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# INTRODUCTION

#### Dear Participant,

Welcome to Intentional Peer Support! You are about to embark on a new and exciting path. I hope this workbook will help you discover many things, but the main goal will be to provide you with a very different way of thinking about "help."

Over the last 35 years, peer support in mental health has evolved out of a human rights perspective. Starting in the late 1970s, when most of the mental health community was talking about lifelong illness and containment in the community, people working in peer support were talking about rights, consciousness raising, alternatives, and choice. While all this was developing, so were the ideas about what makes peer support different from other kinds of help. Not better or worse, but a whole different way of thinking about life and supportive relationships.

This workbook is the product of many years of working with peer support practices. I have drawn from a variety of fields; so much of what you'll read and learn really has little to do with traditional mental health. For example, we will rarely talk about illness and never about diagnosis, assessment or treatment. What we will discuss is your learning and growth and how to form relationships that are mutually transformative, supportive and challenging.

There are a few things that you'll want to know that are very important:

- First, there are no wrong answers! Everything we do, think, and say helps us to learn while challenging some of our beliefs.
- Second, I suspect that this information will be life changing for many of you (especially if you really do the exercises, apply the material, and s-t-r-e-t-c-h!).
- Third (and best), you already know all there is to know about peer support! That's because you are you and that is the best any of us has to offer. Now, having said that, we are also endlessly evolving and learning and changing through relationships.

Ultimately, this course is about building a healthier world – one in which people aren't labeled but rather understood through the lens of their experience. It is about helping each other examine the lens we look through and decide whether this perspective has been useful to us. And finally, it is about helping each other move towards the lives we want.

You see, simple. There's no assessment, there's no treatment, and you don't need to know anything about psychology or psychiatry. All you need is the ability to be challenged, to stick with the process, and to express your needs while negotiating the needs of others.

So let's start right off with some questions to ponder in order to gear you up for what's ahead.

What's the strongest quality you bring to the peer relationship?

What do you think you'll most need to work on in terms of building strong peer relationships?

# Journal Writing

In all of these modules, you will be expected to do some reading, some exercises, and participate fully. Since most of the material is about doing things differently, I will also ask you to keep a journal of those things. This will be structured by some guiding questions that we'll offer throughout each module. For those of you who don't love to write, journaling can take many forms. Sit down and talk to a friend, talk into a tape recorder, write a poem, draw, or anything else that helps you really think about yourself and this material.

Please note that although we would like you to share your responses and ideas, you don't have to share anything you are uncomfortable with sharing.

# ABOUT PEER SUPPORT...

## Learning Objectives

To begin an exploration of what makes peer support different from other kinds of help

- To learn about the specific tasks of peer support
- To discuss the notion of worldview and it's relevance to "doing" peer support

# What Is Peer Support Anyway?

What is this thing that we're calling peer support?

Is it about being a paid friend? Not really. Is it about taking care of someone? Definitely not. Are you providing treatment? No. Are you connecting with someone in a way that contributes to both people learning and growing? That's it!

So what makes this different from other kinds of help?

### It's about giving and receiving

This might not sound like a big deal, but for many people relationships have become all about getting: telling your problem story and then getting help with it. There is little, if any, emphasis placed on giving back. That's a big deal! Service relationships are like a one-way street and both people's roles are clearly defined. But in "regular" relationships in your community, people give and take all the time. No one is permanently on the taking side or the giving side. This exchange contributes to people feeling ok about being vulnerable (needing help) as well as confident about what they're offering. For many of us, being in the role of 'getter' all the time has shaken our confidence, making us feel like we have nothing worthwhile to contribute. Peer support breaks that all down. It gets complicated somewhat when one of us is paid, but modeling this kind of relationship in which both of us learn, offers us the real practice we need in order to feel like a "regular" community member as opposed to an "integrated mental patient."

Was there ever a time where you felt like most of your relationships were based on just getting support? How did you begin to think about your relationships? How did you think about yourself?

#### Peer support is not based on psychiatric models or diagnoses

This may sound obvious, but it is a stumbling block for many people. We'll talk about this a lot throughout the training because it is much harder to do than we might think. Too often, when we get frustrated, confused, afraid or uncomfortable, it is easy to fall into seeing each other through the lens of illness. It will be important for us to notice throughout the training when we find ourselves falling into psychiatric assumptions about ourselves or others.

# In peer support, we encourage one another to re-evaluate how we've come to know what we know

We'll spend a lot of time on "worldview" later but it's important to think about how you've made sense out of your experience. How we look at things and how we relate to each other is a product of lots and lots of messages through our lives. In other words, the way we see the world and make sense of things is based on everything we've ever experienced. Just thinking this way helps us to consider the possibility that there are many truths out there.

What's the difference between a strong feeling and a symptom? How did you learn to make that distinction?

# Peer support is about creating relationships that make it okay for us not just to be in peer relationships, but to use them as a tool to take a bigger look at how we've learned to operate in the world.

This really gets at the heart of peer support. Peer support relationships give us the opportunity to explore where we may have gotten stuck in certain interpersonal patterns. The challenging part in this is sticking with it even when it doesn't feel like it's comfortable or supportive. It means sticking with the process of working out our differences and tolerating the discomfort of trying on new ways of thinking. It means being willing to support and challenge each other to "walk the talk."

Describe a relationship that really made you take a look at yourself in new ways.

# This Is Trauma-Informed Peer Support

Trauma-informed peer support is distinguished from some of the other kinds of peer support models, in that it starts with the fundamental question, "What happened to you?" rather than the traditional question, "What's wrong with you?" There is much we can learn about being with each other when we make this shift. We will spend more time talking about this later in the workbook.

# Peer Support Is Intentional

Being intentional means that we come into the relationship with a specific purpose in mind. While peer support assumes the characteristics of any healthy relationship, there is also a specific intention.

# This intention is to purposefully communicate in ways that help both people step outside their current story.

Complicated? Not really. It simply means that when we communicate, we try to stay very aware that what we're hearing and saying comes from "how we know what we know." It means that in real dialogue, we are able to step back from our truth and be very deeply open to the truth of the other person while also holding onto our own. When this type of dialogue occurs, both of us have the potential to see, hear, and know things in ways that neither of us could have come to alone. These are the conversations that can be life-altering!

## The Tasks Of Peer Support

So, if we start with that definition, how do we go about accomplishing this thing called peer support? As I see it, there are four central tasks. They go something like this:

- Task 1: Connection The core of peer support
- Task 2: Worldview Helping each other understand how we've come to know what we know
- Task 3: Mutuality Redefining help as a co-learning and growing process
- Task 4: Moving Towards Helping each other move towards what we want instead of away from what we don't want

\*Note: It is critical (as you'll see through the workbook) that these tasks are tackled specifically in this order.

#### Task 1: Connection

When you think about it, connection is the core of peer support. It is the magical moment when we realize that someone else "gets it." It is the beginning of building trust...but often it doesn't last for long. We have to work at it, notice when it's there and when it's not and be willing to work at it.

How do you know when you do or do not have a connection with someone?

Sometimes when we lose connection, we find ourselves in judgment ("Maybe that person is mad at me" or "I can't believe he just said that"). In order to reconnect we have to try to understand the situation in terms of context ("What did he mean when he said that?"). Sometimes it means taking a deep breath and apologizing for our part in the 'disconnect' ("I'm sorry, I just had a really strong reaction to what you said").

What are some of the things that cause you to disconnect?

Reconnecting is also sometimes challenging when we feel hurt, blown off, misunderstood, or distracted. It may not happen the second after you've had a disconnect, but there are some strategies for reconnecting:

- 1. Name what happened (e.g. "I just noticed that we kind of disconnected, did you?")
- 2. Own your part (e.g. say it when you've found yourself disconnected)
- 3. Apologize (it's ok to notice what happened and apologize for your part in it)
- 4. Ask (e.g. "I wonder if I've said something that bothered you?")

What are some other things you can do to reconnect?

#### Task 2: Worldview

We've talked a little about worldview, but let's make sure we understand. Helping each other understand how we've come to know what we know means stepping back from our "knowledge" and thinking about how we've acquired that knowledge – a combination of our cultural background, our family background, and all the individual experiences we have had.

Sometimes it's a real leap of faith to truly believe that there are many ways of understanding an experience.

How do you describe someone who hears voices?

How did you learn to think about it in that way?

What might "help" look like based on this way of thinking?

What might someone who grew up in a culture where hearing voices is considered a valuable experience think about someone who hears voices?

What language might they use to describe it?

What would "help" look like based on this definition?

If we're gong to help each other think about how we know what we know, the first thing we've got to do is explore how I know what I know. I can't help you get unstuck if I'm still stuck myself.

Think of a time when you felt emotional pain for no apparent reason. What did you call it and how did you explain it?

How did you learn to think of it that way?

What did you do about it?

Now think of a time where you felt emotional pain because you lost someone close to you. What did you call it?

How did you learn to think about it that way?

What did you do about it?

### Task 3: Mutuality

"Peer support relationships are mutual and reciprocal. This can be very healing for people who have been in the patient or client role for a long time. That is, being socialized into the role of a "good" mental patient often means learning to become preoccupied with matters pertaining to "me." Socialization into self-preoccupation starts in the hospital where each day begins with a nurse asking you if your bowels are moving, if you slept that night, etc. Socialization into "me-ness" proceeds on through the years as each and every case manager, therapist, residential worker or vocational rehabilitation counselor asks, "How are you doing?" Unlike normal social discourse in which 'how are you doing' acts as a perfunctory greeting, mental health discourse requires the client to take the question seriously and to answer by revealing more about "me." In addition, in most mental health settings, clients are not encouraged to help each other or anyone else. In this sense, the currently popular term "consumer" seems apt. It conjures the image of a large mouth consuming and consuming without a hint that it would be possible to contribute something back.

Socialization into me-ness, self-preoccupation and being a consumer means that many people are denied the opportunity to discover they have something to offer to other people. This iatrogenic wounding is another reason relationships can be so healing. It is healing to learn that one needs and is needed, cares and is cared for, and can receive as well as give."

- From Pat Deegan website archives, http://www.patdeegan.com/blog/archives/000015.php

While the third task sounds pretty easy, it means really taking a hard look at how the ways in which we've been "helped" might have rubbed off on us. For example, when various helpers have thought they were being helpful by doing things for us or assuming we were fragile, we may have gotten the idea that "help" meant just that (doing for). Then, when we become the helpers, it wouldn't be too surprising to fall into some of those old "helping" behaviors. After

all, it feels pretty good and pretty powerful to know that we are doing something for someone who we see as in need.

We talked before about how important it is to create community-type relationships rather than service-type relationships. Again, this gets tricky when one person is paid, but think about how important feeling valuable and helpful has been to you. Think about how your life has changed when you've been able to successfully negotiate (and deepen) your relationships.

Think of a situation (as an adult) where someone assumed that they needed to take responsibility for you. What happened to that relationship?

How did you feel about yourself?

How did this make you think about 'help'?

Now think of a situation where you and another person were able to help each other through a difficult situation. How did you feel about yourself?

How did this make you think about 'help'?

#### Task 4: Moving Towards Instead Of Moving Away From

The fourth task also sounds easy, but in fact is quite difficult. Rather than helping each other move away from what isn't working (problems and solutions), we help each other move towards what we want (vision and action). In traditional mental health, the focus has been developing solutions or strategies to deal with problems. Most of our conversations are about what's not working. BUT when we're moving away from what's not working, we stay tied to the problem. When we're moving towards what we want, we can create the beliefs and the actions that we'll need to get there. Believe it or not, this is a radical shift in thinking, and one that challenges our traditional assumptions about help. Later on in this workbook we will talk specifically about how our conversations can change in order to help make this shift.

What happens to your energy when you're constantly trying to keep "problems" at bay?

What happens to your energy when you focus on moving towards what you want?

Why is it crucial to define this kind of peer support differently from other kinds of help?

Well, that's easy but it's also complicated. Over the past decade or so, the mental health field has started to talk about recovery. They've realized, through research and experience, that people can and do get better, move out of the mental health system, have lives, and can become indistinguishable from anyone else in the community. People in the mental health field have spent a lot of time thinking about how to make that happen. The problem is that they're still attacking it from an illness perspective. In other words, if they can get people to better cope with their illness, maybe work through their trauma and abuse issues, perhaps they will become more independent. Though this way of thinking isn't bad or wrong, it is not our focus in peer support. In fact, we really don't think about illness at all!

Peer Support is about creating mental health, but mental health is not the opposite of mental illness. For me, mental health is simply one's ability to feel connected in the family (whatever that is for you) and in the world while continuously learning and growing. It is a creative process rather than a coping process. It is also not an individual phenomenon. It's more like playing with a great jazz band where you're giving, getting, and creating together. In a jazz band, each musician contributes their voice and their heart and soul while simultaneously listening to (and being affected by) the hearts and souls around them. When this works well, the piece of music being created is way more powerful than any of the parts combined. As this type of creation happens, the process becomes invisible and the players become part of something that invigorates and energizes them. Out of this energy come possibilities that we couldn't have found had we not been part of the creating.

If we just come into peer support with the expectation that we're here to help people deal with their problems, we miss the opportunity to dramatically change the overall conversation (and probably the outcome of it). This is why it is so important for us to have a voice in what constitutes a truly 'recovery-oriented' mental health system.

So you see, it is not about me just listening to you tell me about your problems and then helping you figure out what you're going to do (which ultimately keeps us stuck in an old story). Instead it's about moving out of what's comfortable and familiar and become open to possibilities otherwise unknown. This means that we need to get more familiar with what and how we've "known."

What are you moving towards?

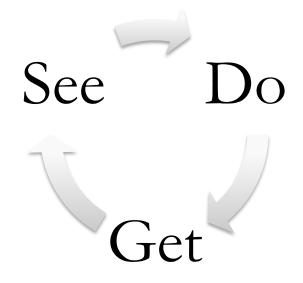
What are the things that energize you about this vision?

What gets in the way of 'thinking outside the box?'

# A Deeper Understanding Of Worldview

"There is no such thing as human nature independent of culture" - Clifford Geertz

As we've said earlier, the way that we see the world, think about our experiences and relate to one another is influenced by a gazillion experiences throughout our lifetime. If that weren't enough, our ancestors also had a zillion experiences, which influenced how their parents brought them up and taught them. On top of that we all grew up in different families, and in different cultures and, of course, in many types of environments. I, for example, grew up in a small town and never even thought about locking a door or riding my bike to a friend's house. Others grew up way out in the woods where everything and everyone was a long drive. You counted on your brothers and sisters or extended families as playmates. Still other people grew up in lots of different places and learned many different ways of being in the world. The point is we've learned to see/think/act/relate/believe based on our cumulative experience. Let's take this one step further. Steven Covey (1989) taught a basic change model that looks something like this:



What does this mean? Let's think about that. When I've learned to see the world as a safe place where people are basically trustworthy, I won't think about locking my door when I leave my house. When no one breaks into my house, it reinforces my belief that the world is a safe place. On the other hand, if my house gets broken into, my sense of safety (or the way I see the world) will be challenged. I may begin to see the world as less than a safe place. In the context of mental health, if I see myself as fragile and in need, what I do is look for people who will take care of me. What I get is people believing that I am fragile and incapable which reinforces the way I see myself. If I still see myself as fragile and in need but I do something new, I very well may feel uncomfortable. If I haven't changed the way I see myself, I might "get" failure with the new thing I've tried, which still leads me back to the same old way of seeing myself. It's only when I change how I see myself that doing something different gets me different results. For example, if I see myself as strong and capable, I am willing to do new things and tolerate the discomfort. This gives me a sense of accomplishment that then reinforces my belief that I'm able.

Well, all this is a lot of information and probably doesn't mean a whole lot yet...be patient! Seeing, doing, and getting in new ways takes lots of practice. As you go through the training, keep notes on how your 'seeing' is changing and what's happening because of that. It has to happen with us before we can support having this conversation with someone else.

# I need to make changes in how I see myself before I can make significant changes in what I get.

How will peer support be different from just being friends? How will it be different from clinical help?

## Learning Objective Questions

- 1. Please describe and provide examples of how peer support is different than other kinds of help.
- 2. Please describe (in your own words) the tasks of peer support. Give examples of how they apply in your own life.
- 3. Please provide an example of how your worldview (your beliefs) influences what you do.

#### Summary

#### Peer Support Is About:

- Putting energy into mutual learning relationships as opposed to service relationships
- Connecting/reconnecting with family, our culture and the community
- Helping each other take a look at how we've come to make sense of the world
- Redefining mental health
- Figuring out how to make this work for both of us
- Supporting and challenging each other to move towards the life we want
- Changing the world!