

Evidence about the impact of loneliness and isolation on health and social care costs

This briefing note is designed to provide you with more information on the increased use of health and social care services by individuals experiencing loneliness.

Loneliness and isolation results in earlier and increased use of expensive health and social care services.

Older adults who are socially disconnected and who feel lonely rate their physical health as lower than that of others¹. This suggests that lonely people are more likely to visit their GP and to use other health services. For example, one study demonstrates that loneliness is a predictor of use of accident and emergency independent of chronic illness².

Research suggests that approaches to addressing loneliness and isolation amongst older people, which are relatively low cost, can result in:

- fewer GP visits, lower use of medication, lower incidence of falls and reduced risk factors for long term care³;
- fewer days in hospital, physician visits and outpatient appointments⁴;
- fewer admissions to nursing homes and later admissions⁵.

(See also Example: WRVS West Moors Befrienders – aka Phone a Friend).

References:

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- 3 Cohen, G.D. et al. (2006) 'The impact of professionally conducted cultural programs on the physical health, mental health, and social functioning of older adults', *The Gerontologist*, 46 (6)
<http://gerontologist.oxfordjournals.org/content/46/6/726.abstract>
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- 5 Russell DW, Cutrona CE, de la Mora A, Wallace RB (1997) *Loneliness and nursing home admission among rural older adults.* *Psychol Aging* 12(4).
<http://www.ncbi.nlm.nih.gov/pubmed/9416627>