

**TESTING PHASE RESULTS:** Suggested changes and additions after testing teaching materials.

## 1. General comments

- Edit the text in each session to reduce it and ensure it is in simple easy to translate language.
- Re-order the sessions so that Session 3 (Societal influences and effect of force and trauma and trauma-informed practice) is later in the course and self-management is earlier in the course.
- Increase the number of sessions a little to enable some of the sessions to be split in two.
- There should be a preparatory session where students meet each other, find out more about the course and how it will be delivered, and spend some time looking at how they will manage their wellness during the course.
- Each session should start with a short, managed time where each student shares their most important learning from the previous session. Record these.
- Should we be seeking to measure recovery during the course? Pro mente has formulated answers to be used and had suggested this be trialed in the second pilot.
- Could we develop a manual that could be used by trainers and also has sections that can be lifted to form a student manual? Feedback from the students on the pilot course was that they would like a manual so that they could read in their own time and also possibly do some individual exercises.

## 2. Review of sessions

### **Session 1: Introduction exercises: icebreaker, learning environment and feedback**

- More time on group dynamics. Add an exercise for the group to develop their own group agreement.
- More clarity on the learning environment. In particular emphasise that it is a learning and personal development process. Be clear about the role of the trainer as a facilitator.

- Discuss difference between therapy and learning and ensure that students have access to emotional support if they need in.
- Have a short session at the end which introduces relaxation e.g. Mindfulness.

### **Session 2: Development of recovery approach and key concepts in recovery**

- Be mindful of group dynamics in this session and seek to use approaches which build confidence in group discussions and trust between students. Start with a reflection on how session 1 felt.
- Identify someone local to tell their own recovery story. If not possible introduce recovery using stories in own language. It is good to hear other stories such as Pat Deegan's but it would be more powerful to hear stories from own area/country as well.
- Look at the role of practical things in recovery – food, housing, finances, exercise.
- Add exercise which uses recovery concepts and/or stages of recovery to look at own story.
- Consider place of session 12 Reflecting on personal experience – should some or all of session 12 be after this session 2?

### **Session 3: Societal influences and effect of force and trauma and trauma-informed practice**

- This has been a challenging session and there has been a lot of resistance in some groups. There was a general consensus that despite this the session was needed but that it would be better to have it later in the course. Suggestions include after session on strengths based approaches and before moving into formalised peer support.
- Despite agreement that there needed to be a session on trauma there were some who disagreed with aspects of the session. There was a comment that the section on 'Seclusion, force and restraint and the impact on recovery' needed reformulated but no suggestions as to how and one group suggested that the table on p45 about behaviour interpretation should be removed.

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- There was a lot of discussion around this session and agreement that it needed to be revised. These included:
  - More time to discuss and clarify what is meant by trauma and what it means personally
  - Focusing on the normalization of the concept of trauma
  - Suggested - as well as looking at societal influences which can be seen as negative also build in time to consider 'what type of world do I want to live in?'
  - Looking at personal and societal trauma separately
  - Looking at trauma first and then stigma afterwards.
  - Suggested - splitting it into two sessions; one focusing on trauma, societal influences, force, stigma and one focusing on trauma-informed peer support.
- Need to ensure that there is sufficient discussion/consideration of trauma before exercise 3.2 Thoughts, feelings and behaviours around trauma. Possibly look at an exercise which helps students to consider different types of trauma and judgments about what is and isn't trauma before exercise 3.2.

#### **Session 4: Understanding peer support**

- This should be earlier in the course – consensus around it being session 3 after recovery concepts. It is important to introduce peer support as early in the course as possible.
- This is a very important session so there may be a need to remove some content to allow for more time to focus on what is peer support and its relationship to recovery. It may be possible to look at how the content around peer support concepts can be dealt with between this session and the following one on the Peer Relationship.
- Exercise 4.1 is a little vague – revise the exercise to make it a little more structured and invite people to consider peer support in their different roles/relationships e.g. student, team member
- A video of a peer worker talking about their role to provide a basis for discussion and exercises around the peer support and recovery and concepts of peer support.

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- Suggested that there be a role play in this session which focuses on demonstrating/practising the concepts in peer conversations rather than a series of short exercises.

### **Session 5: Key concepts of peer support and peer relationship**

- Spend more time explaining and considering Karpman's drama triangle. Possibly use the role play in 5.5 as an introduction then consider the power issues then re-run the role play or a similar one to provide students with an opportunity to put learning into practice. This would require providing two or three scenarios rather than one.
- Relate the drama triangle and power dynamics clearly back to the peer concepts, particularly what mutuality in the relationship really means in practice.

### **Session 6: Working with the effects of labelling**

- Consider using pictures to open up discussion around assumptions, stereotypes and stigma. Another option would be to use cards with words or phrases as a visual way of presenting labelling.
- Could some of the course content about stigma and stereotyping be brought into this session? This may work if the trauma session is to be later in the course.
- Exercises 6.1 and 6.2 should be revised to allow for more of a focus on how labelling is pervasive and how it works in practice.
- Exercises 6.1 and 6.2 should be combined to free up time for more time to be spent on the importance of language.
- Exercise 6.4 The Importance of Language works well but needs more time for students to explore this to be fully effective.
- Could the concept or idea of the 'dangerous gift' be used in this session to explore some of these issues?
- Exercise 6.5 Role play doesn't work very well as it doesn't properly address issues around labelling and language. Consider revising or developing a role play focused on labelling, use of language, stereotyping.

### **Session 7: Review and evaluation**

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- This worked well and gave students the opportunity for one-to-one meeting with tutors to discuss their learning and experience so far.
- Some students used the time at the end of each session for their portfolio better than others. It may be worthwhile having something on reflective practice in the first or second session to help them with their portfolio.

### **Session 8: Strengths based approaches, resilience, role modelling and hope**

- Use videos (YouTube, online) to give examples of resilient people for exercise 8.2.
- Exercises 8.1 Who am I? and 8.2 Examples of resilient people could be shortened a bit. This would free up time in the session for an exercise or role play which provided an opportunity for the students to put learning about strengths based approaches into practice.
- Combine aspects of exercise 8.1 and 8.3 The role of resilience by having an exercise that looks at Who am I and also how your personal experiences have helped to develop these strengths.
- Add a practical session which focuses on the role of the peer worker in helping people to identify their strengths. Suggested a goal setting exercise using role play.

### **Session 9: Formalised peer support, considering boundaries, supervision and goal setting**

- The content in this section is particularly long and needs considerably edited to be accessible.
- The content and exercise on supervision are not very useful for people not in work as peer workers. Consider revising to be a bit more about reflective practice and how this can be used to increase the effectiveness of supervision and develop practice.
- Exercise 9.1 Boundaries in personal relationships and 9.2 Clarity in boundaries should be combined.
- Exercise 9.4 is too simple for a role play. It could be combined with exercise 9.3 Boundaries – scenarios.
- Need to develop a role play for this session. Suggestions – one focusing on boundaries in the peer relationship or one focusing on how peer workers can use

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reflective practice, supervision and goal setting to put learning from challenging situations into practice.

- Material and exercise on ethical code in session 11 could be moved into session 9.

### **Session 10: Effective communication and working with risk**

- It may be better to have the content on effective communication skills nearer the beginning of the course.
- Exercise 10.2 doesn't work in its current form and is not a role play. It needs more explanation and lead in or a much simpler approach. However introducing the effective communication skills and providing an opportunity to practice them is extremely important. Therefore this section should be revised not omitted.
- Need to devise an exercise or exercises that allow for the introduction of the effective communications skills and give students an opportunity to discuss and practice them. This should include non-verbal communication and recognition of emotions.
- This session doesn't feel very cohesive. There needs to be more of a lead in from communication skills to working with risk.
- Role play 10.3 is not a role play as it is a script rather than a scenario. It could be reworked as a role play or be a group exercise.
- Exercise 10.4 could become a role play scenario with a little development

### **Session 11: Self-care, safe practice and self-management in peer support**

- Content on ethics could be included in session 9. This would give more time to explore self-care and self-management in peer support.
- The role play should be revised as it is more of a script than a scenario.
- Add an exercise around working with other professionals and how to challenge their understanding of peer roles in a way that promotes self-care.
- Suggest change title of 11.4 Organisational culture to Organisation strengths.

## **Session 12: Reflecting on personal experience: Understanding the process of change**

- It would be good to have something on personal narrative at the beginning of the course – in session 2 about recovery? This would give students an opportunity to author their own narrative and revisit it as the course develops.
- The role play scenario works to some extent but needs to be revised and clarified a little.

## **Session 13: Remediation, review and evaluation**

No comments received.

### **3. Other comments:**

The overall impression of the manual is positive. The partners consider it as helpful and comprehensive with a lot of interesting information and interesting aspects and many exercises and role plays. On the other hand partners think it would be better to reduce the content, to improve the structure and shorter the sessions. They also mention, that “some of the theoretical concepts are difficult to understand without a background information”.

	<b>Intras</b>	<b>EASP</b>	<b>MHC</b>	<b>Pro mente OÖ</b>	<b>Gek Op Werk</b>	<b>LRSM</b>
<b>Impressions of the manual</b>	<p>A more didactic structure:</p> <ul style="list-style-type: none"> <li>- introduction</li> <li>- main content</li> <li>- closing of the session</li> </ul> <p>Shorter the sessions Review the portfolio</p>	<p>Make a comprehensive approach on the recovery model and the exercise of mutual support.</p> <p>-The structure allows progress on the contents of a fluid way.</p> <p>-It is helpful to address a training session, even for inexperienced trainers in the field.</p>	<p>- The materials in the manual are too general and in some places not clear.</p> <p>- They couldn't be used as program for working with the group.</p> <p>- Comparatively well structured lessons there are after 50-th page.</p>	<p>- a lot of content, including many interesting aspects</p> <p>- better learning effect by reducing the curriculum</p> <p>- many activities</p> <p>- a lot of text, but not many pictures, images or graphics</p> <p>- the proposed timing does not work</p> <p>- we missed practical tools like „solution focused questions“ or „active dialogs“</p> <p>- we missed hand-outs for the participants</p>	<p>- Extensive range of subjects</p> <p>- Short introduction for trainers</p> <p>- Nice selection of exercises</p> <p>- A little bit sloppy finishing</p>	<p>- The manual is very comprehensive</p> <p>- It has a nice structure easy to follow</p> <p>- Many exercises and role plays</p> <p>- Some of the theoretical concepts are difficult to understand without a background information</p> <p>- It provides other possible resources for readers if interested and require more information</p> <p>- A more ready to apply shortened version</p>
<b>What worked</b>	Group cohesion	All activities role-		- target group =	- Starting discussions	- Personal

<p><b>well?</b></p>	<p>Trust Responsibility "Mutual support" Venue Materials Coffee break Selfie Certificate Sustainability of the course</p>	<p>play were very rich and served to deepen. -Group discussion activities generated a very active, critical and participatory group. -The portfolio work was highly valued as a way to strengthen and integrate knowledge.</p>		<p>advocacy group Strada, because they had already some prior knowledge about recovery and empowerment - homework and peer groups were good for reflection - the content and the theory were interesting, well prepared and easy to understand - films and short videos (i.g. „Elling“, „Living in a box“) - participants learned a lot - good feedback</p>	<p>- Creating a session schedule - Contact between participants - Personal development of the participants - Being part of a peer group, group cohesion - Attitude towards feedback on video (only afterwards)</p>	<p>development for the trainees - Useful for them in order to understand some of their own experiences and to get the skills to better face their own challenges so that they can support others</p>
<p><b>Challenges?</b></p>	<p>Matching and team work</p>	<p>- Sometimes the time allocated to</p>	<p>- There are no learning materials</p>	<p>- not enough time we only</p>	<p>- Staying within time limit</p>	

	<p>Manage sensitive discussions Feedback via portfolio</p>	<p>some activities was insufficient. -It took prepare copies of material for the implementation of activities and participants demanded that such information is pick a student manual. -Some activities requiring a prior (individually, in pairs or in groups) work and subsequent discussion were converted into group discussion activity, directly, shorten the time and because the high level of the participants.</p>	<p>for the students. They have to be extracted from the manual and adapted to the needs of students.  - The references to the articles, describing the achievements in Scotland are interesting. They could be used only for motivating the participants, but not as a teaching instrument.</p>	<p>made session1 – 5 in 6 days not enough time to explain the theory, for exercises and reflection - participants need a communication training before this course; high level is required - we missed tools and methods, videos, films, images - evidence requirements: no learning effect; it would be better to make a short repetition of the last session on the beginning of the following session - evaluation form</p>	<p>- Getting a grasp on concepts of recovery and trauma and understanding peer support (2,3,4) - The role playing</p>	
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				<p>after every session was not useful</p> <ul style="list-style-type: none"> <li>- time between the trainings was partly too long</li> </ul>		
<b>Improvements suggested</b>	<p>Toolbox with team building exercises</p> <p>Start the course with a weekend outside</p> <p>Recovery video with Spanish subtitles</p> <p>Literature translated to languages</p>	<p>Session 4, was perceived as dense and extensive, so it is suggested to split the session into two.</p> <ul style="list-style-type: none"> <li>-Develop a small student manual involving theoretical essential part and copying of materials needed for activities and space to pick up the portfolio of each session.</li> <li>-Changing times and methodology</li> </ul>		<ul style="list-style-type: none"> <li>- reduce the curriculum</li> <li>- more time for explanations, exercises and reflection</li> <li>- more videos, films and pictures</li> <li>- to add more tools and methods like „solution focused questions“ or „active dialogs“ and feedback methods and plenty of time to exercise them</li> <li>- hand-outs for the participants</li> </ul>	<ul style="list-style-type: none"> <li>- Asking every participant to contribute in constraining long talks, sidetracking and giving other participants room to give their input.</li> <li>- Create a list of basic rules for the discussions and conduct, presented at the start.</li> <li>- Extra time for session 2, 3 and 4</li> <li>- Start with interesting news of the week, to promote interactiveness</li> <li>- Max 1,5 hours to</li> </ul>	<ul style="list-style-type: none"> <li>- Shortened more concise version of the manual as some of the potential trainers might feel overwhelmed</li> <li>- Short overview of the previous chapter at the beginning</li> <li>- Check with participants how do they feel if they want to talk about things they have not understood</li> </ul>

		of some activities (discussion below).		<ul style="list-style-type: none"> <li>- role play psychodrama and video therapy: participants need tools for reflection: What is successful communication?</li> </ul>	<ul style="list-style-type: none"> <li>break, even 1 hour and shorter breaks</li> <li>- Worksheets</li> <li>- Group interaction network (Yammer)</li> <li>- Weekly protocol around evidence requirements</li> <li>- Protocol for referring, backup plan when in need</li> <li>- More role playing description</li> </ul>	
<b>Other topics</b>		<p>The training should include tutored internships in health services or associations, as part of learning.</p> <p>-It could develop a handbook on Mutual Assistance Group (SHGs) in the future, as a continuation of</p>		<ul style="list-style-type: none"> <li>- no budget for transport (some participants live 80 km away)</li> <li>- participants asked about the intention of the project: Are the users expected to care for themselves? Do they want to save costs?</li> </ul>	<ul style="list-style-type: none"> <li>- Should we pass the whole manual to participants?</li> <li>- Videotherapy participation</li> <li>- How many sessions can someone skip?</li> <li>- Fruits of the course are unclear</li> <li>- Trainers manual?</li> <li>- Trainers network? (Yammer/Facebook/LinkedIn)</li> </ul>	

		this first project.				
<b>TRAINERS</b>						
<b>How many ?</b>	5 trainers	2 trainers	2 trainers	1 trainer	1 trainer	
<b>How were they selected?</b>		<p>One has been forming peer support courses for 6 years, providing over 20 courses.</p> <p>The second, was selected as an equal (person who has a mental illness) and is coordinator of the Federation EnPrimeraPersona (in first person), who had previously been trained in a course of basic mutual support and a deepening, which included teaching methodology and</p>	<p>they are the only ones from the staff of MHC, having the necessary qualification and willing to work voluntary</p>	<p>Erwin is working for pro mente since 20 years in different functions. He is an experienced trainer and in the last three years he is working with the advocacy group Strada. He is well known and highly respected amongst the users as somebody who tries to realize empowerment and recovery in daily work.</p>	<p>Selected as the obvious choice within the organisation. Assisted by an enthusiastic client with experience in different fields and a planner in the first half of the sessions. The planner was only there with the preparations</p>	<p>Clinical psychologists for the first pilot but looking forward to potential trainers from trainees group for the second piloting</p>

		management groups.				
<b>Comments</b>	After the last session, Guadalupe Morales, manager of the Bipolar Association in Madrid and as a person who overcame mental health issues, conducted a session to promote empowerment and to share her personal experience in creating an association.					
<b>STUDENTS</b>						
<b>How many started the course?</b>	8 men and 1 woman	18 people	12 people after the preliminary organizational session the	13 people	8 people	

			training group consists 8 participants			
<b>How many completed the course?</b>	Everyone	12 people 8 women, 4 men Some participants failed to start the course, others were retired for reasons of physical health and two resigned by the level of difficulty of the course.	Not finished yet	7 people	6 people	
<b>How were they recruited?</b>	Users who attend the day centre run by INTRAS + users from the community integration centre of Valladolid + people with mental health issues from other associations	The participant belonged to different associations of mental health clients, mainly SAPAME belonging to the Federation EnPrimeraPersona .	From the patients of MHC and City Day Center for people with mental illness. 4 informational meetings with 56 participants in them. Questioners, with 22 of them. Organizational meeting with 12 participants	There is a advocacy organization for users in pro mente OÖ, called strada. Strada is representing the users in the services, has its own office, budget, employees,	Recruited within existing clients of the organisation, either by email, telephone or face to face. It was then part of their journey back to work.	People with a diagnosis of mental disorder who recovered and attend a social club of an organization that provides services, Estuar Foundation

	based in Valladolid.			mental health services, legal counselling and is representing the users in meetings, work groups, conferences etc. from pro mente OÖ, government of Upper Austria and others. For the interviews and trainings we cooperated with strada.		
<b>Other relevant comments</b>	More people were interested in attending the course, so a list was created to include them at the time of the second piloting.		All they are patients in medical treatment in MHC			
<b>Course delivery</b>						
<b>Where was the</b>	Public venue in a		In <i>MHC</i>	First two days in	We rented a meeting	

<b>course delivered?</b>	community library		<i>prof.N.Shipkovenski</i>	a seminar hotel; the other days in Linz, at promente OÖ	room close to the office.	
<b>Describe how the course was delivered – number of days, frequency of sessions</b>	4 hours/day with a break between theory and exercises. 21 dates: 26.9.-27.10	The course was delivered for over a month. The course began on a Friday afternoon with the first session, but the rest of the sessions were given in the morning, from 10:00 to 14:00. In the following week sessions were held 2-6. A free week was allowed for completing the portfolio. 7-12 sessions were addressed in consecutive days. It left again one week to prepare	- one organizational and 8 training sessions took place until 28.11.14. - the sessions are once weekly, - 3 training hours each session (á 45 min) - with agreement for longer sessions when is necessary	6 days, each day 10 – 17 h We got some extra budget, so we decided to organize the first two days of the training in a nice seminar hotel on the countryside, 50 minutes from Linz. First two days of the training are one after the other, to guarantee an intensive work and to get to know each other. The other four days were with pauses in between, to have time to handle	13 weeks, as planned in the manual, sessions once a week, 1 vacation was planned in between, this was maybe too little.	

		<p>the portfolio. The last session, the 13 final evaluation was performed.</p>		<p>the content, for homeworks and work in peer groups. Participants organized regional meetings for homeworks and discussions between the training days.</p>		
<p><b>Other relevant comments.</b></p>	<p>Portfolio was filled by trainees individually, after the session or at home. Some trainees met to fill it together after the course.</p>			<p>Participants are living all over Upper Austria (some 80-100 km away from Linz),, so it was not possible to organize a weekly course, because transport would be too expensive.</p>		



**PEER TO PEER: A ROUTE TO RECOVERY OF PEOPLE WITH MENTAL ILLNESS THROUGH PEER SUPPORT TRAINING AND EMPLOYMENT**

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