RESETTING THE WORLD WITH WELLNESS:
Human Connection in a Time of Physical Distancing

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GLOBAL WELLNESS INSTITUTE
EMPOWERING WELLNESS WORLDWIDE
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Beth McGroarty
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Resetting the World with Wellness

The Global Wellness Institute (GWI) is honored to participate in the Health and Wellness taskforce and working group that will assist the Vatican in crafting an integral response to the aftermath of COVID-19. Health and Wellness is a key pillar of response in this initiative, along with Ecology, Economy, and Security. In these difficult times, wellness can offer a vision for the future and can provide a roadmap for healing and growth. This series of white papers builds on GWI’s comprehensive understanding of wellness as a concept and in practice; integrates facts, data, and best practices; employs interdisciplinary thinking; and recommends strategies that can help the world reset with a proactive wellness-based mindset. The series will propose a wellness reset for the world in a number of areas, including the built environment, workplace, mental wellness, and more.

About the Global Wellness Institute

The Global Wellness Institute (GWI), a 501(c)(3) non-profit organization, is considered the leading global research and educational resource for the global wellness industry and is known for introducing major industry initiatives and regional events that bring together leaders and visionaries to chart the future. GWI positively impacts global health and wellness by advocating for both public institutions and businesses that are working to help prevent disease, reduce stress, and enhance overall quality of life. Its mission is to empower wellness worldwide.

About the Author

This white paper was prepared by Beth McGroarty, Vice President of Research and Forecasting for the Global Wellness Institute and Global Wellness Summit. Ms. McGroarty oversees the Summit’s annual Global Wellness Trends Report as its lead author. She is the editor of the Global Wellness Institute’s Global Wellness Brief and the author of the TRENDIUM, a compendium of trends impacting the multitrillion-dollar global wellness industry. In addition, Ms. McGroarty edits wellnessevidence.com, the first online resource dedicated to the medical evidence for the top wellness modalities. She has a BA from Barnard College and an MA from Stanford University.

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COVID-19 creates widespread social isolation and exacerbates the epidemic of loneliness.

Acting to save lives from COVID-19, governments around the world had to order people to stay home and socially isolate. The toll on human relationships has been heartbreaking, with people barred from visiting elderly parents in nursing homes or hospitals, and people forced to die completely alone or to say goodbye via speakerphone. As the world slowly opens up, complex social distancing measures will continue to keep us physically apart, and new waves of the virus will likely send us home again. We are in for a long “socially distant,” “touch-less,” and “contact-free” future, so psychically traumatic that our fears of physical closeness could last years after the pandemic. Experts are predicting a skyrocketing loneliness crisis that will create a wave of mental illness, suicide, substance abuse, and violence borne of social isolation, especially for our loneliest populations: the young, the old, the poor, and migrants.

The bitter irony – or tragedy – is that pre-virus, experts (from the WHO to the UN) increasingly agreed that we were experiencing a loneliness crisis unprecedented in human history. Socially isolated populations have been exploding in most countries (see below). The major sociocultural and technological shifts that have unfolded from the Industrial Revolution through the Digital Age have looked like a concerted conspiracy to destroy intimate human relationships and decimate our “social capital,” or meaningful connections to our family, friends, and communities. This perfect storm of forces includes the capitalist obsession with individualism, work, money, and status over the well-being of the group; the shift from extended, to nuclear, to more single-person families; the rise of digital media; and the declining participation in community organizations and churches. Driven by the economic goal to create perfect, atomized consumers, community has been a casualty.

A fast-growing body of medical research (see below) is revealing that loneliness is one of our deadliest, most invisible health problems, representing a greater risk for early death than both obesity and smoking. If COVID-19 took loneliness from a crisis to mega-crisis, it also sent a message to the world that we precisely didn’t need: that isolation is a protector. The COVID-19 experience is telling us that face-to-face connection, social gatherings, extended families, and dense cities are super-spreaders of the disease, while “socially distanced” environments (e.g., suburban car culture and solo living) fare better.

But COVID-19 also sends another message: we must work hard to give loneliness the recognition it deserves and to create new (and restore lost) meaningful human connections in a post-virus world. Experts have been talking about the “loneliness epidemic” for years, and now is the time to act. As Dr. Vivek Murthy, 19th Surgeon General of the United States, argues, loneliness is the “largest and most under-appreciated force for addressing many of the critical problems we’re dealing with, both as individuals and society.” And we now have a “significant opportunity… to thicken and broaden (our) relationships. For decades we have been eating at smaller and smaller tables, with fewer and fewer kin. It’s time to find ways to bring back the big tables.”

The world was lonelier than ever before the virus hit.

The country-by-country statistics on the global loneliness crisis could fill a book. In the United States, loneliness rates have more than doubled in the last 40 years, and 61% of American adults now report they are lonely. In the United Kingdom, roughly 1 in 7 people report that they are
“always or often lonely” – while more than 200,000 UK seniors see or speak to family or friends less than once a week.\textsuperscript{iv} In Italy, 13% of adults report having no one they can ask for help.\textsuperscript{v} In Japan, the number of seniors living alone increased more than six-fold from 1980-2015, and over 1 million adults meet the official government definition of hikikomori, or complete social recluses who never leave their homes.\textsuperscript{vi}

The loneliest generations are the old and the young, with a new loneliness among youth now becoming a world crisis. A major BBC survey found that while 27% of people over age 75 “often or very often feel lonely,” that number jumps to 40% for 16-24 year-olds.\textsuperscript{vii} In the United States, younger adults (79% of Gen Z and 71% of millennials) report being significantly lonely versus just half of Baby Boomers.\textsuperscript{viii} In Japan, six in ten people reporting loneliness as a major problem are under age 50.\textsuperscript{ix}

The pandemic could unleash a loneliness mega-crisis.

The United Nations (UN) and World Health Organization (WHO) recently warned of a looming mental illness crisis born of “the “isolation, the fear, the uncertainty, the economic turmoil” wrought by the pandemic.\textsuperscript{x} Data from the first three months of the pandemic are alarming. The WHO reports that 60% of the population in Iran, 45% in the United States, and 35% in China are now suffering mental distress under COVID-19.\textsuperscript{xi} Loneliness is surging around the globe. A survey of English-speaking countries showed that 76% of people report being significantly more lonely because of the pandemic.\textsuperscript{xii} New research shows that children are disproportionately impacted, especially those living in developing countries; not only are hundreds of millions of kids going hungry as they miss out on school meals, but more than 70% report that they feel very lonely due to school closures.\textsuperscript{xiii}

How did our world become so lonely?

Changing family structures and rising longevity. For tens of thousands of years, humans lived in multi-generational families supported by a dense network of kin. In the early 20\textsuperscript{th} century, the nuclear family (headed by a male breadwinner) became the dominant model. And now we are experiencing the most seismic change in family structure in human history: more people worldwide living alone, with more people delaying, or choosing not to pursue, marriage and children.\textsuperscript{xiv} As more women have access to careers and education, industrialized countries are seeing record-low fertility rates.\textsuperscript{xv} In the United States, single-person households jumped from 13% in 1960 to 28% in 2018.\textsuperscript{xvi} In Japan, two out of five households will be single-person by 2040.\textsuperscript{xvii} People have never had, or lived with, less family. For the people living alone under the COVID-19 lock-downs, that can mean no real human contact for months on end. Longer lifespans also mean more people are outliving their family and friends, and their social networks shrink dramatically as they age. The pain older people feel when they are left behind can be excruciating. For example, in fast-aging South Korea, where vastly more elderly people now live alone because of the breakdown in traditional family structures, suicide rates have exploded since 1990.\textsuperscript{xviii}

We live in front of screens, not faces. The harmless-looking smartphone appeared just a dozen years ago, and it rewrote human life. It promised to connect us as never before, but the fallout has been destructive: the decimation of the line between work and “life,” an endless barrage of “fake” and divisive news, and our “friends” becoming posts we scroll past on social media while
we count up our “likes.” The average person now spends 6 hours and 42 minutes a day online.\textsuperscript{xix} Constant digital connection means a growing disconnection from real people. We are talking to and seeing people less, and while we have all these digital connection tools at our fingertips, our conversations have become less meaningful, authentic, and sincere. Study after study shows an association between too much social media time and higher rates of loneliness, depression, and anxiety – especially for the young. Young adults who spend two hours on social media daily are twice as likely to feel lonely as those that spend a half hour.\textsuperscript{xx} The rise of social media seems to exact a unique toll on young women’s mental health: for example, a shocking 28% of UK women ages 16-24 now have a diagnosed mental health condition like anxiety, depression, or panic disorder.\textsuperscript{xxi}

Our built environment and neighborhoods create isolation. For decades, our residential communities have been designed to create isolation and erode neighborly trust.\textsuperscript{xxii} Around the world, our homes and neighborhoods are increasingly segregated by class, race, and life stage (the elderly separated from the young), while our car-centric infrastructure has erased public spaces and chances for spontaneous “bump-ins” with neighbors. Homogenous modern housing, and retail and entertainment districts that look exactly the same from China to California, encourage consumption over community, culture, and spiritual life. We have lost the neighborhoods that once provided us natural human connection.

The migratory population surge. A record percentage of the world’s population is now migrant, suffering from the terrible loneliness that comes from being far from one’s home culture, friends, and family. An estimated 272 million people (3.5% of the world’s population) now live outside their home countries, including 26 million refugees.\textsuperscript{xxiii} And, these figures underestimate the level of displacement because there is so much movement inside countries: nearly 51 million currently live in internal displacement due to conflict and disasters.\textsuperscript{xxiv} The World Bank estimates that climate change will displace an additional 143 million people within their countries by 2050 across Sub-Saharan Africa, South Asia, and Latin America.\textsuperscript{xxv}

Decline in religious affiliation and weekly worship. While the majority of people worldwide identify with a religion (84%), both religious affiliation and regular attendance at religious services is declining in most countries. For example, in the United States, 65% of people now identify as Christian, down 12% in the last decade.\textsuperscript{xxvi} The decline is especially strong among younger generations: globally, only 36% of those age 18-39 attend weekly religious services versus 42% of people age 40+.\textsuperscript{xxvii} With this decline, not only is instruction in crucial spiritual and ethical values lost, but also the tangible community and social connections that happen when people gather regularly for religious observances. All the major religions, from Catholicism to Islam, have as their centerpiece a belief in service to others, especially to help the most vulnerable. With mandated social distancing and the cancellation of religious services during COVID-19, the 2 in 5 people worldwide that rely on them for spiritual support and human connection are now deprived in a time when they need this support the most.

Loneliness is a killer: Its impact on our health is staggering.

Social isolation is not even classified as a health condition by the medical community, but a growing mountain of research shows its astounding impact on our physical and mental health. One large study indicates that social isolation presents a far greater risk of mortality than obesity,
smoking 15 cigarettes a day, excessive alcohol consumption, and lack of physical activity – and that strong social connections are associated with a 50% reduced risk of early death.xviii This makes loneliness a critical health issue. Numerous studies also reveal that loneliness is the invisible, lurking root cause behind many health conditions, including addictions, depression, and heart disease – from causing a 32% increased risk of strokexxx to doubling a person’s likelihood to develop Alzheimer’s.xxx Loneliness even makes people more vulnerable to viruses like COVID-19, as it causes changes in gene expression in white blood cells resulting in reduced immune defenses.xxxi

We must balance digital and face-to-face interactions to create stronger and healthier social connections.

The “digital everything” trend is being radically accelerated under COVID-19, and experts predict that it will define our post-virus world. If 70% of global professionals were remote workers at least part of the week pre-virus,xxxii working from home has become the norm during the pandemic, and now more companies are stating that employees will not be heading back to offices post-pandemic.xxxiii All the macro trends that analysts predict for our post-COVID-19 future – from an exodus from cities to suburbs and rural areas, to full-time working from home – will further isolate us and eliminate what our lonely world needs most: human gathering and face-to-face communion. We must be vigilant that digital innovations and new “distancing” technologies and techniques do not decimate real human connections. It will take action at the individual, community and government levels to tackle our unsustainable loneliness crisis and build a more connected world. And, it will be just as challenging as it is desperately needed.

Individuals are the most powerful force for social connection.

During COVID-19, we have seen an extraordinary global burst of human kindness and service to others. The UK’s NHS volunteer army was flooded with so many hundreds of thousands of applications that they could not process them; thousands of individuals and community groups set up “wellness checks” and outreach programs for seniors and the vulnerable, such as delivering groceries and medicines, or just having long talks.xxxiv If we communicated primarily by terse text messages pre-virus, suddenly long phone calls to family and friends have made a comeback. People who never knew their neighbors’ names are now meeting on porches and in the street. The world watched transfixed as Italians imprisoned at home sang with each other across their balconies, or as people emerged each night to cheer on healthcare workers. How about we simply sustain such behaviors post-crisis?

Change the quality of your communication. COVID-19 has shown us that we ache to connect. The most powerful force in creating a less lonely world will happen at the interpersonal level. What is the quality of, and intention behind, our communications? Do we meet strangers’ eyes and say hello? Do we constantly broadcast our successes on social media, or do we show humility, kindness, and vulnerability? Do we send abrupt texts to our friends and family, or do we carve out meaningful time for them, showing up as our listening, caring selves? Do we reach out frequently to our friends and family that are most isolated? Do we invite people spontaneously to our homes (or porches, for now)? Do we perform service and volunteer, which
so many studies show can improve our own health and happiness? We need to make intentional
effort to go deeper with every level of our social connections: from our intimate family and
friends, to our co-workers and occasional friends, to our acquaintances and neighbors.

**Less screen-time, more people-time.** As the pandemic continues, we must embrace digital
platforms and the phone to maintain our connections. But when we emerge from the COVID-19,
we must work to exchange our six-plus daily hours spent with screens for more hours spent
face-to-face with real people.

**Destigmatize loneliness.** We must talk far more openly and easily about loneliness, because it
afflicts most of us and is not a sign of weakness or failure, but an expression of our innate human
need to belong and connect. We need to talk to our family and friends about it; therapists and
doctors need to bring it to the center of conversations; and we need community campaigns to
normalize and tackle the issue.

**Communities provide the spaces for human interaction to flourish.**

**Design homes, neighborhoods, and cities that spark connection.** We can reverse our “anti-
social” built environments and engineer our housing, neighborhoods, and cities with all kinds of
features that drive community, such as public plazas and parks, sidewalks, mixed-use spaces,
and higher density and more diverse housing design. In response to COVID-19, cities are
shutting huge swaths of streets to cars to allow people to walk, run, and bike outside safely;
re-opening restaurants are now pouring out onto closed streets to create space for socially
distanced, outdoor dining. Cities should aim to make these changes permanent, keeping
as many streets as possible as car-free spaces for walking, biking, and socializing. Prior to
COVID-19, many places were faced with dying malls and main streets, and the skyrocketing retail
closures due to the pandemic will be devastating. We now have an opportunity to reimagine
our cities and suburbs around the values of community, rather than consumerism. Designing
neighborhoods and cities so that people can spontaneously meet up or gather around shared
interests (e.g., in concerts, in libraries, or in community gardens) is the most natural, powerful
way to create greater connections.

**Reinvent “families” and multi-generational living.** Over the last decade, the rapid growth of
solo living and remote work gave rise to a new “sharing economy,” spanning everything from the
rise of coworking spaces for lonely workers to coliving concepts for young singles and friends.
COVID-19 has put many of these new models of communal living and working to their toughest
test. But with fraying extended and nuclear families, we cannot abandon the recent movement
by people to create their own extended “families” and communal models of living and working.
And, we must embrace new multigenerational living experiments. For instance, Humanitas in
the Netherlands brings the two loneliest demographics together, young adults and the elderly,
by blending college student housing with senior residences, where students spend time with
seniors in exchange free housing. All types of housing - from coliving and urban high-
rises to suburban developments - can be reimagined and redesigned to encourage different
generations to live side-by-side, interact more frequently, and built supportive connections.

**Broaden the community component of faith.** For millennia, religious faiths have been the
bedrock of communities, and they remain so for the 40% of the global population that attends
worship services weekly. Surveys show that during COVID-19, faith, prayer, and new religious
practices are on the rise. One-quarter of Americans report that their faith has become stronger during the pandemic, and the University of Copenhagen found that global Google searches for “prayer” doubled for every 80,000 confirmed COVID-19 cases. During the pandemic, religious services have been forced to move online, an experiment in a new model of faith with strong potential to reach the younger generations. One U.S. survey found that 46% of those aged 13-25 started new religious practices during COVID-19, and 43% attended religious services online. While face-to-face gatherings will remain the cornerstone of worship post-COVID-19, a new wave of online religious platforms will also keep appearing. For instance, Hallow, a Catholic-based prayer and meditation app, saw a 2,000% jump in users praying (via the app) after Pope Francis called for a global rosary for COVID-19 victims. The post-virus world seems poised for a renewed interest in spirituality and religious community, places where one focuses on life’s more profound questions and where one learns to transcend self-interest to serve others.

Governments and medical systems must take action to address loneliness.

Social connection must become as important as diet and exercise in healthcare. Given the outsized impact that loneliness has on our physical and mental health, and its role as the “secret agent” behind so many costly chronic conditions, public health needs to place loneliness on the same footing as diet, exercise, anti-smoking, and obesity reduction. A new report from the U.S. National Academies of Sciences, Engineering, and Medicine outlines the needed actions – for example, health professionals screening for loneliness and entering warning signs into medical records; governments and insurers funding research into loneliness’ causes, effects, and cures; and launching loneliness awareness campaigns targeted at people of all ages. There are also calls for doctors and therapists to do “social prescribing,” connecting people to the resources and activities that can help them be less isolated.

Governments must aggressively address loneliness. The United Kingdom appointed the world’s first Minister of Loneliness in 2018, to create a national strategy to reduce social isolation for every age group. We need more national Ministers of Loneliness. While government policymaking has historically been driven by a narrow focus on GDP and economic growth, a new breed of leaders is now creating national agendas and budgets based on improving a country’s total well-being, including a focus on the environment, income inequality, families, and mental health. This charge is largely being led by women, including New Zealand’s Prime Minister, Jacinda Ardern; Iceland’s Prime Minister, Katrin Jakobsdottir; and Scotland’s First Minister, Nicola Sturgeon. These well-being-focused governments are specifically tracking, prioritizing, and addressing loneliness. In a post-COVID-19 future, we need many more such leaders.

Former U.S. Surgeon General Vivek Murthy neatly sums up the opportunity before us: “If we approach this moment with intentionality... we may be able to come out of this much stronger, in terms of our human connections with each other, than when we began. We may be able to use COVID-19 as a way to reset how we approach relationships and to revisit the place that relationships have lived in our priority list.”
Appendix: What Is Wellness?

Wellness is a modern word with ancient roots. The key tenets of wellness as both preventive and holistic can be traced back to ancient civilizations from the East (India, China) to the West (Greece, Rome). In 19th century Europe and the United States, a variety of intellectual, religious, and medical movements developed in parallel with conventional medicine. With their focus on holistic and natural approaches, self-healing, and preventive care, these movements have provided a firm foundation for wellness today. Wellness-focused and holistic modalities have gained more visibility since the 1960s/1970s under the writings and thought leadership of an informal network of U.S. physicians and thinkers (such as Halbert Dunn, Jack Travis, Don Ardell, Bill Hettler, and others). As these have evolved, proliferated, and gone mainstream, they have informed the healthy-living, self-help, self-care, fitness, nutrition, diet, and spirituality practices that have become a flourishing wellness movement in the 21st century.

The Global Wellness Institute (GWI) defines wellness as: the active pursuit of activities, choices, and lifestyles that lead to a state of holistic health.

There are two important aspects to this definition. First, wellness is not a passive or static state, but rather an “active pursuit” that is associated with intentions, choices, and actions as we work toward an optimal state of health and well-being. Second, wellness is linked to holistic health – that is, it extends beyond physical health and incorporates many different dimensions that should work in harmony (see figure).

Wellness is an individual pursuit – we have self-responsibility for our own choices, behaviors, and lifestyles – but it is also significantly influenced by the physical, social, and cultural environments in which we live.

Wellness is often confused with terms like health, well-being, and happiness. While there are common elements among them, wellness is distinguished by not referring to a static state of being (i.e., being happy, in good health, or a state of well-being). Rather, wellness is associated with an active process of being aware and making choices that lead toward an outcome of optimal holistic health and well-being.

Wellness Is Multidimensional

**Physical:** Nourishing a healthy body through exercise, nutrition, sleep, etc.

**Mental:** Engaging the world with the intellectual mind.

**Emotional:** Being aware of, accepting, and expressing our feelings, and understanding the feelings of others.

**Spiritual:** Searching for meaning and higher purpose in human existence.

**Social:** Connecting and engaging with others and our communities in meaningful ways.

**Environmental:** Fostering positive interrelationships between planetary health and human actions, choices, and wellbeing.
Endnotes


