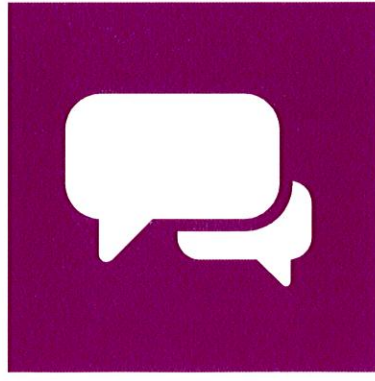
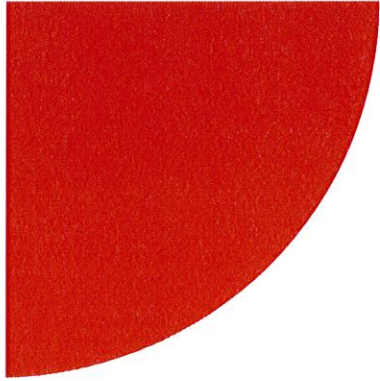
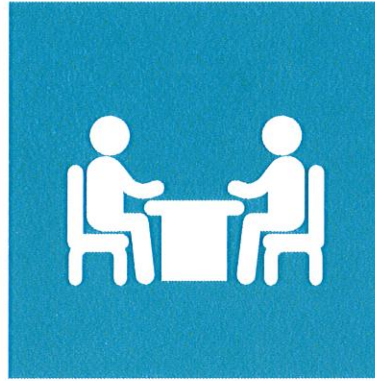
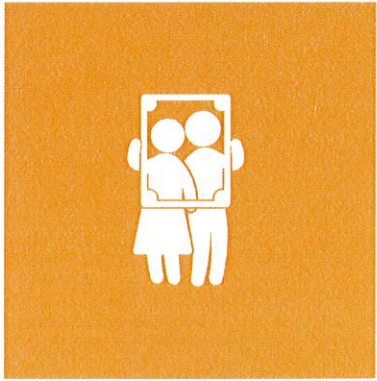


# It's My Life ~ Social Explorations



## Program Operation Manual



# It's My Life:

## Self-Directed Social Explorations

### Program Operation Manual

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# It's My Life: Self-Directed Social Explorations Program Operation Manual

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Shavonne G. Carpenter, CPSS, Life Coach

Patrick Hendry, Program Director



**Mental Health America 2015**



# Introduction

## Mental Health America (MHA)

Mental Health America is the nation's oldest advocacy organization addressing the full spectrum of mental health and substance use conditions and the profound impact they have on public health and our society. MHA was established by former psychiatric patient Clifford W. Beers. During his stays in public and private institutions, Beers witnessed and was subjected to horrible abuse. From these experiences, Beers set into motion a reform movement that took shape as Mental Health America. In all of our work, we focus on: prevention for all; early identification and intervention for those at risk; integrated health and behavioral health care for those who need it; and recovery as a goal. Formed in 1909, MHA has an established record of effective national and grassroots advocacy and achievement. With our 228 affiliates in 41 states, we are a potent voice for healthy communities throughout the nation. The National Headquarters for MHA successfully launched the It's My Life ~ Social Explorations Program in the Northern Virginia area.



# **Introduction**

## **Purpose of the Program**

The purpose of the It's My Life Program is to improve the lives of people living with Serious Mental Illness (SMI). It is a highly innovative intervention that combines the two evidence based practices of Peer Support and Psychiatric Rehabilitation and the best practice Self-Directed Care into an integrated skill and support strategy that is specifically constructed to help people with SMI build networks of friends and intimate relationships. Success in this area is a major breakthrough for some of the most isolated, misunderstood members of communities. As an essential aspect of recovery, people with SMI need to be included in their communities as more than just residents. Social exclusion, isolation, and poverty exacerbate disability and are associated with ill health and premature death (Wilkinson, R., Marmot, M., 2003).

The pilot program was done with people living with schizophrenia or schizoaffective disorder. It is well documented that individuals with these disorders have the most difficulty making friends and participating in the social life of their communities. The It's My Life Program is designed to help build social networks of friends and close relationships, thus creating a strong social support system. This in turn helps the Participant to become active members of the community and feel less isolated which also helps to increase self-esteem and self-worth to improve overall social functioning. This creates an increase in overall physical health which has been shown to decrease the need for hospitalization as well as aiding in avoiding premature death. Studies have shown that those who live with Serious Mental Illness die 10 to 25 years earlier than the general population. Ultimately, the Program assists the Participant to set and reach social

and personal goals that may include going back to school, finding a volunteer position, or even employment.

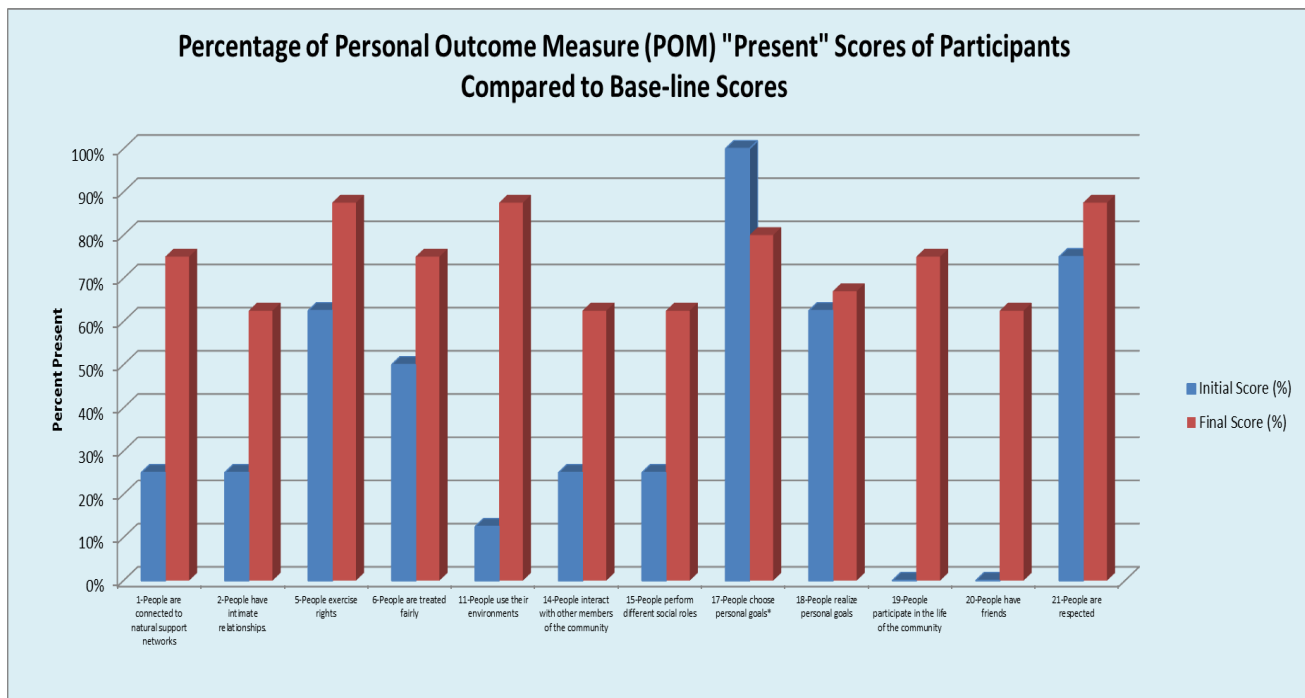
Another essential element to the It's My Life ~ Social Explorations Program is that it is kept non-clinical. All clinical language was taken out except for diagnosis and hospitalization history. The Life Coaches use of everyday language leads to increased trust with the participants. It was made very clear from the start that the Program was all about Peer Support and not the traditional doctor/patient relationship. This puts the Participants at ease.



## Outcomes and Documented Results

### Personal Outcome Measures (POM)

Using the Personal Outcome Measurement (POM) Survey tool, Participants are interviewed before enrollment and quarterly thereafter. It is conducted as a guided discussion. Through a detailed process, the survey follows 21 quality of life indicators. Each is scored as present (1) or not present (0). For the purpose of evaluating this program we focus on thirteen of the indicators.



Question Number	Initial Score	Final Score	Change % Points
1-People are connected to natural support networks	25%	75%	50%
2-People have intimate relationships	25%	63%	38%
5-People exercise rights	63%	88%	25%
6-People are treated fairly	50%	75%	25%
11-People use their environments	13%	88%	75%
14-People interact with other members of the community	25%	63%	38%
15-People perform different social roles	25%	63%	38%
17-People choose personal goals*	100%	80%	-20%
18-People realize personal goals	63%	67%	5%
19-People participate in the life of the community	0%	75%	75%
20-People have friends	0%	63%	63%
21-People are respected	75%	88%	13%

\*According to participants, setting their own goals in this program made them realize how many of their other goals were set for them.

## **Outcomes and Documented Results**

### **Guided Journals**

The guided journal's purpose is to provide insight about how participants feel on a day-to-day basis regarding social experiences and skills learned or utilized.

Participants are to journal weekly and the Life Coach will collect, copy, and return them on a weekly or biweekly basis. In order to continue to collect the \$60 per month stipend, participants are required to complete the weekly journal of what they did that week and how they felt about it. In addition to a summary of their week, the journal has probing questions that are intended to get at how these social interactions are helping the participants and any other potential issues that they may be having with themselves or the program. From the journal, it can be determined if the program has an effect on someone's overall wellbeing and if supporting social involvement as a form of service is something worth paying more attention to.

From the participants that kept a journal for a significant period of time, there are some general observations that can be made about the It's My Life ~ Social Explorations program. First of all, participants generally tend to feel good about getting out of the house and interacting with others, even when they weren't particularly excited about doing it in the first place.

*"I felt very happy about all these happy events, but a little bit sad how that they were all over."*

*"I feel better when I stay busy."*

This same feeling became an ongoing trend with almost all of the participants once they found a hobby they liked or met with a friend whose company they enjoyed. On the other hand, when plans fell through, participants tended to feel disenchanted and depressed about it. Although this didn't happen very often, when it did, there was always a reported feeling of disappointment, a clear indication of the benefits of participating in the social life of the community.

Another observation that was made from the journal entries was that the participants' chosen activities often seemed to increase their overall self-confidence. Since people with SMI often will not voluntarily involve themselves in a new hobby or social situation, this program assists them in going outside of their comfort zone to become more connected to the outside world. When they realize that they are more than capable of learning new skills and responding appropriately to social stimuli, they have a boost in self-confidence that encourages them to pursue further social interaction. One participant even commented,

*"I felt good about pushing myself to go to ballet class. It made me feel assertive."*

This not only shows that she eventually enjoyed the class, but also that simply the act of going was enough to boost her confidence. Another participant wrote,

*"On Tues Feb 4 met w/ Shavonne to budget for goals and show her what I had accomplished. Brought tears to her eyes-I felt very special."*

The participant was not only rewarded by her accomplishments, but also on the positive emotional impact she had on her Life Coach.

*“Went out to dinner & ice cream w/ Shavonne. Had a good time. She is so nice to talk to. It really helps me. I hope it helps her too.”*

A direct consequence of participants actively improving their social networks has been that they are learning about themselves which, in turn, provides them the opportunity to better themselves. For example, one participant went out to restaurants with different friends each week of her journaling. Each week, she would write about what she enjoyed and what she would like to do differently the next time. As the journals progress, it is evident that she is learning from mistakes and becoming much more comfortable engaging in appropriate restaurant conversation. By about the tenth week of journaling, she wrote,

*“I was able to have a free flowing conversation that was effortless and was able to relax & enjoy myself.”*

*“I learned to only talk about positive things when having fun.”*

With each entry, she seemed to be getting better at getting her voice down to an appropriate volume, engaging in two-way conversations, talking about appropriate subjects in public, and ultimately enjoying the experience. Another participant had a very similar experience.

*“I used to be very quiet with people, but now I am more talkative.”*

The program afforded another participant the ability to be able to dine at a restaurant.

*“I was deprived of the opportunity to eat in restaurant for almost 13 years. So this program is like a revival to me.”*

The changes you can see throughout the weeks of journaling are very clearly beneficial and quite significant to each participant. Not only do they learn about themselves, but most participants report leaving the house more and feeling less lonely in the later journals than in the earlier ones. This is most likely due to the fact that they are expanding their social networks and feeling confident enough in their social skills to be more outgoing.

*“I am coping better than I used to.”*

*“I enjoyed being with friends whom I can really talk with. We are on the same wavelength.”*

Overall, the program has improved the quality of life of the participants that are actively involved. Those who clearly need and want the help seem to be benefitting the most, while those who may already have friends are learning new social skills and broadening their horizons by learning to befriend people outside of the consumer community. Through the Guided Journals it is quite evident that there is huge potential to improve lives and teach new skills.

## Outcomes and Documented Results

### Satisfaction Surveys

Satisfaction surveys were mailed out to each member of the program with a postage-paid return mail envelope, and were returned anonymously. The surveys were developed in partnership with the program members. Seventeen people completed the survey. Ninety-five percent of respondents rated their satisfaction with the program with the highest rating.

For the following statements, please check the box that best reflects how you feel.	Definitely Agree	Somewhat Agree	Somewhat Disagree	Definitely Disagree
My Coach is willing and able to meet me where I choose	15	2	0	0
My Coach has explained to me how they can and cannot assist me	15	2	0	0
When I need help I know who I can call to get support	17	0	0	0
I feel respected and listened to by my coach	15	2	0	0
The money for the program is assisting me to reach my social goals	15	2	0	0
My coach works in partnership with me to reach my social goals	17	0	0	0
I am satisfied with the help I have received from my coach	17	0	0	0
The services I have received have helped me reach my social goals	15	2	0	0
My coach is sensitive to my cultural and ethnic background	17	0	0	0
I think my coach supports my well being	17	0	0	0
Overall I feel that my social life is getting better because of the program	16	1	0	0

## Outcomes and Documented Results

### Hospitalization Rates

In the two years prior to entering the It's My Life Program participants had experienced a total of fifteen hospitalizations. In the 19 months of activities one member has experienced a single hospitalization. Hospitalization history is reported by each participant and additional hospitalizations (if any) are recorded for the duration of enrollment.

ID# _____	Date _____																						
Have you been hospitalized in the past 2 years?																							
<input type="checkbox"/> Yes <input type="checkbox"/> No																							
If Yes, please provide approximate date and duration.																							
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## **Program Process**

### **Life Coach Requirements**

The program staff consists of people who have experience with the issues of living with severe mental illness, and who are Certified Mental Health Peer Support Specialists. Peer Support Specialists are guided by a professional code of ethics rooted firmly in the Recovery model. More than anything else, a Peer Support Specialist is a good listening ear who asks the question, “What happened to you?” instead of the question “What’s wrong with you?” They are trained to understand the six stages of change, the key concepts of Mary Ellen Copeland’s Wellness Recovery Action Plan, active listening, and how to maintain professional boundaries. This training is essential when it comes to working in the field.

The importance of Peer Support cannot be overstated. Peer Support Specialists are very effective because they have been down the recovery path before. Peers are on an equal level with those that they serve. This is very different than the doctor/patient roles that participants may be used to. This builds a bond of trust and understanding that is mostly unspoken between the peers. There is a high degree of empathy which is unknown in the traditional doctor/patient relationship. By the use of self-disclosure, the Peer Support Specialist breaks down barriers that may have seemed insurmountable. Peer Support Specialists emphasize again and again that recovery is not only possible, but highly probable. The Peer Support Specialist is a role model for the recovery process.

The Peer Support Specialist will be cross trained as in Life Coaching by reading, [Becoming a Professional Life Coach: Lessons from the Institute of Life](#)



Coach Training by Patrick William and Diane Menendez and passing a test on the material. A Life Coach helps to guide Participants to discover their own answers. They also assist to identify challenges and work in partnership to turn them into victories. The Life Coach challenges thought/behavior patterns and provides accountability. Life Coaching is a profession that is profoundly different from consulting, mentoring, advice, therapy, or counseling. Life coaching draws upon a variety of tools and techniques from other disciplines such as sociology, psychology, positive adult development, and career counseling with an aim towards helping people identify and achieve personal goals. The coaching process addresses specific personal projects, general conditions and transitions in the Participant's personal and social life, relationships or profession by examining what is going on right now, discovering what their obstacles or challenges might be, and choosing a course of action to make their life be what they want it to be.

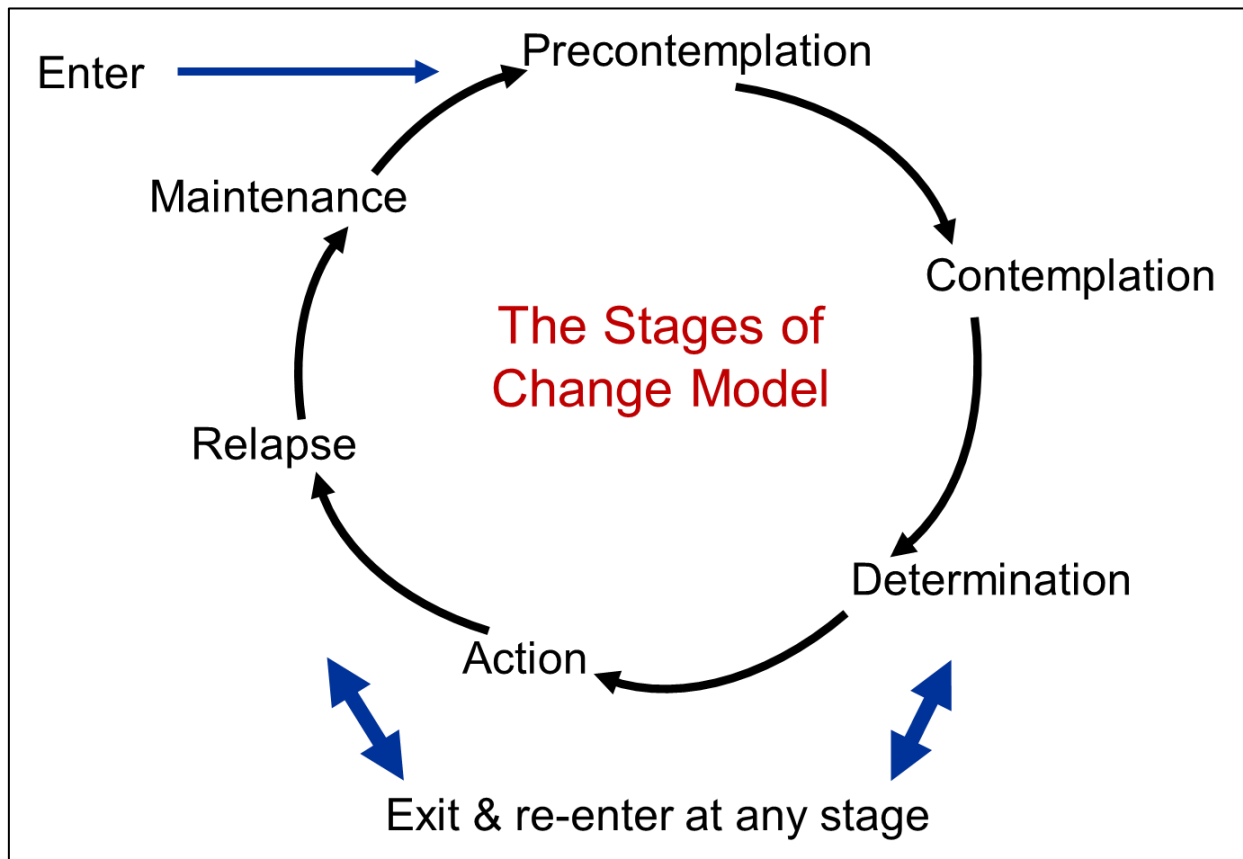
Life Coaching is a designed alliance between coach and participant where the coaching relationship continually gives all the power back to the participant. A Life Coach believes that you know the answers to every question or challenge you may have in your life, even if those answers appear to be obscured, concealed or hidden inside. The Life Coaches also need to be trained in Effective Listening and Motivational Interviewing. There are also numerous videos available on YouTube to see how Life Coaching works with real participants.

A pre-requisite for the Life Coach is the ability to use the techniques of Motivational Interviewing. It is defined as “A person-centered, goal-oriented approach for facilitating change through exploring and resolving ambivalence.” The main goal of Motivational Interviewing is to facilitate fully informed, deeply

thought out, internally motivated choices, not to change behavior..... though one may indeed see changes in behavior. (Resnicow, et al., 2002)

Acceptance and compassion are at the heart of Motivational Interviewing. Direct persuasion is not effective to resolve ambivalence or promote change. Therefore, the Life Coach should use a primarily “guiding” approach. The Stages of Change provide the frame for Motivational Interviewing conversations.

- ❖ Pre-contemplation: No problem and/or no interest in change
- ❖ Contemplation: Might be a problem; might consider change
- ❖ Preparation: Definitely a problem; getting ready to change
- ❖ Action: Actively working on changing, even if slowly
- ❖ Maintenance: Has achieved stability, and is trying to maintain



Participant may be at any stage of the change model at the enrollment point of the program. During the pre-contemplation stage, Participants will often fall into Status Quo Talk (often mistaken as “resistance”) which is really just one side of the ambivalence they are experiencing. It is important for the Life Coach to remember that Participants are not being “resistant” if they don’t feel there is a problem. The discord in this stage is from not being on the same wavelength. The Life Coach can address this by getting in sync with the participant, recognizing and respecting their current position. The goal is to move from Status Quo Talk toward Change Talk. The concept of Change Talk is two-fold and can be understood using the acronym DARN CAT. The parts of Change Talk conversations are explained with the acronym OARS.

❖ Part 1 of Change Talk is Preparatory:

**Desire**

**Ability**

**Reasons**

**Need**

❖ Part 2 of Change Talk is Mobilizing:

**Commitment**

**Activation**

**Taking Steps**

❖ Change Talk Conversations include:

Open-ended questions

Affirmations

Reflections

Summaries

To help initiate or accelerate this transition, the Life Coach needs to help participants identify the discrepancies between their behaviors and values or beliefs. This is done through giving information and guidance by evoking thought, providing information in synch with the Participant's needs and evoking feedback. Using development based motivation, not fear based motivation, Life Coaches will help Participants move toward what they want instead of what they no longer want.

Engaging is the Relational Foundation of Motivational Interviewing in which a collaborative process of finding a mutually agreeable direction fosters growth and a sense of empowerment. Life Coaches are to assist the Participant in recognizing and honoring their growth, being cautious not to seem manipulative or disingenuous. Motivational Interviewing is a way of practicing kindness with skill.

Life Coaching and Motivational Interviewing require effective listening with a good coach spending more time listening than talking. When engaged in everyday conversation it is very easy to become distracted with our own thoughts and opinions. However, when coaching, the meeting time belongs to the participants and therefore the Life Coach must put their own agenda, opinions and judgments aside.

When the Life Coach is listening effectively they are:

- 1) Focused on the participant and are not distracted by their own opinions, judgments or feelings
- 2) Showing the participant they are listening by utilizing the following Active Listening Techniques:

- ❖ Signaling - When coaching it is important that Coaches not only listen to the Participant, but also make certain the Participant knows they are really being listened to and that their Life Coach is seeking to understand them.

‘Yes’, ‘right’, ‘OK’ ‘ah ha’, etc.

These short interjections are great for making unobtrusive signals that you are listening and if used at the right time will not interrupt the participant’s train of thought.

- ❖ Reflecting Back– The Life Coach reflects back the words, thoughts and feelings of the Participant, subtly emphasizing their own words e.g. “So, you say you want to make some big changes?” or “You sound as if you are really excited...”

- ❖ Respond with affirmations - Using affirmations such as “It sounds like you handled that well” or “It seems like you’ve made tremendous progress” is a great way to bolster the self-esteem of Participants and is a great way to keep Participants with a positive frame of mind while really showing they are being listened to understood.

- ❖ Ask relevant questions - Coaching questions should not be a series of pre-planned questions, instead, intuitively asked based on the Participant's responses. The Participant will know their Coach is listening to them when they are asked questions that relate to what they have been saying.
- ❖ Clarification - Asking clarifying questions is one the more active of the listening techniques.
  - e.g. "You mentioned earlier that your priority was your family, now you have mentioned that your career is the most important thing...Which is more of a priority right now?"
- ❖ Summarizing - Every now and again, providing a brief summary of what has been said serves as a useful check that the Life Coach has heard and understood the Participant correctly.
- ❖ Eye contact – It is important not to stare at Participants, but having eye contact indicates listening. If taking notes, be sure not to let this intrude on looking at the Participant throughout the entire meeting.
- ❖ Positive facial expressions - Smiling, looks of empathy, etc. are all ways of naturally responding to Participants that will also indicate true listening. Avoid expressions which might indicate judgment, such as raised eye-brows or shaking of the head.

- ❖ Nodding - A slight nod of the head is great for showing that the Life Coach has heard and understood the Participant.
  - ❖ Body posture - Leaning slightly towards the Participant and an open posture (arms open as opposed to folded) indicate openness to and interest in what they are saying.
- 3) Listening to understand the Participant; not just to the words being said but also for their feelings, emotions and even for what is not being said verbally.
  - 4) Giving the space to the Participant to talk freely and explore without interruption or fear of judgment.
  - 5) Aware of the Participant's wants and needs so they intuitively know what questions to ask.

In addition, Peer Life Coach Trainees are to read the text book from Boston University called Psychiatric Rehabilitation by William Anthony, Mikal Cohen, Marianne Farkas and Cheryl Gagne. Psychiatric Rehabilitation emphasizes that recovery is possible and highly probable. It is person-centered and strength-based. Psychiatric Rehabilitation stresses the Recovery Model vs. the Medical Model. It is suggested that the Life Coach watch the series of videos on Psychiatric Rehabilitation on YouTube from the Center for Psychiatric Rehabilitation of Boston University. The goal of psychiatric rehabilitation is to help individuals with persistent and serious mental illness to develop the emotional, social and intellectual skills needed to live, learn and work in the community with the least amount of professional support. Although psychiatric rehabilitation does not deny the existence or the impact of mental illness, rehabilitation practice has changed

the perception of this illness. Enabling persons with persistent and serious mental illness to live a “normal” life in the community causes a shift away from a focus on an illness model towards a model of recovery and wellness. Therefore, other outcome measures apart from clinical conditions become relevant. Social role functioning (including social relationships, work and leisure, as well as quality of life and family burden) is particularly of major interest for individuals with Serious Mental Illness (SMI) living in the community. Psychiatric rehabilitation focuses on helping individuals develop skills and access resources needed to increase their capacity to be successful and satisfied in the living, working, learning, and social environments of their choice.

The Life Coaches will teach and support people with SMI to build healthy, lasting relationships. Employing a unique Social Self-Directed Care (SSDC) framework in which Participants retain control of life decisions, this unique combination of techniques can be anecdotally helpful in other contexts. “Self-direction is a concept in the recovery process which treats individuals as capable of determining their own purposes, and achieving their own goals” (Florida SDC Operational Policies & Procedures, 2007). The intent is to provide a breakthrough for people with SMI by helping them build networks of supportive and sustainable relationships that will increase their overall health and life quality while reducing crisis events and hospitalizations.

Life Coaches offer support and encouragement while helping participants to discover new ways to achieve objectives. Life Coaching is compassionate, creative and speaks to the heart and soul. Because of this, participants are able to connect with what is most important and make choices from love rather than fear. It is a support system with one goal in mind: improving quality of life. Life



Coaches question, reflect, clarify and challenge participants into progress. The Life Coach, having compassion, becomes the mirror and sounding board for the participants. While providing different perspectives through conversations in areas defined by the participants as important in their life, the Life Coach offers new choices about taking impactful actions which move them forward with velocity in reaching their goals.

Together, the participants and Life Coaches work to tailor coaching efforts to address needs out of the belief that everyone has the right to live a healthy, functional, happy and productive life as they define it. The coaching process addresses specific personal programs, personal successes, general conditions and transitions in the Participant's personal life and roles by examining what is going on right now, discovering what the obstacles or challenges might be, and choosing a course of action to make their life what they want it to be. Life Coaching can be a transformative process for personal awareness, discovery and growth. The Life Coaches are there to help take aspects of what is holding an individual down, holding an individual back, standing in their way, creating fear, indecision, insecurity, anxiety, and work to break through them in steps.

## **Program Process**

### **Recruitment of Participants**

Participants may hear of the program by way of their therapist, or a flyer.

Brochures will be distributed through local community behavioral health centers, drop-in centers, clubhouses, and community centers for recruitment. The criterion for acceptance is they must be over 18, competent to sign forms for agreement to participate, complete HIPAA Release form (optional), and actively engaged in mental health treatment. They also must be competent to manage their own finances and complete exercises and journals to participate. In addition, they must be able to budget the \$60 stipend and keep records and receipts of how the money was spent.

However they hear of it, they contact the service provider by phone or email and anyone on the team who is reached will tell a little of the program and inform them that they need to set up an initial meeting to complete a preliminary Personal Outcome Measures interview.

## **Program Process**

### **Enrollment Process**

Potential enrollees contact the providing agency to express interest. As soon as possible, a date is set for the interview with the Program Director to go through the Personal Outcome Measures. The Personal Outcome Measures (POM) tool, developed by The Council for Quality and Leadership, will be augmented by weekly guided journals to document social activities, connections, and Participants' thoughts and feelings about their increased social involvement. (Visit <http://www.c-q-l.org/the-cql-difference/personal-outcome-measures> for additional information about the POM tool.) POM assesses quality of life in 21 domains. Each domain is individually anchored and goal attainment is quantitatively measured against this personal baseline. Data collected from the Guided Journals will document frequency of social activities and density of social network. At the sixth month of services each Participant will be interviewed again using the POM tool to evaluate progress and to refine service delivery. Exit POM interviews will be conducted as individuals "graduate" out of the program. Guided journals and POM interviews will be conducted for each participant. An anonymous satisfaction survey will be completed at the six month mark and again at the end of the program. The general expectation is for increased quality of life measures when compared to baseline interviews and previous hospitalizations.

The Program Director may decide at the time of the first POM interview (or consult with the Life Coaches) if this person would be a good fit for the program. At times, a person might actually be doing too well on their own to be accepted, as this Program is geared to help those that need the most help at that time. Once it has been determined acceptable, the participant is informed of the decision and the

team of Life Coaches will meet the person so they can decide which Life Coach they would like to partner with.

During this initial meeting with the Life Coaches, the Program Participant Handbook is introduced and discussed. The Information and Consent form is also filled out. The person does not need to decide at this time which coach they may want, but after the meeting and reading the provided mini-biographies of the coaches, a decision is made by the participant. Also, during this process, many more details of the program are explained.

The Life Coaches meet with the Participants on a weekly/biweekly basis. They will teach the Participant how the program works and answer any questions as they come up. It is important the Participant understands what the Life Coach can and cannot do. They will engage in friendly conversation and effective listening to determine and discuss the three social goals of the Participant. All social activities must go back to the three social goals made. These social goals can change over time, even on a monthly basis, especially once these goals are met.

The following are some examples of social goals: 1. Get out of the house more often, 2. Make new friends, and 3. Start a new hobby. Some examples of social activities to meet these goals could be: Going out to the movies with a friend, getting involved with a Meet-up group, and attending a drawing class sponsored by the Park Authority.

# **Program Process**

## **Duties of the Program Director**

### **Provide Supervision for the Life Coach Team**

Supervision is critical in this program in that not only does a professional need to oversee the program, but also in the sense that supervising a Peer Specialist is different than other behavioral health positions. A Peer Specialist is able to work with an individual in a relationship that is based on having experienced similar issues in their own lives. Standard clinical boundaries frequently don't apply. Also, Clinical Supervisors and other staff, especially those who lack peer experience, may have expectations that are not compatible with the peer's role.

While clinical supervision can be highly beneficial in maintaining high standards of care, it is critical that the Program Director understand recovery and the unique skills and assets provided by peer workers. Another peer in recovery who meets the state or funder's standards to provide supervision is a good choice for Program Director in supervising the Life Coaches.

Clinical supervision should include issues of job role clarification, performance, confidentiality, disclosure, working with other staff, boundaries and others as they arise. Effective supervision should be strengths-based, focusing on skills and professional development. Jorgenson, J., (2014)

In many settings, administrative supervision may be necessary separate from clinical supervision. This may involve the setting of work duties, time

management, administrative record keeping, and human resources roles including benefits management, complaints and grievances. As in any HR department, administrative supervision should be aware of reasonable accommodation needs and standards. It should support ongoing education and training, particularly when mandatory for recertification or job requirements. Jorgenson, J., (2014)

Supervision is also important because it provides an avenue to monitor for and address instances of vicarious trauma, compassion fatigue or burnout. Supervision should be comprehensive, regularly scheduled, and meaningful to the person being supervised.

### **Provide Support for the Life Coaches**

Supervisors should schedule regular meetings with the individual coach and should be accessible to them for consultation at all times during the work day, when possible. Having appropriate support available is critical in peer support because Life Coaches are peers working their own recovery with day-to-day and job issues while still providing support to Participants.

Life Coaches may also benefit from regular debriefing, especially after experiencing a critical or traumatic event. Additionally, it has been demonstrated that the most effective ways to reduce the risk of negative impact on the Life Coach's personal recovery are to implement changes at systemic and organizational levels by balancing workloads, giving staff more control over their schedules, establishing supportive teams, limiting exposure to trauma and providing additional training. Life Coaches should

also be permitted and encouraged to take reasonable time of to recover from job-related stress. If available, Life Coaches may also want to take part in activities or meetings offered by peer support organizations that are specifically designed for providers of peer support. Overall, it is the responsibility of the organization operating the program to provide the much needed support to each of their Life Coaches.

As Director, it is vital to be supportive when Life Coaches are experiencing difficulties with a particular participant or vice versa. The Program Director also responds to all Special Evaluation (Grievance) Forms, which are available to participants in their Handbook. The Director needs to be available to assist if participants call or email expressing concerns about their Life Coach or the It's My Life Program.

### **Approve Participant's Monthly Social Spending Plans**

The Program Director has the responsibility of reviewing each Participant's spending. This includes verifying the social goals chosen by the Participant, assuring that the action/spending plans relate directly to the accepted social goals and spending is recorded appropriately on the Monthly Budget Tracking Sheet (found in the Participant Handbook) along with proper documentation (receipts) attached.

## **Program Process**

### **Duties of the Life Coach**

#### **Conduct Exercises to Facilitate Accomplishment of Goals**

The Life Coach will teach skills and lead the Participant through exercises to assist them in accomplishing their goals. There are many exercises that can be helpful in dealing with the discomfort or anxiety that may accompany social situations. These emotion regulation skills, along with various social skills, will strengthen the Participant's interaction with self and others. Emotion Regulation is a broad set of skills and abilities that help keep the emotional system healthy and functioning. Good emotion regulation includes the ability to:

- ❖ Recognize that you are having an emotional response.
- ❖ Understand what the emotional response is.
- ❖ Accept your emotional responses rather than reject them or react to them with fear.
- ❖ Access strategies that allow you to reduce the intensity of the emotion when needed.
- ❖ Engage in goal-directed behavior when upset.
- ❖ Control impulsive behaviors when distressed.

By practicing these techniques, Participants will be better equipped to handle the challenges of change. Other skills are necessary for positive social interaction and effective communication. Additional information for teaching these skills can be found in the Appendix of this manual. Examples of these techniques are:



**Affirmations** – the use of short positive statements to target specific subconscious beliefs and undermine negative beliefs. The Participant will reappraise self-talk and cognitive distortions. Positive affirmations begin to replace harmful, dysfunctional, self-destructive thought patterns with self-nurturing beliefs.

**Cognitive Restructuring** - Also called Cognitive Reframing, cognitive restructuring, is a behavioral technique associated with cognitive therapy.

"Cognitive restructuring involves learning how to think differently, to change fundamental 'faulty thinking,' and replace it with more rational, realistic, and perhaps positive thinking," says Sally R. Connolly, LCSW, a clinical social worker, therapist, and co-founder of <https://www.CounselingRelationshipsOnline.com>, an online counseling service.

"Much of the research finds that cognitive-behavioral therapy is the most successful form of therapy for dealing with problems of anxiety or depression," says Connolly. "When people are able to change their thinking, they can approach their daily lives and problems with much more energy and confidence."

Cognitive restructuring was developed by psychologist Albert Ellis in the mid-1950s, based on the earlier work of others, and it's a core component in Cognitive Behavioral Therapy (CBT). It can be used to control and change negative thoughts, which are sometimes linked with damaging behaviors.

To use cognitive restructuring, work through the following process:

- ❖ Calm yourself.
- ❖ Write down the situation that triggered the negative thoughts.
- ❖ Identify the moods felt in the situation.
- ❖ Write down the automatic thoughts that were experienced with the mood(s). The most significant of these are the "hot thoughts."
- ❖ Identify the evidence that supports these hot thoughts.
- ❖ Identify the evidence that contradicts the hot thoughts.
- ❖ Now, identify fair, balanced thoughts about the situation.
- ❖ Finally, observe your mood now, and decide on the next steps.

Go through this process when experiencing a negative mood or when feeling fearful, apprehensive, or anxious about a person or event.

**Deep Breathing** – is a relaxation technique that releases tension from the body while clearing the mind, improving both physical and mental wellness. People tend to breathe shallowly or even hold their breath when anxious. Shallow breathing limits oxygen intake and adds further stress to the body, creating a malevolent cycle. Breathing exercises can help break this cycle.

**Defusion** – Cognitive Defusion (Deliteralization) redefines thinking and experiencing as an ongoing behavioral process, not an outcome. Techniques are designed to demonstrate that thoughts are just thoughts and not necessarily realities. Participants will learn not to be so controlled by their own thoughts, but rather to recognize thoughts without getting caught up in their content. Defusion helps avoid detrimental self-fulfilling prophecies.

The opposite, cognitive fusion, occurs when someone sees a thought as literal truth, rather than a thought produced by their mind. Cognitive defusion teaches Participants to notice the process of thinking, so that they don't get swept up their thoughts and allows them to define their own reality.

**Distress Tolerance** – These skills address the tendency of some individuals to experience negative emotions as overwhelming and unbearable. The technique consists of four skill categories. By practicing the skills of distracting, self-soothing, improving the moment, and focusing on pros and cons, Participants can weather stressful circumstances while decreasing painful feelings and destructive impulses. The distress tolerance skills are valuable tools in helping maintain balance in the face of crises, teaching acceptance of the distress and coping with it in healthier ways.

**Distracting** helps Participants change their focus from upsetting thoughts and emotions to more enjoyable or neutral activities. These techniques offer the opportunity to change one's experience to achieve at least a brief respite from emotional pain; allowing time to rebuild strength. It is used to reduce contact with emotional stimuli. This skill can be taught with the acronym ACCEPTS:

Activities; Engage in activities with healthy, enjoyable pursuits such as hobbies, exercise, and visiting with friends.

Contribute and do things to help others, through volunteering or just a thoughtful gesture.

Compare yourself to those less fortunate as a way of finding reasons to be grateful.

Emotion; Identify the current negative emotion and act in an opposite manner, such as dancing or singing when feeling dejected.

Push away by mentally leaving the current situation and focus on something pleasant and unconnected to the present circumstances.

Thoughts; Divert attention away from the negative feelings with unrelated and neutral thoughts, such as counting items or doing a puzzle.

Sensations; Generate strong physical sensations using multiple senses like, looking at and smelling a scented candle, holding an ice cube, drinking a hot beverage, or enjoying a warm foot soak.

1) **Self-Soothing** involves using the five senses to nurture oneself in a variety of ways.

❖ **Vision:** Look at beautiful things such as flowers, art, a landscape, or an artistic performance.

❖ **Hearing:** Listen to music, lively or soft, or enjoy the sounds of nature such as birds chirping and waves crashing. Savor the voice of a relative or friend.

- ❖ **Smell:** Use a favorite lotion or perfume, light scented candles, notice the scents of nature, or bake an aromatic recipe.
- ❖ **Taste:** Enjoy a hearty meal or indulge in decadent dessert. Experiment with a new flavor or texture, and focus on them while eating.
- ❖ **Touch:** Pet an animal or give someone a hug. Have a massage, rub on lotion, or snuggle up in a soft blanket.

2) **Improving the Moment** has the goal using positive mental imagery to improve one's current situation. The acronym for this skill is IMPROVE:

**I**magery; Visualize a relaxing scene or a successful interaction. Imagine negative feelings melting away.

**M**eaning; Create meaning or purpose from a difficult situation or from pain.

**P**ray to God (or a higher power) for strength and to be open in the moment.

**R**elax; Listen to music, watch a funny television show, drink warm milk, or enjoy a neck or foot massage.

**O**ne thing in the moment; This means strive to remain mindful and focus on a neutral activity in the present moment.

Vacation; Take a mental break from a challenging situation by imagining or doing something pleasant. This could also be taking a day trip, or ignoring calls and emails for a few hours.

Encouragement; Talk to yourself in a positive and supportive manner to help cope with a stressful situation.

3) **Focusing on the Pros and Cons** asks the Participant to list the pros and cons of tolerating the distress and of not tolerating the stress (i.e., coping through self-destructive behaviors). It can be helpful to remember the past consequences of not tolerating distress and to imagine how it will feel to successfully tolerate the current distress while avoiding negative behaviors. Through evaluating the short-term and long-term pros and cons, participants can understand the benefits of tolerating pain and distress, and thereby reduce impulsive reactions.

**Etiquette** - often defined as the conduct or rules indicating the proper and polite way to behave. It includes manners for social or business occasions, table settings, grooming and appropriate conversation.

**Grounding** - a set of simple strategies to detach from emotional pain (e.g., craving, anger, sadness). Grounding works by focusing outward on the external world, rather than inward toward the self. It can also be thought of as “distraction,” “centering,” “a safe place,” “looking outward,” or “healthy detachment.” When overwhelmed with emotional pain, it can be helpful to have a way to purposefully detach in order to gain control over strong feelings and stay safe. Grounding “anchors” the individual to the present and to reality.

There are three major ways of grounding: mental, physical, and soothing. “Mental” means focusing the mind; “Physical” means focusing on the senses (e.g., touch, hearing); and “Soothing” means talking to oneself in a very kind way. The effectiveness of each form of grounding is very individualized. Participants may find one more helpful than others or may need to vary methods as appropriate for varying situations.

### **1) Mental Grounding**

- Describe your environment in detail, using all your senses—for example, “The walls are white; there are five pink chairs; there is a wooden bookshelf against the wall...” Describe objects, sounds, textures, colors, smells, shapes, numbers, and the temperature. This can be done anywhere.
- Play a “categories” game with yourself. Try to think of “types of dogs,” “jazz musicians,” “states that begin with A...”
- Describe an everyday activity in great detail. For example, describe a meal that you cook (e.g., “First I peel the potatoes and cut them into quarters”).

- Imagine. Use an image: Glide along on skates away from your pain; change the TV channel to get to a better show; think of a wall as a buffer between you and your pain.
- Say a safety statement. “My name is \_\_\_\_\_; I am safe right now. I am in the present, not in the past.”
- Use humor. Think of something funny to jolt yourself out of your mood.
- Count to 10 or say the alphabet, very s...l...o...w...l...y.

## **2) Physical Grounding**

- Run cool or warm water over your hands.
- Grab tightly onto your chair as hard as you can.
- Dig your heels into the floor-literally “grounding” them. Notice the tension centered in your heels as you do this. Remind yourself you are connected to the ground.
- Carry a “grounding object” in your pocket, which you can touch whenever you feel triggered.
- Jump up and down

## **3) Soothing Grounding**

- Say kind statements, as if you were talking to a small child. For example, “You are a good person going through a hard time. You’ll get through this.”
- Think of your favorite color, animal, season, food, time of day, etc.
- Picture people you care about (e.g., your children), look at a photograph.
- Remember a safe place. Describe the place that you find so soothing.



- Say a coping statement: “I can handle this.”

**Guided Imagery** - a program of directed thoughts and suggestions that guide the imagination toward a relaxed, focused state. Guided imagery is based on the concept that the body and mind are connected. It is sometimes considered a form of hypnotherapy. An example often used is to imagine an orange or a lemon in great detail—the smell, the color, the texture of the peel. Continue to imagine the smell of the lemon, and then see yourself taking a bite of the lemon and feel the juice squirting into your mouth. Many people salivate when they do this. This exercise demonstrates how the body can respond to what is being imagined.

A relaxed state can be achieved when imagining all the details of a safe, comfortable place, such as a beach or a garden. This relaxed state may aid healing, learning, creativity, and performance. It may help participants feel more in control of their emotions and thought processes, which may improve their attitude, health, and sense of well-being.

**Interpersonal Effectiveness (DEAR MAN)** - Everyone needs to communicate with others about what they want out of situations. Sometimes one may not get what they want because very strong emotions get in the way; sometimes the environment doesn't respond to one's best efforts. Even the most skillful people don't get what they want all the time. A way to remember the skills for objective effectiveness is to remember the term “DEAR MAN”:

**D**escribe the situation: When necessary, briefly describe the situation being reacted to. Stick to the facts. Be precise and descriptive,

leaving no question in the other person's mind what it is that is wanted. Use non-judgmental statements.

**Express feelings or opinions about the situation clearly:** Describe feelings or beliefs about the situation. Use factual expressions, gestures and tone of voice that are appropriate for the content and importance of the request.

**Assert wishes:** Ask for what is desired. Say “no” clearly. Don't expect anyone to be aware of expectations without having expressed them.

**Reinforce:** Remember to reward people who respond positively to requests that have been made, say “no”, or express an opinion.

**Mindful:** Keep your focus on your objectives in the situation. Maintain your position and don't be distracted onto another position and don't be sidetracked onto another topic.

**Appear confident:** Use a confident tone of voice and display a confident physical manner with appropriate eye contact.

**Negotiate:** Be willing to give to get. Offer and ask for alternative solutions to the problem. Reduce requests within reason. Maintain your “no” and offer to do something else or solve the problem another way.

**Meditation** - a practice in which an individual trains the mind or induces a mode of consciousness, either to realize some benefit or for the mind to simply acknowledge its content without becoming identified with that content, or as an end in itself. The term meditation refers to a broad variety of practices that includes techniques designed to promote relaxation, build internal energy or life force and develop compassion, love, patience, generosity and forgiveness. There are many kinds of meditation techniques.

The mind and body are connected. The energy flows better when the body is erect. Posture actually affects the mind. When beginning a meditation session, spend some initial time settling into appropriate posture. Feel that the spine is being pulled up from the top of the head so the body's posture is elongated.

Sit comfortably with eyes closed. Direct full attention to breathing. When thoughts, emotions, physical feelings or external sounds occur, simply accept them, giving them the space to come and go without judging or getting involved with them.

When it is noticed that attention has drifted off and becomes engaged in thoughts or feelings, simply bring it back to the breathing and continue. It is okay and natural for thoughts to arise, and for one's attention to follow them. No matter how many times this happens, attention should be continually brought back to the breathing. The breath should feel natural and not forced. The breath is going in and out, in and out. Relaxation is increased with each breath. Feel the breath as it comes into the body and as it goes out.

Meditation can give participants a sense of calm, peace and balance that benefits both their emotional well-being and their overall health. These benefits don't end when the meditation ends. Meditation can help carry people more calmly through their day and may improve certain medical conditions. Meditation clears away the information overload that builds up every day and contributes to stress.

The emotional benefits of meditation can include:

- ❖ Gaining a new perspective on stressful situations
- ❖ Building skills to manage stress
- ❖ Increasing self-awareness
- ❖ Focusing on the present
- ❖ Reducing negative emotions

**Mental Contrasting** - Mental contrasting (MC) is a way of boosting energy and commitment for important goals. It helps us turn hopes and dreams into realities. Mental contrasting is based on Professor Gabriele Oettingen's work (Oettingen 1999; Oettingen, Pak et al. 2001). MC has been shown to be effective in a whole series of research studies producing improvements in health behaviors, relationships, academic studying, and general goal attainment.

Simply fantasizing about a desired future ("indulging") or just thinking about negative aspects of one's current reality ("dwelling") only produces moderate commitment to achieve wished for goals. If, however, they both imagine the desired future and then also think about their current, more negative, reality (mental contrasting), the present reality tends to be seen as "standing in the

way" of the wished for future. If the obstacles to achieving goals are assessed as surmountable, then mental contrasting typically boosts energy, commitment and action.

Mental contrasting is a delightfully effective and simple procedure. Specific mental contrasting instructions vary a bit from research study to research study, but all instructions follow the same general format. First the individual is asked to imagine, talk and/or write about personally valued aspects of the wished for future. Secondly they imagine, talk and/or write about obstacles that currently get in the way of achieving the wished for future. Typically, this increases their energy and commitment to tackle the obstacles (Oettingen, Mayer et al. 2009).

**Mindfulness** – is defined as "the intentional, accepting and non-judgmental focus of one's attention on the emotions, thoughts and sensations occurring in the present moment." Being mindful is a state of active, open attention on the present. When being mindful, Participants will be able to observe their feelings and thoughts from a distance, without judging them as good or bad.

Mindfulness awakens the Participant to experience. The goal is simply to observe—with no intention of changing or improving anything. Mindfulness supports living each and every moment to the fullest possible. It is an attitude about life as well as a relaxation technique.

Mindfulness is the practice of purposely focusing attention on the present without drifting into concerns about the past or the future or getting caught up in making judgments about what is happening. It is a means of observing and accepting what is occurring in this moment of time. Accepting life and the self just as they are right now, with all of the positives and negatives, often leads to

increased confidence, calmer moods, and enhanced coping skills. Mindfulness is awareness of the moment. The keys to mindfulness are:

- 1) Unselfconsciousness
- 2) Savoring
- 3) Breathe
- 4) Flow
- 5) Acceptance

**Progressive Muscle Relaxation** – a technique that involves tensing specific muscle groups and then slackening them to create awareness of tension and relaxation. It is termed progressive because it proceeds through all major muscle groups, relaxing them one at a time, and eventually leads to total muscle relaxation. During this exercise each muscle should be tensed, but not to the point of strain. If there are any injuries or pain, the affected areas can be skipped.

Sit back or lie down in a comfortable position. Shut both eyes if comfortable doing so. Begin by taking a deep breath and noticing the feeling of air filling the lungs. Hold this breath for a few seconds. (Pause briefly) Release the breath slowly and let the tension leave the body. Take in another deep breath and hold it. (Pause briefly) Again, slowly release the air. Even slower now, take another breath.

Fill the lungs and hold the air. (Pause briefly) Slowly release the breath and imagine the feeling of tension leaving the body. Now, move the attention to the feet. Begin to tense the feet by curling all of the toes and the arch of the feet.

Hold onto the tension and notice what it feels like. (Pause for five seconds)  
Release the tension in the feet. Notice the new feeling of relaxation.

Next, begin to focus on the lower legs. Tense the muscles in the calves. Hold them tightly and pay attention to the feeling of tension (pause for five seconds)  
Release the tension from the lower legs. Again, notice the feeling of relaxation.  
Remember to continue taking deep breaths.

Next, tense the muscles of the upper leg and pelvis. This can be done by tightly squeezing both thighs together. Make sure to feel tenseness without going to the point of strain. (Pause for five seconds) And release. Feel the tension leave the muscles.

Begin to tense the stomach and chest. Do this by sucking your stomach in. Squeeze harder and hold the tension. A little bit longer. (Pause for five seconds) Release the tension. Allow the body to go limp and notice the feeling of relaxation. Continue taking deep breaths. Breathe in slowly, noticing the air fill your lungs, and hold it. (Pause briefly) Release the air slowly. Feel it leaving the lungs.

Next, tense the muscles within the back by bringing both shoulders together. Hold them tightly as the chest extends forward. Tense them as hard as possible without straining and keep holding (pause for five seconds) Release the tension from the back. Feel the tension slowly leaving the body, and the new feeling of relaxation. Notice how different the body feels when allowed to relax.

Tense the arms all the way from the hands to the shoulders. Make a fist and squeeze all the way up the arm. Hold it. (Pause for five seconds) Release the tension from your arms and shoulders. Notice the feeling of relaxation in your fingers, hands, arms, and shoulders. .

Move up to your neck and your head. Tense your face and your neck by distorting the muscles around your eyes and mouth. (Pause for five seconds) Release the tension. Again, notice the new feeling of relaxation.

Finally, tense the entire body. Tense the feet, legs, stomach, chest, arms, head, and neck. Tense harder, without straining. Hold the tension. (Pause for five seconds) Now release. Allow the whole body to go limp. Pay attention to the feeling of relaxation, and how different it is from the feeling of tension. Begin to wake the body up by moving slowly. Stretch all the muscles and open your eyes when ready.

Life Coaches must remember that each participant may respond differently to various activities. Some feel pleasant or refreshed, and others feel calm and relaxed after an activity like this one. Some people notice little change the first time, but with practice, their control increases - as well as the benefits. If this activity is practiced, relaxation should increase.



**Radical Acceptance** - acceptance mode is the fastest way out of pain and extreme emotional distress. It saves strength until a way to change the situation is found. It suggests that in this moment, what is happening is happening, whether it is desired or not. Pain cannot be always avoided, but with Radical Acceptance suffering is reduced.

**Role Playing** – An important exercise that can be used by the Life Coach is Role playing. It can be defined as the process of assuming a specific role in order to try out different ways of behaving or relating to others. Information, alone, rarely makes people change their minds, but personal experience often does. It transforms the content of education from information into experience. It also gives the Coach the opportunity to provide participants with supervised practice in dealing with “real life” social situations. Participants benefit from role-playing because it allows them to see the rewards or consequences of actions without fully experiences them. This can lead to better decision making. Role playing enhances understanding and develops empathy. It enhances social skills that are needed to thrive in community. Exercises enable participants to practice calming down during uncomfortable situations as well as practicing persistence and overcoming obstacles.

While it promotes self-awareness, it may prove challenging based upon the willingness or unwillingness of the participant. Some will judge themselves or fear being judged during the exercise. One of the most common complaints is that role plays or scenarios are “unrealistic”. In practice this usually means that they are too real for comfort. It is important that the Coach is attentive and sensitive to the reactions of the participant. Specific role plays should be discontinued if the participant is triggered, becoming aggressive or emotionally

upset. Adjustments may be needed if there is prolonged negative behavior or confusion about where the exercise is going.

Initial role plays should be kept brief. It is very important to structure the exercises by clearly defining the situation and roles to be played, as well as the intended objectives. Critical to the success of the practice is to provide structure from the outset by asking participants to clearly state their problem or feelings, goal, and solutions to be enacted. It is generally instructive to enact a role play more than once.

In using this tool, a clear process for review needs to be in place. At the close of each exercise participants give their reactions first. They describe their experience, thought process and feelings. This is usually sufficient “de-rolling”, which serves the purpose of clearly communicating to all persons involved that they are no longer in the role. Once the participant has expressed their reaction, the Coach should always provide feedback. Start with positives and then draw out the Participant’s critical comments with questioning. This has the effect of dividing the responsibility for being critical and objective, which makes it easier to both make and receive comments that may be perceived as critical. The Coach should also praise all role play efforts.

**Self-Talk** - can have an immense impact on self-esteem and confidence. There is positive and negative self-talk and they both have a bearing on how someone feels. Self-talk is basically a person’s inner voice, the voice in their mind which says things that they don’t necessarily say out loud. Often self-talk happens without even realizing it and can be a subtle running commentary going on in

the background of the mind. But what is said in the mind can determine a lot of how someone feels about who they are.

Positive self-talk is the helps people feel good about themselves and the things that are going on in their life. It is like having an optimistic voice in your head that always looks on the bright side.

Example – “These clothes look pretty awesome on me”, “I can totally make it through this exam”, “I don’t feel great right now, but things could be worse and they will get better!”

Negative self-talk contributes to people feeling pretty bad about themselves and things that are going on. It can put a downer on anything, whether it is good or bad.

Example – “I look stupid in these clothes”, “Everyone thinks I’m an idiot”, “Everything is crappy and nothing is going to get better”

Negative self-talk is particularly bad as it brings a person down all the time. It can impact recovery from mental health difficulties and tends to make people feel miserable. But being positive all the time isn’t achievable either, and isn’t helpful all the time. It is important for Coaches to help participants make their self-talk work for them.

There are three things that can be done to help with changing the direction of self-talk. Coaches will need to encourage Participants to:

- 1) Listen to what they are saying to themselves—people don’t always consciously take note of that is being said in their minds. The first

step in improving self-talk is to actually notice what the inner voice is saying. This could involve taking some time each day to listen, and even write down, what they're thinking.

2) Monitor their self-talk. (Is it more positive or negative?) Start questioning their self-talk by asking things like:

- Is there actual evidence for what I'm thinking?
- What would I say if a friend were in a similar situation?
- Is there a more positive way of looking at this?
- Am I keeping everything in perspective?
- Can I do anything to change what I'm feeling bad about?

3) Change their self-talk—Easier said than done, but definitely worth working on. It starts by trying to counter negative thoughts with positive ones. For example, if they're thinking "I'll never be able to do this", suggest they ask themselves "Is there anything I can do that will help me be able to do this?" This change process includes avoiding speaking in finite language and trying and look for things that might add a better spin to a tough situation.

Everyone has negative self-talk. Negative self-talk is not the real problem, the problem is when it spirals downward and the person ends up defining themselves in absolute/permanent negative language. An easy method to use to counter act negative self-talk is to learn to "Catch it", "Check it", and "Change it".

- ❖ **Catch it** early on. This involves knowing when you are moving from fact to story.
- ❖ **Check it** against what is actually going on. Stick to the facts.
- ❖ **Change it** to reflect what the facts are.

**Self-Efficacy** - The theory of self-efficacy was coined by Albert Bandura, an early cognitive psychologist who has contributed to many fields of psychology. The theory has been, and still is, very influential in modern psychology. According to Bandura (1995), a self-efficacy belief is: “The belief in one’s capabilities to organize and execute the courses of action required to manage prospective situations.”

The belief that one can control stressful events is related to emotional well-being, successful coping, healthy behaviors, better performance on cognitive tasks, and good health. It has also been linked to a lower risk of mortality (Taylor, 2012).

Research has also found a link between perceptions of self-efficacy and both initial health behavior change and long-term maintenance of change. Self-evaluation regarding the ability to carry out tasks is important in various fields of human success.

People with high efficacy beliefs may approach difficult tasks as challenges to be mastered rather than see the all the limitations. This approach may

foster an intrinsic interest in activities. They set perfectly challenging goals for themselves and maintain strong commitment to accomplish them.

Self-efficacy beliefs begin to form in early childhood as the child deals with a variety of experiences, tasks and situations. The development of self-efficacy beliefs continues throughout life as people learn, experience and develop into more complex human beings.

There are four major sources that contribute to the development of self-efficacy beliefs.

- 1) Performance accomplishments: The experience of mastery influences a person's perspective on their abilities. Successful experiences lead to greater feelings of self-efficacy. However, failing to deal with a task or challenge can also undermine and weaken self-efficacy.
- 2) Vicarious experience: Observing someone else perform a task or handle a situation can help the observer to perform the same task by imitation, and if the performer of the task succeeds at it, the observer is likely to think that they will succeed as well, if the task is not too difficult. Observing people succeeding, who are similar to themselves, will increase the Participant's beliefs that they can master a similar activity.
- 3) Verbal persuasion: When other people encourage and convince someone to perform a task, they tend to believe that they are more

capable of performing the task. Constructive feedback is important in maintaining a sense of efficacy as it may help overcome self-doubt.

- 4) Physiological states: Moods, emotions, physical reactions, and stress levels may influence how the Participant feels about their personal abilities. If they are extremely nervous, they may begin to doubt and develop a weak sense of self-efficacy. If they are confident and feel no anxiety or nervousness at all, they will likely experience a sense of excitement that fosters a great sense of self-efficacy. It is the way people interpret and evaluate emotional states that is important for how they develop self-efficacy beliefs. For this reason, being able to diminish or control anxiety may have positive impact on self-efficacy beliefs.

**Self-Esteem** – The term “self-esteem” is often used to describe a person’s sense of self-worth or personal value. It can involve a variety of beliefs about the self, such as the appraisal of one’s own appearance, beliefs, emotions and behaviors.

## **Duties of the Life Coach**

### **Accompany Participants to Social Activities**

The Life Coach may accompany the Participant to an activity or event and initially provide transportation if needed, in accordance with agency policy. The Life Coach serves as a role model of recovery and positive social interaction. The Life Coach may take the Participant to stores to obtain needed materials for a new hobby or upcoming social event or activity. The Participant applies newly acquired skills to become more independent in social interactions thereby reducing their need for the Life Coach. As time goes by the Life Coach begins to gradually pull away, putting more responsibility on the Participant.

The Life Coach works with the Participant to set social goals and plan outings. Some examples of places to go would be: local drop-in centers, going out to eat with a friend, going to the theater, attending an adult education class, going to a Meet-Up group for crocheting or card playing, etc. The Life Coach will model good social behavior. The Life Coach acts as an ice breaker and soothes social anxieties. The goal is for the Participant to get out on their own, but until they are comfortable doing this alone the Life Coach helps them ease into the wider world.

Very often the Participant does not have transportation, so the Life Coach might transport the Participant to the social event. This is contingent on the agency's policy. Lack of transportation can lead to problems as the Life Coach is not to be used as a taxi service. Participants often ask to be taken to the grocery store and the Life Coach must maintain firm boundaries as to



where and under what circumstances an outing can be. For example, suppose one participant was planning a dinner party and needed food for the party. In this case it would be acceptable to take them to the grocery store since it is tied to a social event. Social outings must always be linked to the Participant's social goals for that month.

The Life Coach also has a budget to be able to accompany the Participant. So if the Participant wishes to go out to the movies, the Life Coach's ticket is paid for in monthly reimbursements. Just like the participants, the Life Coach needs to keep the receipts and document accordingly.

### **Encourage Participants to Socialize With Others**

The Life Coach encourages the Participant to socialize with other people. The Participant gets a lot of encouragement simply from the accompaniment of the Life Coach to social events. The Life Coach helps the Participant to identify who they want to socialize with. The Life Coach praises the Participant whenever they get out of their comfort zone, which empowers them to try to do even more. The Life Coach helps to maintain current friendships by encouraging frequent phone calls, emails, and visits. They help with gaining new friendships by checking out local Meet-Up groups or other resources. One participant joined an online dating site and ended up going out on a date for the first time in years.

## **Participant Rights and Responsibilities**

### **Privacy and Confidentiality**

All members of the program staff will be trained in the importance of ensuring privacy and confidentiality, and the Health Insurance Portability and Accountability Act (HIPAA). Data will be gathered by these trained staff. Such data will be collected only with the informed consent of participants and will be coded with identification numbers. Confidentiality should be discussed with the each participant from the beginning. The Life Coach must explain the policy to the Participant including the use of the optional Authorization to Disclose Protected Health Information (HIPAA) Form.

Data collection instruments will be used only for the purpose of collecting qualitative and quantitative information specific to the services provided by the program staff. Data gathered for program evaluation will be stored separately from other SSDC data in a secured location. This information will only be accessible to a limited number of personnel including the Director and the Assistant Director (if applicable) who have completed the HIPAA compliance training. The identity of participants will be kept private through the use of a coding system on records as well as through the limitation of access to records.

## **Participant Rights and Responsibilities**

### **Informed Consent**

Eligibility for participation in the program includes the ability and willingness to give informed consent. This will be governed by a general requirement of competency. In common-law jurisdictions, adults are presumed competent to consent. This presumption can be rebutted, for instance, in circumstances of mental illness or other incompetence. This may be prescribed in legislation or based on a common-law standard of inability to understand the nature of the procedure. The program staff will ensure that all participants are capable of providing informed consent for acquisition of personal health information, participation in the program, evaluation component of the program, and sharing of anonymous personal information in publications, reports, and presentations. A Licensed Mental Health Counselor will be available to the program staff for consultation and evaluation to work with participants experiencing mental health problems related to their involvement in the program.

## **Participant Rights and Responsibilities**

**Ongoing Participation Requirements** These policies will be explained to the person at the initial interview with the Life Coaches (or Coach if the Participant already knows who they want as their coach).

### **Regular Meetings with the Life Coach**

This first meeting is very easy going and the meeting place is always determined by the Participant. They are to meet with their Life Coach on a weekly or bi-weekly basis. Meetings will consist of going through various exercises and/or worksheets that will assist the Participant in progressing toward their identified social goals. Additionally, outings may consist of the Life Coach accompanying Participants to activities or events where the Life Coach initially provides transportation if needed, in accordance with agency policy.

### **Journaling**

The Social Explorations Guided Journal must be completed on a weekly basis. If journaling is not complete, Participants must be willing to spend time with their Life Coach to complete the journaling; otherwise the amount of the monthly allowance will be deducted by 50% for the following month.

### **Proper Use of Monthly Stipend**

Participants in the It's My Life ~ Social Explorations program will receive a monthly allowance of \$60.00 to be spent on advancing toward the three (3) social goals that will be set with the assistance of the Life Coach. (This amount is set as to not interfere with the SSI benefits received by many

participants.) Activities must be approved by the Life Coach. The amount is pending completion of weekly guided journaling and consistently providing proof of purchase (i.e. receipts) for how the money was spent.

Documentation for all purchases is to be recorded on the Budget Tracking Sheet provided in the Program Participant Handbook. If receipts are not provided or funds are spent on unauthorized expenses, the allowance for the following month will be reduced by the amount unaccounted for or misused. Any changes from the completed Social Activities Budget Plan should be approved by the Life Coach before the new activity is performed. Any money not used to accomplish social activities will roll over to the next month up to \$30. This will allow participants the option to save for larger purchases related to achieving their social goals.

It is important to remember that the money is spent on social events, not for solitary activities. Some examples of how the stipend money was used included: joining a gym, bowling, going out to eat, going to the movies, travel expenses, going to the theater, things necessary for a hobby such as beads to make jewelry, going to a drawing class and drawing supplies, and going to a baking class and baking supplies. The possibilities are nearly endless, as long as the money used harkens back to the Participant's social goals.

## **Participant Handbook**

Each participant will receive a Participant Handbook. The contents of which will provide them with everything they will need for the duration of their enrollment. It includes several forms/worksheets and the weekly guided journal. The paperwork can be completed independently or with the aid of the Life Coach. Copies of completed paperwork will be retained as part of the Participant's file and handled in accordance with Program Privacy and Confidentiality Procedures.

### **Introduction to It's My Life Program**

The first items in the Handbook are the promotional flyers. They give a very broad outline of the program. One flyer was geared towards participants while the other was created for mental health professionals for possible referrals. The flyers emphasize that the program is peer-directed as well as peer-led, working towards health, happiness, wellness, and recovery together.

### **Life Coach Biographies**

The Life Coach biographies are included in the Handbook so that the Participant can choose the best fitting person to be their coach. These short biographies give the professional background material of the Life Coaches as well as their personal philosophy to coaching. The biographies include a picture of the coaches and their respective business contact information.

# Program Participant Handbook

## Personal Information and Consent Form

(This is completed at or by the 1<sup>st</sup> meeting)

The Personal Information and Consent Form starts with general contact information, then goes on to ask participants how they heard about the program and what they want help with the most. It also serves as the formal agreement that outlines the requirements to get the \$60.00. This is where the Participant agrees to write in their weekly journal and keep all receipts. It is signed by the Participant, the chosen Life Coach and the Director. The date of this form is the official start date for the Participant. Once completed, it is to be collect, copied and returned by the Life Coach at the second meeting.

**It's My Life ~ Social Explorations Program**  
**Personal Information and Consent Form**

*Please complete the information below. The information you provide will not be shared with anyone without your expressed written permission. It is very important that you print clearly as it will help us to better serve you as we discuss our services and how we can assist you in reaching your social goals.*

**Personal Information**

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

What is Your Date of Birth? \_\_\_\_\_

How Can We Contact You? \_\_\_\_\_ What's the Best Time for You? \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

How did you hear about the *It's My Life ~ Social Exploration Program*?

Case Worker/Counselor     DARS     Drop-In Center  
 Friend/Relative     MHA Website     PACT/ICT Team  
 PRS     ServiceSource     Other \_\_\_\_\_

Do you have transportation?  Yes  No

If not, how do you get around?

Bus/Metro     Taxi     Ride w/Friend     Other \_\_\_\_\_

Where would you like us to meet with you?

My Home     Gartlan Center     Drop-In Center  
 Friend/Relative's Home     MHA Office     Restaurant  
 PRS     ServiceSource     Other \_\_\_\_\_

*It's My Life~Social Exploration Program can assist me with the following:*

Getting Out More     Finding Fun Things to Do and See  
 Making New Friends     Having a Boyfriend or a Girlfriend  
 Enhancing Current Relationships     Volunteer/Job Opportunities  
 Feeling Confident about Myself     Feeling More a part of my Community  
 Taking-up a New Hobby     Other \_\_\_\_\_

Is lack of money keeping you from going to social events/activities?  Yes  No

Would you like a Life Coach to assist you with connecting to the community of your choice?  
 Yes  No

Are you currently employed?  Yes  No If so, is it  Part-time or  Full-time

If not, would you like to be employed in the future?  Yes  No

Do you volunteer anywhere?  Yes  No If so, is it  Part-time or  Full-time

If not, would you be interested in volunteering one day?  Yes  No

Are you willing to write in a journal every week for a year?  Yes  No

**Consent to Participate in *It's My Life ~ Social Explorations***

I, \_\_\_\_\_, would like to participate in the *It's My Life ~ Social Exploration Program*. I agree to partner with my Life Coach to determine my Social Goals and then work on achieving the Social Goals that I want.

I agree to participate with the understanding that this program is completely voluntary. I can stop at any time, but I agree to speak/communicate with Patrick Hendry, Program Director, if I am having any problems or conflict with this program or my Life Coach. I also understand that I may speak/communicate with Patrick Hendry at any reasonable time, for any reason.

I understand that I will be responsible to budget and account for the monthly \$60.00 by using the Activities Budget Sheet and the Budget Tracking Sheet and to keep all of my receipts. I agree to use this money in relationship with the goals that I set and that any unused monies will be rolled over to the next month.

After all of the initial paperwork and interviews are complete, I agree to keep my Weekly Social Journal and to fill out the Quarterly Goal Accomplishment Plan Form with the assistance from my Life Coach if I would like that. I will also participate in subsequent progress interviews.

Participant's Signature \_\_\_\_\_ Participant's Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Life Coach's Signature \_\_\_\_\_ Coach's Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Patrick Hendry, *It's My Life* Director \_\_\_\_\_ Date \_\_\_\_\_

Please return this form to: Patrick Hendry, Program Director, Consumer Advocacy Mental Health America, 2000 N. Beauregard Street, 6<sup>th</sup> Floor, Alexandria, VA 22311  
[phendry@mentalhealthamerica.net](mailto:phendry@mentalhealthamerica.net) or just give Patrick a call @ 703 838-7538

*Enjoy Exploring the Social World of Your Choice and Thank You for Taking the Time to Share Your Feelings and Thoughts With Us and for Completing This Form.*

# Program Participant Handbook

## Social Assessment Evaluation

**(This is completed at or by the 1<sup>st</sup> or 2<sup>nd</sup> meeting)**

The Social Assessment Evaluation worksheet inquires about the Participant's ability to participate in social events or hobbies and interests. It encourages them to evaluate their accomplishments or what they perceive as a lack of accomplishments. Participants will be asked what improvements they would like to see in their lives and to describe anything that has happened to lead to an improvement in their lives. They will also examine their social supports (i.e. friends, family, emotionally close relationships).

**Social Assessment Evaluation**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please answer each question the best that you can. You don't have to use all of the blanks provided. If you need more space to answer a question, please feel free to use the back of page # 2.*

1. Do you have any health concerns that could keep you from participating in social events?  
\_\_\_\_\_  
\_\_\_\_\_
2. Do you feel as though you are able to participate in the hobbies or interests that you have? If not, what prevents this? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What is your proudest accomplishment? Why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. If you feel that you haven't accomplished something important to you, what do you think got in your way? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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5. Who are the people in your life that you can really depend upon for support?  
\_\_\_\_\_  
\_\_\_\_\_
6. How often do you have contact with your friends and/or your family (this includes seeing them in person)? \_\_\_\_\_  
\_\_\_\_\_
7. Besides seeing your friends and family in person, what other ways do you stay in contact with them?  
\_\_\_\_\_  
\_\_\_\_\_
8. Are you involved in any emotionally close relationships? If so, how do you communicate with your these people (in person, e-mail, phone calls, etc.)? How often? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Name some things that you would like to see improve in your life:  
\_\_\_\_\_  
\_\_\_\_\_
10. Sometimes things happen that make life better. Has this happened to you? If so, what? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for taking your valuable time to fill out this form.*

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# Program Participant Handbook

## Social Goal Establishment

**(This is completed at or by the 1<sup>st</sup> or 2<sup>nd</sup> meeting)**

The Social Goal Establishment worksheet asks about hobbies, interests, and accessibility to them. Participants will describe what they would like to do that they do not currently do. They will look at community involvement and begin setting goals based on information gathered to this point.

**Social Goal Establishment**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please answer each question the best that you can. You don't have to use all of the blanks provided. If you need more space to answer a question, please feel free to use the back of page # 2.*

1. What do you enjoy doing in your free time?  
\_\_\_\_\_  
\_\_\_\_\_
2. List some things that make you the happiest in life.  
\_\_\_\_\_  
\_\_\_\_\_
3. Where do you enjoy spending your free time?  
\_\_\_\_\_  
\_\_\_\_\_
4. Is transportation available when you want to go somewhere?  YES  NO
5. How do you know what there is to do (internet, read papers, friends tell you)?  
\_\_\_\_\_  
\_\_\_\_\_
6. List some interests or hobbies that you have:  
\_\_\_\_\_  
\_\_\_\_\_
7. How do you follow or participate in these interests or hobbies? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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8. What would you like to do in the future that you do not currently do now?  
\_\_\_\_\_  
\_\_\_\_\_
9. List some things that you do for fun and how often you do them. For example: "Go out to see the movies-5 X's a month":  
\_\_\_\_\_  
\_\_\_\_\_
10. What do you do to stay healthy (lift weights, go for a run, swim, or dance)?  
\_\_\_\_\_  
\_\_\_\_\_
11. What do you do in the community, how often (shop, church, synagogue, school, or hair/nail salon)?  
\_\_\_\_\_  
\_\_\_\_\_
12. Is there anything that you think would be fun to do in the community that you don't do now?  
\_\_\_\_\_  
\_\_\_\_\_
13. What do you like to do at social events?  
\_\_\_\_\_  
\_\_\_\_\_
14. List 3 goals you have for yourself in the near future (the next 30-90 days):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for taking your valuable time to fill out this form.*

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# Program Participant Handbook

## Quarterly Goal Accomplishment Plan

**(This is completed on a quarterly basis.)**

The Quarterly Goal Accomplishment Plan asks about three (3) goals for each quarter. Participants will consider what steps to take in order to progress to each goal and look at challenges to reaching their goals. They will discuss possibilities for overcoming each obstacle they define. Consequences (positive and negative) of completing goals will also be addressed.

**Quarterly Goal Accomplishment Plan**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please answer each question the best that you can. You don't have to use all of the blanks provided. If you need more space to answer a question, please feel free to use the back of page # 5.*

1) List 3 goals you have for yourself in the near future (the next 30-90 days):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) What steps can you take to reach your first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) What do you think could challenge you in reaching your first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Are there any special things that you will need to reach this 1st goal such as: is transportation available; do you need tickets; do you have to sign up before you go? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) How will you be able to find out how to overcome any obstacles that you have discussed in Question 3? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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6) What have you already done to reach this first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7) What is the next step to reaching this first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8) What do you hope will be the results of accomplishing this first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9) How do you think you might feel if you accomplish this first goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10) If there are negative consequences to accomplishing this first goal, how do you think you can overcome them? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11) What steps can you take to reach your second goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12) What do you think could challenge you in reaching your 2<sup>nd</sup> goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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# Program Participant Handbook

## Social Spending Plan

**(This is completed on a monthly basis.)**

The Social Spending Plan will have the Participant identify three social goals to work on for the month. It is recommended that these are carried over from the Quarterly Goal Accomplishment Plan, but may be changed from month to month. Here, the Participant will create a budget for their monthly stipend. It is important that a clear connection be made between the items or social events and the social goals.

### It's My Life~Social Spending Plan

Name	<input type="text"/>	Month	<input type="text"/>	
Monthly Social Allotment:	\$	<input type="text" value="60.00"/>		
Goal 1:				
Goal 2:				
Goal 3:				
Goal #	Activity/Item	Connection to Goal	Amount (\$)	Total
<b>Grand Total:</b>				<input type="text"/>

# Program Participant Handbook

## Budget Tracking Sheet

**(This is completed on an ongoing basis as activities are performed.)**

The Budget Tracking form is used to keep record of spending and receipts. Completed activities are listed with the associated goals and costs.

It's My Life~Social Explorations						
Budget Tracking						
Name _____				Starting Balance _____		
Month _____						
Date	Activity/Event	Goal	Starting Balance	Amount Spent	Ending Balance	Receipt Provided
						N/A
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
<i>Comments:</i>						
_____						
_____						
_____						
_____						
Participant Signature _____		Date _____		Coach Signature _____		Date _____

# Program Participant Handbook

## Guided Journal

**(This is completed on a weekly basis.)**

The Guided Journal is used to keep a record of thoughts and feelings of the Participant as they reach their goals and build on their skills. The guided journals are collected and copied, then returned on a regular basis.

Completing the guided journals is linked to receiving the monthly stipend.

**It's My Life~Social Explorations Weekly Journal**

Name: \_\_\_\_\_

For the Week of: **October 13, 2013 through October 19, 2013**

Please write a few paragraphs about what you did this week and how you feel about it: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Goal(s) I worked on this week: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What I did: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What kind of transportation did I need to get there: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What happened when I got there: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What I liked: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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What I wish was different or what might I have done differently: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did I feel about it later and/or right now: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Skills that I have learned: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Skills that I used: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do I feel about these skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What skills would I like to learn: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

My plans for next week: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Thank you for taking your valuable time to write your weekly journal!*

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# Program Participant Handbook

## HIPAA Compliant Authorization Form


The HIPAA Compliant Authorization Form (Authorization to Disclose Protected Health Information) is an optional form from the standpoint of the Participant. It is, however, necessary if there is anyone the Participant would like to have involved in their program. Federal Law requires a variation of this form to be signed in regards to flouting confidentiality. Permission may be given by the Participant for the Life Coach to communicate with a person of their choosing regarding the well-being of the Participant. This limitation does not apply to emergency situations covered under mandated reporting.

Authorization to Disclose Protected Health Information <small>(HIPAA Compliant Authorization Form)</small>		
I, _____	_____	_____
<small>Name of Participant (Please Print)</small>	<small>DOB (mm/dd/yy)</small>	<small>Phone Number</small>
of _____		
<small>Participant's Address</small>		
hereby authorize <i>It's My Life-Social Explorations</i> , Office Address: 2000 N. Beauregard Street, 6 <sup>th</sup> Floor, Alexandria, VA 22311		
1. To <input type="checkbox"/> disclose individually identifiable health information on my behalf to: The South Fairfax County PACT or ICT Team or to _____		
2. The following specific information is authorized: <u>Concerns about the Participant's Mental Status</u>		
3. This authorization is in effect for the period of time from: _____ to _____		
<small>(Date or Event)</small> <small>(Date or Event)</small>		
4. This authorization allows <i>It's My Life-Social Explorations</i> to share the specified information for:		
<input type="checkbox"/> A single use or disclosure available at the time of authorization		
<input type="checkbox"/> On-going use or disclosure for the time period identified in Item 3		
5. The information will be used/disclosed for the following purpose(s): <u>Participant's Safety</u>		
6. The source records for information disclosure:		
<input type="checkbox"/> ARE protected by federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2) because the records contain information on prior, current, or planned substance abuse treatment. If these records are protected by regulation 42 CFR Part 2, I understand the recipient is prohibited from making any further disclosure of this information unless expressly permitted by my written authorization, except as otherwise permitted within the regulation. 42 CFR Part 2 also restricts any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient.		
<input type="checkbox"/> ARE NOT protected by federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records (42 CFR Part 2). If these records are not protected by 42 CFR Part 2, I understand the Federal Privacy Rule (45 CFR Part 160 and 164, HIPAA) requires I be advised that information used or disclosed based on this authorization may be subject to re-disclosure and no longer protected by Federal HIPAA regulations.		
7. I understand that:		
<ul style="list-style-type: none"><li>• <i>It's My Life-Social Explorations</i> using or disclosing information based on this authorization are to share the minimum necessary amount of the specified information to accomplish the purpose of the disclosure identified in Item 5.</li><li>• <i>It's My Life-Social Explorations</i> will not condition the provision of services related to treatment, payment, enrollment, or eligibility for benefits on my decision to sign this authorization.</li><li>• I may revoke (or cancel) this authorization at any time by submitting a written statement of revocation to <i>It's My Life-Social Explorations</i> whose address is provided above, except to the extent that <i>It's My Life-Social Explorations</i> already has taken action based on this authorization.</li><li>• I have a right to request and receive a Notice of Privacy Practices from <i>It's My Life-Social Explorations</i>.</li><li>• The information to be released has been fully explained to me and this authorization is given of my own free will.</li></ul>		
8. Please send or communicate the authorized information to the following address, phone number or fax number: _____		
Participant's Signature: _____		Date: _____
<small>A copy of this document shall be as valid as the original.</small>		

# Program Participant Handbook

## Photograph Release Form

The Photo Release Form is completely voluntary. It allows the use of images of the participants to be used for conference presentations, educational courses, promotional brochures and flyers, etc. These may include pictures taken at social events or group activities.



**Photograph Release Form**

I hereby grant permission to the rights of my image or likeness without payment or any other consideration to Mental Health America (MHA). I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

Photographic images may be used for the following purposes:

- conference presentations
- educational presentations or courses
- informational presentations
- on-line educational courses
- educational videos

By signing this release I understand this permission signifies that photographic images of me may be electronically displayed via the Internet or in the public educational setting. I will be consulted about the use of the photographs for any purpose other than those listed above.

There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

This release applies to photographs collected as part of my participation in Mental Health America's "It's My Life - Social Explorations" Project only. I understand that accepting or declining to give this consent is completely voluntary and will not affect my participation in the program.

Please mark only ONE box:

I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against MHA or any person representing the organization utilizing this material for the purposes listed above.

I **decline** to grant consent to the use of my image or likeness.

Participant's Full Name \_\_\_\_\_

Street Address/P.O. Box \_\_\_\_\_

City/State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

# Program Participant Handbook

## Special Evaluation (Grievance) Form

The Special Evaluation (Grievance) Form is to be used in instances where the Participant has a complaint or concern with the program or their Life Coach. It allows the program staff to receive feedback about the Participant's thoughts and feelings regarding the services received. It also provides the Participant with a safe way to express their opinions.

**Special Evaluation (Grievance) Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*It's important that we know how you feel about this program, especially if you are having problems with your Life Coach. Please answer each question the best that you can. You don't have to use all of the blanks provided. If you need more space to answer a question, please feel free to use the back of the page.*

1.) My Life Coach is easy to talk to about: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2.) I feel uncomfortable talking to my Life Coach about: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3.) I feel like this Program is useful to me because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4.) I would like this Program to focus more or less on: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5.) Is there anything else on your mind? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return this form to:

**Patrick Hendry**, It's My Life Director  
Mental Health America, 2000 N. Beauregard Street, 6<sup>th</sup> Fl., Alexandria, VA 22311  
[phendry@mentalhealthamerica.net](mailto:phendry@mentalhealthamerica.net) or just give Patrick a call at (703) 838-7538

*Thank you for taking the time to share your thoughts and for filling out this form.*



# Program Participant Handbook

## Exit Interview Form

The Exit Interview Form is to be used when the Participant leaves the program, whether voluntarily or involuntarily. The purpose is to ensure that exiting Program Participants are informed of their rights and to maintain accurate records on reasons for termination of participation.

**IT'S MY LIFE~SOCIAL EXPLORATIONS  
EXIT INTERVIEW FORM**

Participant's Name: \_\_\_\_\_ Coach's Name: \_\_\_\_\_  
Enrolled From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving: Resignation \_\_\_\_\_ Discharge \_\_\_\_\_  
Explain: \_\_\_\_\_  
\_\_\_\_\_

1. How long ago did you begin considering withdrawing? \_\_\_\_\_  
\_\_\_\_\_

2. What incident or circumstance(s) made you consider withdrawing? \_\_\_\_\_  
\_\_\_\_\_

3. What were the reasons you decided your social goals could not be met here or could be better met somewhere else?  
\_\_\_\_\_  
\_\_\_\_\_

4. Did you speak with your Life Coach or the Program Director concerning your social goals?  
Yes \_\_\_\_\_ No \_\_\_\_\_

5. If the answer to 3 above was Yes, what was the outcome of this conversation? \_\_\_\_\_  
\_\_\_\_\_

6. If the answer to 3 above was No, why not? \_\_\_\_\_  
\_\_\_\_\_

7. Did you get along well with your Life Coach? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. How well did your Coach handle any complaints or grievances you may have had? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. What could have been done to make your participation more rewarding? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. What did you like best about the program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. What did you dislike about the program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. How would you rate the following:

> Participant level of responsibilities?  
 Outstanding  Very Good  Satisfactory  Fair  Unsatisfactory

> Opportunity for achieving goals?  
 Outstanding  Very Good  Satisfactory  Fair  Unsatisfactory

> Social environment?  
 Outstanding  Very Good  Satisfactory  Fair  Unsatisfactory

> Life Coach?  
 Outstanding  Very Good  Satisfactory  Fair  Unsatisfactory

> Pay?  
 Outstanding  Very Good  Satisfactory  Fair  Unsatisfactory

9. What recommendations would you have for making "It's My Life" a better program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Would you have stayed if a more-satisfactory arrangement could have been worked out? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

11. It has been explained to me that completion of this Exit Interview form is voluntary and I was given the option not to complete this form if I so desired.  
Yes \_\_\_\_\_ No \_\_\_\_\_

12. I authorize the placement of this Exit Interview form in my personnel file: Yes \_\_\_\_\_ No \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Ending Participation

### Graduation from program

The It's My Life ~ Social Exploration Program is designed to last for twelve months. At the end of that time (or if a participant has reached all of their social goals and feels that they no longer need the assistance of the Life Coach) they “graduate” out of the Program. This decision to graduate early is one that the Life Coach and Participant reach together. Each graduating Participant will receive a Certificate of Achievement signed by the Life Coach and the Director of the Program.



## **Ending Participation**

### **Early Discharge from Program**

#### **Voluntary Withdrawal**

Participation in the It's My Life Program is completely voluntary. This should be made clear to participants from the very beginning.

Participants can drop out at any time, but are asked to communicate with the Program Director if they are having any problems or conflict with the Program or their Coach. Consideration of using the Special Evaluation (Grievance) Form prior to quitting the program should be encouraged. All possible efforts, within reason, are to be made to rectify any problems in the best interest of the Participant and the program. Participants may also choose to withdrawal ("graduate early") if they feel they have accomplished all of their current social goals or no longer have an interest in pursuing them at the given time.

#### **Involuntary Dismissal**

Under certain circumstances, participants may be involuntarily dismissed from the It's My Life Program. This can occur if the participant consistently fails to meet their agreed upon obligations of meeting regularly with their Life Coach, completing the Guided Journals and proper use of the monthly stipend. This includes only using the funds for pursuing social goals, adherence to the approved Social Spending Plan and maintaining receipts and proper documentation of expenditures using the Budget Tracking Sheet provided in the Participant Handbook.

Additional cause for dismissal would be if a participant's Life Coach believes that the participant no longer has a need for the program or can no longer benefit from participation. In such cases, this should be discussed with the Participant by a Program Team Member other than their Life Coach. The Participant will be afforded the opportunity to express how they feel they can continue growing through the program, any outstanding social goals they would like to continue working toward and any suggestions they may have as to adjustments that would help them in participating more effectively. Based upon the information discussed, the Program Director or team will determine the best course of action. It is to be decided whether the Participant will be discharged or allowed to continue in the program with a more focused approach. They may do this with their current Life Coach or try working with someone different.

### **Exit Interview**

In the event of a participant being discharged prior to completion of the program, they will be asked to complete an Exit Interview. This is to be completed upon termination (voluntary or involuntary) from the program to ensure that exiting program participants are informed of their rights and to maintain accurate records on reasons for termination of participation. The exit interview shall be held at the time of the Participant's discharge. It is to be conducted by the Program Director or their designee. The objectives of the exit interview are as follows:

- To determine the actual reason for an Participant's resignation/termination
- To discover any grievances the Participant may have about the program in order that corrective action(s) may be undertaken
- To discover any misunderstandings the Participant may have had about their role, or with their Life Coach in order that corrective action(s) may be undertaken
- To retain the goodwill of the Participant toward the program and it's staff
- To review administrative details with the Participant such as privacy continuation rights and re-enlisting policy
- To arrange for the return of any program funds which have not already been returned to the Program Director or their designee

When a Participant announces their intention to withdraw, the Life Coach should schedule an exit interview for the Participant with the Program Director or their designee as soon as possible. During the exit interview, the Program Director or their designee will seek to meet all objectives listed in this Exit Interview Policy statement. The departing participant will complete the Exit Interview Form as thoroughly as possible. Any information obtained during the exit interview may be disclosed to (and/or discussed with) the Program Director and the Team of Life Coaches in order to investigate any allegation(s) made and/or to be made aware of emerging problem(s). The Program Director may make recommendations to the Team of Life Coaches for corrective action based on the information contained in the exit interview. It is also important to note while that participating in the exit interview is significant, it is also voluntary. Participants may choose to opt-out.

# **Life Coach Guidelines**

## **Boundaries**

Life Coaches must maintain professional boundaries at all times. The key distinction in Peer-Provided Support Service is its unique potential value of disclosure and mutuality. Other important aspects are experiential knowledge, confidentiality and easy access. Essential to the successful functionality of these features is the appropriate application of boundaries. Relationship boundaries are established to promote trust, increase safety, demonstrate respect, develop a working alliance (rapport), and provide structure to the helping relationship. They create clarity and predictability for the individual and the peer supporter.

It is important to recognize that boundary issues are not the same as boundary violations. Violations generally refer to clear laws, policies or rules. They include, but are not limited to abuse, exploitation, and sexual or romantic relationships. Boundary issues may not always be expressly defined and thus may take the form of individual, situational limits. They are inevitable, ongoing and sometimes flexible.

Life Coaches must be careful not to start using boundaries to separate themselves and then fall into the same power dynamics as a traditional helping relationship. Boundaries are not intended to be a barrier, but rather the framework for a healthy and productive relationship. Additionally, dual roles may lead to conflicts of interest that can jeopardize the peer connection. Life Coaches must not engage in these kinds of relationships. They do not act as therapists, sponsors, payees or medication/treatment adherence monitors.

The importance of co-creation or negotiation of conditions should also be noted. It requires a conversation that is ongoing throughout the relationship. Subjects of discussion should include mutuality, respecting one another's time, personal space, how one would like to be addressed, topics considered to be "off limits", cultural/religious or other considerations on how to BE with one another. Everyone needs to state their limits and restate or redefine if necessary.

## **Burnout and Compassion Fatigue**

Balance and communication are key to all healthy relationships. This requires self-awareness, critical reflection, consequential thinking, and ethical decision making. Life Coaches must continuously be involved in training and education. They must practice proactive consideration of limits, prohibitions, exclusions and exceptions. Neglect of these practices may lead to burnout or compassion fatigue. This can be detrimental to the Life Coach as well as the Participant. If left unaddressed, compassion fatigue can result in the Life Coach becoming desensitized or "numbed out", which can compromise the quality of service they provide.

For Peer Life Coaches, compassion fatigue is a state of tension and preoccupation with a traumatized participant by re-experiencing reported traumatic events, avoidance or numbing of reminders and/or frequent anxiety in connection to the Participant. This is more likely to occur if the Participant describes events similar to traumatic events that the Life Coach has personally experienced in their own life. Over the course of a Participant's enrollment in the program, the forming of a close friendship is very likely to happen. Along with that friendship may come a high level of trust and comfort with discussing difficult or traumatic situations. Life Coaches may feel unable to refuel or regenerate. It is important to normalize

negative, stressful feelings and experiences that are part of the Life Coach's work. One of the dangers of compassion fatigue is that it can occur suddenly without much warning. However, often times there are some early warning signs that will help in recognizing compassion fatigue. Compassion fatigue can manifest in several forms:

#### 1) Cognitive Warning Signs

- Diminished sense of purpose, accomplishment, or enjoyment of work
- Intrusive thoughts or images of participants' traumatic situations
- Difficulties with concentration and focus
- Feelings of professional impotence or helplessness
- Decreased sense of safety

#### 2) Psychological/Emotional Warning Signs

- Inability to maintain balance between empathy and objectivity
- Emotional withdrawal from colleagues, friends and family
- Feeling unappreciated, alienated, and isolated
- Marked or increased countertransference issues with certain participants
- Depression
- Lower frustration tolerance

#### 3) Physical Warning Signs

- Lack of energy or chronic fatigue
- Increased somatic complaints (stomach aches, headaches, back pain, etc.)
- Muscle tension
- Palpitations and/or hypervigilance



#### 4) Behavioral Warning Signs

- Impairment in day-to-day functioning including missed or cancelled appointments
- Frequent problems with punctuality
- Increased absenteeism from work
- Difficulty sleeping (insomnia or hypersomnia)
- Increased isolation

Compassion fatigue is also considered a form of *secondary traumatic stress* and *vicarious trauma*. Researchers coined these terms after recognizing that individuals in helping professions were often affected profoundly by their indirect exposure to trauma. They can include preoccupation with absorbing trauma and emotional stresses of others. Symptoms of compassion fatigue are similar to those of burnout, but the onset is faster with a better opportunity to recover. Compassion fatigue cannot simply be dismissed as it may eventually lead to burnout.

Burnout is generally subtle, gradual and can lead the Life Coach to believe they are not meant for or capable of this type of work. Burnout can drastically inhibit one's ability to coach participants, can actually damage the participant/peer relationship, and in severe cases can cause the Life Coach to leave the field. The work of the Life Coach requires a great deal of emotional investment. Therefore, it is important to bring the mind and body back to a neutral, calm and restful place. Life Coaches are at high risk for burnout when they are not able to maintain a balance between the identity of a "helper" and the identity of being "human". Life Coaches must remember that they are "human helpers". They must address the "human" aspect as priority in their lives and in their own recovery. Neglecting to engage in self-care will lead to burnout.

Life Coaches cannot expect themselves to give to participants if their emotional and psychological states leave them with nothing to actually give. It is easy to become emotionally “bankrupt” if the Life Coach does not develop and utilize techniques for stress management, time management, leisure, relaxation, and personal renewal. It is vital that Life Coaches are able to quickly recognize symptoms of burnout. Warning signs for burnout are similar to compassion fatigue and may also include having the inability to separate oneself from work; having the inability to enjoy leisure or free time and instead spending that time doing, or thinking about, work. Burnout generally occurs in several stages:

- 1) Enthusiasm - any of various forms of extreme devotion, usually associated with intense emotionalism and tendency to overly identify with participants
- 2) Stagnation - a failure to develop, progress, or advance including diminishment of expectations; personal discontent begins to surface
- 3) Frustration - a feeling of dissatisfaction, often accompanied by anxiety or depression, resulting from unfulfilled needs or unresolved problems
- 4) Apathy - absence or suppression of passion, emotion, or excitement; lack of interest in or concern for things that others find moving or exciting. This is characterized by listlessness or depression.

Compassion fatigue and burnout will hinder professional capacities if not addressed. There are many ways to prevent and possibly counteract compassion fatigue and burnout:

- ❖ Build and use a strong support network. Make time to meet with them on a regular basis.
- ❖ Request a debriefing from the Program Director after a critical event if needed.
- ❖ Find healthy ways to decompress. Put into practice the Emotion Regulation Skills taught to participants as their Life Coach.
- ❖ Reduce trauma inputs. Be aware of the amount of traumatic or triggering material absorbed while watching the news, television shows, movies or reading.
- ❖ Dedicate a specific time of each day to avoid engaging in helping-related work and instead, focus on leisure.
- ❖ Respect personal boundaries and limitations by learning to say “no” when considering starting a new article, book chapter or taking on extra responsibilities if not in a position to effectively and responsibly do so at the present time.
- ❖ Routinely assess personal state of well-being.
- ❖ Keep all supervision appointments and receive supervision regularly, discussing concerns. Here, colleagues, supervisors and mentors can shed light on the situation and provide additional perspectives.
- ❖ Receive individual counseling when needed in order to manage any difficult feelings that are being experienced.
- ❖ Engage in enjoyable activities that relieve stress.

- ❖ Balance work with other activities that provide opportunities for growth.
- ❖ Arrive to work on time and leave on time.
- ❖ Maintain healthy boundaries, focus on and maintain a whole health approach to personal recovery.

Practicing these and other self-care strategies will help the Life Coach personally and professionally. Without them, the Life Coach is unable to perform their essential responsibility of modeling recovery to each participant.

## **Transference and Countertransference**

Within a coaching relationship, unchecked transference can hinder the ability to hold positive regard and a non-judgmental position. Research has found it is often the cause of the deterioration of a coaching relationship.

Transference and countertransference are two related psychological processes. Transference occurs all the time in everyday interactions and is where Coaches may be reminded of someone in the behavior of others or where previous memories are triggered. Countertransference is a specific reaction by the Life Coach to the Participant's transference. Here are some examples to help illustrate:

### **Transference**

- I have the strongest sense at this moment that my boss is just like my beloved father.
- I experience the same emotions towards a team colleague that I felt towards my brother, with whom I competed.
- My current work situation feels just like a traumatic period at school in my teenage years.

### **Countertransference**

- Having longer meetings than is useful to the participant
- Never challenging the participant for fear of losing their approval
- Avoiding confrontation out of their own fear of anger
- Unconsciously using the participant's dependency to feel powerful
- Fulfilling their needs for intimacy
- Giving unnecessary advice out of a need to be an authority
- Overvaluing the participant's progress for your own success

The focus for most of the literature on transference and countertransference in mentoring and coaching is on identification that transference and countertransference is occurring, rather than on methods of managing it.

There are practical ways to help manage transference and countertransference. From a review of the literature it is clear there are a number of ways to more actively attend to these processes, which increases the life coach's choice about how or when to manage them. The factors that help manage countertransference in coaching are: empathy, self-insight, conceptual ability, high Life Coach self-integration (i.e. the less unresolved inner conflicts the Life Coach has) and low Life Coach anxiety.

Three practical steps Life Coaches might take to attend to transference and countertransference would be:

1) Increase your own awareness of when it is occurring.

- Ensure you are aware of own countertransference.
- Attend to participant transference patterns from the start.
- Notice resistance to coaching.
- Pick up on cues that may be defenses.
- Follow anxieties, then spot feelings and wishes beneath those anxieties.

2) Reflect

- Self-reflection, the development of the inner supervisor and coaching supervision all increase life coach self-insight, resolve inner conflicts and reduce coach anxiety. Additionally, research shows supervision in particular is an important method in increasing awareness of the Life Coach. In psychotherapy, the therapist must have worked on their own psychological history in order to be clear what their own response is and what is their participant's.

3) Develop 'in the moment' techniques

- If noticed during meetings with a Participant, use centering techniques, such as mindful breathing to reduce the likelihood of countertransference occurring.

## **Self-Disclosure**

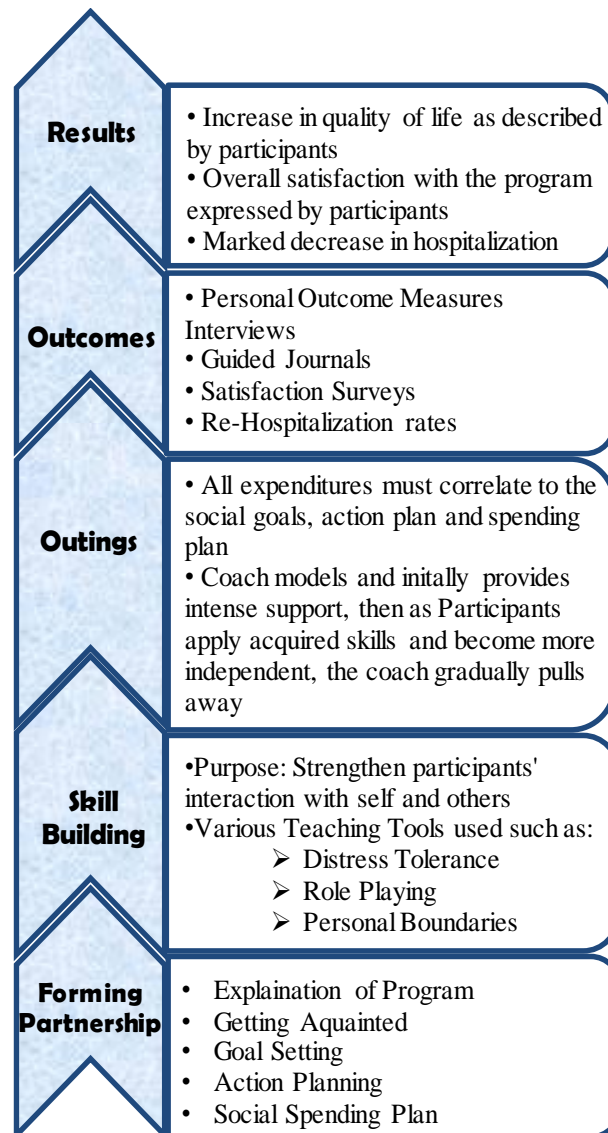
With appropriate boundaries in place, the value of experiential knowledge is manifested through disclosure. Experiential knowledge refers to the knowledge base of the Life Coach, which is derived from actual life experience. Self-disclosure builds trust and credibility. There may be challenges posed to the relationship by disclosure. It creates a form of intimacy that could defy boundaries if the Life Coach is not careful.

Disclosure may also indirectly communicate a challenge of “You can do it, too”. Life Coaches must take time to orient the Participant to disclosure. Sharing personal stories must be timely, focused and selective to the Participant’s comfort, situation and needs. Self-disclosure is used only to inspire, not vent. Life Coaches and Peer Supporters are valued for their skills and experience in recovery and wellness. The power of self-disclosure lies in vulnerability, empathy, authenticity and honesty. Disclosure supports solidarity, but at the same time risks shifting focus from the Participant and can elicit role reversal.

# Conclusion

## Summary

The It's My Life Program is designed to help individuals with SMI to build networks of friends and intimate relationships, thus creating a strong social support system. This in turn helps the Participant to become an active member of the community and feel less isolated which also helps to increase self-esteem and self-worth, improving overall social functioning. The increase of overall physical health has been shown to decrease the need for hospitalization and help to avoid premature death. Savings in the reduction of emergency services, increased overall health, and lowered re-hospitalization rates make this an affordable service for managed care and state funded programs. It is highly relevant to any whole health approach to behavioral health.





## Quotes from Participants

**"It brings tears to my eyes when I think about this program. It was a revival. Going to Starbucks for the first time was a big treat."**

*"I am more confident to speak with people that I don't know. I'll introduce myself and talk with them. I used to wait for people to come to me. Now I start the conversation."*

*"The program helps me to be a little more confident. The friendships I have now are firmer since starting this program."*

*"The program has taught me that I deserve to be loved."*

*"I get out more than I used to. The program helped a lot for me to be involved in the community."*

## Quotes from Participants

"This was a really nice program. I enjoyed the money to buy beads to make jewelry for my friend. It is nice to have money to spend on my friends."

"I am grateful for the friendship of the coaches, their patience, and the financial support."

"A day without people is a day without growth. This program helps me to grow."

"This is better than therapy. Confucius said, 'I do, therefore, I understand.' This was a program of doing and understanding. I have learned about small talk and am now a bit more assertive."

"The program has been eye opening, confidence building, and fun."

## Quotes from Participants

"I am very encouraged by all at MHA. It has a positive impact on my life. It gives me hope. This is one of the best things that has ever happened to me. I will continue to move forward."

"This program is the best. I am truly thankful for the staff. I am much stronger when I face challenges."

"It has helped me to reach out and connect with other people. I love the program; it is like a dream come true. I am learning new things about myself and others."

*"It's a wonderful way to get out of isolation and start meeting new friends."*

*"I have learned that people can be friendly and good willing."*

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## **Appendix**

(Includes handouts and worksheets used during the program)