# Is Loneliness Impacted by the Judge and Jury Within? Aaron Carter, M.A<sup>1</sup>, Jennifer Altman, Ph.D.<sup>1</sup>, Christian French, M.A<sup>1</sup>, Lauren Peterson, M.A.<sup>1</sup>, Amy Schaefer, M.A<sup>1</sup>, Abbie O. Beacham, **Ph.D**.<sup>2</sup>

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# INTRODUCTION

Loneliness can adversely impact health rates equivalent to or higher than obesity. The physical ramifications are startling, contributing significantly to mortality. Further, loneliness has a deleterious impact on mental health, leading to outcomes including depression, anxiety, or suicide [2]. The effects of COVID-19 have compounded these effects in subsets of the population [6]. Interestingly, some studies have shown that certain mindfulness techniques can mitigate the impacts of loneliness and social isolation [3].

Given the context of COVID-19 we hypothesized that, in our sample, Loneliness would be associated with higher Anxiety Sensitivity and Health Anxiety and lower (i.e., inversely related) Mindfulness.

## METHOD

#### **Participants**

Our study sample consisted of individuals (N=93) between the ages of 18-64 years, primarily between the ages of 25-34 (50.3%), white (88.2%), heterosexual (78.5), and female gendered (77.4).

Study participants completed demographic items and measures of Health Anxiety, Anxiety Sensitivity, Mindfulness and Loneliness as part of a larger survey conducted shortly after COVID-19 was categorized as a pandemic and "stay-at-home" orders were in place.

### Measures

#### Loneliness Item

- Single item assessing how often do you feel lonely (0= "Never or hardly ever" to 10- "Always")
- Anxiety Sensitivity Index (ASI [7])
- This measure provides a distinction between broad and specific apprehension regarding anxiety. It has shown to be able to parse apart anxiety variations.

Five Facet Mindfulness Questionnaire (FFMQ-SF [1])

The FFMQ-SF assesses for someone's ability to observe, describe, attend to what is occurring in the present, have nonjudgement as well as non-reactivity to inner experience, feelings, and stimulations. Additionally, it describes their thoughts, feelings, and experiences. It also assesses for one's ability to act with awareness, but also to not react to emotions and thoughts.

Health Anxiety Inventory (HAI-18 [5])

Assess for a broad range of health anxiety which can establish a difference between health anxiety to full blown illness and variations between.

<b>Table 1</b> . Independent variables retained in final regression model				
Coefficients	Beta	t	Sig	
FFMQ Nonjudgement	413	-3.726	.000	
HAI Negative Consequences	.222	2.006	.049	

**Table 2.** Independent varial

ASI Somatic

FFMQ Nonreaction

ASI Social

FFMQ Acting with Awareness

HAI Main General Anxiety

FFMQ Observing

ASI Cognitive

FFMQ Description

ables not reta	ined in final regr	ression model
Beta In	t	Sig
.138	1.071	.447
092	764	.447
.098	.065	.186
.043	.332	.741
.145	1.113	.269
.068	.659	.512
.141	1.172	.245
.136	1.244	.218



#### RESULTS

- A Backwards linear regression was conducted to ascertain salient predictors of Loneliness. After nine iterations, the final model accounted for 29% of the variance. See Tables 1 and 2  $\circ$  F (2, 70) = 14.85p < .001
- Significant IVs retained in the final model were:
- Negative Consequences/Health Anxiety
  - β = .222, p<.049
    </p>
- Mindfulness/Nonjudgement of Internal Experiences  $\circ$  (β = -.412, p<.001).

# DISCUSSION

Previous studies have shown that there is a significant relationship between Anxiety Sensitivity and loneliness. With higher levels of Anxiety existing amongst the lonely [4]. The current study assessed for three components of anxiety sensitivity; Somatic, social and cognitive. As for mindfulness facets, observation, description, awareness of actions, non-judgement of inner experiences, and nonreactivity were assessed for. Additionally, general anxiety and anxiety about negative health consequences were evaluated. Contrary to our initial hypothesis, neither Anxiety Sensitivity nor other facets of Mindfulness were significant predictors of Loneliness in our sample. In fact, those with higher levels of Health Anxiety had higher levels of loneliness. And those with higher rates of nonjudgement were associated with lower rates of loneliness.

These findings suggest that increasing focus on present awareness with emphasis on nonjudgement may influence aversive perceptions of loneliness during especially challenging times.

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