

**Submission
No 98**

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

Organisation: Uniting NSW.ACT

Date Received: 31 October 2024



Hon. Dr Sarah Kaine, MLC
Chair
Legislative Council Standing Committee on Social Issues
Parliament of New South Wales
6 Macquarie Street
Sydney NSW 2000

Via [online submission](#)

30 October 2024

Dear Dr Kaine

Submission to the Inquiry into prevalence, causes and impacts of loneliness

Thank you for the invitation to contribute to the [Inquiry into and report on the prevalence, causes and impacts of loneliness in New South Wales](#).

Uniting NSW.ACT contributes to the work of the Uniting Church in New South Wales and the Australian Capital Territory, through social justice advocacy, community services and spiritual care. We provide services for all people through all ages and stages of life, and drive solutions to systemic issues so people experiencing disadvantage can live their best lives. Our purpose is to inspire people, enliven communities and confront justice. We value diversity and always welcome everyone exactly as they are.

In this submission, we focus primarily on loneliness among older people. We draw on our experience as a provider of low-cost housing to older people through our retirement living villages. This includes some 900 affordable properties, with 600 provided through the Social and Affordable Housing Fund (SAHF). We also provide residential aged care services that specialise in caring for older people with lived experience of homelessness. Currently, we support 8,001 people in residential aged care and 11,657 in home and community care.

Social isolation and loneliness among older people have significant consequences for individuals and for society at large, and have been linked to emotional distress, mental illness, suicide, and poor health including impaired immune functions and high blood pressure. These costs are avoidable with appropriate and early enough supports for social connectedness and mental wellbeing. Unfortunately, this is a current blind spot in our aged care and mental health systems as neither are equipped with sufficient resourcing or specialist knowledge and expertise to meet the needs of older people. Even when mental health supports exist, they are mostly reactive and focus on crisis response and acute care instead of prevention, early intervention and treatment for less acute mental health needs.

We attach a copy of a white paper that is still in the final stages of drafting prior to publication, which discusses these issues, and which explores ways of rethinking how we can improve

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mental wellbeing for older people. It shows that this will require a rethink of funding models and developing and sustaining a skilled and capable workforce, plus support from a range of stakeholders including government, providers, aged care workers and older people themselves. Shifting our understanding of aged care and approaches that work while valuing the skills, experiences and strengths of older people can enable them to enjoy the highest possible quality of life through their ageing journey.

Please treat this paper as embargoed, and for the Standing Committee's confidential reference only. Uniting would be pleased to appear before the Standing Committee to address the issues raised in the paper.

For additional information or comment, please contact Dr Tom McClean, Head of Research and Social Policy, at _____ or on _____.

Yours sincerely,

Emma Maiden
General Manager, Advocacy and External Relations