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Exploring Definitions and Experiences of Loneliness: Insights From Interviews With Children and Early Adolescents in Italy

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ABSTRACT

Loneliness represents a negative feeling that arises when individuals perceive a discrepancy between actual and desired social relationships. The present study explored the meanings and personal experiences of loneliness in children and early adolescents in Italy. Participants included 139 children and early adolescents aged 8–14 years (M = 10.76 years, SD = 1.71; 80 girls, 57.6%) who completed a semi-structured interview online. Different dimensions emerged from the coding process, providing evidence of the multidimensional nature of loneliness, defined and experienced through different dimensions (e.g., cognitive, emotional, and regarding interpersonal context). Results from descriptive analyses (i.e., frequencies and percentages) showed that most of the participants defined loneliness in terms of physical separation from others. Also, participants discussed loneliness in relation to both their family and peers. Some children and adolescents expressed experiencing loneliness voluntarily. Children and early adolescents reported to feel sadness, anger, and other emotions as boredom, happiness, and fear in association with loneliness. Finally, we examined gender and grade differences between the dimensions with a series of chi-square tests and ANOVAs. Results revealed that primary school children and boys defined and experienced loneliness using the physical separation dimension. Middle-school children defined loneliness using the cognitive dimension more frequently. Overall, the present study offers a richer understanding of the meanings and experiences of loneliness in youth and highlights the importance of considering developmental, gender, and cultural factors when studying loneliness.

1 | Introduction

According to Baumeister and Leary's (1995) Need to Belong Theory, people have the innate need for social inclusion and for establishing positive relationships with others. When this need to belong is not met, it can lead to loneliness. Loneliness is the unpleasant feeling experienced when individuals perceive that their relationships with others are qualitatively or quantitatively insufficient (Perlman and Peplau 1981). A lonely individual perceives a discrepancy between actual and desired social relationships (Peplau and Perlman 1982). In turn, loneliness is robustly associated with a wide range of negative outcomes, including mental health difficulties (e.g., depression, anxiety, suicidality) and physical health problems (e.g., cardiometabolic disease; Park et al. 2020).

Loneliness is also a particularly fundamental factor to consider in the transition from late childhood to early adolescence, a period characterized by increased peer influence and a burgeoning need for belonging (Coplan et al. 2019). As a result, children and adolescents are particularly susceptible to feelings of loneliness (Qualter et al. 2015). Also, some scholars have hypothesized that critical environmental changes in early adolescence, such as the transition from primary to secondary school, are associated with increases in loneliness due to changes in social networks/school contexts (Maes et al. 2020; van Roekel et al. 2018).

Previous research has demonstrated that loneliness during childhood and early adolescence has a negative impact on mental health and adjustment, including heightened risk for internalizing problems, including depression and anxiety (e.g., Goossens 2018). However, loneliness in these age periods has been primarily assessed through self-report measures (for a review, see Cole et al. 2021). The use of qualitative data may be particularly valuable in loneliness research because this approach can unveil subjective experiences and inner emotional states that are not easily quantified. Through open-ended questions and the opportunity for participants to express themselves in their own words, interviews can reveal the complexity of loneliness and how it is experienced (Birken et al. 2023). Research exploring loneliness through interviews has, to date, focused largely on older adults (e.g., Naughton-Doe et al. 2024; Park et al. 2020), with little research employing similar methods to explore deep meanings of loneliness and solitude in youths (Besevegis and Galanaki 2010; Hymel et al. 1999; Verity et al. 2021). In this regard, previous qualitative explorations concluded that children as young as five understand the meaning of loneliness (Cassidy and Asher 1992) and suggested that it is primarily a situational experience affected by being excluded, rejected, and ignored by peers in childhood and adolescence (Asher et al. 1984; Hemberg et al. 2022). During these developmental periods, peers represent important sources of companionship, sense of security, and support (Coplan et al. 2019). As children transition into early adolescence, they spend over 90% of their time during recess and lunch at school interacting with peers (Coplan et al. 2015). This period is also marked by a strong desire to fit in, gain peer approval, and achieve social status, with peer pressure reaching its peak (e.g., LaFontana and Cillessen 2010). Since peer relationships are essential for socio-emotional growth—such as experiencing positive emotions with others (Bowker et al. 2016; Bukowski et al. 2020)—spending time alone may lead to missed opportunities for social bonding (Rubin et al. 2015).

As a consequence, experiencing difficulties in peer relationships increases risk for feelings of loneliness (Schwartz-Mette et al. 2020). Thus, in the transition between childhood and adolescence, the needs for social belonging and acceptance tend to increase (Bukowski et al. 2020; Molinari et al. 2020), which could impact the development of loneliness. Given the close association between time alone, need for belonging, and loneliness, it is important to investigate how children and early adolescents perceived and experienced loneliness. Among the few studies conducted on childhood, Galanaki (2008) aimed to explore how children and adolescents from 2nd to 6th grade (N = 180) in Greece perceived and experienced loneliness, focusing on their personal definitions and the circumstances under which they feel lonely. The study highlighted developmental changes in how children perceive and cope with loneliness. Results indicated that in early childhood, loneliness was viewed as almost identical to physical aloneness (being alone). In middle childhood, perceptions of loneliness evolved into a social experience stemming from deficits in social relationships. Finally, in late childhood, loneliness emerged as a subjective and more complex emotional experience (feeling lonely).

Verity et al. (2021) also explored definitions of loneliness in a sample of children and adolescents (N = 24) recruited in Belgium (aged 8–14 years old) and Italy (aged 9–12 years old). They also examined the strategies the participants used to cope with experiences of loneliness. During in-depth interviews, participants described loneliness as a complex, multifaceted emotion (beyond simply being alone). It was often associated with feelings of isolation, a lack of meaningful connections, and, sometimes, an inability to relate to others around them. Loneliness was not just physical isolation, but also emotional disconnection, even when surrounded by people. A relevant finding was the stigma surrounding loneliness. Many young people felt reluctant to talk about loneliness due to fear of judgment or misunderstanding. In line with these aforementioned dimensions of loneliness (Galanaki 2008; Verity et al. 2021), results from a recent systematic review (McKenna-Plumley et al. 2023) suggest that when children speak about loneliness, they often refer to conflict experiences at school (e.g., being bullied). The theme of conflicts with peers also emerged in a recent study by Turner et al. (2024), who conducted semi-structured interviews in a sample of adolescents aged 10–18 years.

Given the scarcity of research exploring children's and adolescents' experiences of loneliness, the main aim of the present study was to explore the meanings and personal experiences of loneliness among children and early adolescents using semi-structured interviews in Italy. Moreover, we expanded the age range previously investigated in Italy (i.e., 8–14 years) and included some new dimensions of loneliness compared with the few existing studies. Accordingly, combining deductive and inductive methodologies, we also included categories pertaining to the perception of loneliness as a search for alone time, which can also be viewed in a more positive way. This decision is supported by research (Goossens et al. 2009) identifying a four-factor model of loneliness and aloneness, including peer-related loneliness, family loneliness, negative attitude toward aloneness, and positive attitude toward aloneness. Furthermore, it is crucial to clarify that although the core construct of loneliness is inherently negative (even if some authors highlighted the positive aspect of loneliness if its duration is limited during time; e.g., Maes & Vanhalst, 2025), a positive view toward aloneness emerges from the linguistic and phenomenological characteristics of the Italian language, where the boundary between loneliness and aloneness can be fluid.

1.1 | Physical Aloneness ("Sono Solo") Versus Loneliness ("Sentirmi Solo") in Italy

In the English language, there are two different words used to distinguish between the physical context of being alone ("solitude") versus feeling alone ("loneliness"). However, in Italian, the same word is used to denote both of these concepts. For

example, in Italian, loneliness ("solitudine") is defined as "the condition or the state of those who are alone" ("La condizione, lo stato di chi è solo"; Treccani, 2025). This definition reflects both a physical condition and an emotional state. Indeed, it may happen that in common parlance individuals say "being in loneliness" (i.e., "stare in solitudine") in the sense of being physically alone, despite the fact that the word solitude actually indicates an emotional meaning. Moreover, when Italian individuals want to signify both loneliness or staying physically alone, they use the same adjective or adverb "solo" (alone). "Solo" can be described with two different verbs as follows: "sono solo" and "sentirmi solo." "Sono solo" refers to a state of physical aloneness, indicating that an individual is alone in a spatial sense. This phrase suggests a temporary and situational condition where the individual is merely unaccompanied by others at a given moment. For example, some children might say "sono solo in casa" to mean that they are alone at home without implying emotional distress. On the other hand, "sentirmi solo" conveys the emotional experience of loneliness. This expression signifies the psychological state of feeling disconnected or isolated, even when one is surrounded by people. It reflects an internal experience in which the individual perceives a lack of social connections or emotional support. For instance, an individual might say "mi sento solo" even in a crowd, indicating that their loneliness stems from a perceived emotional or relational deficiency rather than from being physically alone. However, in everyday Italian language, "sono solo" and "mi sento solo" are used indistinctly to refer to loneliness.

This distinction could significantly impact interviews conducted with children and adolescents regarding loneliness. It is important to recognize the difference between the physical condition ("sono solo") and the emotional state ("mi sento solo") because children's responses may be misinterpreted, leading to inaccurate coding. This linguistic distinction underscores a broader cultural and psychological understanding of loneliness in Italian. It reveals how language can shape and reflect our perceptions of social and emotional states, highlighting the importance of context in communication (Wierzbicka 1999). The differentiation between "sono solo" and "sentirmi solo" implies that loneliness is not only a physical condition but a complex, negative, and emotional experience that can occur irrespective of one's physical surroundings. Moreover, this linguistic expression could also make data difficult to compare across different languages. Understanding and accounting for this linguistic nuance is crucial in ensuring that loneliness is accurately captured across different cultural and linguistic contexts.

1.2 | The Present Study

The main aim of the present study was to explore the meanings and personal experiences of loneliness in children and early adolescents in Italy. Accordingly, we conducted interviews to attempt to offer a more nuanced understanding of the perceptions and experiences of loneliness and the contextual factors that contribute to these feelings. Based on previous research coding interviews with children about loneliness (Galanaki 2008; Hymel et al. 1999), this study aims at replicating and extending in Italy the results that emerged in other cultures. Research suggests that loneliness tends to be lower in individualistic than collectivist countries (see, for a review, Dykstra 2009), although some conflicting results are also evident (e.g., Rokach et al. 2001; van Tilburg et al. 2015). However, most of these studies are conducted with samples of adults. Also, previous studies focus primarily on the analysis of quantitative data, rather than exploring the potential different meanings, perceptions and personal experiences that can emerge from the analysis of interview data.

Accordingly, this study aimed to explore children's and early adolescents' meanings and experiences of loneliness, the intensity of loneliness felt during a loneliness episode described in the interview, and whether children experienced other emotions as well during the loneliness episode. We also examined associations between self-reported intensity of children's experiences of loneliness and their described meaning and personal experiences in loneliness (derived from interviews). Next, we sought to test age and gender differences in meanings, experiences, and intensity of loneliness. Previous studies (Brunetti et al. 2024; Galanaki 2008; Verity et al. 2021) found that antecedents of loneliness may change with age, especially in the transition between primary and middle school (Geukens et al. 2023). Regarding gender, Hymel et al. (1999) reported that girls experienced loneliness as related to rejection and exclusion more than boys. When speaking about loneliness, girls also used more emotional terms than boys (Galanaki 2008). We hypothesized that (1) children and early adolescents will have an understanding of the meaning of loneliness (Cassidy and Asher 1992; Liepins and Cline 2011); (2) younger children (i.e., primary school students) will be more likely to describe loneliness as physical aloneness compared to older ones (i.e., middle school students; Galanaki 2008); (3) girls will have a conceptualization of loneliness as a more emotional state compared to boys, in line with Galanaki (2008) results.

2 | Method

2.1 | Participants

Participants were 139 children and early adolescents (80 girls, 57.6%) aged 8–14 years (M = 10.76 years, SD = 1.71) attending eight primary (i.e., Grades 3–5; M = 9.22 years, SD = 0.85; 67 children, 48.2%) and middle (i.e., Grades 6–8; M = 12.18 years, SD = 0.87; 72 children, 51.1%) schools located in different regions of Italy. Approximately, 96 participants (68%) came from Southern Italy, and 43 (32%) from Central Italy. Of them, five (3.6%) had an immigrant background. Twenty-eight (20.1%) mothers and 43 (30.9%) fathers had a middle school or lower education, and 108 (78.4%) mothers and 91 (65.4%) fathers had a high school or higher level of education (5, 3.6% mothers and fathers did not answer).

2.2 | Procedure

This study is part of a larger project investigating children's socio-emotional functioning in primary and middle schools in Italy. Children's interviews were conducted using *Google Meet* by the lead author and Psychology graduate students (who received special training and practiced their skills using simulated interviews with the supervision of the research group). Participants were informed that the interview would generally last 15–20 min. Participants' responses were transcribed

word-for-word by interviewers, adhering as closely as possible to the source material. Children participated in the interview at home. School and parental written consent were obtained and before the interviews, each child was asked for their oral informed consent. The participants were informed that they would participate in a study about social relationships, friends, and loneliness, and were free to withdraw whenever they wanted. Data were collected after the Covid-19 pandemic. The Research Ethics Board approved this research project at the Department of Developmental and Social Psychology, Sapienza University of Rome.

2.3 | Measures

2.3.1 | Loneliness Interview

Interview questions about children's meanings and experiences of loneliness were developed, drawing upon the content of previous related research in this area (e.g., Galanaki 2008) The questions were designed to assess children's understanding of the construct of loneliness, their personal experience of a specific episode of loneliness, how intensely they felt lonely during this episode, and any other emotions also experienced during this episode. All questions were formulated using language accessible to all children and early adolescents.

The first question (Q1) was open-ended and pertained to children's understanding of the meaning of the word "loneliness" ("Can you try to explain what the word loneliness means to you?"). The second question (Q2) was also open-ended and related to an episode when children personally experienced loneliness ("Can you describe an episode when you felt lonely?"). The third question (Q3) assessed the intensity of loneliness during that episode ("How lonely did you feel then?"), and children were asked to respond on a 3-point scale (1 = *a little*, 2 = *so and so*, 3 = *a lot*). The final question (Q4) was open-ended and related to other emotions felt during the episode they experienced loneliness ("Did you feel other emotions as well then?").

2.4 | Data Coding

The transcripts of the interviews were first thoroughly read by two co-authors. The coding process combined deductive and inductive methodology. An initial set of coding dimensions was developed based on the previous literature about children's perceptions and experiences of loneliness (Galanaki 2008; Hymel et al. 1999). However, additional categories also emerged from the Italian data, suggesting that they capture culture-specific aspects and linguistic nuances inherent to the Italian conceptualization of loneliness. Accordingly, additional categories were also included pertaining to the perception of loneliness as follows: (1) relating to peers versus family; (2) a search for alone time; and (3) viewed in a more positive manner. The different dimensions were not mutually exclusive, meaning that the same response could be coded under more than one dimension.

The final set of coded dimensions was the following (see Table 1). Dimension 1 was labeled the *emotional dimension*, wherein children described loneliness as an emotion, using emotional terms such as "I feel," "feeling." Most often, loneliness was associated with emotions such as sadness and boredom. Dimension 2 pertained to *cognitive appraisals*. Here, children described loneliness by referring to the perception of quantity and quality of their interpersonal relationships and stated that they experienced loneliness. This dimension emphasizes "*children's appraisals of relational provisions*" (Hymel et al. 1999, 87), in terms of their implications about the obtainability of different types of support. In this regard, the cognitive dimension is based on one or more deficits in relational provisions, that is, lack of companionship, inclusion, emotional and material support/safety, affection, reliable alliance, enhancement of worth, and opportunities for nurturance. These provisions were conceptualized by Weiss (1974) and identified in children's perceptions of loneliness (Galanaki 2008; Hymel et al. 1999). However, unlike Galanaki (2008), in this study, Weiss' dimensions were not coded but were used as the basis for coding children's responses under the perceived social deficits dimension of loneliness.

Dimension 3 encompassed *interpersonal contexts*. Children described experiences of separation in different interpersonal contexts that were important to them. This dimension included two subdimensions. *Physical separation* (3a) was coded children referred to being alone in different contexts and for different reasons, not being physically close to important people, being moved from one context to another (e.g., due to a move or school/class change), temporary separations from significant others, and social restrictions (e.g., due to punishment or to the Covid-19 pandemic). *Psychological distancing* (3b) was coded when children's definitions of loneliness included references to concrete experiences of quarrels and conflicts, verbal/nonverbal rejection by the peer group and parents, the ending of relationships with friends, exclusion from a group or activity, and being intentionally or unintentionally ignored. This dimension does not include the simple absence of others, but rather from "*those situations in which children identify or interpret interpersonal actions as the source of their loneliness*" (Hymel et al. 1999, 92).

Dimension 4 pertained to loneliness among *family versus peers*. Here, children referred to loneliness related to family (4a) and/or peers (4b). Dimension 5 considered whether loneliness was *involuntary versus voluntary* (i.e., children perceived loneliness as chosen solitude). Responses containing words as "want," "desire," "decide," "choose," or any other word denoting volition and choice (regardless of references to benefits of solitude) were coded under this dimension. Finally, dimension 6 assessed the potential *positive* aspects of loneliness. This occurred when children explicitly reported a positive feeling related to loneliness. However, due to the small percentage of children mentioning the positive aspects of loneliness (likely due to the aforementioned linguistic factors), we did not include the positive dimension in the main results.

Responses to each of the open-ended questions were coded separately. To establish inter-rater reliability, two co-authors coded 28 (20%) children's responses (for a similar procedure, see Creswell and Plano Clark 2007; O'Connor and Joffe 2020). Agreement between raters using Cohen's kappa coefficient ranged from 0.822 to 1.00, indicating a high level of agreement. Instances of disagreement were resolved via discussion, and the final accorded categories were considered in the present study.

TABLE 1 | Coding dimensions and example quotes.

Dimensions	Quotes
1. Emotional	Q1:*"Loneliness is when you are sad"* Q2:*"In elementary school, many small groups were playing, and I would ask to play, but almost all of them told me no, and I felt lonely and sorry"*
2. Cognitive	Q1:*"For example, loneliness is when you are alone or do not have someone to confide in, to share ideas and thoughts with"* Q2:*"Sometimes there is no one, only my grandmother and grandfather and I had no one and for me it was like they did not love me"*
3a. Physical Separation	Q1: "*Loneliness is a bad thing that we have all experienced in these pandemic years, when you are alone and see no one for a long time"* Q2:*"In general, when I am alone on the bed with my phone for a long time"*
3b. Psychological Distancing	Q1: "*For me, loneliness is when they isolate you"* Q2:*"Maybe when the group breaks up, you know, when friendships end, but you do not understand it"*
4a. Family	Q1: "*[…] when I want to be in company, I don't like this word because I would like to be with some friends or with my parents and, instead, when I have spent so much time with someone and then I want to be alone, then I would also like to be in solitude"* Q2:*"When I had a fight with my family and did not talk to anyone all day"*
4b. Peer	Q1: "*Loneliness to me is a term when you have no friends, you are always at home, closed in a room. Being with a phone, for hours and hours without others or socializing"* Q2: *"At school once my best friend wasn't there and the other friends were playing with each other and I didn't have anyone"*
5. Voluntary	Q1: "*Loneliness can be voluntary or involuntary, I can decide whether to be alone or I am forced"* Q2:*"I was alone when I did not want to be bothered by anyone"*
6. Positive	Q1: *"Loneliness is that feeling you get when you are alone. For me it is a feeling that can be both positive and negative because sometimes when you are alone you feel freedom and sometimes you feel sad"* Q2: *"Let's say there are times when I felt lonely and I was sad and other times when I was peaceful but I can't tell you a particular episode, always though when there was no one with me"*

Note: Q1 = question on loneliness definition; Q2 = question on loneliness personal experience.

2.5 | Data Analysis

After coding the dimensions and testing inter-rater reliability, descriptive analyses were conducted to identify the frequencies and percentages of each dimension. Then, a series of Chi-square tests and ANOVAs were conducted to test grade (age) and gender differences. Lastly, a correlation analysis was used to examine associations between dimensions and the intensity of children's loneliness as reported in the interview.

3 | Results

3.1 | Definitions and Experiences of Loneliness (Q1 and Q2)

The frequencies and percentages for each dimension in children's responses are presented in Table 2. To note, 49 (35.2%) children referred to only one dimension when describing loneliness, 39 (28.1%) children described loneliness using two dimensions, and 44 (31.7%) children described loneliness using more than two dimensions. For the experience of loneliness (Q2), 23 (16.5%) children referred to only one dimension, 44 (31.7%) two dimensions, and 45 (32.4%) two or more dimensions. The remaining children did not report any dimension for Q1 and Q2. Specifically, for Q1, two children (1.4%) did not know the meaning of loneliness (DK), one child refused to answer (0.7%), and four children reported uncodable responses (2.9%). For Q2, 19 children (13.7%) had never experienced loneliness (DE), two children (1.4%) refused to answer, and six children (4.3%) reported uncodable responses[1].

3.1.1 | Emotional Dimension

According to the linguistic specificity of the Italian language, all definitions or expressions of loneliness that included "sentirsi soli" (i.e., feeling lonely) were classified in this category. As shown in Table 2, some children defined loneliness (Q1) by referring to the emotional dimension (e.g., "*Loneliness is when you are sad*," "*Loneliness is when a person feels lonely")*. Similarly, some children referred to emotions when describing their personal experiences of loneliness (Q2; e.g., "*I felt lonely at the beginning of this year because I did not know anyone*," "*In elementary school, many small groups were playing, and I would ask to play, but almost all of them told me no, and I felt lonely and sad*").

TABLE 2 | Frequencies/Percentages for loneliness definitions, loneliness experiences, and associated emotions.

Variables	Dimensions	*f*	%
(Q1) Loneliness definitions	1. Emotional	36	25.9
	2. Cognitive	64	46.0
	3a. Physical Separation	92	66.2
	3b. Psychological Distancing	32	23.0
	4a. Family	3	2.2
	4b. Peer	21	15.1
	5. Voluntary	16	11.5
	6. Positive	7	5.0
	DK	2	1.4
(Q2) Loneliness experiences	1. Emotional	35	25.2
	2. Cognitive	53	38.1
	3a. Physical Separation	45	32.4
	3b. Psychological Distancing	51	36.7
	4a. Family	22	15.8
	4b. Peer	52	37.4
	5. Voluntary	5	3.6
	6. Positive	1	0.7
	DE	19	13.7
(Q4) Other emotions during loneliness experiences	Sadness	68	48.9
	Anger	31	22.3
	Boredom	6	4.3
	Happiness	5	3.6
	Fear	4	2.9
	Other emotions	12	8.6
	Nothing else	39	28.1

Note: Nothing else = no other emotion experienced during loneliness episode.
Abbreviations: DE, do not experience; DK, do not know.

3.1.2 | Cognitive Dimension

In their descriptions of the meaning of loneliness (Q1), as shown in Table 2, children reported the *cognitive* dimension (e.g., "*Loneliness means not feeling understood or perhaps when you need someone by your side*," "*For example, loneliness is when you are alone or do not have someone to confide in, to share ideas and thoughts with*"). When describing their personal experience of loneliness (Q2), responses from children and early adolescents included statements related to the cognitive dimension (e.g., "*Last night, because I had no one to play with*," "*Sometimes there is no one, only my grandmother and grandfather and I had no one and for me it was like they did not love me*").

3.1.3 | Interpersonal Contexts Dimension

Regarding the first subdimension of the interpersonal contexts dimension, that is, *physical separation*, as shown in Table 2, children defined loneliness (Q1) as being physically separated from others (e.g., "*Loneliness is when you are alone*," "*Loneliness is a bad thing that we have all experienced in these pandemic years, when you are alone and see no one for a long time*"), and included aspects of this dimension in the descriptions of their personal experiences of loneliness (Q2; e.g., "*In general, when I am alone on the bed with my phone for a long time*," "*Last year, when I had broken my arm and got Covid and could not be with others. I was lonely because I could see others going out and I was alone*"). According to the linguistic specificity of the Italian language, all meanings or experiences of loneliness that included "essere soli" (i.e., being alone) were classified in this category. In addition, some children referred to the Covid-19 pandemic when talking about their physical separation.

As to the second subdimension, that is, *psychological distancing*, children's definitions of loneliness (Q1) included references to psychological distancing (e.g., "*To me, it represents like feeling alone, without anyone, abandoned*," "*For me, loneliness is when they isolate you*"), as well as to their personal experiences of loneliness (Q2; e.g., "*When I fought with some of my friends because I cared so much about them*," "*Maybe when the group*

breaks up, you know, when friendships end, but you do not understand it").

3.1.4 | Family Versus Peers Dimension

In the meaning of loneliness (Q1), as indicated in Table 2, peer-related loneliness was much more prevalent than family-related loneliness. For example, in their definitions of loneliness, children mentioned peers (e.g., "*Loneliness is when you are alone, you do not have friends*," "*Loneliness to me is a term when you have no friends, you are always at home, closed in a room. Being with a phone, for hours and hours without others or socializing*"). In contrast, only a few children described family-related loneliness (e.g., "*It is when you have no relatives… my father once said that those who are alone are already dead…, this is what it means*," "*[…] when I want to be in company, I don't like this word because I would like to be with some friends or with my parents and, instead, when I have spent so much time with someone and then I want to be alone, then I would also like to be in solitude*"). Similarly, when describing their personal experiences of loneliness (Q2), some children referred to peers (e.g., "*At school once my best friend wasn't there and the other friends were playing with each other and I didn't have anyone*," "*When I am with my friends and they do not pay attention to me*"), and some children mentioned their family (e.g., "*When I had a fight with my family and did not talk to anyone all day*," "*Sometimes I feel lonely after school when I go home, and my parents are not there*").

3.1.5 | Voluntary Versus Involuntary Dimension

Regarding the voluntary dimension, it is worth noting that loneliness is an emotional state; however, children cannot consider the differences between loneliness and solitude. Therefore, to the question "Can you try to explain what the word loneliness means to you?" and "Can you describe an episode when you felt lonely?," children may answer referring to solitude, because of the aforementioned linguistic specificity. Overall, as indicated in Table 2, children defined loneliness (Q1) by referring to its voluntary dimension (e.g., "*Loneliness can be voluntary or involuntary, I can decide whether to be alone or I am forced*," "*When one is without others or when one wants to be without others*"). Also, children included the voluntary dimension in their personal experience of loneliness (Q2; e.g., "*I was alone when I did not want to be bothered by anyone*," "*No, I have never been lonely. Sometimes I prefer to be alone*").

Finally, about 1.4% and 13.7% of children and early adolescents stated that they did not know what loneliness means and that they had never experienced it, respectively.

3.2 | Self-Reported Intensity of Loneliness (Q3) and Associations With Dimensions

When asked about the intensity of their own loneliness experiences, 10% of children and early adolescents reported feeling "a little" lonely, 50.4% reported "so and so" lonely, and 22.3% of participants reported feeling "a lot" lonely. Overall, participants reported average levels of intensity of loneliness ($M = 1.15$, SD = 0.61). An amount of 13.7% of participants reported that they had never experienced loneliness; therefore, they did not report their associated emotions. Finally, 4.4% of participants did not answer this question.

We next tested the association between the intensity of loneliness felt by the participants in recounting their personal experience and dimensions about the meanings (Q1) and the personal experience (Q2) of loneliness. Results indicated a significant and positive correlation between intensity and psychological distancing dimension ($r = 0.19$, $p = 0.047$), suggesting that those who reported the psychological dimension reported more intensity in their loneliness experiences. Also, a significant and negative correlation was found between intensity and family loneliness ($r = -0.18$, $p = 0.047$), suggesting that those less likely to report the family loneliness dimension also had more intense loneliness experiences. Finally, a significant and positive correlation was found between intensity and peer loneliness ($r = 0.24$, $p = 0.009$), suggesting that those more likely to report peer loneliness also had more intense loneliness experiences. No other significant associations were found.

3.3 | Emotions Associated With Loneliness (Q4)

Table 2 lists the emotions experienced by children and early adolescents during their episodes of loneliness. The most common emotion, reported by just under half of the sample, was *sadness*. Almost a quarter of respondents mentioned *anger*. The other emotions, less frequently mentioned, were boredom, happiness, and fear. Finally, about 30% of participants said they felt no other emotions than loneliness in their personal experience.

3.4 | Grade and Gender Differences

In line with previous literature (Galanaki 2008), we conducted Chi-square tests and ANOVAs to investigate grade (i.e., primary school, middle school) and gender differences (see Tables 3 and 4). Regarding Q1, statistically significant grade differences were found only in the cognitive dimension and in the physical separation subdimension of the interpersonal contexts dimension (see Table 3). Specifically, middle-school students defined loneliness using the cognitive dimension more frequently than primary school students. Moreover, primary school students were more likely to define loneliness using the physical separation subdimension than middle-school students. No other statistically significant grade or gender differences were found.

Regarding Q2, results from Chi-square tests showed only one statistically significant gender difference in the physical separation subdimension of the interpersonal contexts dimension (see Table 3). Boys were more likely than girls to report that they experienced loneliness as physical separation from others. No other statistically significant grade or gender differences were found.

In addition, we conducted ANOVAs to test for grade and gender differences in the intensity of loneliness during the

TABLE 3 | Grade differences in loneliness definitions, loneliness experiences, and associated emotions.

		Grade				
		Primary school $n = 67$	Middle school $n = 72$			
Variables	**Dimensions**	***f***	***f***	χ^2 **(1, $N = 139$)**	***p***	**Fisher's exact test**
(Q1) Loneliness definitions	1. Emotional	14	22	1.820	0.177	
	2. Cognitive	20	44	14.301	<0.001	
	3a. Physical Separation	51	41	5.236	0.022	
	3b. Psychological Distancing	14	18	0.384	0.535	
	4a. Family	2	1			0.578[a]
	4b. Peer	12	9	0.732	0.392	
	5. Voluntary	5	11	2.169	0.141	
(Q2) Loneliness experiences	1. Emotional	13	22	2.292	0.130	
	2.Cognitive	23	29	0.522	0.470	
	3a. Physical Separation	20	25	0.374	0.541	
	3b. Psychological Distancing	21	30	1.594	0.207	
	4a. Family	11	11	0.035	0.852	
	4b. Peer	20	32	3.167	0.075	
	5. Voluntary	3	2			0.465[a]
(Q4) Other emotion during loneliness experience	Sadness	28	40	0.288	0.591	
	Anger	15	16	1.360	0.244	
	Boredom	2	4			0.216[a]
	Happiness	4	1			0.281[a]
	Fear	3	1			0.422[a]

[a]Nonsignificant.

reported loneliness episode. Results indicated that there were no statistically significant differences for grade, $F(1, 114) = 0.70$, $p = 0.41$, $\eta_p^2 = 0.01$, nor gender, $F(1, 115) = 0.61$, $p = 0.44$, $\eta_p^2 = 0.01$.

Also, we conducted Chi-square tests to examine grade and gender differences in the type of emotion experienced by children and early adolescents during the loneliness episode. As shown in Tables 3 and 4, no statistically significant grade or gender differences were found.

Finally, we tested differences in the number of categories mentioned by participants separately for each grade (0 = *primary school*; 1 = *middle school*) and gender (0 = *boys*; 1 = *girls*) for each question of the interview (Q1 and Q2). For both Q1 and Q2, the range of the dimensions reported by participants was from 0 to 5. Regarding age differences, results for Q1 did not indicate any significant differences in the number of categories between primary ($M = 1.82$, SD = 1.10) and middle school ($M = 2.06$, SD = 1.03) participants, $F(138) = 1.68$, $p = 0.197$, $\eta_p^2 = 0.01$. For Q2, results indicated that primary student participants ($M = 1.66$, SD = 1.25) reported significantly fewer categories than middle student participants ($M = 2.12$, SD = 1.32), $F(138) = 4.59$, $p = 0.034$, $\eta_p^2 = 0.03$.

Regarding gender differences, for Q1, results did not show a significant difference in the number of categories mentioned by boys ($M = 1.88$, SD = 1.00) and girls ($M = 1.98$, SD = 1.11), $F(138) = 0.33$, $p = 0.565$, $\eta_p^2 = 0.00$. Similar to Q2, no significant difference was found in the number of categories mentioned by boys ($M = 2.10$, SD = 1.23) and girls ($M = 1.89$, SD = 1.34), $F(138) = 2.49$, $p = 0.116$, $\eta_p^2 = 0.02$.

4 | Discussion

The current study explored children's and early adolescents' definitions and experiences of loneliness, examining how they conceptualize this complex emotion, when they feel lonely, and whether gender and grade affect these perceptions. The present study provides a nuanced understanding of how loneliness is defined and experienced in late childhood and early adolescence.

4.1 | Loneliness as a Multidimensional Construct

Overall, our findings reinforce the notion that loneliness is a multidimensional construct that can be described through physical,

TABLE 4 | Gender differences in loneliness definitions, loneliness experiences, and associated emotions.

		Gender				
		Girls $n = 80$	Boys $n = 59$			
Variables	**Dimensions**	f	f	χ^2 $(1, N = 139)$	p	**Fisher's exact test**
(Q1) Loneliness definitions	1. Emotional	23	13	0.798	0.372	
	2. Cognitive	39	25	0.556	0.456	
	3a. Physical Separation	51	41	0.500	0.479	
	3b. Psychological Distancing	22	10	2.133	0.144	
	4a. Family	1	2			0.613[a]
	4b. Peer	9	12	2.187	0.139	
	5. Voluntary	9	7	0.013	0.911	
(Q2) Loneliness experiences	1. Emotional	22	13	0.603	0.437	
	2. Cognitive	30	23	0.015	0.904	
	3a. Physical Separation	19	26	6.158	0.013	
	3b. Psychological Distancing	28	23	0.182	0.670	
	4a. Family	10	12	1.487	0.223	
	4b. Peer	28	24	0.394	0.530	
	5. Voluntary	2	3			0.364[a]
(Q4) Other emotion during loneliness experience	Sadness	36	32	0.096	0.757	
	Anger	13	18	0.299	0.585	
	Boredom	3	3			0.582[a]
	Happiness	1	4			0.135[a]
	Fear	1	3			0.251[a]

[a]Nonsignificant.

emotional, cognitive, interpersonal, and voluntary dimensions, and can also refer to both peers and family members. Participants referred to different dimensions of loneliness both when answering questions regarding its definition/meaning, as well as when describing their personal experiences of loneliness. Yet, different patterns were observed across these two contexts. For example, most children and early adolescents defined loneliness as referring to *physical* separation from others. However, when describing their own personal experience of loneliness, most participants referred to the cognitive dimension, reflecting a perception of lack of companionship, inclusion, emotional and material support/safety, affection, reliable alliance, enhancement of worth, and opportunities for nurturance.

When asked about the meaning of loneliness (Q1), nearly half of the participants referenced cognitive dimensions in their definitions (i.e., perceived difficulties in quantity and quality of their social relationships), and a quarter of them highlighted the emotional nuance of loneliness (i.e., using emotional terms). Indeed, consistent with previous literature (Galanaki 2008; Qualter et al. 2015; Verity et al. 2021), children in our study often described loneliness not only in terms of emotional state, but also as representing a lack of cognitive and social connections.

A quarter of participants also defined loneliness in terms of psychological distancing (e.g., conflicts, verbal/nonverbal rejection, peer exclusion, being ignored). In line with previous studies, loneliness is not just a state of physical isolation, but can also result from interpersonal actions such as conflicts and social rejection (Weiss 1974). Previous studies have also confirmed that peer rejection and feelings of exclusion are among the main causes of loneliness in adolescents (e.g., Asher and Paquette 2003).

Finally, participants were more likely to mention peers than family in their definition of loneliness. In line with previous findings, during early adolescence, youth tend to transition into a period of greater psychological distance from parents, whereas peers become more essential sources of companionship, providing a sense of security and support (Goossens 2018). In this transition, problems in peer relationships could increase the risk of experiencing loneliness (Hemberg et al. 2022; Schwartz-Mette et al. 2020).

In line with this assertion, a small percentage of participants in the current study referred to a dimension of loneliness associated with their family. Previous literature suggests that during this developmental period, changes take place in the choice of social

partners, with adolescents tending to spend less time with family members and more time with peers (Larson and Richards 1991). Despite spending more time overall with peers, for some young people, perceived poor parental support could intensify feelings of loneliness (DeLay et al. 2013; Goossens 2012).

However, as noted, participants' descriptions of their personal experiences of loneliness evidenced a different distribution of dimensions. For example, the dimensions most mentioned by participants in this regard included cognitive, peer, and psychological distance, all concern peers and friends. Notwithstanding, children and early adolescents describing their own experiences of loneliness continued to refer mostly to peers compared family. Related to this, children and early adolescents who reported experiencing more intense feelings of loneliness during their recounted episode were also more likely to refer to peers (peer dimension) and the deficiencies in interpersonal relationships with peers (psychological distancing dimension). In contrast, children and early adolescents who refer to family dimension in the second question (Q2) experienced also less loneliness. These results need further investigation, but they add to the considerable previous research highlighting the critical role of friends in experiences of loneliness (e.g., Schwartz-Mette et al. 2020).

For questions about both definitions and personal experiences of loneliness, the emotional dimension was mentioned by approximately one quarter of participants. These results are in line with previous studies (Qualter et al. 2010; Vanhalst et al. 2015), suggesting that loneliness is closely related to negative emotional states. This may reflect the weight that the affective dimension has in the construction of experiences of loneliness for some individuals, even though it is not the main focus for the majority. Moreover, given that only a minority of participants highlighted this dimension suggests that loneliness can be experienced in many different ways (likely depending on individual sensitivities and prior experiences) and provides further evidence of the multidimensionality of this construct.

Finally, a small percentage of children and early adolescents also referred (both in Q1 and Q2) to loneliness using a *voluntary* dimension. This aspect of loneliness is better denoted by the English word "solitude." This result could be taken as evidence that some children and early adolescents in Italy understand the construct of loneliness differently than it is conceptualized by researchers and clinicians. However, it seems likely that these results also speak to the aforementioned unique linguistic context of Italy (i.e., children may respond to a question about loneliness while meaning solitude). Indeed, the voluntary dimension includes all responses that relate to being physically alone. Their responses were coded as a voluntary dimension precisely because, for them, loneliness includes being physically alone, and they therefore happen to seek it voluntarily.

It is well established that some children and early adolescents want, desire, and are motivated to spend time alone. Individuals who enjoy and value solitude are referred to "unsociable" or having an "affinity for solitude" (Coplan et al. 2019). These findings could reflect the potential positive aspects of solitude as a context for the development of self-regulation (Katz and Buchholz 1999), autonomy (Winnicott 1958), and self-exploration (Goossens 2014). Indeed, previous researchers have highlighted that *choosing* to spend time alone more often leads to positive experiences, including freedom, calmness, and personal growth (Hemberg et al. 2022). However, in the present study, we did not specifically explore different aspects of children's motivations for solitude or associated positive emotions and experiences.

Following up on this, a small percentage of participants mentioned positive emotions such as happiness in response to loneliness, suggesting that some children may view solitude as a desirable or neutral state. This aligns with the voluntary dimension of loneliness discussed in the study, where children indicated that loneliness can sometimes be self-imposed and not necessarily negative. A recent study by Maes and Vanhalst (2025) highlighted the adaptiveness of loneliness if its duration is limited in time. However, more studies are needed to explore further the duration, frequency, and intensity of loneliness. Overall, the finding of this study highlights the importance of distinguishing between loneliness and aloneness, particularly in cultures like Italy, where linguistic differences may blur these concepts.

Also, sadness emerged as the most commonly reported emotion associated with loneliness, followed by anger. This finding mirrors previous research indicating that loneliness in children and adolescents is often linked to negative affect, particularly sadness and frustration (Qualter et al. 2015; Verity et al. 2024). Indeed, as aforementioned, loneliness is not only robustly associated with mental and physical health (e.g., Achterbergh et al. 2020; Calandri et al. 2021; Danneel et al. 2020; Eccles et al. 2020), but also damages children's school adjustment, predicting school drop out and victimization at school (Jefferson et al. 2023). Overall, the high prevalence of sadness underscores the emotional toll that loneliness can have during childhood and adolescence, further supporting the need for early interventions to help young people cope with feelings of isolation. Finally, some participants reported that they felt no other emotions than loneliness in their personal experience. This result may suggest the overwhelming nature of loneliness, which can obscure the perception of other emotions (Cacioppo and Patrick 2008; Dejonckheere et al. 2019). However, findings from previous studies affirm how loneliness implies an increase in negative emotions and a decrease in positive emotions (e.g., Luo and Shao 2023). Our results may be due to participants' limited emotional awareness or vocabulary, especially if they are young or lack the tools to identify and label complex emotional states. Also, this result highlights the importance of promoting emotional competence, particularly in the school years, to help individuals better recognize and articulate their emotional experiences.

Overall, as we hypothesized, findings suggest that even at a young age, children are aware of the complex nature of loneliness, recognizing that it extends beyond simply being physically alone and characterized by different emotions. The Italian linguistic characteristics, distinguishing between *essere soli* (being physically alone) and *sentirsi soli* (feeling lonely), played a role in how children described and felt their experiences. This distinction is critical, as it highlights the possibility that children may conflate loneliness with solitude due to linguistic patterns, which may lead to varied interpretations of loneliness across cultures. Such linguistic nuances should be considered

when conducting cross-cultural comparisons, as they can influence how loneliness is expressed and understood.

4.2 | Grade and Gender Differences

Our results revealed some significant grade-related differences in how loneliness is defined and experienced. Specifically, as we hypothesized, middle school students were more likely to describe loneliness using cognitive dimensions, whereas primary school students more often focused on physical aspects, such as being alone. In addition, middle-school students referred to a greater number of dimensions when describing their personal experiences of loneliness. This aligns with our hypothesis and previous findings, based on interview methods, indicating that with advancing age, children tend to define loneliness in more complex and abstract ways, whereas younger children are more likely to conceptualize loneliness as primarily associated with physical separation from others (Galanaki 2008; Verity et al. 2021). For example, Galanaki (2008) found a trajectory of perceptions of loneliness, starting with the notion of loneliness as physical aloneness during childhood and evolving into the more complex understanding of loneliness (e.g., due to more complicated emotions, arising from experiencing problematic relationships with others) during the transition to adolescence.

Regarding gender differences, we found that boys were more likely than girls to describe their personal experiences of loneliness in terms of physical separation. This result is consistent with previous studies and our hypothesis that boys may focus more on external, observable factors when discussing emotions, whereas girls may emphasize relational and emotional aspects (e.g., Goossens 2018). Similarly, Galanaki (2008) reported that girls were more likely than boys to describe and perceive emotional aspects of loneliness, and Verity et al. (2021) found that boys did not display their feelings regarding loneliness as much as girls.

Of note, there were no significant gender differences in the *intensity* of loneliness experienced in a specific episode, suggesting that both boys and girls are equally vulnerable to the emotional impact of loneliness. Previous studies have reported mixed results in this regard. There is some evidence that girls are more likely to report feelings of loneliness than boys (e.g., Rönkä et al. 2018; Sauter et al. 2020). However, other studies reported that boys experienced higher levels of loneliness than girls or did not find any differences between boys and girls (e.g., Maes et al. 2019).

4.3 | Strengths, Limitations, and Implications for Future Research and Practice

The present study explored the definitions and personal experiences of loneliness among children and early adolescents in Italy. Using interviews, our approach offered an understanding of the perceptions and experiences of loneliness in youths. However, some limitations should be considered with an eye toward future studies. First, the study explores loneliness only in late childhood and late adolescence. In this regard, our future studies should broaden the age range of the sample, exploring loneliness in both younger and older participants. Also, other types of data could improve future research by adding more nuanced information about the experience of loneliness, such as a daily diary. Indeed, the daily diary offers a more in-depth assessment because it allows researchers to study both individuals' experiences and behavior within their natural contexts and processes that unfold within individuals over time and that may affect children's and adolescents' loneliness experiences daily (Lischetzke and Könen 2021).

In the present study, participants were free to answer questions about loneliness, but interviewers did not ask follow-up questions or probe to elicit more elaborate responses. Accordingly, in the future, we should delve more deeply into the participants' answers to better understand the difference between being alone and feeling lonely. Indeed, the specificity of the Italian language regarding loneliness and solitude seems to play a crucial role in shaping the way children and adolescents describe loneliness in interviews. Future research should account for linguistic variations when designing cross-cultural studies on loneliness to ensure that findings are comparable across different languages and cultures. Compared to previous studies, our study did not assess coping strategies for dealing with feelings of loneliness (Burke et al. 2024; Verity et al. 2021). In line with the reaffiliation motive (RAM) theory that represents the motivation to reconnect with others triggered by perceived social isolation (Qualter et al. 2015), there is a need for more systematic exploration of children's and adolescents' strategies for reconnecting with others (e.g., shared activities, allies with close friends, sense of being).

Finally, our study did not delve into the different types of activities participants engaged in when they reported feeling lonely. Different activities may impact upon individuals' experiences of solitude (McVarnock et al. 2025). Technology use appears to be an increasingly important factor to be taken into account (e.g., Dienlin & Johannes 2020). However, there are conflicting results in the literature with regard to the effects of technology (Smith et al. 2021). On the one hand, Hipson et al. (2021) found that screen time was the most common solitary activity among adolescents, which can have a negative influence on adolescents' social relationships (Benvenuti et al. 2023). On the other hand, Liu et al. (2018) found that when belonging was a central motivating factor for social media users, positive feelings and a sense of community increased. Future research on loneliness and solitude should continue to explore the implications of *what* adolescents do when they are alone.

Notwithstanding, our findings have several potential implications for both theory and practice. First, the multidimensional nature of loneliness underscores the need for interventions that address both the emotional and cognitive aspects of loneliness, particularly as children transition into adolescence. Indeed, a meta-analysis conducted by Eccles and Qualter (2021) found that the interventions that focused on social and emotional training and learning new skills yielded the greatest effect size for youth in reducing loneliness. However, a previous study reported that increasing the amount of social contact alone does not necessarily address the adverse conditions that can maintain loneliness (Hickin et al. 2021). Interventions addressing loneliness should identify the best possible ways, mechanisms, and contexts for helping children and adolescents overcome loneliness. Second, the grade and gender differences suggest that interventions should be tailored to different developmental

stages and potentially gender-specific needs. Third, the linguistic bias observed in the Italian language highlights the importance of considering cultural and linguistic factors when studying loneliness, particularly in cross-cultural research. By being aware of such specificities, researchers can better design studies and interpret results across different cultural contexts.

In conclusion, this study adds to the growing body of research on childhood and adolescent loneliness by providing a detailed exploration of how young people define and experience this complex emotion. The findings emphasize the importance of considering developmental, gender, and cultural factors when studying loneliness and suggest that interventions should be tailored to address the diverse ways in which loneliness manifests in young people.

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Conflicts of Interest

The authors declare no conflicts of interest.

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Ethics Statement

The study was reviewed and approved by the Ethics Committee of the Department of Developmental and Social Psychology, Sapienza University, Rome, Italy.

Data Availability Statement

The dataset for this original article is available as supporting material.

Endnotes

[1]We considered children's responses *uncodable* if they could not be included in any of the dimensions because they deviated from the questions (e.g., children answered without considering the meaning of the question that was asked). Responses of children who refused to answer or reported uncodable responses were not included in the following analyses (i.e., Tables 2–4).

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Supporting Information

Additional supporting information can be found online in the Supporting Information section.

Supporting File 1: sode70035-sup-0001-Dataset-SD.xlsx