

Position Statement

Understanding and addressing social cohesion, social isolation, and loneliness for more effective and targeted responses

Social cohesion is a current issue that concerns many communities and governments around the world. Increasingly, related concepts like social isolation and loneliness are also misused when speaking about social cohesion. The aim of this position statement is to provide the community with general guidance on what these terms actually mean and how to appropriately use them and or resolve them.

First, social cohesion, social isolation, and loneliness are related but conceptually distinct constructs that impact health and wellbeing differently and therefore require different responses. Conflating social cohesion, social isolation, and loneliness obscures their different causes, mechanisms, and consequences, and risks misdirecting policy, practice, solutions, and evaluation. ^{1, 2}

Defining Social Cohesion, Social Isolation and Loneliness

Social cohesion describes the **quality and inclusiveness of social relationships in a society**, including the extent to which people feel connected, trust one another, and participate in shared social life. It can encompass shared values, trust, cooperation, social participation, and a sense of belonging that support collective action and social integration. Social cohesion therefore can be understood as a property of people functioning within social systems and institutions, and is associated with broader outcomes such as social stability, equity, and collective wellbeing. ³

Social isolation, by contrast, is an **individual-level, objective state** characterised by an absence or insufficiency of social relationships, roles, or interactions. It is commonly measured through indicators such as social network size, frequency of contact, and participation in social activities. ^{4, 5} The World Health Organization Commission on Social Connection defines social isolation as a structural lack of sufficient social connections and explicitly distinguishes it from more subjective experiences such as loneliness and from broader societal characteristics such as social cohesion. ⁶

Loneliness is a **subjective distressing experience** arising from a perceived discrepancy between the social relationships a person desires and those they experience. ⁷ Loneliness also includes the perceived quality and meaning of social relationships rather than their quantity or structure, and it may occur among individuals who are not socially isolated, just as some socially isolated individuals may not feel lonely. ^{2, 5}

The consequences of loneliness, social isolation, and fractured communities

Loneliness and social isolation are consistently linked to serious health consequences, including greater risk of illness and premature death.^{2,6} Beyond individual health, low social cohesion undermines broader societal wellbeing - weakening inclusivity, community resilience, and people's collective capacity to act.³ These challenges do not occur in a vacuum. Structural factors including socioeconomic disadvantage, stigma, and marginalisation drive higher rates of loneliness and isolation while eroding the social fabric that holds communities together.^{6,8}

Matching the solution to the issue

From a policy and program perspective, strategies to strengthen **social cohesion** typically operate at community or societal levels and focus on inclusion, participation, and trust-building across groups. In contrast, interventions to reduce **social isolation** generally target individuals or specific populations by increasing access to social roles, networks, and contact. They can also include broader policy solutions such as adapting the built environment and community housing. This differs from interventions addressing **loneliness** which often focus on relationship quality, meaning, and psychological or relational supports.^{2,4}

Context is critical

Evidence indicates that improvements in one domain do not automatically lead to improvements in the others. First, a socially cohesive community will still comprise of individuals who are socially isolated or lonely⁶ and not everyone thrives in highly cohesive societies.

In a study drawing on data from the National Survey for Wales,⁹ researchers found that higher community social cohesion was positively associated with mental wellbeing in individuals who felt a strong sense of community belonging, but the opposite was true for those who reported a low sense of belonging. That is, living in a community with high social cohesion can undermined the mental wellbeing of marginalized individuals, thereby potentially exacerbating health inequalities.

Differences are also evident as a function of social status. In one study of older Hong Kong participants,¹⁰ the relationship between social cohesion and loneliness differed as a function of their social status. Specifically, while people who are more connected with their neighbourhood were less lonely, higher social status appeared to be a more important factor than neighbourhood connection.



Conclusion

Recognising social cohesion, social isolation, and loneliness as related but distinct concepts enables more precise analysis and more effective, targeted responses, as emphasised by the WHO Commission on Social Connection and the wider scientific literature.⁶ Furthermore, clear conceptual separation of loneliness, social isolation, and social cohesion is also critical to evidence-informed decision-making and policy making.

References

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