

## Similar to Smoking 15 Cigarettes a Day

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Dr. Vivek Murthy, former U.S. Surgeon General, was interviewed by Felice Freyer for an article that appeared last month in *The Boston Globe*. Murthy highlighted a condition that he believes is more prevalent than many people realize and represents a major health issue, including a heightened risk for cardiovascular disease and chronic illnesses. He noted that its effect on mortality was similar to “smoking 15 cigarettes a day.”

What is the condition that is so injurious to our health? “Loneliness.” In the interview with Freyer, Murthy asserted that loneliness “places the body in a chronic stress state and increases inflammation levels. . . . Essentially that data is telling us that loneliness kills.”

Murthy recently published a thought-provoking article in the *Harvard Business Review* examining the presence and impact of loneliness in the workplace. He defined loneliness as “the subjective feeling of having inadequate social connections” and noted, “Rates of loneliness have doubled since the 1980s and affected people of all ages and socioeconomic backgrounds across the country.”

He added this sobering observation about the consequences of a lack of connections with other people. “During my years caring for patients the most common pathology I saw was not heart disease or diabetes; it was loneliness. The elderly man who came to our hospital every few weeks seeking relief from common pain was looking for human connections . . . . But we haven’t focused nearly as much effort on strengthening connections between people as we have on curbing tobacco use or obesity.” Murthy stated that loneliness is not only associated with a greater risk of cardiovascular disease but also with dementia, depression, and anxiety.

In his *Harvard Business Review* piece, Murthy expressed the view that “loneliness reduces task performance, limits creativity, and impairs other aspects of executive functions such as reasoning and decision making. For our health and our work, it is imperative that we address the loneliness epidemic quickly.”

Murthy's position reminded me of a slide I show during my week-long seminar titled "Resilience Across the Lifespan." It is a quote from Dr. Dean Ornish, a physician and cardiovascular researcher who is the president and founder of the nonprofit Preventive Medicine Research Institute in Sausalito, California. Ornish expressed the following powerful opinion:

Love and intimacy are at the root of what makes us sick and what makes us well. If a new medication had the same impact, failure to prescribe it would be malpractice. Connections with other people affect not only the quality of our lives but also our survival.

### **Loneliness at All Ages**

During my 40-year clinical practice, I have heard many accounts of the emotional and physical toll of loneliness on individuals of all ages. A six-year-old boy with delayed social skills cried as he told me, "No one ever wants to play with me." A ten-year-old girl said, "I feel all alone. Other kids don't invite me to their homes. They don't even invite me to sit at the lunch table with them at school." A 19-year-old man who experienced a number of medical problems during his adolescence that significantly curtailed opportunities for peer interactions observed, "I thought it was tough enough in high school making friends, but now that I'm out of high school and don't know what I want to do and can't find a job, I feel even more lonely."

While loneliness can exist at any age, in a *Boston Globe* article titled "Dangers of Loneliness" by Karen Weintraub, psychologist J. David Creswell at Carnegie Mellon University noted, "Loneliness is particularly problematic among older people. They may have lost loved ones, or their social fabric may have frayed when they left the workplace or the neighborhood where they laid down roots." While Creswell alluded to the possibility of loneliness increasing when one leaves the workplace, Murthy emphasized that even when at work, we are not immune to the experience of loneliness.

The prevalence of loneliness and the mental and physical health problems associated with this condition prompted British Prime Minister Theresa May to appoint a "minister of loneliness" with the charge of more fully understanding and addressing what she called "a sad reality of modern life." She announced that part of the minister's

responsibility would be to attempt to assess loneliness, seek solutions, and fund and strengthen community projects that might alleviate this problem.

### **The Complexity of Loneliness**

The factors that contribute to loneliness are complex. Inborn temperament and life experiences interact in a dynamic way. Dr. Steve Cole, a psychologist at the UCLA School of Medicine, advanced the position in Weintraub's *Boston Globe* article that for some people counteracting loneliness is not as straightforward as providing opportunities for social interactions. He stated, "There are people—whether socially isolated or not—who tend to be mistrustful of others, often negative, and feel threatened. When we think of loneliness, we think about it in a sad, dejected way—as a quiet emotion, but this biology is the biology of threat."

Cole noted that what could be considered a "lonely temperament" was relatively common and required more than ensuring contact with others. Rather, if loneliness is viewed as a condition of social anxiety, a different approach is required. One intervention undertaken by Cole and Creswell involved having lonely people participate in an eight-week program of mindfulness. At the conclusion, the participants reported feeling less lonely and anxious, which then set the stage for more comfortable interactions with others.

I have often expressed the opinion that our perceptions and behaviors are rooted in our inborn temperament as well as our life experiences and that these forces constantly and dynamically influence each other. Although the effectiveness of particular interventions for loneliness will vary from one person to another, I believe there are individual and community strategies we can initiate to address this problem. Although we may not be able to reach every person burdened by an intense feeling of loneliness, I think there are many we can reach. Increased research, perhaps prompted by the focus being taken in Great Britain, will provide significant information in this effort.

### **Connections as an Antidote to Loneliness**

My colleague Dr. Sam Goldstein and I have recognized the debilitating effect of loneliness by calling attention to the power of connections with others as a vital foundation of resilience. A fundamental finding in the resilience literature is the impact that even one person can have in promoting hope and resilience in another individual. As

many of my readers are aware, the late psychologist Dr. Julius Segal called that person a “charismatic adult,” as someone who serves as a “source of strength” in the life of another person.

Segal applied the term “charismatic adult” when discussing the impact adults had on the lives of children, but as Sam and I emphasized in our book *The Power of Resilience: Achieving Balance, Confidence, and Personal Strength in Our Life*, even as adults we need other people from whom we gather strength. And, as a burgeoning body of research demonstrates, loneliness is lessened and resilience is boosted when we assume the role of a charismatic adult—even when what we do to benefit others seems to be a seemingly small gesture.

I am aware that relationships cannot be forced on people; given their inborn temperament or certain life experiences, some individuals would not even welcome efforts by others to come into their lives. However, if we subscribe to the assumption that one caring relationship can be emotionally and physically nourishing, then I believe it behooves us to consider ways in which we can promote connectedness. The following are just a few preliminary ideas. I am certain each person reading this column can think of many other activities.

### **In the School Setting and Beyond**

In my visit to many schools I have witnessed initiatives to create what I consider to be natural, supportive connections. For instance, having teachers and other staff review whether they really know each student can encourage them to spend a little extra time chatting with those students who are more isolated and not known. This increased positive attention can help to reinforce the student’s sense of belonging.

A greater emphasis on a social-emotional curriculum replete with themes of empathy and caring can be incorporated into the school climate. Lest people argue that such an emphasis would take valuable time away from teaching academics, research indicates that when students feel welcomed and accepted by teachers and peers, negative emotions decrease and it becomes easier for them to learn. In a number of my workshops I show a brief video of a boy eating by himself in the cafeteria of a middle school and how things improve significantly when a visiting college football player sits next to him. By the next day, the boy’s peers join him at lunch. While relationships cannot be

dictated, I know that if any student is eating alone, it is incumbent upon the school to find ways for that student to feel included.

As I noted earlier, positive relationships are forged and resilience is reinforced when people are engaged in activities that enrich the lives of others. I have witnessed the long lasting benefits of inviting lonely, isolated students to read to younger students or to help out in some other fashion. Generosity and purpose are potent forces that promote health throughout our lifespan.

In adulthood, connections can be strengthened in many settings and forms; for example, at places of worship or involvement in charitable activities or political causes. I realize that some people, although feeling isolated, may be hesitant to take the first steps to join in activities that would bring them in contact with others. However, this should not serve as an impenetrable barrier from inviting them to join us in different endeavors. A man I saw in therapy benefited from going with an acquaintance to book readings sponsored by local bookstores. This man loved to read and his attendance at these events led to his meeting a few others who shared his interests. As he told me, “I now know some people that I can go to bookstores with and also to a movie or out to dinner.”

### **In the Workplace**

Murthy identified the benefits of connections in the work environment. People were “more likely to be engaged with their jobs and produce higher quality work, and less likely to fall sick or be injured.” In addition, Murthy wrote that connections enhance self-efficacy and positive emotions, “which can buffer an individual during stressful situations and have positive effects on health.”

Murthy recommended several strategies to fortify connections and lessen loneliness in the workplace. One was to identify the characteristics of positive relationships and build upon them. “High quality relationships must be grounded in love and informed by kindness, compassion and generosity.” Murthy cautioned that although these qualities are often interpreted as “soft,” in fact studies “shows that positive emotions enhance performance and resilience.”

Another suggestion was “designing and modeling a culture that supports connection, which is more important than any single program.” Murthy described the significance of senior management taking time to build strong relationships with all team

members. He also noted the benefits of “co-workers reaching out and helping others—and accepting help when it is offered. . . . Although it may seem counterintuitive to assist others when you are feeling lonely, extending help to others and allowing yourself to receive help build a connection that is mutually affirming.” In my own research as well as that of others, engagement in what I call “contributory activities” is one of the most effective ways of nurturing meaning, satisfying relationships, and resilience in our lives.

### **Our Senior Years**

Creswell and others have written that senior citizens appear to be most vulnerable to experiencing isolation and loneliness. This population is increasing in number and thus it becomes imperative that greater time and energy be paid to designing ways for this age group to maintain social connections. Most independent and assisted living programs provide opportunities for connections with others as do senior centers that are now established in many cities and towns.

I believe that it is important for family members to spend time with their elderly relatives (we must remember that someday we will be in the role of the elderly relative). When possible, our contact should be done in person, but I recognize that living far apart may dictate that most interactions take place over the phone; a number of seniors now use Facetime or Skype as communication tools.

I will be very interested in learning what recommendations and programs emerge in Great Britain as a result of having a minister of loneliness. The creation of such a position acknowledges that a problem of significant magnitude exists, one that demands our attention. As Murthy emphasized:

The world is suffering from an epidemic of loneliness. If we cannot rebuild strong, authentic, social connections, we will continue to splinter apart—in the workplace and in society. Instead of coming together to take on the great challenges before us, we will retreat to our corners, angry, sick, and alone. We must take action now to build the connections that are the foundation of strong companies and strong communities—and that ensure greater health and well-being for all of us.

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