SUMMARY
CHAPTER VI

SUMMARY

Social relationships are at the core of human life. Satisfying social relationships are vital for good mental and physical health. Not surprisingly, problematic aspects of relationships have been a major focus of psychological research. Indeed, the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR; American Psychiatric Association, 2000) highlights the fact that relational problems sometimes warrant the focus of clinical attention because they may cause clinically significant distress, and/or complicate the treatment of, or intensify mental disorders/general medical conditions. Psychologists have undertaken careful analysis of aggression, competition, crowding and other negative factors in social relation. Some problems of social relations have, however, been emphasized to the neglect of others. Researchers have investigated instances where there are “too many” people and individuals feel subjectively “crowded”. However, little attention has been given to the other end of the continuum where social relationships are “too few”, and people feel subjectively lonely.

The phenomenon of loneliness is difficult to define, yet it is one of most important dimensions of human behavior. To date, the experts have not agreed upon a definition. Further, there are neither defined theoretical frameworks which explain loneliness nor is there any consensus regarding the causes and consequences. In the social sciences, the oldest publication about loneliness is Über die Einsamkeit (Zimmermann, 1785–1786). The attention to the concept of loneliness began in the 1950s and 1960s; with publications by Fromm Reichmann (1959). Several studies (Cf. Peplau & Perlman, 1982) suggest that loneliness is a meaningful psychological construct. But what is the nature of this construct? Researchers interested in the problem of loneliness have generally agreed on two characteristics.
of the loneliness experience (Peplau & Perlman, 1982). First, loneliness is an aversive experience, similar to other negative affective states such as depression or anxiety. Secondly, research has shown that loneliness is distinct from social isolation and reflects an individual’s subjective perception of deficiencies in his or her network of social relationships. These deficiencies may be quantitative (e.g., not enough friends) or they may be qualitative (e.g., lack of intimacy with others). Perlman and Peplau (1981) formulated a definition of loneliness as “the unpleasant experience that occurs when a person’s network of social relationships is deficient in some important way, either quantitatively or qualitatively”. Larose, Guay, & Boivin (2002) defined loneliness as a subjective, distressing and unpleasant state in which individual perceives deficiencies in their social world. Loneliness is a subjective experience that can be related to but is not synonymous with social isolation. It has been described as a sad subjective state resulting from dissatisfaction with one’s social experiences (Youngblade, Berlin, & Beslky, 1999). Loneliness as a complex set of feelings and cognitions reflects the distressing and negative emotional experience emanating from the individual’s perceived deficiencies in intimate and social relationships (Ernst & Cacioppo, 1999; Rotenberg, 1999; Perlman, 1988). There is, however, a general consensus among researchers about the inevitability of loneliness (Medora & Woodward, 1986). Loneliness is viewed as a painful experience that is an inevitable part of living (Russell, 1996), and is associated with unmet needs (Weiss, 1973).

As humans we possess a need to belong, which constitutes a fundamental motivation – driving our thoughts, emotions and interpersonal behaviour. This need to belong comprises a pervasive desire to form and maintain at least a minimum quantity of lasting positive and significant interpersonal relationships (Baumeister &
Leary, 1995). Mijuskovic (1988) has also taken a strong stance on the motivational force of social relationships, arguing that:

“The fear of loneliness and the desire to avoid it constitutes the ultimate primary motivational principle in man... the drive to escape isolation accounts for all our passion, thought, and action. In all we think, say, and do, we are animated by a fear of loneliness” (p. 508). Consequently, people who experience persistent difficulties in establishing and maintaining satisfying relationships with others, and thus have difficulty satisfying their belonging needs are likely to experience a sense of deprivation, manifested in disturbances such as loneliness (Chipuer, 2001; Cacioppo et al., 2000; Hagerty, Williams, Coyne, & Early, 1996; Baumeister & Leary, 1995). After an extensive recent review of the extant literature, Heinrich & Gullone (2006) concluded that loneliness was a crucial marker of social relationship deficits. Moreover, these authors argued that loneliness should command clinician’s attention in its own right - not just as an adjunct to treatment of other problems such as depression (p.695).

In sum, the present study is in line with the present researches in this specific area of research. However, it happens to be unique because of several factors:

1. It attempts to study loneliness at adolescence;

2. Keeping in view gender differences in loneliness, it is not desirable to pool data of males and females. The present study lays emphasis on sex-differences in the predictors of loneliness during adolescence;

3. Keeping in view the multiplicity of factors involved in loneliness, the present study will make use of stepwise multiple regression analysis for determining salient predictors of loneliness. The previous investigations have computed only correlations between loneliness measures and several other measures of interest.
OVERVIEW

The review of related literature reveals the following points concerning research in the specific area of loneliness:

(1) Although there is a considerable agreement regarding loneliness as a common problem for the general population and client in psychotherapy particularly, the literature points out loneliness to be particularly prevalent and intense during adolescence. There appear in the literature a number of theoretical statements on loneliness, which specifically address loneliness in adolescents or can be applied to adolescents. Available evidence indicates that, as a group, adolescents are more vulnerable to loneliness than older populations. Although a number of writers suggested that loneliness is specially felt as a painful experience during adolescence, very few studies have dealt with phenomenon of loneliness at adolescence.

The present study aims at investigating loneliness among adolescent school students.

(2) Most studies of sex differences in loneliness have examined only quantitative differences in loneliness. These studies on sex differences in loneliness appear confusing since contradictory results have been reported. One plausible explanation for contradictory results could be the use of different measures of loneliness.

(3) Many investigations (Medora & Woodward, 1986; Moore & Schultz, 1983; Goswick & Jones, 1982; Michela, Peplau, & Weeks, 1982) which attempted to study the relationship of loneliness with other variables combined the data of males and females. The pooling of data of males and females for studying the predictors of loneliness is not justified since sex happens to
be an important moderating variable. Very few studies provide some evidence of sex differences among school students in the qualitative aspects of loneliness - that is, differences in the predictors of loneliness.

(4) A number of other variables: socioeconomic status, age, marital status, employment status, religiosity, number of siblings, self-esteem, self-disclosure to peers, anxiety, depression, and locus of control have been used for studying their relationship with loneliness. Furthermore, as mentioned earlier the relationship of loneliness with weak self-esteem and self-disclosure to peers is one of the most consistent results of research on loneliness.

Keeping in view what has been said in the preceding paragraph, this study includes in its purview depression, hopelessness, automatic thoughts, social support, locus of control, anxiety, and family functioning as possible predictors of loneliness.

(5) Previous studies have computed correlations for determining the correlates of loneliness. Given the overwhelmingly likelihood that loneliness in adolescents involves multiple, interacting and intercorrelated precipitating and predispositional factors, the use of multivariate techniques is imperative keeping in view the importance of several factors underlying the construct of loneliness.

The present study attempts to make use of multiple regression analysis for identifying the predictors of loneliness.

These guidelines were used as the possible refinements in the present investigation, which attempts to study predictors of loneliness at adolescence. The above observations derived from earlier studies provided the guidelines for the formulation of the following hypotheses:
HYPOTHESES

1. It is expected that male adolescents would be more lonelier than female adolescents.
2. For both males and females there is a significant and positive relationship of loneliness and depression.
3. For both males and females there is a significant and positive relationship of loneliness and hopelessness.
4. For both males and females there is a significant and positive relationship of loneliness and negative automatic thoughts.
5. For both males and females there is a significant and positive relationship of loneliness with different dimensions of anxiety.
6. For both males and females there is a significant and negative relationship of loneliness and social support.
7. For both males and females there is a significant and positive relationship of loneliness and external locus of control.
8. For both males and females there is a significant and positive relationship of loneliness and the dimension of conflict of family functioning, and there is a negative relationship of loneliness and the dimensions of cohesion, expressiveness, independence, achievement orientation, intellectual - cultural, active - recreational, moral - religious emphasis, organization and control of family functioning as perceived by the adolescents.

Methodology

SAMPLE

The sample consisted of adolescents who were attending Secondary and Senior Secondary Public Schools in Chandigarh (India). The final sample comprised of 110 males and 110 females between the ages of 15 and 17 years. All participants were staying with their families. Majority of the participants belonged to middle socio-economic status.
The variables of marital status, educational status, employment status and place of residence were controlled in the sense that adolescents were unmarried, unemployed, and belonged to urban area. It is significant to emphasize that in addition to the advantage of homogeneity which resulted from this type of control, there is also an increased danger of bias. However, this type of control is appropriate from the viewpoint of the focal theme of the present study. The participants to be included in this study were also required to be showing:

a) No evidence of drug addiction or alcoholism, and  
b) Not currently in treatment for diagnosed psychiatric disorder.

**MEASURES**

The following measures were employed to test various hypotheses:

**(A) Measures of Loneliness**

a) Revised UCLA Loneliness Scale (Russell, Peplau, & Cutrona, 1980).

**(B) Measures of Cognitive Dysfunction**

a) Hopelessness Scale (Beck, Weissman, Lester, & Trexler, 1974).

b) Automatic Thoughts Questionaire (Hollon & Kendall, 1980).

**(C) Measures of Depressive Symptoms**

Zung Self-Rating Depression Scale (Zung, 1965).

**(D) Measures of Social Support**

Social Support Questionnaire (Sarason, Levine, Basham, & Sarason, 1983)
(E) Measure of Family Environment

Family Environment Scale (Moos & Moos, 1994)

(F) Measures of Locus of Control

Internal – External Scale (Rotter, 1966)

(G) Measure of Anxiety

IPAT Anxiety Scale Questionnaire (Cattell & Scheier, 1963)

Administration of Tests

The following tests were administered in ‘random’ order, requiring six different sessions:

1. Revised UCLA Loneliness Scale.
2. Hopelessness Scale.
3. Automatic Thoughts Questionnaire.
4. Zung Self-rating Depression Scale
5. Social Support Questionnaire
6. Family Environment Scale
7. Internal – External Scale
8. IPAT Anxiety Scale Questionnaire.

The tests were administered in small groups of 8 to 12 participants. The doubts of the participants were removed before permitting them to fill out different questionnaires.

The general testing conditions were satisfactory. Since efforts were made to establish rapport with the participants in order to elicit reliable and authentic information. Participants were told that the information was being collected purely for research purpose. They
were also assured that the information to be collected would remain strictly confidential and presented only in a form in which no person could be identified. The promise of privacy appears to have gone a long way in establishing psychological rapport because a large number of participants contacted the investigator later on and enquired about their performance on different measures. Cooperation of principals and teachers of different schools also helped in eliciting reliable information from the participants.

Despite the tedious nature of task involving test administration, participants showed keen interest in filling out different questionnaires.

**Scoring of the Tests**

The tests were scored by the following procedures suggested by authors of different tests;

The Revised UCLA Loneliness Scale was scored for one measure of global loneliness.

Hopelessness Scale and Automatic Thought Questionnaire were scored for two measures pertaining to hopelessness and negative automatic thoughts. The measures of depressive symptoms were obtained by scoring Zung Self-rating Depression scale.

Social Support Questionnaire yielded two scores: (a) perceived availability of the number of persons listed (b) satisfaction with the available support. The measure of Locus of Control was obtained by scoring Rotter’s Internal-External Scale. The Family Environment scale was scored for the ten measures referring to cohesion, expressiveness, conflict, independence, achievement-orientation, intellectual-cultural orientation, active – recreational orientation, moral-religious emphasis, organization, control. The IPAT Anxiety Scale Questionnaire was scored for five components of anxiety.

Thus, as a result of scoring different tests, the following measures were obtained:
a. One measure of global loneliness obtained from the Revised UCLA Loneliness Scale.
b. One measure each of hopelessness, negative automatic thoughts and depressive tendencies.
c. Two measures of social support: perceived availability of number of supportive persons and satisfaction with available support.
d. Ten measures of family environment: Cohesion, expressiveness, conflict, independence, achievement - orientation, intellectual-cultural orientation, active - recreational orientation, moral - religious emphasis, organization, control.
e. One measure of locus of control
f. Five measures of anxiety

**Analysis**

The following analyses were done:

(a) To examine the nature of frequency distributions of different measures, the following statistical measures were obtained:

(I) Mean,

(II) Median,

(III) Standard Deviation,

(IV) Skewness, and

(V) Kurtosis.

(b) Step wise regression equation involving one measure of global loneliness, one measure of depression ,one measure of locus of control, one measure each of hopelessness and negative automatic thoughts, two measures of social support, ten measures of family environment and five measures of anxiety was formulated to identify the salient predictors of loneliness.

**Results**
The current study reveals the following important findings:

Male adolescents scored significantly high on loneliness than female adolescents. In case of male adolescents with loneliness as dependent measure only depression (+), locus of control (+) and factor C -(+ contributed to loneliness as significant predictors and for female adolescents, depression (+), factor C -(+), negative automatic thoughts(+), expressiveness (-), and active recreation (+) contributed as significant predictors of loneliness.