Table S1. Associations with overall Patient Health Questionnaire-9 score with loneliness treated as a continuous variable.

| Effect | Estimate | $\boldsymbol{S E}$ | $\mathbf{9 5 \%} \mathbf{C I}$ |  |  |
| :---: | ---: | :---: | ---: | :---: | ---: |
|  |  |  | $\boldsymbol{L L}$ | $\boldsymbol{U L}$ | $\boldsymbol{p}$ |
| Intercept | 3.69 | 0.388 | 2.93 | 4.45 | $<0.001$ |
| Gender (f) | 0.81 | 0.217 | 0.38 | 1.23 | $<0.001$ |
| Age | -0.00 | 0.009 | -0.02 | 0.02 | 0.792 |
| Children | 0.47 | 0.230 | 0.02 | 0.92 | 0.040 |
| Sleep (h) | -0.02 | 0.017 | -0.06 | 0.01 | 0.157 |
| Loneliness | 3.84 | 0.145 | 3.56 | 4.13 | $<0.001$ |

Values are unstandardized beta coefficients with standard error (SE) and 95\% confidence interval (CI); f, female; h, hours; F-statistic: 149.1 on 5 and 2001 DF, p-value: $<0.001$; Adjusted R2 overall $=0.270$; adjusted R2 change due to Loneliness $=$ 0.261 .

Table S2. Association of PHQ-2 (Feeling down, depressed, or hopeless) with loneliness.

| Effect | Estimate | $\boldsymbol{S E}$ | 95\% CI |  | $p$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | LL | UL |  |
| Intercept | -0.03 | 0.050 | -0.13 | 0.07 | 0.558 |
| Gender (f) | -0.01 | 0.027 | -0.07 | 0.04 | 0.594 |
| Age | -0.00 | 0.001 | -0.00 | 0.00 | 0.444 |
| Children | 0.02 | 0.028 | -0.03 | 0.08 | 0.415 |
| Sleep (h) | -0.00 | 0.002 | -0.00 | 0.00 | 0.739 |
| PHQ_1 | 0.28 | 0.019 | 0.24 | 0.31 | $<0.001$ |
| PHQ_3 | 0.04 | 0.015 | 0.01 | 0.07 | 0.006 |
| PHQ_4 | 0.10 | 0.018 | 0.07 | 0.14 | <0.001 |
| PHQ_5 | 0.04 | 0.017 | 0.00 | 0.07 | 0.031 |
| PHQ_6 | 0.17 | 0.017 | 0.14 | 0.20 | $<0.001$ |
| PHQ_7 | 0.02 | 0.017 | -0.01 | 0.05 | 0.240 |
| PHQ_8 | 0.01 | 0.024 | -0.04 | 0.06 | 0.696 |
| PHQ_9 | 0.35 | 0.035 | 0.28 | 0.41 | <0.001 |
| L_some ${ }^{\text {a }}$ | 0.20 | 0.028 | 0.15 | 0.26 | <0.001 |
| L_often ${ }^{\text {b }}$ | 0.49 | 0.044 | 0.40 | 0.57 | $<0.001$ |

Values are unstandardized beta coefficients with standard error (SE) and 95\% confidence interval (CI); f, female; h, hours; loneliness treated as a continuous variable; aL_some = Dummy variable encoding loneliness "sometimes " as 1, "never" or "often" as 0; bL_often = Dummy variable encoding loneliness "often" as 1, "never" or "some-times" as 0; F-statistic: 191.5 on 12 and 1994 DF, p-value: <0.001; Adjusted R2 overall $=0.53$.

Table S3. Association of age and age ${ }^{2}$ with loneliness.

| Effect | Estimate | $\boldsymbol{S E}$ | $\mathbf{9 5 \%} \mathbf{C I}$ |  |  |
| :---: | :---: | :---: | ---: | ---: | ---: |
|  |  |  | $\boldsymbol{L L}$ | $\boldsymbol{U L}$ | $\boldsymbol{p}$ |
| Intercept | 1.17 | 0.164 | 0.85 | 1.49 | $<0.001$ |
| Gender (f) | 0.06 | 0.033 | 0.00 | 0.13 | 0.062 |
| Age | -0.03 | 0.009 | -0.04 | -0.01 | 0.005 |
| Age $^{2}$ | -0.00 | 0.000 | 0.00 | 0.00 | 0.043 |
| Children | -0.08 | 0.037 | -0.15 | -0.01 | 0.025 |
| Sleep (h) | -0.00 | 0.003 | -0.01 | 0.00 | 0.107 |

Values are unstandardized beta coefficients with standard error (SE) and 95\% confidence interval (CI); f, female; h, hours; loneliness treated as a continuous variable; F-statistic: 11.72 on 5 and 2001 DF, p-value: $<0.001$; Adjusted R2 overall $=0.03$.


Figure 1. Visualization of Figure 1 using the Fruchterman-Reingold algorithm.
Relationships between PHQ-9 items, demographics and loneliness. Green: Demographics; Orange: Loneliness; Blue: PHQ; The edge between L_sometimes and L_often was excluded. L_sometimes = Dummy variable encoding loneliness "sometimes" as 1, "never" or "often" as 0; L_often = Dummy variable encoding loneliness "often" as 1, "never" or "sometimes" as 0 ; Children $=$ living with children in the same household; Sleep $=$ average hours of sleep per night in the previous 7 days; Patient Health Questionnaire (PHQ)-1 = Little interest or pleasure in doing things; PHQ-2 = Feeling down, depressed, or hopeless, ; PHQ-3 = Trouble falling or staying asleep, or sleeping too much; PHQ-4 = Feeling tired or having little energy; PHQ-5 = Poor appetite or overeating; PHQ-6 = Feeling bad about yourself - or that you are a failure or have let yourself or your family down; PHQ-7 = Trouble concentrating on things, such as reading the newspaper or watching television; PHQ-8 = Moving or speaking so slowly that other people could have noticed. Or the opposite - being so figety or restless that you have been moving around a lot more than usual; PHQ-9 = Thoughts that you would be better off dead, or of hurting yourself.


Figure S2. Relationships between Patient Health Questionnaire-9 items, demographics and loneliness treated as a continuous variable.

Children = living with children in the same household; Sleep = average hours of sleep per night in the previous 7 days; Patient Health Questionnaire (PHQ)-1 = Little interest or pleasure in doing things; PHQ-2 = Feeling down, depressed, or hopeless, ; PHQ-3 = Trouble falling or staying asleep, or sleeping too much; PHQ-4 = Feeling tired or having little energy; PHQ-5 = Poor appetite or overeating; PHQ-6 = Feeling bad about yourself - or that you are a failure or have let yourself or your family down; PHQ-7 = Trouble concentrating on things, such as reading the newspaper or watching television; PHQ-8 = Moving or speaking so slowly that other people could have noticed. Or the opposite - being so figety or restless that you have been moving around a lot more than usual; PHQ-9 = Thoughts that you would be better off dead, or of hurting yourself.


Figure S3. Bootstrap 95\% confidence intervals of the edge weights of the network shown in Figure 1.
Loneliness represented by dummy variables. A horizontal line represents an individual edge. The red line indicates an individual edge's weight. The grey area represents the $95 \%$ confidence interval. L_sometimes = Dummy variable encoding loneliness "sometimes" as 1, "never" or "often" as 0; L_often = Dummy variable encoding loneliness "often" as 1, "never" or "sometimes" as 0 ; Children = living with children in the same household; Sleep $=$ average hours of sleep per night in the previous 7 days; Patient Health Questionnaire (PHQ)-1 = Little interest or pleasure in doing things; PHQ-2 = Feeling down, depressed, or hopeless, ; PHQ-3 = Trouble falling or staying asleep, or sleeping too much; PHQ-4 = Feeling tired or having little energy; PHQ-5 = Poor appetite or overeating; PHQ-6 = Feeling bad about yourself - or that you are a failure or have let yourself or your family down; PHQ-7 = Trouble concentrating on things, such as reading the newspaper or watching television; PHQ-8 = Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual; PHQ-9 = Thoughts that you would be better off dead, or of hurting yourself.


Figure S4. Bootstrap edge weights difference test between non-zero estimated edge-weights in the network shown in Figure 1.

Significant differences between non-zero estimated edges are indicated by black boxes. Non-significant differences are indicated by grey boxes. The colour of the diagonal boxes (ranging from red to blue) corresponds to the magnitude of the edge (negative to positive). L_sometimes = Dummy variable encoding loneliness "sometimes" as 1, "never" or "often" as 0 ; L_often = Dummy variable encoding loneliness "often" as 1, "never" or "sometimes" as 0; Children = living with children in the same household; Sleep = average hours of sleep per night in the previous 7 days; Patient Health Questionnaire (PHQ)-1 = Little interest or pleasure in doing things; PHQ-2 = Feeling down, depressed, or hopeless, ; PHQ-3 = Trouble falling or staying asleep, or sleeping too much; PHQ-4 = Feeling tired or having little energy; PHQ-5 = Poor appetite or overeating; PHQ-6 = Feeling bad about yourself - or that you are a failure or have let yourself or your family down; PHQ$7=$ Trouble concentrating on things, such as reading the newspaper or watching television; PHQ-8 $=$ Moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual; PHQ-9 = Thoughts that you would be better off dead, or of hurting yourself.

