# How to Start and Facilitate Support Groups for Veterans



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### Learning Objectives



- > Discuss steps to take when developing a support group for Veterans in community settings.
- > Discuss characteristics to look for when choosing the support group facilitator(s).
- > Discuss use of the facilitator's personal recovery story to promote conversation in the group.
- > Discuss verbal and nonverbal behaviors that promote conversation in the support group.

### Who are peer support providers?

- ➤ <u>Peer Support</u>: Peer support occurs when people with the same problem/experience help each other. There are different kinds of peer support-related activities, including peer support groups, self-help organizations (ex. Alcoholics Anonymous), and peer support providers.
- Peer Support Provider: "A peer support provider is caring and compassionate for what a person is experiencing. If the peer support provider has been through similar challenges, he or she may offer ideas or wisdom gained through his or her personal experiences to inspire hope, support personal responsibility, promote understanding, offer education, and promote self-advocacy and self-determination" (International Association of Peer Supporters, n.d.).
- > In VHA, Veterans are being hired as Peer Specialists to help Veteran patients with mental illnesses and/or substance use disorders to successfully engage in their treatment through sharing life experiences, providing encouragement, and instilling a sense of hope and skill building to promote recovery. These services are provided by an appropriately qualified Peer Specialist who has a specified set of expected competencies and is trained to use his or her lived experiences to help Veteran patients identify and achieve specific life goals related to recovery.
- > You are encouraged to set up a support group for Veterans that is facilitated by individuals who share similar life experiences to the Veterans in your community.

### **Examples of Peer Support Provider Roles**

#### <u>DO</u>

- ➤ Facilitate peer support groups
- > Share their own recovery stories
- Advocate for individuals that they serve
- ➤ Act as role models of recovery
- Provide crisis support
- Communicate with professional health care providers when needed to assist individuals in obtaining additional support

#### **DON'T DO**

- Provide psychotherapy
- Do other people's jobs/fulfill other people's roles in the facility
- Collude with individuals receiving health care services against their health care providers
- Cross boundaries
- Support individuals in their selfdestructive and/or illegal behaviors
- Criticize professional health care providers in front of individuals receiving health care services

### Selection of Group Facilitators

#### The support group facilitator should:

- Have good interpersonal skills
- Be dependable about scheduling and keeping meeting appointments
- > Be relatable to the group members/have some life experiences in common with the target participants
- Ideally have prior experience facilitating groups

It is recommended that there be two facilitators for each support group so that the facilitators can share responsibility for managing challenging situations that may arise in the group and also cover the facilitation of the group when one of the facilitators is absent due to illness or vacation.

### Training Resources for Support Group Facilitators

- National Alliance on Mental Illness (NAMI) Connection
   Recovery Support Group Facilitator Training:
   <a href="http://www.nami.org/Find-Support/NAMI-Programs/NAMI-Connection">http://www.nami.org/Find-Support/NAMI-Programs/NAMI-Connection</a>
- > Free recovery and peer support-related webinars:
  - Depression Bipolar Support Alliance (DBSA)—offered monthly: <a href="http://www.dbsalliance.org/site/PageServer?pagename=education-webinars#partII">http://www.dbsalliance.org/site/PageServer?pagename=education-webinars#partII</a>.
  - o <u>International Association of Peer Supporters (iNAPS)</u>—offered monthly: <a href="http://inaops.org/free-webinar-series/">http://inaops.org/free-webinar-series/</a>.
  - SAMHSA Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS): <a href="http://www.samhsa.gov/brss-tacs/webinars">http://www.samhsa.gov/brss-tacs/webinars</a>.
  - o SMART Recovery: <a href="http://www.smartrecovery.org/events/">http://www.smartrecovery.org/events/</a>





- > What type of peer support group do you want to organize?
- > Who are the target participants?
- > Who will be the supervisor of the facilitator(s)?
- > Where and when will the group occur?
- > How will you market the peer support group?

### **Types of Peer Support Groups**

Generally, there are three models for structuring a peer support group:

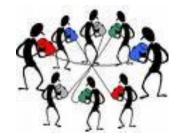
> Curriculum-Based



>Topic-Focused



>Open Forum



### Curriculum-Based Peer Support Group



A curriculum-based peer support group is highly structured and includes the following components:

- > There are several planned topics to discuss over time. Example curricula:
  - <u>Vet-to-Vet</u>: http://vet2vetusa.org/.
  - <u>Illness Management & Recovery</u>: http://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/SMA09-4463.
- > Topics are arranged in a pre-determined order of presentation.
- > Books, articles, and/or handouts related to the topics are handed out to read and discuss.
- > Discussion focuses on each topic in relation to the group members' recovery and coping with life's challenges.

### **Topic-Focused Peer Support Group**

A topic-focused peer support group can be structured in one of the following ways:

- ➤ Group focuses discussion on recovery and coping in relation to one topic area (Ex. spirituality; pain self-management; managing post-traumatic stress disorder; dealing with relationship challenges; life goal development; etc.).
- > Topics for discussion can be rotated based upon the interests of the group members.



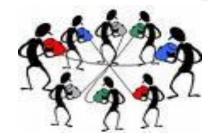
## **Topic-Focused Peer Support Group** (Continued)



Here are two approaches that can be used to stimulate discussion regarding an introduced topic.

- > Ask the group members questions or personal experiences related to the topic.
- > Share written materials related to the topic for group members to read and discuss.
  - Ask group members to share their opinions about the written material.
  - Ask group members to share their personal experiences as related to the topic in the written material.

### **Open Forum Peer Support Group**



- > An open forum peer support group does not include the structure of the other two models.
- > Usually, there is no pre-arranged agenda for the meeting.
- > There may not be rules regarding attendance (Ex. Drop-in peer support meeting).
- > Discussion evolves based upon the interests and needs of the group members.
  - "What do you want to talk about today?"



### **Date & Location of Group**



Determining who your target participants are will help you to decide where and when your peer support group will occur.

- ➤ The schedule of the peer support group needs to take into consideration the schedules for shuttles and public transportation accessible near the location where the group will occur. You do not want a Veteran to be stranded at the facility without a way to get home after the group meeting.
- > Choose a location that is free at the same time each day/week so that your group members have a consistent place to go for the meetings.
- ➤ When scheduling the time for the group, take into consideration the schedules of all of the following parties:
  - Your facilitator(s)
  - Veterans' work, treatment, and/or transportation issues
  - Your organization's other services (to ensure that the group is not scheduled at a time that competes with another significant program/activity for your targeted group participants)

### **Marketing Your Support Group**

After choosing the type of peer support group and scheduling a date and time for it, you need to advertise your group to Veterans. Here are a few marketing strategies:

#### > <u>Flyers</u>

- Post on bulletin boards at stores, your facility, and other community settings.
- Give copies to local chapters of Veteran service organizations.
- Give copies to contacts at local VA facilities.

#### > Announcements

- Your organization's community meetings
- Your organization's website, newsletter, Facebook page

#### > <u>In-Person Advertising</u>

- If your group is located in a place frequented by Veterans, have the facilitator(s) arrive early and talk with Veterans who are nearby (potential group members).
- Ask Veterans to tell other Veterans about the group's existence.





### Strategies for Staff Buy-In

Here are a few strategies you can use to try to obtain buy-in for your peer support group.

- > If possible, consult with VA staff members and staff from Veteran service organizations for their suggestions on topics that could be helpful in your peer support group for Veterans.
- > Ask those staff members for their suggestions on the time and place for your peer support group.
- > Establish a system for ongoing consultation about your peer support group, help with trouble-shooting issues, and facilitating warm hand-offs for group members who may need additional support.
- > Establish a point of contact if there is an emergency situation in your peer support group.

### Strategies for Veteran Buy-In



Here are a few strategies you can use to try to obtain Veteran buy-in for your peer support group:

- > Have the facilitator(s) be available before the group meeting to allow Veterans time to talk and get to know the facilitator(s).
- ➤ Have the facilitators spend time crafting their recovery stories and determining how they will share parts of it to help Veterans in your group.
- > Ask for feedback from group members regarding topics and their experiences with the group.

### **Comfort Agreement**



Guidelines are set by the group members and peer support group facilitator(s).

- > Promotes safety
- > Supports the group's overall goals
- > Identifies rules of etiquette
  - Courtesy and respectful actions

**Elements of Comfort Agreement** 

A comfort agreement includes:

- > Role of peer support group facilitator—what it is and what it is not
- > Start and stop time for group meetings
- > How members will be informed about group cancellation in case of emergency
- > Attendance expectations (if any)
- > Confidentiality and its limits

# Elements of Comfort Agreement (Continued)

- > Individual and group safety expectations
  - What can and cannot be said or done in meetings
- > Documentation about meetings (if required)
  - What is included and what is not included
- > Group etiquette
  - What can and cannot be said or done in meetings

# **Examples of Comfort Agreement** (Continued)

### **Examples of Comfort Agreement Content**

- > No personal attacks
- > Start and end on time
- > Bathroom breaks
- > One person talks at a time
- > Avoid cross-talk and side-talk
- > No threatening behavior
- > What is said here, stays here\*\* (There are limits to confidentiality)
- Discuss limits of confidentiality



### **Limits of Confidentiality**

- > Threat of harm to oneself (suicidal)
- > Threat of harm to others (homicidal)
- > Suspected child abuse
- Suspected elder abuse
- Any additional limit that your organization wants to add (ex. Appearing to the group meeting in an intoxicated state; appearing to the meeting with a weapon)



## Sharing a Personal Recovery Story: Facilitator Developing a Recovery Story

- > One of the major "recovery tools" that peer support providers bring is their own experience and recovery story.
- > The major reason why the recovery story is such a powerful tool is that it is the individual's own personal story in the way it happened.
- > The group facilitator can inspire Veterans by the truth, hope, and possibilities implicit in the facilitator's personal recovery story.



# Differences Between Illness Story & Recovery Story

One of the roles of a peer support group facilitator is to share his/her personal recovery story with group members in <u>brief</u> increments.

#### **Illness Story**

- Focuses on the impact of the diagnosis
- Features some of the following components:
  - Disabling effect of the diagnosis
  - War stories
  - Medications
  - Bad times
  - No hope
  - Belief that this is the way life will be

#### **Recovery Story**

- Focuses on change as possible
- > Features some of the following components:
  - Health
  - Wellness
  - Overcoming (what has worked)
  - "Changing" process

Benefits & Risks of Sharing a Personal Illness Story



#### **Illness Story Benefits**

- > Connectiveness
- Shows understanding about what another person is going through

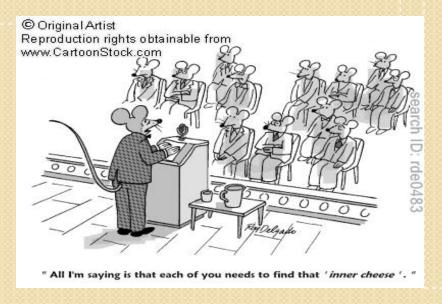
#### **Illness Story Risks**

- May keep the person stuck in thinking of him/herself as being sick
- Person hearing illness story may believe the illness story is not as bad as his/her own story

# Benefits & Risks of Sharing a Personal Recovery Story

#### **Recovery Story Benefits**

- Recovery/change is possible
- > Recovery is not linear
- Promotes/instills hope



#### **Recovery Story Risks**

- May seem as if promoting "my way" is the only way toward recovery
- Unfair expectations; setting the bar too high or too low
- Focusing on "me" and not the person I am supporting
- The facilitator's level of success may seem unattainable to a person in distress

# Components of a Personal Recovery Story

- ➤ What were some of the early indications that you were beginning to have difficulties?
- > Describe yourself and your situation when you were at your worst.
- > What helped you move from where you were to where you are now?
- ➤ How did you accomplish this? What did you do? What did others do to help you?
- > What have you had to overcome to get where you are today?

# Components of a Personal Recovery Story (Continued)

- > What have you learned about yourself and your recovery?
- > What are some of the strengths you have developed?
- > What types of supports have you developed and used?
- > What are some of the things you do to stay on your wellness path?

### **Communicating the Recovery Story**

- > What is the other person willing to hear?
  - Use where the Veteran is in his/her recovery as a guide to which part(s) of the facilitator's recovery story to share.
  - Give careful consideration to the part(s) of the facilitator's recovery story that may be helpful to the Veteran at this time in his/her recovery.
- > Am I involving the Veteran in the conversation, or am I talking at him/her?
- > Find a balance between the benefits of sharing personal illness and recovery stories!
- ➤ Use <u>brief</u> snippets of the recovery story as applicable. Remember though, the purpose of sharing is to help others, so the focus should not stay on the facilitator for long.

## Peer Support Group Facilitation: Effective Communication

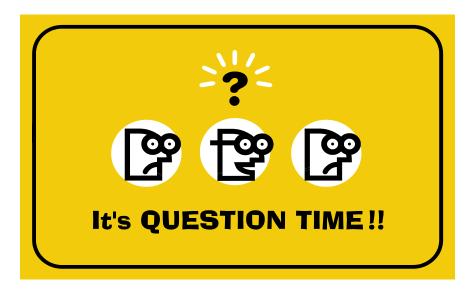
Communication is a combination of talking, questioning, and listening.

> We can only tell another <u>what we heard</u> and not what the other person said.



### **Questioning Skills & Techniques**

- > Asking questions shows our willingness and ability to understand the true meaning of what others say.
- ➤ Open-ended questions encourage the person responding to provide richer answers that often include more information and deeper explanations than the types of answers that would be provided in response to closed-ended questions.



# Questioning Skills & Techniques (Continued)



- > Ask one question at a time.
  - Asking too many questions or multiple questions at the same time can move the direction of the conversation away from the original topic when the group facilitator does not want that to occur.
- > Questioning skills need to be paired with effective listening skills.

### Close-Ended vs. Open-Ended Questions

#### **Closed-Ended Questions**

- ➤ Tends to elicit short answers: true/false; yes/no; or multiple choice responses
- Could sound like passing judgment, interpreting, or analyzing the situation
- > Could cut off a conversation

#### **Open-Ended Questions**

- Similar to essay questions allows expansion on answers
- ➤ Shows desire to understand what the other person is really trying to say
- > Non-judgmental
- Tend to keep conversation going because they ask for information needed to help or about feelings to share

### Close-Ended vs. Open-Ended Questions

#### **Close-Ended Questions**

- Ask questions beginning with
  - Why...
  - Is...
  - Are...
  - Were...
- Usually calls for a "yes" or "no" answer
- "Why" questions call for a rationalization and could put a person on the defensive
- > May cut off a conversation

#### **Open-Ended Questions**

- Ask questions beginning with
  - Where...
  - When...
  - What...
  - Which
  - How...
- Ask for information needed to help clarify an issue or inquire about feelings to share
- Tend to keep a conversation going

### Open-Ended Questions Examples

- > What's on your mind?
- ➤ How can I help you?
- > What happened next?



- > How do you feel about that?
- > What helped? What did not help?
- > What do the rest of you think about what was just said?



### Why is it important to be a good listener?

- > What a person says deserves attention.
- > People feel valued and important when they feel heard.
- > Feelings, beliefs, and opinions need to be shared in order to develop closeness and mutual respect.
- > Helps to sort out problem-ownership.
  - Helping a person to cope is giving a gift of self-reliance.



# Peer Support Group Facilitation: Ways to Enhance Listening Skills

### **Attending Listening Skills**

- Maintain a relaxed posture.
- > Lean forward.
- > Nod one's head occasionally.
- Maintain culturally appropriate eye contact.
- > Keep one's tone of voice neutral, positive, and relaxed.
- > Sit facing the group participants.
- > Sit with the facilitator's arms at his/her sides.
- > Keep a friendly expression.
- ➤ Move away from any physical barrier (i.e., desk; table) between the facilitator and the group participants.
- > Use minimal encouragers (ex. "Uh-huh," "Tell me more," etc.) to keep the conversation going.

# Ways to Enhance Listening Skills (Continued)

## Avoid distracting motions and gestures

- > Fiddling with pens, pencils, or keys
- > Jingling coins
- > Fidgeting nervously
- > Drumming fingers
- > Frequently shifting weight
- > Crossing or uncrossing legs often
- > Other nervous mannerisms



# Ways to Enhance Listening Skills (Continued)



#### Remain silent

- > Gives the Veteran time to think about what to say.
- ➤ Gives space for the Veteran to experience his/her feelings.
- > Gives time for the Veteran to deal with any ambivalence about sharing his/her story with the group.
- > Can serve as a gentle nudge to encourage the Veteran to talk with the facilitator(s) and the rest of the peer support group members.

# Ways to Enhance Listening Skills

(Continued)

Use minimal encouragers to keep conversation going

- > Tell me more
- > Oh?
- > For instance
- > I see
- > Right
- > Then?
- > And so?

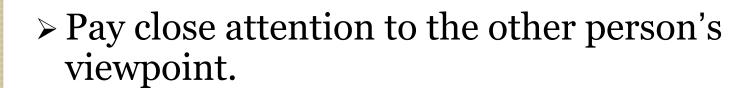
- > Yes
- > Really?
- > And?
- > Go on
- > Sure
- > I hear you
- > Uh-huh (with head nod)

# Peer Support Group Facilitation: Ways to Enhance Responding Skills

- Listen carefully to what is being said rather than who is saying it.
- > Determine who owns the problem.
- > Respond to facts and the other person's feelings.
- > The facilitator should not immediately react to his/her own feelings.
  - Remember the other person's feelings are not directed at you.
  - Do not take what is said personally.

## Ways to Enhance Responding Skills

(Continued)



- > The facilitator does not have to have all the answers. It is OK to say, "I don't know."
- > Avoid interpreting or assuming.
- > The facilitator should wait until the other person is finished speaking before he/she starts talking.

## Ways to Enhance Responding Skills

(Continued)

**Facilitation** 



- > Use " I" statements.
- > Ask clarifying questions.
- > Use open-ended questions/responses.
- > Discuss and decide what is the most important issue to resolve first.
- > Help the group member(s) decide on a course of action.
- > Provide encouragement versus praise.

## Components of an "I" Statement

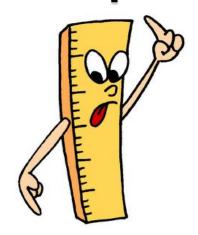
- 1. Describe a behavior you want to address.
  - Simply describe a behavior with no blaming
  - Example: "When I see the gas tank empty and dirty dishes left out....."
- 2. State your feelings about the possible consequences of the behavior.
  - "I feel anxious, down, sad, upset, angry, frustrated..."
- 3. State the possible consequences of the behavior.
  - "because I have to get the gas and I might be late for work."
  - "because ants or mice will come into the house."

## "I" Statement Formula

### "I" Statement Formula

"When	, I feel
because	• • • • • • • • • • • • • • • • • • •

## **Golden Rules of Group Facilitation**



- > When in doubt about what to do, ask the group!
  - "What do you want to talk about?"
  - "What should we be focusing on right now?"
- > Group members should talk more than the group facilitator.
  - <u>20-30%</u> Facilitator Talk vs. <u>70-80%</u> Group Members Talk

## 4 "B's": General Tips for Success

- ➤ **Be on time** for the peer support group meetings and also supervision (if applicable).
- > **Be respectful** in interactions with everyone.

#### > <u>Be responsible</u>

- Give advance notice to the group members, co-facilitator, and supervisor if the facilitator cannot attend a meeting.
- Get others involved (ex. Professional health care provider) when concerned that a Veteran group member is in crisis.

#### > <u>Be dependable</u>

• Show up when and where one is expected to be for meetings.

### References

Bolton, R. (1979). *People skills: How to assert yourself, listen to others, and resolve conflicts*. New York: Simon & Schuster, Inc.

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Transformation Center (2007, March). Using support groups to promote and sustain recovery. *Peer specialist certification training* (Session 21, pp. 1-6). (Available from the Transformation Center, 98 Magazine Street, Roxbury, MA 02119).

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