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Loneliness: Do Interventions Help?

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ABSTRACT
Loneliness and isolation are areas which currently are receiving academic attention as well as being the focus for practical studies, especially those focused on interventions to relieve loneliness. Even so, while all agree that loneliness is a negative feeling, the nature of the interventions can vary, perhaps because the concept of loneliness is not really understood in terms of complete and focused definitions. This article attempts to bring together some of the definitions of loneliness which are then utilised to derive criteria (or heuristics) which are used to assess crudely the value of two complementary interventions, a link visiting scheme in a town and the pastoral outreach of the rural church, in terms of matching the characteristics of loneliness with the relevant interventions. The results tentatively suggest that while social loneliness is well supported by group activities, emotional loneliness may be helped for some by the Christian Church offering friendship and caring as well as worship and the development of a deepening relationship with God.

KEYWORDS
Rural church; loneliness; interventions for loneliness; heuristic evaluation

Introduction

A major concern within European society today is that of people feeling lonely and the fear that this may result in mental health issues, placing further strain on a decreasing budget within health authorities. Within the UK, this has become a major cause for concern with funding being given to such projects as the Brighter Life Project (2014) which is seeking to examine isolation and loneliness within the elderly in Cheshire as well as wider issues being explored through Economic and Social Research Council (ESRC) funded work centred on Brunel University (2014). Part of this latter project is endeavouring to define the concept of loneliness in an attempt to focus interventions more carefully in the future.

Thus, while ‘isolation’ can be defined rather more successfully than ‘loneliness’, in 2014 scholars were still seeking to agree on at least the characteristics of this latter concept and there seems to be scant evidence that, to date, ‘loneliness’ can be defined formally in such a way that the definition is all embracing and yet consistent. Indeed, the ESRC funded work at Brunel University attempts to identify knowledge gaps and areas where the study of loneliness has been neglected. Even so, there is a place for a discussion of the basic attributes of isolation and loneliness, particularly within rural areas where health services may

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be less evident and deprivation may be more apparent, at least to the knowledgeable eye. Consequently, this article discusses the various categories of both isolation and loneliness while identifying in the literature some of the interventions suggested for overcoming loneliness, or at least easing its pain.

This article takes an interpretative approach (Bryman & Bell, 2003) to exploring the various definitions of loneliness, after having briefly considered the key aspects of isolation. From a more in-depth exploration of loneliness, key characteristics of the various categories of loneliness are identified and from these characteristics, criteria or questions are derived for evaluating interventions. These questions are then applied using a heuristic evaluation method (Nielsen & Mack, 1994) which has proved very successful as a method for evaluating compliance of human actions (task sequences) with perceived human goals. Thus, it is ideally suited for evaluating the match between interventions (human actions) and the human goal of alleviating loneliness. In this article, heuristic evaluation by a single evaluator is used to evaluate two case studies of interventions for loneliness. The details of these activities are freely available in the public domain.

Any evaluation method has limitations and heuristic methods depend on the knowledge of the expert undertaking the evaluation as well as the interpretation of the heuristics within the applied context. The personal bias of the evaluator also can influence the importance attached to each heuristic. Some authors (for example, Nielsen & Mack, 1994) have suggested that using multiple evaluators can help to eliminate these drawbacks but not to the extent of negating work undertaken by a single evaluator.

Definitions of isolation and loneliness

Most academic work on isolation and loneliness refers back, directly or indirectly, to the work of Weiss (1973) who categorised isolation into social isolation and emotional isolation. These two aspects are still acknowledged today (Mills, 2016) with social isolation being defined by the objective situation of being alone or lacking social relationships (de Jong-Gierveld, van Tilburg, & Dykstra, 2006; Perlman & Peplau, 1998). Similarly, emotional isolation is associated with the lack of a ‘close, and indeed intimate, attachment’ (Weiss, 1973). There are other categories of isolation (Mills, 2016) such as geographical (isolation caused through living away from friends and family and/or isolation of place), cultural (living in a different cultural environment from one’s own), spiritual (for example, absence of religious support) and technological (lack of computer based communications due to lack of signal or bandwidth, or lack of the necessary skills).

While psychologists have tended to separate the concepts of isolation and loneliness, writers from a health background have not been so prescriptive; indeed, some writers such as McCarthy and Thomas (2004) have advocated that the division between isolation and loneliness is not clear cut and, in any case, nothing is lost through providing interventions from both areas. This difference in emphasis may have resulted from the practice-based research of health clinicians which focuses on the symptoms and their possible causes. The writers from the Arthur Rank Centre (2016), use both ‘isolation’ and ‘loneliness’ simultaneously even though a definition of each concept is given.

While it is claimed that social isolation may be defined and categorised in a quantitative way, such as counting the number of friends a person may have, in reality, this is fraught
with difficulty since the counting will depend on who is categorised as a friend, with little reference to other aspects of the relationship such as frequency of meeting or those friendships made via technology. Even so, isolation remains a ‘neutral’ concept centred on the situation in which a person may find oneself; loneliness, on the other hand, is felt by a person (Jopling & Barnett, 2014) and so becomes integral to the life of the lonely person and, as such, may become a perceived stigma in that person’s life (Ind, 2015). Furthermore, it is possible to be surrounded by friends and still be lonely (Marmin, 1966) or, conversely, be alone but not be lonely (Weiss, 1973). Certainly, it is acknowledged that isolation may cause loneliness but it is also possible that some people who are isolated are not lonely (Lake, 1980). Thus, there may be a direct connection between isolation and loneliness, but there may not be; some writers such as Lake (1980), attribute these discrepancies to the personality of a person.

Following Weiss (1973), the negative effects of loneliness can be categorised into two main areas, akin to those of isolation, both of which rest on the quality of relationships (de Jong-Gierveld et al., 2006): first, there is emotional loneliness, secondly, there is social loneliness and finally, positive loneliness (Zimmerman, 1799) or what some authors, for example, Clare (2010), called aloneness, that is, those occurrences of loneliness which may be considered beneficial (Natale, 1986). These three aspects of loneliness will be considered below, together with other categories of loneliness.

**Emotional loneliness**

All unpleasant occurrences of loneliness are based on relationship deficit (Natale, 1986; Russell, 2014) and emotional loneliness can be defined as the lacking of a close and possibly intimate relationship (Weiss, 1973). Thus, a widow or widower, living alone and recently bereaved, will feel the loss of the loved one and the ‘gap’ which is left from the death of the loved one. Emotional loneliness is not restricted to marital relationships and can extend beyond family to close friends. It is the depth of a happy relationship which mitigates against emotional loneliness rather than necessarily being sexual.

**Social loneliness**

Given a deficit of social relationships, it is possible for a person to become socially lonely (Weiss, 1973) which can be as unpleasant an experience as being emotionally lonely. Social loneliness occurs when there are insufficient social links in a person’s life. When a couple moves into a new geographical area, there is a need for each of them to join some social activities which may relate to an activity such as joining a local choir or attending an evening class. If a spouse has moved because of new employment, then this may fill the need through becoming acquainted with colleagues, some of whom may be included in the social groups of the couple. A number of authors from Weiss (1973) to Russell (2014) suggest that social activities cannot compensate for the lack of an emotional or intimate relationship.

**Positive loneliness or aloneness**

The eighteenth century philosopher Zimmerman (1799) made the point that being alone could be a positive experience rather than the negative and sad feelings associated with the
concept of loneliness. This lacking of relationships is typified within a religious environ-
ment where the person seeks solitude in order to edify the mind and spirit. Indeed, Zimmer-
man cited the example of a monk or nun who is often alone but not lonely (Clare, 2010). Such physical isolation can be edifying (Biordi & Nicholson, 2013), possibly because being alone has meaning (Natale, 1986) but it is also an example where isolation does not cause loneliness with the latter’s usual connotations of sadness and negativity.

Interestingly, in the eighteenth century, Zimmerman (1799) was not alone in thinking that a healthy religious life of faith could counteract the negativity of emotional loneliness. Earlier in the century, John Wesley and John MacLaurin, both eighteenth century clerics in the Protestant/ Evangelical tradition, wrote of finding happiness in a sound faith and a personal relationship with God in Christ. Wesley (1979) wrote of ‘no spirit … [being] happy either in heaven or earth’ without ‘the knowledge and love of God’ (Wesley, 1979, p. iii, 431). Similarly, MacLaurin, a much respected minister in Glasgow who also participated in the Cambuslang Revival of 1742, wrote that no-one ‘can be perfect, just, or happy, without … loving God above all things’ (MacLaurin, 1800, p. 23). More contem-
porarily, previous work (Mills, 2016) identified the possibility that an active faith (which may or may not be expressed in similar terms to Wesley and MacLaurin) could be an effective support for those who may be vulnerable to emotional and social loneliness such as the housebound and elderly.

Other categories of loneliness

While (negative) loneliness can be perceived to be caused by a deficit of relationship, whether that relationship is of an emotional, social or spiritual nature, it can also be con-
sidered in a more general way through lack of communication between humans (Lake, 1980). Indeed, Lake divided the process of loneliness into three stages: first, that situation where people are cut off from contact with others and which prevents people from being reassured that they are liked or loved and so the person is ‘deprived of tenderness and a sense of belonging’ (Lake, 1980, p. 11). This stage is not particularly harmful, especially if it is for a short duration. The second of Lake’s stages is more serious as it leads to a lack of confidence both in the human self and in others. In this stage, the person loses non-verbal behaviours, such as smiles, while continuing to lose self-confidence, especially in commu-
nicating with others. A blame culture occurs in which blame is attributed both to others and to self (Lake, 1980). The final stage of Lake’s model occurs when the person becomes apathetic and gives up caring about what may happen. Lake claimed that this stage is unrecoverable and usually results in suicide. Not all people, of course, reach this third stage and others recover from earlier stages while never reaching the third stage. Lake’s answer to this variability of human action rests on the personality of the human involved and the upbringing of the person during childhood.

This three stage model does not distinguish between different types of loneliness as suggested by Weiss (1973) but the point is made that lonely ‘people suffer because they do not have anyone special to communicate with’ (Lake, 1980, p. 17). The identity here of the need of a special friend surely can be equated with emotional loneliness in the cat-
egories given above. However, Lake has identified that loneliness, if ignored, can lead to mental illness, especially in the third stage of his categorisation (Lake, 1980). For example, the possibility of loneliness leading to depression is also recognised (Natale, 1986).
Communication between humans is important in preventing loneliness since once people realise and admit to themselves that they are lonely, it is possible to seek interventions which may help to eradicate the loneliness. However, relying on communication alone as Lake (1980) suggested, without considering Weiss’ and others’ aspects of loneliness as already discussed, may inhibit recovery from loneliness of whichever type.

**Exploring and evaluating interventions for loneliness**

Before exploring possible interventions for loneliness and criteria to be used for evaluating an intervention, the main characteristics of loneliness will be summarised in order to enable criteria to be developed so that a selection of interventions can be evaluated.

1. Loneliness is often temporary. For example, a student going into higher education away from home may feel lonely until friendships have been established, thus experiencing situational and transient loneliness (Natale, 1986). In these cases, little formal intervention is needed since the situation is resolved over time providing the lonely person has sufficient inter-personal skills to make new relationships.

2. Emotional loneliness is reduced through creating a close relationship with a confidant.

3. Social loneliness requires a group of friends who meet socially. For example, a gardening group may help to ease social loneliness through their common interest.

4. Loneliness is based on relationship deficit of an emotional or a social kind. Thus, it is essential that the lonely person learns to (re-)build personal relationships (Lake, 1980).

5. A lonely person requires self-help to reduce the loneliness which is being experienced (Lake, 1980, stage 1).

6. Loneliness may result in lack of confidence (Lake, 1980, stage 2).

7. A lonely person may attribute blame to another or self for the lonely situation (Lake, 1980, stage 2).

8. Loneliness can lead to mental illness or suicide (Lake, 1980, stage 3; Russell, 2014).

From these basic characteristics of loneliness, a set of criteria may be constructed which may be applied to an intervention to generate an indicative evaluation of the benefits of that intervention, as described earlier in this article in the ‘methodology and procedure’ section. The criteria may be written as statements or developed in the form of questions; in this article, questions have been used as these allow a clearer and easier response to be made.

Against this background the following heuristics or questions may be used for evaluating an intervention.

*Is the intervention of a temporary or permanent nature?* (Characteristics 1 and 6). It is important to ascertain that the intervention lasts long enough for it to facilitate the making of personal relationships by the lonely person. Given that the person may be lacking in self-confidence, the time-frame may need to be considerable for the intervention to take effect.

*Is participation in the intervention voluntary?* (Characteristic 5). In most cases, in order to reduce loneliness, the person needs to acknowledge the lonely situation and seek an acceptable intervention.
Is it possible that emotional relationships may develop within the intervention? (Characteristic 2). This is to allow for the possibility of emotional loneliness being eased through the development of an emotional relationship usually involving only two people.

Does the intervention encourage group meetings? (Characteristic 3). The intervention may have a common interest within the group such as gardening or heritage visits.

Does the intervention facilitate the creating of new personal relationships? (Characteristic 4). Since all loneliness is founded on relationship deficit (Lake, 1980), there is a need for the intervention to encourage and to support personal development in making new personal relationships.

Does the intervention encourage the building up of self-confidence in the lonely person? (Characteristic 6). Since loneliness has negative connotations, it follows that the lonely person’s self-confidence may be diminished and so the intervention should facilitate growth in self-confidence.

Given that the lonely person may need to learn how to rebuild fruitful relationships, does the intervention encourage self-learning and possible re-adjustment? (Characteristics 2, 3 and 4). Re-learning may be necessary where, for example, people have lost a long established and stable friendship through bereavement or moving house.

Does the intervention allow for voluntary acceptance of counselling or other professional help by the lonely person? (Characteristics 6, 7 and 8). People in Lake’s third stage (1980) will almost certainly require professional help and the intervention should be able to facilitate obtaining such help.

Interestingly, these heuristics/questions agree well with the more general characteristics derived by Masi, Cacioppo, Hawkley, and Chen (2011) for evaluating interventions: improving social skills, increasing social support, creating opportunities for social interaction and addressing maladaptive social cognition. Underlying all these heuristics/questions is the notion that the lonely person is willing to accept help and to take action to improve their lonely situation. Circumstances which relate to the lonely person being unable to participate actively in an intervention for whatever reason are beyond the scope of this article.

These heuristics/questions will now be applied to two typical interventions which have already been used to support the lonely; their sources are readily available in the public domain.

Examples of interventions for loneliness

Given the relatively recent increase in funded projects into combating aspects of loneliness, it is not surprising that there are wide ranging interventions which have been implemented in order to combat the effects which loneliness may cause. Many of these interventions essentially are group-based and are devised to support the lonely person primarily in the social aspects of loneliness. However, given that loneliness directly affects the individual rather than a group of people, it is surprising that so much of the literature fails to suggest individual remedies in the form of self-help. Lake (1980) is a refreshing exception as he devoted much of his book to individual and personal strategies and actions for improving personal relationships and making friendships.
Example 1

The website of the Link Visiting Scheme (http://linkvisiting.org) lists five regular activities which older people, in particular, can join as they choose. The Scheme is focused on the town of Wokingham, in the UK, and, given the increasing elderly population particularly in rural areas, its activities are relevant here for suggesting interventions for lonely people.

The Link Visiting Scheme provides an opportunity for people to have a pub lunch once a month at various public houses across the Borough of Wokingham. Transport may be provided. A second activity is every Wednesday when people can meet in a selected coffee shop from 10.30 am to 12 noon. Every Thursday afternoon, from May to September, there is the opportunity to play bowls as well as indulge in tea and cakes. On Fridays, there are different groups meetings which cover such activities as singing, crocheting or knitting, and board games. In addition to these activities, it is possible to have one-to-one tuition in developing basic computing skills such as using e-mail and learning how to use video-conferencing programmes such as ‘Skype’, as well as using the internet for searching and shopping. This class runs every Wednesday and usually has a waiting list of potential participants. In addition to all these activities, personnel from the Link Visiting Scheme make regular home visits to the elderly and lonely.

The following reveals the results of the heuristic evaluation for this set of interventions.

(1) Is the intervention of a temporary or permanent nature? It is permanent in that all activities continue at set times and on set days allowing people to attend as they are able. However, the bowls group only meets between May and September as the members play outdoors, thus possibly creating a gap in social support from October to April.

(2) Is participation in the intervention voluntary? Yes, but the computer classes on Wednesdays have a waiting list and may require attendance for complete learning.

(3) Is it possible that emotional relationships may develop within the intervention? It may well be possible, although this is not the main aim of any of the activities which are based on groups and social friendship.

(4) Does the intervention encourage group meetings? Very much so, as the activities all resolve around groups except for the computer skills trainings which are one to one.

(5) Does the intervention facilitate the creating of new personal relationships? Definitely, through group dynamics and gentle activities which build personal relationships.

(6) Does the intervention encourage the building up of self-confidence in the lonely person? Link Friends undertake home visits as well as organising the regular mainly group activities. Self-confidence could be built up within the group dynamics as well as through developing skills in certain activities such as bowls and computer usage.

(7) Given that the lonely person may need to learn how to rebuild fruitful relationships, does the intervention encourage self-learning and possible re-adjustment? Probably not directly, as the activities are all group based, apart from the computer skills, but more indirectly, a person would be able to accept the friendly approaches of the groups and observe others in developing personal relationships.

(8) Does the intervention allow for voluntary acceptance of counselling or other professional help by the lonely person? There is no indication that people may be guided to professional help within these interventions as they seem to be for people...
within Stage 1 of Lake’s model. People on the periphery of Stage 2 of Lake’s model also may benefit from these activities, but they all focus very much on the social aspects of group dynamics.

The above heuristic analysis clearly has shown that the interventions should work well for people suffering from social loneliness who are in the first stage of Lake’s model (1980). Those people within the second stage of Lake’s model (1980) could also benefit from participating in these interventions since mixing with other understanding people may enable the lost non-verbal behaviours such as smiling and self-confidence to return. However, those people who have entered into a blame culture may not find any of these interventions helpful unless, of course, they meet someone within the group activities who can support them with understanding and caring which may begin to build self-esteem. It is unlikely that people in the third stage of Lake’s model (1980) would be helped by these interventions since these people would appear to be in need of professional help and support.

Thus, these activities are valuable for supporting people in the early stages of loneliness and, in particular, those who are socially lonely rather than emotionally lonely. However, it is unlikely that these group interventions will be helpful for those people who are not able to take the initial step of entering into group activities for circumstantial reasons (for example, being a fulltime carer) or who are established in the second or third stages of Lake’s model (1980). Heuristics 7 and 8 pertain here especially.

Example 2

The second example explores the possibility of the rural church acting as a catalyst for empowering groups and individuals to support people who may be feeling lonely. “The church can facilitate activities … such as: [a] local walking group, pub lunches, hobby clubs, lunch clubs [as well as] befriending projects in which isolated adults receive regular home visits” (Arthur Rank Centre, 2016, p. 10). In addition, churches could use a pastoral visiting team across the community and beyond the actual church congregation.

While these activities may be helpful in combating social loneliness, the countryside brings specific aspects of living which may exacerbate loneliness, especially for those engaged in farming, not least because of their role of ‘full-time carers’ for their animals and crops. Often families have farmed the same land for generations, but the present financial situation within parts of the farming industry drives children and grand-children into towns seeking more lucrative employment (Ind, 2015). Lack of services such as shops, schools and post offices, as well as healthcare, can exacerbate the loneliness which people living in the countryside may experience. In addition, it is noteworthy that the countryside hosted an ageing population in 2009, with 23% of its population being over retirement age compared with 18% in urban areas (Ind, 2015).

Into these rural situations, the Church can become a servant church supporting the lonely, particularly by implementing activities such as ‘Soup Saturday’, based in the village of Bloxham, Oxfordshire, to which more than 40 people come, helped by the local taxi driver who gives his services free of charge (Ind, 2015). Similar activities take place in other rural villages such as a weekly or monthly tea and cake afternoons to which people can come and chat and find a friendly face without feeling intrusion.
But the rural Church can offer much more than social activities. ‘When the church communicates a God who is nearer to us than our breath, it offers intimacy’ and it does this through offering shared spaces in nearby places, through knitting and nattering and loving communities, through cafés and coffee shops and free lifts to Soup Saturdays, through listening, through waiting, through being alongside, through reminding us that – however desolate it might seem – the deep truth is that we belong, we are never alone (Ind, 2015, p. 23).

This intimacy can be equated with Christian love and caring and brings friendship beyond that offered in an ‘ordinary’ coffee shop, as witnessed by ‘Gerry’:

When my wife died I didn’t think there was a God. If there was a God why had he taken my wife from me? Why? Why? She didn’t smoke. She didn’t drink. Why had she been taken? If this coffee shop hadn’t been here, I don’t know what I would have done. I went to my GP and asked him for a shot in the arm to end it all. But then the coffee shop opened and now I come here every day. All the people here know me and I know them. I can’t tell you their names because I’m no good at that, but they know mine. One day [the vicar] asked if I had thought about going to church. I said: ‘Not a lot.’ But after a bit, I thought, why not? And so I went and then I went on an Alpha course. That was really, really good.’ (Ind, 2015, p. 25)

In this quotation, ‘Gerry’, with his suicidal thoughts, appears to have been at stage 3 of Lake’s model (1980), having incorporated stages 1 and 2, when he sought the coffee shop and through the interventions provided by the (local) church he was able to recover his dignity and find healing in a context of Christian love and worship.

The following indicates the results of applying the heuristic evaluation to this example.

(1) Is the intervention of a temporary or permanent nature? It is permanent in the sense that activities are continuous.
(2) Is participation in the intervention voluntary? Yes and no expectation is laid upon attendees.
(3) Is it possible that emotional relationships may develop within the intervention? Yes, through group meetings including, for some, worship.
(4) Does the intervention encourage group meetings? Yes, most churches meet in groups but a trained pastoral minister is usually available for one to one pastoral meetings, if required.
(5) Does the intervention facilitate the creating of new personal relationships? Yes, through meeting new people within the social groups.
(6) Does the intervention encourage the building up of the self-confidence of the lonely person? Yes, through meeting new people and participating in new activities within a non-threatening environment.
(7) Given that the lonely person may need to learn how to rebuild fruitful relationships, does the intervention encourage self-learning and possible re-adjustment? Yes, through experiencing kindness and Christian love and learning about the Christian faith, including attending worship.
(8) Does the intervention allow for voluntary acceptance of counselling or other professional help by the lonely person? The intervention allows for professional pastoral care, through the trained Christian minister (who may be ordained or lay) but does not usually include professional counselling.
The above heuristic analysis has shown that the local church can offer to the lonely person interventions which include the possibility of not only easing social loneliness but also making some inroads into easing emotional loneliness through finding God who can be perceived as a close friend and companion within a personal relationship. In addition, responding to the call to live a Christian life can give purpose and hope to the lonely person as witnessed in the account of ‘Gerry’. Thus, the local church would appear to be in a special position amongst local providers of interventions.

Conclusion

This article has used the literature to derive evaluative criteria for assessing the match between interventions for loneliness with the basic characteristics which people experience when they are lonely. Of these, the hardest category of loneliness to support is emotional loneliness since this involves building a ‘special’ friendship based on intimacy and emotional trust. There is some evidence to suggest that the rural church may be able to facilitate the easing of emotional loneliness through its worship and encouraging its congregation to develop an individual and deepening relationship with God. There is definitely a link here with the eighteenth century urgings of Wesley (1979) and MacLaurin (1800). However, both the historical and religious aspects of interventions need much more investigation at a deeper level before any firm conclusions can be drawn concerning the easing of emotional loneliness.

Social loneliness may be lessened by participating in social groups, usually based on activities which interest the socially lonely person but general social activities such as attending tea and cake meetings are helpful in facilitating conversational skills and building self-esteem as the lonely person makes new friends within a non-threatening and accepting environment. However, an important prerequisite for these activities in that the lonely person has, or can develop, the ability to use self-help to initiate participation in the interventions.

The concept of loneliness continues to refuse to be bound by exact definitions of all its facets, even though, no doubt, scholars will continue to explore its concept and possible interventions in the future.

Notes

1. A project across Cheshire run by the University of Chester exploring isolation and loneliness in the elderly.
2. Based around a seminar series entitled New perspectives on loneliness: developing theory, methodology and evidence for practice under Professor Christina Victor (lead researcher).

Disclosure statement

No potential conflict of interest was reported by the authors.

Notes on contributor

The Revd Professor Stella Mills currently serves as a Methodist minister in the Trent and Dove Circuit in the Nottingham and Derby District. Until recently, she held the post of Professor of
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