

# Loneliness coping strategies: Their perceived effectiveness and frequency of use

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## Abstract

Loneliness affects a sizable percentage of the U.S. adult population, and although interventions and therapy can address loneliness, it is not feasible for tens of millions of people experiencing loneliness to access these resources. Therefore, the aim of this study is to develop a typology of coping strategies that lonely individuals use to address loneliness and to categorize such strategies based on their perceived effectiveness or ineffectiveness. A nationally representative sample of 621 U.S. adults provided 2878 loneliness coping strategies they used, which allowed for inductively creating a set of 19 categories of loneliness coping strategies. Strategies ranged from the relational (e.g., forming new relationships), to the behavioral (e.g., healthy lifestyle changes), to the cognitive (e.g., self-reflection). Results showed that strategies vary in their perceived success rate and, as such, were categorized as being perceived as effective, mixed results, or ineffective. Likewise, strategies varied in their frequency of use and were also categorized as common, infrequent, or rare. Patterns emerged showing that certain strategies are generally perceived as more effective than others; however, even the strategies most consistently perceived as effective were viewed as ineffective by some and vice versa. We discuss our typology of strategies in terms of how they align with existing theories on loneliness, act as an update to previous research on the topic, and the ways in which our findings can generate future research directions. From a practical standpoint, documenting the many strategies used to combat loneliness provides lonely individuals with a variety of strategies they can implement to address their loneliness. Our primary recommendation is that lonely individuals should use several strategies simultaneously to address their loneliness and accept that the effectiveness of these strategies will likely depend on their personality, circumstances, and reason for their loneliness.

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Coping, effectiveness, frequency, loneliness, loneliness coping strategies

## Introduction

A recent report from [Meta and Gallup, Inc. \(2023\)](#) estimates that 15% of U.S. adults report feeling very or fairly lonely, and a separate report found one in three U.S. adults have no close personal relationships ([Cigna, 2021](#)). Loneliness rates are not only high, but also increasing. In 2021, 49% of U.S. adults reported having three or fewer friends—a percentage that has almost doubled since 1990, when only 27% reported the same ([Cox, 2021](#)).

Loneliness rates are consequential given the well-documented mental and physical health detriments of loneliness, which at times can be severe (for a recent review, see [Rokach & Patel, 2024](#)). For example, studies show that lonely individuals are more likely to experience clinical and subclinical depression ([Aylaz et al., 2012](#); [Cacioppo et al., 2006](#)). Recent studies suggest that loneliness is not just occurring concurrently with several mental health issues but is also associated with the *onset* of people's mental health problems, such as depression ([Mann et al., 2022](#)). Notably, the connection between loneliness and self-harm is well documented (see scoping review by [Shoib et al., 2023](#)). This includes loneliness as a predictor of suicide ideation ([Teo et al., 2018](#)), parasuicidal behavior ([Stravynski & Boyer, 2001](#)), and suicide attempts ([Pitman et al., 2020](#)).

Other physical health effects of loneliness beyond self-harm have also been established. Lonely individuals are more likely to experience health issues, such as hypertension ([Momtaz et al., 2012](#)), greater pain and fatigue ([Jaremka et al., 2013](#)), and sleep dysfunction and nightmares ([Floyd et al., 2025](#); [Hawkley et al., 2010](#)). On a broader level, lonely individuals experience premature biological aging ([Galkin et al., 2022](#)) and are 26% more likely to die prematurely, making loneliness approximately as detrimental to one's mortality as smoking up to 15 cigarettes per day ([Holt-Lunstad & Smith, 2012](#)).

Loneliness also has social and relational consequences. Recent work found that lonely individuals are less likely to experience compassion for those who are suffering ([Ray et al., 2024](#)) and are less trusting of others ([Lieberz et al., 2021](#))—both of which are important interpersonal characteristics for developing and maintaining relationships. Additionally, lonely individuals are both more likely to act negatively toward close others and to be perceived negatively by others ([Tsai & Reis, 2009](#)). Moreover, research shows that lonely individuals are less satisfied with the relationships they do have ([Frye-Cox & Hesse, 2013](#)). Thus, considering the prevalence of loneliness and its potentially severe mental, physical, social, and relational consequences, finding ways to address and reduce loneliness has become a public health crisis and has been labeled an epidemic by former U.S. Surgeon General Vivek Murthy in his 2023 report, “Our Epidemic of Loneliness and Social Isolation.”

Although loneliness interventions and counseling have efficacy in addressing loneliness (see meta-analysis by Masi et al., 2011), it is not feasible for tens of millions of adults to have access to these resources or for counselors, therapists, and others to administer such resources to a sizable portion of the population. However, loneliness is not an incurable condition, and studies show that a majority of lonely individuals overcome their loneliness (e.g., Newall et al., 2014). In fact, well supported theories of loneliness uphold the idea that people want to address their loneliness and may do so with a multitude of strategies that may vary in their perceived effectiveness. For example, the Evolutionary Theory of Loneliness (ETL; Cacioppo & Cacioppo, 2018) asserts that loneliness serves as an aversive signal that motivates people to address deficiencies in the quantity and quality of their relationships, whereas the Social Skills Deficit Vulnerability Model (Segrin et al., 2016) has shown that even those motivated to address their loneliness may lack the requisite social skills needed to create and maintain satisfying relationships. As such, even lonely individuals who are motivated to address their loneliness may lack the communication competence necessary to do so. Or, in the terminology of the repair/replacement postulate of ETL, they may not have the skills needed to “repair or replace perceived deficiencies in one or more important salutary social relationships” (Cacioppo & Cacioppo, 2018, p. 137).

Therefore, the aims of this study are to document the loneliness coping strategies taken to address loneliness and to determine the *frequency* and *perceived effectiveness* of these strategies. From a scientific standpoint, accomplishing these aims can offer several contributions, such as (1) determining whether the loneliness coping strategies that emerge from our data align with existing theories of loneliness, (2) extending prior work on loneliness coping strategies that may be outdated or that was not conducted with a large representative sample to understand how people are coping with loneliness in a post-COVID-19 pandemic world, and (3) offering potential future directions for practitioners interested in developing loneliness interventions focused on promoting loneliness strategies that people perceive are effective (and avoiding interventions that utilize coping strategies that are typically ineffective). Perhaps, though, the focal contribution of this work comes from its potential to achieve what Chaffee and Berger (1987) refer to as heuristic provocativeness: the potential to “generate new hypotheses, which expand the range of potential knowledge” (p. 104). We believe that our work can set an agenda for future loneliness research that focuses on why certain strategies are perceived as effective by some, but not by others. Or, as previously noted, “There is probably no one, all-encompassing approach to coping with loneliness” (Rokach, 1990, p. 51); however, a study such as this one can help determine which coping strategies are consistently effective and worth further scientific exploration.

From a practical standpoint, our intention is that these findings can provide guidance to lonely individuals who do not have access to therapy or who are looking for coping strategies beyond seeking professional help. That is, our results can provide a proverbial road map of what works, what does not work, what people are doing, and strategies that people may have not yet considered when it comes to self-directed attempts to address loneliness. The forthcoming study rationale begins by reviewing the efficacy of various forms of loneliness interventions. This is followed by a review of the relatively small body

of research on loneliness coping strategies, noting both the strengths and limitations of prior studies and the subsequent need for this study.

### *What are lonely individuals doing to address their loneliness?*

Although several loneliness interventions have been developed and tested (see meta-analyses by [Eccles & Qualter, 2021](#); [Masi et al., 2011](#)) and research has shown the efficacy of therapy to reduce loneliness (e.g., [McWhirter, 1990](#)), relatively few studies have focused on the loneliness coping strategies individuals implement on their own to address their loneliness. Coping strategies are defined as, “individuals’ constantly changing cognitive and behavioral efforts to manage specific external and internal demands appraised as taxing or exceeding their resources” ([Schoenmakers et al., 2012](#), p. 154). Of note, coping strategies, then, consist of both problem-focused and emotion-focused strategies that span both the cognitive and the behavioral.

A recent systematic literature review by [Deckx and colleagues \(2018\)](#) located and summarized the findings from 12 studies on coping strategies and loneliness. Overall, problem-focused strategies such as creating new opportunities for social contact associated with lower levels of loneliness, whereas emotion-focused strategies such as adjusting expectations about relationships associated with higher loneliness levels. A commonality across these 12 studies is that they were quantitative in nature, and coping was determined using instruments to measure various positive and negative coping behaviors, such as seeking social support or blaming oneself. Moreover, the samples from these studies were typically small ( $N < 200$ ) and usually composed of members of specific groups, such as cancer patients or heterosexual HIV-infected women, as opposed to the general population.

Other work has explored specific actions and strategies employed by those hoping to reduce loneliness. For example, studies by [Rokach \(1990\)](#) and [Rokach and Brock \(1998\)](#) have elucidated both effective and ineffective strategies for coping with loneliness. Constructive behaviors include but are not limited to reflective solitude, acceptance of one’s circumstances, starting new relationships, attending religious services, lifestyle changes, creating a network of supporters, and increased social interaction—even if said interactions were superficial or short-term. Destructive coping strategies were less numerous and consisted of criminal activity, addictive behaviors, self-induced isolation, and attempted suicide.

In many ways, [Rokach’s \(1990\)](#) study, in which a set of loneliness coping strategies were derived inductively from qualitative data, mirrors the goals of the present study. However, although Rokach had over 500 participants, the vast majority were under 45 years of age, which does not adequately account for the loneliness coping strategies of older adults, which is one of the loneliest subgroups of the population. Moreover, the study was conducted 34 years (or almost two generations) ago. Although this does not automatically nullify any of their findings, it is likely that coping strategies have evolved as society has changed. For example, major generational events such as the COVID-19 pandemic have occurred and have been shown to influence loneliness rates (e.g., [Ray, 2021](#)). Technology has also progressed via the advent of the internet, social media, and

smartphones. As an example, in 2019 roughly four out of five adults used social media (Ortiz-Ospina, 2019), and problematic social media use has been linked to loneliness (O'Day & Heimberg, 2021).

More recently, a qualitative interview study (Tagomori et al., 2022) explored how low socio-economic status young adults in London cope with loneliness, and their results revealed six key themes: seeking connection, avoidance, distraction, seeking social support, meaning-focused coping, and cognitive strategies. These themes overlapped considerably with prior work by Rokach (1990) on coping strategies and with the types of interventions overviewed by Masi and colleagues' (2011) meta-analysis of loneliness interventions. Although this study's inductive approach is useful, the sample consisted of just 48 adolescents, and it is possible that other coping strategies exist but did not occur for the 48 people interviewed.

### *The present study*

In summary, although prior studies have inductively analyzed lonely individuals' loneliness coping strategies, many of those studies were conducted prior to societal events that may influence loneliness coping strategies, such as the invention of the smartphone and social media and the COVID-19 pandemic. Moreover, many of the studies were conducted with specific subgroups of the general population and/or had a relatively small sample size. What is missing from the research is a recent (post-COVID-19 pandemic), large-scale study using a nationally representative sample of adults who are experiencing loneliness and willing to share in their own words the coping strategies they have used to address their loneliness and whether such strategies were perceived as effective or ineffective. Such an endeavor would not only act as an update to the prior research on the use of various loneliness coping strategies, but also have heuristic value by directing communication scholars and social scientists toward specific strategies that might be useful to include in the development of future loneliness interventions. Therefore, the following research questions are posed:

**RQ1:** What coping strategies do people use to address loneliness?

**RQ2:** How do loneliness coping strategies vary in their frequency of use?

**RQ3:** To what extent are various loneliness coping strategies perceived as effective or ineffective?

## **Methods**

### *Recruitment and participants*

All procedures were approved by the institutional review board at the researchers' university. The lead researcher contracted the company Prolific to recruit a nationally representative sample of U.S. adults ( $N = 621$ ) that matched U.S. census data based on age, ethnicity, and sex. Table 1 presents demographic information and Table 2 provides

**Table 1.** Participant demographics ( $N = 621$ ).

	<i>n</i> (%)
Are you currently experiencing loneliness?	
Yes	263 (42.4%)
No, but have previously	358 (57.6%)
Gender	
Man	293 (47.2%)
Woman	307 (49.4%)
Non-binary/Third gender	11 (1.8%)
Transgender woman	1 (0.2%)
Transgender man	3 (0.5%)
Prefer not to answer/No response	6 (0.9%)
Ethnicity	
White	484 (77.9%)
Black/African American	81 (13.0%)
Asian	35 (5.6%)
Latinx	24 (3.9%)
Native American/First nations	10 (1.6%)
Another response	5 (0.8%)
Prefer not to answer/No response	2 (0.3%)
Hispanic	
Not Hispanic	583 (93.9%)
Hispanic	33 (5.3%)
No response	5 (0.8%)
Romantic relationship status	
Single/Not in a committed relationship	214 (34.5%)
Committed dating relationship	102 (16.4%)
Engaged	18 (2.9%)
Married	204 (32.9%)
Divorced/Separated	61 (9.8%)
Widowed	13 (2.1%)
Prefer not to answer/No response	9 (1.4%)
Sexual orientation	
Straight	479 (77.1%)
Bisexual	60 (9.7%)
Gay/Lesbian	36 (5.8%)
Pansexual	11 (1.8%)
Asexual	13 (2.1%)
Demisexual	4 (0.6%)
Queer	8 (1.3%)
Prefer not to answer/No response	10 (1.6%)

*(continued)*

**Table 1.** (continued)

	<i>n</i> (%)
Education	
Did not graduate high school	7 (1.1%)
High school graduate or equivalent	84 (13.5%)
Trade, technical, or vocational training	22 (3.5%)
Some college credit, No degree	131 (21.1%)
Associate degree (2-year degree)	66 (10.6%)
Bachelor's degree (4-year degree)	207 (33.3%)
Master's degree	78 (12.6%)
Professional doctorate (e.g., MD, JD)	9 (1.5%)
Academic doctorate (e.g., PhD, EdD)	11 (1.8%)
Prefer not to answer/No response	6 (1.0%)
Disability status	
No disability reported	475 (76.5%)
Mental health impairment (e.g., anxiety)	87 (14.0%)
Mobility impairment (e.g., Arthritis)	31 (5.0%)
Cognitive impairment (e.g., ADHD)	42 (6.8%)
Sensory impairment (e.g., hearing loss)	17 (2.7%)
Another diagnosis	22 (3.5%)
Prefer not to answer/No response	21 (3.3%)
Employment & student status	
Full-time work (35+ hours weekly)	277 (44.4%)
Part-time work (<35 hours weekly)	129 (20.6%)
Full-time student	37 (6.0%)
Part-time student	9 (1.4%)
Unemployed	85 (13.7%)
Retired	73 (11.8%)
On paid disability	24 (3.6%)
Homemaker	12 (1.3%)
Household income (\$USD)	
\$0	3 (0.5%)
\$1 - \$9,999	32 (5.2%)
\$10,000 - \$24,999	84 (13.5%)
\$25,000 - \$49,999	142 (22.9%)
\$50,000 - \$74,999	118 (19.0%)
\$75,000 - \$99,999	84 (13.5%)
\$100,000 - \$149,999	97 (15.6%)
\$150,000 or more	42 (6.8%)
Prefer not to answer/No response	19 (3.1%)

Notes. Percentages for some attributes may not equal 100% exactly due to rounding error or allowing participants to select multiple responses to some questions (e.g., disability status). Participants reported living in 45 different U.S. states and Washington, D.C.

**Table 2.** Additional descriptive statistics ( $N = 621$ ).

	<i>M</i> ( <i>SD</i> )	Observed range	$\omega$
Participant age (in years)	45.38 (16.09)	18–85	–
Loneliness severity (1–9 scale)	6.16 (2.02)	1–9	.94
Loneliness (UCLA loneliness scale; 1–4 scale)	2.40 (.67)	1–4	.96
Social anxiety (social phobia inventory; 1–7 scale)	3.58 (1.46)	1–7	.95

Notes.  $\omega$  = the internal reliability statistic McDonald's omega.

additional descriptive statistics about the sample (e.g., severity of loneliness, trait-level social anxiety).

### *Study procedures*

Participation consisted of completing an online questionnaire, which was hosted on Qualtrics. After consenting to participate, participants were provided with a definition of loneliness and asked if they were (1) currently experiencing loneliness, (2) not currently experiencing loneliness, but have been lonely at some point in the past, or (3) have never experienced loneliness. Those who replied they had never experienced loneliness were asked to confirm that they have never been lonely, and those who confirmed they have never experienced loneliness were not included in this study. Because only 11 respondents reported having never experienced loneliness, we did not recruit additional respondents to replace them. Next participants were asked to think about either their current experience of loneliness or a time in the past when they were lonely and to describe the life event(s) that caused their loneliness, whether it was temporary or chronic, for how long the loneliness lasted, and the perceived severity of the loneliness.

Participants were then asked to respond to two open-ended questions, which provided the necessary data to answer the research questions: (1) What are the things you have done that have successfully addressed or reduced your loneliness? (2) What are the things that you have done to try to address or reduce your loneliness that did not work or help? A six-minute timer was included on this page with these open-ended questions to encourage in-depth responses.

Next, participants were asked if they had received advice on how to reduce or address feeling lonely. Those who did receive advice were asked to recall specific advice they received and to rate the helpfulness of each advice message. This data will be analyzed in a separate manuscript to allow for an in-depth exploration of issues surrounding the advice received by lonely individuals. The remaining pages of the questionnaire consisted of scales that measured loneliness and social anxiety and concluded with a series of demographic questions. These scales included a scale measuring loneliness severity, the UCLA Loneliness Scale (version 3), and the Social Phobia Inventory. An attention check was embedded in the Social Phobia Inventory, and no participants failed the attention check. The median time to complete the questionnaire was 12 minutes and 1 second. Participants were compensated \$3.00US for participating.



### *Data analysis and verification procedures*

Our analytical approach, described herein, is a summary of the audit trail kept by the researchers throughout the data analysis. Our analysis began with both researchers becoming familiar with the data by reading and re-reading the responses. Upon realizing that most responses consisted of multiple strategies for reducing loneliness, we decided to engage in unitizing (i.e., dividing responses into individual pieces of data to be coded). Unitizing reliability was established using the first 100 responses for successful coping strategies and the first 100 responses for unsuccessful coping strategies (200 responses total). We each unitized this set of responses independently and Guetzkow's  $U$  was calculated to determine if we were reliable in identifying units of data to be coded. Guetzkow's  $U$  is a measure of disagreement, with lower values suggesting fewer disagreements between coders regarding the number of units in the data. The Guetzkow's  $U$  calculated from these 200 responses was .032, which suggests that we had above average unitizing reliability. With unitizing reliability established, the second author unitized the remaining data. This resulted in a total of 3008 units of data to be analyzed: 1961 successful strategies, 917 unsuccessful strategies, and 129 units of data that could not be coded for a variety of reasons.<sup>1</sup> In total, there were 2878 units of data that provided a loneliness coping strategy. On average, participants provided 3.16 successful strategies and 1.48 unsuccessful strategies.

Next, we used the same 200 responses used for establishing unitizing reliability to engage in constant comparative analysis to inductively create categories of loneliness coping strategies. Each of us independently developed a set of categories for the strategies described in these initial 200 responses. We held a peer debrief meeting and shared the categories we each initially derived from these 200 responses. After comparing categories, discussing differences, and discussing the level of granularity at which categories should be developed, we decided on a codebook of 19 categories of loneliness coping strategies.

Using this agreed upon set of categories, we re-analyzed the first 200 responses—this time using the same codebook—to establish intercoder reliability. This initial attempt resulted in a Krippendorff's alpha of .70, which is below the .80 threshold for acceptable intercoder reliability. Therefore, we held a second peer debrief to discuss instances of disagreements. This resulted in the clarification of the boundaries of certain categories, such as what counts as "Being Productive" versus "Distractions" versus "Work and School." For example, a participant who specifically states they distracted themselves by spending more hours at work would be coded as "Work and School" whereas a participant saying they would binge watch television shows to take their mind off of their loneliness would be coded as "Distractions." Having refined the codebook, we then coded the same 200 responses again, but also coded an additional 50 effective strategy responses and 50 ineffective strategy responses. This resulted in a Krippendorff's alpha of .84, which is considered an acceptable level of intercoder reliability. However, we continued to meet to discuss coding disagreements and to

refine our categories before dividing the remaining data between the two of us for coding.

We divided the remaining data between us and coded it using our refined codebook. We then created a document in which the data was aggregated by category and held a data meeting in which we reviewed units of data that may have fit under multiple categories. This meeting acted as a final review of the categorization of all units of data. This process did not result in adding or deleting any categories but did result in 24 units of data (out of 2878 total units) being recategorized.

Lastly, we note that throughout our analysis we followed several data verification procedures to validate our findings, as it is important for qualitative data analyses to be dependable and confirmable. As previously noted, we met four times to engage in peer debriefing to work through differences in coding and to refine our codebook. During these meetings, we also engaged in negative case analysis as needed (see Kidder, 1981) to discuss unique instances in the responses and refine the categories until all responses were able to be placed within a category or were determined as not having any usable data (e.g., non-answers). These processes bolster the dependability of our data analysis. To make the analysis confirmable, we maintained an audit trail during our meetings to ensure that a log of our disagreements, resolutions, and decision rules regarding our categories was kept. After analyses concluded, the audit trail was used to help identify exemplars that best convey the essence of each loneliness coping strategy.

## Findings

The 19 loneliness coping strategies are described and discussed below. The strategies are organized based on their perceived effectiveness (effective, mixed results, or ineffective) and their frequency (common, infrequent, rare). A summary view of the 19 loneliness coping strategies is presented in Figure 1, which maps the strategies based on their frequency and perceived effectiveness. This figure can also be viewed on the Open Science Framework at <https://osf.io/9bjy5>. Tables 3–5 provide examples of each strategy in the form of direct quotes from participants' responses. Regardless of the perceived effectiveness rate of each strategy, we have provided examples of instances when each strategy was perceived as effective and ineffective to illustrate how strategies that were generally perceived as effective were at times perceived as ineffective (and vice versa). Moreover, we have provided additional examples of instances when strategies were perceived as either effective or ineffective (Tables 6–8) as an online appendix available on the Open Science Framework at <https://osf.io/24csa>. Lastly, we also provide the results of additional exploratory analyses to determine whether certain strategies were used more frequently depending on if the person's loneliness was temporary or chronic and whether loneliness severity was tied to the use of specific coping strategies.

	Perceived as Effective (> 75%)	Mixed Results (50-75%)	Perceived as Ineffective (< 25%)
Common > 7% of Data	<b>Strategies to Continue Using</b>	<b>Frequently Used w/ Varied Perceived Success</b>	
	Investing in Existing Relationships	Forming New Relationships	
	Being Productive	Distractions	
	Health-Focused Lifestyle Changes and Behaviors	Being Social	
Infrequent 2-7% of Data	<b>Strategies to Consider Adding</b>	<b>Depends on Quantity and Quality</b>	<b>Strategies to Abandon</b>
	Self-Reflection	Online Social Activity	Ignoring One's Loneliness
	Work & School	Therapy & Counseling	Unhealthy Behaviors & Vices
		Supportive Communication	
Rare < 2% of Data	<b>Effective Strategies That May Not Apply to All</b>		<b>Problematic Strategies w/ Alternative Solutions</b>
	Volunteering		Isolating
	Addressing Problems in Relationships		Participating in Problematic Relationships
	Religion & Spirituality		Negative Thought Patterns

**Figure 1.** Loneliness Coping Strategies Based on Their Frequency of Use and Perceived Effectiveness. *Notes.* Perceived effectiveness rates were calculated by dividing the number of times a strategy was listed as effective and by the total number of times the strategy occurred in the responses. Frequency rates were calculated by dividing the number of times a strategy occurred in the data by the total number of codable units of data ( $N_{Strategies} = 2878$ ).

**Table 3.** Loneliness coping strategies perceived as being effective.

Loneliness coping strategy	Examples ( <i>Ineffective Examples are Italicized</i> )
Investing in existing relationships <sup>a</sup>	While making new friends was essential, I also made an effort to strengthen my existing relationships. I scheduled regular video calls with family and friends back home to catch up and stay connected. These calls helped me maintain the bonds I had with my loved ones, even though we were miles apart. <i>I tried reaching out to my old friends, but that didn't work out very well. They were involved in their own lives and so we never seemed to connect on a regular basis.</i>
Being productive <sup>a</sup>	I started doing hobbies to take up my time. I would crochet afghans and doilies and I even made crocheted little refrigerator magnets. Being involved in something you enjoy doing for the sake of doing it draws you into the moment but also draws you out of yourself and your inner chatter that reminds you of your loneliness. <i>I've tried to re-energize myself about hobbies but it hasn't helped.</i>
Health-focused lifestyle changes <sup>a</sup>	I went to the gym more, working on myself helped my self-image as well as my feelings of loneliness. <i>The gym don't really seem to help because the interactions are all so short and shallow.</i>
Self-reflection <sup>b</sup>	I had to journal a lot. Writing helped to get the feelings out. <i>I started keeping a journal to express my feelings. This did not reduce my loneliness; it only made it worse and made me feel more isolated.</i>
Work & school <sup>b</sup>	When I was in a bad marriage many years ago I was very lonely. Mostly I put my energy into work to help me to cope with what was going on at home at the time. <i>While working more initially provided a sense of purpose and kept me occupied, it eventually led to burnout and increased feelings of loneliness. Working more meant that I had even less time to spend with my family and friends, which only amplified my feelings of loneliness and isolation.</i>
Religion & spirituality <sup>c</sup>	I joined a bible study group for my age group. I still felt alone but slowly got to know more and more people in the group. Some weeks it was hard to go to the church by myself not knowing if anyone would talk to me. But I kept going, people got to know me and remember me. <i>I tried rejoining my church, but I found the congregants to be conservative and judgmental. It was a great disappointment.</i>
Volunteering <sup>c</sup>	I started volunteering at a local animal shelter, which not only allows me to spend time with animals but also to connect with like-minded individuals who are also passionate about animal welfare. <i>I rarely have much in common with the people I meet [when volunteering]. They are just not that interesting to me.</i>
Addressing problems in relationships <sup>c</sup>	I was open with my partner about my feelings of loneliness and depression while separating. We reconciled and remain together now too. Communication was important in ending my loneliness. <i>One of the things I tried to do was to stop talking to my ex. I unfortunately could not do it because I'm weak minded like that.</i>

Notes. Although these coping strategies were perceived as effective over 75% of the time, we still also include instances of when each strategy was perceived as ineffective.

<sup>a</sup>Common.

<sup>b</sup>Infrequent.

<sup>c</sup>Rare.

### ***Effective & common: Strategies individuals should continue using***

We begin by considering loneliness coping strategies that were consistently perceived as effective (i.e., perceived as effective in greater than 75% of the instances the strategy was mentioned). The most commonly used strategies that were consistently perceived as effective were investing in existing relationships, being productive, and health-focused lifestyle changes and behaviors. Notably, only investing in existing relationships is inherently interpersonal, whereas the other two strategies are typically implemented individually, suggesting that common and effective strategies for addressing loneliness are not limited to increasing interactions or opportunities to socialize. These three loneliness strategies represent what many lonely people are already doing and are typically perceived as effective.

*Investing in Existing Relationships* consists of making a concerted effort to spend more time engaging in activities with others such as date nights or game nights and investing greater energy into relationships through regular contact with friends and family, both in person and through computer-mediated channels. Those who perceived that this strategy was ineffective frequently noted that it could be difficult to coordinate spending time with friends and family who were often consumed with their own lives. Others noted that time spent with others via computer-mediated channels did not entirely replace the experience of in-person socializing.

*Being Productive* consisted of individual activities that achieved, created, or developed something of value. These are activities that would be considered a productive use of time. For example, several participants reported taking up new hobbies or reengaging with previous hobbies (e.g., crafting, playing instruments), whereas others wrote about taking care of pets, and doing chores or projects around their home. Although these activities were completed individually, it appears that they allowed some lonely individuals to realize that time spent alone is not inherently bad, depending on how that time is used. On the contrary, a minority of participants using this strategy noted that hobbies may lead to a sense of having accomplished something while still feeling that they had not filled the void of human connection.

*Healthy Lifestyle Changes and Behaviors* encompasses ongoing and new healthy behaviors undertaken by lonely individuals. This included both engaging in healthy behaviors such as going to the gym, hiking, and eating healthier, as well as stopping unhealthy habits such as excessive drinking. Whereas most participants perceived these behaviors as having positive effects on their well-being, and in some instances providing the confidence necessary to approach others and initiate relationships, some participants noted that behaviors such as joining a gym did not yield new friendships as originally expected. Other participants found that they could not maintain their new healthy habits, which further damaged their self-esteem and self-confidence.

### ***Effective & infrequent: Strategies to consider adding***

Two less frequently used strategies that were consistently perceived as effective were engaging in self-reflection and increasing time and energy put into one's work or school.

**Table 4.** Loneliness coping strategies perceived as having mixed results.

Loneliness coping strategy	Examples ( <i>Ineffective Examples are Italicized</i> )
Forming new relationships <sup>a</sup>	<p>The best thing for me was meeting someone who had a lot of similar interests, we became friends over time.</p> <p><i>I sometimes tried to force friendships with people I didn't genuinely connect with or share common interests. These relationships often felt superficial and unfulfilling, making me feel even more lonely despite being surrounded by people.</i></p>
Distractions <sup>a</sup>	<p>I tried to stay busy as much as possible. I played computer games and watched movies.</p> <p><i>Watching TV. While this provided temporary distraction, it only made me feel more disconnected from real human interactions.</i></p>
Being social <sup>a</sup>	<p>One of the most effective ways I found to combat loneliness was to join local social groups that aligned with my interests. I started attending meetups for various hobbies.</p> <p><i>Joining clubs doesn't work. I have a hard time connecting if there's more than a couple of people in the group.</i></p>
Online social activity <sup>b</sup>	<p>I used social media to help me connect to the outside world, mainly reddit. I would stay on Reddit probably 12–14 hours per day, every day. That's the only thing that helped me not feel so alone.</p> <p><i>Seeing the highlight reels of others' lives made me feel even more isolated and disconnected. Spending excessive time on social media platforms led to a sense of FOMO (Fear of Missing Out), which only intensified my feelings of loneliness.</i></p>
Supportive communication <sup>b</sup>	<p>Something else is asking people that I know where they go to find friends and feel less lonely. Like, straight up asking what other people do. I was just asking a friend yesterday where they go to meet new people and feel less lonely and they gave me some ideas to try, like local breweries.</p> <p><i>Something that did not work is talking to someone directly about my loneliness. I feel that when I talk to someone about it, it really does nothing to fix it. I feel like I have to be out there and actively fixing the problem instead of simply talking about it to someone.</i></p>
Therapy & counseling <sup>b</sup>	<p>I have gone to therapy and talked about my feelings of loneliness to help cope. This has helped me put things into perspective and allowed me to be comfortable with that feeling of loneliness.</p> <p><i>Counseling did not help me. I felt that person just wanted a paycheck and did not care about my problems dealing with loneliness. They just wanted to prescribe antidepressants and I felt no resolution.</i></p>

<sup>a</sup>Common.<sup>b</sup>Infrequent.

**Table 5.** Loneliness coping strategies perceived as being ineffective.

Loneliness coping strategy	Examples ( <i>Ineffective Examples are Italicized</i> )
Ignoring one's loneliness <sup>a</sup>	The more I stopped thinking about it the faster I was able to get over it and move on. <i>Probably not a shocker but trying to ignore the problem did nothing.</i>
Unhealthy behaviors & vices <sup>a</sup>	I started to drink more alcohol and to smoke more weed. <i>I smoked a lot of weed. It just made me more lonelier and weak and unmotivated.</i>
Isolating <sup>b</sup>	I definitely did tend to isolate more and spend more time at home, which made me feel safe and comfortable. <i>I tried to be by myself. It did not help or work. You must interact with other people to get rid of loneliness. It was almost impossible for me. Being by yourself to heal, without help, just doesn't work.</i>
Negative thought patterns <sup>b</sup>	N/A (no instances when this strategy was reported as effective) <i>Everything I did besides pity myself worked. Pity will get you nowhere. Pretty much everything else helped me.</i>
Participating in problematic relationships <sup>b</sup>	I develop an over-attachment to someone and it's like that one person is in complete control of my mental state. I recently got a new "favorite person" and when I talk to them, it seems like all my problems are gone, even if they aren't gone. If I'm able to talk to that one specific person I don't feel lonely. <i>The relationship somewhat quickly became very toxic and somewhat codependent. He did many things that hurt me a lot and he slowly became more rude and mean. He was one of the only people outside of my family that I would talk to regularly, which made me feel like I had basically no one to reach out to. This all made me feel incredibly lonely and made me feel even more unable to open up to people.</i>

Notes. Although these coping strategies were perceived as ineffective the majority of the time, we still also include instances of when each strategy was perceived as effective when possible.

<sup>a</sup>Infrequent.

<sup>b</sup>Rare.

Unlike the three strategies described above which are likely to have been attempted, these two strategies may be new avenues for addressing loneliness for many lonely individuals.

*Self-Reflection* consists of engaging in behaviors such as journaling one's thoughts and reflecting on and reappraising one's loneliness as a potentially positive or instructive experience. Although generally perceived as effective, some participants noted that they were unable to successfully engage in the process of benefit finding while reflecting on their loneliness. Others noted that journaling at times led to ruminating about the negative events that caused their loneliness.

*Work and School* includes instances when people increased their time and effort spent working or studying. As with other effective strategies, over three quarters of responses for this category noted it was effective, often because it provided structure, goals, and a sense of accomplishment. Alternatively, increasing one's commitment to work and school was sometimes perceived as ineffective because participants disliked their work or found

that working long hours led to burnout—leaving people with no time or energy for developing new relationships.

### ***Effective & rare: Effective strategies that may not apply to everyone***

The remaining three strategies that were perceived as effective were used rarely, and we surmise that this is because these strategies are context- and/or person-dependent. For example, *Addressing Problems in Relationships* occurred when people engaged in conflict management regarding a relational issue that was contributing to one's loneliness. In some instances this manifested as a lonely individual working with another person to resolve relational conflicts, such as a spouse making it known to their partner that they need to spend time developing friendships beyond their marriage. In other instances, this consisted of unilateral strategies such as leaving an abusive relationship. However, this was a relatively rare strategy because it presumes that the lonely individual has an ongoing relationship in their life and that there is a problem in this relationship whose resolution would also address one's loneliness.

*Religion and Spirituality* encompasses both individual behaviors (e.g., reading religious texts) and also interpersonal interactions, such as attending church or Bible study groups. We contend that the overwhelming perception of the effectiveness of this category stems from these activities encompassing both introspective behaviors and interactive behaviors. Moreover, those who perceived religion as an effective strategy at times referred to the belief that God's presence mitigated loneliness. The few participants who perceived religious activities as ineffective most frequently did so because they did not interpersonally connect with others at the church they tried attending.

*Volunteering* was the strategy that was most consistently perceived as effective out of all 19 categories, with only one participant stating that they volunteered and found it to be ineffective. Those who volunteered discussed how it created opportunities to meet new people, provided consistent interactions with the same group of people over time, created a sense of purpose and accomplishment, and provided perspective on their life. The lone participant who stated volunteering did not work attributed its ineffectiveness to not having shared interests with the other volunteers.

### ***Mixed results & common: Frequently used strategies with varied perceived success***

Mixed results strategies were perceived as effective between 50% and 75% of the time. Three strategies were used frequently but yielded mixed results: forming new relationships, being social, and distractions. We contend that the success of these particular strategies depend in large part on one's interpersonal communication skills and self-awareness. As such, these strategies are likely already being implemented by lonely individuals, but those who are not finding success may need to reflect on whether their communication with others is inhibiting forming relationships.

*Forming New Relationships* covers attempts to develop new friendships as well as new romantic relationships. Successful attempts to form new friendships included



befriending neighbors, colleagues, and classmates; however, others noted that many potential friendships did not progress because they did not have enough shared interests with the other person, and in some cases found themselves forcing a friendship that was ultimately not satisfying. In terms of forming new romantic relationships, participants discussed falling in love and meeting their future spouses through multiple avenues, including online dating. Although some people found success using dating apps, a frequent explanation provided for why forming new relationships was perceived as an ineffective strategy was due to bad experiences using apps to find romantic partners and/or friends.

*Being Social* involves joining groups and clubs, attending social events, and spending time in public spaces and third spaces that provide opportunities to meet new people. The efficacy of this strategy was generally tied to lonely individuals' interpersonal communication skills when it comes to creating connections with others within these structured activities or in these spaces. Those who perceived being social as an ineffective strategy typically noted that no one approached them in public spaces (or they did not have the confidence to approach others) or that they had difficulty connecting with others that they met at the events they attended. That is, the success of this strategy is less about going to a place or event and more about being able to communicate with others in these spaces in a way that leads to forming new relationships.

*Distractions* consisted of individual activities that were done for the sake of diverting one's attention away from their loneliness. Unlike the *Being Productive* strategy, which resulted in some level of self-development, accomplishment, or creativity, the distractions category consisted of activities that filled (or wasted) time, such as binge-watching television shows, online shopping, or playing video games alone and offline. This finding aligns with prior research on distracting oneself to cope with loneliness as an effective temporary strategy employed by both older adults (Kharicha et al., 2021) and college students (Vasileiou et al., 2019).

### *Mixed results & infrequent: Strategies that depend on quantity and quality*

Three infrequently used strategies that yielded mixed results were online social activity, therapy and counseling, and supportive communication. The perceived success or ineffectiveness of these strategies appeared to be tied to issues of quantity and quality. For example, *Online Social Activity* consists of participating in online communities such as Reddit and Discord communities as well as using social media (e.g., Instagram, TikTok). Participants perceived that these strategies were effective when they helped foster connection with others, but that they were ineffective when the quality of the interactions seemed superficial, inauthentic, or unable to fully replace the experience of socializing with others in person. Likewise, people at times noted that social media helped them feel connected to the world, but its overuse could feel like a waste of time or cause instances of fear of missing out (FOMO). Thus, it appears that online social activity can foster meaningful connections but its misuse can exacerbate loneliness.

*Therapy and Counseling* was also mentioned infrequently and with varying success. This category includes both working with a professional therapist as well as attending support groups, such as groups for military veterans or trauma survivors. The efficacy of this strategy typically depended on the quality of the relationships formed with the therapist or with others in the support group. Some noted that they found a therapist who helped them with their loneliness, whereas some therapists were not useful and unable to relate to their experiences with loneliness.

*Supportive Communication* includes instances of seeking and receiving social support from family and friends. Participants perceived that supportive communication was effective when people either helped them process their experience of loneliness or provided useful advice. Supportive communication was viewed as ineffective when those providing support gave advice that was not helpful or blamed the person for their loneliness instead of consoling the person or helping them gain perspective on their loneliness.

### ***Ineffective & infrequent: Strategies to abandon***

Ineffective strategies were perceived as effective less than 25% of the time. There were no commonly reported ineffective strategies; however, there were two infrequently used ineffective strategies. First, *Ignoring One's Loneliness* was consistently perceived as an ineffective strategy. Lonely individuals should not expect their experience of loneliness to resolve on its own without taking action. In fact, the consistent perceived ineffectiveness of this strategy provides justification for lonely individuals to implement a variety of the effective strategies listed herein if they are serious about addressing their loneliness.

*Unhealthy Behaviors and Vices* consisted of negative coping strategies such as substance abuse and addictive behaviors, as well as healthy behaviors that became problematic when taken too far. For example, one participant shared how undertaking a healthier diet became increasingly restrictive over time and eventually became an eating disorder. Most commonly, people referred to the overuse of alcohol and marijuana, although some participants also described using narcotics such as heroin and engaging in risky sexual behaviors such as intercourse with prostitutes. Yet, some participants did state that engaging in these unhealthy behaviors was effective in that they provided temporary pleasure.

### ***Ineffective & rare: Problematic strategies with alternative solutions***

Lastly, three strategies were categorized as both rare and perceived as ineffective. Each of these strategies, however, has a corresponding effective strategy that can be used in its place. First, *Negative Thought Patterns* consisted of self-pity and ruminating. This was the only strategy in the data that was universally perceived as ineffective. In place of self-pity and ruminating, participants should engage in more effective strategies such as self-reflection, engaging in supportive communication with others, or attending therapy, if feasible, as recent research has shown rational emotive behavioral therapy can target maladaptive cognitions held by lonely individuals (Floyd et al., 2025).

*Isolating* included instances when lonely individuals purposefully avoided contact with others. The few participants who perceived this as an effective strategy did so because it provided a sense of comfort or they preferred solitude; however, the majority of participants who isolated mentioned that avoiding others seemed productive at first but they soon realized their loneliness would only be resolved if they interacted with others or spent time outside their home.

*Participating in Problematic Relationships* was rarely mentioned, likely because this strategy depends on a lonely individual being in a problematic relationship in the first place. This particular strategy occurred when people noted that the relationships they had were problematic, begging the question of whether a problematic relationship is better than having no close relationships. This most often included dating problematic romantic partners, reengaging with former romantic partners, or continuing to engage in toxic friendships. Whereas this was perceived as one of the least effective strategies, the corresponding strategy of addressing problems in relationships was almost always viewed as effective. Therefore, we recommend lonely individuals consider addressing problematic relationships instead of passively experiencing them—either through conflict management or by ending the relationship.

### *Additional exploratory analyses*

After creating the typology and categorizing each loneliness coping strategy based on its frequency of use and perceived effectiveness, we conducted additional exploratory analyses to ascertain whether the type of loneliness (temporary or chronic) or the severity of loneliness was tied to using specific coping strategies. We summarize our results within this section, and full statistical analyses are provided in a supplemental document located on the Open Science Framework at <https://osf.io/zn7kx>. First, we conducted a series of chi-square tests of independence to explore the relationship between participants' self-reported type of loneliness (temporary or chronic) and whether or not they used each of the 19 loneliness coping strategies. This test was conducted 19 times (once per loneliness coping strategy), and three strategies returned significant results. Those experiencing chronic loneliness were more likely to have used the online social activity strategy and the forming new relationships strategy, whereas those who were experiencing temporary loneliness were more likely to have used self-reflection as a coping strategy. The remaining strategies did not significantly differ in their frequency of use based on whether the participant was experiencing temporary or chronic loneliness.

Next, we explored whether or not using each specific loneliness coping strategy was tied to the severity of one's loneliness. To do so, conducted a series of Welch's *t* tests, which is a form of independent samples *t* test that does not assume equal variances and is suited for two groups with uneven sample sizes. Results showed that those who tried the following strategies had significantly more severe loneliness than those who did not try these strategies: unhealthy behaviors and vices, therapy and counseling, addressing problems in relationships, participating in problematic relationships, and supportive communication. Additionally, those who reported using the strategy of "being productive" had significantly less severe loneliness compared to those who did not.

## Discussion

Loneliness is a nearly universal experience that almost all people experience occasionally throughout their lives (Hawkley & Cacioppo, 2010). In general, most people are able to resolve their loneliness (Newall et al., 2014) through various self-implementable strategies (Deckx et al., 2018), and this study sought to explore and categorize the various loneliness coping strategies used and to determine their frequency and perceived effectiveness. In doing so, we can provide both practical advice to lonely adults regarding loneliness coping strategies, but also provide direction to social scientists and those interested in developing and testing loneliness interventions. That is, determining the loneliness coping strategies that are consistently perceived as effective (or ineffective) can act as a guide for those interested in developing loneliness interventions that focus on implementing (or avoiding) specific behaviors or cognitions.

To accomplish our aims, we recruited a representative sample of 621 U.S. adults who reported a total of 2878 loneliness coping strategies that they had employed and whether they perceived each as either effective or ineffective. Through a constant comparison qualitative approach, we inductively created a set of 19 loneliness coping strategies that were mapped based on their frequency of use and perceived effectiveness (see Figure 1). This discussion section begins by considering how our findings align with existing loneliness theories. We then consider how our findings both align with and depart from prior research on loneliness coping strategies and why certain effective strategies are so rarely used. This is followed by offering practical implications for lonely individuals who desire to address their loneliness and concluding thoughts on the study's limitations and future research directions.

### *How our findings align with existing loneliness theories*

Many of the loneliness coping strategies that emerged from our data and the frequency and perceived effectiveness of such strategies are supported by prior loneliness theories. For example, the ETL (Cacioppo & Cacioppo, 2018) states that loneliness acts as an aversive signal that motivates humans to seek and maintain meaningful connections (i.e., ETL's aversive signal postulate). Whereas the repair/replacement postulate of ETL states that people seek to create and maintain relationships to promote their long-term survival, ETL also states that, in the short term, lonely individuals experience heightened sensitivity to social threats (i.e., the implicit vigilance postulate). This manifests as lonely individuals being more attuned to exclusion, hostility, and rejection. Thus, the ETL asserts a paradoxical effect in which loneliness simultaneously motivates lonely individuals to connect with others for their long-term benefit, while also acting against this motivation by increasing people's vigilance against social threats that might arise when connecting with others. As a result, some people may shy away from productive behaviors that could address one's loneliness such as forming new relationships or investing in existing relationships because they perceive social threats as a part of these strategies.

Our findings align with these ideas from ETL. First, the aversive signal postulate is supported by the data in that, on average, participants reported using between four and

five strategies, suggesting that loneliness is indeed a state that people view as threatening and in need of remedy. Second, the most frequently used coping strategies reported were interpersonal in nature (e.g., forming new relationships, investing in existing relationships, and being social to address their loneliness), suggesting that lonely individuals indeed experience a need to repair or replace deficiencies in the quantity or quality of their relationships. Alternatively, some strategies, such as isolating oneself and negative thought patterns, support the implicit vigilance postulate of ETL. For example, lonely individuals who are focused on social threats and short-term survival would likely engage in two strategies we identified: *isolation* and engaging in *negative thought patterns*. Social scientists who have tested the ETL have found that lonely individuals engage in negative thought patterns, such as the self-fulfilling prophecy of expecting social interactions to go poorly (which then leads to social interactions going poorly) and the tendency to “see the social world as a more threatening place” (Hawkey & Cacioppo, 2010, p. 220).

The ETL can also provide insight as to why specific loneliness strategies may depend on the lonely person’s view of the social interaction aspects of the strategy. That is, the reason a loneliness coping strategy such as *being social* may work for some people but not others depends on their perceptions of social threats that would result from enacting the strategy. Those who perceive they are socially awkward or lack the social skills to successfully connect with others are probably going to view *being social* as a more threatening situation than those who are lonely but believe they can successfully engage with others.

We also contend that this may apply to non-social strategies as well, such as *health focused lifestyle changes and behaviors*. Many of the specific responses placed in this category concerned joining a gym and regularly exercising; however, many participants’ perceptions of whether this was a successful strategy was tied to the social aspects of exercise. For example, one participant noted joining a gym was ineffective, stating, “the gym has given me acquaintances... but I don’t know anyone well enough to make more of an overture of friendship without them possibly thinking I’m weird.” The fear of social rejection and negative outcomes from a social interaction aligns with the implicit vigilance postulate of ETL. Alternatively, another participant shared that diet and exercise worked because it “boosted my mood and confidence, which resulted in being more receptive to interacting with people.” In this instance, healthy lifestyle changes were deemed effective on the basis that it has prioritized the potential long-term benefits of creating connections (i.e., the repair/replace postulate) in place of the hypervigilance and perceived social threats associated with the implicit vigilance postulate.

In addition to the ETL, aspects of Segrin’s Social Skills Deficit Vulnerability Model (Segrin et al., 2016) also explain why some coping strategies were perceived by some as effective and by others as ineffective (i.e., mixed results). In this model, Segrin contends that loneliness may be the result of inadequate social skills, which creates a cycle of loneliness in which lonely people feel unsatisfied with their interactions with others, subsequently lose motivation to continue engaging with others, and therefore avoid engaging in social interactions needed to refine and improve one’s social skills. This model was originally developed regarding the seeking of social support to show that those with deficient social skills experience greater distress as a result of not being able to

adequately communicate their need for support, and this is represented in our own data with the *supportive communication* coping strategy being listed as having mixed results and being used infrequently. As noted in prior research, those who are lonely also often lack social skills (Spitzberg & Canary, 1985), which would hinder the likelihood of seeking support and the quality of supportive interactions. Likewise, the frequently used strategies of *forming new relationships* and *being social* may have mixed results because some lonely individuals lack the social skills needed to successfully do these things. For example, those lacking the ability to initiate conversations, extend conversations by listening and responding appropriately, and manage and express emotions while reading others' social cues may perceive interpersonal strategies such as *forming new relationships* or *being social* as particularly difficult to execute.

### *How our findings align with and depart from prior research on loneliness coping strategies*

Loneliness coping strategies have both evolved and remained relatively consistent over the past 35 years. Many of the strategies inductively derived from our data align with prior research, such as *forming new relationships* (Tilburg & Van, 2000), *self-reflection* (Rokach & Brock, 1998; Tagomori et al., 2022), *being productive* (Rokach et al., 2007), *religion and spirituality* (Rokach et al., 2007; Tagomori et al., 2022), and *engaging in unhealthy behaviors* (Rokach & Brock, 1998). However, new strategies have also emerged. Unsurprisingly, *online social activity* is a relatively new loneliness coping strategy and is a function of advances in technology that allow us to remain connected to others at almost any time and across practically any geographic distance. Interestingly, this strategy appears to be the modern-day version of Rokach's (1990) strategy of "indirect social contact" that involved speaking on the phone, writing letters, and rewatching old home videos. Almost all of these indirect activities have shifted to being accomplished through computer-mediated and online channels. Very few participants in our study listed phone calls as a loneliness coping strategy, but many discussed using Zoom, FaceTime, or other video call platforms. No participants mentioned rewatching old home movies, but many referred to watching the content posted by friends and family on social media. Lastly, very few participants wrote letters, but many participants mentioned the ability to comment on friends and family members' social media posts. These modern-day actions appear to still align with the essence of Rokach's indirect social contact strategy, which "seemed to provide the lonely with the feeling of being related" (p. 47).

Interestingly, indirect social contact was a rarely used but consistently effective strategy in Rokach's 1990 study, whereas *online social activity* was used somewhat more frequently in our study but with mixed results. Prior research offers perspectives on why online social activity may have mixed results in reducing loneliness. For one, the way social media is used may exacerbate or mitigate loneliness (Smith et al., 2021). Those who engage in passive consumption of others' content may experience social comparison or envy, whereas those who actively engage with others on social media experience greater social connectedness because they are using these platforms to develop and maintain meaningful relationships (Verduyn et al., 2017).

A second strategy that emerged in our data and in at least one other recent study (Tagomori et al., 2022) is the use of *distractions* as a loneliness coping strategy. This strategy did not appear in work from prior decades (Rokach, 1990; Rokach & Brock, 1998); however, those prior studies did note that people often engaged in productive, solitary behaviors. We also noted that lonely individuals find ways to be productive but believe that the common use of distractions to cope with loneliness may be tied to the rise of smartphone usage and the sheer amount of online content available for consumption.

Unlike prior studies identifying loneliness coping strategies, our study offers a more granular typology of strategies and has resulted in adding new strategies. This may also be in part due to the sizable amount of data we analyzed. For example, prior research lists investing in existing relationships as an effective strategy (e.g., Schoenmakers et al., 2015). Whereas this strategy emerged in our data, too, and was in fact the most frequently reported of our 19 strategies, we also separately recognize two additional strategies related to issues in existing relationships. Specifically, *addressing problems in one's existing relationships* was perceived as a highly effective strategy because it either strengthened the quality of existing relationships or resolved other interpersonal conflicts that were creating loneliness. Alternatively, some participants stated that they continued *participating in problematic relationships* as a way to avoid loneliness or to cope with their loneliness, even though these relationships were not satisfying.

Another important point of consideration is that the strategies that were reported as being effective in prior studies were also perceived as being effective in our data. Strategies such as investing in existing relationships (e.g., Schoenmakers et al., 2015), self-reflection (Rokach & Brock, 1998), and engaging in behaviors that improve oneself or are productive (Tagomori et al., 2022) remain effective at addressing loneliness. Of note, a prior analysis (Deckx et al., 2018) found that problem-focused strategies are associated with lower loneliness levels, whereas emotion-focused strategies are associated with greater loneliness. Although we did not categorize our strategies across these dimensions, a post-hoc analysis of our strategies as either problem- or emotion-focused supports this trend. Within our effective strategies, the majority are problem-focused, including *investing in existing relationships*, *being productive*, *volunteering*, and *work and school*. Only one of the seven effective strategies is emotion-focused (*self-reflection*), and only one other strategy (*religion and spirituality*) could be argued as both emotion-focused (prayer and reflection) and problem-focused (creating and maintaining relationships with others at church). Additionally, emotion-focused strategies were more likely to return mixed results (e.g., *supportive communication* and *therapy and counseling*) or to be perceived as ineffective (e.g., *negative thought patterns*).

### ***Why are some consistently effective strategies perceived as successful but rarely used?***

One final point of discussion before offering practical implications pertains to why *volunteering* and *religion and spirituality* were both rarely used even though they are consistently perceived as effective. First, studies have shown that volunteering is associated with lower levels of loneliness because it creates meaningful engagement with others and increases the



size of people's social networks (Akhter-Kahn et al., 2023). Another study, though, noted that volunteering was only associated with less loneliness when it was socially motivated (i.e., other-oriented) and those who volunteered for the purpose of self-enhancement or distracting oneself did not experience lower loneliness levels (Williams et al., 2024). Together, this suggests that the act of volunteering is likely effective at reducing loneliness when it is other-oriented and driven by the desire for meaningful connections, and this may explain the infrequent use of volunteering as a strategy, as lonely individuals tend to have an increased self-focus, based on the selfishness postulate of the ETL (Cacioppo & Cacioppo, 2018). Second, in terms of the ETL and the Social Skills Deficit Model, the effectiveness of volunteering as a loneliness coping strategy may also depend on the extent that people believe they can adequately develop relationships with those they meet while volunteering and that they do not view these interactions as a social threat. A third potential explanation for the infrequent use of volunteering as a loneliness coping strategy may be related to overall declines in volunteerism. Similar to our findings, a prior study on volunteering as a loneliness coping strategy also found that it was an effective but rarely used strategy (Schoenmakers et al., 2015). The rarity of this strategy may be a reflection of the broader decline of formal volunteerism in the United States in recent years. From 2019 to 2021, formal volunteerism rates experienced their largest recorded decline since 2002, with the percentage of U.S. adults formally volunteering declining from 30% to 23% (AmeriCorps, 2021).

Similarly, the rare use of the *religion and spirituality* strategy may be a reflection of declines in religious affiliation and attendance at religious services. The percentage of adults regularly attending weekly religious services has declined from 42% to 30% over the past 20 years (Jones, 2024), and the number of U.S. adults who identify as religiously unaffiliated has increased from 5% to 29% in the past 50 years (Pew Research Center, 2022). Although people may not choose to attend religious services due to their personal beliefs, finding ways to volunteer through both religious and non-religious institutions is consistently perceived as an effective way to reduce loneliness. Ultimately, as we discuss next, we encourage lonely individuals to engage in a variety of loneliness coping strategies that are both problem- and emotion-focused and span the behavioral and the cognitive.

### *Practical implications*

The goal of this study was to create a typology of loneliness coping strategies based on their perceived effectiveness and frequency, and subsequently, our findings result in practical implications for lonely individuals. Our first practical recommendation is for lonely individuals to reflect on whether they have been implementing ineffective strategies, and if so, to reduce, eliminate, or replace such strategies. Notably, some strategies that were perceived as ineffective correspond directly to more effective strategies. For example, *negative thought patterns* correspond to the consistently effective but infrequently used strategy of *self-reflection*. In place of self-pity and ruminating, participants should consider engaging in self-reflective behaviors such as benefit-finding and reappraisal of their lonely experiences as an opportunity for personal growth. Those who struggle to do this can also consider additional strategies such as attending therapy or



seeking support from others, although these strategies were less consistently perceived as effective than self-reflection.

Next, if applicable, we recommend that lonely individuals reflect on the strategies that have worked during past instances of loneliness and consider reimplementing those strategies. For example, if going to a gym previously worked to improve a lonely individual's well-being and created opportunities to meet new people, then rejoining a gym would likely once again be an effective strategy for that lonely individual. Furthermore, we recommended simultaneously implementing several strategies. For example, a lonely individual could engage in self-reflection (a cognitive, reflective strategy) while also joining a new community group or club (a behavioral, problem-focused strategy). This recommendation is in line with previous work on stress and coping that endorses people simultaneously utilizing multiple coping strategies that include both problem- and emotion-focused tactics that might target cognition, behavior, and/or affect (Lazarus & Folkman, 1984). Recent work specific to loneliness has also endorsed the need for multimodal approaches to addressing loneliness and to avoid assuming any singular loneliness coping strategy will be universally effective (Tagomori et al., 2022).

Finally, it is important for lonely individuals to understand that there is no singular universal fix to loneliness. In some instances, even the strategies most consistently perceived as effective may fail or not work for every individual. Our data supports this, as volunteering was consistently perceived as an effective way to reduce loneliness but was still viewed as ineffective by one participant. As such, using multiple strategies simultaneously is likely the most efficient way for lonely individuals to determine what works in addressing their loneliness, which again will be dependent on their unique circumstances.

### *Strengths, limitations, and future directions*

All empirical studies have both strengths and weaknesses—the latter of which can also act as a catalyst for future studies. One notable strength of this study was the size and representativeness of the sample and the number of total strategies provided. The use of a large sample that is representative of the U.S. adult population based on age, sex, and ethnicity allowed for the development of a valid and comprehensive typology of loneliness coping strategies. These strategies were sourced from across ethnic backgrounds, across generations, and not limited to one specific subgroup, which is important given that loneliness rates are often tied to age and at times with ethnicity (for review, see Luhmann et al., 2023). Furthermore, analyzing a robust number of reported strategies ( $N = 2878$ ) supports the likelihood of having developed a comprehensive typology of loneliness coping strategies.

However, one limitation of the study also stems from the sample, which consisted only of U.S. adults. The experience of loneliness and the subsequent coping strategies employed may differ in collectivistic cultures or cultures that emphasize privacy over self-disclosing one's problems such as loneliness. Given the worldwide nature of the loneliness issue (see Meta and Gallup, Inc, 2023), it is important for future research to identify coping strategies used by adults from across the globe. For example, rarely used

strategies, such as *volunteering or religion and spirituality*, may be used more frequently in societies that are more collectivistic or religious than the United States.

A second limitation is that most of the responses were relatively short and oftentimes no longer than a few sentences or a paragraph. Future research could consist of in-depth interviews to provide additional details regarding these strategies. Interviews could also allow researchers to examine the motivations people have for implementing (or not implementing) certain strategies instead of only identifying what strategies were used and to what perceived effect. Such interviews could also provide insight into whether participants used clusters of similar coping strategies or to what extent people varied the types of coping strategies they used. Additionally, future research should assess lonely individuals' perceptions of how accessible or easy these various strategies are to try. That is, some strategies may require greater self-efficacy or motivation to be implemented. Some recent work has already taken up this avenue for future research. For example, one study investigated why lonely individuals are reluctant to contact old friends (Aknin & Sandstrom, 2024), and their findings provide greater context to the most commonly reported effective strategy in our study (*investing in existing relationships*). Moreover, future research on the perceived ease of implementing the loneliness coping strategies described herein could further test whether social anxiety, loneliness severity, or other quantitatively measured variables or demographic characteristics predict the likelihood to use or avoid certain strategies.

A third limitation is that we measured participants' *perceptions* of the effectiveness of the loneliness strategies they utilized. Moreover, participants classified each strategy they used as either effective or ineffective. Although this allows us to show that any given strategy might be perceived as effective for some and ineffective by others, it does not capture the degree of perceived effectiveness. Therefore, future studies should collect data that tracks loneliness both quantitatively and longitudinally. Doing so in combination with reports of various coping strategies used could extend the findings of the present study by showing causal relationships between loneliness coping strategies and reduced loneliness.

A final future direction worth considering is the extent that personality traits influence whether people pursue certain loneliness coping strategies and the perceived effectiveness of various strategies. A recent meta-analysis showed that loneliness negatively correlated with extraversion, openness, conscientiousness, and agreeableness, and positively correlated with neuroticism (Buecker et al., 2020). In terms of specific strategies discussed herein, personality traits such as extraversion and agreeableness have been shown to influence whether people volunteer (Carlo et al., 2005), and personality traits appear to influence how people use social media and how social media may mitigate or exacerbate loneliness (e.g., Smith et al., 2021). Lastly, those who are less extraverted or more neurotic may be more likely to use the isolation coping strategy. This would be in line with the hypervigilance postulate from the ETL, which states that lonely individuals may view others with greater fear or hostility (Cacioppo & Cacioppo, 2018). These are just three examples of how personality traits may affect the use and success of loneliness coping strategies, and several future studies could further investigate the links between personality traits and using various coping strategies to address loneliness.

## Conclusion

This study explored the frequency of use and perceived effectiveness of various loneliness coping strategies used by lonely individuals to address their loneliness. Qualitative analyses were conducted to inductively derive 19 loneliness coping strategies that span the interpersonal and intrapersonal, as well as the behavioral and the cognitive. Almost all strategies were perceived as effective by some but ineffective by others, suggesting that even though patterns emerged in which certain strategies were consistently perceived as more effective than others, no specific strategy is guaranteed to work for every lonely individual. This finding has heuristic value in that it generates several future directions for additional research regarding when and why certain loneliness coping strategies that are typically effective are viewed as ineffective and vice versa. Lonely individuals can use these findings to decide on a set of multiple strategies they can implement, as well as to identify strategies they may need to abandon or forgo implementing as they attempt to address their loneliness.

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## Open research statement

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## Supplemental Material

Supplemental material for this article is available online.

## Note

1. In seven instances, people responded with "N/A" or an equivalent, 28 responses noted everything they tried either worked or did not work but did not provide any specific strategies, 12 responses were generated by artificial intelligence, and 82 responses were not codable because the participant either stated what they wish they had done but did not actually do, did not

follow instructions (e.g., thought the question about ineffective strategies was still asking about effective strategies, which resulted in answers such as, “I had success getting over my loneliness with the things mentioned above”), or provided nonsensical answers, such as “I will not do what the government wants, so I am always in the wrong”.

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