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## *Tackling loneliness with a social prescription*

Loneliness and social disconnection are hidden health risk factors, and as more Australians than ever before report experiencing loneliness, as a symptom of a more disconnected society and compounded by pandemic restrictions, health advocacy groups and clinicians are calling for initiatives to reduce the loneliness epidemic such as social prescribing.

As Loneliness Awareness Week draws to a close, the Royal Australian College of General Practitioners (RACGP), Consumers Health Forum (CHF) and Mental Health Australia (MHA) are highlighting the risks that loneliness puts on health and chronic disease and calling on health policy leaders to fund a national social prescribing scheme as a timely solution that can be implemented through primary health care.

Social prescribing is an embedded service in primary health and general practice where doctors can refer patients to non-medical activities, ranging from health and fitness programs to movie clubs and meditation.

Social prescribing is receiving more attention [globally as research](#) shows that connecting patients to community groups and resources is effective in reducing feelings of loneliness and isolation. This connection to activities and groups has been shown to motivate isolated people to find ways to participate more in social, cultural or physical activities.

A 2019 survey conducted by CHF and the RACGP found over 90% of GPs and allied health professionals believe that referring patients to non-medical services in the community is extremely helpful for improving health outcomes. 68% of consumers say they are interested in participating in community programs to address health and wellbeing issues.

More recently a study from the [University of Wollongong, School of Nursing](#) shows that high risk groups such as older people and those with chronic illness are more likely to experience loneliness due to lack of mobility and chronic pain and that social connectedness has a profound effect on quality of life and better health outcomes.

**RACGP President Adj. Professor Karen Price** said that social prescribing held tremendous promise.

"GPs see many patients present with mental health concerns, including people who are experiencing loneliness and isolation," she said.

"The social restrictions imposed during the pandemic, including hard lockdowns, whilst necessary to limit the spread of the virus did unfortunately lead to increasing social isolation. So, there has never been a better time to consider how best to boost social prescribing in communities across Australia.

"It's vital to remember that good health is not just the absence of disease and social prescribing can make a real difference for many patients. Getting out in the community, meeting people, exercising, and finding a sense of belonging can transform someone's health and sense of wellbeing.

"I encourage policy makers across Australia to embrace social prescribing because the sky is the limit. A national social prescribing scheme employing innovative local solutions would help more people take control of their health and change their lives for the better."

**CEO for CHF, Leanne Wells** says that a national social prescribing scheme should be hardwired into the suite of measures funded under *Future focused primary health care, the 10 Year Primary Care Plan 2022-2023*.

Consumers would be well served if Australia followed the UK lead where a *Beyond Pills* campaign has been launched to reduce unnecessary drug prescribing and expand social prescribing

Many local organisations such as Primary Health Networks and local councils have introduced and are evaluating social prescribing services. There's no reason why these couldn't be scaled up to form the backbone of a national program, Ms Wells said.

The **CEO for Mental Health Australia, Dr Leanne Beagley** says that social prescribing just makes sense – more now than ever. The pandemic has not only highlighted the issue of loneliness but exacerbated it in the most vulnerable of our populations.

"Today, the new Prime Minister is meeting with his National Cabinet for the first time and we know health care is at the top of their agenda. We need a whole of health approach and we call upon the new Labor Government to adopt a national social prescribing scheme in their 10 year health care plan," said Dr Beagley.

"As recent Medibank research notes, mental health conditions like social anxiety disorder can prevent people from connecting for fear of social situations, creating a cycle of loneliness.

"Loneliness is often understood as an individual issue but it's something we also need to address as a community.

"Mental Health Australia member, Relationships Australia, last year collaborated on research with the Australian National University which demonstrated that involvement in community-based projects like Neighbour Day lead to a tangible and sustained reduction in loneliness.

"The National Mental Health and Suicide Prevention Agreement should give us a comprehensive structure so people can access care when they need it and where they need it.

"Mental Health Australia is pleased to be advocating with the CHF and the RACGP for a well-funded national social prescribing scheme," said Dr Beagley.

Loneliness Awareness Week is an initiative of the UK Marmalade Trust, and we thank the Trust for their effort in highlighting this important aspect of wellbeing for Australians.

~ENDS

Adj. Professor Karen Price (RACGP), Leanne Wells (CHF) and Dr Leanne Beagley (MHA) are available for interview.

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