



## **Supporting Community Connection**

### **Community Engagement Education Package**

MHCC NSW 2018/2020 NSW NDIS Information, Linkages  
and Capacity-building (ILC) Project

## **Co-design Working Group - Stage 3**

## **Sydney: Redfern Community Centre**

**Wednesday 27<sup>th</sup> November 2019**



## CO-DESIGN WORKING GROUP 3: PARTICPANT HANDOUT

**9:00am - 9:20 am**

### **Welcome & introductions**

*Aim of today: To have fun and explore recovery and the challenges and needs of people with mental health conditions when connecting with living a fulfilling life in the community of their choice.*

**9:20 am - 9:40 am**

Overview of the Project and Co-design Working Groups

Overview of the Draft CEEP Framework and who the learning materials are being made for

Topic/video 1 – What is Recovery?

**10:20am to 10:40am**

### **Morning Tea**

**10:40am - 11.40am**

Topic/video 2 - Community Inclusion

Topic/video 3 - Supports and Services

Topic/video 4 – Embracing Change

**11.40am – 11.50am**

### **10 Minute Break**

**11.50am – 1pm**

Topic/video 5 – Creating Healing Environments

Topic/video 6 – Empowerment

Reflections on the project's co-design process

Next steps

Planning for final CDWG

**1:00pm - 2:00 pm**

### **Networking Lunch**

### **Date and Location**

Wednesday 27<sup>th</sup> November 2019

9:00am – 2:00pm

Redfern Community Centre  
Sydney

### **Present**

Tina Smith, Project Manager - MHCC

Yvette Segal, VET Instructional Designer - MHCC

Rebecca Lewis, Project Officer - MHCC

1. Sean – Consumer Participant (trial Participant)
2. Larry – Consumer Participant
3. Jenny – Consumer Participant
4. Bridget – Consumer Participant
5. Sue – Consumer Participant (trial participant)
6. Terry – Consumer Participant
7. Marie – Consumer Participant
8. Marlene – Consumer Participant
9. Stephen – Consumer Participant
10. Cindee – Consumer Participant
11. Simone - Consumer Participant
12. Joseph - Consumer Participant
13. Fiona - Consumer Participant (trial participant)
14. Annette - Consumer Participant
15. Elizabeth - Consumer Participant

Note: Excluding MHCC staff three people had attended the trial and most had not.

## **Introduction**

Tina opened the day and welcomed participants; all participants briefly introduced themselves and said a little bit about what brought them to the day.

## **Overview of the CEEP Project and Co-design Working Groups**

The attendees included ten new participants, so the start of the day included an overview of the CEEP project, briefly explaining the findings of the first two co-designs. This also provided a recap for past participants.

During the overview Tina described the project process, summarising the experiences and findings of the first two co-designs. Tina provided the group with an evaluation report from the previous co-design and set about setting expectations for the day.

## **Overview of the Draft CEEP Framework and who the learning materials will be available to.**

Tina explained that the draft CEEP Framework did not change much in the leadup to the trials other than adding content depth and that we are awaiting trial evaluation findings from The University of Sydney and the co-design 3 feedback to further refine the learning materials.

The learning materials are primarily targeting Community Workers but also others (ie, volunteers and peers – the latter of whom are people with lived experience who may be in paid or unpaid work roles).

Tina explained that we want to have conversations about the key skills that Community Workers, volunteers and peers need to have to better support people living with mental health conditions to have a fulfilling life outside of a funded NDIS package.

Co-design working Group participants that attended the trial were asked to briefly share their experiences of the trial

## 1. Topic/video 1 – What is Recovery?

Participants were shown video 1.

After watching the video Tina explained that the learning outcome of the video is currently for, **‘Community Workers and others to understand the importance of hope, purpose and meaning when healing from the impacts of a mental health condition’**.

Participants were asked if this outcome feels right and then asked, “What are the most important elements that Community Workers and others need to know about ‘What is Recovery’”?

Comments were scribed on butchers’ paper, which was left on the wall throughout the workshop, for complete transparency in the co-design process participants were invited to read the butchers paper and could recommend edits if they felt their comments were interpreted incorrectly.

The following are participant comments:

- Participants liked the truth in the videos, the real lived experience.
- The message that you may not recover 100% exactly the same as you were before but you will still have a fulfilling life
- Participants like the diversity of views/ recovery is different for everyone/ not a stock standard thing
- Recovery is about self acceptance/ acknowledging who you are
- Insight/ self awareness
- This video may be the first experience of mental health “recovery” for people watching
- Liked the message that it doesn’t matter what level you are functioning at
- Some participants felt the video showed a stereotype of a “deficient model” of people with lived experience.
- Having the support people in the video made some participants feel those people needed a support person and that not all people with a mental health condition need professional support people.
- They felt the video should include more hopeful and inspiring messages.
- The video should show more accomplished people and that accomplished people can have a mental illness.
- Some mental illnesses are very high functioning
- Put a variety of people
- Put better looking people in the video.

The point was made that the people in the video are accomplished, many are working, studying etc. After this conversation the following points were made:

- The recovery video didn’t show the depth of the video participants
- Consider including a longer introduction/title of each person explaining what they have achieved.

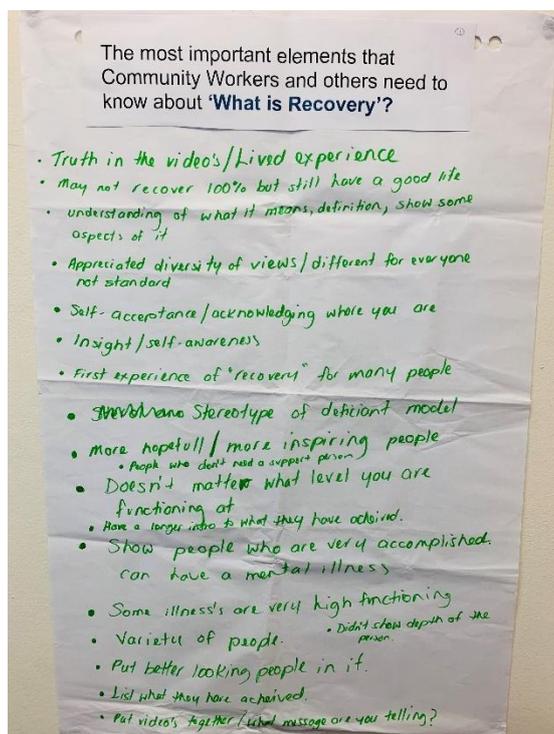
Participants felt it was important the videos explain recovery in a mental health context as for many viewers this would be their first experience of recovery. Other important messages included the following:

- Recovery varies from person to person
- One episode of mental illness may differ from a previous episode
- Recovery is about self awareness, self-acceptance and a sense of self.
- It's about working towards a better quality of life, and a better quality of functioning in life.

### Recommendations and Improvements

Participants felt the video needed the following improvements:

- Some participants felt the video seemed to show a “deficient” model of recovery
- There were recommendations to use people with a high profile, for example celebrities with a disclosed mental illness – James Packer was used as an example.
- Use inspiring people, people who were “achieving” and “high functioning”
- It was recommended that the video showed people’s job titles as well as their names.
- The video is book ended by service/support worker when it should be book ended by consumers
- Need to see more use of words like hope, inspire, optimal, rewarding, fulfilling.



## 2. Topic/video 2 – Community Inclusion

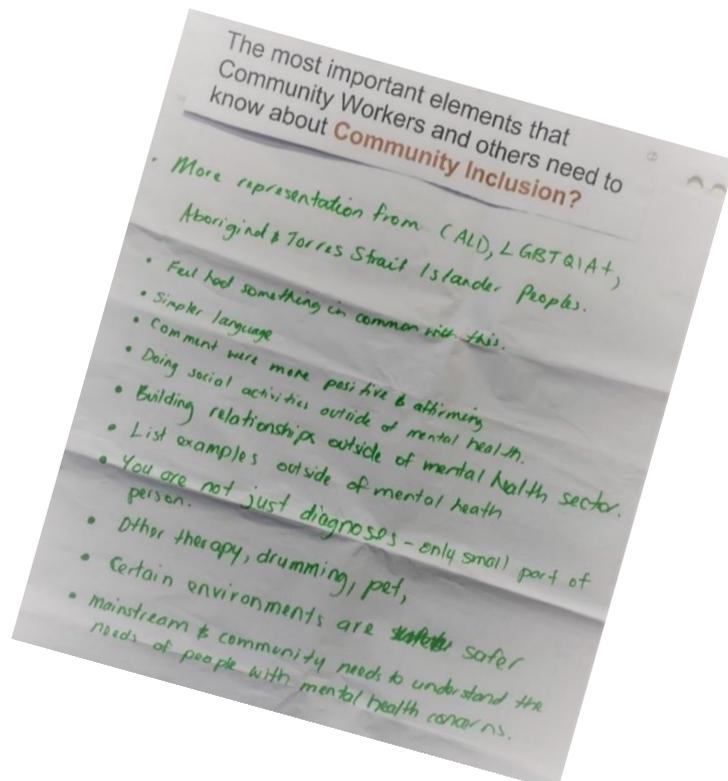
The group viewed the Community Inclusion video and were advised that the current outcome we are seeking to achieve is that '**Community Workers and others understand the importance of supportive environments in recovery**'.

The group were then asked if this outcome is correct and to comment on the following "What are the most important elements that Community Workers and others need to know about 'Community Inclusion'?"

The following comments were scribed on the butcher's paper:

- More representation from CALD, LGBTQIA+, Aboriginal and Torres Strait Islander Peoples is needed
- Felt they had something in common with this video
- Simpler language was used
- The video felt more positive and the comments in the video were more positive and affirming.
- Recovery needs to include social activities outside of mental health, community inclusion is part of this
- Show a list of examples outside of mental health
- You are not just your diagnoses – only a small part of a person
- Other therapy, drumming, pet therapy
- Certain environments feel safer
- Mainstream and community sector need to understand the needs of people with mental health concerns

The group seemed to have a more positive response to this video. One big area of improvement that was discussed was the lack of diversity in the video.



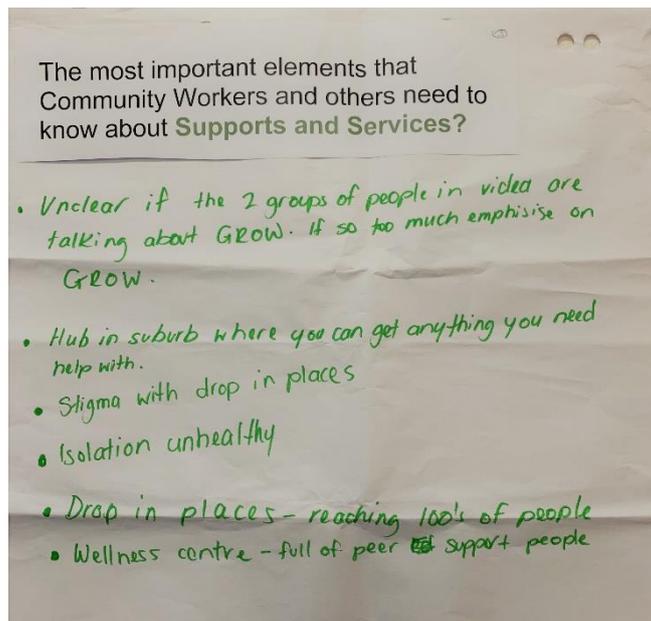
### 3. Topic/video 3 - Supports and Services

The group viewed the Supports and Services video and were advised that the current outcome we are seeking to achieve is that **'Community Workers and others have greater knowledge of supports and services outside of the NDIS and acute mental health services'**.

The group were then asked if this outcome is correct and to comment on the following: "What are the most important elements that Community Workers and others need to know about 'Supports and Services'".

The following comments were scribed on the butcher's paper:

- It is unclear if the two groups in the video are talking about GROW. If so, there is too much emphasis on GROW.
- There should be a hub in each suburb where you can get anything you need help with.
- There is a stigma around drop in places
- Isolation is unhealthy
- Drop in places – reaching 100's of people
- Wellness centre – full of peer support people.



The feedback for this topic was quite positive, it was pointed out the importance of showing a role model "good community worker".

#### 4. Topic/video 4 – Embracing Change

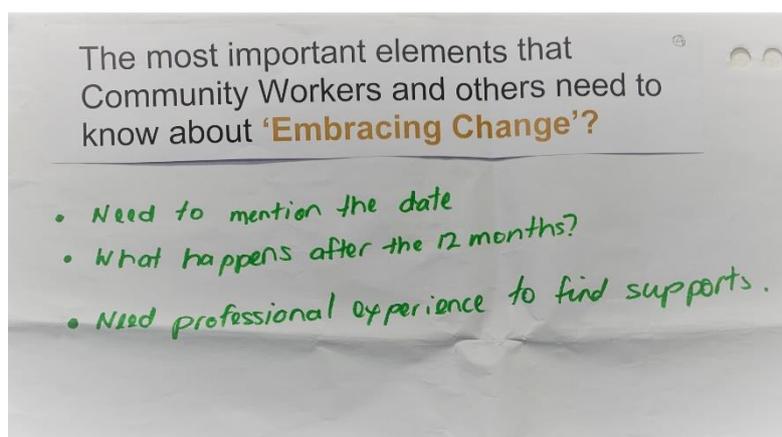
The group viewed the 'Embracing Change' video and were advised that the current outcome we are seeking to achieve is that **'Community Workers and others are aware of new approaches and practices in the mental health, NDIS and ILC environment'**.

The group were asked to think about, "What are the most important elements that Community Workers and others need to know about 'Embracing Change'?"

**Note** - Tina advised the group that Embracing Change was formerly titled "Mental health, the NDIS and ILC" and after strong feedback from the last co-design we changed the title to a more positive note and plainer English title, making sure to drop the acronyms. The learning outcome has changed from understand to 'aware' after feedback indicating learners would not be expected to 'understand' mental health, NDIS and the ILC.

The following comments were made:

- Need to mention that date that services discussed in the video end/changes start
- What happens after the 12 months?
- Need professional experience to find supports.



Additional feedback from the embracing change video:

- Include a video of a high-profile person to provide updates as the NDIS evolves
- Possibly an MHCC person to articulate that we used a diverse range of people in filming.
- Need more lived experience male representation across the videos and for the beginning of each video.
- It would be helpful to have link to services hubs to direct people to the nearest contact point.

## 5. Topic/video 5 – Creating Healing Environments

The group viewed the Creating Healing Environments video and were advised that the current outcome we are seeking to achieve is that **‘Community Workers and others understand importance of trauma informed care and practice’**.

The group was then asked to think about, ‘What are the most important elements that Community Workers and others need to know about ‘Creating Healing Environments’?’

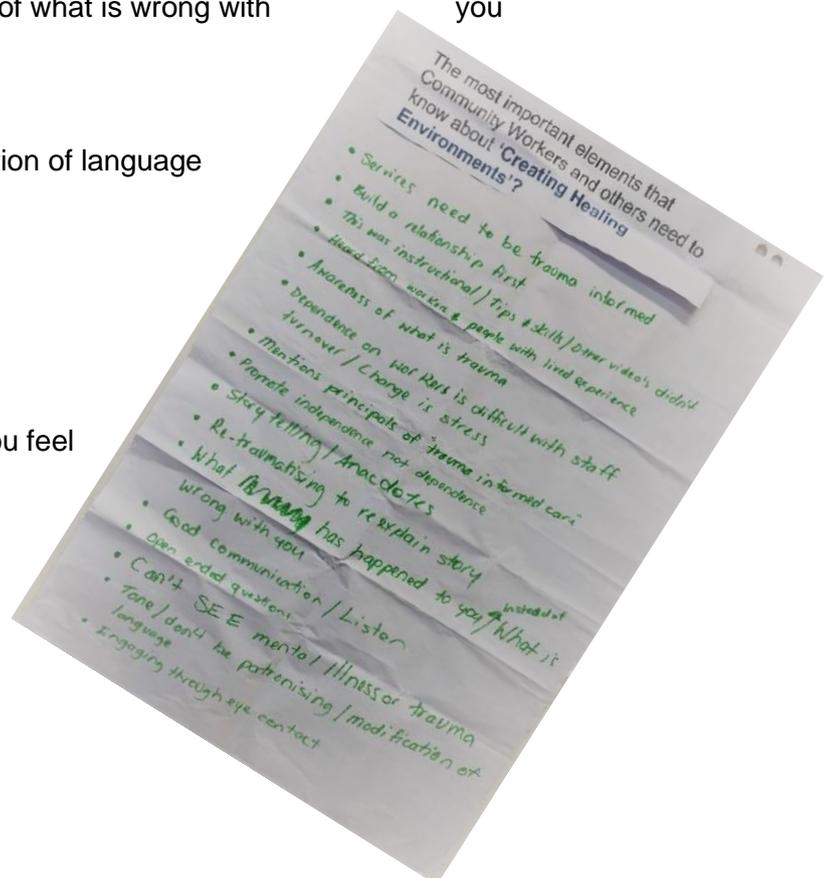
**Note** - Tina advised the group that the topic/video was previously titled ‘Trauma Informed Care and Practice’, however, after feedback from the previous co-design the topic was changed to ‘Creating Healing Environments’.

The following are comments from participants:

- Services need to be trauma informed
- Build a relationship first
- This video was instructional with tips and skills the other videos didn't possibly have
- Heard directly from workers and people with lived experience
- Awareness of what is trauma
- Dependence on workers is difficult with staff turnover/change
- Mentions the principals of “trauma informed care”
- Promote independence not dependence
- Storytelling/ anecdotes
- Re-traumatising to re explain your story
- What has happened to you instead of what is wrong with you
- Good communication/listen
- Open ended questions
- Can't SEE mental illness or trauma
- Tone/ don't be patronising/modification of language
- Engaging though eye contact.

Additional comments noted on the day:

- Develop skills to stop someone if you feel threatened
- Say “I hear you” = validation
- Be aware of childhood trauma
- Boundaries, space and time out.



## 6. Topic/video 6 – Empowerment

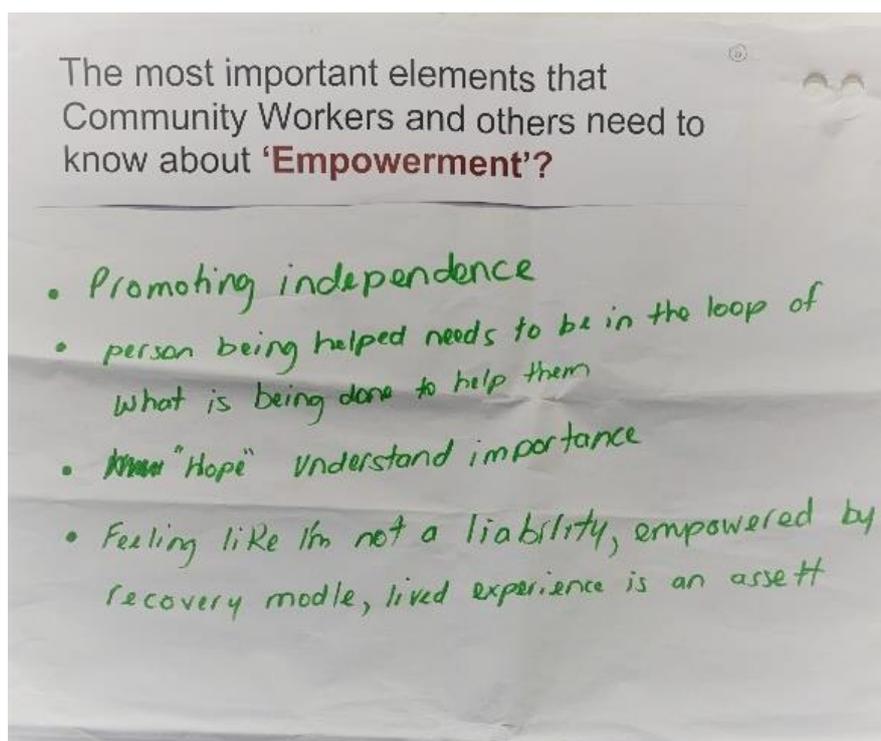
The group viewed the Empowerment video and were advised that the current outcome we are seeking to achieve is that **‘Community Workers and others understand self-direction as a key recovery tool’**.

The group was then asked to think about, ‘What are the most important elements that Community Workers and others need to know about ‘Empowerment’?’

Tina advised the group that the topic/video was previously titled ‘Self-management’, however, after feedback and a strong dislike of the term self-management from previous co-design groups the topic was changed to ‘Empowerment’.

The following are comments from participants:

- Promoting independence
- Always ensure the person being helped needs to be in the loop of what is being done to help them
- “Hope”, understand the importance of this word
- Feeling like I’m not a liability, empowered by recovery model, lived experience is an asset.



## **Conclusion**

The third Sydney co-design had the highest number of participants with 15 attending in total including three people that attended the trial. As well as five return participants from the first two Sydney co-design's there were ten new participants. This reflects positively on the traction the project is receiving.

The participants provided an in-depth critique of the videos. A complicating factor may have been that the videos were viewed outside of the context of the trial's one-hour training course. The videos will be used outside of face-to-face training by some people moving forward and thus we should strive to adjust against this feedback. The main points the Sydney group noted were:

- The lack of gender diversity
- the lack of other diversity (Aboriginal and Torres Strait Islander People, Culturally and linguistically diverse people, LGBTIQ+ people, people living in rural or remote communities and cognitive/neuro diversity)
- an issue with video 1 'What is Recovery?' that people with lived experience were not front and centre in the video (ie, it seemed to profile supporters)
- that notions of 'hope' were not sufficiently highlighted in 'What is recovery?' or elsewhere
- they wanted to see people with a broader range of cognitive/neuro diversity (specifically, some people wanted to see some higher functioning people living with, or trying to avoid developing, psychosocial disability)
- Some people think keeping people's names/titles on screen throughout the videos would be helpful to viewers in identifying who the 'cast' of 16 are including adding lived experience occupational titles as appropriate.
- The 'Embracing Change' module and video seems especially confusing to people.

Note: At the end of the Sydney co-design with watched the recovery video again and used this activity to explore whether their do-design contributions were being heard: the group agreed that they were.

## **Next Steps**

Along with the recommendations made in The University of Sydney's trial evaluation report and feedback from the MHCC CEEP Advisory Group and the MHCC CEEP Monitoring and Evaluation Working Group the CEEP project team are working towards finalising the "Supporting Community Connection" CEEP learning opportunities.

This includes working with "Lights, Camera, Business", the video production company to address the suggested changes to the videos.

The CEEP project has the following activities remaining:

- 2 more webinars – the next one is on the 26<sup>th</sup> of February 2020 and will provide an update on the trial of new learning materials and will continue the process of co-designing these resources.
- Fourth Co-design Working Group for Sydney and Dubbo – April 2020 (date to be confirmed)
- Third of three webinars – May 2020 (date to be confirmed).