



Community Insights Report

Older People

December 2025

Healthy North Coast acknowledges the Traditional Custodians of the lands across our region – the Birpai, Bundjalung, Dunghutti, Githabul, Gumbaynggirr and Yaegl Nations – and pays our respects to Elders past, present and on their journey. We recognise these lands were never ceded and acknowledge the continuation of culture and connection to the land, sky and sea. We acknowledge Aboriginal Peoples as the Land's first peoples and honour the rich diversity of the oldest living cultures.

Please note, in this document, the term 'Aboriginal peoples' is used to refer inclusively to individuals who identify as either Aboriginal, Torres Strait Islander, or both Aboriginal and Torres Strait Islander.

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Abbreviations

Term	Description
ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
ED	Emergency Department
GP	General Practitioner
HNA	Health Needs Assessment
HNC	Healthy North Coast
LGA	Local Government Area
LGBTQ+	Lesbian, Gay, Bisexual, Transgender, Queer and other diverse sexualities and genders
NDIS	National Disability Insurance Scheme
RACHs	Residential Aged Care Homes

Executive summary

The Healthy North Coast (HNC) 2025–2028 Health Needs Assessment (HNA) was completed in November 2024. The HNA findings and priorities were discussed with the HNC Joint Clinical and Community Advisory Councils. Council members identified opportunities for increased understanding relating to specific cohorts of older people, including carers, older LGBTQ+ people, older people experiencing homelessness, and older Aboriginal peoples. To explore and better understand the experiences and needs of older people living on the North Coast, HNC undertook a targeted older peoples' health needs assessment in 2025.

Findings show that while many older people report good health, strong independence, and high digital confidence, they hold significant concerns about ageing – particularly the loss of mobility, health decline, financial insecurity, housing stability, and the risk of loneliness. Despite high engagement with general practice and specialist care, transport barriers and limited aged care awareness present challenges to maintaining independence as needs increase. Many consultation participants stressed the importance of community connection, accessible environments, and meaningful social participation as foundations of healthy ageing.

Loneliness emerged as a major issue across age groups, with the highest rates among people aged 81+ and those aged 65–74, pointing to a clear need for targeted social connection strategies. Experiences of older LGBTQ+ people highlighted the ongoing impact of discrimination and the critical importance of inclusive, culturally safe care. Consultations with homelessness service providers revealed the severe and intersecting challenges faced by older people without secure housing, including health deterioration, trauma, administrative complexity, and limited access to coordinated support.

The population of older people on the North Coast is growing rapidly, with the number of people aged 65–84 projected to increase by 20% in the next 20 years (2021–2041), and people aged 85 and above projected to increase by 86%. This demographic shift will significantly increase demand for aged care, health, and community services.

The local government areas (LGAs) with the highest proportions of older residents, such as Nambucca Valley and Port Macquarie-Hastings, may face pressure due to smaller working-age populations and existing service constraints.

There is need for proactive planning, greater community connectivity, inclusive and culturally safe care models to meet the health and service needs of our ageing population.

This needs assessment provides a foundation for future strategic initiatives to support ageing well on the North Coast and ensure older people particularly those most at risk can access safe, appropriate, and person-centred care.

Background

In 2024, Healthy North Coast (HNC) completed its core regional health needs assessment (HNA), a comprehensive collation of available open-source data, commissioned services and general practice data and a targeted survey and consultation exploring the health and service needs of North Coast communities.

Key findings and identified needs from the core needs assessment were presented to the HNC Joint Clinical and Community Advisory Councils. Through collaborative discussion, the Councils members helped prioritise areas requiring further exploration. Five targeted health needs assessments were identified, including one focused on the health needs of older people.

The 2025–2028 HNA identified the following priorities for older people:

- *Explore opportunities to prepare the healthcare system for the expected growth in the older adult population, with a specific focus on dementia care and improving healthy ageing.*
- *Support early intervention and management of dementia on the North Coast.*
- *Support older people to access aged care services by reducing the impact of complex referral and funding pathways.*

This targeted needs assessment builds on the regional HNA. It does not update or replace the HNA's quantitative analysis; rather, it provides additional insights to complement it. While the HNA drew primarily on quantitative data sources, this assessment focuses on the lived experiences and perspectives of older people living on the North Coast, gathered through extensive community consultation.

Needs assessment approach and process

To better understand the experiences and needs of older people on the North Coast, HNC used an approach that combines thematic qualitative analysis with quantitative data analysis. Analysis drew on findings from the [2025-2028 HNC Health Needs Assessment](#), which highlighted a rapidly ageing population on the North Coast. This work informed the survey design, consultation approach, and key lines of enquiry. It highlighted gaps in available data, particularly for older LGBTQ+ people and older people experiencing homelessness.

Analysis of regional HNA findings highlighted opportunities to further understand the diverse and overlapping experiences of older people, including carers, older LGBTQ+ people, older people experiencing homelessness, and older Aboriginal peoples, recognising that individuals may belong to multiple cohorts and experience compounded challenges.

To explore the experiences of these groups, HNC conducted two surveys across a six-week period, focusing on people aged 55 years and over and carers. Consultations were held with four service providers specialising in homelessness, and a group of LGBTQ+ people aged 55 years and over.

HNC is undertaking an Aboriginal health and wellbeing needs assessment, which will enable appropriate, culturally informed consultation with Aboriginal communities. As such, specific consultations with older Aboriginal peoples were not included in this project.

The project commenced in June 2025 and was completed in December 2025.

Survey activities

An online survey¹ of people aged 55-years and over was conducted across a 6-week period from August to September 2025:

- responses: 178 complete and 14 partially complete
- focus: Health status, service access, healthy ageing, loneliness and social connection, digital capability and, community belonging
- to measure loneliness, the UCLA-3 loneliness scale was used in the survey (Stephoe, Shankar, Demakokos, & Wardle, 2013). Each of the 3 questions asks how often people feel left out, isolated, or lacking companionship. Each item is scored from 1 to 3, giving a total score between 3 and 9. Scores of 3 to 5 were classified as *not lonely*, while scores of 6 to 9 were classified as *lonely*.

A separate survey was undertaken with carers as part of this needs assessment. Due to the depth and richness of the information collected, these findings have been compiled into a standalone report, which is available on the HNC website.

Both surveys were hosted online. The surveys were voluntary, anonymous, and promoted region wide via social media platforms, HNC networks and partnerships and HNC's website. These findings were analysed using PowerBI.

Consultation activities

An in person consultation with older LGBTQ+ people was conducted in October 2025 and consultations with providers of homelessness services were undertaken in August 2025. These took the form of:

- four semi-structured discussions with service providers supporting older people experiencing homelessness
- one facilitated group consultation with LGBTQ+ community members aged 55years and over.

Consultations explored access to care, safety, inclusion, barriers, service gaps, and opportunities for improvement.

Survey insights

Demographics

The LGA with the greatest number of respondents resided in Clarence Valley LGA, followed by Coffs Harbour and Tweed LGAs. Most survey respondents (43%) were aged between 55 and 74 years. Just 2% of respondents identified as Aboriginal.

¹ Throughout this document the over 55s survey will be referred to as the survey.

Most respondents identified as straight (87%), with 4% identifying as gay or lesbian, 1% as bisexual and the remainder using another term, not knowing or preferring not to say. Respondents commonly lived alone (43%), with a partner, or with family or a spouse (40%).

Figure 1 The LGA with the most survey respondents was Clarence Valley, followed by Coffs Harbour

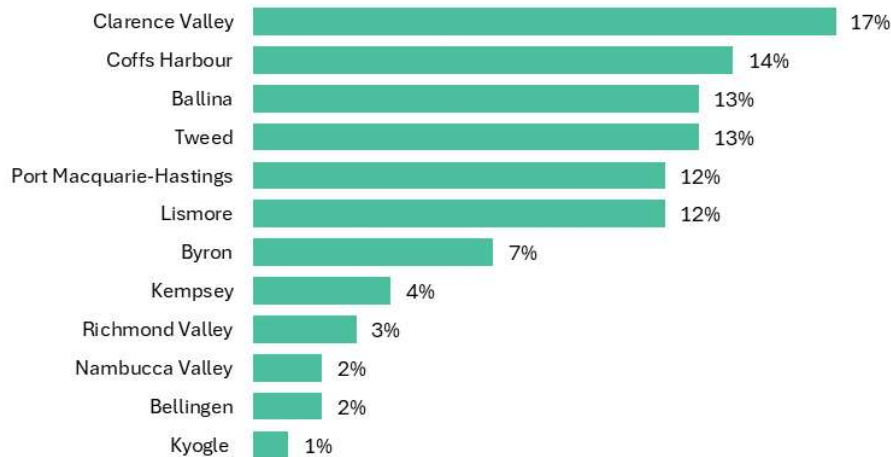
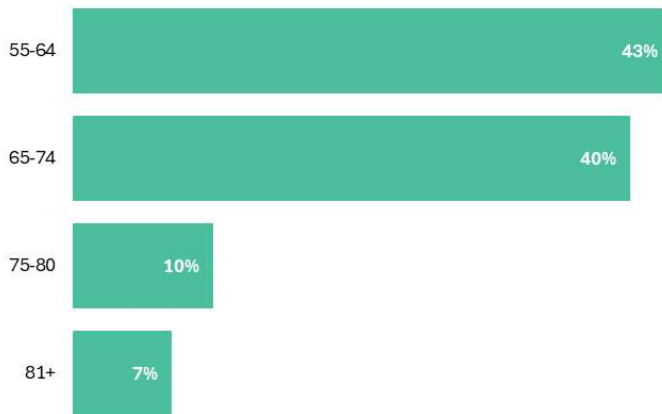


Figure 2 Most survey respondents were between the ages 55-74



Survey respondents' health, mobility and access

Survey respondents reported perceived moderate to good health. Most remain independent in terms of transport, with 85% driving themselves, 26% walking, and only 10% relying on friends or family for transport (multiple responses allowed).

Many respondents expressed concerns about transport as they age, suggesting there is anxiety about future access and independence.

Nearly all respondents (93%) had seen a GP in the past year, and more than half (55%) had visited a specialist, indicating strong engagement with primary and specialist healthcare.

The majority (85%) of respondents are not using My Aged Care services, which may reflect limited awareness, eligibility, or perceived need among this cohort.

These findings point to a community that is currently managing well but may require proactive planning to ensure continued access to transport, healthcare and ageing-related supports as needs increase over time.

Supporting healthy ageing

Exploring the challenges and enablers of ageing well in community from the community survey

Respondents show that older people value communities that combine connection, safety, accessibility, and opportunities for meaningful social participation.

*“Friendly neighbours and everyone being willing to help out when needed.” –
Clarence Valley LGA Survey participant*

Responses show that physical activity, social connection, and creative or meaningful engagement are key ways older people maintain their health and wellbeing. Walking was the most commonly mentioned activity, with many people highlighting the benefits of daily walks, beach walks, or bushwalking for both physical fitness and mental clarity. Other people enjoyed staying active through gardening, golf, swimming, yoga, Tai Chi, dance, gym sessions, or Pilates, often combining movement with opportunities to connect socially.

Volunteering, community groups, and support networks including Rotary, church choirs, men’s groups, and local clubs play an important role in providing purpose and belonging. Many people emphasised time with family, friends, and pets, with social outings, coffee catchups, or shared hobbies seen as vital to staying positive.

Creative activities like painting, sewing, craft, knitting, and music were valued for relaxation. A few respondents noted barriers such as health limitations, mobility challenges, or inaccessible local infrastructure can restrict their ability to stay active or connected. The responses highlight that wellbeing is nurtured through movement, connection, creativity, and purposeful engagement, supported by accessible environments and inclusive community opportunities. For many people, ageing is an inevitable and often enriching stage of life, offering opportunities for growth, purpose, and connection. However, many survey respondents expressed deep concern about losing independence, particularly through declining mobility, health, or cognitive function.

Many respondents reported fearing falls, reduced capacity for self-care, and no longer being able to drive or remain at home.

Concerns about chronic illness, pain, dementia, and cancer recurrence are compounded by the reported difficulties accessing affordable, timely, and high-quality healthcare in areas with limited GPs, specialists and transport options.

Financial insecurity was a commonly reported issue, with respondents anxious about the rising cost of living, aged care fees, housing insecurity, and insufficient pensions, particularly for renters and those still paying mortgages.

Feelings of loneliness, isolation, and invisibility were reported, especially among those living alone or distant from family, with some fearing dying alone or not being found. Many mentioned transport and accessibility, such as poor public transport, unsafe footpaths, and steep property access, as barriers to independence and to social connection.

Emotional themes included fear of ageing, grief, anxiety, and frustration at feeling undervalued or unseen in the community. Other worries shared included climate change, community safety, digital exclusion, and systemic inequities.

A small number of respondents expressed acceptance or resilience, viewing ageing as an inevitable stage of life.

“isolation and the probability of diminishing independence.” – Clarence Valley LGA Survey participant

“Lack of independence, lack of good RACHs, sound end of life options that are not as restrictive as they are now.” – Ballina LGA Survey participant

Respondents highlighted that social connection, accessibility, and community friendliness were central to what made a place a great community to age in. Many valued friendly neighbours, a sense of belonging, and mutual support, describing communities where people “look out for each other,” share morning teas, and offer help when needed.

Access to health and support services, particularly a good GP, reliable emergency care, and affordable local specialists are considered essential, alongside accessible transport, footpaths, and safe environments that enable independence and social participation.

Respondents valued opportunities for activities and engagement, such as walking groups, clubs, community centres, arts and garden groups, volunteering, and faith-based networks, which fostered connection and purpose.

The natural environment, including beaches, green spaces, and walking tracks, contributed to wellbeing and enjoyment. However, some noted declining social cohesion, limited public transport, exclusive or unaffordable activities, and a growing sense of isolation, particularly for those living alone or in newer, tourism-focused areas.

“I stay as physically and mentally active as possible and stay socially connected with membership of local community groups.” – Coffs Harbour LGA Survey participant

Community belonging shapes health and wellbeing

Access to quality health and support services, including a good GP, reliable emergency care, and affordable specialists, is central to healthy ageing. The World Health Organization emphasises that person-centred, integrated health and care services, alongside supportive

environments such as accessible transport, safe footpaths, and age-friendly communities, are essential to maintaining functional ability, independence, and social participation in later life (WHO, 2025).

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A few people expressed disappointments with neighbours' lack of compassion or community indifference, while others emphasised the need for inclusive, age-friendly, and accessible infrastructure. The responses show that older people value communities that combine connection, safety, accessibility, and opportunities for meaningful social participation.

*“Friendly neighbours and everyone being willing to help out when needed.” –
Clarence Valley LGA Survey participant*

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Across the region, respondents consistently valued feeling connected, supported, and included within their local communities. A strong sense of belonging, the ability to rely on

neighbours, and living in age-friendly environments were seen as central to wellbeing, independence, and ageing well. Enhancing social connection, neighbourhood trust, and informal support networks represents a practical, evidence-based pathway to improving wellbeing and reducing loneliness among older people.

This emphasis aligns with the literature, which highlights that health is influenced not only by the physical characteristics of neighbourhoods, but also by the extent to which people feel they belong, identify with their community, and experience social connection (Haslam, Fong, & Cruwys, 2023). Strong neighbourhood identification has been shown to buffer stress, enhance resilience, and support better mental health outcomes by fostering trust, cohesion, and access to informal support networks.

Survey and consultation findings suggest there is a solid foundation to build on, but also clear room for improvement. When asked about their sense of belonging, most respondents across all LGAs reported feeling only “somewhat” connected to their community. Residents in Bellingen, Clarence Valley, and Coffs Harbour were more likely to report a stronger sense of belonging. Perceptions of age-friendliness were mixed, with Nambucca Valley the only LGA where the majority of respondents felt their community was age-friendly, indicating that many communities may not yet be fully inclusive or supportive of older people.

The ability to rely on neighbours for help a key indicator of neighbourhood social support and a protective factor against loneliness was also variable. Across all LGAs, 38% of respondents reported they could rely on a neighbour for help, with a further 42% indicating they could sometimes rely on a neighbour.

“A sense of friendship which is within our town. There are plenty of services if you need them. We have a hospital and a variety of associated services.” – Clarence Valley LGA Survey participant

Older adults experience high rates of loneliness and social isolation

Social isolation and loneliness are concerning issues in Australia due to their impact on people’s lives and wellbeing, and loneliness is linked with poorer physical and mental health and premature death (AIHW, 2025). Loneliness in older adults can be driven by major life changes such as retirement, financial strain, loss of loved ones, declining health, reduced independence such as ability to drive, and transitions in living arrangements.

Those most at risk include older people on low incomes, living with disability, in rural areas or housing stress, living alone, single or childless, vulnerable to elder abuse, or with limited literacy or digital skills (Engel & Mihalopoulos, 2024). Mounting evidence also shows the burden loneliness creates for the health system and economy through higher service use and greater demand for institutional care (Engel & Mihalopoulos, 2024).

Notable patterns emerged across age groups. Loneliness was most prevalent among respondents aged 81 years and over, with half (50%) classified as lonely, followed closely by those aged 65–74 years, where 46% reported loneliness. Rates were high among people aged 55–64 years (37%) and those aged 75–80 years (35%). These findings suggest that while loneliness affects older adults across all age groups, it is particularly pronounced in the early-older (65–74) and oldest (81+) cohorts, highlighting a need for targeted strategies to strengthen social connection and support for these groups.

*“I want to move. Since my partner died 2yrs ago, I rarely have friends visit.”-
Ballina LGA Survey participant*

“Being alone and not managing in my own home. I am widowed and although I have many close friends, I am very conscious of many hours a day I spend on my own.” - Ballina LGA Survey participant

“(concerns are) that I will die and won’t be found for months.” – Clarence Valley LGA survey participant

Technology as a key enabler to access to healthcare and connection

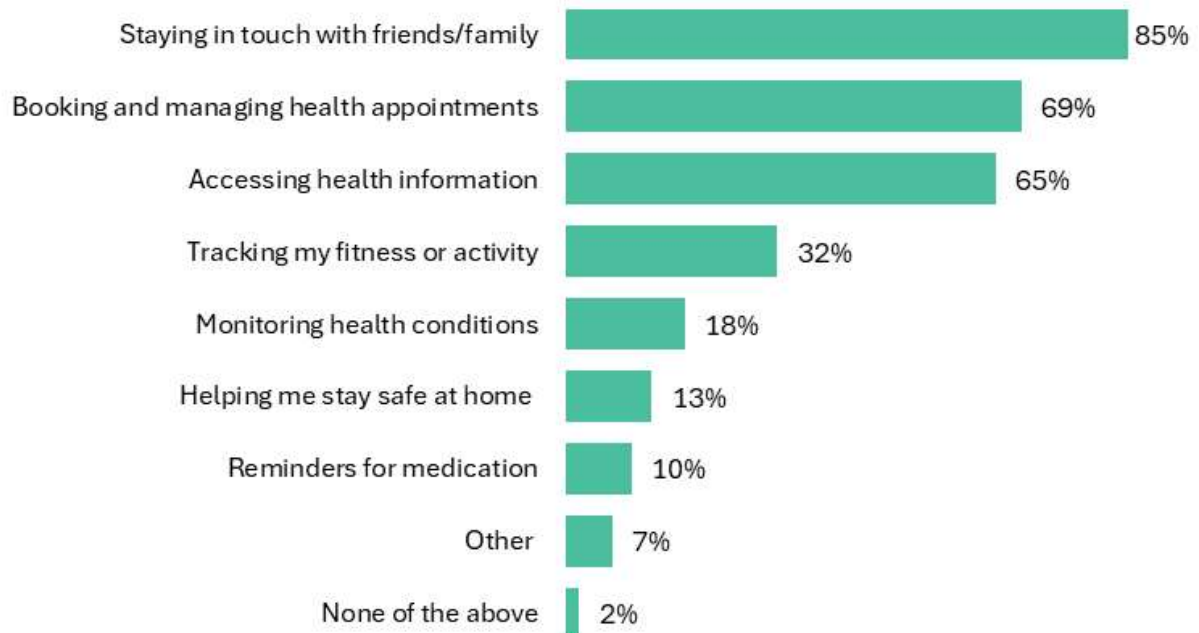
Technology is increasingly becoming an enabler of better healthcare, helping to ensure everyone (regardless of geography or ability) can access and confidently use secure, connected and reliable digital health tools (AIHW, 2024).

Transport was highlighted by survey respondents as a barrier to quality care, creating concerns about the ability to access care as they age. Digital health and technology facilitates access to care, especially in regional locations where both transport and health services are limited.

Most survey respondents reported feeling confident or very confident (84%) using technology for their health needs. Nearly all respondents currently use a smart phone (91%), computer or laptop (77%). Just under half (49%) respondents stated they use telehealth. Similarly, older respondents to the Better Health survey (n=1,224) most had used telehealth (59%) and would use again, whilst 27% of people haven’t used it but wouldn’t mind use it.

Technology can enable people to stay connected. Many currently use technology to stay in touch with friends/family (85%), book and manage appointments (69%) and access health information (65%).

Figure 3 Survey respondents mostly use technology to stay in contact with friends/family and book or manage health appointments



Despite generally positive levels of digital use and confidence, some survey respondents were concerned about keeping pace with rapidly evolving technologies and staying safe online. This highlights the need for ongoing support to build digital skills and confidence so older people can continue to benefit from technology as their needs evolve.

These concerns were reinforced during HNC’s February 2025 Healthy me-Digital solution consultations in Tweed, Wauchope and Grafton. Participants in Grafton and Wauchope also highlighted inadequate digital connectivity due to poor NBN connection and limited phone coverage which must be considered when rolling out digital solutions to healthy ageing

“Learning how to use computers or phone safely including apps” – Tweed LGA Survey participant

“Accessing services physically & online as changes to technology make it difficult for me to keep up!” – Tweed LGA Survey participant

Inclusive care matters: meeting the needs of older LGBTQ+ people

Many LGBTQ+ peoples have poorer physical and mental health outcomes, higher rates of chronic illness, and greater experiences of social isolation compared with their non-LGBTQ+ peers (Moagi, van Der Wath, Jiyane, & Rikhotso, 2021).

Furthermore, older LGBTQ+ people often experience unique and compounding health challenges shaped by a lifetime of discrimination, stigma, and exclusion within health and social care systems.

Consultation participants highlighted that past negative encounters with services have led to reduced trust, delayed help-seeking, and anxiety about disclosure of identity. Participants also highlighted that for those without children or strong family of origin networks, the risks of loneliness, inadequate informal support, and difficulty navigating services were even greater.

These factors highlight the importance of culturally safe, inclusive, and affirming care environments that actively recognise and respond to the diverse needs of older LGBTQ+ people.

Consultation participants spoke about what true inclusion looks like, moving beyond symbolic gestures to genuine kindness, empathy, privacy, and respect from staff. They raised concerns about homophobia in aged care, limited staff training, transport and accessibility barriers, and the social isolation often felt by those without family support.

Alongside this, consultation participants offered suggestions for improvement, such as stronger organisational strategies, coordinated care, LGBTQ+ specific models of care, more inclusive waiting areas and telehealth options. Their contributions emphasise the need to embed lived experiences into service design so that inclusion is practised, not just promised.

*“There is need to understand person centred care, not a one size fits all” –
Lismore consultation participant*

The North Coast has a large population of older people who are at risk of experiencing homelessness.

The North Coast region represents 9% of NSW's homeless population aged 65 and older and 18% of older individuals at risk of homelessness (ABS, 2023). Consultations with service providers highlighted older people experiencing homelessness face intersecting challenges.

Declining health, unaffordable housing, bureaucratic complexity, trauma, and systemic exclusion, leaves many without the support they need. Infections, poor nutrition, chronic disease, and mental ill-health often go untreated due to stigma, distrust of mainstream services, and lack of face-to-face relationship-based care.

Housing pressures, particularly the shortage of affordable options, force many, especially older women into hidden homelessness, unstable temporary accommodation, or prolonged periods without secure housing.

Navigating systems like social housing, Centrelink, aged care systems, and the National Disability Insurance Scheme (NDIS) can be overwhelming for many, with lost phones, complex digital requirements, and administration burdens examples of how people are further cut off from support.

Hub-style integrated service models provide critical points of stability, offering trusted spaces where people can access care, build relationships, and receive cross-sector support. Often

these hubs are under-resourced, face rising demand and lack formal recognition within government service frameworks.

Service providers highlighted the need for better integrated health and aged care services, innovative and culturally safe housing solutions, flexible support models, and stronger cross-sector collaboration to meet the complex needs of older people experiencing homelessness.

Opportunities for healthy ageing

In November 2024, HNCs regional Health Needs Assessment (HNA) identified priority needs and opportunities to better support the health of older people in the footprint. Top priorities included:

- *Explore opportunities to prepare the healthcare system for the expected growth in the older adult population, with a specific focus on dementia care and improving healthy ageing.*
- *Support early intervention and management of dementia on the North Coast.*
- *Support older people to access aged care services by reducing the impact of complex referral and funding pathways.*

Building on these priorities, this 2025 supplementary needs assessment undertook deeper analysis to pinpoint further opportunities to improve older people's health, wellbeing and social connection, highlighting specific areas for action:

- *Build age-friendly, connected communities.*
- *Strengthen digital inclusion and safety.*
- *Support healthy and purposeful ageing.*
- *Enhance safe and inclusive service delivery.*
- *Improve access and knowledge of services for older people.*

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