

Holly Walker

Alone Together the heightened risks of loneliness following Covid-19

Abstract

Even prior to Covid-19, loneliness posed a significant public policy challenge. Loneliness intersects with other wellbeing factors, so prioritising wellbeing requires policies that allow social interaction to thrive. Prolonged loneliness also creates significant public health risks. Covid-19 thrust loneliness into greater prominence with enforced social isolation compounded by considerable employment and income loss. The level 4 lockdown contributed to an increase in self-reported loneliness, especially among those already at risk. Future analysis will determine the full impact of Covid-19 on loneliness; in the meantime, policy to enable social interactions to thrive will be an important part of the recovery.

Keywords loneliness, social isolation, public health, connection, social interaction, wellbeing.

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Everyone knows the particular pang of loneliness, the painful feeling that occurs when one's needs for meaningful connection are unmet (Hawkins-Elder et al., 2018; Hawkey and Cacioppo, 2010). 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 (Ortiz-Ospina, 2019).

Even before Covid-19, loneliness presented a significant public policy challenge in Aotearoa New Zealand. The government had indicated that wellbeing was to be the driving force behind government decision making and made it the centrepiece of Budget 2019. Loneliness intersects in complex ways with other wellbeing factors: in 2018 those more likely to experience chronic loneliness included people on low incomes, those who were unemployed, Māori, young people and single parents (Statistics New Zealand, 2018) – all groups whose wellbeing the government is seeking to improve.

The global outbreak of Covid-19 and associated lockdowns significantly exacerbated the risks of loneliness, both

during the immediate period of enforced isolation, and as communities transitioned out of isolation with new social distancing requirements and altered social norms (Sanders, 2020). The risk was heightened for everyone, but especially for those who were already more likely to feel profoundly lonely.

This article outlines the health and wellbeing risks posed by loneliness, sketches the likely impact of the level 4 lockdown on New Zealanders' loneliness, and presents six policy planks to enable social relationships to thrive as New Zealand recovers from the economic and social shock of Covid-19.

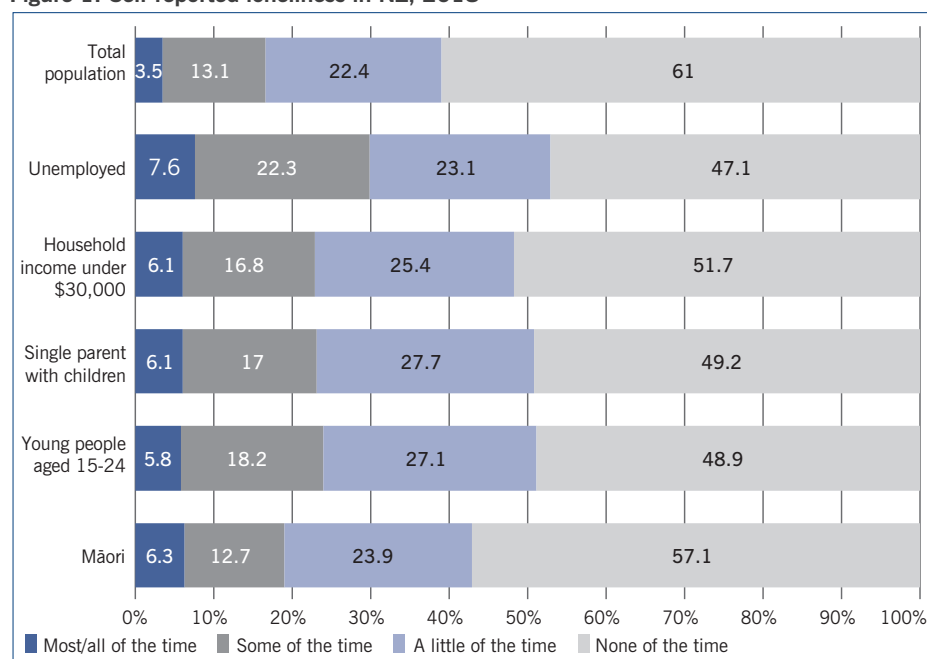
Loneliness and its ill-effects

Under normal circumstances loneliness can occur at any time and is experienced differently depending on a person's needs and situation, though it does seem to be most prevalent during major life transitions (Thomas, Orme and Kerrigan, 2020; Zoutewelle-Terovan and Liefbroer, 2018). While everyone will experience some loneliness during their life, when loneliness persists for long periods it can become a significant risk to health and wellbeing.

The physiological effects of loneliness have an evolutionary explanation: humans evolved to live communally and rely on others for safety, so our brains are primed to respond to perceived isolation as though to an existential threat. This threat response is intended to help manage immediate danger by making us more alert and poised for action. It is not intended to be maintained for long periods due to the stress it places on the body, over-activating various physical systems and not allowing time for rest and recovery. Prolonged 'hypervigilance for social threat' caused by loneliness can alter physiological functioning, diminish sleep quality, and increase morbidity and mortality (Hawkey and Cacioppo, 2010).

As a result, people who report prolonged loneliness are more likely to experience cardiovascular disease, high blood pressure, high cholesterol, dementia, depression and anxiety (Ortiz-Ospina, 2019). Hormonal imbalances caused by prolonged hypervigilance to social threat can also suppress immune function and leave

Figure 1: Self-reported loneliness in NZ, 2018



Source: Statistics New Zealand, 2018

people more vulnerable to infectious diseases (Hawkey and Cacioppo, 2010). For these reasons, loneliness poses a significant public health challenge.

Loneliness in Aotearoa New Zealand before Covid-19

We are fortunate in New Zealand to have an established measure of self-reported loneliness in the New Zealand General Social Survey (GSS). In 2018, 3.5% of New Zealanders reported feeling lonely most or all of the time in the previous four weeks. A further 35.5% reported feeling lonely some or a little of the time, and 61% reported no feelings of loneliness. Rates of loneliness were relatively stable in the 2014, 2016 and 2018 surveys, with a small increase in 2016 reversing in 2018 (Statistics New Zealand, 2018).

A closer examination of who was more likely to report feeling lonely in 2018 reveals that loneliness intersects significantly with other wellbeing factors. Those most likely to report feeling lonely most or all of the time included those who were unemployed (7.6%), Māori (6.3%), those with a household income of less than \$30,000 (6.1%), single parents (6.1%) and young people aged 15–24 (5.8%).¹

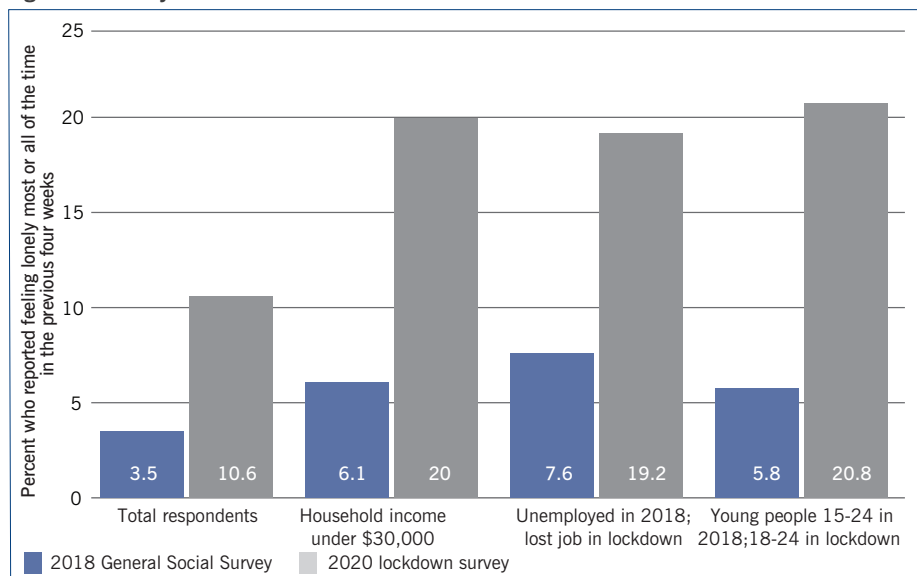
Overall, the picture prior to Covid-19 was of a small but significant minority of New Zealanders experiencing profound loneliness, with some groups of particular concern.

Exacerbating effects of Covid-19

The risks of a period of enforced social isolation in relation to loneliness are obvious: during lockdown, most normal social interaction ceased. Furthermore, most economic activity also ceased, and many people either lost their jobs or lost income, a significant risk factor for increased loneliness.

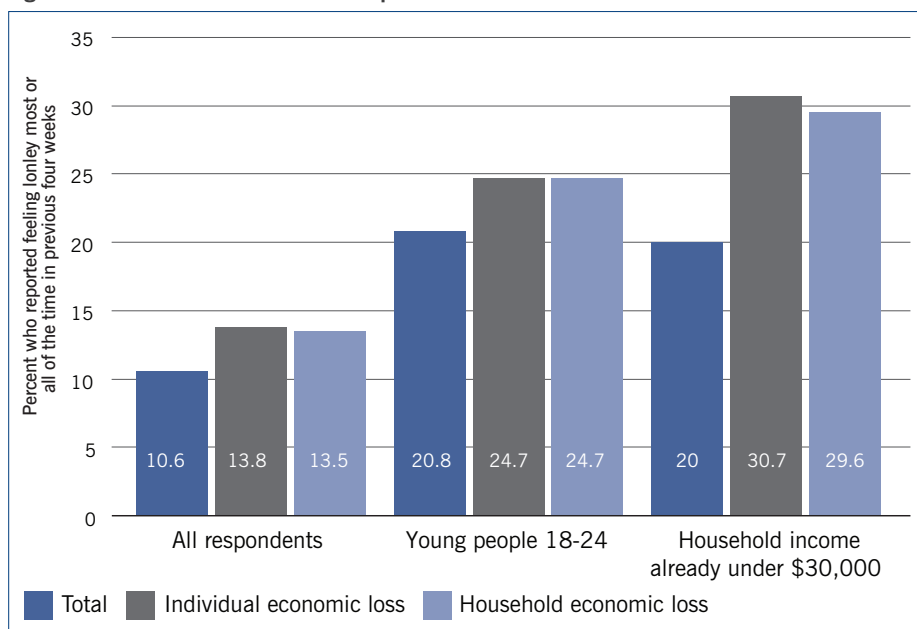
Thanks to some quick-footed researchers at the Roy McKenzie Centre for the Study of Families and Children and the Institute for Governance and Policy Studies at Victoria University of Wellington, we have an idea of the immediate exacerbating impact of New Zealand's lockdown on loneliness, and of how this intersected with existing risk factors (Prickett, M. Fletcher, S. Chapple, N. Doan and C. Smith. 2020). Undertaken during the third week of the lockdown, their survey asked respondents various questions about their emotional wellbeing during the lockdown, including how often they had felt lonely in the previous four weeks: 10.6% said they had felt lonely most or all of the time; by contrast, the equivalent figure in the 2018 GSS was 3.5%. While the two surveys are not directly comparable due to sampling and survey construction differences, reading the lockdown survey results alongside the GSS does suggest a significant increase in self-reported loneliness under lockdown conditions.

Figure 2: Lonely most or all of the time: 2018 vs lockdown



Source: Statistics New Zealand, 2018; Prickett et al., 2020

Figure 3: Loneliness in lockdown: impact of economic loss



Source: Prickett et al., 2020

Self-reported loneliness most or all of the time during the level 4 lockdown was even higher for young people aged 18–24 (20.8%, compared to 5.8% of young people aged 15–24 in 2018) and those with household incomes under \$30,000 (20%, compared with 6.1% in 2018).

Respondents who had experienced economic loss (i.e. job or income loss) as a result of Covid-19 were more likely to report feeling lonely. Those most starkly affected were those already in low-income households who then also experienced economic loss: 30.7% of these people reported feeling lonely all or most of the time during the lockdown. It was not only

those who lost their own job or income who reported greater levels of loneliness; people living in homes where their partner or another adult had experienced economic loss also reported high levels of loneliness.

The researchers conducted a follow-up survey at alert level 2 which will provide useful information about the ongoing impact of Covid-19 on loneliness; at the time of writing the results of this survey were not yet available. Likewise, the next GSS was due to be conducted in 2020 and reported in 2021. It will be important to track levels of self-reported loneliness in both the general population and in those

groups previously more susceptible to determine the ongoing impact of Covid-19.

Six planks of an effective policy response

In the meantime, it is clear that loneliness is – and will remain – a significant public policy issue. Whether New Zealand follows the lead of the United Kingdom and adopts a formal strategy to reduce loneliness (UK Government, 2018), or simply seeks to include loneliness as part of its existing wellbeing focus, we will need policies that allow meaningful social interaction to flourish. The following six policies could be key planks of an effective response.

Make sure people have enough money

Loneliness is clearly linked to income: in 2018, people earning less than \$30,000 per year had more than double the rate of loneliness of those earning over \$70,000 (Statistics New Zealand, 2018). The same was true of people living in material deprivation. Loneliness was also strongly linked to employment status, with those unemployed more likely to report feeling lonely than those in work. All of these effects appear to have been amplified during the lockdown (Prickett et al., 2020).

Given the mass loss of both income and employment caused by Covid-19, ensuring people have a stable, sufficient income will be critical to buffer against the effects of not only economic recession, but also high levels of loneliness, isolation and psychological distress. It will be necessary for the government to continue to stabilise people’s incomes and create meaningful employment opportunities for some time. The immediate \$25 weekly increase to core benefit rates and the 12-week special payment made available in June 2020 to those who had lost their jobs as a result of the crisis were a good start, although they also created equity issues between those who were already unemployed and those who lost jobs as a result of Covid-19. In the longer term, the government should consider implementing an effective guaranteed minimum income for all New Zealanders to enable everyone to live with dignity.

Close the digital divide

The reliance on digital technology for essential work, school and social interaction during the level 4 lockdown

brought Aotearoa's digital divide into stark relief. Prior to the lockdown, 86% of New Zealand households had access to the internet, which meant there were still around 211,000 households with no internet access (Stats NZ, 2020). During the lockdown the Ministry of Education hastily distributed around 10,000 devices to help students access remote learning, but an internet-enabled device still requires affordable data or wifi, which many households lack. These financial and physical factors combine with skill gaps and safety concerns to create significant barriers to digital access for many people (Elliot, 2018). The two groups least likely to have internet access are social housing tenants and disabled people (Grimes and White, 2019).

During and after the Covid-19 crisis, affordable internet access has become even more important to enable people to retain social connections. There was already a strong case that a suitable device with an affordable internet connection should be considered part of the baseline for social inclusion, in the same way that a landline with free local calling was a baseline last century (Elliot, 2018); in the post-Covid-19 environment this is even more important. Government should work with community organisations, iwi authorities and NGOs to enable the provision of devices and internet connections to those in need, alongside making internet safety a core part of the school curriculum.

Help communities do their magic

Thousands of community groups, NGOs, marae, churches, cultural and sporting clubs, community centres and membership organisations provide day-to-day opportunities for social interaction and connection that can buffer against loneliness. When these are at their best, they identify a need in their community and mobilise collectively to meet it, forging and maintaining social bonds between individuals, following proven principles of community-led development (Inspiring Communities, n.d.).

In the post-Covid-19 environment it is likely that philanthropic support for community organisations will be reduced, meaning government support for community activities will be even more

important. Budget 2020 recognised this with \$36 million in grants for community groups to enhance the wellbeing of their local communities in the Covid-19 recovery period (Hipkins et al., 2020). An even more substantial community-led development fund to which a diverse range of groups and organisations could apply to solve self-identified community needs would be an effective tool to combat loneliness. Such a fund would not need to target loneliness or promote social connection specifically; success is more likely if communities are supported to identify the challenges they wish to tackle themselves. Enhanced relationships and a

housing and business around those, with the result that car use remains dominant and streets are not safe for walking or socialising. By contrast, developments can be planned with social goals at the centre (Symons, 2018). Such developments prioritise walkability, social interaction, common space, easy access to parks and green space, and well-integrated links to public transport.

The government has a significant tool at its disposal to ensure that social wellbeing is central to new urban development. Formed in October 2019, Kāinga Ora brought together Housing New Zealand and its development subsidiary Homes

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greater sense of belonging tend to occur as a result of such projects (see, for example, Inspiring Communities, 2013).

Create friendly streets and neighbourhoods

Communities thrive when people know their neighbours and feel a sense of belonging and connection. Streets and neighbourhoods can either encourage this, or actively discourage it. The more that people perceive their street to be dangerous, the less likely they are to spend time outside and get to know their neighbours, whereas when streets are safe, open and friendly to pedestrians and bicycles, people are much more likely to stop and chat, spend more time outside, and feel a sense of wellbeing and belonging (Abass, Andrews and Tucker, 2020; Kearns et al., 2015).

Thriving neighbourhoods require conscious planning to prioritise social wellbeing. The conventional approach to urban development tends to start with traffic networks and flows and design

Land Community (HLC), along with the existing KiwiBuild unit, to form partnerships with developers, local and central government and Māori in order to deliver new urban developments that support community needs. Work is under way to develop a government policy statement to set the outcomes that new housing and urban development projects must deliver. A clear policy on how urban developments should prioritise social wellbeing would have a far-reaching positive impact on our future neighbourhoods and communities.

Prioritise those already lonely

Even with stable incomes, equitable digital access, strong communities and well-designed neighbourhoods, some people will still experience debilitating loneliness, with potentially devastating impacts on their physical and mental health. Existing data helps us to identify those most likely to be experiencing chronic loneliness already:

people on very low incomes, those who are unemployed or have lost their jobs as a result of Covid-19, Māori, young people aged under 24, single parents, and some older people, particularly those living alone. When making decisions about services to support, and when allocating public funding for further research, policymakers should prioritise targeted interventions to alleviate loneliness among these groups.

Invest in frontline mental health services

The full impact of the Covid-19 pandemic on New Zealanders' mental health will not be fully known for some time. As the immediate crisis recedes, we can expect to see an increase in people seeking help for depression, anxiety, PTSD and other mental health conditions as they work through the trauma the pandemic has created.

This will be a challenge to the health system, because even before Covid-19, access to free treatment services was very poor. Work was under way to address this: following the report of the inquiry into mental health and addiction in late 2018, the government had committed \$455 million in Budget 2019 to the roll-out of a

new front-line mental health service to put trained mental health workers in primary health clinics, iwi health providers and other health providers. During the recovery and rebuild period, this new service will be even more important as an upsurge in demand is likely. As much as possible, the new service's funding should be boosted and the date for its full implementation should be brought forward.

Conclusion

Prior to the distress and disruption of Covid-19, loneliness posed a significant public policy challenge, particularly for a government committed to prioritising wellbeing. Loneliness intersects with other wellbeing factors, so prioritising wellbeing requires investing in policies that allow social interaction to thrive. Prolonged loneliness also creates significant public health risks. The Covid-19 crisis thrust loneliness into greater prominence as a policy challenge, with an extended period of enforced social isolation compounded by considerable loss of employment and income. It appears that the level 4 lockdown contributed to a significant increase in self-

reported loneliness, especially for those already at greater risk. Future analysis of loneliness trends will be important to determine the full impact of the Covid-19 crisis; in the meantime, effective policy to enable social interactions to thrive will be an important part of post-Covid-19 recovery. Six policy planks that would help to minimise the increased risks of loneliness are: make sure people have enough money; close the digital divide; help communities do their magic; create friendly streets and neighbourhoods; prioritise those already lonely; and invest in front-line mental health services.

1 While older people are often cited as being at risk of loneliness, older people aged over 75 were actually less likely to report feeling lonely most or all of the time (2.1%); however, those in this age group who do experience chronic loneliness are at greater risk of ill-health as a result, meaning they are still an important group to focus on (Wright-St Clair et al., 2017).

Acknowledgements

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References

- Abass, Z.I., F. Andrews and R. Tucker (2020) 'Socializing in the suburbs: relationships between neighbourhood design and social interaction in low-density housing contexts', *Journal of Urban Design*, 25, pp.108–33, <https://doi.org/10.1080/13574809.2019.1592663>
- Elliot, M. (2018) *Out of the Maze: building digitally inclusive communities*, Wellington: Vodafone New Zealand Foundation, Internet NZ and The Workshop
- Grimes, A. and D. White (2019) *Digital Inclusion and Wellbeing in New Zealand*, Wellington: Motu Economic and Public Policy Research
- Hawkins-Elder, H., T.L. Milfont, M.D. Hammond and C.G. Sibley (2018) 'Who are the lonely? A typology of loneliness in New Zealand', *Australian and New Zealand Journal of Psychiatry*, 52, pp.357–64, <https://doi.org/10.1177/0004867417718944>
- Hawkley, L.C. and J.T. Cacioppo (2010) 'Loneliness matters: a theoretical and empirical review of consequences and mechanisms', *Annals of Behavioral Medicine*, 40 (2), pp.218–27, <https://doi.org/10.1007/s12160-010-9210-8>
- Hipkins, C., C. Sepuloni, D. O'Connor and J. Logie (2020) 'Supporting our people as we rebuild the economy', 14 May, <http://www.beehive.govt.nz/release/supporting-our-people-we-rebuild-economy>
- Inspiring Communities (2013) *Understanding and Accelerating Community-led Development in Aotearoa New Zealand: the difference that working in community-led development ways has been making on eight local community journeys*, Wellington: Inspiring Communities
- Inspiring Communities (n.d.) 'Ngā Mātāpono/CLD principles', https://inspiringcommunities.org.nz/ic_resource/nga-matapono-cld-principles/
- Kearns, A., E. Whitley, C. Tannahill and A. Ellaway (2015) '“Lonesome town”? Is loneliness associated with the residential environment, including housing and neighborhood factors?', *Journal of Community Psychology*, 43, pp.849–67, <https://doi.org/10.1002/jcop.21711>
- Ortiz-Ospina, E. (2019) 'How important are social relations for our health and well-being?', *Our World Data*, <https://ourworldindata.org/social-relations-health-and-well-being>
- Prickett, K., M. Fletcher, S. Chapple, N. Doan and C. Smith. (2020) 'Life in lockdown: the economic and social effect of lockdown in alert level 4 on New Zealanders', Wellington: Victoria University of Wellington
- Sanders, R. (2020) 'Covid-19, social isolation and loneliness', <https://www.iriss.org.uk/resources/esss-outlines/covid-19-social-isolation-and-loneliness>
- Statistics New Zealand (2018) 'Wellbeing statistics: 2018', <https://www.stats.govt.nz/information-releases/wellbeing-statistics-2018>
- Statistics New Zealand (2020) '2018 Census totals by topic – national highlights', <https://www.stats.govt.nz/information-releases/2018-census-totals-by-topic-national-highlights-updated>
- Symons, D. (2018) 'Alone together in the 21st-century city', *The Possible*, <https://www.the-possible.com/alone-together-loneliness-social-isolation-in-dense-city/>
- Thomas, L., E. Orme and F. Kerrigan (2020) 'Student loneliness: the role of social media through life transitions', *Computers and Education*, 146, March, <https://doi.org/10.1016/j.compedu.2019.103754>
- UK Government (2018) *A Connected Society: a strategy for tackling loneliness*, London: UK Government, <https://www.gov.uk/government/publications/a-connected-society-a-strategy-for-tackling-loneliness>
- Wright-St Clair, V.A., S. Neville, V. Forsyth, L. White and S. Napier (2017) 'Integrative review of older adult loneliness and social isolation in Aotearoa/New Zealand', *Australasian Journal on Ageing*, 36 (2), pp.114–23, <https://doi.org/10.1111/ajag.12379>
- Zoutewelle-Terovan, M. and A.C. Liefbroer (2018) 'Swimming against the stream: non-normative family transitions and loneliness in later life across 12 nations', *Gerontologist*, 58, pp.1096–108, <https://doi.org/10.1093/geront/gnx184>