Diabetes and Mental Health Peer Support Project

PARTICIPANT WORKBOOK
ACKNOWLEDGEMENTS

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INTRODUCTION

Among the many health problems facing people with serious mental illness, the high risk of diabetes is well-documented. Diabetes is not only more prevalent in the population of people living with serious mental illnesses but also under-diagnosed and under-treated.

Supporting people living with diabetes in managing their illness and improving their health is one of the key features of chronic disease prevention and management. Self-management support goes beyond education and includes providing people with the skills, tools and confidence they need to take control of their illness and make positive changes in their lives.

Mental health peer support is a long-established best practice in Canada. Mental health peer support workers are in an ideal position to support their peers to understand their risk of diabetes, to learn and practice prevention strategies, and to self-manage diabetes. Given the shortcomings in the social determinants of health for this population (income, housing, and food in particular), strategies to support self-management and prevention must be accessible, affordable and practical. Mental health peer support workers know and understand this reality and have experience with supporting people to improve their health and quality of life under difficult circumstances.¹
INTENTIONS AND EXPECTATIONS

The Diabetes and Mental Health Peer Supporter Training Module is a specialty training program for Peer Supporters\(^2\) of mental health who will also encourage and support physical well-being. The training is intended for Peer Supporters who are currently in or intend to step into designated roles in which they have or will have opportunities to support peers engaged in the prevention or self-management\(^3\) of diabetes.

Those participating in this training are expected to have completed a recognized and reputable course of training in the foundations of mental health peer support.

It is expected that the training covered in this module will be delivered by individuals who have successfully completed a recognized and reputable course or program for trainers.

OVERVIEW OF THE TRAINING MODULE

The Diabetes and Mental Health Peer Supporter Training Module has three components:

1. An initial Becoming Diabetes-Informed Self-Guided Review and Knowledge Quiz intended to help participants to gain the basic knowledge needed to become diabetes-informed. This component is meant to be used in conjunction with the Diabetes and You\(^4\) toolkit developed by the Canadian Diabetes Association and the government of Ontario. Participants should complete the review and quiz before taking the two-day training session.

2. A two-day training session intended to teach participants how they can best encourage peers in diabetes prevention and self-care,\(^5\) and provide Peer Supporters with the opportunity to practise related skills. The module includes a Trainer Guide and a Participant Workbook.

3. A final Participant Application and Knowledge Quiz is intended to help prepare participants to step into a diabetes and mental health Peer Supporter role.

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2. Peer Supporter, Peer Worker, Peer Specialist and Peer Provider are terms that refer to a peer who is providing peer support in a role that is recognized, designated and, ideally, paid. The term Peer Supporter will be used throughout this training module.

3. Self-management is a term used by health care providers to mean control of a disease process, symptom reduction, and/or compensation for the symptoms of a disorder by the person affected.


5. Self-care, meaning taking care of the body, mind, heart and spirit, is one of the cornerstones of mental health peer support and will be the term used in the module to describe related peer activities.
REVIEW: PEER SUPPORT

The role of a mental health Peer Supporter in diabetes prevention and self-care builds upon an understanding of, experience with, and training in mental health Peer Support.

As we begin the training session we will:

A. Review a definition of mental health peer support.
B. Share experiences where we have personally benefited from receiving and offering mental health peer support.
C. Identify opportunities for peers to step into Peer Supporter roles.
D. Review the core competencies of a mental health Peer Supporter.

EXERCISE 1: DEFINITION OF PEER SUPPORT

“Peer Support is a naturally occurring, mutually beneficial support process, where people who share a common experience meet as equals, sharing skills, strengths and hope, learning from each other how to cope, thrive and flourish. Formalized Peer Support begins when persons with lived experience, who have received specialized training, assume unique, designated roles within the mental health system, to support an individual’s expressed wishes. Specialized Peer Support training is peer developed and delivered, endorsed by Consumer/Survivor Initiatives, Peer Support Organizations and Patient Councils, and is rooted in principles of recovery, hope and individual empowerment.”

— Ontario Peer Development Initiative, November 2010

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EXERCISE 2: BENEFITS OF PEER SUPPORT
OPDI describes peer support as a “mutually beneficial support process.”
Share an example of an occasion when you have benefited from receiving peer support and another one when you have benefited from offering peer support.

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EXERCISE 3: ROLE OF THE PEER SUPPORTER
OPDI refers to Peer Supporters who “assume unique, designated roles within the mental health system.”
As you scan your region, share examples of where Peer Supporters and peer support services are established, being developed, or envisioned.

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EXERCISE 4: PEER SUPPORTER CORE COMPETENCIES

OPDI defines Peer Supporters as peers who “have received specialized training.”

There is a growing understanding of the competencies integral to the delivery of mental health peer support. Here is a list of some examples — an inclusive, but not exclusive, list of Peer Supporter competencies. Many Peer Supporters will develop other relevant skills as well.

A competent Peer Supporter must be able to:

- Define peer support
- Distinguish the role of a Peer Supporter from the roles of other service providers
- Demonstrate personal investment in health and well-being
- Describe the vision, values and experience of mental health recovery
- Distinguish “becoming informed” from being an expert
- Describe issues that compound mental health recovery
- Determine relevant resources, services and organizations
- Describe the role of culture
- Demonstrate intentional listening
- Demonstrate intentional sharing
- Demonstrate the ability to engage peers
- Demonstrate the ability to encourage steps forward
- Demonstrate the ability to overcome challenges
- Demonstrate the ability to support transitions

Share a key lesson, take-away thought or example of how you have grown from your prior training in mental health peer support.

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OVERVIEW: TRAINING CONTENT AND OUTCOMES

A. Becoming Diabetes-Informed

Training Content:
• Diabetes core knowledge
• How being diabetes-informed differs from the role of the diabetes expert

Training Outcome A:
A Peer Supporter has acquired a general and accurate understanding of diabetes. They have learned the facts, figures, information and resources helpful for every peer to know about diabetes. A Peer Supporter distinguishes their role in supporting a peer in regard to the prevention and self-management of diabetes from the roles of other health care providers and diabetes experts.

B. The Lived Experience of Diabetes

Training Content:
• Grieving over diabetes
• The burden of self-management
• Promoting self-advocacy
• Strengthening supports

Training Outcome B:
A Peer Supporter has gained a deep appreciation of the challenges faced by many peers who live with diabetes, including grief related to adjusting to life with diabetes and the burden of expectations in relation to the self-management of diabetes.

C. Living Well with Diabetes

Training Content:
• Encouraging self-care

Training Outcome C:
A Peer Supporter supports peers in taking desired steps toward gaining the knowledge, skills, supports and services that they seek in caring for their physical health as well as their mental health and well-being.
what you need to know
BECOMING DIABETES-INFORMED  
exercISe 5: Becoming diabetes-informed

What has been your biggest learning to date about diabetes?

Notes:

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What is your next step in becoming diabetes-Informed?

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EXERCISE 6:
DISTINCTIONS BETWEEN BEING DIABETES-INFORMED AND A DIABETES EXPERT

A Peer Supporter distinguishes their role in supporting a peer around the prevention and self-management of diabetes from the roles of other health care providers.

What is the difference between someone who is diabetes-informed and someone who is a diabetes expert?

Notes:

Think of examples of situations with peers where it is important that a Peer Supporter defer to a diabetes expert.

Notes:
EXERCISE 7:
CREATING A PEER SUPPORTER’S DIABETES RESOURCE LIST

The resource list is yours to build, edit and complete over time. Include names of the diabetes experts in your community as well as recommended websites and materials. Here are a few examples to get you started:

<table>
<thead>
<tr>
<th>RESOURCE NAME</th>
<th>RESOURCE DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes and Mental Health Peer Support Project</td>
<td><a href="http://www.diabetesandmentalhealth.ca">www.diabetesandmentalhealth.ca</a></td>
</tr>
<tr>
<td></td>
<td>The project website includes links to</td>
</tr>
<tr>
<td></td>
<td>diabetes resources.</td>
</tr>
<tr>
<td>Canadian Diabetes Association</td>
<td><a href="http://www.diabetes.ca">www.diabetes.ca</a></td>
</tr>
<tr>
<td></td>
<td>Includes a wide range of information</td>
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<tr>
<td></td>
<td>and resources about preventing and</td>
</tr>
<tr>
<td></td>
<td>managing diabetes.</td>
</tr>
<tr>
<td>Stand Up to Diabetes</td>
<td><a href="http://www.ontario.ca/diabetes">www.ontario.ca/diabetes</a></td>
</tr>
<tr>
<td></td>
<td>Includes information about managing</td>
</tr>
<tr>
<td></td>
<td>diabetes, plus links to help you find</td>
</tr>
<tr>
<td></td>
<td>the nearest Diabetes Education Program.</td>
</tr>
<tr>
<td>Diabetes and You Toolkit</td>
<td>Order online at:</td>
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<tr>
<td></td>
<td><a href="http://www.serviceontario.ca/publications">www.serviceontario.ca/publications</a></td>
</tr>
<tr>
<td></td>
<td>Or call the ServiceOntario Contact</td>
</tr>
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<td></td>
<td>Centre: Monday to Friday, 8:30 am to</td>
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<td></td>
<td>5:00 pm</td>
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<tr>
<td></td>
<td>416-326-5300</td>
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<td></td>
<td>416-325-3408 (TTY)</td>
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<tr>
<td></td>
<td>1-800-668-9938 Toll-free</td>
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<tr>
<td></td>
<td>1-800-268-7095 (TTY) Toll-free</td>
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THE LIVED EXPERIENCE OF DIABETES

While there are many peers who have made a smooth transition to living with diabetes alongside mental health recovery, there are many other peers who find the experience, or aspects of the experience, challenging.

A Peer Supporter has gained a deep appreciation of the challenges faced by many peers who live with diabetes, including not only the grief related to adjusting to life with diabetes, but also the burden of expectations in relation to the self-management of diabetes.

A Peer Supporter who lives with diabetes separates their own adjustment to life with diabetes from that of the peer that they are intending to support.

“I have come to terms with my diabetes. I accept it. It is now a part of my life and I take active steps toward managing my diabetes. I realize, though, that the peers I work with may be in a very different place. Just because I’m ‘there’ doesn’t mean that they are. I will need to keep myself in check, and be careful not to make light of the process. I need to remind myself of the long path I needed to travel, to get to this place of acceptance.”

Notes:
PART I: GRIEVING OVER DIABETES

It is important for a Peer Supporter to become aware of the meaning and importance of a diagnosis of diabetes to a peer, and to recognize just where the peer is at in relation to their adjustment to life with diabetes.

Just as the path of mental health recovery is not straight and direct for many peers, with its peaks and valleys, twists and turns, so too is the path of adjustment to life with diabetes.

Knowledge of the common emotional responses related to grieving over a diagnosis of diabetes will help a Peer Supporter to better respond to and support a peer wherever they join the peer in their recovery journey.

The following are common emotional responses to diabetes:

- denial
- anger
- bargaining
- depression
- acceptance

Although these responses are presented as a list, it is important to recognize that the responses to diabetes are more like a bundle of emotions that ebb and flow in varying ways, at varying times and at varying paces.
EXERCISE 8: COMMON EMOTIONAL RESPONSES — ACKNOWLEDGING EXPERIENCES

You will have an opportunity to suggest how, as a Peer Supporter, you might acknowledge the peer’s expressed emotion around adjusting to life with diabetes. Use the following sequence with each common response:

• The response is named
• An example is given
• A practice opportunity is provided

Intentional listening is the key. We have underscored the importance of the core competency and the connecting skill of listening. When we actively listen, we acknowledge what a peer is conveying. When we listen, we let them know that we understand.

DENIAL

• “I can’t possibly have diabetes. I thought it was hereditary. Nobody in my family has diabetes or has ever had diabetes. There must be a mistake.”
• “I don’t care what they say. I’m going to continue to eat whatever I want, whenever I want.”
• “I’ve gone on the Internet. I don’t have any of the signs and symptoms of diabetes, so I can’t possibly have it.”

Notes:
ANGER

• “This is so unfair! I know that psychotropic medication caused my diabetes. What a position to be put in! Do I reduce or change my psychotropic meds and run the risk of affecting my mental health? Do I suck it up and get with the diabetes program? I am going after the drug companies—they ought to pay. They have ruined my life.”

Notes:
**BARGAINING**

• “I figure that if I am careful and eat really healthy during the week, then I ought to be able to eat whatever I want on weekends.”

• “I’ve blown it already today, so I may as well have that other slice of cake. I’ll start over again tomorrow.”

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**DEPRESSION**

• “I don’t have what it takes. I don’t have the energy to do all that I am being asked to do. I don’t have the money to buy the foods that they are suggesting that I eat. It’s too much! I give up.”

• “Diabetes is always with me. Being in social situations is really hard. People that know I have diabetes give me ‘the look’ and sometimes even scold me if I reach for a butter tart.”

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ACCEPTANCE

• “My friend told me that I have become the poster child for management of diabetes! She said that she admires me and is inspired by me. I love helping others. I enjoy going onto the Internet. I found a source for free pedometers and ordered a supply to pass around to the peers that come to the metabolic clinic where I am a Peer Supporter.”

• “When I was adjusting to living with diabetes I was resentful and annoyed because always had to think about myself. Now I have a better appreciation of the importance of self-care, and I strive to put myself first. I was never on my ‘to do’ list before; now, I am.”

• “I wish that I didn’t have diabetes, but I do. I have learned to just get on with it as best I can. I have good days and bad days just like everybody else, but mostly I do the things that I know help me to keep my blood sugar where it needs to be.”

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PART II: THE BURDEN OF SELF-MANAGEMENT

Self-management is a term used by health care providers that typically refers to the control of a disease or disorder by the person affected.

The self-management of symptoms related to diabetes includes a number of activities:

- monitoring physical health
- choosing healthy foods
- engaging in physical activity
- managing stress

It is important for a Peer Supporter to recognize that what a peer has been prescribed, recommended or encouraged to do about managing or controlling the symptoms and outcomes related to diabetes may, at times, become overwhelming and burdensome.

A peer may experience burden when they don’t know where to begin, what to do next, or how to sustain what they have been asked to do.

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EXERCISE 9: ACKNOWLEDGING THE BURDEN OF SELF-MANAGEMENT

In turn, what would you say in response to a peer if they shared the following statements with you? How would you acknowledge their lived experience? How might you respond to the remarks below?

• “I know what I am supposed to do, but implementing day after day after day is really hard. You can get beautifully motivated for anything for a while and then go to a hell zone. How do you come out of that?”

Notes:

• “I think about diabetes every moment of every day. Although I don’t have to check my glucose levels every day, I do it anyway. I feel anxious as I prepare to test my blood. I have to carefully consider every mouthful that I eat. I can no longer be spontaneous, like going and getting an ice cream the same way everybody else does.”

Notes:

• “I feel so constrained. I have to find a way to exercise more often. How am I going to fit that into my life? My money is limited and I live off of the highway outside of town. Winter is coming. It feels like my life is starting to unravel and I have to put my energy into picking up the pieces again! And through everything I’m supposed to do all this self-management stuff around my diabetes? It’s too much. I give up.”

Notes:
SUPPORTING PEERS: PROMOTING SELF-ADVOCACY

Speaking with a health care provider about your health care can be challenging for anyone, but can be even more intimidating when we are requesting a change in the way that we are receiving their services.

A Peer Supporter can support a peer who is burdened by their prescribed self-management routine by encouraging the peer to speak up for themselves.

Example of a peer speaking to their diabetes care provider:

“I know what I am supposed to do and why the self-management activities you are suggesting are important. But all of it together is too much for me right now with everything else going on in my life. If you were to ask me, on a scale of 1 to 10, what my level of burden is when it comes to managing my diabetes I would answer 12! I want to talk with you about how I can lighten my load. Help me to figure out what is most important for me to do over the next month.”

A Peer Supporter can assist a peer in preparing what they want to convey to their diabetes care provider and in rehearsing their message so that they can speak up with clarity and confidence. Suggested preparation steps include:

a. Clarifying the issue
   It may be helpful for a Peer Supporter to assist a peer by inviting them to talk things through with you in order to get clear about the issue and their specific concern or question.

b. Stating the issue
   Once the peer is clear it may be helpful to assist them in succinctly capturing what they want present or convey to their health care provider.

c. Determining the desired outcome
   Explore with the peer what they are seeking from their health care provider. How do they want the health care provider to assist them?

d. Rehearsal
   Some peers may find it helpful to practise out loud what they want to convey before meeting with their health care provider.
EXERCISE 10: PROMOTING SELF-ADVOCACY

Divide into small groups. Choose one of the topics or issues that a peer might wish to raise with their health care provider. Following the steps suggested above, write a script to help the peer rehearse for a conversation with their health care provider.

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SUPPORTING PEERS: STRENGTHENING SUPPORTS

Support is essential to regaining our physical as well as our mental health and well-being.

• “My family have become involved and they are very supportive. We have made changes to how we eat. We walk together. It has made a big difference.”

• “The favourite destination is always Tim’s. I find it so hard to resist what used to be my ‘usual’— a large double-double with a maple dip donut. I suggested that we go and pick something up at the grocery store instead, and sit and eat our snacks at the local park.”

• “No one where I live is into this self-management stuff. They scoff at me and tease me and try to throw me off. It’s really hard to go it alone. Joining the Diabetes and Mental Health Peer Support Group has really made a difference.”

• “I told him, ‘I know you mean well, but when you scold me for taking a bite out of a donut I get really discouraged. You know that I tend to reach for sweets when I’m stressed out. It would be more helpful to me if you would say, What going on? Or Let’s talk.’”

Peer Supporters can assist peers to build upon, figure out and/or ask for the support that they need and desire in relation to diabetes prevention and self-care: the what, who, where, when and how. Three suggested steps for strengthening support:

a. Clarify the desired support
   It may be helpful for a Peer Supporter to assist a peer by inviting them to talk things through with you in order to get clear about what support they are seeking.

b. Formulate the request
   Once the peer is clear about their desired support, it may be helpful to assist them in succinctly capturing what they want to present or convey to the person from whom they would like to receive support.

c. Rehearse
   Some peer may find it helpful to practise out loud what they want to convey before they present their request.

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EXERCISE 11: STRENGTHENING SUPPORTS

Identify an area in your life where you would benefit from receiving support from someone:

a. Clarify the desired support  
b. Formulate the request  
c. Rehearse

Consider how you might assist to a peer around their support needs and desires:

• How would you encourage a peer to take a step toward further strengthening the support that they have in place?  
• How would you encourage a peer to ask for the support that they need or want?

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LIVING WELL WITH DIABETES
FOUR CORNERSTONES

The four cornerstones of diabetes prevention and self-care include:

• **Choosing Healthy Foods**
  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 a day.

• **Monitoring Physical Health**
  Aiming to achieve and maintain a healthy weight. Checking blood sugar, blood pressure, and cholesterol. Taking care of your feet.

• **Managing Stress**
  Taking steps toward addressing the life issues that are causing personal strain and pressure.

A peer’s personalized health and wellness plan in relation to diabetes or diabetes prevention will ideally have been developed by the peer in collaboration with their diabetes care team. A peer’s health and wellness plan is individualized for them. It is important that Peer Supporters defer to the diabetes experts with respect to the development of or recommended changes to a peer’s health and wellness plan.

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SUPPORTING PEERS: ENCOURAGING SELF CARE

As well as exemplifying self-care, a Peer Supporter supports peers in taking desired steps towards gaining the knowledge, skills, supports and services that they seek in caring for their physical health as well as their mental health and well-being.

Just as there are many ways that Peer Supporters can encourage peers to take steps towards self-care in relation to their mental health recovery, there are a variety of ways that Peer Supporters can encourage peers to take steps towards diabetes prevention and self-care including:

a. Setting an Intention
b. Encouraging Steps Forward
c. Acknowledging Efforts
d. Sharing Information
e. Encouraging Healthy Eating
f. Encouraging Physical Activity
g. Supporting Stress Management
h. Sharing Experiences

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33
a. Setting an Intention

Setting an intention is inviting a peer to formulate their desired self-care step.

“You have reviewed your self-management plan with your health care provider and you have been encouraged to exercise. Walking is where you would like to begin. How do you think you would like to include more walking in your life?”

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b. Encouraging Steps Forward

Encouraging steps forward is instilling confidence in a peer to take a desired action.

“I know that 30 minutes a day is what you are aiming for. You feel defeated because right now that 30 minutes feels like 30 hours. Sometimes it helps to focus on one step at a time, one second at a time. I know focusing only on the next step was really helpful to me when I was striving to up my physical activity. Once I started moving, counting every step I took was also helpful. We just got in a supply of pedometers and you are welcome to have one, if you would like.”

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c. Acknowledging Efforts

Acknowledging efforts is recognizing a peer’s self-care attempts.

“You feel discouraged because you haven’t been out for a walk since last week. But sometimes, an act of self-care is cutting ourselves some slack. Look at all that has been going on for you over the past week; all that has consumed your time and energy. Look back past last week to the past two months. You’ve made amazing progress. What will help you get back on track?”

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d. Sharing Information

Sharing information is providing peers with knowledge about sources and resources intended to support their self-care.

“We ordered a supply of Diabetes and You toolkits, and they have just arrived. There are enough for everybody; please help yourself. We are also planning to set a time next week to go through the package and watch the DVD together.”

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e. Encouraging Healthy Eating

Encouraging healthy eating is offering activities and experiences that support a peer in eating well.

“We need to set a good example. From now on our event lunches will include healthy food choices.”

“We have joined the Good Food Box program and it will start next month. Please see me if you would sign up for a Good Food Box. The boxes are scheduled to arrive on the first Wednesday of the month. On the first Friday we’re going to get together to share ideas and recipes for how we can use the food we receive.”

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f. Encouraging Physical Activity

Encouraging physical activity is offering activities and experiences that support a peer in moving well. For example:

“Les is our resident historian. He is planning a walking tour of our town’s historic sites. Let Les know if you are interested in joining him.”

“The local Scottish Country Dancing group are looking for new members. They are having an open house on Saturday afternoon and are inviting us to drop by and try it out.”

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g. Supporting Stress Management

Supporting stress management is offering activities and experiences that support a peer in living well. For example:

“Katie offers a restorative yoga class on Friday afternoons. You don’t need any special gear. She supplies the mats and encourages you to wear comfortable clothing.”

“You have said before that getting a good night’s sleep helps to put things in perspective. What will support you in getting a good night’s sleep tonight?”

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h. Sharing Experiences

Sharing experiences is offering activities that create the opportunity for the exchange of Peer Support.

“A number of peers have said that it would be helpful to talk with others about living with diabetes and have suggested that we start a Diabetes and Mental Health Peer Support Group. We are going to meet up on Wednesday to talk more about it and we would love to have your input. Please join us.”

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EXERCISE 12: ENCOURAGING SELF-CARE

You will now have an opportunity to:

- List possible activities that support diabetes prevention or self-care.
- Create an activity plan for a selected prevention or self-care activity.

A. List of Self-Care Activities

Under each heading below, make a list of possible activities that support diabetes prevention or self-care.

Sharing Information

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Encouraging Healthy Eating

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Encouraging Physical Activity

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Supporting Stress Management

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Sharing Experiences

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B. Self-Care Activity Plan

Choose one activity from your brainstormed list. Imagine that you had the opportunity to organize a diabetes prevention or self-care activity with a group of peers. What would you propose to do? What are the activity steps? Where would the activity occur? When would the activity occur? Who would be involved in facilitating the activity?

a. What

b. How

c. Where

d. When

e. Who
EXERCISE 13: PEER SUPPORTER SKILLS PRACTICE

The following scenarios related to diabetes and mental health illustrate situations that, as a Peer Supporter, you may encounter. On your own, read each scenario. Record how you, in your role as Peer Supporter, would respond to the peer in each case. Once you have had an opportunity to complete the exercise on your own, we will review the scenarios and discuss them as a group. You will then have an opportunity to practise enacting the scenarios with others in the training group.

Practice Scenarios

a. You have been making information about diabetes available to the Peers in your Consumer Survivor Initiative. You see a peer that you have been supporting reading the information. They approach you in dismay, saying that they realize that they are in the high-risk group for diabetes and that they are worried that they might already have it.

Notes:

b. A peer that you are supporting is outraged. They have just been diagnosed with diabetes. They are angry and resentful. They believe that the psychotropic medications that they have been taking have caused their diabetes.

Notes:
Practice Scenarios

c. A peer that you are supporting is overwhelmed. They have recently been diagnosed with diabetes and have just returned from a visit with their health care provider. They were given a lot of information about self-management of their diabetes. They feel pressured to get started immediately, but they don’t know where to begin and doubt their ability to do it all.

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N. A peer that you have been supporting has learned much about diabetes and has established a self-care routine to manage their diabetes. All has been going well, and they have been proud of their accomplishments. A series of personal and life crises has happened that took priority over their self-care routine. They are feeling discouraged. They believe that all their efforts have been lost and they’re back to square one.

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Practice Scenarios

e. You overhear a peer advising another peer how they should manage their diabetes. Much of the information that is being shared is inaccurate and potentially dangerous.

Notes:

f. A peer that you support is very distressed. Her brother has diabetes. He lives at home with the peer and their mother. Rather than making an effort to heed the advice of his diabetes health care team, the brother is engaged in self-destructive behaviors. The peer is worried that her brother is going to die because of his lack of self-care. The peer doesn't know what to do, and feels helpless and hopeless.

Notes:

Group Exercise

Divide into groups of three. Each person will choose one scenario from the list above that they would like to practise as a Peer Supporter. In rotation, for each scenario identify a group member for the role of peer, Peer Supporter, and observer. The peer will enact the described scenario. The Peer Supporter will respond. The observer will keep time (15 minutes for each round) and provide feedback at the conclusion of the scenario.
EXERCISE 14: SETTING AN INTENTION

Consider your current role and setting, or the role and setting that you aspire to be in. Consider the peers that you are currently connected with and those that you aspire to be connected with.

How do you intend to support peers engaged in diabetes prevention or self-care?

What: “I intend to …”

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How: “The steps I need to take in order to fulfill my intention include …”

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“My first step is to …”

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When: “I intend to take my first step by …”

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Support: “What/who will support me in taking my first step is …”

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SUMMATION

What is the most important lesson that you have learned about diabetes and mental health peer support?

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How will the lessons that you have learned influence the way that you support peers with diabetes?

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