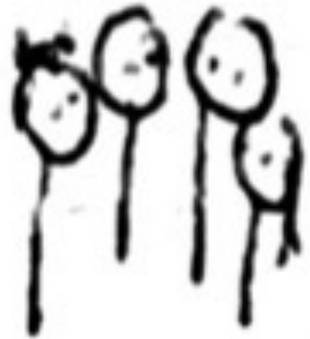# Lonesome no more?
Loneliness and Social Isolation in Children and Teens

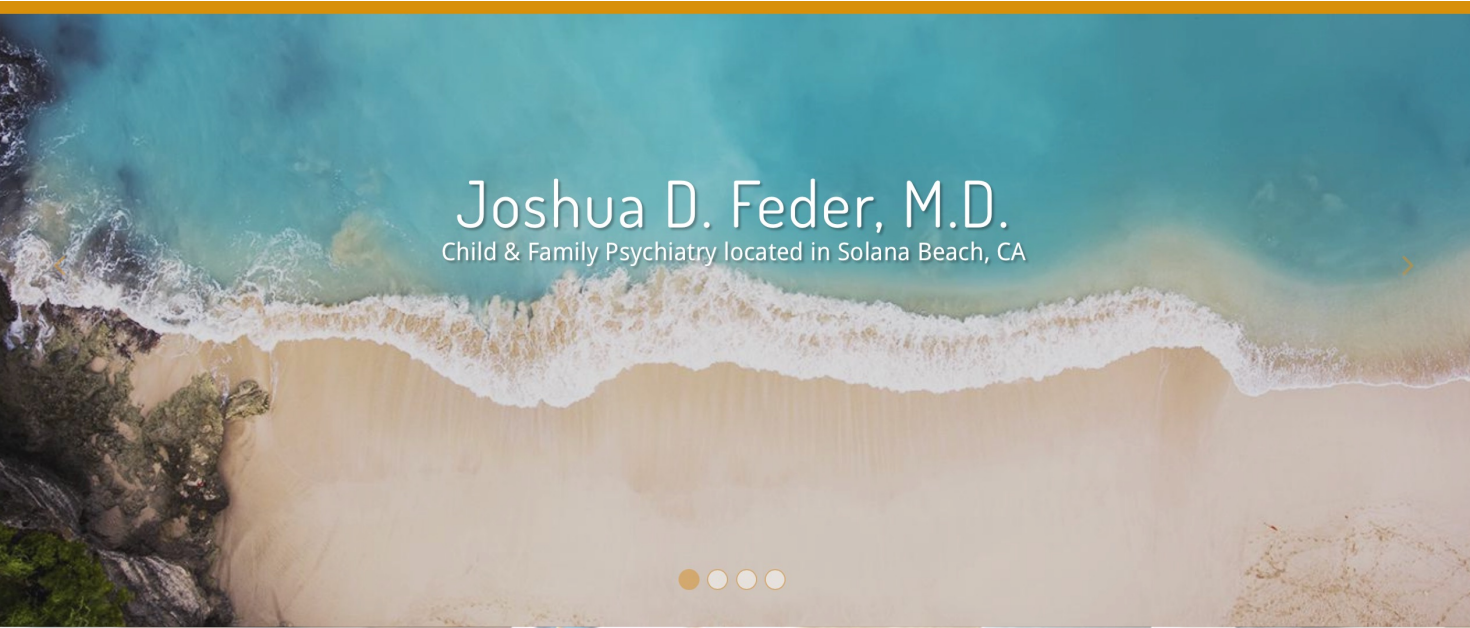Joshua D. Feder, MD

Disclosures

- Joshua D. Feder, MD, Child and Family Psychiatry https://www.joshuafedermd.com

- Editor in Chief, The Carlat Child Psychiatry Report https://www.thecarlatreport.com Author, *The Child Medication Fact Book for Psychiatric Practice*. Carlat Publishing, Second edition, 2023.

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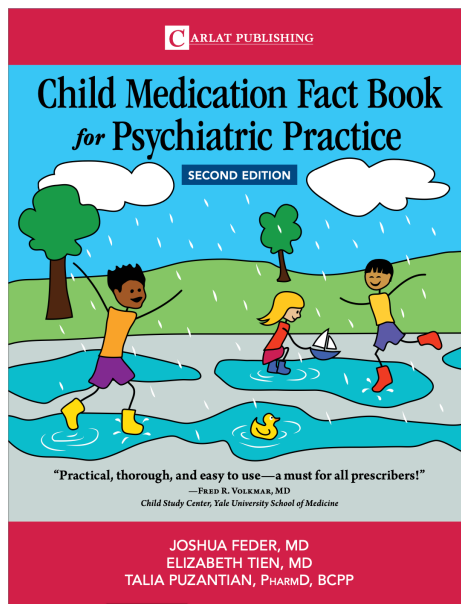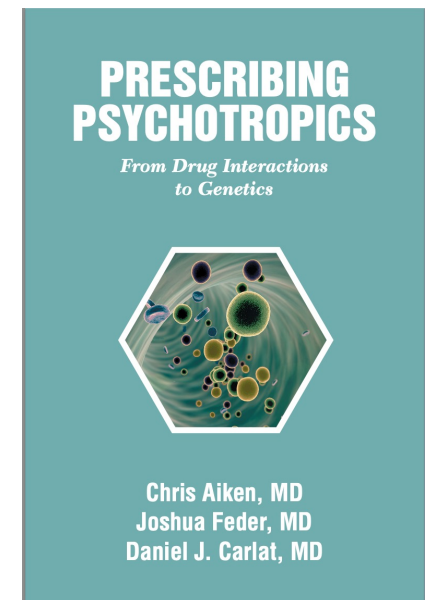
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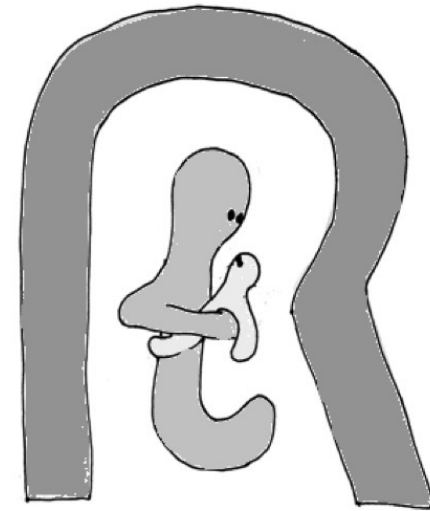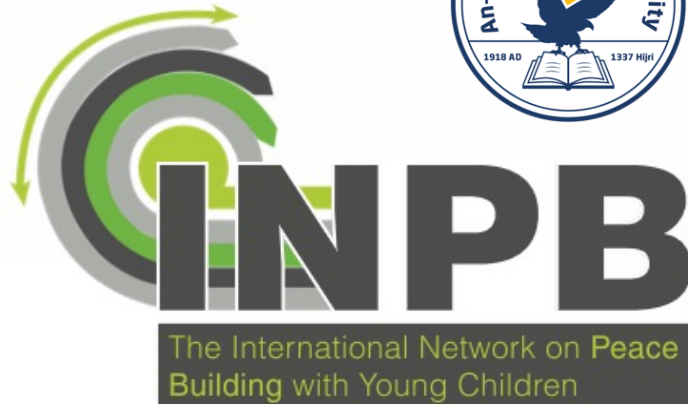
Resilience through relationships

Disclosures

positive development

At Positive Development, our mission is to help children on the spectrum build more natural, meaningful connections with their families and communities as they achieve greater growth, independence, and joy.

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Co Chair, Disaster & Trauma Committee
San Diego Child & Adolescent Psychiatry Society, Assembly representative
Autism and Intellectual Disability Committee (adjunct – policy)
Resource Group on Climate Impact
Government Affairs, California Assn of Child & Adolescent Psychiatry (CALACAP)

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Learning Objectives

1.   Attendees will be able to define three principles for assessing and helping lonely or isolated youth outlined in the talk.

2.   Attendees will be able to apply those principles to analyze clinical cases of lonely or socially isolated youth

3.   Attendees will be able to construct a plan for helping lonely or socially isolated youth
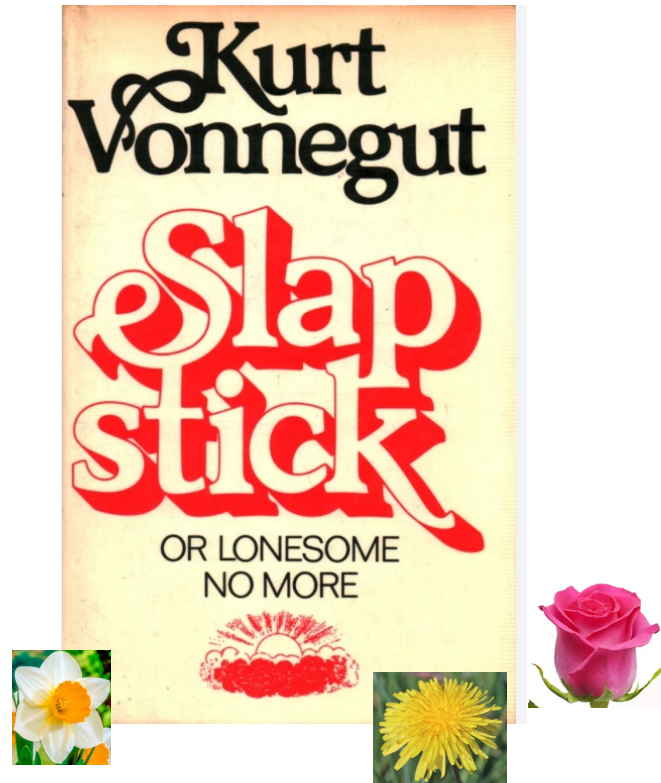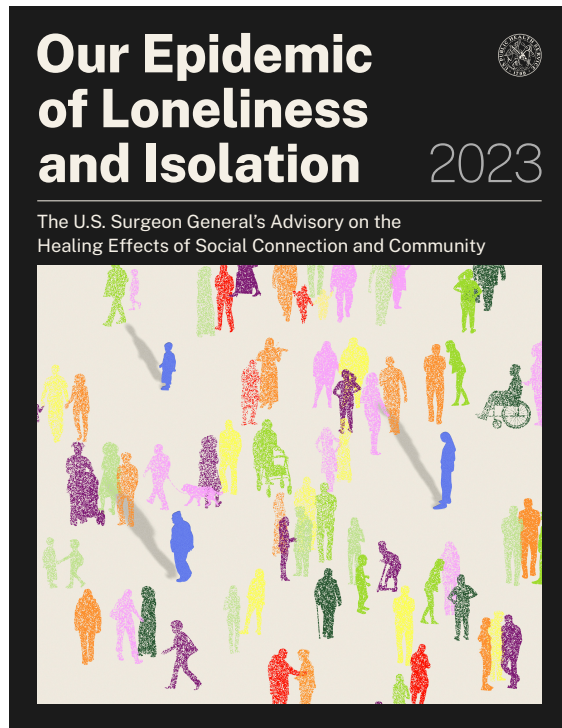
Thank you!

Aydar Shaildayev, MD.

Psychiatry resident, NYU Langone, New York, NY.

Eric Whitney, MD.

Clinical assistant professor, Department of Child and Adolescent Psychiatry,

NYU Grossman School of Medicine, New York, NY.
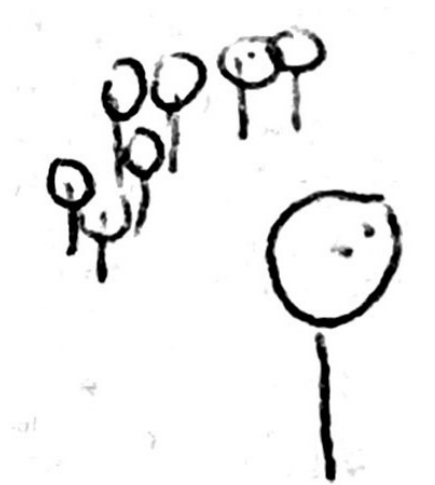
Preface: Murthy 2023 vs Vonnegut 1976

Meet Mira

- *13 years old BIPOC AFAB*
- *parents divorced - two houses now*
- *school conflicts - caught between groups*
- *learning/ processing challenges - trouble keeping up with the banter*

Definitions

- Social isolation: absence or loss of personal relationships

- Loneliness - feeling alone or lacking intimate relationships

- Depressed: might feel lonely even though having friends.

- Autism: might feel isolated but not experience loneliness; however, rates of loneliness are comparable to the general population.

- Loneliness and depressive symptoms in teens are linked to adverse health outcomes in adults.

Social Determinants

- Racism and the COVID-19 pandemic, contribute to feelings of isolation in many young people

- Feeling isolated post-COVID is associated with anxiety and depressed mood in children and teens
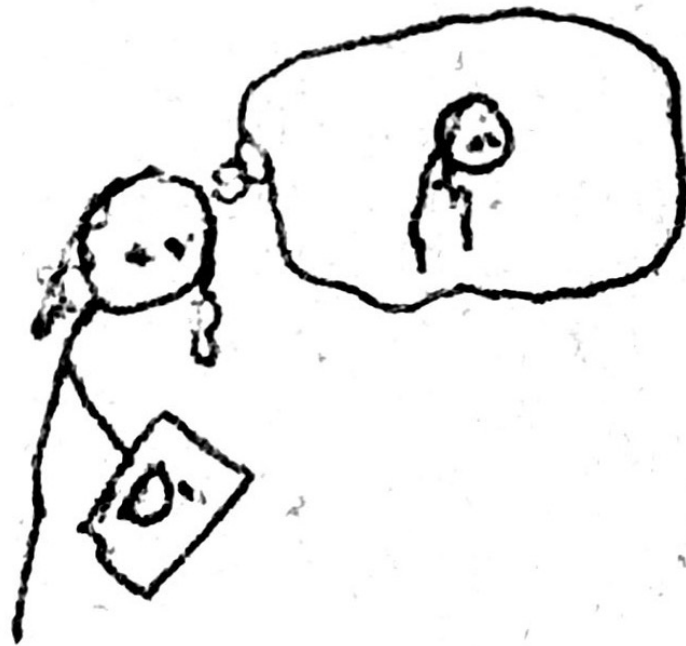
Mira is depressed: nothing seems good - people, things, the future, the world

And her grades are dropping…

Depression & Suicidality

- Loneliness is associated with depression in children (OR 1.32) and adolescents (OR 2.05) Exclusion is associated with mental health issues including mood disorders and drug dependence.

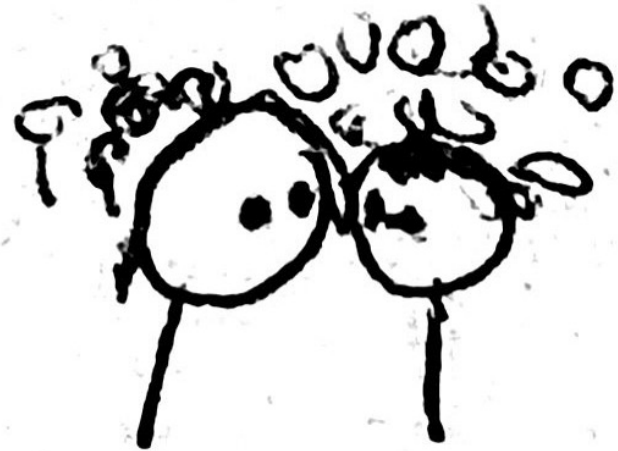- Social isolation is associated with impaired cognitive function

Principles of Care

We are built to be social

- Early childhood: social connection related to development.

- Adolescence: emotional and social intensity
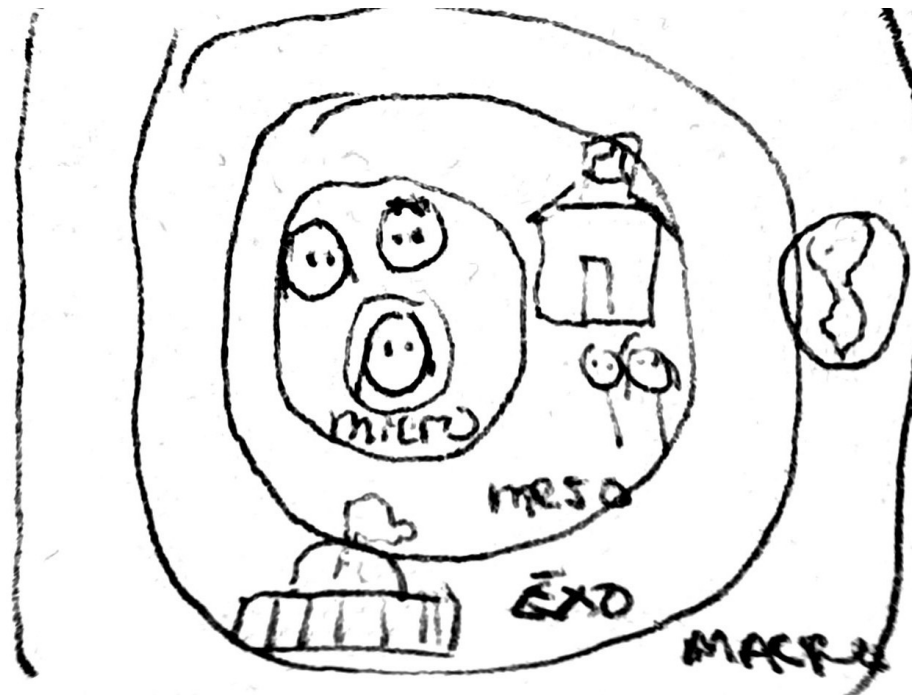
1. Messy Interactions (Tronick)

2. Developmental Relationship Based Approach (Greenspan – Wieder)

calm, connected, in a flow of meaning interaction

3. Social-Ecological Model (Bronfenbrenner)

B-P-S = **S-P-B** at many many levels

Assessment

- Patient, teachers and parents,
- Nonjudgmental language: "Different kids are more, or less, connected to the people around them. Tell me about your child/student's levels of connection to others."
- Scales: UCLA Loneliness Scale: http://tinyurl.com/nh9fnnv3; UCLA-3 Item Scale; The 12-item Social Network Index
- Co-occurring: social anxiety disorder, depression, suicidality, and neurodevelopmental problems

Understanding Mira

What is happening in Mira's interactions?

Where is Mira successful in having a calm, connected flow?

Where can we intervene (S-P-B)?
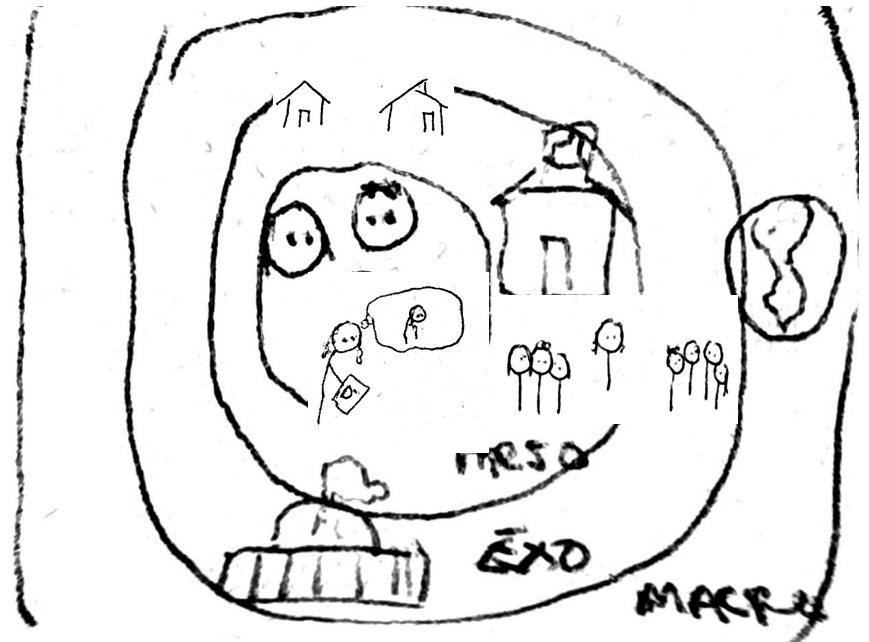
Helping parents

"Let's help you/your child become more comfortable connecting with other kids, we can use play, interacting using toys or puppets. As the interactions become more natural, we can encourage more interactions with kids in the real world."

Working with kids

- Gear your recommendations to the child's developmental level.

- Involve parents, caregivers, teachers, or siblings in tracking symptoms and supporting social activities.

- Nurture existing relationships (including digital ones) and expand their social world.

Working with kids

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Social Isolation

- Younger children play based approaches.
- Older children and teens: didactic lessons and role play.
- Social communication challenges or autism: DRBI - facilitate interaction and connection with typically developing children as well.
- Role playing with teens: flow of back-and-forth banter with peers.

Loneliness

- Younger children may need help identifying feelings. Action language/

- For all kids/teens: address cognitions associated with feeling lonely,

- Mindfulness-based therapy: tolerate painful emotions (eg, accepting feeling "different" without judgment).

Parent Mediated Intervention

- Helping parents to help kids be regulated
- Then helping parent to support social communication:

  Wait, Join, Build
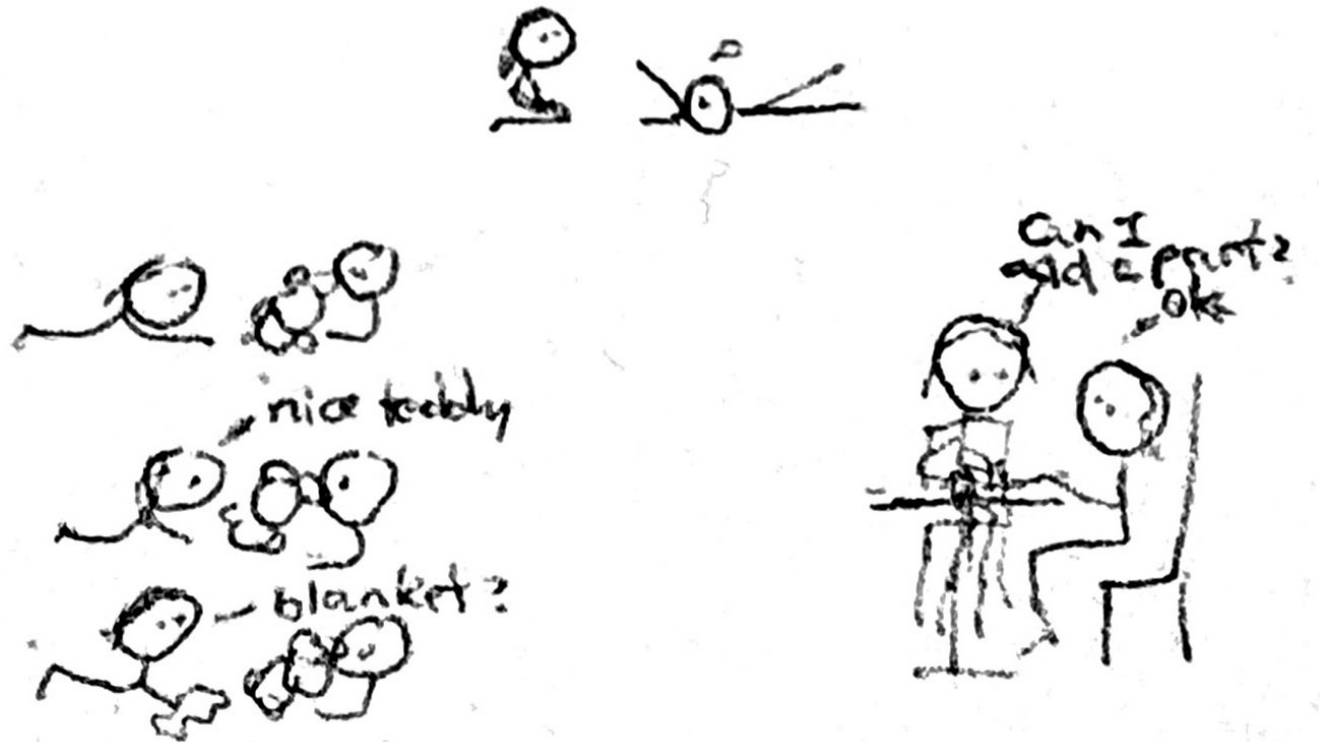
Tech Approaches

- "Active" video games (eg Wii Sports, multi-player dance games) increased interaction during COVID isolation.
- Encourage digital connection rather than consumption (eg, excessive scrolling of social media or short videos):
- Cooperative gaming
- Video (face-to-face)
- Practice with associating facial expressions with verbal cues
- Special interest activities with like-minded people to build community/belonging

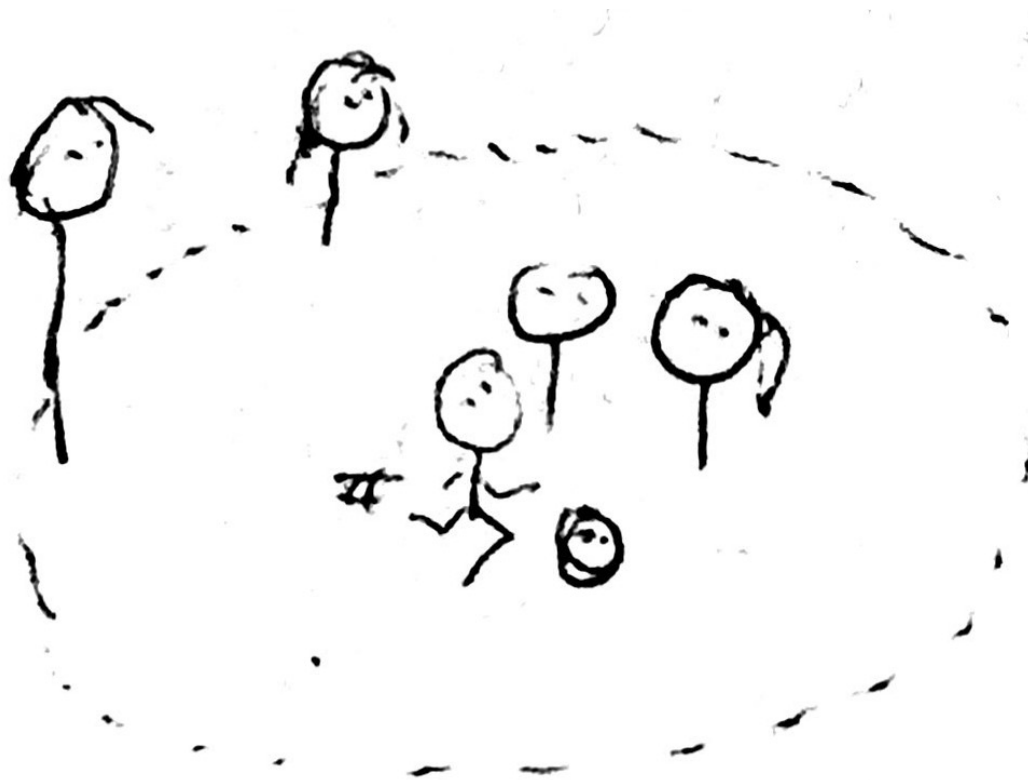# AI Chatbot Companions vs Transition objects?

Autism

- Program for the Education and Enrichment of Relational Skills (PEERS) (Laugeson EA et al, *J Autism Dev Disord* 2012;42:1025–1036).

- Social cognition approach (Crooke PJ et al, *J Autism Dev Disord* 2008;38:581–591).

In Schools

- Building inclusive communities: Inclusion, disabilities, and Autism Is: the interactive classroom experience

- Supervision and facilitation on the playground

- Supporting staff so that they know how to support kids.

Helping Mira

What can we do about Mira's social context to support her, respectfully and effectively?

*How can we coach/ offer reflective support to the people around Miri?*

What can we do at other levels of the system to help Miri feel less lonely and be less socially isolated?
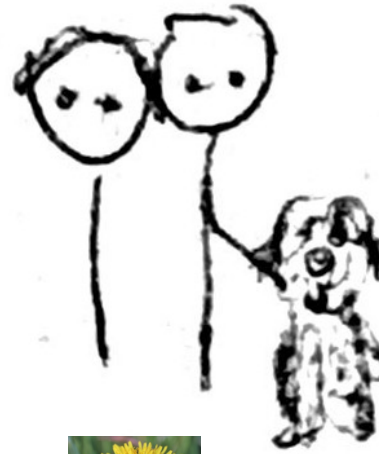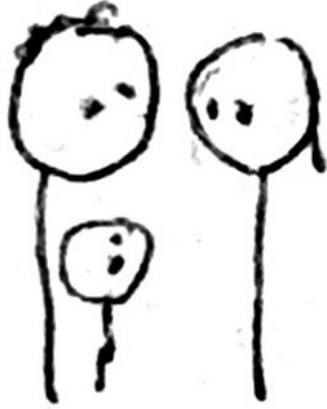
Helping Yourself

- Clinicians are often isolated and lonely

- Burnout, depression and suicide rates in clinicians are rising

- Connect – and look out for each other

- Sleep, exercise, and take breaks

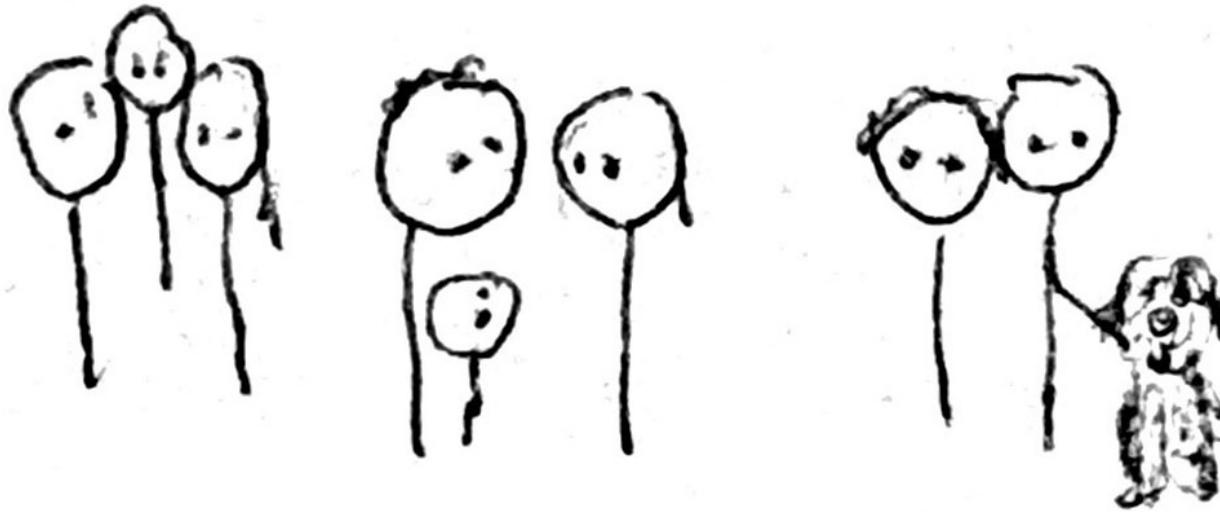- Changing systems that wear us out
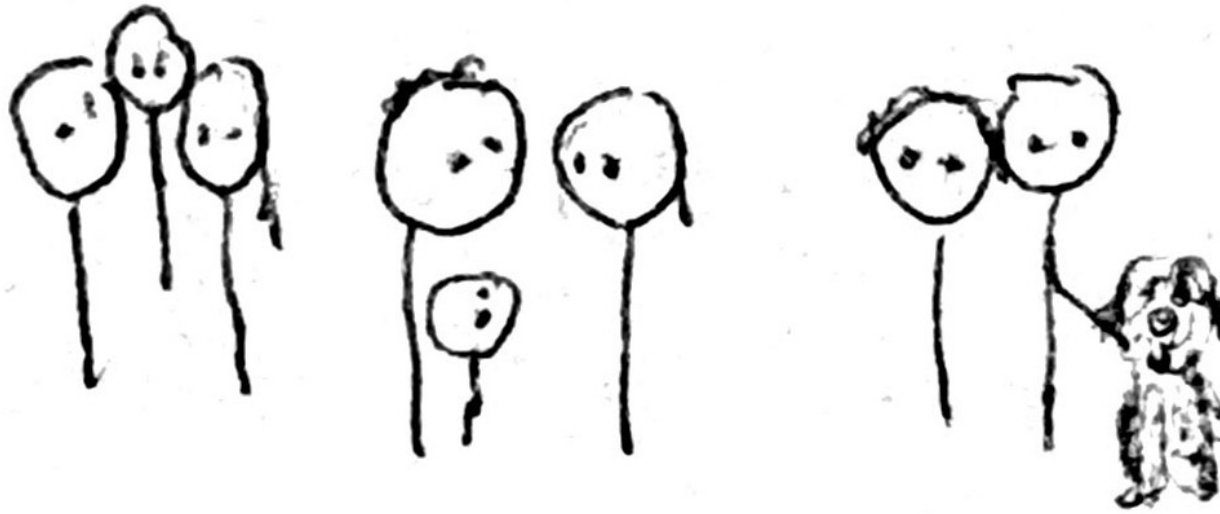
- We are social animals. When we are isolated or lonely we can have learning problems, anxiety, depression or suicidality.
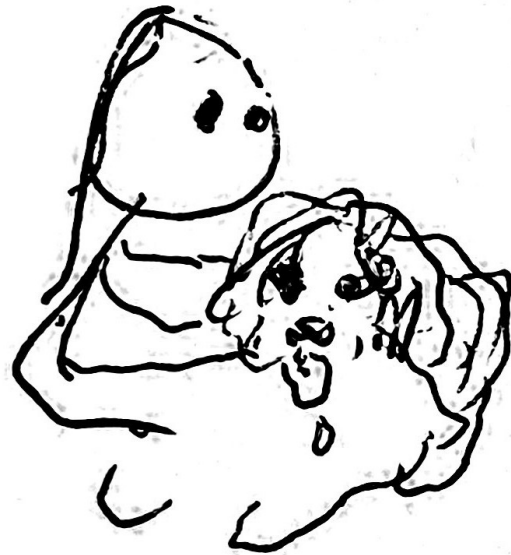
- Acceptance is important, including for neurodivergent kids and teens.

- Support regulation, connection and a meaningful flow of interaction, working at whatever levels of the system you can.

Discussion

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