

SUBMISSION

MENTAL HEALTH COMMISSION REVIEW OF THE *MENTAL HEALTH AND WELLBEING STRATEGY* (NSW)

SEPTEMBER 2025

Acknowledgment of Country

We acknowledge the Traditional Custodians of the land throughout New South Wales and Australia. We pay our respects to Elders past, present and future. We recognise the deep connection that Aboriginal and Torres Strait Islander peoples have to this land, and the vital role of Elders as custodians of culture, knowledge, and tradition. Their wisdom and guidance are invaluable to their communities and to all Australians. We honour their contributions and the enduring legacy they provide for future generations. As we work towards a more inclusive society, we commit to learning from and respecting the rich cultural heritage of our First Nations peoples, and to recognising the importance of their voices in shaping our shared future.

About COTA NSW.

Council on the Ageing (COTA) NSW is the leading not-for-profit organisation representing the rights and interests of people over 50 in NSW. We're an independent, consumer-based, non-government organisation. We are determined to ensure that older people's contributions to society are valued and that they have access to the opportunities other members of the community take for granted. We work with politicians, policymakers, service providers, and the media to ensure that older people's views are heard and acted on.

Submission to the Mental Health Commissions: Strategy for Mental health and Wellbeing in NSW

COTA NSW's recent report *"Voices of solitude: Loneliness and Social Isolation Among Older Adults in NSW"* highlights the significant mental health and wellbeing challenges older Australian's are faced with daily. Our research indicates that loneliness and social isolation carry profound mental, physical and cognitive impacts. More than half of older adults in NSW report experiencing loneliness, with women aged 60–64 and men aged 55–59 particularly affected. Rates of loneliness are even higher among people with disability, LGBTQIA+ communities, and carers, underscoring how isolation compounds existing vulnerabilities.

Loneliness is not simply a social issue it is a critical mental health concern. Persistent isolation is strongly linked with depression, anxiety, cognitive decline, and poorer physical health outcomes. Many older people report feeling undervalued by society, which erodes their sense of identity, belonging and exacerbates psychological distress. While loneliness is often triggered by life changes such as bereavement, retirement, or reduced mobility, without timely intervention it can become chronic, with lasting consequences for mental wellbeing.

Older adults are also at an increased risk of experiencing mental health issues, yet they are less likely to seek professional help¹. This highlights the need for interventions that normalise mental health help-seeking among older adults and ensure services are accessible and affordable. Addressing these barriers should be a central priority for policymakers, healthcare providers, and public health practitioners working with older communities.

These findings make clear that addressing loneliness and improving access to mental health care must be central to the NSW Mental Health and Wellbeing Strategy. Recognising loneliness and limited help-seeking as key risk factors for poor mental health will ensure investment in policies and programs that foster community connection, promote purposeful

¹ Usra Elshaikh, Rayan Sheik, Raghad Khaled Mohammad Saeed, Tawanda Chivese & Diana Alsayed Hassan (2023) 'Barriers and facilitators of older adults for professional mental health help-seeking: a systematic review', *BMC Geriatrics*, **23**, article 516. 25 August 2023. doi:10.1186/s12877-023-04229-x

ageing, and build inclusive support networks. By taking decisive action, NSW can reduce the mental health burden of isolation, expand access to professional support, and enable older people to live with dignity, connection, and wellbeing.

The Mental Health Service System in NSW – (p.16).

1. What is working?

There has been a gradual shift in how mental health is recognised among older people, with greater openness emerging as society becomes more accepting. This has been led largely by younger generations reducing stigma around the issue. It is important that service design enables older people to feel comfortable and have confidence that their mental health and wellbeing needs will be taken seriously. Without this, older people will have a distrust and an unwillingness to engage with mental health services. Our constituents tell us that older people value community-based programs, peer support, and the recognition of lived experience as important components of mental health care. Under the Older People's Mental Health Services Plan (OPMH), positive steps have been made through suicide prevention initiatives tailored for older people, expanded partnerships between mental health and residential aged care services, and greater access to community programs such as the Housing and Accommodation Support Initiative (HASI) and Community Living Supports (CLS), all of which provide more tailored, inclusive, and accessible support for older people.

2. What is not working?

Responding to loneliness in older people to prevent poor mental health outcomes

Importantly, a crucial aspect of older people's mental health that is largely overlooked in NSW is loneliness. The COTA NSW report *"Voices of Solitude: Loneliness and Social Isolation Among Older Adults in NSW"* found that more than 40% of older adults report that loneliness limits their ability to engage in activities they enjoy or to connect with loved ones. This has a profound impact on their mental health and perpetuates a cycle of isolation. If older people are not interacting with their community, they are becoming increasingly more isolated and experiencing profound mental health impacts. Addressing loneliness therefore requires not only accessible mental health services but also community-based initiatives that

foster social connection, build resilience, and create meaningful opportunities for older people to participate in society.

Older adults face a heightened risk of experiencing mental health challenges, yet they are often less inclined to pursue professional support. This is due to stigma, negative beliefs about mental health and the cost of support.²

Barriers to Accessing Appropriate mental health services

Currently in NSW, older people continue to face significant barriers in accessing appropriate mental health services. These barriers include:

- Those living in regional and rural NSW struggle with limited availability of specialised services which leads to inequities in access and service quality.
- Uneven implementation of the OPMH Service Plan across Local Health Districts has also contributed to long wait times leaving many without the support they need.
- persistent shortages of staff who are specialised in older people's mental health which strain capacity.
- Clear fragmentation between the mental health and aged care systems that leave many older people vulnerable during care transitions.
- There has been a struggle to adequately meet the needs of diverse groups, including Aboriginal and Torres Strait Islander elders, people from culturally and linguistically diverse backgrounds, and LGBTQIA+ older adults, reflecting gaps in cultural safety and inclusivity.
- Suicide rates among older people remain high. These challenges suggest that while progress has been made, systemic and structural barriers continue to hinder the Plan's effectiveness.

² Usra Elshaikh, Rayan Sheik, Raghad Khaled Mohammad Saeed, Tawanda Chivese & Diana Alsayed Hassan (2023) 'Barriers and facilitators of older adults for professional mental health help-seeking: a systematic review', *BMC Geriatrics*, **23**, article 516. 25 August 2023. doi:10.1186/s12877-023-04229-x

3. What needs to change?

There needs to be a stronger recognition of the mental health challenges facing older people and the unique factors that shape their experiences. **Loneliness** is a pressing issue facing older people that needs to be taken seriously within the OPMH and wider NSW mental health services. Mental health deterioration is not an inevitable part of ageing, but when policy fails to fully address the profound impact of loneliness, older people across NSW will continue to face worsening mental health outcomes.

The NSW government is currently in a unique position to combat loneliness and social isolation for older people. Targeted investment can deliver significant improvements. A practical first step would be to provide funding to COTA NSW to pilot a dedicated program addressing loneliness among older people in social housing, a group particularly vulnerable to high levels of extreme loneliness. Investment should also prioritise community-based programs that foster social connection, peer support, and intergenerational engagement, as these have proven benefits for reducing loneliness and improving wellbeing.

Furthermore, a workforce trained to recognise and respond to later-life mental health conditions is essential to ensure services are accessible, culturally safe, and responsive to diverse groups of older people. By addressing these gaps, NSW can shift towards a system where older people feel valued, supported, and able to access timely, effective mental health care.

We need to see continually investment into older age mental health. Addressing loneliness must now become a central focus within the OPMH service plan and across NSW's broader mental health services. It is imperative that older people receive dedicated attention and **investment** to ensure their mental health needs are no longer overlooked. This will aid in reshaping older people's negative beliefs, stigma and costs.

4. How should change happen?

We urge the Commission to commit to substantial, targeted investment in programs addressing loneliness among older people, so they can build social connections, access timely support, and experience improvements in wellbeing. To address shortcomings, COTA NSW is uniquely positioned to pilot a program specifically targeting loneliness in older people living in social housing. Such a program could provide accessible, community-based interventions, foster social inclusion, and inform broader service improvements. Prioritising support for the most vulnerable older Australians should be central to the Commission's strategy, alongside ongoing evaluation and scaling of successful initiatives to ensure that mental health services are both equitable and effective.

Change should also be driven through genuine co-design with older people, ensuring that services are shaped by and responsive to their lived experiences. This approach will help guarantee that programs are appropriate, accessible, and meaningful to those they are intended to support. Further, embedding age-friendly and mental health-inclusive principles across all NSW health and government planning frameworks is essential to creating a system that recognises the unique needs of older people. By making these principles central to policy and service design, government can build a more inclusive and effective mental health system that promotes dignity, wellbeing, and equity for older people.

[Mental Health and Wellbeing in NSW Communities \(pg. 19\)](#)

5. What could improve mental health and wellbeing across our communities?

Recognising the profound impact that loneliness and social isolation has on older people's mental health is paramount. Loneliness contributes to and results from poor mental health, but it remains under-recognised within the OPMH service plan and broader NSW mental health services. Vulnerable groups, particularly older people living in social housing, are at heightened risk and would benefit from targeted, community-based initiatives.

The NSW Government should fund COTA NSW to pilot a program specifically targeting loneliness in older people living in social housing. It is well known that loneliness is a starting point for many mental health issues and targeting a program like this will help prevent the transition from loneliness to acute loneliness to mental health concerns.

Making professional mental health support more affordable, accessible, and normalised for older people is critical. This means reducing stigma, addressing cost barriers, and delivering services in ways that feel safe, familiar, and respectful to older people. Community-based hubs, outreach services, and digital innovations (with support for digital literacy) can all play a role in reaching those who might otherwise disengage.

Improving wellbeing requires recognising and addressing the diversity of older people's experiences. Policies and programs must be culturally safe and inclusive, ensuring that Aboriginal and Torres Strait Islander peoples, CALD communities, LGBTQIA+ older adults, and people with disability have equitable access to support.

Finally, tackling the social determinants of mental health such as housing, financial security, and access to meaningful roles in society will have lasting benefits. By fostering community connection, making services inclusive and accessible, and addressing the root causes of poor mental health, NSW can create conditions for all older people to thrive with dignity and wellbeing.

General Reflections (pg. 23)

7. How will we know that we are making a difference?

We will know that we are making a difference to older people's mental health when older people themselves report improved wellbeing and feel less stigma in seeking support. When loneliness and its impact on older people's mental health is taken seriously within the OPMH and wider NSW mental health services.

Progress will also be clear when cost is reduced and access to services are made easier. Data showing increased help-seeking among older people, alongside improved suicide prevention outcomes, will provide further evidence of impact. Just as importantly, success will be reflected in a system that is easier to navigate.

8. Is there anything else you would like to say?

COTA NSW welcomes the opportunity to contribute to this consultation. We stress that older people are one of the fastest-growing demographics currently. To build a truly inclusive mental health system, NSW must commit to age-friendly services that are co-designed with older people, formally recognise loneliness within the OPMH and wider mental health services and address the broader social determinants of mental health, including poverty, housing insecurity, ageism, and social isolation.

**For any questions regarding this submission, please contact:
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