

Social Support: Theory, Research and Applications

edited by

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University of Washington
Seattle, Washington, USA

1985 Martinus Nijhoff Publishers

Dordrecht / Boston / Lancaster

Published in cooperation with NATO Scientific Affairs Division

LONELINESS RESEARCH: BASIC CONCEPTS AND FINDINGS

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Nothing, the old adage says, is as powerful as an idea whose time has come. In the social science community, the recognition that social relationships are essential to personal health and happiness, that "friends are good medicine," is such a timely idea. Indeed, so fundamental are social ties that several independent research traditions have developed in this area, each with a somewhat different focus. Thus the co-existence of work on social support, loneliness and social isolation attests to the vital importance of social relations. The independence of these research traditions is understandable, given their historical and disciplinary origins. But the time is now right for researchers in these separate fields to become acquainted with each others' work.

My goal in this paper is to outline in broad strokes current research on loneliness, summarizing key findings and identifying conceptual and methodological issues. I think that those who study social support will find work on loneliness both comforting, for the similarities it displays to their own work, and instructive, for the new perspective that it offers (see also Rook, in press).

Loneliness, the distressing feeling that one's social relationships are deficient in some important **way**, is all too common a human experience. It has been estimated that roughly one American in four has felt lonely in the past few weeks (Bradburn, **1969**). Perhaps 10% of the population suffers from severe and persistent loneliness (Peplau & Perlman, **1982**). Although some people are at greater risk for loneliness than others, no segment of society is totally immune.

A BRIEF HISTORY OF WORK ON LONELINESS

Although Freud himself did not directly address the problem of loneliness, the earliest psychological discussions of loneliness were influenced by the psychoanalytic tradition. Perhaps the first work on loneliness published in English is a paper by Zilboorg that appeared in 1938. He linked loneliness to personality traits of narcissism, egocentrism, and hostility, which he believed had their origins in faulty parenting during infancy. Fifteen years later, Sullivan (1953) gave loneliness a place of prominence in his theory of personality development. He wrote that in preadolescence, a powerful human need for intimacy first emerges, making teenagers especially vulnerable to the driving force of loneliness. About the same time, ~~Fromm~~-Reichmann (1959) published an influential paper on loneliness, based on her clinical work with schizophrenics. She, too, emphasized that loneliness is a distressing and powerful experience, often traceable to childhood experiences in the family. A common theme in the works of this period **was** that loneliness is a painful subjective experience, distinct from the objective state of being alone.

In the **1960s**, 64 new English-language publications on loneliness appeared. Some works, such as those by Carl Rogers (1961, **1973**), continued to draw primarily on clinical observations. Others, such as The Lonely Crowd by **Riesman, Glazer, & Denny (1961)**, called popular attention to the possible impact of social changes on personal relations and loneliness. Also evident in the 1960s was the beginning of empirical research on loneliness. For example, several sociological surveys investigated loneliness and social isolation among older adults both in the United States and in Europe (**e.g.**, Blau, 1961; **Donson & Georges, 1967**; Lopata, 1969; Lowenthal, 1964; Shanas et al., 1968; Tunstall, **1967**).

In the **1970s**, work on loneliness expanded rapidly, spurred by Robert **Weiss's** book, Loneliness: The Experience of Emotional and Social Isolation (**1973**). Weiss offered an interactionist view of loneliness as stemming both from personal vulnerabilities and situational constraints on relationships. More recently, loneliness research has taken many directions. Several researchers have developed and validated instruments to assess loneliness (see review by Russell, 1982). In part because of the availability of these loneliness scales, numerous studies have begun to examine the personal characteristics and social behaviors of lonely people (see chapter by Jones in this volume), and to investigate the links between loneliness and personal well-being (see Perlman & Peplau, in press). One indication that work on loneliness has joined "the establishment" is that NIMH has sponsored two conferences on loneliness, one in 1979 (see Peplau & Perlman, **1982**) and a second in 1982 (see Peplau & **Goldston**, in press). Today, research on loneliness is well-established.

A DEFINITION OF LONELINESS

Loneliness has been defined in a variety of ways (Table 1). However, virtually all definitions share three main points of agreement. First, loneliness is a subjective experience and is not synonymous with objective social isolation. As Paul Tillich (1952) observed in The Courage to Be, "Our language has wisely sensed the two sides of...being alone. It has created the word "loneliness" to express the pain of being alone, and it has created the word "solitude" to express the glory of being alone."

TABLE 1

Definitions Of Loneliness

Loneliness.. is the exceedingly unpleasant and driving experience connected with inadequate discharge of the need for human intimacy, for interpersonal intimacy. (Sullivan, 1953, p. 290).

Loneliness is a sentiment felt by a person... (experiencing) a wish for a form or level of interaction different from one presently experienced. (Lopata, 1969, pp 249-250).

Loneliness is caused not by being alone but by being without some definite needed relationship or set of relationships....Loneliness appears always to be a response to the absence of some particular type of relationship or, more accurately, a response to the absence of some particular relational provision. (Weiss, 1973, p.17).

Loneliness (is) the experiencing of a lag between realized and desired interpersonal relationships as disagreeable or unacceptable, particularly when the person perceives a personal inability to realize the desired interpersonal relationships within a reasonable period of time. (de Jong-Gierveld, 1978, p.221).

Loneliness is the unpleasant experience that occurs when a person's network of social relations is deficient in some important way, either quantitatively or qualitatively. (Perlman & Peplau, 1981, p. 31).

Loneliness (is) the absence or perceived absence of satisfying social relationships, accompanied by symptoms of psychological distress that are related to the actual or perceived absence...! propose that social relationships can be treated as a particular class of reinforcement....Therefore, loneliness can be viewed in part as a response to the absence of important social reinforcements. (Young, 1982, p. 380, italics deleted).

Making this distinction clearly has permitted researchers to investigate empirically the relationship between loneliness and aloneness. As expected, there is a positive, but only moderately strong association between the two.

On the average, lonely people report having fewer friends and less contact with other people (**e.g.**, Jones, 1982; Perlman, Gerson, & Spinner, 1978; Russell, Peplau, & Cutrona, 1980). Both teenagers and adults are significantly more likely to report feelings of loneliness when they are alone than when they are with other people (**Larson et al.**, 1982).

Second, loneliness results from a deficiency in a person's **social** relationships. This deficiency has been variously described. Some (**e.g.**, Sullivan, 1953; Weiss, 1973) emphasize the notion that basic human needs for intimacy are not being met. Others (**e.g.**, Perlman & Peplau, 1981) take a more cognitive view that there is a discrepancy between the type, quality, or quantity of relationships that a person wants and those that the person perceives himself or herself as having. All agree, however, that some sort of relational deficit is a defining feature of loneliness.

Third, the experience of loneliness is aversive. Although some (**e.g.**, Moustakas, 1975) have encouraged lonely people to emphasize the opportunities loneliness provides for personal growth and insight, lonely people seldom view their experience as pleasant. Loneliness is typically associated with such feelings as depression, emptiness, anxiety, boredom, helplessness, and desperation (**e.g.**, Rubenstein & Shaver, 1982; Russell, Peplau, & Cutrona, 1980).

TYPES OF LONELINESS

Two ways of classifying loneliness have proved useful, one based on the duration of loneliness and a second based on the nature of the relational deficit involved.

Chronicity.

Loneliness can range from fleeting twinges of discomfort to severe and persistent feelings of intense misery. Researchers and clinicians have largely ignored transient feelings of loneliness, and focused instead on more enduring loneliness. Young (1982) recently proposed a distinction among three types of loneliness. Transient or everyday loneliness refers to brief and occasional lonely moods. Situational loneliness occurs when a person has had satisfying relationships until some specific change occurs, such as moving to a new town or getting divorced. Situational loneliness can be severely distressing, but does not invariably last for long time periods. When a person has lacked satisfying social relationships for a period of two years or more, Young

classifies them as chronically lonely. These distinctions in chronicity seem intuitively sensible, and research (e.g., Hojat, 1983) has recently begun to demonstrate differences between **situationally** and chronically lonely people. Whether acute situational loneliness or chronic loneliness is more harmful to well-being is an important question for further investigation.

Nature of social deficits.

Types of loneliness can also be identified in terms of the specific social deficit involved. Probably the most popular loneliness typology is Weiss's (1973, 1974) distinction between the loneliness of social isolation and the loneliness of emotional isolation. In his view, emotional loneliness is based on the absence of an intimate attachment figure, such as might be provided for children by their parents or for adults by a spouse or intimate friend. Social loneliness occurs when a person lacks a sense of social connectedness or community that might be provided by having a network of friends and associates at work or school. Weiss believes that emotional loneliness is the more serious condition, and that the two types of loneliness are associated with distinctive affects (see Rubenstein & Shaver, 1982).

A consideration of types of loneliness points to one of the most pressing needs for our understanding of social ties, namely the development of a comprehensive analysis of the basic functions of social relationships (see also Rook & Peplau, 1982). Weiss's typology of loneliness grew out of his own analysis of what he called six basic "provisions" of social relationships: attachment, social integration, opportunity for nurturance, reassurance of worth, a sense of reliable alliance, and the obtaining of guidance. Weiss (1974) suggested that no single relationship can provide all of these essential ingredients, and so a satisfactory social life requires a network of different types of relationships. Social support researchers have also proposed taxonomies of types of social support (e.g., House, 1981; Kahn & Antonucci, 1980). For example, Cohen and Hoberman (1983) distinguish among social support that provides belonging, self-esteem, appraisal and tangible aid. In her chapter in this volume, Karen Rook identifies three basic classes of relationship functions: help or assistance; companionship and intimacy; and the social regulations of individual behavior.

Although there is no dearth of proposals about the functions of social relationships, most are based on intuition and common sense, not on theory or data. Nor does there seem to be much consensus about what strategy might best be used to develop a systematic taxonomy of relationship functions and their corresponding relational deficits. Such an undertaking seems essential, however. A taxonomy of relationship functions would permit us to ask, for instance, whether all relational deficits

lead to loneliness. My hunch is that they do not. Does a person **who** can't get a lift to the airport or who can't find a reliable mechanic feel lonely -- or merely frustrated? A taxonomy of relationship functions might also help to clarify the difference (if there is one) between loneliness and perceived social support, since the two might be linked to different relationship functions. The task of mapping the major classes of relationship functions, of identifying the types of relationships in which these functions can and typically do get met, and linking these to subjective feelings of loneliness and social support seems essential.

HOW TO MEASURE LONELINESS

Given that loneliness is a subjective experience, its measurement must ultimately rely in one way or another on verbal self-report. (For a review of measures assessing loneliness, see Russell, 1982). One common approach has been to ask people one or more direct questions about their feelings of loneliness. A typical survey item comes from Bradburn's (1969) Affect Balance Scale, and asks if the person had felt "very lonely or remote from other people" during the past few weeks. A cross-national survey of older adults (Shanas et al., 1968) simply asked respondents in general how often they were lonely.

In recent years, considerable effort has gone to developing and validating multiple-item loneliness scales, both in the United States (e.g., Rubenstein & Shaver, 1982; Young, 1982), and in Europe (de Jong-Gierveld, 1982). Illustrative of these measures is the UCLA Loneliness Scale (Russell, Peplau, & Cutrona, 1980; Russell, 1982). This scale has twenty items, ten worded in a positive or socially-satisfied direction (e.g., "There are people who really understand me") and ten in a negative or lonely direction (e.g., "There is no one I can turn to"). Respondents indicate how often (never, rarely, sometimes, often) each statement describes them. This scale, like most loneliness measures, is quite global and does not identify the specific type of relationship, such as marriage or friendship, that is missing. (For a new scale that does distinguish types of relationships, see Schmidt & Sennat, 1983). The UCLA Scale performs well on traditional psychometric criteria. It has a coefficient alpha of .94 and a test-retest reliability of .73 over a 2-month period. It has been shown that volunteers for a loneliness clinic and members of such at-risk groups as people seeking help with social skills, divorced adults, and prison inmates score high on the measure. We have also provided evidence for the discriminant validity of the scale, showing that it measures loneliness per se, not merely related concepts such as depression, anxiety, or social inhibition.

The development of reliable and convenient loneliness scales has provided a useful impetus to research, leading to much new

information about the personal and situational correlates of loneliness (e.g., Jones in this volume). These scales have also been useful in assessing the effectiveness of interventions to alleviate loneliness (e.g., Jones, Hobbs, & Hockenbury, 1982).

An important but unanswered question is whether scores on measures of loneliness and of perceived social support are interrelated. The general content of at least some social support measures, such as the Social Support Questionnaire (SSQ) developed by Sarason, Levine, Basham, and Sarason (1983) seems somewhat similar to the content of loneliness scales, although the response format is quite different. Indeed, a recent study (Sarason, Sarason, Hacker, & Basham, in press) found a significant correlation between the SSQ and the UCLA Loneliness Scale. It is also noteworthy that many of the reported correlates of the SSQ, such as anxiety, depression, and introversion are also correlates of the UCLA Loneliness Scale (Russell, Peplau, & Cutrona, 1980). A more systematic comparison of measures of loneliness and social support seems a fruitful direction for future research. One goal would be to determine in which populations and under what circumstances measures of loneliness and social support identify the same individuals as experiencing relational deficits.

THE CAUSES OF LONELINESS

A concern with etiology has characterized much of the research on loneliness. In understanding the causes of loneliness, it is useful to distinguish predisposing factors that heighten a person's vulnerability to loneliness and precipitating events that trigger the onset of loneliness.

Factors that Predispose a Person to Loneliness

Characteristics of the person. It is clear that some people are more susceptible to loneliness than others. A large number of studies (reviewed in Peplau & Perlman, 1982; Perlman & Peplau, in press), conducted mainly but not exclusively with college students, have examined the personality correlates of loneliness. Fairly good evidence links loneliness to shyness, introversion, lower affiliative tendencies, a lack of assertiveness, external locus of control, greater self-consciousness and lower self-esteem. There is also evidence that some lonely people may have faulty social skills. Jones (1982), for example* suggests that lonely people are often self-focused and nonresponsive in their interactions with others. Presumably, these factors affect loneliness because they make it difficult for people to sustain satisfying relationships, or to initiate new relationships to replace ones that have been lost (e.g., by moving or divorce).

Childhood experiences may also influence the likelihood that a person will become lonely. In particular, lonely people have

(or at least believe they have) parents who were colder and less nurturant. In one study (**Brennan & Auslander, 1979**), for example, lonely teenagers reported greater parental rejection and less encouragement to strive for popularity than did nonlonely teenagers. Another finding is that lonely people are more likely to be the children of divorce (**Shaver & Rubenstein, 1980**). The younger the person was when the divorce occurred, **the** greater the probability that they will report loneliness in adulthood. These childhood experiences may affect later loneliness in many ways, such as depriving a person of opportunities to gain social skills, fostering feelings of low self-esteem, or creating feelings of interpersonal mistrust.

Loneliness has also been linked to several demographic factors (see review by Perlman & Peplau, in press). There is a well-documented association of loneliness and age, but counter to stereotype, loneliness is greatest among adolescents and declines with increasing age. Whether this is a developmental pattern associated with aging or a cohort effect due, perhaps, to generational differences in willingness to reveal feelings of loneliness cannot be determined from existing cross-sectional data. There is also good evidence that married people are less likely to be lonely than others. It should be noted, however, that some married people (18% in one large survey, cited in Perlman & Peplau, in press) do report loneliness. Variations in the extent of loneliness among the never-married, divorced, and widowed have not been consistent across studies. Loneliness is common among the widowed but, as might be expected, seems to decline over time (**e.g., Lopata, Heinemann, & Baum, 1982**).

The issue of whether men or women are more vulnerable to loneliness has not been resolved. In general, no sex differences have been found on multi-item loneliness scales, such as the UCLA Loneliness Scale. On single-item questions, however, such as those used in surveys, women are **more** likely to describe themselves as lonely than are men. Whether this is due to a real gender difference in loneliness, or to a gender bias in self-disclosure about loneliness is not known. Finally, there is good evidence that loneliness varies by socio-economic status; loneliness is more common among lower income groups. Data on possible racial and ethnic differences in loneliness are not currently available.

Characteristics of the environment. Some social situations are undoubtedly more conducive to loneliness than others, although researchers are only beginning to examine this topic systematically (Jones, Cavert, Snider, & Bruce, in press). Social psychological theory suggests several features of situations that may increase the risk of loneliness. For example, life situations vary in the opportunities they provide for social contact and the initiation of new relationships. Some constraints such as time, distance, and money, are fundamental. The single parent on a tight budget may not be able to afford the babysitter who would

permit time for adult social activities. **Constraints** may also **limit** the availability of potential friends and lovers. People **who** are "different" from those around them--the only black family in the neighborhood, the only single person in the apartment complex--may have fewer opportunities to form relationships. For example, because women live considerably longer than men, older widowed women have fewer prospects for remarriage and are significantly less likely to remarry than are older widowed men. Finally, it is also likely that some social settings foster superficial interactions that may not satisfy intimacy needs. For instance, in a workplace that creates competition or **hostility** among co-workers, friendly relations are unlikely to develop.

In summary, a variety of personal and **environmental** characteristics can predispose an individual to loneliness, But predisposing factors do not invariably lead to loneliness. The shy teenager who has been in the same school system since kindergarten may, over the years, have developed a **satisfying** social life despite being shy. Only **when** the teenager **is** faced **with** making new friends, perhaps when going away to college, will shyness be a problem. The experience of loneliness is triggered by some change in a **person's** life.

Events that Precipitate Loneliness

Precipitating events are factors such as moving to a new community or separating from a spouse that change a person's social life in some significant way. Precipitating events create a mismatch between the person's actual social relations and the person's social needs or desires* A change in either part of the equation without a corresponding change in the other can create **loneliness**.

Perhaps most often, loneliness results from a change in the person's actual social relations, such as the loss of an important relationship or separation from a loved one. Divorce, bereavement, and geographic mobility are common causes of loneliness. **When** Cutrona (1982) asked college students what initiated their experiences of loneliness, the three most frequent answers were leaving family and friends to begin college, the breakup of a dating relationship, and problems with a friend or relative. A decrease in the quantity or quality of social ties **is** a typical precursor to loneliness.

Loneliness can also be triggered by events that change a **person's** social needs or desires. Our needs for human contact are not constant. When we are working feverishly on an overdue report, we may crave solitude and try to avoid people as much as possible. When we are sexually aroused, we may ardently desire the company of a particular partner. One implication is that feelings of loneliness are probably not constant through out the day or week, but rather vary depending on our goals and activities (Larson et al., 1982). In addition to these short-term

fluctuations in social needs, more major changes can also occur. Ten-year-old children seldom complain of loneliness because they **lack** a boyfriend or girlfriend. But sometime during adolescence, through a **combination** of maturation and changing **social** expectations, the desire for a dating partner becomes intense. If the right partner does not materialize, the teenager's feelings of loneliness may become equally intense. The general point is that changed social needs and wants that are not accompanied by appropriate changes in actual social relations can precipitate loneliness.

COGNITIVE FACTORS IN LONELINESS

The possible importance of cognitive factors in the experience of loneliness has frequently been discussed, although empirical research is limited. One factor concerns the personal standards that people use in evaluating their social relationships (Peplau, **Miceli**, & Morasch, 1982). Subjective **assessments** of the quantity and quality of interpersonal ties are **comparative**, and involve judging oneself against a variety of standards. These standards may not be consciously-articulated, but they are evident in the complaints of the lonely: "I don't have enough friends" or "**No** one really cares about me." Both our own past experience and social comparisons with others influence our judgments of the adequacy of our social ties. For example, one study (**Perlman & Goldenberg, 1981**) found that students who believe they have fewer friends than their peers are likely to be lonely. Another study (**Cutrona, 1982**) demonstrated that satisfaction with current relationships is affected not only by comparisons with peers, but also with one's own previous relationships. We need to know more about these subjective standards for evaluating the adequacy -- or inadequacy -- of social ties.

Once people decide that their social life is inadequate, they are typically motivated to try to understand the causes of their plight. Discovering the reasons for one's loneliness helps to make sense of a difficult situation and may suggest possible remedies. Our research at UCLA (**Peplau, Russell, & Heim, 1979; Michela, Peplau, & Weeks, 1982**) indicates that people give varied **explanations** for loneliness, varying along dimensions of internality (blaming the self versus external causes) and stability (citing unchangeable causes versus changeable ones) (**Michela, Peplau, & Weeks, 1982**). There is some evidence that depression, a common correlate of loneliness, **may** be most likely when a person attributes their loneliness to internal, stable causes, such as being physically unattractive or having **an** unpleasant personality. Coming to blame oneself for loneliness **may** also contribute to the frequent link between loneliness and low self-esteem (Peplau, **Miceli, & Morasch, 1982**). **Finally**, although good data on this point do not exist, **it** has been

suggested that when loneliness persists over time, there may be a typical attributional shift toward more internal and stable causes, with a related increase in depression and decrease in self-esteem (Peplau, Russell, & Heim, 1979).

LONELINESS AND PSYCHOLOGICAL WELL-BEING

Loneliness researchers have usually started with the premise that loneliness is itself a distressing and harmful experience, worthy of study in its own right. Hence it has not necessarily been considered important to demonstrate that loneliness leads to other forms of mental disturbance. Nonetheless, in recent years, there has been growing interest in identifying the harmful mental health consequences of severe and persistent loneliness (Peplau & Goldston, in press).

The most firmly established link between loneliness and psychological well-being is the correlation of loneliness and depression. Studies using short self-reports of depression find that people who say they are lonely also say they feel depressed (e.g., Perlman, Gerson, & Spinner, 1978; Russell, Peplau, & Ferguson, 1978). Studies using longer depression scales such as the Beck Depression Inventory also find a strong association between loneliness and depression (e.g., Bragg, 1979; Russell et al., 1980; Weeks, Michela, Peplau, & Bragg, 1980; Young, 1982). At the same time, it is important to recognize that loneliness and depression are distinct although partially overlapping phenomena (Russell, Peplau, & Cutrona, 1980). Not all lonely people are depressed, and not all depressed people are lonely. This finding led Bragg (1979) to propose a distinction between "depressed loneliness" and "nondepressed loneliness." In a study of college students, Bragg found that depressed loneliness was associated with fairly global negativity, seen in dissatisfaction not only with social relations, but also with school, work, and many facets of life. In contrast, nondepressed lonely people expressed dissatisfaction only with their social relations; they were not necessarily unhappy about other aspects of their lives. More recently, Young (in press) has proposed that "lonely depression" be considered a major subtype of depression in which social deficits are of central importance.

Evidence about loneliness and other aspects of psychological adjustment is more limited. Diamant and Windholz (1981) found a strong relationship between loneliness and scores on Zung's Clinical Index of Suicide Potential. Lonely people have been found to score higher than the nonlonely on measures of neuroticism (Berg et al., 1981; Diamant & Windholz, 1981; Hojat, 1982). In structured psychiatric examinations, lonely old people were more often judged to have mental symptoms needing treatment (Berg et al., 1981). Among college students, loneliness has been linked to indices of poor personality integration and general

maladjustment from the Tennessee **Self-Concept Scale** (Goswick & Jones, 1981). Among adolescents, loneliness is associated with poor grades, expulsion from school, running away from home, theft and vandalism (Brennan & Auslander, 1979). One survey (Rubenstein & Shaver, 1982) found that lonely people report more psychosomatic symptoms such as headaches, poor appetite, and tiredness. In summary, studies of loneliness are consistent with studies of social support in showing that perceived relational deficits can be detrimental to mental health.

It should be noted, however, that in studies of loneliness and psychological adjustment, most issues of causality are currently uncertain. Studies of loneliness and psychological well-being have typically been correlational and have used cross-sectional data. In some cases, the direction of causality is clear. For example, it seems improbable that loneliness causes bereavement. In other cases, however, it is a matter of judgement whether loneliness is considered the cause or the effect, or whether causality is considered to be bidirectional. For instance, it is likely that chronic loneliness can lead to depression, but it is also possible that depression may itself lead to disruptions in a person's social relationships that result in loneliness.

LONELINESS AND SOCIAL SUPPORT

In reviewing loneliness research with an eye to work on social support, three unresolved issues are salient.

First, what is the relationship between loneliness and perceived social support? In a very general way, the concepts of loneliness and social support can be viewed as opposites: loneliness refers to the experience of deficits in social relations; social support refers to the availability of interpersonal resources. But a closer examination reveals differences of emphasis between the two areas (see Rook's analysis elsewhere in this volume). For instance, social support research has given prominence to instrumental assistance, a theme largely absent from studies of loneliness. It is not clear whether researchers should be encouraged to use the concepts of loneliness and perceived social support in more restricted and differentiated ways, or to treat them essentially as synonyms. A key empirical question is whether scores on measures of loneliness and perceived social support are consistently highly correlated. In other words, are both measures identifying the same individuals as having problematic social ties?

Second, what are the basic functions of social relations, and which of these are most vital to personal well-being? Both loneliness and social support research make assumptions, seen most clearly in the content of measuring instruments, about the important features or functions of social bonds. We need a more

systematic effort to analyze the diverse content of social exchanges, and to develop taxonomies of key functions. Only then will we be in a position to ask which kinds of social deficits are most detrimental to mental health.

Finally, what are the links between objective characteristics of social relations and perceptions of loneliness and/or lack of social support? Both research traditions distinguish between objective features of social relations (**e.g.**, frequency of contact, amount of time together, type of relationship, reciprocity of exchange) and subjective perceptions of social ties. We are only beginning, however, to understand the links between these objectives and subjective experiences, and the processes by which an individual translates one into the other. This is an important direction for future research, and one where loneliness and social support researchers might profitably share ideas and methodologies.

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