

Submission  
No 127

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

**Organisation:** Australians for Mental Health

**Date Received:** 8 November 2024

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# Every Mind Needs Connection

How government and community can make reducing loneliness a shared priority project.

Australians for Mental submission to the Standing Committee on Social Issues Inquiry into the prevalence, causes and impacts of loneliness in New South Wales.

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November 2024

*Australians for*  
**Mental Health.**



Australians for Mental Health pays respects to the Traditional Owners of the lands on which we live, work and travel.

We acknowledge and pay respects to Ancestors and Elders from across the continent, now known as Australia.

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## About Australians for Mental Health

Australians for Mental Health is a national citizen-led social campaign group dedicated to creating an Australia where every person – regardless of their circumstance – has their mental health needs recognised and met, in every aspect of how we live, work and play.

Australians for Mental Health was founded by 2010 Australian of the Year Patrick McGorry along with a small group of eminent Australians including business, mental health and community leaders, with the aim of building the public support required to make holistic reform to the way Australia thinks and acts on mental health a top national priority.

Today we have over 10,000 supporters, and we have members in every State and Territory of Australia. Together we are building movement of citizens that connects the millions of Australians who care about mental health, so that we can:

- Build a collective voice, community by community, too powerful to ignore.
- Amplify the stories of everyday people, so that mental health reform genuinely meets the needs of citizens.
- Achieve tangible, practical changes that make a meaningful difference in the lives of Australians.

Australians for Mental Health is not a peak body or service provider, and receives no public funding.

## Summary of Proposals

<b>Address the underlying causes of loneliness</b>	Ensure policy solutions are informed by known causes of loneliness, ranging from personal subjective circumstances to more systemic factors such as economic disadvantage.
<b>Inform mental health policy</b>	Integrate the recognised connection between social connection and relationships and mental health and wellbeing in NSW mental health policies and strategies.
<b>Establish a strategy</b>	Task the Minister for Mental Health with creating a 5-year strategy to combat loneliness, based on the recommendations of the Inquiry.
<b>Coordination of key departments</b>	Establish policies, projects and programs across key government departments to support all NSW residents to build meaningful connections.
<b>Invest in community-based mental health care</b>	Invest in community-based mental health care and ensure that there is a robust mental health care system for NSW residents to access, considering the intersection of loneliness and mental health.
<b>Resource and task local governments</b>	<p>Amend the <i>Local Government Act 1993</i> to require local governments to plan and report on plans to reduce loneliness and increase connection.</p> <p>Resource local governments to support communities and facilitate programs and activities that combat loneliness and encourage meaningful connection.</p>
<b>Cost effective programs</b>	Invest in cost effective intervention programs that address loneliness across NSW and reinvest cost savings into the mental health care system and the loneliness strategy.

**Broader societal considerations**

Recognise contemporary societal shifts/trends as a source of loneliness and lack of belonging and connection, to inform policy and program solutions.

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**Meaningful connection through community, workplaces and organisations**

Support communities and workplaces to engage in policies, programs and activities that encourage meaningful connections.

## Introduction

Australians for Mental Health ('AfMH') welcomes the opportunity to provide a submission to the Standing Committee on Social Issues inquiry into Prevalence, causes and impacts of loneliness in New South Wales. Loneliness is an issue that can affect anyone, and we welcome the opportunity to discuss the impacts of loneliness, but also connection, on mental health.

This Inquiry provides an opportunity to discuss a range of themes, including the need to engage with broader social contexts when faced with mental health issues. Determined to fight for structural change, our submission is guided by Australians for Mental Health's recently formulated the **EVERY MIND MATTERS PRINCIPLES** which represent what we believe is critical to ensuring that every Australian has their mental health and wellbeing needs recognised and met:<sup>1</sup>

- Principle 1: Put the Needs of People First
- Principle 2: Whole-of-Government Accountability
- Principle 3: Confront the Root Injustices of Mental Ill-health
- Principle 4: Overhaul Acute Mental Health Systems
- Principle 5: Invest in Community & Connection
- Principle 6: Support Families to Nurture Children
- Principle 7: Listen & Respond to the Needs of Young People
- Principle 8: Dismantle Damaging Work Cultures
- Principle 9: Recognise Nature as Central to Human Wellbeing
- Principle 10: Guarantee Timely Access to Quality Services

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<sup>1</sup> *Every Mind Matters: action for a mentally thriving Australia.* (2024). Australians for Mental Health.  
[https://www.afmh.org.au/every\\_mind\\_matters](https://www.afmh.org.au/every_mind_matters)

Further, our submission will touch on the prevalence and causes of loneliness, and the connection between loneliness and mental health. While our submission will respond generally to the inquiry, it will also be guided by the following Terms of Reference:

(a) the extent of loneliness and social isolation in NSW and how this is measured and recorded, including opportunities for additional and/or improved data capture

(c) evidence of the psychological and physiological impacts of loneliness on people, including young people, the elderly, those living with a disability, those living in regional areas and the bereaved

(f) the financial costs of loneliness to the NSW budget and the state economy and steps that can be taken to reduce the financial burden of loneliness

(i) steps the State Government can take to reduce the prevalence and impacts of loneliness in the community

(j) steps that the community, technology/social media companies, organisations, and individuals can take to reduce impact of loneliness on individuals and the community

This submission is informed by research, observations and examples of community responses to a survey about loneliness and connection sent to Australians for Mental Health supporters and members. Note that the community responses may not have necessarily been from Australians for Mental Health members, and were not specific to New South Wales, however, we believe that they still provide valuable insight into the perspectives of everyday individuals.



## Prevalence and Causes of Loneliness

Statistics can only tell some of the story of mental health in Australia, but they provide a useful insight into the scale of the challenge before us.

The State of the Nation Report (2023) by Ending Loneliness Together outlined that 15 per cent of Australians often or always feel lonely, and 29 per cent of the population of NSW experiences loneliness.<sup>2</sup>

Australians for Mental Health conducted a poll of 1,781 residents in the March 2024 National Mental Health Monitor,<sup>3</sup> which found that when asked for a Yes/No response to the proposition “*I have had enough connection with other people and do not feel lonely*”, **34.7 per cent** of respondents answered **No**.

This table breaks those responses down by locality type:<sup>4</sup>

Yes or No: “I have had enough connection with other people and do not feel lonely”						
	Total	Inner Regional	Major Cities	Outer Regional	Remote	Very Remote
Yes	65.3%	61.6%	66.8%	65.9%	65.0%	62.5%
No	34.7%	38.4%	33.2%	34.1%	35.0%	37.5%

Perhaps counterintuitively, young Australians have experienced a steady rise in loneliness since 2008.<sup>5</sup> This is consistent with the results of the March 2024 National Mental Health Monitor:

Yes or No: “I have had enough connection with other people and do not feel lonely”					
	Total	18-34	35-30	51-65	65+
Yes	65.3%	58.5%	63.1%	68.8%	72.4%
No	34.7%	41.5%	36.9%	31.2%	27.6%

<sup>2</sup> Ending Loneliness Together. (2023). *Social Connection in Australia 2023 A Deep-Dive into Loneliness and Social Isolation*. [https://endingloneliness.com.au/wp-content/uploads/2023/10/ELT\\_LNA\\_Report\\_Digital.pdf](https://endingloneliness.com.au/wp-content/uploads/2023/10/ELT_LNA_Report_Digital.pdf)

<sup>3</sup> Australians for Mental Health. (2024). *Mental Health Monitor*. [https://www.afmh.org.au/mental\\_health\\_monitor](https://www.afmh.org.au/mental_health_monitor); Mental Health Monitor 2024; Australians for Mental Health (2024). New poll reveals a surge in the number of Australians reporting poor mental health and loneliness.

[https://www.afmh.org.au/new\\_poll\\_reveals\\_a\\_surge\\_in\\_the\\_number\\_of\\_australians\\_reporting\\_poor\\_mental\\_health\\_and\\_loneliness](https://www.afmh.org.au/new_poll_reveals_a_surge_in_the_number_of_australians_reporting_poor_mental_health_and_loneliness).

<sup>4</sup> Australians for Mental Health. (2024). *Mental Health Monitor*. [https://www.afmh.org.au/mental\\_health\\_monitor](https://www.afmh.org.au/mental_health_monitor); Mental Health Monitor 2024; Australians for Mental Health (2024). New poll reveals a surge in the number of Australians reporting poor mental health and loneliness.

<sup>5</sup> Marinos, S. (2024, February 12). *Australia’s young people are getting lonelier*. Pursuit; The University of Melbourne. <https://pursuit.unimelb.edu.au/articles/australia-s-young-people-are-getting-lonelier>

These statistics reflect other data points. For instance, the Mental Health Commission of New South Wales outlines that in 2022, 58.6 per cent of young people aged 15 to 24 years reported feeling lonely often.<sup>6</sup> The State of the Nation report also found that 22 per cent of 18 to 24 year olds often/always felt lonely.<sup>7</sup>

Understanding the possible causes of loneliness and disconnection can assist in developing solutions that truly meet people’s needs. The *Why We Feel Lonely* study by Ending Loneliness Together, surveyed Australians to understand what life circumstances contribute to persistent loneliness and isolation.<sup>8</sup> The study found for example that around 1 in 4 workers reported persistent loneliness.<sup>9</sup> As outlined in the study, “understanding who is at risk of persistent loneliness is the first step to providing more support to vulnerable individuals”.<sup>10</sup>

When asked  
**“What do you think are some causes of loneliness?”**  
one person said,  
**“Losing your husband”,**  
another said  
**“Rural & Remoteness – lack of services”.**

The Australians for Mental Health March 2024 National Mental Health Monitor revealed the following main reasons for feeling disconnected:<sup>11</sup>

- Lack of friends
- Family/relationships
- Work
- Health Issues
- Mental Health
- Being too busy

While loneliness can be a deeply personal and subjective experience, there are other risk factors which require broader consideration. Lim et al. found that “economic and social factors influence our social connection – for example, people with low income,

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<sup>6</sup> Mental Health Commission of New South Wales. (2024, June 5). *Loneliness*. Mental Health Commission of New South Wales. <https://www.nswmentalhealthcommission.com.au/measuring-change-indicator/loneliness>

<sup>7</sup> Ending Loneliness Together. (2023). *Social Connection in Australia 2023 A Deep-Dive into Loneliness and Social Isolation*. [https://endingloneliness.com.au/wp-content/uploads/2023/10/ELT\\_LNA\\_Report\\_Digital.pdf](https://endingloneliness.com.au/wp-content/uploads/2023/10/ELT_LNA_Report_Digital.pdf), p. 13.

<sup>8</sup> Ending Loneliness Together. *Why we feel lonely A deep dive into how different life circumstances contribute to persistent loneliness*. <https://lonelinessawarenessweek.com.au/wp-content/uploads/2024/08/why-we-feel-lonely.pdf> (“Why we feel lonely Report”).

<sup>9</sup> *Why we feel lonely Report*, p. 19.

<sup>10</sup> *Why we feel lonely Report*, p. 11.

<sup>11</sup> AfMH 2024 Mental Health Monitor

who are unemployed and live in disadvantaged neighbourhoods are at greater risk of loneliness and social isolation”.<sup>12</sup>

“Being unemployed and not having the financial means to engage in activities that support social participation, and a government that assumes that welfare recipients should not spend money they receive on such activities that are beneficial and essential to their health & well-being!”

*AfMH Survey Response to  
‘What do you think are some  
causes of loneliness?’*

The Australians for Mental Health principles ask us to address the mental health crisis by addressing the underlying injustices that drive mental ill-health. The above data presents that loneliness affects many Australians, and that the causes of loneliness are varied – from individual bereavement, to work and possibly more systemic factors like socioeconomic status.

We recommend that policy is informed by known causes of loneliness, including considering causes ranging from personal subjective circumstances to more systemic factors such as economic disadvantage.

## Impacts of Loneliness and Connection

While loneliness is not necessarily a mental health issue, it is a ‘risk factor for poor mental health’.<sup>13</sup> The Connections Matter report outlines that “loneliness is not a mental health issue”, but that people who are lonely report poorer mental health.<sup>14</sup> Loneliness and mental health have a reciprocal relationship – loneliness can increase the likelihood of mental health issues, and mental health issues can lead to loneliness.<sup>15</sup> This is reflected in data reported on by the Mental Health Commission of New South Wales, which outlines that ‘more than 1 in 2 people with poor mental health reported feeling lonely often compared to 1 in 8 people with moderate to good mental health’.<sup>16</sup>

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<sup>12</sup> Lim, M.H., Manera, K.E., Owen, K.B. *et al.* The prevalence of chronic and episodic loneliness and social isolation from a longitudinal survey. *Sci Rep* 13, 12453 (2023). <https://doi.org/10.1038/s41598-023-39289-x>, p. 9.

<sup>13</sup> Casey, S., Dempster, A., Stevens, L., Hewish, A. (2020, November). Connections Matter A report on the impacts of loneliness in Australia. (available via <https://www.groundswellfoundation.com.au/post/connections-matter-a-report-on-the-impacts-of-loneliness-in-australia>) (p. 7) (‘Connection Matter Report’).

<sup>14</sup> Connection Matter Report, p. 10., citing World Health Organization (WHO), “Social isolation and loneliness among older people: advocacy brief,” WHO, Geneva, 2021.

<sup>15</sup> Connections Matter Report, p. 10., citing E. Schwartz and H. Litwin, “The reciprocal relationship between social connectedness and mental health among older European adults: A SHARE-based analysis,” *The Journals of Gerontology – Series B, Psychological sciences and social sciences*, vol. 74, no. 4, pp. 694–702, 2019.

<sup>16</sup> Connection Matter Report, p. 10.

**Care must be taken not to pathologise experiences of loneliness.**

Loneliness is a normal human response to circumstances and solutions for loneliness are better found outside the medical system. It can happen to anyone, at any point of life, and may not necessarily be connected to mental health issues.

Nonetheless, there is a connection between loneliness and specific mental psychiatric disorders. For example, loneliness and depression may share common symptoms, loneliness can be associated with a higher risk of dementia, loneliness can be a source of acute and chronic stress, and there is an association between loneliness and suicide ideation.<sup>17</sup>

**Loneliness can have a significant impact on mental health.**

“Self worth and confidence to try new groups and activities deteriorates (sic) with increased isolation.”

“...We don't build meaningful relationships because we're too obsessed with how independent we are and as a consequence when we face challenging times, we face them alone and struggle to reach out for help. All of these things make mental health worse...”

“...it impacts a lot. Now I am retired and living by myself I rely heavily on family and friends. My mental health status affects my ability to go out socially”

AfMH survey responses to “How do you think connection (with friends, family, community etc.) impacts mental health and wellbeing?”

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<sup>17</sup> Mushtaq, R., Shoib, S., Shah, T., & Mushtaq, S. (2014). Relationship Between Loneliness, Psychiatric Disorders and Physical Health ? A Review on the Psychological Aspects of Loneliness. *Journal of Clinical and Diagnostic Research*, 8(9). <https://doi.org/10.7860/jcdr/2014/10077.4828>

Given the prevalence of loneliness and mental health across Australia and in New South Wales, it is critical to recognise this relationship and develop ways to address loneliness.

“Well you aren’t sitting at home waiting for someone to visit or call”

*AfMH survey response*

While the negative impacts of loneliness are clear, we are also determined to bring to light the positive impacts of social connection on mental health.

Australians for Mental Health submits that community and connection is essential to bettering mental health and wellbeing across NSW and Australia more broadly.

Like loneliness, mental health is a collective issue, not just an individual issue. The loneliness epidemic or mental health crisis cannot be solved by individual action alone, and instead requires collective action.

“Real, positive, meaningful connection with others gives you a reason to live, and therefore is a genuine counter-incentive to suicide... It gives you a sense that you aren't alone; that there are others you can turn to for advice, help, reassurance, and encouragement, in times when you need such things.”

Building cohesive and strong communities must be part of the solution. However, as acknowledged by Lim et al.,<sup>18</sup> individual and community-based solutions may not necessarily be enough, if the “whole-of-systems” approach to loneliness is not considered. Therefore, the NSW government must establish a holistic response to mental health and integrate loneliness and connection considerations into this response.

“Very much so, we are social creatures but it’s difficult to now (sic) where to begin.”

*AfMH Survey Responses*

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<sup>18</sup> Lim, M.H., Manera, K.E., Owen, K.B. *et al.* The prevalence of chronic and episodic loneliness and social isolation from a longitudinal survey. *Sci Rep* 13, 12453 (2023). <https://doi.org/10.1038/s41598-023-39289-x>, p. 9.

## Steps the State Government can take to reduce Loneliness

### Whole of System, Whole of Government Approach

Coordinating a whole-of-system approach to tackling loneliness requires a whole-of-government strategy. Mental health is not just an issue for the health and hospital system and instead spans across many other areas such as such as housing and education.

Loneliness also requires a multilayered approach, not just one that provides support when crisis is reached. As explored above, for example, a government strategy should extend to supporting those experiencing economic disadvantage, recognising that this can be a risk factor towards loneliness. Beyond the mental health system, all government departments can have a role to play in addressing loneliness in NSW.

Other jurisdictions can provide insight into how this can be achieved. The United Kingdom famously appointed the world's first Minister for Loneliness, Tracey Couch MP.<sup>19</sup> In October 2018 the UK government published *A connected society A strategy for tackle loneliness – laying the foundations for change*,<sup>20</sup> which outlines a “cross-government” approach to tackling loneliness.<sup>21</sup> One of the goals of the strategy is to “embed loneliness as a consideration across government policy”,<sup>22</sup> a sentiment that should be replicated in New South Wales. The strategy also acknowledges that loneliness cannot be tackled by individuals and communities alone, outlining that “everyone can play a role in connecting”, including

“Connection or the lack of connection can have profound positive and negative impacts, but it goes far beyond just having somebody to talk to. It affects how you feel about yourself, whether you think you are a valued human person.... But I do not see government understanding or caring about any of these implications, and many practices and attitudes of government tend to make people's situations worse, not better.”

*AfMH Survey Response*

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<sup>19</sup> Re-engage. (2018). *Five years on from the first Minister for Loneliness*. Reengage.org.uk. <https://reengage.org.uk/latest-news/five-years-on-from-the-first-minister-for-loneliness/>

<sup>20</sup> HM Government. (2018). *A connected society A strategy for tackling loneliness - laying the foundations for change*. [https://assets.publishing.service.gov.uk/media/5fb66cf98fa8f54aafb3c333/6.4882\\_DCMS\\_Loneliness\\_Strategy\\_web\\_Update\\_V2.pdf](https://assets.publishing.service.gov.uk/media/5fb66cf98fa8f54aafb3c333/6.4882_DCMS_Loneliness_Strategy_web_Update_V2.pdf) ('UK Strategy').

<sup>21</sup> UK Strategy, p. 3.

<sup>22</sup> UK Strategy, p. 7.

employers, health services, government and the community sector.<sup>23</sup> Wales and Scotland have also created strategies for tackling loneliness.<sup>24</sup>

Critically, these strategies acknowledge the need to invest in community activities and more systems-based solutions such as improving public transport accessibility, community infrastructure and planning.

Following the footsteps of the UK strategy, a strategy should be developed and implemented in NSW that includes considerations for housing, employment, transport infrastructure as well as increased community opportunities through libraries and community spaces. We discuss how local councils can be engaged in this sense, below.

We recommend that such a strategy looks at simple, effective and swift policies that could be implemented such as decreasing the cost of public transport or offering social wellbeing vouchers to spend at local businesses.

While developing a whole of government, whole of system strategy can assist in taking steps towards action, an overarching target must be established, for state and local governments to work to. Government must be accountable for its actions and a strategy should clearly articulate and report on targets for reducing loneliness and increasing connection across NSW. These targets should be co-developed with the local community. While it was recommended in the Inquiry into Loneliness and Social Isolation in the ACT,<sup>25</sup> for instance, to establish a Minister for Loneliness, Australians for Mental Health views this as not necessary, and possibly counter productive. An effective response to loneliness would rightly span many departments and we fear that the creation of a dedicated Ministry would absolve other Ministers of their own opportunity to act.

Finally, we note that in developing a loneliness strategy, the underlying mental health system must not be forgotten. While loneliness is not necessarily a mental health issue, as discussed, mental health and loneliness have a cyclic relationship. It is critical that a loneliness strategy considers prevention of mental health conditions and ensures every person in NSW can access the support they need. We recognise the work of the Portfolio

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<sup>23</sup> UK Strategy, p. 15.

<sup>24</sup> See Welsh Government. Loneliness and social isolation (connection communities). <https://www.gov.wales/loneliness-and-social-isolation-connected-communities> See Scottish Government. (2023, March 8). Social isolation and loneliness: Recovering our Connections 2023 to 2026. <https://www.gov.scot/publications/recovering-connections-2023-2026/>.

<sup>25</sup> Standing Committee on Education and Community Inclusion. (2024, August). Inquiry into Loneliness and Social Isolation in the ACT Report 13. [https://www.parliament.act.gov.au/\\_\\_data/assets/pdf\\_file/0009/2559096/Report-13-Inquiry-into-Loneliness-and-Social-Isolation-in-the-ACT.pdf](https://www.parliament.act.gov.au/__data/assets/pdf_file/0009/2559096/Report-13-Inquiry-into-Loneliness-and-Social-Isolation-in-the-ACT.pdf)

Committee No. 2 Inquiry into Equity, accessibility and appropriate delivery of outpatient and community mental health care in New South Wales.<sup>26</sup> The government must ensure that a strategy to address loneliness does not ignore the reform required in the mental health care system to ensure every person in NSW can have their needs met. As outlined in the committee report, the government must invest in community-based mental health care. This could intersect with a loneliness strategy, where for example investing in community-based initiatives such as peer support groups could also assist in combatting loneliness.

### **Tasking and Resourcing Local Governments**

A whole of government response to loneliness must include local governments. Local governments are in a unique position to best understand local communities, and their full potential must be utilised. Local governments already engage in services that assist in creating community, such as operating libraries and community centres and by funding community-based services.

Local government should be explicitly tasked and resourced with facilitating and supporting interventions in the community that are grounded in community needs and guided by targets articulated in the overarching strategy. This may require two key mechanisms: legislative requirements for planning and reporting and effective resourcing.

Firstly, local governments should be mobilised to actively reduce loneliness and increase connection in their communities, based on targets that meet the needs of each local community. Amendments to the *Local Government Act 1993* (the ‘Act’) and its subordinate legislation can assist in doing this. Local governments are required to provide reports against a series of benchmarks under the Integrated Planning and Reporting process. This should be reviewed to include measures around loneliness and connection. This will allow local governments to quantify and report on the social connection impact of current services and programs and identify areas where more support may be needed.

Further, this allows for local governments to assist in achieving state targets to reduce loneliness and provides consistent data on programs that work and should be supported. One approach could include amendment section 428 of the Act to require

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<sup>26</sup> See Parliament of New South Wales (2023). Equity, accessibility and appropriate delivery of outpatient and community mental health care in New South Wales. <https://www.parliament.nsw.gov.au/committees/inquiries/Pages/inquiry-details.aspx?pk=2973>.



specific KPIs and progress on the targets to reduce loneliness to be included in local government's Annual Report. We recommend that the government implement these changes to ensure local governments are engaged and accountable, and local communities are informed in relation to reducing loneliness and increasing connection.

Secondly, local councils must be funded to effectively implement policies and programs that combat loneliness. We also believe there can be low or no cost opportunities for councils to assist in creating community. For example, councils could leverage their existing programs and infrastructure such as leisure centres, meals on wheels programs, community hubs or libraries. By reorienting the KPIs for such programs towards social inclusion outcomes, we can build on the embedded value in existing expenditure. Nonetheless, any cost involved for the state government in supporting local councils are likely to be more than offset in other spending areas.

Examples in the UK indicate a possible cost savings on health services when investing in addressing loneliness.<sup>27</sup> For example, one study evaluating the cost-effectiveness of the "Friendship Enrichment Program" and a volunteer-led internet and computer training intervention found a return on investment of 2.87 and 2.14 after 5 years, respectively.<sup>28</sup> Investing in the right programs that lower the cost of loneliness is critical; the Stronger Together Report outlined that loneliness could be costing Australian \$2.7 billion a year due to adverse health behaviours.<sup>29</sup> The report also outlines the need for further research to evaluate the cost-effectiveness of programs that address loneliness<sup>30</sup> We recommend that the government invests in cost effective programs, and the necessary data collection to continue to monitor and evaluate such programs.

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<sup>27</sup> Local Government Association. (2016, January). *Combating Loneliness A guide for local authorities*.

[https://www.local.gov.uk/sites/default/files/documents/combating-loneliness-guid-24e\\_march\\_2018.pdf](https://www.local.gov.uk/sites/default/files/documents/combating-loneliness-guid-24e_march_2018.pdf), p. 14.

<sup>28</sup> Engel, L., Lee, Y. Y., Le, L. K.-D., Lal, A., & Mihalopoulos, C. (2021). Reducing loneliness to prevent depression in older adults in Australia: A modelled cost-effectiveness analysis. *Mental Health & Prevention*, 24, 200212. <https://doi.org/10.1016/j.mhp.2021.200212>; See also

National Mental Health Commission. e-Health interventions to reduce older persons' loneliness. <https://www.mentalhealthcommission.gov.au/sites/default/files/2024-03/e-health-interventions-to-reduce-older-persons-loneliness.pdf>

and National Mental Health Commission. Educational interventions to reduce older person's loneliness. [https://www.mentalhealthcommission.gov.au/sites/default/files/2024-03/educational-interventions-to-reduce-older-persons-loneliness\\_0.pdf](https://www.mentalhealthcommission.gov.au/sites/default/files/2024-03/educational-interventions-to-reduce-older-persons-loneliness_0.pdf)

<sup>29</sup> Duncan, A., Kiely, D., Mavisakalyan, A., Peters, A., Seymour, R., Twomey, C., & Vu, L. L. (2021). Stronger Together Loneliness and social connectedness in Australia [Review of Stronger Together Loneliness and social connectedness in Australia]. Bankwest Curtin Economics Centre. [https://bcec.edu.au/assets/2021/11/139532\\_BCEC-Stronger-Together-report\\_WEB.pdf](https://bcec.edu.au/assets/2021/11/139532_BCEC-Stronger-Together-report_WEB.pdf)

Focus on the States Series, #8, p. 96.

<sup>30</sup> Duncan, A., Kiely, D., Mavisakalyan, A., Peters, A., Seymour, R., Twomey, C., & Vu, L. L. (2021). Stronger Together Loneliness and social connectedness in Australia [Review of Stronger Together Loneliness and social connectedness in Australia]. Bankwest Curtin Economics Centre. [https://bcec.edu.au/assets/2021/11/139532\\_BCEC-Stronger-Together-report\\_WEB.pdf](https://bcec.edu.au/assets/2021/11/139532_BCEC-Stronger-Together-report_WEB.pdf)

Focus on the States Series, #8, p. 97.

## Other measures to reduce loneliness

While it should not be on communities alone to address loneliness, communities can form part of the solution. Simply having more opportunities to meet new people can reduce the impacts of loneliness. This could be supported through, for example, community initiatives like free activities (such as craft classes, run clubs) and creating more community spaces like halls.

*“A Matchmaking system that actually pays careful attention to who people are, and what sort of people/relationships they are seeking.”*

*AfMH Survey Response*

Technology and social media companies can also play a role in addressing loneliness. While social media can be useful in making connections online, particularly for those in remote areas or communities such as the LGBTQIA+ community, it is important to have the opportunity to develop relationships offline. Further, for applications that do exist to connect people for in-person interaction, those applications should be designed to prioritise genuine connection.

Beyond community and company solutions, there is a broader question of society and culture to address. There is a sense that this sentiment is recognised not only theoretically, but by everyday Australians. We recommend that solutions to combatting loneliness recognise and address the impact of broader societal changes on social culture and connection. These changes should inform any strategy developed by the government, as recommended above.

Nonetheless, recognising the impact of societal changes also presents an opportunity for non-government solutions from communities, employers and individuals who can initiate programs, policies and activities that work towards a society that better values social connection.

We recommend that communities and workplaces, for example, are well supported to engage in changes that can encourage meaningful connections. This could also include solutions such as encouraging social media companies to reinvest profits into funding physical, safe “third places” for young people to help foster face to face relationships. Given the mental and physical impacts of loneliness, all sectors and stakeholders should be mobilised to tackle loneliness and increase quality connection across NSW.

“Societal shift into emphasising difference rather than finding things in common and the societal shift that means people are less likely to connect with someone they disagree with. Individualism..”

*AfMH Survey Response*

...Once, when most of us grew up and remained in or within reach of our community throughout our lives, when we also often had the same job or career for life, and when we had different social practices that we seem to have lost now, these things were easier.”

*AfMH survey response*