

Article 28: Low or No Social Network and Churches, Clubs, and Support Groups

People with **low or no social networks** throughout the lifespan face cumulative risks to their well-being (Birrell et al., 2025; Oh et al., 2025; Piedra & Iveniuk, 2025), making **churches, clubs, and support groups** essential for maintaining lifelong social integration. These institutions provide structured environments where individuals can develop both functional and meaningful bonds through opportunities for engagement and collective support. Hence, social networks promoted in these communities remain primary anchors for fostering resilience and countering the pervasive loneliness epidemic (Boat et al., 2024; Grishina et al., 2023; Wormley et al., 2025).

Causes and Scope of Low or No Social Network in the United States

Individuals with low or no network are increasingly common in the United States, with over 50% of adults reporting chronic loneliness in recent years. This crisis is driven by structural shifts such as remote work, economic instability, and digital device addiction replacing physical community spaces. Thus, one in five children now face isolation as screen time replaces face-to-face play, while middle-aged adults are also experiencing increased isolation due to caregiving pressures and shifting family dynamics. Ultimately, pervasive societal division has further narrowed social circles, leaving millions without the emotional support essential for lifelong resilience (Birrell et al., 2025; Oh et al., 2025; Piedra & Iveniuk, 2025).

For instance, a study assessed literature on youth mental health, focusing on the role of social connection and social networks in shaping well-being. Following that lead, the authors reviewed existing research from multiple sources, including U.S.-based population studies. The studies selected relied on large-scale surveys, repeated cross-sectional data, and long-term trend analyses to document patterns of social connection in youth. The evidence showed that a substantial number of young individuals in the United States report feeling socially disconnected and that rates of loneliness have increased over time. U.S. population data also indicated that young people are spending less time socializing with friends, pointing to a narrowing of social networks during adolescence and early adulthood. The review highlighted that weaker or more limited social networks are associated with poorer mental health outcomes, including higher levels of distress and lower well-being. The authors discussed how structural, social, and developmental factors may contribute to reduced opportunities for meaningful connection among youth. They also noted that while social connections can be protective, negative or strained relationships may worsen mental health. The study concluded that strengthening social networks should be a key target for prevention and intervention efforts aimed at improving youth mental health in the United States (Birrell et al., 2025).

Another study examined the structure of social networks among older adults in the United States, how they change over time, and their effects on health. Thus, the researchers used data from three waves of the National Social Life, Health, and Aging Project (NSHAP), which involves the study of older adults living in the United States. The sample for the study included 3,005 participants at baseline, as well as 2,261 re-interviewed in the second wave and 1,592 in the third, yielding a total of 6,858 person-observations across waves. Data were collected through structured interviews conducted with the same participants over time. The researchers identified three main types of social networks: “Enriched” networks with many social ties, “Focused” networks centered mostly on family, and “Restricted” networks with few close connections and higher levels of loneliness. They found that restricted social

networks became more common as people aged, showing that many older adults experience shrinking social circles over time. Membership in limited or restricted networks was more likely among certain demographic groups, including women and some racial and ethnic minority groups. Older adults with restricted social networks also reported worse self-rated health than those with broader social connections. The researchers concluded that low or limited social networks are a growing and important issue for older adults in the United States and may contribute to health differences as people age (Piedra & Iveniuk, 2025).

On that same note, a study examined the scope and health relevance of low or limited social networks among adults throughout early midlife in the United States. Particularly, the study focused on the number, structure, and quality of individuals' social connections. The researchers used data from Wave V of the National Longitudinal Study of Adolescent to Adult Health (Add Health)—a nationally representative U.S. cohort that followed participants from adolescence into adulthood. Social networks were measured using the Social Network Index, which captures how many close ties individuals maintain across different relationship domains, including friends, family, and community roles, as well as the frequency of contact. Biological data were collected through blood samples and used to assess immune aging via DNA methylation-based markers. The results showed that individuals with smaller social networks, fewer close friends, and weaker family ties exhibited patterns consistent with more advanced immune aging. These findings indicate that limited social networks are not uncommon in early midlife and may reflect broader social and relational conditions rather than temporary circumstances. The researchers concluded that low or absent social networks represent a meaningful population-level issue in the United States, with implications for long-term health and aging processes (Oh et al., 2025).

Effectiveness and Impact of Churches, Clubs, and Support Groups

Churches, clubs, and support groups serve as vital lifelines that help decrease loneliness for active participants. These community-based organizations offer structured "life-on-life" engagement where small groups promote meaningful bonds for long-term mental health. Evidence indicates that frequent involvement in such groups acts as a protective factor against cognitive decline and stress, often outperforming solitary wellness practices. Thus, these institutions help build social networks in disconnected societies by promoting interpersonal connections (Boat et al., 2024; Grishina et al., 2023; Wormley et al., 2025).

For instance, a study assessed how religious belief and engagement relate to loneliness and social isolation, focusing on how religious involvement can help nurture social networks and social connection. Following that lead, the authors reviewed existing research from multiple sources, including U.S. studies, as part of a broader international evidence base. Particularly, they retrieved data from the Global Flourishing Study, which included responses from more than 180,000 participants across 22 countries, including the United States, and represented five major religious traditions. Data were collected through large-scale surveys that measured loneliness, social isolation, health outcomes, and religious beliefs. The findings showed that individuals with religious affiliation and stronger religious engagement reported lower levels of loneliness and social isolation. Religious participation was also associated with weaker links between social isolation and poor physical and mental health, suggesting a buffering effect. Most importantly, this protective association appeared even among individuals with limited personal social networks. The authors noted that churches and other religious

communities often provide structured social interaction, shared identity, and consistent social support, which can reduce isolation. These social environments may help compensate for weak or shrinking social networks. The researchers concluded that religious engagement can play a meaningful role in mitigating the negative effects of low or absent social networks. Overall, the study highlights churches and faith communities as important social resources for reducing isolation and supporting well-being, including in the United States (Wormley et al., 2025).

Another study looked at the relationship between participation in organized activities and the development of social networks among youth, focusing on how structured groups such as clubs, sports, and community programs help young people build and maintain social connections. Hence, the researchers conducted a qualitative meta-synthesis of 33 existing U.S.-based studies with youth participants, using structured methods to identify common themes. Included studies collected information through interviews, focus groups, and observations with adolescents and young adults involved in various organized settings. The synthesis showed that organized activities consistently provided youth with opportunities to form friendships, expand their social circles, and feel part of a community. These settings also helped young people develop social skills, build trust with peers and adults, and access supportive relationships they might not have had otherwise. The findings indicated that organized activities served as important spaces for expanding social networks, especially for youth who might be isolated or lack strong social ties. Participation was linked with stronger feelings of belonging and increased access to emotional support. The review also found that organized activities help young people connect with adults who provide guidance and encouragement, strengthening long-term social engagement. The researchers concluded that involvement in organized activities is an effective way to nurture social networks and reduce the risks associated with low or absent social connections among U.S. youth (Boat et al., 2024).

Lastly, a study reviewed existing research examining how community friendship and support groups influence social and mental health outcomes. More specifically, the authors looked at the role of support groups in strengthening social networks among individuals with limited social ties. Following that lead, they conducted a meta-analysis of eight quantitative studies, including evidence from the United States and other countries, that evaluated structured friendship and support group interventions in community settings. The studies selected used standardized measures to assess social connectedness, loneliness, perceived support, and psychological distress. Additionally, data were collected through participant surveys administered before and after involvement in group-based programs. Across the evidence reviewed, participation in support and friendship groups was consistently associated with improved social connectedness and reduced feelings of isolation. Participants also reported lower levels of loneliness and psychological distress compared with those who did not take part in these groups. Several studies indicated that group participation helped individuals expand their social circles, form new relationships, and feel more socially supported within their communities. The findings suggested that shared activities, regular interaction, and peer support were key mechanisms through which these groups strengthened social networks. The researchers concluded that community friendship and support groups are effective tools for helping mitigate low or absent social connections and improving social and mental health outcomes (Grishina et al., 2023).

References

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