

# IIMHL & IIDL Leadership Briefing XLII

## Covid-19 and Loneliness

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### Introduction

Many people will have experienced the pang of loneliness, the painful feeling that occurs when one's needs for meaningful connection are unmet. Short periods of loneliness are a normal part of the human experience, but when it is experienced consistently for a prolonged period, loneliness can have profound negative consequences for health and wellbeing<sup>1</sup>.

Loneliness has emerged as a common issue across many countries: the loneliness experienced during the pandemic – particularly during times of “lockdowns”.

### Aotearoa/New Zealand

#### **The Helen Clark Foundation: Alone Together - The risks of loneliness in Aotearoa New Zealand following Covid-19 and how public policy can help**

June 2020

Loneliness intersects in complex ways with other wellbeing factors: in 2018 those more likely to experience chronic loneliness included people with low incomes, those who were unemployed, Māori, young people, and single parents, all groups whose wellbeing the New Zealand government is seeking to improve.

The global outbreak of Covid-19 and associated lockdowns has significantly exacerbated the risks of loneliness, both during the immediate period of enforced isolation, and as communities transition out of isolation with new social distancing requirements and altered social norms. This report outlines the health and wellbeing risks posed by loneliness, and recommends six key policy planks to enable social connection to thrive as Aotearoa New Zealand recovers from the economic and social shock of Covid-19. The recommendations are:

1. Make sure people have enough money
2. Close the digital divide
3. Help communities do their magic
4. Create friendly streets and neighbourhoods
5. Prioritise those already lonely
6. Invest in frontline mental health

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<sup>1</sup> <https://helenclark.foundation/wp-content/uploads/2020/06/alone-together-report-min.pdf> P.7

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## Canada

### **Angus Reid Institute: Isolation, Loneliness, and COVID-19: Pandemic leads to sharp increase in mental health challenges, social woes**

October 2020

The unprecedented drop in community activity, from volunteering, to attending live concerts, to visiting local community centres and hubs, has taken its toll on many Canadians. For example, the percentage of those saying they have a good social life has dropped from more than half in 2019 (55%) to just one-in-three (33%) this year.

This report has found that as Canadians have become more isolated, many are voicing concerns about their mental health. Last year, two-thirds (67%) said their mental health was good or very good; this year just 53 per cent say the same. One-in-five (19%) now share that their mental health is either poor or very poor, with three-in-ten young women (30%) reporting this.

The report contains other findings about the impact on relationships, experiences of isolation and the role of technology in combatting loneliness.

[http://angusreid.org/wp-content/uploads/2020/10/2020.10.13\\_Social\\_Isolation.pdf](http://angusreid.org/wp-content/uploads/2020/10/2020.10.13_Social_Isolation.pdf)

## UK

### **Loneliness in the UK during the COVID-19 pandemic: Cross-sectional results from the COVID-19 Psychological Wellbeing Study**

September 2020

In the UK it is predicted that there will be an upsurge of mental health service in the context of COVID-19. This report has found that among the UK public, fears surrounding the psychological harms of COVID-19 are ranked above that of physical wellbeing. Prior to the pandemic the UK government had identified loneliness as a significant public health issue, and it has been described as an epidemic. Loneliness is a priority focus if we are to fully understand the psychosocial impact of the COVID-19 pandemic.

The findings of this report suggest that supports aimed at improving emotion regulation, sleep quality, and increasing social support may be the most impactful for mitigating the mental health impact of the lockdown, and that interventions should focus on those people most at-risk for loneliness prior to the lockdown.

<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0239698>

## USA

The World Has Changed: Emerging Challenges for Health Care Research to Reduce Social Isolation and Loneliness Related to COVID-19. Novak, L. L., J. G. Sebastian, and T. A. Lustig. 2020. *NAM Perspectives*. Commentary, National Academy of Medicine, Washington, DC.

This paper from the USA suggests that data needs to be collected now to deepen researchers' and health professionals' understanding of public and private life in the COVID-19 era. In order to identify research and practice implications, the authors propose five overarching questions to guide thinking about future priorities that organisations and agencies may find it helpful to consider:

1. How have physical distancing, stay-at-home guidelines, and reduced or altered interactions impacted those who were experiencing social isolation and loneliness prior to the onset of the pandemic, and how will the role of the health care system need to change to meet their needs?
2. Which populations are newly at risk for social isolation and loneliness, given new social practices and risks related to COVID-19?
3. How are people assessing risks in the transitions between life prior to COVID-19, the current practice of physical distancing, and an uncertain future?
4. How do social determinants of health contribute to social isolation and loneliness in the context of the pandemic and social upheaval?
5. Given the context of the COVID-19 pandemic, what social and institutional infrastructures are needed to minimize social isolation and loneliness and their negative health effects?

The authors suggest that these and other issues must be addressed by the global research community in order to ensure compassionate and humanistic ways of fostering a sense of connection.

<https://nam.edu/the-world-has-changed-emerging-challenges-for-health-care-research-to-reduce-social-isolation-and-loneliness-related-to-covid-19/>