

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

Organisation: St Vincent's Clinic Open Support

Date Received: 23 October 2024

21 October 2024

Secretariat
Legislative Council Standing Committee on Social Issues
Email: socialissues@parliament.nsw.gov.au

Dear Committee Members,

Re: St Vincent's Open Support submission in response to the Parliamentary inquiry into prevalence, causes and impacts of loneliness in New South Wales.

St Vincent's Open Support is a Sydney-based charity committed to acting and caring for the most vulnerable members of our community.

Open Support is committed to providing best practice services to women and children escaping domestic and family abuse, and people experiencing social isolation and loneliness.

Our organisation was founded by the Sisters of Charity in 1990 and was then called 'Sisters of Charity Outreach'. We were the community service hub of St Vincent's Clinic. We were established with a mission to reach out to people who are marginalised and overlooked. Since then, we have devoted all our energy and our work to putting this compassionate mission into action. We brave social barriers to support those most in need – and help change lives.

Social isolation and loneliness

Social isolation is not a new phenomenon. The founders of St Vincent's Open Support – the Sisters of Charity – were colloquially known as 'the Walking Nuns' for their efforts to visit the poor and sick, isolated in their own homes, to offer comfort and support.

However, loneliness and social isolation have grown enormously in recent years, and present major challenges to community health and governments when considering how to appropriately plan and develop our state.

In 2022, almost 1 in 7 (15%) Australians (18% of males and 12% of females) were experiencing social isolation. Compared to just before the pandemic (2019) the proportion of young people aged 15–24 experiencing social isolation increased markedly over 2020 and 2021¹.

The health impacts of social isolation and loneliness are serious and growing.

As stated by the Australian Institute of Health and Welfare, loneliness has been linked to premature death, poor physical and mental health and general dissatisfaction with life.¹ Social isolation is also been linked to mental illness, emotional distress, suicide, the development of dementia, premature death, poor health behaviours, smoking, physical inactivity, poor sleep,

¹ Australian Institute of Health and Welfare, *Social isolation and loneliness*, Sept 2019

and biological effects, including high blood pressure and poorer immune function. High levels of social isolation are also associated with sustained decreases in feelings of wellbeing.²

The risk of premature death associated with social isolation and loneliness is similar to the risk of premature death associated with well-known risk factors such as obesity.³

And the positive health impacts of addressing loneliness? Studies have shown that those with strong social relationships have a 50% lower chance of death than those with weak connections, a positive health impression that is the equivalent of giving up smoking.⁴

The respected Australian social commentator and academic, Hugh Mackay, has repeatedly returned to the issue of social isolation in Australia in his writings and observations.

In a presentation to St Vincent's staff in February 2020, Mackay identified some of the origins of widespread loneliness in Australia – our high divorce rate; more than one million children living in single parent households, many who are regularly transplanted from house to house week by week; a low birth rate relative to the size of our population (the number of children is proportionately down, while the number of pets is increasing); and the growing lack of community and social cohesion is making us more isolated and socially fragmented than we have ever been.

The COVID19 pandemic has taught us many things, including the effects of social isolation and loneliness on one's wellbeing. All of us in some way began to understand what it felt like to be socially disconnected from the world around us and to feel some of the potential consequences both physically and mentally. Our collective experience has started conversations and is encouraging health organisations to examine what can be done to support those who have difficulty creating social connections, so that they are no longer part of a silent and unheard health crisis.

Recently, the World Health Organisation (WHO) appointed a Health Consultant for the newly created [WHO Commission on Social Connection](#), Daniel Leo Surkalim. The WHO Commission on Social Connection (2024–2026) aims to see the issue recognised and resourced as a global public health priority. The Commission will propose a global agenda on social connection, working with high-level Commissioners to make the case for action, marshal support to scale up proven solutions and measure progress.

Open Support Community Connections

Open Support has been providing social outreach services to lonely and isolated people since 1992. Starting out as an in-home companionship service, our current work in this space is delivered through our Community Connections Program.

Community Connections is a no-cost program which provides social support to individuals who are experiencing social isolation and or loneliness in our communities.

In the Community Connections Program, participants are allocated a Community Connector who meets with them one-on-one in a public space on a weekly/fortnightly basis to build their capacity to engage in the community. The team create a specific 'social navigation plan' to the individual needs, this plan helps to set goals and activities that the individual would like to achieve in the program. Other ways we assist is to build capacity and confidence on public transport, specialist

² ibid

³ ibid

⁴ <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1000316>

referrals, and attending groups and other activities with participants until they can attend independently.

Individuals are supported to establish and maintain meaningful social connections with community, leading to reduced social isolation and increased wellbeing. The program offers a social bridge to individuals who are isolated and lonely, helping them re-connect with their community and weave lasting relationships. Over time, our team of specialist skilled staff and trained volunteers support each individual to regain a sense of trust, social confidence and autonomy.

Open Support's Community Connections aims to support more than 100 individuals this financial year, which will not meet the demand we could assist given the growing need in NSW.

Open Support is committed to being a leader in breaking the cycle of loneliness in NSW and has recently introduced a new CRM along with a reviewed outcome framework so we can provide detailed data on the services we are providing and the outcomes we are achieving.

Supporting the 2021 Census data, research from Ending Loneliness Together¹⁰ suggests that 18-24 years olds have the highest risk of persistent loneliness at 41.1 per cent followed by 45-54-year-olds (31.6 per cent).

Community Connections' own data also shows more people in their 20s are experiencing loneliness and are now accessing our service. Around three-to-four years ago, our program mainly supported people aged 55 and over.

Some statistics from the program for this current financial year are included below.

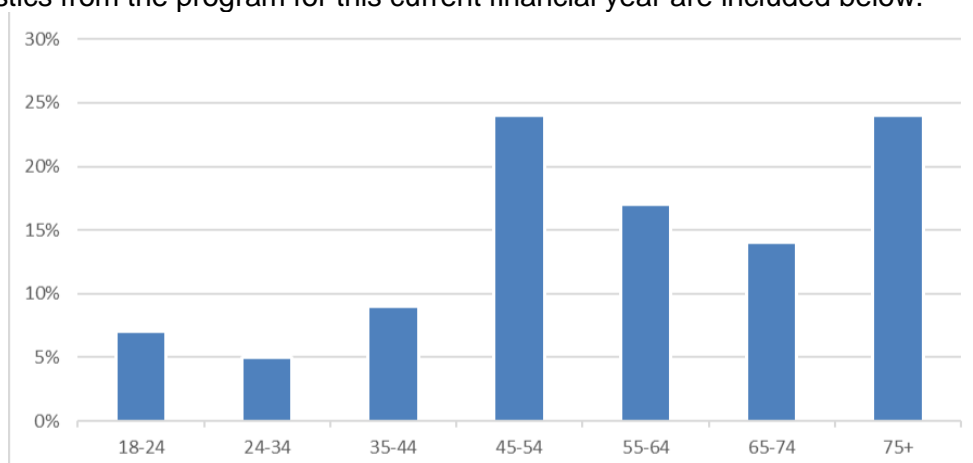


Figure 1: Percentage of Open Support Participants by Age Bracket (years)

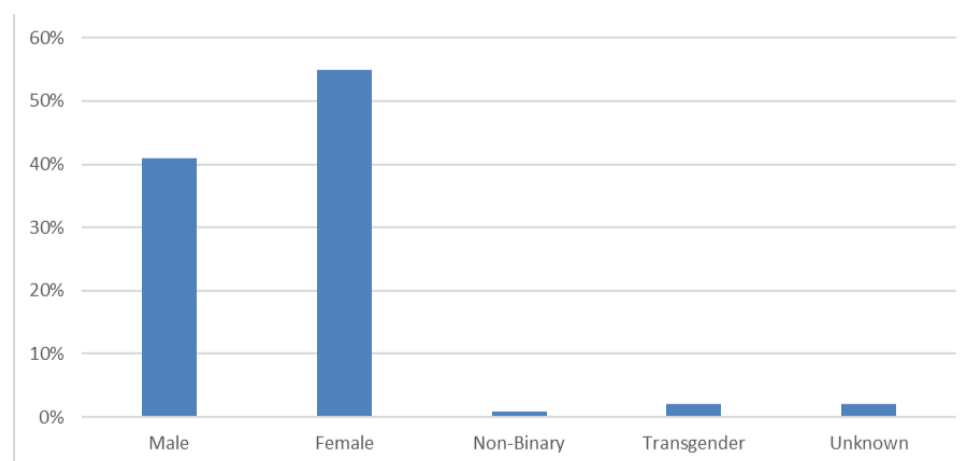


Figure 2: Percentage of Open Support Participants by Gender

70% of clients in the reporting period were born in Australia and 1.5% identify as Aboriginal and or Torres Strait Islander (with a further 18% not stated).

Last year, Community Connections used the Warwick Edinburgh Mental Health Wellbeing Scale (WEMWBS) as part of our outcome framework. Using this scale, the data showed that people who exited our program as being “connected” or “satisfied” experienced a 20% increase in wellbeing. This year, our outcomes will be focused on key areas in community, cultural connection, social engagement & independence.

An actual quote from Community Connections participant demonstrates the impacts loneliness can have on wellbeing:

“Loneliness has made my world very small and dark. It guides my thoughts and decisions, polluting them with anxiety and “what if’s”. I feel scared of people, but I need people. Leaving the house is hard, but the more I avoid it the harder it becomes. Although I am filled with love and know I am loved, loneliness persists heavy in my heart at the end of each day when I’m trying to fall asleep. I have been taking difficult but important steps towards reconnecting with friends, involving myself in my community and practicing leaving the house to show myself it’s not so bad out there. I know that practice makes perfect, and I have hope”.

There are many factors that contribute to the development of transient loneliness into chronic loneliness, such as: misconceptions, stigma and shame, not working or unemployed, being single/never married, living alone, being diagnosed with a mental health condition, autism / learning disability, chronic health condition, physical disability, neurological condition, and financial pressures.

Research also suggests that loneliness costs the Australian Government up to an estimated \$2.7 billion annually, which is a strong inducement to support programs that demonstrate economic returns.

The Australian financial institution, Suncorp, recently worked with Open Support to conduct research into the economic cost of individuals who experience loneliness. This research suggests there is an average cost of \$2,630 per person experiencing loneliness to the NSW economy annually.

Our service data predicts that for every person we service in the first year, we will be saving the Australian economy approx. \$1,972. The savings increase in subsequent years.

The impact would be larger if programs like ours, and others, had long-term, sustainable funding that allow us to meet the demands of the community at scale and thereby have a positive impact on the population of NSW, and subsequently, the economy.

The existing initiatives, that we know of, that aim to mitigate and reduce loneliness and social isolation in NSW and elsewhere are:

- Ending Loneliness Together (ELT) – a national network of organisations who have come together to address the growing problem of loneliness in people living in Australia. There are four key areas of focus for this group; Evidence, Inform, Influence & Awareness. Open Support is a member of this group.

- Small grants in NSW – by their nature, the issue with small grants are that they are usually small and do not help with long-term issues or support maintenance of operations in existing impactful organisations.
- St Vincent's Open Support (us) - we provide on-the-ground supports for people to engage in their communities. We are 100% donor-funded and receive no government support. We reduced services in the last financial year due to lack of recurrent funding even though the issue of loneliness and social isolation is increasing and demand for our support is high.
- Wayside Chapel have launched a behaviour change campaign, Social60, in 2024. We have not yet seen published data on the impact of this program.
- World Health Organisation (WHO) have appointed a commission and appointed Health Consultants across the world to join forces as they see this as a global epidemic.
- QLD Government were among the first to allocate dedicated funding towards loneliness. Reference: [Communities Innovation Fund: Responses to Social Isolation and Loneliness - Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts \(dpsatsip.qld.gov.au\)](https://www.dpsatsip.qld.gov.au/communities-innovation-fund-responses-to-social-isolation-and-loneliness)
- PALS (Pharmacies Addressing Loneliness and Social Isolation) aim to support building Pharmacists skills in identifying and supporting people that may be lonely or isolated.

Time for action

St Vincent's Open Support calls on governments, policy-makers, community organisations and health providers to work together to address social isolation with the same commitment and energy as they would any pressing public health issue.

Open Support has a range of ideas on what steps the NSW Government could take to reduce the prevalence and impacts of loneliness in the community, such as:

- Introducing long-term funding for programs that are specifically designed to tackle loneliness and social isolation and that are able to demonstrate clear outcome measurements. This must have minimal red tape and a flexible approach due to the agility required to respond to individual needs as each person's loneliness is subjective.
- Recognising the seriousness of the issue, both the UK and Japan have established Ministers for Loneliness. Allocating a ministerial portfolio to address this issue speaks volumes and allows for the development of tailored approaches to the issue.
- Funding for organisations that are experts in the matter to be able to go into various organisations to teach about the impacts of loneliness and how we can overcome some of the community stigma.
- Urban design. Increase the utilisation of 'third places' – public or commercial spaces that provide informal opportunities for local people to mix socially on neutral ground. This was a concept devised by Ray Oldenburg in his book 'The Great Good Place'⁵. They are places separate to home (the first place) or work (the second place), and are commonly defined as community gardens, libraries, public swimming pools, cafes, men's sheds, farmers' markets and dog parks.⁶
- For example, an increased evening use of school buildings and sports grounds would create new opportunities for social connection. Policies exist to promote this idea, but

⁵ [https://en.wikipedia.org/wiki/The_Great_Good_Place_\(book\)](https://en.wikipedia.org/wiki/The_Great_Good_Place_(book))

⁶ <https://theconversation.com/many-people-feel-lonely-in-the-city-but-perhaps-third-places-can-help-with-that-92847>

implementation is complicated by overlapping jurisdictions (Commonwealth, state, local) and by issues such as insurance and liability.⁷

- Engage Primary Care Providers. GPs are often the first people to see the impacts of loneliness and social isolation among their patients. We should be working with primary care providers to consider approaches that are, where appropriate, non-medical in nature. For example, the town of Frome in Somerset, in southern England, saw emergency hospital presentations drop by 17% after it began the 'Compassionate Frome' project, an initiative based on the practice of a local GP who started prescribing patients with community engagement activities when appropriate.⁸ [Volunteers](#) in the Victorian town of Ballarat have pursued a similar approach.

There are other steps that the community, technology/social media companies, organisations, and individuals can take to reduce the impact of loneliness. These can be tailored towards key areas such as:

- Work – how to engage with others, how to create safe work environments where everyone is included, and the risks of loneliness on productivity and retention.
- Social Media – the negative effect screen time has on social engagement, campaigns on social media on loneliness and how to seek help
- Service directories – where individuals or organisations can go online and search for organisations that provide specific support (e.g. Ending Loneliness Together has directory on their website) [Search – Ending Loneliness Together](#)

St Vincent's Open Support has a dedicated team working in the community who are passionate about breaking individuals' loneliness and/or social isolation cycle and doing all they can to build an engaged, safe, confident and independent community in parts of NSW.

We are glad to see the Legislative Council Standing Committee on Social Issues focus on this issue and believe it is a step towards NSW building a solid foundation of community engagement that will lead to healthier communities, and in turn, a healthier economy.

If Open Support can be of any other assistance, we would gladly meet with you to continue the conversation.

Yours faithfully,

Katie Viviers
Chief Executive Officer
St Vincent's Clinic

⁷ Grattan Institute, *Social Cities*, 2012

⁸ <https://www.theguardian.com/commentisfree/2018/feb/21/town-cure-illness-community-frome-somerset-isolation>

⁹ [Social isolation and loneliness - Mental health - AIHW](#)

¹⁰ <https://endingloneliness.com.au/wp-content/uploads/2024/09/why-we-feel-lonely.pdf>