Data Brief

CCMH
CENTER FOR COLLEGIATE MENTAL HEALTH

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What is CCMH?

Center for Collegiate Mental Health (CCMH) is a national research center that advances college student mental health by bridging science, practice, and advocacy through research. Since 2005, CCMH has collected and analyzed data from over 1.5 million students receiving college counseling services.

What is a Data Brief?

Data Briefs synthesize CCMH's national dataset to examine emerging trends and questions in collegiate mental health. Published multiple times annually, these reports translate complex data into actionable insights for clinicians, institutional leaders, policymakers, and advocates, complementing CCMH's peer-reviewed research and annual report trends.

Loneliness in College Counseling Center Clients

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Loneliness is a prominent societal problem that has been receiving increasing attention, particularly after the lasting impacts of the COVID-19 pandemic. In fact, in 2023, the U.S. Department of Health and Human Services (U.S. Department of Health and Human Services, 2023) declared loneliness a public health crisis that has profound physical and mental health, economic, and societal consequences.

While loneliness has understandably been a primary focus in recent years due to contextual factors, social scientists have been warning of this salient issue for decades. Seligman & Csikszentmihalyi (2000) suggested that after World War II, the psychological community became heavily concentrated on psychopathology and the medical model, at the expense of emphasis on positive psychology principles and enhancing human connections. In a more detailed account within the book "Bowling Alone", Putnam (2000) argued structural networks that naturally have connected people have been eroding since the mid-1960s. Compared with previous cohorts, younger generations are spending less

time in person with friends, companions, and others, reflecting a broader decline in social engagement (Kannan & Veazie, 2023).

Studies have highlighted individual and social forces that influence loneliness. Luo (2023) discovered that depression and loneliness have bi-directional amplifying effects on each other, while Segrin et al. (2016) reported that social skills deficits are associated with loneliness. Additional findings have emphasized discrepancies in relationship needs (Perlman & Peplau, 1981), disability status and concurrent deprivation of social resources (Burholt et al., 2017), and technological advances that have replaced interpersonal interactions with screen time (Hill et al., 2026; Murthy, 2020).

The impacts of loneliness are severe. Within the general population, loneliness is linked to numerous mental and physical health problems, such as depression, anxiety, suicidality, sleep disturbance, disease, and mortality (Holt-Lunstad, 2024; Luo, 2023; Park et al., 2020; Zheng et al., 2026). When this public health crisis is examined in college students, findings have discovered numerous adverse effects, such as substance abuse (Flesaker et al., 2025) and negative academic outcomes, including poor academic performance and reduced cognitive functioning (Rosenstreich & Margalit, 2015). Navigating these challenges can reduce students' social engagement with campus life, underscoring the importance of connection and belonging.

While it is evident loneliness has significant broad impacts across society and higher education, it can pose a particular risk to college students receiving counseling services, who are already vulnerable and experiencing a host of complex concerns (Center for Collegiate Mental Health, 2026). In particular, loneliness might compound psychological distress and vice versa, which could, in turn, interfere with their pathway to recovery and academic success.

Recognizing the urgent need to further evaluate the associations of loneliness with counseling center clients' mental health, the Center for Collegiate Mental Health (CCMH) began investigating loneliness using the three-item UCLA Loneliness Scale (Hughes et al., 2004) on July 1, 2024. This allowed CCMH to answer the following questions:

- **Baseline Prevalence of Loneliness:** What is the baseline prevalence of loneliness when students enter college counseling services, and how does it compare to the general student body?
- **Most Critical Variables Connected to Loneliness:** What identity, contextual, social characteristics, and areas of distress are most closely associated with loneliness?
- **Improvement During Care:** Do clients who enter services with significant loneliness symptoms experience changes in feelings of isolation over the course of treatment?

Data related to loneliness, identity, social and contextual variables were collected from the CCMH Standardized Data Set (SDS) – Client Information form, while symptoms of psychological distress within the past two weeks were assessed using the Counseling Center Assessment of Psychological Symptoms (CCAPS). The SDS and CCAPS are typically completed when students initiate services, and the CCAPS is commonly additionally administered to students throughout treatment to monitor

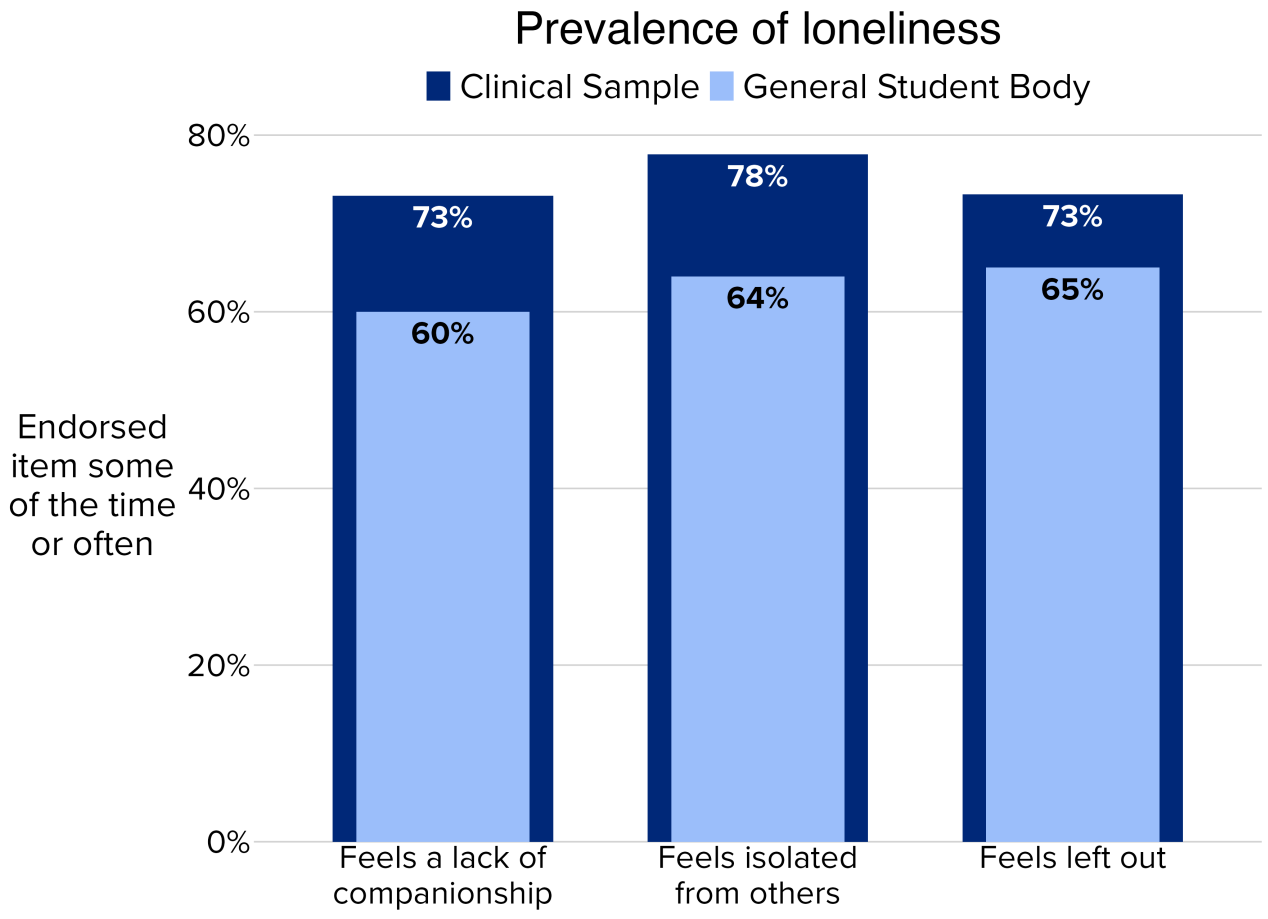
progress. Data for the current investigation include 40,797 students who were treated at 80 different college counseling centers from July 1, 2024, to June 30, 2025.

Baseline Prevalence of Loneliness

Loneliness data from students in treatment were compared to national survey research conducted within the general college student population (Healthy Minds Network, 2025). Each group of students were administered the three-item UCLA Loneliness scale, which includes the following items that students rate on a three-point likert scale (*Hardly ever, Some of the time, Often*):

- How often do you feel that you lack companionship?
- How often do you feel left out?
- How often do you feel isolated from others?

The proportion who indicated each specific symptom was occurring some of the time or often was compared between the groups. While both groups of students reported high levels of loneliness symptoms, students receiving treatment at college counseling centers comparatively indicated more frequent symptoms, particularly related to lacking companionship and feeling isolated, yielding small effect sizes in the differences between the groups. Although students receiving counseling services reported feeling left out more than those in the general student body, the gap was negligible.



Sources: The Healthy Minds Network and The Center for Collegiate Mental Health

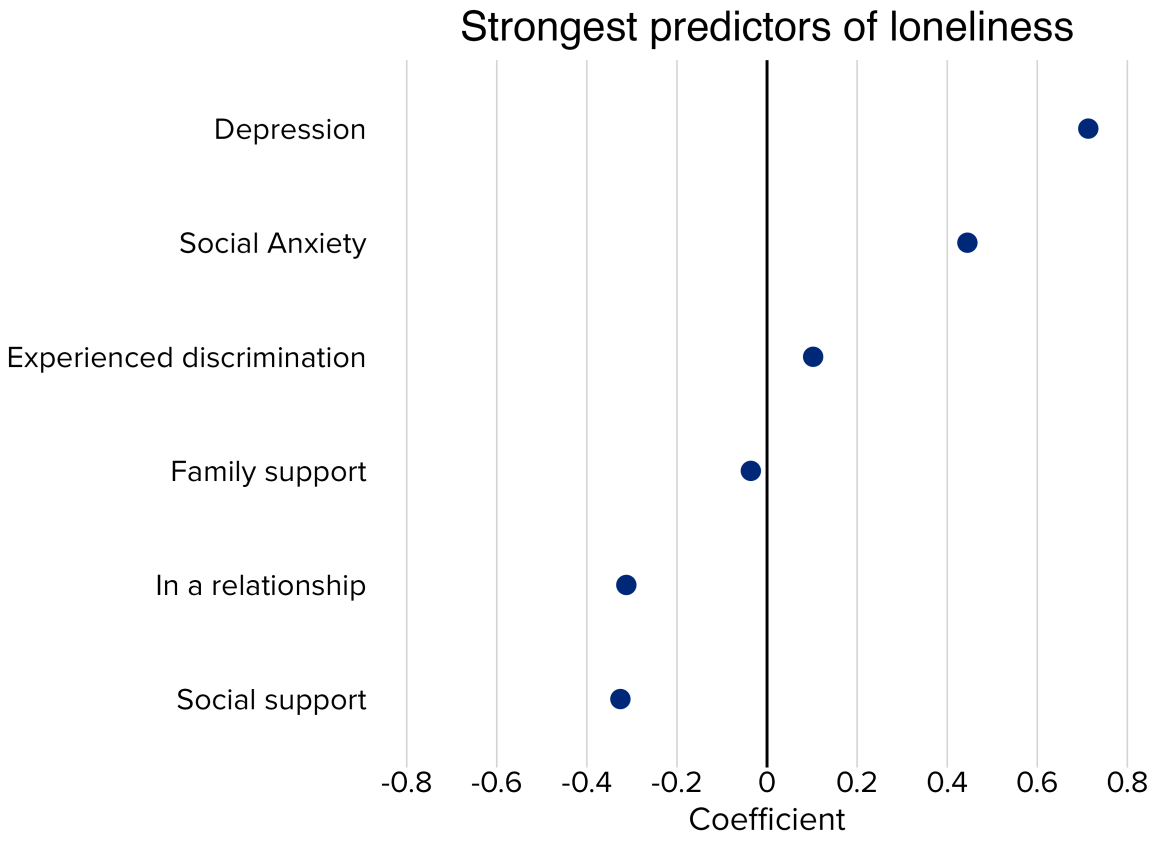
Most Critical Variables Connected to Loneliness

Based on prior research and theory, CCMH examined the relationship between loneliness and numerous variables. This included the following areas:

- Psychological distress
- Mental health history items
- Social support and relationship variables
- Various identities
- Academic status
- Financial insecurity
- Experiences of discrimination.

While many of these variables were individually associated with loneliness, CCMH investigated which variables are most strongly connected to loneliness when analyzed collectively in a model.

Elevated levels of depression and social anxiety demonstrated the strongest association with increased loneliness. Furthermore, recent experiences of identity-based discrimination were connected to increased feelings of loneliness. Conversely, social and family support, as well as involvement in a current romantic relationship, were related to reduced loneliness, although family support had a notably smaller effect.

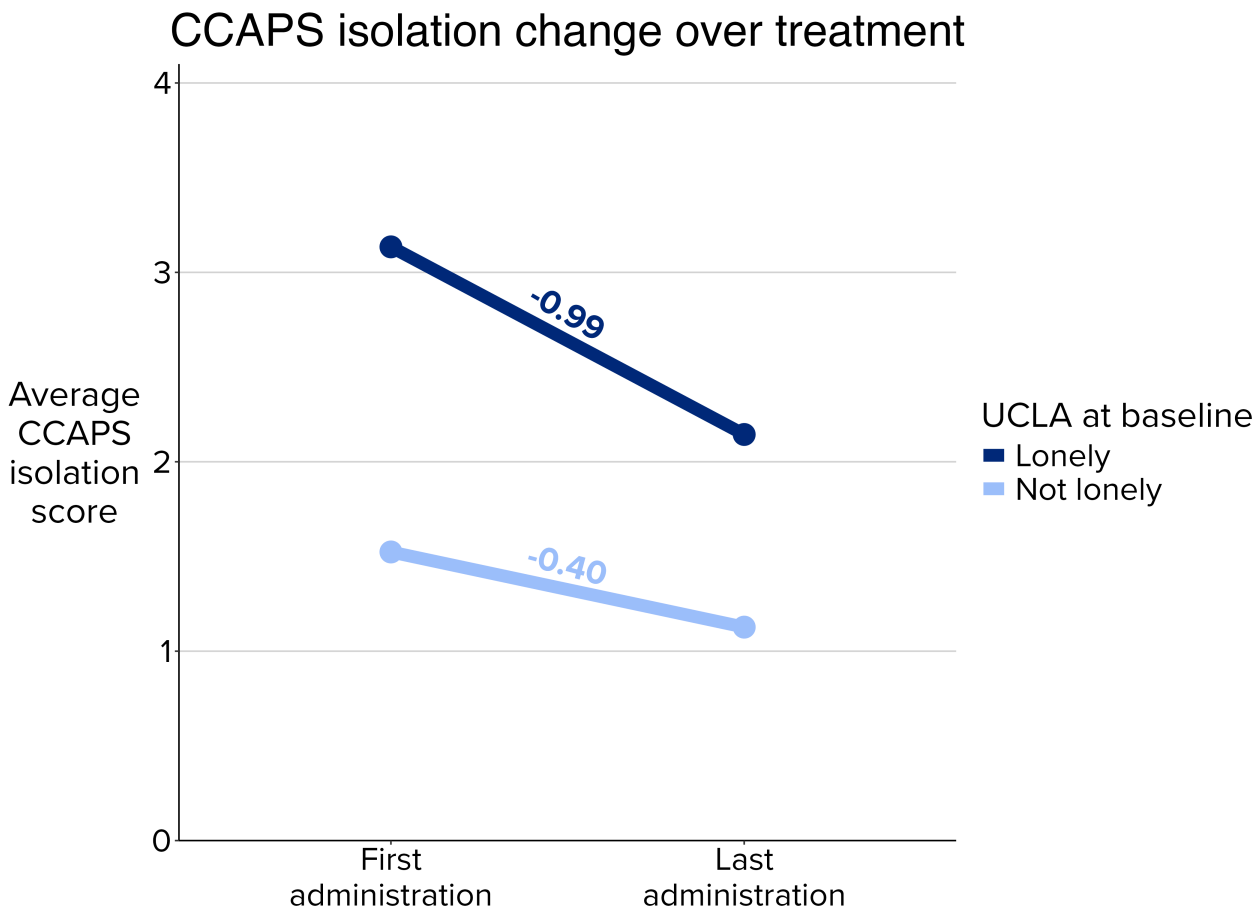


Source: The Center for Collegiate Mental Health

Improvement During Care

CCMH examined changes in social isolation during therapy for students based on their levels of loneliness when they entered treatment. Social isolation changes were assessed using an item on the CCAPS that asks students the extent to which they felt “isolated and alone” in the past two weeks on a five-point scale from 0 (not at all like me) to 4 (extremely like me). For these analyses, an approach developed by Gosling et al. (2024) to categorize the data was utilized, where aggregate scores on the UCLA Loneliness Scale of 7 or more were indicative of loneliness, while scores of 6 and below were considered not lonely.

Clients who were lonely when they initiated counseling services concurrently experienced higher degrees of social isolation. On average, clients who were both lonely and not lonely demonstrated reductions in isolation during treatment. However, clients who were lonely, compared to those who were not, experienced a greater relative decline in social isolation during care, which narrowed the gap in isolation between these two groups over the course of services at college counseling centers.



Source: The Center for Collegiate Mental Health

Takeaways

Summary

- While counseling center clients experience more substantial symptoms of loneliness than those within the general student population, both groups experience markedly high levels of loneliness. In particular, students in care at college counseling centers reported higher levels of lacking companionship and feelings of isolation.
- While multiple factors might individually be related to loneliness, analyses were conducted to determine the most important variables that are also connected to loneliness. Elevated levels of depression and social anxiety demonstrated the strongest association with loneliness. Recent experiences of identity-based discrimination were connected to increased feelings of loneliness. In contrast, social and family support, as well as involvement in a current romantic relationship, were related to reduced loneliness, although family support had a notably smaller effect.
- While all clients, on average, experienced reductions in isolation during services, clients who were lonely experienced a greater proportionate decline in social isolation during care, which significantly closed the initial gap in isolation with non-lonely students over the course of services at college counseling centers.

Implications

- Loneliness is a critical variable to assess when clients enter services at college counseling centers. Past research has found that it is associated with a wide array of co-occurring problems, including physical ailments, mental health issues, and academic problems that can impact their wellbeing and success as a student. The present report discovered that loneliness is also associated with depression, social anxiety, social and family support, romantic relationship status, and experiences of identity-based discrimination. Given its connection to numerous extensive problems, incorporating this construct during services is essential.
- Clients who enter treatment at college counseling centers with high levels of loneliness experience significant declines in social isolation during care, which is consistent with research demonstrating that psychological interventions are one of the most effective strategies for reducing loneliness (Lasgaard et al., 2026). This finding underscores the tremendous value of college counseling services and reinforces the importance of centers as strategic partners in advancing institutional priorities of belonging, retention, and student success.
- The prevalence of loneliness symptoms and adjacent problems (depression, social anxiety, social/family support, lack of romantic relationship, discrimination) identified in this study underscores the value of counseling centers forming partnerships with external campus departments to address these concerns. Centers clearly help improve clients' symptoms and reduce feelings of isolation in clinical settings, and the inclusion of campus collaborations allows interventions to be more systemic. Specifically, close collaborations with campus partners can concurrently catalyze the development

and execution of interventions that enhance belongingness and social engagement opportunities, reduce barriers to connection, fortify cultural centers and identity-based programs, advance inclusion initiatives, and deliver outreach and advocacy to buffer the negative impacts of discrimination. Addressing loneliness requires a campus-wide strategy, with counseling centers positioned as key contributors to these efforts.

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