

Monash University
Connecting for Better Health (C4BH) project
Loneliness Awareness Week Webinar Summary Report
5 August 2026

Overview

This webinar, chaired by Professor Cathy Mihalopoulos, marked Loneliness Awareness Week and showcased emerging findings from the Connecting for Better Health program. The opening session introduced the national campaign and explored the importance of understanding loneliness and creating opportunities for meaningful social connection. Presentations highlighted new Australian evidence on the relationship between loneliness, social isolation and chronic health conditions, geographic patterns of social connection, and community preferences for loneliness interventions.

Loneliness Awareness Week: Making Room for Connection (Sharon Clifford)

The webinar commenced with an introduction to Loneliness Awareness Week, Australia's national campaign led by Ending Loneliness Together to raise awareness of loneliness and encourage action to strengthen social connections. The presentation highlighted the distinction between loneliness as a subjective feeling of insufficient connection and social isolation as a state of limited social contact, noting that social disconnection affects many Australians and is often triggered by life transitions such as moving, bereavement or parenthood. Participants heard that loneliness could affect anyone, including people surrounded by others, and that it is associated with poorer mental and physical health, cognitive decline and reduced quality of life. Practical strategies for fostering connection were discussed, including participation in local activities, sharing meals and creating opportunities for informal interactions. Key enablers of social connection included accessible and affordable opportunities, welcoming environments, interest-based activities, regular engagement and open invitations. Together, these messages reinforced the importance of reducing stigma, creating opportunities for meaningful connection and building communities that support social health and wellbeing.

Loneliness and Social Isolation Around the Onset of Long-Term Health Conditions (Dr Fikru Rizal)

This study analysed 20 years of HILDA longitudinal data involving approximately 25,000 Australians. Researchers examined loneliness and social isolation before and after the onset of activity-limiting long-term health conditions. Findings showed that loneliness often increases before a condition is formally reported and remains elevated afterwards. Mental health-related conditions demonstrated the strongest association, with loneliness increasing substantially around onset. In contrast, social isolation tended to emerge after onset and was linked to increased likelihood of living alone and relationship breakdown. The findings suggest loneliness and social isolation follow different trajectories and require different responses. Early psychological support may help address loneliness before disease onset, while longer-term relational and social supports may assist people experiencing growing social isolation.

Exploring the Loneliness and Social Isolation Heat Map (Professor Arul Earnest)

This presentation examined how loneliness and social isolation vary geographically across Australia. Using HILDA data alongside Australian Bureau of Statistics, satellite and national livability datasets, the team developed geospatial models and interactive maps. Results showed that loneliness and social isolation are not randomly distributed but occur in identifiable clusters. Socioeconomic disadvantage emerged as the strongest area-level predictor of loneliness, while areas with higher rates of depression and anxiety also showed greater loneliness risk. For social isolation, higher hospital admission rates were associated with increased risk. A key message was that place matters: where people live influences social connection outcomes. The project is translating these findings into an interactive dashboard designed to support planners, policymakers and communities to target resources and develop place-based solutions.

Community Preferences for Loneliness Intervention Features (Sharon Clifford)

This systematic review examined 80 studies from 14 countries involving more than 1,700 participants. The research explored which intervention features users value most when participating in loneliness reduction programs. Seven major themes were identified: delivery features, facilitator characteristics, group features, program features, technology features, user characteristics and user experience. Participants consistently emphasised accessibility, inclusivity, skilled facilitators, opportunities to connect with people who share similar experiences, flexible program design and ongoing support. Findings also highlighted the importance of avoiding stigma, ensuring technology is accessible and creating engaging experiences that foster belonging and personal growth. These insights will help inform future intervention design and improve uptake and effectiveness.

Discussion and Future Directions

Audience discussion focused on opportunities for collaboration, methodological approaches for longitudinal research, and the need for stronger evidence regarding interventions for people experiencing loneliness alongside chronic disease. Researchers noted that while evidence for psychological approaches is growing, there remains a need for more condition-specific intervention studies. The webinar also highlighted the value of partnerships between researchers, service providers and people with lived experience to inform future program development.

Conclusion

The webinar reinforced the growing evidence that loneliness and social isolation are significant public health issues closely connected to chronic disease management and wellbeing. The C4BH program is contributing important evidence on when loneliness emerges, where it is concentrated and what intervention features people value most. Together, we hope these findings will support the development of more effective, equitable and targeted responses to improve social connection and health outcomes across Australia.