Loneliness by Numbers: A South Australian Snapshot

UNITING COMMUNITIES

January 2026

SA population

More than half of South Australians (55%) report feeling lonely sometimes or often.

55%

Loneliness

The proportion feeling lonely 'often' has climbed to **14%↑** the highest level recorded since 2023.

These findings come from our 14th wave of tracking, drawn from an online survey of the general SA population, part of a continuous dataset running since March 2020.

Key Statistics Snapshot

Young Adults (18–24 & 25–29)

Loneliness has decreased overall for young adults this survey round, with the most notable drop among 18–24 year olds.

Despite this,

73%

of people aged 25–29 still report feeling isolated sometimes or often.

Early Middle Years (30–34 & 35–39)

73% of people aged 30–34 report feeling lonely sometimes or often.

36% of people aged 30-34 report feeling left out 'often.'

People aged 35–39 report particularly high isolation rates, with

29%

feeling isolated 'often.'

Mid to Later Middle Years (45–49 and 55–59)

72% of people aged 45–49 report feeling lonely sometimes or often.

The highest rates of feeling lonely 'often' in this survey are among those **aged 55–59**, at

29%

Metro vs Regional

Loneliness is significantly higher in regional South Australia, with 64% of people reporting loneliness sometimes or often, compared with 52% in metro areas.

While this gap has fluctuated across survey waves, in this survey round people in regional areas report higher levels of lacking companionship, feeling left out, and feeling isolated than those in metro areas.

Income:

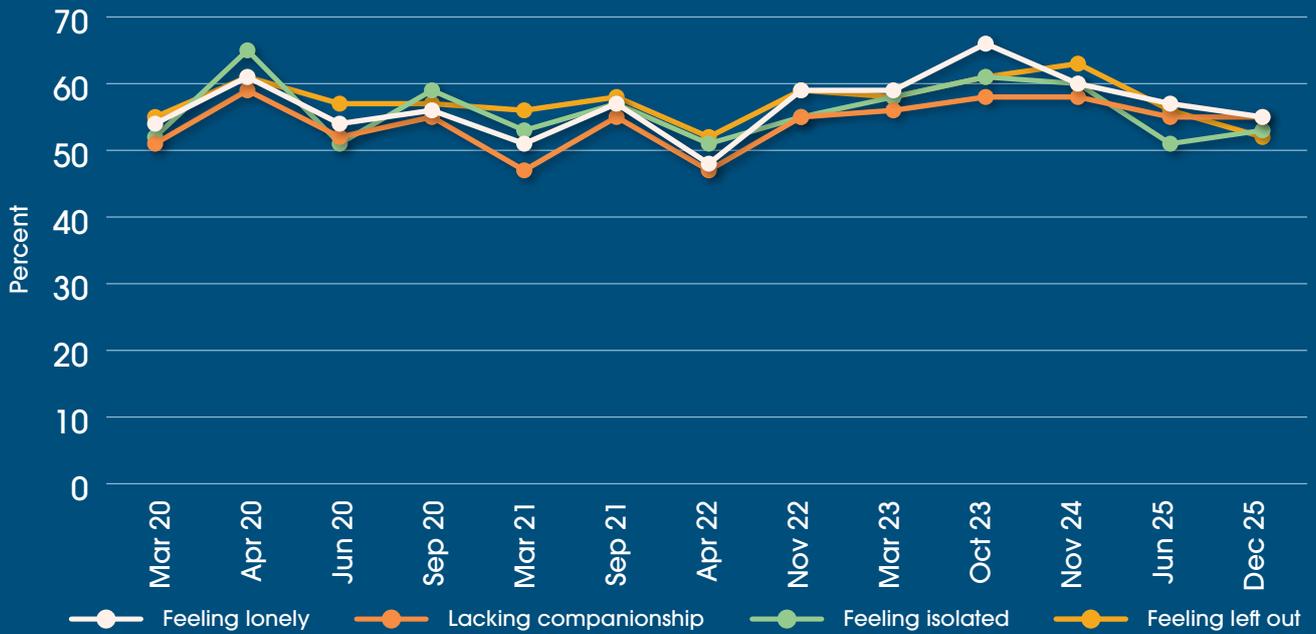People on **lower incomes** experience far higher rates of loneliness.

27% of South Australians **earning under $40,000** report feeling lonely 'often,' compared with just **5%** of those **earning above $80,000.**

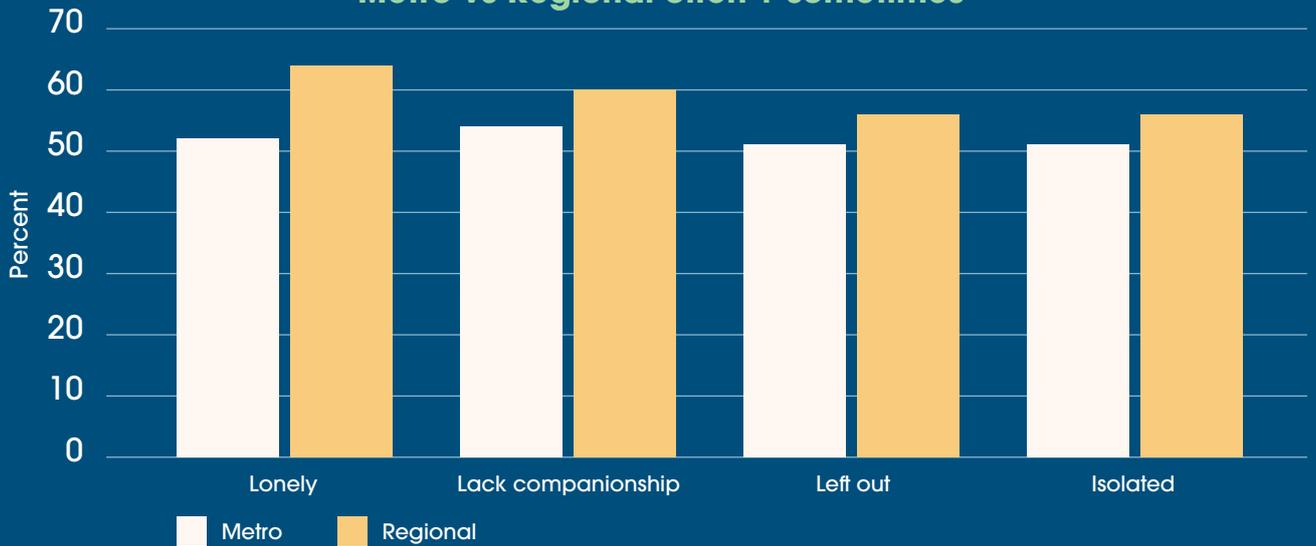This represents a **42% increase** in the proportion of people feeling lonely 'often' among lower income groups since the last survey.

In the context of a cost of living crisis, it is unsurprising, but deeply concerning, that financial pressure continues to intensify experiences of loneliness.
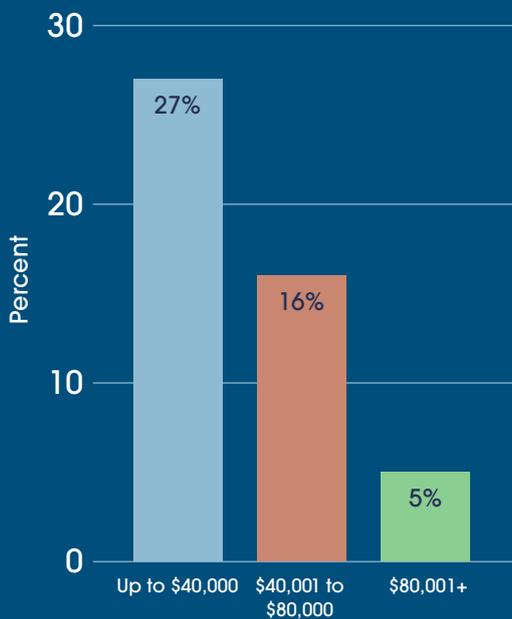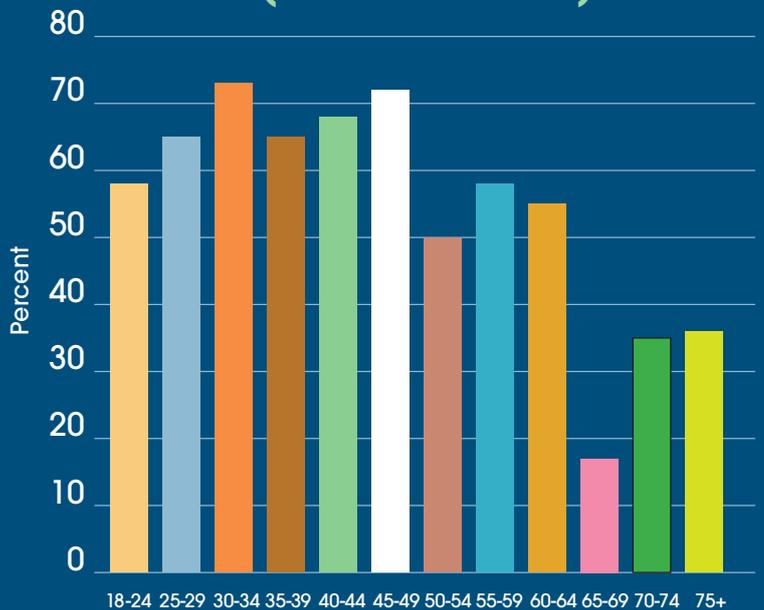
SA population reports (sometimes + often)

Percent

| | Mar 20 | Apr 20 | Jun 20 | Sep 20 | Mar 21 | Sep 21 | Apr 22 | Nov 22 | Mar 23 | Oct 23 | Nov 24 | Jun 25 | Dec 25 |

Legend: ● Feeling lonely ● Lacking companionship ● Feeling isolated ● Feeling left out

Metro vs Regional often + sometimes

Percent

Categories: Lonely, Lack companionship, Left out, Isolated

Legend: ☐ Metro ☐ Regional

Lonely 'often' by income

Percent

Up to $40,000	$40,001 to $80,000	$80,001+
27%	16%	5%

Reports of loneliness by age (sometimes + often)

Percent

Age groups: 18-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75+

What is loneliness?

There is no one universal experience of loneliness and, consequently, there is not one universal definition of loneliness. For the purposes of this report, we refer to **Ending Loneliness Together's** definition of Loneliness:

> *Loneliness is a distressing feeling we get when we feel disconnected from other people, and desire more (or more satisfying) social relationships.*

Experiencing loneliness often relies on the meaningfulness or quality of interactions, rather than just the quantity of interactions, connections or friendships. Chronic loneliness is defined as a long-term and regular experience of loneliness as opposed to episodic loneliness, which can be the temporary, occasional feeling of loneliness. While feeling episodic loneliness is natural, it can become problematic when experienced consistently for a longer period.

Research shows that chronic loneliness can lead to significant physical and mental health consequences. **Studies** have compared chronic loneliness to smoking 15 cigarettes a day and can have the same health impacts as obesity. Chronic loneliness can lead to an **increased risk** of coronary heart disease, stroke, depression, cognitive decline and increased risk of Alzheimer's disease.

Although loneliness and social isolation (the lack of contact with others) are two different issues evidence indicates that you're at an increased risk of loneliness if you are socially isolated.

Why are people lonely?

Evidence currently indicates that the causes of loneliness are complex and usually not a result of one signal factor or event but often the **combination** of personal as well as community and country-wide factors. The common misconception is that loneliness is a result of a personal deficit or failure on the part of the individual when in fact it is often a result of factors outside our control.

Research has categorised the causes (including the risks and protective factors) for loneliness as: societal, community, relationship and individual.

Sociecological model for understanding risk and protective factors for social isolation and loneliness
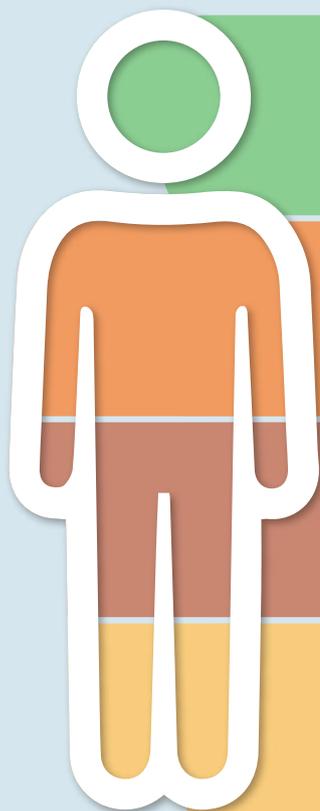
Societal
Social and cultural norms such as the perceived inappropriateness of talking with strangers), individualism, work/life balance (e.g. shift work, long hours/overtime), stigma of loneliness, insular communities, the digital age, political landscape, financial hardship.

Community
Fewer social activities to attend, lack of social spaces (community centres, areas for people to congregate, infrastructure) difficulty accessing support services, inadequate transport infrastructure, neighbourhood safety and not feeling a part of the community.

Relationships
Friends, acquaintances, family, colleagues, community wide connections (e.g. neighbours). Often about the quality rather than the quantity of these connections.

Individual
Changed habits, sense of self, health (including physical and mental health), income, major life event/changes (such as moving home, living alone, loss of employment, becoming a parent, family breakdowns), energy, lack of confidence (usually due to a life event), as well as emotions/perceptions.

Some factors are either directly or indirectly associated with an increased risk of loneliness. Certain types of characteristics act as protective factors, they are not directly linked with loneliness. For example, according to the recent **WHO report**, individuals with higher education may be better protected from loneliness because of opportunities for more socioeconomic resources, contributing to less chronic stress in everyday life, larger social networks and better overall quality of relationships. While a person's socioeconomic status such as their income, can affect an individual's ability to participate in social activities (including less time or opportunity to make connections). In comparison, some factors are more directly associated with loneliness such as mental health issues, which is both a precursor and a result of loneliness.

Alarmingly, childhood loneliness and social isolation are **predictive of future** social isolation and loneliness. Given this, coupled with the often-high rate of loneliness amongst young adults found in our data (exception being the latest survey) children and youth presents an early intervention and prevention opportunity for reducing loneliness.

Stigma:

Research suggests that loneliness tends to carry more stigma in **cultures** that value togetherness, because it goes against social expectations. Stigma can lead to shame, making it difficult for people to acknowledge feelings of loneliness, worsening the negative consequences. As a result, this stigma may change how loneliness is reported, as it hinders people's ability to self-identify and share their experiences, suggesting that actual rates of chronic loneliness could be significantly underestimated. Low awareness of loneliness and social health may also be contributing to underreporting. When loneliness doesn't match the stereotype of isolation, it can go unrecognised even by those experiencing it.

Challenging the stigma surrounding loneliness is a widely adopted policy approach across the globe to help reduce its prevalence. Phil McAuliffe, the self-proclaimed "loneliness de-stigmatiser," likens loneliness to hunger or thirst—a biological urge that pushes us toward connection, just as vital to our wellbeing. If the broader community had a similar understanding of loneliness, this could reduce the stigma.

Cost of living and loneliness

Cost of living pressures are emerging as a significant driver of loneliness, highlighting that loneliness is shaped by structural conditions, not individual shortcomings. Financial strain limits people's ability to participate in social activities, maintain relationships, and access transport or community spaces. In this survey, people on lower incomes report feeling lonely 'often' at more than five times the rate of those on higher incomes. These findings show how economic conditions directly influence social health, and why loneliness cannot be addressed without acknowledging the broader financial pressures facing South Australians.

Regional vulnerability

Regional communities face unique barriers to social connection. Higher loneliness rates in regional South Australia this survey round reflect challenges such as limited transport, fewer social spaces, and reduced access to services. These structural barriers make it harder for people to maintain relationships and participate in community life, reinforcing the need for sustained investment in regional social infrastructure.

What can we do:

Tackling this issue requires a whole-of-community approach.

1. Create a culture that actively seeks connection. We can all play a part in reducing loneliness by actively connecting with others, whether it's talking with a neighbour or reaching out to a friend or family member we haven't spoken to in a while.

2. Improve education on the importance of **social health**. Having strong friendships contributes positively to our physical and mental well-being. It is important to focus on the quality over the quantity of relationships.

3. Spread awareness of loneliness. We need to encourage people to have meaningful conversations about loneliness to reduce the stigma associated with it. When so many of us experience loneliness it's time to drop the stigma. As well as spreading awareness in your day-to-day life, we encourage people to get involved in **National Loneliness Awareness Week**.

4. Support communities to identify place-based activities and services that will assist people to build and maintain social connections (including for young people). It is imperative that once these initiatives have been identified that they are continuously and appropriately resourced. A positive example is the **Spark: Igniting Human Connection Project** that has developed a co-design model that was applied to an Adelaide Hills community.

5. Improve access to public transport. Public transport can be infrequent, inaccessible, expensive or non-existent in many areas across South Australia. People that do not have access to a car are forced to rely on public transport infrastructure. This adds an additional barrier to attending placed-based activities and visiting people in community, particularly in rural, regional and remote areas.

6. Improve infrastructure by having the places and spaces for people to connect. Good community infrastructure can support community connection by providing a variety of spaces for people to come together. Including open spaces like parks as well as leisure and other facilities is essential. Local community activities and social groups rely on infrastructure to ensure their programs successfully address loneliness.

7. Consider loneliness and social connection during urban planning. Particularly whether developments and communities are being designed to encourage or discourage connection and inclusion that creates a sense of community. Communities are increasingly segregated particularly as new developments push more people further away from the city, and subsequently, further from services, support and opportunities for social connection.

8. Strengthen research into both solutions and risk factors related to loneliness, including preventive strategies. As the **World Health Organization** notes, "*interventions will only be as good as our understanding of the risk and protective factors they target.*" A clearer grasp of what drives social connection, isolation, and loneliness is critical to designing effective responses.