

Peer Support Whole Health & Resiliency, 12-Week Facilitator Manual for UIC Study (based on WHAM)

Weekly Group & Individual Meetings

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The contents of this manual were developed under a grant with funding from the National Institute on Disability, Independent Living, and Rehabilitation Research, and from the Center for Mental Health Services Substance Abuse and Mental Health Services Administration, United States Department of Health and Human Services (NIDILRR grant numbers #90RT5012 and #90RT5038). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this manual do not necessarily represent the policy of NIDILRR, ACL, HHS, or of SAMHSA, and you should not assume endorsement by the Federal Government.

Peer Support Whole Health Facilitator Manual for UIC Study
ACG & UIC, 2015

Introduction

Welcome to Peer Support Whole Health and Resiliency

This manual provides detailed instructions for a Peer Support Whole Health and Resiliency (which we call the Whole Health Program) support group series and simultaneous one-on-one meetings with participants. It is used to help people set, get, and keep a whole health goal. To meet their health goal, UIC Study participants will join a weekly support group and have individual weekly meetings with a Certified Peer Specialist trained in the Whole Health Program.

This manual has been adapted from the *Participant Training Manual* developed by the Appalachian Consulting Group (ACG, 2010) as part of a National Association of State Mental Health Program Directors Technology Transfer Initiative grant. Some of the tools are adapted from the evidence-based practice, *Health and Recovery Peer Project (HARP)* (Druss, Zhao, von Esenwein, et al., 2010), based on the *Chronic Disease Self-Management Program* developed at Stanford University (Lorig, Ritter, Stewart, et al., 2001). Also drawn from is the *Relaxation Response* from the Benson-Henry Institute for Mind-Body Medicine at Massachusetts General Hospital (Casey, Chang, Huddleston, et al., 2009), the evidence-based practice, *Motivational Interviewing* (http://www.motivationalinterview.org/quick_links/about_mi.html), and the *Whole Health Action Management Peer Support Training Participant Guide* (SAMHSA-HRSA Center for Integrated Solutions, 2012).

The approach in this manual is a strengths-based, person-centered process that, along with peer support, helps people in mental health recovery learn to self-manage their own physical health while developing resiliency to illness.

The Whole Health Program is a person-centered planning process that:

- 1) Views a person's lifestyle comprehensively;
- 2) Is strengths-based and focuses on a person's assets, interests, and natural supports;
- 3) Stresses the creation of new habits and disciplines to support physical health and resiliency;
- 4) Provides both group and one-on-one peer support to promote self-directed whole health.

Specifically, by participating in the Whole Health Program, people will:

1. Learn the 10 domains of whole health, and how each one has an impact on their mental health, substance dependence (as relevant), and overall health and resiliency
2. Be trained in the Five Keys to Success
3. Set a physical health goal
4. Strive for and meet that health goal (or revise goals, as personally needed)
5. Monitor their health goal and maintain motivation
6. Receive peer support directly targeting their health goal(s) in a group and individual format
7. Learn more about recovery and whole health as part of the weekly peer support process

The Whole Health Program lasts for 12 weeks, with one group and one individual session each week. The first three **group** sessions are 2.5 hours in duration, allowing plenty of time for education about and planning for health goals. **Group** sessions 4 to 12 are shorter in duration, allotting 90 minutes for giving and receiving peer support for weekly action planning.

The first three **individual** sessions last for at least 45 minutes, allowing plenty of time for personalized education, planning, and support. **Individual** sessions during weeks 4 to 11 are at least 15 minutes in length, although they can go up to 45 minutes depending on participants' individual needs.

The manual is structured such that each group session is described, followed by the content and activities to be covered that week in the subsequent individual meeting. In other words, the content for the first group session is followed directly by the content for the first individual meeting, the content for the second group session is followed directly by the content for the second individual meeting, and so on. During weeks 4 to 11, each session features a special health and/or recovery topic. These topics are found at the end of this manual, listed by the week in which they are to be presented.

Note, however, that for some participants, the individual meeting may precede the group meeting. Some people will require your help in preparing for the group meeting **beforehand**, while others will need check-ins with you **after** the group meeting. You will determine what works best for each person on an individual basis.

Outside of this study, Whole Health Program sessions based on the *Participant Training Manual* (ACG, 2010) are meant to be flexible and easily adapted to the needs and preferences of particular facilitators and participants. However, the intervention described in this manual is being tested in a randomized controlled trial study. Because of this, Whole Health facilitators must closely follow the protocol described in this manual without making any changes. To assist in this process, specific guidelines and tips are given in the following sections to help facilitators prepare for and deliver each group session and individual meeting to fidelity standards. Fidelity is discussed more in the next section.

To use this manual, a person must be a Certified Peer Specialist who also is trained and certified to deliver the Whole Health Program. This means s/he has attended a Whole Health Program facilitator training, sponsored by the Appalachian Consulting Group or one of its certified trainers. The person also must have attended UIC-sponsored training on the intervention version of the Whole Health Program and the research project. This model is designed to be delivered by two trained facilitators who share responsibility for presenting, leading discussions, and related tasks. Others can provide assistance and support as needed.

In your role as facilitator for the UIC Study and to meet fidelity standards, **you are required to read this entire manual before facilitating your first group**. Please follow all guidelines and tips to ensure fidelity when delivering the Whole Health Program.

Enjoy this special experience as you help your peers on their journey to health!

Peer Support Whole Health and Resiliency Foundational Values

The Whole Health Program has these foundational values:

1. People cannot be forced or coerced to change their unhealthy lifestyle habits. For positive health changes to occur, people need to be ready and willing. Therefore, participation in the Whole Health Program must be voluntary.
2. Participants also must acknowledge that they have health issues and that they are beginning to consider how best to deal with them. Just as forcing people to get healthy does not work, neither does working with people who are not ready to acknowledge or address their personal health issues.
3. People are more likely to create a healthier lifestyle when the focus is on their interests, strengths, supports, and what they see as possible in their lives. Thus, the Whole Health Program focuses on what people want to create in their lives, not on what they need to change or stop doing. Participants will use the Whole Health Program to create new habits or disciplines on a weekly basis, while monitoring how well they do and receiving support from their peers.
4. There are Five Keys to Success on which the Whole Health Program is built. These are:
 - A. A Person-Centered Goal, created using the IMPACT process and written into the treatment plan;
 - B. A Weekly Action Plan using a Confidence Scale;
 - C. A Daily/Weekly Personal Log;
 - D. One-on-One Peer Support; and
 - E. A Weekly Peer Support Whole Health & Resiliency Group.

Facilitating the Whole Health Intervention*

Getting Started

Be prepared in advance of each session. Get to know the intervention manual well and follow it exactly as presented, with the handouts provided. Doing this is essential to maintain fidelity to the intervention that is being tested for research purposes. Be sure you also understand the purpose and procedures of the research study, and your role in it. Feel free to contact the local project coordinator any time you have questions about the intervention or the research.

Give yourself adequate time to prepare for each session. Read it in advance and be sure you have the materials needed for that day. To help meet fidelity, discuss which facilitator will handle each section of each session in advance. You may want to copy and enlarge the instructions for each session, so you can easily refer to them during the session.

In the manual, instructions and notes that are just for you are written in smaller font or type face, **like this**. Information you are to read or share directly with the participants instead is written in a larger font, **like this**.

You do not need to read the text word-for-word. For each section you're asked to read/share, just be sure to cover the main points. Fidelity here means not adding new or different material (or leaving out anything) in what you're instructed to share. It does not mean that you must read everything word for word. Stick to all of the main points and activities outlined in this manual, and you will meet fidelity.

When planning to set a *physical health goal*, each health domain includes questions that help a person explore that issue in his or her own life. You will guide people to write answers to all of the questions, and then, share their answers with the group on a voluntary basis. You also will guide people to work in pairs sharing their answers with each other, in order to simulate/practice giving and receiving peer support. It is important that each person individually describes his or her own answer to the questions in each domain, since this information will guide them in choosing and monitoring a personal health goal. If someone has literacy or disability issues that prevent them from writing, this will be accommodated.

Self-Care

Consider in advance ways that you will take care of yourself while facilitating this intervention. Besides completing and discussing the Quality Assurance Statement (discussed below), we suggest attention to these issues.

*Pages 6-11 are adapted from: Copeland (2010). *Mental Health Recovery and Wellness Recovery Action Planning Research Intervention Manual: An 8-Session Workshop Series*. © 2010, Mary Ellen Copeland; UIC Center on Mental Health Services Research & Policy.

- Know your fears. Fears can be instructive. Get to know them, think of strategies to weaken their hold on you, and then, put them behind you. Keep your focus on facilitating engaging, inspiring, and informative group and individual sessions. Your mind cannot simultaneously focus on your fears and your goals. You must choose one – focus on your goals.
- Use the Whole Health Program in your own life to reach and maintain health goals.
- Take care of your own physical and emotional well-being as much as possible. Make sure you get adequate rest and nutrition. Regularly use the *Relaxation Response* exercise described in this manual, as it can have a calming, centering effect.
- Know your personal “buttons” or things that cause you to react negatively. Your personal “buttons” may be pushed by problems that arise in your group or individual sessions (for example, someone challenges your abilities or appears persistently disinterested in what you’re saying). You may be concerned that you will respond defensively. Get to know your buttons and practice responding in ways that are helpful to others – being respectful even when you don’t feel like it. Many times, people engage in these behaviors because they are scared or insecure, so it helps to learn ways not to feel personally attacked or threatened.
- Use break times wisely. If you feel tired, stressed, or insecure during group or individual sessions, take some time in private during the break to re-group and re-center yourself. Use deep breathing, stretching exercises, or affirmations.

Session Logistics

For the first 3 weeks, each group session is 2.5 hours, including two 10-minute breaks. For the first 3 weeks, each individual session is 45 minutes. Group sessions during weeks 4 to 12 are generally 60 minutes (but depending on the needs of your participants, may take up to 90 minutes), including one 10-minute break. Each individual session during weeks 4 to 11 is at least 15 minutes, but can go up to 45 minutes as needs dictate.

All sessions are a combination of welcoming activities, introduction to the activities for that day, and group or individual discussion and activities. Please show respect for your participants and their lives by starting and ending all sessions on time.

It is best for participants to bring their binders containing their Action Plans and Logs home each week, so they can work on and use them. If participants forget to bring their binders to a session, they can still participate by filling out the appropriate forms and putting them in their binders later.

As you’ve been trained, sharing your own experiences in managing your whole health is a critical aspect of peer support. However, don’t speak only from your own experience, but also mention ideas you have heard from others. If you speak too much from your own experience,

your audience will lose interest. Ask your audience for examples and learn new things from them. If someone asks a question you can't answer, ask the group for ideas.

If participants need it, offer to provide extra assistance during the breaks, and before or after sessions. Remember, you are there to serve the whole group. Avoid persistently deferring to the needs of one person.

Fidelity will be monitored each week with a local project coordinator, using the Whole Health Program Intervention Fidelity Scale. Fidelity means that the Whole Health Program facilitators adhere to the guidelines and instructions in this manual when facilitating both group and individual sessions.

For purposes of the research, attendance will be taken each week at both the weekly support group and during individual meetings. The UIC study team will provide attendance sheets with each person's name and a place to check whether he or she was present or absent. Taking attendance is a very important study task. It is the way the investigators will determine how much of the Whole Health Program people got and whether/how this has an impact on their health. It also helps determine who needs review of any missed material during their weekly individual meeting.

When delivering the Whole Health Program for the UIC study, participants will be offered a travel stipend at the end of each group and individual session. This is an important study task. You will work directly with the agencies involved with our study to manage the travel stipends and receipts. It is important to obtain the needed stipends and receipts in advance each week, in the event that agency staff are not available on the day of the sessions to distribute funds to you. You will receive additional guidance/training on how to do this.

You may have participants in the group with special needs. For instance, if a person is blind or has difficulty reading and writing, you will need to have tape recorders and tapes available so they can tape record their plans. As you and your co-facilitator become aware of special needs, meet with the person who has the need to determine what would work best for him/her, and then, do your best to provide it. The local project coordinator and the study team at UIC will help you with this as needed.

Be alert for possible changes in focus to topics that might get you bogged down in controversy. For example, these sessions are not the place to discuss whether mental health difficulties are caused by genetics or the environment, not the place to critique various medications and treatments, and not the place to debate the merits or failures of specific health care providers and programs. If these types of diversions occur, gently explain that you need to keep the focus of this group on personal health planning.

Do not advocate for or against specific treatment options, such as specific medications or various alternative therapies. This can raise liability issues. If people have questions about treatment or health care options, direct them to resources that will help them get more information, so they can make informed choices on their own behalf.

Focus on participants' strengths and away from deficits they feel they have or that have been imposed upon them by others. Take good care and hold yourself in unconditional high regard, too. Remember, you do not have to be perfect to be of help to others. After each group session, honor yourself for being there to facilitate and for the things you did well. Resolve to work on areas you or the participants believe need improvement, without undue self-judgment or criticism.

Quality Control when Delivering the Whole Health Intervention

In order to co-facilitate each Whole Health session, you must be feeling well. You must not be experiencing health or mental health problems/crises that would interfere with your leadership and ability to present, or that would adversely affect the participants. Like anyone who facilitates a Whole Health Program session, you must do the following:

1. Be working on your own weekly health goal and log.
2. Fill out the "Quality Assurance Statement" found on the next page. Keep a copy for yourself, and give copies to your co-facilitator, your closest supporters, the local coordinator for this project, and the intervention oversight staff at UIC.
3. In a given week, if you feel any wellness issues or other problems are going to interfere with your ability to lead a high quality group or individual session— or one or more of the above-mentioned people tell you that you are not well enough – ask your co-facilitator or the local coordinator to contact the back-up facilitator for your area to take your place until you are feeling well enough to co-lead again.
4. If you notice that your co-facilitator is not well enough to lead group or individual sessions – and shows the signs listed on his/her Quality Assurance Statement – you must let that person know s/he cannot co-facilitate the class until you both agree s/he is better. If this is too difficult to do, please contact the local project coordinator for support and assistance. One of you will arrange with the back-up facilitator to co-lead for as long as is needed.
5. It is best to agree in advance that none of the facilitators will compromise this important study by being concerned about hurting someone's feelings when s/he isn't well. The facilitators' primary responsibilities are to deliver quality sessions to participants and to ensure the integrity of the Whole Health Program and the research study. As co-facilitators, you need to openly discuss in advance what to do if one of you isn't able to see that his/her issues are interfering with the ability to co-lead sessions.

Remember, it doesn't help the person who is having warning signs or a crisis to ignore or downplay the situation. Also, since everyone struggles at some point, we ourselves need to be comfortable to both ask for and accept help when we need it.

QUALITY ASSURANCE STATEMENT

Fill out the following form. Give copies to your co-facilitator, closest supporters, the local coordinator for this project, and the selected research staff at the UIC Center. Everyone who receives copies of it agrees to keep this form confidential.

Name:

Date:

If I show the following signs/symptoms, I am not well enough to facilitate a Whole Health Program session. I will ask my co-facilitator to contact the back-up facilitator and the local coordinator. I will agree to stop facilitating Whole Health Program sessions when these signs occur.

Signs/Symptoms/Issues (please be specific):

If I have these signs but I won't stop facilitating, I want my supporters to help me stop by:

My co-facilitator and supporters will know I'm ready to co-lead classes again, when I:
(please list specific wellness signs):

Signature

Date

Materials Needed to Facilitate the Whole Health Program

The following materials will be needed for you to successfully facilitate the Whole Health Program. Make sure that you have all of them on hand before you begin the first session.

- Flip chart and markers (for Session 1)
- Participant binders
- Travel stipends (and possibly receipts, if required by the agency)
- Attendance logs
- Fidelity Assessment forms
- Name badges to be used for the first three sessions
- Extra paper, pencils, and forms
- List of participants' full contact information
- List of participants in both the experimental and control conditions of the study
- Small, healthy snacks and beverages for each group meeting
- Celebratory snacks and beverages for the Graduation Session
- Note cards (and postage) to help engage participants who miss sessions
- Any materials, equipment, and supplies that may be needed to provide for disabilities and unique learning styles (as described previously)

Session 1, Group Meeting

Introduction to the Program and the 10 Health Domains

Agenda

Welcome & Housekeeping	10 minutes
Why Focus on Our Physical Health?	5 minutes
Developing a Comfort & Safety Agreement	10 minutes
Overview of Person-Centered Planning Process	15 minutes
Overview of the Program	10 minutes
BREAK #1	10 minutes
The 10 Domains of a Healthy Life, 1-4 (including a 10-minute break)	85 minutes
Review & Closing	5 minutes

Class goals

This class has 6 goals:

1. Orient the participants to why a focus on their physical health is important;
2. Develop a *Comfort & Safety Agreement* to build trust among participants;
3. Describe the person-centered planning process used in the Whole Health Program;
4. Identify the purpose, elements, and process of the Whole Health Program;
5. Review the health problem/issue they identified when joining the study, as the context for their goals in this Program; and
6. Begin discussing the *10 Domains of a Healthy Life* and possible health goals in each area.

Class supplies

- Blank name badges
- Travel stipends
- Travel stipend receipts (if used, they will be retained for documentation purposes)
- Session 1 Attendance Log (for ease, one of the co-facilitators will check off who is in attendance by each person's name, rather than passing around the sheet)
- Participant Binders (you will receive these from the study's Local Project Coordinator)
- Small, healthy snacks and beverages

Note: Before class starts today, review pages 15-16 and prepare the initial *Comfort & Safety Agreement* as described on a large sheet of paper that you can post to the wall during class.

Welcome & Housekeeping

10 minutes

Begin by briefly introducing yourselves. Encourage participants to take a snack and beverage.

Now, share why you enjoy this work, and several of your special interests. Remind participants to turn off or put cell phones on vibrate.

Also let the participants know the following:

- Times and dates of the sessions for the next 12 weeks
- Breaks will be given during each session
- Location of washrooms
- Smoking regulations
- Emergency exit information
- Supporters -- people to whom participants can reach out if they're having a difficult time
- How to contact the facilitators if participants can't attend a session or if they need other information

To help participants get to know one another, ask each person to share his/her name and something s/he likes to do for enjoyment. Distribute name badges and ask each participant to write their first name only on the badge. Explain that badges will be worn to help people learn each other's names.

Next, share the following information with the group in a conversational manner. **Remember, you don't need to read this word-for-word (although you can if that's more comfortable at first). Simply share the main points in words that are comfortable for you.**

We want you to get the most out of the Whole Health Program. So, we need you to commit to attending all 12 of the group sessions and all 11 of the individual sessions. People who attend 9 or more group meetings and 9 or more individual meetings will receive a **Certificate of Graduation**. People who attend less than 9 of either group or individual meetings will receive a **Certificate of Attendance**.

If you have an emergency and cannot attend a session, we'll review what you missed during your next individual meeting. These make-up sessions also will count towards your 9 sessions to receive a Certificate of Graduation.

Attendance will be recorded for this reason and so that the researchers can track how many sessions each of you attends. The attendance information will be always kept confidential.

Everyone who participates fully in this class will receive \$10 a week to cover travel costs. A \$5 travel stipend will be given at the end of each group meeting and at the end of each individual session. You must attend the full meeting or session to receive the travel money.

***Note: if you are using receipts for the travel stipends, please explain that process to the group now.**

Review with the group the 6 class goals for today:

1. Talk about why a focus on physical health is important;
2. Develop a Comfort & Safety Agreement to build trust;
3. Learn the person-centered planning process used in the Whole Health Program;
4. Identify the purpose, elements, and process of the Whole Health Program;
5. Review the health problem/issue they identified when joining the study, as the context for their goals in this Program;
6. Begin discussing the 10 Domains of a Healthy Life and possible health goals in each area.

Why Focus on Our Physical Health?

5 minutes

Although participants were told about the Whole Health Program when they enrolled in the UIC study, it's important to give them an overview of the reasons you've come together as a group.

Start by offering the following information, **using your own words, but being sure not to add or delete any main points.**

As you remember from when you joined our study, you're part of a project that's studying how people set and meet health goals. We'll be meeting as a group for the next 12 weeks. You'll also meet every week one-on-one with a certified peer specialist to work on your physical health goal.

Each of you identified a health problem or issue you wanted to work on when you joined our study. Knowing what you want to work on will help you pick and stick to a goal in our class. What you choose to do to address your health issue is up to you. **But, you must be willing and able to work on a physical health goal while you're in this class.**

Some of you may be wondering why we're focused on your physical health. In most mental health centers, the focus is on your mental or emotional health. Why are we doing something different here?

Well, back in 2006, a national association put out an important report. It let the country know that people being served in the public mental health system are dying, on average, 25 years earlier than people in the general population. That means most people receiving public mental health services today are dying when they're in their 50s or 60s.

This was and is scary news for many of us! However, we also learned that these early deaths are mostly due to medical conditions that can either be prevented or well-managed with the right supports and services. Some of these medical conditions are heart disease, high blood pressure, and diabetes.

If you have any of these conditions, there's hope because they can be managed by having a healthier lifestyle. Also, if you have other medical conditions -- or if you just want to prevent yourself from getting sick -- we're here to help you create a healthier life.

It's important to know that most medical conditions are complicated by stress. The more stress we have, the harder it is to manage our medical conditions or lead a healthy life. Many people in public mental health systems have a lot of stress from dealing with emotional difficulties, money problems, stigma, unemployment, and other issues. While you're in this class, you'll learn proven skills for reducing stress, so you can lead a healthier and happier life.

Research shows that people are more likely to meet their health goals when they work with other people who have the same illnesses and issues. Self-help is used to manage all kinds of illnesses, and we will help you benefit from it, too!

Does anyone have any questions?

Take and answer any questions people have about the content you just reviewed.

TIP: Please ask anyone who has questions about their personal health problems or goals to hold them until you begin working directly on choosing a physical health goal and steps to achieve it. Remind them that they also can ask questions about their personal health situation during the individual Whole Health meeting they'll have this week with a peer specialist.

Developing a Comfort & Safety Agreement

10 minutes

Before class starts, the following guidelines should be written on a flip chart and used as a starting point for the group discussion. Label the sheet "Comfort and Safety Agreement."

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Group Activity

A number of the participants may be worried about their safety in the class or have some issues with trusting others. Tell the group the following (**remember to use your own words, if you wish, but be sure not to add or delete any key points**):

Feeling comfortable and safe in our group is very important. Some of us may be concerned about how we'll work together in a safe and respectful way. So, before we do anything else today, we're going to develop a "Comfort and Safety Agreement." This will help relieve concerns about safety and how we'll all treat one another during this class.

Everyone, including the co-facilitators, is expected to respect this agreement at all times. If someone is unable to follow the agreement on a regular basis, we'll talk with that person individually to make a plan for how to help them respect the agreement.

Here are some items that most people find helpful to include in a Comfort and Safety contract.

1. What is said in this room stays in this room. Respect confidentiality at all times.
2. Mistakes are ok. No question is regarded as dumb or is "put down."
3. It's good to speak up, even if your voice shakes!
4. Honor the person speaking by limiting side conversations.
5. Cell phones/pagers are turned off during group time.
6. Crisis or trauma stories are not shared during this group.
7. Political and detailed religious discussions are not had during this group.
8. Smoking is allowed only in designated areas.
9. Go easy on aftershave, perfume, and scented lotions (some of your classmates may be allergic to these).
10. No guests are allowed (unless someone arranges for a reasonable accommodation by checking with the co-facilitators and other group members in advance).
11. Unconditional positive regard is extended to everyone in this group.

Does anyone have any others they'd like to add?

Also, items can be added to our agreement at any time during the next 12 weeks.

Remember to save this agreement, and to post it each week as a reminder and reference during the 12-week group.

Overview of Person-Centered Planning Process

15 minutes

Now, tell the group that you'd like to read a scenario to help them understand the approach used in the Whole Health Program and how it's different from other health approaches they may have heard about or used.

Then, read the following (**this example actually works best when read word-for-word**):

"Let's say you decide to visit a center to improve your health. When you get there, you notice there are two doors.

Over the first door, there's a sign saying:

Come on in! We're here to help you discover all of your unhealthy habits. We'll help you pick 3 or 4 of your most unhealthy habits. We'll work with you to change or break these habits. You'll have the chance to meet each week with trained professionals to support you.

Over the second door, there's a sign saying:

Come on in! Working together, we'll explore your strengths, interests, and what **you** see as possible for a healthier life. We'll help you to choose new healthy habits. Using your own strengths and interests, you'll make a plan for trying these new habits. You'll meet weekly with peers who are working on their health, too.

If you had a choice, which of these doors would you enter? Door A or Door B? Why that one? Why not the other one?

People almost always pick Door B. Either way, it is important to have a good discussion as to why people chose the one they did.

If they don't get raised by the group on their own (no need to review these points, if the group makes them on their own), then make the points that:

- 1) The Whole Health Program helps people create new health habits based on their strengths and interests;
- 2) We don't pressure anyone in the Whole Health Program to break unhealthy habits. Instead, the focus is on creating healthier habits for life;

- 3) Participants in the class will choose actions they want to take towards their physical health goals each week, rather than someone else choosing for them;
- 4) Everyone will get weekly group and individual support from others who are working on a health goal, too. Research shows that people are more likely to reach their health goals with support from their peers (along with their family, friends, providers, and others).

Group Activity

Now, ask the group to turn to the page in their binders, called *My Health Issue and Reasons to Live Healthy* on **page 5** of the participant manual.

Turn to **page 5** of your binders. Let's start today by writing down the health issue you gave when you joined our study. If you don't remember, that's okay. Just please write down one physical health issue you feel is preventing you from doing some things you'd like to do.

Give them a few minutes to write down their physical health issue.

Who would like to share the physical health issue that they plan to work on in our class?

TIP: Share one of your own, if nobody is comfortable yet in sharing.

Now, on this same sheet (**page 5**), please give 5 reasons you have for working on this health issue. Think about your reasons to live healthy, and write some down. It's okay if you have less than 5 reasons, but please don't write more than 5.

Who'd like to share some of their reasons?

TIP: Share some of your reasons to address health issues and live healthier, if people aren't comfortable in sharing yet.

Now, please put a star by the number one reason you have for improving your physical health.

NOTE TO FACILITATORS: AT THIS POINT, DO NOT WORK ON CHANGING REASONS THAT DON'T MEET THE "IMPACT CRITERIA" OR ARE ABOUT BREAKING UNHEALTHY HABITS. THIS EXERCISE IS JUST TO START EXPLORING THEIR MOTIVATION FOR HEALTH CHANGE.

These reasons for being healthy may change or grow while you're in this class. We did this activity because research shows that people are more likely to succeed in their health goals if they remember the issue they most want to address, and their overall reasons for healthy living.

Overview of the Program

10 minutes

Now it's time to review the basic components of the Whole Health Program for the participants.

Start by sharing the following (**use your own words as is comfortable for you, but don't add to or delete from any of the main points**):

For the next 2 weeks, we're going to review the 10 domains of a healthy lifestyle. A "domain" is another word for an "area." Talking about these 10 areas over the next 2 weeks will help you think about what goal would help improve the physical health problem you wrote on page 5 of your binder.

But, you won't actually set a goal during our first two classes. That's because this week and next week are designed to give you information on whole health, so you can think broadly about your goal. So, in other words, we'll use all of the information from the first two weeks of our class to set a physical health goal during our third week of class.

Please turn to the page in your binder called, "The 10 Domains of a Healthy Life," found on **page 6**.

The first three areas are:

- 1) Healthy Eating
- 2) Physical Activity
- 3) Restful Sleep

These first 3 areas are directly related to your physical health or medical needs.

The next six areas are:

- 4) Stress Management
- 5) Service to Others
- 6) Having a Support Network
- 7) Optimism Based on Your Positive Expectations
- 8) Skills to Avoid Negative Thinking
- 9) Spiritual Beliefs and Practices
- 10) A Sense of Meaning and Purpose

These last six areas are indirectly related to physical health, but are very important when creating whole health skills. You can see from this list how physical health -- represented by the first 3 domains -- is connected to emotional health -- represented by the last 6 domains.

In your own words as comfortable for you, let the group know:

In this class, each of you will think about how your interests, strengths, and health behaviors in these 10 areas impact your physical health. Then, you'll go through a process to decide one area you want to work on first. Then, you'll learn how to set a reachable goal in that area to help you work on the health issue you had when joining our study.

Once each person in our class has set a new physical health goal, time will be spent creating and working on weekly action plans to reach that goal. Each of you will also build a personal system of peer and other supports to help you meet your new goal.

Besides your whole health, we're also interested in your resiliency. Resiliency is a word to describe the ability to recover readily from illnesses, mental health issues, or the hard things in life. Resiliency starts with a focus on our strengths and what we're capable of. It doesn't focus just on our needs and problems. Resiliency makes us think about people who succeed and thrive, in spite of great odds. Of course, understanding our needs and problems is important for our personal growth and health. But, we want to make sure that attention to our needs is balanced out with attention to our strengths too (Arizona Health Futures, 2003). A focus on your resiliency is a big part of the person-centered process you'll go through in this group.

BREAK #1

10 minutes

The 10 Domains of a Healthy Life, 1-4

85 minutes, including the second break

It's time to review the 10 domains of a healthy life with the group as the first step to choosing a physical health goal. The "Reviewing and Planning for My Health Goal" handout that is used throughout this activity is found in the participants' binders and at the end of this Session (your copy).

State the following to the group (**share in your own words, if you wish, but be sure to make all of the main points without adding or deleting content**):

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Now we'll talk about how the 10 Domains of a Healthy Life work in our own lives. We'll also think about reasonable and enjoyable changes we can make to address our health issue, and to be physically healthier.

Stress is widespread in American life. Stress can have a very bad effect on our health. That's why we talk about Stress and Stress Management first in this class.

The Science of Stress

(30 Minutes of total 85 minutes)

Starting on **page 7**, there are handouts in your binders that describe stress and its impact on health. I want to summarize those pages for you now. You also can read them later on your own.

Stress can be found throughout our society. Sixty to eighty percent of all visits to health care providers in the U.S. are said to be related to stress and its bad effects (Lee, R. *The SuperStress Solution*, Random House, 2010). The prevention and treatment of the harmful effects of stress are vital to our survival as humans.

We know that the body's response to stress has a negative impact on every type of illness there is. But, why is this so?

The answer lies in how our bodies work. In stressful situations, the body produces extra energy, in order to help overcome threat. This response was meant to help the body deal with external, physical threats, like a predator or severely dangerous weather conditions. In those cases, having a lot of extra energy was a good thing. But, the extra energy got burned up as the person coped with the threat, allowing the body to return to a relaxed state. The body no longer produced the extra energy until the next threat was encountered.

So, why is this response to stress having a negative impact on us now?

Today, many of our stressors are not external, physical threats that we can fight or flee. They are internal, psychological threats, such as difficult relationships, finances, and workplace pressures that are continuous. The body does not know the difference between an external, physical threat and an internal, psychological threat. It only knows that there is a threat that needs to be dealt with. In order to cope, the body continuously produces extra energy, but it is not being burned off in either fighting or fleeing. So, this extra energy builds up in the body, leads to dangerous

belly fat, and has a negative impact on our organs and immune systems. This leads to a variety of diseases.

Not only does stress lead to physical illness, ongoing stress often causes relapse in both mental illness and addictions. So, the ability to reduce the negative impact of stress is very important in promoting recovery from both mental illnesses and addictions, too.

GROUP SHARING TIME

Let's pause for a moment to think about how stress has had an impact on your overall health.

Pause for a few moments to give people time to digest all of this important information. Then, ask for any volunteers who wish to share their reflections. To model peer support, the co-facilitator who is not currently leading the session could share a little bit about the personal impact of stress and how common it is for people with emotional and health issues.

The Relaxation Response

Is there a way to stop the stress response when we aren't able to run away from or fight our everyday stressors?

There is, and it is called "The Relaxation Response." It is described on **pages 11 and 12** of your binders.

The Relaxation Response is a physical state of deep rest. The Relaxation Response changes our physical and emotional responses to stress by lowering our heart rate, blood pressure, breathing, and muscle tension.

If practiced regularly, the Relaxation Response can have lasting effects.

Dr. Herbert Benson, founder of the Benson-Henry Institute is credited with uncovering the relaxation response. Through his research, he found that by changing thought patterns, subjects experienced decreases in their metabolism, rate of breathing and heart rate, and had slower brain waves. These changes appeared to be the opposite of the "stress response." Dr. Benson labeled it the "relaxation response," which is the foundation of mind/body medicine practiced at his Institute.

How is the Relaxation Response used? There are two main steps:

- The first is repeating a word, sound, phrase, or muscular activity.
- The second step is calmly ignoring the distractions and thoughts that come into your mind when doing this activity. When distracted, you just notice it, and then, return to repeating your word, sound, phrase, or muscular activity.

Practice the Relaxation Response

Now it's time to practice the Relaxation Response with the group. Use these instructions and the handout at the end of this session to guide the group through it.

State the following in your own words (making all of the main points):

Let's try using the Relaxation Response right now. We'll be doing this exercise to reduce our stress every week. We want you to graduate from this class knowing how to use the Relaxation Response all on your own.

Everyone please get comfortable in your seats. You might want to stand up and stretch your arms and legs for a few seconds first. You might want to shake out your arms and legs, and move your head in circles to release tension.

As we go through this exercise, some of you may want to close your eyes or look only at one spot in the room. It is best to not cross your arms or legs during this exercise.

The first thing to do is to choose a word, sound, or phrase to repeat. It can be a word like, "calm" or "relax." Or, it can be a sound, like a gentle humming. When at home, you could say the word or make the sound out loud. Here today, you'll do it in your heads only.

For this first step, you may want to repeat an action instead of a word or sound, like doing deep breathing or using a yoga pose. Or, you might want to do deep breathing or yoga while thinking of your calming word. It's up to you, based on what's most calming for you.

When at home, for your repeated action, you may want to take a silent walk or engage in a quiet, repetitive activity like knitting, crafting, or wood working.

You should avoid doing the Relaxation Response while watching TV or the computer screen, or when listening to music or a podcast. You want just the silence of your own calming thoughts.

Okay, everyone please choose either a calming word or calming action, like deep breathing, that you can do right now.

To start us out, I'm going to be quiet for just 1 minute, while we all focus on our calming words. Remember, you are going to get distracted by other thoughts or sounds in the room during this minute. That's normal. When you get distracted, don't beat yourself up. Just say to yourself, "Oh look, I got distracted," and then, guide yourself back to repeating your calming word. Even if you get distracted every few seconds at first, just guide yourself back to your repetition. Don't judge yourself. This is a new habit we're creating, so we have to train our minds to stay with it. It takes time.

Okay, I'm going to be quiet now for 1 minute while we focus silently on repeating a word.

After 1 minute, gently guide the group back to awareness of the class. Then, ask them a few questions about how it went:

Good work everyone! Who wants to share how that exercise felt?
If they need prompts, ask these questions:
Did you feel calmer?
Did you worry about your distracting thoughts?
How did it work to notice the distractions without being critical of yourself?
Were you able to get back to repeating your word after being distracted?

Group Activity

Okay, now let's consider our own sources of stress and how we manage our stress. Turn to the page in your binders called, "Stress Management" **on page 13**. I'll read the question aloud and you write down – or keep track of – your thoughts. You don't have to write a lot or at all, but it is best to note 2 or 3 of your own ideas for each of these questions.

These are some causes of stress in my life:

Pause and give people time to write (or process) each question you read aloud. Keep an eye out for people who either aren't writing or don't seem to be following the activity (for those who
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don't write but do understand the activity). You can either help those who need it on the spot or provide the extra help in your individual meeting, if that's more comfortable/natural.

These are my favorite activities for relaxing or having fun:

I do these things on a regular basis to take care of myself:

When I am feeling stressed out, I like to do these things to take care of myself:

GROUP ACTIVITY

The next question is a group brainstorming of things a person might start doing regularly to reduce the impact of stress. This gives group members a list of possibilities before they move to the next question. This process will be repeated in each of the ten domains.

Paraphrase the following:

We've come together to create new, healthy behaviors. Therefore, let's spend a couple of minutes brainstorming things you might do to better manage stress. We want to focus on new habits, disciplines, or behaviors to create or add into your life.

Let's come up with at least 5 things to reduce your stress as a way to address your physical health issue.

It's important to remember that you are not deciding to do these things right now. You're just brainstorming things you could try down the line, if you eventually choose stress management as your goal.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Good work everyone! Turn now to the page in your binders called, "Reviewing and Planning for My Health Goal," starting on **page 14**. To make it easier, I'm going to give each of you a colored tab. Please place it on the tab space at the top of 14, so that it sticks out of your binder a little bit. Because, we'll go back to this handout several times today, the tab will make it easier to find it when you need it.

Look at questions **1A** and **1B**. Now think about an important question. If you decide that you can improve your health issue by better managing your stress, what could you start doing to reach that goal?

As you answer question **1A**, make sure to choose things you could do but are not doing right now. Also, choose things you would enjoy doing to reduce your stress as a way to cope with your physical health issue.

Please don't focus on what you should stop doing. Also, don't choose things you know you'd never be able to do. Avoid choosing activities that you would not enjoy doing, even if you know they're good for you. Instead, choose what you could start doing differently that also would be enjoyable to you.

(If people don't seem to understand, offer a few examples: I could try yoga. I could learn deep breathing techniques. I could laugh more!)

Does everyone have at least one thing they could do and would enjoy doing to manage their stress?

Okay, now answer question **1B** about what you personally would get out of developing a new stress management skill, as a way to address the health issue you identified when joining the study.

(If people don't seem to understand, offer a few examples like, If I took a yoga class to reduce my stress, I might have more energy to walk during the week. If I learned deep breathing techniques to reduce my stress, I would eat healthier foods instead of the junk food I eat when I'm stressed out. If I join a stress management class, I might start to lose the belly fat I think I got from too much stress in my life.

Does anyone have any questions?

Okay, now let's move on to the next health area. Usually, when wanting to be healthier, Americans think about changing what they eat, their physical activity, or their sleep habits. So, let's look first at Healthy Eating. Please turn to **page 18** in your binders.

Healthy Eating

(15 Minutes of the total 85 minutes)

Even though we don't always eat right, most of us know what foods are considered healthy. These are fruits, vegetables, fish, chicken, lean meats, whole grains, wild and brown rice, and skim or 1% milk, to name a few.

Also, many of us know that baked and broiled foods are healthier to eat than fried foods. We've probably also heard that, if we use oil at all, it should be olive oil.

What are some other healthy eating habits? Well, because our bodies are made up almost entirely of water, it's important to drink several glasses of un-carbonated water every day, and avoid caffeinated drinks like coffee, tea, soda, and energy drinks. It's important to avoid processed or prepared foods, like frozen or boxed meals. It's also good to shop around the outer aisles of the grocery store to find the healthiest options.

Another important part of healthy eating is taking reasonable portions for breakfast, lunch, and dinner, with a small snack in the morning and one in the afternoon. The American tradition of eating 3 large meals with snacks in between is no longer considered a healthy diet. This is partly because most of us are not doing hard labor or farming from sun up to sun down.

The basics of healthy eating are shown in something called the "Nutrition Plate." On your handout on **page 18**, you'll see that it is split into four sections of what we should eat at lunch and dinner. One section is for fruit and vegetables, one is for whole grains, and one is for protein. A smaller circle sits beside the plate to show the small amount of dairy products we should drink or eat daily. You can search ChooseMyPlate.gov on the computer to learn more. This is a very helpful tool to see how much food should be on your plate at lunch or dinner, in order to be at your healthiest.

Group Activity

Now let's consider our own eating habits. Turn to the page in your binders called, "My Eating Habits" on **page 19**. I'll read the question aloud and you take note of your thoughts. Try to come up with 2 or 3 ideas for each question.

These are some foods or snacks that I tend to eat or drink on a regular basis:

(Pause and give people time to write or process each question. Again, keep an eye out for people who either aren't writing or don't seem to understand the questions. Either help them on the spot or provide extra help in their individual meeting, as is most comfortable.)

These are some of my favorite foods:

I think these are some healthy foods:

I think these are some unhealthy foods:

These are some of the healthy foods that I like:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to create a healthier diet. Paraphrase the following:

Let's brainstorm things a person might do to improve eating habits. We want to focus on creating new habits. For some ideas, take a quick look at the handouts on **pages 18a, 18b, and 18c**. They give tips for healthy eating, which can also help with weight management.

Let's now pick at least 5 things for healthier eating habits that might improve the health issue you wrote on page 5 of your binder. Remember, you are not deciding to try healthier eating right now. You're just brainstorming healthy eating habits that you could try, if you set a goal for that later on.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Okay, now please turn to the page in your binders called, "Reviewing and Planning for My Health Goal." Look at questions **2A** and **2B on page 14**. If you decide that you can improve your health issue by creating healthier eating habits, what could you start doing to reach that goal? When answering question **2A**, make sure to choose new things that you would enjoy doing to improve your eating habits.

Again, please don't focus on what you should stop doing. Also, don't pick things you know you'd never be able to do or that you would not like, even if you know they're good for you. Instead, choose what you could start doing differently that you would also enjoy.

(If needed, offer a few examples, such as: I could replace two sodas with plain water each week. I could eat an apple every day. I could eat one extra serving of vegetables at dinner.)

Does everyone have at least one enjoyable thing they could do to improve their eating?

Okay, now answer question **2B** about what you personally would get out of creating a new eating habit to address your health issue.

(Examples could be: With 2 less sodas a week, I would drink less of the sugar that's bad for my diabetes. If I eat more vegetables, I'll have more fiber, which my doctor says could help me lose weight.)

Does anyone have any questions?

BREAK #2

10 minutes of the total 85 minutes

Okay, now let's consider the next health area, which is physical activity. It is reviewed on **page 20** in your binders.

Physical Activity

(15 Minutes of the total 85 minutes)

More and more research is showing the importance of physical activity to a healthy life. It's also a fact that many Americans lack enough physical activity in their daily lives. The hard truth is that too many of us are "couch potatoes."

With all this focus on physical activity, it seems like a new exercise program is made every day. We're also seeing more about the importance of walking, walking groups, and using pedometers to count our daily steps. In fact, the Mayo Clinic and other medical experts now state that walking is a perfect, low-impact exercise with many health benefits (Mayoclinic.com/health/walking/HQ01612).

Take a minute to think about the role of physical activity in your own life. Do you do much? Do you think it means having to go to a gym? Well, the fact is that there are many simple ways to increase your activity during the day, without having to go to the gym. You can take your dog for a daily walk. You can rake your lawn. You can walk to the corner or around the block or through your apartment complex whenever you check your mailbox. You can march or jog in place every time a commercial comes on during your favorite TV programs. Or, you can get involved in fun and active recreational activities like hiking, ice skating, biking, gardening, bowling, or dancing.

What are some other easy ways to add physical activity to your life? Well, you can walk around your home whenever you talk on your mobile phone. When you go places, you can take the stairs instead of the

elevator. If you use public transportation, you can get off at the stop before yours, and walk the rest of the way. And then, do the same on the way home. If you drive somewhere, you can park farther away in the parking lot to increase your steps. In fact, you might want to start using a pedometer to count your steps and try to increase the number each week.

Group Activity

So, let's turn to thinking about your physical activity. Turn to the page in your binders called, "My Physical Activity" on **page 21**. I'll read the questions aloud and you take note of your own thoughts.

The following are or have been some of my favorite physical activities:

(Pause and give people time to write or process each question. Keep an eye out for people who need help now or in their individual meetings.)

I currently enjoy the following physical activities with other people:

I currently enjoy doing the following physical activities by myself:

After doing these activities, I feel:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to increase physical activity. Paraphrase the following:

Let's brainstorm things a person might do to increase physical activity. Let's come up with at least 5 things to increase activity and exercise, as a way to address your physical health issue. Again, you're not deciding to exercise more right now. You're just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Now, turn to the page in your binders called, "Reviewing and Planning for My Health Goal," looking at questions **3A** and **3B on page 14**. Answering **3A**, if you decide that you could improve your health issue by being more physically active, what enjoyable thing could you start doing to reach that goal?

(If needed, call out a few examples, such as: take 100 extra steps each day, volunteer to walk my neighbor's dog twice a week, or march in place for 5 minutes 2 times a day while watching TV.)

Does everyone have at least one thing they can do and would enjoy doing to improve their physical activity?

Okay, now answer question **3B**, about what you personally would get out of a new physical activity that also could help your health issue.

(Examples could be: With 100 extra steps each day, I would stretch my sore knees like my doctor says I should. By walking my neighbor's dog, I would help a friend and get some of the extra steps I need during the week to lose weight.)

Does anyone have any questions?

Restful Sleep

(15 Minutes of the total 85 minutes)

Let's consider the next health area, which is restful sleep. It is reviewed on **page 22** of your binders. Many Americans don't know how to get better, more restful sleep. And worse still, it can be a negative cycle because, in general, the less we sleep, the less we sleep. In other words, being chronically tired doesn't necessarily make people sleep better.

Many new articles and reports point to sleep deprivation as being on the rise in our country. Sleep deprivation means not getting enough sleep, or good sleep, or any sleep at all.

According to experts, not getting enough sleep and not sleeping well each night are very serious problems (quoting Dr. Michael Breus). Sleep deprivation strongly and negatively affects our health. In fact, long-term, untreated sleep deprivation is connected to many illnesses like high blood pressure, heart attack, stroke, obesity, and psychiatric problems (webmd.com/sleepdisorders).

Group Activity

Let's think about our own sleep habits. Turn to the page in your binders called, "My Sleep Habits" on **page 23**. I'll read the questions aloud and you take note of your answers and thoughts.

I usually get ____ hours of sleep each night.

(Pause and give people time to write/process each question, keeping an eye out for those who need help.)

I usually wake up about _____ times during the night.
I think I need _____ hours of sleep to function well.

On a scale of 1 to 5, with 1 being “restless” and 5 being “restful,” I would rate the quality of my own sleep as:

Restless 1 2 3 4 5 Restful

I know that I am not getting enough sleep when these things happen:

I have learned that I sleep better when I do these things before I go to bed:

I have learned that I usually do not sleep well if I do these things before I go to bed, or if these things happen before I go to bed:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to get more restful sleep. Paraphrase the following:

Let’s brainstorm things a person might do to get more or better sleep. Again, we’re aiming for at least 5 positive things to improve sleep habits as a way to address your physical health issue. Again, you’re not deciding to work on your sleep habits right now. You’re just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they’d consider trying.)

Turn to the “Reviewing and Planning for My Health Goal” handout in your binders. Looking at question **4A on page 15**, if you decide that you could improve your health issue by getting more restful sleep, what enjoyable thing could you start doing to reach that goal?

(Examples could be: Turn the TV off 30 minutes before going to bed so I can fall asleep easier. Drink a glass of warm milk before bed to help me fall asleep. Write in a Gratitude Journal to help me feel calmer for sleeping.)

Does everyone have at least one enjoyable thing they can do to get better sleep?

Okay, looking at this list, now answer question **4B on page 15** about what you personally would get out of better sleep as a way to work on your health issue.

(Examples could be: If I get more restful sleep, I'll have more energy for my walking group. If I get more restful sleep, I'll be less irritable and may feel more like eating healthier foods. If I get more restful sleep, I may have more energy to join a healthy eating program.)

Does anyone have any questions?

Review & Closing

5 minutes

Briefly review what has been covered in this session. Encourage the participants to add more material to their "Reviewing and Planning for My Health Goal" handout during the week, as they think of more things or if they want to record something a peer shared today.

Announce that during the next class you will continue working on reviewing the 10 Health Domains and identifying possible goals in each area. Thank everyone for coming. Make eye contact with each person. Let them know you look forward to seeing them in their individual meetings this week and back at class next week. Let them know that someone will be getting in touch with them to remind them of both their individual meeting and the next class. Ask if anyone's phone number or other contact information has changed, so you can be sure to reach them at the correct number.

After-Class Logistics

- Collect and save the name badges for the next class.
- Distribute the travel stipends and make sure each person signs a receipt, if needed.
- One facilitator works with the local project coordinator to complete the Fidelity Assessment.
- Submit the Attendance Log to UIC. It is crucial to share any changes in participants' contact information with UIC.

Session 1, Individual Meeting

For all individual meetings, make sure you have the needed materials, including a pencil/pen for you and the participant.

Try to make sure you're able to meet in a room with a table and at least two chairs. Arrange the chairs with about 3-4 feet of distance between the two of you. Place a glass of water on the table for each of you. Also have the business cards with the study's toll-free number handy, in case anyone has a question about being in the study that you cannot or should not answer.

Verify now whether or not the person attended the first session, using your attendance log from last week. This will help you know how much you need to cover during this first meeting.

People who missed the first class will be encouraged during their "reminder phone calls" to attend their individual meetings to "make up" the material.

Remember, your participants will never have experienced receiving support from a Certified Peer Specialist or in a Whole Health class. They will probably feel pretty nervous about this first one-on-one session. They may not know what to expect or what you are expecting from them. Therefore, your first few meetings are as much about building trust and engagement as they are about person-centered health planning.

Welcome

Start by making the person feel welcome. Remind him/her of your name. Chat about something not related to the class, such as the weather, how long s/he has lived in your city, a major sports event, or something informal to help put the person at ease.

People may feel guilty or worried about their health, and whether they can make the changes they want to make or that they think you want them to make. Therefore, after welcoming them, start by reviewing the purposes of certified peer support. Ask whether the person has ever heard of a Certified Peer Specialist. If so, ask what they have heard. Verify their accurate perceptions, and discuss any misconceptions they may have.

One of the biggest misconceptions people have is that they won't get good help from someone who's had the same problems they've had. Or, they may feel that they aren't really "like" the CPS, and so, don't see the value of peer support. Over time, as they get to know you and the other participants, these attitudes are likely to change.

Only if they say they don't see how peer support will help, acknowledge it by saying that it's not uncommon for people to feel this way, but that self-help and peer support are used to help people with all kinds of issues, needs, and strengths. For example, there's AA, Weight Watchers, the Cancer Survivors Network, Mended Hearts, WomenHeart, or many other kinds of support groups for people working on healthier lifestyles. This Whole Health Program is a support group with the same types of benefits.

Weekly Topic Review

After reviewing what they know or don't know about certified peer support, offer a review of the Whole Health Program.

Share the following information in your own words (**making sure to cover the main points**):

In class this week we talked about how many Americans are dealing with serious health problems. But, these health problems can either be prevented or better managed with support, good information, healthy decisions, and treatment. Also, we learned that stress makes people unhealthy and unhappy. So, learning how to manage stress is one of the first and best steps towards better health.

You joined this study because you have a desire to be healthier, and an interest in receiving support to work on a health issue you shared when joining our study. I'm here to help you, using proven methods to set and reach a health goal.

This Whole Health Program uses a person-centered process to help you create one new health habit or behavior at a time. We do not judge you. We do not ask you to stop or break unhealthy habits. Instead, we want to help you see what a healthy life looks like for you. You decide your goal, based on your own interests, life goals, strengths, needs, and beliefs.

Also in class, we started reviewing each of the 10 areas or domains for a healthy life (go over the Domains handout in his/her binder). We're going to continue reviewing these health areas today and next week. Then, after you choose a new physical health goal during our third week together, we'll meet weekly to see how it's going, what supports you need, and whether you'd like to revise your goal based on how it's going. We don't judge and we don't punish. We just want people to feel better and be healthier, so we'll work with you to achieve that.

Do you have any questions?

Address any questions about CPS, the Whole Health Program, or anything else they may be wondering. Direct them to call UIC for research-specific questions or concerns (such as when they will receive their interview stipend).

Try to keep the conversation focused as much as possible on health and recovery.

Ok, let's move now to reviewing the sheet in your binder called, *My Health Issue and Reasons to Live Healthy*. It's okay if you only wrote 1-2 things. It's okay if you didn't write anything. It's okay if your reasons aren't mine or anyone else's. They're your reasons for being healthy.

Review what the person wrote, briefly discussing the health issue s/he identified wanting to work on, as is comfortable. Next, help the person come up with 5 reasons to address this issue and live healthy. Help with writing, as needed. Also review what they chose as the most important reason or ask them what is most important if they didn't record anything or don't have anything to share.

REMEMBER, YOU'RE NOT WRITING GOALS WITH IMPACT RIGHT NOW. YOU'RE JUST BRAINSTORMING WHATEVER REASONS THEY HAVE FOR WANTING TO BE HEALTHY.

As appropriate, share one of the health issues you're working on and your most important reason to live healthy, as a form of further peer support.

Now it's time to review your handouts for Stress Management (page 13), Healthy Eating (page 19), Physical Activity (page 21), and Restful Sleep (page 23). It's okay if you didn't write much or anything. I'll help you finish them if needed. We'll also look at your *Review and Planning for My Health Goal* worksheet, starting on page 14 in your binder, to see if you have any questions or need support in filling it out.

Stop and work through any worksheets the person didn't complete. If the worksheets are complete, ask the person to share with you some of their thinking and potential goals from these sheets. Reassure them that you aren't trying to be nosy, but are seeking to get to know him/her better. As a peer specialist, share some of your struggles and goals specifically in these 4 health domains, as appropriate.

Looking Ahead

Tell the participant that during the next class, you'll review the rest of the 10 health domains.

Next, discuss whether the person would like to meet **before or after** class next week. Some people may need individual support before class and others as a follow-up either directly after class or a few days later. This will vary depending on the person, the topics under discussion, and individual progress on a weekly goal (once that begins). Set a day and time for your next meeting. Let the person know that you may choose to meet at different times each week depending on what they need and prefer. Also let them know you'll be calling to remind them to attend the next class and individual meeting. Answer any final questions. Distribute the travel stipend and make sure the participant signs a receipt, if needed. Submit the person's attendance at the individual meeting to UIC.

Session 2, Group Meeting

Continued Review of the 10 Health Domains

Agenda

Welcome & Housekeeping	5 minutes
Domains of a Healthy Life, 5-6	35 minutes
Break #1	10 minutes
Domains of a Healthy Life, 7-10 (including a 10-minute break)	95 minutes
Review & Closing	5 minutes

Class goals

The primary goal for today's class is:

1. Continued discussion of the *10 Domains of a Healthy Life* and possible health goals in each area.

Class supplies

- Blank name badges
- Travel stipends
- Travel stipend receipts, if needed
- Session 2 Attendance Log (for expediency, one of the co-facilitators will check off who is in attendance by each person's name, rather than passing around the sheet)
- Participant binders
- Healthy snacks and beverages

Welcome & Housekeeping

5 minutes

Start by enthusiastically welcoming everyone back. Also welcome any new participants who missed the first week, and ask everyone to introduce themselves again. Encourage participants to take a healthy snack and beverage.

If there are new participants, briefly review the class guidelines about making best efforts to attend all classes and individual meetings, the need for you to take attendance, and how the travel stipends and travel receipts work.

Also provide a quick review of the elements of the *Comfort & Safety Agreement* created during the last class.

Again, throughout class, keep an eye on participants who aren't writing much or don't seem to be tracking the conversations/activities. While it is expected that participants might be too overwhelmed to write or process much during their first class, if this continues throughout the second class, it signals the need for more individualized support. You'll want to sensitively explore with these participants during their next one-on-one meeting whether: 1) they need an accommodation (e.g., have lower literacy, have a learning disability), 2) they are overwhelmed by the work in class, or 3) something else is going on that you can help them work through.

If it's the first reason, work with the local project coordinator and UIC to provide a reasonable accommodation.

If it's either of the latter two reasons, then make a plan to discuss with the local project coordinator (and on the weekly fidelity calls) how to help these individuals make the most of their individual meeting times to examine their current health habits and to set a possible goal or two. You may find that some folks just can't come up with something they could start doing in all 10 domains. For them, you'll start by focusing on one, or maybe two, domains during your next individual meeting time.

This is a critical time. You want to be sure that anyone who is feeling uncertain, disengaged, or overwhelmed sticks with the group and doesn't give up. This is addressed more below, in the section on Session 2, Individual Meeting.

Review Class goals, as stated above.

The 10 Domains of a Healthy Life; 5-6

35 minutes

Start this week's class with a review of the next health domain. Again, the "Reviewing and Planning for My Health Goal" handout used throughout this activity are found in the participants' binders and at the end of this Session.

Get started by stating the following information in your own words, **being sure to share the main points being made without adding or removing information.**

Last week, we reviewed 4 of the 10 Areas for a Healthy Life. These were Stress Management, Healthy Eating, Physical Activity, and Restful Sleep. We also thought about goals we might create in each of these areas to address the health issue we wrote on page 5 in the binders. We reviewed this information in our individual meetings with you.

TIP: If there are new participants in class, also state that you will review the information and questions for these 4 health areas with them in their individual meetings this week (as a "make-up" session with them).

Today, we'll continue reviewing the 10 Areas of a Healthy Life.

The Power of Human Connections: Service to Others & Support Network

Overview (15 minutes of the total 35 minutes)

You've probably heard of "Service to Others" and having a "Support Network." These are described starting on **page 24** in your binders. Both are about the importance of having human connection.

One expert speaks of "service to others" and a "support network" as being flip sides of the same coin (quoting Dr. Fricchione). He says that humans have come to rely heavily on love in order to even survive. That means, if we need to receive love, we also need to be able to give love. The giving and receiving of love is not only a human quality, it is critical to our health. This is because there's a healing power in knowing that you are not alone. Many people talk about this as part of their mental health and addiction recovery, too.

Let's think about this some more. Dr. Dean Ornish is a heart doctor who places a lot of importance on the healing power of loving relationships. In his best-selling book called, Love and Intimacy, he states,

"...anything that promotes feelings of love and intimacy is healing; anything that promotes isolation, separation, loneliness, loss, hostility, anger, cynicism, depression, alienation, and related feelings often leads to suffering, disease, and premature death from all causes. When you feel loved, nurtured, cared for, supported, and intimate, you are much more likely to be happier and healthier. You have a much lower risk of getting sick and, if you do [get sick], a much greater chance of surviving."

In his book, Ornish highlights research that shows people with the strongest social ties had dramatically lower rates of disease and premature death than those who felt isolated and alone. Those who lacked regular participation in organized social groups had a fourfold increased risk of dying six months after open-heart surgery.

Quoting Dr. Roberta Lee on human connection, she says,

“Whoever said ‘a problem shared is a problem halved,’ knew of what they spoke.”

We all need supportive people to share our good times and bad times. People need people. Being able to cry, laugh, or just have someone listen to you is often enough to ease a stressful health situation. Many scientific studies show that having social support is the best way to handle stress. Belonging to a community – whether it’s a knitting circle, a sports league, or a monthly dinner group with friends – is an important part of handling stress.

It’s a known fact that the brain cannot process two opposite feelings at the same time. Think about it: you can’t be both happy and unhappy in the exact same moment. So, if you’re spending time with friends and loved ones, you still may have stress, but it will feel less painful than it would if you were isolated and alone. Support groups and service to others have played a major role in recovery from both medical and emotional problems.

With all this in mind, let’s take a few moments to think about how service to others and having a support network, have helped your overall health.

GROUP SHARING TIME

Pause for a few moments to give people time to digest all of this important information. Then, ask if there are 1 or 2 volunteers willing to share the impact that giving service to others has had on their health. Again, the co-facilitator who is not currently leading the session could start to get the ball rolling.

TIP: Limit sharing to 1-2 people, in order to have time to cover all of today’s material.

Group Activities

Service to Others (10 minutes of the total 35 minutes)

Let’s think about the role of service to others and a support network in our own health. We’ll start first with service to others. Turn to the page in your binders called, “Service to Others” on **page 26**. I’ll read the questions aloud and you write down, or otherwise keep track of, your thoughts. You don’t have to write if you don’t want to, but it’s best to come up with a few ideas for each question.

These are some of the things that I have done or I am currently doing that I would define as “service to others”:

(Pause to give people time to write or process the questions. Help anyone who needs it.)
Helping others has the following impact on me:

The following are some possible places to volunteer in my community:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to get more involved in service to others. Paraphrase the following:

Let's brainstorm things a person might do to become more involved in service to others. Let's come up with at least 5 positive things to try regarding service to others as a way to address your physical health issue. Remember from last week that you're not deciding to become more involved right now. You're just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Turn to the 3-page handout "Reviewing and Planning for My Health Goal" in of your binders. Considering question **5A on page 15**, if you decide that you could improve your physical health issue by becoming more involved in service to others, what enjoyable thing could you start doing?

(If needed, provide some examples, such as: Ask one of my providers for a list of local health support groups and attend a session. Or, ask the leader of my faith community if I could start a walking group to help others get healthy, too.)

Does everyone have at least one thing they could do and would enjoy doing to provide more service to others while addressing their physical health issue?

Okay, looking at this list, now answer question **5B on page 15** about what you personally would get out of a new goal regarding service to others as a way to address your physical health issue.

(Examples could be: If I started a walking group to help other people, I also would increase my own physical activity. If I volunteered at a local community center, I could help others and also make friends who might want to join a healthy eating program with me.)

Does anyone have any questions?

Support Network (10 minutes of the total 45 minutes)

Now, turn to the handout in your binders called, “My Support Network” on **page 27**. I’ll read the questions aloud and you write down, or otherwise keep track of, your thoughts.

I can trust the following people to always be there for me:

(Pause to give people time to write or process the questions. Help anyone who needs it.)

These are friends that I enjoy doing things with:

Some people in my support network are:

If I attend a support group or organized social activity on a regular basis, it benefits me in these ways:

If I don’t attend a support group or organized social activity, I get support from other people in these other ways:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to strengthen his or her support network. Paraphrase the following:

Let’s brainstorm at least 5 things to strengthen your support network, as a way to address your physical health issue. You’re not deciding to work on your support network right now. You’re just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they’d consider trying.)

Following our usual format, turn to the “Reviewing and Planning for My Health Goal” handout and look at questions **6A** and **6B on pages 15 and 16**. First, under **6A**, choose something new and enjoyable you could start doing to strengthen your support network as a way to address your physical health issue.

(Examples could be: Check the local newspaper or Internet for local “sports or hobby clubs” like basketball or walking, and join one. Work on making a new friend within my faith community who might want to take walks with me.)

Does everyone have at least one thing? Good, so now under **6B** choose what you personally would get out improving your support network as a method for working on your physical health issue.

(Examples could be: I am more likely to walk for exercise if I meet up with a friend. When I’m stressed out, I will have a friend to call instead of over-eating junk food like I often do when stressed.)

Does anyone have any questions?

Break #1

10 minutes

The 10 Domains of a Healthy Life, 7-10 95 minutes, including the second break

Optimistic Attitude (20 minutes of the total 95 minutes)

Our next two health areas are: “Optimism Based on Positive Expectations” and “Cognitive Skills to Avoid Negative Thinking.” Both of these areas have to do with a person’s attitude, which is reviewed on **page 28** of your binders. Optimism has to do with your attitude towards the future. The ability to avoid negative thinking has to do with your attitude towards yourself.

Let’s talk first about optimism. Many people believe that the first step towards recovery is hope that life will get better. This is what we mean by hope for the future, or optimism. Research shows the positive impact that hope has on one’s health. As an example, in a Duke University study of 2,800 heart patients, those with positive expectations about their recovery were 30% less likely to die over the next 15 years than patients with less positive expectations. This was true no matter how severe their heart disease.

(Barefoot, et al., Recovery Expectations and Long-Term Prognosis of Patients with Coronary Heart Disease, Archives of Internal Medicine, May 28, 2011)

Charles Swindoll shares,

“The longer I live, the more I realize the impact of attitude on life. Attitude, to me, is more important than facts. It is more important than the past, than education, than money, than circumstances,

than failures, than successes, than what other people say or do. It is more important than appearances, giftedness, or skills. It will make or break a company...a church...a home... I am convinced that life is 10% what happens to me and 90% how I react to it."
(ThinkExist.com)

This is why we hear quotes like, "Attitude is everything." "Your attitude determines your altitude." Or, Henry Ford's famous one, "Whether you think you can or can't, you are probably right."

These quotes are about humans' ability to be purposely hopeful about the future. This kind of hope helps people avoid negative thinking about themselves and their situations. It also helps people to stop negative thinking when they slip into it. As Martha Beck, says,

"Your situation may endanger your life and limbs, but only your thoughts can endanger your happiness."

(Finding Your Own North Star, Three Rivers Press, 2001)

Happiness involves having gratitude for the past, enjoying the present, and having hope for the future. Telling yourself a miserable story about your situation creates suffering. Telling yourself a positive and grateful story instead increases your happiness.

Let's pause and think about how your attitude about the future and about yourself has an impact on you.

GROUP SHARING TIME

Pause for a few moments to give people time to digest all of this important information. Then, ask if there are 1 or 2 volunteers willing to share the impact that optimism and positive thinking have had on their lives and health.

Group Activity

Please turn to the page in your binders called, "My Optimism Based on Positive Expectations" on **page 29**. I'll read the questions aloud and you write down, or otherwise keep track of, your thoughts.

First, on a scale of 1 to 5, with 1 being "not optimistic at all" and 5 being "very optimistic," I would rate how optimistic I usually am about the future as:

Not optimistic at all 1 2 3 4 5 Very optimistic

I do these things to help me stay positive:

(Pause to give people time to write or process the questions. Help anyone who needs it.)

When I am becoming pessimistic or negative about the future, doing these things helps me become more optimistic:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to develop a more optimistic attitude. Paraphrase the following:

Let's brainstorm things a person might do to become more optimistic. Again, we're aiming for at least 5 positive things to improve optimism as a way to address your physical health issue. You're not deciding to work on your optimism right now. You're just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

With that in mind, look at question **7A** on **page 16**. Decide what you could start doing to develop a more optimistic attitude in relation to your physical health issue, if you choose to work on that. Remember to pick something both new and enjoyable that you could do.

(Examples could be: Do something every morning from my list of activities that keep me positive about my health. Or, resolve to come to our whole health group each week to develop hope and new skills. Or, write down 3 things every day I feel grateful for in terms of working on my health.)

Does everyone have at least one thing? Good, now answer question **7B** about what you personally would get out of a more optimistic attitude as a strategy to address your physical health issue.

(Examples could be: I would feel less discouraged about making a health change. Or, I might sleep better and have more energy for exercising. Or, I could get a handle on my future health goals if I had more optimism and hope.)

Does anyone have any questions?

Cognitive Skills to Avoid Negative Thinking (30 minutes of the total 95 minutes)

Because negative self-talk is a significant problem for so many people, this part of Session 2 teaches a skill, rather than going through the usual person-centered and motivational planning process.

Because optimism/pessimism and negative thinking have so much in common, and because negative thinking and negative self-talk are such big problems for so many people, we are going to approach this domain a little differently. Instead of 3-5 questions that help you become aware of patterns in your own life, we are going to teach you a skill.

To begin this process, I will read you a story that is adapted from Lori Ashcraft's paper on "Self Esteem and Self Talk." I think many of you will relate to what happens to Carol in this story. You can find it in your binders on **pages 30 and 31**, if you'd like to follow along while I read.

Carol's Story

Carol awoke and realized she had overslept, "Oh, no! I'm going to be late for work! I said I wanted to get up every morning and go for a walk. I should have known that I wasn't serious. I always have great plans, but I never follow through. When am I going to grow up and start taking some responsibility for my life? I am such a failure!"

As Carol went to the kitchen, she caught a glimpse of herself in the hall mirror. "I shouldn't wear this skirt. It is tight across my butt. If I bend over, I will burst the seams. I have really put on a lot of weight lately. I am so fat and ugly."

As Carol was opening the door of the refrigerator, she said to herself, "What am I doing? I shouldn't eat breakfast. I really need to skip a few meals; then my clothes may fit a little better. I probably need to not eat for a week! Aw, forget it! Why don't I eat everything in the fridge? I am a great example of a person who doesn't care how fat and ugly she gets. I am really hopeless."

Carol left the house almost in tears. She got on the bus for work. When she sat in her seat, she looked at her reflection in the window. She realized that she had forgotten to comb her hair. "My hair looks horrible. I am so ugly. I ought to shave my head and wear a wig. Nobody could ever like a person who looks like me!"

When Carol got to work, she remembered that she had not finished a report that was due that day. As she sat at her computer and got to work, her boss walked by. Carol said to herself, "He is going to think that I just started working on this report, and it is due today. He won't expect it to be very good. I am sure that he will give it to someone more capable to rewrite. I am probably not going to have this job much longer. He will probably fire me soon. What will I do then? I am such a fat, ugly failure that no one could ever like. I wish I was dead!"

That's a hard story to hear, isn't it? Let's reflect on it.

First of all, it shows how our self-talk is often started by something that's happening outside of us. There are four events that "jump-started" Carol's self-talk that turned negative.

- 1) She over slept.
- 2) She saw in the mirror that her skirt was tight.
- 3) She forgot to comb her hair.
- 4) She had not finished a report that was due that day.

Each time, her self-talk quickly moved from stating the facts to telling herself a story that was not based on facts. For example,

"I over slept" became "I am such a failure."
"My skirt is too tight" became "I am fat and ugly."
"I forgot to comb my hair" became "Nobody could ever like a person who looks like me."
"I haven't finished the report" became "I will be fired soon."

Some, if not all, of Carol's story rings true for many of us. That's because:

- Everyone has negative thoughts and/or negative self-talk.
- Negative thoughts and self-talk are not the problem.
- The problem is when negative self-talk spirals downward, and we end up defining ourselves in absolute and permanently negative terms.

Sound familiar?

(Briefly allow the group to digest this and "own" their personal struggles with negativism.)

Okay, so we all know what negative self-talk feels like and what it leads to. Some of you may have heard of a skill that can help stop our negative

thoughts before they go too far. It's called, "Catch it! Check it! Change it!" You will find a handout with that name in your binders on **page 32**.

- 1) "Catch it" means that we need to catch what is happening early on before it goes too far. We want to catch ourselves right away when moving from the facts of a situation to telling a negative story about ourselves instead.
- 2) "Check it" means comparing the negative self-story you're telling against what is actually going on. It is crucial to stick with the facts, rather than turning facts into fiction or stories.
- 3) "Change it" means stopping the story-telling and using self-talk that more appropriately reflects the reality of what's happening.

Group Activities

Let's use "Catch It, Check It, Change It" to see how it might have helped Carol. (Guide the participants in a group discussion using these questions.)

- Where could Carol have **caught** herself in moving from fact to story?
- How could she have **checked** her self-talk, so that it was based on facts?
- What could she have **changed** in her self-talk, so that it more appropriately reflected the reality of her situation?
- If she had done this, how might her day have been different?

After this group discussion, guide participants back to the planning process.

Now, still working from the sheet in your binders called, "Catch It, Check It, Change It" on **page 32**, write or think about five actions you've found helpful in catching, checking, and changing your own negative self-talk.

Next, turn to your neighbor and spend a few minutes sharing things you've found helpful in catching or changing negative self-talk.

(Give people 3-4 minutes to share their thoughts with one another. Help anyone who needs it.)

With that in mind, turn to the "Reviewing and Planning for My Health Goal" handout. For question **8A on page 16**, pick something enjoyable you could start doing to avoid negative thinking in regards to your health issue. In particular, you might want to try using Catch It, Check It, Change It.

(If needed, examples could be: Try using “Catch It, Check It, Change It” next time I start using negative self-talk about my chances of managing my weight. Look for a book or search the Internet for a list of Daily Affirmations that could help me be more positive about working on my health issue. Ask a trusted supporter to “catch it and check it” whenever I slip into negative thinking, so I can work on changing it myself.)

Does everyone have at least one thing? Now answer question **8B** about what you personally would get out of starting to use skills to avoid negative thinking about your physical health issue.

(Examples could be: I would learn to see things more realistically, which could help me deal better with my health problem. Or, I would be less depressed and could begin working on my health issue with renewed energy.)

Does anyone have any questions?

BREAK #2

10 minutes

Spiritual Beliefs and Practices (20 minutes of the total 95 minutes)

Okay, our next 2 health areas are called, “Spiritual Beliefs and Practices” and “A Sense of Meaning and Purpose,” described on **page 33**. These both involve being connected with something that larger than oneself.

Spirituality may be belief in a greater power that created and controls all of life, like God. It may be belief in the way all living creatures are connected or dependent on one another to exist. It may be a feeling of unity or connection with nature. Some people go to a place of worship to express their spiritual beliefs, while others prefer to reflect on their beliefs at home or in nature.

People derive meaning and purpose in different ways. For some, spirituality is the road to meaning and purpose. Others choose to volunteer their time to help others, gaining purpose by getting involved in a cause or giving back. Still other people write stories, poetry, or music to express meaning and purpose. Many of us say that our work, schooling, families, children, or pets give our lives greater meaning and purpose.

However we define spirituality or meaning and purpose, they often help us weather the storms of life. There are many stories, plays, and movies to bear this out.

Let's reflect on what spirituality or a sense of meaning and purpose have meant in your life.

GROUP SHARING TIME

Pause for a few moments to give people time to digest all of this important information. Then, ask if there are 1 or 2 volunteers willing to share the impact that a sense of purpose and/or spirituality have had on their lives and health.

Group Activities

Please turn to the page in your binders called, "My Spiritual Beliefs and Practices" on **page 34**. I'll read the questions aloud and you write down, or otherwise keep track of, your thoughts.

On a scale of 1 to 5, with 1 being "not important at all" and 5 being "very important," I would rate the importance of spiritual or religious beliefs in my life as:

Not important at all 1 2 3 4 5 Very important

These are the spiritual or religious beliefs that help see me through the dark and difficult times:

(Pause to give people time to write or process the questions. Help anyone who needs it.)

I find these spiritual or religious practices to be very important and sustaining in my life:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to strengthen his or her spiritual beliefs and practices as a whole health goal. Paraphrase the following:

Let's brainstorm at least 5 things to strengthen spiritual beliefs or practices as a way to your address your physical health issue. You're not deciding to strengthen your practices right now. You're just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Following our usual format, please turn to the “Reviewing and Planning for My Health Goal” handout. For question **9A on page 17**, pick something enjoyable you could start doing to strengthen your spiritual beliefs and practices as a way to address your physical health issue.

(Examples could be: I could start praying or meditating to reduce my stress, which would help me to exercise more often. I could start attending a place of worship each week to meet a friend who wants to take walks with me.)

Now, please consider question **9B** about what you personally would get out of this health goal.

(Examples could be: I could develop more faith that my health problem will improve. I could start walking to my place of worship, which would increase my physical activity. I could talk with others there about starting a healthy eating or walking group each week.)

Does anyone have any questions?

A Sense of Meaning and Purpose (15 minutes of the total 95 minutes)

Please turn to the page in your binders called, “A Sense of Meaning and Purpose” on **page 35**. Once again, I’ll read the questions aloud and you write down or take note of your thoughts.

On a scale of 1-5, with 1 being “very little” and 5 being “a great deal,” I would rate the amount of meaning and purpose in my life as:

Very little 1 2 3 4 5 A great deal

These relationships give my life meaning and purpose:

These activities give my life meaning and purpose:

(Pause to give people time to write or process the questions. Help anyone who needs it.)

These experiences give my life meaning and purpose:

GROUP ACTIVITY

Next lead a group brainstorming of things someone might start doing regularly to create more meaning or purpose in life as a whole health goal. Paraphrase the following:

Let’s brainstorm at least 5 things to create more meaning or purpose in life as a way to manage your physical health issue. You’re not deciding to

create more meaning or purpose right now. You're just brainstorming things you could try.

(Pause to give people time to call out their answers. Encourage them to jot down anything they hear that they'd consider trying.)

Next, on your "Reviewing and Planning for My Health Goal" handout, under **10A on page 17**, choose something enjoyable you could start doing to create more meaning and purpose in your life as a way to work on your physical health issue.

(Examples could be: I could pick a health goal in this group that helps me with my health problem while helping someone else, too. I could start a journal to write about things I'm grateful for each day, which would give me more energy to exercise more.)

For item **10B**, note what you personally would get out of such a health goal.

(Examples could be: If I had a greater sense of meaning or purpose, I could resolve to work on my health issue. If I felt energized with a sense of purpose, I would find it more possible to manage healthy eating or exercise. If I volunteer to help others with health needs like mine, I could work on my health issue at the same time that I'm contributing to my community.)

Does anyone have any questions?

Congratulations! We made it through all 10 health areas or domains. You now have good information about what you could do and would enjoy doing to have a healthier life.

If you weren't able to think of something in every area, don't worry. That is common. You can work with what you have, and we'll give you any support you need in your individual meetings.

Take a moment to congratulate the person next to you. We've all done a lot of thinking these past 2 weeks about whole health. Great work everyone!

Does anyone have any questions before we end for today?

Review & Closing

5 minutes

Announce that during the next class you will work on clarifying and setting a health goal. Let everyone know that the next session will be an important and exciting class. Thank everyone for coming. Make eye contact with each person. Let them know you look forward to seeing them in their individual meetings this week and back at class next week.

Remind participants that someone will be contacting them with reminders for their individual meeting and the next class. Ask if anyone's phone number or other contact information has changed.

After-Class Logistics

- Collect and save the name badges for the next class.
- Distribute the travel stipends and make sure each person signs a receipt, if needed.
- One facilitator works with the local project coordinator to complete the Fidelity Assessment.
- Submit the Attendance Log to UIC. Again, it's important to immediately share any changes in participants' contact information with UIC.

Session 2, Individual Meeting

In advance of your meeting, make sure you have the needed materials and forms, as well as a pencil/pen for you and the participant.

Try to make sure you're able to meet in a room with a table and at least two chairs. Arrange the chairs with about 3-4 feet of distance between the two of you. Place a glass of water on the table for each of you. Also have the business cards with the study's toll-free number handy, in case anyone has a question about being in the study that you cannot or should not answer.

Verify beforehand whether or not the person attended the Session 1 Individual Meeting and Session 2 Group meeting, using your attendance logs.

If the participant missed his/her first **individual** session, then deliver the "Welcome" content from the first **individual** session today.

Keep an eye on the time. This meeting should last up to 45 minutes.

Welcome

Welcome the person to his/her individual meeting. Chat informally for a few minutes to put the person at ease.

Weekly Topic Review

During class this week, we continued reviewing the 10 Areas or Domains for a Healthy Life.

(Go over the handout that lists the domains from his/her binder again.)

For people who attended the class:

Let's review what you thought for each of the domains we discussed in class this week, and your Review & Planning worksheet. Remember, it's okay if you didn't write or come up with anything. I'll help you complete that information if you'd like. I'm also happy to review the explanations I gave during class or answer any questions you have about the material.

For people who did not attend the class:

This week, we reviewed 6 additional domains for a healthy life. I'm going to briefly review what they mean, as you work on your handouts. I will help you with any writing or planning you may need today. It's common, so please don't hesitate to ask me for any help you might need.

For either group, stop now and work through any worksheets the person didn't complete. For participants who missed the **group** last week, you'll be briefly reviewing the explanations and questions from Session 2. You don't have time to read all the material word-for-word, but you should make sure they understand the main concepts or definitions for each area, using the handouts to move through the material.

TIP: If you find that the participant did not write much or anything at all – and, even more importantly than writing, *doesn't seem to understand* the information or tasks at hand – it's time to gently explore what might be going on. Here are some conversation openers you can use to do this, choosing the one that feels most comfortable and appropriate:

Is there anything you feel about working on these sheets or the health areas you'd like to share with me?

It's common for people to be unsure about their ideas and their choices when going through these worksheets. Did you experience anything like that when we went over the sheets in class?

If no, Did you have other reasons for not using the sheets during class?

Or, Would you perhaps like to work on these questions in a different way, that's more comfortable for you?

(Explore what that would look like – tape recording, pictures, CPS recording person's thoughts.)

Some of our participants have expressed wanting some extra help with writing or planning in class and during individual meetings. Would this be helpful to you?

As they are sharing, start by acknowledging their views or issues. Even in the name of being encouraging, don't try to talk them out of their views or feelings. For example, you wouldn't want to say, "Oh no! I'm sure you'll do a good job with this!" Or, "You know a lot about health stuff, I'm sure!" Or, "This is all good information, you'll see!"

You want to convey that: you have hope for the person; do not discount their irritation, fears, or worries; and that this program can work for them, too. You should, however, respectfully clear up any misconceptions they may have about the Whole Health Program or peer support that may be getting in the way.

For those participants who completed their sheets already, ask the person to share with you some of their thinking and potential goals from these sheets. Keep the conversation focused as much as possible on health and recovery.

Looking Ahead

Tell the participant that during the next class, each person will set and clarify a personal whole health goal; go through a process to see if the goals they've set will be effective for them personally; and create a weekly action plan to work on this new goal. **Convey your enthusiasm for next week's class because it is at the heart of this intervention!**

Whether or not they required extra help today, let them know that there will be lots of support for everyone in setting and clarifying goals and action plans next week.

Next, discuss whether the person would like to meet **before or after** class next week.

Set a day and time for your next meeting. Remind the person that you may choose to meet at different times each week depending on what they need and prefer. Also let them know you'll be calling to remind them to attend the next class and individual meeting.

Ask for any final questions or concerns:

Do you have any questions or concerns to share with me? I look forward to seeing you next week. I'll be giving you a call to remind you about class.

Distribute the travel stipend and make sure the participant signs a receipt, if needed.

Submit the person's attendance at the individual meeting to UIC.

Session 3, Group Meeting

Setting a Goal, Action Planning, and Confidence Rating

Agenda

Welcome & Housekeeping	5 minutes
Setting and Clarifying a Whole Health Goal	35 minutes
BREAK #1	10 minutes
Stating Goals to have IMPACT	45 minutes
Break #2	10 minutes
Creating a Weekly Action Plan	40 minutes
Review & Closing	5 minutes

Class goals

This class has 3 major goals:

1. To set and clarify a personal whole health goal;
2. To state goals so they meet the IMPACT criteria; and
3. To create a Weekly Action Plan to work on each person's first health goal.

Class supplies

- Blank name badges
- Travel stipends
- Travel stipend receipts, if needed
- Session 3 Attendance Log (for expediency, one of the co-facilitators will check off who is in attendance by each person's name, rather than passing around the sheet)
- Participant binders
- Healthy snacks and beverages

Welcome & Housekeeping

5 minutes

Welcome everyone back. Encourage participants to take a healthy snack and beverage.

Ask the group if they have thoughts to share about reviewing and prioritizing goals within the 10 Health Domains, especially after having met individually with a peer specialist this past week.

Now, review the class goals, as stated above.

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Setting and Clarifying a Whole Health Goal

35 minutes

It's time for the group to set and clarify a personal whole health goal. The facilitators should switch off with helping people who need support in completing these worksheets.

Share the following in your own words, being sure not to add or delete any of the key points:

Today, we're going to do some activities to help you set a physical health goal. We'll complete some new sheets, and look at ones you've already finished. Information from these handouts will help you choose a goal.

Let's start by opening your binders to **page 36** for the sheet, "Setting and Clarifying My Whole Health Goal." I will read each item and you put a check by anything that is true for you. If you aren't sure, put a question mark by the item. Learning the answer might become part of a new health goal for you.

Read each item aloud from this handout, which also is found at the end of this Session.

Take a few minutes now to read all of the items you've just checked. Also look at what you included for your health strengths and needs.

Give people time to review this information.

Now, go back and review your completed handout, "Reviewing and Planning for My Health Goal," on **pages 14 to 17** in your binders.

Guide them through their binders to the correct pages, as needed. Again, give them time to review the information.

Okay, with all of this in mind about yourself, turn to the handout called, "What's My Motivation?" on **page 37**. I will read each item, and you note your answers.

Read and explain each item aloud from this handout, which also is found at the end of this Session, keeping an eye out for those who need help.

Now that you've chosen a health domain, it's time to practice setting a goal. Please turn to **page 38** to the handout, *How to Write a Goal to Impact Health*. Let's work through these questions now.

Guide participants through this handout, keeping an eye out for those who need help. Encourage them to go back over the IMPACT infographic to see if their goal meets answer all the questions. They will not report this goal to you.

BREAK #1

10 minutes

Stating Goals to have IMPACT

45 minutes

Now it's time to help participants decide whether or not they've set an effective goal, using the IMPACT criteria.

State the following aloud **using your own words, and being sure not to add or delete any of the main points:**

Now, let's check to see if the goal you've set is one that has personal benefits to inspire you and go over IMPACT more thoroughly. If you haven't set your health goal today, you can still think about how this process will help you when you meet with one of us individually this week.

TIP: If there are people who haven't made a health goal, explore at their next individual meeting whether it would work better for them to start meeting one-one-one before the classes. Meeting alone with you first may help them to more fully participate in the group sessions.

We all know that a goal is something we want and are willing to work for. We do the work it takes to reach a goal because we want the pay-off. If you think about it, it's usually not the goal itself that inspires us. It's the expected result that motivates us to go for it.

So, we want to be sure that your new health goal has personal benefits for you. We also want your goal to focus on new things you can realistically create in your life, within a reasonable amount of time. The more your goal does these things, the more successful you'll be.

To show what we mean, let's first look at some common health goals that usually **don't** work out very well.

First of all, goals that are stated in vague or broad terms usually **don't** work out well. That's because, with this type of goal, it's not always clear when you've reached it. That means, the only way someone else knows when you've met your goal is when you tell them. Here are some examples of vaguely-worded goals:

"I want to feel better."

"I want to be physically healthier."

"I want to be more focused on my wellness."

I bet a lot of you have health goals like this, and you're not alone! But, when you set a broad goal, you may know when you've met it, but others can't be sure. Also, it's very difficult to figure out how to get started in reaching a vague goal. So, even though it's common, it's hard to reach and maintain a vague goal.

Another type of health goal that can be hard to reach is one that's stated negatively. This is a goal about something you want to stop doing, or avoid, or eliminate from your life. Examples of negatively-worded goals are:

"I want to quit smoking."

"I want to stop over-eating."

"I want to stop sitting on the couch most of the day."

We know that many Americans fail to meet their health goals. This is because focusing on what we do not want is less helpful than focusing on what we do want. It would be better to say:

"I want to cough less frequently by smoking fewer cigarettes."

Or, "I want to get off the couch and take a walk every day."

Finally, goals about what you want to do immediately and full-throttle usually don't work out well either. A very ambitious goal can be too challenging. You need to think about whether it makes sense for you, and everything it will take to achieve it. Setting an overly ambitious goal is also common. Some examples are:

"I want to start exercising 5 days a week."

"I want to lose 50 pounds."

"I want to start getting 8 or 9 hours of sleep every night."

So, how do we set a goal that is concrete, focuses on what we want to start doing, and considers the steps it will take to get there? We can use something called the IMPACT criteria.

Using the handouts starting on **page 39**, look at your new goal and see if you can answer "yes" to all 6 of the questions, while I read them to you. Don't worry if you say "no" to one or more of the questions. Your "no's" can help you figure out how to re-state your goal to better meet it. If you haven't set a goal yet, think about how you might set one using these important questions.

Read and work through all of the handouts from **pages 39-46** with the participants. Using these handouts, you will share information and guide participants to write their goal. **You likely will find it easiest to read them word-for-word. Participants will report goal from pg 41 and from pg 46. Only goal from pg 46 will be redirected to make sure it fits IMPACT.**

After working through all of these handouts, state:

I want to congratulate everyone who was able to set a health goal today. This is your first step towards a healthier lifestyle. Way to go!

If you were unable to sort out a health goal today, please do not worry or feel like you cannot continue in this group. Many, many Americans struggle to set and keep a health goal. So, you'll receive support and help in your individual meeting this week and in our group meetings to set a goal. Don't give up now!

It's important to remember that we all have starts and stops when recovering our emotional and physical health. That's common, and part of why we're in this health support group. We all want to be successful with no judgments and no blaming.

BREAK #2

10 minutes

Creating a Weekly Action Plan

40 minutes

It's time to work with the group in creating their first Weekly Action Plan. While the actions in the Weekly Action Plan may vary from week to week, they need to: 1) relate to the goal that participants' have set; and 2) consist of healthy actions that create a new and enjoyable discipline in their lifestyles.

Remember, the Weekly Action Plan needs to include something that the person wants to do, can do, and would enjoy doing to meet a goal during the next week. Also, the Weekly Action Plan must focus on what participants wish to create in their lives that is new and is moving them in a new direction in terms of their health issue. They are more likely to be successful if the goal does not emphasize changing or eliminating what they don't like or feel they're doing "wrong."

Of course, if they really want to set a goal to eliminate something from their lives (such as cigarettes or caffeine), that's their choice. But, help them state this type of goal in a positive manner that focuses on strengths and new behaviors, more than simply stopping an unhealthy habit.

Start by reviewing the following information, along with the two Weekly Action Planning handouts, in a conversational manner:

With a goal in place, it's now time to create a plan for how you will work on it during the coming week.

If you haven't set your goal yet, the Weekly Action Plan could actually help you set your goal. Sometimes, seeing things from many different angles makes it easier to set a goal.

Turn to the page in your binders called, "Your Goal" on **page 47**. This picture shows how you'll take steps each week towards your overall health goal. See how Weekly Action Plans contain the small steps you'll take towards an 8-week goal. As we work together, we'll show you how to start with small steps, and work up to more challenging Weekly Action Plans over time.

Now turn to the next page in your binders called, "Creating a Weekly Action Plan" starting on **page 48**. Looking at your new goal, think about some things you could **possibly** do each week to accomplish your goal. Think about what new habit you want to start doing on a regular basis. Please try to choose 4 to 8 new habits you could possibly try.

Turn to **page 49** now, and take a look at the four questions that you will be answering each week when planning. These are:

- 1) What will you do?
- 2) How much will you do?
- 3) How often will you do it?
- 4) When will you do it?

Let's read through several examples from the 10 Health Domains on **pages 49 and 50** to see how you might put this into practice for your own goal.

Read several examples from the handout. You don't need to read them all or in order. It helps to choose a few examples from each page.

Group Activities

Let's try putting this into practice. Turn now to the "Weekly Action Plan" handout that starts on **page 51**. This page contains a table where you will record your specific actions each week. There are multiple copies in your binders, since we'll be making new plans each week.

Looking at the first box on the sheet, please note today's date and "Week 1."

Before you start, I want to remind you to avoid focusing on what you consider to be your bad habits. Focusing on them gives your unhealthy habits more power over your life. Instead, focus on creating new, healthy habits. You want to feel good about your goal, not worried about it.

Remember, too, that your weekly plans will be more successful if you commit to enjoyable actions that you can do multiple times in a week. That's how people successfully establish new habits or a new discipline for health.

Looking at your sheet, write down today's date and your whole health goal at the top of the sheet. Then, write answers for each of the following questions (read them in turn, giving people time to write):

- 1) What will you do?
- 2) How much will you do?
- 3) How often will you do it?
- 4) When will you do it?

Now, look at the "confidence rating" in the first box. We are going to use this rating when we go around the room and share our weekly action plans. Each of us will state our plans, and then, rate our personal confidence in being able to meet our weekly goals. In other words, we'll each rate how confident we are that we'll go home and do what we've just planned. We'll do this on a scale of 1 to 10, with 1 being "no confidence" in our ability to do what we've written and 10 being "full confidence" to achieve what we've written. If we're unable to rate at 7 or above, we'll talk about what we might change in our action plans to get to a 7 or more.

I want to encourage everyone here to be honest when doing the confidence rating. We all suffer from wanting to make ourselves look good. That's human! But, if you aren't truly confident that you can accomplish the actions you've stated, you probably won't do them. So, it's better to say now that you're not sure you can really do what you've stated and change it, then to not be able to follow-through. But, if you're really sure you can rate at 7 or above, that's great too!

Does anyone have any questions about this confidence rating? It's an extremely important part of our work together as a group. The more realistic and honest we are, the better our plans will work out in the end.

GROUP SHARING TIME

Okay, now we'll go around the room and share what we've planned. If you weren't able to set a goal this week, you can say that you'll share next week instead. This will allow us to guide your individual meeting this week too. Many of us will go through this over the next 9 weeks, so there are no judgments here.

The facilitator leading this section should start by sharing his/her own Weekly Action Plan and confidence scale rating. Ask your co-facilitator to go next. Then, go around the room person-by-person, for sharing of weekly plans and confidence ratings.

If someone rates his/her confidence below 7, work with him/her to increase the rating by doing the following:

1. Consider lessening the actions, or the "how many" and "how much." Perhaps if they do less, they will feel more likely to achieve it. So, for example, instead of eating an extra serving of vegetables every day, perhaps that needs to be lessened to three times each week.
2. Consider whether you can help the person identify and remove barriers to the actions. For example, if the person wants to attend a weekly healthy eating group in the evening, but rates her confidence as "5," you could ask if there are specific barriers to her planned action. She might state she doesn't have child care, which would lead to a discussion about finding out whether the healthy eating group ever meets during the day when her children are in school, whether the center where the group is offered provides child care, or if a family member or friend would consider a babysitting swap.
3. Consider whether the person needs extra support to achieve the planned actions. For example, a person may say she wants to walk a half mile two days during the coming week, but only chooses a "4" on the confidence scale. To increase her confidence rating, she may choose to ask someone to phone her each day to remind her or ask someone to walk with her.

End this activity by reviewing the Daily Log and how to use it.

Great work everyone! Let's take a minute to stand up and stretch our bodies.

Ok, our last task for today is to review the Daily Log. You will use this form during the week to track what you're doing to meet your planned actions. Turn to the first Daily Log in your binders on **page 54**.

Review each section of the Daily Log and how to use it. Answer any questions. Make the point that people may not wish to track their actions on paper like this, but would rather use a tape recording, an electronic spreadsheet, a journal, or drawings/collages. Whatever works to track weekly effort is fine and the method to be used should be reviewed in the 3rd individual meeting (as described below in that section). If the logging method the person chooses doesn't seem to be working out over time, you should revisit this as soon as possible to establish a simple, doable way of monitoring progress, so that it can be reported to the group each week.

Does anyone have any questions before we end for today?

Review & Closing

5 minutes

Announce that the next class marks the beginning of the **ongoing peer support you will be providing to each other as you work on your chosen health goals**. Make the point that **group support is an important and proven way for people to achieve their health goals**, so you're looking forward to seeing everyone next week to hear how their plans worked out. **Review the structure change to group and the reduced time frame**.

Thank everyone for coming. Make eye contact with each person. Let them know you look forward to seeing them in their individual meetings this week.

Remind participants that someone will be contacting them with reminders for their individual meeting and for the next class. Ask if anyone's phone number or other contact information has changed.

After-Class Logistics

- Collect and save the name badges for the next class.
- Distribute the travel stipends and make sure each person signs a receipt, if needed.
- One facilitator works with the local project coordinator to complete the Fidelity Assessment.
- Submit the Attendance Log to UIC. Again, it's important to immediately share any changes in participants' contact information with UIC.

Session 3, Individual Meeting

In advance of your meeting, make sure you have the needed materials and forms, as well as a pencil/pen for you and the participant. *Also make time before your first individual meeting this week to read the section of this manual called “Tips for Facilitators: Creating Motivation for Success” (found in “Sessions 4-11, Individual Meetings” below).* These tips can guide you through common struggles that participants face when setting new goals (and weekly Action Plans).

Arrange the chairs with about 3-4 feet of distance between the two of you. Place a glass of water on the table for each of you. Also have the business cards with the study’s toll-free number handy, in case anyone has a question about being in the study that you cannot or should not answer.

Verify beforehand whether or not the person attended the Session 2 Individual Meeting and Session 3 Group meeting, using your attendance logs.

Keep an eye on the time. These sessions should last up to 45 minutes.

Welcome

Welcome the person back to his/her individual meeting. Chat informally for a few minutes to put the person at ease.

Weekly Topic Review

We had a full and exciting class this week. We clarified and set a new health goal. We made sure the goal was written to have IMPACT. We created our first Weekly Action Plan for our new health goal.

For people who attended the class:

Let’s review your worksheets together. Remember, it’s okay if you didn’t write anything. I’ll help you complete that information if you’d like. I’m also happy to review the explanations I gave during class or answer any questions you have about the material.

For people who did not attend the class:

We missed you at class this week! I want to spend our time today going through the worksheets we did in class to set a physical health goal, make a plan of action, and review how a daily log works. I’d like you to leave

our individual session today having a goal, weekly plan, and process for noting your progress.

For both groups of people, review all handouts that were completed during Session 3 (**pages 36-54 in the Participant Binder**). For people who did not finish the handouts, tailor your support to help people create a reachable goal with impact that also has an accompanying Weekly Action Plan. Also review the Daily Log to explore whether it's a format the person will be comfortable using to track progress for reporting back to the group next week. People may not wish to track their actions on paper like this, but would rather use a tape recording, an electronic spreadsheet, a journal, or drawings/collages.

TIP: If the logging method the person chooses doesn't seem to be working out over time, you should revisit this as soon as possible to establish a simple, doable way of monitoring progress, so that it can be reported to the group each week.

For people who are struggling to come up with a goal, you'll want to focus your attention to the handout, "**What's My Motivation?**" This handout provides several questions about the reasons and motivation the person has for wanting to make a change. By understanding what is motivating the desire to improve his/her health, you should be able to help the person zero in on an achievable goal.

For participants who did complete their handouts, review their goals, the action plans, and how confident they are that they'll achieve what they planned for the week. Give support as needed. Also assess whether you feel they've set a goal that seems too ambitious, even if they feel highly confident about it. For example, if someone set a goal of walking an extra 500 steps during the coming week and rates his confidence at 7, but you see that he's carrying a lot of extra weight and has a bad knee, you'll want to explore whether starting with less steps is safer and more realistic for the person.

Looking Ahead

Tell the participant that the next class marks the beginning of peer support for people to achieve their new health goals. To create motivation, state the following in a conversational manner:

Research shows that people are far more likely to reach a health goal if they receive peer support. That's why this class is so important for you. We want to help you to reach your goal of [state their goal]. I know it can be hard to make time for weekly classes, but experience shows that you will be more likely to achieve your goal if you get this kind of support.

While we hope you'll do your best to achieve your Action Plan this week, there will be no judgments made during class for unmet plans. Rather, the group will focus on helping anyone with unmet plans get more

information, address any barriers or problems, and create a new weekly plan that is more doable.

Do you have any questions or concerns to share with me?

Next, discuss whether the person would like to meet **before or after** class next week. Set a day and time for your next meeting. Remind the person that you may choose to meet at different times each week depending on what they need and prefer. Also let them know you'll be calling to remind them to attend the next class and individual meeting.

I look forward to seeing you next week. I'll be giving you a call to remind you about class.

Answer any final questions. Distribute the travel stipend and make sure the participant signs a receipt, if needed.

Submit the person's attendance at the individual meeting to UIC.

Sessions 4 through 11, Group Meetings

Peer Support and Action Planning to Monitor and Achieve Goals

Agenda

Welcome & Housekeeping	5 minutes
Relaxation Response	10 minutes
Week in Review	45 minutes
Break	10 minutes
Recovery Topic	15 minutes
Review & Closing	5 minutes

Class goals

This class has three major goals:

1. To share progress on the prior week's action plan;
2. To create a new Weekly Action Plan; and
3. To give and receive peer support.

NOTE: The group has now shifted to giving and receiving peer support, in addition to weekly calibration of health goals. Therefore, in leading the group, you will follow the same basic format for weeks 4 to 11 (with Session 12 being the graduation). The first hour is devoted to a Relaxation Response exercise, followed by monitoring, calibrating, and setting new goals. The last part of the group focuses on weekly Health & Recovery Topics, which are included later in this manual.

Class supplies

- Travel stipends
- Travel stipend receipts, if needed
- Session 4-11 Attendance Logs (for expediency, one of the co-facilitators will check off who is in attendance by each person's name, rather than passing around the sheet)
- Participant Binders
- Extra Weekly Action Plans and Daily Logs for people who need them
- Healthy snacks and beverages

Weeks 4 to 11 will follow the same format.

Welcome & Housekeeping

5 minutes

Welcome everyone back to the group. Encourage participants to take a healthy snack and beverage. **Review Class Goals from previous page.**

Relaxation Response Exercise

10 minutes

Lead the group through the Relaxation Response exercise. Use the instructions from Session 1 to guide you. Because you haven't practiced it since Session 1, limit this exercise to 1 minute this week (just like in Session 1). Add 1 minute each week, as people get more comfortable with it. You may eventually get up to 10 minutes for groups that are very comfortable with the relaxation response exercise. You may get up to only 5 minutes over time for people who are less comfortable with this kind of activity. Follow the needs of the group for how long you do the Relaxation Response, but be sure to practice it for at least 1 minute every week.

Week in Review

45 minutes

1. Co-facilitators start by sharing their *Weekly Action Plans* with the group, what they did during the week from their *Daily Logs*, and whether or not they accomplished their goals.
2. Facilitators then ask each person in turn to share his/her *Weekly Action Plan* and activities from the *Daily Log*.
 - a. If the action plan was accomplished, the group celebrates the accomplishment(s), and then, moves on to the next person.
 - b. If the action plan was not accomplished, the facilitators reassure the person, ask what the barriers were, what could be done next week to succeed, and if the person wants suggestions from anyone in group who has struggled with the same thing(s).
 - i. Over time, the facilitators should guide the group to offer this support to each other without the facilitators having to initiate it each time.
 - c. After brainstorming is complete, the facilitators ask the participant to choose what is helpful for next week's plan (which will be developed after everyone shares their progress).
3. Facilitators move to the next person and repeat steps 1 and 2.
4. After everyone has shared, the focus shifts to the coming week. Starting again with the leader, each person develops and shares his/her Action Plan for the coming week.
 - a. As part of this, each participant rates how confident s/he is that the plans can be accomplished this week. If a person's rating is 7 or above, move to the next person. If it is less than 7, the group works with that person to get the rating to a score of 7 or higher. See page 72 for how to help the person move to a higher score by planning more feasible weekly actions.

Break

10 minutes

Weekly Health & Recovery Topic

15 minutes

Review the Health & Recovery Topic for the corresponding week. These topics are found at the end of this manual. Ask for and answer any questions.

Remember that this is a whole health support group. Other issues and concerns can be dealt with after the group meeting is over.

Review & Closing

5 minutes

Announce that next week's group will include the Relaxation Response, reporting back on how everyone's Action Plans went, and making new Action Plans for the coming week. Next week, there'll also be discussion of a recovery or health topic.

Thank everyone for coming. Make eye contact with each person. Let them know you look forward to seeing them in their individual meetings this week.

Remind participants that someone will be contacting them with reminders for their individual meeting and for the next class. Ask if anyone's phone number or other contact information has changed.

After-Class Logistics

- Distribute the travel stipends and make sure each person signs a receipt, if needed.
- One facilitator works with the local project coordinator to complete the Fidelity Assessment.
- Submit the Attendance Log to UIC. Again, it's important to immediately share any changes in participants' contact information with UIC.

Group Session 4, Health & Recovery Topic

The Power of Peer Support

The Session 4 Health & Recovery Topic is the power of peer support. The purpose of the discussion is to help participants see the power of peer support by sharing times when they were helped by or when they helped someone else.

State the following in a conversational manner (using your own words as is comfortable):

Now that we've reviewed and set our health goals for the week, let's turn to discussion of the power of peer support. I'll start by reading a statement from Janet Olszewski, a mental health official in Michigan. She writes beautifully about the power of peer support. If you want to follow along, this handout is in your binders. It's called, **News Briefs**, on **page 63**.

After reading the handout, ask the following questions.

What words or phrases caught your attention?

What did she say that you really liked?

Share a time when you were aware of a special connection with someone because of a shared experience.

Share a time when you've been able to give or receive support from a person because of a shared experience.

What are some things we need to do to support one another in reaching our goals in this group?

Stick to the allotted time of **15 minutes** for this group sharing.

After people have shared, close the discussion by thanking everyone for their participation.

Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 5, Health & Recovery Topic

Communicating Effectively with Health Providers

The Session 5 Health & Recovery Topic is designed to help participants think about effective communication with doctors or other health providers.

State the following in a conversational manner (using your own words as is comfortable):

To the degree possible, health decisions should be shared with the important people in your life. This is especially true with doctors and nurses. Sure, they are the experts on medications, tests, and treatments. But, of equal importance, we are the experts on ourselves, our values, our skills, and what we are able and not able to manage for health.

By discussing health decisions with doctors and nurses, we can try out new treatments and lifestyle changes until we find what works best for us.

However, communicating with doctors and nurses can be hard. Many people feel they should be quiet out of respect during health visits. Others feel that medical professionals have the answers, and patients should not challenge them or ask too many questions. Still others feel that health providers are too busy or too unwilling to answer questions and share decisions. And still others may be embarrassed either about their medical conditions or their questions, and just want to get out of the office as soon as possible.

All of these feelings are common and understandable! But, we also want you to know that it's okay to ask health providers questions. To get the most out of your appointments, it helps to prepare in advance. The more you prepare and learn, the better the strategies you will develop to manage your health.

With all this in mind, let's review the tool, ***Getting Ready to See Your Doctor***, found on **page 64** of your binders. We'll review this information together during our individual meeting this week, too. I can also ask the agency's nurse to review this information with anyone who would find that helpful.

After you have reviewed the tool and answered questions, close the discussion by thanking everyone for their participation. Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

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Group Session 6, Health & Recovery Topic

Taking Care of Yourself

The Session 6 Health & Recovery Topic is taking care of self. The purpose of today's discussion is to help participants think through ways they can and do take care of themselves. This will serve as an affirmation of their healthy strategies, and give them new ideas for engaging in self-care.

State the following in a conversational manner (using your own words as is comfortable):

Now let's turn our discussion to how we can best take care of ourselves. You will find the handout, *Taking Care of Oneself – Fourteen Ways*, in your binders on **page 65**.

Read through the handout, and then, ask the following questions.

Which one caught your attention?

Did any of them surprise you?

Who wants to share one way you care for yourself and how it helps? (Try to get several people to share.)

What works against you taking care of yourself? (What makes it difficult?)

What have you learned recently about taking care of yourself?

What do we, as a group, need to do to take care of one another?

Stick to the allotted time of **15 minutes** for this group sharing.

After people have shared, close the discussion by thanking everyone for their participation. Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 7, Health & Recovery Topic

Identifying and Managing High Blood Pressure

The Session 7 Health & Recovery Topic is blood pressure. The purpose of today's discussion is to introduce participants to how blood pressure works, high blood pressure, and some basics on eating to control blood pressure.

NOTE: You do not have time to give a comprehensive lesson on managing blood pressure by reading through the handouts for this session word-for-word. You'll simply introduce some of the key concepts. Participants can read the handouts later on their own. They also can choose to discuss them with their health providers or talk them over with you in your individual meetings, if they wish.

State the following in a conversational manner (using your own words as is comfortable):

Today we'll be talking about high blood pressure. We'll also discuss foods that can prevent or control high blood pressure. High blood pressure is very common, especially among people with mental health issues and stressors.

Turn to the handout called, *Blood Pressure*, on **page 66** in your binders. We'll review some of this information now, and you can read the handout later on your own.

Each time the heart beats, blood is carried throughout the body to deliver oxygen to our organs. Blood pressure is the force of the blood as it pushes against the walls of our blood vessels. Your blood pressure is read as two numbers, like "116 over 80." The top number is your **systolic pressure**, which measures the force of your blood on your vessels when your heart is pumping. The bottom number is your **diastolic pressure**, which measures the force of your blood when your heart is resting between beats.

Blood pressure goes up and down naturally throughout the day. It is lowest when you sleep and it rises when you get up. It also can go up when you get nervous, stressed, active, or excited. It also may rise when you have salty foods, caffeine, or nicotine. Normal blood pressure is 120 over 80. At this level, your blood is flowing normally and is not causing undue stress on your heart.

But, when it goes up and stays high, it's called high blood pressure. When this happens, your heart has to pump harder than it should to move blood around your body. The medical term for high blood pressure is hypertension. Hypertension does not mean being hyper or excitable.

In fact, you can have hypertension and not even know it. If your blood pressure is 140 over 90 or higher, then you have hypertension.

If you haven't had your blood pressure taken recently, it's important to get it checked. You can do this by visiting your doctor, seeing a nurse, or going to a health fair. You also can test your own pressure at many drug stores, but it's still best to get it tested by a professional at least once a year.

If you find out or already know that you have high blood pressure, it's important to talk with your doctor about whether you need medicine to treat it. High blood pressure also can be well-managed with weight loss, physical activity, and low-salt foods. Even if you don't have high blood pressure, eating low-salt foods can help prevent hypertension, manage your weight, and boost your heart health.

Let's take a look at the handout called, *Managing High Blood Pressure*, on **page 67** of your binders. You'll see that the foods listed in green are lower in salt. These can help you keep your pressure down. Some green light foods are fresh fish or veggies, no-salt spices, and low-sodium cereal. The foods listed in red are ones that worsen high blood pressure. Some red light foods are soda, frozen dinners, ham, and soy sauce.

Now looking at the handout, *Tips for Cutting Salt*, on **page 68**, we see practical suggestions for reducing your salt. Some of them are: 1) replace salty seasonings with healthier options like lemon pepper or garlic; 2) check food labels for sodium levels to help you choose low-salt foods; and 3) eat fresh foods and those high in potassium.

Does anyone have any questions or comments about high blood pressure or eating low-salt foods?

We'll review this information together during our individual meeting this week, too. I can also ask the agency's nurse to review this information with anyone who would find that helpful.

Does anyone have a health goal that might be improved or affected by eating low-salt foods and blood pressure management?

Stick to the allotted time of **15 minutes** for this group sharing.

Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 8, Health & Recovery Topic

Identifying and Managing Diabetes

The Session 8 Health & Recovery Topic is diabetes. The purpose of today's discussion is to help participants understand the meaning and risks of high blood sugar, and some basics on eating to control blood sugar.

NOTE: Again, you do not have time to give a comprehensive lesson on managing blood sugar by reading through the handouts for this session word-for-word. You'll simply introduce some of the key concepts. Participants can read the handouts later on their own. They also can choose to discuss them with their health providers or talk them over with you in your individual meetings, if they wish.

State the following in a conversational manner (using your own words as is comfortable):

Diabetes is a medical condition that affects many people with mental health issues and stressors. So, it's important to understand how blood sugar works, what it means to have diabetes, and foods that can help manage blood sugar whether or not you have diabetes.

When you eat, your food is broken down into a sugar called glucose. Glucose is an important source of energy for our bodies. To make this energy, your body needs to absorb the glucose into your cells using a chemical known as insulin. When a person has diabetes, the body either doesn't make enough insulin or can't use it properly. This causes sugar to build up in the blood.

When blood sugar rises and stays too high, people may have symptoms like frequent urination, increased thirst, fatigue, or blurred vision. If blood sugar stays high over time, it harms the body. This puts people at risk for heart disease, blindness, loss of limbs, and kidney failure.

It should be noted that when blood sugar drops too low, people may feel sweaty, dizzy, constantly hungry, and shaky. So, it's important to recognize the signs for both high and low blood sugar, and what steps to take to avoid serious consequences from either one.

Let's look at the handout called, **Understanding A1c**, on **page 69** of your binders. You'll see that the A1c test is used to measure a person's blood sugar over the past 2 to 3 months. The normal range is between 4% and 6%. 6.5% or higher means that a person has poor blood sugar regulation. The goal for people who already have diabetes is a test result of 7% or less.

The higher the A1c level, the greater the risk of developing complications from diabetes.

If you haven't had your blood sugar tested recently, it's very important to get it checked. You can do this by visiting your doctor, seeing a nurse, or going to a health fair.

If you find out, or already know, that you have a blood sugar disorder, it's important to talk with your doctor about whether you need medicine to treat it. Diabetes also can be well-managed with weight loss, physical activity, and reducing high carb and high sugar foods.

Let's look at the handout, *Diabetes Super Foods*, on **page 70** of your binders. Experts say that these 10 foods are among the healthiest for people with diabetes because they're high in fiber and low in sugar. Some of these foods are collard greens, oranges, sweet potatoes, whole grains, and baked fish. Even if you don't have diabetes, these top-10 are great foods to add to your diet.

Reviewing the handout called, *What are Carbohydrates?* on **page 71**, you'll see that carbohydrates are an important source of energy for our bodies. Good carbs are part of a healthy diet because they give you good energy, without making your blood sugar spike. Bad carbs, however, make your blood sugar go up very quickly, and then, cause your energy to crash.

Bad carbs come from foods that many of us like to eat, but aren't healthy for us. Probably most Americans would benefit from replacing unhealthy options like soda, energy drinks, alcohol, candy, donuts, fast foods, and processed foods with healthier options. But, the need to eat healthier foods is especially important for people with diabetes.

Does anyone have questions or comments about diabetes, or how to eat to manage carbs and blood sugar? We'll review this information together during our individual meeting this week, too. I can also ask the agency's nurse to review this information with anyone who would find that helpful.

Does anyone have a health goal that might be improved or affected by carbs and blood sugar management?

Stay with the allotted **15 minutes** for this recovery topic. Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 9, Health & Recovery Topic

Identifying and Managing High Cholesterol

The Session 9 Health & Recovery Topic is high cholesterol. The purpose of today's discussion is to help participants understand the meaning and risks of high cholesterol, and some basics on eating to control cholesterol.

NOTE: Again, you do not have time to give a comprehensive lesson on managing cholesterol by reading through the handouts for this session word-for-word. You'll simply introduce some of the key concepts. Participants can read the handouts later on their own. They also can choose to discuss them with their health providers or talk them over with you in your individual meetings, if they wish.

State the following in a conversational manner (using your own words as is comfortable):

Cholesterol is a kind of fat in your blood. Among other things, it helps produce hormones and acids to digest fat in your body. We all need some cholesterol for our bodies to work well.

There are two kinds of proteins that carry cholesterol in your blood: LDL and HDL. LDL is known as "bad" cholesterol because it can build up in your arteries. HDL is "good" cholesterol because it helps flush cholesterol out of your body.

When cholesterol gets too high, it can block your arteries. This means that your heart has to work harder to move blood around your body. Over time, this can cause too much stress on the heart, and can lead to heart disease and heart attack.

On the handout called, *Cholesterol Facts*, on **page 72** of your binders, you'll find that doctors like total cholesterol to be lower than 200. If you are at risk for heart disease, doctors want LDL (or bad cholesterol) at 100 or lower, and HDL (or good cholesterol) at 60 or higher.

If you haven't had your cholesterol tested recently, it's important to get it checked. You can do this by visiting your doctor, seeing a nurse, or going to a health fair.

If you find out, or already know, that you have high cholesterol, it's important to talk with your doctor about whether you need medicine to treat it. High cholesterol also can be managed with weight loss, physical activity, and reducing high fat foods.

Even if you don't have high cholesterol, eating good fats and avoiding harmful ones can boost your energy and heart health, while helping you to manage your weight.

Let's take a look at the handout called, *Healthy vs. Unhealthy Fats*, on **page 73** of your binders. You'll see that the foods listed in green have good fats that can boost your energy with less harm to your body. Some of these green-light foods are salmon, catfish, walnuts, and pumpkin seeds. In particular, foods with Omega-3s are very good for the body and can even boost your mood.

The foods listed in red have fats that can be harmful to your heart and body. Some red-light fats are high-fat cuts of beef, packaged snack foods, microwave popcorn, and stick margarine.

The handout, *Tips for Cutting Fats*, on **page 74** gives practical suggestions for reducing harmful fats. For example, you can try replacing store-bought salad dressing with olive oil or balsamic vinegar. You can try replacing high-fat prepared or fast foods with fruits, vegetables, or beans.

Does anyone have any questions or comments about cholesterol and healthy vs. unhealthy fats?

We'll review this information together during our individual meeting this week, too. I can also ask the agency's nurse to review this information with anyone who would find that helpful.

Does anyone have a health goal that might be improved or affected by replacing unhealthy fats with healthy ones in their meals?

Stay with the allotted **15 minutes** for this recovery topic.

Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 10, Health & Recovery Topic

Taking Stock

The Session 10 Health & Recovery Topic is a reflection on what the group has learned thus far. There is no handout for this topic. The purpose of the discussion is to help participants think about and share what they have learned about themselves and from each other during their time in the group to date.

State the following in a conversational manner (using your own words as is comfortable):

Now we're going to spend some time reflecting on what we've learned from our Whole Health groups and meetings so far. It can be anything -- accomplishing our weekly action plans, giving or receiving peer support, learning about health, recovery, or anything else we feel we've learned.

To start, let's all take turns completing this sentence... "In order to create the life I want, I have to..." and fill in the blank. I will start.

Complete the sentence, stating something you must do to create the life you want, based on what you've learned from participating in the Whole Health Program.

Who will go next?

Keep this going until everyone who wants to participate has had a chance to share.

Let's examine what we've learned even a little deeper. Let's now state why what we've learned is important to us. I'll go first. I've learned that I need to [state what you've learned]. This is important to me because [state why].

Who will go next, sharing why what you've learned is important to your health, your recovery, or your life goals.

Stay with the allotted **15 minutes** for this group sharing.

After people have shared, close the discussion by thanking everyone for their participation. Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Group Session 11, Health & Recovery Topic

Signs of Mental Health Recovery

The Session 11 Recovery Topic pertains to the signs of recovery. The purpose of this discussion is to review how being in this group, as well as giving and receiving peer support, has had an impact on mental health recovery. Remember, the people who joined this study have had minimal access to peer support and recovery services, so you want to help them articulate the benefits they may have experienced through peer support whole health.

We want to focus our reflections this week on how being in a whole health group has affected our mental health. We will do this by using a Recovery Dialogue exercise entitled, "Signs of Recovery." In order to begin this activity, I want everyone to share a word or phrase that comes to mind when you hear the word "recovery."

Encourage group sharing, but keep an eye on the time, since you only have 15 minutes for this entire activity. Remember, there are no right or wrong answers, since these are people's opinions. Now, direct participants to the "Signs of Recovery" handout located in their binders.

Please turn to the handout in your binders called, *Signs of Recovery*, on **page 75**. These statements were generated from a group of people living with mental health issues about how they personally describe the meaning of "recovery." Because these statements are so important, we're going to read them aloud as a group. I will read the opening statement, and you will read each of the signs of recovery, in turn.

Read through the statements as a group.

This is a wonderful list of statements from other people. What statements would you add to this list, and why?

When each person shares a statement, be sure to focus on why it is an important sign to the person. You could ask:

How does it show your recovery? How did you learn it? How does it affect your life now?

Help them to actively explore how or why the statement lets them (and others) know they are doing well or recovering. You want them to think about what their experiences have taught them about themselves and their recovery.

After people have shared, close the discussion by thanking everyone for their participation. Now, follow the Review & Closing and After-Class Logistics format found under Group Session #4.

Session 4 to 11, Individual Meetings

The Individual Meetings for Sessions 4 to 11 also follow the same format. Please refer to Facilitator Tips found under the “Tips” tab in your manual to help create motivation or help people achieve/maintain their success. You’ll use these tips at different points over the next 8 weeks, depending on the type of extra support the person needs and when.

In advance of your meeting, make sure you have the needed materials and forms, as well as a pencil/pen for you and the participant.

Arrange the chairs with about 3-4 feet of distance between the two of you. Place a glass of water on the table for each of you. Also have the business cards with the study’s toll-free number handy, in case anyone has a question about being in the study that you cannot or should not answer.

Verify beforehand whether or not the person attended his/her last individual meeting and group meeting, using your attendance logs.

Keep an eye on the time. These sessions should last 10-45 minutes or as needed.

Welcome

Welcome the person back to his/her individual meeting. Chat informally for a few minutes to put the person at ease.

AT THE BEGINNING OF THIS MEETING FOR WEEK 4 ONLY :

Start by letting the person know that you are going to review the format to be used for the group and individual meetings over next 8 weeks. State in your own words:

I want to start by reviewing the format for our group and individual meetings for the next 8 weeks. This will help you understand what to expect each week. For our group meetings, each session will start with the Relaxation Response. Then, we’ll review the past week’s action plans and create a new action plan for each person. Everyone will rate their confidence in achieving their new action plan. Each week there also will be discussion of a special health or recovery topic. Group sessions will last for about 1 hour during weeks 4 to 11. This will be the format of the group until our graduation session.

For our individual meetings, during each session we’ll review your past and new weekly action plans, along with your confidence rating. We’ll discuss your progress and barriers to following your action plan. Then, we’ll do a health check-in to see how you’re feeling, and whether you have any upcoming medical or dental appointments. Next, we’ll review the health or recovery topic from the group. Individual meetings will last for about 30 minutes during these weeks. This will be the format of the individual meetings until our graduation session.

Review of Weekly Action Planning

If the person attended the last group meeting, briefly review his or her Weekly Action Plan for the coming week to discuss any barriers or progress. Suggest resources or supports as needed, and celebrate successful steps towards the 8-week goal.

If the person missed a group meeting, you'll want to go through the process from class of reviewing their Weekly Action Plan and Daily Log for progress. Acknowledge met goals! For any that were not met, discuss possible barriers and what might be done to resolve them. Then, move to creating the Weekly Action Plan for the coming week.

Health Check-In

Each week during your individual meeting, take 3-5 minutes to ask participants **how they are feeling, and if they have any medical or dental appointments coming up**. Emphasize that you don't need to know for what the appointment has been scheduled (unless they want to talk about it with you). Instead, you're reminding them that you will give support around preparing for medical appointments and for any questions they may have for the doctor, nurse practitioner, dentist, podiatrist, or ophthalmologist.

Even if they don't have any upcoming appointments, take the opportunity to remind them that most people don't enjoy going to the doctor or dentist, but that these appointments are very important for achieving and maintaining good health. You can also remind participants that many medical conditions affect people's mood and energy, so identifying and working on medical issues can give them an emotional boost.

The weekly health check-in serves several purposes:

1. It emphasizes the importance of keeping and preparing for medical and dental appointments, especially if the person has a long-term medical condition like diabetes or cardiovascular disease.
2. It cues them to the fact that you are available to discuss how to best prepare for medical appointments and help them problem-solve any barriers they may experience.
3. It indirectly serves as a reminder of medical appointments, in the event that they had forgotten their upcoming appointments before you asked about it.
4. It opens the dialogue over time for them to express and work through medical anxiety or worries.

Review of Health & Recovery Topic

Next, review the Health & Recovery Topic for the corresponding week with everyone. If the person missed class, you'll want to review the topical content more fully, and ask some of the questions you asked of the group. If the person was in class, you'll want to ask if they had any thoughts about the topic, and explore more fully what it means to them and how they are

applying it in their own lives. This allows people who aren't as comfortable sharing in class the chance for personal reflection and personalized peer support from you on each of these important health and recovery topics.

Looking Ahead

Thank the person for attending. Let them know that you look forward to seeing them at this week's class, and that you'll be calling with a reminder. Let them know that the next group will focus on sharing Action Plans, making new Action Plans, and talking about a recovery or health topic. Let them know the next health or recovery topic.

Discuss whether the person would like to meet **before or after** class next week. Set a day and time for your next meeting.

Answer any final questions. Distribute the travel stipend and make sure the participant signs a receipt, if needed.

Submit the person's attendance at the individual meeting to UIC.

Session 12, Group Meeting

Peer Support Whole Health Graduation!

Agenda

Welcome, Relaxation Response	10 minutes
Complete Satisfaction Survey	20 minutes
Graduation Celebration	60 minutes

Class goals

There are 2 goals for this session.

1. Participants will assess their satisfaction with the group and individual meetings.
2. They will consider the progress they've made and celebrate their achievements.

Class supplies

- Travel stipends
- Travel stipend receipts, if needed
- Session 12 Attendance Logs (for expediency, one of the co-facilitators will check off who is in attendance by each person's name, rather than passing around the sheet)
- A copy of the Whole Health Program Satisfaction Survey for each participant (to be provided by the project)
- A Certificate of Graduation or Attendance for each participant (to be provided by the project after session 6 or 7)
- Cake, cupcakes, or brownies for the graduation (in addition to healthier options)

Welcome & Housekeeping

Welcome everyone back to the group. Encourage participants to take a snack and beverage.

Relaxation Response Exercise

10 minutes

Lead the group through a Relaxation Response Exercise. Use the instructions from Session 1 to guide you.

Complete Satisfaction Survey

20 minutes

Work with the group to complete the Satisfaction Survey by reading the items aloud. This process will help participants to discuss their progress, and likes and dislikes in the class and individual meetings.

Graduation Celebration

60 minutes

Give each person a completed copy of the Certificate of Graduation or Attendance. Provide time for each person to say a few words when receiving his/her certificate. Enjoy the refreshments.

Celebrate your own achievement as facilitators along with your participants! Congratulations!

After-Class Logistics

- Distribute the travel stipends and make sure each person signs a receipt, if needed.
- Submit the final group attendance log to UIC.

Tips for Facilitators: Creating Motivation for Success

During the 8 weeks of ongoing peer support, you will find participants who are struggling to set and meet their Weekly Action Plans, or their overall physical health goal. This happens for varied and complex reasons. Below we share some tips for helping people who are struggling. These tips are based on self-determination theory, stages of change, and motivational interviewing. You will choose which strategy to use in your individual meetings, based on the kind of issue the person is having in a given week and what you think would be most comfortable for that person.

Remember, we all struggle sometimes. This isn't necessarily a sign that we need to change course or that we lack motivation. Weekly Action Plans can get derailed by unexpected life events or emergencies, a health issue (say someone gets a cold or flu), a sick child or parent, a need to go out of town, and so on. Before you use strategies to create motivation, always explore first what might be happening in the person's life to interfere with progress. Sometimes, they won't "connect the dots" that events during the week got in the way of their progress until they talk it through with you. This process will allow them to think about whether the coming week is likely to hold the same issues, and what that means for their planning process.

But, please avoid proceeding first and foremost as though lack of progress in a given week is sign of a problem. It might be or it might not be. It's more likely to be a problem, however, if it continues week after week.

If you are ever unsure how to figure out if someone actually is struggling, or how best to support a participant, be sure to talk to the project's Local Project Coordinator (and UIC study staff, if needed) as soon as possible. It always helps to hear additional perspectives and to ask for new ideas.

As always, the best first step is to ask the participant what she or he thinks, and to actively listen to the response. Even if you don't agree, helping people feel heard creates trust and engagement.

Tip #1: Engaged but consistently unable to meet Weekly Action Plans

After several weeks in a row, you find a person is not meeting her Weekly Action Plans. She is interested and engaged in the Whole Health Program, but there seems to be something getting in her way each week.

Try this:

Acknowledge first her strengths and progress (such as attending groups and individual meetings). Then, in a supportive manner discuss that she has not met her Weekly Action Plan for a number of weeks now. Ask her what she thinks may be getting in the way. See if you feel you're hearing the same things she's been saying for awhile now. See if you're hearing signs that it might be time to set a goal in a different area. She might not say this directly, but you might deduce it, given the unresolvable or persistent barriers to making progress on the goal she's chosen.

If she says things to suggest that her goal or weekly plans may not be the best for her right now, acknowledge that it's not uncommon to learn this. Sometimes we choose a goal that's not the best place to start. Other times, our life circumstances change, and that changes what we can do to meet a goal. So, as one example, if she set a health goal to work on increasing her physical activity, but just can't meet it week after week, it might be that she's more ready for a goal in stress management for better physical functioning and health.

If she seems reluctant or uncertain about changing domains, suggest that you'd like to look over her "Review and Planning for My Health Goal" worksheet together. In reading it again, she may see that there is another area that is equally important to her and more doable at this time. This will also give you the chance to emphasize that there are many areas in which to create a healthy lifestyle. Choosing another one is not a failure, but an expression of how complex health and life can be.

Proceed carefully because she may need time to digest this discussion before agreeing that you may be right about her choosing a new health area to work on. If she wants to stick with the same area, then your work together will be to get smaller action steps each week that she would be more likely to achieve.

Tip #2: The goal or plans may be too ambitious or unadvisable, but the person sees it differently from you.

Sometimes you'll find a participant wishes to set an 8-week goal that would be ill-advised, given the individual's current physical condition and situation (such as being able to jog a mile in 8 weeks' time even though he has a bad hip). Other times, you'll find someone wants to set a goal that is too ambitious (even if it's not ill-advised), given where he's starting from and the number of tasks involved, which will lead him to unsuccessful Weekly Action Plans over time.

When you try to talk about concerning or overly-ambitious goals/plans, he's not seeing it in the same way and thinks he's set a healthy or realistic goal, or is making realistic weekly plans.

Try this:

Participant safety is paramount. If you are concerned that the person's goal could be harmful to his health, suggest that he talk it over with his doctor or healthcare provider before starting anything new. This is especially important for individuals who have had heart or breathing problems, or people who have done very little exercise in the past but choose a strenuous health goal. Gently point out that it's common for people to set ambitious health goals. But, as group facilitator, you need to encourage people to set safe goals, and you're concerned that his goal may be harmful to his physical health.

If he is setting his goal for the first time and you feel it is overly-ambitious, let him know that it's better to set a less ambitious goal to be sure that he can reach it in a relatively short period of time (just 8 weeks). Explain that people usually find making life or health changes harder than they first thought. Clarify that if he makes progress quickly, and he meets his initial goal, he can always set a new goal that is more challenging. The IMPACT role plays from Session 3 can be useful here as well.

If the participant has been unable to meet his Action Plans for several weeks, acknowledge that you have noticed that he has struggled to meet his Action Plans for a few weeks now, and you'd like to explore a little more fully what might be going on. Keep this discussion in the context of wanting him to have the healthiest life possible (not to feel badly about incomplete action plans). See what he says are the issues, and if there's any indication that he really thinks it's too ambitious even if he doesn't use those words. For example, he might say that he did add extra steps to his daily routine, but didn't get to the 100 extra he's convinced he'll take daily. Or, he might say that he got 1 extra hour of sleep once this week, but knows he could be getting 3 extra every night as planned. These statements can be something to build on in getting him to adjust his plans to be more readily attainable.

If he'd like to stick with his more ambitious goal or plans after you've explored together what got in the way, then ask him if he'd consider making (or state aloud) a list of the pros and cons in meeting his current Weekly Action Plan. You can add some of your thoughts or guide it as a brainstorming session, if that feels more comfortable. Exploring the pros and cons can help the person see whether the goal or plans are actually too ambitious because the obstacles or barriers are not readily resolvable right away.

Explain that many of our behaviors in life actually meet certain needs we have. Even unhealthy behaviors may help us in some ways. For example, some people may find it hard to stop smoking because they socialize during their cigarette breaks. It may feel like quitting smoking means they have to give up their friendships (and, indeed, it may be hard to maintain some friendships if they revolve only around smoking). This kind of loss can make a goal of quitting smoking just too ambitious for them. Losing friends and support could make it impossible for someone to fully commit to quitting, even though they really want to stop the cigarettes.

If the "pro/con" process shows that there are underlying reasons for why the goal is too ambitious, acknowledge that perhaps this is not a change he's really ready to make right now. Reassure him that this is okay and common. Part of self-determination is trying new things and seeing what works and doesn't. Some things will work out and others won't, even if we really want them to.

If he's ready to agree to changing goals, review his "Review and Planning for My Health Goal" worksheet to choose another area that's more feasible right now. Proceed to creating a new Weekly Action Plan for that goal.

If he isn't ready to change the goal or plans, in spite of your discussion, see if he'll agree to work on reducing the number of "cons" on his list. For instance, in the above example, people who want to quit smoking could work on identifying new ways to socialize with friends, so they can untangle smoking from having friends over time, making the goal less ambitious.

Tip #3: Confident that a goal can be reached when it probably can't be, at least as stated

You may find that a person over-rates her confidence each week, given her personal situation. She may continue to be highly confident that she can meet the goal or plans when she really can't and doesn't.

Try this:

Ask her to talk about each of the steps she needs to take in order to fulfill her current Weekly Action Plan. Break the steps down into each activity or task she will need to do in order to succeed this week. Be very specific, but try not to be overwhelming. You are trying to help her see that the Plan actually involves a lot more work than she thought, but without shutting her down entirely. Next, talk over with her whether she has the time, energy, and desire to accomplish each of these steps in the coming 7 days.

If she realizes that she doesn't, you can suggest that she turn one of these steps into an actual goal, if that seems more attainable. Reassure her that it is common to be highly confident about a goal or plan until we start to think through everything involved with it. That's okay! It's part of the person-centered process to work through this on the road to health and recovery.

Tip #4: Unable to set a goal, even with suggestions and support

Although people stated that they had a health goal in order to join this study, you might find that a person really isn't able to go through the person-centered planning process to set a reachable and enjoyable goal.

Try this:

Explain to the participant that setting goals can be kind of scary. It can bring up feelings of anxiety or memories of past disappointments. Ask him open-ended questions to help get a better sense of why he's having difficulty setting a goal. Some questions include: Have you had trouble reaching health goals in the past? Is there something going on in your life right now that you worry will get in the way? Are you unsure you even want to change anything right now about your health and life?

If the participant is concerned about failing, ask him to talk about why. What happened in the past when he failed? Acknowledge that change is hard and can be scary. It takes not only courage to do things differently, but supportive people who believe in you. You and everyone in the Whole Health Program believe that he can take a step towards health. He doesn't have to become "Mr. Health" overnight. He will just be taking manageable and enjoyable steps to increase his well-being.

Ask him to describe times when he has been successful in reaching a goal of any kind, not just health. Help him identify the strengths he used to make changes in his life to reach that goal. Talk with him to see if any of these strengths can be applied to his current goal, too.

We need to acknowledge that there are times when a person isn't sure he's ready to make changes in his life for whatever the reason. If it seems like this is what's happening, ask the person to brainstorm with you the worst things that might happen if he doesn't make any health changes right now. Then, ask him to talk about the best things that might happen if he keeps his life just like it is right now. See if this conversation helps the participant identify anything he is

interested in working on. It will help to review his “Review and Planning My Health Goal” and “Stating My Whole Health Goal” worksheets to see if any of the domains are more relevant to the participant after this discussion. Let him know that, if a goal seems too hard to attain, it can be broken down into a series of smaller goals.

This is a discussion that might be had over the course of several weeks, as you help move a person towards taking a risk with dignity.

Tip #5: Finds discussions of unmet Weekly Action Plans upsetting and triggering

In working with people who have been through a lot in their lives, sometimes you’ll find they get upset or defensive when you try to talk about needed changes to their plans.

Try this:

First, recognize inside yourself that the person may feel like you are being judgmental or critical, even if you aren’t or don’t mean to be. People who receive public services and benefits may be used to hearing a lot about their limitations and weaknesses. As such, they might understandably hear your suggestions in that context.

To the participant, start by acknowledging that sometimes you (or others you support) have heard suggestions or comments about progress as criticisms or judgments. This is not unusual, and something all humans struggle with. But, you are here to support the person, not judge. In the Whole Health Program, we simply want to help people set and work on goals they can achieve to build confidence, health, and recovery.

Now, explain that often the process of meeting a goal involves making small changes. Sometimes, people try to change too much all at once. Then, because it is hard to make big changes, they worry that they’ve failed when they can’t do it. This is why we choose smaller, more manageable goals in the Whole Health Program. By doing this, we all can experience success in taking manageable steps towards health.

After this reassurance, ask the person how he thinks it’s going. If he isn’t meeting his weekly plans consistently, ask what he believes is going on. Right now, you want to give the person voice, to avoid triggering or making him defensive. Even if you don’t fully agree or understand, let him share his perspectives. Continue to ask supportive questions to see if you can get him to say what the barriers are really about for him (rather than you saying what you think they are). Focus discussion on why he wants the goal he’s set and why it’s important to him. This also may help lead the discussion to a brainstorming of what is getting in the way each week, and what might be done about it.

Right now, you’re not necessarily focused on getting the person to change goals or weekly plans. You are working on building trust.