

PROGRAMS FOR SERVICES

Delivering Better Social Care in Community and Health Services

Loneliness is a critical issue of our time. Research on loneliness and its detrimental implications for our health and the wellbeing of communities, workplaces and schools is advancing rapidly.

We now know that a subjective sense of social isolation - that is, simply feeling lonely - is equally important to being physically isolated. Many people who feel lonely suffer in silence, as this issue is stigmatising, driven by a fear of being unneeded or looking weak, vulnerable, or inept. While addressing loneliness serves as a potent preventative strategy that combats several poor outcomes, people at the frontline may not readily recognise loneliness as a driver of other issues or may not be resourced to effectively assist.

Reducing loneliness has obvious health benefits. But the solution isn't as simple as connecting lonely people with other people; rather, it involves the establishment of meaningful connections.

The cost of loneliness on service providers

Recent studies have revealed the economic cost of loneliness to health and social care services. In 2017, the costs to Medicare in the USA arising from loneliness and social isolation were estimated at \$6.7 billion annually, while UK data suggest that the average cost of loneliness in older adults was around £12,000 per person, over 15 years.

In the UK, community needs were reflected in the burden seen in primary care – on a daily basis, it is estimated that around 76% of family doctors see between one and five patients who are lonely.

These findings suggest that frequent contact with GPs and other health care providers may be more directly related to the experience of loneliness. The increased use of health care services by people experiencing loneliness could be providing the social connection and support that is felt to be missing.

Gain the skills and confidence to tailor your service to address loneliness

A Conceptual Model of Loneliness

Loneliness is costly to services and increases service utilisation across industries. Now is the time to be innovative and move beyond simply addressing social isolation in service provision.

Drawing on the latest research on loneliness, a *Conceptual Model of Loneliness* is used as a tool to help service providers offer targeted social care. By the end of this two-hour workshop, you will gain the skills and confidence to tailor your service to address loneliness, including identifying individual needs, preferences and access to resources, risk factors, and tiered solutions.

A PROGRAM FOR SERVICE PROVIDERS

Addressing Loneliness in Services Workshop

How does it work?

The program will draw on the latest evidence-based research to upskill participants to better assist vulnerable individuals experiencing loneliness.

The workshop adopts a positive psychology approach which has been shown to be effective in reducing loneliness as it builds one's capacity to develop and maintain healthy relationships. Bespoke and branded resources are included to support your learning each step of the way.

Who is this program for?

This program is targeted at community and health care providers who assist vulnerable individuals at risk of loneliness.

A trusted team of experts



Dr Michelle Lim
Clinical Psychologist

This program is designed and facilitated by Ending Loneliness Together's Scientific Chair and Australia's leading expert on loneliness, Clinical Psychologist Dr Michelle Lim.

Practical tools to create meaningful connections in support services

In this two-hour workshop, you will receive practical information and strategies to understand and develop stronger social ties and connect across remote locations, including:

- **What is loneliness vs social isolation?**

- **Why is loneliness bad? Understand the implications on health**

- **What are the risk factors of loneliness?**

- **Deliver better quality social care, as opposed to just care**

Enquire Today

Email · info@endingloneliness.com.au