PART III Using Your Story to Help

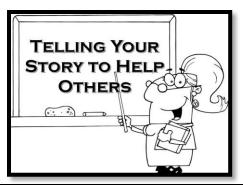
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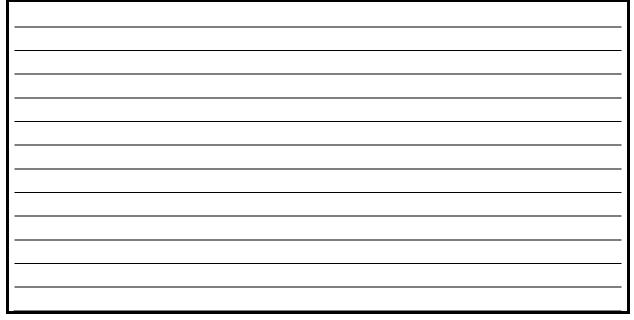
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Module 7: Telling Your Story

Before class tomorrow, answer the questions below.

Share how hearing someone else's recovery has impacted your journey to where you are now? What was that like for you? Was it a positive or negative experience?





Show of hands. Who in here has had someone share their recovery story with you? More than one person?

Telling Your Story

By revealing your journey, you are being a role model to your consumers; actively modeling recovery and resilience. Before you offer any service, you must first, prioritize your own wellness and recovery. It is your personal responsibility to be your best self and in your best health to support that same expectation from your consumers. Your consumers must strive to understand and attach meaning to their experiences, while identifying coping strategies and healing process that promote their own wellness. This is where you'll each become immensely helpful in their work towards wellness.

As Peer Support Specialists, your life experience made you candidates. In choosing to take this on, you've each acknowledged the value in your Recovery Story and how it will eventually benefit those you'll serve. Sharing how you overcame challenges builds connection between you and your consumers. It also inspires and offers hope when consumers are struggling. Remember that sharing your story should be a benefit to the consumers. While your story as a whole may not benefit every consumer, well-polished parts of your story can. When you share your story, you are sharing a personal message of hope to your consumers. There is *NO BAD RECOVERY STORY*. But there is a *SPECIAL WAY TO SHARE IT & STILL HAVE AN IMPACT*.

There are eight reasons we share our stories to consumers, community, and youth. When choosing to be peer support specialist, you are driven to support people in all stages of wellness and recovery, a bridge. You are knowledgeable of the difficulty, the differences in each persons journey, and can empathize with the consumers. As the bridge, you are there to humanize and even deter some of the struggles of the journey. So, what are the eight reasons that Peers share their stories? Think about the question at the beginning of this Module that you answered before coming in today: *Share how hearing someone else's recovery impacted your journey to where you are now? What was that like for you? Was it a positive or negative experience?* What do you think was the reason they shared that with you?

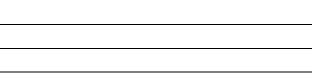


Now that you've been able to draw your own conclusions about why we share our recovery stories, this a great time for a discussion. Going around the room, share your top two reasons for sharing YOUR recovery story. Explain to us why those two are so important to your story. Understanding why we share our stories helps us to better understand what and when to share to support recovery and wellness.

Why You Share

Share your Recovery Story in order to:

- Inspire Hope
- Build a peer relationship with consumers and their families
- Break stigmas and biases
- Change attitudes others might have
- Advocate for Change
- Educate about Recovery
- Share skills & strategies
- Bridge cultural gaps



What else would you add to this list?

Talking about recovery in a holistic place helps consumers feel empowered by instilling hope. When sharing a part of your story with them, there is a difference between a *Recovery Story* and an *Illness-Focused Story*. It is important to understand the difference. Your audience will interpret these very differently.

Recovery stories are strength-based and focus on sharing the experiences that drove you to discover yours. Their purpose is to normalize the less than straight-paced path each and every person fighting behavioral health, experiences. By sharing a recovery story, there will inevitably be some negative undertones in what you share. But the role is going to be your resilience, your motivation, and most importantly – your journey. When sharing, you will focus on your non-linear experiences and how you overcame those barriers to get here, today.

When you focus your story telling on your illness, the dialogue tends to be dark, emotionally daunting, and steers your listeners away from hope. When peers share their illnessfocused stories, they back-pedal from their current place of recovery and wellness. This will often surface feelings of anger and hopelessness in addition to other negative elements of recovery. By sharing an illness-focused story, you are unintentionally amplifying the stigma, sometimes leaving consumers worse off than before you chose to share.



Rory is feeling depressed. Her Supportive Housing apartment is a mess, and people keep saying she "has too much stuff." Rory says she is so overwhelmed, she can't get herself to clean up. Every piece of paper has meaning, every toy and dish has a memory attached. "It's hopeless" she said, "I don't even care anymore. Let them throw me out. Whatever."

- Would you share part of your story with Rory?
- Why? What would you share? **OR** Why not?
- What feeling do you hear in what Rory is saying? How would you respond to that?
- What is the value to Rory in sharing part of your story?

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Take a few minutes to decide which story is being shared with the consumers in these situations.

| Juan doesn't know if he should believe his providers who have been saying that recovery can be a goal for him. PSS Prem responds to Juan, "I know what you mean, they told me I could recover too, but I still have a crummy apartment and I'm still dealing with symptoms all the time." | Circle One: Recovery Illness-Focused Share your reasoning for your selection: |
|---|--|
| PSS DaQuan is working with Janie, who thinks she can never get married because of her diagnosis. PSS DaQuan says, "That's what they say: People like us won't have regular lives again." | Circle One: Recovery Illness-Focused Share your reasoning for your selection: |
| Maxine and PSS Carina are talking about the difficulty of dealing with the loss of a loved one. "I know what it's like to love someone who is gone. It's so painful. It feels, in the moment, like it's never going to end. I've learned that at least for me, there's no easy way through. Support and time have helped me. Still not easy. But it's helped." | Circle One: Recovery Illness-Focused Share your reasoning for your selection: |



Based on the story telling homework, you have at least started piecing together your Recovery Story. So, use your rough draft from the last class to complete this exercise. Read your rough draft to your partner. Partners, when they are done sharing, take a couple minutes to jot down some feedback by answering the following questions. Once you've finished your notes, read your rough draft to your partner. Once everyone is done, we'll come back for discussion.

| Was the story you heard a recovery story or an illness-focused story? Why? | |
|--|--|
| Did you think your partner shared parts of their story that would be helpful? Why? | |
| How did you feel after hearing your partner's story? Why? | |
| In response to your partner's story, what part of your story would you share? Why? | |

How Much Do You Share?

While storytelling is the MOST important part of your role, because of its uniqueness, there are some ethical rules to keep in mind for the safety of you as well as your consumer. Ethics are a way to safeguard the vulnerable individuals being served, so, you will need to understand the ethical standards as they apply to sharing your story with your consumer. Consider the following:

- Only tell part of your recovery story if it would benefit the other person. If you are the only one who will benefit, do not tell your story at that time. The story MUST be of benefit to the consumer you are supporting.
- Tell your story in a way that the consumer or family can hear. Telling "war stories" or "one-upping" the consumer, can harm the person you are there to support, by potentially bringing up the other person's pain.
- Don't push your story on to someone who is not ready to hear it. Be careful to not overstep what a peer says they can handle.
- If the peer is not reacting well to your story, try using another partnering skill instead, such as Demonstrating Understanding or Asking Open-Ended Questions.

CPC, 2019, pp 35

You will notice in the workbooks you've been using to develop your Recovery Stories; their focus has been intended to help you structure it by content, details, and contextualizing as a sharable part of your journey to be the change in someone else's. This part is about knowing the HOW and WHEN in sharing your story to empower that person to recover. It requires finesse and tact to do it well.

First, you need to learn your story of recovery as it applies to someone just starting theirs. Think about when you began having serious challenges, what they were, and how they affected you. Now consider what helped you move from that place to a better one or where you are now. What was it that you and others had to do to make that happen? Know what you learned about yourself, your strengths, recovery, and the probability of recovery. Be able to effectively share those points in your recovery story. Limit the graphics and negativity, while still implicating the difficulty of your unique story.

Don't go out of your way to share the entire story of recovery or any of it with your consumer. Share when you have something relatable to what they are experiencing. It must be relatable to their feelings, the challenge they face, or the situation in that moment. By actively

listening to your consumers and attending to their communication, you will be able to share your story or use additional partnering skills to connect with your consumers.

Only share your story when you are comfortable doing so. Sometimes, it is the environment. Other times, it is who you are with. The reality is, you will know when you are comfortable sharing your story with consumers, colleagues, and beyond. This is a new role and will take time to grow into it. When you get to the point where you are comfortable sharing your story, make sure there is intent and just cause in doing so – this will help sharpen what part of your story you should share. When you share any part of your story with consumers, colleagues, or community members, why you are sharing is just as important as what you are sharing.

- Inspire Hope
- Build a peer relationship with consumers and their families
- Break stigmas and biases
- Change attitudes others might have
- Advocate for Change
- Educate about Recovery
- Share skills & strategies
- Bridge cultural gaps

Consumer #1

You meet with your consumer who reports they're struggling with their symptoms as they are applying to Community College programs. They tell you that they're starting to believe that they can never go back to school again, then says, "People like me just aren't supposed to have careers because our symptoms always get in the way."

Your consumer is obviously frustrated with how things are going and is beginning to experience some feelings of hopelessness. What part of your recovery story do you share with them to instill hope?

Consumer #3

Your consumer is a self-identified gay teen who just began using the mental health system. This consumer prefers "they" pronouns, and recently told you they'd planned on returning to college when "the trouble" started. They tell you, "Planning on getting anything in this world is just messed up. Why should I even try?"

Your consumer is obviously frustrated with how things are going and is beginning to experience some feelings of hopelessness. What part of your recovery story do you share with them to instill hope?

Consumer #2

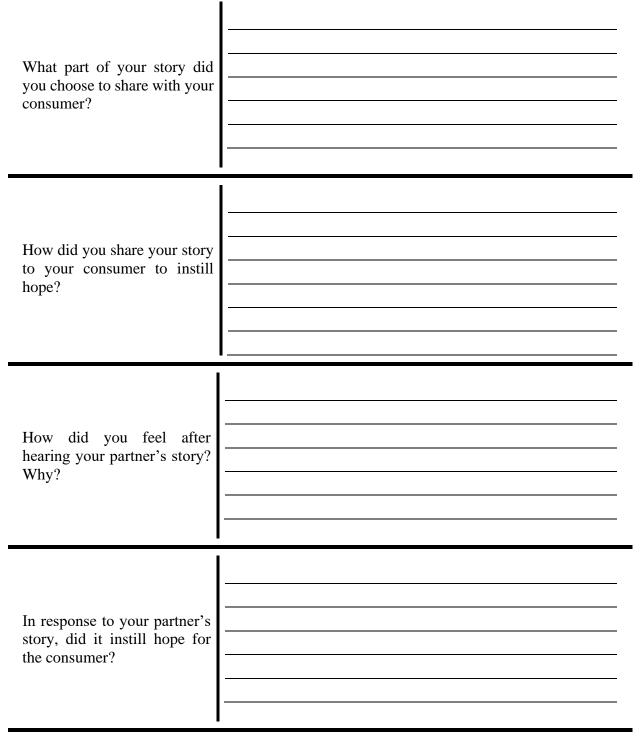
You meet a young adult in the crisis center with a history of domestic violence and an ACES score of 7. They've completely shut down, refuse to participate, or talk with staff. The clinical team asks you to work one-on-one with them in an attempt to build rapport and engage.

How would you introduce yourself to this consumer to instill hope and build rapport? What part of your recovery story do you share with them to instill hope?

Consumer #4

You are working with a teenager who seems to be in a disagreement with everything you say. The other day, when you suggested that they go for a walk, they yelled at you, "Man!! You are always asking for me to do stuff I don't want to do! I HATE going for walks. Walks are for OLD people. I don't want anything to do with you."

Your consumer is obviously frustrated and angry for things that have likely not been shared yet and they are using you as a target. What part of your recovery story do you share with them to instill hope? Pull out your envelopes and there should be a card inside it with an acronym and a number. Find the acronym by looking at the population specific cultures listed on **pages 167-171**. Now, find the number in the experience profiles on **page 197**. In pairs, complete the exercise below.



| Slide | Time | Video Title | YouTube Link |
|-------|---------|--|---|
| 131 | 10:59 m | Four Steps to Telling Your Recovery Story | https://www.youtube.com/watch?v=3sp2dQUgzZU |

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Module 8: SMART Recovery Goals

Once you begin working with your consumers, you'll take some time getting to know them. Paying attention for values, strengths, qualities, and skills. In doing so, you'll be better prepared to assist them in identifying and planning out goals that contribute to their authentic best selves.



Complete the exercise below before we start this

module. Take a few minutes to complete your own inventories of values, strengths, qualities, and skills. Then we'll look at how to complete these tasks with your consumers.

Skills Inventory

| Process Management: Interpersonal: | | erpersonal: | Ma | anagerial: | Co | mmunication: | |
|------------------------------------|------------------------|-------------|---------------------|------------|---------------------------|--------------|-------------------|
| | Administrative | | Business Dev. | | Budget Mgmt | | Blogging |
| | Analytical | | Collaboration | | Business Mgmt | | Campaigns |
| | Contracting | | Community | | Change Mgmt | | Content Mgmt |
| | Creative Thinking | | Building | | Crisis Mgmt | | Digital Media |
| | Decision Making | | Conflict Resolution | | Delegation | | Editing |
| | Execution | | Consultative | | Directing | | Email Marketing |
| | Goal-Setting | | Convening | | Dispute Resolution | | Feedback Delivery |
| | Logistics | | Deal-Making | | Economization | | Filmmaking |
| | Operations Mgmt | | Diplomacy | | Financial Mgmt | | Listening |
| | Planning | | Disability | | Forecasting | | Nonverbal |
| | Problem Solving | | Awareness | | Goal-Setting | | Communication |
| | Research | | Diversity | | Hiring | | Phone |
| | Scheduling | | Awareness | | Manage Difficult | | Presentations |
| Le | adership: | | Engagement | | Situations | | Public Speaking |
| | Assertiveness | | Manage Difficult | | Mediating | | Social Media |
| | Coaching | _ | People | | Performance | | Style |
| | Facilitation | | Negotiation | | Management | | Summarizing |
| | Instruction | | Networking | | Process Mgmt | | Team |
| | Mentoring | | Persuasion | | Project Mgmt | | Verbal |
| | Motivational | | Professionalism | | Quality Control | | Writing |
| | Product | | Relationship Mgmt | | Recruitment | Se | f-Management: |
| | Development | | Shepherding | | Reporting | | Goal-Setting |
| | Retention | | | | Restructuring | | Organization |
| | Strategic Thinking | | | | Staffing | | Prioritization |
| | Teaching/Training | | | | Talent Mgmt | | Self-Awareness |
| | Team-Building | | | | Team Building | | Self-Presentation |
| | Team Manager | | | | | | Stress Management |
| | Team Player | | | | | | Time Management |
| | | | | | | | Work/Life Balance |

Strengths Inventory **Relational**: Intellectual: **Precision**: Accountability: Caring Analytical Accurate Accountable Thinker Charismatic **Detail Oriented** Ambitious Comforting Artistic Ethical \square Committed Clarity Compassionate Exact Deadline Driven Critical Thinker Considerate Precise Dedicated Creative Courteous Dependable **Communication**: Decisive Directive Disciplined Artful Dynamic Curious Effective Articulate Empowering Emotional Focused Authentic Intelligence Encouraging Goal-Oriented \square Bold Empathetic Independent Engaging \square Clear Evaluative Friendly Motivated Concise Innovative Influencer Ownership Effective Inquiring Inspiring Productive Powerful Intellectual Motivating Punctual Strategic Intelligent People-Reliable **Personality**: Oriented Learner Resourceful Authentic Open-Minded Relatable Responsible Confident Purposeful Respectful **Result-Oriented** Eager Reflective Supportive Other-not listed: Energetic Sympathetic Thoughtful Enthusiasm Trainable Tactful Genuine Visionary Tolerant Honest Situational: Humorous Adaptable Optimistic Competitive Patient Courageous Positive Determined Quick-Witted Diplomatic Flexible Poised Resilient **Risk-Taking** Sensitive

Values & Personal Qualities

| Values: | Excitement/Risk | Leisure | Pe | rsonal Qualities: |
|--------------------------|--------------------|-------------------|----|-------------------|
| □ Achievement | Fame | Listening | | Calm |
| □ Accomplishment | Family Happiness | Master technique | | Confident |
| □ Advancement | Financial Security | Master a field | | Sensitive |
| □ Autonomy | Friendships | Personal growth | | Punctual |
| □ Balance | Fun | Personal | | Responsible |
| \Box Belong to a group | Happiness | development | | Conscientious |
| □ Build something | Harmony | Physical Activity | | Strong minded |
| □ Challenge | Health | Recognition | | Team worker |
| □ Compassion | Helping others | Impress others | | Determined |
| □ Competition | Serving people | Repair something | | Hard working |
| □ Creativity | Influencing people | Respect | | Trustworthy |

| Va | lues (cont'd): | Improvement | Risk taking | Pe | rsonal | Qualities |
|----|--------------------|-------------------|-----------------|-----|----------|-----------|
| | Create a new thing | Perfecting things | Safety | (ce | ont'd): | |
| | Create beauty | Independence | Security | | Well or | ganized |
| | Create change | Integrity | Self-expression | | Enterpr | ising |
| | Create Information | Leadership | Spirituality | | Friendly | ý |
| | Decision-Making | Learning | Stability | | Leaders | hip |
| | Entrepreneurship | Growing | Status | | Enthusi | astic |
| | Equality | Tenacity | Teamwork | | Adaptal | ole |
| | Visionary | • | | | Patient | |
| | Wealth | | | | Conside | erate |
| | | | | | Polite | |
| | | | | | Imagina | ative |

Things I am good at:

Compliments I have received:

What I like about my appearance:

Challenges I have overcome:

I've helped others by:

Things that make me unique:

What I value most:

Times I've made others happy:

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What did you learn about yourself when it comes to your values, strengths, qualities, and skills? _

Why SMART Goals in Recovery?

None of us got to this point in Behavioral Health Recovery without setting some goals for ourselves to light the way. While buy-in comes with time, goals are a crucial part of your work, and are a Medicaid requirement for payment of service.

"Having a sense of self. A course to plot is a destination for hope." ~ Bryant McGill



Group Discussion

- 1. What is your experience with setting goals?
- 2. Have you found goal setting useful?
- 3. What have others done to support your goals?
- 4. Given what you know about Peer Support how do you hope to support goals as a peer support specialist?

As you all know, goal setting was a complex task when you were beginning your recovery journeys. Supporting it in your new roles will be tricky. You are human. You have life experience. You understand the difficulty that comes from failing in recovery. Its with confidence that you will each struggle to not rescue your consumers from their mistakes. You have to be unattached to your consumers so you can stand in as an unbiased, open-minded, supportive and respectful in their journey. So, how do you keep the consumer and their goals at the forefront?

- 1. Make sure your consumer writes their goals in their own words and for themselves.
- 2. Honor your consumers hopes and dreams.
- 3. Work with your consumer to explore their strengths and preferences.
- 4. Help your consumer to develop SMART goal statements.

Pull out your exercise envelopes and you need your number for this exercise. Using that number, locate your quotes. Answer the question boxes and then be ready to talk as a group.

#1 - You tell your kids that no matter what, you set your goals and you go for them. Whatever it is you achieve, never give up. You want your kids to have that good attitude, the confidence, and the will power to believe in themselves. ~ Joel Parkinson

#2 – Life's up and downs provide windows of opportunity to determine your values and goals. Think of using all obstacles as steppingstones to build the life you want. ~ Marsha Sinetar

#3 – Sometimes we motivate ourselves by thinking of what we want to become. Other times we motivate ourselves by thinking about who we don't ever want to be again. ~ Shane Niemeyer

#4 – Whatever positive changes you want to make in your life, acceptance of how and where you are at the present moment is one of the keys to moving forward. ~ Unknown

After reading your recovery quote, explain how it impacted your thinking about what is possible for people with mental health, substance use, or other challenges? How did you reflect on your own recovery after reading it?

#1 – Experience is not what happens to you, it is what you do with what happens to you. ~ Aldous Huxley

#2 – People often say that motivation doesn't last. Neither does bathing. That's why we recommend it daily. ~ Zig Ziglar

#3 – Hardships often prepare ordinary people for an extraordinary destiny. ~ C.J. Lewis

#4 – Note to Self: Every time you were convinced you couldn't go on, YOU DID. ~ Unknown

After reading your recovery quote, explain how it impacted your thinking about what is possible for people with mental health, substance use, or other challenges? How did you reflect on your own recovery after reading it?

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Hopes & Dreams

When you start the discussion about honoring a consumer's hopes and dreams, there are ways to assert your willingness to honor their intentions. When you use HOPE as their *reason* for continuing their journey, or respond with, "Why not?" as opposed to "No way." Using your partnering and active listening skills and responding with, "I'll go with you to find out," shares the burden of uncertainty with your consumers in addition to maintaining their hopes and dreams as an active part of their recovery plans.

Wellness and recovery weren't accomplished by any one of us without negative situations that caused emotional and/or physical pain, setbacks, and even destroying the dreams and hope that got us to those points.



- Using your most current draft, select two key points to share. Highlight a moment in your story when the dream was not honored, as well as, a moment in your story when it was.
- Consider the following questions before you begin this exercise: a) has someone ever not honored the dream/s that you have? b) how did it feel when someone was unable to honor your own hopes and dreams? c) how did you get to the other side/recover from that disappointment? d) who helped you/supported you? How? e) why is supporting dreams and hopes so important in peer support services?
- Pair off; peers- begin by using your partnering skills to start the conversation; minimize questions and actively listen to your consumers. Switch in 5 minutes.
- Return to group for discussion. What have you learned about how to honor someone's hopes and dreams? Why is it important to you?

Why SMART Goals Help

Did you know? When you set goals in life, you are 275% more likely to accomplish what you seek. That is an amazing account of measurable success. Goals are built on your ambitions with a desired end result. The problem with goal setting is the presumption that goals have to be these grandiose plans that map out every step you take indefinitely. Every one of you knows that bleak feeling of hopelessness that spreads throughout you as you stare blankly trying to identify that earth-shattering goal that is going to hyper launch you into wellness. Like many before you and since, you were left fearing the worst thing possible – FAILURE.

Goals will be a part of your lives moving forward, and a key focus in working yourselves out of a job with your consumers. In this section, you will learn how to effectively develop goals with your consumers, break them down into manageable steps, and achieving the results they seek. Those same tools will assist you in building your best selves by reaching for the stars with goals that reflect your hard work and dedication to maintaining wellness and sustaining your recovery journeys.

How do you stay with that 275%? That is done by openly exploring interests and opportunities with your consumers, then writing a goal with a plan that they can stick to and complete. You are going to act as their supporter and cheer squad articulating and celebrating their successes with them as they complete their goals, wishes, and desires. You are helping them to justify these things through exploration and empowerment. So, what does this part of your new role look like? How can you support your consumer's goal exploration?

| Use Partnering/Communication S Orient the idea & process Demonstrate understandin Reflect feelings and meanine Help summarize | • Is the consumer mentioning the kinds of goals you can |
|---|---|
| Partne • • | with the Consumer so They Feel Heard Stand with your consumer and walk with them on the journey Support them to have a voice in the process Advocate for their voice: Help the team to hear the peer. Everyone has a right to dream |
| <i>Listen for Strengths</i> What successes has the consumer shared or talked about? What skills and talents do they have to support their new goal? | Support Your Consumers Choices Consumers may choose a goal that you disagree with. They have a right to make their own choices. Validate their right to choose their goals, no matter your feelings about them. When you don't agree, ask them to do a Pros/Cons exercise with you to help YOU understand their focus. |

Types of Goals

Goals fall into two caveats, time and category. Time is focused on the duration of completion while category is specific to what area of life the goal is focused on. Both of these will be covered here to give you a better idea of how to break them down for effective support and integration into treatment plans or development of self. All selected goals should be able to positively improve the persons quality of life and adhere to the initial reason they entered Peer Support Services to begin with.

There are four major types of goals; lifetime, long term, short term, and steppingstone goals. For the sake of the services you will provide, you will focus on just two of those – short term & steppingstone goals but understand that those are the primary points to reaching the long term and lifetime goals. So, they should reflect that when working with your consumers. Goals help you and your consumers by promoting end dates and time restrictions. With time-based goals, you address activities, excursions, and opportunities, that when compiled together – build your formal and authentic version of life. Because of that, it's important to balance how many goals you lay ahead of you at any given time.

- 1. <u>Steppingstone Goals</u>: These are the very basic, baby steps required to reach your shortterm goals while working toward your long term and lifetime goals. Often times, they won't take long to complete, and they always get you closer to your desired end result.
- 2. <u>Short-Term Goals</u>: Here, you can expect to take up to a year to complete with the purpose of staying on track to reach your long term and lifetime goals.
- 3. <u>Long-Term Goals</u>: This will take you more than a year to complete but is likely between five and ten years out. These goals include things like weight loss, financial growth, and career advancement.
- 4. <u>Lifetime Goals</u>: The most complex of goals. These are driven to build you into your best self by feeding your curiosities, interests, etc. Often requiring years or a lifetime to complete.

As you can see, top to bottom, each set of goals supports the next stage's growth. By having goals in each category, you'll be more likely to accomplish that which you seek. Let's see how you do. Try to set these goals for yourself. Take a few minutes to set your goals top to bottom.

| Lifeline Goui | | | | | |
|---------------|--|--|--|--|--|
| 1 | | | | | |
| | | | | | |

Lifetime Goal

| _ | Long Term Goals to Reach Lifetime Goal | | | | | |
|---|--|---|---|--|--|--|
| | 2 | 3 | 4 | | | |
| L | | | | | | |

Short Term Goals to Reach Long Term Goals

| 5 | 6 | 7 |
|---|---|----|
| 8 | 9 | 10 |

| Steppingstone Goals to Reach Short Term Goals | | | | |
|---|----|----|--|--|
| 11 | 12 | 13 | | |
| | | | | |
| 14 | 15 | 16 | | |
| | | | | |
| 17 | 18 | 19 | | |
| | | | | |

Steppingstone Goals to Reach Short Term Goals

When discussing goals and quality of life, your goals are likely to fall into one of seven categories: spiritual, emotional, social & relationships, personal development, physical, career, and financial. Working in the Behavioral Health System, only four of those will apply to your "scope" of services: emotional, social & relationships, spiritual, and personal development. The reason for that, you cannot be responsible for your consumer's physical, career, or financial interests and goals. You can build the steppingstones and short-term goals to get there by developing their independent skillsets, mental and emotional preparation, housing, and all the baby steps it will take to get closer to it. The big picture is to have goals in different categories at the same time as a way to sustain interest and refraining from placing all your eggs in one basket.

- 1. <u>Emotional Wellness</u>: This will involve your ability to express how you feel, enjoy life, adjust to emotional challenges, and cope with stressful, traumatic life experiences. It will also assist in self-acceptance and contentment. When developing these goals, think about how you respond to life situations and where you can grow.
- 2. <u>Spiritual</u>: Often confused with religion, spirituality is a space of harmony with yourself, and "the powers that be," helping you to stay grounded and engaged in your journey. Consider things like mindfulness, grounding techniques, and meditation, in addition to acceptance of your situation and potential opportunities.
- 3. <u>Social & Relationships</u>: By balancing employment or volunteerism, self-care, and social relationships, one's behavioral health and physical health are more sustainable. So, have coffee with a friend, dinner with your family, work or volunteer in a place that fills your cup, and make time for something you enjoy independently. This will be the core of your wellness.
- 4. <u>*Personal Development*</u>: By continuously challenging you to be your best selves, this category should be constantly changing. In doing so, one will explore new interests, hobbies, skills, and opportunities; growing exponentially in wellness, profession, and personal.

These last three are out of your service scope but will likely be touched on when projecting longterm and lifetime goals. So, you will be supporting your consumers to a point with them.

- 5. *Physical*: Health goals, weight loss, medical challenges, running a 5K are all physical goals.
- 6. <u>*Career*</u>: Career driven goals often include skill development, promotion preparation, and job satisfaction.
- 7. *Financial*: These are common goals because people want to reduce debt and increase experiences.

Don't discourage them from focusing on these but dial it back to the little things that have to happen in order to accomplish the big goals. Using the exercise on **page 206** and the numbers

associated with each goal, go to the table on the next page and fill in the number with each category of goals it represents.

| Type of Goal | Goal Numbers | Thoughts on number of goals in each section |
|------------------------|--------------|---|
| Emotional Wellness | | |
| | | |
| | | |
| Spiritual | | |
| Spirituat | | |
| | | |
| | | |
| Social & Relationships | | |
| | | |
| | | |
| Personal Development | | |
| | | |
| | | |
| Physical | | |
| , | | |
| | | |
| <i>C</i> | | |
| Career | | |
| | | |
| | | |
| Financial | | |
| | | |
| | | |
| | | |

Identifying Our Goals

Goals are built on interests and strengths identified by your consumers. How you lead that conversation smoothly to help your consumers identify their goals, preferences, and strengths in regard to their recovery journey is what you need to focus on. As peer support specialists, you are tasked with being the beacon of wellness and recovery while still allowing for autonomy with the consumer and their personal recovery decisions. Flip back to **page 205** and review the skills needed to identify consumer-driven goals.



- Use the information on **page 205** to assist in how to work to identify consumer-driven goals.
 - Bring your chairs to the front of the room and form a circle.
 - 1 volunteer to be the consumer: share with the group at least one goal <u>YOU</u> have.
- The rest of the group are PSS and you will offer the consumer Peer Support by practicing the skills on **page 205**.
- Take 20 minutes, then we'll come back and talk about what worked and what didn't.

As you can tell, supporting consumers can be difficult when you don't completely agree with their identified direction. It is much easier when you agree. That is not the point though. As professionals, you are tasked with empowering your consumers to lead their own journey and that includes unconditional support, sprinkled with experience-based insight.

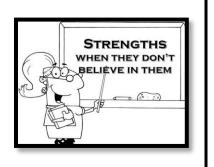
Active listening is big when exploring your consumer's goals, preferences, and strengths. Like each of you experienced in your own wellness journeys, your consumer is not likely to have the big picture abilities needed to set goals, while identifying their preferences and strengths. It will be your active listening that will help extract that information and assist in mapping out the various stages of their journeys with them. So, what are you looking for outside of **page 205**?

Begin by asking your consumers if they have any goals outside of therapy? Ask them what life would be like in their "perfect" world. These answers will assist you in helping your consumers identify goals in their recovery. Using past and current experiences will formulate interests and likes, allowing you to be more specific in the process.

Once the goals and interests are identified, you'll move onto exploring how to best serve your consumers. This is done by reviewing their likes and dislikes when it comes to service styles; Peer Support, Case Management, Medication Compliance, and Therapy. By knowing their service preferences, you'll be able to adapt your style of support to produce best outcomes with their identified goals.

In life, we're taught to be complacent and focus on what we can't do. As peers in the Behavioral Health field, it's the polar opposite. Instead, it's all about identifying strengths that reflect skills applicable to wellness, recovery, and beyond. Strengths help us to identify values, skills and abilities, personal qualities, and supportive individuals and resources. By focusing on

these, consumers develop confidence in their wellness and increase hopes in accomplishing longtime goals beyond a place to crash and conquering the demons that direct their addictions.



- Begin by being alert to your surroundings (where you meet them home, community, etc.), how the consumer carries themselves, interests, experiences, hobbies, family pictures, crafts, and opportunities that they present to you.
- Model this for your consumers by sharing some of your own.
- Assist your consumers by helping them to reframe difficulties and bad experiences into positive strengths they've been able to develop from those.

Using your **number**, select the population you'll be working with in this exercise. Then, using the space below, list strengths you could see your consumer having as they begin peer support services.

#1 – Homeless individual, living in the woods

#2 – Lives in an assisted living facility

#3 – Lives in a supportive housing facility

#4 – Discharge planning from thirty day Ex Parte

Take a few minutes to review this module thus far.



- 1. What values will help you as a PSS?
- 2. What skills and abilities will help you as a PSS?
- 3. What personal qualities will help you as a PSS
- 4. What supports and resources will help you become a PSS?
- 5. How are strengths related to hope?
- 6. What role can "knowing your strengths" play in recovery?
- 7. Are there areas where you have strengths that are not your preferences?
- 8. What else do you need to be helpful to consumers when identifying their goals, strengths, and preferences?

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"A dream is just a dream. A goal is a dream with a plan and a deadline." ~ Harvey Mackay

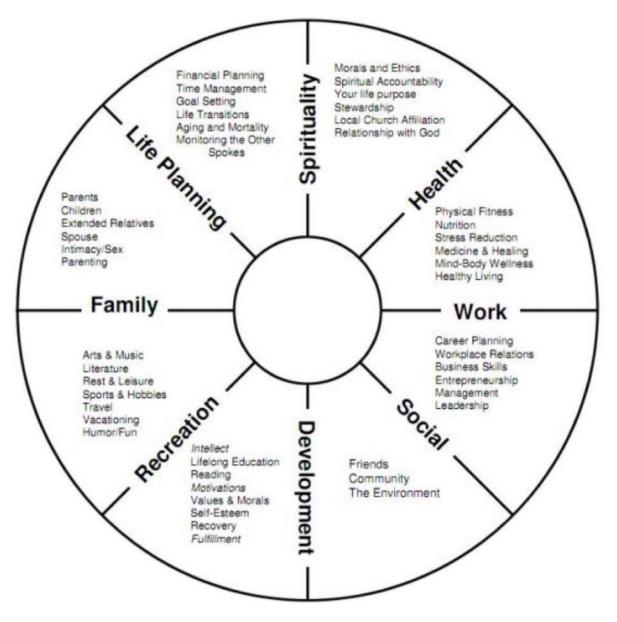
<u>Your Peer Support Specialist Career Goals</u>: Once you've worked through the Goal-Setting exercises, now is a great time to set your career-focused SMART goals. How will you use this training to obtain your goals as a helper: Specific, Measurable, Achievable, Realistic, and Time Specific. Use the tool below to review your final goal and see if it is a <u>SMART goal</u>.

| Specific – who, where, when, how, why (be clear) | |
|--|--|
| Measurable – The more specific an objective is, the more measurable it is. Think, "How will I measure my progress on this when I document it in progress notes?" | |
| Achievable – Can this be achieved as written and, in the timeline, addressed? | |
| R ealistic – Does your consumer/family member believe this is the right time to take on this goal? | |
| Time-Specific – Dating your goals and the various steps required to complete them helps to accomplish them. | |

Tools For Goal Setting

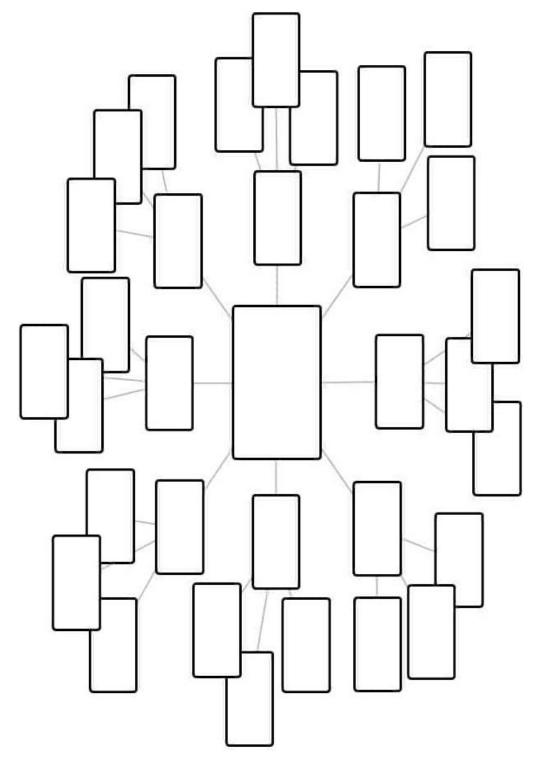
There are many ways to identify and personalize the goals and aspirations brought forth by your consumers. These three are the most common ones used in the behavioral health field: 1) the Wheel, 2) the Mind Map, and 3) the Reverse.

 <u>The Wheel Method</u>: You will use a basic wellness wheel here, so it reflects the various life domains. Work with your consumers to identify two long term goals in each area. Then, identify the top three that are really important and INSPIRE you. The three you select will be the goals you use moving forward in your consumer's journey.



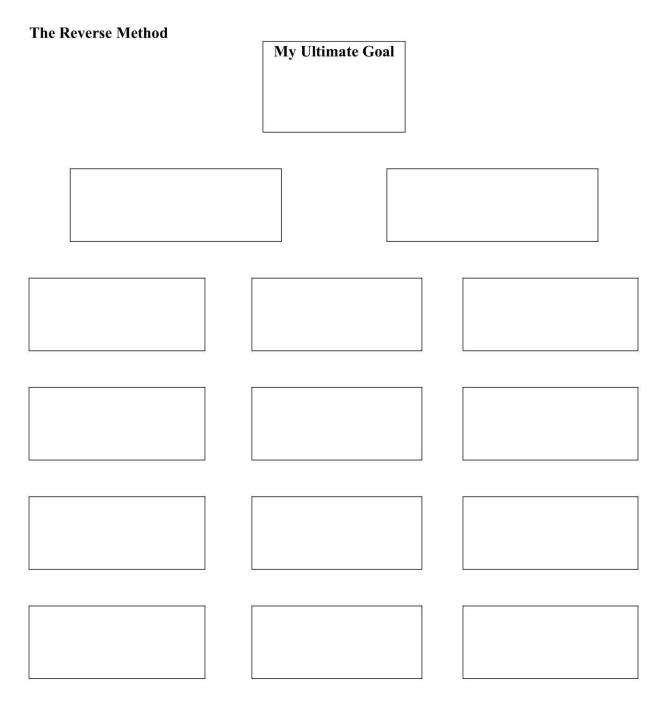
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2. <u>The Mind Map Method</u>: Select the goal that makes you the most excited, and place that in the middle of the page. Now, draw 'spokes' to different boxes showing all the ways you can use to meet the goal. Brainstorm each option and expand on each one the tasks to accomplish it. The further you 'spoke' out your ideas, the more specific each task becomes. Select a couple of the specific tasks to start working toward your goals.



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3. <u>*The Reverse Method*</u>: Take another goal and write in down at the top of this table. Now start thinking about what it will take to accomplish it. What is the last step before you'd know it was finished? What's the step before that? Before that? All the way back to today, the first step.



These are the things I can start working on right now!

 <u>SMART Goals</u>: Once you've worked through the Goal-Setting exercises, now is a great time to see if they are SMART goals: Specific, Measurable, Achievable, Realistic, and Time Specific. Use the tool below to review your final goal and see if it is a <u>SMART goal</u>.

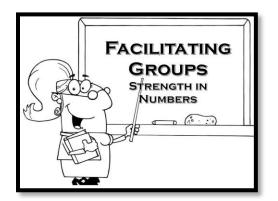
| Specific – who, where, when, how, why (be clear) | |
|--|--|
| Measurable – The more specific an objective is, the more measurable it is. Think, "How will I measure my progress on this when I document it in progress notes?" | |
| Achievable – Can this be achieved as written and, in the timeline, addressed? | |
| R ealistic – Does your consumer/family member believe this is the right time to take on this goal? | |
| Time-Specific – Dating your goals and the various steps required to complete them helps to accomplish them. | |

Using Your New Skills

Each of you had a number for the consumer's current situation on **page 210**. Now use that consumer, and the number associated with goal setting exercise on **pages 211 to page 214**. Take a few minutes to use the identified strengths and get your consumer to their first clinical appointment with a provider. You will have to obtain an identification card to complete that task. Use the resources you already know of and goal setting tool to make a plan for your consumer.

| Slide | Time | Video Title | YouTube Link |
|-------|--------|-------------|---|
| 140 | 3:58 m | SMART Goals | https://www.youtube.com/watch?v=1-SvuFIQjK8 |

Module 9: Facilitating Peer Groups



"Nothing truly valuable can be achieved except by the unselfish cooperation of many individuals."

~Albert Einstein

As peer support specialists, there are many parts to your job; helping your consumers process their situations, grow in their wellness, and building communities. These tasks can be accomplished in a variety of settings – one-on-one, at home, in the community, or in groups. For the purpose of your role, we are going to discuss running groups with and for the consumers you'll serve.

Group Discussion

- 1. Who here has facilitated a group? What was that like for you?
- 2. What do you know about facilitating groups? What do you want to learn about facilitating groups?
- 3. What are the characteristics of the best group facilitators you have seen?
- 4. What did they do or not do that made them great?
- 5. How did they make people feel welcome, start conversation, connect with the group?
- 6. How about the worst facilitator?
- 7. What do you hope to be as a facilitator? Has a teacher, group leader, etc., had an impact on you?

Let's Talk

Types of Groups

In wellness and recovery journeys, groups are utilized to bring consumers out of the woodwork of society by having people with like experiences gather in support of each other. You and your consumers alike will be using groups as a safe place to talk about shared concerns, grow knowledge, and exhume support in the struggles faced from behavioral health. By identifying educational opportunities, building a social community, and offering support to grow self-help skills, you've got the basis to build a group for your consumers.

<u>Educational</u>: In these groups, make sure to select topics that can support the consumers and their families quality of life throughout the recovery process and beyond. You'll be an instructor and responsible for planning and developing activities or exercises to assist your consumers in the learning process. With the educational groups, the peer will teach a topic or task, encourage discussion and consumer engagement, complete and activity that applied the topic or task, and request an evaluation to be made aware of what's working and what's not.

<u>Socialization</u>: Social skills are often times lacking when working with consumers who have either none or limited friends, family, and acquaintances. This is rarely because they want to be alone, rather, it is easier to be alone than explaining "what's wrong." By helping your consumers plan social gatherings, you are working to build skills in communication, appropriate social behaviors, and community. These engagements help consumers, who would otherwise isolate, engage and build their community with like individuals.

<u>Support/Self-Help</u>: With self-help and support groups, your consumers will have like experiences; trauma, grief and loss, addiction, identity, etc. Support groups are good for consumers with similar experience. They make participants feel less alone and assured that it isn't just them experiencing things. These groups are often built of consumers who are able to offer and seek wisdom, encouragement, and support in their journeys. In turn, they are able to find meaning and purpose in their lives beyond their recovery.

"A single voice cannot make a choir. A single tree cannot make a forest."

— Ron Lizzi

What kinds of groups are there? There are lots of different kinds of groups. Not all of them focus on recovery, and not all of them are peer-led. As Certified Peer Counselors, we want to share our own experience in service of supporting recovery of the people with whom we work. Some examples of groups that may support recovery are classes that focus on teaching skills or information, advocacy groups, and probably most importantly for our work, peer or mutual support groups.

Peer-facilitated groups may offer a higher level of comfort than people may have when seeing doctors or other providers. People may feel more comfortable sharing their concerns and/or plans in a peer-facilitated group because of the shared, lived experience of the peer group leaders.

• If you have the opportunity, think about your audience! Who is this for? What are they looking for?

- Do your research! Talk with your supervisor and other PSSs about possibilities for the group. Find curriculum that can guide you, lesson plans, and exercises to keep people engaged and learning.
- Do not try to make your group into a therapy group! Stay within your role as a PSS, and work to make it a mutually supportive experience, rather than a clinical or therapeutic intervention. There are lots of other professionals who do those, but peer-supported, recovery-oriented groups are the ones that we are trained for and feel committed to do.

Peer/Mutual Support Groups:

The University of Kansas Community Toolbox says these things about peer support groups:

- When peers don't know many—or any—other people who are going through what they are coping with, they can feel isolated and stigmatized. Support groups help people with a problem or challenge feel less alone and more understood.
- Support groups empower people to work to solve their own problems.
- Among people who are experiencing similar challenges, there is a unique emotional identification that is different from the type of support that can be gained from professionals.
- Members act as role models for each other. Seeing others who are contending with the same adversity and making progress in their lives is inspiring and encouraging.
- A support group is a safe place for someone who needs to talk about intensely personal issues, experiences, struggles, and thoughts.

Information or Skills Groups:

- Classes that teach information or skills focus on educating people in specific areas. These may also be called educational groups.
- Educational groups or classes can focus on any variety of content areas. Below are some (but not all!) possibilities:
 - Information-based: Social Security benefits (or other benefits), new laws that affect people, new or existing resources in the community, accessing programs or other supports.

 Skill-based: These classes teach skills rather than provide information. Examples include coping skills, career exploration, financial management, goalsetting, etc.

Recovery Groups:

- Recovery groups may have elements of the others involved. Recovery groups may use existing curricula or workbooks that can educate people about, and support people to, be in recovery if they so choose. Some examples of Recovery Groups:
 - Wellness Recovery Action Plan (WRAP)—Copeland, 2000
 - The Recovery Workbook—Spaniol, Koehler & Hutchinson, 2009 Seeking Safety—Lisa Najavits, Ph.D.
 - Hearing Voices Network-style groups

Facilitator Practices

Ice Breakers

Many group facilitators use "ice breakers," exercises that will help group participants get to know each other at the first meeting. These ice breakers can be as simple as going around the room and inviting everyone to introduce him or herself. It's a good idea to give participants a specific area to focus on, such as your favorite hobby, your hopes for the group, or something people should know about you. Asking participants to introduce themselves using a specific topic will lessen the chance that they introduce themselves by diagnosis.

Ice breakers can also be much more elaborate. Many ice breakers use games, specifically games that require participants to talk to each other. This is a fun way to help participants feel more at ease with each other before the start of the group. The ice breaker you choose will depend on the topic and purpose of the group, as well as the time allowed.

Check In/Check Out

Some participants like to "check in" before the start of the group, telling each other what has happened in their lives since the last meeting and perhaps addressing any homework from the group. If you choose to use a check-in procedure, it's a good idea to have a specific format. If you don't limit the time for this, or limit the topic, you may find that participants use the entire group time checking in. Seeking Safety has a good check-in and check-out format, with specific questions each participant is asked to respond to. The check-in in this format asks participants to tell each other how they have used new tools since the last meeting.

Checking out is also a good idea. It allows the facilitator to hear whether participants learned anything and is also a gauge on their emotional state. A participant who had trouble with the material may not speak up during group, but may talk about it during check-out. If this happens, you will want to follow up with that peer and see if they need additional support. Checking out is also a good way to ensure that you are not moving through the group material too fast or too slowly.

It's a Process

While you may have participated in groups for various reasons, it is okay to have no experience in facilitating them. That is a great opportunity to engage colleagues and management to learn off of their experiences. The purpose is always the same, to empower skill development and work through feeling alone. Even so, that doesn't make groups the fix all for everybody.

As the facilitator, group success is reliant on your skills in that role. There is a responsibility to the consumers that you create a space of safety and acceptance, to maintain the direction of the discussion and that it stays on topic, while helping them communicate with one another respectfully adhering to the agreed guidelines. Always gain perspective from consumer input and change things when it benefits the healthy outcome of the group.

Groups are rarely "thrown" together. Like classroom learning, groups require planning and several things should be considered. To begin the process, know the "why." Then, develop the rules and expectations for the participants. Be confident of what will be covered and presented. Understand that conflicts happen and have a plan to follow when resolving them. Most importantly, have a process in place for how the group will work through meetings. Review the following to efficiently identify a need, formulate rules, fine tune content, effectively problem solve, and structure a group.

| Forming a Group | Make sure your consumers have invested interest in the group suggested. What will it be that brings the group of consumers together? What will be accomplished by starting the group? Theme or common interest? Book or workbook needed? Guest speakers? Work process improvements? Guidelines/Code of Conduct How often will they meet? What time of day, day of the week, and how long will you meet for? |
|---|---|
| Formal Agreements Code of Conduct & Guidelines | To be covered at the <i>first meeting</i>: Agree to Content – what will the group focus on |

| | • Agree to Process – ground rules to be abided by and enforced by participants |
|--|--|
| | Agree to times and places |
| Group Content | What does the content of the group focus on? Shared experiences Learning new things Using a workbook Group brainstorming Setting goals Reporting progress Being a support group |
| Conflict Resolution | Challenges in the Group Process One person dominates the discussion The group gets off track & discuss unrelated things Someone tries to tell people what they SHOULD do Lack of participation Someone gets very upset and needs one-on-one help Two members are arguing Members aren't using "I" statements Reverting to unhealthy roles |
| Group Process How will the group run? | Group Problem Solving Techniques DON'T give advice Lay out the expectation that participants are responsible for their own problem-solving, the group is there to help them process; be comfortable reminding participants of this Active listening Clarifying what the person is saying Ask questions related to what the person is saying Reframe in order to clarify the challenges DON'T problem solve for participants Facilitation Method Rotate member to member Time Specific – allotted amount of time per person |
| now with the group full? | Co-Facilitating – more than one person facilitates the group Code of Conduct/Group Guidelines Confidentiality No Crosstalk Mutual Respect No Labels Taking Turns Silence is Ok Meeting Structure Welcome Announcements Round Table Discussion Time for Wrap-Up Duration of Group Group Updates/News Membership |

| How will participants become members? |
|--|
| How many participants is too many? |
| How long will participants be members? |
| Recruiting new members? How? |

Group Facilitation

As facilitators, you aren't focused on impressing anybody. Facilitating is the task of working with group members to achieve objectives identified when putting the group together. You, yourselves, are slated to gain wellness, recovery, and forward movement just like the consumers joining you. So, don't overwhelm yourself trying to be the perfect facilitator. Remember that as you read this next section.

| Preparing for the Group: | |
|--|--|
| <i>The Environment</i> External Distractions | Set up your group space by eliminating potential distractions: Is it a comfortable space? Is there 'stuff' everywhere? Can people concentrate in the environment? Can everybody hear each other? 'Group in Progress' sign to limit outside interruptions Comfortable temperature and lighting Teaching Props – clean and ready to go Can participants see each other or does the space need to be arranged to accommodate. This will vary by group |
| Yourself Internal Distractions | Your thoughts – are they going to get in the way of running the group? Can they be put aside till after group? Prepare in advance – avoid nervousness, be confident of what you are presenting Have icebreakers for new groups Always have a plan B, for when things aren't going as planned. |
| <i>The Group</i> Group Structure | Discuss with your group the agreed structure to support best outcomes for all participants Be clear about the participant expectations Assess participant readiness so you know how to approach them in the group |
| Engaging Participants: | |
| Orient the Group Prepare participants for contents of groups prior to start time | Since content will consistently change, you'll need to orient the group: Be on the same page Greet participants with handouts on topic to empower multiple learning styles Let them know what is going to happen, how it benefits them, and how the group will begin In group, have participants share their knowledge and curiosities around the topic prior to beginning your presentation When ending the group, have each participant share how the information will benefit their wellness, recovery, and self |
| Involve Participants In doing so, you assist group members in connecting to one another as well as content | Attending to the Group, Do this to assert your presence of support to all participants: Make eye contact Position your body toward participants Stand up or write on board as a way to lift energy Walk around when in activity to offer guidance, support, and clarification |

| Engaging Participants, use partnering skills to retain connection: | | | |
|---|--|--|--|
| Active Listening | | | |
| Ask them for input Connect what they say to session content Use humor | | | |
| | | | • Invite silent participants to engage |
| | | | • Keep on task |
| | Connect members for increased growth and support | | |
| Modifying the Group: | | | |
| Evaluate What went well. What didn't. | How engaged are the participants? Did they talk or acknowledge discussions in the group? Were they distracted? On their phones? Find out how they feel about group. | | |
| Content/Pace What you were talking about. The speed of the group. | Was the content an issue? Was it too fast or too slow? Is it uncomfortable? Lack of interest Discrepancy regarding pace amongst participants | | |
| How to Modify As a group, decide how to improve it via modification. | Match pace to the majority of participants Support the faster and slower participants outside of group Some Evidence-Based Practices don't allow for modification | | |

Facilitate Your Group

Take some time to design your perfect Peer Run Group. Make sure your topic is something you are passionate about and recovery related. Be creative and make it interesting. Allow yourself ten minutes for the presentation and another five minutes for follow-up dialogue. Complete the following exercise and be prepared to present your group to the class during Session 5.

1. Compile your group expectations, ground rules, participation guidelines.

2. Select a topic you're are passionate about. Organize some useful information and formulate answers to common questions.

3. Orient the group – LEARN what they already know about your group topic.

4. Facilitate your discussion by filling in the blanks of their 'baseline' knowledge. Allow opportunity for questions to develop understanding of what was shared.

- 5. Collect Class Evaluations/Feedback
- 6. Complete after you've presented

| What w | vas it like | to be a facilitator? | |
|----------|-----------------------|------------------------------------|---|
| | | | |
| | | | |
| What w | vas comfo | ortable about it? | |
| | | | |
| | | | |
| What w | vas challe | nging about it? | |
| | | | |
| | | | |
| After th | nis exercis | se, what do you most want | to learn more about or practice now? |
| | | | |
| | | | |
| Slide | Time 3:19 m | Video Title Peer Support Groups | YouTube Link https://www.youtube.com/watch?y=OOkfildYY |