



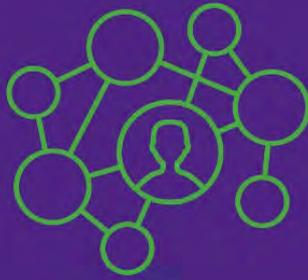
Community Engagement Education Package

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

Co-design - Stage 1

Sydney: Redfern Oval Community Room

Thursday 6th December 2018



Community Engagement Education Package

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

CO-DESIGN WORKING GROUP: PARTICIPANT HANDOUT

9:00 to 9:20 am Welcome & introductions

Aim of today: To have fun and explore recovery and the challenges and needs of people with mental health conditions when connecting with community and mainstream services?

9:20 – 10:00 am Exploring the work of this group

- What is recovery?
- What are community and mainstream services?

Community services are activities not supplied by government groups, available to everyone in the community, e.g., social, study and sporting interests ... a drumming group!

Mainstream services are non-disability specific services and organisations, e.g., health, mental health, education, employment, justice, housing and child protection services.

- Why are we exploring this?

Because people with mental health conditions should participate in and benefit from the same community activities as everyone else.

Question: “Do you attend and enjoy the same community activities as everyone else”?

Because people with mental health conditions should connect to their communities and have the information they need to make decisions.

Question: “Do you have all the information you need to make decisions”?

10:00 – 10:30 am What are the questions we will explore?

1. What challenges have you had when connecting with community and mainstream services?
2. What needs of do you have when connecting with community and mainstream services?
3. How do you connect and have the information you need to make decisions?
4. How can you benefit from the same community activities as everyone else?

10:30 - 10:45 am Break

10:45 am - 12:15 pm Exploring more questions

12:15 - 12:30 pm Another break

12:30 – 1:00 pm Close & next steps

1:00 PM to 1:30 PM Lunch

Date and Location

Thursday 6th December 2018

9:00am – 2:00pm

Redfern Oval Community Room

Redfern

Present

Tina Smith – MHCC

Yvette Segal – MHCC

Rebecca Lewis – MHCC

Fumme Amogbonjaye – New Horizons

Sean – Participant

Bridget – Participant

Jenny – Participant

Larry – Participant

Nicole – Participant

Introduction

Tina opened the day and welcomed participants, all participants introduced themselves and gave some information about themselves. Everybody then participated in a drumming exercise to help relax everyone and so create a feeling of social interaction and be read to work as a group.

What is Recovery?

Tina spoke a little bit about Recovery.

For many people, mental health ‘recovery’ can be confused with the word ‘cured’. If you are in recovery you are all better now, right? Wrong.

Both treatment and support are important for recovery. Recovery is possible through supports that give people hope and help them to establish valued social role/s and self-management skills to take control of life decisions. Social supports and self-direction help people feel belonging and wellbeing.

Participants were then given a selection of images and asked to select a picture that represents recovery to them, the group then talked about the image they chose and what Recovery means to them.

What does Recovery mean to you?

- Maintenance, not a one-off thing
- Engaging with the word and life
- Spending time with family
- Music – Own world of music
- Spirituality
- Taking time out, reflecting
- Outwardly Focused
- Arts and Craft
- Self-nurturing



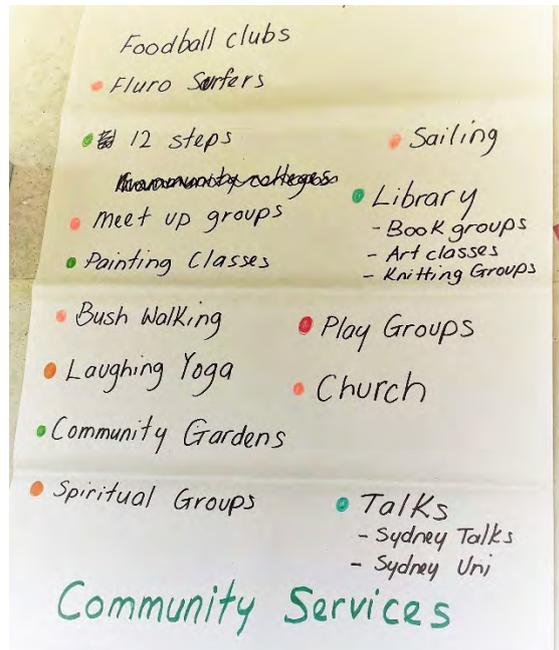
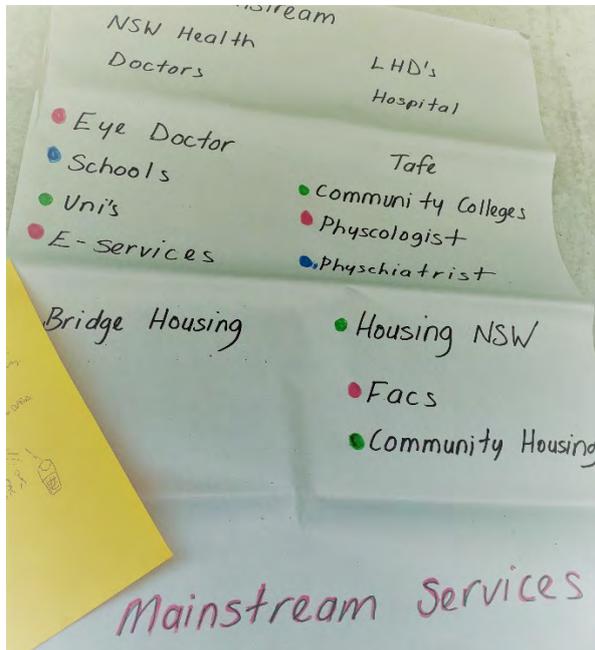
Introducing Notions of Community and Mainstream Services

The key questions the CEEP project will explore through co-design is “*What are the challenges and needs of people with mental health conditions when connecting with community and mainstream services”?*”

Tina briefly explained the difference between Community and Mainstream services.

Community services are activities not supplied by government groups, available to everyone in the community, e.g., social, study and sporting interests. Mainstream services are non-disability specific services and organisations, e.g., health, mental health, education, employment, justice, housing and child protection services.

Participants were asked to list examples of both Mainstream and Community Services.

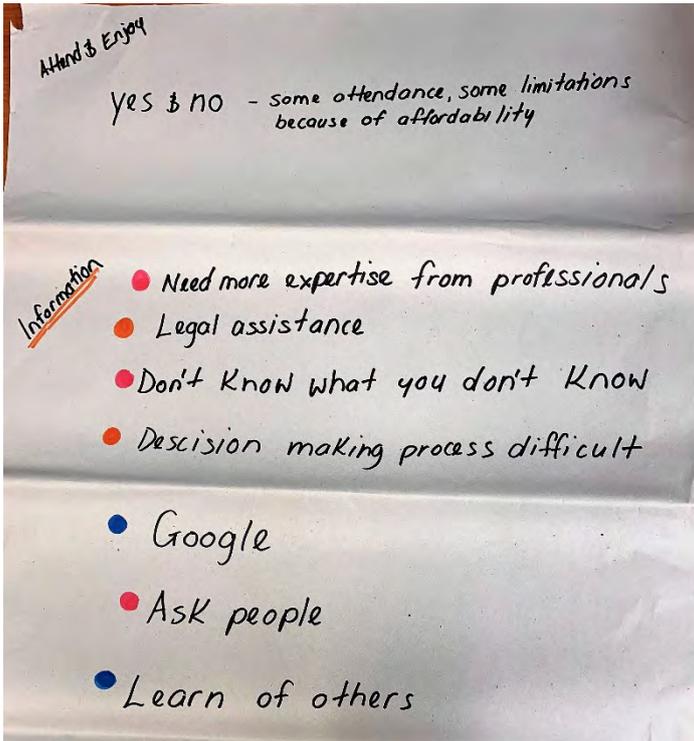
Examples of Community Services		Examples of Mainstream Services	
<ul style="list-style-type: none"> Football clubs Fluro surfers 12 step programs Painting Classes Church Laughing Yoga Spiritual Groups Library <ul style="list-style-type: none"> Book Groups Art Classes Knitting Groups 	<ul style="list-style-type: none"> Sailing clubs Orienteering Meet up groups Bush Walking Groups Play Group Meditation Community Gardens Talks <ul style="list-style-type: none"> Sydney Talks Sydney Uni 	<ul style="list-style-type: none"> NSW Health LHD's Schools Universities E-Services (online) Housing NSW FACS Community Housing 	<ul style="list-style-type: none"> Hospitals TAFE Community Colleges Phycologists Physiatrists Bridge Housing
 <p>Handwritten notes for Community Services, listing items like Football clubs, Fluro surfers, 12 steps, Sailing, Library (with sub-items: Book groups, Art classes, Knitting Groups), Meet up groups, Painting Classes, Bush Walking, Play Groups, Laughing Yoga, Church, Community Gardens, Spiritual Groups, and Talks (with sub-items: Sydney Talks, Sydney Uni). The title 'Community Services' is written in green at the bottom.</p>		 <p>Handwritten notes for Mainstream Services, listing items like NSW Health, Doctors, LHD's, Hospital, Eye Doctor, Schools, Uni's, E-services, Tafe, Community Colleges, Psychologist, Psychiatrist, Bridge Housing, Housing NSW, Facs, and Community Housing. The title 'Mainstream Services' is written in red at the bottom.</p>	

Why are we exploring this?

- Because people with mental health conditions should participate in and benefit from the same community activities as everyone else (ie, people with MHC participate in and benefit from the same community activities as everyone else).
- Because people with mental health conditions should connect to their communities and have the information they need to make decisions (ie, people with MHC are connected and have the information they need to make decisions).

The participants were asked if the following questions:

1. Do you attend and enjoy the same community activities as everyone else?
2. Do you have all the information you need to make decisions”?

Do you attend and enjoy the same community activities as everyone else?
<ul style="list-style-type: none"> • Yes and no – some attendance, some limitations because of affordability
Do you have all the information you need to make decisions?
<ul style="list-style-type: none"> • Need more expertise from professionals • Legal assistance • Don't know what you don't know • Decision making process difficult – Supported decision making process • Google • Ask People • Learn off others • Not aware they have unmet needs


Co-Design Questions

Participants were asked the following four questions:

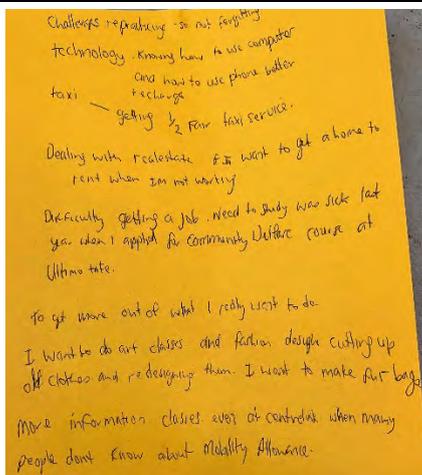
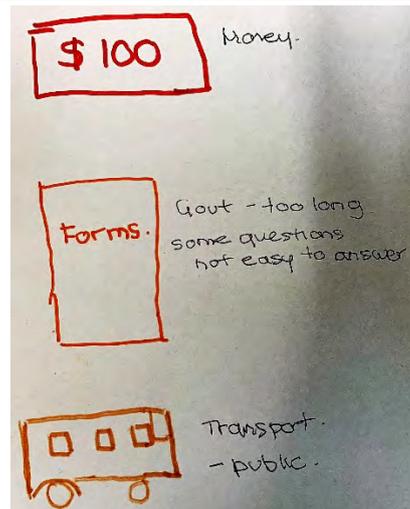
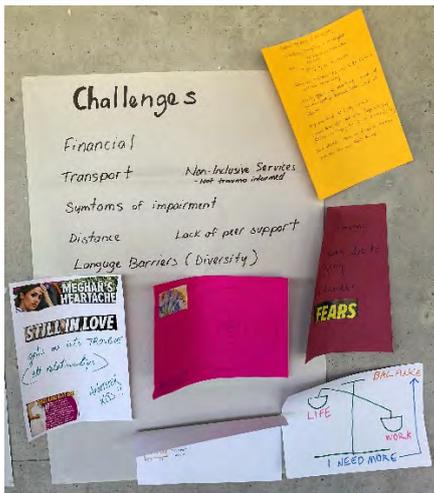
1. What challenges have you had when connecting with community and mainstream services?
2. What needs do you have when connecting with community and mainstream services?
3. How do you connect and have the information you need to make decisions?
4. How can you benefit from the same community activities as everyone else?

What challenges have you had when connecting with community and mainstream services?

- Financial
- Non-inclusive services (not trauma informed)
- Distance

- Transport
- Symptoms of impairment (lack of motivation, anxiety)
- Language barriers
- Lack of peer support

Comments: Barriers around diversity, especially around trauma and people with mental health issues.

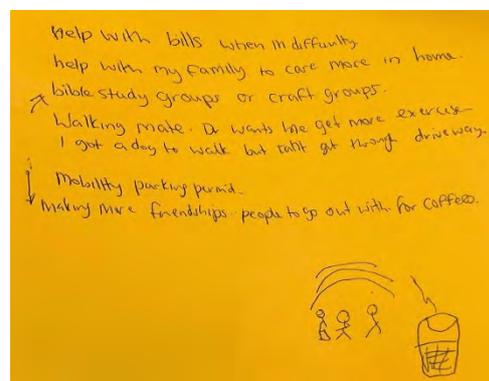
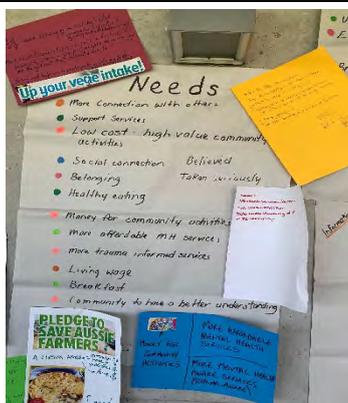


What needs do you have when connecting with community and mainstream services?

- More connection with others
- Support services
- Low cost – high personal value community activities
- Sense of belonging and responsibility within that community
- Healthy eating
- More affordable mental health services
- Breakfast

- Social connection
- To be believed
- To be taken seriously
- Gentle entry to activities
- Stepped approach
- Money for community activities
- More trauma informed services
- Living wage
- Community to have a better understanding

Comments: Need to feel a sense of belonging, needs to be low cost, high value. Services need to be inclusive of all physical health needs.



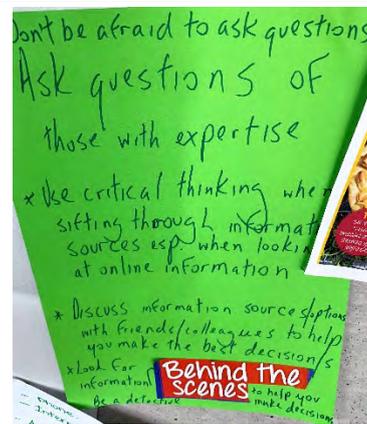
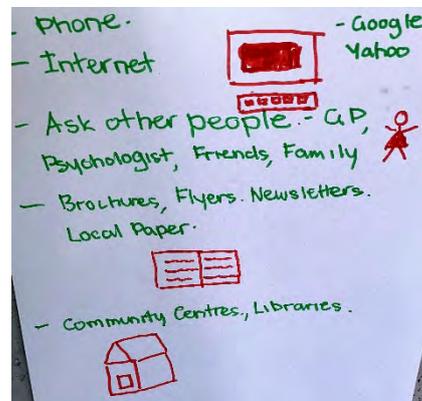
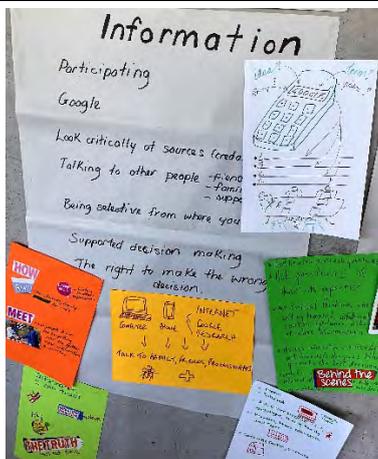
Tina Summary of Needs

- Inclusive services and help to get people to them
- Low cost/high value services
- Include physical health needs in services
- Supported decision making
- Connectedness
- “gentle entry” into community (step by step approach)

How do you connect and have the information you need to make decisions?

- Participating in events like this
- When events come out into the community
- Look critically at sources (credibility)
- Talking to other people (friends, family, support workers, colleagues, medical professionals)
- Being selective of where you get your information
- Supported decision making
- The right to make the wrong decision
- Need legal (other expert) advice
- Google
- Community notice board
- Local paper

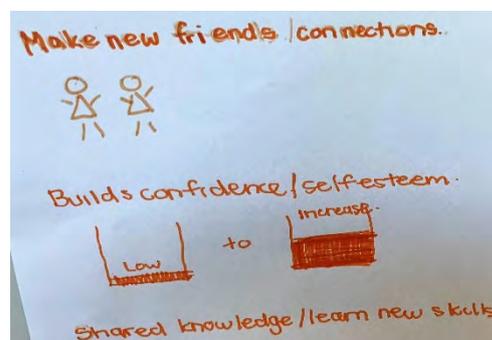
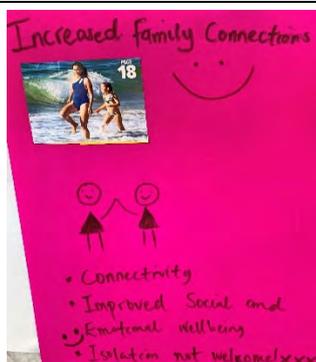
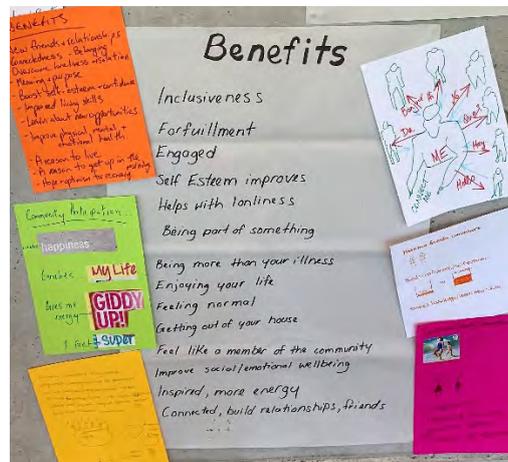
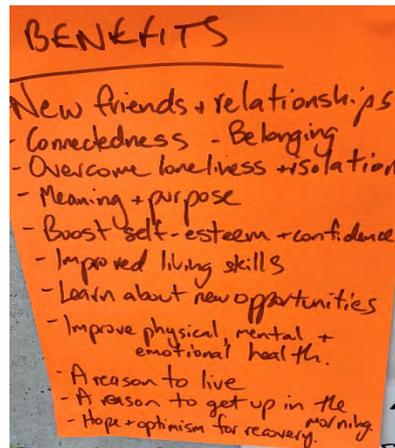
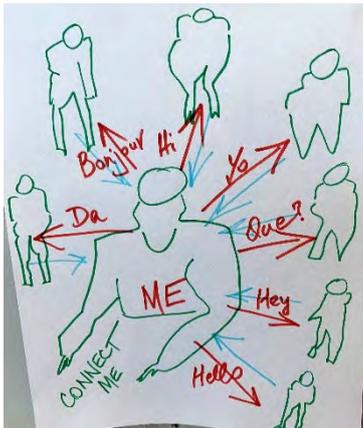
Comments: Participation, getting out and amongst it. Supported decision making.



How can you benefit from the same community activities as everyone else?

- Inclusiveness
- Fulfilment
- Engaged
- Being more than our illness/distress
- Feeling normal
- Improve social/ emotional wellbeing
- Inspired, more energy
- Reason to get up in the morning
- Self-esteem and confidence improve
- Helps with loneliness
- Being part of something
- Enjoying your life
- Getting out of the house
- Feeling like a member of the community
- Connected, build relationships, friends

Comments: A feeling of inclusiveness and connectedness.



Feedback from the day

Feedback comments from the day

- Thought provoking, got me thinking.”
- “I thought I did not have much to offer but realised I did when I thought about my past experience”
- “I was a little bit frustrated around the wording of questions” language was unclear to me
- “It was helpful coming out and hearing what others have to say, helped to express how I feel”
- “I loved the craft materials, great way to express with colours and graphics”
- I learned from other people and had fun with drawing”
- “I felt a bit directed to use certain language”
- “Happy to see MHCC take co-production seriously”
- “Ample opportunity to express myself”
- “Very Interesting not boring”

Tina asked - Was your voice heard?

- The attachment said co-design – This turned one participant off, but came anyway
- One person felt he was pushed to use certain language instead of his own words
- One person felt their words were modified for the posters. Thinks we should use each person’s own words.
- YES I was heard and liked the ‘co-production’ and ‘was listened to’

Conclusion

The responses from the initial Sydney co-design group will be compared to the responses from the Dubbo co-design group. The first of three promotional and consultative/co-design webcasts will be held in February??, this will allow additional people living with a mental health condition to respond to the four key questions. The Advisory Group will be consulted on the findings of both of the face to face co-design groups and the webcast and any resulting feedback from Advisory Group members will be taking into consideration. The next stage will be to build the framework for the CEEP package.