



16 August 2021

Committee Secretary
Community Support and Services Committee
Parliament House
George St
BRISBANE QLD 4001

Email CSSC@parliament.qld.gov.au

Dear Sir/Madam

Social Isolation and Loneliness in Queensland – Diabetes Queensland Submission

Thank you for the opportunity to submit to the inquiry into social isolation and loneliness before the Committee. The interactions of health and social isolation, with both acting as causal factors and consequences of the other, have been highlighted by the COVID-19 pandemic. Health has become a key reason for isolation, and the impact of isolation on health is becoming more evident.

Diabetes has long been a lonely condition for a number of reasons, especially stigma, judgement, and difference. The increased isolation brought about by COVID, and its risks for people living with diabetes, has highlighted this state for many people. Research is also pointing to the role that isolation plays in the development of type 2 diabetes, and likewise the role that lessening social isolation may help prevent some incidence of the condition.

Diabetes as a factor in social isolation

In surveys undertaken by Diabetes Queensland, there has been a strong indication that when people encounter more difficulties with their diabetes, their immediate and dominant response is to withdraw. When people are feeling under pressure because of their diabetes, 39 per cent said they withdrew until they were feeling stronger, with an additional 27 per cent saying they just got on with things as normal. This indicates that the majority of people are not seeking help when there is both a need and an opportunity for intervention.

More than 30 per cent of people said they became less vigilant about their diabetes management when their mental health was flagging. These results show that people are not seeking help when they probably most need it, and are dealing with the stress of a difficult condition in isolation. This response can exacerbate the impact of isolation. There are opportunities for the health system to provide interventions at a time of greatest benefit, improving the impact on both mental health and diabetes management.

Diabetes as a result of isolation

Studies into the lack of social connections have found strong correlations, especially in males, for the increased risk of type 2 diabetes.

A UK study highlighted loneliness as a significant predictor of diabetes. People who are lonely are more likely to develop type 2 diabetes¹. This study emphasised that living alone was not significantly associated with onset of type 2 diabetes, but loneliness was; and demographics played a strong role. Those who developed diabetes were significantly lonelier, more often male, and less financially well off. An increase in the loneliness score in this study equated to a 41 per cent increase in the risk of type 2 diabetes.

Maastricht University Medical Centre² research found that “resolving social isolation may help prevent the development of type 2 diabetes” in people aged 40 and over. According to this research, a lack of participation in social interactions generated up to a 60 per cent higher chance of prediabetes and 112 per cent higher risk of developing type 2 diabetes. The reasons for this are not entirely causal, but offer some opportunities for interventions.

People who may be feeling unwell during the onset of diabetes, yet before diagnosis, may reduce social involvement as a result. Targeted prevention programs would be more likely to identify and connect these people. Age is a risk factor for both onset of type 2 diabetes and isolation. In these circumstances, planning to keep people in or connected to their communities and peer areas could reduce the impact of both conditions.

The use of interventions in circumstances of loneliness and isolation can be used to give people more confidence in seeking help, minimising the cyclical nature of isolation and diminishing health.

Diabetes Queensland applauds the Committee for undertaking this investigation.

Yours sincerely



STURT EASTWOOD
Chief Executive Officer

¹ Diabetologia (Hackett, R.A., Hudson and Chilcot, J. Loneliness and type 2 diabetes incidence: findings from the English Longitudinal Study of Ageing. *Diabetologia* 63, 2329-2338 (2020)

² Brinkhues, S et al *Socially isolated individuals are more prone to have newly diagnosed and prevalent type 2 diabetes mellitus – the Maastricht study*. *BMC Public Health* 2017; 17: 955