

# Still Alone Together

How loneliness changed in Aotearoa New Zealand in 2020 and what it means for public policy

A research paper by Holly Walker, April 2021

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## About the Helen Clark Foundation

The Helen Clark Foundation is an independent public policy think tank based in Tāmaki Makaurau Auckland, at the Auckland University of Technology. It is funded by members and donations. We advocate for ideas and encourage debate; we do not campaign for political parties or candidates. Launched in March 2019, the Foundation issues research and discussion papers on a broad range of economic, social, and environmental issues.

### Our philosophy

New problems confront our society and our environment, both in New Zealand and internationally. Unacceptable levels of inequality persist. Women's interests remain underrepresented. Through new technology we are more connected than ever, yet loneliness is increasing, and civic engagement is declining. Environmental neglect continues despite greater awareness. We aim to address these issues in a manner consistent with the values of former New Zealand Prime Minister Helen Clark, who serves as our patron.

### Our purpose

The Foundation publishes research that aims to contribute to a more just, sustainable and peaceful society. Our goal is to gather, interpret and communicate evidence in order to both diagnose the problems we face and propose new solutions to tackle them. We welcome your support: please see our website [www.helenclark.foundation](http://www.helenclark.foundation) for more information about getting involved.

## About WSP in New Zealand

As one of the world's leading professional services firms, WSP provides strategic advisory, planning, design, engineering, and environmental solutions to public and private sector organisations, as well as offering project delivery and strategic advisory services. Our experts in Aotearoa New Zealand include advisory, planning, architecture, design, engineering, scientists, and environmental specialists. Leveraging our Future Ready® planning and design methodology, WSP use an evidence-based approach to helping clients see the future more clearly so we can take meaningful action and design for it today. With approximately 48,000 talented people globally, including 2,000 in Aotearoa New Zealand located across 40 regional offices, we are uniquely positioned to deliver future ready solutions, wherever our clients need us. See our website at [wsp.com/nz](http://wsp.com/nz).

## About the Post-Pandemic Futures Series

The world has changed around us, and as we work to rebuild our society and economy, we need a bold new direction for Aotearoa New Zealand. A new direction that builds a truly resilient economy and a fair labour market. A new direction that embraces environmental sustainability and provides for a just transition. A new direction that nurtures an independent and vibrant Kiwi cultural and media landscape. And a new direction that focuses on the wellbeing of all in society.

To get there, we need to shine a light on new ideas, new policies, and new ways of doing things. And we need vigorous and constructive debate. At the Helen Clark Foundation, we will do what we can to contribute with our series on Aotearoa New Zealand's post-pandemic future. This is the fourth report in a series discussing policy challenges facing New Zealand due to the COVID-19 pandemic.

## Whakataukī

Ki te kotahi te kākaho ka whati, ki te kāpuia e kore e whati.

- Nā Kīngi Tāwhiao<sup>1</sup>

## He mihi: acknowledgements

I am grateful to the following people and organisations who assisted with this work. Ngā mihi nui.

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Prudence Walker from DPA for her insightful Q&A answers.

Jonathan Mosen from Workbridge for his contribution on the links between employment and social connection for disabled people.

The authors of the *Spaces of Belonging* research and their participants, for powerfully illustrating the lived experience of disabled people.

My colleagues at the Helen Clark Foundation: Kathy Errington, Paul Smith, Sarah Paterson-Hamlin, and Matt Shand.

- Holly Walker, Deputy Director and WSP Fellow, April 2021

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<sup>1</sup> This whakataukī was coined by Tāwhiao, Tūkāroto Matutaera Pōtatau Te Wherowhero (d. 1894), Māori King, Waikato leader, and prophet. In English it translates as “When the reeds stand alone, they are vulnerable, but bound together they are unbreakable,” or more colloquially, “alone we can be broken, standing together we are invincible.” For more information about Kīngi Tāwhiao see R. T. Mahuta, “Tāwhiao, Tūkāroto Matutaera Pōtatau Te Wherowhero,” in *Dictionary of New Zealand Biography*, Te Ara: Encyclopedia of New Zealand (Wellington: Ministry of Culture and Heritage, first published 1993, updated July 2011), <https://teara.govt.nz/en/biographies/2t14/tawhiao-tukaroto-matutaera-potatau-te-herowhero>.

## Executive summary

This paper builds on and updates the findings of the first report in the Helen Clark Foundation's partnership with WSP New Zealand, *Alone Together: The risks of loneliness in Aotearoa New Zealand following COVID-19 and how public policy can help*, released in June 2020.<sup>2</sup>

Researched and written largely during the Level 4 and Level 3 lockdowns in March – May 2020, *Alone Together* made the case for loneliness to be taken more seriously as a public policy issue by summarising its negative impacts on health, wellbeing, and life expectancy, and highlighting how the COVID-19 pandemic had exacerbated these risks.

The report used data from the 2018 General Social Survey (GSS) to establish a pre-pandemic baseline of self-reported loneliness in Aotearoa, including identifying some of the groups most affected. It then drew on early data from the 'Life in Lockdown' survey by the Roy McKenzie Centre for the Study of Children and Families and the Institute of Governance and Policy Studies at Victoria University of Wellington (VUW) to sketch the early impact of the Level 4 lockdown on New Zealanders' self-reported loneliness. On the basis of this evidence, it identified six planks of an effective policy response to loneliness following COVID-19, and made twelve specific recommendations.

In this update paper, we draw on quarterly wellbeing statistics gathered as part of the Household Labour Force Study (HLFS) during 2020, as well as the VUW researchers' follow-up Level 1 survey, to provide a fuller picture of how New Zealanders' levels of loneliness were impacted by an extraordinary pandemic year. We pay particular heed to how the groups we identified as being at most risk in *Alone Together* have fared during 2020.

Due to changes in the way data are collected, we now have access to information about self-reported loneliness broken down by disability status. As a result, we can report something we suspected in 2020 but could not illustrate with quantitative data: that disabled people are disproportionately negatively impacted by loneliness by a significant margin.

We find that disabled people are four times more likely than non-disabled people to report feeling lonely most or all of the time. Other groups also likely to report feeling lonely include unemployed people, people on low incomes, sole parents, new migrants, people of Asian ethnicity, and young people aged 18-24. There is considerable overlap between these groups.

During 2020, loneliness increased across the whole population, with the biggest increases coming after the Level 4 lockdown, perhaps due to reduced 'checking in' on vulnerable people.

Loneliness had returned to close to the pre-pandemic baseline for the total population by the end of 2020, but this masks severe and ongoing loneliness among some marginalised groups. This remains a significant public policy challenge because of the myriad negative health and wellbeing impacts of loneliness on the same people who were most negatively impacted by COVID-19.

We pay particular attention to the issue of loneliness among disabled people in this report. We draw on the *Spaces of Belonging* research undertaken by Imagine Better, Disabled People's Assembly New Zealand (DPA), and the University of Waikato in 2019 to illustrate the lived experience of disabled people. We include a Q&A with DPA's Chief Executive Prudence Walker about what needs to happen

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<sup>2</sup> Holly Walker, "Alone Together: The Risks of Loneliness in Aotearoa New Zealand Following COVID-19 and How Public Policy Can Help," Post-Pandemic Futures Series (Auckland: The Helen Clark Foundation and WSP, June 24, 2020), <https://helenclark.foundation/wp-content/uploads/2020/06/alone-together-report-min.pdf>.

to address high rates of loneliness among disabled people, and we highlight the importance of employment for disabled people's social wellbeing with a contribution from Workbridge CEO Jonathan Mosen. Our partners at WSP New Zealand provide an illustration of how high-quality urban design can prioritise accessibility and social wellbeing.

Finally, we consider what progress has been made against the recommendations in *Alone Together*. We are pleased to note that there has been significant progress in some areas, but there remains much work to do in others.

Drawing from this assessment, and the new data now available to us, we present a refined set of public policy recommendations to continue to address the significant challenge of loneliness in Aotearoa New Zealand following COVID-19.

## Revised recommendations

Based on the evidence presented in this report, and an assessment of progress against our previous recommendations, we recommend that the government:

### Make sure people have enough money

1. Implement an effective guaranteed minimum income for all New Zealanders to enable everyone to live with dignity. This should include raising main benefits to liveable levels and increasing the minimum wage to the living wage.
2. Increase support so that everybody who wants a job can find one, including by continuing to subsidise vocational retraining, and by increasing support for disability employment services.

### Close the digital divide

3. Urgently make the provision of high-speed internet access standard in all social housing tenancies and a standard feature of government-funded disability support programmes.
4. Continue to invest in the provision of internet-enabled devices and support for online teaching and learning, and partner with community organisations to expand the provision of devices and internet connections to people in need beyond the education sector.
5. Make internet safety a core part of the school curriculum to support young people at risk of online harm from increased use of digital technologies.

### Help communities do their magic

6. Continue to invest in community-led development funds for community organisations to support self-identified collective goals. This should include investment in disabled-led and owned community building and spaces of belonging for disabled people.
7. Continue to boost support for Whānau Ora to enable Māori communities to respond to self-identified challenges and meet collective goals.

### Create friendly streets and neighbourhoods

8. Prioritise social wellbeing and accessibility in all Kāinga Ora-led housing developments.
9. Issue guidance on the National Policy Statement on urban development to stipulate that all urban development projects should promote social wellbeing and meet the highest standards of accessibility.
10. Work with public transport providers to improve the design and accessibility of buses and trains, including to encourage positive social interaction while minimising dangerous enforced proximity.

### Prioritise those already lonely

11. Prioritise services and supports for those most at risk of experiencing loneliness, including young people, unemployed people, sole parents, and disabled people.

### Invest in frontline mental health

12. Fully commit all of the allocated funding for the new frontline mental health service to bring forward the date of its implementation as much as possible.

## Part 1: What we reported in June 2020

### Why loneliness matters

We have all experienced the pang of loneliness – the painful feeling that occurs when one’s needs for meaningful connection are unmet, often experienced as a distressing longing for others.

There are at least three main types of loneliness: **emotional loneliness**, related to the lack or loss of an intimate other; **social loneliness**, feeling unconnected to a wider social network, such as friends, family, and neighbours; and **existential loneliness**, related to a feeling of lacking meaning and purpose in life.

While related, loneliness and being alone are not the same thing. People can experience profound loneliness while surrounded by other people if those relationships do not provide them with the depth or nature of connection that they need, and likewise, people can spend long periods of time alone but not experience any loneliness if their needs for connection are being met in other ways. In this way, researchers differentiate between loneliness (having an unmet need for connection) and social isolation (being separated from other people). While the two often overlap, they are not the same – though we recognise that they are often used interchangeably in everyday conversation.

Short periods of loneliness are a normal part of the human experience, but when experienced consistently and for a prolonged period, all types of loneliness can have profound negative consequences for health and wellbeing.

This is because humans have evolved to rely on each other for survival (for example, provision of food, protection from predators, and care for the sick and elderly). Perceiving ourselves to be ‘separated from the group’ can trigger an automatic threat response that puts the body into a state of hyperarousal (often known as the ‘fight, flight, or freeze’ response). While this response can help us manage immediate danger, it is not intended to be maintained for long periods due to the stress it places on our bodies.

Spending weeks, months, or years in this state of ‘hypervigilance for social threat’ can create hormonal imbalances, disrupt sleep, elevate feelings of panic and anxiety, weaken our immune system, heighten the risk of high blood pressure, high cholesterol, heart disease, depression and dementia.<sup>3</sup> Taken together, these effects can shorten life expectancy.<sup>4</sup> For this reason, loneliness is a significant public health challenge.

### Pre-pandemic loneliness

Before COVID-19, New Zealanders reported relatively high levels of loneliness, and there were clear intersections with other wellbeing factors. In 2018, 3.5% of New Zealanders reported feeling lonely most or all of the time in the previous four weeks, and a further 35.5% reported some loneliness in that period.<sup>5</sup> Of the groups reported in the 2018 General Social Survey (GSS), those most likely to

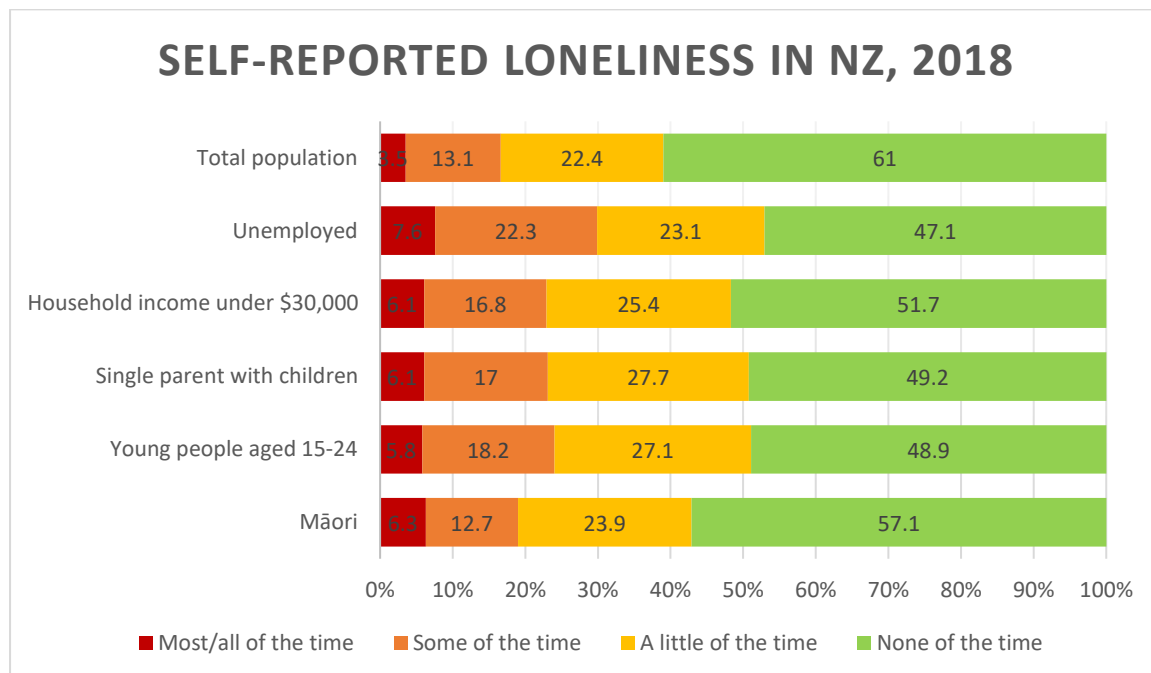
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<sup>3</sup> Louise C. Hawkey and John T. Cacioppo, “Loneliness Matters: A Theoretical and Empirical Review of Consequences and Mechanisms,” *Annals of Behavioral Medicine : A Publication of the Society of Behavioral Medicine* 40, no. 2 (October 2010), <https://doi.org/10.1007/s12160-010-9210-8>.

<sup>4</sup> Esteban Ortiz-Ospina, “How Important Are Social Relations for Our Health and Well-Being?,” Oxford Martin School, Our World in Data, July 17, 2019, <https://ourworldindata.org/social-relations-health-and-well-being>.

<sup>5</sup> “Wellbeing Statistics: 2018” (Stats NZ Tauranga Aotearoa, 2018), <https://www.stats.govt.nz/information-releases/wellbeing-statistics-2018>.

report feeling lonely most or all of the time included those who were unemployed (7.6%), Māori (6.3%), those with a household income less than \$30,000 per annum (6.1%), and young people aged 15-24 (5.8%).



All of these are groups whose wellbeing the government is seeking to improve, and who proved to be particularly vulnerable to the negative economic and social impacts of COVID-19.

We acknowledged in the *Alone Together* report that disabled people were also among those most likely to experience loneliness, but were unable to report exact figures because of the way the 2018 GSS was collected and reported. Thanks to changes in the way Stats NZ collects wellbeing data, we are able to report directly on disabled peoples’ experiences of loneliness later in this report.

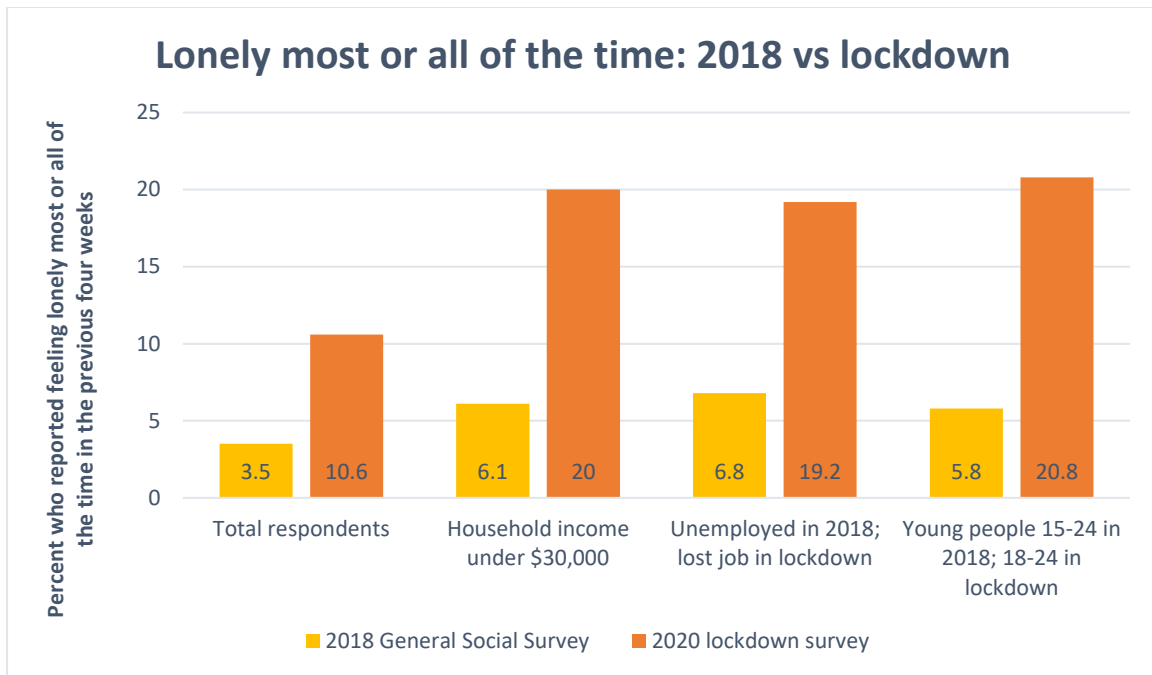
### Impact of the Level 4 lockdown

Aotearoa entered Alert level 4 lockdown on 25 March 2020, and remained there until 27 April 2020. Researchers at the Roy McKenzie Centre for the Study of Families and Children and the Institute for Governance and Policy Studies quickly conducted a survey to reveal some of the economic and social effects of the lockdown, including a question about self-reported loneliness in the previous four weeks. The survey was undertaken during the third week of the Level 4 lockdown, and researchers kindly shared early results with us.

The lockdown survey revealed that overall rates of loneliness increased significantly during the Level 4 lockdown. 10.6% of respondents reported feeling lonely most or all of the time, compared to the pre-pandemic baseline of 3.5% in the 2018 GSS. The lockdown survey also revealed that groups who were already at greater risk of loneliness were disproportionately negatively affected by the lockdown. In particular, young people, those with household incomes under \$30,000, and those who had lost their job or income as a result of COVID-19 reported particularly high levels of loneliness during the Level 4 lockdown.<sup>6</sup>

<sup>6</sup> Kate Prickett et. al., “Life in Lockdown: The Economic and Social Effect of Lockdown in Alert Level 4 on New Zealanders” (Wellington: Victoria University of Wellington, 2020).





## Six planks of an effective public policy response

The data we reported in *Alone Together* highlighted that loneliness intersects significantly with other wellbeing factors, necessitating a focus on policies that enable social connection to thrive if the goal of increased wellbeing for all is to be achieved. The COVID-19 pandemic thrust loneliness into even greater prominence with an extended period of enforced social isolation, compounded by considerable loss of employment and income, meaning those already at risk were disproportionately negatively affected.

While governments cannot directly influence people's social connections, they can adopt policies that create the conditions for meaningful social interaction to flourish. To this end we recommended six planks of an effective public policy response to the risks of loneliness following COVID-19:

1. Make sure everyone has 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

We made twelve specific recommendations under these headings, which are outlined in Part 4, when we consider what progress has been made against each of them since the *Alone Together* report was published.

## Part 2: What we have learned since June 2020

Since we published the *Alone Together* report in June 2020, Aotearoa has been fortunate to enjoy one of the most successful responses to the COVID-19 pandemic anywhere in the world. Our period of Level 4 lockdown, while stricter than many other countries, was over relatively quickly. At Alert Level 1, everyday life returned to something like the pre-pandemic ‘normal’, albeit with many jobs and livelihoods affected. The Auckland region, though, has experienced several smaller Alert Level 3 lockdowns following cases of community transmission, and the rest of the country has correspondingly moved back and forth between Alert Levels 1 and 2, most recently in February and March 2021.

We wanted to track how all of this had affected New Zealanders’ levels of self-reported loneliness over the course of 2020. We had an initial indication that the Level 4 lockdown had significantly increased self-reported loneliness from the VUW ‘Life in Lockdown’ survey, but what had happened after that, as the alert levels decreased? Had the return to something like “normal” masked ongoing challenges for particular groups struggling with feelings of loneliness and isolation, and what might this tell us about additional public policy responses required?

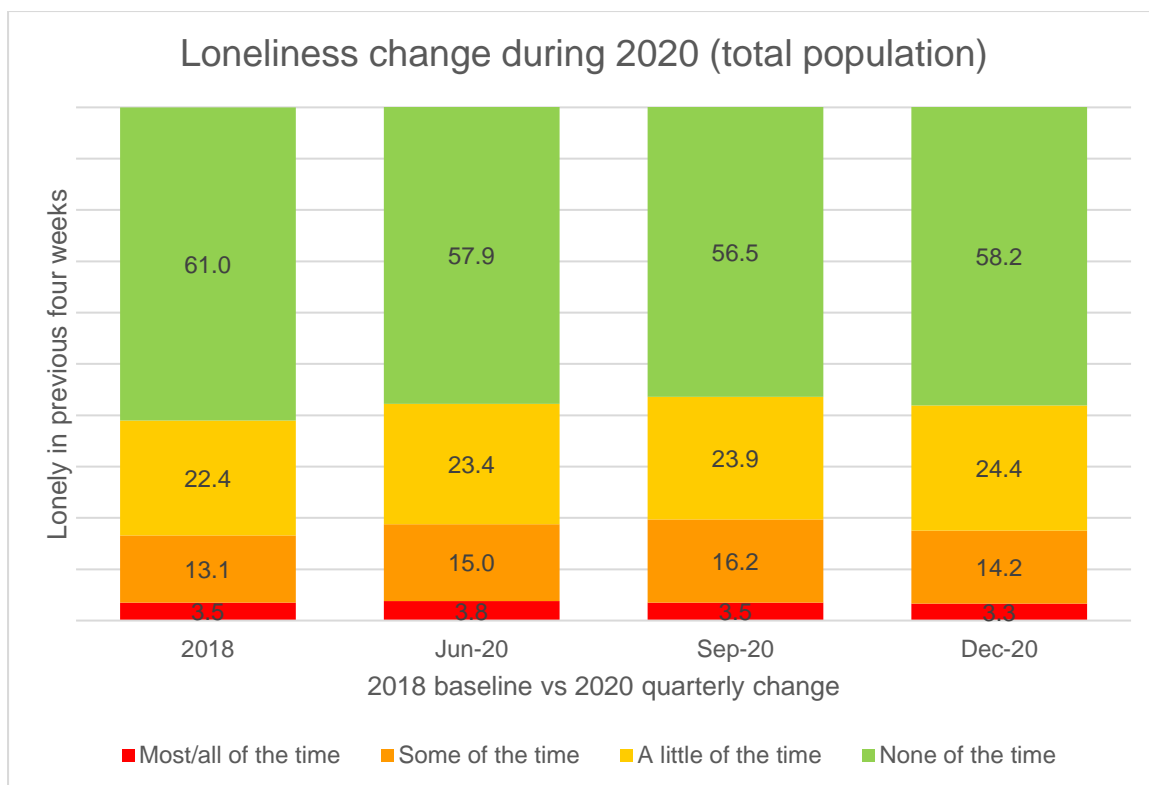
Fortunately, we now have access to quarterly self-reported loneliness data, broken down by a range of variables, thanks to some changes in the way Stats NZ collects wellbeing statistics. Our pre-pandemic baseline measure came from the 2018 GSS, a comprehensive face-to-face survey about social wellbeing undertaken every two years. It was due to be undertaken again during 2020, but – like so many things – it was delayed by COVID-19. Instead, in order to continue reporting on wellbeing during the pandemic, Stats NZ added a number of questions to its quarterly Household Labour Force Survey (HLFS), including a question about self-reported loneliness in the previous four weeks. As a result, since the *Alone Together* report was published in June 2020, there have been three quarterly releases of Wellbeing Statistics, which allow us to track how loneliness changed during the course of 2020.<sup>7</sup> The first additional wellbeing responses were collected in May 2020, after the Level 4 lockdown and incorporating about one week of Level 3.

### Loneliness changes in 2020 at the population level

At the total population level, Stats NZ’s quarterly releases paint a relatively benign picture. Across the total population self-reported loneliness increased slightly soon after the Level 4 lockdown, increased slightly more in the months following, and by the end of 2020 had fallen back to something close to the 2018 baseline.

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<sup>7</sup> “Wellbeing Statistics: June 2020 Quarter,” Stats NZ Tatauranga Aotearoa, accessed March 18, 2021, <https://www.stats.govt.nz/information-releases/wellbeing-statistics-june-2020-quarter>; “Wellbeing Statistics: September 2020 Quarter,” Stats NZ Tatauranga Aotearoa, accessed March 18, 2021, <https://www.stats.govt.nz/information-releases/wellbeing-statistics-september-2020-quarter>; “Wellbeing Statistics: December 2020 Quarter,” Stats NZ Tatauranga Aotearoa, accessed March 18, 2021, <https://www.stats.govt.nz/information-releases/wellbeing-statistics-december-2020-quarter>.

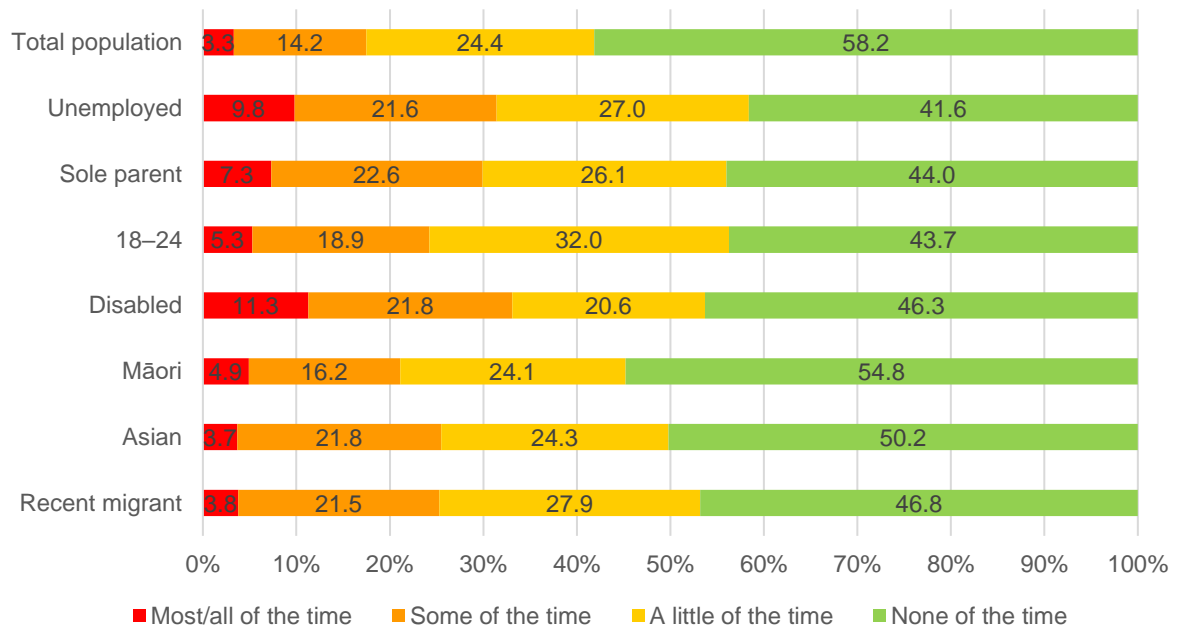


The further increase in self-reported loneliness some months after the Level 4 lockdown may at first appear counter-intuitive, but is replicated in the findings of the Victoria University of Wellington researchers' follow up to the 'Life in Lockdown' survey, taken in July during Level 1, which also found an increase in self-reported loneliness after the Level 4 lockdown.

While we cannot say definitively why this is, we can speculate that for many people, the Level 4 lockdown period was characterised by more frequent social contact (albeit virtual rather than in person), and conscious 'checking in' on friends, neighbours, and relatives, particularly those who might have been vulnerable to feelings of loneliness brought on by the enforced social isolation. By contrast, when life returned to 'normal' later in the year, many people went back to their busy lives and conscious contact with potentially isolated individuals reduced. It is also important to remember that residents of Auckland experienced a second Level 3 lockdown in August 2020.

Taken at the population level, the increases in self-reported loneliness during 2020 were relatively small, and the overall picture is reassuring: small increases reverting to something close to the pre-pandemic baseline by the end of the year. However, this aggregation masks some severe experiences for particular groups; groups who were already at risk of increased loneliness and for whom this existing risk was compounded by the pandemic.

### Self-reported loneliness in NZ: Groups most at risk (December 2020)

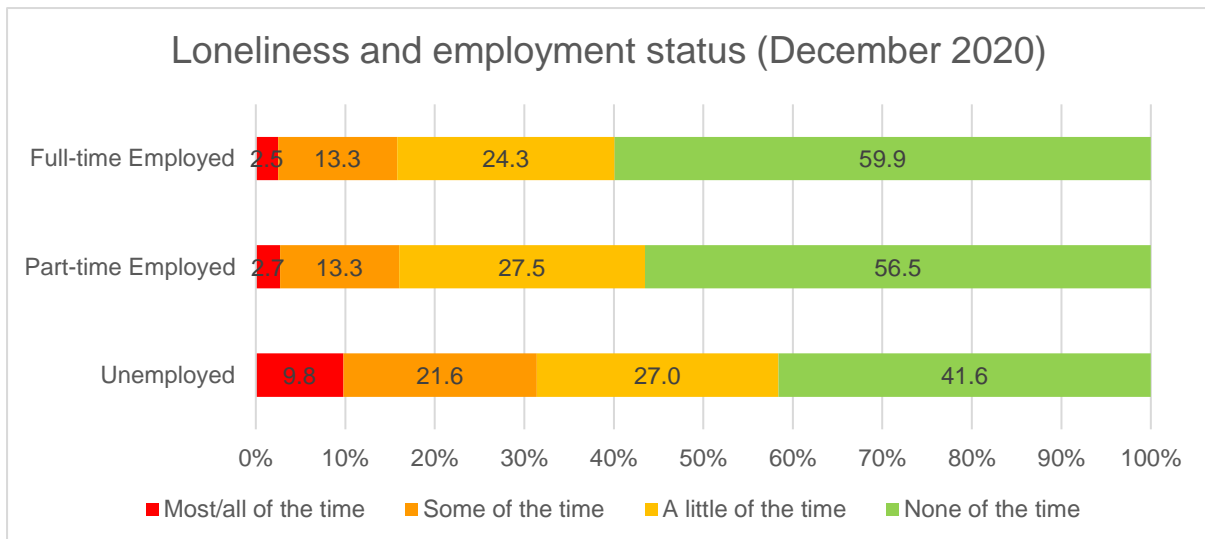


Below we report on how each of these groups fared in more detail.

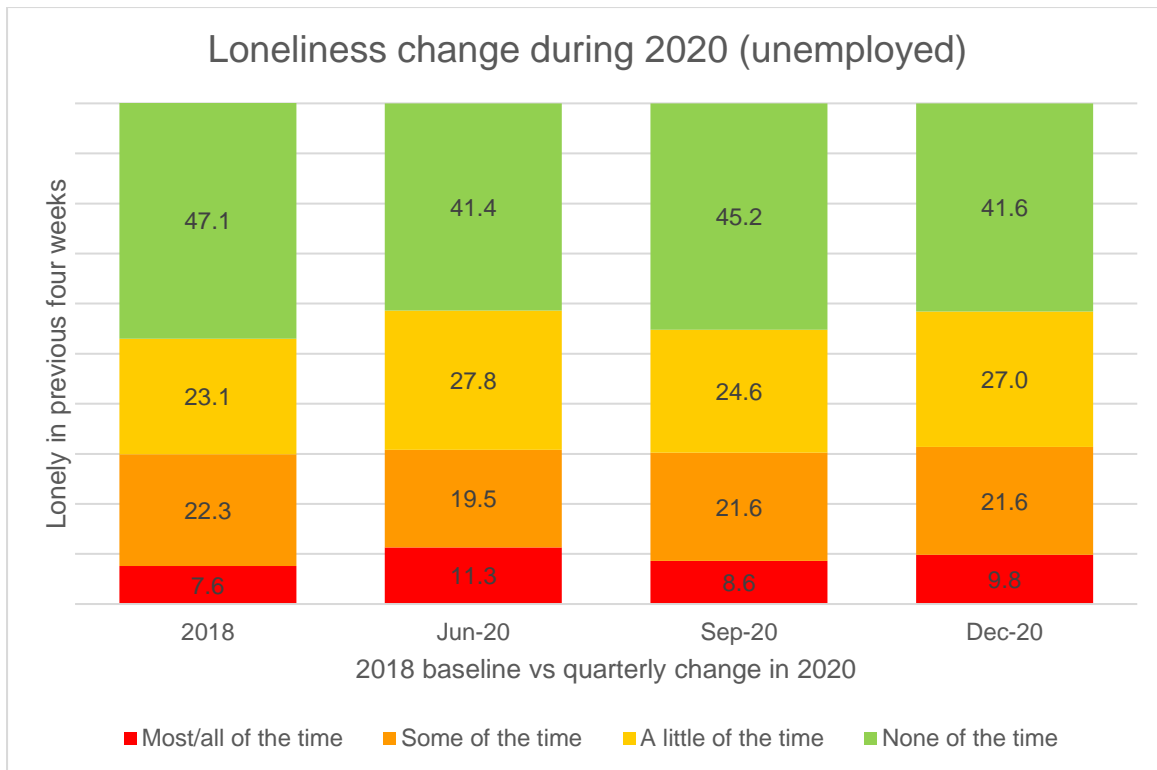
## Loneliness and employment status

For many people, work provides more than just income. It can provide an important social network, as well as a sense of identity and purpose. As we noted in *Alone Together*, loss of employment can trigger feelings of purposelessness, and may explain why unemployment is so strongly correlated with high levels of self-reported loneliness.

People who were unemployed – who already reported significantly higher levels of self-reported loneliness before COVID-19 – finished 2020 feeling significantly lonelier than those who were employed full- or part-time.



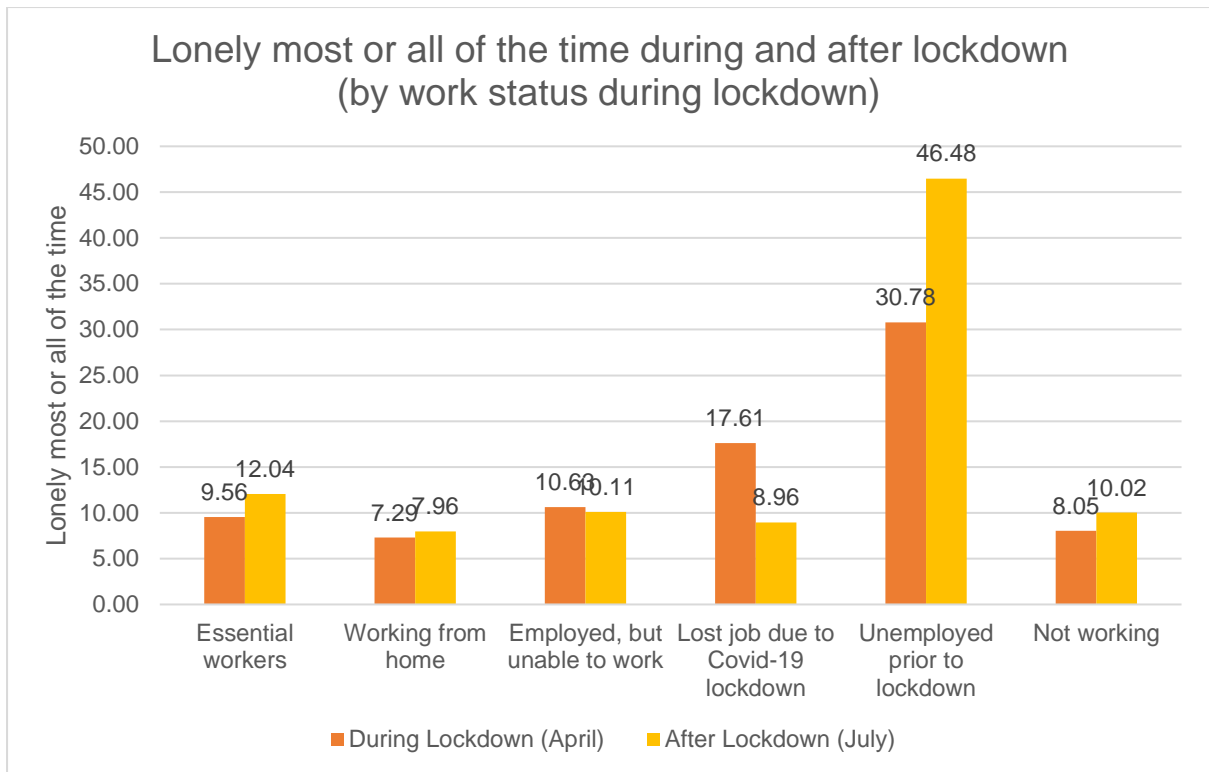
During the course of the year, people who were unemployed experienced relatively large increases in self-reported loneliness. Throughout 2020 their levels of self-reported loneliness were consistently elevated, with almost 10% reporting feeling lonely most or all of the time by the December quarter (compared to just 3.3% of the total population).



Likewise, respondents to the VUW survey who were unemployed prior to lockdown reported feeling high levels of loneliness, and even more so when they were re-surveyed in July at Level 1, when almost half said they felt lonely most or all of the time.<sup>8 9</sup>

<sup>8</sup> Unpublished estimates from analyses conducted by Hanna Habibi and Kate Prickett, Roy McKenzie Centre for the Study of Families and Children, Victoria University of Wellington. Analyses available upon request from the authors.

<sup>9</sup> Loneliness in the Life Under Lockdown survey was measured on a 1-4 scale in response to the question “In the last four weeks, how much of the time have you felt lonely,” where 1= All of the time, 2= Most of the time, 3 = Some of the time, and 4 = None of the time.”



Fortunately, fears about a mass increase in unemployment at the start of the COVID-19 pandemic appear largely to have been averted: from a baseline of 4.2% in the March 2020 quarter, the overall unemployment rate initially fell in June, shot up to 5.3% in September, and then fell again to 4.9% in the December 2020 quarter.<sup>10</sup>

This likely reflects the government’s decision to provide generous wage subsidies during the Level 4 lockdown, and to continue to subsidise businesses affected by ongoing changes to COVID-19 alert levels. Given the profound positive impacts on economic and social wellbeing of stable employment, this support has clearly been beneficial. In addition, a number of funds have been created to support vocational retraining, and the government elected in June 2020 to provide a twelve-week special payment to those who had lost their jobs as a result of the pandemic.

However, this support was not extended to those who were already unemployed prior to the pandemic. The COVID-19 relief payment was effectively a form of unemployment insurance that paid out at a higher rate than the existing Jobseeker Support payment, creating equity issues and compounding the negative experiences of those who were already out of work. This group continues to report feelings of loneliness at much higher levels than the total population. The overall unemployment rate also masks high levels of unemployment among certain population groups: for example the unemployment rate for disabled people in the June 2020 quarter was 7.4% compared to 3.9% for non-disabled people.

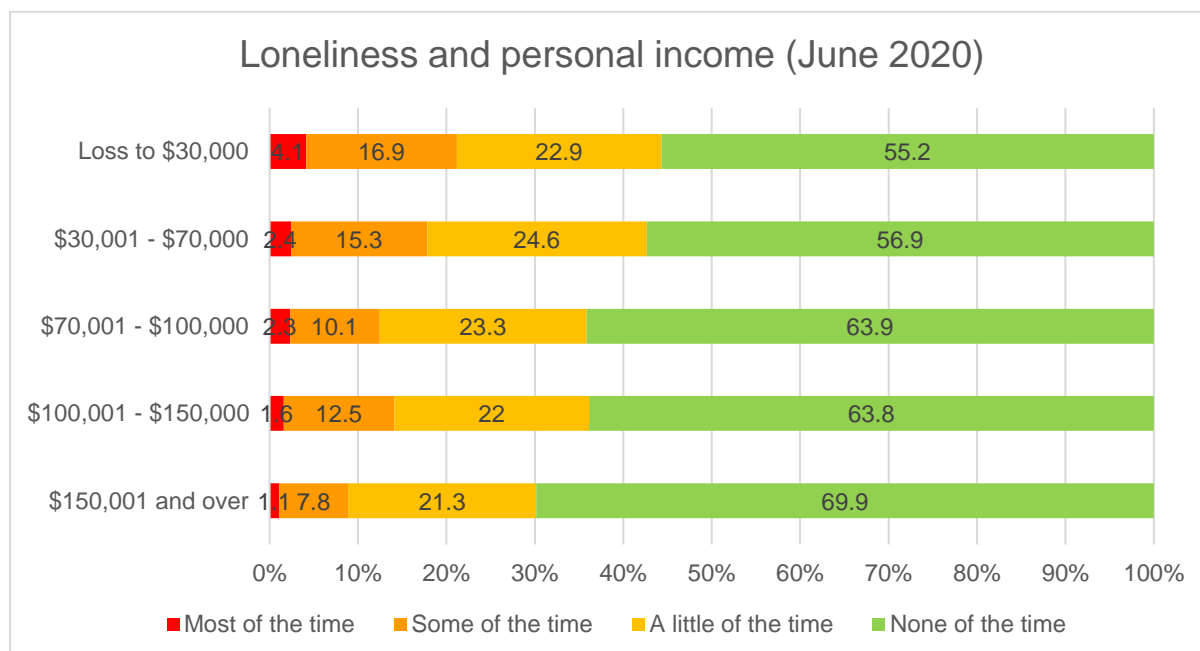
Targeted support for people who are long-term unemployed, in the form of both increased income and assistance to find work, would be beneficial from a social wellbeing, as well as an economic perspective.

<sup>10</sup> “Unemployment Rate,” Stats NZ Tatauranga Aotearoa, accessed March 18, 2021, <https://www.stats.govt.nz/indicators/unemployment-rate>.

## Loneliness and income

In *Alone Together* we reported that loneliness increases steadily as household income decreases, with those living on household incomes of less than \$30,000 per annum particularly likely to report feeling lonely. Poverty creates pervasive toxic stress that can hinder the formation and maintenance of social relationships, and also causes a lack of access to resources like free time to socialise, funds for travel, and opportunities for recreation. As well as being more likely to experience loneliness, people on low incomes can find the experience of loneliness particularly challenging because they often lack access to the material and social resources to buffer its negative effects, such as high-speed internet, warm comfortable homes, and access to plentiful food.

Because of the changes to how Stats NZ has collected data in 2020, we can't report on exactly the same measure of income as we did in *Alone Together* (household income), nor present a quarterly breakdown of the whole year. However, thanks to a custom data collation by Stats NZ, we have been able to generate a breakdown of self-reported loneliness by personal (rather than household) income taken in the June quarter, which reveals the same pattern of loneliness increasing as income decreases.<sup>11</sup>



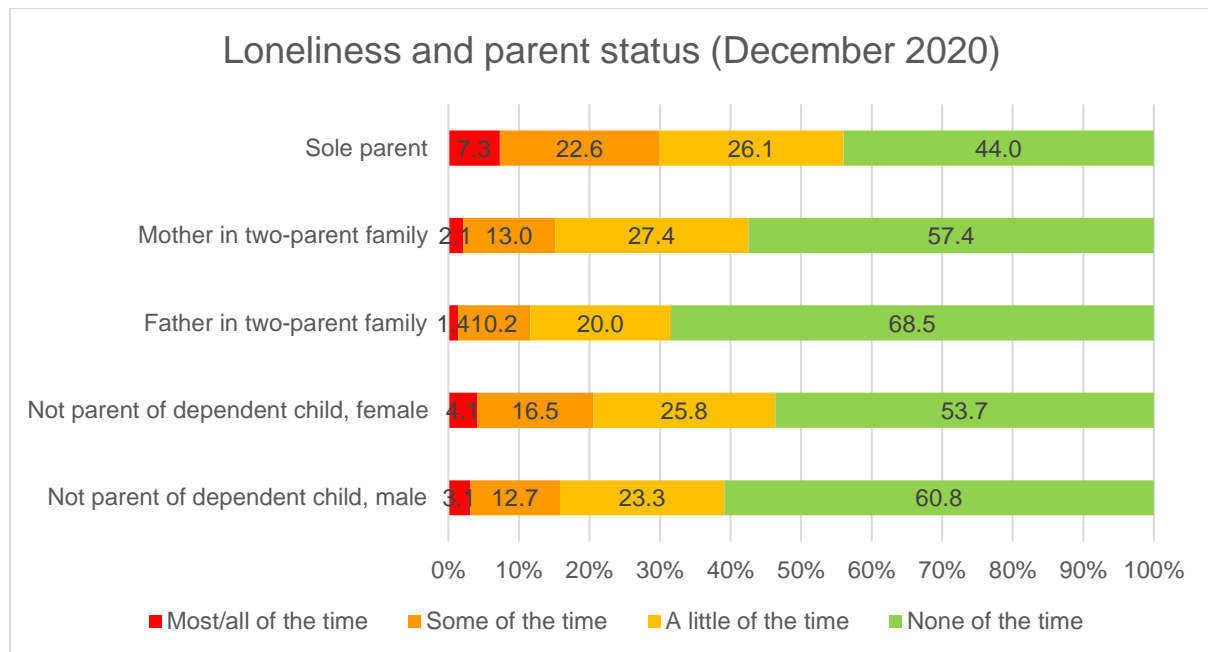
While main benefit rates were increased by \$25 in 2020, and the minimum wage increased to \$20 per hour on 1 April 2021, our recommendation of the creation of an effective guaranteed minimum income to enable everyone to live with dignity was not taken up. It remains the case that those on the lowest incomes are among the most likely to experience profound loneliness, as well as myriad other social and economic challenges.

<sup>11</sup> This analysis is based on customised data from Stats NZ which are licensed by Stats NZ for re-use under the Creative Commons Attribution 4.0 International licence.

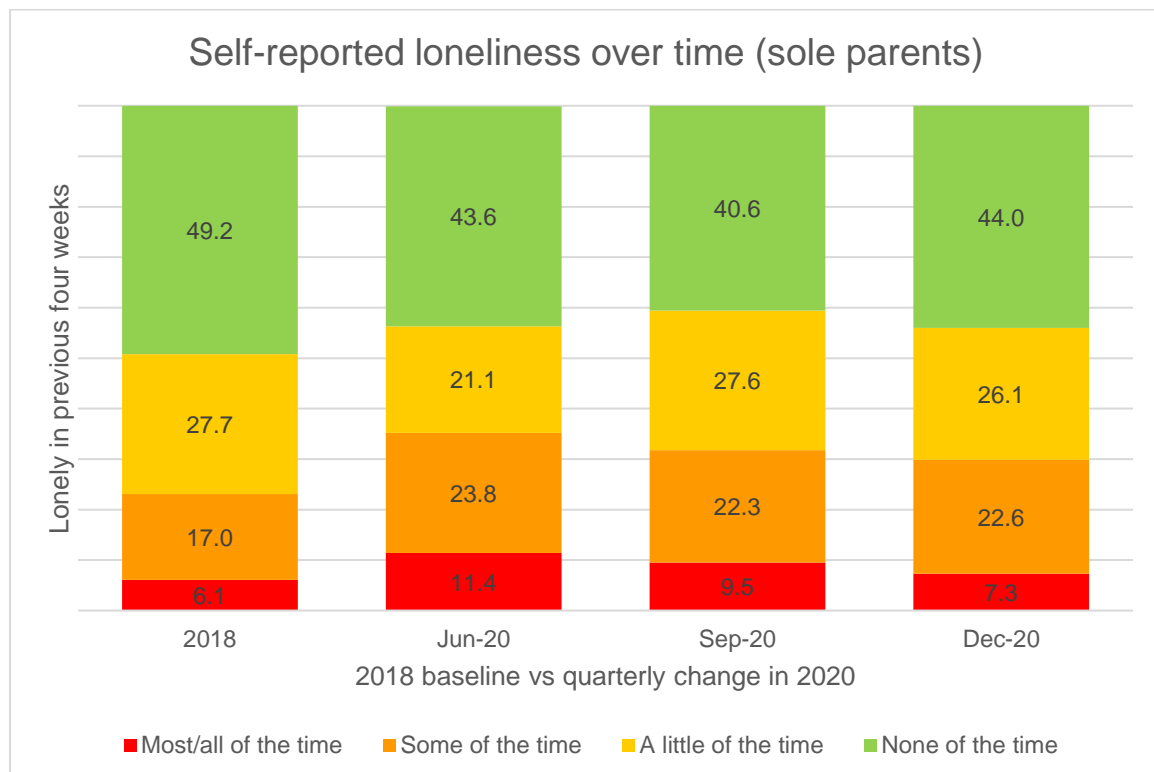


## Loneliness and family structure

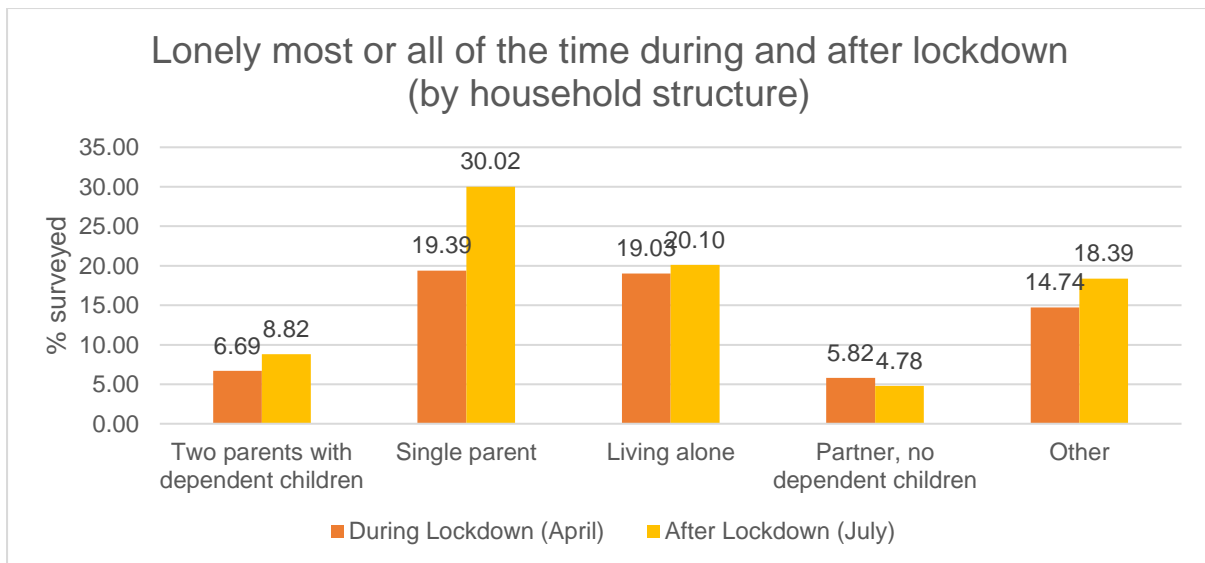
Illustrating how it is possible to be both surrounded by other people (in this case, one's children) but still intensely lonely, sole parents reported a particularly lonely 2020 compared to adults in other household types.



Severe loneliness peaked for sole parents in the June quarter, when 11.4% reported feeling lonely most or all of the time (compared to 3.8% of the total population), suggesting that lockdown and afterwards were particularly challenging times for this group. The year finished with 56% of sole parents reporting some feelings of loneliness in the previous four weeks.



These findings are expanded on by the VUW researchers' Level 1 follow-up survey, which found significant increases in self-reported loneliness among sole parents *after* the Level 4 lockdown. 30% of sole parents surveyed (primarily mothers in this sample) reported feeling lonely most or all of the time in July.

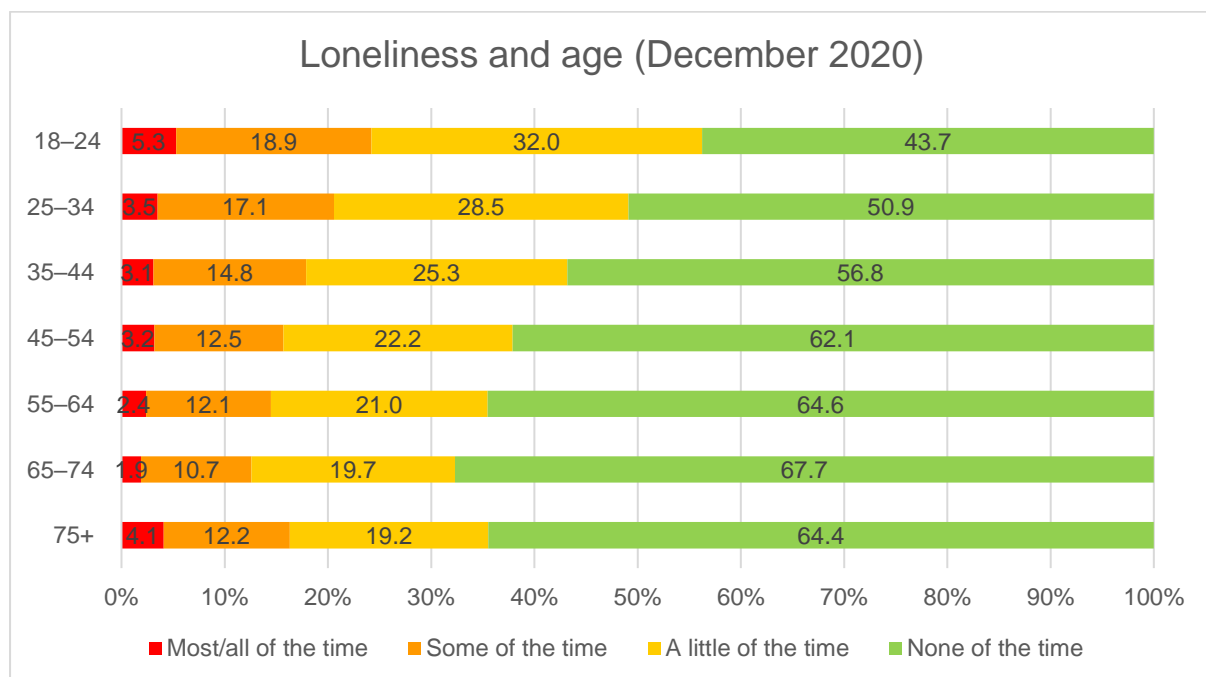


High rates of loneliness are just one of the ways in which sole parents have been disproportionately negatively impacted by COVID-19 and its associated lockdowns. The extreme difficulty of managing childcare, supporting online learning, running a household without another adult, and in many cases also managing paid work was laid bare by the lockdown, and highlighted gaps in existing support for sole parents, including inadequate income, high stress levels, and insufficient time and resources to prioritise their own health and wellbeing, including social connection with other adults.

## Loneliness and age

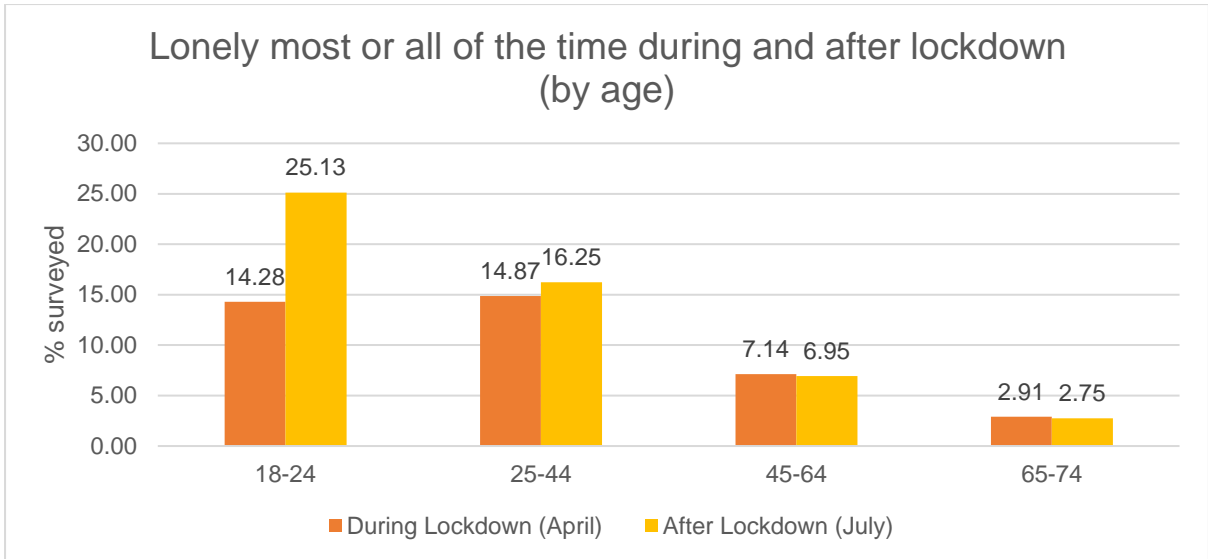
As we reported in *Alone Together*, young people are significantly more likely to report feeling lonely than any other age group, with the risk decreasingly steadily with age. Loneliness tends to coincide with periods of major life transition, of which there are many during early adulthood. It is also likely that high levels of social media and digital technology use exacerbate youth loneliness, although these can also be powerful tools for connection, depending on how they are used.

The trend of loneliness decreasing with age remained pronounced in 2020. More than half of young people aged 18-24 reported some feelings of loneliness – the only age group to do so in such numbers.

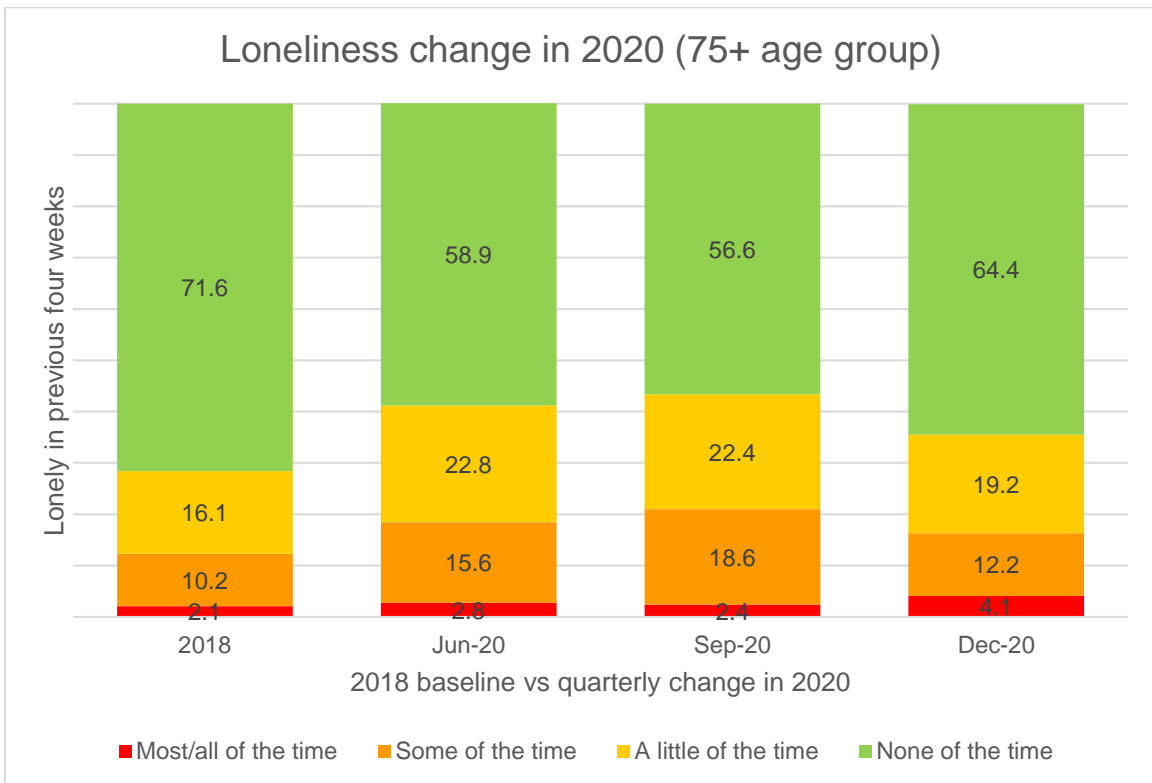


Young respondents to the VUW follow-up survey at Level 1 reported feeling particularly lonely in July, with a quarter of respondents in this age bracket lonely most or all of the time after lockdown – a ten percent increase from the Level 4 lockdown itself.<sup>12</sup>

<sup>12</sup> Small sample sizes in the 75+ age group did not allow for an examination of loneliness among this age group in the VUW survey.

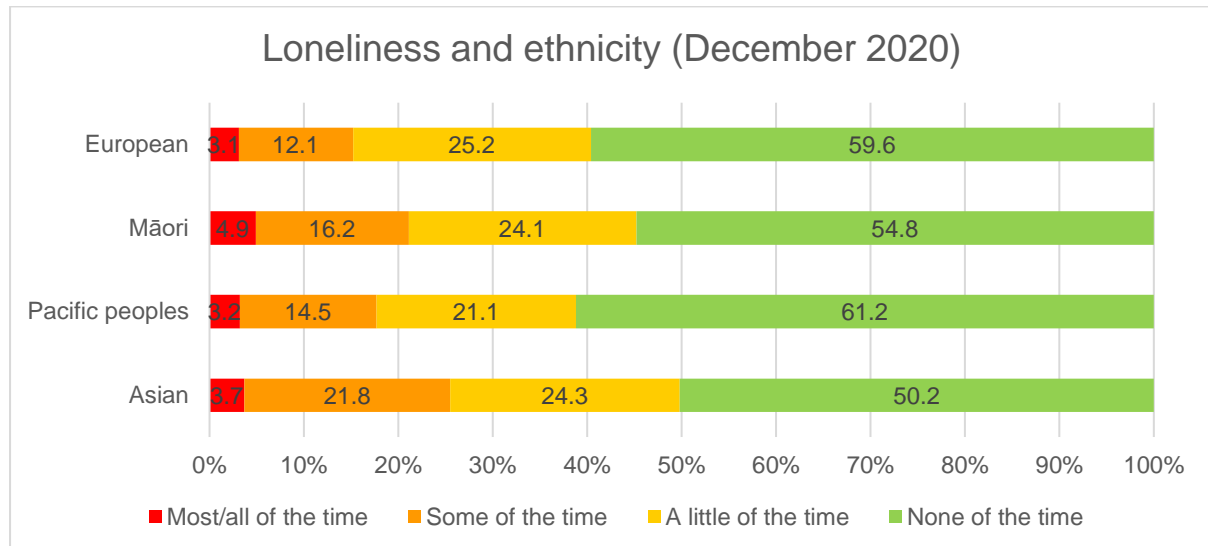


While older people were still significantly less likely to report feeling lonely than young people, it is worth noting that there was substantial movement in self-reported loneliness during 2020 for the over 75 age bracket. While not many in this group reported feeling lonely most or all of the time, there was a large jump in those who reported at least some feelings of loneliness in both the June and September quarters. This may be related to reduced social contact and ‘checking in’ on elderly friends and relatives as the country moved down alert levels, and reflects how social isolation (not seeing other people) is not always directly correlated with loneliness (unmet need for connection).

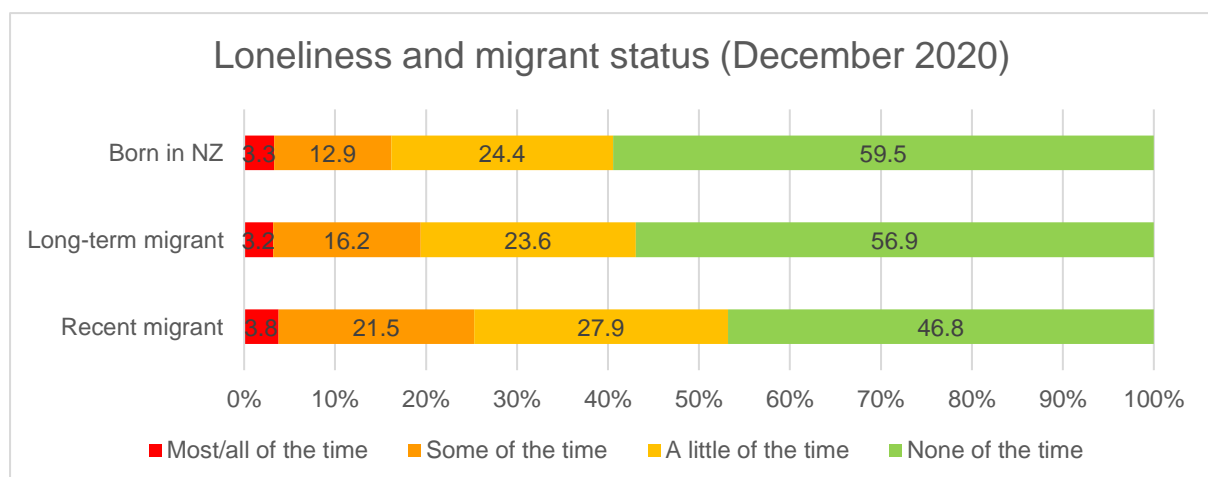


## Loneliness and ethnicity and migrant status

As was the case in 2018, there are differences in the experience of loneliness depending on ethnicity. European/Pākeha and Pacific peoples were the ethnic groups least likely to report feeling lonely. Māori were the most likely to report feeling lonely most or all of the time, at 4.9% in the December 2020 quarter, but people with Asian ethnicities were most likely overall to report some feelings of loneliness in the previous four weeks.



A new measure that we did not report on in *Alone Together* is loneliness and migrant status, which revealed that recent migrants are more likely than long-term migrants and people born in New Zealand to report feeling lonely. This could be because recent migrants are less likely to have formed local social and support networks than longer-term migrants. In the specific context of COVID-19, recent migrants are also more likely to have family overseas, meaning that border closures may be creating a greater sense of isolation and long-term uncertainty for them.



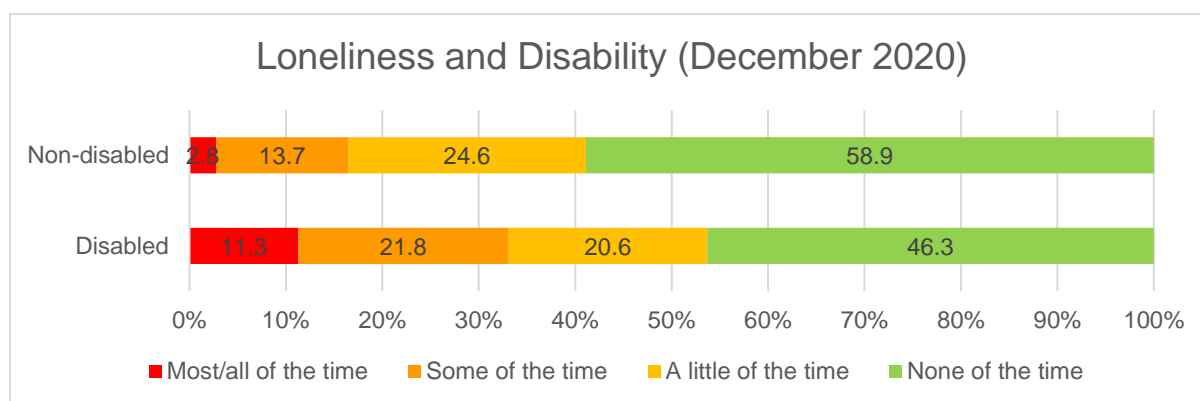
While some differences in loneliness between ethnic and migrant groups may be explained by correlation with other risk factors, it is also likely that there are cultural and societal factors at play in these differing experiences. Some cultural factors may be protective and preventive of loneliness, such as the strong emphasis on family/whānau/aiga collective wellbeing in Māori and Pacific cultures. On the other hand, negative impacts of colonisation on tangata whenua and the racism, discrimination and bias that can be directed at all ethnic minorities may contribute to increased

feelings of loneliness. Asian people in particular have experienced increased racism and discrimination in both Aotearoa and around the world since the start of the pandemic. It is important for the government to work alongside communities to support culturally appropriate solutions for fostering social connection. It has been pleasing to see emphasis placed on this in the COVID-19 response, as well as increased funding for Whānau Ora.

## Part 3: Spotlight on loneliness and disability

As we noted in *Alone Together* the 2018 GSS did not break wellbeing data down by disability status. This was unfortunate, not only because qualitative research and first-person accounts suggest many disabled people experience feelings of loneliness, exclusion, and lack of belonging, but also because there are significant intersections between disability and other risk factors for loneliness such as low income and higher than average unemployment.

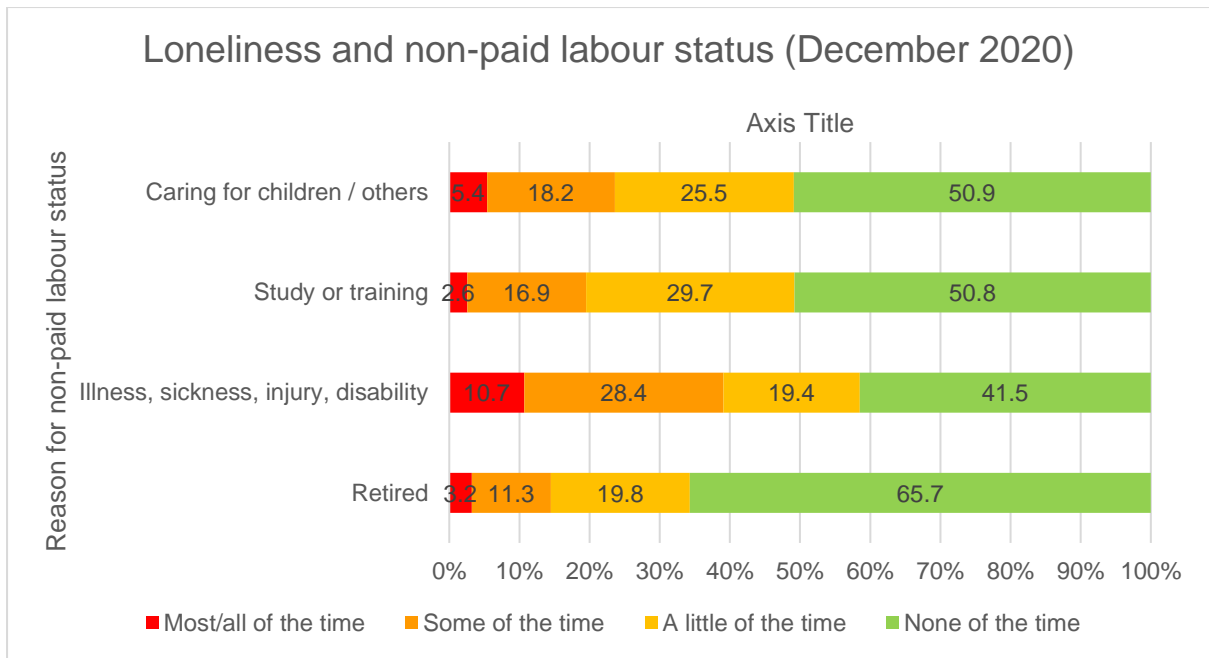
One benefit of the change in the way Stats NZ collected wellbeing data in 2020 is that we now have access to data about rates of self-reported loneliness broken down by disability status.<sup>13</sup> The picture it paints, while not surprising, is nonetheless stark and alarming, revealing high rates of self-reported loneliness among disabled people.



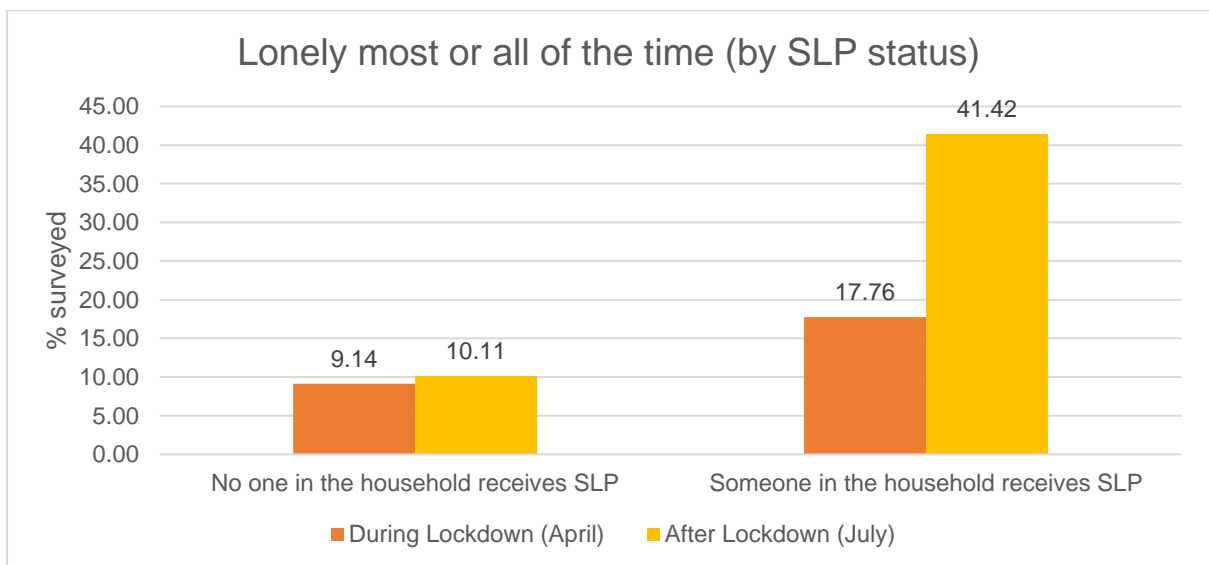
A similarly concerning picture emerges when we look at loneliness for those not engaged in paid work due to illness, disability, or injury.

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<sup>13</sup> Disability status in the HLFS is determined by a set of questions that ask respondents about their ability to carry out six basic activities: seeing, hearing, walking or climbing steps, remembering or concentrating, washing or dressing, and communicating. People who respond 'a lot of difficulty' or 'can't do at all' to at least one of the activities are counted as disabled in the survey. For more information see: <https://www.odi.govt.nz/guidance-and-resources/an-explanation-of-the-washington-group-short-set-of-questions-on-disability/>



This finding is supported by responses to the VUW researchers’ Level 1 follow-up survey showing very high rates of loneliness in households where at least one person received the Supported Living Payment (SLP) – a weekly benefit payment for people who have, or are caring for someone with a health condition, injury or disability. This was especially pronounced after the Level 4 lockdown, when more than 40% of respondents in this category reported feeling lonely most or all of the time.



The Charitable Trust Loneliness NZ conducted its own lockdown follow-up survey about loneliness in Aotearoa, and its findings also reinforce a focus on loneliness and disability, with a specific focus on hearing loss. It found a statistically significant correlation between loneliness and hearing loss across a range of demographic groups, and concluded that preventing and treating hearing loss is an important and effective intervention to reduce loneliness.<sup>14</sup>

<sup>14</sup> Spencer Scoular, “Reducing Loneliness in New Zealand by Preventing and Treating Hearing Loss” (Auckland: Loneliness NZ, March 2021), <https://loneliness.org.nz/wp-content/uploads/2021/03/Report-Reducing-loneliness-in-NZ-by-preventing-and-treating-hearing-loss-12-March-2021.pdf>.



## “We are an integral part of society”: Q&A with Prudence Walker

Prudence Walker is the Chief Executive of the Disabled Persons Assembly (DPA) New Zealand and is based in Ōtautahi Christchurch. A proud disabled woman who also identifies as part of the rainbow community, Prudence comes from a strong social justice perspective. She is committed to achieving equity for disabled people with respect to all our intersecting identities.

*It's important to ensure that we are proceeding from the same set of assumptions about disability and what creates it. In case some readers are unfamiliar with the social model of disability, can you introduce that concept, and explain why DPA favours the term "disabled people" over other descriptors that people might have encountered?*

The social model of disability is the thinking that as disabled people, we are not disabled by our bodies but by society and the constructs (physical, social, attitudinal, informational) within it. It places the responsibility on society to create a non-disabling world and not individuals who live with impairments. Individuals prefer different terms, however DPA uses the term disabled people to acknowledge the social model of disability and the thought that we are disabled by society rather than something about our bodies.

*Disabled people are much more likely than non-disabled people to report feeling lonely. This probably does not come as a surprise to you, but now that we have data, it illustrates that the disparities are very stark indeed. Why do you think disabled people experience such high levels of loneliness?*

Generally, disabled people face marginalisation and discrimination in their lives. Some examples are information not being provided in formats that are accessible, inaccessible buildings, our experiences not being valued or believed, not being able to find homes that meet our needs and enable us to live with dignity and respect (2% of housing stock is accessible), our skills not being valued by employers, the lack of affordable and accessible transport, the attitudes of other people, the list goes on...

These issues, many of which are systemic, have compounding effects and can mean, for example, that we may not have colleagues, that we are not able to easily socialise at the places other people do, that we may not be able to afford to participate in society on an equal basis with others. For example, even when the places people are congregating are accessible, disabled people may not be able to participate, they may not be able to afford it, or they simply may not have accessible transport to get there. There are many disabled people who do not drive and there is a significant lack of affordable and accessible transport; some people are not able to access public transport and there is a shortage of accessible taxis, particularly at the times people are most likely to socialise. Another example of spaces being inaccessible to people is movies: hardly any are showing with open captions. This means that the Deaf/deaf community miss out on seeing and discussing movies and even sports events that other people are connecting around. There's also limited or no access to New Zealand Sign Language (NZSL) interpreters for most social events such as family gatherings, weddings, church services and so on, meaning that people who communicate in that way are not able to access and fully participate in these events.

There are so many things we need to have in place – or just to think about – in order to connect with people and it is exhausting. All of these factors mean that we can feel excluded in many ways; this, I believe is a major contributing factor to loneliness.

*Loneliness is defined as an unmet need for connection. Flipping the issue around, in your observation or experience, what happens when disabled people are supported to forge and maintain strong social connections? What kinds of experiences can this unlock?*

Our lives get a whole lot lighter when we don't have to carry society's responsibility. By that, I am referring to the social model of disability. I am meaning that when other people take responsibility for the inclusion of disabled people, suddenly we have more time to connect, we feel more included, we are just able to live our lives without concern for if places (or people) will be inclusive and accessible to us!

*One of the reasons we need to take loneliness seriously is that experiencing severe and prolonged loneliness can have significant long-term physical and mental health consequences and even shorten life expectancy. Why is this particularly dangerous for disabled people?*

Disabled people experience poorer health outcomes, including mental health outcomes than the general population. Those experiences and others I have mentioned previously mean that we are marginalised, and for society to function well with equitable outcomes for all people, we must pay attention to the needs and inclusion of disabled people. Contrary to assumptions that may be made about our health, of course we are susceptible to everything the general population is, but our poorer health outcomes are not largely because we are sick or feel so bad about our impairments. Our poorer health outcomes are affected by all the issues I have highlighted in previous questions: by a system not designed by or including us. Of course, we are also not a homogenous group of people, so some of us are also women, children, Māori, Pacific, migrants, LGBTQIA+, etc, etc meaning that we may have intersecting identities that have statistically poorer health outcomes. So then, it is even more important that loneliness is addressed so it is less of a factor.

*In addition to disability, we know that loneliness is strongly correlated with low-income and unemployment. Can you say a bit about how these three domains of wellbeing might be working together to compound negative impacts for disabled people?*

Income gives people power and choice. Disabled people are more likely to be receiving a benefit and this income is not enough for people to live off. Obviously, a main way of getting income is to work. There are so many barriers to just getting in the door (often literally!) in terms of employment. We face assumptions about our skills, experience, and needs, places and systems are inaccessible, and workplace cultures can be very ableist. If we are not working, we don't have that income, and we don't have the social aspect that work provides for many people. We also may not feel as though we are contributing what we have to offer to society. If we are working, often we have many other things to manage in our lives due to a world that is not designed with us in mind, so it really takes a lot of energy to manage all this. No wonder people feel lonely!

*In our first report, we highlighted adequate income, closing digital divides, supporting communities, creating friendly streets and neighbourhoods, prioritising those already lonely, and investing in frontline mental health as key planks of an effective response to loneliness. Do these map well onto the needs and experiences of disabled people, and are there other policy changes you would like to see to create the conditions for disabled people's social connections to thrive?*

Disabled people are people, we have the same needs as others, so yes, these things apply to us. The key is that we need to be included in all matters that affect us – which is everything and that is the part that is often missing. We are intersectional, we are children, parents, partners, carers, employees, employers. We are not separate to society, we are an integral part of society.

## The importance of 'disability spaces' for connection and belonging

An important research project from 2019 sheds light on disabled people's experiences of belonging, place and community. *Spaces of Belonging*, a joint project between Imagine Better, The University of Waikato, and DPA, explored the exclusion and marginalisation of disabled people within everyday social, economic, and political places and spaces via a series of interviews and focus groups. It notes:

*"Disabled people face numerous challenges to access, occupy, and use places and spaces. Built environments and transport do not often consider bodily or cognitive differences, and public information and communication is rarely available in accessible formats. Additionally, discriminatory social attitudes and behaviours are felt in particular places and many everyday spaces perpetuate able-bodied norms."<sup>15</sup>*

In such an environment, it is little wonder that disabled people report feelings of loneliness in much larger numbers than non-disabled people.

The *Spaces of Belonging* report focuses on the holistic, positively-framed concept of belonging, rather than loneliness or social isolation specifically, but the views and experiences shared by participants powerfully illustrate the lived experiences of people for whom many physical and social environments are not set up to enable social connection or participation.

*"Most spaces, I look at events or invites and things like that and there's just nothing. There's just no, 'you're welcome in this space. We've thought about the fact that not everyone has the same accessibility needs' or that not everyone has no accessibility needs."*

*"... look at that meeting that we had at [government department], you come in and the room's quite small, and so the wheelchairs were struggling to get around, and when they served lunch they put it on a trolley right in the corner of the room about that wide with the width between, to try and get in, and none of the wheelchairs would get there."*

*"most of the time, you spend your life in a world with people – or in rooms – with people that don't have disabilities and it can be quite an isolating feeling..."*

By contrast, when spaces were designed in ways that support disabled people's access and participation, participants talked about experiencing powerful feelings of inclusion and belonging.

*"The first time I drove there [the Independence Games], even before I got out of the car I started crying. I was so relieved. I could see all these people ... people just like us with all sorts of mobility issues and all the rest of it. All these adults around them helping them and stuff. You didn't have to explain anything; just completely accepted" (Parent of a disabled person).*

*"[I] went to university, used Disability Support Services there, joined a rep group for students with disabilities, did research into what disability was. I found my belonging that way, through finding people in the rep group and it was quite*

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<sup>15</sup> Carey-Ann Morrison et al., "Spaces of Belonging" (Imagine Better, The University of Waikato, and Disabled Persons Assembly NZ, 2019), 5, <https://www.dpa.org.nz/news/spaces-of-belonging>.

*empowering to take ownership of ‘yeah, I am going to have this for the rest of my life.’”*

*“It was really nice to be part of this swimming group growing up it was – just that – a wonderful space where people just took me at face value and didn’t have high or low expectations and didn’t speak for me, but I could just go and be a kid and enjoy swimming.”*

The report concludes that ‘disability spaces’ can be sites of resistance to ableism and can help people feel part of disability communities and places. Disability spaces can give people opportunities to identify common experiences, learn new ways of talking about and understanding disability, and share useful information that helps with navigating the experience of disability.

Clearly, improving accessibility of public spaces is a vital part of creating the conditions to support social connection and participation for disabled people, but so is the creation of ‘disability spaces’ that are disabled-owned and led.

## Inclusive infrastructure

WSP applies a Future Ready lens to create thriving environments by designing for all

Our traditional urban spaces tend to cater well for a certain type of person – able-bodied adults – but can be inhospitable to the wide range of people who fall outside of this demographic. Given the changing needs of society – both today’s and that of the future – it is essential that we design cities and towns that meet the needs of all residents.

By incorporating universal design principles into urban development projects, we can deliver Future Ready® landscapes that focus on positive outcomes for all users. Projects designed using these principles can help to overcome loneliness, making it easier for people with diverse abilities to participate in and contribute to society.

In practice, this means urban designs that offer step-free access, wide passageways, tactile paving and provision of convenient public transport services to amenities and workplaces. It also means planning for open spaces and communal areas in which to socialise.

According to WSP UK research, cities where accessibility is positively valued are denser and more walkable. These cities experience greater productivity and tend to be home to larger proportions of people aged between 20-29.

Play is a fundamental part of human life, but is a prime example of where diverse needs have not traditionally been catered for in urban design. Catherine Hamilton, WSP Technical Principal Landscape Architecture and Urban Design, is one of the leading minds for public realm play in Aotearoa and led the team for the award-winning Tākaro ā Poi / Margaret Mahy Playground in Ōtautahi Christchurch.

In designing the playground, Catherine’s team focused on creating inclusive, inter-generational play areas for people of all ages and abilities, a community gathering space, and an inner-city destination for locals and visitors alike to meet, connect and enjoy in multiple ways.

Splashpads are on surfaces that can be used by people in wheelchairs and the increasingly popular sand-play installations are at the right height, removing barriers to play.

Catherine acknowledges the need to create subspaces that allow people to escape for quiet moments.

“Places like Tākaro ā Poi are wonderful and create an incredible positive energy, but they can also be chaotic and overwhelming. Not all children need to let off steam or run headlong into risk, some like to quietly observe and require a safe space to do this, which is something we wanted to incorporate within the flow.”

Catherine is a firm supporter of the 8 – 80 movement and says the benefits of play for older people are myriad and include reduced risk of sarcopenia (muscle wasting), reduced loneliness, increased happiness and the ability to live at home for longer.

“While play is crucial for a child’s development, it is also beneficial for people of all ages. Play can add joy to life, relieve stress, supercharge learning, and connect you to others and the world around you. Play can also make work more productive and pleasurable.”

Future Ready® research shows that urban environments can also be designed to promote mental health and wellbeing and meet the needs of neurodiverse populations. Green space in particular has

been shown to facilitate improved mental health and wellbeing, while colour coding can help autistic people navigate public spaces. Urban spaces can also be designed to dampen noise levels reducing a source of stress and overstimulation.

Internationally, WSP has been working with the Government of Dubai and its agencies to improve accessibility within the public sector. The starting point was a gap analysis to shed light on levels of accessibility across the city and included buildings, public spaces and transport infrastructure.

One of the key findings of this analysis was that, features of the built environment ostensibly designed to aid accessibility have too often been poorly managed. For example, a drainage system might require a change to the ground level, but the ramp that is installed to facilitate access is too steep for a wheelchair user. Such mistakes highlight how important it is for accessibility to be considered throughout a project's lifecycle to ensure maintenance activities continue to support the intent.

## About

Changes made to the natural and built environment are typically made for the long term and, as such, it's critical to understand the implications of global, national and local trends on our communities.

WSP's Future Ready® philosophy applies a researched, evidence-based approach to designing the built environment to ensure the investment is adaptive, resilient and stands the test of time.

## Tackling the disability employment crisis with Jonathan Mosen

Jonathan Mosen MNZM is the Chief Executive of Workbridge, New Zealand's largest employment service for people with a disability or health condition. He is an experienced leader, manager, negotiator and advocate, holding senior management positions in the not-for-profit and commercial sectors. Jonathan has lived experience of disability, being totally blind and hearing impaired, and is an internationally recognised assistive technology leader, pioneer and commentator.

Workbridge's mission is "delivering inclusive, successful employment opportunities". Our vision is that "everyone who wants a job has one, and employers choose the right person with the skills and qualities for the job."

We further our goals by working with disabled people to create an employment plan, and if they wish us to, we introduce them to disability-confident employers. That means that we also spend time educating employers about the benefits of hiring disabled people and dispelling the myths that exist.

We have much to do to achieve these objectives, because New Zealand faces a disability employment crisis. In August 2020, Stats NZ published findings which include that in the year to the June 2020 quarter:

- 22.5% of disabled people were employed, a proportion that has not changed significantly since the series began in 2017
- the employment gap between disabled and non-disabled people was 46.8 percentage points
- the labour force participation rate for disabled people was 24.3%, compared with 72.1% for non-disabled people
- the unemployment rate for disabled people was 7.4%, compared with 3.9% for non-disabled people
- disabled youth were less likely to be employed or to be participating in education or training (NEET), with the NEET rate for young disabled people aged 15–24 years at 48.2%, compared with 10.6% for non-disabled youth.

We all understand the economic independence a job can bring, indeed the contract Workbridge has with the Ministry of Social Development is focussed on lowering benefit numbers through paid employment. Yet even voluntary work can reduce social and existential loneliness. Disabled people want the opportunity to feel valued and to add value, to know we are making a difference in the world and that our lives have purpose.

There are many barriers to that occurring, but the largest one is attitudinal. With few disabled people in high profile roles in New Zealand, (I am one of only a few disabled chief executives here), we are mostly invisible. This means that without examples they are familiar with, employers conclude erroneously that disabled people are less productive, expensive to accommodate and a health and safety risk. In fact, we usually require few accommodations and assistance is available from Government for more expensive equipment or modifications. We think outside the box to get things done and bring ingenuity and diversity to a workplace. But public education on the capability of disabled people is woefully inadequate. Workbridge educates employers where we can, and we often find employers coming back to us to hire more disabled people once they see the benefits of doing so.

One of the most rewarding aspects of my role is when a disabled person we have connected with an employer tells me how much more confidence they have, how they revel in having workmates, how good it feels to be a part of something. A job is the key to so much more than economic independence, it can mean an end to loneliness.



## Part 4: Progress on the recommendations in *Alone Together*

In our last report, we recommended six planks of an effective policy response to the risks of loneliness following COVID-19 and made twelve specific recommendations. The table below tracks progress against these recommendations during 2020. We are pleased to note that a number have been actioned, but progress has been slow or partial on others.

### Legend:

Good progress	Some progress but more required	Little to no progress
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Policy plank/recommendation	Policy changes in 2020	Progress
<b>Make sure people have enough money</b>		
Implement an effective guaranteed minimum income for all New Zealanders to enable everyone to live with dignity	Main benefits went up by \$25 per week and the minimum wage increased to \$20 per hour on 1 April 2021. From 1 April 2021 the income abatement threshold for those on benefits also increased, meaning they can earn more each week before having their benefit reduced. These are all positive developments, but there has been no attempt to align policies to create an effective guaranteed minimum income. Further increases to benefit levels and minimum wages are required to reach liveable levels.	
Extend programmes and opportunities to help people to retrain and regain employment following job losses as a result of COVID-19	A Targeted Training and Apprenticeships Fund was created to pay the costs of vocational education and training in key sectors, as well as various learning and technology support funds for people re-training as a result of COVID-19. <sup>16</sup>	
<b>Close the digital divide</b>		
Make the provision of high-speed internet access standard in all social housing tenancies	Kāinga Ora is in discussion with fibre companies with a view to establishing a programme of work to have Ultrafast Broadband installed in all Kainga Ora homes. <sup>17</sup> However this work is in the early stages and there is no indication yet that it will address the issue of affordability.	
Make provision of internet access a standard intervention for all government-funded services and supports for disabled people	No change	
Work with community organisations, iwi authorities, and NGOs to enable the	Additional funding was allocated to help students access online teaching and learning, and the Ministry of Education expected to connect around	

<sup>16</sup> "Training and Apprenticeships," Unite against COVID-19, accessed March 18, 2021, <https://covid19.govt.nz/business-work-and-money/training-and-apprenticeships/>.

<sup>17</sup> "Digital Inclusion Action Plan 2020–2021," New Zealand Digital government, accessed March 23, 2021, <https://www.digital.govt.nz/>.

provision of devices and internet connections to those in need, alongside making internet safety a core part of the school curriculum	50,000 households to the internet in 2020 in response to COVID-19. <sup>18</sup> However, there was no coordinated provision of internet access and devices outside of the educational setting. Teaching resources are available to support online safety and digital citizenship, and the government funded a public awareness campaign about online safety, but it is not a core part of the curriculum.	
<b>Help communities do their magic</b>		
Establish a substantial community-led development fund to which community organisations can apply to support self-identified collective goals following COVID-19	Two new community development funds were created: the Community Capability and Resilience Fund for community initiatives that support the rebuild and recovery from COVID-19, and the Ethnic Communities Development Fund for projects that support ethnic communities to stay connected and resilient. <sup>19</sup>	
Boost funding for Whānau Ora to further enable Māori communities to identify and solve their own challenges.	Additional funding was allocated to Whānau Ora to help whānau respond, recover and rebuild from the COVID-19 pandemic.	
<b>Create friendly streets and neighbourhoods</b>		
Model best practice urban planning for social goals with projects led by Kāinga Ora, and use the upcoming government policy statement on housing and urban development to set clear expectations for how urban developments should prioritise social wellbeing	Some Kāinga Ora-led developments are modelling social procurement practices and prioritising community and social wellbeing in their design (e.g. the Greys Ave development in Central Auckland). However, this approach is not yet standard in all developments. The new NPS <sup>20</sup> sets the objective that urban environments “enable all people and communities to provide for their social, economic, and cultural wellbeing, and for their health and safety, now and into the future,” and many of its policies support social wellbeing (e.g. “good accessibility for all people between housing, jobs, community services, natural spaces, and open spaces, including by way of public or active transport”), but social wellbeing is not explicitly prioritised.	
Work with public transport providers to improve the design of buses and trains to encourage positive social interaction while minimising dangerous enforced proximity	No change	
<b>Prioritise those already lonely</b>		

<sup>18</sup> “Digital Inclusion Action Plan 2020–2021.”

<sup>19</sup> “Financial Support for Communities and Clubs,” Unite against COVID-19, accessed March 18, 2021, <https://covid19.govt.nz/business-work-and-money/financial-support/communities-and-clubs/>.

<sup>20</sup> “National Policy Statement on Urban Development 2020,” Ministry for the Environment, July 2020, <https://www.mfe.govt.nz/publications/towns-and-cities/national-policy-statement-urban-development-2020>.

Prioritise targeted interventions, services, supports, and research to alleviate loneliness among those most at risk	Extra funding has been allocated to support mental health and wellbeing for at risk groups, including Māori, Pacific peoples, people with underlying health conditions, older people, pregnant women and new mothers, the rainbow community, rural communities, people managing addiction and their families. While there is some overlap with those most at risk of experiencing loneliness, there are significant omissions from this list including young people, unemployed people, and disabled people.	
<b>Invest in frontline mental health</b>		
Boost the new frontline mental health service's funding and bring forward the date for its implementation	No change, and the rollout has been described by some as inconsistent and slow. As at 31 January 2021, of the \$455m allocated in Budget 2019 for a new frontline mental health service, only \$61m had been spent, with approximately \$99 million committed in contracts to be spent by 30 June 2021. <sup>21</sup>	
Include reducing loneliness as a key item in the <i>Kia Kaha Kia Maia Aotearoa: COVID-19 psychosocial and mental wellbeing recovery plan</i> , and in the workplan of the new Mental Health and Wellbeing Commission	<i>Kia Kaha Kia Maia</i> <sup>22</sup> identifies increased loneliness and social isolation as a risk following COVID-19 and notes that this risk is exacerbated by other stressors such as low-income and job loss. It prioritises the foundations of wellbeing such as adequate income, supportive relationships, and cultural connection and recommends fostering community-led solutions, all of which are in line with our recommendations in <i>Alone Together</i> . The Mental Health and Wellbeing Commissioner's draft outcomes framework <sup>23</sup> prioritises whanaungatanga, connection, and belonging for Māori as tangata whenua and all New Zealanders, as well as close, nurturing, and caring relationships.	

<sup>21</sup> See: [https://www.parliament.nz/en/pb/order-paper-questions/written-questions/document/WQ\\_03459\\_2021/3459-2021-matt-doocey-to-the-minister-of-health](https://www.parliament.nz/en/pb/order-paper-questions/written-questions/document/WQ_03459_2021/3459-2021-matt-doocey-to-the-minister-of-health)

<sup>22</sup> "Kia Kaha, Kia Maia: COVID-19 Psychosocial and Mental Wellbeing Plan," Ministry of Health NZ, December 21, 2020, <https://www.health.govt.nz/publication/COVID-19-psychosocial-and-mental-wellbeing-plan>.

<sup>23</sup> "Conceptual Framework Phase," Mental Health and Wellbeing Commission, accessed March 18, 2021, <https://www.mhwc.govt.nz/the-initial-commission/outcomes-framework/conceptual-framework/>.

## Revised recommendations

Based on the evidence presented in this report, and an assessment of progress against our previous recommendations, we recommend that the government:

### Make sure people have enough money

1. Implement an effective guaranteed minimum income for all New Zealanders to enable everyone to live with dignity. This should include raising main benefits to liveable levels and increasing the minimum wage to the living wage.
2. Increase support so that everybody who wants a job can find one, including by continuing to subsidise vocational retraining, and by increasing support for disability employment services.

### Close the digital divide

3. Urgently make the provision of high-speed internet access standard in all social housing tenancies and a standard feature of government-funded disability support programmes.
4. Continue to invest in the provision of internet-enabled devices and support for online teaching and learning, and partner with community organisations to expand the provision of devices and internet connections to people in need beyond the education sector.
5. Make internet safety a core part of the school curriculum to support young people at risk of online harm from increased use of digital technologies.

### Help communities do their magic

6. Continue to invest in community-led development funds for community organisations to support self-identified collective goals. This should include investment in disabled-led and owned community building and spaces of belonging for disabled people.
7. Continue to boost support for Whānau Ora to enable Māori communities to respond to self-identified challenges and meet collective goals.

### Create friendly streets and neighbourhoods

8. Prioritise social wellbeing and accessibility in all Kāinga Ora-led housing developments.
9. Issue guidance on the National Policy Statement on urban development to stipulate that all urban development projects should promote social wellbeing and meet the highest standards of accessibility.
10. Work with public transport providers to improve the design and accessibility of buses and trains, including to encourage positive social interaction while minimising dangerous enforced proximity.

### Prioritise those already lonely

11. Prioritise services and supports for those most at risk of experiencing loneliness, including young people, unemployed people, sole parents, and disabled people.

### Invest in frontline mental health

12. Fully commit all of the allocated funding for the new frontline mental health service to bring forward the date of its implementation as much as possible.