



**LEGISLATIVE ASSEMBLY**  
FOR THE AUSTRALIAN CAPITAL TERRITORY

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STANDING COMMITTEE ON EDUCATION AND COMMUNITY INCLUSION  
Mr Michael Pettersson MLA (Chair), Miss Laura Nuttall MLA (Deputy Chair),  
Ms Nicole Lawder MLA (Member)

## Submission Cover Sheet

Inquiry into Loneliness and Social Isolation in the ACT

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The Committee Secretary  
Standing Committee on Education and Community Inclusion  
ACT Legislative Assembly  
GPO Box 1020, Canberra, ACT 2601  
By email only: [LACommitteeJCS@parliament.act.gov.au](mailto:LACommitteeJCS@parliament.act.gov.au)

### **Inquiry into Loneliness and Social Isolation in the ACT**

Submitted by:  
Anita Mills  
Chief Executive Officer  
Alcohol Tobacco and Other Drug Association ACT (ATODA)  
[ceo@atoda.org.au](mailto:ceo@atoda.org.au) / (02) 6249 6358/ PO Box 7009 Kaleen, ACT 2617

#### **Introduction**

The Alcohol, Tobacco and Other Drug Association ACT (ATODA) represents the alcohol, tobacco and other drug (ATOD) sector in the ACT. Members include specialist alcohol and other drug treatment organisations; distinguished drug experts with deep knowledge of the criminal justice system and population health; the group representing families and friends who have lost loved ones to drugs; and the peer-based organisation for people with lived experience of drug use in the ACT.

ATODA welcomes this Inquiry and its Terms of Reference. Given ATODA's remit and our sector's particular areas of expertise, our comments in relation to loneliness and social isolation are specific to people who experience harms from the use of alcohol and other drugs, and who access alcohol, tobacco and other drug services in the ACT.

#### **Terms of Reference Items 1, 2 & 3: The prevalence of loneliness and isolation in the ACT community, experiences of loneliness and social isolation among residents of the ACT, and personal and social costs associated with loneliness and social isolation.**

Loneliness is a substantial global public health issue,<sup>1</sup> and it affects over 35 percent of the ACT community.<sup>2</sup> Loneliness is a subjective emotional state resulting from a discrepancy between social connections that an individual perceives they have, and ones they desire.<sup>1,3,4</sup> Social isolation is described as a situation where when an individual has few social connections or relationships, and infrequent social contact.<sup>5</sup> The experience of loneliness and social isolation is related to poor physical and mental health, drug use, lack of social connectedness and quality of relationships, stigma, discrimination, ill health, and death.<sup>3,5,4</sup>

Particular groups of interest to the Standing Committee on Education and Community Inclusion (the committee) include young people, LGBTIQ+ people, people with disabilities, and people experiencing

mental health conditions.<sup>6</sup> There is significant intersection between these identified groups and people who use alcohol and other drugs. The ACT Government Drug Strategy Action Plan (DSAP) 2022-2026 states that “that people who use ATOD can be significantly disadvantaged, and this disadvantage can be further compounded across certain populations”.<sup>7</sup> People who use drugs are at increased risk of experiencing homelessness and co-occurring mental health conditions, financial disadvantage, and are more likely to interact with the criminal, legal and justice systems.<sup>7,8</sup>

The population of people who use drugs commonly experience loneliness and social isolation, often due to persistent experiences of stigma and discrimination.<sup>7,8</sup> Stigma and discrimination are related to poor mental and physical health and overall poorer treatment outcomes.<sup>7,8</sup> For people who use alcohol and other drugs, this negatively impacts access to health care and other services, employment opportunities, and relationships within the community, often resulting in social withdrawal, isolation and lack of engagement in help-seeking behaviours.<sup>5,7,8</sup>

Single person households or living alone can also be associated with loneliness and social isolation. The 2018 Service Users Satisfaction and Outcomes Survey found that almost one third (31 percent) of ATOD service users indicated that they live alone most or all of the time,<sup>8</sup> compared to approximately one quarter (25.8 percent) of households in the ACT classified as occupied by a lone person.<sup>9</sup> For people who use alcohol and other drugs, experiencing loneliness and social isolation creates a potential risk of overdose, injury or death.

People who use alcohol and other drugs are at increased risk of experiencing ill health, including co-occurring mental health conditions. The co-occurrence of ATOD and mental health conditions is the experience of at least one ATOD condition and at least one mental health condition simultaneously.<sup>9</sup> For people who use alcohol and other drugs, experiencing a co-occurring mental health condition is common, and perpetuates risk of experiencing harms.<sup>10</sup>

People who use alcohol and other drugs are at significant risk of experiencing loneliness and social isolation and their negative impacts and should be considered as a priority population by the committee. Further examination of loneliness and social isolation in this group is needed to better understand their needs and priorities, with such work undertaken in consultation with ACT ATOD services and representatives of people who use drugs.

#### **Terms of Reference Items 4 & 5: Opportunities for the ACT government to support organisations and individuals to address loneliness and social isolation to improve social connectedness in the ACT community and opportunities for the ACT Government to integrate improving social connectedness into other areas of policy making**

In addition to being particularly vulnerable to experiencing loneliness and social isolation, the population of people who use alcohol and drugs are also overlooked in research.<sup>3,1,4</sup> There is some evidence supporting the feasibility of implementing group-based support and interventions informed by Social Identity Theory and cognitive theories.<sup>4</sup>

ATODA recommends that the ACT government considers further research to identify levels, circumstances and context of loneliness and social isolation within this population, as well as interventions that can best support people who use alcohol and drugs. Any interventions should be well-resourced and properly evaluated to assess their effectiveness in addressing and reducing

loneliness and social isolation among this population group. Opportunities for further research could help identify the specific ways in which improving social connectedness could be incorporated into ATOD policy.

### **Recommendations**

That the ACT Government:

- recognises people who use drugs as a population at risk of experiencing loneliness and social isolation;
- funds research into the levels and impacts of loneliness and social isolation on people who use drugs to help inform policy; and
- identifies, supports and properly resources alcohol, tobacco and other drug services to design, deliver and evaluate effective and evidence-based interventions that address loneliness and social isolation among people who use alcohol and other drugs.

ATODA appreciates the opportunity to provide this submission to the committee and is available to provide any additional detail that may be required.

23 February 2024

## References

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9. Australian Bureau of Statistics. *Snapshot of Australian Capital Territory*. ABS, 2022.
10. Marel C, Siedlecka E, Fisher A, et al. *Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings*. 2022.

## About ATODA

The Alcohol Tobacco and Other Drug Association ACT (ATODA) is the peak body for the alcohol, tobacco and other drug sector in the Australian Capital Territory (ACT). ATODA's vision is a healthy, well and safe ACT community with the lowest possible levels of alcohol, tobacco and other drug related harms. Underpinning ATODA's work is a commitment to health equity, the social and cultural determinants of health, and the values of collaboration, participation, diversity, human rights, social justice and reconciliation between Aboriginal and Torres Strait Islander people and other Australians. ATODA's purpose is to lead and influence positive outcomes in policy, practice and research, as the peak body for the alcohol, tobacco and other drug sector in the ACT. These outcomes flow from initiatives in prevention, early intervention, harm reduction, treatment, peer services, and continuing care. ATODA provides collaborative leadership for intersectoral action on the social determinants of harmful drug use, and on societal responses to drug use and to people who use drugs. ATODA works to provide alcohol, tobacco and other drug related expertise in the areas of policy; sector workforce development and capacity building; research, data and evaluation; health services planning; coordination and partnerships; training and education; communication; information and resources.

Note: While the term AOD (alcohol and other drug) is commonly used to refer to the alcohol, tobacco and other drug sector, ATODA's preference is to use the term ATOD. This acknowledges the role that specialist service providers in this sector play in providing tobacco cessation support, and because tobacco use is the leading preventable cause of the burden of disease in Australia, contributing far more than alcohol or all illicit drugs combined.