

Loneliness Scale¹

Statement	Never	Rarely	Sometimes	Often
1. How often do you feel that you are not “in tune” with the people around you?	1	2	3	4
2. How often do you feel that you lack companionship?	1	2	3	4
3. How often do you feel there is no one you can turn to?	1	2	3	4
4. How often do you feel alone?	1	2	3	4
5. How often do you feel on the outside of a group of friends?	1	2	3	4
6. How often do you feel you don’t have much in common with those around you?	1	2	3	4
7. How often do you feel that your interests and ideas are not shared by those around you?	1	2	3	4
8. How often do you feel that you are no longer close to anyone?	1	2	3	4
9. How often do you feel socially reserved and private?	1	2	3	4
10. How often do you feel disconnected from people?	1	2	3	4
11. How often do you feel left out?	1	2	3	4
12. How often do you feel like your relationships with others are not meaningful?	1	2	3	4
13. How often do you feel like no one really knows you well?	1	2	3	4
14. How often do you feel isolated from others?	1	2	3	4
15. How often do you feel uncertain you can find companionship when you want it?	1	2	3	4
16. How often do you feel misunderstood?	1	2	3	4
17. How often do you feel like people are around you but not with you?	1	2	3	4
18. How often do you feel like there aren’t people you can talk to?	1	2	3	4
19. How often do you feel shy?	1	2	3	4
20. How often do you feel like there aren’t people you can turn to?	1	2	3	4

Scoring:

Not Lonely 20 – 30

Occasionally Lonely 30 – 45

Regularly Lonely 45 – 60

Severely Lonely 60 – 80

¹ Based on the UCLA Loneliness Scale

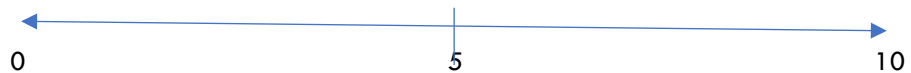
Risk of Loneliness Assessment

Statement – Over the last six months to one year...	True +1	False +0
1. I've changed jobs.		
2. I've gotten married.		
3. I've become a primary caregiver for a child or other dependent.		
4. My closest friends / associates at work have moved on or been promoted.		
5. I've experienced envy or loss about a friend's marriage / relationship.		
6. I've experienced envy or loss about a friend's pregnancy or childbirth.		
7. I've been passed over for a promotion or professional opportunity.		
8. Physical illness or other limitations have kept me from doing activities I love.		
9. I return to an empty home / live alone.		
10. I've lost a beloved pet.		
11. I've moved or changed my living situation.		
12. I've gone through a difficult breakup.		
13. I've been estranged from a close friend or family member.		
14. I'm grieving the loss of a close friend or family member.		
15. I have a financial obligation I'm not sure I can pay.		
16. I find myself using alcohol, food, drugs, sex, spending, or fantasy to self-soothe every week.		
17. I've experienced a significant professional or personal setback.		
18. I've experienced discrimination because of my race, religion, sexual orientation, or gender identity.		
19. I've been dissatisfied with my marital status.		
20. I've had a health condition that has limited my capacity for engaging with others.		

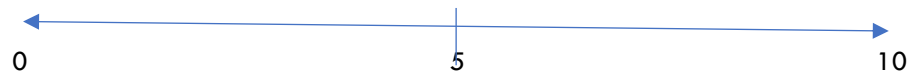
Scoring:

- Low Risk for Loneliness 0 – 5
- Mild Risk for Loneliness 5 – 10
- Medium Risk for Loneliness 10 – 15
- High Risk for Loneliness 15 – 20

Loneliness Self-Awareness Assessment



Social Risk Assessment



Personal Steps

- 1.
- 2.
- 3.
- 4.

Supportive Relationships

- 1.
- 2.
- 3.
- 4.

Church Community

- 1.
- 2.
- 3.
- 4.