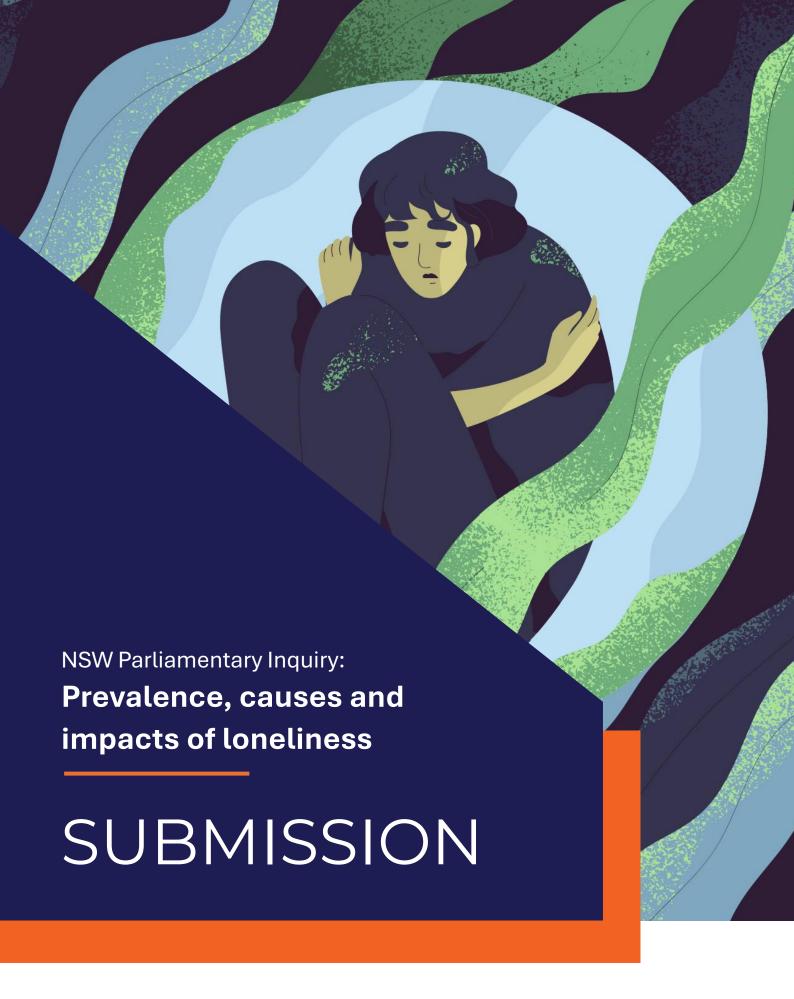# INQUIRY INTO PREVALENCE, CAUSES AND IMPACTS OF LONELINESS IN NEW SOUTH WALES

Organisation: Community Industry Group

Date Received: 1 November 2024

NSW Parliamentary Inquiry:

Prevalence, causes and impacts of loneliness

SUBMISSION

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ACKNOWLEDGEMENT OF COUNTRY

We wish to acknowledge and respect the Traditional Lands of all Aboriginal people and to acknowledge Aboriginal and Torres Strait Islander people as the First Australian people of the land that we wave upon. We pay our respects to all Elders past, present and those of the future and ask that all those who walk, work and live on Traditional Aboriginal Lands to be respectful of culture and traditions.

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About Community Industry Group

CI Group is the peak body working for community services and organisations in southern NSW. We support community organisations, promote expertise and innovation in community development, foster industry development and advocate for social justice.

For 30 years, CI Group has taken a leadership role in the local community services sector. We regularly engage with those organisations, services, and individuals who work with individuals, families, and communities experiencing disadvantage and vulnerability. We also advocate on behalf of community organisations and vulnerable communities to raise awareness of the issues which are impacting service delivery and affecting the lives and outcomes of individuals, families and communities experiencing disadvantage.

Our members include not for profit (NFP) service providers who deliver:

- Homelessness Supports
- Women's and Domestic Violence Support Services
- Child and Family Services
- Youth Services
- Aged Care
- Disability Services
- Generalist Community / Neighbourhood Centres

Key recommendations

- Increase availability of local, place-based community programs that meet communities where they are at, both in terms of geography and local needs.
- Restore holistic funding to neighbourhood centres and community centres to provide the breadth of programs and services required for the whole community.
- Grow the network of neighbourhood centres and community centres to ensure that every community has access to programs which increase community connectivity by attracting a wide range of community members.

- Improve the public transport network to ensure all people across NSW have access to low-cost public transport which enables them to access services, supports and community activities.
- Promote the benefits of volunteering, both for the community and for the volunteer.
- Provide mental health services to older people in their home to combat the mental health impacts of loneliness.
- Provide capital funding for not-for-profit housing providers, including providers of aged care to enable the construction of well-located homes close to services and community activities.

Introduction

Loneliness is a growing and pressing social issue affecting a significant portion of the population of New South Wales.

As a peak body representing not-for-profit community/human services in Southern NSW, CI group recognises the urgency of understanding the extent of loneliness and social isolation, particularly across diverse communities. includes both quantitative surveys and qualitative assessments to explore the lived experiences of individuals to identify the causes and impacts of loneliness, and to learn strategies that the non-lonely implement to avoid loneliness. Identifying populations most at risk is crucial to enable to development of targeted interventions. Understanding these demographics can inform the development of tailored programs that address specific needs and raise social connections within these communities.

Residents in rural and regional areas, experience higher levels of loneliness, attributed to geographic isolation and limited access to social activities (ABS, 2021)[1]. This is reinforced across Southern NSW, where many people live in isolated towns and villages, and many live even more remotely in rural and remote areas.

Research by Holt-Lunstad et al., 2022[2] established that that loneliness is linked to various mental health issues, including anxiety and depression, and can have harmful effects on physical health, including an increased risk of cardiovascular disease (currently Australia's

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[1] Australian Bureau of Statistics (ABS) (2021). Social Participation.
[2] Holt-Lunstad, J., Baker, M., Harris, T., & Stephenson, D. (2022). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. Perspectives on Psychological Science.

I think loneliness has been around a long time..._It has certainly been one of the biggest issues I've faced working in the community sector for over 30 years.

It's never gone away, it has just gotten bigger. I've noticed since the pandemic older people are particularly impacted by loneliness - it has become more common.

For us, we experienced it as older people not coming back to the service post-COVID - people who used to come to line dancing, or our social groups, now they don't want to participate themselves, or their families are worried they'll get sick and they're trying to protect them.

But then that's causing people to stay at home, not socialize, not have those connections and that leads to bad some health issues - depression, anxiety, a whole lot of things.

And young people, especially since the pandemic, I've noticed an increase of young people not coming back to activities because they are so reliant on social media - sometimes they think they have a lot of friends (online), but really, they haven't.

Neighbourhood Centre manager, Illawarra

major cause of death). Studies have found that both loneliness and social isolation increase the likelihood of premature death, with risks comparable to those associated with smoking and obesity. The authors discuss potential mechanisms behind this relationship, including psychological effects such as increased depression and anxiety, as well as physiological responses that can lead to health complications like cardiovascular diseases.

In 2023, the Australian Institute of Health and Welfare reported that loneliness affects approximately 1 in 4 Australians[3]. Prevalence such as this warrants intensive research that includes both quantitative surveys and qualitative assessments to explore the lived experiences of individuals to identify the causes and impacts of loneliness, and to learn strategies that the non-lonely implement to avoid loneliness.

Identifying populations most at risk is crucial to enable to development of targeted interventions. Understanding

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[3] Australian Institute of Health and Welfare. (2023). Australia's Health 2023

these demographics can inform the development of tailored programs that address specific needs and raise social connections within these communities.

Concerningly, loneliness has become increasingly prevalent due to various societal, economic, and technological changes, and was particularly exacerbated by the pandemic.

The current cost of living crisis is further exacerbating loneliness. Some local residents living in social housing on low incomes have shared strategies they employ to combat food poverty and energy poverty. These include loneliness-inducing activities such as:

- Going indoors early in the afternoon and closing windows, doors and blinds to keep out the cold.
- Not inviting people to visit to avoid the shame of not having anything to offer them.
- Going to bed early or staying in bed late to make skipping meals easier.
- Sitting in the dark to avoid using electricity.

Stories such as these clearly demonstrate how having a low income, including living on a pension or income support, can increase the risk of loneliness and the associated mental and physical health impacts.

Loneliness can weaken community ties, making it harder for residents to come together for local initiatives or support each other during crises, such as natural disasters[4].

Loneliness in Southern NSW, particularly in rural and regional areas, has significant social and psychological impacts. Many individuals in our areas report a lack of meaningful social interactions, which can lead to a sense of disconnection from their communities. Vulnerable groups, including the elderly, young people, those living with disabilities, and residents in regional areas, often face unique challenges that intensify feelings of isolation[5]. This is particularly evident among young people, who may feel lonely despite being connected through social media[6]. Other at-risk groups include older people, particularly those who live alone, who may already face mobility challenges and health issue. Bereaved individuals may also experience profound loneliness as they navigate their grief.

Loneliness is increasingly prevalent in the region, with several factors contributing to this issue. Community sector professionals provide vital supports to address and ameliorate loneliness across various sectors, including homelessness support, women's and domestic

[4] Beyond Blue (2022). Loneliness.
[5] Australian Psychological Society. (2022). The Mental Health of Australians: Impacts of Loneliness.
[6] A,ustralian Bureau of Statistics (ABS) (2021). Social Participation.

violence services, child and family services, youth services, aged care, disability services, and generalist community and neighbourhood centres. Members report that profound isolation loops through the lives of those they serve. Through their interactions, they identify the pain, resilience, and urgent need for connection among their clients.

As members reflected on their experiences, they recognised an urgent need for collective action. *"More funding to target loneliness specifically would be ideal,"* one member expressed, highlighting the need for a community-wide initiative. This member believes that empowering individuals to connect can transform lives, but it requires a unified effort. *"More free activities,"* another suggested. "*Many NGOs charge for services, making it difficult for some people to participate."*

Addressing loneliness demands an approach that actively engages individuals across various demographics and fosters meaningful connections. By implementing targeted strategies and investing in existing and new inclusive spaces, we can effectively lessen the long-term effects of isolation. NSW urgently needs community programs, support networks, and initiatives that promote interaction and understanding, ensuring that everyone can feel connected and valued.

The tyranny of distance

Distances in the Shoalhaven, Eurobodalla, Bega and Southern Tablelands greatly impact travel options, making it challenging for residents to participate in group activities. *"It can be more difficult to connect in regional and rural areas as the distances between homes and villages can be greater,"* one member explained. The barriers of transport and limited access to social, recreational, and employment opportunities further compound this issue. *"Loneliness transcends geographical boundaries,"* another noted, *"but it becomes exacerbated by these barriers – as there's less access to social groups, transport, family, and shops."*

Transport disadvantage is a significant issue throughout much of southern NSW, particularly in towns and suburbs with low socio-economic indicators. Transport is vital to address and prevent loneliness. It enables access to jobs, education, and social activities as well as essential services. The vast distances across the region, plus the often-isolated towns

and villages has resulted in many people experiencing lack of opportunity as well as geographic and social isolation.

Groups of people most vulnerable to this isolation include young people, people living with physical or mental illness or disability, people living on income support payments, pensions or low incomes, older people, and carers. As noted previously, these groups are also most at risk of the mental and physical health impacts of loneliness.

Access to active transport routes and to reliable and affordable public transport is inequitable throughout the region, with some areas having good access, and others having access to only one bus service daily with fares which make regular transport inaccessible. Some villages in regional parts of NSW have no active or public transport options leaving residents to rely on private vehicles to access to essential services, education and employment opportunities, and recreational activities.

Improving access to public transport across NSW is vital to address loneliness.

However, some members observed that country areas may foster a stronger sense of community, as noted by one member who stated, **"Even though country areas do not have as many people, they seem to mingle and have a greater sense of community."** and another observed that greater anonymity in urban settings can lead to increased loneliness - **"There may be some protective factors in the regions for some people, because greater numbers of people could make it easier to become more invisible."**

Natural Disasters and COVID 19

Natural disasters such as recent bushfires and floods, have exacerbated loneliness and isolation, and mental health challenges across our region. Members report hesitancy to re-engage with social activities across both young and older cohorts who are choosing to remain at home, which perpetuates their loneliness.

Specific Circumstances That Lead to Loneliness and Their Impacts

Loneliness presents differently depending on individual circumstances. *"It presents differently when someone is unable to connect with the people around them for various reasons—cultural, disability, or conflicting beliefs,"* one member remarked. *"People could be lonely even while involved in social activities."*

Our member organisations share that many clients describe a widespread sense of disconnect that colours their daily lives. One member service noted, *"I have come across many people that have a feeling of disconnect."*

This feeling is particularly heightened among older people, many of whom live alone. *"Elderly people who live alone are especially vulnerable,"* shared a worker focused on older persons' mental health. *"The largest cohort I work with are older people in the aged care sector, and loneliness impacts them in different ways, especially those aged 85 and older."*

These individuals often find themselves isolated due to poor health, mobility issues, and the grief associated with the loss of loved ones. As one of our members pointed out, *"Reduction in quantity and quality of social connection can happen for several reasons, including major transitions such as retirement, change in living arrangements, grief and loss, and health decline."* The weight of this solitude becomes a heavy burden, affecting not just their emotional well-being but also their physical health.

Societal change also contributes to the isolation experienced by older individuals. *"The Australian lifestyle often leads young people to live separately from their parents, leaving those over 50 to live alone,"* one member observed. *"Young people seem too busy with work and social media to help their mothers, and long commutes from regional areas to cities leave little time for family."*

Older kids... seem to be lagging developmentally.

Some have disengaged from school and then from everything else as well. They're just rattling around, trying to find connection. They'll attend activities for much younger children, and while they don't necessarily disrupt, they're clearly seeking any kind of connection.

This is frustrating for us because we're not equipped to help them. We also see this issue in parents, which is harder to address since our programs are aimed at children.

Parents tend to isolate themselves from the community and, while they send their kids out, they don't engage. We also have families with older kids who have gaming addictions and rarely leave the house, some in their late teens or early 20s, and they're not engaging in anything else at all, not even coming out of their rooms.
And then there's other things like language barriers, lack of access to internet and transport.

Children's services worker, Illawarra

For many people from culturally and linguistically diverse (CALD) backgrounds, loneliness is compounded by a lack of connection to their heritage and community. ***"Elderly people from CALD backgrounds often find themselves alone after their children move out,"*** one member explained. ***"They are too busy with their lives to visit or help with simple tasks, leading to a profound sense of isolation."*** This cultural disconnection creates a split, making it difficult for these individuals to engage with their community or maintain their cultural practices. ***"Many of our older people do not use computers or have an internet connection,"*** another member pointed out, further impairing their isolation.

In day-to-day observations, our members noted increasing loneliness among both clients and staff, with many reporting having no family or friends. Clients often lack motivation to engage in social activities due to health or transportation barriers, and cultural communities also struggle, with many expressing loneliness through physical symptoms like chronic pain. The perception of loneliness differs in rural areas too, where geographic isolation and limited transport exacerbate feelings of disconnection.

One group identified consistently by our members are parents, especially those with young children, who experience isolation due to the abovementioned factors, and which is often exacerbated by anxiety and a lack of resources.

The individual impact of trauma should not be overlooked. *"Trauma plays a significant role in how loneliness presents,"* one member added, emphasising that understanding loneliness requires an approach that considers various personal and societal factors.

Impacts of COVID-19 and Natural Disasters

According to our members, the COVID-19 pandemic significantly worsened loneliness. Members noted that many older people were hesitant to re-engage socially and many reported an increase in referrals for anxiety and feelings of isolation post-pandemic. *"COVID exacerbated loneliness among seniors, but it affects all genders, ages, and cultural backgrounds,"* one member observed. The pandemic forced many into isolation, and as restrictions lifted, resistance stayed. *"Many are still unsure about going out in public,"* noted one member, highlighting how fear and uncertainty have replaced what were once a part of normal social interactions. Lockdowns also created an *"us and them mentality for some people which divides us and limits interactions,"* another member reflected.

Members stated they had seen loneliness lead to serious health issues, including depression and anxiety, particularly among older adults who often have declining health and limited social support and younger people. This is particularly worrisome in the face of the growing prevalence of dementia, and the fact that the mental health impacts of loneliness are risk factors for dementia. Current services, such as meal deliveries and social support programs, exist but are hindered by inadequate transport options, limiting their effectiveness.

Referrals for anxiety and isolation surged post-pandemic, with many clients reporting feelings of being cut off from society. *"COVID increased both the level and prevalence of loneliness due to further social disconnection,"* one member highlighted, pointing to the loss of face-to-face interactions. Another member described the lingering effects, stating, *"I felt like I was already in lockdown when COVID started; the isolation continued long after restrictions lifted."*

Psychological and Physiological Effects of Loneliness

Recent studies indicate that loneliness is linked to various mental health issues, including anxiety and depression, and can have harmful effects on physical health, such as an increased risk of cardiovascular disease (Holt-Lunstad et al., 2022)[7]. The study explores the impact of loneliness and social isolation as significant risk factors for mortality. The research found that both loneliness and social isolation increase the likelihood of premature death, with risks comparable to those associated with smoking and obesity. The authors discuss potential mechanisms behind this relationship, including psychological effects such as increased depression and anxiety, as well as physiological responses that can lead to health complications like cardiovascular diseases.

These findings emphasise the urgent need to address loneliness and social isolation as critical public health issues. The authors advocate for community programs and interventions that foster social connections, particularly targeting vulnerable populations, and recommend that public health initiatives incorporate strategies to reduce loneliness and promote social engagement.

The decline of community structures impacts loneliness and social isolation, as people may lack the support systems that traditionally helped foster connections. Addressing these factors is crucial to prevent the increase of loneliness. This involves not just encouraging social activities but also promoting open conversations about mental health and building inclusive community spaces.

The consequences of loneliness extend far beyond emotional distress. ***"Loneliness can lead to adverse health outcomes such as increased cortisol levels, cardiovascular disease, and depression,"*** a local health worker explained. ***"It's well known that loneliness can exacerbate existing health conditions, leading to increased hospital visits."*** Many clients within our community face not only mental health issues but physical ailments that arise from prolonged isolation. ***"Lonely people have higher hospital admissions,"*** noted another member, emphasising the cycle of loneliness leading to increased healthcare costs.

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[7] Holt-Lunstad, J., Baker, M., Harris, T., & Stephenson, D. (2022). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. Perspectives on Psychological Science.

This physical toll is particularly dominant among the elderly, whose declining health often limits their ability to engage socially. *"They suffer from reduced mobility, hearing, and vision impairments, which prevent them from participating in activities they once enjoyed,"* a community worker pointed out. The extensive nature of loneliness expresses in various health issues: *"It can lead to sleep problems, headaches, increased levels of stress, anxiety, and emotional distress,"* a member added.

Financial Implications of Loneliness

The financial implications of loneliness are substantial, affecting both individuals and the broader economy. A report by the Economic Council of Australia (2023)[8] estimated that social isolation costs the economy billions annually, highlighting the need for increased investment in community initiatives and support systems.

The financial burden of loneliness weighs heavily on both individuals and organisations.

"Loneliness causes mental health issues, which in turn lead to physical health problems," one member pointed out. *"If we had more connections for our elderly clients—like regular check-ins—we could reduce mental and physical illness."*

The financial impact can be staggering; clients living alone often face increased costs for basic tasks, leading to a cycle of poverty and isolation. *"Most often, people that live alone have to pay double and triple for simple household tasks,"* another support worker added. *"They end up paying someone to assemble new furniture or help with maintenance."* This financial strain extends to increased use of health services, including psychologists, counsellors, and medications for anxiety and depression.

The challenges are not confined to older people. *"For the young people I work with, loneliness doesn't seem to be the primary burden; rather, it's unemployment, crime, and the impact of school on their self-esteem,"* a member noted. This reveals a broader scale of issues that contribute to the financial burden associated with mental health.

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[8] Economic Council of Australia. (2023). The economic impact of social isolation in Australia. Retrieved from

There are 3 big factors impacting low numbers of volunteer. Firstly, we've all become complacent because we're so used to staying home and doing everything online. It's become an effort to get up and do something.

Second, is the cost of living. No one can afford to volunteer.

Thirdly, I think the loneliness epidemic has actually hit workers as well. You know, even though they're not presenting that to the client, who are they connecting with really?

Organisations that support these individuals are also feeling the strain. **"Many of our programs cost hundreds of thousands to millions of dollars nationally, focusing on providing social support services,"** a member revealed, indicating the financial pressures on community resources. The constant battle for funding highlights the need for systemic support: **"We need increased funding for transport and social groups,"** emphasised another member. **"There's no use in offering programs if people can't access them due to a lack of transport."**

Cost of living pressures are also closing off once-affordable opportunities for families and older people to socialise at venues like pubs and clubs, which are now becoming increasingly expensive and less frequented as the financial pressures of interest rate hikes, inflation, increased grocery bills and service costs go up. **"People are just not going out. Even getting a few people together and being able to gather at a pub and listen to a musician in the corner and have a few beers, take their families down to a beer garden, that's now inaccessible - It's inaccessible to me in a family with two incomes"** a children's service provider observed.

Another observed **"the cost of living is ridiculous right now and you know, we all work with very disadvantaged people who don't even have enough money to put food on their table, let alone socialise... even on two incomes people are living pay check to pay check."**

Combatting Loneliness

To combat loneliness, community action is essential. The connection between social engagement and physical well-being highlights the importance of proactive efforts to strengthen community bonds, as robust social networks offer benefits that extend beyond emotional support (Berkman et al., 2020; Van Winkel et al., 2022)[9].

Efforts to reconnect people with their communities through neighbourhood/community centres, volunteer opportunities, or support groups is vital.

> *We provide a range of neighbourhood centre activities from support groups to health and well-being groups like line dancing, garden groups, women's group social connection groups and youth groups. We do so much, but we could do more with broader funding.*
> *Plus we put out a lot of information, support and referrals.*
>
> *Neighbourhood centre manager, Illawarra.*

Strategies to address loneliness are clear. Increase funding and staffing for community programs, support fully resourced community centres, simplify regulations to enhance flexibility in programming, and improve volunteer and transport services to facilitate attendance at activities and events.

Community organisations within our region have created programs to encourage connection and address loneliness and social isolation, however funding and programmatic limitations mean there is far more to be done.

Our member organisations have highlighted current programs in place and some that are needed to combat loneliness.

In the Illawarra, Wollongong City Council have implemented 'Connecting Neighbours' Grant Programs and in the Shoalhaven the Anti-Poverty Committee (SAPC) have launched the 'Connecting Communities Fund', both providing opportunities for individuals, families and communities to participate in community projects to support them to be /feel connected and belong.

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[9] Berkman, L. F., Glass, T., Brissette, I., & Seeman, T. E. (2000). From social integration to health: Durkheim in the new millennium. Social Science & Medicine, 51(6), 843-857.

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Service providers highlighted the need to broaden funding for community centres and organisations delivering these services to provide more certain financial backing for existing programs like these that are already working.

"We offer social coffees and interagency meetings," shared a neighbourhood centre manager. *"We also provide meals and opportunities for clients to engage with others… weekly community lunch weekly service hub and BBQ (connection points with community and support services) and community events."*

"Group programs including exercise, resilience, cooking and educational activities," one member highlighted with another advising *"courses, education and training, social groups at preschools and playgroups".*

"Fitness for life and Breakfast Clubs" are working well one member highlighted.

"We support elderly people to increase their health literacy," noted another member. *"While it's not specifically aimed at combating loneliness, our health programs—like chronic pain management and health sessions—help individuals stay connected for a week at a time."* This underscores the multifaceted approach to addressing isolation.

"Creative projects, such as the podcast initiatives I've worked on, can give a sense of purpose that mitigates despair linked to loneliness," one member reflected. *"I also offer a counselling and mentoring program by the water, which enhances wellbeing."*

Low-cost or free community festivals were also highlighted as a key way regional towns came together and something all members agreed additional NSW Government funding would help become annual, recurrent and more frequent events where people of all ages and incomes could meet and connect.

Members highlighted festivals with an arts component, as these festivals encouraged people to make and create things together and break down barriers and overcome communication hesitation. *"Collaborative events that all the community can attend, like the SaltWater Festival and NAIDOC week festivals are important to community and they give a chance for people to get out and about…the recent ones in Kiama, Warrawong, and Port Kembla where the street was closed for the festival have been really successful events.*

These initiatives serve as vital lifelines for many, offering structured opportunities for social interaction. **"Changing perspective and motivational tools can better people's views on life and the challenges it throws at them,"** one member highlighted, emphasising the importance of support in reframing loneliness.

However, the need for more resources is evident.

Examples of programs that work in the Illawarra/South Coast areas and that need ongoing, core funding by government:

- *Council Connection program funding*
- *Neighbourhood centre breakfast Clubs*
- *PCYC Fitness for Life*
- *Community playgroups*
- *Community transport to social programs*
- *Community garden projects*
- *Womens' connection groups*
- *Mens' connection groups*

Members advised **"Youth centres would be great if they were well funded, and staff were really well trained." "We need increased funding for transport and social groups,"** emphasised another member. **"There's no use in offering programs if people can't access them due to a lack of transport."**

Another member added **"Mental illness recovery and a strength-based approach which often involves reconnection to local social activities. This service can partner with other NGOs to offer the consumer choice and variety."**.

The lack of adequate transport options often limits participation, particularly for those in rural or remote areas. **"Investment in transportation is crucial,"** another member insisted. **"Without it, even the best programs fall flat."**

Despite the challenges, there is a strong desire for community engagement and a belief in the power of human connection. **"We need to encourage more local gatherings—neighbourhood coffee clubs, community picnics,"** suggested a member. **"More connection to neighbours and local activities could significantly reduce loneliness."** With funding for grassroots efforts like these, community service organisations can help build a sense of community and belonging, fostering relationships that are essential for well-being and rebuilding "the village" for everyone.

We need to Increase funding and staffing for community programs that meet communities where they are at. This includes increasing funding for youth hubs, neighbourhood centres, community spaces, legal centres, womens' health centres, medical centres and NFP health spaces and be designed by the communities themselves.

"We provide a lot of youth programs and accommodation services, so we focus on modelling healthy behaviours—like getting out of your room, limiting gaming, and not just isolating in your own space. We encourage group activities, shared meals, and that sort of thing. There's a lot of this kind of modelling happening within our Nowra service, which is much more family-oriented. Our oldest tenant is about 86, and our youngest is 18, with children in between.

Our staff often knock on doors and really model getting out there and engaging with what's available. They suggest activities, even if it's not directly social—like going to the library or doing their shopping in person rather than online—so they're interacting with the community in some way."

Shoalhaven Youth Services worker

Furthermore, we must restore holistic funding for community centres/neighbourhood centres, as the current targeted early intervention (TEI) funding framework does not resource these vital centres to provide the breadth of programs and services for the whole community to help prevent loneliness. The move away from funding these centres as "jacks of all trades" has had an enormous impact in our regions and is contributing to loneliness in our populations.

Our members advocate for a return to face-to-face interactions over digital solutions. ***"I don't believe that online solutions for loneliness are the wisest way to go,"*** one member stated. ***"Actual face-to-face contact seems to make a more lasting and effective impact."*** Another noted, ***"We rely too heavily on external solutions; what we need is to appreciate the connections we already have."***

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This recognition is critical for planning and design of programs that village mentality and connection.

Programming and funding need to be flexible to accommodate different ages and cultural and linguistically diverse communities. One member noted *"funding to be able to run more services for the Arabic community with budgets for interpreting, childcare and food where possible. Budget to run community workshops and for resources."* with another adding *"when we look at loneliness in aged community and returned soldiers the implications can be huge, and we don't often understand humans are social being's loneliness is not something we deal with very well."*

As these dedicated member organisations continue their work, they remain committed to combating loneliness in all its forms. *"We must change perspectives and provide motivational tools to help people view their situations differently,"* said one member, illustrating their belief in the potential for change.

"It is about creating places where people connect, create positive relationships and you know, really get back to the basics of how we connect as a community and centres should be like a friendly lighthouse for people, where we try to provide as many opportunities as we can for people to connect."

Examples of successful programs in the Illawarra/Shoalhaven

Continuing To Be Me At Home Program (C2bMe@Home)

Delivered by Uniting NSW. ACT, the Continuing To Be Me At Home Program (C2bMe@Home) was an important program which provided free mental health supports to older people in their own home. The program was delivered in the Illawarra, Ulladulla, Nowra, Eurobodalla and Bega regions between 2020 and 2023.

Initially commissioned as a response to the decline in mental wellbeing among older people due to the fear and social isolation caused by the Covid-19 pandemic, this program offered continuous support to between 200 and 300 older people across south-eastern NSW every year since 2020.

The C2bMe@Home program used a multidisciplinary team approach, giving older people access to a range of mental health specialists including mental health nurses,

psychologists, social workers and counsellors. Workers met the participants where they are, which maximised participation, and ensured the older person felt safe and comfortable. The program was positively evaluated by Western Sydney University, and the benefits were recognised by both participants and referrers (often the participant's GP).

Older people who are lonely and don't have strong social networks and support can become socially isolated and be at risk of developing mental health conditions such as depression. Having depression can be a risk factor for developing dementia. Yet many older people prefer to remain in their own home, rather than move into residential aged care. Indeed, the Australian Government has for many years promoted ageing in place as a preferred policy, and this was evidenced in the recent 2023/24 federal budget which saw funding for aged care beds being reduced in favour of increased Home Care Packages.

Providing mental health supports through the C2bMe@Home program will be vital in supporting mental wellbeing for older people to keep them healthy, safe, and connected in order to age well in place, and to reduce demand on the already-stretched aged care system.

Funding for the program ended on 30th June 2023, and Uniting NSW.ACT have been unable to source further funding to keep this important service running. Home Care Packages do not cover mental health supports such as this.

For More Information:

E:

W: communityindustrygroup.org.au

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