



**COME  
TOGETHER,  
CANADA.**

**Stronger connections,  
better mental health.**



## THE BENEFITS OF SOCIAL CONNECTION

### SOCIAL CONNECTION IS PART OF EVERYDAY LIFE

Social connection takes many forms. It might look like sharing a meal with someone you love, calling a friend, or exchanging a few words with a stranger. These moments of connection happen all around us, every day. And they matter more than we might think.

### WHY SOCIAL CONNECTION MATTERS

Human beings are social animals. Our very survival and ability to thrive depends on how we interact with others. Research shows that strong social support is linked to:

- Higher rates of well-being
- Greater safety and resilience
- Increased prosperity
- Longer life expectancy<sup>i</sup>

Having good social support has also been found to lead to positive health outcomes, a sense of purpose, belonging, security, and self-worth. It also increases access to health-promoting resources and behaviours.<sup>ii</sup> In practice this means our ability to recognize when we need to reach out for help when we need it and where to find it and doing day-to-day things that help improve our mental health and well-being.

### WHEN CONNECTION IS MISSING

When people experience social isolation or can't connect with others in ways that feel satisfying or that meet their needs, they can experience loneliness and possibly mental health and physical health problems. The inverse is also true: mental health problems and illnesses can lead to isolation and loneliness, particularly when people aren't receiving the right health and social supports.<sup>iii</sup>

### SOCIAL ISOLATION VS. LONELINESS: WHAT'S THE DIFFERENCE?

- Social isolation: Having few relationships or limited contact with others
- Loneliness: The feeling – or perception – of being alone or disconnected

People can live solitary lives and not be lonely, while some people can be surrounded by people and yet feel very alone.<sup>iv</sup>

## HOW LONELINESS CAN FEEL

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Loneliness doesn't always mean being physically alone. It can be experienced in many ways, including:

- An absence or lack of intimacy, even when surrounded by others
- Feeling insignificant or like you don't matter to other people
- Feelings of entrapment or boredom
- Lacking access to experiences or activities that feel meaningful to you
- Experiencing difficulties in relating to others

## VULNERABILITY TO LONELINESS

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There are also risk factors that can make someone vulnerable to being socially isolated and feeling lonely. These include:

- Having a small social network<sup>v</sup>
- Experiencing health problems, including mental illness and/or physical illness
- Experiencing stigma and discrimination linked to mental illness
- Having a history of trauma<sup>vi</sup>
- Living in poverty or having a lower income<sup>vii</sup>
- Poor relationship quality in romantic or social networks

- Experiencing interpersonal conflict or family conflict
- Experiencing work stress
- Being underemployed or unemployed

## WHAT SETS THE STAGE FOR FEELING CONNECTED?

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When it comes to social connection, the quality of your relationships plays an important role. Research shows that loneliness is more likely to surface when people feel they lack close, meaningful attachments. While a big social network doesn't protect you from loneliness, it can increase your likelihood of having enough of the quality relationships you need that protect against loneliness.

People are more satisfied with their close relationships when those relationships are based in:

- Responsiveness
- Caring
- Understanding and validation
- Empathy
- Reciprocity
- Vulnerability and trust
- Good communication



<sup>i</sup>Holt-Lunstad, Julianne, “Social connection as a critical factor for mental and physical health: Evidence, trends, challenges, and future implications,” *World Psychiatry* 23.3 (2024): 312-32.

<sup>ii</sup>Platt, Jonathan, Katherine M. Keyes and Karestan C. Koenen, “Size of the social network versus quality of social support: which is more protective against PTSD?” *Social Psychiatry and Psychiatric Epidemiology* 49.8 (2013): 1279-1286.

<sup>iii</sup>Pitman et al., *Advancing our understanding of loneliness and mental health problems in young people*, 2018.

<sup>iv</sup>Pinquart, M., & Sörensen, S. “Risk factors for loneliness in adulthood and old age—A meta-analysis. In S. P. Shohov (Ed.), *Advances in psychology research*, Vol. 19, pp. 111–143. Hauppauge, NY: Nova Science, 2003.

<sup>v</sup>Hawkey, Louise C., Mary Elizabeth Highes, Linda J. Waite, Christopher M. Masi, Ronald A. Thisted, and John T. Cacioppo, “From social structural factors to perceptions of relationship quality and loneliness: The Chicago health, aging, and social relations study,” *Journal of Gerontology* 63.6 (2008): S375-S384.

<sup>vi</sup>Hyland, Philip, Mark Shevlin, Marylene Cloitre, Thanos Karatzias, Frédérique Vallières, Gráinne McGinty, Robert Fox and Joanna McHugh Power, “Quality not quantity: Loneliness subtypes, psychological trauma and mental health in the US adult population,” *Social Psychiatry and Psychiatric Epidemiology* 2018.

<sup>vii</sup>Statistics Canada. (2023, November 6). *A look at loneliness among seniors*. <https://www.statcan.gc.ca/o1/en/plus/4881-look-loneliness-among-seniors>