



## Diabetes and Mental Health Peer Support Project

# A Guide to Facilitating Diabetes and Mental Health Peer Support Groups

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## **Intentions and Expectations**

These guidelines are intended for use by mental health peer supporters who:

- Have successfully completed a recognized course of training in the foundations of peer support in the field of mental health
- Have successfully completed the Diabetes and Mental Health Peer Supporter Training Module, including the pre-training Self-Guided Review and Knowledge Quiz, two-day training program, and post-training test
- Have acquired, through training and experience, the knowledge, skills and practice needed to facilitate peer support groups, and
- Are now, or anticipate being, in a role where they have the opportunity to support peers' physical and mental health in a group setting.

This resource is also intended to raise awareness among health service providers and planners who are interested in the establishment of diabetes and mental health peer support groups.

This tool can be used most effectively in combination with the expertise and experience of the peer supporter and the organization. Those who will be delivering peer support know the people they work with and are thus in the best position to develop their groups.

Facilitating peer support groups requires time and resources. If an organization is considering providing a diabetes and mental health peer support group, we would like to emphasize the need to allocate dedicated resources to this process and to acknowledge the hard work that goes into providing these group services. Peer supporters also require self-care when facilitating these groups. It is therefore important for organizations to provide ongoing, timely and appropriate support to them throughout the process.

## About the Diabetes and Mental Health Peer Support Project

The Canadian Mental Health Association, Ontario, the Ontario Peer Development Initiative, and the Provincial Consumer/Survivor LHIN Leads Network collaborated on a two-year project (2010–2012) to provide diabetes competency training for mental health peer support workers.

The Project's goals were to increase the skills of mental health peer support workers in providing support for the prevention or self-management of diabetes in the high-risk population of people living with a serious mental illness, and to increase awareness in the diabetes community of the role mental health peer support workers can play in the prevention of chronic disease and in support of self-management.

The Diabetes and Mental Health Peer Supporter Training Module provides peer supporters with the opportunity to become informed about diabetes, to better appreciate the realities of people's lived experience of diabetes and mental health issues, and to identify and create activities that will encourage peer-group participants to live well with or prevent diabetes by attending to their physical health as well as their mental health and well-being.

Through the training program, peer supporters learn that they can best support others in the prevention and self-management of diabetes by:

- Actively listening to what a peer needs and wants with respect to their physical health and well-being, and intentionally and meaningfully sharing their knowledge, skills, experiences and perspectives
- Developing competency in:
  - encouraging peer self-care
  - strengthening peer supports
  - promoting peer self-advocacy
- Becoming a good example by attending to their own physical health and well-being, “walking the talk” by speaking up for themselves, strengthening their personal supports and practising self-care.

To raise awareness among providers of diabetes care, the Diabetes and Mental Health Peer Support Project hosted, in collaboration with local consumer/survivor initiatives (CSIs), a series of regional roundtable discussions on mental health and diabetes prevention and self-management. Local and regional representatives from the mental health and the chronic disease sectors and other community stakeholders met to explore opportunities to strengthen our collaborative efforts, create new initiatives and partnerships, and build community capacity for the prevention and self-management of diabetes by people recovering their mental health and well-being.

A final report (available on the project website, [www.diabetesandmentalhealth.ca](http://www.diabetesandmentalhealth.ca)) describes some current initiatives already underway that were shared at the roundtables, as well as some of the ideas generated for future exploration. One theme to emerge from the discussions was the potential for diabetes care providers to collaborate with CSIs to form mental health and diabetes self-management

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support groups. The following guidelines were developed to support the planning and implementation of such groups.

For more information about the Diabetes and Mental Health Peer Supporter Training Module, or to read the recommendations from the regional roundtable discussions in the final report, visit

[www.diabetesandmentalhealth.ca](http://www.diabetesandmentalhealth.ca).

## Creating Opportunities to Establish Peer-Facilitated Diabetes and Mental Health Support Groups

Peer supporters and the leadership within CSIs — community organizations run for and by people with mental health problems or who have made use of mental health services — can implement mental health and diabetes prevention and self-management activities and support groups within their local CSI. They can also create opportunities to establish diabetes and mental health peer support groups in other settings by:

- *Strengthening community connections.* Peer supporters can
  - Seek new opportunities to collaborate by establishing collegial relationships with service providers in the physical as well as the mental health sectors.
  - Promote their availability, qualifications and interest in delivering diabetes prevention and self-management peer support. Promotion can be with physical and mental health care organizations as well as within the peer support sector.
- *Improving capacity and competence.* Peer supporters can take advantage of opportunities to expand their knowledge, skill and expertise through the completion of other relevant training programs, such as:
  - The Wellness Recovery Action Plan (WRAP) — Level 2
  - Peer Wellness Coaching Certificate
  - Stanford Chronic Disease Self-Management Program

For more information about training programs, visit [www.diabetesandmentalhealth.ca/training](http://www.diabetesandmentalhealth.ca/training).

- *Being politically minded.* Peer supporters can
  - Find opportunities for new funding and new partnerships by staying in tune with current local, regional and provincial initiatives and funding priorities.
  - Develop self-advocacy skills by raising awareness of and addressing issues related to determinants of health such as stigma, discrimination and income security.

## Principles for Peer-Facilitated Diabetes and Mental Health Support Groups

Three principles integral to these groups are partnership, inclusivity and responsiveness.

### ***Partnership: Diabetes and mental health peer support groups are more effective when peer supporters work in partnership with diabetes experts.***

The peer supporters and diabetes professionals involved in the Diabetes and Mental Health Peer Support Project found that peer support groups can be more effective when diabetes care providers are involved — as, for example, consultants, guest speakers, or clinical “guides on the side” (observer–advisors). The Diabetes and Mental Health Peer Support Training Module helps peer supporters become better informed about diabetes, but clearly differentiates the role and expertise of the peer supporter from that of the diabetes expert.

The leadership and level of involvement of each participating expert can vary depending on the focus or approach. Here are a few examples:

- *A Diabetes Education Session for Peers*  
Typically, diabetes education programs are run by diabetes health professionals who are responsible not only for content but also for leading each session. Peers are not qualified to provide professional diabetes education, but they have valuable expertise to share. A peer supporter could act as group co-leader, for example, or assume the role of guide on the side. Alternatively, peer supporters could be involved in planning the program.
- *Metabolic Clinic Program Modules*  
Each module is led by a health care provider with relevant expertise in that topic. A peer supporter with expertise in a particular content area may lead the session. A peer supporter’s consistent presence and active participation throughout the series serves as an example, resource and support to program participants. A peer supporter may lead a peer support group in follow-up to mental health peers’ participation in the metabolic clinic’s module program.
- *Stanford Chronic Disease Self-Management Program*  
Once trained as a facilitator of the Stanford Chronic Disease Self-Management Program, a peer supporter may co-lead the session with another peer facilitator or a health professional, each assuming equal leadership roles, or be primary leader with another peer supporter or a diabetes health professional involved as a consultant, guest speaker, or guide on the side.
- *Diabetes and Mental Health Peer Support Group*  
In this model, the expert in peer support takes responsibility for organizing and delivering support-group sessions. Diabetes experts are usually engaged as guest speakers and may be involved as consultants, guides on the side, or service providers.

For group participants who feel reluctance to speak directly with their health care provider, a peer support group provides a safe place to express their confusion, describe their concerns, and ask

questions about their illness, health or health care, about their options and rights, and about messages conveyed to them by their health care provider. Peer support groups also provide opportunities to develop communication and self-advocacy skills and to discuss issues of stigma and discrimination.

***Inclusivity: Diabetes and mental health peer support groups are inclusive and encourage shared learning.***

Some prevention and self-management health programs have a formal, structured and scripted approach. Once begun, the session is closed, with involvement limited to enrolled participants. The experience of the DMHPS project has been that peers often prefer a less scripted approach that allows participants to voice their needs and concerns, and offer each other their experience, expertise and support. In these less structured groups, participation requirements vary based on the group's needs and shared decisions.

Peer supporter-led diabetes and mental health peer support groups may have a formal registration process, operate for a specified period of time and follow a set agenda for each session, or they may be open and ongoing. In any case, however, it is peer engagement that is the priority. The peer supporter places more emphasis on the person than the program, actively develops and implements strategies for engaging participants, welcomes all new group members, and encourages peers outside the group who express an interest in participating. Past experience has shown that where a structured, closed support group is offered for a period of time, a separate, less formal, ongoing support group is often helpful for people to sustain personal changes. For example, an informal support group may be intentionally hosted in the open space of a CSI rather than in a closed classroom setting, so that peers dropping in to the CSI are presented with the opportunity to join.

***Responsiveness: Peer supporters who facilitate diabetes and mental health peer support groups are flexible and responsive to the needs and wishes of their peers.***

Some diabetes and mental health peer support groups may follow a schedule of topics over the course of several weeks. Other groups may begin each session with a formal information-sharing component followed by an informal exchange of peer support. Yet others may be entirely devoted to offering peers an informal opportunity to give and receive peer support. The particular approach chosen will be determined by the expressed needs and wishes of the peer group. As the group progresses, the facilitator remains open to adapting the format and content of the meetings as they learn from their peers what approach is, in the moment, best.

## **Planning and Facilitating Diabetes and Mental Health Peer Support Groups**

While there are a variety of ways that peer supporters can be involved in groups designed to support the prevention and self-management of diabetes, the following guidelines are intended for peer supporters who are responsible for leading or coordinating such groups where mental health is also involved. It is assumed that peer support group facilitators have training in the foundations of mental health peer support as well as in facilitating peer support groups.

### ***Core Components***

Diabetes and mental health peer support groups vary in their format. Typically, however, there are two core components: sharing information and exchanging support.

#### **Sharing Information**

Some diabetes and mental health peer support groups may follow a schedule of topics, and information-sharing sessions may occur over the course of several weeks. A peer supporter may assume the role of group coordinator and host when a diabetes expert is invited in to speak on a particular topic. For example:

“I have asked a local diabetes educator to visit us once a month. At our next meeting, she’ll talk about how we can monitor our physical health.”

The peer supporter may also take an active role in researching, gathering and distributing relevant information and other resources. For example:

“I have found a great source for pedometers. They should arrive next week, just in time for our Step-by-Step Challenge.”

A peer supporter may take the lead with information-sharing when a reputable resource such as the *Diabetes and You* kit, published by the Canadian Diabetes Association, is being used. For example:

“Each week we’ll all watch a part of the *Diabetes and You* DVD and read through the fact sheet that comes with it. If any questions come up, we’ll put them into a ‘parking lot’ and when the diabetes educator joins us once a month, we’ll talk with her about them.”

#### **Exchanging Peer Support**

Essential to the delivery of diabetes and mental health peer support groups is creating the opportunity for peers to share experiences and perspectives — to give as well as receive peer support. Time ought to be set aside within a group session for the exchange of peer support to occur. Peer support may also take place informally between a peer and a peer supporter prior to and/or at the conclusion of a group session.

## ***Pre-Planning and Session Format***

### **Before Beginning the Group Sessions**

- Confer with interested peers about:
  - best days and times for sessions
  - number of sessions
  - duration of sessions
  - forum content and format
- Secure a diabetes health professional to work with you at some level of partnership (guest speaker, guide on the side, consultant, etc.) and confirm their availability.
- Reserve a meeting space.
- Determine budget or arrange other resources for refreshments and activities.
- Gather or create group resources and materials.
- Advertise or otherwise spread word about the group, and when and where it will meet.
- Register participants, if your group is to be a registered group.
- When you are close to the first meeting date, remind participants.
- Prepare nutritious refreshments.
- Set up the room and resources.

### **During Each Session**

- Welcome participants.
- Establish a comfort agreement: a mutually agreed-upon set of group rules and expectations.
- Orient everyone to the intentions and the format of your group.
- Provide a warm-up/introductory exercise, an activity that will start the group conversation — often a discussion of a “lighter” subject or something that helps the group get more comfortable with one another.
- Deliver any content (guest speaker, presentation of information from *Diabetes and You*, etc.) or, if no formal presentation is planned, introduce the discussion topic for the session.
- Facilitate discussion.
- Seek opportunities to promote self-advocacy, strengthen supports, and encourage self-care.
- Ask participants for feedback.
- Remind participants about the next session.

### **After Each Session**

- Provide individual peer support, as needed.
- Gather remaining resources and materials.
- Restore the room arrangement, if need be.
- Reflect on the session experience: lessons learned, modifications or refinements to be made, and the feedback from participants.

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- Debrief, confer, or otherwise get support for yourself — with a diabetes health professional (on issues related to diabetes) and with fellow peer supporters (on issues related to providing peer support).
- Practice self-care.
- Prepare for the next session.

### ***Content***

The four cornerstones of preventing or living well with and managing diabetes include:

- *Choosing Healthy Food*  
Striving to eat a balanced menu that includes lean proteins, vegetables and fruits, whole grains and low-fat milk products.
- *Engaging in Physical Activities*  
Building up to active movement for, on average, 30 minutes in total a day.
- *Monitoring Physical Health*  
Aiming to achieve and maintain a healthy weight; checking blood sugar, blood pressure, and cholesterol; taking care of feet.
- *Managing Stress*  
Taking steps toward addressing the life issues that are causing personal strain and pressure.

### ***Resources***

- *Diabetes and You*, a DVD-based kit by the Canadian Diabetes Association
- Guest speakers with professional expertise (diabetes, nutrition, physical activity, etc.)

For more suggested resources, visit [www.diabetesandmentalhealth.ca/resources](http://www.diabetesandmentalhealth.ca/resources).

### ***Format and Schedule***

Following is a suggested general outline for an eight-week program. Peer supporters are encouraged to use it as a draft framework for a diabetes and mental health peer support group, but to further develop and customize the structure and content beforehand. Although our suggestion is for 1.5-hour meetings, yours may be longer, particularly if you incorporate a physical activity or healthy eating activity into each session. Some CSIs have found that eight weeks is too short; you can adapt this schedule to your needs.

The program outlined here would most easily be done in a space where people come in at the beginning and stay until the end, rather than in an open room (such as a CSI drop-in space) where people can pop in and out. In any case, the group should be open to all interested participants, coordinated and co-facilitated by two peer supporters, and include expert guest speakers.

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Each **session** follows the same basic format:

- Welcome and (re)introductions
- Review of comfort agreement
- Orientation to session format and topic
- Topic presentation and discussion
- Topic activity or application
- Participant sharing: session experience, learning and intentions
- Session review and summary
- Orientation to the next session

### Weekly Schedule

- Week 1: • Healthy Eating, Session A: The Basics  
• Resource: *Diabetes and You* Healthy Eating DVD/Info Sheet
- Week 2: • Healthy Eating, Session B: Healthy Snacking  
• Guest Speaker: Registered Dietitian
- Week 3: • Physical Activity, Session A: The Basics  
• Resource: *Diabetes and You: Physical Activity* DVD/Info Sheet
- Week 4: • Physical Activity, Session B: Getting Started  
• Guest Speaker: YMCA Fitness Instructor
- Week 5: • Monitoring Physical Health, Session A: Blood Sugar, Blood Pressure and Cholesterol  
• Guest Speaker: Diabetes Educator
- Week 6: • Monitoring Physical Health, Session B: Medications  
• Guest Speaker: Pharmacist
- Week 7: • Managing Stress, Session A: Speaking Up  
• Resource: Peer/Health Care Provider Practice Scenarios
- Week 8: • Managing Stress, Session B: Mindfulness  
• Guest Speaker: Yoga Instructor

### For More Information

For additional resources, visit [www.diabetesandmentalhealth.ca](http://www.diabetesandmentalhealth.ca).