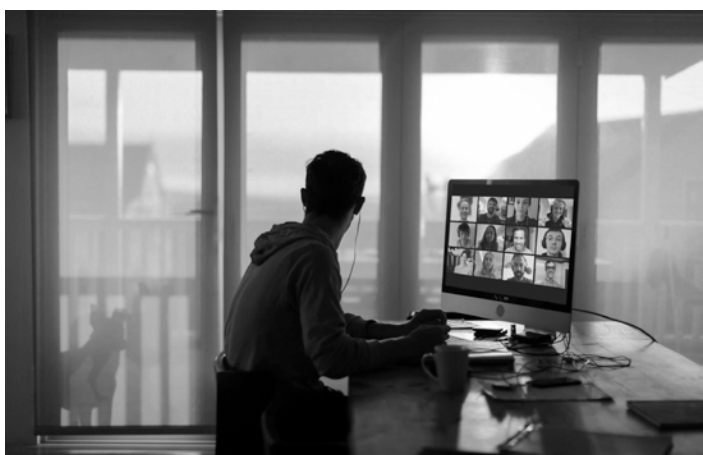
This may go some way to explaining a paradox exposed in the U.S. Loneliness Index 2018. Older people have surprisingly reported feeling the least lonely, despite being subject to circumstances that would potentially increase loneliness - living alone, having an greater likelihood of losing their spouse, family and friends, and being less technologically minded. In fact younger people, specifically generation Z (age 18-22 years) are the loneliest demographic; and people reportedly get progressively less lonely as they age.³ A similar pattern is also found in European data.^{4,5} It would seem that, as Dr. Lustig reflected, "...over the years, we somehow learn how to be less lonely - we learn how to have the connections that really matter with people".

It is logical therefore, that there are concerns about loneliness in the workforce. As Dr. Lustig explained: "People are lonely when they're younger; and most of these people are working." Indeed, Cigna research has found that over 60% of employees have stated that they feel lonely. These same employees also cite lower productivity, increased absences, and lower quality

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work.² It is clear that employers should take loneliness in their workforce seriously, especially as procedures implemented to limit the risk of further outbreaks of COVID-19, such as social distancing, long-term working from home, and limitations on socialising, could further exacerbate loneliness.

Cigna's 2020 follow-up research discovered that finding balance in work and home life could be key to feeling less lonely. Those who report that they work too little or too much are more likely to feel lonely.² As with



loneliness, work-life balance is subjective to the individual. Achieving work-life balance is more complex than merely taking steps to work fewer hours. A given role has demands and resources and when these are off kilter, creating high demands alongside little opportunity to make decisions, the sense of reduced control can create psychological strain. When the demands versus the control is in balance, a high workload can feel achievable to an individual.⁶

Family life is also, unsurprisingly, instrumental to how lonely someone feels. People claiming they do not have enough time with their family is unsurprisingly linked with loneliness. However, so is spending “too much” time with family.² These results align with findings that carers and single parents, and in particular single mothers, are vulnerable to loneliness.⁷ “Who is in your family really matters. You are more likely to be lonely if you are a single parent – particularly a woman – at home with children.” explained Dr. Lustig.



Research suggests that loneliness has significant association with several risk factors for chronic diseases, including low fruit or vegetable intake, smoking, and physical inactivity.^{8,9} The link between physical activity and loneliness was also identified in Cigna’s research; those who felt they did the correct amount of exercise were less lonely compared to those who felt they did too little or too much. As Dr. Lustig considered, “Physical activity can have an impact on loneliness; perhaps you are too busy so don’t have time to exercise, or to connect with others.” There may also be a physiological pathway. Intensive exercise can increase cortisol, the stress hormone that has been associated with loneliness, whereas moderate activity can reduce cortisol levels.^{10,11,12}

Given the association between loneliness and unhealthy lifestyle behaviours, it is therefore not unexpected to find that loneliness has a negative effect on mental and physical health. However,

the scale of the impact is astounding. Social isolation presents a major risk for premature mortality, comparable to other risk factors such as high blood pressure, smoking, or obesity.¹³ It increases the risk of heart disease, stroke, depression, and dementia.^{14,15,16}

Several possible pathways linking loneliness to disease have been suggested, including effects not just on lifestyle habits, but homeostatic changes, and sleep quality.¹⁷ Accordingly another finding from the research was that those who slept the right amount were also the least lonely. Research has previously connected

impaired sleep quality and insomnia to loneliness.¹⁸ While sleeping too little or too much is connected with an increased risk of several chronic diseases, such as heart disease and type 2 diabetes.¹⁹

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It is clear that long-term loneliness can be incredibly damaging to both individuals and businesses. As the negative impact of loneliness on health and work performance is complicated and multifactorial, a holistic solution is required. Finding an equilibrium between activity, sleep, and family and work-life balance may help pave the way to tackling loneliness.

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With special thanks to:



Dr. Stuart Lustig, National Medical Executive for Behavioral Health

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