

Circles of Connection

**Final Project Report
July 2023**

One Door Mental Health

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Executive Summary

Relationships are the foundation of good lives. Between January and June 2023, One Door Mental Health (One Door) collaborated with subject-matter expert Meredith Coote on a demonstration project, 'Circles of Connection', funded by the NSW Mental Health Commission as part of their focus on reducing loneliness and improving wellbeing outcomes.

The project implemented Circles of Support for an identified group of mental health consumers who were One Door service users. A Circle of Support is an individual, codesigned social support strategy aimed at reducing loneliness and social isolation in individuals. Funded supports were scaffolded with informal support.

The Circles of Connection Loneliness Project has centred around people who experience severe and enduring mental illnesses. It has been unique in its focus on not trying to 'fix' loneliness, but about helping people to heal, to become whole, to understand they can belong again, and learn to make changes to sustain their own connections into the future. This strategy addresses the aetiology of their loneliness from a person-first approach, by trying to understand their experiences and journey of their lives and relationships which brought them to this state of loneliness, and to sit alongside them to reconnect them to people, places, and things that matter.

"We can remove a couple of life's building blocks and still stand tall, but if we withdraw the relationships that underpin us, we topple over. Relationships – the simple bonds between us – are the foundation of good lives."

Hilary Cottram, Radical Help¹

The Project focused on:

- Reducing loneliness through working to understand what is important to people and increasing connection to people, places and things that matter.
- Facilitating unique lives lived well, being responsive to the whole person, their choices and all the factors that impact on their wellbeing.
- Focusing on people's strengths, resources, skills and assets so that each and every one of us can thrive.
- Supporting people to utilise and enhance their existing support networks so that people are supported in the face of adversity
- Including creating connections to as many people as possible, using the principles of hope, self-determination, agency, inclusion and choice.
- Weaving lasting informal weak and strong connections and friendships into people's lives.

This final report provides an overview and evaluation results of the Circles of Connection Project. Through the project, One Door has demonstrated significant and positive changes to the experience of loneliness and feelings of connectedness of the participants, contributing to reducing loneliness, improving mental and physical health, increasing opportunities for meaningful experiences, and enhancing quality of life.

¹ Hilary Cottram Radical Help 2018 Virago Press

Background

Loneliness, unfortunately, like mental illness, carries stigma with it. The Ending Loneliness Together Whitepaper confirms this: “One line of evidence suggests that people who experience loneliness fear how they will be judged by their community – the social stigma”² People who feel lonely and disconnected from others are often ashamed to admit it.

People facing mental health challenges, along with their families, often feel deeply affected by the stigma they encounter. As a result, they hesitate to disclose their struggles to friends and neighbours. This hesitation causes friends and acquaintances to drift away, either because they don't understand the situation, are unsure how to respond or the person hasn't reached out to ask for assistance. This appears to occur despite the fact that many individuals themselves, or someone among their friends or family, may experience mental illness.

Maintaining strong connections with friends, family, and the community plays a crucial role in helping reduce loneliness and assisting people to stay mentally and physically well. Such connections reduce the likelihood of the isolation and lack of support which can further exacerbate an episode of mental distress.

Dr Vivek Murthy, US Surgeon General, in his book “Together”³, identified three types of loneliness:

1. **Intimate, or emotional, loneliness**, the longing for close confidante or intimate partner.
2. **Relational, or social, loneliness**, the yearning for quality friendships and social companionship and support.
3. **Collective loneliness**, the hunger for a network or community of people who share your sense of purpose and interests.

These dimensions together reflect the full range of high-quality social connections that humans need in order to thrive. The lack of relationships in any of these three dimensions can make us lonely, which helps to explain why people may have a supportive parent or spouse yet still feel lonely for friends and community.

As more people with mental health issues, and often their families, solely rely on mental health services, their connections with the wider community weaken. This is an issue that can be addressed differently. Instead of viewing mental illness as a matter solely handled by professionals, leaving those affected feeling excluded, the Circles of Connection project took a different approach of reinforcing intimate, relational, and collective connections through focusing on identifying and building both weak and strong ties in a consumer's life (see Fig. 1) through the establishment of a Circle of Support.

² Ending Loneliness Together [Whitepaper](#) Nov 2020

³ Vivek H Murthy, 2020, Together: The Healing Power of Human Connection in a Sometimes Lonely World, Harper Wave

What is a Circle of Support and how does it address loneliness?

A 'Circle of Support' is an intentional gathering of individuals of a consumer's choosing, who offer friendship and support to them, with the primary objectives of reducing their loneliness, safeguarding their interests, and supporting them through their mental health challenges and aspirations for the future. The Circle typically includes family, friends, community, and neighbours. To create and grow the Circle, they also include dedicated staff facilitators, who collaborate to help the individual identify and achieve their desired goals and changes in life (Sanderson, 2015).

Hilary Cottam, in Radical Help⁴ believes our logic is wrong in our current welfare systems: "assess me, refer me, manage me". The desired outcomes of Circles require a different logic - we need to foster a set of capabilities so that each of us may thrive, ensure we are supported in the face of adversity, include as many people as possible, and measure change by our sense of freedom, purpose, having something to give and our connections to each other.

A key aspect of Circles of Support is their explicit focus on identifying and nurturing the participant's strengths, capabilities, and interests, as well as those of the supporters involved in the Circle. Moreover, the literature emphasises that Circles of Support are grounded in a rights-based approach, aiming to support individuals in exercising their right to a dignified and meaningful life. The goal is to enhance social inclusion by weaving new connections and supportive relationships with others, seeking people, places and things that matter and strengthening existing connections with purpose. In essence, Circles of Support serve as a platform to enable individuals to thrive and be an active part of their communities, thereby reducing loneliness and increasing connection.

The outcomes of this strategy can include:

- **Improved mental health:** Having social support and connections with others has been shown to have a positive impact on mental health and well-being, including reducing symptoms of loneliness, depression, and anxiety.
- **Increased social skills and confidence:** Participating more in community and building on both weak and strong connections with others can help people living with mental health concerns develop and improve their social skills, such as communication and interpersonal skills, and increase their confidence to participate in their community.
- **Increased opportunities for meaningful experiences:** Circles of Support can provide people with opportunities to participate in meaningful activities and experiences, such as volunteering, participating, or developing hobbies and other interests, which can help to increase their sense of purpose and fulfillment.

⁴ Hilary Cottam Radical Help 2018 Virago Press Chapter 3

- **Enhanced physical health:** Social support and a sense of connection to others has been linked to improved physical health, such as reducing the risk of chronic diseases and promoting healthy lifestyle choices.
- **Improved quality of life:** By reducing loneliness and social isolation, individuals who develop a support circle and increase their connection with community may experience an overall improvement in their quality of life, including increased happiness, inclusion, and a sense of belonging.

Building abundance in people's lives is the main objective of a Circle of Support, however this work takes time. The Circle starts with what you have and what you can do and builds from there. It is open, and the greater the number of relationships, the stronger the Circle. Connections to paid services and workers only may not increase someone's sense of worthiness or reduce their sense of loneliness. To experience love, joy and hope, the emotions required to sustain change, people need others, which is why a relational approach was the one chosen for this project.

"With the capability approach based around relationships, social workers are not supposed to give answers but to stand by people's side and support them to develop their capabilities"⁵

Implementation Strategy

Project Goals

The Circles of Connection project was designed as an agile 'test and learn' activity with a small number of selected mental health consumers.

The project had three main aims:

1. To positively impact the quality of life and experience of loneliness for people living with mental health concerns.
2. To build the capacity of selected One Door staff in the practice of Circle facilitation and learning, through codesign, to create intentional connections for people in their communities.
3. To support people from diverse backgrounds to start to expand both their weak and strong community connections, creating more intentional informal and increased safeguards by the establishment of a Circle of Support.

This project is strategically aligned with the One Door's 2022-2024 Strategic Plan, one priority of which is, *"Enhancing Our Community: Developing innovative services and research to improve the experiences and recovery of people living with mental health challenges and their carers"*.

⁵ Hilary Cottam 2022, Design for Relationships, not for solutions. OUI SHARE magazine.

Project Deliverables

The Circles of Connection project aimed to

- Train, coach, and mentor three existing One Door staff (including one Peer Worker) to become Circles of Support facilitators as an augmentation and enhancement of their current skillset and existing work. Selected staff were ideally to be from culturally and linguistically diverse backgrounds, including, if possible, an identified Aboriginal or Torres Strait Islander staff member. Other diversity indicators included identification as LGBTQIA+.
- Deliver Circles of Support for an identified group of consumers already receiving services from One Door. The Circles were to be facilitated alongside existing programs operated by One Door, with a focus on sites in regional NSW and Western Sydney.

Relevant outcomes were to be used to measure the impact of Circles of Support for the participants, including the UCLA 3-item plus 1 Loneliness Scale. Project Status reports were provided to the NSW Mental Health Commission in April and June 2023.

Approach

The approach to implementation was twofold:

1. To focus on **strengthening workforce capacity** by delivering evidence-based education, training, resources, and practical solutions. This is one of the four key calls to action in the Ending Loneliness Together Strengthening Social Connection to Accelerate Social Recovery Whitepaper⁶. The tools staff members mastered during the project created new habits of practice. The project provided them with the opportunity to explore and practice things to support the growth in their consumers' capabilities to help themselves in the future through embedding other people back into their lives who would help them too.
2. To **build the capacity of consumers** to understand the need for connection and support and weave informal circles of support around them. This occurred by using tools designed to facilitate action and support practice of the consumer to understand that relationships and connections will help them thrive.

Strategies

To achieve these project goals and support the chosen approach, the project implemented the following strategies:

A. Training

To carry out this person-centered work, staff facilitators and Circle members were trained and coached to use person-centred tools. This enabled them staff to work

⁶ Ending Loneliness Together [Strengthening Social Connection to Accelerate Social Recovery](#) July 2022

differently, listen without agenda and activate participants to consider and practice new things and new ways of thinking about connection.

B. Tools

Various person-centred thinking tools were used during project implementation and were designed to support practice and facilitate action (see Appendix). The aim was for One Door to trial these tools and embed them into future practice.

To reinforce intimate, relational, and collective connections consumers were supported to focus on identifying and building both weak and strong ties in their life (see Fig. 1). We need both, those people who remember us when we order a coffee, people who recognise us from a church or regular events whom we can have a chat to, and those we can rely on in times of need.

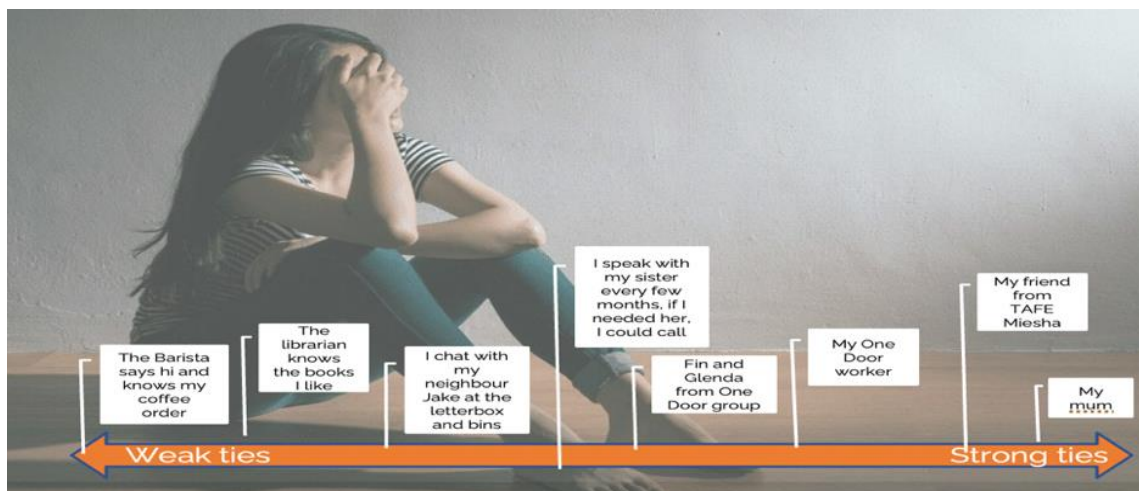


Fig 1. An example of the weak and strong ties identified by a project participant.

The Inclusion Web

The Inclusion Web⁷ was one of person-centred tools utilised in the project. The Inclusion Web to is a tool to:

- Help you to get to know another person better (or yourself), by asking really good questions and recording what you learn on a visual chart (see Fig. 2)
- Help you to plan and build an included life full of positive roles and relationships in the wider community beyond the health and social care system.
- See at a glance how things have changed over time, by repeating the exercise and comparing the charts.
- Generate numbers and apply statistics to find out if your efforts have been effective.

Examples of the inclusion web for Circles of Connection project participants can be found in the Appendix.

⁷ <https://www.ndti.org.uk/the-inclusion-web>

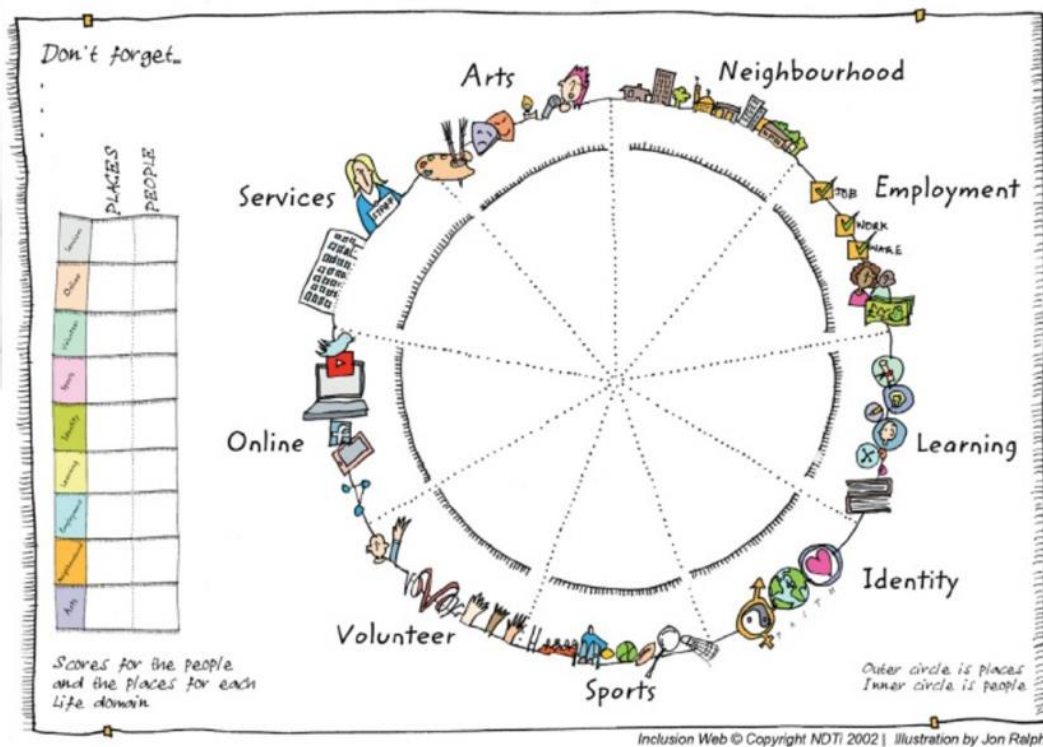


Fig 2. The Inclusion Web tool

Methodology

Significant relationships of trust are built through circles, one connection and reconnection at a time, building community through service to each other, through building a village of supports. Therefore the tools focused on learning about what matters to someone; what their previous connections, passions and occupations were; about the barriers to current connection and reconnection; learning to remove a 'service solution' lens and look outward to family and community for solutions to loneliness.

This process of sitting 'alongside' Circle participants and using these tools to help them develop solutions built confidence and encouraged them to reach out to identified connections, rarely with a refusal of reciprocity. Staff worked to strengthen people's capacity for dialogue and requests for support and friendship. In times of ill health and confusion, when people need additional support or when they're uncertain, we need people to talk with, people to listen and Circles of Connection facilitated this process, meeting consumers where they were and enabling freely flourishing relationships to meet this need.

The Circles of Connection Project has, at the 6 month mark, begun to firmly support people who have experienced enduring mental illness to look differently at their lives and to consider that rather than valuing their independence, their ability to not rely on others, and being able to 'do' everything alone, to instead start to value belonging and connection, and the benefits of asking for support from others. This has involved supporting consumers to become more comfortable asking for help and also thinking of what they could offer in exchange, as a 'service', a strength, or a helping 'hand', to

others. Supporting consumers to identify that there were people in their lives and community who knew them, who could be relying on them for the same purpose is an important component in reducing loneliness.

When we help other people, it reminds us we have value to bring to the world and brings us self-worth and self-esteem. “Service” doesn’t have to look like volunteering, it could be just reaching out to a friend, stranger, or colleague. It’s in the small actions that make a difference. This practice tested previous belief systems of consumers (often lessons learnt through protracted periods of mental ill health), which began to alter as project participants started to learn the benefit of leaning into others and rebuilding trusted relationships, enabling them to remain more upright, feel better, feel safer, and more fulfilled and ultimately reduce their sense of loneliness.

This taking action and capacity building - the doing and practicing - helps to build a sense of agency. It also highlights the role of unpaid, informal connections in the lives of lonely people. Many consumers we worked with had minimal if no informal connections to others, and One Door staff could be the only people they connected with regularly. Relationships with family, friends, neighbours, and acquaintances, based on personal ties rather than payment are referred to as informal social networks. This kind of network provides a range of emotional and practical support that might also extend to assistance to advocate or manage formal relationships in partnership with organisations or service systems (Horowitz, Citation 1985)⁸.

Evaluation

Process Evaluation

	Staff Facilitators	Consumers	Barriers/Challenges
Primary Strategy	<p>Introducing staff to person-centred thinking tools through training and practice on each other.</p> <p>Introducing staff to Circles of Support methodology and tools.</p> <p>Providing a professional structured process to introducing formality into existing informal networks.</p> <p>Removing the ‘service lens’ as a solution to loneliness.</p>	<p>Providing information to consumers about the Circles of Connection model and application.</p> <p>Allocating time, seeking permission and consent.</p> <p>Undertaking UCLA Loneliness Scale and Inclusion Web initial baseline measures.</p>	<p>Reflective practice outcomes for staff -Staff processing their own information gathered through person-centred tools and need for increased support themselves.</p> <p>Due to the nature of mental health recovery journeys, the project was impacted by a deterioration in mental health of 2 consumers participating.</p> <p>1 consumer at severe risk and was referred to appropriate step-up services and exited from the One Door program.</p>

⁸ Horowitz, A. (1985). Family caregiving to the frail elderly. In D. Maddox (Ed.), Annual review of gerontology and geriatrics (pp. 174–246). New York: Springer

	Staff Facilitators	Consumers	Barriers/Challenges
	Identifying consumers who were interested in participating in the Project.		
Activities	<p>Preparation phase: Practicing and being coached in using Person Centred Thinking tools, Community Connection tools, functional relationship mapping, support in invitation process and agenda planning.</p> <p>Facilitation Coaching: Coaching for facilitation of introduction circle. Facilitation of first meeting. Facilitation and co-facilitation in meetings (this may take up to a year of Circle operation based on mental health of consumer) Support, guidance, and supervision for facilitator upon request during the first year.</p>	<p>Preparation phase: Depending on consumer's health, commencing new discussions using tools-relationships maps, Good Day /Bad Day, network mapping investigation of the individual's existing informal networks.</p> <p>Foundation Circle: Commencing the first Circle meetings, getting to know the person and building relationships with unpaid members and facilitating meetings.</p> <p>Building the Circle: Getting to know the person and their social networks, strengthening existing relationships, developing Circle purpose and facilitating meetings.</p>	<p>We needed to recommence with several new consumers.</p> <p>One consumer needed to do all connection work outside the family home, so her connection intervention commenced with an identified activity.</p>
Program input: Professional knowledge and skills	<p>Knowledge of mental health and mainstream service environment, person-centred planning, group facilitation and Circles of Support model development and delivery.</p> <p>Communication skills, sensitivity and respect for diversity.</p>	Awareness of their loneliness and a desire to change their circumstances, seek more support and scaffold their lives with more connection	<p>The 'service lens' of staff had to be coached and altered.</p> <p>The change in role of staff.</p> <p>Consumers realising depth of loneliness.</p>
Program input: Time and energy	<p>Development of a Circle of Support requires preparation phase 10- 15 hours of professional development and preparation.</p> <p>2-3 hours (including prep) for each meeting a month in the first year of operation.</p> <p>This is an increase in client /consumer contact, however if tools were embedded into practice, and training in person-centred practice as</p>	<p>Commitment of consumers to the new process took time.</p> <p>As mental health consumers, it was important to ensure adequate opportunity for discussion, that the person was mentally well, and their circumstances were ideal to meet.</p>	<p>Commitment of time, resources, and availability of staff while balancing other case load/ service delivery.</p> <p>Increase in time spent with consumers, although more intentional and highly relevant information was extracted for use in solutions to add to existing wellbeing plan.</p> <p>One Door has a high proportion of staff who have identified that they have lived experience of mental health</p>

	Staff Facilitators	Consumers	Barriers/Challenges
	part of induction, this input would minimise.		<p>concerns themselves or caring responsibilities related to the mental health concerns of others, which we view as positive and important expertise in supporting others in the context of their work.</p> <p>As our cohort of staff selected included those with lived experience, we also had several delays due to mental ill-health of staff.</p>
Program input: Personnel	<p>5 staff originally trained, however some staff turnover and program changes occurred during the project.</p> <p>1 staff member experienced a deterioration in their own mental health close to project completion, which impact project timelines.</p>	<p>Consumers started having input into the One Door groups they would like to attend, commenced codesigning group sessions.</p> <p>Consumers commenced community mapping as a contribution of their skills and strengths around their own interests as well as building information maps for the regions of available free and low-cost activities which were not service-based.</p>	<p>Consumers need to be met where they are - either their need to form more weak ties and connections, or whether they require a Circle to start with.</p>
Outputs	<p>Initially commenced 5 Circles.</p> <p>3 are still running. 2 were unable to proceed due to consumers being unable to participate.</p> <p>2 Circles just commenced with new consumers.</p>	<p>3 Circles underway and 2 new developing</p>	<p>Circles take time in the mental health space, based on both consumers and staff with lived experience.</p>
Outcomes	<p>Changing role and consumer outcomes for staff – changing their role of the service in a consumer's life, more as a bridge maker and connector.</p> <p>Recognising the wider informal social networks forming for supporting people with mental illness, minimising their own stress, and feeling of responsibility for the person outside their role.</p> <p>Increased motivation, confidence in their role</p>	<p>For consumer:</p> <p>Reduced loneliness and increased meaningful connection.</p> <p>Support in recognising they have connections and are known in their communities by others.</p> <p>Identified support to achieve desirable goals: moving out of family home, securing employment in the open market, pursuing interests</p>	<p>With this chosen cohort, relationship building and network development took time, energy and long-term commitment of all involved.</p> <p>Service delivery under the roles however could be flexed in the future with some training and planning to allow for the many crucial yet unbudgeted activities such as building and maintaining relationships with the consumer and family, active monitoring and ongoing</p>

	Staff Facilitators	Consumers	Barriers/Challenges
	<p>supporting people with mental health illness and their families.</p> <p>Improved understanding of how to reach goals for consumers of increased participation in community life.</p> <p>Strengthened communication and relationships with work colleagues and with consumers and community.</p> <p>Improvements in outcomes for the consumers they support – satisfaction in supporting them to achieve their goals.</p> <p>Role in increased community understanding of mental illness.</p> <p>Active involvement and collaboration in the community to activate inclusion for people with mental illness.</p> <p>Increased opportunity for developing social capital as an organisation partnering with community.</p>	<p>and hobbies in the community, etc.</p> <p>Increased opportunity for socialising and friendships.</p> <p>Increased capacity of informal networks to provide sustainable and long-term support for their loved ones and friends.</p> <p>Increased sense of social cohesion and feeling of belonging in the community.</p> <p>Increased self-determination.</p> <p>Increased feelings of safety.</p> <p>Increased advocacy.</p> <p>Increased capacity to request meaningful support.</p> <p>Increased wellbeing & self-worth.</p> <p>For family:</p> <p>Honest conversations and wellbeing planning.</p> <p>Increased social capital.</p> <p>Increased family support.</p> <p>Increased wellbeing and self-worth.</p> <p>For Circle members:</p> <p>Enhanced understanding of mental health and fluctuating needs.</p> <p>Increased capacity of family and friends to provide meaningful support.</p>	<p>support for groups as they evolve over time.</p>

Outcome Evaluation: Project Deliverables

The collective nature of the Circles of Connection project and the sense of community reported by the people involved were associated with feelings of decreased loneliness, increased connection, improved confidence, respect, reduced burden, and an increased sense of belonging and wellbeing. Some families found Circles a safe place to express emotions about their experiences and an environment in which to collaborate and problem solve with others.

For community members:

Circles seemed to build the capacity of communities to be more inclusive and improve their understanding of what may have occurred for the person they were supporting. Circle members shared their experience that their involvement in Circles increased their community understanding of the challenges faced by people with mental ill-health and also provided an opportunity to share their own challenges and feelings of loneliness so they could help each other.

Relationship building and network development takes time, energy, and long-term commitment of all involved, allowing for many crucial yet unbudgeted activities such as building and maintaining relationships with the focus person and family, active monitoring, and ongoing support for groups as they evolve over time.

For participants:

Circle 1: David, 67, proud country family man.

David's Circle was facilitated by a young, diverse mental health worker in the regional area of the Southern Highlands. David was lonely, isolated, and overwhelmed with his significant support needs that were not being met, despite several services being engaged. Through working with David implementing the Circles framework, David's aged care package is now being appropriately utilised to meet David's needs. The Circle assisted him to understand what his rights and entitlements were, what needs were not being met, and which services could meet them. It also identified the support he required to advocate for these changes.

David had lost his desired strong connection with his family and friends due to a feeling of shame and declining physical and mental health. The facilitator supported David to commence a Circle with his family to share his challenges and request assistance. His family were unaware of his needs and their role in supporting him. The also shared how lonely some of them had been feeling and their own desire and need to reconnect.

David's capacity has increased significantly, he now self-advocates, has recently reconnected with local friends and his children who are now a significant component of his support network and visiting regularly to assist him. David has been made accountable for communicating more with his daughter which highlighted to David that he is both wanted and needed by his children. Over a period of 6 months David now has a variety of weak and strong ties, has reconnected with friends and family, and now finally receives the support that fit his needs, and not what's convenient.

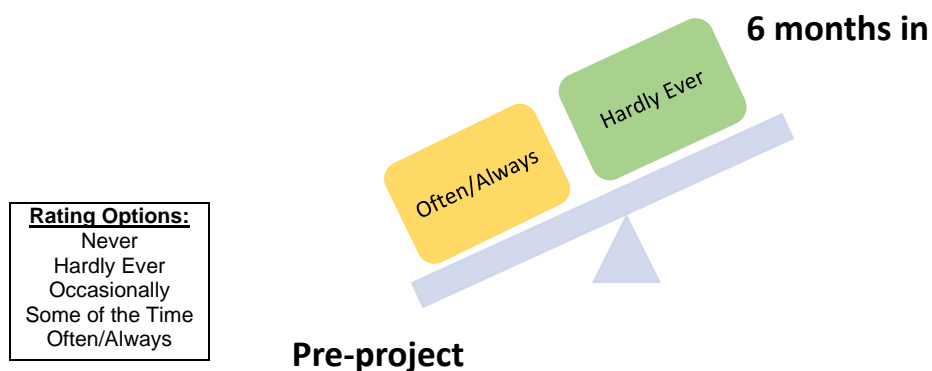
David: UCLA Loneliness Scale
February 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

6 months later: July 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

Single Item Measure David : How often do you feel lonely?



Circle 2: Alecia, isolated, lonely young, lived with family and made to care for young nieces and nephews with no time allowed outside the home.

Alecia initially said she had no interests and no time to start any connections due to commitments to her family. After using the person-centered tools, one interest which was identified was an interest in YouTube. Delving deeper, this interest entailed an actor that Alecia enjoyed watching. Upon investigation into what the actor had starred, Alecia found out that he had been in many theatre productions.

The facilitator assisted Alecia to look around her community for theatre groups and they found a local theatre (Melting Pot) who were putting on small productions. Alecia agreed to attend a talk by a director which introduced her to an amazing, supportive community. Alecia started attending sessions, taking supper sometimes. She stated that she felt valued, Alecia not judged, not belittled, and just felt safe. The theatre encouraged Alecia to audition for the local annual production of "The Rocky Horror Picture Show". Alecia auditioned and scored to part as a "Kook". Through regularly attending rehearsals Alecia formed connections and friendships with other cast

members and enjoyed spending time with them. Alecia played her parts in front of a sold-out crowd and absolutely loved it, and even said for the first time since she was “proud of herself”.

This outcome was a result of exploring Alecia’s interest in YouTube, as well as gaining the benefit of finding, through the Circles of Connection tools, her own people, places and things that mattered to her. These were, for Alecia, importantly away from her family and outside her immediate community, a space she created and owned, a reason to leave the house without having to justify, a reason to be her own individual in an incredibly supportive community. These connections are commencing a Circle with Alecia to support her in her next decisions to look for paid work.

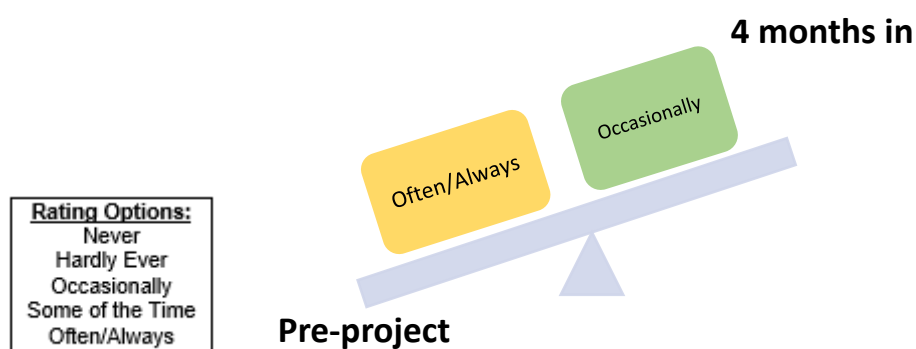
Alecia: UCLA Loneliness Scale
February 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

6 months later: July 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

Single Item Measure Alecia : How often do you feel lonely?



Circle 3: Ms JJ, a 50-year-old, artistic, capable, and caring woman who was involved with caring many people around her to the expense of her own wellbeing.

Ms JJ daughter has 2 children with special needs whom she left with her mother with little notice. Ms JJ was also a regular carer to other friends with little reciprocity. Although caring for others can strengthen our sense of purpose and meaning, as it shows us that we have the ability to make others' lives better and creates a positive feedback loop, it can also be taken advantage of if no reciprocity occurs. Ms JJ was a late participant of the program due to the hospitalisation of 2 of the facilitators' recruited consumers.

In a period of 3 visits, Ms JJ started to imagine a different life, one where she could use her past interests and skills as an artist, a dancer, perhaps volunteering somewhere which would relieve her from caring for her grandkids so much. She even decided she should move away from the burdens which were impacting her health and wellbeing. Circles meet you where you are and start to tend to the things that are important to you.

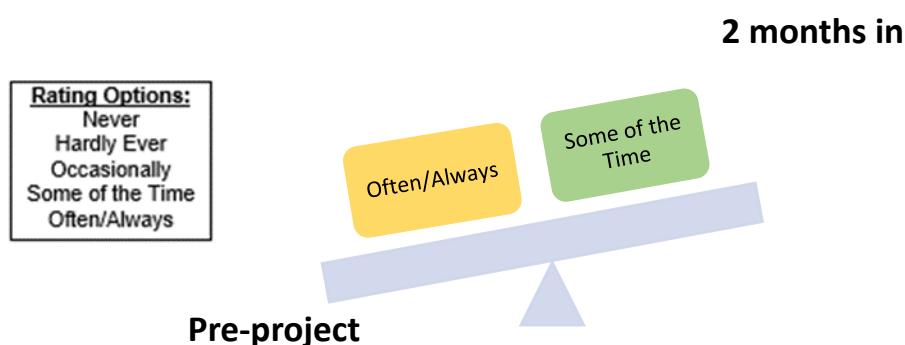
Ms JJ: UCLA Loneliness Scale
May 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

July 2023

1	2	3	4	5	6	7	8	9	10
LEAST LONELY					MOST LONELY				

Single Item Measure Ms JJ: How often do you feel lonely?



For Staff Facilitators:

Five One Door staff were trained to be facilitators of Circles. They are all keen to continue with the work and their learning and mastery of the skills and will continue to support each other. It will take approximately a year to embed the changes, managing the episodic nature of everyone's lived experience and maintain people's capacity to grow and sustain their Circles.

Sustainability and Recommendations

Practice Recommendations

The Circles of Connection framework should be embedded into the practice of staff who have the opportunity to engage with mental health consumers to ensure improved understanding, better outcomes, and a scaffolded, more supported life.

Circles enable more **integrated service outcomes**, with an opportunity to interrogate what's working and what isn't, avoiding duplication and increasing outcomes, to utilise all the available assets and supports, both paid and unpaid, to ensure the most optimum outcomes for the consumer. Circles may also assist the consumer in making decisions about different services, their quality, focus and involvement in their life, increasing choice and control.

Removing the service lens of staff is critical to reduce loneliness and to ensure all the assets of a person's life, connection and community are utilised for their wellbeing.

A **Community of Practice** is commencing with the staff involved in the project to ensure continuous improvement and staff development for Circle implementation.

Circle Champions will be selected to coach and to train other staff in person-centred Circle work and embed this into practice within existing programs and services.

Systemic Recommendations

Circles involve building a network of individuals who support and care for someone with a mental illness. These Circles can also be applied to promoting sustainability in mental health, where different stakeholders work together to create a supportive and long-lasting system. They could be expanded to:

Ensure collaboration between Mental Health Professionals: Encouraging collaboration and communication among mental health professionals, including psychiatrists, psychologists, counsellors, and social workers ensuring comprehensive and holistic care for individuals with mental health issues.

Integration of Primary Care and Mental Health Services: Promote the integration of mental health services with primary care settings. This can help in early identification and intervention, reducing the stigma associated with mental health, and providing more accessible care.

Involvement of Peers: Circles can ensure individuals who have lived experience with mental health are engaged as peer supporters or mentors. Peers can provide unique insights, empathy, and understanding, creating a sense of hope and belonging for those seeking help.

Ensure inclusion and involvement of family and friends: Engage family members and close friends in the Circle upon discharge and at other times of crisis and decision making. They play a crucial role in the recovery process and can offer essential emotional and practical support.

Community partnerships: Circles can be engaged to educate and collaborate with community organisations, schools, workplaces, and other stakeholders to create a supportive environment for mental health. This can include workshops, educational programs, and mental health awareness campaigns around the benefits of Circles of support to reduce loneliness, create inclusion and belonging.

Promote self-care and resilience: Encourage individuals to take an active role in their mental health care by promoting self-care practices and resilience-building activities such as creating and maintaining Circles.

By implementing these recommendations and creating sustainable Circles of Support, we can enhance the overall mental health care system, promote well-being, and reduce the burden of mental health challenges in our communities.

Conclusion

Throughout history, informal 'circles of support' have been an inherent part of every society. Our innate desire for connection and belonging drives us to form relationships with one another. A 'moai' is a tradition from Okinawa, Japan, in which a small group of people serve as lifelong supports for one another, in order to provide varying support from social, financial, health, or spiritual interests. It helps people feel connected and also to make critical decisions about work and family." These moai and 'circles' are just other ways to represent the bonds that tie us together in families and communities, forming the very fabric of our social structure, relationships are the foundation of good lives.

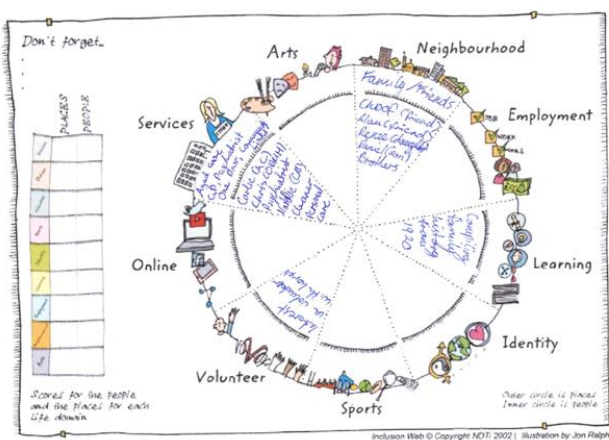
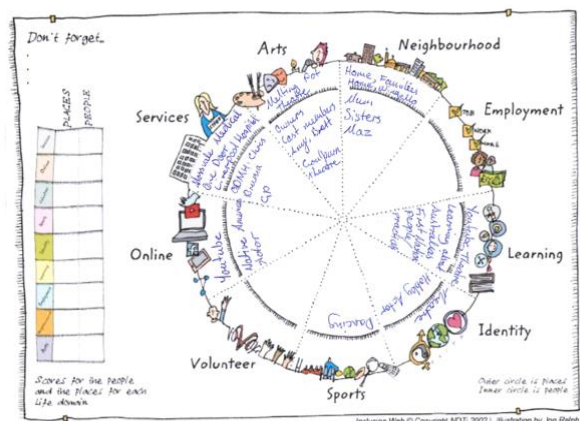
We are, however, experiencing increasing isolation from one another. Gathering our 'circles' intentionally reminds us to prioritise our relationships, directing our attention and intention towards nurturing them, ourselves, and others in reciprocity. Circles of Support are about bringing back our village, not a new program; they should embody a way of life and a thoughtful approach to maintaining our connections, emphasizing interdependence, and stressing the importance of understanding that we rely on each other to reduce our loneliness and isolation and to support our overall well-being.





One Door will continue to work towards broader implementation, embedding and continuous improvement of outcomes of Circles of Support over time, beyond the direct delivery of this project, based on lessons learned during this project and the evaluation outcomes.

References

- Macadam, A. & Savitch, N. (2015). Staying connected with circles of support. *Journal of Dementia Care*, 23(1), 32-34.
- Neill, M. & Sanderson, H. (2012). *Circles of Support and Personalisation*. Retrieved from: www.helensandersonassociates.co.uk/media/75948/circlesofsupportandpersonalisation.pdf

Examples of David's Inclusion Web, noting an increase in people, places and spaces he attends as evidence of increased connection and reduced loneliness.

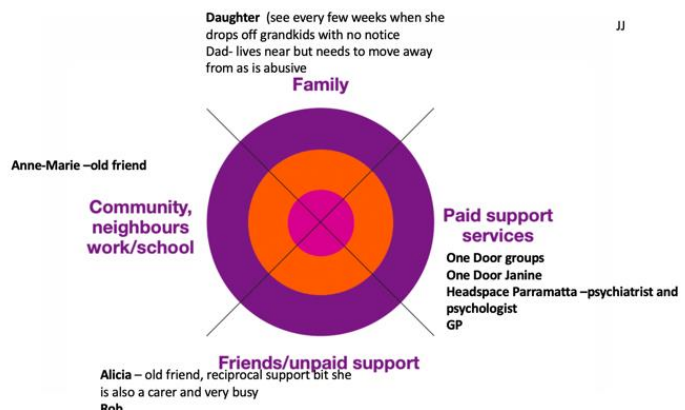
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	Mornings 	My week  Afternoons 	Evening 
Mon		Headspace - psych 1/month	
Tues		See One Door worker (fortnightly)	
Wed	One Door Group		
Thurs			
Fri	One Door Group	See <u>mum</u> (every 8 weeks)	
Sat			
Sun			See Lisa (every 3 mths <u>www</u>)

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Ms JJ's person-centred tools, including Good days/Bad days tool which helps identify what it would take to have more good days and less bad days

 Good Days	 Bad Days
Waking up in a good mood Feeling safer Knowing there is group on Getting out of house Sunny Days Being in nature Cooking Going to gym	Feeling overwhelmed Too much on Argument with dad Don't feel safe Grandkids dropped off when had plans



Community Mapping completed by staff facilitators and participant. This will be displayed at the One Door site for others to utilise and contribute to.

Southern Highlands Community Asset Map


The Southern Highlands spans from Hill Top to Wingello (67kms) with varied community assets spread throughout the region. There is little access to public transport and a paucity of services. Knowledge of available community assets are of great value.

Creative Space
 Unit 6-7/63-69 Kirkham Rd,
 Bowral NSW 2576
 0417 847 492
 Volunteer run service for people to have a space to learn art skills of all mediums, participate in social groups, or facilitate a group themselves.

Bowral Art Gallery
 1 Short St. Bowral NSW 2576
 (02) 4861 4093
 Local Art Gallery that hold low cost workshops and talks by artists and regular art competitions for all mediums of art

C3 Community Café/Pantry
 C1/347-349 Bong Bong St, Bowral NSW 2576
 (02) 4861 7460
 Faith Based Centre that holds a free café that provides food and hot drinks between 10-2pm tues-fri. C3 also provides a community pantry with frozen or pre cooked meals available, everything is no cost.

Riding for the Disabled
 is a volunteer organisation providing equine assisted activities for people with disabilities to develop and enhance abilities.
 Moss Vale – 6877232 – mossvaleridingclub.org.au



Choir SHACappella is a totally un-auditioned group who meet on a Tuesday evening, 7.30 – 9pm in the NSW Southern Highlands to let their voices out in an atmosphere of fun, joy and harmony.
<http://www.singingtheself.com/groups/>

Melting Pot Theatre
 Soldiers' Memorial Hall, Railway Parade, Bundanoon, NSW 2578
 0403 135 873
<https://www.bca.asn.au/melting-potTheatre> that holds a crash test drama, annual major production, monthly theatre club as well as regular workshops and talks by people in the industry.


Moss Vale Community Garden
 Railway Street, Moss Vale, NSW, Australia, New South Wales
 0414 545 735

Southern Highlands Pink Drinks
<https://www.facebook.com/groups/995238683917764/>
https://www.instagram.com/pink_drinks/
 SHPD are a LGBTQI+ Group that has existed since 2008. SHPD Meet up monthly at different venues throughout the Southern Highlands for people that identify as part of the LGBT community in this isolated region.

The Sewing Club
 Exeter 0248834255

Bundanoon Ukulele
 Tuesdays at 7pm, Soldiers' Memorial Hall.

Moss Vale Mens Shed
 18 Robertson Rd, Moss Vale NSW 2577
 The Moss Vale Men's Shed provides a welcoming and inclusive environment in which all men in the community can congregate to share life experiences and volunteer their individual skills. The Mens Shed aims to reduce isolation for men in the southern highlands.



David's What's Working and What's Not

What's Working and What's not Tool

The version sorts what is working and what is not from different perspectives of everyone involved to identify a way forward.

Perspectives	What's Working	What's not
David	One Door Support GP	<p><i>I'm Lonely</i></p> <p><i>Not receiving adequate assistance from services like My Aged Care</i></p> <p><i>I can't get to appointments</i></p> <p><i>I don't understand how services could assist me better</i></p> <p><i>I'm not seeing family enough due to distance and their commitments</i></p> <p><i>I feel at risk at home</i></p> <p><i>I have Health needs which are unattended to- no transport or anyone to advocate for me</i></p> <p><i>I'm feeling Disconnected from my friends and my past and community</i></p> <p><i>I have big decisions to make but need support to make them</i></p>
Family/Partner	One Door Support	<p><i>We're Worried about our dad , his declining mental and physical health/stress</i></p> <p><i>Not seeing our parents enough due to 2 hour travel and kids etc</i></p>
Worker	One Door Worker Family are in contact David has reached out Would like to help him	<p><i>Worried about level of loneliness, risk at home, decision support required, health needs, isolation, mental health</i></p>
Friends	Has reached out now Will come and pick up and drive Will be in circle	<p><i>Lack of contact or reaching out for help</i></p> <p><i>Worried about loneliness</i></p> <p><i>Health issues</i></p>