Sunlife | Ipsos

NEW RESEARCH BROUGHT TO YOU BY SUNLIFE

Missing connection

Loneliness, health and work



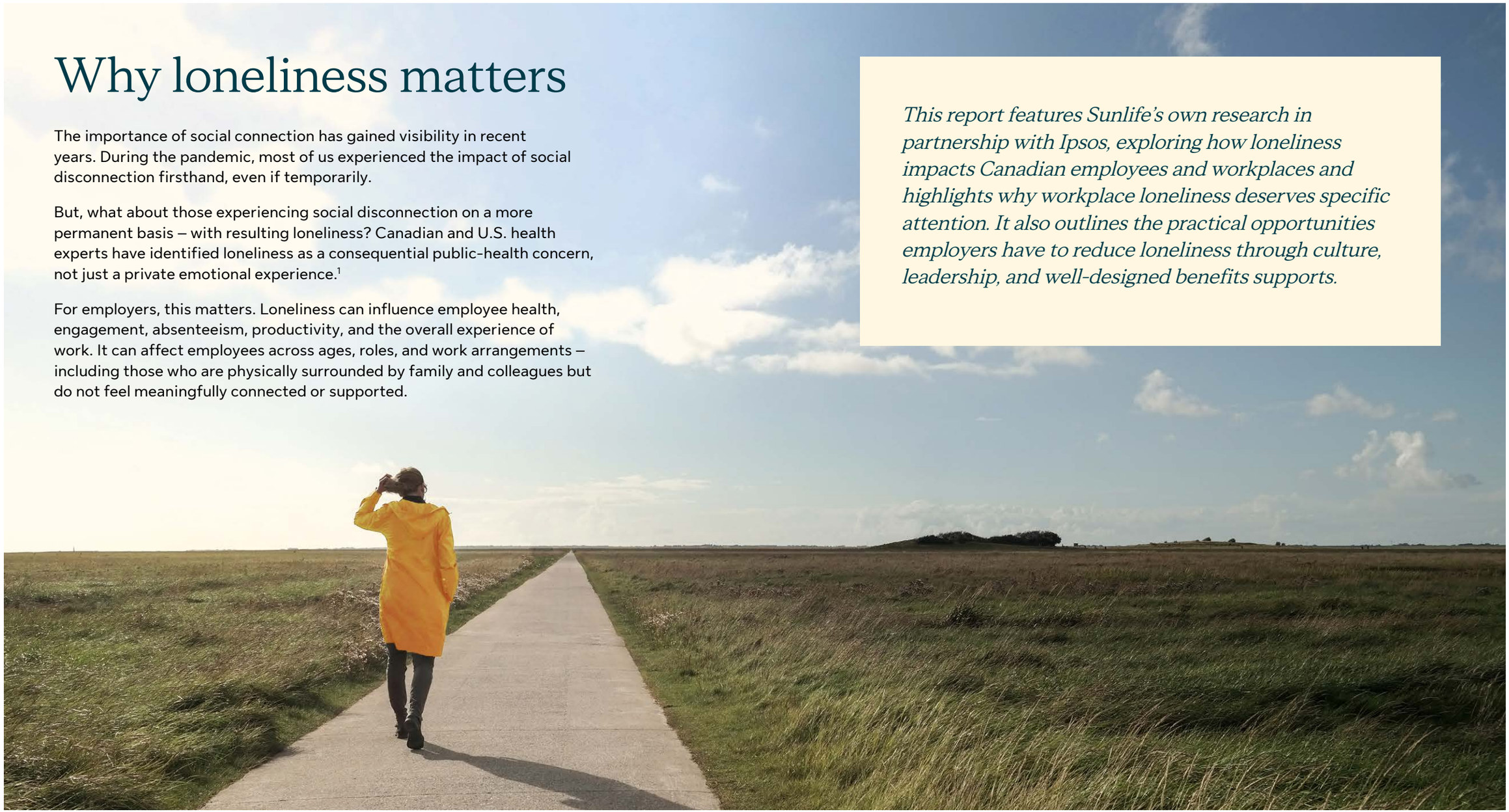
Why loneliness matters

The importance of social connection has gained visibility in recent years. During the pandemic, most of us experienced the impact of social disconnection firsthand, even if temporarily.

But, what about those experiencing social disconnection on a more permanent basis – with resulting loneliness? Canadian and U.S. health experts have identified loneliness as a consequential public-health concern, not just a private emotional experience.[1]

For employers, this matters. Loneliness can influence employee health, engagement, absenteeism, productivity, and the overall experience of work. It can affect employees across ages, roles, and work arrangements – including those who are physically surrounded by family and colleagues but do not feel meaningfully connected or supported.

This report features Sunlife's own research in partnership with Ipsos, exploring how loneliness impacts Canadian employees and workplaces and highlights why workplace loneliness deserves specific attention. It also outlines the practical opportunities employers have to reduce loneliness through culture, leadership, and well-designed benefits supports.



Loneliness defined

The World Health Organization defines loneliness as **a subjective, distressing feeling that arises when there is a gap between the social connections a person has and those they want or need**.[2] While solitude is voluntary (people can be alone and not feel lonely), loneliness is marked by negative feelings of isolation and disconnection, even if an individual has contact with other people. Indeed, we can feel emotionally isolated and disconnected in a crowd, in a romantic relationship, or among friends.

There is also a related feeling within an employment context: work loneliness. **Employees feel work loneliness when they perceive poor quality relationships and connections with their co-workers and their organization**, even when they are physically surrounded by other employees.

A public health and workplace health issue

The negative impacts of loneliness are eye-opening. A 2021 study found that 49% of frequently lonely Canadians rated their mental health as fair or poor, versus 7% among those rarely or never lonely.

Loneliness impacts physical health too. The World Health Organization reported that loneliness and social isolation were associated with a 29% greater risk of cardiovascular disease, a 32% greater risk of stroke, and a 14% to 32% greater risk of mortality.[3]

Not surprisingly, loneliness is also associated with significant workplace impacts, including lower engagement, poor job performance, and higher rates of absenteeism.[4]



15

cigarettes a day

The risk of premature death from lack of social connection is equivalent to the risk of smoking 15 cigarettes a day.[5]

2X

more likely to want to quit their job

Lonely employees were found to be two times more likely to say they intend to quit their job in the next 12 months compared to employees who didn't identify as lonely.[6]

Gaining a better understanding through research

Despite growing attention to loneliness, there is still limited detailed research on how it impacts Canadian employees. We wanted to better understand the impacts, the potential drivers, the ways that loneliness may affect work and importantly, how we can help employees feel more connected.

To conduct this research, we partnered with Ipsos to survey of **over 3,000 Canadians** employed full-time between the ages of 18 and 65 years old. The survey was focussed on employee experiences with loneliness, including work loneliness. See **About the research**.

The distinction between **general loneliness and work loneliness** matters because they can point to different employer actions. General loneliness may be shaped by life circumstances, health, finances, caregiving, or social connections outside work.

Work loneliness, however, is more directly tied to the employee experience, including the quality of relationships, manager support, recognition, and workload. Measuring both helps employers understand whether they need to strengthen broader health and well-being supports, address workplace culture and leadership practices, or do both.

We measured loneliness by drawing on two validated research-based measures:

General loneliness

Our research incorporated the University of California, Los Angeles (UCLA) Three-Item Loneliness Scale. It's a standard, widespread screening tool used by researchers to measure an individual's subjective feelings of loneliness and perceived social isolation across three core dimensions: relational connectedness (the presence or lack of deep, intimate bonds), social connectedness (the feeling of belonging to a broader community or group), and self-perceived isolation (the painful feeling of being shut out, left out, or lacking companionship).

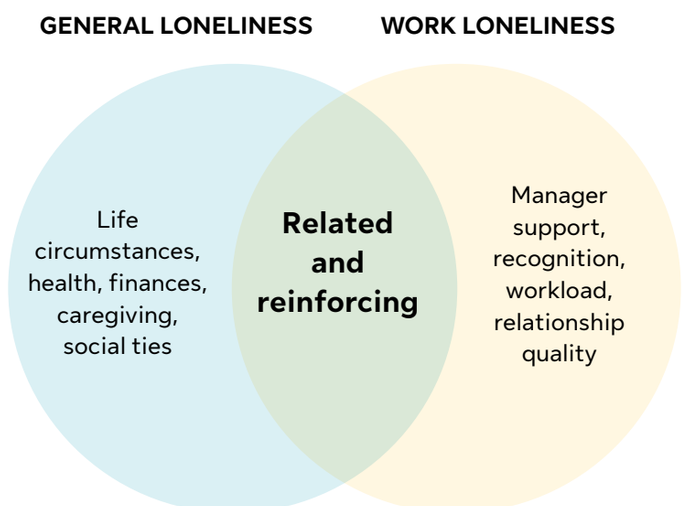
For the purpose of this report, we refer to this as measuring general loneliness.

Work loneliness

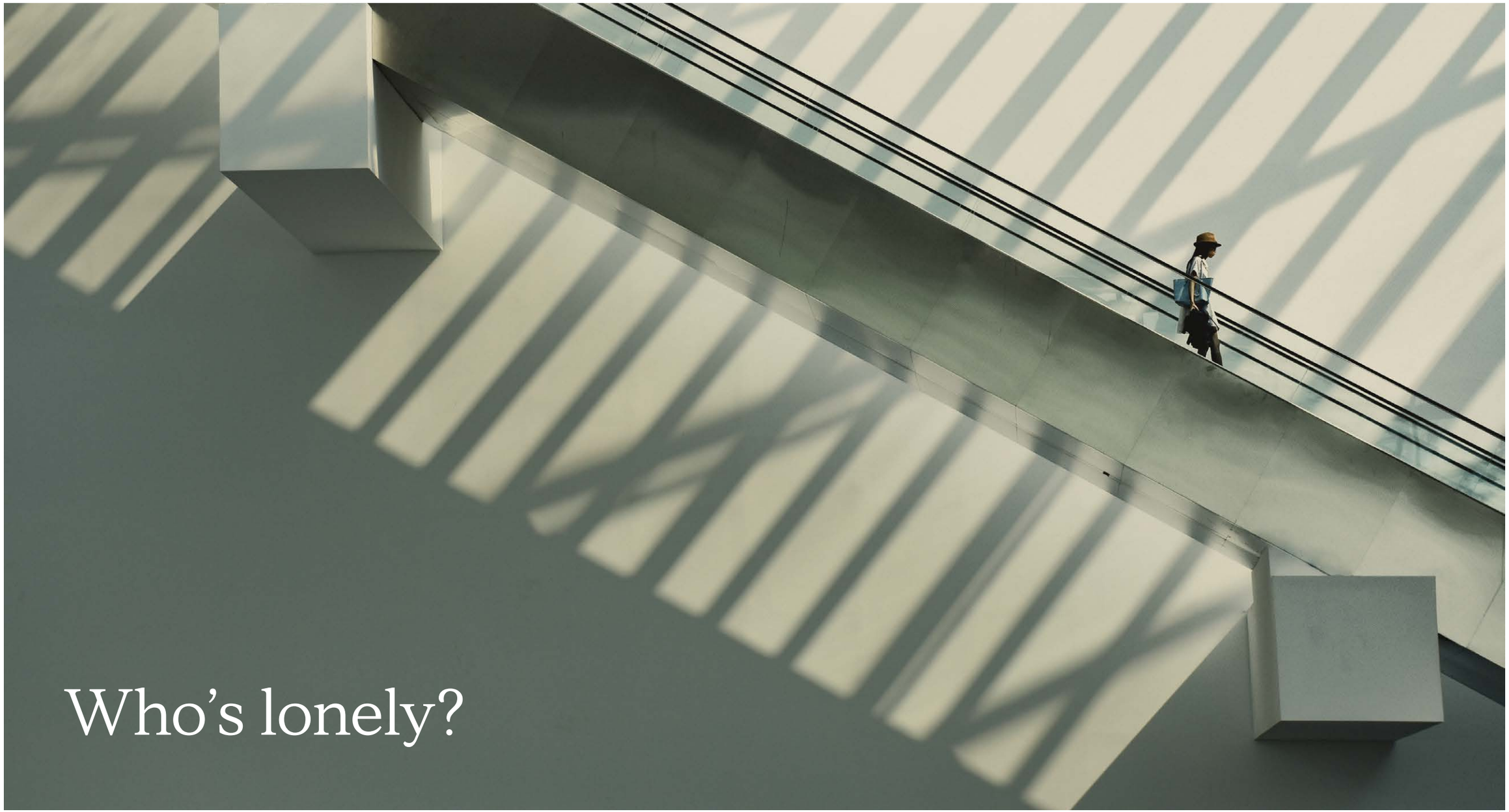
To specifically measure work loneliness, we adapted the Work Loneliness Scale,[7] a tool developed by organizational-behaviour scholars. It's a practical five-item self-assessment of whether someone feels genuinely connected, understood, included, and supported in their work.

For the purpose of this report, we refer to this as measuring work loneliness.

Two kinds of loneliness — and employers can influence both



Measuring both helps employers know where to act on culture, on benefits, or on both.



Who's lonely?

Loneliness – a common experience among Canadian employees

Loneliness is a widespread issue with almost six in ten employees reporting moderate or high levels of general as well as work loneliness. Younger employees report higher rates of loneliness across both general and work contexts.

Our research found that just over one-fifth (21%) of employees reported high general loneliness and 37% reported moderate levels (Figure 1).

For employers, this suggests loneliness is not limited to a small group of employees in crisis. It's a widespread workforce issue that may be affecting health, engagement, and day-to-day performance.

Work loneliness was even more common, with 64% of employees reporting moderate or high levels. While only 6% fell into the high work loneliness category, the larger moderate group is important (Figure 2). Our research found that both high and moderate levels of loneliness (general and work loneliness) were often associated with much lower ratings of health and work performance compared to employees with low loneliness.

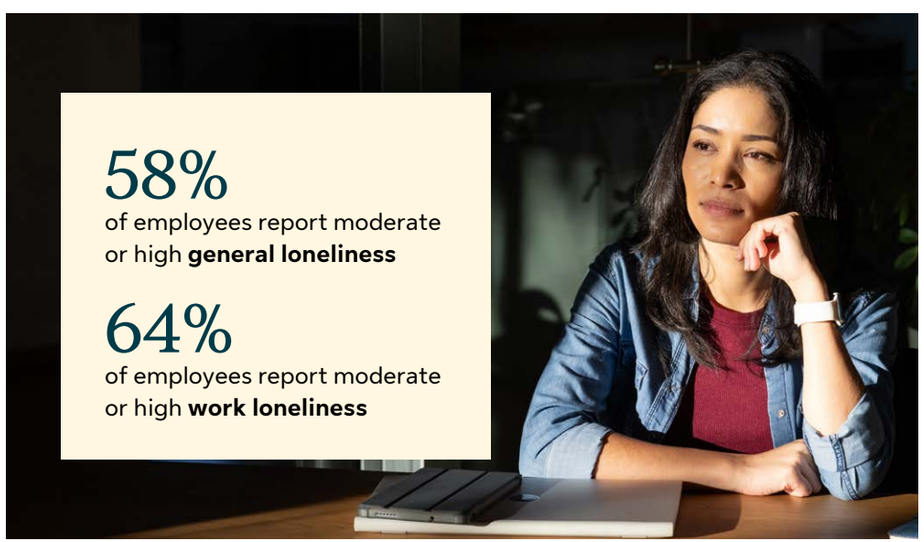
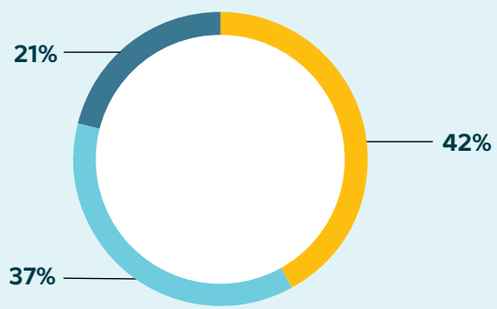


FIGURE 1

General loneliness

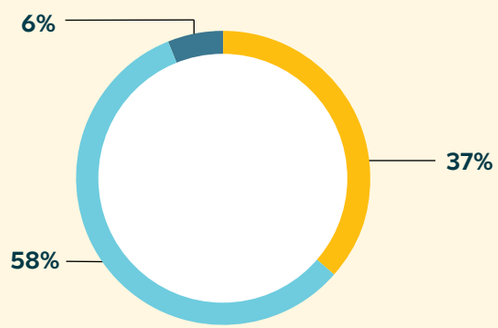


- Low general loneliness
- Moderate general loneliness
- High general loneliness

Source: Sunlife - Ipsos national survey of Canadian employees, 2026

FIGURE 2

Work loneliness



- Low work loneliness
- Moderate work loneliness
- High work loneliness

Source: Sunlife - Ipsos national survey of Canadian employees, 2026

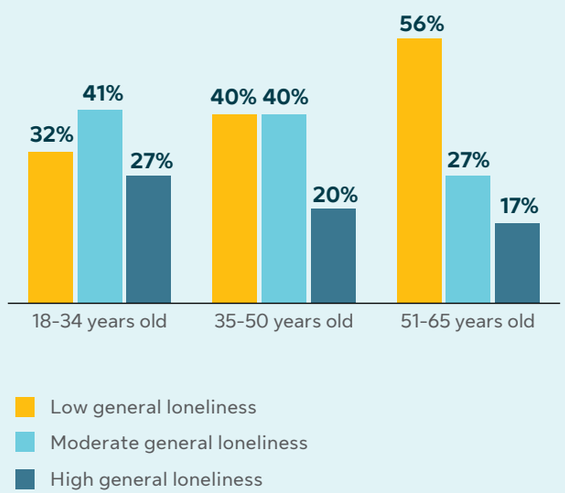
Younger employees are often the most lonely

We found that younger employees (those under 35 years old) reported higher rates of high and moderate general loneliness than older cohorts (Figure 3). This matters because early-career employees are still building their professional identity, workplace relationships, confidence, and sense of belonging. These are all factors that can shape longer-term engagement and retention.

This trend carried over to work loneliness, though high work loneliness was almost identical across age groups (Figure 4).

FIGURE 3

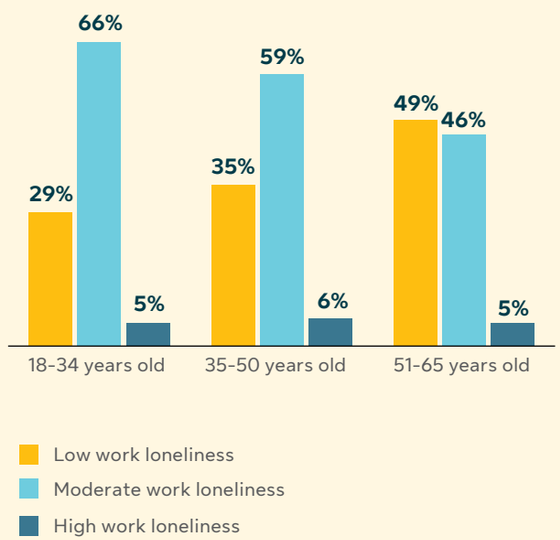
General loneliness



Source: Sunlife - Ipsos national survey of Canadian employees, 2026

FIGURE 4

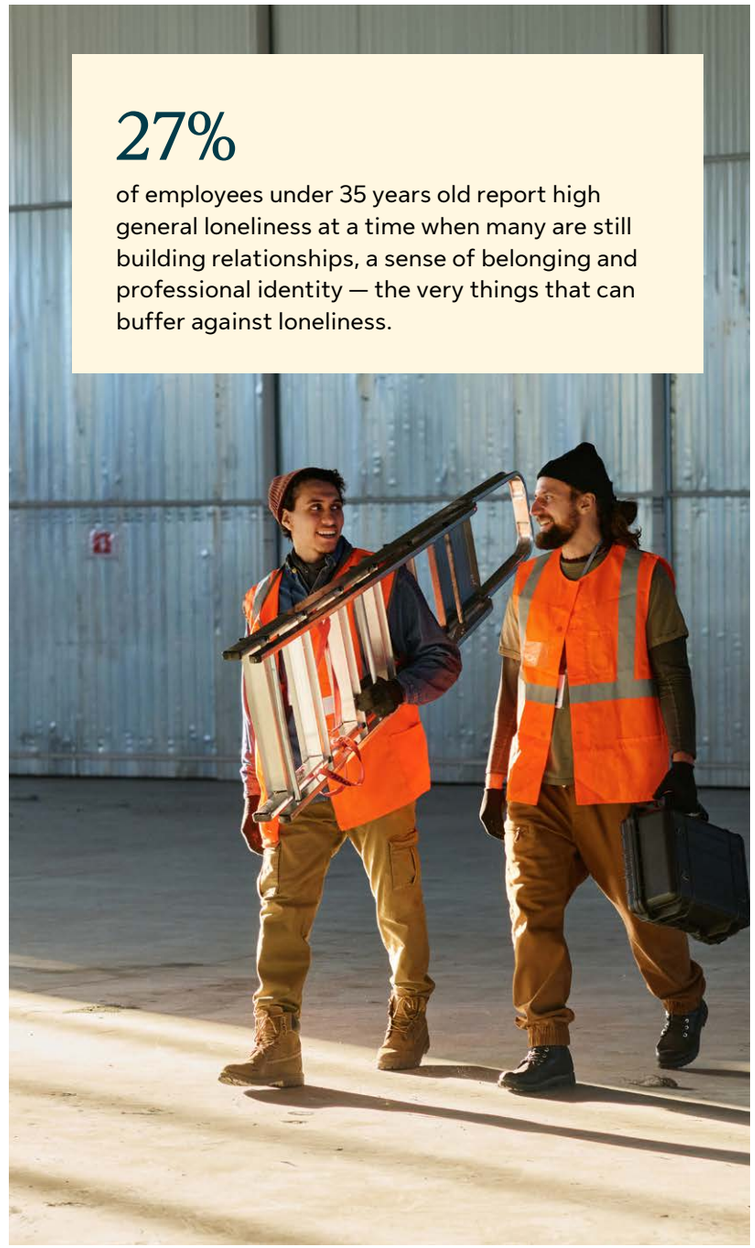
Work loneliness



Source: Sunlife - Ipsos national survey of Canadian employees, 2026

27%

of employees under 35 years old report high general loneliness at a time when many are still building relationships, a sense of belonging and professional identity — the very things that can buffer against loneliness.



Gen Z loneliness and the social media paradox

Gen Z (those under 30 years old) has embraced social media more than any other cohort. But these connections can often be problematic – creating a constant comparison with others and unrealistic expectations of who they should be. These often-superficial digital connections have also come at the expense of more in-depth face-to-face interactions. Ironically, this has left Gen Z more vulnerable to loneliness.[8]

Widespread research has also revealed other factors that contribute to Gen Z loneliness. These include:

Pandemic impacts

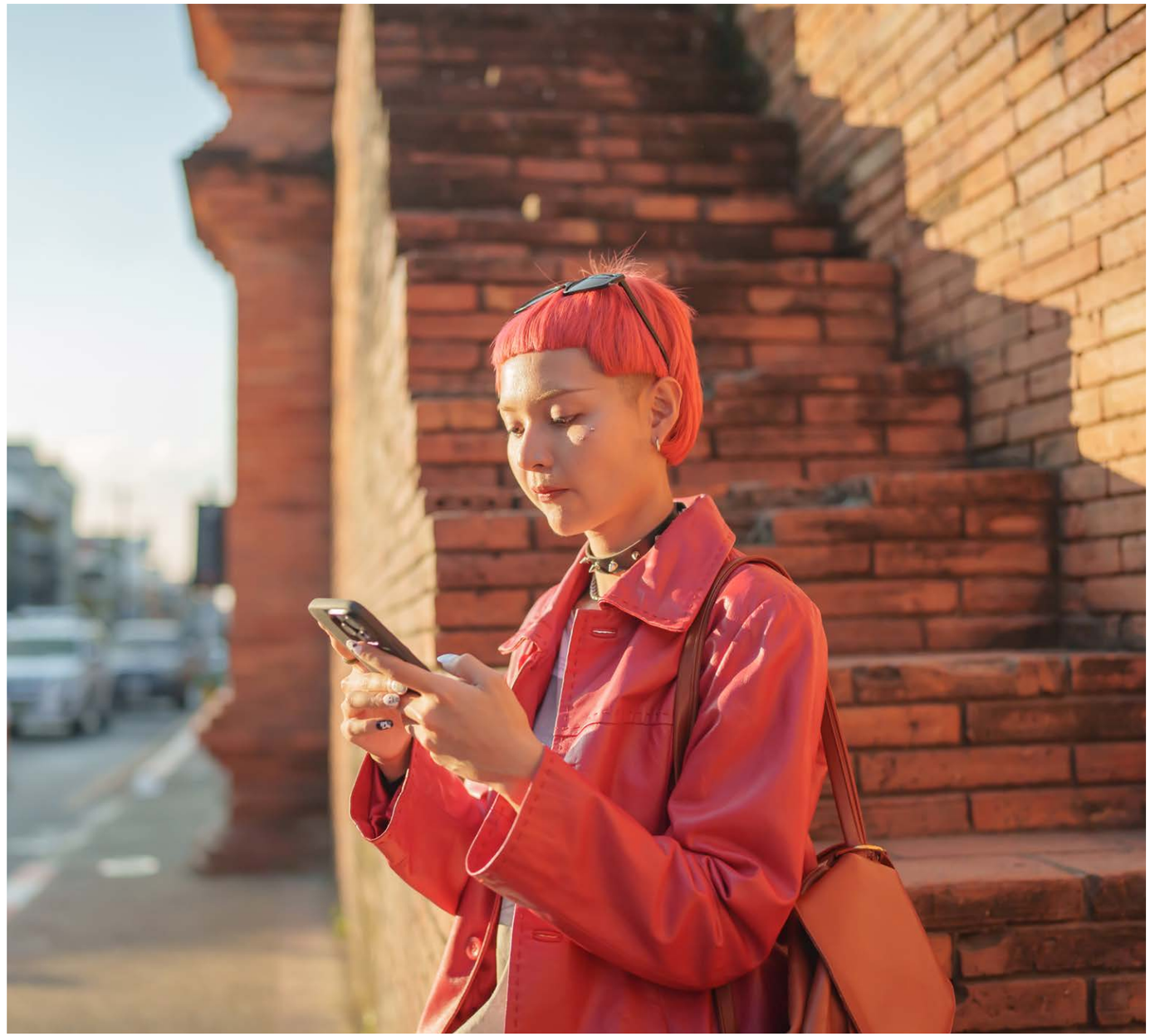
The extended lockdowns during Gen Z's formative years disrupted social development. It also normalized digital-only interactions for education and socializing.

Fragmented social structures

The decline in traditional community institutions (such as religious groups and clubs) has reduced in-person neighbourhood and community engagement.

Poorer mental health

While Gen Z is more open about mental health, they are experiencing mental health issues at a higher rate than other age groups. Untreated anxiety and depression further contribute to social withdrawal.



Loneliness affects men and women at nearly the same rate

Our research found that the prevalence of loneliness was very similar among men and women overall and across age groups, with similar rates of low, moderate, and high general loneliness levels (Figure 5).

In the workplace, women had slightly lower rates of moderate workplace loneliness. However, rates for high workplace loneliness were identical across genders (Figure 6).

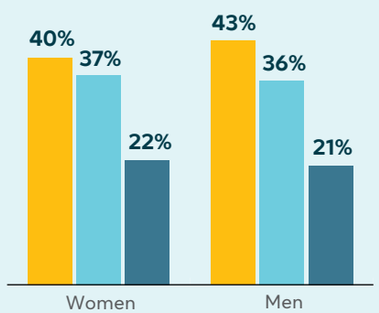
Our findings align with global data: men and women report similar loneliness levels across regions. However, how loneliness is experienced and support is sought can differ – shaped by socialization, circumstances, and biology. This is consistent with mental health more broadly.

Women typically develop wider networks and seek help more readily, while men may often rely on a spouse or a few close friends for social connection.

Benefits plans and workplaces can address loneliness by recognizing these differences in how people build and maintain relationships.

FIGURE 5

General loneliness

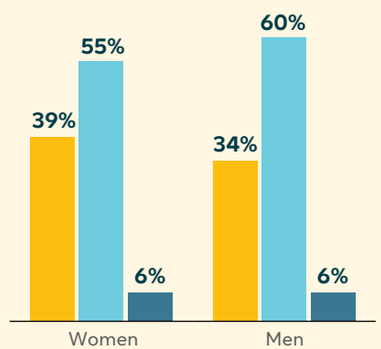


Source: Sunlife -
Ipsos national survey of Canadian employees, 2026



FIGURE 6

Work loneliness



Source: Sunlife -
Ipsos national survey of Canadian employees, 2026



Health and work

Loneliness, health and well-being

Lonely employees had much lower ratings of their personal health, across physical, mental, financial health as well as sleep. Employees experiencing high loneliness were not only much more likely to have a chronic health condition, but also to report their conditions were not well managed.

In our research, we asked respondents to rate their health across four categories:

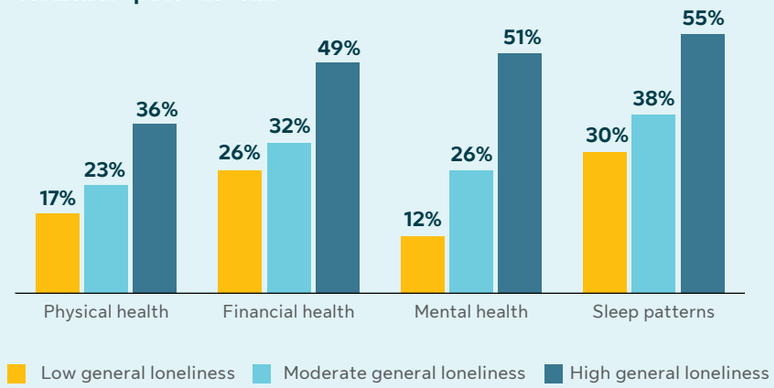
- Physical health
- Financial health
- Mental health
- Sleep patterns

Employees who self-rated their health as poor or fair in a category had a strong association with loneliness. This was strongest for financial health, mental health, and sleep (Figure 7).

This association with poor ratings of health was even stronger for work loneliness across every health category (Figure 8).

FIGURE 7

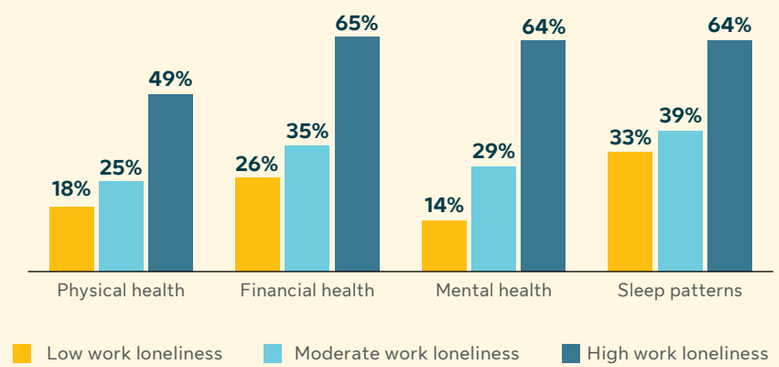
Health is "poor" or "fair"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026

FIGURE 8

Health is "poor" or "fair"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



The link between loneliness, poor sleep and work performance

Our research found that ¼ employees with high loneliness (general or work) reported getting less than 5 hours of sleep per night – far short of the recommended 7 hours to maintain good health.

Sleep is not just a personal health indicator, but a workplace well-being issue. Poor sleep can affect mood, energy, focus, resilience, and the ability to maintain social connection. All of these can make employees more vulnerable to loneliness. At the same time, employees experiencing loneliness may find it harder to get restorative sleep, creating a cycle that can affect both well-being and performance.

Our report **Wake-up call, the hidden cost of poor sleep – and what we can do about it** explores the impact of poor sleep on the health of Canadian employees as well as workplace strategies to help support healthier sleep.

Sources:
Sunlife - Ipsos national survey of Canadian employees, 2026
Sleepfoundation.org, Is 5 hours of sleep enough?



The strong association between loneliness and chronic disease

Employees reporting high general loneliness were more than two times more likely to have a chronic health condition than those with low loneliness (Figure 9). This relationship was even stronger when looking at work loneliness (Figure 10).

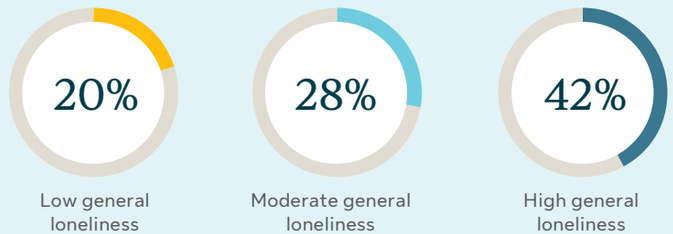
A body of academic research confirms the link between loneliness and chronic disease. Reasons for it can include the struggle to engage in social activities (lack of energy), or a change in an individual's social network due to self-stigma.[9]

Loneliness is also associated with multi-morbidity (living with more than one chronic health condition). We found that employees with high loneliness (general or work) were approximately three times more likely to report having two or more chronic conditions than employees reporting low loneliness.

Multi-morbidity can complicate disease management and treatment, leading to poor health outcomes. The potential for multi-morbidity underlines the importance of having access to personalized disease management support and coaching. This can help ensure employees understand their conditions and have the support to adhere to their treatment plans.

FIGURE 9

Employees with a chronic health condition



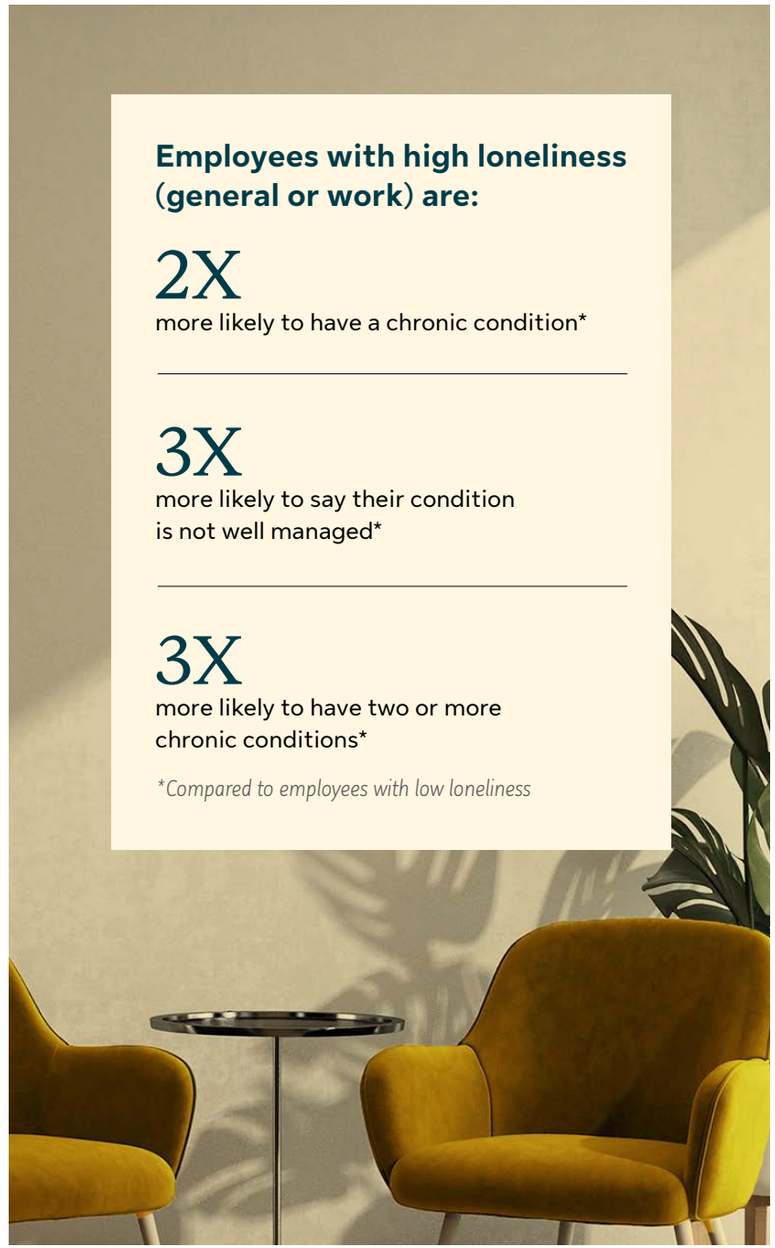
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

FIGURE 10

Employees with a chronic health condition



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



Employees with high loneliness (general or work) are:

2X
more likely to have a chronic condition*

3X
more likely to say their condition is not well managed*

3X
more likely to have two or more chronic conditions*

**Compared to employees with low loneliness*

Difficulty managing chronic disease

The association between loneliness and effective chronic disease management is also very strong. Respondents with high general loneliness were much more likely to say their chronic condition is not well managed (Figure 11). This same relationship was seen among those experiencing work loneliness.

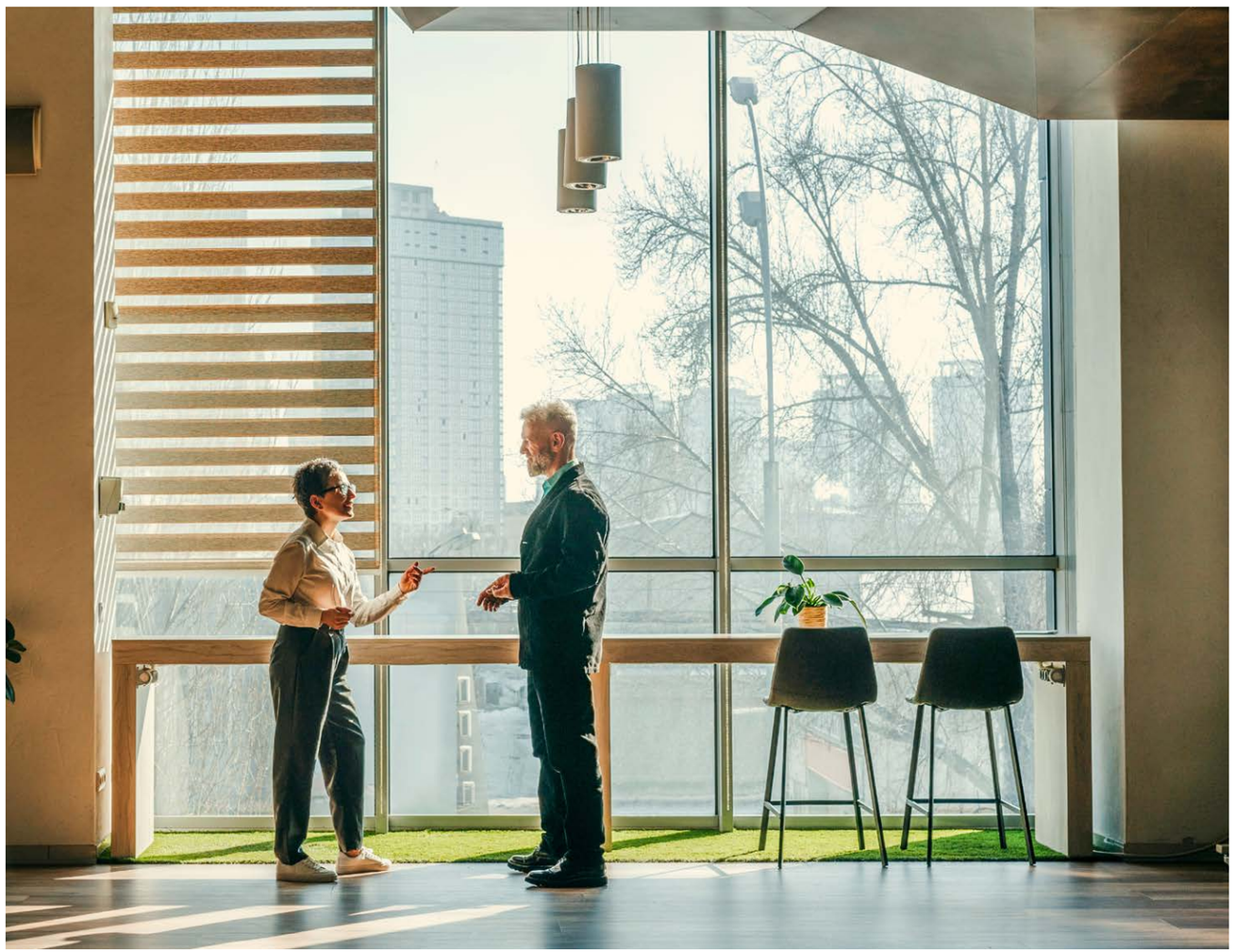
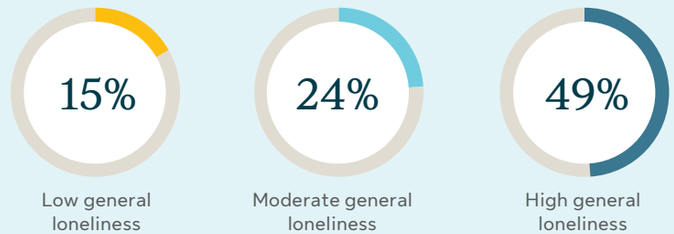


FIGURE 11

Chronic health condition is "not very well managed"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



The two-way relationship between loneliness and health

Research studies have established there is a two-way relationship between loneliness and health.[10] It means that loneliness worsens physical and mental well-being, and poor health or chronic illness increases the risk of feeling lonely.

For this reason, steps to mitigate loneliness or improve physical or mental health can have positive impacts across this two-way relationship.

Loneliness and work performance

Employees with low loneliness were much more likely to provide positive ratings of not just their performance at work, but their satisfaction with their job and their employer. Lonely employees were significantly more likely to report higher absences and lost productivity.

To test the association between loneliness and work performance, we asked employees to self-rate five aspects of their work:

- Productivity
- Quality of their work
- Motivation/engagement at work
- Satisfaction with their work
- Satisfaction with their employer

Our research found that employees with low general loneliness were significantly more likely to provide positive work ratings. What is also noteworthy is that employees with moderate and high general loneliness were very similar in their lower likelihood to rate their work positively (Figure 12).

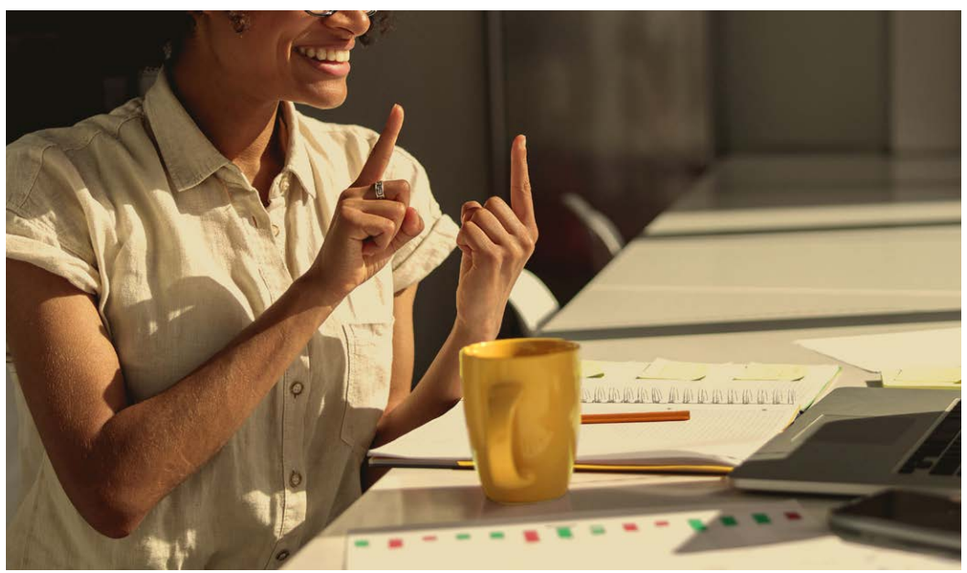
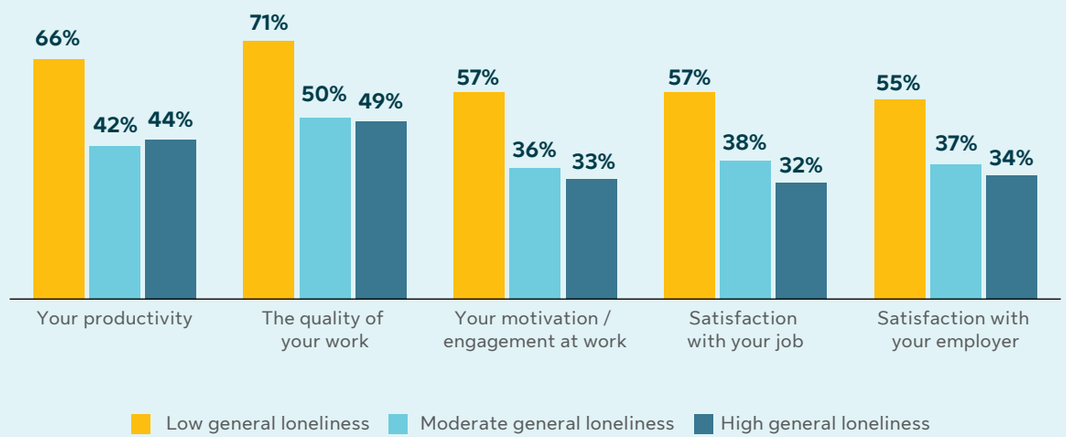


FIGURE 12

Employees who rate their work as "very good" or "excellent"



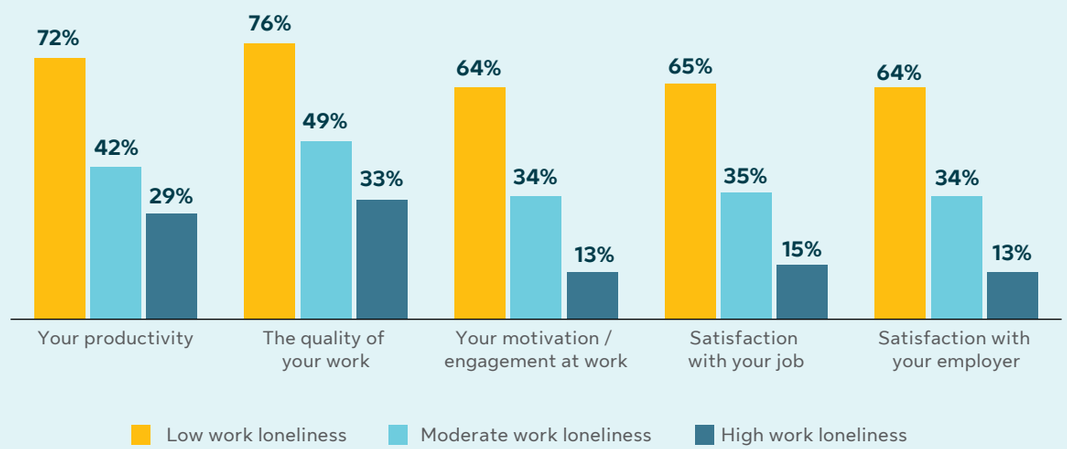
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Low loneliness, high work satisfaction

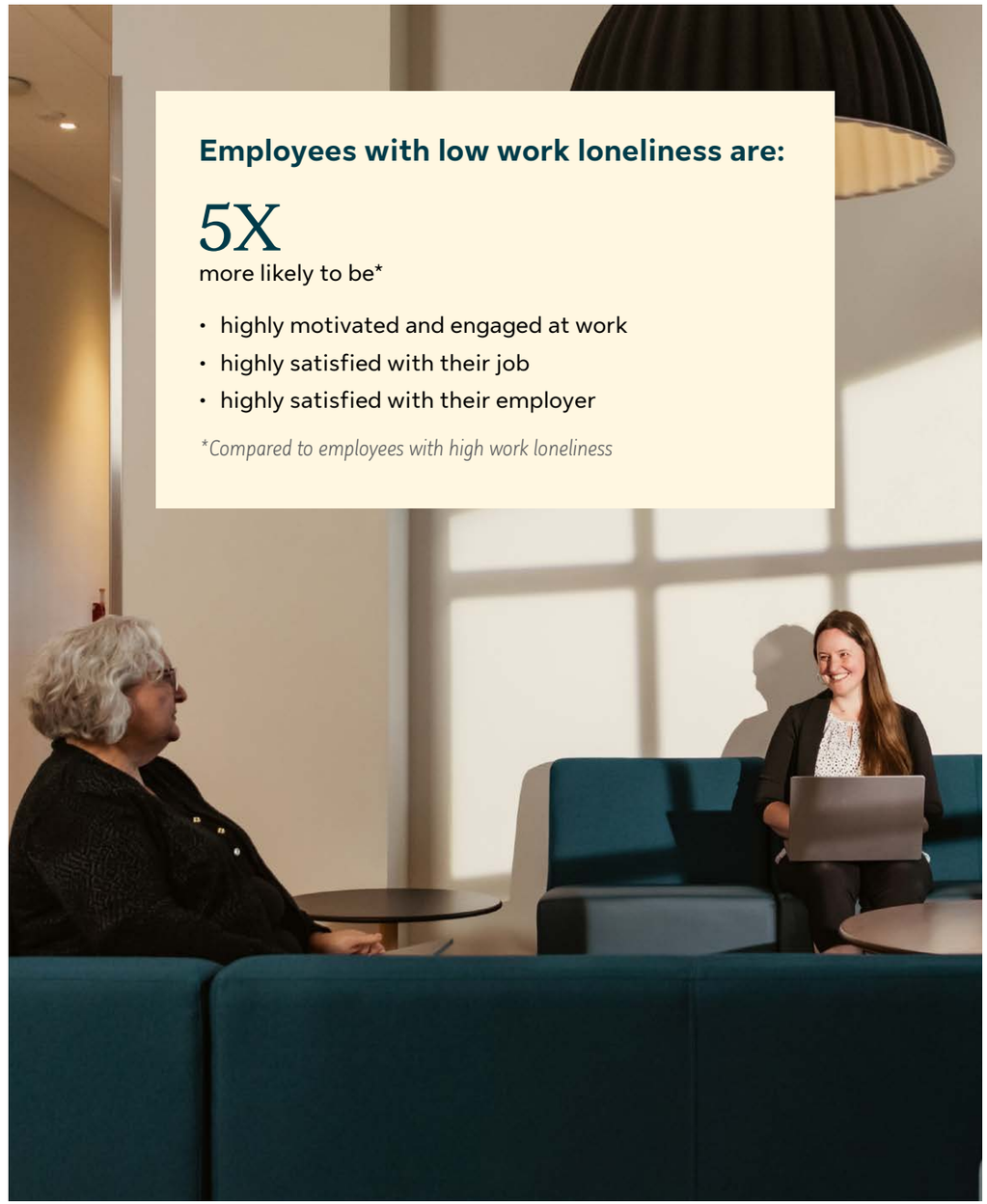
This association was more evident for work loneliness. Employees with moderate work loneliness were much less likely to provide positive work ratings compared to those with low loneliness. Those with high loneliness were exceedingly less likely to provide high work ratings (Figure 13).

FIGURE 13

Employees who rate their work as "very good" or "excellent"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



Employees with low work loneliness are:

5X

more likely to be*

- highly motivated and engaged at work
- highly satisfied with their job
- highly satisfied with their employer

**Compared to employees with high work loneliness*

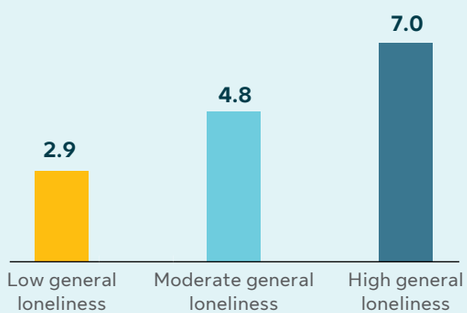
High loneliness, high absenteeism

Loneliness was also strongly associated with greater absenteeism from work due to health concerns (Figure 14). This association was clear for both general loneliness and work loneliness (Figure 15). These findings are consistent with the strong association between loneliness and poor ratings of health we found in our survey results.

In addition to the lost productivity due to absence, employees with higher loneliness also reported significant impacts on work productivity. Employees with high work loneliness were more than three times as likely to report losing 5 or more hours of productivity per week compared to those with low workplace loneliness.

FIGURE 14

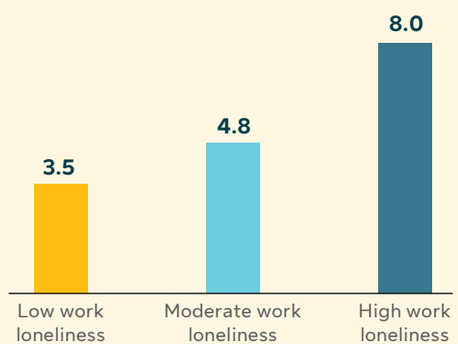
Average number of workdays missed in the previous year due to physical and/or mental health concerns



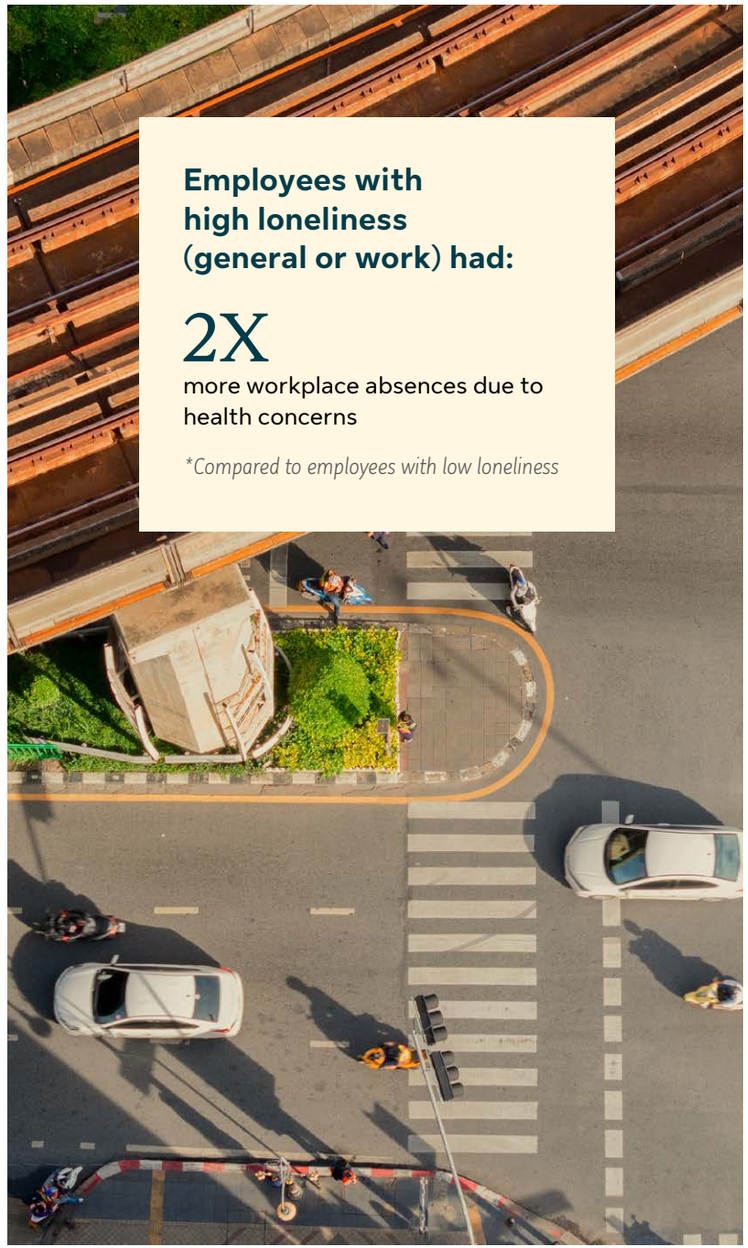
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

FIGURE 15

Average number of workdays missed in the previous year due to physical and/or mental health concerns



Source: Sunlife - Ipsos national survey of Canadian employees, 2026

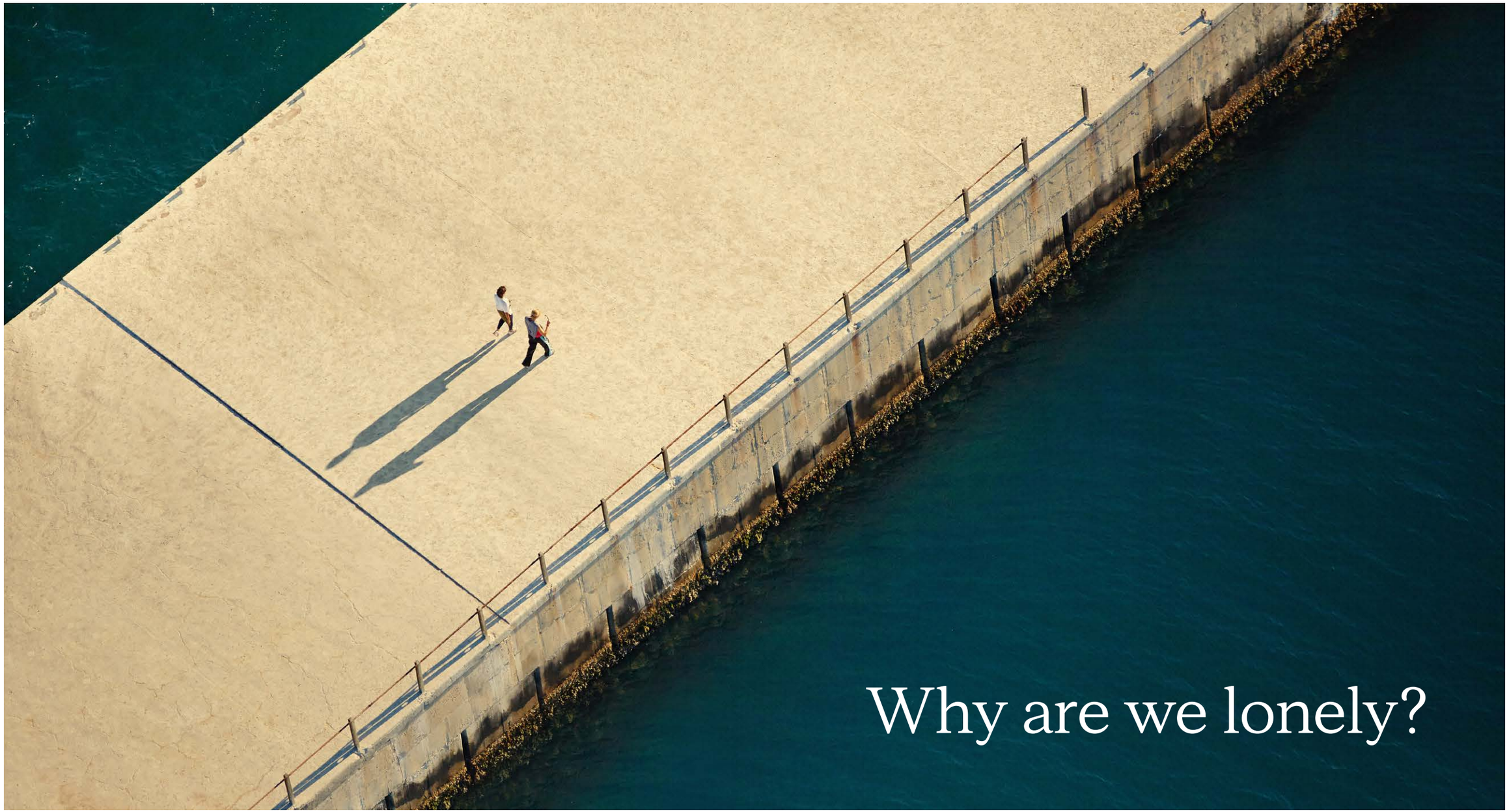


Employees with high loneliness (general or work) had:

2X

more workplace absences due to health concerns

**Compared to employees with low loneliness*



Why are we lonely?

Why are so many of us lonely?

Lonely employees are more likely to lack face-to-face interactions, spend excessive time on social media, and have limited access to supportive spaces and activities. Many employees with high loneliness also reported health challenges affecting resilience and financial stress as barriers to establishing social connections.

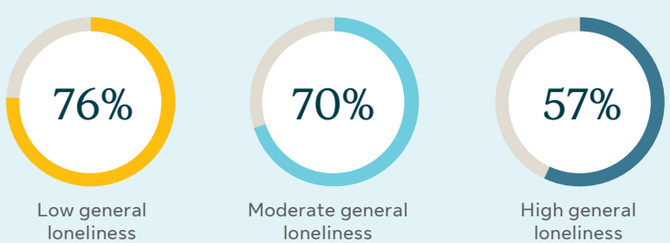
Our research examined several potential influences on general loneliness.

Face-to-face interactions

We found that employees whose face-to-face interactions represented a smaller proportion of their social interactions scored higher on general loneliness (Figure 16).

FIGURE 16

Social interactions are mostly face-to-face



Source: Sunlife - Ipsos national survey of Canadian employees, 2026

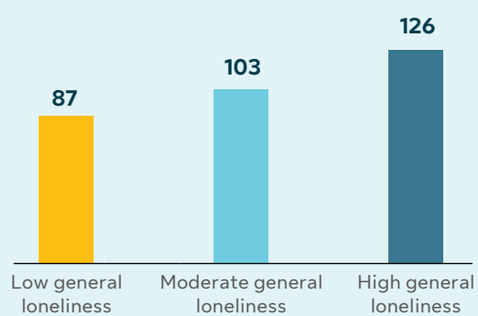


Social media use

More time spent on social media was strongly related to higher levels of general loneliness (Figure 17). This is consistent with a body of research demonstrating the association between excessive social media use, particularly passive use (scrolling, viewing content) versus active use (posting, messaging) and the likelihood of experiencing high levels of loneliness.[11]

FIGURE 17

Average number of minutes spent on social media per day



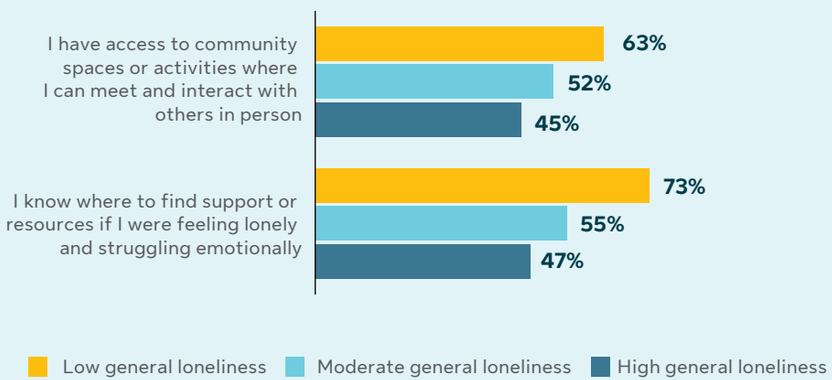
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Space and support

Employees who said they had access to spaces or activities for social interactions reported lower levels of general loneliness. Those who knew where to find support for feelings of loneliness or emotional struggles also had much lower loneliness levels (Figure 18).

FIGURE 18

Proportion who "somewhat agree" or "strongly agree"



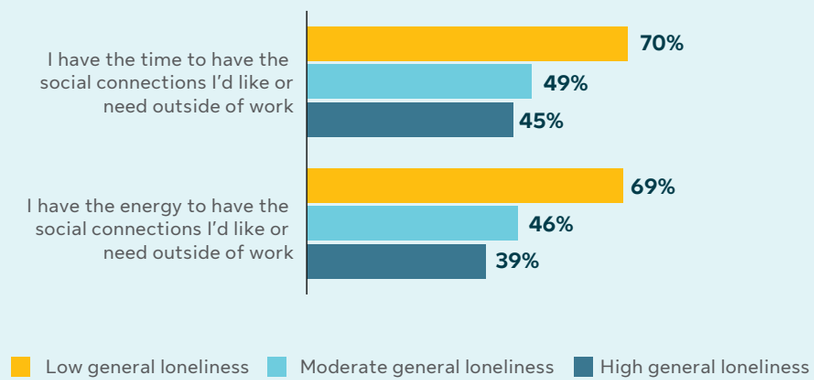
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Time and energy

Time and energy were also linked to general loneliness levels. Those who had enough time and energy outside of work for the social connections they wanted reported lower levels of general loneliness (Figure 19).

FIGURE 19

Proportion who "somewhat agree" or "strongly agree"



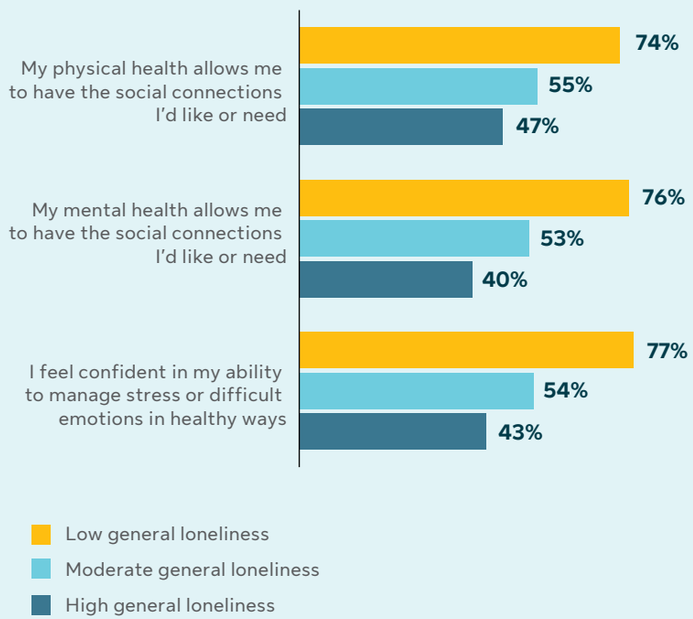
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Health and resilience

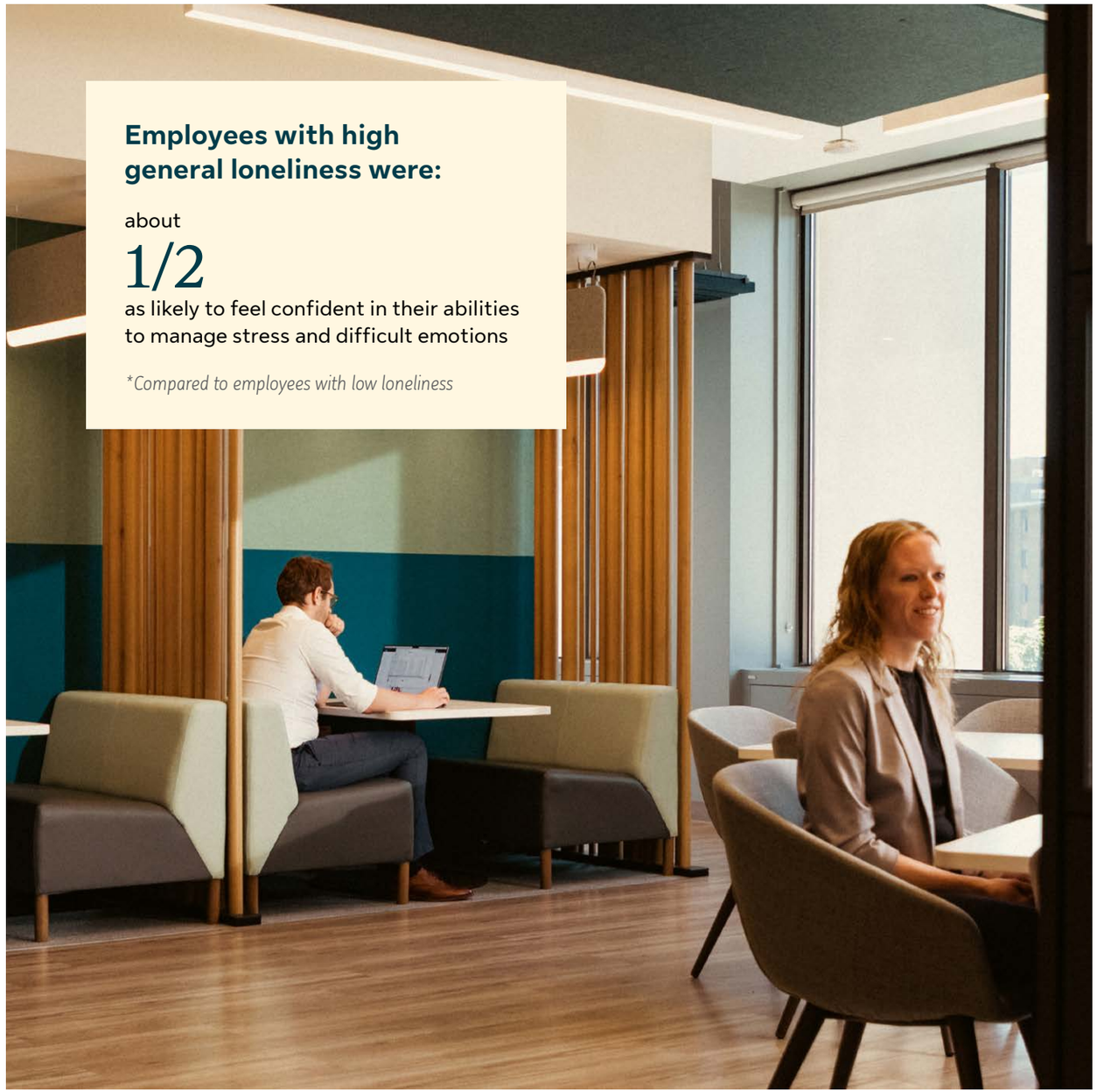
We see the bidirectional relationship at play when looking at health as a barrier to social connection. Many respondents also indicated a lack of confidence in their ability to manage stress and difficult emotions as a barrier to making social connections (Figure 20).

FIGURE 20

Proportion who "somewhat agree" or "strongly agree"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



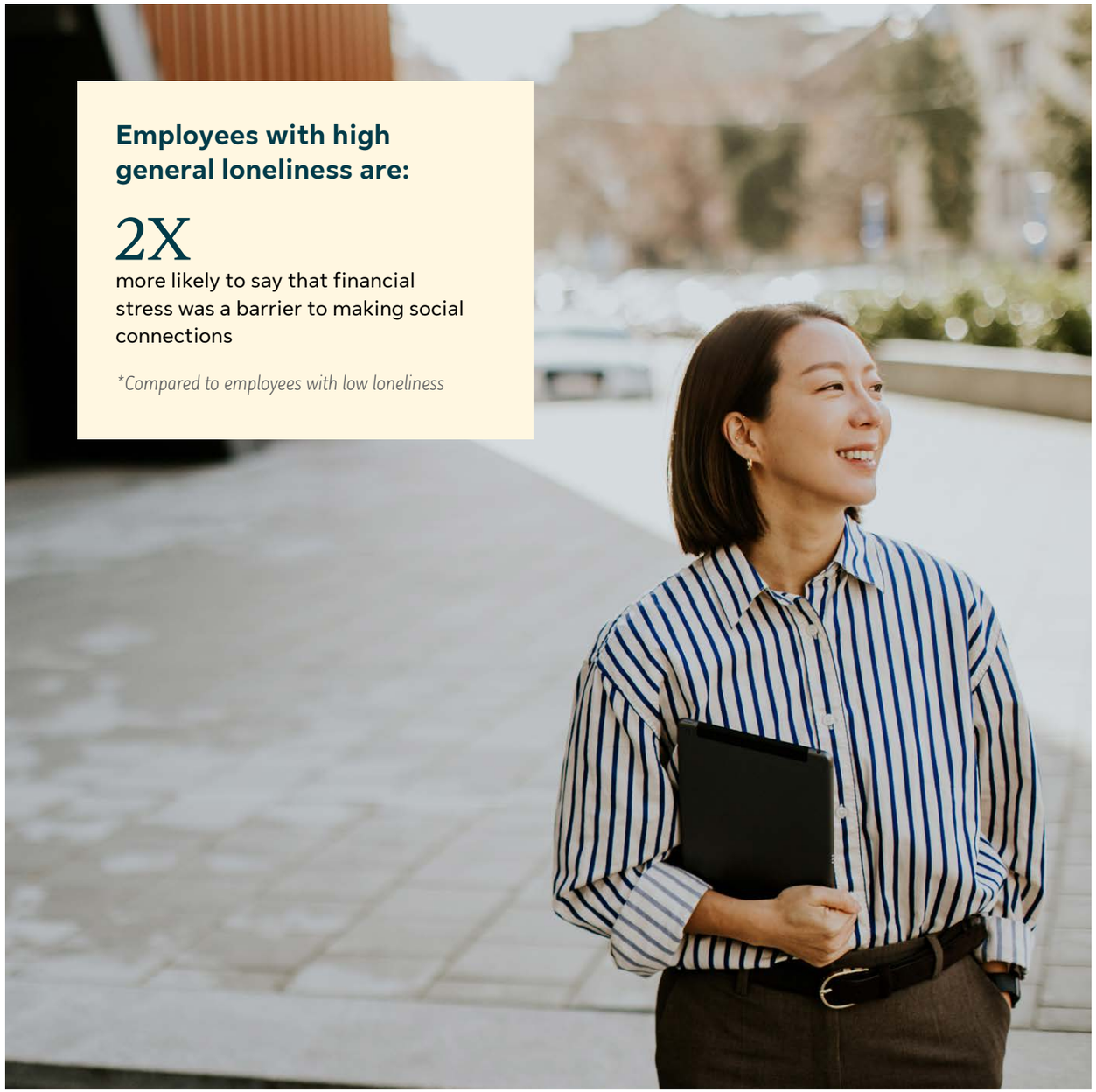
Employees with high general loneliness were:

about

1/2

as likely to feel confident in their abilities to manage stress and difficult emotions

**Compared to employees with low loneliness*



Employees with high general loneliness are:

2X

more likely to say that financial stress was a barrier to making social connections

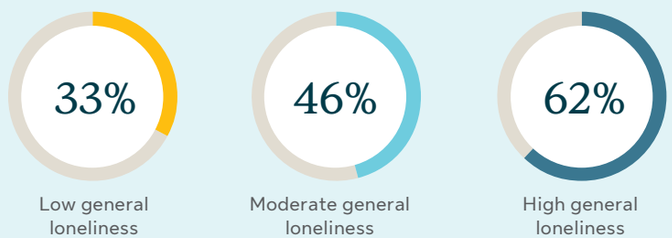
**Compared to employees with low loneliness*

Financial stress

Many respondents identified financial stress and demands as a key barrier to having the social connections they'd like or need (Figure 21). Nearly half of Canadians say they've lost sleep because of financial worries.[12] One concern related to financial health is that individuals may lack the disposable income to engage in activities that can contribute to social connection.

FIGURE 21

Financial stress and demands make it difficult for me to have the social connections I'd like or need outside of work (proportion who "somewhat agree" or "strongly agree")



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



More connected workplaces

How can we be less lonely at work?

Work location – onsite, remote, or hybrid – had almost no association with employee loneliness; instead, workplace culture and practices seem to make the critical difference.

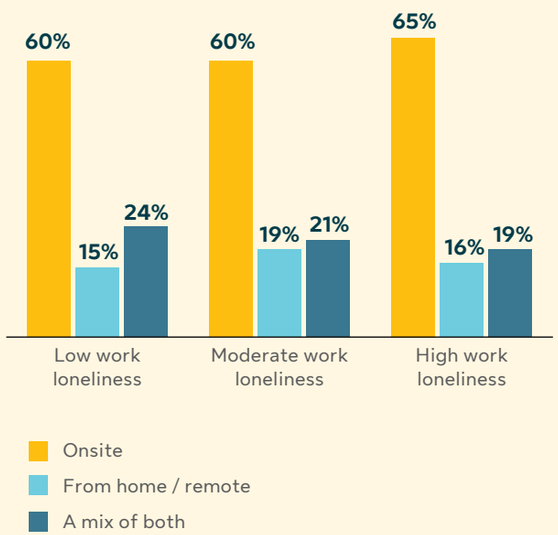
Our research found that there was practically no difference in work loneliness, and indeed general loneliness, for employees who worked onsite, remotely or for those with hybrid work arrangements (Figure 22).

Instead, we found that several workplace practices that supported a positive workplace culture were associated with much lower levels of work loneliness. Many of these practices are consistent with the **13 Psychological Risk Factors of the National Standard of Canada for Psychological Health and Safety in the Workplace**. These are levers employers can influence regardless of whether teams are onsite, remote, or hybrid. For leaders, this shifts the focus from work location to work conditions.

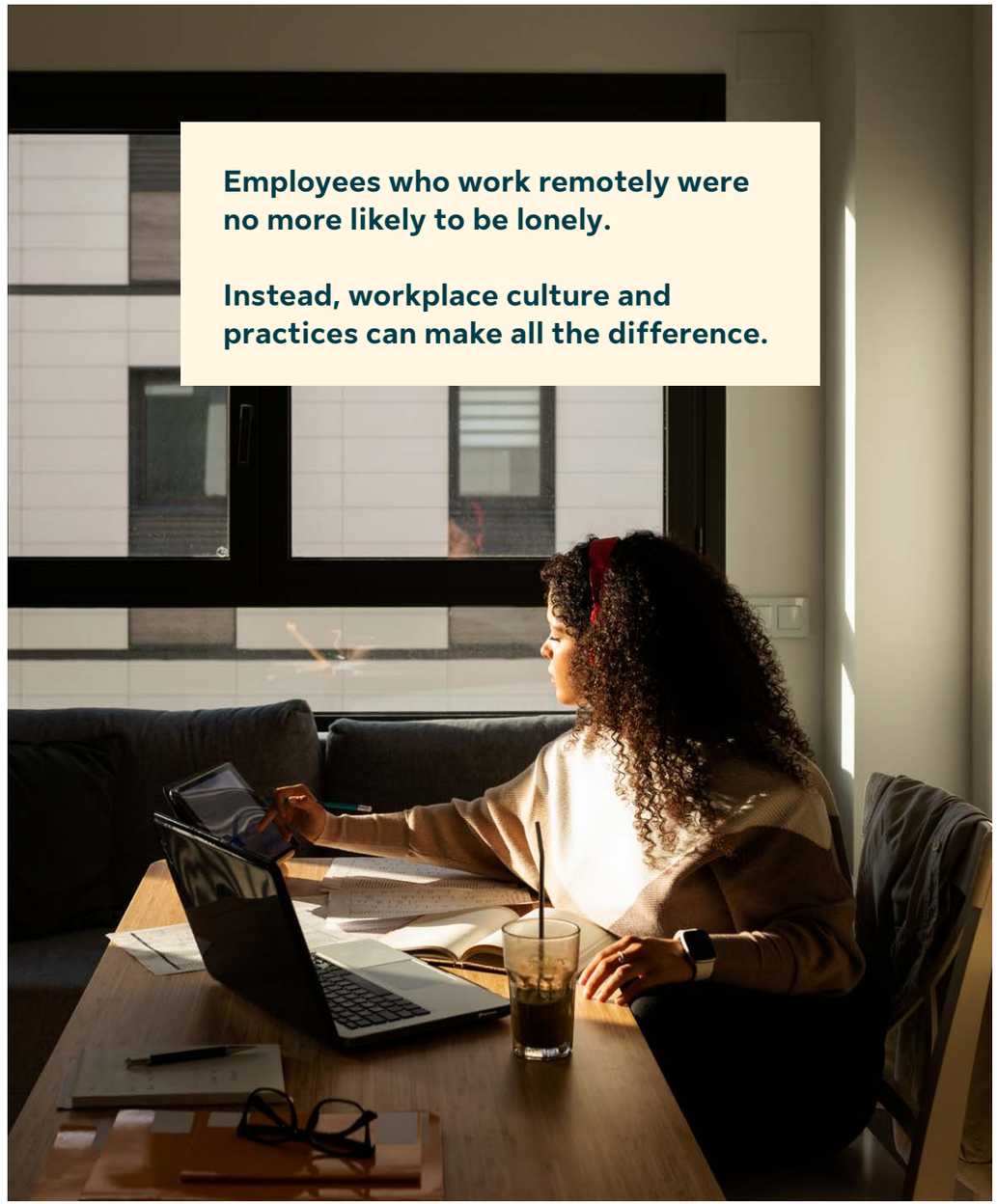
The following showcases what less lonely, more connected workplaces look like according to our research.

FIGURE 22

Work arrangement



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



Employees who work remotely were no more likely to be lonely.

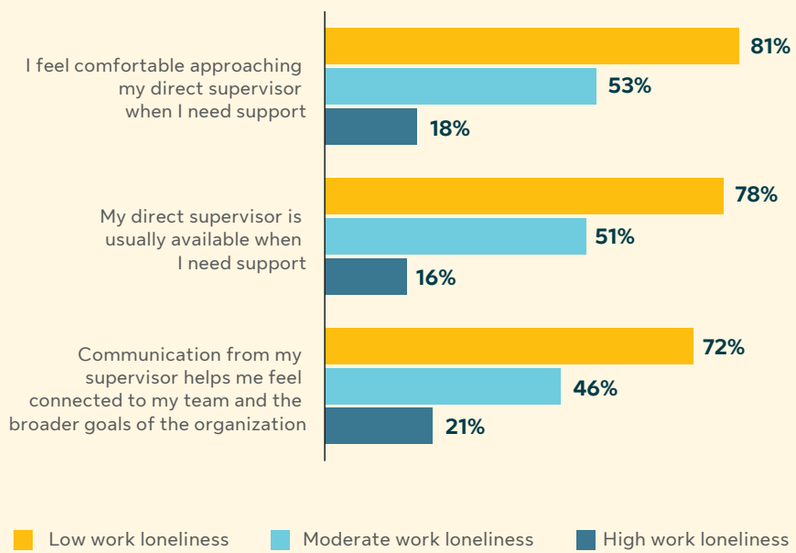
Instead, workplace culture and practices can make all the difference.

The role of the supervisor

Employees with low levels of work loneliness were far more likely to agree that their supervisor was approachable, was available to them and communicated effectively, connecting them to the team and the broader organization (Figure 23).

FIGURE 23

Proportion who "somewhat agree" or "strongly agree"



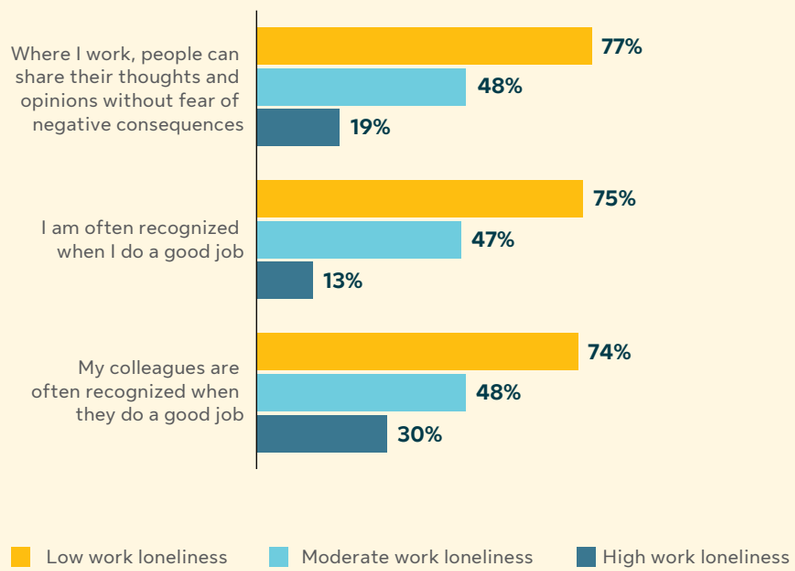
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Support and recognition

Lower workplace loneliness was also strongly associated with employees feeling they could safely share their thoughts and opinions at work as well as reporting that they and their colleagues often received recognition for a job well done (Figure 24).

FIGURE 24

Proportion who "somewhat agree" or "strongly agree"



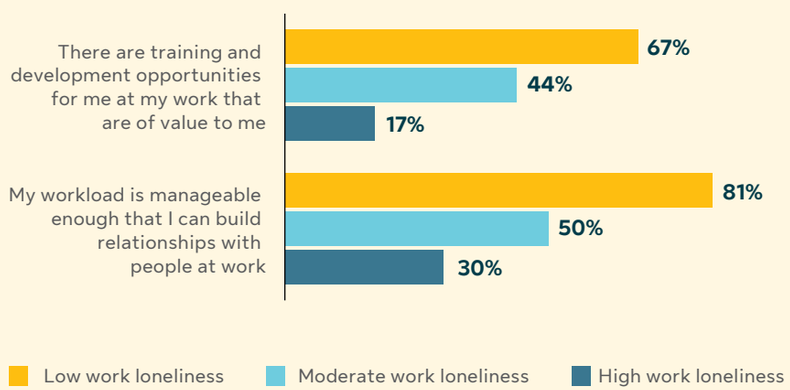
Source: Sunlife - Ipsos national survey of Canadian employees, 2026

Training and workload

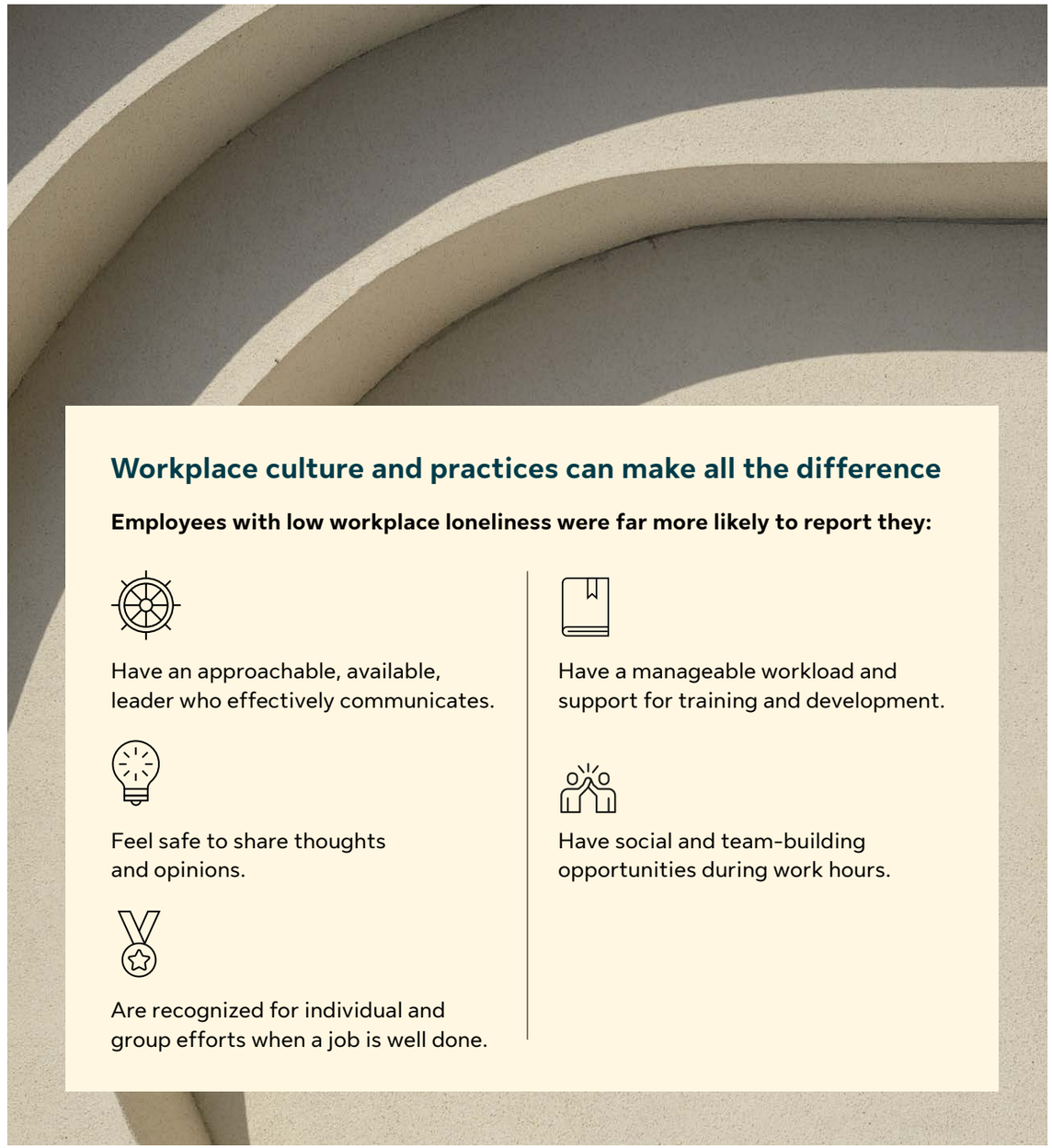
Support for training and development, and a manageable workload, were also associated with lower levels of workplace loneliness. The association with a manageable workload was particularly strong (Figure 25).

FIGURE 25

Proportion who "somewhat agree" or "strongly agree"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



Workplace culture and practices can make all the difference

Employees with low workplace loneliness were far more likely to report they:

Have an approachable, available, leader who effectively communicates.

Feel safe to share thoughts and opinions.

Are recognized for individual and group efforts when a job is well done.

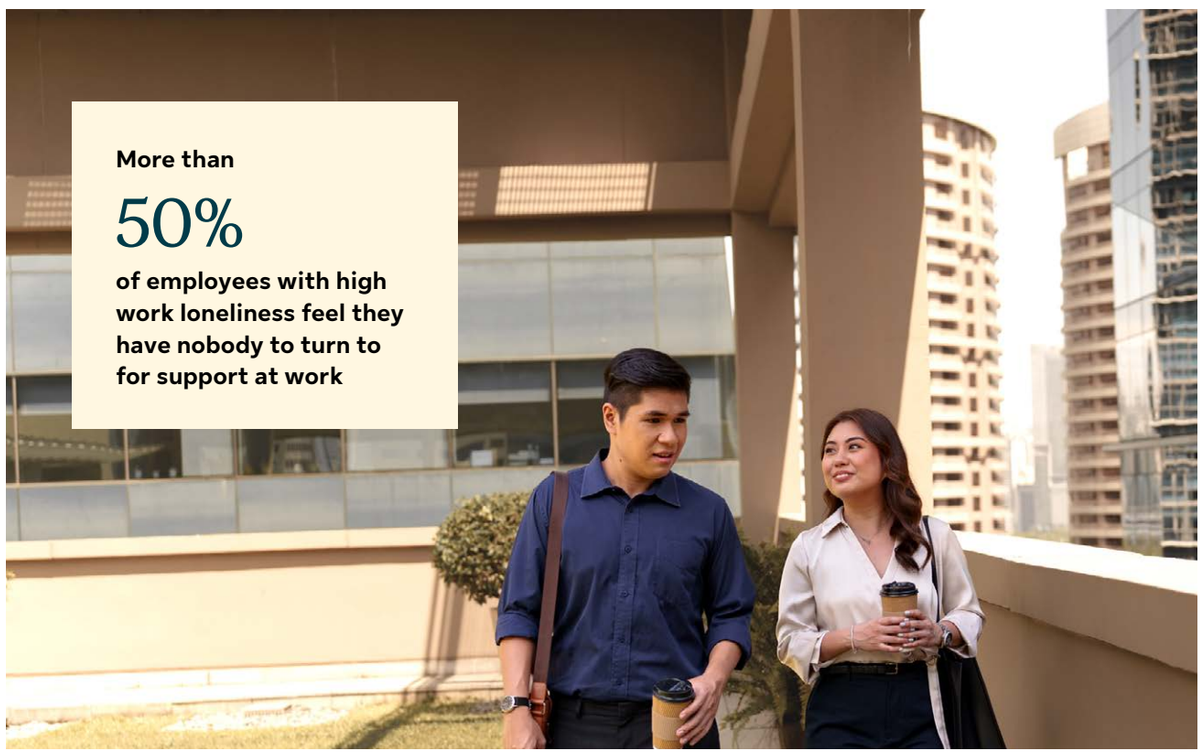
Have a manageable workload and support for training and development.

Have social and team-building opportunities during work hours.

Someone who has your back

Feeling that you have someone at work you can turn to for support was the strongest predictor of low work loneliness in our study.

It's important not to conflate this with "friendship." Depending on the circumstances, friendship may or may not be appropriate or desired among colleagues. However, all workplace relationships should ideally be based on respect and trust. This is not just as an antidote to loneliness: it also supports overall employee well-being and organizational performance. Employers can create environments that encourage building supportive, trusted relationships. The workplace solutions outlined in the following section can help build the foundation for these positive relationships.

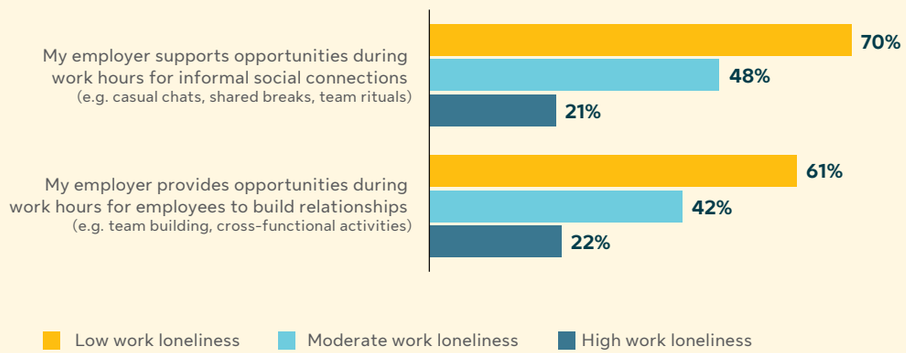


Social and team-building opportunities

Employees with lower levels of loneliness were much more likely to say their employer supported social connection and team-building opportunities during work hours (Figure 26).

FIGURE 26

Proportion who "somewhat agree" or "strongly agree"



Source: Sunlife - Ipsos national survey of Canadian employees, 2026



Solutions

Workplace solutions that can help

General loneliness and work loneliness are not fixed states. For employers, this creates a practical opportunity to act on the levers that shape whether employees feel connected, supported, healthy and able to participate fully at work.

The solutions below are organized around six employer levers:

1. **Culture and psychological safety**
2. **Effective leadership**
3. **Meaningful social connection**
4. **Mental health supports**
5. **Chronic disease supports**
6. **Financial well-being supports**



SOLUTIONS

Culture and psychological safety

Employers can reduce workplace loneliness by strengthening the everyday conditions that support trust and belonging. These include psychological safety, manageable workloads, recognition, opportunities for employees to contribute and be heard, and allowing for more autonomy in doing their work where possible. Many of these areas align with the 13 Psychological Risk Factors of the National Standard of Canada for Psychological Health and Safety in the Workplace. The Mental Health Commission of Canada has a **video series**[13] for employers and employees that raises awareness of each of the 13 risk factors.

SUNLIFE SOLUTIONS

Our **mental health strategy toolkit** can also be an excellent starting point. It's a free resource that provides specific guidance, actionable tools, and practical resources to help employers assess needs, set objectives, build a strategy, and take action on the workplace factors that influence mental health and connection.

If you need additional help, we have a proprietary tool, the **Workplace Mental Health Risk Assessment**, that aligns with the 13 Psychological Risk Factors. Our Organizational Health Team provides consulting services to support this tool and integrate social connection into your workplace strategy.



SOLUTIONS

Effective leadership

Employees with lower workplace loneliness were much more likely to say their supervisor was approachable, available, and communicated effectively. Employers can strengthen this lever by equipping managers to hold supportive check-ins, clarify expectations, recognize individual and group contributions, connect employees to the broader team, and identify when someone may need additional support. This is especially critical during periods of workplace challenges – such as increased workload or organizational change. Even when managers cannot immediately resolve underlying issues, providing ongoing consistent communication and regular acknowledgment of employee and group contributions becomes essential. This sustained engagement prevents burnout and withdrawal, maintaining team cohesion and individual well-being during difficult periods.

SUNLIFE SOLUTIONS

Our **Mental health training for managers** and **reference guide** are free resources that can help managers respond with confidence and consistency. These capabilities do not replace clinical supports, but they can make it easier for employees to ask for help early and feel supported in the normal flow of work.





SOLUTIONS

Meaningful social connection

Employers can create time and space for employees to build relationships in ways that feel natural, inclusive, and connected to a shared purpose. This can include lunch events, wellness activities, team rituals, peer connection, mentoring, volunteering, collaborative problem-solving, or informal opportunities to connect during the workday.

Here are two effective, practical examples to consider:

Mentoring and peer buddy systems

Scheduled mentoring and peer buddy systems create dependable touchpoints that provide safe spaces for interaction, easing social anxiety while helping new employees establish trusted connections faster. When paired with manager training to recognize and address isolation, these low-cost tools become core to your culture.

Small team social rituals

Brief, regular, low-stress touchpoints can go a long way to building belonging – think of a weekly 15-minute virtual coffee with no agenda, peer shoutouts in a Friday email wrap-up, or bi-weekly trivia. Simple rituals create reliable moments for connection without adding burden.

It's important to note that individuals can have different social needs, levels of social comfort and expectations in the workplace. As such, being aware of the differences in your team is valuable. Aim to encourage participation while understanding there will be different levels of comfort and engagement based on individual differences.

SOLUTIONS

Mental health supports

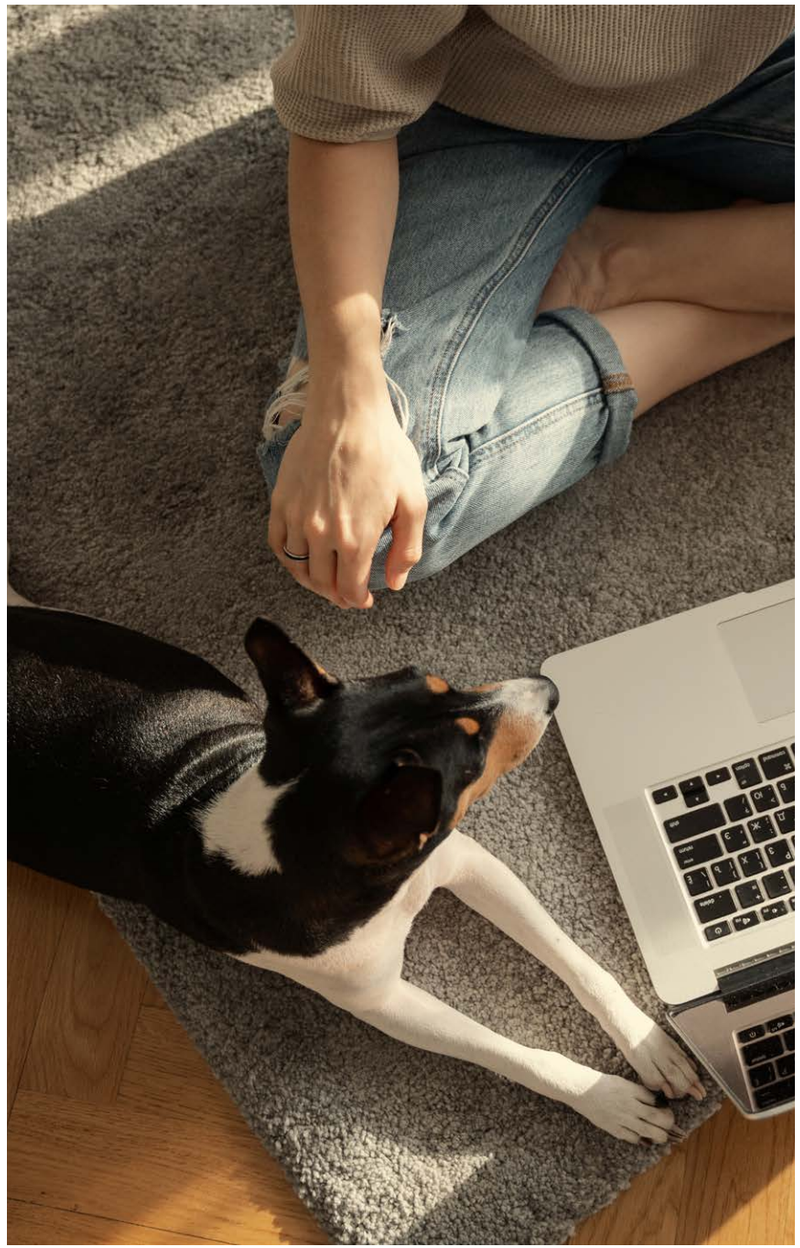
Mental health supports can help employees address emotional struggles, stress, anxiety, and depression that may contribute to loneliness or make it harder to establish or maintain social connection. Supports can take many forms.

Employee Assistance Program

In addition to mental health support, employee assistance programs (EAPs) are a great resource for a range of issues, including financial health, family and relationships, work, legal, and career.

Coverage for effective psychological treatments

Adequate group benefits coverage ensures that economic costs don't put psychological treatments out of reach. The Canadian Psychological Association says that individuals need 15 to 20 sessions to achieve a therapeutic outcome for depression. This would require annual standalone coverage maximums of $3,500 to $4,000.



SUNLIFE SOLUTIONS

Online Counselling, by Dialogue

Online Counselling by Dialogue*, is available to all plan members and their dependents**. It can be used as a primary mental health pathway for plan members – or as seamless continuity of care for Employee Assistance Program (EAP) users whose needs go beyond short-term support.

The program features therapist matching, where plan members can choose preferences such as gender and cultural background to create meaningful therapeutic relationships. Licensed mental health professionals deliver this therapy through 50-minute live video sessions***.

Plan members receive automated receipts for reimbursement that can be submitted to their extended health care plan****. Sunlife plan members can submit their claims through the **my Sunlife mobile app**. The online counselling pricing structure is competitive, reducing out-of-pocket expenses for plan members. This reflects Sunlife's commitment to both plan sustainability and plan member accessibility.

** Dialogue is a wholly owned subsidiary of Sun Life Assurance Company of Canada operating as a stand-alone entity. All representations about the services of Online Counselling, by Dialogue, are those of Dialogue and not Sun Life Assurance Company of Canada. Sun Life Assurance Company of Canada cannot guarantee the availability of the services and reserves the right to cancel the services with notice.*

*** Available to individuals ages 14+ and older. Online Counselling is not available to Clients with Stress Management and Well-Being in their plan.*

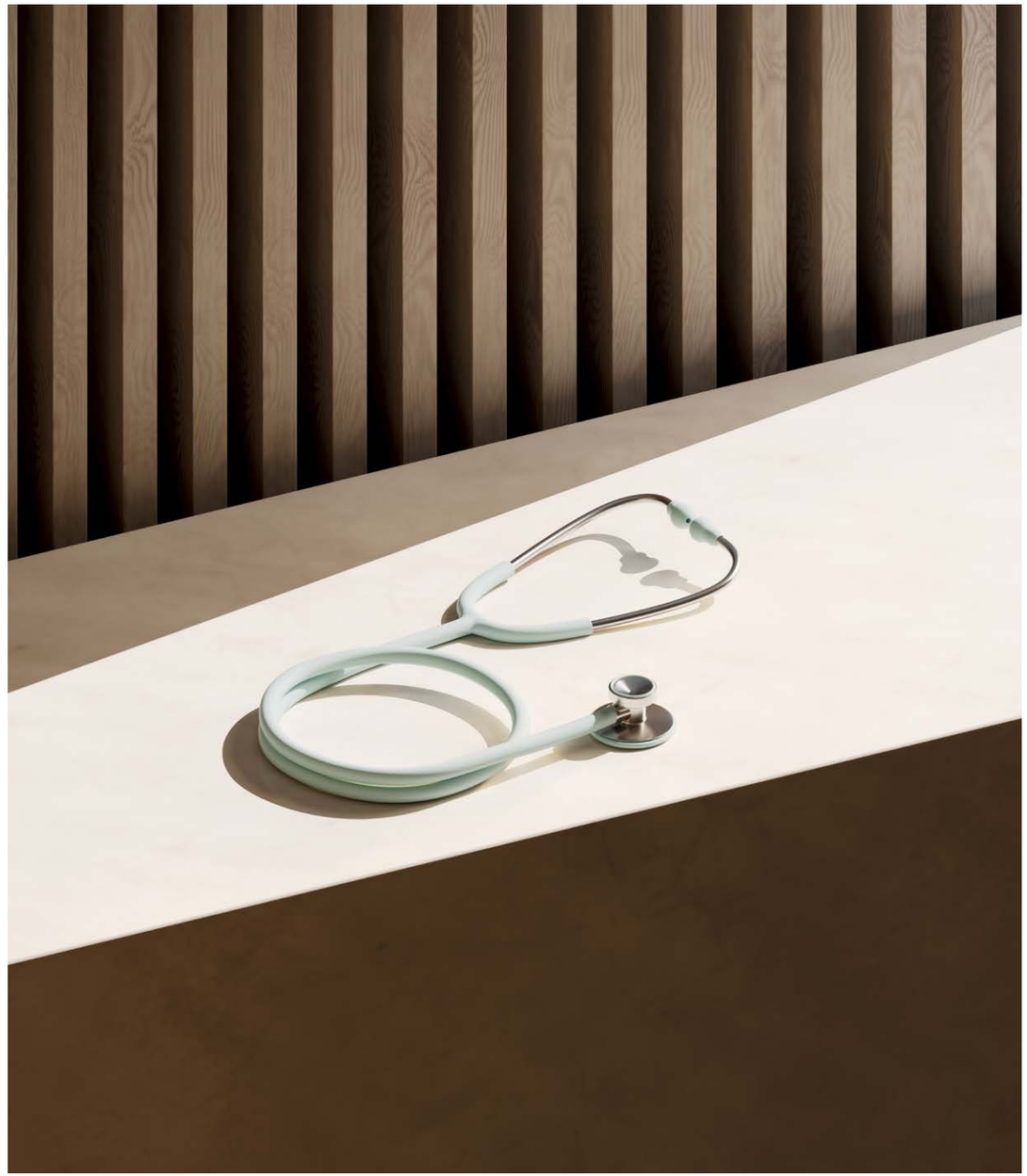
**** Dialogue's providers are registered psychotherapists and social workers.*

***** If you have existing health insurance, check your mental health benefits for coverage eligibility, amounts and maximums. You'll receive a detailed insurance receipt after your appointment that you can submit for reimbursement.*

SOLUTIONS

Chronic disease supports

Our research showed that employees with chronic conditions have significantly higher rates of loneliness. We also found that experiencing loneliness was associated with a much higher likelihood of being finding it challenging to manage a chronic condition. Chronic disease care programs can be a critical resource by providing personalized support, education, and guidance.



SUNLIFE SOLUTIONS

Online Pharmacy, by Pillway

Online Pharmacy, by Pillway*, offers personalized, comprehensive no-cost support to help employees manage their chronic conditions and maximize their drug treatments.

We currently offer coaching programs for diabetes and asthma and chronic obstructive pulmonary disease (COPD), provided by Pillway, at no cost to employers or employees, excluding those in Quebec**. These programs include one-on-one coaching by experienced pharmacists. A pharmacist works with each employee to develop individualized strategies for effective self-management, including treatment optimization, proper medication use, and education on related health conditions***.

**Pillway Pharmacy is operated by SHG Pharmacy Inc., SHG West Pharmacy Inc. and SHG Manitoba Inc., which are affiliates of Simpill Health Group Inc. As a point of disclosure, Sunlife has an investment in Simpill Health Group Inc. You may choose any pharmacy for your prescriptions, and your decision to use or not use Pillway Pharmacy will not affect your coverage or benefits under your plan. Pharmacy services are provided by Pillway. Sunlife reserves the right to discontinue the coaching programs at any time with notice.*

***These programs are not available in Quebec.*

****Support Team members are from Pillway and LifestyleRx and include pharmacists, physicians, and registered dieticians.*

SOLUTIONS

Financial well-being supports

Employees experiencing financial stress have higher rates of loneliness. For those facing personal financial challenges, financial counselling through an Employee Assistance Program (EAP) can be an excellent starting point for confidential support and practical guidance. It can help employees address both the financial concern and the stress that often accompanies it, reducing barriers that can make social connection harder to establish and maintain.



SUNLIFE SOLUTIONS

Sun Life Employee Assistance Program (EAP), by Dialogue*

Sunlife recognizes that financial stress takes a toll on many aspects of a person's life and relationships. Short-term counselling is available to address stress, anxiety and other mental health concerns, as well as relationship, family and other things that may be impacted by financial stress.

The EAP also provides dedicated personal finance support to help you directly address underlying money concerns. You receive 2 sessions with a financial planner for each financial issue you're navigating – whether it's budgeting, debt management, or retirement planning – allowing you to tackle multiple financial challenges.

The support available through EAP, by Dialogue may help reduce the anxiety and stress that financial difficulties create, providing both practical solutions and emotional support to help you regain stability and peace of mind.

**Dialogue is a wholly owned subsidiary of Sun Life Assurance Company of Canada operating as a stand-alone entity. All representations about the services of Employee Assistance Program (EAP), by Dialogue are those of Dialogue, and not Sun Life Assurance Company of Canada. Sun Life Assurance Company of Canada cannot guarantee the availability of the services and reserves the right to cancel the services with notice.*

Take action on loneliness

For employers, the message is clear: loneliness is not a marginal employee well-being issue. Our survey found that 58% of employees were experiencing a significant degree of general loneliness. Work loneliness was even more common, with 64% of employees reporting moderate or high levels.

This matters because loneliness is connected to important outcomes employers already care about. These include poor mental health, increased health risks, chronic disease challenges, lower performance and higher absenteeism.

The good news is that feelings of loneliness can change. While employers can't solve loneliness entirely, they can reduce the workplace conditions that intensify it and strengthen the supports that help employees feel connected.

It can take time, and there is no "one-size-fits-all" solution. But there are practical steps employers can begin to take now that can help make a real difference to reduce loneliness, protect productivity, and build more resilient workplaces.

Talk to your Sunlife Group Benefits representative to learn more.





About the research

About the survey

Ipsos conducted its research in June 2026 with input from 3,000 Canadian full-time employees aged 18 to 65. Surveys were conducted online in English and French. Ipsos employed weighting by region to balance demographics to ensure that the composition of each sample reflects their respective population according to Census data and to provide results intended to approximate the sample universe.

The precision of Ipsos online polls is measured using a credibility interval. In this case, the aggregate results are considered accurate to within +/- 2.2 percentage points, 19 times out of 20.



About Ipsos

Ipsos is one of the largest market research and polling companies, operating in 90 markets and employing nearly 20,000 people.

Our passionately curious research professionals, analysts and scientists have built unique multi-specialist capabilities that provide true understanding and powerful insights into the actions, opinions and motivations of citizens, consumers, patients, customers, or employees.

Our 75 business solutions are based on primary data coming from our surveys, social media monitoring, and qualitative or observational techniques.

"Game Changers" – our tagline – summarizes our ambition to help our 5,000 clients navigate with confidence our rapidly changing world.

Founded in France in 1975, Ipsos has been listed on the Euronext Paris since July 1st, 1999. The company is part of the SBF 120. Mid-60 indices, STOXX Europe 600 and is eligible for the Deferred Settlement Service (SRD).

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This report provides you with general information only. It does not provide you with employment, legal, health, or financial advice. Consult with the appropriate professional advisor to meet your organization's needs.



1 *https://universityaffairs.ca/opinion/the-silent-epidemic-of-loneliness/; https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf*

2 *https://www.who.int/news-room/questions-and-answers/item/social-connection*

3 *https://apps.who.int/gb/ebwha/pdf_files/EB156/B156_8-en.pdf*

4 *The hidden cost of loneliness at work, The Cigna Group https://newsroom.thecignagroup.com/the-hidden-costs-of-loneliness-at-work*

5 *Holt-Lunstad J, Robles TF, Sbarra DA. Advancing social connection as a public health priority in the United States. Am Psychol. 2017;72(6):517-530.*

6 *Bowers A, Wu J, Lustig S, Nemecek D, Loneliness influences avoidable absenteeism and turnover intention reported by adult workers in the United States. J Organ Eff-People P. 2022;9(2):312-335.*

7 *This index was purpose built by Ipsos, using the concepts validated in Wright et al (2006) as the basis (emotional deprivation and social companionship) and operationalized through 5 attributes.*

8 *UC Davis, Social media's impact on our mental health and tips to use it safely, May 10, 2024: https://health.ucdavis.edu/blog/cultivating-health/social-medias-impact-our-mental-health-and-tips-to-use-it-safely/2024/05*

9 *https://pmc.ncbi.nlm.nih.gov/articles/PMC10049704/*

10 *https://pmc.ncbi.nlm.nih.gov/articles/PMC12466892/*

11 *Newland R., Understanding the association between loneliness and social media: a revised theoretical model. Curr Opin Behav Sci. 2026;69:101653.*

12 *https://www.canada.ca/en/financial-consumer-agency/services/financial-wellness-work/stress-impacts.html*

13 *https://mentalhealthcommission.ca/13-factors-addressing-mental-health-in-the-workplace/*

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