Social Isolation in Middle School

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Abstract

As a social species, humans have an inherent need to feel connected to others and to feel like we belong with others. Existing medical research demonstrates that social isolation—defined as the perceived absence of feeling socially connected—during childhood and adolescence has both concurrent and long-term negative mental and physical health effects. Conversely related, education research finds that school belonging or connectedness is important for motivational, behavioral, and school performance outcomes. An organization called Beyond Differences was created to reduce social isolation and support connectedness in schools, particularly middle schools. The organization trains middle and high school students to lead social change through a collection of youth-led efforts, including assemblies, curriculum, and leadership training for middle school students, as well as larger national campaigns to raise awareness and catalyze social change.

Key Words: social isolation, belonging, school connectedness, youth-led, school climate, middle school, adolescents, Beyond Differences

Introduction

I think every kid has had an experience where they felt left out, or they felt hurt…. When you let kids know they can be a power to change that for other kids, I think it sets up—not just in middle school, but for our community, for our society over time—the catalyst for a much larger impact.

—School District Superintendent

Adolescence is the developmental period when the establishment of intimate relationships increases in importance (Erikson, 1963) and when young people begin spending more time with peers and less time with family (Larson, 1999). Schools provide perhaps the most important developmental context for young people in this phase of development. Youth spend much of their awake time in school during an exciting yet challenging time when they are experimenting with an increased sense of autonomy, experiencing hormonal and physiological changes in their bodies, exploring more deeply who they are and what they like, and navigating an increasingly peer-influenced social world (e.g., Eccles & Roeser, 2011; Larson, 1999). Yet, loneliness peaks and is more prevalent during adolescence than at any other age (Heinrich & Gullone, 2006; Perlman & Landolt, 1999). Middle school, especially, is a time when youth tend to be sensitive to social challenges and self-esteem can be fragile.

During this vulnerable time in development, supporting students' sense of belonging at school is of paramount importance. Existing research shows that adolescents' development of a sense of belonging provides important support for healthy social, emotional, and physical development (e.g., Fontaine et al., 2009; Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007; Ladd & Ettekal, 2013). Conversely, feeling socially isolated at school negatively affects the mental health and academic outcomes of adolescents (e.g., Goodenow, 1993a; Osterman, 2000; Ostrove & Long, 2007; Roeser, Midgely, & Urdan, 1996).

In this article, we bring together two literatures that examine the similar concepts of social isolation and connectedness and their associations with different youth outcomes. These literatures are related to one of the only school-based programs aimed at combating social isolation through a multifaceted set of approaches—Beyond Differences. We begin by exploring the medical literature on social isolation, focusing on the negative effects of feeling socially isolated on physical and mental health outcomes for adults and young people. We relate this literature to education research on school connectedness—in some ways the antithesis of social isolation—and its association with academic outcomes. By viewing these oftentimes disparate literatures side by side, we highlight the important links among adolescent developmental growth socially, cognitively, and physically. Particularly, the literature on school connection and belongingness points to the importance of whole-school intervention in support of reducing loneliness and isolation for all students. We conclude with a description of Beyond Differences, a program aimed at eliminating social isolation and improving school climate, as one example that embraces findings from the literature to create a preventative approach to combating this problem.

In 2010, the founders of this program, Beyond Differences, realized that many adolescents felt socially isolated and invisible in their middle schools and recognized a lack of social support for these students in school. They also identified that social isolation was not merely a social problem in schools, but that it also had broader public health implications, particularly in the realm of teen mental and physical health. The program focuses on supporting youth by making their middle schools more socially inclusive and less socially isolating. The organization trains teenagers to help lead social change in their middle schools through a collection of youth-led efforts, including assemblies led by a high school Teen Board, a leadership training program, and a series of national public awareness campaigns.

Literature on Social Isolation and Connectedness

Defining Social Isolation

Humans are a social species. We have an inherent need to feel connected to others and to feel like we belong with others. Maslow's (1954) psychological hierarchy places the need for belonging below basic needs like food and safety but above the needs for knowledge, understanding, and esteem (Maslow, 1954). Baumeister and Leary (1995) argue that across cultures and throughout the lifespan, a driving motivator for humans is the fundamental need to belong. Social isolation, in contrast, has been defined as, "the absence or perceived absence of satisfying social relationships" (Young, 1982, p. 380) and perceiving a "discrepancy between the desired and achieved levels of social contact," (Peplau & Perlman, 1982, p. 8). Related to these terms, but defined by a specific social context, is school connectedness. The Centers for Disease Control and Prevention (n.d.a) defined school connectedness as "the belief held by students that adults and peers in the school care about their learning as well as about them as individuals" (para. 1).

Unfortunately, many people today report feeling lonely and socially isolated. Feelings of loneliness have reportedly doubled in the U.S. since the 1980s (Cacioppo, 2013). Layer on the increasing proportion of people living alone (which, according to data from the U.S. Bureau of the Census, more than doubled from 1960 to 2015) and the rampant usage of digital devices, which arguably are replacing more substantive human-to-human interactions with the conveniences of indirect ways of connecting, and one might argue that loneliness statistics will not be improving without some form of intervention. A March 2015 article in *Time* magazine called loneliness the "next big public health issue" (Worland, 2015, para. 1).

Tracking the Prevalence of Social Isolation

Statistics on social isolation among adolescents are not readily available. This is in part because schools—which collect a lot of information about young people—tend to focus on concepts such as school connectedness or sense of belonging, rather than sense of isolation. Still, there is some evidence from the literature on the extent of social isolation in distinct populations. For instance, one study of middle and high school students found that 8% of students self-reported feeling socially isolated, with a slightly higher percentage among males than females (Hall-Lande et al., 2007). Longitudinal research showed that peer-related loneliness is highest, and possibly felt most deeply, among early adolescents, age 12 (Ladd & Ettekal, 2013). Those who begin adolescence without feelings of loneliness tend not to become lonelier as they move toward adulthood.

Social isolation or loneliness may be higher among certain groups, including gay, lesbian, or bisexual youth, particularly during the time when they are first acknowledging their sexuality to themselves and others (Wright & Perry, 2006), and among homeless youth (Perron, Cleverley, & Kidd, 2014). In addition, social isolation can exacerbate existing problems for highly vulnerable youth. For instance, among substance-dependent juvenile offenders, social isolation doubles the risk of relapse into alcohol or other drug use and subsequent incarceration (Johnson, Pagano, Lee, & Post, 2015).

More consistent data collection exists about students' views of their connectedness to peers and adults at school, as well as their experiences of being bullied at school, in comparison to their feelings of isolation or loneliness. For example, the California Healthy Kids Survey provides biannually a statewide picture of California students' self-reports on school connectedness, summarized in Table 1. The data show that 51% of seventh grade students, 44% of ninth graders, and 43% of eleventh graders have a high sense of school connectedness, whereas between 9–12% have a low sense of school connectedness.

Two of the questions most related to social isolation within this composite measure are also shown. Again, the majority of students in all grades feel close to people at school or feel a part of their school, but these data also highlight that at least one-third of the school population does not always feel this way. The proportion of students who feel connected at school declines from seventh to eleventh grade indicating a reduction in feeling connected to school or people in school over time. The percent of students who do not feel close to others or part of the school rises to as high as 16% by eleventh grade.

Table 1. School Connection as Reported in the California Healthy Kids Survey, 2013–15

	Seventh Grade			Ninth Grade			Eleventh Grade		
	High	*Med*	*Low*	*High*	*Med*	*Low*	*High*	*Med*	*Low*
School Connectedness Composite Measure (%)	51.1	39.8	9.1	44.2	44.7	11.1	42.8	45.4	11.8
	Agree	*Neutral*	*Disagree*	*Agree*	*Neutral*	*Disagree*	*Agree*	*Neutral*	*Disagree*
I feel close to people at this school (%)	67.3	22.4	10.3	61.8	24.4	13.9	58.2	24.9	16.8
I feel like I am part of this school (%)	66.2	20.6	13.2	61.1	24.3	14.6	56.3	27.5	16.2

Source: Austin, Polik, Hanson, & Zheng, 2016.

Other concepts related to social isolation include feelings of sadness or depression, suicidal thoughts, and experiences with bullying, both in-person and online or through social media. As shown in Table 2, the CHKS and the Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS) both collect information about high school students' feelings and experiences in these areas. In both surveys, slightly less than a third of high school respondents report feelings of chronic sadness in the past year, and just under a fifth report having seriously considered suicide in the past year. The CHKS reports higher levels of cyber or electronic bullying than the YRBS nationally and substantially higher rates of in-person bullying. However, the difference between in-person bullying rates on the two surveys is likely due to question phrasing, as the CHKS asks about bullying that occurs in any location and the YRBS asks only about bullying on school property.

Research using the YRBS finds a strong link between sadness and suicidal tendency for those who were bullied (Messias, Kindrick, & Castro, 2014); however, it is worth noting that both victims and perpetrators of bullying can be socially isolated and lack connection at school. Neither survey asks specifically about social isolation or loneliness.

Table 2. Feelings of Sadness, Suicide, and Bullying in California and Nationwide

In the past 12 months…	California Healthy Kids Survey, Grades 9 & 11, 2013–15	National Youth Risk Behavior Survey, Grades 9–12, 2015
Chronic sad feelings	32.7%	29.9%
Seriously considered attempting suicide	19.0%	17.7%
Were electronically (cyber) bullied	19.9%	15.5%
Were bullied in person	34.2% (anywhere)	20.2% (on school property)

Sources: Austin, Polik, Hanson, & Zheng (2016); Centers for Disease Control and Prevention (n.d.b).
Note: Sample size in the CHKS 9th and 11th grade was 28,810 in the 2013–15 years. Sample size in the YRBS 9th–12th grade in 2015 was 15,465.

Consequences of Social Isolation

A growing body of evidence shows that for those who regularly report feelings of loneliness or social isolation, there can be repercussions in a number of ways that are damaging to individuals' health and well-being (Hawkley & Capitanio, 2015). We begin the review of the consequences of social isolation with a short summary of the literature on social isolation in adulthood. We then focus specifically on the smaller body of literature that addresses the consequences of social isolation among youth. We did not find studies that explicitly link social isolation with academic outcomes for youth, although many of the outcomes associated with social isolation are also linked to worse school performance measures. We instead focus on the concept of school connectedness and review its links with positive outcomes.

Social Isolation in Adulthood is Linked to Poor Health and Mortality

A substantial body of scientific research shows that social isolation is a risk factor for death that is comparable to or even exceeds other well-established and well-publicized risk factors for mortality, including smoking, obesity, lack of exercise, high cholesterol, and air pollution (Holt-Lunstad, Smith, Baker, Harris, & Stephenson, 2015; Holt-Lunstad, Smith, & Layton, 2010; Pantell et al., 2013). A landmark longitudinal study of about 7,000 randomly selected adults in northern California found that adults who lacked social and community ties in 1965 were significantly more likely to be dead nine years later, regardless of physical health, socioeconomic status, and other health practices (Berkman & Syme, 1979). This same significant association between social isolation and death, while holding other common predictors of mortality constant, is found in other studies around the world—for example, in Amsterdam

(Penninx et al., 1997), Japan (Shiovitz-Ezra & Ayalon, 2010), and Denmark (Olsen, Olsen, Gunner-Svensson, & Waldstrom, 1991). A meta-analysis of 70 studies on this topic (which were independently conducted between 1980–2014) concluded that feeling socially isolated or lonely increases the likelihood of adult mortality by 29% and 26%, respectively (Holt-Lunstad et al., 2015).

Other related research on social isolation or loneliness found that social isolation is also significantly associated with cognitive decline (Cacioppo & Hawkley, 2009; Tilvis et al., 2004; Wilson et al., 2007), depression (Cacioppo, Hughes, Waite, Hawkley, & Thisted, 2006), increased blood pressure (Hawkley & Cacioppo, 2010), and increased risk for heart disease (Ford, Loucks, & Berkman, 2006; Eaker, Pinsky, & Castelli, 1992; Thurston & Kubzansky, 2009), even after holding constant other possible predictors. For example, Cacioppo et al. (2006) found that higher levels of loneliness were associated with more depressive symptoms, even after accounting for any effects related to age, gender, ethnicity, education, income, marital status, social support, and perceived stress.

Social Isolation in Children and Adolescents Is Linked to Worse Mental and Physical Health Outcomes

A growing but less abundant set of studies has focused on social isolation during childhood and adolescence. Table 3 outlines the reported effects of experiencing social isolation during adolescence, which are described in more detail below.

Existing research demonstrates that social isolation during childhood and adolescence has both concurrent and longer-term negative health effects. One of the most studied relationships is between isolation or loneliness and young people's depression and anxiety. This relationship has been demonstrated in cross-sectional studies. Hall-Lande et al. (2007) surveyed over 4,700 adolescents and found that social isolation was significantly associated with higher depressive symptoms and also lower self-esteem. Lohre (2012) reported that more frequently perceiving loneliness was significantly associated with sadness and anxiety among 419 Norwegian children between the ages of 7–16.

Longitudinal studies extend those contemporaneous correlations. Harris, Qualter, and Robinson (2013) followed more than 200 British children for three years, from ages 8–11, finding that children who reported higher loneliness between 8–11 then reported more depressive symptoms at age 11. Fontaine et al. (2009) followed 585 children from ages 6–16 and found that early adolescent peer problems were predictors of both loneliness and anxiety/depression. They also found that degree of loneliness at age 12 is predictive of depressive and anxious symptoms one to three years later, adjusting for anxious/depressive symptoms at the start of the study.

Table 3. Summary of the Mental Health and Physical Health Effects of Social Isolation During Adolescence

Mental Health Effects	Physical Health Effects
• Depression (*Fontaine et al., 2009; Hall-Lande et al., 2007; Harris et al., 2013; Ladd & Ettekal, 2013; Qualter et al., 2010; Qualter et al., 2013; Shochet et al., 2006; Vanhalst et al., 2013*) • Increased anxiety (*Fontaine et al., 2009; Lohre, 2012; Shochet et al., 2006*) • Lower self-esteem (*Hall-Lande et al., 2007*) • Sleep disturbances (*Harris et al., 2013; Mahon, 1994*) • Suicidal tendencies - both attempts and ideation (*Hall-Lande et al., 2007; Schinka et al., 2012*)	• Increased risk of substance abuse (*Qualter et al., 2013; Stickley et al., 2014*) • Headache, stomach ache (*Lohre, 2012*) • Worse physical health (*Goosby et al., 2013; Qualter et al., 2013*) • Higher cholesterol in young adulthood (*Goosby et al., 2013*) • Higher blood pressure in young adulthood (*Goosby et al., 2013*) • Obesity in young adulthood (*Goosby et al., 2013*) • Higher risk of poor cardiovascular health in young adulthood (*Caspi et al., 2006*)

Research also claims that chronic social isolation may have a cumulative effect. For example, Ladd and Ettekal (2013) annually surveyed 478 young people from ages 12–18, revealing that those youth categorized as "chronically" or "moderately" lonely over time had higher levels of depressive symptoms at age 18 as well as the largest gain in depressive symptoms since age 12, compared to youth who were not persistently lonely over the same period. Likewise, Vanhalst et al. (2013) found that chronic reported loneliness from age 15–20 predicted depressive symptoms at age 20. Similarly, in a sample of almost 300 British children surveyed at ages 5, 9, and 13 years of age, those who were persistently lonely at age 5 and 9 reported higher depressive symptoms at age 13, and then again at age 17 (Qualter, Brown, Munn, & Rotenberg, 2010; Qualter et al., 2013). Lastly, using a sample of more than 2,000 students ages 12–14 assessed at two points 12 months apart, Shochet, Dadds, Ham, and Montague (2006) found that adolescents' lack of school connectedness (which is a comparable term often used by education researchers in the school context) predicted depressive symptoms one year later for both boys and girls as well as anxiety symptoms for girls, even after controlling for prior symptoms.

Cross-sectional research with over 4,700 adolescents showed a correlation between social isolation and an increased risk of attempted suicide (Hall-Lande et al., 2007). Even more convincing evidence of this relationship comes from a longitudinal study of over 900 adolescents that explored the link between

loneliness and suicidal thoughts and behaviors, as well as the demographic characteristics that might moderate these relationships (Schinka, VanDulmen, Bossarte, & Swahn, 2012). Findings affirmed a contemporaneous relationship between loneliness, suicidal thoughts, and suicidal behaviors at age 15, and longitudinally, early adolescent loneliness predicted suicidal behavior at age 15 and held across demographic groups. These results are especially poignant given suicide is the second-leading cause of death among 10- to 24-year-olds (Heron, 2016) and that 18–19% of high school students in the CHKS and YRBS reported having suicidal thoughts (see Table 2).

Mental health and substance use/abuse issues are often co-occurring. We identified one recent study in which the authors surveyed about 4,000 U.S. and Russian students between the ages of 13–15 about their loneliness, various substance uses, as well as sexually risky and violent behaviors (Stickley et al., 2014). Findings indicated that for both Russian and U.S. adolescents, loneliness was significantly associated with increased risk of substance abuse, particularly marijuana use for Russian teens and American girls, and illicit drug use among American boys. For Russian girls, the authors found a link between loneliness and pregnancy, whereas loneliness was not associated with violent behavior among any of the groups. Qualter et al. (2013) looked at the issue of substance use longitudinally and compared British adolescents who were persistently lonely over a 10-year period to those who experienced increases in loneliness, decreases in loneliness, or stable low loneliness over time. The persistently lonely adolescents at age 17 are significantly more likely to drink alcohol and to drink alcohol more excessively than the other groups, with those experiencing increases in loneliness the next most likely group to use alcohol.

Loneliness and isolation have also been linked to adolescent physical health outcomes, such as stomachaches and headaches (Lohre, 2012) and sleep disturbances, including taking longer to fall asleep among younger (Harris et al., 2013) and older (Mahon, 1994) children and adolescents. The relationship between loneliness and negative physical health outcomes holds longitudinally as well. Within their sample of British adolescents tracked over time, Qualter et al. (2013) found that persistently high levels of loneliness between ages 5–17 is associated with more doctor visits and lower self-rated health at age 17. Goosby and colleagues (2013) used three waves of the nationally representative Add-Health data collected from 132 middle and high schools and similarly found that loneliness during adolescence significantly increases the risk for fair or poor self-rated health in young adults. The authors also found that loneliness during adolescence predicted a greater risk for more specific health risks, such as high cholesterol, high blood pressure, and obesity in young adulthood. Another longitudinal study following over 1,000 children in New Zealand from

birth to age 26 found that socially isolated children are at significantly higher risk of poor cardiovascular health at age 26, holding constant many other risk factors and behaviors (Caspi, Harrington, Moffitt, Milne, & Poulton, 2006). The indicator of "cardiovascular health" consisted of a measure combining six biomarkers, including being overweight, an elevated blood pressure, and an elevated total cholesterol level. The researchers also discovered a cumulative effect of chronic isolation in which the more occasions isolation was reported during childhood, the greater the number of cardiovascular health risks at age 26 (Caspi et al., 2006). Findings from that study are especially important given that heart disease is the leading cause of death in the U.S. (Centers for Disease Control and Prevention, n.d.b).

Healthy adolescent development includes growth socially, cognitively, and physically, and these developmental pathways overlap in important ways (Carr, 2016). The research summarized in this section indicates a strong relationship between loneliness and both physical and mental health outcomes. In the next section we move to focus on the links between loneliness—and its opposing concept, connectedness—and youth academic outcomes.

Connectedness and Belonging in School Is Critical for Academic Success

Research findings from the education literature—which tends to measure students' sense of "belonging" and "connectedness," viewed broadly as inverse indicators of social isolation with a focus on connections to adults and peers—further supports the need for bolstering student connectedness: school belonging is important for motivational, behavioral, and performance outcomes (Goodenow, 1993a, 1993b; Osterman, 2000; Roeser et al., 1996; Smerdon, 2002). These findings are summarized below in Table 4.

In a comprehensive review of the literature on school connection, Osterman (2000) highlighted the findings that belongingness is associated with healthy child and adolescent development and that those who are connected perceive themselves as more competent and autonomous and also have high levels of intrinsic motivation. These are resources that youth draw upon in school and are therefore also predictive factors for school engagement and performance. Osterman's review also underscored the importance of belongingness for students' attitudes toward school. Those who feel related to their school environment have more positive attitudes toward their classwork, their teachers, and their peers. They are more likely to enjoy school, to engage in school activities, and to immerse themselves in the learning process. In contrast, Osterman's review demonstrated that a sense of exclusion at school is associated with classroom behavioral issues, lower interest in school, lower achievement, and drop out.

Table 4. Academic Effects of Lower Sense of Belonging or Connectedness in Schools

Academic Effects of Low School Belonging or Connectedness
• Feel less motivated and put forth less effort (*Connell & Wellborn, 1991; Goodenow, 1993b; Osterman, 2000; Roeser et al., 1996*)
• Feel less satisfied with school (*Osterman, 2000; Ostrove & Long, 2007; Roeser et al., 1996*)
• Are less engaged in class (*Goodenow, 1993a; Osterman, 2000; Smerdon, 2002; Wentzel, 1998*)
• Participate less in class (*Walton & Cohen, 2007; Wentzel, 1998*)
• Show a decrease in attendance rates (*Goodenow, 1993b*)
• Perform worse on high school exit exams (*Benner, 2011*)
• Lower likelihood of completing high school (*Bond et al., 2007; Osterman, 2000*)
• Perform lower on measures of student achievement (*Goodenow, 1993a, 1993b; Osterman, 2000; Ostrove & Long, 2007; Roeser et al., 1996; Walton & Cohen, 2007, 2011*)

In a longitudinal study of Australian students, Bond and colleagues (2007) found that those with poor school connections, poor social connections, and especially those with both, were at highest risk of failure to complete high school. Benner (2011), also using longitudinal data, similarly found that youth who are chronically lonely experience difficulties in their academic progress, particularly passing exit exams.

Students who report lower belonging or connectedness at school tend to feel less motivated and less satisfied at school, tend to be less engaged in and participate less in their classes, have worse attendance records, and tend to perform lower on measures of student achievement for which schools are held accountable (Goodenow, 1993a, 1993b; Roeser et al., 1996; Smerdon, 2002; Walton & Cohen, 2007, 2011; Wentzel, 1998). The importance of belonging for academic success applies at all levels of education, including in colleges and universities (Ostrove & Long, 2007).

Gaining a sense of school belonging includes making connections with teachers and peers through in-school and extracurricular activities (Bouchard & Berg, 2017). However, these authors also noted that students can gain their sense of belonging in communities that are not part of the classroom or school. Having a sense of peer connectedness outside of school may positively affect young people's social and emotional outcomes but may not have similar positive effects on school-related outcomes.

The Promising Possibilities of Establishing Social Isolation Prevention in Schools

The need to belong is such a fundamental human need that—in the context of schools—students who do not have a sense of belonging at school will exhaust themselves while seeking to satisfy this need and will not be capable of the higher-level functioning needed to excel in school. The distressing and damaging effects of social isolation and not feeling like you belong in school and beyond are clear. Fortunately, because it is in response to social interactions and environmental factors that an individual either feels or does not feel a sense of belonging, this is inherently a social and dynamic issue that can be addressed through thoughtfully crafted strategies and interventions.

As many of the studies cited in this review suggest (e.g., Fontaine et al., 2009), starting social isolation interventions at younger ages makes sense given that loneliness may be experienced at its greatest levels during early adolescence and that its negative effects on health and academic progress are concurrent, cumulative, and long-lasting. The suggestion to act preventively to avoid excessive or chronic loneliness, rather than address loneliness after it sets in, is a stronghold of the positive youth development approach to mitigating negative youth outcomes and experiences (Lerner, Almerigi, Theokas & Lerner, 2005). Positive youth development is based around developing youth assets through the so-called five "Cs", one of which is connection (the others are competence, confidence, character, and caring; Lerner et al., 2005).

This positive approach to promoting youth assets is most often seen in out-of-school settings because, in an era of high stakes accountability, schools are notoriously more focused on efforts to improve test scores than those aimed at "softer" skills or problems, such as social isolation. However, efforts to promote "social and emotional learning" in schools have gained traction with more school-based approaches being used to develop not only students' academic abilities, but also to support them in becoming responsible, caring, and contributing citizens (Greenberg et al., 2003). The research summarized in this article is an important reminder that skills and experiences often perceived as non-academic or "soft" can have a significant effect on many key correlates of academic success.

Because of this significance, embedding prevention efforts in schools seems promising. Schools are an ideal context for practicing and promoting healthy relationships and social skills—both at the individual level (e.g., teaching students about the importance of including others and helping those who feel isolated learn techniques to improve their connectedness) and at the school level (e.g., nurturing a positive school climate that minimizes opportunities for

social isolation). A schoolwide approach to prevention is supported by research. In her review of student connection at school, Osterman (2000) found that conditions both inside and outside the classroom influence students' feelings about connection or belongingness. How can these conditions be optimized to create a school environment that serves to connect rather than isolate students? Spratt and colleagues (2006) added that the structures and cultures of a school may unintentionally perpetuate issues like social isolation; therefore, environmental factors are important and need to be deeply examined and potentially modified to best support the mental well-being of students. Qualter (2003) argued that a whole-school approach to childhood loneliness is a preferred route because: (a) it does not single out, label, or stigmatize individuals as being lonely, and (b) changing the practices and ethos of social periods—such as lunch and recess—will go a long way towards helping lonely children without singling them out.

An Approach to Supporting Social Integration in Middle Schools: The Beyond Differences Organization

Every student should feel accepted, included, and valued by their peers. Beyond Differences works directly with middle and high school students, on campuses and online, to help them promote social inclusivity within their schools.

—Beyond Differences Vision

Beyond Differences (www.beyonddifferences.org) is a nonprofit organization headquartered in the San Francisco Bay Area (California), dedicated to ending social isolation and enhancing a positive school climate in middle school. It aims to eliminate social isolation through a variety of approaches, including working directly with schools as well as spearheading national public awareness campaigns. Its mission is to empower students to end social isolation in middle school through online and campus programs, both of which are expanding rapidly. In this section we describe the approach Beyond Differences has taken in its efforts to reduce social isolation among middle school students based on data collected as part of a year-long implementation study of the program. It is not the goal of this section to discuss program impacts, but rather to integrate the mission and aims of the program with the approaches consistent with existing literature to illustrate one way to address what is often seen as an intractable problem among middle school students.

Beyond Differences takes two main approaches to its programming: (1) it works directly with middle and high school students in a select set of schools,

which at the time of the study were all located in Northern California; (2) it reaches many more students and adults nationwide through a series of public awareness campaigns and other forms of outreach. Its mission is informed by the education and medical literatures on connectedness/social isolation and also the field of positive youth development and is stated on their website: "Every student should feel accepted, included, and valued by their peers." Rather than rely on adults to create these environments for youth, the program takes a youth leadership approach to promote social inclusivity both at school and online.

Beyond Differences in Schools

Beyond Differences works with schools through several hands-on programs. Often the first introduction schools have with Beyond Differences is through an assembly. High school students who are members of the Beyond Differences Teen Board—a year-long leadership program—create and perform these assemblies for middle school students, highlighting the issue of social isolation and showing younger students what this can mean. High school students, who are typically admired by their younger peers, often reveal their own experiences with social isolation as a way of personalizing the assembly for younger students and encouraging them to begin a dialogue within their own schools about the problem. To prepare for these assemblies, Teen Board members commit to working with Beyond Differences for the entire year (although many continue for more than one year), including participating in weekend retreats and meetings throughout the year in addition to the assemblies.

The assembly program is therefore serving two populations. High school students have an opportunity to engage in year-long leadership and social inclusion training, to themselves join a cohesive group of peers and adults, and to mentor younger students in the assemblies. Middle school students are introduced to the concept of social isolation and meet older students who have more perspective and experience with the issue. Teen Board members reported to us that social isolation is not easily understood by their peers and often requires further explanation because others are unfamiliar with the term or have a limited understanding of what exclusion and isolation entail. Beyond Differences introduces this concept—which many students feel but do not have the vocabulary to name—helping young people to recognize their own experiences with social isolation and empowering them to act as change agents in support of others.

After the assembly, schools that are ready to tackle the issue of social isolation at the next level can start their own Beyond Differences middle school programs. Beyond Differences provides a suggested curriculum and works with school staff to implement a program tailored to their own needs over the school

year. Schools must identify a staff lead—who could be a teacher, counselor, or administrator—and a set of students with whom they will work throughout the year to plan and execute different activities, which can range from smaller lunchtime clubs to help students who are socially isolated to large-scale events aimed at improving public awareness for all students about the issue.

This more embedded approach to intervening in school settings to reduce social isolation and promote inclusion is more challenging in some ways. Schools are primarily focused on promoting academic growth, and although social and emotional learning is a key part of academic learning, schools that have high proportions of students who are not meeting academic standards may find it difficult to take time away from academic subjects to engage in learning about social exclusion. Therefore, these programs primarily take place at lunchtime, which is a critical and natural time for schools to focus on inclusion. By raising awareness about social isolation, cultivating a sense of collective responsibility among students, and giving young people tools to foster inclusivity during lunchtime and in other contexts, the Beyond Differences program aims to involve students in the process of improving school climate while also helping minimize the deleterious mental, physical, and educational effects of isolation described earlier.

Beyond Differences Public Awareness Campaigns

Beyond Differences also works with national leaders and partner organizations to promote a series of interrelated public awareness campaigns scheduled throughout the school year related to ending social isolation. The first campaign, which occurs in the fall shortly after the new school year has begun, is designed to foster unity and healthy relationships within schools and classrooms by encouraging students to get to know one another's backgrounds and to celebrate their similarities and differences. Through a collection of activities, students explore issues of self-identity, stereotypes, and embracing diversity in themselves and others. Campaigns are tailored to respond to different needs. For instance, in 2016, Beyond Differences partnered with the Islamic Networks Group (ING) to support these activities, actively encouraging middle school youth to understand others' cultural traditions and recognize stereotypes in an effort to enhance belongingness and connection at school.

The second campaign, typically in February, teaches students how to intermingle and make new friends at lunch so that nobody has to sit alone while they eat. Schools devote a lunch period to intentionally promoting student interaction beyond existing peer groups through games, activities, and awareness of the issue. Beyond Differences emphasizes that this event should be led by students, who are most knowledgeable about lunchtime social issues in their school and the types of activities that students might enjoy to mix things up.

A third campaign, which generally takes place in the spring, encourages youth to be kind online, to learn to respond to digital gossip, and to stand together against harmful interactions over email, text, and various social media platforms. It is a campaign aimed not only at youth, but also their parents and teachers.

Collectively, Beyond Differences' online and campus public awareness efforts encourage students to never exclude others, to reach out to someone new, and to spread the word that being inclusive is cool, as described on their website. Beyond Differences continually responds to the requests and feedback of participating schools and student leaders to ensure their programs and activities most effectively foster social change in schools and beyond.

Public awareness campaigns can be an effective way to address adolescent behavior, at least as it pertains to youth mental health (Wright, McGorry, Harris, Jorm, & Pennell, 2006) and tobacco use (Farrelly, Niederdeppe, & Yarsevich, 2003). Furthermore, these campaigns are most effective when complemented by school or community programs, such as the ones described earlier in this section. Although Beyond Differences has not yet moved to assess the effects of its public awareness campaigns, the practices they have embraced are consistent with what has been shown to be effective in the literature and therefore hold promise for the positive impacts the program intends to have.

Conclusion

Research shows that social isolation is an important antecedent to many negative health and mental health outcomes across the age spectrum. Conversely, feeling connected to school and the people in it is a major protective factor for youth and adolescents in middle and high school. With the high stakes for school academic performance embedded into state and federal law, many schools necessarily focus their energies on developing the academic skills of their students without paying adequate attention to student social and emotional development. However, these developmental pathways are intertwined, and paying attention to multiple aspects of development simultaneously can enhance outcomes in each developmental area.

Beyond Differences is one of the few organizations nationwide to focus on the issue of social isolation in middle schools. Many programs exist to combat bullying—one form of isolation—but isolation can be much less overt. Students who are socially isolated may not be teased and bullied, but rather ignored and overlooked. They may feel that nobody notices them and may have nobody to talk to during lunch, even if no students are acting aggressively or negatively toward them.

In promoting social inclusion in middle school through on-campus and public awareness programs, Beyond Differences incorporates some important lessons from the youth development literature. First, its programs are intended to be student-led, with students themselves identifying problems and stepping up to be part of the solution individually or as a group at their school. Second, it focuses on prevention rather than intervention. It is an organization that aims to help students identify what social isolation is, why it is a problem, and how everyone can work together to help combat it. It does not specifically address how to respond to negative behavior like bullying, but rather how to create a school environment in which kindness and inclusivity are the norms.

Future research should better link the concepts of school connectedness and social isolation and should examine interventions intended to promote connection as a means of improving not only academic outcomes, but also social and emotional ones. Understanding the cumulative effects of social isolation in childhood on subsequent adult outcomes is also important in thinking about and designing programs for older youth or young adults.

Endnotes

[1]According to the U.S. Bureau of the Census (2015), in 1960, 13% of individuals lived alone, whereas in 2015, 28% of individuals lived alone.

[2]The California Healthy Kids Survey (CHKS) was designed, validated, and is regularly collected by WestEd. It is the largest statewide survey of resiliency, protective factors, risk behaviors, and school climate in the nation. In California, the CHKS is frequently cited by state policymakers, the media, and school leaders, and it provides critical information on issues that are central to educational outcomes but not regularly collected by school data systems. For more information, see http://chks.wested.org

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