

The relationship between loneliness and health literacy among people accessing residential substance use disorder treatment



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- **Loneliness** is a public health concern and leads to poor health outcomes
- People with SUD are **7x more likely to be lonely**
 - Low **health literacy** is associated with stigma and mortality risk
 - Low health literacy is common among people with SUD



Aim

Is there a relationship between health literacy and loneliness among people accessing residential SUD treatment?

What did we do?

Included **N= 560** people accessing non-government SUD treatment services in AUS

Measures:

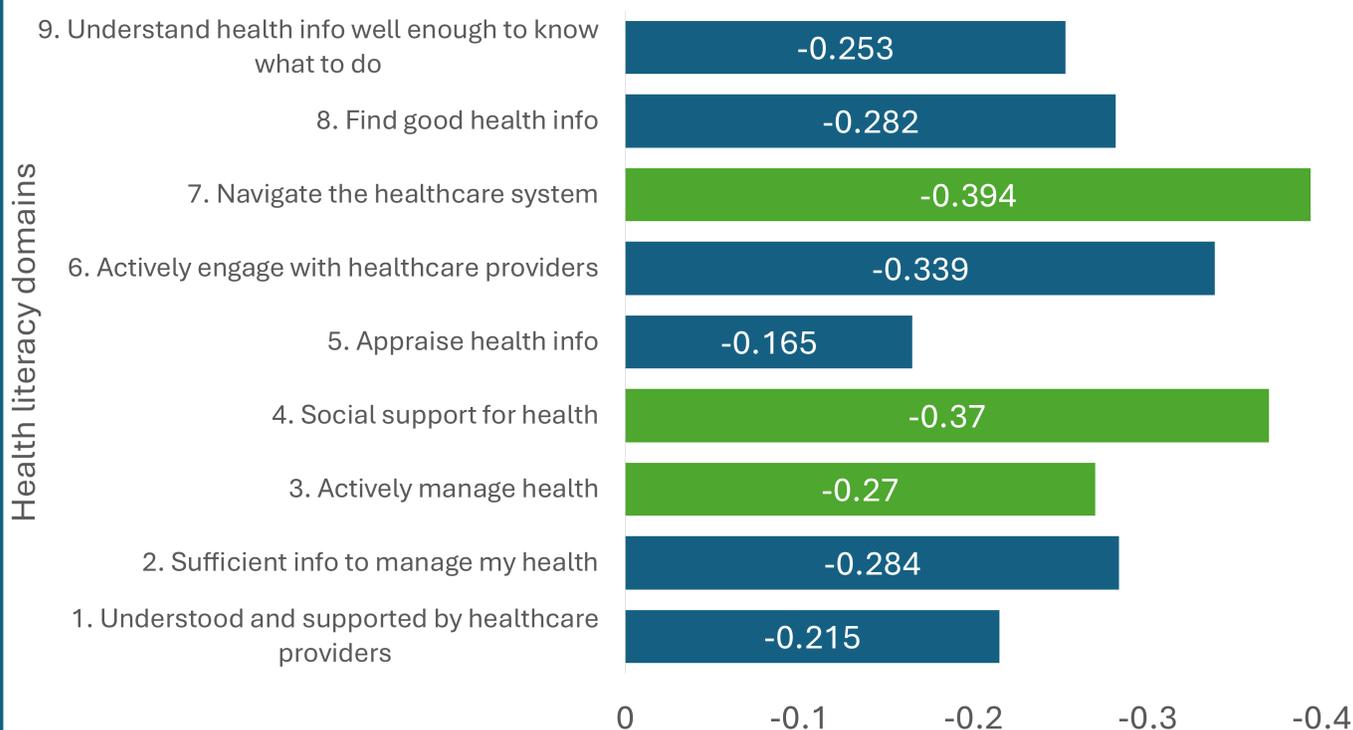
- 3-item University of California Los Angeles Loneliness Scale
- 9-domain Health Literacy Questionnaire

Analysis:

1. Spearman's rho correlations
2. Linear regression (controlling for age and gender)

What did we find?

Figure 1. Spearman's Correlations between Loneliness and Health Literacy Domains



• **Higher health literacy** is associated with **lower loneliness** (Figure 1).

• **Regression analysis** showed age, gender and health literacy explained 23% of loneliness variances, $F(9, 554) = 18.26, p < .001$.

• **Health literacy domains** most strongly associated with **lower loneliness**:

Domain 3 ($\beta = -.22, p < .001$)

Domain 4 ($\beta = -.32, p < .001$)

Domain 7 ($\beta = -.26, p < .001$)

What does this mean?

- People entering SUD treatment with lower health literacy report greater loneliness.
- Health literacy domains reflecting *agency* and *connection* are the most strongly associated with loneliness

Addressing **health literacy** and **loneliness** within treatment settings may enhance engagement and outcomes.

What can services do?

- Integrate **health literacy assessment** and **loneliness screening** into intake.
- Build clients' skills to manage health.
- Strengthen social support for health.
- Assist clients in navigating health systems.